



### PROVIDER USER GUIDE—ONLINE CLAIMS SUBMISSION

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| We're serious about privacy and security |        |
| Contact us                               |        |





# Introduction

Alberta Blue Cross® is pleased to offer online claims submission for health services providers. This convenient service is delivered through an easy-to-use secure website and is available at no cost to health providers across Alberta.

Online submission provides the convenience of direct billing for eligible services for patients, who are eligible for coverage under the Alberta Retinal Treatment Program. This program is sponsored by the Government of Alberta and administered by 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, if applicable.

## **Registering for site access**

To register for online claims submission, you must complete the online request form for secure website access at **ab.bluecross.ca**.

The Provider Agreements and Administration 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 these emails, you can begin serving your customers through online claims submission.

# **Getting started online**

Navigate to the Online Health Provider login page at http://provider.ab.bluecross.ca/health. Select *Health* from the *Provider Type* dropdown, enter the login ID and password and select *Sign in*.

You will be asked to agree to the Website Policy and Online Billing Agreement, to update your banking information, to set up your two reminder questions and to 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.

When you log in for the first time, you will also be prompted to update your banking information. This direct deposit function ensures all the payments can be seamlessly deposited into your bank account.

**Claiming online is quick, easy and secure.** After validating a patient's identity and predetermining

results as confirmed by the patient, you simply submit the claim for processing. Within seconds of submission, results are displayed.

The patient will be required to pay only the portion not covered under their benefit plan. The transaction is then complete.

**Click here** for a video tutorial of the Online Health Portal.



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.

# **Updating banking information**

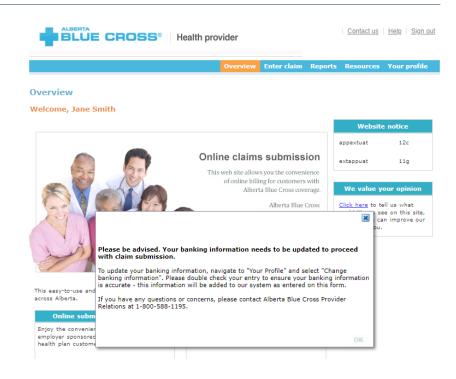
## Step 1:

# Banking information notification

When you login to the Online Health Portal for the first time, you will be prompted to enter your banking information before proceeding to claim submission.

#### Note:

Please confirm your bank account details with your banking institution before moving onto the next step.



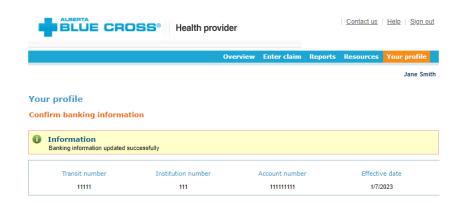
# Step 2: Update banking information

Update the Transit, Institution and Account numbers as confirmed by your banking institution. Enter these numbers again to verify there are no errors. Select "Update".

| BLUE CRO                  | BLUE CROSS® Health provider          |               |             | Contact us   Help   Sig |              |  |
|---------------------------|--------------------------------------|---------------|-------------|-------------------------|--------------|--|
|                           | Overview                             | Enter claim   | Reports     | Resources               | Your profile |  |
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| our profile               |                                      |               |             |                         |              |  |
| nange banking informati   | on                                   |               |             |                         |              |  |
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# Step 3: Banking information confirmation

Once the banking information is saved, you will be shown an **Information** text notification that confirms your banking information has been updated successfully. You will also receive an email on your registered email address confirming the changes to your account.



# Submitting and processing a claim

### Step 1:

### **Enter the patient's information**

Navigate to the *Enter claim* menu option and enter the patient's Personal Health Number and patient's date of birth. Then select "Search".

### Note:

Any dates, such as service or birth dates, can be entered with or without a slash between numbers. The system will accept both formats. This applies to all screens.

## Step 2:

### Confirm the patient's name

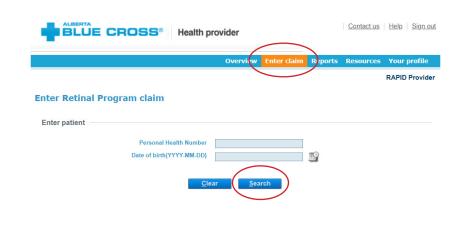
It is automatically displayed on the claim entry screen after the search in Step 1.

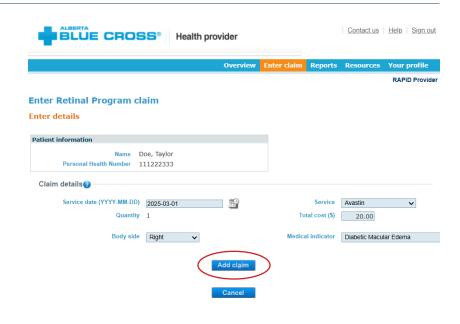
# Step 3: Enter details

Enter the service date, service type and cost. You may also be required to select the body side and medical indicator from the dropdown menu. Then select "Add claim". Repeat these steps for each service being entered.

### Note:

There may be some circumstances when a claim cannot be processed electronically. For example, if you have exceeded the claiming period for online submission, you will receive a notification on this screen. When this occurs, contact Alberta Blue Cross directly for assistance.



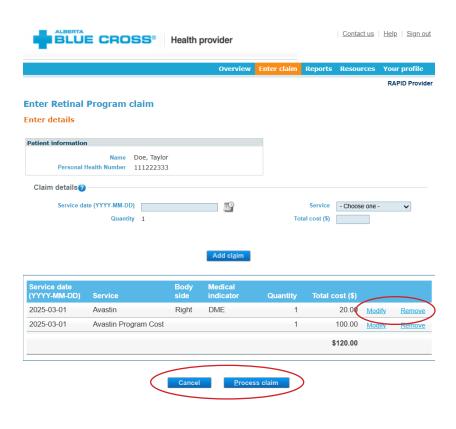


# Step 4:

You can select *Modify* to go back or *Remove* to remove the individual entry.

Select "Cancel" to exit the overall claim without saving.

Select "Process claim" to submit the claim online. Once the claim is submitted, a Health Claim Statement will be displayed.



# WASTAGE FEE CLAIM SUBMISSIONS

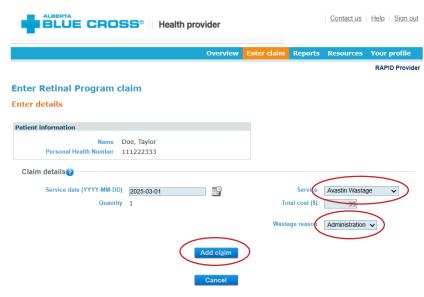
# Wastage charges associated with patient

For the first six months you are enrolled in the program, costs associated with wastage during preparation or administration of eligible products or services can be claimed under the patient's personal health number.

Simply choose "Wastage" as the type of service, choose a "Wastage reason" and select "Add claim".

#### Note

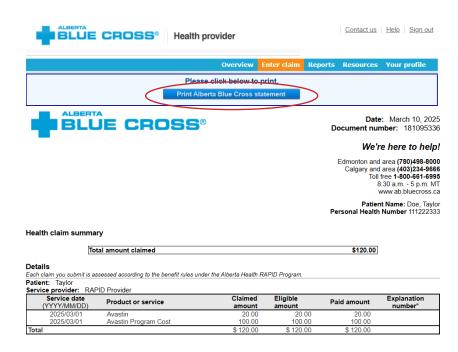
Wastage charges incurred after six months from the date you enrolled in the program will not be eligible.



# Step 5: Claim statement

The patient's Health Claim Statement is displayed. To print the same, select "Print Alberta Blue Cross statement".

To access and print claim statements at a later date, please refer to the next section.



**Provider Copy Only** 

Please retain for your records

# **Accessing reports**

**Retinal services reports** 

Outstanding payment report 2

View all claims remaining to be paid as of March 10, 2025

Start date (YYYYMMDD) 2025/02/10

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

Navigate to the "Reports" menu option. This screen allows you to pull up all claims that are awaiting payments, history of settled claims and individual statements.



# Outstanding payment report

This report lists all transactions that are awaiting payments. The report also gives you an option to cancel a claim.

**Payment history report** 

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Once the transactions have been paid, they will be removed from the *outstanding payment report* and will appear in the *payment history report*. After the payment has been issued, you can view and print the claims statement.

You can view the payment history for the last six months.

Choose a patient *Start date* and an *End date* and select *Create report* to view a patient's payment history.

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| 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 - V  |  |
|   |  |
| Creat   | e summary  |
| Great   | e summary  |
|   |  |
| To access payment history, please select a start and en | d date.  |

## **Patient claim statements**

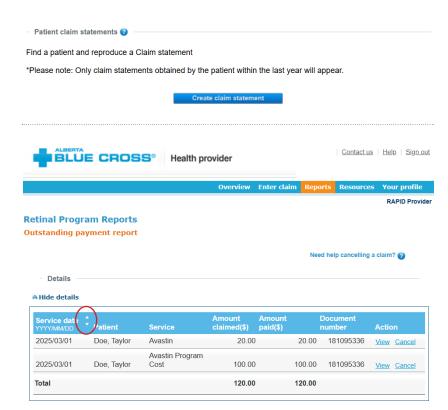
This allows you to print a copy of the patient claim statements.

### Note:

Sort: This option is currently available for outstanding payment reports and patient claim statements. You can sort the columns by clicking on the double-headed arrow, located beside the column title.



For additional information, select the help icon (blue button with a question mark). There are answers to questions that are frequently asked about the section.



Click here to print

# **Cancelling a claim**

## Step 1:

### Report

Create an outstanding payment report by selecting "Create report".

#### **Retinal services reports**

Outstanding payment report @

View all claims remaining to be paid as of March 10, 2025

Create report

# Step 2: Cancel

In the outstanding payment report, select *Cancel* for the claim

you want to cancel.

#### 

Click here to print

### Note:

If a payment run is in progress, you will receive an **Information** text notification.

If the cancellation hyperlink is inactive, either the document has exceeded the cancellation timeframe or the payment run is in progress and the claim cannot be cancelled online.

Please refer to the help text icon (?) for further instructions about how to cancel your claim.

### **Retinal services Reports**

Outstanding payment report

Information

Cancellation options are unavailable at this time as our payment runs are currently in progress. We apologize for this inconvenience and encourage you to review the steps in "Need help cancelling a claim".

Details

Altide details

Service date (YYYY/MM/DD) Patient Service Claimed(\$) Amount paid(\$) Document claim number claim 2015/02/26 Smith, John Avastin Wastage 39.47 39.47 47770477

Total \$39.47 \$39.47

Click here to print

## Step 3:

### **Cancellation review**

If you choose to cancel a claim, you will be asked for the reason. A dropdown menu lists a few common reasons.

When cancelling a claim, all claims associated with the document number must be cancelled.

If you select *Other*, please provide the reason.



### **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.

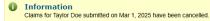
#### **Details** Need help cancelling a claim? Amount claimed(\$) Document Patient 2025/03/01 181095336 Doe, Taylor Avastin 20.00 20.00 Avastin Program 181095336 2025/03/01 100.00 Doe, Taylor 100.00 Cost Cancellation reason Additional services provided Claim entered in error Cancellation reason Other

# Step 4: Cancellation

Once a claim has been successfully cancelled, an **Information** text notification appears with confirmation.

#### **Retinal Program Reports**

Outstanding payment report



# **Additional information**

# **Technical information**

Using an Internet connection, a browser and the Online Health Portal, you can submit 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 Online Health Portal.

### **Contact us**

For more information about access to the Online Health Portal, contact Alberta Blue Cross Provider Service Relations at:

### **PHONE**

**780-498-8083** (Edmonton and area) **1-800-588-1195** (toll free, all other areas)

#### **EMAIL**

healthing@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.



