

Managing Your AHDC Account

Concerning Your Account. . .

All samples submitted become the property of the AHDC upon receipt of submissions. The submitter is financially responsible for all testing requested or added to the original submission that is necessary to reach a diagnosis. The submitter agrees to the terms and conditions set forth in the *AHDC Credit and Collections Policy* (see below). The AHDC does **not** accept samples submitted by an owner where no veterinarian is involved. Any exception to this submission policy requires prior approval from the AHDC.

Payments of all charges are the responsibility of the submitting veterinarian. Charges are billed on a monthly invoice. We bill only when all of the testing on a submitted case has been finalized.

Please remit payments to the following address:

Animal Health Diagnostic Center
PO Box 6491
Ithaca NY 14851-6491

*Note: Sending your payment to the AHDC Courier or USPS address rather than to this PO Box address will significantly delay the processing of your payment. This address is to be used **ONLY** for remitting payments. **DO NOT** submit samples to this address or there will be a delay in testing!*

Be sure to return the top third of the invoice with your payment and reference your invoice number on your check to facilitate proper credit of your account. To ensure proper management of your account records, your account number *must* be used in all correspondence with the AHDC.

The AHDC Credit and Collections Policy

All AHDC invoices are due 30 days from the date of the invoice. Penalties and interest charges will be assessed on balances that are 60 days or more overdue. This arrangement accommodates the reality of the timing of bills being received by our clients and the possibility of payments not being received or posted in time to be reflected on the following month's invoice. The billing system will issue a *new* invoice number each month regardless of the nature of the balance.

Balances that are 60 days or more overdue will be subject to a 1% late payment fee that is calculated on the entire balance due on the day of billing each month; this late fee will be added to your account balance. Accounts with an outstanding balance at 75 days may be placed on Credit Hold and no pending test results will be released until the late balance is paid or a satisfactory payment arrangement has been made. A letter will be sent with the next invoice notifying you of your account status. A recommended way to avoid penalty/interest charges is to have a credit card on file with the AHDC; see the following section on the *Monthly Auto-Payment Plan* for more details.

A **Termination of Credit** letter may be sent if the outstanding balance reaches 90-days past due. All test results will be held until the account is brought current or satisfactory payment arrangements are made.

A **Final Demand** letter will be sent if your account becomes 120 days overdue. At this point you will have 10 days to pay your balance in full. If the balance is not paid in full, all pending test results will be held and your account may be forwarded to our outside collection agency. Collection fees will add between 25% and 50% to your outstanding account balance. In the event that your account is placed in this status, your privilege of utilizing the AHDC for your testing needs will be suspended and future submissions will be discarded without testing.

If you have a billing concern, please contact Billing Services at 607-253-3951 or 866-930-2432 to address it prior to the invoice due date. We can also be reached by e-mail at <ahdcbilling-mailbox@cornell.edu>.

Monthly Auto-Payment Plan

The AHDC offers our clients the convenience of enrolling in the *Monthly Auto-Payment Plan*. With this arrangement, the balance due each month is automatically charged to the credit card, providing you with additional flexibility in managing your accounts payable. To enroll, provide our Billing Services with a credit card number for charging your monthly account balance. The form for enrolling in this plan can be found on page 18. Send it to the address indicated on the form or fax it to 607-253-3907. Payments will be reflected on your monthly invoice and will be processed on the first business day following the end of each month. Should your payment be refused by your bank for any reason, a notation will be made on your invoice and an adjustment will appear on the next month's invoice. This program helps to ensure that your payment is never received late. The AHDC does not telephone program participants when the payment is refused. In the event your credit card account becomes compromised or a new expiration date is issued or you need to change the card for any reason, it is *your responsibility* to notify us of change(s).