

# Dr. Christopher Barrilleaux, DSW, MATH, LCSW-BAS

Licensed Clinical Social Worker

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## **POLICIES ON CONFIDENTIALITY, FEES, HEALTH INSURANCE, BROKEN APPOINTMENTS, & CONSENT - ADULTS**

### **Limits of Confidentiality**

Most of what you discuss in therapy is considered confidential and privileged and requires your express written permission to be released to any other party. However, both federal and state **duty-to-warn** statutes require compulsory reporting of pertinent specific information which would include the following:

- At such time that you threaten your own life or someone else's life;
- When you confess to sexual activity with, or carnal knowledge of, a juvenile;
- Battery on a child, elderly person, or infirmed person in your home;
- If you are HIV-positive and have not disclosed this information to your sexual partner;
- Any and all written information subpoenaed by a court of law relative to a child custody proceeding;
- Any and all written information subpoenaed by a court of law; and failing a motion to quash on the basis of client privilege, is then ordered to be produced by a judge or magistrate.

If you are an adolescent 17 years of age or younger, unless you have been legally emancipated, you should be advised that confidentiality is severely limited. Most everything you report, by law can be demanded from the therapist by your parent or legal guardian.

If you are a parent, please understand that the therapy process is severely hindered by the reporting process. I prefer to report general progress to parents rather than specific details, unless I believe your minor child poses a serious risk to self or others.

By my signature I certify that I have read and understand this policy on confidentiality.

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**Client Signature**

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**Date**

## Fees

### **Consultation & Psychotherapy**

Initial Consultation (90 minutes)	\$240 (\$160 per hour)
Individual Psychotherapy (60 minutes)	\$160 (\$160 per hour)
Individual Psychotherapy (75 minutes)	\$200 (\$160 per hour)
Individual Psychotherapy (45 minutes)	\$120 (\$160 per hour)
Family Therapy (90 minutes)	\$240 (\$160 per hour)
Group Therapy (90 minutes)	\$120 (\$80 per hour)

### **Marriage Counseling**

Initial Consultation (180 minutes)	\$480 (\$160 per hour)
Follow-up with Jungian typology (150 minutes)	\$400 (\$160 per hour)
Regular follow-up sessions (60-75-90 minutes)	\$160-\$200-\$240 (\$160 per hour)
Custom Consultations can be built for specific needs	Unbundled at agreed upon rates
Collateral Consultation – <i>psychiatrists, other professionals on your behalf</i>	\$50 per 15-minute unit hour \$80 per 15-minute unit hour with report

### **Forensic Social Work**

Mediation	\$200 per 60-minute hour
Collaborative Divorce	\$160 per 60-minute hour <i>(retainer of \$1600 representing 10 hours work is required)</i>
Forensic Substance Use Evaluation	\$200 per 60-minute unit hour <i>(retainer of \$1000 representing 5 hours work is required)</i>
Forensic Sexual Behavior Evaluation	\$200 per 60-minute unit hour <i>(retainer of \$1000 representing 5 hours work is required)</i>
Individual Therapy (Forensic Cases)	\$200 per 60-minute hour <i>(retainer of \$600 representing 3 hours work is required)</i>
Professional Consultation (Attorneys, Custody Evaluator)	\$200 per 60-minute unit hour
Review of Documentation	\$200 per 60-minute unit hour
Narratives (Drafts, review, compilation)	\$40 per page (maximum \$1000)
Travel & Costs	Travel to other facilities is charged from the point of departure to the time of arrival according to the same rate as the service being rendered. Other costs, e.g. parking, will be billed to the client.

## Retainers

### *Court-recommended Therapy*

Individual client sessions are expected to be paid on each date of service. However, a retainer of \$600, representing 3 hours of work, is necessary to continue a new forensic social work case prior to the second session being scheduled. A major credit card is necessary to be placed on file to replenish the retainer when it reaches a \$0.00 balance, until the case is completed, judgments determined, or the client terminates therapy.

*Notice:* Dr. Barrilleaux reserves the right to withdraw from any case after initiating forensic court-recommended therapy if it is learned through consultation with the custody evaluator, or review of court documentation or another reliable source, that the client materially misrepresented anything having bearing to the case.

### *Court-ordered Substance Use Forensic Evaluation*

A \$1000 retainer, representing 5 hours of work, is necessary to initiate a forensic substance use evaluation. A major credit card is necessary to be placed on file to replenish the retainer when it reaches a \$0.00 balance, until the case is completed, and the court order has been satisfied. (*See Protocol for Forensic Substance Use Evaluation* in the document section for detailed explanations and clarification.)

### *Court-ordered Sexual Behavior Evaluation*

A \$1000 retainer, representing 5 hours of work, is necessary to initiate a forensic substance use evaluation. A major credit card is necessary to be placed on file to replenish the retainer when it reaches a \$0.00 balance, until the case is completed, and the court order has been satisfied. (*See Protocol for Forensic Sexual Behavior Evaluation* in the document section for detailed explanations and clarification.)

### *Court Testimony*

In order to be present in Court to give testimony or make similar depositions, a separate retainer of \$750 per day, representing 3 hours of work at \$250 per hour, is required. A major credit card is necessary to be placed on file to which fees which have been underpaid will be charged, or fees which have been overpaid will be refunded. A maximum of \$1250 will be charged per day.

## Health Insurance

\* *See section entitled "Custom Agreement", on page 6 of this document.*

### **In-Network Benefits**

If you are interested in using your commercial health insurance for therapy, please scan both sides of your health insurance card and email them along with your name and date of birth to Dr. Barrilleaux at [christopher4918@gmail.com](mailto:christopher4918@gmail.com) prior to making an initial appointment. He will verify your benefits, after which he will send you a return email advising you if he is able to accept assignment from your health insurance company, and notify you of your cost share.

Third-party reimbursement is the responsibility of the patient unless Dr. Barrilleaux

happens to be on the insurance plan. Dr. Barrilleaux is currently only an in-network provider for the Blue Cross Blue Shield of Louisiana PPO and HMOs networks. However, if your plan has out-of-network mental health benefits on an outpatient basis, you may qualify to get reimbursed by your plan under that benefit. Please refer to the Out-of-Network benefit information below.

### **Medicaid & Tri-Care**

Because Dr. Barrilleaux is neither a Medicaid or Tri-Care provider, and does not have the necessary Medicaid or Tri-Care provider #s assigned to him by them, he is not able to file claims for you with these plans for reimbursement as they will not be honored. In the alternative, should one of these plans have out-of-network coverage, you should follow the directions in your insurance contract to determine if and how you may file a claim to be reimbursed for fees paid for psychotherapy. In Dr. Barrilleaux's experience, these federal plans do not have out-of-network benefits.

### **Medicare**

Dr. Barrilleaux is on the Novitas Medicare "Opt-Out" list, which enables you to forego use of your Medicare benefits and file directly through your secondary health insurance carrier. Dr. Barrilleaux will need to verify benefits with your secondary carrier prior to initiating therapy. Per Medicare rules, a contract will be drawn up signed by both patient and provider attesting that Medicare will not be billed by either Provider or Patient. Because this process is not seamless, and sometimes proves difficult, Dr. Barrilleaux reserves the right to discontinue this agreement after 60 days, after which a different arrangement will have to be made. \* *See section entitled "Custom Agreement", on page 6 of this document.*

### **Out-of-Network Benefits**

If you are interested in using your commercial health insurance for therapy, please scan both sides of your health insurance card and email them along with your name and date of birth to Dr. Barrilleaux at [christopher4918@gmail.com](mailto:christopher4918@gmail.com) prior to making an initial appointment. He will verify your benefits, after which he will send you a return email advising you if he is able to accept assignment from your health insurance company and notify you of your cost share.

Even in the event Dr. Barrilleaux is not a participating provider on your insurance plan, you may be eligible for reimbursement if your plan has an Out-of-Network benefit. Typically, there is an out-of-network deductible which would have to be met each calendar year, after which most plans pay at a reduced rate between 50-70% of usual & customary charges. Some of the plans Dr. Barrilleaux is able to accept include Aetna PPO, Aetna POS, Cigna PPO, Cigna POS, Humana, and Gilsbar. Many self-funded plans underwritten by Aetna, Cigna, and UMR have honored out-of-network claims in the past.

Many other health insurance plans do not have out-of-network benefits, and if they do, e.g. Optum/United HealthCare, those benefits are paid directly to the enrollee. In those cases, Dr. Barrilleaux would not be able to accept direct assignment from your

insurance company, although he would be able to file your claim for you. You are responsible for paying your fee in full at the time the service is rendered according to the fee schedule. If you do not wish for Dr. Barrilleaux to file your claim for you, you will receive a detailed insurance-ready receipt to file with your insurance plan if you elect to pursue reimbursement.

***\*Dr. Barrilleaux will not file any claims directly with United HealthCare or United Behavioral Health. If you have a United plan, you are expected to pay privately for your visit, and an insurance-ready receipt will be given to you to pursue your own reimbursement.***

### **Competitive Marketplace**

If you are using your out-of-network benefits to satisfy your financial obligations for therapy, Dr. Barrilleaux may be able to assist you with lowering your cost share by treating your case financially as an in-network case, where your deductibles and copays would match the cost shares for an in-network provider. This determination will be made by Dr. Barrilleaux during screening and document verification, and a separate agreement will be drafted at the onset of treatment.

### **Health Savings Accounts (HSA)**

If you have a Health Savings Account linked to the Visa or MasterCard logo, Clinical Consultants LLC has a health provider merchant number which makes us eligible to bill your HSA for services rendered. This is yet another way to help minimize your out-of-pocket costs.

### **Health Insurance & Marriage Counseling**

Marriage counseling is **usually** not covered by health insurance because it is not medically necessary: a failing marriage is not a disease, and therefore it not medically necessary to receive therapy to improve one's marriage. There is no diagnosis that can be assigned to marriage counseling other than what is called a V-code {Partner Relationship Problem}, and V-codes are generally excluded from claim payment. ***Covered Benefits for Couple's Therapy:*** In the alternative, sometimes a client has a target clinical issue, e.g. depression, anxiety, substance abuse, anger, or mood-altering sexual proclivities, where conjoint couple therapy is indicated as a treatment modality, in which case there is a diagnosis. Understand that couple's therapy and marriage counseling are not one in the same. Dr. Barrilleaux will under no circumstances bill an insurance company for marriage counseling, even if your insurance representative tells you they will cover it. Frequently, insurance representatives confuse marriage counseling with conjoint couple therapy; but they are different.

### ***Forensic Services - Health Insurance***

Health insurance will not reimburse forensic (court-ordered) examinations.

### ***Health Savings Accounts (HSA)***

If you have a Health Savings Account linked to the Visa or MasterCard logo, Clinical Consultants LLC has a health provider merchant number which makes us eligible to bill

your HSA for services rendered. This is yet another way to help minimize your out-of-pocket costs.

### **Broken Appointment Policy**

Scheduling an appointment for psychotherapy means that Dr. Barrilleaux reserves an interval of time exclusively for you. Intervals (lengths of sessions) may vary from client to client, but typically are either 50-60 minutes, 75 minutes, or 90 minutes in length. If you cannot keep your appointment, a 48 hour advance notice is required or you will be charged for the missed session. This facilitates the doctor's ability to replace the slot originally reserved for you with someone else. The penalty will have to be satisfied prior to scheduling any future appointments. Penalties will be assessed accordingly:

48-hour notice.....0% of fee

24-hour notice.....50% of fee\*

Less than 24-hour notice.....100% of fee\*

\*In the case that Dr. Barrilleaux is able to fill the vacant slot with another client, no penalty will be assessed.

### ***Custom Agreement with Medicare Enrollee with Blue Cross Secondary***

Dr. Barrilleaux will create a Contract in the form of a Memorandum of Understanding attesting that neither he nor the patient will bill Medicare. Because Dr. Barrilleaux is on the Medicare Opt-Out list managed by Novitas, Dr. Barrilleaux will bill the Blue Cross plan directly for unbundled therapy services rendered. It is expected that Blue Cross will deny the claim the first time, after which Dr. Barrilleaux will appeal in writing. The patient will be responsible for any fees assigned to them by their secondary Blue Cross plan, which usually includes calendar year deductible, and contracted patient cost share.

*I have read and understand the fee schedule. I understand how my account will be billed. I promise to pay my cost share of the fees as discussed with Dr. Barrilleaux. I understand the Broken Appointment Policy, and agree to its terms. I also understand that if I am an insurance client and I miss my scheduled appointment, the insurance company is not liable for my appointment; in the case a penalty is charged to me because I failed to give adequate notice of a missed appointment, the regular rate (not the insurance contract rate) will be due, and I will be obliged to satisfy payment prior to rescheduling an appointment. Per the Custom Agreement with a Medicare enrollee, I understand that I will waive my Medicare benefits and authorize Dr. Barrilleaux to file directly with Blue Cross Blue Shield. I am responsible for the cost share assigned to me by my health insurance plan.*

\_\_\_\_\_  
**Client Signature**

\_\_\_\_\_  
**Date**

**Adult Client Consent  
Authorization for Treatment**

I, \_\_\_\_\_, (client), authorize Dr. Christopher Barrilleaux, DSW, MATH, LCSW-BAS of CLINICAL CONSULTANTS, LLC to enter into a professional therapeutic relationship with me and to treat me for my presenting issues, both those articulated by me and those found upon examination. I understand that counseling / psychotherapy is not an exact science and no promises have been made to me regarding the outcome of therapy. I understand that Dr. Barrilleaux is not an emergency service provider, but acknowledge that an emergency plan will be formulated at the onset of treatment if there is a crisis or one may be anticipated. I understand that psychotherapy is confidential and privileged and protected by state and federal law, but that certain duty-to-warn exceptions do exist and these and all others have been explained to me.

\_\_\_\_\_  
**Client Signature**

\_\_\_\_\_  
**Date**

**Adult Client Consent  
Release of Selected Protected Confidential Information to Collaterals**

For the purposes of scheduling appointments, and facilitating the care of an elderly person, I, \_\_\_\_\_, (client), authorize Dr. Christopher Barrilleaux, DSW, MATH, LCSW-BAS of CLINICAL CONSULTANTS, LLC to discuss my appointment dates / times with the following persons:

\_\_\_\_\_  
*Name of Person*

\_\_\_\_\_  
*Relationship*

\_\_\_\_\_  
*Telephone Number*

\_\_\_\_\_  
*Name of Person*

\_\_\_\_\_  
*Relationship*

\_\_\_\_\_  
*Telephone Number*

The particular details learned in counseling will not be shared with these individuals. The content of therapy is protected by HIPAA, Federal Law CFR Part 2 (A-E), and the Louisiana Social Work Practice Act. Only information necessary to facilitate appointment scheduling and general information regarding patient well-being will be discussed with collaterals (family members).

\_\_\_\_\_  
**Client Signature**

\_\_\_\_\_  
**Date**