



# AADL Audiology benefits program

## authorization 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

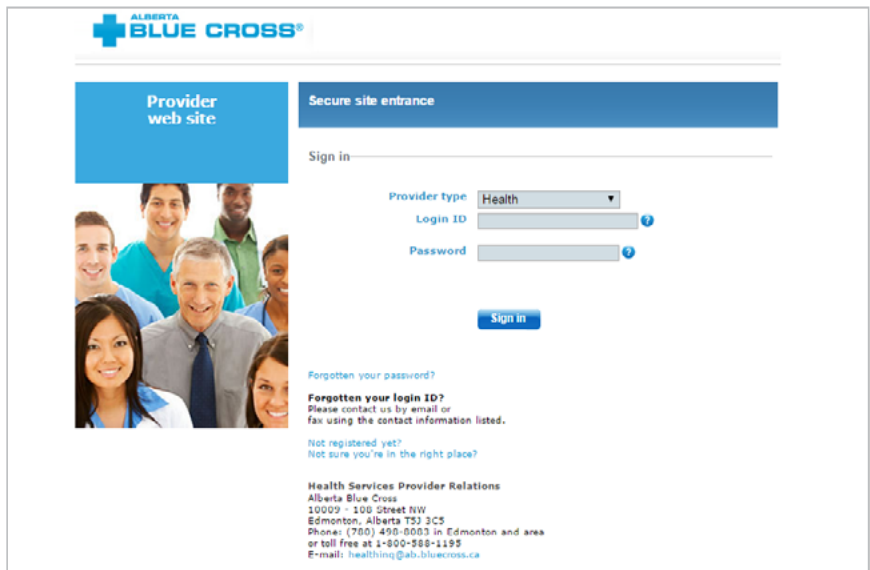
# AADL Audiology benefits program: authorization user guide

## 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.

## 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 site 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 form with fields for 'Provider type' (set to 'Health'), 'Login ID', and 'Password'. A 'Sign in' button is located below the password field. To the left of the form is a photo of a diverse group of healthcare professionals. Below the sign-in form, there are links for 'Forgotten your password?', 'Forgotten your login ID?' (with instructions to contact via email or fax), 'Not registered yet?', and 'Not sure you're in the right place?'. At the bottom, contact information for 'Health Services Provider Relations' is provided, including the address (10009 - 100 Street NW, Edmonton, Alberta T5J 3C5), phone numbers ((780) 450-0003 or toll-free 1-800-568-1195), and email (healthing@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 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 Web Site 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.

## Authorizing online is quick, easy and secure!

Authorizing and online is quick, easy and secure. After validating a patient's identity, simply submit the authorization for processing. Results are displayed within seconds of submission. 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 with the following options: Overview, **Patient inquiry** (highlighted with a red circle), Enter authorization, Enter claim, Reports, Resources, and Your profile. Below the navigation bar, the "Patient inquiry" section has input fields for "Personal health number" and "Date of birth(YYYY-MM-DD)". A red circle highlights the "Search" button at the bottom right.

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


The screenshot shows the "Patient inquiry" screen with the following patient information: Patient 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, Mailing address: 10009 108 ST NW, EDMONTON, AB T5J3C5, Canada, Phone number: 780-498-8000, Residency code: Private (Home/Apartment), Care of: [blank]. A red circle highlights the "Update address" button at the bottom right.

- 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 "Patient inquiry" screen with the following patient information: Patient 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, Mailing address: 10009 108 ST NW, EDMONTON, AB T5J3C5, Canada, Phone number: 780-498-8000, Residency code: Private (Home/Apartment), Care of: [blank]. A red circle highlights the "Update address" button at the bottom right. Below the patient information, the "Status" section shows "Status: Active". The "AADL cost share status" section shows "Benefit year ending 2020-06-30: Cost share", "Benefit year ending 2021-06-30: Cost share", and "Benefit year ending 2022-06-30: Cost share". The "Extended seniors hearing aid coverage" section shows "Benefit year ending 2020-06-30", "Benefit year ending 2021-06-30", and "Benefit year ending 2022-06-30". The "Maximum hearing aids funded" section shows "Quantity: 0".

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 ⓘ

Benefit name

Jane Doe

Personal health number

987654321

Date of birth (YYYY-MM-DD)

1975-07-17

Age category

Adult

Residential address

10009 106 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number

780-468-8000

Residency code

Private (Home/Apartment)

Care of

Mailing address

10009 106 ST NW  
EDMONTON, AB T5J3C5  
Canada

Phone number

780-468-8000

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

4

# 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**”.

ALBERTA BLUE CROSS® Health provider

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

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.

ALBERTA BLUE CROSS® Health provider

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

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.

ALBERTA BLUE CROSS® Health provider

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

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

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

ALBERTA BLUE CROSS® Health provider

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.

ALBERTA BLUE CROSS® Health provider

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 now 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.

ALBERTA BLUE CROSS® Health provider

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

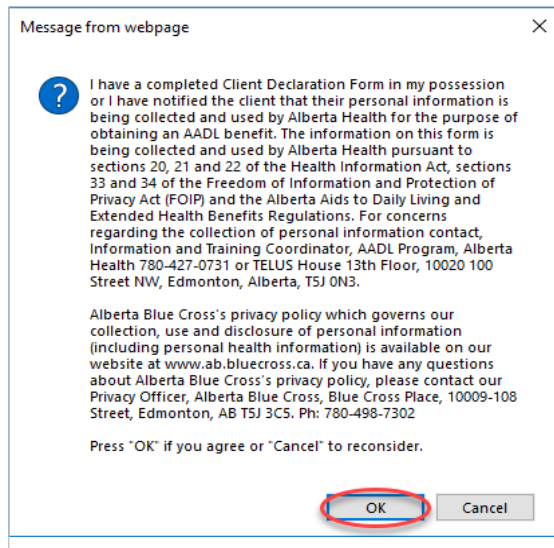
File	Comment

[Browse](#)

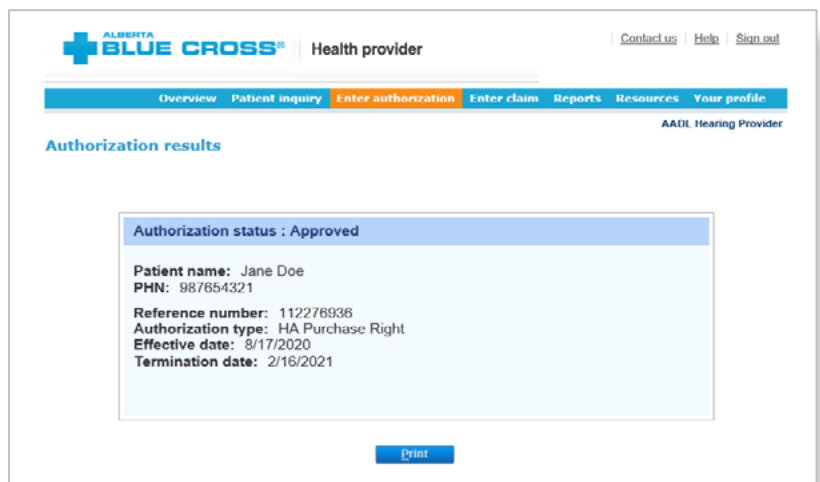
[Upload](#)

[Back](#) [Cancel](#) [Process authorization](#)

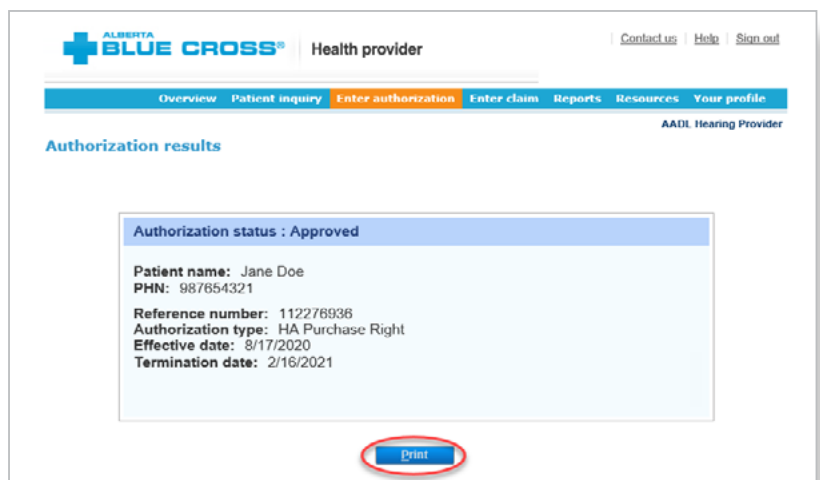




- 7 You will receive a confirmation from Alberta Blue Cross within seconds of your submission. This will indicate whether your authorization request has been approved, rejected or pended for further review.



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





# 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.

ALBERTA BLUE CROSS® Health provider

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

AADL Hearing Provider

Reports

Authorization history report

View all patient authorizations

Search by Patient Start date(YYYYMMDD) 2020/02/05 End date(YYYYMMDD) 2020/11/05

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

Create report

- 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**”.

ALBERTA BLUE CROSS® Health provider

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

AADL Hearing Provider

Reports

Authorization history report

View all patient authorizations

Search by Patient 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

- 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.

ALBERTA BLUE CROSS® Health provider

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	2020/05/17	2021/02/16	Approved	View

\* This authorization was previously self-submitted.

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.

ALBERTA BLUE CROSS® Health provider | Contact us | Help | Sign out

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.

ALBERTA BLUE CROSS® Health provider | Contact us | Help | Sign out

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**

## Technical information

Using the Alberta Blue Cross AADL website, an Internet connection and your browser, you can submit authorizations and claims 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, you can 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 authorization 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.

