


<b>Name of Policy:</b> University Counseling Center Billing for Services  <b>Policy Number:</b> 3364-101-09-01  <b>Approving Officer:</b> Chief Executive Officer, Chief Administrative Officer  <b>Responsible Agent:</b> Chair, Department of Psychiatry Administrative Director, Department of Psychiatry  <b>Scope:</b> University of Toledo Medical Center – University Counseling Center located on Main Campus		  <b>Effective date:</b> 5/2026  <b>Original effective date:</b> 5/2026	
Key words: Student, financial, counseling, insurance, fees			
<input checked="" type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

The University Counseling Center shall establish and maintain a clear policy regarding billing practices for services rendered and the provision of financial assistance for individuals seeking care. This policy will ensure transparency, accessibility, and equitable support for all clients.

(B) Purpose of policy

To ensure transparency and consistency in the billing practices for individuals receiving services at the University Counseling Center. This includes clarifying which services are covered by student fees, identifying services that may be billable to insurance, and outlining available financial assistance options for those who qualify.

(C) Definitions: For the purposes of this policy, *individual* refers to any person who seeks mental health services through the University Counseling Center. This includes currently enrolled students, faculty, staff, or other eligible members of the university community as defined by the Counseling Center’s service eligibility criteria.

(D) Scope: All individuals seeking services at the University Counseling Center, Counseling Center staff responsible for billing and financial assistance, and University administrators overseeing compliance and service delivery.

(E) Responsibilities

- (1) Counseling Center Staff: Ensure accurate billing, inform clients of costs, and assist with financial aid applications.
- (2) Billing Department: Process insurance claims and manage financial assistance documentation.
- (3) Clients: Provide accurate insurance information and communicate financial concerns.

## (F) Procedure

- (1) Any individual seeking mental health counseling at the University Counseling Center will first be scheduled an intake appointment to assess needs and what services may be appropriate to meet those needs. This will be considered a consultation appointment and is not billable.
  - (a) The individual will receive up to 6 additional consultation appointments (per academic year) following this initial intake if necessary.
  - (b) If the individual still needs ongoing mental health services following the consultation appointment(s), they will either be scheduled an assessment appointment at the center or referred to an external provider (based on need and patient preference).
- (2) When an individual is scheduled for a diagnostic assessment appointment, insurance information will be obtained and an appointment given.
  - (a) Once the diagnostic assessment is completed, the individual will be scheduled follow-up counseling appointments, as necessary.
  - (b) The assessment and ongoing therapy appointments are billed to the individual's insurance plan.
  - (c) All domestic undergraduate and graduate students taking six or more credit hours per term and international students taking one of more credit hours per term are required to maintain and provide evidence of minimum essential health care insurance coverage ([Policy 3364-40-27](#)).
- (3) The following services are fully funded by General Student Fees and provided at no additional cost to students:
  - (a) Brief individual therapy (consultation visits, short-term)
  - (b) Crisis intervention (including after-hours via crisis provider) and walk-in support
  - (c) Outreach, prevention, and wellness programming
- (4) Only services outside the scope of general fee coverage should be billed to insurance, including but not limited to the following:
  - (a) Long-term or specialized therapy
  - (b) Psychiatric evaluations and medication management
  - (c) Psychological/Neuropsychological testing
  - (d) Telehealth services
  - (e) Group counseling

