

# Cardholder Portal Guide

Initial Log In to New Portal	2	Add/Edit Bank Account	6
Cardholder Dashboard	3	Add/Remove Cardholders	7
Submitting a Claim	4	View Coverage	8
View Claims	5		

# Cardholder Portal Guide

## INITIAL LOG IN TO NEW PORTAL

### EXISTING CARDHOLDERS

The new Quikcard portal can be accessed at [quikcard.com](http://quikcard.com) by clicking the “Log In” link at the top of the page.

You will need to enter your **Card Number** and your **Password**, then click the **Sign In** button.

You will be prompted to change your password for the new portal. This prompt will only come up on your initial log in to the new portal, and not on subsequent visits.

Lastly you will be asked to confirm your email.

### NEW CARDHOLDERS

If you are a new cardholder start by clicking **Activate Account** on the Login page.

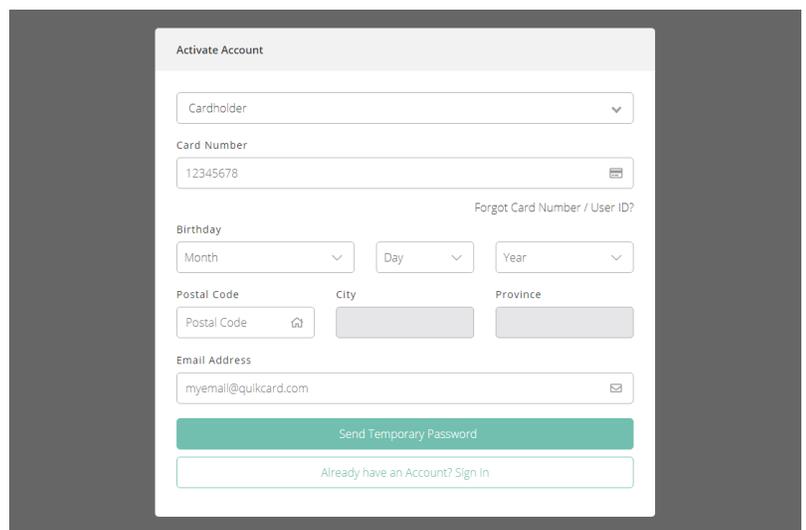
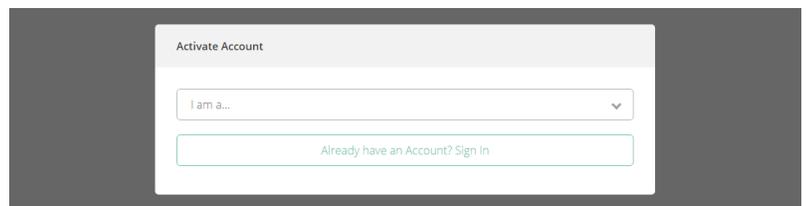
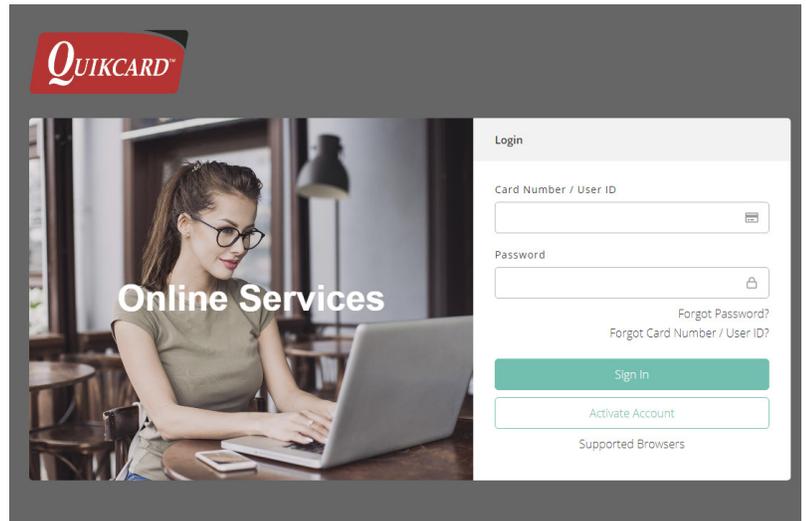
Select **Cardholder** from the drop down menu on the **Activate Account** page.

You will need to enter your:

- › **Card Number**
- › **Date Of Birth**
- › **Postal Code**
- › **Email Address**

All 4 pieces of information need to match our records before a temporary password will be sent. Check with your plan administrator to confirm.

A temporary password will be sent to your email address. Return to the Login screen and use the temporary password to sign in.



# Cardholder Portal Guide

## CARDHOLDER DASHBOARD

**Emma Jones**  
ABCD COMPANY

**CLAIMS**

- View Claims
- Submit a Claim

**COVERAGE**

- View Coverage
- Current Utilization Report
- Plan Admin Details

**MY QUIKCARD**

- Dashboard
- Profile
- Banking Information
- Card Download
- Request Cardholder Change
- Inbox

LOGOUT

### Overview

This is a snapshot of your account with us.

**Welcome Back, Emma.**  
Your current benefits period is:  
**Jan 1, 2019 - Dec 31, 2019**

**Submit a Claim**

**Download E-Card**

**Messages**

**Plan Information For:**  
Emma Jones

#### Total Utilization

You have **\$5513.53** remaining of plan total

- Amount Used
- Amount Remaining

#### Utilization By Type

You have used **\$173.70** of your Dental Care

- Drug Card
- Dental Care
- Vision Care

Once you have logged in you will be taken to the new and improved **Cardholder Dashboard**.

Here you will be given an overview of your account and will be able to select actions from the menu on the left, or the dashboard itself.

Some of the main actions you can select are:

- › **View Claims**
- › **Submit Claims**
- › **View Coverage**
- › **View Current Usage**
- › **Update Profile Information**
- › **Update Banking Information**
- › **Download Card**
- › **Add/Remove Cardholders**

# Cardholder Portal Guide

## SUBMITTING A CLAIM

Start by clicking the **Submit a Claim** link in the left hand menu, or directly from the dashboard.

To submit a claim you will need to enter:

- › **Name of the plan member claiming**
- › **Service Date**
- › **Type of claim**
- › **Type of service**
- › **Province**
- › **Amount of claim**
- › **Receipts for services claimed**

Please note that the selections for **Type of service** will change depending on what is chosen for **Type of claim**.

Receipt files can be uploaded by clicking the **choose file** link, or by dragging and dropping the files into the dotted rectangle. **PDF, jpeg** and **png** file formats are accepted.

When all fields have been filled and all files uploaded, click the **Submit Claim** button. This will bring up a disclaimer notice. Once you click **Agree** the claim will be processed.

Wait for a moment and a **Claim Submitted** message will appear. The form will reset for another submission.

## COORDINATION OF BENEFITS

If you have also submitted this claim to another provider for partial coverage, you can submit the claim to Quikcard for the remaining amount.

Click the check box under **Coordination of Benefits** and enter the amount covered by the other provider under **Coordination of Benefits (\$)**.

Make sure to also upload a statement from the other provider of the claim paid with the original receipts.



**Submit a Claim** Help

Submit a claim by filling out the fields below. If you have any questions, please contact your Plan Admin.

**Claim Details**

Upload Receipt(s) Uploaded Files

Drop files here to upload or [choose file](#)

Plan Member

Service Date

Type Of Claim

Type of Service

Province

Amount

Coordination of Benefits  Check if yes

Coordination of Benefits (\$)

**Submit Claim**

**Claim Submitted.**

**Claim Details**

Upload Receipt(s) Uploaded Files

Drop files here to upload or [choose file](#)

Plan Member

Service Date

Type Of Claim

Type of Service

Province

Amount

Coordination of Benefits  Check if yes

Coordination of Benefits (\$)

**Submit Claim**

# Cardholder Portal Guide

## VIEW CLAIMS

The cardholder portal also allows you to review any previous claims.

To start, click the **View Claims** link in the left hand menu.

This will bring you to the View Claims dashboard which will display all recent claims on your account.

From here you can search for specific claims, or generate a report.

## SEARCHING CLAIMS

You can filter your search using the following criteria:

- › **Cardholder Name**
- › **Benefit Type**
- › **Claim Status**
- › **Date Type**
- › **Year**

Click the **View** button to the right of any claim to see all the details, and **Download** or **Print** the claim.

## GENERATING REPORTS

To generate a report, click the **Generate Reports** button on the top of the View Claims dashboard.

You will need to select:

- › **Cardholder Name**
- › **Benefit Type**
- › **Date Type**

Once the parameters of the report are selected, click the **Generate Report** button in the pop-up window.

A PDF of the report will then be downloaded to your computer.

Verification #	Amount	Category	Payment Date	Service Date	Payee	Status	
17628480	\$144.00	Health	Mar 7, 2019	Feb 26, 2019	Cardholder	Paid	<a href="#">View</a>
17577671	\$48.00	Health	Feb 26, 2019	Feb 12, 2019	Cardholder	Paid	<a href="#">View</a>
17545770	\$96.00	Health	Feb 22, 2019	Feb 7, 2019	Cardholder	Paid	<a href="#">View</a>
17521099	\$75.00	Health	Feb 12, 2019	Jan 31, 2019	Cardholder	Paid	<a href="#">View</a>

Service Date	Proc. Code / Description	Tooth Code	Claimed Amount	Eligible Amount	Percent Covered	Amount Covered	Other Plan Paid	This Plan Paid
14/02/2019	00700 Chiropractic		\$ 48.00	\$ 48.00	100	\$ 48.00	\$ 0.00	\$ 48.00
20/02/2019	00700 Chiropractic		\$ 48.00	\$ 48.00	100	\$ 48.00	\$ 0.00	\$ 48.00
26/02/2019	00700 Chiropractic		\$ 48.00	\$ 48.00	100	\$ 48.00	\$ 0.00	\$ 48.00
<b>Total</b>			<b>\$ 144.00</b>	<b>\$ 144.00</b>		<b>\$ 144.00</b>	<b>\$ 0.00</b>	<b>\$ 144.00</b>



# Cardholder Portal Guide

## ADD/REMOVE CARDHOLDERS

Using the cardholder portal you can add, update or remove dependants on your plan.

Start by clicking the **Request Cardholder Change** link in the left hand menu. This will bring you to the Request Cardholder Change dashboard.

### ADD A CARDHOLDER

Click the **Add Dependant to Plan** button at the top of the page.

You will need to enter the following information:

- › **First Name**
- › **Last Name**
- › **Gender**
- › **Date of Birth**
- › **Relationship**
- › **Effective Date**

Once you've entered all the info, click the **Submit Request** button, and click **Agree** on the disclaimer pop-up.

### UPDATE A CARDHOLDER

Click the **Change** button for the cardholder you would like to update.

You can review and update the following info:

- › **First Name**
- › **Last Name**
- › **Gender**
- › **Date of birth**
- › **Additional Notes**

Once you've entered your updates, click the **Submit Request to Plan Admin** button, and click **Agree** on the disclaimer pop-up.

### REMOVE A CARDHOLDER

Click the **Change** button for the cardholder you would like to remove.

Click the **Deactivate Dependant** button, select a **Termination Date**, and click the **Confirm** button.

Request Cardholder Change

Add Dependent to Plan

Request Cardholder Change

Update your plan details below. If you have any questions, please contact your Plan Admin.

Plan Member Information

Emma Jones (Primary)

Aug 31, 1977 Date of Birth Female Gender

Change

Cardholder Change Requests

Date Submitted	Requested Change(s)	Status
No data available ...		

Add Dependent

First Name Last Name Gender Date of Birth

Relationship Effective Date

Additional Notes

Submit Request

All pending requests can be reviewed or cancelled at the bottom of the Request Cardholder Change dashboard. No change requests are finalized until reviewed and approved by your plan administrator.

# Cardholder Portal Guide

## VIEW COVERAGE

To view the coverage details of your plan, click the **View Coverage** link in the left hand menu.

This will bring you to the View Coverage dashboard where you can filter by cardholder, view plan maximums, as well as other care plan details.

## PLAN MAXIMUM

This is an overview of your entire plan.

The amount under **Potential Benefits** represents the balance left to use, dependent on the plan maximum still available.

## CATEGORIES

These are the elements covered by your plan and can include:

- › **Dental Care**
- › **Health Care**
- › **Vision Care**
- › **Drug Card**
- › **Supplemental Top-up**
- › **Wellness**

Each category can be further expanded to display the services covered, their details, and the amount used of each one.

View Coverage

### View Coverage

The following information has been calculated from claims fully paid. If you have any pending or in-transit claims, balance below will change.

Coverage for:

Emma Jones

Plan Maximum

Dental Care

Health Care

Vision Care

Drug Card

### Plan Maximum

Plan Type	Period Start	Period End	Details	Potential Benefits ⓘ
Family	Jan 1, 2019	Dec 31, 2019	Dental + Vision + Health (Include Drug Card) per Family Yearly	\$5,513.53

Plan Maximum

Dental Care

Plan Type	Period Start	Period End	Details	Amount Used
Basic	Jan 1, 2019	Dec 31, 2019	(Coverage 90%)	\$433.15
Major	Jan 1, 2019	Dec 31, 2019	(Coverage 90%)	\$433.15
Extensivemajor	Jan 1, 2019	Dec 31, 2019	(Coverage 90%)	\$433.15
Orthodontic	Jan 1, 2019	Dec 31, 2019	(Coverage 90%)	\$433.15

Health Care

Vision Care