



# AADL Audiology benefits program

## authorization and claim user guide



### online claims submission

*... convenient service, delivered  
through an easy-to-use secure website*

[provider.ab.bluecross.ca/health](http://provider.ab.bluecross.ca/health)

July 2022

# AADL Audiology benefits program: authorization and claim user guide

## Introduction

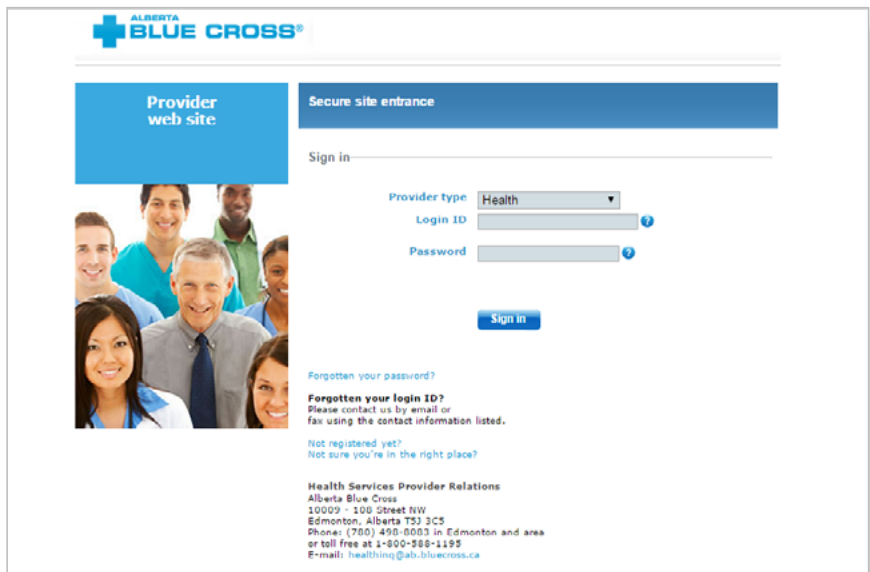
Alberta Blue Cross® is pleased to offer online authorization and claim submission for AADL Audiology benefits providers. This convenient service is delivered through an easy-to-use secure website and is available at no cost to audiology providers across Alberta. Online submission provides the convenience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

When submitting claims online, this service will predetermine the patient's coverage and confirm

- the amount Alberta Blue Cross will pay to your office, and
- the amount you will need to collect from the patient.

## Registering for site access

To register for online authorization and claims submission, you must complete the Request for Secure Web Site Access web form. Details about completing this form can be accessed through our public website at [ab.bluecross.ca](http://ab.bluecross.ca).

The screenshot shows the 'Secure site entrance' for the 'Provider web site'. It features a 'Sign in' section with a 'Provider type' dropdown menu set to 'Health', and input fields for 'Login ID' and 'Password'. A 'Sign in' button is located below these fields. To the left of the sign-in area is a blue box with the text 'Provider web site' and a photo of a diverse group of healthcare professionals. Below the sign-in area, there are links for 'Forgotten your password?', 'Forgotten your login ID?', and 'Not registered yet?'. At the bottom, contact information for 'Health Services Provider Relations' is provided, including the address, phone number, and email.

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 two separate emails to the email address provided on your registration form. Once you have received both 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 contain your login ID and temporary password. Navigate to the Alberta Blue Cross AADL website at [provider.ab.bluecross.ca/health](https://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 two “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.

If you want payments to be deposited directly into your bank account, please complete the banking information located under “**Your profile**” in the provider portal.

## Authorizing and claiming online is quick, easy and secure!

Authorizing and claiming online is quick, easy and secure. After validating a patient’s identity and predetermining results, simply submit the authorization or claim for processing. Results are displayed within seconds of submission. The patient will be required to pay only the portion not covered under the AADL plan. The transaction is then complete.



### Help

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



# Easy steps to accessing the patient inquiry screen

- 1 Navigate to the **"Patient Inquiry"** menu option and enter the patient's Personal Health Number and birth date. Then click **"Search"**.

The screenshot shows the top navigation bar of the Alberta Blue Cross Health provider portal. The 'Patient inquiry' menu option is highlighted with a red circle. Below the navigation bar, the 'Patient inquiry' section is visible, featuring input fields for 'Personal health number' and 'Date of birth (YYYY-MM-DD)', and a 'Search' button highlighted with a red circle.

- 2 Confirm the patient's information and address. To update the patient's address, select **"Update address"**.


The screenshot shows the 'Patient inquiry' section of the Alberta Blue Cross Health provider portal. The 'Patient information' section is displayed, showing details for Jane Doe, including her personal health number (987654321), date of birth (1975-07-17), age category (Adult), residential address (10009 100 ST NW, EDMONTON, AB T5J3C5, Canada), phone number (780-498-8000), and residency code (Private (Home/Apartment)). The 'Update address' button is highlighted with a red circle.

- 3 The patient inquiry screen will list
  - the patient's current AADL status, indicating if they are eligible for AADL benefits or if the coverage has ended;
  - the patient's cost share status for the previous, current and future benefit year;
  - extended seniors hearing aid coverage; and
  - the maximum amount of coverage for hearing aids that the patient is eligible for under AADL.

The screenshot shows the 'Status' section of the Alberta Blue Cross Health provider portal. The 'Status' section is displayed, showing the patient's current status as 'Active'. Below this, the 'AADL cost share status' section is visible, showing the patient's cost share status for the previous, current and future benefit year. The 'Update address' button is highlighted with a red circle.

4

You can also search the patient's product consumption by selecting the benefit type, product category and product.

Health provider

[Contact us](#) [Help](#) [Sign out](#)

[Overview](#) [Patient inquiry](#) [Enter authorization](#) [Enter claim](#) [Reports](#) [Resources](#) [Your profile](#)

AADL Hearing Provider

### Patient Inquiry

Patient information

Patent name

Jane Doe

Personal health number

987654321

Date of birth[YYYY-MM-DD]

1975-07-17

Age category

Adult

Residential address

10009 108 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number

780-498-8000

Residency code

Private (Home/Apartment)

Care of

Mailing address

10009 108 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number

780-498-8000

Care of

Update address

Status

Status

Active

AADL cost share status

Benefit year ending 2020-06-30

Cost share

Benefit year ending 2021-06-30

Cost share

Benefit year ending 2022-06-30

Cost share

Extended seniors hearing aid coverage

Benefit year ending 2020-06-30

Benefit year ending 2021-06-30

Benefit year ending 2022-06-30

Maximum hearing aids funded

Quantity

0

Product consumption

Benefit type

- Please choose one -

Product category

- Please choose one -

Product

- Please choose one -

Clear

Search

# Easy steps to submitting and processing an authorization

- 1 Navigate to the “**Enter authorization**” menu option and enter the patient’s Personal Health Number and birth date. Then click “**Search**”.

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Overview Patient inquiry **Enter authorization** Enter claim Reports Resources Your profile

AADL Hearing Provider

Enter authorization request

Enter patient

Personal health number

Date of birth(YYYY-MM-DD)

Clear Search

- 2 Confirm patient’s address. To update the patient’s address, select “**Update**”. If the information is correct and no updates are required, click “**Next**”. If a patient does not have an address in the system, you will be asked to update the patient’s address.

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Overview Patient inquiry **Enter authorization** Enter claim Reports Resources Your profile

AADL Hearing Provider

Enter authorization request

Confirm patient address

Patient information

Name Jane Doe

Personal Health Number 987654321

Residential address ?

Address 10009 108 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number 780-498-8000

Residency code Private (Home/Apartment)

Care of

Mailing address ?

Address 10009 108 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number 780-498-8000

Care of

Update Cancel Next

- 3 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 Patient inquiry **Enter authorization** Enter claim Reports Resources Your profile

AADL Hearing Provider

Enter authorization request

Enter details

Patient information

Name Jane Doe

Personal Health Number 987654321

Authorization details ?

Benefit type - Choose one -

Authorization type - Choose one -

Practitioner - Choose one - Add Practitioner

Practitioner Details

Back Cancel Next

- 4 You will be asked to answer questions to determine eligibility. All the questions that appear are mandatory and must be answered.

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Overview Patient inquiry Enter authorization Enter claim Reports Resources Your profile

AADL Hearing Provider

### Enter authorization request

Enter details

**Patient information**

Name	Jane Doe
Personal Health Number	987654321

**Authorization details**

Benefit type: Hearing Aid Device

Authorization type: HA Purchase Right

Practitioner: Test Authorizer [Add Practitioner](#)

[Practitioner Details](#)

**Additional information**

Patient has permanent hearing loss as defined in AADL policy ☐ Yes ☐ No

Patient confirms they do not have coverage under other sources of funding (NIHB, WCB, DVA, RCMP, Armed Forces, Corrections, Third party insurance, MVAC) ☐ Yes ☐ No

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

- 5 A listing of possible documentation types will display based on the authorization selected. Check the boxes next to each document type that you will be submitting for review, along with any document details requested, such as dates or specific values. You also have access to a comments section if you would like to provide any additional details on the documents.

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Overview Patient inquiry Enter authorization Enter claim Reports Resources Your profile

AADL Hearing Provider

### Enter authorization request

Enter details - HA Purchase Right authorization

**Patient information**

Name	Jane Doe
Personal Health Number	987654321

**Documentation details**

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

☐ Audiogram \*

☐ Student Enrolment Letter

☐ Client Declaration Form \*

**Comments**

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



6 You will be asked to upload the documents that you have selected. These can be added individually or in a single file, depending on your records. Click **"Browse"** 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 which 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 Patient inquiry Enter authorization Enter claim Reports Resources Your profile

AADL Hearing Provider

### Upload supporting document

Supporting document required for further review

**Patient information**

Name: Jane Doe  
Personal Health Number: 987654321

**Supporting documentation**

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

- Audiogram
- Client Declaration Form

File: [Browse] 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](http://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]

7 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 pending for further review.

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Overview Patient inquiry Enter authorization Enter claim Reports Resources Your profile

AADL Hearing Provider

### Authorization results

**Authorization status : Approved**

**Patient name:** Jane Doe  
**PHN:** 987654321  
**Reference number:** 112276936  
**Authorization type:** HA Purchase Right  
**Effective date:** 8/17/2020  
**Termination date:** 2/16/2021

[Print]



8

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

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Overview Patient inquiry Enter authorization Enter claim Reports Resources Your profile

AADL Hearing Provider

### Authorization results

**Authorization status :** Approved

**Patient name:** Jane Doe  
**PHN:** 987654321

**Reference number:** 112276936  
**Authorization type:** HA Purchase Right  
**Effective date:** 8/17/2020  
**Termination date:** 2/16/2021

Print

# Easy steps to submitting and processing a claim

- 1 Navigate to the “Enter claim” menu option and enter the patient’s Personal Health Number and date of birth. Then click “Search”.

The screenshot shows the 'Enter claim' form in the Alberta Blue Cross Health provider portal. The top navigation bar includes 'Overview', 'Patient inquiry', 'Enter authorization', 'Enter claim' (highlighted), 'Reports', 'Resources', and 'Your profile'. The 'Enter claim' section has a sub-header 'Enter patient' with two input fields: 'Personal health number' and 'Date of birth (YYYY-MM-DD)'. Below these fields are 'Clear' and 'Search' buttons. The 'Search' button is circled in red.

- 2 If you wish, you can add your invoice number.

- 3 Enter the claim details by selecting the appropriate benefit type, product category, product, practitioner, body side (dependent on the product selected), date of service, quantity, total cost, serial number (dependent on the product selected) and warranty end date (dependent on the product selected). Once you click “Add claim,” you will see the product appear in the summary table. Repeat these steps for each product being considered.

**Please note:** When claiming for repairs, you’ll be asked to provide the serial number for the current device. If the device is replaced as part of the repair, please add in the replacement serial number to ensure the patient’s record is updated.

The screenshot shows the 'Enter details' form in the Alberta Blue Cross Health provider portal. The top navigation bar is the same as the previous screenshot. The 'Enter details' section has a sub-header 'Enter details' and a 'Patient information' section with 'Name' and 'Personal Health Number' fields. Below this is an 'Invoice details' section with an 'Invoice number' field. The 'Claim details' section contains several dropdown menus and input fields: 'Benefit type' (Hearing Aid Device), 'Product category' (Hearing Aid Service), 'Product' (In-house RIC receiver repair), 'Practitioner' (Please choose one - Add Practitioner), 'Body side' (Please choose one -), 'Service date (YYYY-MM-DD)', 'Quantity' (0), 'Total cost(\$)' (0), 'Serial number', 'Warranty end date (YYYY-MM-DD)', and 'Replacement serial number'. At the bottom are 'Add claim' and 'Cancel' buttons.

- 4 When you are satisfied with the details entered, click **"Predetermine"**.

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[Overview](#) [Patient inquiry](#) [Enter authorization](#) **Enter claim** [Reports](#) [Resources](#) [Your profile](#)

**Enter claim**  
**Enter details**

**Patient information**

Name Jane Doe  
Personal Health Number 987654321

**Invoice details**

Invoice number

**Claim details**

Benefit type  Service date (YYYY-MM-DD)   
Product category  Quantity   
Product  Total cost(\$)   
Practitioner   
[Add Practitioner](#)

[Add claim](#)

Service date	Product	Practitioner	Body side	Serial number	Warranty end date	Quantity	Total cost(\$)
2020-08-17	Behind-the-ear hearing aid	Test Authorizer	Right	123456789	2025-08-17	1	1200.00
<b>Total</b>							<b>\$1,200.00</b>

[Cancel](#) [Predetermine](#)

- 5 Predetermine is a simple inquiry into the patient's AADL benefit plan to determine available coverage. You can click **"Modify"** to go back to step 3, **"Cancel"** to exit without saving or **"Process claim"** to submit the claim online to Alberta Blue Cross for immediate processing.

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[Overview](#) [Patient inquiry](#) [Enter authorization](#) **Enter claim** [Reports](#) [Resources](#) [Your profile](#)

**Enter claim**  
**Predetermine**

**Patient information**

Name Jane Doe  
Personal Health Number 987654321

**Summary**

**Predetermination results as of Sep 15, 2020 10:24:50 AM MDT Mountain Daylight Time**

Please note that eligibility of coverage may change based on the date of service, change in benefit, maximum being reached, coordination of benefits or coverage terminates.

Total amounts submitted:	\$1,200.00
AADL will pay:	\$900.00
Patient will pay:	\$300.00

**\*This is not a receipt\*. Your claim has not been submitted.  
Please click the Modify, Cancel, or Process claim button at the bottom of this page.**

**Details**  
[Show details](#)

**Patient:** Jane Doe  
**Service provider:** AADL Hearing Provider

Service date (YYYY/MM/DD)	Product	Practitioner	Claimed amount	AADL contribution	Patient cost share portion	Patient upgrade charge	Explanation number
2020/08/17	Behind-the-ear hearing aid	Test Authorizer	1,200.00	900.00	300.00	0.00	
<b>Total</b>			<b>\$1,200.00</b>	<b>\$900.00</b>	<b>\$300.00</b>	<b>\$0.00</b>	

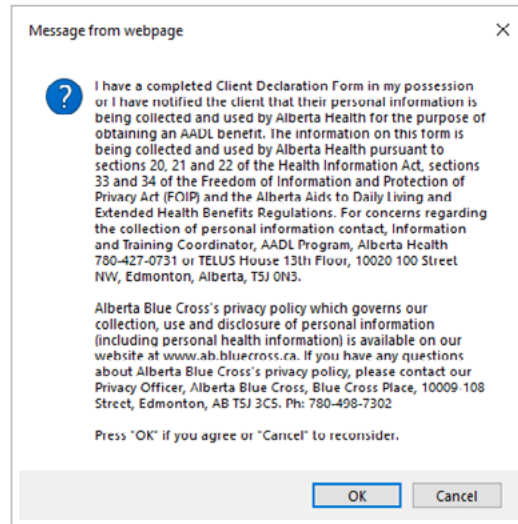
**Explanations**  
[Click here to print](#)

[Modify](#) [Cancel](#) [Process claim](#)

6 Confirm patient consent in the pop-up window. Click **"OK"** to proceed.

7 Once you process the claim, you will receive a confirmation from Alberta Blue Cross within seconds of your submission.

8 A printable copy of the patient's *Claim Statement* displays. Click **"Print"**. You must provide the patient with a printed copy of the *Claim Statement* and the *Amplification Device Funding Letter*.



ALBERTA BLUE CROSS® Health provider

Contact us Help Sign out

Overview Patient inquiry Enter authorization Enter claim Reports Resources Your profile

You must provide the patient with a printed copy of this claim statement. Please click below to print.

[Print Alberta Blue Cross Statement](#)

ALBERTA BLUE CROSS®

Date: September 19, 2020  
Document number: 112278994

**We're here to help!**  
Edmonton and area (780)498-8000  
Calgary and area (403)234-9666  
Toll free 1-800-661-6995  
8:30 a.m. - 5 p.m. MT  
[www.ab.bluecross.ca](http://www.ab.bluecross.ca)

Patient Name: Doe, Jane  
Personal Health Number 987654321

**Health claim summary**

Total amount claimed	\$1,200.00
AADL will pay	\$900.00
Patient will pay	\$300.00

**Details**  
Each claim you submit is assessed according to the benefit rules under the Alberta Aids to Daily Living Program.

Patient: Jane  
Provider: AADL Hearing Provider

Service date (YYYY/MM/DD)	Product or service	Practitioner	Claimed amount	AADL contribution	Patient cost share portion	Patient upgrade charge	Explanation number*
2020/08/17	Behind-the-ear hearing aid	Test Authorizer	1,200.00	900.00	300.00	0.00	
Total			\$ 1,200.00	\$ 900.00	\$ 300.00	\$ 0.00	

*Please retain for your records*

# Easy steps to accessing reports

- 1 Navigate to the “**Reports**” menu option. This screen allows you to view all authorizations and claims for a specific individual or those submitted through your account.

The screenshot shows the Alberta Blue Cross Health provider portal. The top navigation bar includes 'Overview', 'Patient inquiry', 'Enter authorization', 'Enter claim', 'Reports' (highlighted with a red circle), 'Resources', and 'Your profile'. Below the navigation bar, the 'Reports' section is active, showing 'Authorization history report' and 'View all patient authorizations'. Search filters for 'Patient', 'Start date' (2020/02/05), and 'End date' (2020/11/05) are visible. A 'Create report' button is at the bottom.

- 2 For an authorization history report by patient, select patient from the drop-down menu. Enter a start and end date for the claim information you wish to display (up to a maximum of the last fifteen months and three months into the future), then click “**Create report**”.

This screenshot shows the same portal as the previous one, but with the 'Search by' dropdown menu set to 'Patient' and the 'Create report' button highlighted with a red circle. The date range is still 2020/02/05 to 2020/11/05.

- 3 Once the report is created, enter the patient’s Personal Health Number and date of birth.
  - a. All authorizations that are active or were submitted for the selected individual within the specified time are listed on a printer-friendly screen. Reference numbers, authorization types, effective and termination dates, as well as the status, are all available for your reference.
  - b. To access a printable version of the authorization, click “**View**” in the summary table.

The screenshot shows the 'Authorization history report' table. The table has columns for Reference number, PHN, Patient, Type, Effective date, Termination date, Status, and Action. A 'View' button is highlighted in the Action column for the first row. Below the table, a note states: '\* This authorization was previously self-submitted.'

Reference number	PHN	Patient	Type	Effective date (YYYY/MM/DD)	Termination date (YYYY/MM/DD)	Status	Action
112276936	987654321	Doe, Jane	HA Purchase Right	2020/08/17	2021/02/16	Approved	<a href="#">View</a>

4

For an authorization history report by provider, select provider from the drop-down menu. Enter a start and end date for the claim information you wish to display (up to a maximum of the last fifteen months and three months into the future), then click **"Create report"**.

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

b. To access a printable version of the authorization, click **"View"** in the summary table.

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Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### Authorization results

**Authorization status : Approved**

**Patient name:** Jane Doe  
**PHN:** 987654321

**Reference number:** 112276936  
**Authorization type:** HA Purchase Right  
**Effective date:** 8/17/2020  
**Termination date:** 2/16/2021

**Print**

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

Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### Reports

- Authorization history report

View all patient authorizations

**Search by** **Provider** Start date(YYYYMMDD) 2020/02/17 End date(YYYYMMDD) 2020/11/17

\*Please note: Only date ranges up to 3 months in the future or within the last 15 months can be entered.

**Create report**

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

Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### AADL Hearing Reports

**Authorization history report**

- Details

**Hide details**

Reference number	PHN	Patient	Type	Effective date (YYYY/MM/DD)	Termination date (YYYY/MM/DD)	Status	Action
* 112276936	987654321	Doe, Jane	HA Purchase Right	2020/08/17	2021/02/16	Approved	<b>View</b>

\* This authorization was previously self-submitted.

5

Alberta Blue Cross will make payments to your office once daily. The Outstanding Payment Report lists all transactions that are remaining to be paid and allows you to cancel a claim.

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Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### Authorization results

**Authorization status : Approved**

**Patient name:** Jane Doe  
**PHN:** 987654321

**Reference number:** 112276936  
**Authorization type:** HA Purchase Right  
**Effective date:** 8/17/2020  
**Termination date:** 2/16/2021

[Print](#)

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Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### Reports

- Authorization history report ⓘ

View all patient authorizations

Search by  Start date(YYYYMMDD)  End date(YYYYMMDD)

\*Please note: Only date ranges up to 3 months in the future or within the last 15 months can be entered.

[Create report](#)

- Outstanding payment report ⓘ

View all claims remaining to be paid as of September 11, 2020

[Create report](#)

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Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

### AADL Hearing Reports

**Outstanding payment report**

Provider of service  [Need help cancelling a claim? ⓘ](#)

- Details

[Hide details](#)

Service date YYYY/MM/DD	Patient name	Product or service	Amount claimed(\$)	AADL contribution(\$)	Document number	Action
2020/08/17	Doe, Jane	Behind-the-ear hearing aid	1,200.00	900.00	112278994	<a href="#">View</a> <a href="#">Cancel</a>
<b>Total</b>			<b>\$1,200.00</b>	<b>\$900.00</b>		

[Click here to print](#)



- 6 To cancel a claim, click the **"Cancel"** hyperlink. If the hyperlink is inactive, either the payment run is in progress or the document has exceeded the cancellation timeframe and the claim cannot be cancelled online.

ALBERTA BLUE CROSS® Health provider

Overview Patient inquiry Enter authorization Enter claim **Reports** Resources Your profile

AADL Hearing Provider

AADL Hearing Reports  
Outstanding payment report

Provider of service AADL Hearing

Need help cancelling a claim?

Details

Hide details

Service date YYYY/MM/DD	Patient name	Product or service	Amount claimed(\$)	AADL contribution(\$)	Document number	Action
2020/08/17	Doe, Jane	Behind-the-ear hearing aid	1,200.00	900.00	112278994	<a href="#">View</a> <a href="#">Cancel</a>
Total			\$1,200.00	\$900.00		

[Click here to print](#)

- 7 If you choose to cancel a claim, you will be asked for the reason. A drop-down menu lists the common reasons. If you select other, please provide the reason. When cancelling a claim, all claims associated with the document number must be cancelled.

ALBERTA BLUE CROSS®

**Cancellation Review**

Please review claims listed below. Enter a cancellation reason and press the Ok button to submit for cancellation. If you no longer wish to cancel the claims listed below, press the Back button.

Details

Need help cancelling a claim?

Service date YYYY/MM/DD	Patient	Service	Amount claimed(\$)	Alberta Blue Cross paid(\$)	Document number
2020/08/17	Doe, Jane	Behind the ear hearing aid	1,200.00	900.00	112278994

Cancellation reason

Select one:  
Additional services provided  
Claim entered in error  
Other

Ok

- 8 Once the transactions have been paid, they will be removed from the Outstanding Payment Report and will appear on the Payment History Report. You can view payment history for the last six months.

**Payment history report**

To access your provider summary and claim statement, select the EFT payment date from the below drop-down menu.

Payment Date Choose one

Create summary Export summary

To access payment history, please select a start and end date.

Start date(YYYYMMDD) 2020/09/19 End date(YYYYMMDD) 2020/09/19

\*Please note: Only date ranges within the previous 6 months can be entered.

Create report Export report

- 9 To view a printable version of a summary of a particular payment, select the payment date and click **"Create summary"**. Alternatively, you can enter a start and end date to see a printable report of all payments within the specified dates.

**Payment history report**

To access your provider summary and claim statement, select the EFT payment date from the below drop-down menu.

Payment Date Choose one


Create summary Export summary

To access payment history, please select a start and end date.

Start date(YYYYMMDD) 2020/09/19 End date(YYYYMMDD) 2020/09/19

\*Please note: Only date ranges within the previous 6 months can be entered.

Create report Export report



**ALBERTA**  
**BLUE CROSS**


**Payment History Report**  
 for July 11, 2020 - September 11, 2020

**AADL Hearing Provider**  
 10019 - 160 50 NW  
 Edmonton, AB, T5J2C5

**Provider of service: AADL Hearing**

Service date (YYYY-MM-DD)	Patient (YYYY-MM-DD) PYN	Product or service	Amount claimed(\$)	AADL contribution (\$)	Patient cost share portion(\$)	Patient upgrade charge(\$)	Document number	Invoice number	Authorization reference number
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Create claim statement


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## Reports

### Patient claim statements

Please note: Only claim statements obtained by the patient within the last year will appear.

Enter patient

Personal Health Number

Date of birth(YYYY MM DD) 


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## 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 five 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 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](https://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.

