

## Ryan Loiselle, LPC (#C5073)

In private practice at In Context, LLC located at Brave Space, LLC. 3620 SE Powell Blvd., #102, Portland, OR 97202-1880 (503) 673-6190 | f: (503) 894-6020 | ryan@incontextcounseing.com

## **Fee Disclosure and Agreement**

Individual therapy	\$120/hr session
Couples/ & Relational Work	\$90-130/1.25hr session
Assessment for Medical	\$120 for session and
transition	document
(Surgery Readiness Letter)	
Sliding Scale Fee for Service	\$60-120/hr.
Case Management	\$25/15 min.
Clinical Consultation	\$80/hr. or \$50/30min.
Clinical Supervision	\$80/hr.
Late Cancelation No-Show	50% of rate of session with
Fee	a \$50 max
Groups	Inquire directly
Trainings	Inquire directly

Sliding Scale Fee by individual income thresholds*  Individual Session Rate for children and adult**							
1	0-\$28,410	\$28,411- \$35,513	\$35,514- \$42,615	\$42,616- \$49,718	\$49,719- \$56,820	\$56,821+	
2	0-\$32,570	\$32,571- \$40,713	\$40,714- \$48,855	\$48,856- \$56,998	\$56,999- \$65,140	\$65,141+	
3	0-\$36,730	\$36,731- \$45,913	\$45,914- \$55,095	\$55,096- \$64,278	\$64,279- \$73,460	\$73,461+	
4 +	0-\$40,890	\$40,891- \$51,113	\$51,114- \$61,335	\$61,336- \$71,558	\$71,559- \$81,780	\$81,781+	

<sup>\*</sup>Sliding scale fee is offered based on rates outlined above and as space allows. Individuals experiencing severe situational financial hardship such as loss of job or income, homelessness, or those whom are experiencing mental health crisis may be able to access lower scale fees for up to 4 sessions. Please just check with me.

<sup>\*\*</sup> Rates may differ for couples/relational therapy, groups, clinical supervision and professional consultation and training so please inquire with me directly.

## Insurance

I do not currently accept any insurance but am in the process of getting credentialed with a few larger insurance carriers. This is a lengthy process and I may not be credentialed with these carriers until 3<sup>rd</sup> quarter 2019. Until then, as I am a fully-licensed professional counselor, you may be able to access out-of-network benefits for my services. I can provide you with a billing summary at any time that you can submit to your carrier for possible reimbursement. These billing summaries will often need to have your current diagnosis listed on them to be considered for reimbursement and the level of reimbursement is always dependent on your individual plan and out-of-network benefits. I'm happy to explore single-case agreements and getting credentialed with your carrier in the future.

## **Payment of Fees**

100% payment is due in full upon the actual date of service. I may choose to reschedule your appointment if you are unable to pay for the service. If you have a balance on your account, I may also choose to not see you in the future until that balance is paid in full. If you have questions regarding the payment of fees or your rates, please discuss them with me. I can always provide you with a billing summary so that you can track and account for your services with me.

I accept Cash, Checks, Credit card (Visa/MC, American Express, Discover, and Health Savings Accounts HSAs.) Additionally, payment can be made via PayPal to <a href="mailto:ryan@incontextcounseling.com">ryan@incontextcounseling.com</a> or CashApp to \$incontext

Checks should be made payable to "In Context, LLC"

**Notice:** There will be a \$25.00 fee assessed for NSF/Returned checks.

The client below agrees to pay	/ Session for individual sessions.
Printed Chosen Name of Primary Client	DOB
Signature of Adult or Legal Guardian	Date
Signature of Youth (14-18) if applicable	Date