Invoices:

Invoices are distributed by the fourth working day of the new month. Invoices contain your current months detail along with any outstanding balances or credits.

1.) The first page of the invoice is a summary billing activity for all completed testing in the current month.

2.) The next page on the top right-hand side contains the following:
   a.) If there is an outstanding balance it will be displayed by the aging cycle 0-30 days, 60-90 etc.
   b.) The next field contains any patients credited to your account and any payments applied to your account.
   NOTE: If credit exists on your account from a previous overpayment or from credits applied which you requested, these are not automatically applied to your account. This is reflected by Unapplied Credit.
   c.) The next field is Subtotal: this is a subtotal of your outstanding balance (not including the current invoice).
   d.) Current charges field: charges for current month’s invoice.
   e.) Last field: Total Due Now

Payment of ‘total due now’ amount, subtract your unapplied credit before payment to avoid overpayment. If you are only paying one outstanding invoice (reflected in the aging cycle) and want to apply the unapplied credit, subtract that from the total amount due of that invoice only. When ADL receives your check, which is less than the total amount due we will apply the unapplied credit to that invoice payment.

For questions regarding Client Invoicing please contact:
Jessica Buck at 267-525-2470 extension 232.
Thank You!
Paying your Invoice:

1.) To ensure proper distribution of your payment and to avoid discrepancies between your accounting department and ADL’s accounting department, the invoice number MUST be on your check.

2.) If an invoice number is not on your check and you have not paid the full amount, the payment will be applied to your outstanding balance.

Understanding the Invoice (Why are patients listed on your invoice?):

a.) The patient’s insurance is inactive/terminated.
b.) **Your facility is paid an all-inclusive rate for the patient’s insurance.
c.) The patient is a Medicaid covered patient with a third-party liability and ADL does not have the identification number to bill.
d.) **The testing ordered is not covered by Behavioral Health.
e.) **Patient’s insurance is capitated to another lab.
f.) **Duplicate testing is ordered on the same day.
g.) ADL tried several attempts to obtain the patient’s current insurance and has been unsuccessful.
h.) Eligibility was unable to be obtained because the social security number and/or date of birth is incomplete or incorrect.
i.) Other reasons are indicated with a short message explaining why it is on your invoice.

**Note: No credit can be given for the above listed letter B, D, E or F.

Client Credits:

To request a credit please write directly on the invoice. Provide the required updated information for ADL to submit the bill:

a.) Patient’s current insurance company name.
b.) Patient’s complete insurance identification number including letters
c.) Patient’s social security number, if listed is incorrectly.
d.) Verify that the patient’s date of birth is listed correctly (if not listed please provide).
   i. Upon receipt of information ADL will check the patient’s eligibility.
   ii. ADL will check the original requisition form to ensure compliance.
   iii. If compliant information is needed you will receive a ‘missing signature letter’ or a phone call as described in the Billing Instruction Memo on our website.
   iv. If a credit is issued ADL will remove the patient from your invoice.
   v. If ADL never receives the missing compliance documents this credit will be retracted and appear on a future invoice. To avoid this retraction please provide all compliant information.
   vi. All credits will appear on your next invoice.

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Jessica Buck at 267-525-2470 extension 232.
Thank You!