How to get started with providerConnect[™]

Go to www.providerconnect.ca

At the bottom right of the providerConnect home page, click "Enter Registration Key".

With providerConnect, you can:	
Extended Health Service (EHS) Providers	Dental Providers
 Instantly check your patient's eligibility and coverage information Submit claims online for immediate adjudication of your patient's claim Assign payment directly to you or to your patient Sign up for direct deposit View your statements and claim reports And much more 	 Send and view dental predeterminations in real time Generate individual plan member statements Sign up for direct deposit Receive quick access to the payment statements that you currently receive by mail And much more
You need to be registered with providerConne ARE YOU A NEW HEALTH CARE PROVIDER AND NEED TO APPLY TO REGISTER FOR providerConne Apply Online	ALREADY REGISTERED AND NEED TO ACTIVATE YOUR providerConnect SECURE SERVICES ONLINE ACCOUNT

Enter the unique registration key you receive either by email or in the mail, and your Provider Number, which is your nine-digit unique dental number found on page one of this package*, and click "Continue".

*If you haven't received your registration key, it may take a few days to arrive, but you can expect it shortly.

Sign In	Account Activation for providerConnect Secure Services Online Account					
Activation	In order to activate your providerConnect Secure Services online account, you will need to enter					
Forgot Password	You should have received your registration key and provider number by email or regular mail. If the page for assistance.					
Forgot User Name	* indicates a mandatory field					
Contact Us	Registration Key: * Provider Number: *					
	Click here for printable instructions to activate your account.					
	Continue Cancel					

The next page will contain your provider information. Enter a username of your choice, then complete the challenge questions and answers section. Select a password and click "Activate".

Now that you're activated, enter your banking information, and you're ready to go!



How to submit claims to GSC electronically

- Using your CDANet software, select Green Shield Canada as the carrier and 000102 as the carrier ID
- Enter your patient's MSI number (no spaces) in the certificate field and refer to the chart below for the alpha prefix specific to the program you are claiming. The alpha prefix will be entered in the division field. If your software doesn't have a division field, simply enter the alpha prefix and the MSI number in the certificate field.

Alpha prefix	Program name	
СОН	Children's Oral Health Program	
MFS	Oral and Maxillofacial Surgery Program	
SNP	IP Special Needs Oral Health Program	
MAX	Maxillofacial Prosthodontics Program	
CPC	Cleft Palate / Craniofacial Program	
ESA	Employment Support / Income Assistance	

Example:

Claim for Children's Oral Health Program: GSC number is COH1234567890 Claim would be submitted like this:

- Enter the 10-digit MSI number in the certificate field
- Enter the alpha prefix COH in the division field
- If your software does not have a division field, enter the entire alpha prefix and MSI number in the certificate field, COH123467890

Having difficulty submitting claims electronically for the Children's Oral Health Program?

If you need help submitting claims or are receiving an error message, please contact our Customer Service Centre at 1-888-711-1119. When calling, please note that you'll be asked to provide the patient's GSC identification number (alpha prefix for the appropriate program as well as the patient's MSI number). We are here to help guide you through the process.

Submitting claims electronically for Other Government Programs?

If you need help submitting claims or are receiving an error message, the specific claim may require pre-approval. Please follow the process below to send your *initial* submission through <u>www.providerconnect.ca</u>. (Ensure you include the Program Name in the comment section). This process can also be used to submit your documentation for review by our Special Consideration Program committee.

Once the patient is registered for the program the *subsequent* submissions can be sent using your CDANet software.

- Log into your providerConnect account (or choose "What You need" from the top of the home page if not logged in)
- Choose the "Send a Form or Document" option
- Send form select "GSC"
- Form to select from the drop down is titled "Dental Nova Scotia Government"
- Complete the remaining mandatory fields
 - Some fields are optional
- Attach your documents
 - Additional information may be provided if necessary
- Choose "Submit" for GSC review

Please note this method of submission is not real-time processing.

Home Provider Registry	Secure Services	What You Need	About Us	Contact Us
Sending A Form or Docume	nt	Extended Health Serv Pharmacy Provider Send A Form Or Docu	ice Provider ment	
* in	dicates a mandatory field.			
Use the drop down below to select	who is to receive an attac	hment.		
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Name of Sender:				
Telephone Number: * () - ext.			
Email Address: *				
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Attach form or document * (Overall	maximum per submission is	4 MB): 🔽		
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Additional Information: (limit 1000 c	haracters) Cou	inter: 0		
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Got a copy of the new Nova Scotia Government Dental Claim Form?



PO Box 1671, Windsor, Ontario N9A 0.48 Atta: Department or CUSTOMER SERVICE CENTRE 1-888-711-1119 NOVA SCOTIA GOVERNMENT DENTAL CLAIM FORM

2016 providerConnect

A claim form suitable for all programs is available on providerConnect by selecting "What You Need – Dental Provider" from the home page or by choosing "Forms" when signed in to secure services.

No computer? No problem, we can accept your claims on paper

For proper handling of your paper claims, please be sure to use the new Nova Scotia Government Dental Claim Form customized for this purpose. Please include the program name and the patient's MSI number where indicated on the form and use the mailing address below (also noted on the top of the form).

> Green Shield Canada ATTENTION: Dental Department P.O. Box 1671 Windsor, On N9A 0A8