
myWCB Online User Guide for Physical Therapists

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Welcome to myWCB's Online Services

Introduction

With access to myWCB, physical therapists can electronically submit patient injury reports and invoices to WCB-Alberta.

System Availability

Electronic injury reporting is available daily; please refer to the online maintenance schedule available on our website at http://www.wcb.ab.ca/pdfs/providers/injury_report_sched.pdf

System Requirements

- Microsoft Internet Explorer (6.0 or 7.0)
- Adobe Reader (6.0 or higher)
- High speed internet connection

Technical Support

Should you require assistance using our online services, the eBusiness Support Team is available to answer your technical questions. They can be reached at:

Email: ebusiness.support@wcb.ab.ca

Phone: 780 498 7688

Fax: 780 498 7866

The team is available from 8:00 am to 4:30 pm (MST), Monday through Friday.

Security

Each user requiring access to myWCB will be issued a unique UserID and password. When a UserID and password is issued, it is recommended they *not* be shared with others. In addition, when an individual leaves an organization or no longer requires access to our systems, the UserID should be deactivated.

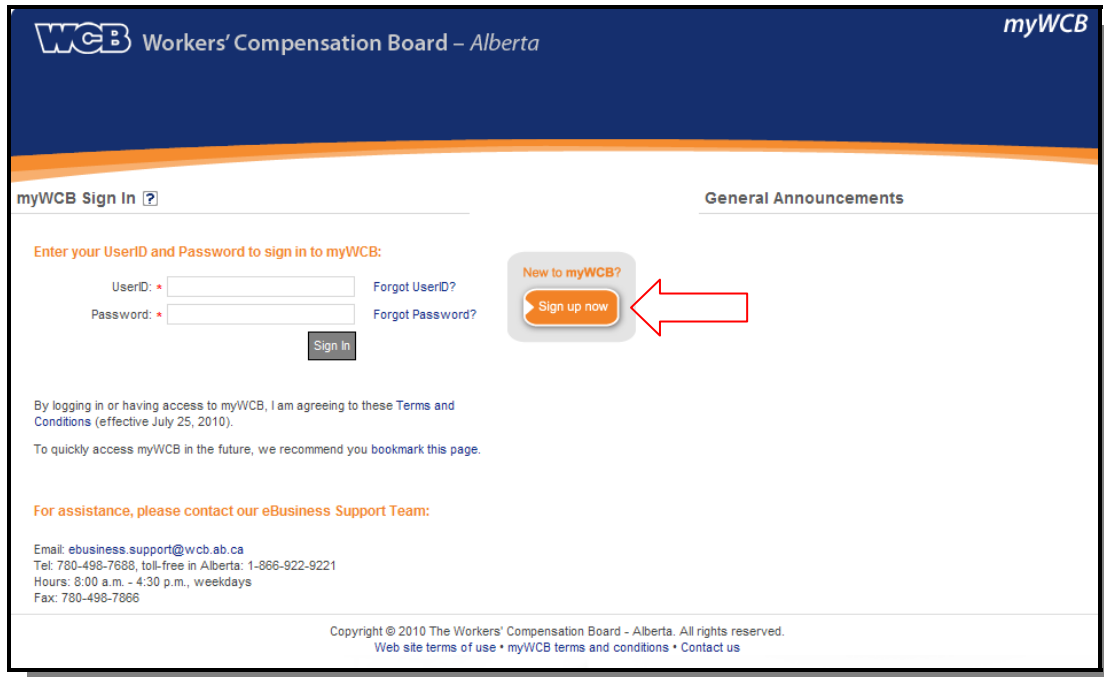
Our online services are accessible via a secure web channel using 128-bit Secure Socket Layer (SSL) encryption. Users can be assured that all information transferred through the online services is transmitted using the highest level of security.

To further enhance security, myWCB times out after 60 minutes. Any unsaved information will be lost.

Getting Started

To request access to myWCB online services, please follow the steps below:

1. Go to the myWCB Sign In page at <https://my.wcb.ab.ca> and click the Sign up now button.



2. Complete the required field and click the Next button.
3. A suggested UserID will be provided. (It can be changed if required.) Enter and confirm the password. Click the Next button.
4. Select the Physical Therapist radio button, enter the WCB billing number and select the role(s) you perform for the billing number you identified. Click the Next button.

Note: The role(s) you select will determine the level of access. Listed below are the roles and the associated myWCB online services they will allow you to access.

Role	Online Services
Physiotherapy Clinic Administrator/Manager/Owner	<ul style="list-style-type: none"> • create, modify, submit and view all physiotherapy reports and invoices for the billing number
Physiotherapy Treatment Provider - Report Creator (unable to submit)	<ul style="list-style-type: none"> • create and modify physiotherapy reports s/he created • view all reports and invoices for the billing number <p>Note: cannot submit the reports to the WCB-Alberta</p>

Physiotherapy Treatment Provider - Report Submitter	<ul style="list-style-type: none"> • create, modify, submit and view all physiotherapy reports and invoices for the billing number
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5. Enter the number of a WCB cheque or electronic funds transfer for the WCB billing number you identified. Click the Next button. If you are directed to the Confirmation screen, the key facts may have been disabled by your Online Administrator. Please complete steps six to eight and await an email advising you of your access status.

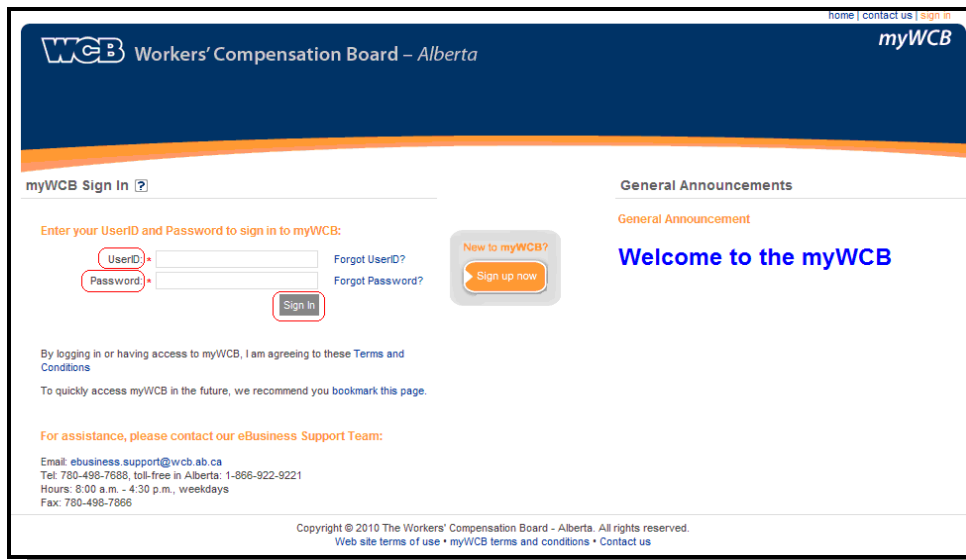
Note: You are allowed three attempts to answer the key fact questions correctly. After three unsuccessful attempts, you will be directed to the Confirmation page where you may modify the access you requested or Click the Submit button to send the access request to the Online Administrator. If an Online Administrator does not exist, the access request will be sent to the eBusiness Support Team. Upon receipt of your access request, the Online Administrator or the eBusiness Support Team may modify, approve or deny the request.

6. Review your request on the Confirmation screen and make any necessary changes by clicking on the applicable Modify button. Click the Submit button if no changes are required.
7. Click the Finish button to go to the Terms and Conditions screen.
8. Review and accept the terms and conditions by placing a checkmark beside “I agree to the terms and conditions” and click the Next button. You will now be logged on with your UserID.

Note: Only one physical therapy billing number can be assigned to a UserID. If additional billing numbers are required, separate UserIDs must be requested.

Logging in

1. Go to the myWCB Sign In page at <https://my.wcb.ab.ca>.



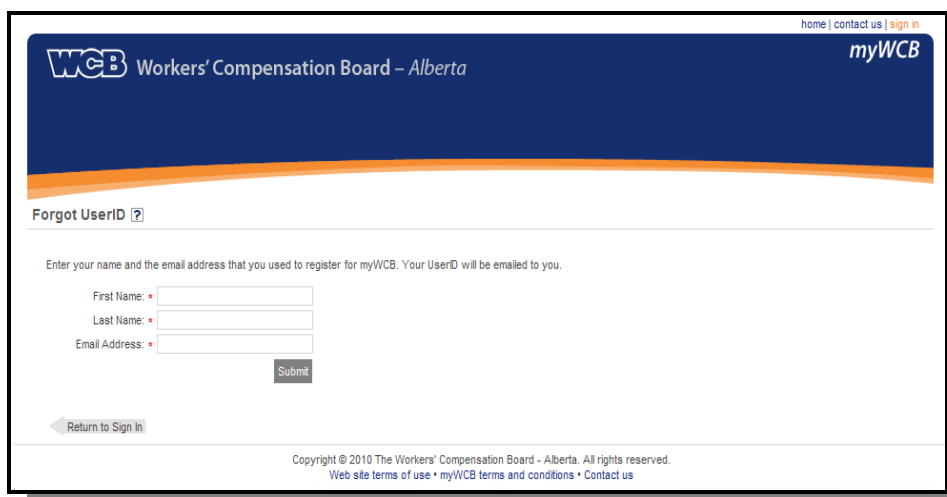
The screenshot shows the myWCB Sign In page. At the top, there is a navigation bar with the WCB logo, "Workers' Compensation Board - Alberta", and "myWCB". Below the navigation bar, the page is divided into two main sections. On the left, the "myWCB Sign In" section contains a form with two input fields: "UserID" and "Password". A "Sign In" button is located below the "Password" field. To the right of the "Sign In" button are links for "Forgot UserID?" and "Forgot Password?". A "New to myWCB? Sign up now" button is also present. On the right side of the page, there is a "General Announcements" section with a "Welcome to the myWCB" message. At the bottom of the page, there is a footer with contact information for the eBusiness Support Team and a copyright notice for 2010.

2. Enter your UserID and password and then click the Sign In button. Please note, the password is case sensitive.

Note: You will be required to accept the terms and conditions on your first sign in.

Forgot UserID

1. Click the Forgot UserID link from the Sign In page. The following window will be displayed.



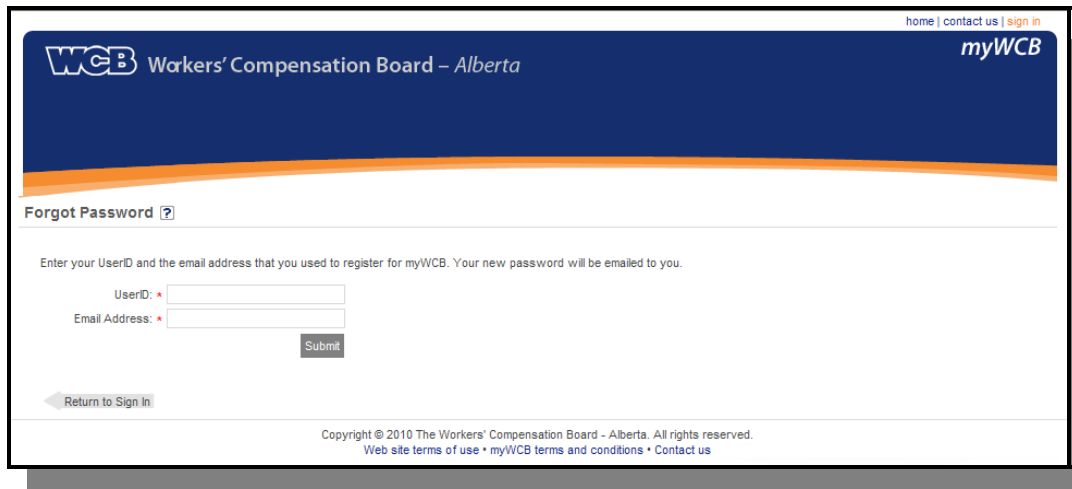
The screenshot shows the myWCB Forgot UserID page. At the top, there is a navigation bar with the WCB logo, "Workers' Compensation Board - Alberta", and "myWCB". Below the navigation bar, the page is divided into two main sections. On the left, the "Forgot UserID" section contains a form with three input fields: "First Name", "Last Name", and "Email Address". A "Submit" button is located below the "Email Address" field. On the right side of the page, there is a "Return to Sign In" link. At the bottom of the page, there is a footer with a copyright notice for 2010.

2. Enter your first name, last name and email address associated with your UserID. Click the Submit button.

Note: If you are unable to provide the required information, please contact your Online Administrator or the eBusiness Support Team.

Forgot Password

1. Click the Forgot Password link from the Sign In page. The following window will be displayed.

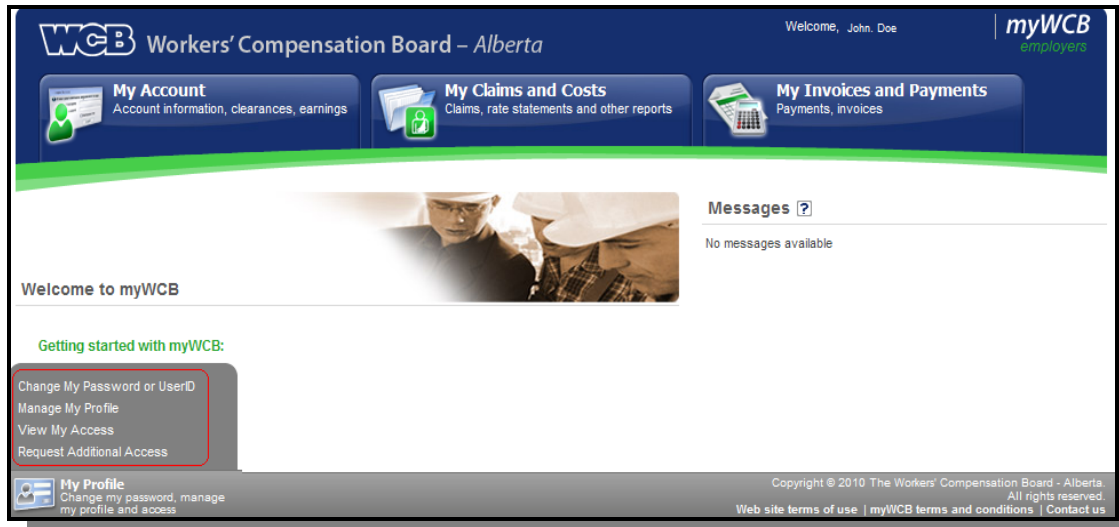


The screenshot shows the 'Forgot Password' page on the WCB myWCB website. The page has a dark blue header with the WCB logo and 'Workers' Compensation Board - Alberta' text on the left, and 'myWCB' on the right. In the top right corner of the header, there are links for 'home', 'contact us', and 'sign in'. Below the header, the page title is 'Forgot Password' with a help icon. A message reads: 'Enter your UserID and the email address that you used to register for myWCB. Your new password will be emailed to you.' There are two input fields: 'UserID: *' and 'Email Address: *'. A 'Submit' button is located below the 'Email Address' field. At the bottom left, there is a 'Return to Sign In' link. At the bottom center, there is a copyright notice: 'Copyright © 2010 The Workers' Compensation Board - Alberta. All rights reserved. Web site terms of use • myWCB terms and conditions • Contact us'.

2. Enter your UserID and email address. Click the Submit button. A new temporary password will be emailed to you.

Making changes to My Profile and Access

The **My Profile** menu is found in the bottom left of the screen.



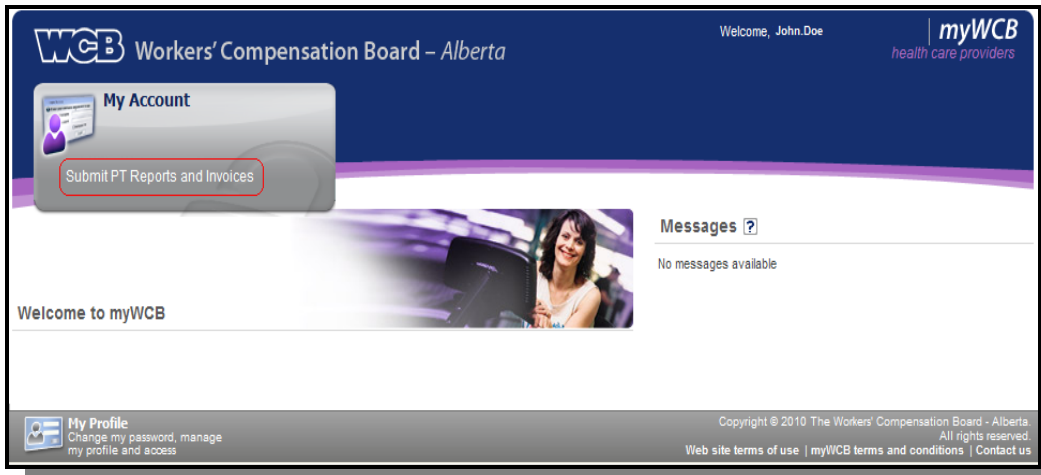
The **My Profile** menu provides the following options:

1. Change My Password or UserID
2. Manage My Profile - make changes to your personal and/or company information
3. View My Access – view your current access to myWCB
4. Request Additional Access – request or modify your current access.

Note: Users may have access to a maximum of ONE physical therapy billing number per myWCB UserID; therefore, this option should not be used to request access to additional physical therapy billing numbers. It may, however, be used to request access to another user type such as, physician, chiropractor or employer. If access to more than one physical therapy billing number is required, a new UserID will need to be requested. To request a new UserID, please follow steps 1 to 8 on pages 4 and 5.

Submitting and viewing reports or invoices

To view or submit treatment reports and invoices go to **My Account**, click on **Submit PT Reports and Invoices**.



The online injury reporting window will now be displayed for you to view, create and/or submit your treatment reports and invoices.

The screenshot shows the 'C533 - Physical Therapy Assessment Report' form. The form is divided into several sections, each with a corresponding button on the left: Section 1 (Transaction ID), Section 2 (WCB Claim Number), Section 3 (Worker Surname, Worker First Name, Worker Middle Name), Section 4 (Address Line 1, Address Line 2), Section 5 (City/Town, Province, Postal Code), and Invoice. The form includes various input fields, including text boxes, a dropdown menu for 'Province' (set to 'AB'), and radio buttons for 'Yes/No' questions. At the bottom, there are two buttons: 'SAVE CHANGES' and 'SUBMIT FOR PROCESSING'. The form also includes a copyright notice at the bottom left: 'Copyright © 2002 Workers' Compensation Board - Alberta. All rights reserved.'

Reporting an Injury

Reporting an injury online, provides a free, easy-to-use and convenient means for physical therapists to submit their reports and invoices to WCB. Through this system, physical therapists can electronically submit their **Assessment Reports (C-533)**, **Status Reports (C-534)**, **Finalize Treatment Reports (C-703)** and **Invoices (C-019)**. In addition, physiotherapy treatment **extension requests** can also be submitted for approval using this system.

Electronic submission of injury reports is mandatory for physical therapists to use when submitting patient injury reports. This method of reporting replaces the traditional faxing method for report and invoice submission.

There are several advantages to using Injury Reporting:

- **Faster payments** – Report fees are automatically approved for the next cheque run as soon as WCB receives the electronic submission. Direct deposit makes receiving payments even faster!
- **Flexible reporting options** – Multiple users can access the same reports from any location with internet access.
- **Faster approvals** – Reports are in the hands of case managers sooner to expedite approval for the payment of the fee for service. Your information reaches WCB decision-makers within hours of submission.
- **Report Management** – The system can be used as a centralized storage medium, allowing you to store and organize claim reports.

Navigating through Injury Reporting

This section will describe the screen layout of reporting an injury. There are five areas of the screen as described below:

The screenshot shows the WCB Alberta online reporting interface. At the top, there are function tabs: 'Assessment Report' (1), 'New Report from Existing', 'Search Reports', and 'Payment Remittance'. A 'Help | Logout' link (5) is in the top right. The main title is '[C533 - Physical Therapy Assessment Report]' (2). On the left, a sidebar contains section tabs: 'Section 1' (selected), 'Section 2', 'Section 3', 'Section 4', 'Section 5', and 'Invoice' (3). The main form area contains the following fields and questions:

- Transaction ID: [Text Field]
- Does the worker have an Alberta PHN? Yes No
- WCB Claim Number: [Text Field]
- Personal Health Number: [Text Field]
- Clinic Reference Number: [Text Field]
- Worker Surname: [Text Field]
- Worker First Name: [Text Field]
- Worker Middle Name: [Text Field]
- Worker Date of Birth (YYYYMMDD): [Text Field]
- Address Line 1: [Text Field]
- Address Line 2: [Text Field]
- City/Town: [Text Field]
- Province: [Dropdown Menu (AB)]
- Postal Code: [Text Field]
- Country Code: [Dropdown Menu (Canada/USA/Caribbean (1))]
- Area Code: [Text Field]
- Telephone Number: [Text Field]
- Date of Injury (YYYYMMDD): [Text Field]
- Has the worker lost time from work due to this injury? Yes No
- If yes, has the worker returned to work as of the assessment date? Yes No
- What level of Physical Therapy Treatment is the worker following? [Dropdown Menu (Please Choose)]

At the bottom, there are two buttons: 'SAVE CHANGES' (4) and 'SUBMIT FOR PROCESSING'.

1. **Function tabs** – Provide access to different areas. Function tabs allow you to **enter** a new **Assessment Report**, create **Status Reports** and **Invoices**, and **Search** for both completed reports and reports that are still in progress.
2. **Report name** – Identifies the type of report currently being edited.
3. **Section tabs** – Used to toggle among the different sections of the report currently being edited.
4. **Save Changes & Submit For Processing buttons** – The **Save Changes** button saves all information entered in the report that is being edited. At this stage, no data validation or error checking is performed, and the report cannot be reviewed by WCB staff for adjudication purposes. The **Submit For Processing** button first checks all inputted data for completeness and correctness and, if no errors are found, will transmit the report to WCB for claim adjudication.
5. **Help & Logout links** – The **Help** link opens a new browser window containing a comprehensive help document. The **Logout** link will allow you to securely exit and return you to the **myWCB** home screen.

Working with Reports

The Assessment Report (C-533)

Upon entering electronic injury reporting online, you are always automatically provided with a new, blank Assessment Report. The Electronic Reporting system requires this report to be submitted first for the patient, before any subsequent reports can be created. As per the 2004 Physical Therapy Contract, clinics are required to submit the Assessment Report to the WCB within two (2) business days of the date of the initial assessment.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[C533 - Physical Therapy Assessment Report]

Section 1 Transaction ID:

Section 2 WCB Claim Number Does the worker have an Alberta PHN? Personal Health Number Clinic Reference Number

Section 3 Worker Surname Worker First Name Worker Middle Name Worker Date of Birth (YYYYMMDD)

Section 4 Address Line 1 Address Line 2

Section 5 City/Town Province Postal Code

Invoice Country Code Area Code Telephone Number Date of Injury (YYYYMMDD)

Has the worker lost time from work due to this injury? If yes, has the worker returned to work as of the assessment date? What level of Physical Therapy Treatment is the worker following?

SAVE CHANGES SUBMIT FOR PROCESSING

General Layout

The Assessment Report is divided into 5 different sections (plus invoice), as indicated by the corresponding tabs along the left side of the screen. By simply clicking from tab to tab, you may navigate from one section of the report to the next. The sections of the report can be completed in any order; however, all five sections of the report should be completed first before any attempt is made to submit the report. While it is not mandatory to **Save Changes** after every section (you could, in theory, fill out all sections of the report, then click on Save Changes to save everything), it is *highly recommended* that you save **regularly** to avoid losing data due to timing out or lost internet connection issues.

Entering Data

Each section of the report contains a number of labeled question fields and a corresponding text box, pull-down menu, or radio buttons for you to provide your answer. Text boxes permit you to enter and edit

freehand information using a keyboard. Pull-down menus and radio buttons allow you to select an answer from a simplified list of choices using a mouse. If you do not find a specific answer you require in a pull-down menu, simply select the option that best matches the answer.

In text fields where specific formatting is required (for instance, date fields), the system will display the formatting style in the field label.

*Note: Do not cut and paste text directly from your word processor. Advanced text editors such as **Microsoft Word** often contain special characters cannot be interpreted. Refer to the [Frequently Asked Questions](#) at the end of this document for more information about cutting and pasting text.*

For a detailed explanation of what a particular field is asking, or to find out if a specific field is mandatory to be answered, consult the online **Help** file. Because the Help file always opens in a new window, you can continue working on your report even while the Help file is open (please ensure all pop-up blockers are disabled in order to use this feature). The Help file also contains useful suggestions and examples for properly filling out individual fields.

Saving and submitting

When the **Save Changes** button is clicked, *all* information you have entered in *every* section of the report will be saved remotely on our secure servers. No data is ever saved locally to your machine. Should your computer or network system crash or be compromised, no confidential information will be lost and all report data will remain safely accessible through any other machine having secure internet access. Keep in mind that when the **Save Changes** button is clicked, nothing is ever submitted for review by WCB.

The fact that the report is saved to a central location also means that reports do not have to be entered all at once. You can start filling out portions of a report, save a draft copy, then continue working on it at a later time or even from a different machine.

The first time a report is successfully saved, a **Transaction ID** will be automatically assigned to the report (found on Section 1 of the Assessment Report). The Transaction ID is a unique report identifier that is assigned to each and every report that is created and saved in the system. While most clinics will not need to record or reference this number, the *eBusiness Support Team* may request this number when you call for assistance.

Once you have completed all sections of the report and click on the **Submit for Processing** button, the following will occur:

1. All data in the report will be saved.
2. The system will check the report for errors – either fields that contain invalid data, or mandatory fields that have been left blank. If errors are found, the system will individually identify and explain every error, which must be corrected by you. You must click on **Submit for Processing** once again in order to continue.

- If further errors are still found, you must continue correcting and submitting the report until they have received the message “Your report was successfully submitted”. You may attempt to submit the report as many times as is necessary without causing problems. WCB does not examine the report until it has been successfully submitted.



The following chart summarizes the differences between reports that have been submitted and those that have only been saved:

Saved Reports	Submitted Reports
<ul style="list-style-type: none"> ▪ Are not examined by WCB. ▪ Can be edited, printed and even deleted at your convenience. 	<ul style="list-style-type: none"> • Become part of an official claim file. • Can be printed, but not edited or deleted.

Correcting Errors

After clicking on the **Submit for Processing** button, the report is first checked for accuracy and completeness before being transmitted to WCB. If the system finds any errors, you will be notified in three ways:

- Section tabs will be highlighted with red text if there are errors in that section.
- Within each section, individual fields that contain errors will be highlighted with red text.
- Error descriptions will be displayed at the top of each section.

To correct errors, click on a section tab where the tab text is highlighted in red. Within that section, look for the individual field(s) marked in red – these are the fields that need to be corrected. Use the **Section Error** descriptions at the top of the page to determine how to fix the error.

Some errors may appear more complex than others. The simplest errors arise from mandatory fields that have not been completed (most fields are always mandatory; however, some *become* mandatory, depending on what was answered in a previous question). For example, if you indicate in Section 5 that there are work restrictions, then a description of those restrictions must be entered (in contrast, if there are no work restrictions, then the description field must be left blank).

Other errors messages may emerge due to invalid or illogical data that has been entered. Examples of this include invalid postal codes or Health Care numbers, or a date of examination that occurs before the date of injury. To best identify the nature of the error, refer to the error description(s) at the top of each section. If the nature of the error is still not clear, contact the eBusiness Support Team for assistance.

Once all errors have been corrected, the system will allow the report to be submitted for processing. You will receive a pop-up message stating “**Your report was successfully submitted**”, indicating that the report has been successfully transmitted to WCB.

*Important note: Once a report has been submitted, you are no longer able to make additions or modifications to the report. If there is any information that was mistakenly omitted or a correction needs to be made to the report, you may submit this to WCB by fax, phone or email. Please refer to the **Contact Us** section below for this information.*

Invoicing with the Assessment Report

Schedule “B” (II.10) of the 2004 Physical Therapy Contract specifies that an invoice should be submitted to WCB *only* along with the Physical Therapy Status Report.

Normally, an invoice is not submitted with the Assessment Report; therefore, the electronic reporting application will not allow an invoice to be submitted at this point *unless* the patient is immediately being discharged (a discharge is indicated by choosing “Yes” to the **Treatment Complete** field in Section 5 of the report). If, and only if, the patient is being discharged on the initial report, you may submit an invoice for the initial assessment only, as displayed below.

The screenshot shows the WCB (Workers' Compensation Board Alberta) interface for the 'Physical Therapy Assessment Report'. The top navigation bar includes 'Assessment Report', 'New Report from Existing', 'Search Reports', 'Payment Remittance', 'Help', and 'Logout'. The main content area is titled '[C533 - Physical Therapy Assessment Report]'. On the left, there is a sidebar with sections 1 through 5, and an 'Invoice' section which is currently selected. The main area displays three diagnostic code fields. Below these is a 'FEE FOR SERVICE' section with the instruction 'Since Assessment is Final Treatment, please bill for service now.' This section contains a table with four columns: 'Date of Service (YYYYMMDD)', 'Health Service Code', 'Treatment Provider', and 'Fees Submitted'. The 'Health Service Code' field is populated with '07.38AA'. A 'Calculate' button is located to the right of the table. At the bottom of the form, there are two buttons: 'SAVE CHANGES' and 'SUBMIT FOR PROCESSING'. A copyright notice for 2002 is visible in the bottom left corner.

FEE FOR SERVICE			
Since Assessment is Final Treatment, please bill for service now.			
Date of Service (YYYYMMDD)	Health Service Code	Treatment Provider	Fees Submitted
<input type="text"/>	07.38AA	<input type="text"/>	<input type="text"/>

To do this, simply enter the **Date of Service**, type in the name of the **Treatment Provider**, then click on the ‘Calculate’ button. The system will automatically calculate the contracted fee for the assessment in the **Fees Submitted** field. Once all sections of the Assessment Report have been completely filled out, click on the ‘Submit For Processing’ button to submit both the invoice and Assessment Report to WCB for processing and payment.

The Status Report (C-534)

Physical therapists are required to submit a **Status Report** after the third week of treatment for Triage 4 treatments or every four weeks for Triage 5 surgical protocols. A final Status Report should also be submitted within two (2) business days of patient discharge, which will serve as a Discharge Report. Status Reports contain an **invoice** that allows you to submit your billing for assessment, treatments and sundry items.

Creating a Status Report

Prior to being allowed to create a Status Report, a submitted **Assessment Report** for the patient must already exist in the system.

To create a **Status Report**:

1. Click on the **New Report from Existing** tab at the top of the page.

The screenshot displays the WCB Alberta online services interface. At the top, there is a navigation bar with tabs for 'Assessment Report', 'New Report from Existing', 'Search Reports', and 'Payment Remittance'. The 'New Report from Existing' tab is selected. Below the navigation bar, there is a section titled 'New From Existing' with a yellow background. The main content area contains a search form with the following fields and options:

- Transaction ID**: Text input field.
- Last Name**: Text input field with 'Doe' entered.
- Processed Claim Number**: Text input field.
- Date of Birth**: Text input field.
- Date of Injury**: Text input field.
- Report Status**: Dropdown menu with 'Please Choose' selected.
- Personal Health Number**: Text input field.
- Active** and **Historical**: Radio button options.
- Create Report As**: Dropdown menu with 'Physical Therapy Status Report' selected. A dropdown menu is open showing options: 'Please Choose', 'Physical Therapy Finalize Treatment', 'Physical Therapy Additional Treatment Invoice', and 'Physical Therapy Status Report'.
- Sort By**: Radio button options for 'Transaction ID', 'Last Name', 'Claim Number', 'Date of Injury', 'Report Status', and 'Treatment Provider'. 'Last Name' is selected.
- SEARCH**: Button at the bottom right of the form.

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Alberta.
All rights reserved.

2. Identify the patient for whom the Status Report is to be created by filling in one or more search criteria fields. The options available to search by are as follows:

Transaction ID – The unique report identification number that is automatically assigned to the report when it was first saved

Last Name – The patient's last name as it was entered on the previous report

Processed Claim Number – The claim number that was automatically assigned to the report, if the report has already been processed by the system after being submitted (this may not be the same as the claim number you manually entered on the report)

Date of Birth – The patient's date of birth. The format should be entered as YYYYMMDD

Date of Injury – The date of injury as it was entered on the report. The format should be entered as YYYYMMDD

Report Status – The options available in this selection box are:

Submitted – The report has been successfully submitted to WCB, but it has not yet been processed.

Held for Manual Processing – The report has been successfully submitted to WCB; however, the system is unable to successfully match the report to an existing claim on file.

Manual Processing Complete – The report has been submitted to WCB and was held for manual processing, but the Customer Records Clerk has finished processing the report and a claim number has been assigned.

Complete – The report has been successfully submitted to WCB, and a claim number is assigned to the report.

For more information regarding report statuses, refer to the section on “Submitted Reports”, beginning on page 31.

Personal Health Number – The patient’s Alberta Health Care number

Active/Historical – Allows you to choose between searching and viewing reports that are “active” versus reports that have been “moved to history”. For more information regarding Active and Historical reports, refer to the section on “Submitted Reports”, beginning on page 31.

Treatment Provider – the billing number/name of the treating chiropractor, selected from a drop-down list

Note: Although online reporting provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field (however, at least one search criteria is required to perform a search). The last name alone is usually sufficient to find the correct patient.

As an option, you may also select the field by which the search results will be sorted when the results are displayed (**Last Name** is selected by default).

3. In the **Create Report As** pull-down menu, select the option **Physical Therapy Status Report**.
4. Click on the **Search** button. The system will now search for, and return, a summary of any submitted Assessment Reports matching the search criteria entered.

The screenshot shows a search results interface with a yellow background. At the top left, it says "New From Existing". Below that, it displays "Found: 1 Displaying: 1 - 1". The main content is organized into three columns of information:

Transaction ID: 614606	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Submitted		

At the bottom right of the record, there is a link that says "Create New" and a blue button labeled "MODIFY SEARCH".

5. From the ensuing list of results, locate the correct patient and click on the corresponding **Create New** link.
6. The system will create a new Status Report for the patient that has been automatically pre-populated with basic information taken from the initial report.

From here, the process of completing the Status Report is identical to that of completing the Assessment Report. Refer to the steps described on Page 12 for entering, saving and submitting data, and correcting errors.

Discharging the Patient

To *discharge* a patient on the Status Report, simply select “**Yes**” to the question, **Treatment Complete** in Section 5 of the report. If the patient is not being discharged, then answer “**No**”.

Requesting an Extension of Treatment

The Status Report provides the physical therapist with the ability to submit an online request for an extension of treatment. For Triage 4 treatment, such requests must be made in conjunction with the second Status Report, submitted between the fifth and sixth week of treatment. For Triage 5 surgical/fracture protocol, the request is made just prior to when the patient is scheduled to be discharged, in accordance with either the surgical protocol timeframe identified by the patient’s surgeon, or WCB surgical protocol timeframe, whichever applicable.

To request an extension of treatment:

1. **Do not** discharge the patient. A final Status report will be submitted at the completion of the extended treatment period, at which time the patient will be discharged. To ensure that the patient is **not** discharged, select “**No**” in the **Treatment Complete** field found in Section 5 of the Status Report.
2. Indicate the number of weeks of additional therapy being requested in the field shown below, also found in Section 5 of the Status Report.

Number of weeks of additional therapy required, if treatment is not complete
<input type="text"/>

3. Answer “Yes” to the question “Is this a request for treatment extension beyond the currently authorized timeframe?” Doing so will automatically send the request to the WCB Physical Therapy Consultant upon submission of the report.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

IC534 - Physical Therapy Status Report

Section 1 Treatment Complete Yes No Work Restrictions Yes No If yes, describe: _____

Section 2 If yes, choose: Permanent Temporary If temporary, how long? _____

Section 3 Employment Status at Discharge: Please Choose _____ If other, describe: _____

Section 4 Number of weeks of additional therapy required, if treatment is not complete: _____ **Is this a request for treatment extension beyond the currently authorized timeframe?** Yes No

Section 5 Is the injury preventing worker from performing date of accident work? Yes No Estimated Date of Return to Date of Accident Work (YYYYMMDD): _____

Invoice Does the worker have a job to return to? Yes No If yes, indicate current work capability: Please Choose _____

Can modified or alternate work be performed? Yes No

Job Requirements: Please Choose _____ Job requirements confirmed by: Please Choose _____ Explanation (if job requirements were not confirmed): _____

Any other relevant comments or observations? _____ Treating Therapist: _____

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SAVE CHANGES | SUBMIT FOR PROCESSING

Invoicing on the Status Report

You are required to submit an invoice to WCB with each Status Report (submitted at the end of the third week of treatment for Triage 4, or at the end of every four week cycle for Triage 5, and again at discharge). In online reporting you are provided with an online invoice that can be filled out and submitted together with the Status Report.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[C534 - Physical Therapy Status Report]

Section 1 Diagnostic Code 1: 845 Diagnostic Code 2: Diagnostic Code 3:

Section 2

Section 3

Section 4

Section 5

Invoice

FEE FOR SERVICE				Next 10 >
	Date of Service (YYYYMMDD)	Health Service Code	Treatment Provider	Fees Submitted
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Calculate Sundry Items

SAVE CHANGES SUBMIT FOR PROCESSING

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For each service provided to the patient:

1. Enter the **Date of Service** (in the format 'YYYYMMDD')
2. Select the corresponding **Health Service Code** from the drop-down list. The following codes may be selected from the drop-down menu:
 - 07.38AA – Physical Therapy Assessment with Treatment
 - 07.38AB – Physical Therapy Acute Treatment
 - 07.38AF – Transitional Return to Work Visit
3. Enter the name of the treating physical therapist in the **Treatment Provider** field.

Note: The user will be unable to enter a value in the **Fees Submitted** field, as the values in this field will be automatically populated with the correct payment amount after the 'Calculate' button is clicked.

The invoice screen displays ten lines at a time. If additional lines are required, click on the [Next 10>](#) link at the top right side of the screen to gain access to lines 11 through 20 of the invoice.

To submit fees for **Sundry Items**, click on the "Sundry Items" button to access the sundry items invoice screen.

[C534 - Physical Therapy Status Report]

SUNDRY ITEMS				
	Date of Service (YYYYMMDD)	Health Service Code	Quantity	Fees Submitted
1.	20060501	TB01 - Theraband (1 Meter)	2	
2.				

Calculate Return

For each sundry item provided to patient:

1. Enter the **Date of Service** (in the format ‘YYYYMMDD’)
2. Choose the item from the **Health Service Code** pull-down list*
3. Enter the **Quantity** of items provided to the patient (in whole numbers).

Note: The **Fees Submitted** field is not editable, and will automatically be populated when the **Calculate** button is pressed.

You can return to the main invoice screen by clicking on the **Return** button.

* The **Health Service Code** pull-down list on the Sundry Items screen contains items that the contractor may prescribe to their WCB patients without prior authorization from the Case Worker, up to a total of \$60.00. Any sundry item(s) exceeding \$60.00 require case worker approval prior to provision to the worker. Refer to Schedule “B”, section III of the 2004 Physical Therapy Contract for details.

The Physical Therapy Finalize Treatment Report (C-703)

The **Finalize Treatment Report** is provided as a method for discharging the patient without having to fill out a complete **Discharge Report**. Finalize Treatment should be used *only* in cases where the patient needs to be discharged, but the physical therapist has no new information to report regarding the patient’s progress or status. Examples of cases where a Finalize Treatment Report should be used include:

1. **When a patient’s claim is denied** – The patient has undergone a physical therapy assessment, and the clinic has submitted the Assessment Report to WCB. The claim, however, has subsequently been denied, so the patient must now be discharged from the system. Because there is no new information to submit regarding the patient’s condition, the patient must be discharged through the Finalize Treatment Report.
2. **Non-compliance or Non-attendance** – Physiotherapy treatment for the patient has been terminated, either by the patient, or by WCB due to patient non-compliance or non-attendance. If the physical therapist does *not* have any new information to provide to WCB regarding the patient’s condition or status since the last report was submitted, then the patient may be discharged by finalizing treatment. If there *is* a change or an update to the patient’s status since the last report was submitted, a Discharge Report should be used instead.
3. **Declined Extension Request** – The physical therapist has requested an Extension for Treatment, which has subsequently been declined by the Physiotherapy Consultant. Since the patient is never discharged when an Extension for Treatment is requested (through a second Status Report), the patient must now be discharged with a Finalize Treatment Report.

A Report Fee is *not* paid for a Finalize Treatment Report.

Creating a Finalize Treatment Report

Prior to being allowed to create a Finalize Treatment Report, a submitted **Assessment Report** for the patient must already exist in the system.

To create a **Finalize Treatment Report**:

1. Click on the **New Report from Existing** tab at the top of the screen.

WCB Workers' Compensation Board Alberta

Assessment Report | **New Report from Existing** | Search Reports | Payment Remittance | Help | Logout

New From Existing

Please enter your search criteria, and click Search for resulting list of matching reports

Transaction ID	Last Name	Processed Claim Number
<input type="text"/>	<input type="text" value="Doe"/>	<input type="text"/>
Date of Birth	Date of Injury	Report Status
<input type="text"/>	<input type="text"/>	Please Choose
Personal Health Number	<input type="radio"/> Active <input type="radio"/> Historical	
<input type="text"/>	Create Report As	
Please Choose		
Please Choose		
Physical Therapy Finalize Treatment		
Physical Therapy Additional Treatment Invoice		
Physical Therapy Status Report		

Sort By

<input type="radio"/> Transaction ID	<input checked="" type="radio"/> Last Name	<input type="radio"/> Claim Number
<input type="radio"/> Date of Injury	<input type="radio"/> Report Status	<input type="radio"/> Treatment Provider

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2. Identify the patient for whom the Finalize Treatment Report is to be created by filling in one or more search criteria fields.

Note: Although the system provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

3. In the **Create Report As** pull-down menu, select the option **Physical Therapy Finalize Treatment**.
4. Click on the **Search** button. The system will first search for, and then return, a summary of any submitted Assessment Reports matching the search criteria entered.

New From Existing

Found: 1 Displaying: 1 - 1

Transaction ID: 614606	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Submitted		

[Create New](#)

- From the ensuing list of results, locate the correct patient and click on the corresponding **Create New** link.
- The system will create a new Finalize Treatment Report that has been automatically pre-populated with basic information taken from the initial report.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

IC703 - Physical Therapist Finalize Treatment Report

Section 1

Section 2

Transaction ID:

WCB Claim Number: 9999 999

Does worker have an Alberta PHN? Yes No

Personal Health Number: []

Clinic Reference Number: []

Worker Surname: Doe

Worker First Name: John

Worker Middle Name: []

Worker Date of Birth (YYYYMMDD): 1970-04-18

Worker Address Line 1: 123 Any Street

Worker Address Line 2: []

City/Town: Anytown

Province: AB

Postal Code: []

Country Code: Canada/USA/Caribbean (1)

Area Code: 555

Telephone Number: 555-5555

Date of Injury (YYYYMMDD): 2006-05-09

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The Finalize Treatment Report consists of two Section tabs, with the fields in Section 1 pre-populated with patient data taken from the Assessment Report. To complete the report, simply verify that the information in Section 1 is correct, then click on the Section 2 tab to continue.

The Section 2 tab contains only one question: **Employment Status at Discharge**. Select the answer that best reflects the current employment status of the patient from the drop-down list, then click on the **Submit For Processing** button to submit the report.

Note: The **Finalize Treatment Report** *does not* include an invoice tab. If further billing is required after the Finalize Treatment Report has been submitted, it must be done through an **Additional Treatment Invoice**. Please refer to the next section below for more information on this type of invoice.

The Physical Therapy Additional Treatment Invoice (C-019)

The **Additional Treatment Invoice** is provided to allow the service provider to invoice for services *after* the patient has been discharged. This invoice is a stand-alone invoice and is not attached to any type of report. Instances where a service provider may need to submit an Additional Treatment Invoice include:

1. Billing for treatments that were omitted in error from previously submitted invoices
2. Billing for Transitional (Return to Work) visits
3. Billing for services and sundry items on a patient for which a Finalize Treatment Report has been submitted.

Note: If the service provider has forgotten to bill for a service on their invoice submitted with their first Status Report and the patient is still active, they can simply wait until the next Status Report is submitted (on discharge) to then include the omitted service. Injury reporting will not allow an Additional Treatment Invoice to be created for a patient that has not yet been discharged.

Creating an Additional Treatment Invoice

Prior to creating an Additional Treatment Invoice, the patient *must* be discharged first from the system (either by submitting a Status Report with **Treatment Complete = “Yes”**, or through a Finalize Treatment Report).

To create an **Additional Treatment Invoice**:

1. Click on the **New Report from Existing** tab at the top of the screen.

WCB Workers' Compensation Board Alberta

Assessment Report | **New Report from Existing** | Search Reports | Payment Remittance | Help | Logout

New From Existing

Please enter your search criteria, and click Search for resulting list of matching reports

Transaction ID	Last Name	Processed Claim Number
<input type="text"/>	<input type="text" value="Doe"/>	<input type="text"/>
Date of Birth	Date of Injury	Report Status
<input type="text"/>	<input type="text"/>	Please Choose
Personal Health Number	<input type="radio"/> Active <input type="radio"/> Historical	
<input type="text"/>		
Sort By	Create Report As	
<input type="radio"/> Transaction ID	Please Choose	
<input checked="" type="radio"/> Last Name	Please Choose	
<input type="radio"/> Claim Number	Physical Therapy Finalize Treatment	
<input type="radio"/> Date of Injury	Physical Therapy Additional Treatment Invoice	
<input type="radio"/> Report Status	Physical Therapy Status Report	
<input type="radio"/> Treatment Provider		

SEARCH

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2. Identify the patient for whom the Additional Treatment Invoice is to be created by filling in one or more search criteria fields.

Note: Although online reporting provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

3. In the **Create Report As** pull-down menu, select the option **Physical Therapy Additional Treatment Invoice**.

- Click on the **Search** button. The system will first search for, and then return, a summary of any submitted Status Reports (with a discharge) or Finalize Treatment Reports matching the search criteria entered.

[New From Existing]

Found: 1 Displaying: 1 - 1

Transaction ID: 614606	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Submitted		

[Create New](#)

MODIFY SEARCH

- From the ensuing list of results, locate the correct patient and click on the corresponding **Create New** link.
- The system will create a new Additional Treatment Invoice that has been automatically pre-populated with the patient's basic information taken from the Status Report or Finalize Treatment report.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[CD19 - Additional Treatment Invoice]

Section 1

Invoice

Transaction ID:

WCB Claim Number	Does worker have an Alberta PHN?	Personal Health Number	Clinic Reference Number
999 9999	<input checked="" type="radio"/> Yes <input type="radio"/> No	99999-9999	
Worker Surname	Worker First Name	Worker Middle Name	Worker Date of Birth (YYYYMMDD)
Doe	John		1970-01-01
Worker Address Line 1	Worker Address Line 2		
123 Any Street			
City/Town	Province	Postal Code	
Anytown	AB		
Country Code	Area Code	Telephone Number	Date of Injury (YYYYMMDD)
Canada/USA/Caribbean (1)	555	555-5555	2006-01-01

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SAVE CHANGES **SUBMIT FOR PROCESSING**

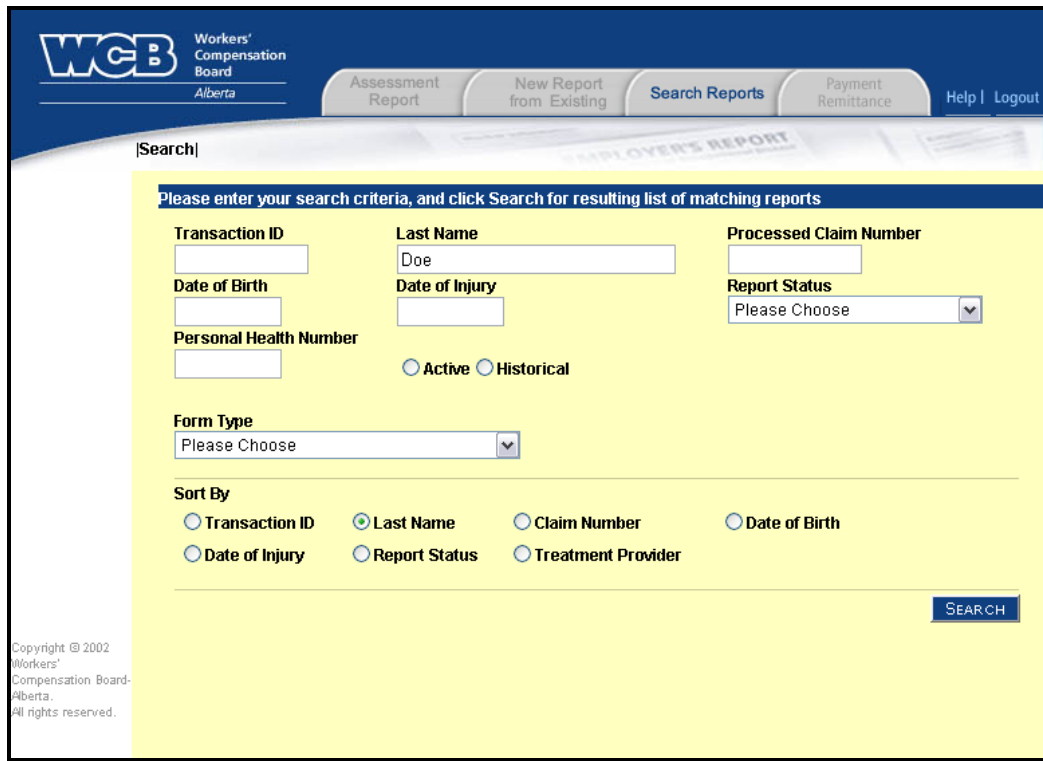
The Additional Treatment Invoice consists of two tabs, with the fields in Section 1 pre-populated with patient data taken from the Status or Finalize Treatment Report. To complete the report, simply verify that the information in Section 1 is correct, then click on the Invoice tab to be taken to a blank invoice form. This invoice is identical to the invoice tab attached to the Status Report. Refer to the instructions provided on page 21 in the section entitled *Invoicing on the Status Report* for details on how to complete this invoice.

Retrieving and Printing Reports

Saved Reports

Once a report has been saved, you can retrieve the report at a later time or date to continue modifying it. Because the reports are saved remotely on WCB's servers, the saved report may be accessed from *any* machine having an Internet connection. To retrieve a previously saved report:

1. Go to My Account
2. Click on **Submit PT Reports and Invoices**.
3. Click on the **Search Reports** tab at the top of the screen.



The screenshot shows the WCB (Workers' Compensation Board Alberta) search interface. At the top, there are navigation tabs: Assessment Report, New Report from Existing, Search Reports (selected), and Payment Remittance. A 'Help | Logout' link is also present. Below the tabs is a search bar with the text '|Search|'. The main content area is a yellow form titled 'Please enter your search criteria, and click Search for resulting list of matching reports'. The form contains several input fields: Transaction ID, Last Name (with 'Doe' entered), Processed Claim Number, Date of Birth, Date of Injury, Personal Health Number, and Report Status (a dropdown menu with 'Please Choose' selected). There are also radio buttons for 'Active' and 'Historical'. Below these is a 'Form Type' dropdown menu with 'Please Choose' selected. At the bottom of the form, there is a 'Sort By' section with radio buttons for Transaction ID, Last Name (selected), Claim Number, Date of Birth, Date of Injury, Report Status, and Treatment Provider. A blue 'SEARCH' button is located at the bottom right of the form. In the bottom left corner, there is a copyright notice: 'Copyright © 2002 Workers' Compensation Board Alberta. All rights reserved.'

4. Identify the patient to whom the report belongs by filling in one or more search criteria fields. You may also optionally select a method by which the search results will be sorted ('Last Name' is selected by default).
Note: Although the system provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.
5. Click on the **Search** button. The system will first search for, and then return, a summary of all reports matching the search criteria entered.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[Search]

Found: 2 Displaying: 1 - 2

Transaction ID: 614606	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Held for Man...		View & Print

Transaction ID: 614608	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Incomplete		Open Delete View & Print

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MODIFY SEARCH

- From the list of results, locate the exact report required to be modified by examining the information provided in each report summary.

Any reports having a **Report Status** of “**Incomplete**” mean that the reports have not yet been submitted to WCB. Such reports will be accompanied by both an **Open** link and a **Delete** link. Assessment Reports and Status Reports with a report status of ‘Incomplete’ will also have a third option to **View & Print** the report.

To resume modifying the report, click on the **Open** link. The report will be re-opened for modification, and will contain all information that was previously entered and saved.

To permanently remove the incomplete report from the system, click on the **Delete** link. Before deleting the report, the system will ask you to confirm your choice to delete the report.

Note: Doing this will permanently delete the report from the system. The user will no longer be able to access or retrieve the report.

To print a hardcopy of the report, click on the **View & Print** link. A PDF (Portable Document Format) copy of the report will open in a new window using Adobe Reader®. You can print a copy of the report from here. Note that all incomplete reports that are viewed or printed will contain a “Draft” watermark, indicating that the report has not yet been submitted (once the report has been submitted and reprinted, the “Draft” watermark will disappear).

Submitted Reports

Once a report has been submitted to WCB, the system will immediately and automatically attempt to match the report to an existing claim on file. If the system finds a matching claim, it will assign the claim number to the report, which can be retrieved by you (usually within one hour after submission). Reports that have been submitted may no longer be modified or deleted; however, they are still retrievable through the system for the purpose of viewing or printing.

To retrieve a submitted report, you must first search for the report. Since submitted reports are saved remotely on WCB's servers, they may be accessed from any computer with Internet access. To retrieve a submitted report:

1. Go to **My account**
2. Click on **Submit PT Reports and Invoices**
3. Click on the **Search Reports** tab at the top of the screen.

WCB Workers' Compensation Board Alberta

Assessment Report New Report from Existing Search Reports Payment Remittance Help | Logout

[Search]

Please enter your search criteria, and click Search for resulting list of matching reports

Transaction ID [] Last Name [] Processed Claim Number []

Date of Birth [] Date of Injury [] Report Status [Please Choose]

Personal Health Number [] Active Historical

Form Type [Please Choose]

Sort By Transaction ID Last Name Claim Number Date of Birth Date of Injury Report Status Treatment Provider

SEARCH

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4. Identify the patient to whom the report belongs by filling in one or more search criteria fields. You may also optionally select a method by which the search results will be sorted ('Last Name' is selected by default).
Note: Although online reporting provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.
5. Click on the **Search** button. The system will now search for and return a summary of all reports matching the search criteria entered.

WCB Workers' Compensation Board Alberta

Assessment Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[Search]

Found: 2 Displaying: 1 - 2

Transaction ID: 614606	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Held for Man...		View & Print
Transaction ID: 614608	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1960-04-02
PHN:	Date of Injury: 2007-07-05	Treatment Provider:
Last Update: 2007-07-20	Claim Decision:	Report Type: Physical T...
Report Status: Incomplete		Open Delete View & Print

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[MODIFY SEARCH](#)

- From the list of results, locate the report required to be viewed and/or printed by examining the information provided in each report summary.

Submitted reports are any reports which display a **Report Status** *other than* “Incomplete”. Specifically, submitted reports will have one of the following four potential report statuses:

- Submitted** – The report has been successfully submitted to WCB, but it has not yet been processed.
- Complete** – The report has been successfully submitted to WCB, has been processed, and a claim number has been assigned to the report. You will find the assigned claim number in the **Processed Claim** field when viewing the report summary details on the Search screen.
- Held for Manual Processing** – The report has been submitted to WCB; however, the system is unable to successfully match the report to an existing claim on file. The most common cause of reports having this status is due to a discrepancy between the data provided in the report, and what has been reported in prior report submissions by the worker, employer or physician. Because the report is unable to be automatically processed by the system, it must now be manually processed and matched to a claim by a Customer Records Clerk.
- Manual Processing Complete** – The report has been submitted to WCB and was held for manual processing, but the Customer Records Clerk has finished processing the report and a claim number has been assigned. You will find the assigned claim number in the **Processed Claim** field when viewing the report summary details on the Search screen.

All reports that have been submitted and/or processed will be accompanied by a link to **View & Print** the report. In addition, reports that have already been processed (where the report status is either “Complete” or “Manual Processing Complete”) will have a second option to **Move to History**.

To print a hardcopy of the report, click on the **View & Print** link. A PDF (Portable Document Format) copy of the report will open in a new window using Adobe Reader®. You can print a copy of the report from here.

The **Move to History** link provides you with an option to archive old reports. This action does not *delete* the report from the system, but rather, moves the report from “active” view to “historical” view. One search criterion available on the Search Reports screen is the option to select between “Active” and “Historical” reports. If the user selects “Active”, the system will omit displaying any reports that have been moved to history. In contrast, if the user selects “Historical”, the system will display only reports that have been moved to history.

Important note: Once a report has been moved to history (historical view), it can no longer be moved back to active view. Please exercise caution when clicking on this link. Should a report be archived in error, the report can still be retrieved by selecting “Historical” from the Search Criteria.

Payment Remittance

The Payment Remittance feature allows health care providers to obtain detailed payment remittance data online.

The screenshot shows the WCB Alberta website's Payment Remittance section. The header includes the WCB logo and navigation tabs for Assessment Report, New Report from Existing, Search Reports, and Payment Remittance. The main content area is titled "[Payment Remittance]" and contains a form with the following fields:

- Report Format:** A dropdown menu currently showing "Please Choose".
- Disbursement Recipient:** A text input field containing "A111 - ABC PHYSICAL THERAPY".
- Report Week:** A dropdown menu currently showing "Please Choose".
- Sort By:** Three dropdown menus labeled "First Sort", "Second Sort", and "Third Sort", all currently showing "Please Choose".

A "GENERATE REPORT" button is located at the bottom right of the form. In the bottom left corner, there is a copyright notice: "Copyright © 2002 Workers' Compensation Board Alberta. All rights reserved."

New remittance data is generated weekly every Tuesday morning and contains data on the previous week's submitted payments. Remittance data will be retained for viewing for one year through the electronic system. If you are required to retain the data longer for historical recording purposes, the data can be downloaded and saved to your local system.

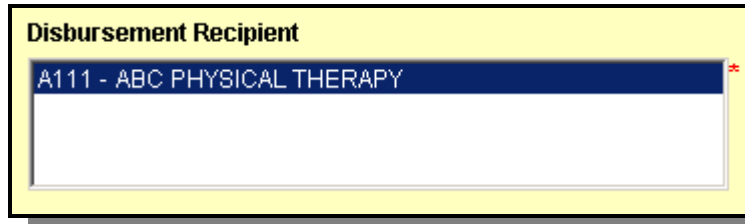
To request a payment remittance report:

1. Choose the **Report Format** from the pull-down menu. The two available formats are:
 - Formatted HTML Report – to view the report online, or for printing
 - XML Report – for downloading into an existing computer application

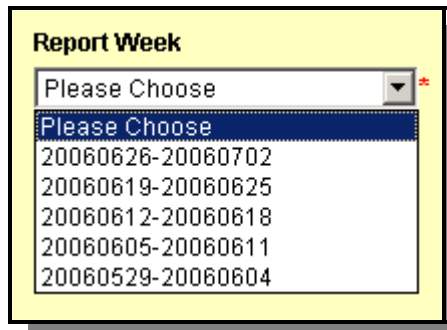
This close-up shows the "Report Format" dropdown menu. The menu is open, displaying three options: "Please Choose", "Formatted HTML Report", and "XML Report". The "Please Choose" option is currently selected and highlighted in blue.

2. In the **Disbursement Recipient** selection box, choose the billing number(s) to be reconciled. The Disbursement Recipient is the same as the cheque payee. Only one Disbursement Recipient can be chosen when generating a Formatted HTML Report. Multiple Disbursement Recipients can be

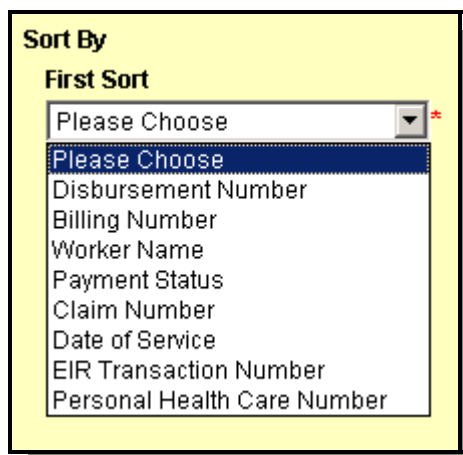
chosen when generating an XML Report. To select multiple disbursement recipients, you can simply press and hold the <Ctrl> key down on their keyboard while clicking each billing number.



3. Select the **Report Week** from the pull-down menu. The pull-down menu will contain a list of sequential weeks in descending order, to a maximum of 52 weeks.



4. Choose how the data should be sorted using the **First Sort**, **Second Sort** and **Third Sort** fields. Please note that only the **First Sort** is mandatory. The options for sorting are:
 - Disbursement Number
 - Billing Number
 - Worker Name
 - Payment Status
 - Claim Number
 - Date of Service
 - Electronic Injury Reporting Transaction Number
 - Personal Health Care Number



Note: The sort pull-down menus are dynamic. Once you have selected a First Sort, the Second Sort pull-down menu will become active, and whichever option you had selected as the First Sort will not be available as an option for the Second Sort (i.e. You cannot select the same field as both the first and second sorts). Similarly, once you choose a Second Sort, the Third Sort will activate, and its list of options will exclude the two previously selected sort fields.

5. Click on the **Generate Report** button. The report will be immediately generated and displayed in a new pop-up window for printing or saving.

Additional Help

Frequently Asked Questions

1. I can't log in!

Here are a few things to keep in mind when trying to log in:

- Ensure that you are at the correct login site. The address shown in the address bar of your web browser should read: **https://my.wcb.ab.ca**.
- Ensure your UserID is correct. If you have forgotten your UserID, click on “**Forgot UserID?**” button, fill in the required information and your UserID will be emailed to you.
- Ensure your password is correct. The password is case-sensitive. If you have forgotten your password, use the “**Forgot Password?**” button. The system will prompt you to enter the UserID and email address you selected when you registered online, and a new password will be emailed to you.

If you still cannot log on, please contact your Online Administrator or the eBusiness Support Team.

2. How do I attach additional information to the report?

Electronic reporting does not allow for attachments to be submitted with physical therapy reports or invoices. Any additional information you wish to submit independently of your report must be faxed, emailed or mailed to:

WCB – Alberta

9912-107 Street

P.O. Box 2415

Edmonton, AB T5J 2S5

Email: ebusiness.support@wcb.ab.ca

Telephone: 780 498 3999

Toll-free: 1 866 922 9221

Fax: 780 498 7999

3. I am unable to find a report using the search feature.

There are several reasons why you may not be able to successfully retrieve a report for a patient. The most common reason is simply due to incorrect information that has been entered in the search criteria. Another common reason is that too many search criteria fields are entered (the search is too specific). In most cases, the report can be found by simply searching using the patient's last name. If this produces too many search results, the search can be further narrowed by using one additional search criterion along with the last name.

If you are still unable to find the report, contact the eBusiness Support Team before re-creating the report. The eBusiness Support Team will be able to verify whether or not the report truly exists.

4. When or why should a report be “Moved to History”?

The **Move to History** feature helps you to manage and organize your reports by allowing you to archive inactive patient reports. By moving dated reports to history, you will be able to focus only on your active claims. If you are required to retrieve a report that has already been moved to history, you may simply select the “Historical” search option on the **Search Reports** screen.

5. Can I cut and paste text directly from my word processor?

Most advanced word processor tools (such as Microsoft Word or Lotus WordPro) contain special characters that are incompatible with online injury reporting. It is strongly advised that you *not* cut and paste directly from such documents. There is, however, an effective workaround to do this:

1. Highlight and copy the information from your word processor
2. Paste the information into a simple text editing program such as Windows Notepad.
Doing this will remove any special characters
3. Highlight and copy the information again, this time from the Windows Notepad program
4. Paste the information into the electronic injury reporting application.

Contact Us

If this guide or the online help files do not answer your questions, the eBusiness Support Team is available for assistance.

eBusiness Support Team

Phone: 780 498 7688

Fax: 780 498 7866

Email: ebusiness.support@wcb.ab.ca

The eBusiness Support Team is available from 8:00am to 4:30pm Monday through Friday (excluding statutory holidays).