## **ADP** Provider Invoicing Manual



May 2024







Department of Education & Workforce

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## **Fiscal Guidance**

<u>State law</u> outlines the funding formula for the Adult Diploma Program. Funding calculation is for each eligible student enrolled in an approved institution's approved program of study based on the following formula:

(student's career pathway training program amount + student's work readiness training amount) X 1.2 for associated services

#### **Career Pathway Technical Training**

Career pathway training hours	Amount
Up to 300 hours	\$1,600
Between 301 – 600 hours	\$3,200
601 – 900+ hours	\$4,800

#### Work Readiness Skills

Grade Equivalent	Amount
≥ 9 <sup>th</sup> grade	\$750
< 9 <sup>th</sup> grade	\$1,500

#### Associated Services (additional 20 percent of total program)

Ranges between \$470 - \$1,260 Pre- and post-assessments – (e.g., TABE, WorkKeys®, etc) Counseling and advising

#### Payment Schedule – Breakdown of the three payments:

Payment	Number of Program Hours	Amount
1 <sup>st</sup> Payment	First third of Program Hours	25% of total funding
2 <sup>nd</sup> Payment	Second third of Program Hours	25% of total funding
3 <sup>rd</sup> Payment	Final third of Program Hours	50% of total funding



The following chart summarizes all invoicing.

Program hours	Grade Level funding	Total Amount	Invoice #1 1/3 hrs 25%	Invoice #2 2 <sup>nd</sup> 1/3 hrs 25%	Invoice #3 Upon Completion Final 50%
0.000	9 <sup>th</sup> grade or above	\$2820	\$705	\$705	\$1410
0-300	below 9 <sup>th</sup> grade	\$3720	\$930	\$930	\$1860
004.000	9 <sup>th</sup> grade or above	\$4740	\$1180	\$1180	\$2360
301-600	below 9 <sup>th</sup> grade	\$5640	\$1410	\$1410	\$2820
	9 <sup>th</sup> grade or above	\$6660	\$1665	\$1665	\$3330
601-900	below 9 <sup>th</sup> grade	\$7560	\$1890	\$1890	\$3780

## **Submitting Invoices for Payment**

1. Sign in to OH|ID portal. (<u>https://safe.ode.state.oh.us/portal/</u>)



The SAFE portal has now been integrated with OH|ID. In order to access your existing SAFE applications, please click the button below to access the new OH|ID platform.

Important: Your SAFE credentials will not work in the OH|ID platform.

Please create a new OHID account if you do not already have one.

OHID PORTAL

Need Help? Visit the Department of Education OH|ID Portal Help webpage for information on how to access and navigate the OH|ID portal.



2. Click the Adult Learner Web System.



3. The Dashboard will appear. Click *Select Program* in the top left.

<b>Chio</b> Departm	ent tion	Welcome : Michelle Rar 050765 - Dept Of Educat	nmel	SAFE HOME ABOUT ODE	STATE AGENCIES ONLINE SERVICES
E Select Program		Adult Da	ashboard		
	ANNOUNCEMENTS	9		TASKS IN OPEN STATUS	
			MY OPEN TASKS	~	GROUP TASKS
			1		1
FY:2017	Student Application Status	FY : 2017 Finance	Payment Status 3	FY:2017	Finance Invoice Status

4. In the window that appears on the left, click on *Adult Diploma Program*.



5. Hover over the Student Tab located in the top left of the page. Select Search Student Application.



Ohio Department of Education		Welcon 050781 -	me : BRIAN Betz Apollo Career Center	D LOGOUT	Session Timeout:00:59:18
Module: Provider Program Selected: Adult Diploma Program	DASHBOARD	PROVIDER	STUDENT FINANCE CONT	ACTS +	~
Provider Search Page					<b>v</b>

- 6. There are multiple ways to locate a student's application in order to create an invoice. First make sure the Application Period is accurate.
  - a. On the Student Search Page, type the student's first and last name. Click Search.
  - b. On the Student Search Page, enter the Application ID or Student ID. Click Search.
  - c. On the Student Search Page, click *Search* to obtain a complete student list.

NOTE: The list can be filtered by using the Application Status section located to the right.

		ADVANCED STUDENT SEARCH PAGE	
BASIC SEARCH SSID SEARCH ASS	ESSMENT SEARCH		
APPLICATION ID: STUDENT ID: SSID: FIRST NAME: LAST NAME:	APPLICATION PERIOD: APPLICATION TTPE. CURRENT GRADE LEVEL: PROVIDER NAME: PROVIDER IRN:	Adult Diploma FY 201*         An         All         Apollo Career Center         050781	APPLICATION STATUS: Accepted Awarded Correction Needed Declined Eligible Not Eligible Requirements Passed Benuberitted
DOB: DATE SUBMITTED: HAS FATAL FLAG(S): All + Search Reset	) SORT ORDER:	Date Started, Status, Name	Review Completed Started Submitted Terminated

7. Open a student application by clicking the Details button located to the far right.

<u> </u>				<b>Basic Searc</b>	h - 34 result(s) returned.					
NAME	GRADE	APP ID	PROGRAM PERIOD	STUDENT ID	PRIMARY PROVIDER IRN	PRIMARY PROVIDER	APP STATUS	DATE SUBMITTED	APP TYPE	DETAILS
Burt, Jeremiah J	**	384084	Adult Diploma FY 2018	204749	050781	Apollo Career Center	Accepted	9/19/2017	N	7 0
Niyonkunda, Adeline Linn	**	384083	Adult Diploma FY 2018	204748	050781	Apollo Career Center	Accepted	9/19/2017		Ø
Lowe, Tara	**	385059	Adult Diploma FY 2018	136677	050781	Apollo Career Center	Accepted	3/5/2018	New	9
Address 1	**	005404	Adult Distance DV 0040	005000	000704	A	A	0/40/0047	N	6

## A student's application must be in the Accepted status to create an invoice.

8. Click on View Finance Details.



	ID: 384084	Nam	e: Jeremiah J Burt	Period: Adult Diploma F	Y 2018 Type: N	ew Statu	us: Accepted	View Finance Details
Viewing S	tudent: 1 of 34							Back to student search result
STUDE		CATION	GRADUATION REQUIREMENTS	STUDENT SUCCESS PLAN	ASSESSMENT	DOCS	STATUS / FLAGS	COMMENTS / HISTORY
		_						

9. Click Add New Invoice under the Invoice Tab.

INVOICE ACCOUNT SUMMARY PAYMENT	FINANCE DOCS FINANCE C	OMMENTS		
Invoice Information 🔢 💩				
Scholarship: 3/17/2017 - 12/31/2017	Total Allocated: \$3,720.00	Total Invoiced: \$0.00	Total Paid: \$0.00	Total Remaining: \$3,720.00
* - indicates Invoice is an Adjustment				
INVOICE NAME APP PROGRAM NUMBER ID PERIOD	PROVIDER PROVIDER STATUS	BILLING DATE CYCLE SUBMITTED	REQUESTED ODE APPROVE AMOUNT AMOUNT	ED TO BE PAID (OR) GOTO PRINT REFUNDED
Add New Invoice Print Invoice Summary				Previous Page 1 of 0 Next

10. A pop-up window will open. Click Add Course to begin selecting courses the student has completed.

	Invoice X
it	Invoice Number: 0       Provider: Apollo Career Center         Enrollment: 3/17/2017 - 12/31/2018       Student Name: Torres, Lucila
ic	
	Course Type Course Name Start Date End Date Credits Amount Course Name Add Course
D)	CLICK HERE TO VIEW DETAILS
	Amount to be paid by ODE for this Invoice \$0.00
23	NOTE: ** Total amount requested this Invoice is less than the total available amount

11. Select the *Course Type* and *Course Name*. Enter the start date and end date of the program. The hours for each course pre-populate. Add as many courses necessary to reach the minimum hours required for the invoice.

Save Course					×
Course Type	Course Name	Start Date	End Date	Hours	Amount
Required Course	Operating Systems     Connectors and Computer Components     Security & Best Practices	05/02/2017	05/26/2017	15	
	Networking, Sharing, & Storage Basic IT Literacy MS Word Basics			Save Course	Cancel
ment	Creating/Editing Letters Creating Simple Reports				
2 8	Working With Tables Using Mail Merge	RRENT INVOICE STATE	US:		0.00

12. After selecting a course, click *Save* located on the bottom left. This will display a message that includes the minimum number of hours required to submit the invoice. Add courses as needed. Click *Save*, then click *Submit*.



Cou	rse Type	C	ourse Name	Start Date	End Date	Hours	Edi	Delete
Require	d Course	Operating Systems		5/2/2017	5/26/2017	15	Ø	
Require	d Course Sec	urity & Best Practic	es	5/2/2017	5/26/2017	10	()	Û
			Total co	ompleted co	urse hours:	25		
Minimum required course hours to	submit this invoice: 3	0 hours						Add Course
Comments 👔 🛎							IERE TO V	IEW DETAIL
Add Comment			NOTE: ** Tota amount	al amount re	quested this Im	voice is less	than the to	tal available
History 👔 💩	< - Started		CURRENT IN Started UPDATE INV Submit or <u>Cancel</u>	IVOICE ST. d VOICE STAT	ATUS: FUS TO:			

Note: Validation error -If the provider tries to submit the invoice without minimum-required course hours, the following error message will occur.

quired Course 5. V	Vorkplace Terminology	12/14/2015	12/24/2015	2.5	Ø	
quired Course	6. Prescriptions	12/14/2015	12/23/2015	2.5	Ø	Î
urs to submit this invoice	The course should be eith two thirds of the course si invoice. Proor or Allendance docu	ner completed in fi hould be complete ment is required t	ull or atleast or ed before subn o soomic me m	ne third or nitting this tvoice.	× TO V an the	Add Course
				Ok	]	
۵ 					_	

**NOTE:** The provider can choose to submit one invoice for payment once the adult learner passes WorkKeys, career field training, and required credential(s) OR may submit up to three invoices as described on page one and summarized at the top of page two of this manual. **Only one invoice can be started/open at a time.** 



13. Under the Finance Docs Tab, upload the required documents as follows:

1<sup>st</sup> invoice – Transcript

2<sup>nd</sup> invoice – Transcript and WorkKeys scores

Final Invoice – Final transcript and Proof of Credential attainment

**NOTE**: If you submit only *one* invoice, upload the Official transcript, final WorkKeys scores, and Proof of Credential Attainment.

INVOICE ACCOUNT SUMMARY PAYM	ENT FINANCE DOCS	FINANCE COMMENTS			
DOCUMENTS:	DOCUMENTS	DN FILE:			* - View Document 🔋 - Delete Document
Proof of Attendance Final Transcript Proof of WorkKeys post-assessment scores Proof of Credential exam results	NAME	ТҮРЕ	DATE	REQUIRED (Select Refresh	REVIEW V D Refresh Save

Validation error – If the provider has not uploaded the required documentation, such as the transcript, the following error message will occur.

to submit this invoice: 16.	67 hours
P	roof of Attendance document is required to submit the Invoice.
	Ок
	Started
n051359 scholar - Started	UPDATE INVOICE STATUS TO:

14. Go to the Invoice Tab and open the started invoice by clicking on the Details button under GOTO.



Program Information	}												
Program Selector 051359 - Penta Career Select Another Progr	ed: Adult Diplon Center am or Org	na Progr	am										
ID: 18	55200 Name: MA	RY BRYA	NTI					Period: Adult E	)iploma FY 2016 Type: F	irst Year Applications St	atus: Accepted	Viev	/ Student App
					V	lewing Student: 1 c	of 1						
	T SUMMARY PAYN	AENT FI	NANCE DOCS FINANCE	COMMENTS									
Scholarship: 12/14/2	2015 - 6/30/2016		Т	otal Allocated: \$3,72	0.00	Tot	tal Invoiced: \$1,162.5	60	Total Paid: \$0.00	Total Rer	maining: \$2,557.50		
• - indicates Invoice is a	n Adjustment				2 invoice(s) returned	. Total Requeste	d: \$1,162.50, Total	Approved: \$1,162.50					
INVOICE NUMBER	NAME	APP ID	PROGRAM PERIOD	PROVIDER IRN	PROVIDER	STATUS	BILLING CYCLE	DATE SUBMITTED	REQUESTED AMOUNT	ODE APPROVED AMOUNT	TO BE PAID (OR) REFU	NDED GOTO	PRINT
3052	BRYANT, MARY	155200	Adult Diploma FY 2016	051359	Penta Career Center	Submitted	FY Year 2016	12/14/2015	\$310.00	\$310.00	\$310.00	Ð	8
3053	BRYANT, MARY	155200	Adult Diploma FY 2016	051359	Penta Career Center	Submitted	FY Year 2016	12/14/2015	\$852.50	\$852.50	\$852.50	Ð	8
Add New Invoice	Print Invoice Summary										Previous	Page 1 of 1	Next

15. After all required documents are uploaded, change the status from *Started* to *Submitted* on the Invoice Tab to submit the invoice to the Department of Education for review.

			Total completed course hours:	90	
Minimum required cour	se hours to submit this in	voice: 30 hours			Add Course
Comments 💵 📕				CLICK HERE	TO VIEW DETAI
Comments M		Am	ount to be paid by ODE for this Invoid	ce in the second se	\$3,720.0
Add Comment					
History 👔 🐻	Barry Blank - Started	CU OP	RRENT INVOICE STATUS: Started DATE INVOICE STATUS TO:		
			or Cancel Invoice		

16. ASSESSMENT TAB (on Student side of application)- Complete ONLY when a student has obtained the required WorkKeys scores, passed all coursework, and earned the required Industry credential(s).



APPLICATION       GRADUATION REQUIREMENTS       STUDENT SUCCESS PLAN       ASSESSMENT       DOCS       STATUS / FLAGS       COMMENTS / HIST         Student Information       Primary Provider:       050781, Apollo Career Center       DOB:       03/02/1983         Current Grade Level:       Not Specified       Gender:       M         SSID:       Ethnicity:       White, Non-Hispanic         Submitted Document Type:       NONE         Credentials:         Credential       TEST DATE       TEST SCORE       STATUS       ACTIONS         EPA 608 Technician Certification       Correction Needed       Submit       Image: Correction Needed       Image: Correction Needed	ing Student: 1 of 34	. Seleman o Burt	r enou. Aduit Dipioma r	T 2010 Type. New		Back to stu	udent search
Student Information         Primary Provider:       050781, Apollo Career Center       DOB:       03/02/1983         Current Grade Level:       Not Specified       Gender:       M         SSID:       Ethnicity:       White, Non-Hispanic         Submitted Document Type:       NONE         Student's Credentials:         Credential       TEST DATE       TEST SCORE       STATUS         ACTIONS         EPA 608 Technician Certification       Correction Needed       Submit< (*)       (*)		GRADUATION REQUIREMENTS	STUDENT SUCCESS PLAN		CS STATUS / FLAGS	COMMEN	ITS / HISTOR
Primary Provider:       050781, Apollo Career Center       DOB:       03/02/1983         Current Grade Level:       Not Specified       Gender:       M         SSID:       Ethnicity:       White, Non-Hispanic         Submitted Document Type:       NONE         Student's Credentials:       TEST DATE       TEST SCORE       STATUS       ACTIONS         EPA 608 Technician Certification       Correction Needed       Submit       Image: Correction Needed       Image: Correction Needed	Student Information						
Current Grade Level:       Not Specified       Gender:       M         SSID:       Ethnicity:       White, Non-Hispanic         Submitted Document Type:       NONE         Student's Credentials:         Credential       TEST DATE       TEST SCORE       STATUS         EPA 608 Technician Certification       Correction Needed       Submit 🖉 🇊	Primary Provider:	050781. Apr	ollo Career Center	DOB:	03/02/1983		
SSID:     Ethnicity:     White, Non-Hispanic       Submitted Document Type:     NONE         Student's Credentials:         Credential       TEST DATE     TEST SCORE       STATUS     ACTIONS       EPA 608 Technician Certification     Correction Needed	Current Grade Level:	Not Specifie	d	Gender:	M		
Student's Credentials:       Credential       TEST DATE       TEST SCORE       STATUS       ACTIONS         EPA 608 Technician Certification       Correction Needed       Submit       Image: Correction Needed       Image: Correction Needed	SSID: Submitted Document Type:	NONE		Ethnicity:	White, Non-Hispanic		
Student's Credentials:       TEST DATE       TEST SCORE       STATUS       ACTIONS         EPA 608 Technician Certification       Correction Needed       Submit       Image: Contraction Needed       Image: Contraction Needed							
Credential         TEST DATE         TEST SCORE         STATUS         ACTIONS           EPA 608 Technician Certification         Correction Needed         Submit         Image: Correction Needed         Image: Correction Needed <td< td=""><td>Student's Credentials:</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	Student's Credentials:						
EPA 608 Technician Certification Correction Needed Submit 🖉 🧃	Creder	itial TES	DATE TEST SCORE	STATUS	ACTIONS		
	EPA 608 Technic	an Certification		Correction Ne	eded Submit	1	Ì
	Add New						

a. Click the Edit Icon.

TUDENT APPLICATION GRADU		SUCCESS PLAN	SSESSMENT DOCS	STATUS / FLAGS	COMMENTS /
Student Information Primary Provider: Current Grade Level: SSID: Submitted Document Type:	050781, Apollo Career Ca Not Specified NONE	enter	DOB: Gender: Ethnicity:	03/02/1983 M White, Non-Hispanic	1
Student's Credentials:					
Credential EPA 608 Technician Certific	TEST DATE	TEST SCORE	STATUS Correction Neede	ACTIONS ed Submit	Ø Û

b. Enter the date date and score. (If the test is pass/fail, enter 100 for passing.)

Student's Credentials:			4.1		
Credential	TEST DATE	TEST SCORE	STATUS	ACTIONS	
EPA 608 Technician Certification \$	06/20/2018	88	Correction Needed	Submit	a 9 🗊
			1		

c. Click the Save Icon.

Student's Credentials:					
Credential	TEST DATE	TEST SCORE	STATUS	ACTIONS	
EPA 608 Technician Certification \$	06/20/2018	88	Correction Needed	Submi	Û
Add New					

#### d. Click Submit. \_

Credential	TEST DATE	TEST SCORE	STATUS	ACTION	
EPA 608 Technician Certification \$	06/20/2018	88	Correction Needed	Submi	Î



Add New

e. Click OK on the pop-up window to confirm you wish to Submit.



#### f. The Status will change to Approved.

NOTE: For the system to change the student's status to *Requirements Passed*, the credential status must be Approved.

Student's Credentials:				
Credential	TEST DATE	TEST SCORE	STATUS	ACTIONS
Ohio Department of Health State Tested Nurse Assistant	03/19/2018	84	Approved	No Action Available

## **Review by the Ohio Department of Education Program Office**

Once the provider submits the invoice, the Ohio Department of Education reviews the invoice and the required documents. If approved, the Department of Education will change the status to review completed and will accept the invoice. If there are any issues or questions, the Department of Education will contact the provider via email or phone.

Program Information Program Selected: Adult Diploma Program Select Adult Diploma Program Select Another Program or Org												
ID: 155200 Name: MARY BRYANT I Period: Adult Olploma FY 2016 Type: First Year Applications Status: Accepted View Student Apr									Student App			
					Viewing Student: 1 of 1							
*-indicate Invoice is an Adjustment 4 invoice(s) returned. Total Requested: \$3,720.00, Total Approved: \$3,720.00												
INVOICE NUMBER	NAME APP	ID PROGRAM PERIOD	PROVIDER IRN	PROVIDER	STATUS	BILLING CYCLE	DATE SUBMITTED	REQUESTED AMOUNT	ODE APPROVED AMOUNT	TO BE PAID (OR) REFUND	ED GOTO	PRINT
3052 BR	RYANT, MARY 155	Adult Diploma FY 2015	051359	Penta Career Center	Review Completed	FY Year 2016	12/14/2015	\$310.00	\$310.00	\$310.00		8
3053 BR	RYANT, MARY 155	Adult Diploma FY 2015	051359	Penta Career Center	Review Completed	FY Year 2016	12/14/2015	\$852.50	\$852.50	\$852.50	0	8
3054 BR	RYANT, MARY 155	Adult Diploma FY 2016	051359	Penta Career Center	Review Completed	FY Year 2016	12/14/2015	\$852.50	\$852.50	\$852.50	0	8
3055 BR	RYANT, MARY 155	Adult Diploma FY 2016	051359	Penta Career Center	Review Completed	FY Year 2016	12/14/2015	\$1,705.00	\$1,705.00	\$1,705.00	0	
Print Invoice Summary										Previous P	age 1 of 1	Next



## **Student Role in Processing Invoices**

The adult learner no longer is required to accept invoices.

## **Graduating a Student**

After the final invoice is accepted, the Department of Education will move the student application to *Requirements Passed*. The print function for the high school diploma is now active. The provider accesses the Diploma from the Graduation Requirements Tab in the student's application.

The student's graduation date is the date that the Department of Education changes the status to *Requirements Passed*.

								-		
ID: 155200 Name: M	ARY BRYANTI					Per	iod: Adult Diploma FY 2016 Type: New	Status: Req	uirements Passed	View Finance Detai
	Viewing Student: 1 o	of 1								Back to student search res
TUDENT APPLICATION GRADUA	TION REQUIREMENTS	STUDENT SUCCESS	PLAN ASSESSMENT	DOCS	STATUS / FLAGS	COMMENTS / HISTORY				
Student first entered 9th grade year: 1987 Highest grade completed: 8	2		Last academ Name of the	ic year com last school ;	pleted: 1982 attended: East toledo	Jr. High			CURRENT STATUS: FINALIZED	
Content Courses	Required	Passed	Elective Courses		Required	Passed	Assessment Passage	Summa	y:	
1. Safety and Housekeeping	2.5	1	No Electives				Pharmacy Technician Certification		Hours	Passed
2. The Pharmacy	2.5	~					Board- Pharmacy Technician Certification Required	Content	Courses: 50.0	0.0
3. The Pharmacy Technician	2.5	1						Elective	Courses: 0.0	0.0
4. Drug Regulation and Control	2.5	1						Total:	50.0	0.0
5. Workplace Terminology	2.5	1							0.1.51	<b>2</b>
6. Prescriptions	2.5	4						Required	Credentials	Passed 1
7. Calculations/ Mathematics	2.5	~								
8. Routes and Formulations	2.5	1								
9. Compounding	2.5	4								
10. Parenteral, Compounding Sterile Formulas	2.5	2								
11.Basic Bio-pharmaceutics	2.5	1								
12. Factors Affecting Drug Activity	2.5	1							Print Diplon	na
13. Sources of Workplace Information	2.5	4								
14. Inventory Management	2.5	4								
15. Financial Issues	2.5	1								
16. Community Pharmacy	2.5	4								
17. Hospital Pharmacy	2.5	×								
18. Other Pharmacy Environments	2.5	4								
19. Common Drugs and Their Uses	2.5	4								

## **Reviewing Existing Invoices**

There are three ways to access an existing invoice:

1. When reviewing a student application and invoices, make sure the correct Application Period is selected in the dropdown box.

Select the student and click on View Finance Details.

Program Information Module: Student Program Selected: Adult Diploma Program 050781 - Apollo Career Center Select Another Program or Org							
ID: 329982       Name: Lucila Torres       Period: Adult Diploma FY 2017       Type: New       Status: Accepted       View Finance Details         Viewing Student: 2 of 42       View Finance Details       Base to student search row as							
STUDENT APPLICATION GRADUATION REQUIREMENTS	STUDENT SUCCESS PLAN	ASSESSMENT	DOCS	STATUS / FLAGS	COMMENTS / HISTORY		

Under the Invoice Tab, you can view any invoice that has been processed for the student.



	ID: 329982	Name: Luc	ila Torres	s P	eriod: Adult Diploma FY 2	017 Type: First Year Applications	Status: Accepted	View Student App
Viewing Stu	dent: 1 of 1							
INVOICE	ACCOUNT		AYMENT	FINANCE DOCS	FINANCE COMMENTS			
	_							

#### 2. Finance Search

Hover over the Finance Tab. Click Finance Search.

Provider	Finance 🔫	Admin 🗢	Report	Contacts 🗢
	Finance Se	arch 🚽	-	
Program Information	Invoice Sea	arch		
Module: Provider	Refund Pay	ment		
Program Selected Select Another Program	Payment Se	earch	am	

You can search an invoice via *Finance Search* by APP ID or the student's name. Make sure to select the appropriate Application Period.

	STUDENT FINANCE SEARCH PAGE	
BASIC SEARCH		
-		
APPLICATION ID:	APPLICATION PERIOD: Adult Diploma FY 2017 🗘	
SSID:	PROVIDER NAME:	
FIRST NAME:	PROVIDER IRN:	
LAST NAME:		
DOB:		
Search Reset		

#### 3. Invoice Search

Hover over the Finance Tab. Click Invoice Search.

Provider $\bigtriangledown$ Student $\bigtriangledown$	Finance 🔫	Admin 🗢	Report	Contacts 🗢		
	Finance Se	arch				
Program Information	Invoice Search					
Module: Provider	Refund Pay	ment				
Select Another Program	Payment So	earch	am			



You can search an invoice via *Invoice Search* by APP ID, the student's name or by Status. Make sure to select the appropriate Application Period.

			OL INVOICE OLANOIT AGE	
				INVOICE STATUS:
APPLICATION ID:		APPLICATION PERIOD:	Adult Diploma FY 2017 📀	Adjustment Resubmitted
SSID:		BILLING CYCLE:	All	Adjustment Submitted
DOB:		PROVIDER NAME:		Invoice Accepted
FIRST NAME:		PROVIDER IRN:		Invoice Approved
LAST NAME:				Invoice On Hold Invoice Rejected
INVOICE ID:				Rejected Review Completed
SORT ORDER:	Status, Name ᅌ			Started
Search Reset				
-				

# The Department's <u>Notice of Non-Discrimination</u> applies to all programs and activities.

## **Contact Information**

For questions regarding the Adult Diploma Program, please contact:

#### **Dean Scheiderer**

Education Program Specialist Adult Diploma Program 614-387-2254 Dean.scheiderer@education.ohio.gov

