

# COMPASS

The Newsletter for the Association of Private Practice Therapists

## March 2 Mini-Series Features Project Harmony

Join us on March 2 for an APPT Mini-Series, "One Child, One Place, One Time," featuring April Anderson, LCSW, Interview Specialist with Project Harmony.

Project Harmony is a nonprofit agency whose mission is to protect children by providing community-based, comprehensive, integrated and coordinated child abuse assessments and investigations in a centralized location.

The presentation will include information about Project Harmony and the services they offer. There will also be discussion on what to do and who to contact when a child discloses abuse during a therapy session.

Anderson is a graduate of the University of Nebraska at Omaha, where she received her B.S. and M.S. degrees in Social Work. She is trained in conducting forensic interviews of children.

Reservations for the event are recommended. The cost for APPT members is \$13.50 (non-members: \$16) and includes salad, breadsticks, entrée, beverage, tax and gratuity. The program begins at noon and ends at 12:45 p.m.

For reservations, call Bridget at (402) 393-4600 by noon on Monday, March 1 or use the form on page 7.

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## February 27 Training Will Focus on "What To Do When You're Subpoenaed"

Subpoenaed. The word is enough to strike fear into the hearts of any private practice mental health therapist. What should you do? What *shouldn't* you do? Is HIPAA a concern? Can I be sued if I respond the wrong way?

Relax. Help is on the way. Kristine Gates, J.D., an attorney with the law firm of Erickson & Sederstrom, will be the speaker at the APPT Spring Training Workshop on Friday, Feb. 27.

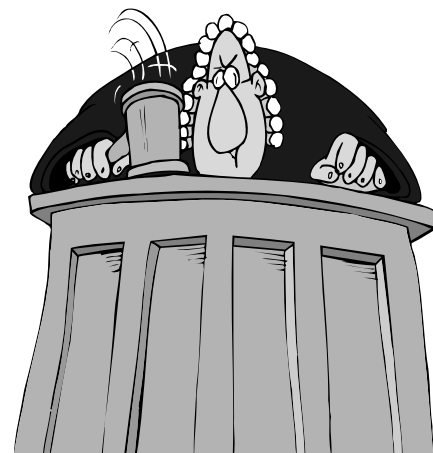
The focus of the program will be on three areas:

1. *State Law, HIPAA, Subpoenas and Court Orders: How to Respond to Subpoenas and Court Orders and Comply with State and Federal Law*
2. *State Law, HIPAA and Law Enforcement: How and When to Comply with Law Enforcement Requests*
3. *How To Deal With Potential Disciplinary Actions By the State*

No matter what type of clinical practice you have, the odds are almost certain that one of your clients will be involved in litigation at some point. Frequently, during the course of discovery in a legal proceeding, a client's mental health becomes an issue. Most often the attorneys involved in the case will serve a subpoena on a therapist to produce records, give a deposition or come to trial and testify. Should you respond to the subpoena and turn over your records or give a deposition?

The training will be held at the Country Inn & Suites Hotel off 119th and Miami Street in Omaha. (The hotel is located on the east side of the street, off 120th between Blondo and Maple Streets—closer to Blondo. Turn in at the Culver's Frozen Custard Restaurant.)

Ms. Gates specializes in health law, employment law, and corporate law. She provides legal representation to a variety of health care providers in Nebraska and Iowa including Nebraska's largest health system and has advised several APPT members on how to handle subpoenas.



Ms. Gates has given presentations to physicians, hospitals, medical clinics, mental health providers, medical and nursing students, nursing homes and hospital management regarding HIPAA, advance directives, informed consent, professional liability and fraud and abuse. Ms. Gates received her B.S. degree in Criminal Justice and Business Administration from the University of South Dakota and her J.D. degree from Creighton University.

**Reservations are recommended.** (The workshop is limited to the first 40 registrants, and walk-ins are available on a space-available basis.)

The cost is \$25 for APPT members and \$30 for non-members (pre-paid) or \$30 for members and \$35 for non-members (at the door). The student rate is \$15.

Call Bridget at (402) 393-4600 for more information or to pre-register.



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# From the President's Desk

John Atherton – President of APPT

With the election of new APPT officers at the April 2 Spring Conference, my term in office will officially be over. Now is as good of a time as any to take a look back at the accomplishments of APPT over the past year.

When I took office in April 2003, I outlined three goals:

- The passage of a revised Mental Health Parity Bill in the Nebraska Unicameral;
- An increase in APPT members (to 130); and
- Successful revision of the policy requiring mental health therapists to be certified as a CADAC in order to provide court-accepted substance abuse evaluations.

## Membership Update

We are nearing my goal of 130 members (we are at 125 as of Feb. 18). Please renew your membership when you receive your notice, and encourage fellow private practice therapists to join our cause as well.

## Mental Health Parity

As Pam Feldman reports in her article on page 3, a Parity Bill (LB 920) has been introduced in the legislature this year. Currently, progress is stalled. We will continue to monitor the status of this bill, but it is possible that it will not make it out of committee this year.

The biggest challenge facing supporters of the bill is fighting the business and insurance lobby who warn of skyrocketing premiums. However, a report to the Florida Legislature in 2001 shows that a review of seven states (California, Colorado, Maryland, Minnesota, North Carolina, Pennsylvania and Texas) finds that four states reported a “minimal increase” in costs, while three states actually reported decreases.

Disparity also has a negative financial impact on consumers. Disparity forces individuals and families to forgo or discontinue treatment, or pay out of pocket. It can price individuals and families out of the insurance market and into financial ruin.

One positive to note is the increasing focus on mental health issues in the legislature this year. Due to the governor's plan to close two of the three Regional centers, mental health is being discussed — for the most part, intelligently — in Lincoln. This can only be a positive for the future, as State Senators become more aware of the needs of mental health consumers in the state.

## CADAC Update

There is good news to report on this issue. In response to intense study of the issue as well as feedback and participation from affected mental health therapists (including numerous APPT members), the Department of Health and Human Services

Regulation and Licensure division has retracted a requirement that mental health therapists become CADACs in order to provide court-accepted substance abuse evaluations. This is a major victory for therapists, as it reaffirms the scope of practice established by the state licensure process.

Therapists who wish to provide substance abuse screening for court purposes will, however, need to complete training on the ASI/CASI data collection tool. The new requirement will take effect in July.

For more information on this topic, please contact me.

Finally, I have been appointed to a term on the Mental Health Practices Board, a position which I was very honored to accept. The board meets every other month to determine licensure sanctions for therapists (excluding psychologists and psychiatrists). It's an eye-opening experience.

I hope to see you soon at an upcoming APPT event!



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Article submissions are welcome. Call for deadlines for member submissions.

Submissions may be edited for content, clarity and/or length. Subscriber comments are welcome.

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Subscription to *The Compass* is a benefit of membership in APPT. Write or call if you have questions about membership.

APPT

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## APPT Book Reviews

We have several books at the APPT office that are available for therapists to review for an upcoming issue of *The Compass*.

Reviewers may keep the book when they are finished. Reviews of between 350 and 750 words must be submitted to the APPT office for publication in the newsletter.

Requests for books will be honored on a first-come, first-served basis. APPT will send you the book and assign you a deadline for an upcoming issue (you will usually have 90 to 120 days to read the book and complete the review).

Call Bridget at (402) 393-4600 to request a current list of books.

In addition, if you have read a book not on our list but would like to review it for an upcoming issue of *The Compass*, please contact Pam Feldman or Bridget Weide.

Interested in Advertising in *The Compass*?

Call Bridget at (402) 393-4600

for a Current Rate Sheet

## Legislative Update: Mental Health Parity

By Pam Feldman

LB 920 was introduced on Jan. 8 as the new legislative session began. This is a revised version of the Parity Bill that did not make it out of the Banking, Commerce, and Insurance Committee last year. It appears as if the bill will suffer a similar fate this year. A committee hearing was held on the bill on Feb. 9, but the bill was "indefinitely postponed" on Feb. 17 and it appears to be dead for this session.

LB 920 is a much stronger piece of legislation than the previous Parity Bill. It covers all mental health and substance abuse diagnoses and includes penalties for insurance companies that fail to comply. Parity requires no separate deductible, or higher copays than for other illnesses, nor does it allow a restriction in the number of visits. There is still the provision that plans do not have to provide mental health coverage.

However, states such as Minnesota and Vermont (with the most comprehensive parity laws), rank among the lowest for uninsured residents. Insurance increases by including mental health parity from 0 to 0.8%.

Since the national parity bill seems to be floundering, getting a revised state parity law passed would help Nebraskans.

The 2004 bill was co-sponsored by Sens. Combs, Byars, Kruse, Dwite Pedersen, Price, Schimek, Schrock, Stuhr, Synowiecki and Thompson. While their support is crucial to our efforts, it is the support of the Banking, Commerce and Insurance Committee that determines the bill's fate. They include Sens. Quandahl (chair), Tyson, Foley, Jensen, J. Johnson, Louden, Mines and Redfield.

If you would like more information, please contact Pam Feldman at 445-9175 or [pzjf@cox.net](mailto:pzjf@cox.net).



**Friday, Feb. 27, 2004**  
**"You've Been Served: What To Do When You're Subpoenaed"**

8:30 a.m. to 11 a.m.  
 APPT FEBRUARY TRAINING  
 Country Inn & Suites Hotel  
 119th & Miami (Omaha)

**Tuesday, March 2, 2004**  
**"One Child, One Place, One Time"**  
 MINI-PRACTICE SERIES WORKSHOP  
 Olive Garden (76 & Dodge - Omaha)

**Friday, April 2, 2004**  
 APPT SPRING CONFERENCE  
 Country Inn & Suites Hotel  
 119th & Miami (Omaha)

## SPRING CONFERENCE ON PROBLEM GAMBLING

MARCH 8-9, 2004 • Cornhusker Hotel (333 South 13th Street / Lincoln)



**The NCCG Spring Conference offers you an opportunity to learn from nationally recognized experts in the field of gambling. You will learn how to recognize and treat your current mental health or substance abuse clients who have co-occurring gambling problems. 12 hours of CEUs (conference includes lunch both days)**

Featured speakers will include:

- *Judge Mark Farrell*, is the Gambling Treatment Court Judge in Amherst, NY. Judge Farrell was the first judge in the country to start and maintain a gambling specific court for problem gamblers in the court system.
- *George Meldrum, MA*, is currently the Director of Prevention for the Delaware Council on Gambling Problems, Inc. At the Delaware Council he has worked to secure funding for research on children and gambling and was able to have gambling prevention education mandated as required curriculum for Delaware public schools, a first in the nation.
- *Dan Smith, MA, LCSW, CCGC, NCCG*, is a clinical supervisor for the National Council on Problem Gambling, Inc. He is Clinical Director of Responsible and Problem Gambling Programs at Missouri Valley Alcohol and Drug Programs, Inc., in St. Louis, MO, where he counsels dual diagnosis, gambling and substance abuse clients.
- *Randy Stinchfield, Ph.D., LP*, is the Associate Director, Center for Adolescent Substance Abuse Research, Department of Psychiatry, University of Minnesota Medical School. Dr. Stinchfield has conducted clinical studies and survey research in the area of problem gambling with both adult and youth samples.
- *Linda Graves, MS*, is the Deputy Director for the Delaware Council on Gambling Problems. She brings knowledge of gambling problems in society as well as the technical knowledge of brain chemistry of problem gamblers.

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## Two Continuing Education Scholarships Remain for 2004

We've had several therapists take advantage of the APPT continuing education scholarships — and we've got funding for two more before the end of this year. If you see a session you're interested in attending — and want to get a little financial help (and give back to the association at the same time!), then we've got an offer that you won't want to miss out on!

The APPT Scholarship for Continuing Education is designed to help APPT members defray the cost of a workshop they attend (75 percent of the cost of the workshop, up to a maximum of \$100).

Complete the scholarship application form and submit it along with a copy of the workshop brochure (if available). Up to four scholarships are awarded each year.

Your scholarship request will be reviewed by the APPT Scholarship Committee and you will be notified of their decision within 7 days of your application.

If selected, you will be reimbursed for the awarded amount after attending the workshop and sharing the information with APPT members, either through a presentation or by writing an article for *The Compass* summarizing the content of the workshop.

Questions? Call Pam Feldman at (402) 445-9175.

### Application for APPT Scholarship For Continuing Education

Name \_\_\_\_\_

Practice Location \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Conference Title and Location (please attach a copy of brochure, if available)

\_\_\_\_\_

Date: \_\_\_\_\_ Cost: \_\_\_\_\_

***I am willing to:***

- Present a brief summary of the workshop at a mini-practice workshop
- Write an article for *The Compass* summarizing the content of the workshop.

***Please note:*** The maximum amount awarded is 75 percent of the cost of the workshop, up to \$100. If selected, you will be reimbursed the awarded amount after attending the workshop and sharing the information with APPT members through a presentation or article.

***Submit completed application to:*** Pam Feldman, LPC, 702 North 129th Street, Suite 104, Omaha, NE 68164 or fax to (402) 431-1535. Applications will be considered and a decision reached within 7 days of receiving your application.



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# An Open Letter to the Members of APPT

By Jack Wineman

As you know, last year – 2003 – marked the tenth anniversary of the Association of Private Practice Therapists. As the founder, I recently was presented with an etched appreciation plaque. Because the recognition, as well as my ongoing affiliation with APPT is important to me, the plaque has been placed in a prominent spot in my office.

To the Board of Directors and the entire membership, I want to offer a sincere THANK YOU.

The recognition caused me to reflect some on our origins as an association. About 11 years ago, managed care was coming into its own. Those of us in private practice were feeling largely overwhelmed with the choice to participate on managed care panels, with a significantly reduced fee structure, or risk losing our businesses. Managed care companies were proliferating like bunnies. They all had a different application forms, different fee schedules and their own idiosyncratic policies and procedures. The professional literature was predicting the demise of independent mental health practice as we then knew it.

It shouldn't be surprising that I found myself feeling somewhat like a victim within my profession. Almost daily, it seemed, changes were occurring in my practice that I felt I had no influence over. I was beginning to feel helpless. I didn't like this at all!

At the same time, I observed that the physicians had an advantage the Masters and Doctoral mental health providers lacked. They had their affiliation with the hospitals. The physicians had the hospital resources (administrative, legal, etc.) to help them learn to survive within an ever-imposing managed care environment. It seemed they had a support system that instilled a degree of hope.

## *The Origin of APPT*

Since I don't handle 'helpless' and 'hopeless' very well, I decided to find out how my colleagues were reacting to and feeling about managed care. I selected a time and place and mailed a lot of invitations. About 40 of our colleagues showed up.

Following a productive meeting, the group agreed we should meet again. Invita-

tions were sent to an even larger audience, and more practitioners came. The participants decided they were experiencing enough anxiety and concern about their profession and their practice to meet regularly. These initial meetings ultimately resulted in our incorporation in 1995.

## *From the Contributions of Many...*

Over the past decade, your association has had top-notch, highly energetic leadership.

The following people have donated countless hours as an elected APPT officer, committee member, or liaison with our other professional associations (many of these folks held more than one office; many of them were reelected to the same office): Steve Abraham, Jackie Anderegg, Geoff Anderson, Bob Atherton, John Atherton, Sharon Ballinger, Dale Battleson, Karen Baumstark, Christine Beardmore, Georgia Bichekas, Lee Branham, Nancy Branham, Susan Carter, Mary Coady-Leeper, Debra Combs, Lynn Anderson DeMott, Barbara Detlefson, Marleen Evans, Pam Feldman, Glen Fineman, Millie Flansburg, Janet Guilfoyle, Michael Harsh, Morgan Keen Hecht, Linda Houser, Ellie Hites, Anita Howell, Sherry Hubbard, Dane Hughes, Constance Inglis, Jodi Jurgens, Julie Jurich, Robert Kraft, Grace Kuhl, Gary Lehmer, Julie Luzarraga, Audrey Malena, Maria McIntosh, Gay McTate, Paul Monkowski, Terry Moore, Wayne Palmer, LouAnn Patterson, Stephanie Peterson, Ann Potter, Joe Rizzo, Bill Rucker, Linda Schaeffer, Ardi Schoonover, Deb Shaddy, Gus Shoffner, Scotti Thralls, Gene Welch, Elaine Wells, Mark Ziegenbein, Nikki Zimmerman, and Jan Zoucha-Jensen.

*(If I missed anyone, my sincere apologies. It wasn't intentional.)*

Bridget Weide has managed the business of the association over the years, keeping us organized, focused, and in touch with our membership. She, too, has contributed immensely to our success.

Others of you have donated time, talent and money to keep alive the spirit of APPT — *support for the mental health private practitioner through the provision of practice management information and legislative advocacy.*


The bottom line is that you, the members, are the reason APPT exists today, over ten years later.

## *"Thanks"*

To each of our leaders and to each and every APPT member, I send a deeply sincere THANK YOU for all you have done to make this organization one that stands tall among its professional peers. You each have my deepest respect and appreciation.

And, finally, to APPT itself, a belated HAPPY ANNIVERSARY!

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# NeuroAffective Therapy: The Andrew Leeds Workshop

*Editor's Note:* Sharon submitted this article to fulfill her requirement for the APPT Scholarship. For more information about the scholarship, see page 4.

**By Sharon A. Anderson, LCSW**

Andrew M. Leeds, Ph.D., developed NeuroAffective Therapy and taught the model at a workshop held in San Diego, California in November.

At the basis of the model is the belief that trauma cannot be resolved in some clients because of insecure attachment issues. The protocols presented in this workshop are designed to strengthen the self of these clients, allowing for trauma processing using EMDR (Eye Movement Desensitization Reprocessing).

Dr. Leeds has developed techniques to help clients tolerate both the positive and negative affect. The protocol teaches the client to enjoy the positive experience of self. Small decreases in negative feelings, coupled with growth of positive self-statements, help to build positive affect scripts and a new inner sense of self. It is a slow process because of the client's fragile state.

Dr. Leeds says that new neural pathways expand the memory networks. This can be accomplished with these protocols through the use of images, sounds, thoughts, sensations of positive and negative touch and by using memories of actual behavioral responses (such as fight, flight or freeze, eat, void, vomit, soothe, protect and sexual arousal). A functional transition occurs when the memory networks involving mild fear move to a feeling of calm with no fear. As attachment forms and positive emotions are experienced, resources are built up that can lead to functional transitions. These positive emotional states are linked together by neural pathways in the brain, forming a behavioral structure.

In a dysfunctional transition, there is a feeling of helplessness in the face of danger, which moves from mildly fearful to a state of panic, overcoming awareness of the environment. Dr. Leeds posits that without the positive connection, the negative state can be changed to a positive one through deliberate self-direction using the various protocols taught in the workshop.

Affect tolerance and management is part of the affect restructuring (or building of new neural pathways). Assessing the client's capacity to tolerate arousal and strengthening that capacity begins with the development of a comfortable or safe place, using the various senses in its creation. Some clients cannot develop a "safe" place easily; therefore, a comfortable or beautiful place from memory is used instead.

Building up positive affect tolerance means using a positive memory of having accomplished something, being praised and remembering any thoughts, feelings or sensations associated with the memory.

Exercises were done to activate mild distress and to use sensory awareness to calm down the level of arousal after first practicing sensory focus without the distress. This was practiced in moving from an upsetting, stressful situation to one of calming, sensory-focused awareness. This served to decrease the level of disturbance.

The practicum included practice with EMDR to strengthen positive professional fulfillment. This was followed by focusing on professional stressors following a protocol of resource development and then using the protocol for affect tolerance. Somatic Resource Development and Installation was also part of the practicum. This intervention supports state change with stance, gesture and expression.

The development of new neural pathways that strength the client's ability to tolerate and enjoy positive affect and to tolerate negative affect occurs when using the protocols taught at this workshop.

I have since used these techniques with one or two clients with positive results.

## ADVERTISE FOR THERAPISTS HERE

Do you have office space available for rent? Looking to reach more than 125 members of the Association of Private Practice Therapists?

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## Latest Information Is On APPT E-List

If you have e-mail access from home, work or both, but aren't on the APPT E-List, you're missing out!

The latest addition to the E-List is information on upcoming workshops and events. Many of these workshops offer discounts for multiple registrations. The E-List allows you to contact other private practice therapists to register together and take advantage of savings up to \$50.

Join the E-List and receive legislative updates and first notification of upcoming APPT events. And it's a great way to stay connected with other private practice therapists!

If you are a current APPT member, you are eligible to join the E-List. We just need your e-mail address to sign you up!

Call Bridget at (402) 393-4600 with your e-mail address, or send an e-mail to [appt@ibc.omhcoxmail.com](mailto:appt@ibc.omhcoxmail.com) (subject: APPT Member E-List). You will receive an e-mail confirming your addition to the E-List.

## Interested in serving your organization as a board member?

We are seeking candidates for the following positions:

- President-Elect
- Secretary
- Member-at-Large
- NASW Liaison

Board meetings are held 10 times annually (second Friday of the month).

Call John Atherton at 397-2147 if you are interested or know someone who might be.

# Book Watch

***Cognitive Behavior Therapy: Applying Empirically Supported Techniques in Your Practice***

Providing step-by-step guidelines for applying empirically supported cognitive behavior therapists and techniques to a wide range of presenting problems, "Cognitive Behavior Therapy: Applying Empirically Supported Techniques in Your Practice" is a unique, "hands-on" guide for mental health professionals looking for the most up-to-date information on the details of implementing empirically supported therapeutic techniques with their clients. (July 2003; published by John Wiley & Sons; \$55).

***Understanding, Assessing and Rehabilitating Juvenile Sexual Offenders***

An important question facing the juvenile justice system as well as mental health professionals is the appropriate

evaluation and treatment of adolescents who are charged with or adjudicated for a sexual offense, or referred for services through social services and child protective agencies. In the face of increasing questions about both effective treatment and community safety, there is pressure to determine which juveniles can be successfully managed and treated, how to most effectively evaluate for future risk and provide appropriate and adequate treatment.

"Understanding, Assessing and Rehabilitating Juvenile Sexual Offenders" guides mental health professionals through the assessment and treatment methods available for working with this special population, providing a succinct, yet, complete survey of the field and a reliable resource for assessment, treatment and rehabilitation. (June 2003; John Wiley & Sons; \$45).

**Bill Would Provide Rental Assistance To the Mentally Ill**

The Health and Human Services Committee heard testimony on Feb. 5 on a bill to give rental assistance to chronically mentally ill individuals. LB 931, introduced by Omaha Sen. Pam Redfield at the request of the governor, provides for the assistance through the Affordable Housing Trust Fund.

Redfield said the bill is a "necessary component" of the governor's proposal to move the state toward community-based programs for mental health.

Omaha Sen. Chip Maxwell expressed concern about increasing the scope of the fund without increasing revenue. In response, Redfield said she plans to introduce a bill next session to increase the documentary stamp tax on real estate transfers, which funds the trust fund.

Dick Nelson, representing the HHS system, testified in favor of the bill. Danielle Hill, executive director of the Nebraska Housing Developers Association, opposed the bill.

The committee took no immediate action on the bill.

**"One Child, One Place, One Time"**

Our guest speaker will be April Anderson, LCSW, an Interview Specialist with Project Harmony. The organization protects children by providing community-based, integrated, comprehensive and coordinated child abuse assessment. Professionals from Project Harmony, Child Protective Services, law enforcement and the medical community come together at one place so that a child has to tell of his or her abuse only one time. Join us on March 2 to learn more about child abuse reporting regulations and about Project Harmony.

 **Tuesday, March 2, 2004** 

Olive Garden — 74th & Dodge Street (Omaha)

- 11:30 to 12:00 p.m. .... Meet / Greet / Networking
- 12:05 to 12:35 p.m. .... Speaker
- 12:35 to 12:45 p.m. .... Question & Answer Time/Wrap-Up\*  
(If you need to get back to your office for a 1 p.m. client, feel free to leave at 12:35 p.m.)
- APPT Members ..... \$13.50 per person
- Non-Members ..... \$16.00 per person

Cost includes entrée, salad, breadsticks, beverage and gratuity.

**Questions? Or to Register by Phone  
Call Bridget at the APPT Office — (402) 393-4600**

The APPT Office is Managed by Image Building Communications.  
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**MARCH 2 MINI-PRACTICE WORKSHOP  
REGISTRATION FORM**

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**Address Service Requested**

## *2003 Private Practitioner Survey Results*

Our semiannual Private Practitioner Survey is designed to collect data about private practice in Omaha as well as improve our services for our members. This year, we achieved a 20 percent response rate.

The results provide a glimpse of the “typical” private practice mental health therapist and offer the APPT board information about member needs.

One interesting finding is the increase in Internet access among therapists. This year, 96 percent of respondents reported having Internet access at home, and 54 percent have access at work. However, APPT only has e-mail addresses on file for 70 percent of members. (If you have e-mail access and don’t currently receive the APPT E-List or get any e-mail messages from APPT, please e-mail [appt@ibc.omhcoxmail.com](mailto:appt@ibc.omhcoxmail.com) to add your e-mail to our list).

Our members are an experienced group of therapists, averaging 12.5 years of private

practice, according to the survey. They are also a stable group — 100 percent indicate that they expect to still be in private practice in 12 months.

The most interesting questions each year have to do with fees — standard fees versus amounts reimbursed by managed care firms. This year, we found therapists charging between \$75 and \$127 per session, with an average fee of \$98.73. (Note: responses are not broken down by type of therapist, i.e., social workers versus psychologists.)

When it comes to managed care, therapists knock off at least 15 percent on average; the highest fee paid by a managed care firm for an individual session averages \$83.56 (again, not broken down by type of therapist). The lower end of the fee scale represents a 45% discount, with an average of \$54.47 reported as the lowest fee paid by a managed care firm for an individual session. Lows ranged from \$30 to \$83.

Another area of interest is the “biggest challenge” facing private practice therapists. These answers included “Finding competent office help,” “tolerating the enormous burden of projective identification,” “finding enough time to do marketing,” “the emotional cost of listening day after day to trauma,” “low reimbursement rates,” and “working more hours for less money,” “advanced authorizations” for insurance, “legal aspects” of private practice, “connecting with resources/referrals” and paperwork, insurance and billing.

APPT will continue to work to help therapists address these issues. The feedback from the survey will help guide future member benefits (such as investigating the possibility of group health insurance and the possible development of a speaker’s bureau and public relations initiatives) as well as topics for upcoming workshops, trainings and mini-series events.

**Free Legal Consultation.** Remember, each APPT member is entitled to a free legal consultation with an attorney from Erickson & Sederstrom, P.C. (up to one hour) per year. Call Chuck Sederstrom, attorney at law at (402) 397-2200.

If you access this service, please give us feedback. Call Bridget at the APPT Office at (402) 393-4600 and let us know!