

AADL RESPIRATORY BENEFITS PROGRAM

AUTHORIZATION USER GUIDE

November 2022



ONLINE AUTHORIZATION AND CLAIMS SUBMISSION

Convenient service, delivered through an easy-to-use, secure website
provider.ab.bluecross.ca/health

Introduction 3

- Registering for site access 3
- Getting started online 3

Submitting and processing an authorization 4

Accessing reports..... 8

- Authorization history report—provider or patient search 8
- Authorization history report—reference number search 9
- Authorization history report—print summary 9

Additional information 10

- Technical information 10
- We’re serious about privacy and security 10
- Contact us 10

Introduction

Alberta Blue Cross® is pleased to offer online authorization and claim submission for Alberta Aids to Daily Living (AADL) respiratory benefits providers. This convenient service is delivered through an easy-to-use secure website and is available at no cost to respiratory providers across Alberta. Online submission provides the convenience of direct billing for eligible services for your customers with coverage through the AADL program. You are assured of a prompt response directly from Alberta Blue Cross.

Registering for site access

To register for online authorization submission, you must complete the **request for secure website access** webform. Details about completing this form can be accessed through our public website at ab.bluecross.ca.

The Provider Services AADL team at Alberta Blue Cross will create your website access based on your completed registration form. To protect your security, a login ID and temporary password will be sent in 2 separate emails to the email address provided on your registration form. Once you have received both of these emails, you can begin serving your patients through online authorization and claim submissions.

Getting started online

Please refer to the information in the emails Alberta Blue Cross sends you when your initial registration is approved. These emails will contain your login ID and temporary password. Navigate to the Alberta Blue Cross AADL website at provider.ab.bluecross.ca/health and enter the login ID and password in the applicable fields. You will be asked to agree to the **website policy and online billing agreement**, set up your 2 “reminder questions” and change your temporary password. This information will be used to verify your identity if you forget your password or require information about your account. Subsequent sign-ins will only require your login ID and password.

Authorizing online is quick, easy and secure.

After validating a patient’s identity, you simply submit the authorization for processing. Within seconds of submission, results are displayed. The transaction is then complete.



If you have questions about a screen, click on the blue button with a question mark. The help button has answers to questions that are frequently asked about the section.

Submitting and processing an authorization

Step 1: Navigate to the “Enter authorization” menu option and enter the patient’s personal health number and birth date. Then click “Search”.

ALBERTA BLUE CROSS® Health provider | [Contact us](#) | [Help](#) | [Sign out](#)

Overview **Enter authorization** Enter claim Upload claim file Reports Resources Your profile

AADL Respiratory Benefit Provider

Enter authorization request

- Enter patient

Personal health number

Date of birth(YYYY-MM-DD)

Step 2: Select the “Benefit type”, “Authorization type” and “Practitioner” for the authorization submission. Depending on the authorization selected, you may be asked to provide the medical rationale by checking all appropriate options.

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Overview **Enter authorization** Enter claim Upload claim file Reports Resources Your profile

AADL Respiratory Benefit Provider

Enter authorization request

Enter details

Patient information

Name	Taylor Doe
Personal Health Number	858811120

Authorization details

Benefit type

Authorization type

Practitioner [Add Practitioner](#)

[Practitioner Details](#)

Step 3: You will be provided with a list of documents required for the specific authorization being requested. Mandatory documents will be indicated with a red asterisk. Select each box and provide the corresponding documentation.

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Overview Enter authorization Enter claim Upload claim file Reports Resources Your profile

AADL Respiratory Benefit Provider

Enter authorization request

Enter details - RH1 authorization

Patient information

Name	Taylor Doe
Personal Health Number	858811120

Documentation details ⓘ

Please select each supporting document in your possession and enter any corresponding values.
* denotes a mandatory supporting document

- Respiratory Setup Assessment *
- Arterial Blood Gas (ABG) *
- Physician/Nurse Practitioners Prescription *
- Oximetry Test Printout with date and time *
- Client Declaration Form *

Comments

[Back](#) [Cancel](#) [Next](#)

Step 4: As prompted, enter any additional details specific to the authorization selected.

Documentation details ⓘ

Please select each supporting document in your possession and enter any corresponding values.
* denotes a mandatory supporting document

- Respiratory Setup Assessment *
Setup assessment date
- Arterial Blood Gas (ABG) *
ABG Test Date
PaO2 at rest
- Physician/Nurse Practitioners Prescription *
- Oximetry Test Printout with date and time *
Oximetry Test Date
SpO2
- Client Declaration Form *
 Patient has provided an expiry date

Comments

[Back](#) [Cancel](#) [Next](#)

Step 5: You will be asked to upload the documents you have selected. These can be added individually or in a single file, depending on your records.

Click **“Choose File”** and select the file. For each file, you have the option to add additional comments. Click **“Upload”** and the file will be added to the summary table. You have the option to remove any files that were mistakenly uploaded.

Once all files have been uploaded, click on **“Process authorization”** and confirm patient consent in the pop-up window. Click **“OK”** to proceed.

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Overview Enter authorization Enter claim Upload claim file Reports Resources Your profile

AADL Respiratory Benefit Provider

Upload supporting document

Supporting document required for further review

Patient information

Name	Taylor Doe
Personal Health Number	858811120

Supporting documentation ⓘ

You have indicated that you have the following documents. Please upload them for further review.

- Respiratory Setup Assessment
- Arterial Blood Gas (ABG)
- Physician/Nurse Practitioners Prescription
- Oximetry Test Printout with date and time
- Client Declaration Form

File: Choose File | No file chosen

Comment: [Text area]

Upload

File	Comment
No documents uploaded	

Back Cancel Process authorization

Message from webpage

?

I have a completed Client Declaration Form in my possession or I have notified the client that their personal information is being collected and used by Alberta Health for the purpose of obtaining an AADL benefit. The information on this form is being collected and used by Alberta Health pursuant to sections 20, 21 and 22 of the Health Information Act, sections 33 and 34 of the Freedom of Information and Protection of Privacy Act (FOIP) and the Alberta Aids to Daily Living and Extended Health Benefits Regulations. For concerns regarding the collection of personal information contact, Information and Training Coordinator, AADL Program, Alberta Health 780-427-0731 or TELUS House 13th Floor, 10020 100 Street NW, Edmonton, Alberta, T5J 0N3.

Alberta Blue Cross's privacy policy which governs our collection, use and disclosure of personal information (including personal health information) is available on our website at www.ab.bluecross.ca. If you have any questions about Alberta Blue Cross's privacy policy, please contact our Privacy Officer, Alberta Blue Cross, Blue Cross Place, 10009-108 Street, Edmonton, AB T5J 3C5. Ph: 780-498-7302

Press "OK" if you agree or "Cancel" to reconsider.

OK Cancel

Step 6: You will receive a confirmation from Alberta Blue Cross within seconds of your submission. This will indicate whether your authorization request has been approved, rejected or pended for further review.

A printable copy of the authorization results is available by clicking *"Print"*.

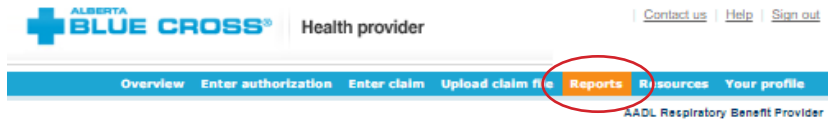
The screenshot displays the Alberta Blue Cross Health provider portal. At the top left is the Alberta Blue Cross logo. To its right, the text "Health provider" is visible. Further right are links for "Contact us", "Help", and "Sign out". Below this is a navigation bar with tabs: "Overview", "Enter authorization" (highlighted in orange), "Enter claim", "Upload claim file", "Reports", "Resources", and "Your profile". Below the navigation bar, the text "AADL Respiratory Benefit Provider" is displayed. The main content area is titled "Authorization results". A box contains the following information:

Authorization status : Approved
Patient name: Taylor Doe
PHN: 858811120
Reference number: 142751989
Authorization type: RH1 authorization
Effective date: 2022/09/28
Termination date: 2022/12/27

Below the box is a "Print" button, which is circled in red in the original image.

Accessing reports

Navigate to the **“Reports”** menu option. This screen allows you to pull up all authorizations for either a specific individual or submitted by your account.

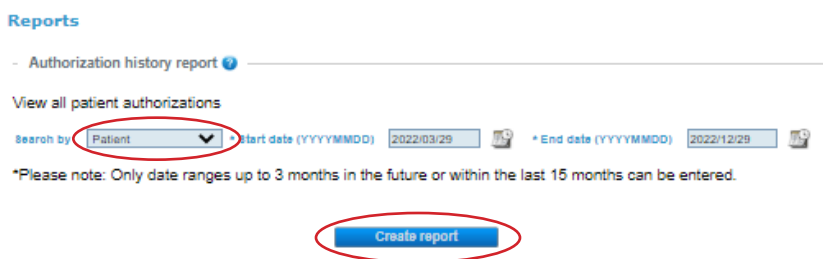


Authorization history report—provider or patient search

To search by provider, select **“Provider”** in the drop-down menu. Enter a start and end date for the authorization history you wish to display (these dates must be within the previous 15 months).

To search by patient, select **“Patient”** in the drop-down menu. Enter a start and end date for the authorization history you wish to display (these dates must be within the previous 15 months). When prompted enter the patient’s personal health number and date of birth.

All authorizations which are active or were submitted within the specified time are listed on a printer-friendly screen. Reference numbers, authorization types, effective and termination date as well as the status are all available for your reference.



Respiratory benefits program Reports Authorization history report

Details

Hide details

Reference number	PHN	Patient	Type	Effective date (YYYY/MM/DD)	Termination date (YYYY/MM/DD)	Status	Action
142751989	858811120	Doe, Taylor	RH1	2022/09/28	2022/12/27	Approved	View

Authorization history report—reference number search

To search by reference number, select **“Reference number”** in the drop-down menu and enter the authorization reference number.

Please note this will yield results for only this specific authorization.

Reference number, authorization type, effective and termination date as well as the status are all available for your reference.

Reports

Authorization history report

View all patient authorizations

Search by **Reference number** * Reference number

Print summary

By clicking on **“View”** in the summary table, you will see a printable version of the authorization. A printable copy of the report results is available by clicking the **“Print”** command.

Respiratory benefits program Reports

Authorization history report

Details

Hide details

Reference number	PHN	Patient	Type	Effective date (YYYY/MM/DD)	Termination date (YYYY/MM/DD)	Status	Action
142751989	858811120	Doe, Taylor	RH1	2022/09/28	2022/12/27	Approved	View

Authorization results

Authorization status : Approved

Patient name: Taylor Doe
PHN: 858811120
Reference number: 142751989
Authorization type: RH1 - AADL Authorization
Effective date: 2022/09/28
Termination date: 2022/12/27

Additional information

Technical information

Using the Alberta Blue Cross AADL website, an internet connection and your browser, you can submit authorizations online at your convenience. Most computer systems today have everything required to use this website successfully.

We're serious about privacy and security

The confidentiality of your records is very important—to you, and to us. You are responsible for your login ID and password. They are intended for your office's use only. We protect your information in various ways, including

- encrypting all information;
- securely delivering your login ID and password;
- denying access to website users after 5 consecutive, unsuccessful sign-in attempts;
- automatically signing site users out after 30 minutes of inactivity; and
- requiring written authorization before granting access to the Alberta Blue Cross AADL website.

Contact us

For more information about access to the Alberta Blue Cross AADL website, contact the Alberta Blue Cross AADL team.

PHONE

587-756-8629 (Edmonton and area)
1-888-828-8738 (toll free, all other areas)

EMAIL

HealthServicesAADLINquiries@ab.bluecross.ca

provider.ab.bluecross.ca/health

The online claims submission system is available Monday to Sunday, 8 a.m. to 9:30 p.m. MT. Our regular office hours are Monday to Friday, 8:30 a.m. to 5 p.m. MT.

