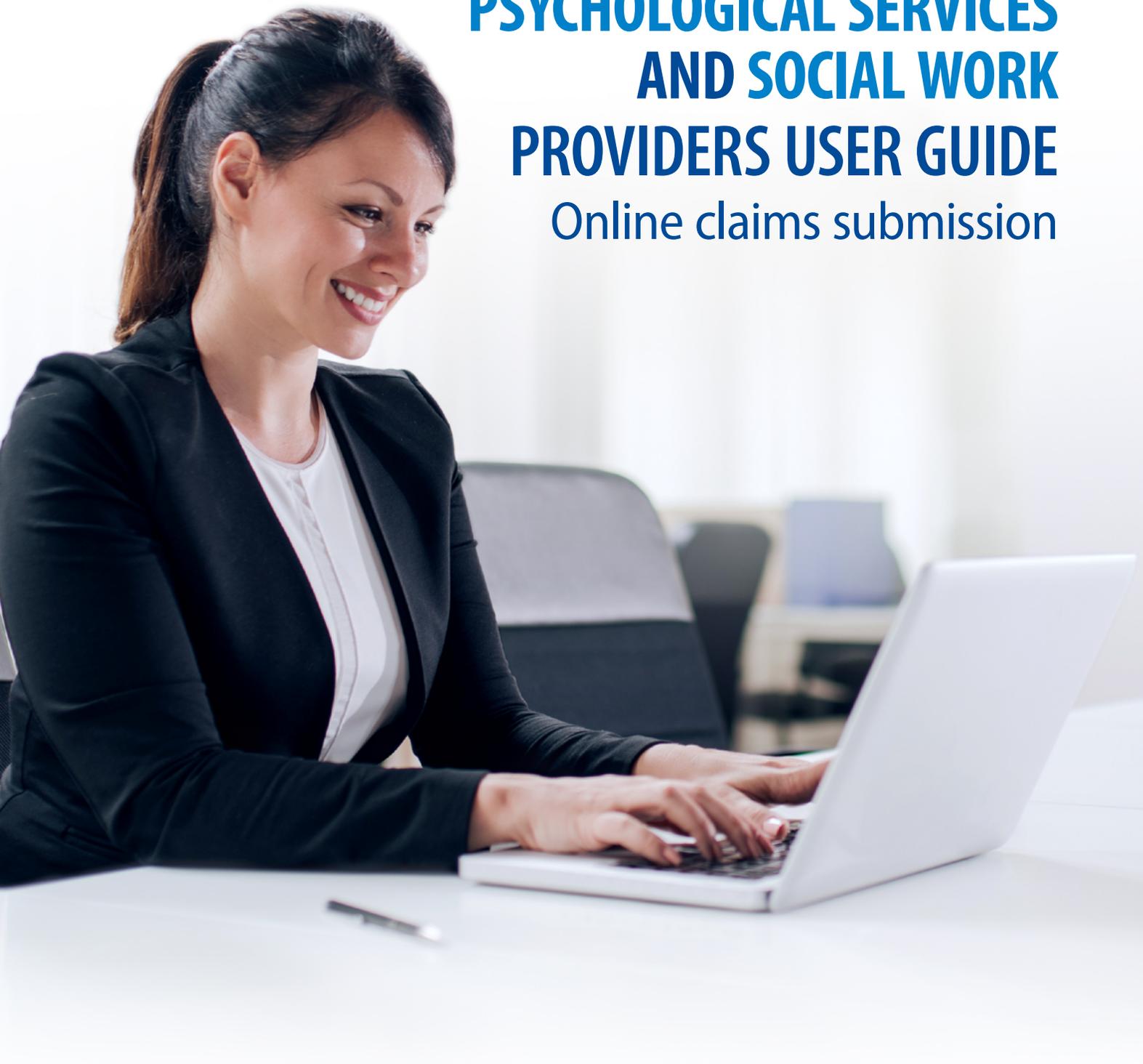




# PSYCHOLOGICAL SERVICES AND SOCIAL WORK PROVIDERS USER GUIDE

Online claims submission



# PSYCHOLOGICAL SERVICES AND SOCIAL WORK PROVIDERS USER GUIDE

## —ONLINE CLAIMS SUBMISSION

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

Online submission provides the convenience of direct billing for eligible services for your customers with coverage through Alberta Blue Cross group plans, individual plans and those with coverage through ASEBP. You are assured of prompt payment directly from Alberta Blue Cross, while retaining existing customers and gaining a competitive advantage over providers who may choose not to submit claims online.

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 claims submission, you must complete the Request for Secure Website Access web form and the Application for Direct Deposit of Funds form. Details about completing these forms at [ab.bluecross.ca](http://ab.bluecross.ca).

Please mail or fax your completed forms to

**Health Provider Services, Alberta Blue Cross**  
10009 108 Street,  
Edmonton, Alberta  
T5J 3C5  
Fax: 780-498-3544

The Health Provider Services 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 of these emails, you can begin serving your customers through online claims submission.

### 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 Online Health Provider site at [provider.ab.bluecross.ca/health](http://provider.ab.bluecross.ca/health) and enter the login ID and password.

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.

### 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.

#### Help



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.



# EASY STEPS TO SUBMIT AND PROCESS A CLAIM

## Steps for online submission

### 1. Enter the patient's information

Navigate to the "Enter claim" menu option and enter the patient's ID number and group number exactly as they appear on their Alberta Blue Cross or ASEBP ID card. Then ask the patient for their date of birth, enter the date and click the "Search" button.

**Note**

If you're submitting a claim for a returning patient, you can enter their last and first name to populate the ID number, group number and date of birth fields.

### 2. Verify whether the patient has Coordination of Benefits

Confirm if the patient has other active coverage and if payment has been made by another benefit carrier or provincial plan.

If "No": continue below.

If "Yes": continue to page 9.

### 3. Enter details

For an individual assessment or treatment, enter the service date, select the service, the number of hours and the total cost. Using the drop-down menu, select the practitioner who performed the service. If you have not previously added the practitioner details, you will need to add them into the system (See 3b)

**Note**

For group therapy, use the same guidelines as above.

3a. For a family assessment or treatment, enter the service date, number of hours and the total cost, and select the service. You must select all attending participants from the "Patient name" listing.

**Note**

There may be some circumstances when a claim cannot be processed electronically.

You will receive a notification on this screen and these claims will have to be submitted manually by the patient to Alberta Blue Cross.

The screenshot shows the 'Claim details' form. At the top, there is a 'Service date (YYYY-MM-DD)' field with the value '2010-05-18'. Below it is a 'Service' dropdown menu set to 'Psychology - Family Assessment'. A note states: 'If this claim is for a Family Assessment/Treatment, select the corresponding check box for each family member who attended the session. Enter the total hours and cost of the session and the system will equally divide the cost between each participating family member.' There are input fields for 'Number of hours' and 'Total cost (\$)'. Under 'Patient Name', there are four checkboxes with names: 'Smith, John', 'Smith, Jane', 'Smith, Jennie', and 'Smith, Sarah'. A 'Practitioner' dropdown is set to '- Choose one -' with a link to 'Add Practitioner' and 'Practitioner Details'. At the bottom are 'Add claim', 'Cancel', and 'Predetermine' buttons.

**3b. Enter practitioner details**

To add a practitioner to the practitioner system, click "Add practitioner". A new window will pop up asking for practitioner information. Enter the details as required and click "OK". The system will validate the practitioner in real time.

The screenshot shows the 'Add your practitioner' form. It features the Alberta Blue Cross logo at the top. Below the title, it says 'Please fill in the required fields to add a provider'. The 'General Information' section contains three input fields: 'First name', '\*Last name' (with a note '\*Include last name only'), and '\*Association/College number'. A section for '\*Required fields' is also present. At the bottom are 'Cancel' and 'OK' buttons.

**Note**

If you add a practitioner who is not eligible to perform a service on the service date, the error message "Practitioner is not eligible on the date of service" will appear. At this point you will be unable to proceed entering claim details.

The screenshot shows the 'Enter claim' form with an error message. The title is 'Enter claim' and the subtitle is 'Enter details'. A red error banner reads: 'Error: The provider was not valid on the date the service was provided. Please contact an Alberta Blue Cross representative at (700)-490-0000 (Edmonton & areas), toll-free in other areas of Canada 1-800-500-1195'. Below the error, there is a 'Patient information' box showing: Name: Smith, John; ID number: 78011222-11; Group number: 09. The 'Claim type' dropdown is set to 'Psychology'. The 'Claim details' section shows 'Service date (YYYY-MM-DD)' as '2010-05-24', 'Service' as 'Psychology - Individual Treatment', 'Number of hours' as '1', and 'Total cost (\$)' as '100'. The 'Practitioner' dropdown is set to 'Practitioner' with a link to 'Add Practitioner' and 'Practitioner Details'. At the bottom are 'Add claim', 'Cancel', and 'Predetermine' buttons.

### 3c. Enter details

Once the added practitioner is validated, you will be taken back to the "Enter details" screen. The added provider will now be selectable using the drop-down menu. Enter the claim details as required and click "Add claim". If you have more claims to enter, continue entering them and verify details as they appear in the claim details table. Once complete, click "Predetermine".

**Note**

If you are entering a claim for a family assessment or treatment, you will be required to add the claim information for each family member.

### Individual

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

**Patient information**  
Name: Smith, John  
ID number: 780111222-11  
Group number: 00

Claim type: Psychology

Claim details:  
Service date (YYYY-MM-DD):   
Service: Choose one  
Number of hours:   
Total cost (\$):   
Practitioner: Choose one | [Add Practitioner](#)  
[Practitioner Details](#)

**Add claim**

Service date (YYYY-MM-DD)	Service	Patient's Name	Total cost (\$)	Practitioner
2016-05-01	Psychology - Individual Assessment	Smith, John	100.00	Practitioner <a href="#">Modify</a> <a href="#">Remove</a>
			<b>\$100.00</b>	

**Cancel** **Predetermine**

### Family

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

**Patient information**  
Name: Smith, John  
ID number: 780111222-11  
Group number: 99

Claim type: Psychology

Claim details:  
Service date (YYYY-MM-DD):   
Service: Choose one  
Number of hours:   
Total cost (\$):   
Practitioner: Choose one | [Add Practitioner](#)  
[Practitioner Details](#)

**Add claim**

Service date (YYYY-MM-DD)	Service	Patient's Name	Total cost (\$)	Practitioner
2016-05-18	Psychology - Family Assessment	Smith, John	25.00	Practitioner <a href="#">Modify</a> <a href="#">Remove</a>
2016-05-18	Psychology - Family Assessment	Smith, Jane	25.00	Practitioner <a href="#">Modify</a> <a href="#">Remove</a>
2016-05-18	Psychology - Family Assessment	Smith, Dennis	25.00	Practitioner <a href="#">Modify</a> <a href="#">Remove</a>
2016-05-18	Psychology - Family Assessment	Smith, Sarah	25.00	Practitioner <a href="#">Modify</a> <a href="#">Remove</a>
			<b>\$100.00</b>	

**Cancel** **Predetermine**

**Note**

If you only select one family member, the error message “For Family assessment/treatment, please ensure more than one family member has been selected” will appear. At this point you will be unable to proceed until you select more than one family member.

**Family**

**Enter claim**  
Enter details

**Error**  
For Family Assessment/Treatment, please ensure more than one family member has been selected.

**Patient information**

Name	Smith, John
ID number	780111222-11
Group number	99

**Claim type**

Providers of service: Psychology

**Claim details**

Service date (YYYY-MM-DD): 2018-05-24

Service: Psychology - Family Assessment

Number of hours: 1

Patient Name:

- Smith, John
- Smith, Jane
- Smith, Dennis
- Smith, Sarah

Total cost (\$): 100

Practitioner: Practitioner [Add Practitioner](#)  
[Practitioner Details](#)

[Add claim](#)

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

**4. Predetermine**

This is a simple inquiry into the patient’s benefit plans to determine the coverage available. You can click “Modify” to go back to step 2, “Cancel” to exit without saving or “Process claim” to submit the claim online to Alberta Blue Cross for immediate processing.

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

Overview **Enter claim** Reports Resources Your profile

**Enter claim**  
Predetermine

**Patient information**

Name	Smith, John
ID number	780111222-11
Group number	99

**Summary**

**Predetermination results as of May 24, 2016 10:07 AM 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 amount submitted:	\$100.00
Plan(s) will pay:	\$50.00
Balance remaining:	\$50.00

**\*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](#)

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

**Note**

You will be able to see the claim information for all family members selected. If you are entering a claim for a family assessment or treatment.

Total amount submitted:	\$100.00
Plan(s) will pay:	\$100.00
<b>Balance remaining:</b>	<b>\$0.00</b>

\*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

[Hide details](#)

**Service provider:** ABC Psychology

Service date (YYYY/MM/DD)	Service	Patient's Name	Practitioner	Claimed amount	Eligible amount	Other plan paid	This plan paid	Explanation number
2016/05/18	Psychology - Family Treatment	Smith, John	Practitioner	25.00	25.00	0.00	25.00	20962
2016/05/18	Psychology - Family Treatment	Smith, Jane	Practitioner	25.00	25.00	0.00	25.00	20962
2016/05/18	Psychology - Family Treatment	Smith, Dennis	Practitioner	25.00	25.00	0.00	25.00	20962
2016/05/18	Psychology - Family Treatment	Smith, Sarah	Practitioner	25.00	25.00	0.00	25.00	20962
Total				\$100.00	\$100.00	\$0.00	\$100.00	

**Explanations**  
20962 This product is subject to a frequency maximum.  
[Click here to print](#)

Modify
Cancel
Process claim

**5. Process claim**

You will receive a confirmation from Alberta Blue Cross within seconds of your submission.

A printable copy of the patient's claim statement is displayed. You must provide the patient with a printed copy of the "Claim statement".

Health provider
Contact us | Help | Sign out

Overview
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

Date: May 13, 2016  
Document number: 47797331

**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

Member: Smith, John  
ID number 78011222-11  
Group: 99 Section: TST

**Health claim summary**

Total amount claimed	\$100.00
Total amount not paid	\$50.00
<b>Amount paid</b>	<b>\$50.00</b>

**Details**  
Each claim you submit is assessed according to the rules of your benefit plan. Please refer to the explanations near the end of this statement for descriptions of terms, and to your benefit booklet for plan details.

**Service provider:** ADC Psychology

Service date (YYYY/MM/DD)	Product or service	Patient's Name	Practitioner	Claimed amount	Eligible amount	Other plan paid	This plan paid	Explanation number*
2016/05/01	Psychology - Individual Assessment	Smith, John	Practitioner	100.00	100.00	0.00	50.00	3123
Total				\$ 100.00	\$ 100.00	\$ 0.00	\$ 50.00	

**\*Explanations**  
3123 Payment has been reduced as the maximum amount allowed for this service has been reached. The service is limited to \$50 in 1 Days starting January 1.

**Acknowledgment**  
By accepting this claim summary, I certify that the information on this claim summary is complete and accurate and the services and/or products listed have been received by the patient indicated. I also acknowledge that, by presenting my Alberta Blue Cross identification card or my identification number for a benefit plan administered by Alberta Blue Cross to the named Service Provider, I consent and agree to:

**Note**

Family assessment or treatment claim statements will include the claim information for all family members selected.

**Health claim summary**

Total amount claimed	\$100.00
Total amount not paid	\$0.00
<b>Amount paid</b>	<b>\$100.00</b>

**Details**

*Each claim you submit is assessed according to the rules of your benefit plan. Please refer to the explanations near the end of this statement for descriptions of terms, and to your benefit booklet for plan details.*

Service provider: ABC Psychology

Service date (YYYY/MM/DD)	Product or service	Patient's Name	Practitioner	Claimed amount	Eligible amount	Other plan paid	This plan paid	Explanation number*
2016/05/18	Psychology - Family Treatment	Smith, John	Practitioner	25.00	25.00	0.00	25.00	
2016/05/18	Psychology - Family Treatment	Smith, Jane	Practitioner	25.00	25.00	0.00	25.00	
2016/05/18	Psychology - Family Treatment	Smith, Dennis	Practitioner	25.00	25.00	0.00	25.00	
2016/05/18	Psychology - Family Treatment	Smith, Sarah	Practitioner	25.00	25.00	0.00	25.00	
<b>Total</b>				<b>\$ 100.00</b>	<b>\$ 100.00</b>	<b>\$ 0.00</b>	<b>\$ 100.00</b>	

**Acknowledgment**

By accepting this claim summary, I certify that the information on this claim summary is complete and accurate and the services and/or products listed have been received by the patient indicated. I also acknowledge that, by presenting my Alberta Blue Cross Identification card or my identification number for a benefit plan administered by Alberta Blue Cross to the named Service Provider, I consent and agree to:

- The Service Provider submitting a claim containing my personal information to Alberta Blue Cross on my behalf and I authorize payment of this claim by Alberta Blue Cross directly to the Service Provider.
- Alberta Blue Cross using my personal information to determine my eligibility for benefits, to adjudicate/pay claims, to administer the terms of my benefit plan and to verify/audit paid claims as described in the Alberta Blue Cross Privacy Policy posted at [www.ab.bluecross.ca](http://www.ab.bluecross.ca), and
- The Service Provider disclosing my personal information to Alberta Blue Cross for the above purposes.

*Please retain for your records*

# STEPS FOR ONLINE SUBMISSION WITH COORDINATION OF BENEFITS BETWEEN ALBERTA BLUE CROSS AND ANOTHER BENEFIT CARRIER

## 1. Patient has Coordination of Benefits

Click "Yes" if a portion of this claim has already been paid by another benefit carrier and if you would like to submit the remaining amount to this plan.

The screenshot shows the 'Enter claim' page for 'ABC Health Clinic'. Under the 'Coordination of Benefits Information' section, there are two questions with radio buttons for 'Yes' and 'No':

- is the patient entitled to receive comparable benefits from any other insurance company, health benefits company or Alberta Blue Cross Plan?
- If the claim was submitted through another benefit carrier or provincial plan, would you like to submit the remaining amount to this plan?

Red circles highlight the 'Yes' radio buttons for both questions, with a red arrow pointing from the text in step 1 to the first 'Yes' button.

## 2. Enter the amount paid

Enter the amount paid by the other benefit carrier for each claim line. If payments have been made by two or more other benefit carriers, combine the amount paid and enter one total for each claim line.

### Enter details

Select a service and enter the total cost. Using the drop-down menu, select the practitioner who performed the service. If you have not previously added the practitioner details, you will need to add them into the system.

### Individual

The screenshot shows the 'Enter claim' page for 'ABC Health Clinic' in the 'Enter details' section. The 'Claim details' section includes the following fields:

- Service date (YYYY-MM-DD): 2016-05-24
- Service: Psychology - Individual Assessment
- Number of hours: 1
- Total cost (\$): 100
- Other plans paid (\$): 50
- Practitioner: Practitioner (with a dropdown arrow and 'Add Practitioner' link)

Red circles highlight the 'Practitioner' field and the 'Add Practitioner' link, with a red arrow pointing from the text in step 2 to the 'Add Practitioner' link.

2a. If entering a family assessment or treatment claim with coordination of benefits, the "Other plan paid" box will not appear. Instead, you will manually enter the amount paid by another benefit carrier for each family member.

If the amount paid by another benefit carrier is zero, you must enter "0" in the field.

Family

Claim details

Service date (YYYY-MM-DD)

Service - Choose one -

Number of hours

Total cost (\$)

Practitioner - Choose one -  [Add Practitioner](#)  
[Practitioner Details](#)

Service date (YYYY-MM-DD)	Service	Patient's Name	Total cost (\$)	Other plan paid (\$)	Practitioner	
2016-05-24	Psychology - Family Assessment	Smith, John	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Jane	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Dennis	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Sarah	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
			<b>\$100.00</b>	<b>\$0.00</b>		

Family

Other plan paid is a required field

Service date (YYYY-MM-DD)	Service	Patient's Name	Total cost (\$)	Other plan paid (\$)	Practitioner	
2010-05-24	Psychology - Family Assessment	Smith, John	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Jane	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Dennis	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
2016-05-24	Psychology - Family Assessment	Smith, Sarah	25.00	<input type="text"/>	Practitioner	<a href="#">Modify</a> <a href="#">Remove</a>
			<b>\$100.00</b>	<b>\$0.00</b>		

# EASY STEPS TO ACCESS REPORTS

## 1. Reports

This screen allows you to pull up all claims waiting to be paid, history of settled claims and individual statements.

### Outstanding payment report

The outstanding payment report lists all transactions that are remaining to be paid and allows you to cancel a claim.

### Payment history report

Once the transactions have been paid, they will be removed from the "Outstanding Payment Report" and will appear on the "Payment History Report". Once payment has been issued, you can view and print the claims statement.

### Patient date

Select a start and end date to view a patient's payment history

### Patient claim statements

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

**Reports**

Outstanding payment report

View all claims remaining to be paid as of May 13, 2016

Provider of service: Psychology

\*Please note: If there are any claims to be cancelled, they can be viewed and cancelled within this report.

Create report

Payment history report

Provider of service: Psychology

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

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

Start date(YYYYMMDD): 2016/05/13

End date(YYYYMMDD): 2016/05/13

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

Create report

Patient claim statements

Find a patient and reproduce a Claim statement

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

Create claim statement

### Note

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



Provider of service: Psychology

Need help cancelling a claim?

Details

Hide details

Service date (YYYY/MM/DD)	Patient	Service	Amount claimed(\$)	Alberta Blue Cross paid(\$)	Document number	Cancel claim
2016/05/24	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787696	Cancel
2016/05/01	Smith, Sarah	Psychology - Individual Treatment	130.00	110.00	47787653	Cancel
2016/05/19	Smith, Dennis	Psychology - Family Treatment	34.00	34.00	47787649	



**Help:** For additional information, click the help button (blue button with a question mark). The help button has answers to questions that are frequently asked about the section.

## 2. Outstanding payment report

The outstanding payment report lists all transactions that are remaining to be paid. Once the transactions have been paid, they will be removed from this report and appear on the payment history report.

**Reports**

Outstanding payment report ?

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View all claims remaining to be paid as of May 13, 2016

Provider of service Psychology

\*Please note: If there are any claims to be cancelled, they can be viewed and cancelled within this report.

[Create report](#)

**Reports**

**Outstanding payment report**

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Provider of service Psychology Need help cancelling a claim? ?

Details

[hide details](#)

Service date (YYYY/MM/DD) ↓	Patient ↓	Service ↓	Amount claimed(\$) ↓	Alberta Blue Cross paid(\$) ↓	Document number ↓	Cancel claim
2016/05/24	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787686	<a href="#">Cancel</a>
2016/05/01	Smith, Sarah	Psychology - Individual Treatment	130.00	110.00	47787653	Cancel
2016/05/19	Smith, Dennis	Psychology - Family Treatment	34.00	34.00	47787649	
2016/05/19	Smith, Jane	Psychology - Family Treatment	33.00	33.00	47787649	
2016/05/19	Smith, John	Psychology - Family Treatment	33.00	33.00	47787649	
2016/05/20	Smith, Jane	Psychology - Individual Assessment	100.00	50.00	47787649	
<b>Total</b>			<b>\$430.00</b>	<b>\$310.00</b>		

[Click here to print](#)

## 3. Payment history reports

**Claims statements** are available to view and print for one year.

**Payment history** is available for claims submitted in the last six months.

Payment history report ?

---

Provider of service Psychology

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

Payment Date Click here -  
2016-05-19  
2016-05-24

[Create summary](#)

**3a. Provider statement and summary**

To access your claim statement, select the EFT payment date to create a PDF of your provider summary report, which can be saved or printed.



**PROVIDER SUMMARY**

Date: May 24, 2016  
Health statement number: 341/9812  
PAYMENT MADE BY DIRECT DEPOSIT: 8103499

ARC HFAI TH CI INIC  
10009 108 ST NW  
EDMONTON AB T5J 3C5

**Health claim summary**

Total amount claimed	\$580.00
Amount not covered	\$107.00
<b>Total amount paid</b>	<b>\$453.00</b>

**Details**

Document number	ID number	Patient name	Amount claimed	Amount paid
47787598	4008023-16	John Smith	37.00	37.00
47787598	4008023-17	Jane Smith	37.00	0.00
47787598	4008023-18	John Smith	37.00	37.00
47787608	4008023 10	Jane Smith	30.00	30.00
47787602	4740591-49	Dennis Smith	80.00	80.00
47787649	780111222-11	John Smith	33.00	33.00
47787649	780111222-12	John Smith	133.00	83.00
47787649	780111222-13	Jane Smith	34.00	34.00
47787653	2319584-52	Dennis Smith	130.00	110.00
<b>TOTALS FOR THIS STATEMENT</b>			<b>\$560.00</b>	<b>\$453.00</b>

**Patient name:** John Smith  
ID number: 780111222-11 Group: 99 Section: TST Document ID: 47707649

Service date YYYYMMDD	Product or service	Claimed amount	Eligible amount	Percent covered	Other plan paid	This plan paid	Explanation number*
2010/05/19	Psychology treatment	33.00	33.00	100%	0.00	33.00	
<b>Totals for John</b>		<b>\$33.00</b>			<b>\$0.00</b>	<b>\$33.00</b>	

**Patient name:** Jane Smith  
ID number: 780111222-12 Group: 99 Section: TST Document ID: 47787649

Service date YYYYMMDD	Product or service	Claimed amount	Eligible amount	Percent covered	Other plan paid	This plan paid	Explanation number*
2016/05/19	Psychology treatment	33.00	33.00	100%	0.00	33.00	
2016/05/20	Psychology assessment	100.00	50.00	100%	50.00	50.00	3123
<b>Totals for Jane</b>		<b>\$133.00</b>			<b>\$50.00</b>	<b>\$83.00</b>	

**Patient name:** Dennis Smith  
ID number: 780111222-13 Group: 99 Section: TST Document ID: 47787649

Service date YYYYMMDD	Product or service	Claimed amount	Eligible amount	Percent covered	Other plan paid	This plan paid	Explanation number*
2016/05/19	Psychology treatment	34.00	34.00	100%	0.00	34.00	
<b>Totals for Dennis</b>		<b>\$34.00</b>			<b>\$0.00</b>	<b>\$34.00</b>	

**Patient name:** Jane Smith  
ID number: 2319584-52 Group: 14200 Section: R Document ID: 47787653

Service date YYYYMMDD	Product or service	Claimed amount	Eligible amount	Percent covered	Other plan paid	This plan paid	Explanation number*
2016/05/01	Psychology treatment	130.00	110.00	100%	0.00	110.00	3345
<b>Totals for Jane</b>		<b>\$130.00</b>			<b>\$0.00</b>	<b>\$110.00</b>	

**\*Explanations**

3123	Payment has been reduced as the maximum amount allowed for this service has been reached. The service is limited to \$50 in 1 Days starting January 1.
3345	Payment has been reduced as the maximum amount allowed for this service has been reached. The service is limited to \$110 per occurrence.
344	Our files indicate coordination of benefits apply. Please provide a statement from the primary carrier or if coverage is terminated, please indicate the termination date. Resubmit this information with this Explanation of Benefits statement.

**Understanding this statement - Terms and Explanations**

**Eligible amount:** This is the portion of the Claimed amount (not exceeding the amount claimed) that is calculated to be eligible for reimbursement subject to the terms of your plan. It includes deductible and/or co-payment amounts if they apply. You are responsible for the remaining cost not covered by your plan(s).  
Please note: It is important to refer to your benefit information to determine what is covered.

**Other plan paid:** This is the amount another benefit plan has already paid for your claim. Through coordination of benefits (COB), eligible individuals, couples or families with more than one benefit plan can combine their benefit coverage to receive up to the maximum eligible amount in accordance with the contract provisions. If you have other coverage and have not claimed through it, you may submit this statement as part of the claim to your other benefit carrier for coordination of benefits.

**Private and confidential** This statement is issued for use only by the provider of service for purposes of claims processing and payment and is not to be shared with any third party. If the patient requires a statement pertaining to a claim for services provided, please advise them to contact their benefits carrier directly.

Our mailing address is Alberta Blue Cross, 10009-108 Street NW, Edmonton, Alberta T5J 3C5.

**Part of your healthy future.**

### 3b. Payment history

Enter a start and end date for the claim information you wish to display.

All transactions that have been paid by Alberta Blue Cross to your office within the specified time are listed on a printer-friendly screen. Statement IDs and document numbers are included for your reference, as well as details about each patient's claim.

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

Start date(YYYYMMDD)   End date(YYYYMMDD)  

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

[Create report](#)



**Payment History Report**  
for May 1, 2016 - May 25, 2016

**ABC Health Clinic**  
10009 108th Street NW  
Edmonton, AB, T5J3C5

Provider of service: Psychology

Service date (YYYY-MM-DD)	Patient	Product or service	Amount claimed(\$)	Alberta Blue Cross paid (\$)	Document number
<b>Statement ID 34170707 Date 5/19/2016</b>					
2016-05-17	Smith, Dennis	Psychology treatment	100.00	90.00	47787493
2016-05-01	Smith, Jane	Psychology assessment	50.00	50.00	47787480
2016-05-01	Smith, John	Psychology assessment	50.00	0.00	
<b>Total</b>			<b>200.00</b>	<b>140.00</b>	
<b>Statement ID 34170812 Date 5/24/2016</b>					
2016-04-28	Smith, Dennis	Psychology treatment	37.00	37.00	47787508
2016-04-28	Smith, Jane	Psychology treatment	37.00	37.00	
2016-04-28	Smith, John	Psychology treatment	37.00	0.00	
2016-04-28	Smith, Jane	Psychology treatment	39.00	39.00	
2016-05-04	Smith, Jane	Psychology assessment	80.00	80.00	47787002
2016-05-19	Smith, Dennis	Psychology treatment	34.00	34.00	47787049
2016-05-19	Smith, Dennis	Psychology treatment	33.00	33.00	
2016-05-19	Smith, Jane	Psychology treatment	33.00	33.00	
2016-05-20	Smith, John	Psychology assessment	100.00	50.00	
2016-05-01	Smith, Jane	Psychology treatment	130.00	110.00	47707850
<b>Total</b>			<b>560.00</b>	<b>455.00</b>	

# EASY STEPS TO CANCEL A CLAIM

## 1. Cancel

To cancel a claim, click the hyperlink.

If the cancellation 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. Please refer to the help icon for further instructions about how to cancel your claim.

**Reports**  
**Outstanding payment report**

Provider of service: Psychology Need help cancelling a claim?

Details   
 [Hide details](#)

Service date (YYYY/MM/DD)	Patient	Service	Amount claimed(\$)	Alberta Blue Cross paid(\$)	Document number	Cancel claim
2016/05/24	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787686	<a href="#">Cancel</a>
2016/05/01	Smith, Sarah	Psychology - Individual Treatment	130.00	110.00	47787653	Cancel
2016/05/19	Smith, Dennis	Psychology - Family Treatment	34.00	34.00	47787649	
2016/05/19	Smith, Jane	Psychology - Family Treatment	33.00	33.00	47787649	
2016/05/19	Smith, John	Psychology - Family Treatment	33.00	33.00	47787649	
2016/05/20	Smith, Jane	Psychology - Individual Assessment	100.00	50.00	47787649	
<b>Total</b>			<b>\$430.00</b>	<b>\$310.00</b>		

[Click here to print](#)

### Note

If a payment run is in progress, you will receive notification that the claim cannot be cancelled.

**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".

Provider of service: Psychology Need help cancelling a claim?

Details   
 [Hide details](#)

## 2. Cancellation review

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

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

**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
2016/05/24	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787686

Cancellation reason

Select one  
 Additional services provided  
 Claim entered in error  
 Other

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

**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
2016/05/24	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787686

Cancellation reason: Other

**3. Cancellation**

Once a claim has successfully been cancelled, red text appears at the top of the screen as confirmation.

**Reports**  
**Outstanding payment report**

**Information**  
Claims for John Smith submitted on May 24, 2016 have been cancelled.

Provider of service: Psychology Need help cancelling a claim?

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

Service date (YYYY/MM/DD)	Patient	Service	Amount claimed(\$)	Alberta Blue Cross paid(\$)	Document number	Cancel claim
2016/05/23	Smith, John	Psychology - Individual Treatment	100.00	50.00	47787688	<a href="#">Cancel</a>
2016/05/01	Smith, Jane	Psychology - Individual Treatment	130.00	110.00	47787653	
2016/05/19	Smith, Dennis	Psychology - Family Treatment	34.00	34.00	47787649	
2016/05/19	Smith, Jane	Psychology - Family Treatment	33.00	33.00	47787649	

# TECHNICAL INFORMATION

Using the Health Services Provider site, an Internet connection and your browser, 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 Health Services Provider site.

# CONTACT US

For more information about access to the Health Services Provider site, contact Alberta Blue Cross Health Provider Service Relations at

- 780-498-8083 (Edmonton and area),
- toll free at 1-800-588-1195 (all other areas), or
- email at [healthinq@ab.bluecross.ca](mailto:healthinq@ab.bluecross.ca).

The online claims submission system is available Monday to Sunday, 8 a.m. to 9:30 p.m. Mountain Time.

Our regular office hours are Monday to Friday, 8:30 a.m. to 5 p.m. Mountain Time.

