


Online Training Module

Module 2.8.3

Alberta Aids to Daily Living
Amplification Benefits
August 2022




Alberta

Classification: Public

Module 2.8.3 Overview

The Amplification Benefits training module is divided into the following sections:


1. Alberta Blue Cross
2. Provider Registration
3. Patient Inquiry Screen
4. Authorizations
5. Claims



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Section 1

Alberta Blue Cross



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AADL

- Policy, governance and oversight
- Appeals, exceptions and clinical review of complex funding requests
- Stakeholder relationship management
- Cost-share exemption, including CRA income verification

Alberta Blue Cross

- Claim and authorization processing
- Frontline technical and stakeholder support (Call Centre)

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Alberta Blue Cross Website

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Link: <https://www.ab.bluecross.ca/provider/type/health/audiology-home.php>

Section 2

Provider Registration

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Provider Registration

BLUE CROSS

Providers

Online claim submission—AADL
Audiology providers

Audiology providers


- claim money on file.
- receive guaranteed payments daily.
- better protect your patient information.
- access advanced reporting tools.
- be listed on our website and mobile app as a direct bill provider, and
- TADA the environment.

Submitting claims online is quick, easy and secure. Providers are designed with records of submission—making your job easier and keeping your patients happy.

How to register

Click here to fill out **Provider Form** and get access to the feature website. Once you have access to the secure website you will be required to enter your direct deposit information before you can proceed with claim entry. Please have this information ready available when you first sign into the online health portal.

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Provider Registration

Providers

Audiology services provider

Request for secure website access

Type of service

If you have more than one office, a separate request form must be completed for each office.

For offices with more than one health services provider, each person who bills under their own practice should complete a separate form.

Registration method *


Individual provider (participations only)
Individual provider (claims only)
Individual provider (participation and claims)

Clinic provider (participations only)
Clinic provider (claims only)
Clinic provider (participation and claims)

Provider type *

Audiologist
 Hearing aid practitioner
 Speech therapist

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Adding a Practitioner

Request to add a practitioner to an existing account for online direct billing

Please submit the following practitioner information to us. Once the practitioner has been listed with your office, you'll receive a notification email and you'll have access to the practitioner during time of claim entry. If you have any additional questions, please contact us directly at 1-800-963-7896.

Name of provider *

Provider type *


Is this a new service type being added to your office? *

Name of college or association they are registered with *

ID number for this association *


Name of practice *

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Section 3
Patient Inquiry

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Patient Inquiry Screen

ALBERTA BLUE CROSS Health provider Contact Us Help Sign out

Overview Patient Inquiry Enter authorization Reports Resources Your profile Recent Rowwell


Patient inquiry

Enter patient

Personal health number

Date of birth (YYYY-MM-DD)

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Patient Inquiry Screen

Patient inquiry

Patient information

Patient name

Personal health number

Date of birth (YYYY-MM-DD)

Age category: Confirmed senior or spouse/partner dependent of confirmed senior **Client is a CONFIRMED senior**

Residential address Mailing address

Phone number Phone number


Residency code Private (Home/Apartment)

Care of

Update address

Status **Client has an ACTIVE health care number.**

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Patient Inquiry Screen

AADL cost share status
 Benefit year ending 2024-06-30 Cost share
 Benefit year ending 2023-06-30 Cost share


Extended seniors hearing aid coverage
 Benefit year ending 2024-06-30
 Benefit year ending 2023-06-30

Maximum hearing aids funded
 Quantity: 1

Product consumption
 Benefit type: Hearing Aid Device
 Product category: Hearing Aid Product
 Product: Behind-the-ear hearing
 No records found in the current benefit period

Client is COST-SHARE client.
 Client does NOT have extended seniors hearing aid coverage because there is no expiry date in this section.
 Client is eligible for ONE hearing aid.
 NO RECORDS FOUND IN THE CURRENT BENEFIT PERIOD for a hearing aid product. This means that he has not received a hearing aid in the past five years, and eligible for new devices.

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Patient Inquiry Screen

AADL cost share status
 Benefit year ending 2024-06-30 Cost share exempt
 Benefit year ending 2023-06-30 Cost share exempt

Extended seniors hearing aid coverage
 Benefit year ending 2024-06-30 2020-07-01 to 2021-06-30
 Benefit year ending 2023-06-30

Maximum hearing aids funded
 Quantity: 2


Product consumption
 Benefit type: Hearing Aid Device
 Product category: Hearing Aid Product
 Product: Behind-the-ear hearing

Product consumption - Hearing Aids
 Consumption date: 2017-11-09
 Quantity: 1
 Price type: LRP

Product consumption - Hearing Aids
 Consumption date: 2017-11-09
 Quantity: 1
 Price type: RRP

This client is a COST-SHARE EXEMPT with EXTENDED SENIORS HEARING AID COVERAGE.
 He is eligible for TWO hearing aids.
 He purchased a RIGHT and LEFT hearing aid on Nov 9, 2017. Therefore, he is NOT eligible for a new aid because it has not been five years since his last purchase.


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Section 4

Authorizations

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Authorization Process

Authorization details

- The following documents must be uploaded for amplification benefit authorizations:
 - Signed Client Consent form
 - Diagnostic audiogram, completed within past six months
 - Confirmation of enrolment for full-time students, if applicable

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Types of Authorizations

The following devices **require an authorization for PURCHASE:**

- Hearing Aid
- FM Device
- Personal Listening Device (PLD)
- Bone Anchored Hearing Device (BAHD)
- Bone Anchored Hearing Device (BAHD) with Softband
- Cochlear Implant

The following devices **require an authorization for REPAIR:**

- Bone Anchored Hearing Device (BAHD)
- Bone Anchored Hearing Device (BAHD) with Softband
- Cochlear Implant

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Adopt Authorizations

- Devices may be adopted if they were not purchased through the AADL program. This applies to aids that were purchased privately, or when a clients was not eligible for AADL benefits.
- If a client becomes eligible for AADL benefits, providers can complete an Adopt Authorization. This registers the device with AADL in order to access funding for repairs and associated products/fees.

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QFR Authorizations

Authorization details

Benefit type: Quantity and Frequency Review

Authorization type: QFR - Audiology - Authorization

Practitioner: Choose one 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 (RRSB, WCSE, OSA, RCMP, Annual Funds, Corrections, WRAC) or private insurance that covers 100% of the benefit. Yes No

Patient is currently wearing a surgically implantable device. Yes No

Reason for QFR request:

- Significant change in hearing since original authorization
- Major repair required and patient is within 6 months of replacement period
- Patient unable to use device due to significant physical change (e.g. pediatric growth, acute loss of mobility)
- BANGCO exchange required due to obsolescence
- Equipment lost, stolen or damaged due to misuse

Supporting documentation must be provided. Requests MUST meet QFR criteria as outlined in policy manuals.

Back Cancel Save

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Section 5 Claims

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Claims Process

BLUE CROSS Health provider

Enter claim

Claim details

Submit information

Enter message

Check message

Submit

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Claims Process

- The provider enters the details of the claim in the provider portal.
- If the data is valid the provider continues the process by requesting a predetermination. The claim is then processed and the results of the predetermination are displayed.
- The provider then has the following three options:
 - Process the claim using the original claim details
 - Modify the original claim details and predetermine the claim results based on the modified claim details,
 - or
 - Cancel the claim.
- If the provider chooses to process the claim based on the predetermination results the claim is created and the results are immediately displayed on a claim statement.
- If further analysis is required to determine the results of the claim it will pend until a review is completed by an Alberta Blue Cross coordinator and the results are updated.
- Predeterminations are not fully processed claims** and do not fall under this process.

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Example #1: Cost-share client purchased one hearing aid that costs MORE than \$1,200

Health claim summary

Total amount claimed	\$1,400.00
AADL will pay	\$900.00
Patient will pay	\$500.00

Details

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

Patient:

Provider: Professional Audiology Clinic Ltd

Service date (YYYY/MM/DD)	Product or service	Practitioner	Claimed amount	AADL contribution	Patient cost share portion	Patient upgrade charge	Explanation number*
2022/05/17	Behind-the-ear hearing aid		1,400.00	900.00	300.00	200.00	378
Total			\$ 1,400.00	\$ 900.00	\$ 300.00	\$ 200.00	

*Explanations

378 The maximum amount for this benefit has been paid. The remaining portion is not eligible for reimbursement.

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Example #2: Cost-share client purchased one hearing aid that costs LESS than \$1,200

Health claim summary

Total amount claimed	\$1,000.00
AADL will pay	\$750.00
Patient will pay	\$250.00

Details

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

Patient:

Provider: Professional Audiology Clinic Ltd

Service date (YYYY/MM/DD)	Product or service	Practitioner	Claimed amount	AADL contribution	Patient cost share portion	Patient upgrade charge	Explanation number*
2022/05/17	Behind-the-ear hearing aid		1,000.00	750.00	250.00	0.00	
Total			\$ 1,000.00	\$ 750.00	\$ 250.00	\$ 0.00	

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