

KU CHILD AND FAMILY SERVICES CLINIC
1000 Sunnyside Avenue
Dole Human Development Center, Room 2021
Lawrence, KS 66045
(785) 864-4416

FEE POLICY

Your therapist will discuss your fee with you and ask you to sign a Fee Contract which specifies the exact fee for the services you are seeking. Clinical interviews, therapy, and consultation services provided through the KU Child & Family Services Clinic are charged at the Clinic's standard fee of \$40 per 50-minute session. These rates also apply to school-based consultation services and phone calls over 30 minutes. Time spent in therapy sessions beyond the allotted 50-minutes will be charged in 15-minute increments at 25% of the rate per session. Assessment and testing services for comprehensive psychoeducational and diagnostic evaluations are also billed at the Clinic's standard fee of \$500. Assessment and testing services for adults are provided at a flat rate of \$300 for KU students and \$400 for all other students and community members. An additional fee of \$75 will apply for entrance exam (e.g., GRE, MCAT) assessments.

A portion of fees may be subsidized by the clinic based on your ability to pay (this does not apply to adult fees). Clients who wish to qualify for an adjusted fee should provide evidence of household income (via the most recent tax return or recent 3 months of pay stubs). We are not a provider of credit and therefore cannot allow a payment balance to accrue. We accept cash, credit card, check, or money order as payment for services. In some instances, we may accept payment from outside agencies for a client but need to have a Release of Information to collect information and payment. Checks and credit cards are processed through the KU financial system, but your confidential information is kept to the minimal amount necessary to process payments and to resolve any disputes.

How Will You be Billed?

Treatment sessions

- Payment for services is required for each session. Please notify the Clinic Office if appointments need to be cancelled or rescheduled. You will not be charged for sessions if you notify the Clinic office at least 24 hours in advance. **If you do not notify the clinic of a cancellation at least 24 hours before your session time, you will be charged your regular session fee.** In addition, if a client/family fails to make payment of two session fees, treatment will be suspended until payment is made or an agreement is made about the unpaid balance.

Assessment sessions

- Full payment for services is expected at the initial intake session. If the fee is not paid in full by the second session, no further sessions will be scheduled until full payment is made or an agreement about the unpaid balance is reached. All late cancellations (cancellations within 24 hours of your appointment time) and uncancelled, missed assessment sessions are charged at a rate of **\$25**, which is **charged in addition** to the basic assessment fee.

Insurance

The Clinic does not file insurance claims, but we can provide you with documentation if you would like to file a claim with your insurance company. Insurance companies vary on their reimbursement policies, and many do not cover services provided by students. Therefore, if you plan to file a claim with your insurance company to reimburse you for your out-of-pocket fees associated with services provided by the KUCFSC, please check with your insurance carrier to see if they cover our services.

What are Clinic Fees Used For?

The Clinic is self-supporting and could not operate without charging fees. Clinic fees are used towards the purchase and maintenance of office equipment, clinic furnishings, testing and training materials, and some office management salaries.

What Happens When Fees Are Not Paid?

Each Clinic client or family signs a Fee Contract that says they have agreed to pay a specific fee for services. If a family does not pay or falls behind in payments, the Clinic reserves the right to suspend services until an agreement has been reached concerning the unpaid balance. Delinquent accounts will be turned over to the University Comptroller's office for collection. If the client is a KU student, a hold will be placed on his or her grades, transcripts, and future enrollment. If a family has an unpaid balance at the conclusion of services, the Clinic will send bills via postal mail. If a previous Clinic client or family wants to resume services but has an unpaid balance, the client will need to pay off the previous balance before services can resume.

KU CHILD & FAMILY SERVICES CLINIC FEE CONTRACT

Your Name: _____ Your Child's Name: _____

I have received a full explanation of the fee policy of the KU Child & Family Services Clinic as it pertains to me and/or my child and accept the terms of the fee policy. In addition to the fees charged for therapy, assessment, and consultation sessions, fees are charged for telephone consultations and for missed appointments that are not cancelled 24 hours in advance. Payment, in the form of cash, credit card, check, or money order, is required at the time of service.

I understand that I am responsible for the prompt payment of any fees for services that I consent to and that failing to pay such fees may result in the termination of any further services to me and/or my child. If I am a KU student, a hold will also be placed on my grades, transcripts, and future enrollments until such fees are paid. If I am not a KU student, my delinquent account will be turned over to the University Comptroller's office for collection*. I understand that arrangements for payment of any unpaid balance must be made upon termination of therapy.

I understand that I may request a new Fee Contract at any time if there is a substantial change in my level of income. I also understand that the Clinic may initiate changes in the Fee Contract (for example, in the amount I am billed for services) so long as I have received 30 days prior notice as to what the change(s) will be.

CHILD TREATMENT/ASSESSMENT FEE:

Based on information provided above, THERAPY flat fee is: _____

- Fee is per 50-minute therapy session, school-based consultation, uncanceled, missed appointments or late cancellations (within 24 hours of the session time). Future therapy sessions cannot be scheduled if a balance of two payments is accrued; balance must be paid before the next session can be scheduled. Payment is due at each treatment session.

Based on information provided above, ASSESSMENT fee is: _____

- Flat fee is per assessment PLUS \$25.00 per uncanceled, missed appointments or late cancellations (within 24 hours of the session time). Full payment is due at first intake session.

ADULT ASSESSMENT FEE:

Flat fee for assessment is: _____

- Fee is \$_____ per assessment PLUS \$25.00 per uncanceled, missed appointments or late cancellations (within 24 hours of the session time). Full payment due at first intake session.
- Flat fee is \$____ + \$75 per assessment for entrance exam (e.g., GRE) PLUS \$25.00 per uncanceled, missed appointments or late cancellations (within 24 hours of the session time). Full payment due at first intake session.

An additional fee of \$30.00 will be charged for each returned check for all services.

*When an account is sent to the University Comptroller's office for collections, in addition to the outstanding balance, I agree to pay the University's costs and fees, which may be assessed late charges up to the maximum percentage permitted by law, together with all costs and expenses, including attorneys' fees and the fees of collection agencies, incurred in any litigation or collection activity resulting from my failure to pay.

I acknowledge that I have received a copy of this contract for my personal records.

Signature of Client or Guardian

Driver's License Number

Signature of Therapist/Witness

Date