1-877-760-5066 toll free phone

1-866-846-6977 toll free fax ajlmedbilling@bellsouth.net

Dear Patients:

I have been doing Medical Billing for over 23 years with over 15 years of IPT/Chemo successful billing and collections.

What we will do for you

- 1) If you do not already know your benefits we will call the insurance company to verify your benefits. Although what the insurance gives us for benefits is not a guarantee of payment and if they make an error on benefits or coverage is cancelled we are not responsible. Please do not call and try to explain treatment to the insurance representative, but let the biller handle this for you. If you try to contact the insurance company it may cause confusion and delay in payments.
- 2) We will present your bills to the insurance carrier in the proper format for reimbursement and you will need to allow 30 to 45 days for reimbursement. Legally the insurance has between 30/45 days before they have to process any claim.
- 3) We will do everything possible to collect your money from the insurance company
- 4) Any information released to AJL Medical Billing, Inc will be kept strictly confidential according to HIPPA compliance.

Information that we need from you:

- 1) We will need a copy of your insurance card front and back, complete address, telephone numbers and date of birth and Copies of the Bills.
- 2) If any dates of service needs to be resubmitted, needs information, or not paid correctly the explanation of benefits (EOB) will need to be mailed to us as soon as possible.

Charges:

We will bill you approximately 30 to 45 days for claims submitted. You will receive an invoice that can be paid by check. The charge is \$10.00 a week or per claim for I.V. and office visits. The charge for IPT and chemo is \$25 per treatment. The charge for blood panels is \$25 per date of service. A claim is everything done on that date of service. Please pay your bill promptly. Accounts greater than 60 days past due are subject to collection and a late fee of 25%. Patient and/or family member agree to pay all required fees for these services. Charges and fees subject to change.

AJL Medical Billing is doing work strictly for the patient and is not affiliated with any provider or medical clinic. This contract allows AJL Medical Billing and its employees to request and receive any information requested by your insurance company to get a claim paid. This contract serves as a medical release for this information to be released to AJL Medical Billing when requesting it for the purpose of collecting bills.

Indemnity/Hold Harmless: Patient/Spouse/Guardian/Power of Attorney specifically agrees to indemnify defend and hold harmless AJL Medical Billing, Inc., Patient Provider/doctor and their successors from and against any and all federal and state income taxes, FICA (social security) taxes, withholdings, claims, liens, actions, suits proceeding, costs, expense, damages and liabilities, including reasonable attorney fees arising directly or indirectly from or out of connected with or resulting from the performance by/or under this Agreement. Neither final payment by nor acceptance of the services hereunder shall constitute a waiver of this indemnity.

Signatures: If you are married, we will need to get the patient signature along with the spouse signature.

Patient Name:	Parent or Spouse Name
Patient Signature	Parent or Spouse Signature
Patient address	_Date:
City, State Zip	
Date of Birth Cell or work phone	
Male Female Email	