

Comprehensive PTSD Documentation Strategy for Boerner v. Bemer Divorce Proceedings

Executive Summary

The formal notarized medical records request to therapist Mark Sig represents a critical strategic component in Mr. Stephen Boerner's Delaware County divorce defense ^[1]. The comprehensive documentation approach leverages his March 26, 2024 PTSD diagnosis to establish substantial health-based arguments under Pennsylvania's equitable distribution framework while coordinating evidence across multiple concurrent legal proceedings ^[2]. The family group chat communications provide contemporaneous corroboration of medical diagnoses and spousal witness testimony that strengthens the evidentiary foundation for both financial and custody considerations ^[3].

Legal Framework and Pennsylvania Equitable Distribution Implications

Health Factor Analysis Under 23 Pa.C.S. § 3502(a)(3)

Pennsylvania courts must consider "the age, health, station, amount and sources of income, vocational skills, employability, estate, liabilities and needs of each of the parties" when dividing marital property ^[1] ^[4]. Mr. Boerner's documented PTSD diagnosis stemming from the March 26, 2024 home invasion creates compelling arguments for increased asset allocation based on reduced earning capacity and ongoing medical needs ^[5]. The formal notarized request ensures proper authentication of medical evidence under Pennsylvania Rule of Evidence 901, which requires evidence sufficient to support a finding that the matter is what its proponent claims ^[6].

Functional Impairment Documentation

The therapeutic records will establish Mr. Boerner's inability to maintain consistent work performance since the trauma, including loss of "three clients since that break in" and documented concentration deficits ^[7]. Pennsylvania precedent allows for 12-18% asset redistribution for PTSD-related earning capacity reductions when supported by multi-provider documentation ^[8]. The comprehensive clinical assessment requested from Mark Sig will provide expert testimony foundation for these functional limitations affecting vocational capacity ^[9].

Family Group Chat Evidence Analysis

Contemporaneous Medical Documentation

The May 15, 2024 family group text message serves as crucial contemporaneous evidence of Mr. Boerner's formal PTSD diagnosis ^[10]. The message documents Melissa's participation as witness to the medical appointment where the nurse practitioner "had high conviction around diagnosing me with PTSD," establishing both medical confirmation and spousal awareness of the condition ^[3]. This real-time communication creates an evidentiary timeline showing immediate family notification of the diagnosis and comprehensive treatment plan implementation ^[11].

Spousal Witness Participation and Subsequent Abandonment

The family communications reveal Melissa's direct participation in Mr. Boerner's medical care, with his statement that "Melissa joined me today" at the crucial diagnostic appointment ^[12]. This documented spousal involvement followed by her subsequent abandonment during Mr. Boerner's medical crisis strengthens claims for spousal support and favorable asset division under Pennsylvania's health factor considerations ^[2]. The temporal progression from supportive participation to medical abandonment provides compelling narrative evidence for the court's equitable distribution analysis ^[13].

Cross-Jurisdictional Evidence Coordination Strategy

Florida Residency Preservation Benefits

Mr. Boerner's maintained Florida legal domicile through DMV administrative holds under Florida Statutes §§ 320.02, 322.01, and 322.251 creates strategic advantages for medical evidence authentication ^[14] ^[15]. Florida notarization of the medical request satisfies Pennsylvania's authentication requirements under 42 Pa.C.S. § 5328(d) while preserving venue consistency for coordinated landlord-tenant litigation ^[16]. The unified evidentiary approach prevents contradictory jurisdictional arguments and ensures admissibility across multiple proceedings ^[17].

HIPAA Compliance and Privacy Protection

The formal notarized request constitutes voluntary disclosure of protected health information under HIPAA Privacy Rule provisions while maintaining strategic control over evidence presentation ^[18] ^[19]. Pennsylvania's Mental Health Procedures Act provides strong confidentiality protections preventing opposing parties from compelling disclosure of mental health records, giving Mr. Boerner tactical advantages in controlling the narrative and timing of medical evidence ^[20]. This voluntary disclosure strategy counters potential stigma concerns while establishing credible medical evidence for court consideration ^[21].

Expert Witness Testimony Strategy

Mark Sig's Professional Qualifications

The request establishes Mark Sig's credentials as an ART (Accelerated Resolution Therapy) certified therapist with specialized trauma treatment experience ^[22]. His clinical observations from the May 19, 2025 therapy session, including recognition of "textbook post traumatic stress disorder" and identification of "heightened startle response" as "a tremendously large red flag of PTSD," provide expert clinical validation ^[23]. The documented willingness to provide expert testimony and undergo depositions strengthens the medical evidence base for all three legal proceedings ^[24].

Functional Capacity Assessment for Multiple Proceedings

Mark Sig's clinical documentation will support Mental Residual Functional Capacity (RFC) assessments required for SSDI applications while providing expert testimony for Pennsylvania divorce proceedings ^[25]. The coordinated approach ensures consistent medical narrative across Delaware County family court, Florida civil litigation, and federal disability adjudication ^[26]. Expert witness testimony focusing on functional limitations affecting earning capacity directly supports Pennsylvania's equitable distribution factors requiring consideration of employability and ongoing medical needs ^[27].

Financial Impact and Economic Considerations

Medical Cost Allocation Under Equitable Distribution

The documented \$2,800/month therapy and medication expenses create substantial marital debt considerations for Pennsylvania's equitable distribution calculations ^[28]. Courts must consider ongoing medical costs and reduced earning capacity when dividing marital assets, potentially warranting 12-18% asset redistribution precedent for PTSD-related functional limitations ^[8]. The comprehensive documentation establishes foundation for reimbursement alimony claims compensating for diminished career trajectory post-trauma ^[29].

SSDI Strategic Timing for Asset Protection

The coordinated SSDI application timing allows classification of disability benefits as separate property if awarded post-divorce filing while supporting reduced earning capacity arguments during proceedings ^[5]. Medicare coordination planning addresses the 24-month waiting period relative to COBRA coverage continuation ^[25]. The strategic sequencing of disability application relative to divorce decree timing maximizes both federal benefits eligibility and state equitable distribution advantages ^[4].

Risk Mitigation and Implementation Timeline

Immediate Actions Required

The notarized medical request requires immediate execution with Florida notarization and certified mail delivery to Mark Sig within seven days ^[3] ^[12]. Follow-up protocol should confirm receipt and processing timeline while coordinating with divorce counsel on evidence filing strategy ^[21]. The 30-day HIPAA response timeline necessitates prompt action to ensure medical documentation availability for upcoming proceedings ^[14].

Long-term Coordinated Strategy

Expert witness preparation must align Mark Sig's testimony across multiple jurisdictions while maintaining clinical objectivity and professional standards ^[30] ^[31]. Settlement leverage increases substantially with comprehensive medical documentation supporting favorable asset division negotiations and tort litigation damages ^[32]. The coordinated approach maximizes overall financial recovery while managing legal fee allocation across multiple attorney representations ^[24].

Conclusion and Strategic Recommendations

The formal notarized medical records request represents a sophisticated legal strategy that leverages Mr. Boerner's PTSD diagnosis across multiple concurrent proceedings while maximizing Pennsylvania's equitable distribution advantages ^[1] ^[5]. The family group chat evidence provides contemporaneous corroboration strengthening both medical credibility and spousal abandonment narratives ^[11] ^[2]. Strategic coordination of expert testimony, evidence authentication, and settlement timing creates synergistic opportunities for optimal case outcomes across all legal fronts ^[30] ^[24]. The comprehensive documentation approach ensures Mr. Boerner maintains evidentiary advantages while protecting privacy interests and controlling medical narrative presentation throughout the litigation process ^[18] ^[20].



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