AADL Respiratory Benefits Program FAQs

Can multiple users be signed into the system at the same time?

Yes; multiple users can be active in the system at the same time. For example, two or more physicians at the same clinic could use the system on their own computers simultaneously.

Is it possible for a physician to register for the site without providing payment information?

Yes; payment information is not required. The web site form is the only component that is required to be completed if you will not be submitting claims; we provision the physician based on the information provided in this form.

Can providers separate payment claims according to location when all claims are paid into the same account?

Yes; to separate claims according to location, providers must simply ensure that each location has its own separate login ID. If all locations use a shared login ID, there will be no way for us to separate records in this manner.

Can an authorization be suspended prior to the termination date?

Yes, but only in certain cases. An active and approved authorization would only be suspended prior to the termination date if, during an audit, we discovered that incorrect information had been supplied in the authorization request or a patient is deceased.

For BPAP-pended authorizations, will the authorization notification continue to be faxed back to the provider?

Yes; if the authorization is approved. Once a BPAP authorization has been reviewed, the requesting entity will be notified of the results. If the BPAP authorization is approved, the selected provider will also receive faxed notification including the approval and the required prescription details.

How would providers submit BPAP and oxygen (0_2) authorizations simultaneously?

To submit BPAP and O_2 requests simultaneously, providers would simply need to indicate this on the BPAP Authorization Request form. This form contains a specific area where O_2 can also be requested.

Will providers still have to manually calculate totals (the total days times the flat fee per day)?

Yes; providers will need to manually calculate totals. This will ensure they are providing the correct claimed amount based on the service term they are submitting.

What happens when a client is marked as 'deceased' before RBP updates the system?

The eligibility file from Alberta Health is sent to Alberta Blue Cross several times per week and is updated overnight. All authorizations for a deceased individual are termed based on the information found in this file.

Is the system able to catch duplicate claims?

Yes; Alberta Blue Cross uses system edits to capture duplicate claims and authorizations. It does so by comparing submitted claim dates to existing claim dates in the system.

Will providers' current authorizations be automatically uploaded into the current Alberta Blue Cross system?

Yes; provider's current authorizations will be automatically uploaded into our system.

Are providers required to resubmit RH6?

Currently, providers are required to change the date to the following year. Under the Alberta Blue Cross system, authorizations are no longer extended. For long-term patients, a new authorization request must be submitted each year. Please note that these particular authorization streams are automated, so if all required documents and values are provided (and fall within policy guidelines), the authorization request will be approved.

Will RRTs still be required to complete training modules online?

No; Alberta Blue Cross will not be using training modules to validate practitioners. However, these modules will remain on the AADL website for RRT education should anyone wish to utilize them.

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How will urgent requests be handled by Alberta Blue Cross?

If you have an urgent request, there are a number of ways to expedite the process. You can indicate the request is urgent by writing it in the comments section of the authorization application and on the BPAP authorization forms. Additionally, providers, practitioners and physicians can contact our AADL Contact Centre to request a particular submission be reviewed urgently.

What are the expected turnaround times for authorization reviews?

There is no set turnaround time for authorization reviews as it will be determined by the AADL RRTs. Although we cannot provide a specific timeframe, Alberta Blue Cross is committed to reducing delays by streamlining the processes for this first release as we move forward.

Have there been any changes to the policy?

The clinical criteria will not be changing. If an individual was eligible under the program prior to the switch, they will continue to be eligible post-implementation. That said, there will be some updates to the naming conventions and communication pathways.

Will the respiratory benefits forms be changing?

Certain forms will be changing to steamline the process. For the most part, changes will be made to support different communication pathways and remove duplicate information between the online submission and the forms.

Is it possible for emails regarding BPAP new starts to be treated as urgent?

This would be determined by the provider. The BPAP start notifications will be faxed and it will be the provider's responsibility to handle them in the appropriate timeframe.

As part of a transitional process, we will also provide a call to the selected provider to notify them of the approval.

What happens when a client switches providers without notifying their previous provider?

If a client switches providers without notifying their previous provider, this may cause some confusion. Provider switches will require the collaboration of the patient, the previous provider and the new provider to ensure that patient care is not affected.

How will hospital-based healthcare providers be notified that Alberta Blue Cross is their main contact as of October 1, 2018?

Alberta Health has sent out a bulletin to hospital-based providers to inform them that Alberta Blue Cross is now their main contact.

As changes have recently been made to the client declaration form, would the previous version continue to be valid?

The previous version of the form is still valid; however, new members will need to submit the new client declaration form as they register. The new client declaration form can be found within the OHR Resources tab.

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