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## EXTERNAL PROVIDER LOGIN

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### Provider Registration training document

Compiled by: HRMB – June 2023

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## Introduction

A Medical service Provider can access the HRMB BPOMAS Administration system via a Web Login, from the BPOMAS website ([www.bpomas.co.bw](http://www.bpomas.co.bw)).

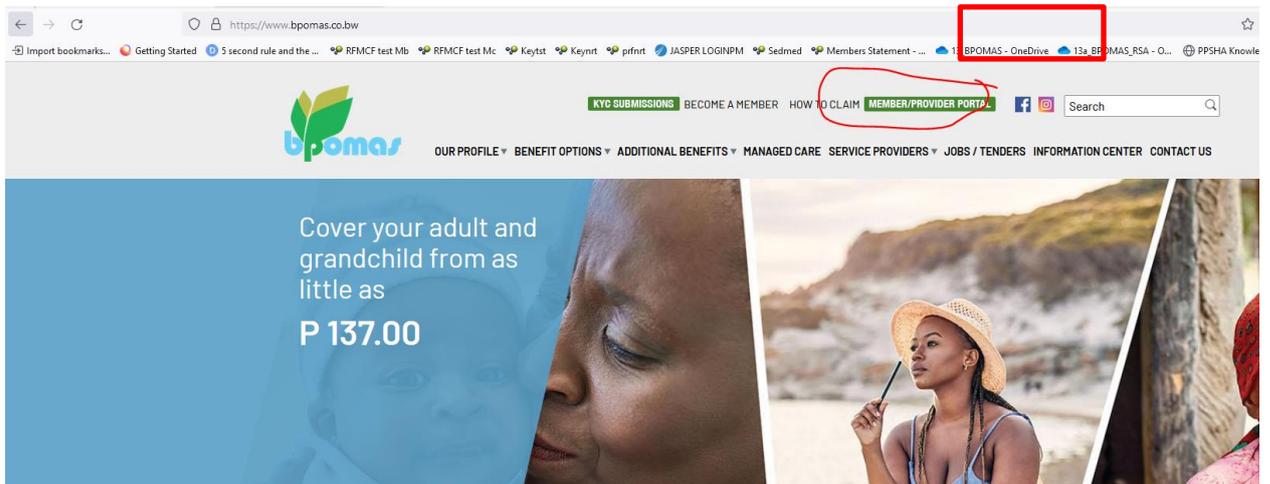


## What the Provider can view on the BPOMAS Web Login

- Payment run statements
- .CSV Remittance Advices
- Member validation
- Member Limits
- Communication between provider and Scheme administrator
- Claims / payment of claims
- Your Provider Basic details and Banking details
- The history on your account (EFT Payments / Cheques / Account Transactions)
- **BPOMAS Scheme information:**
  - o 2023/2024 Rule Book
  - o Benefit Guide

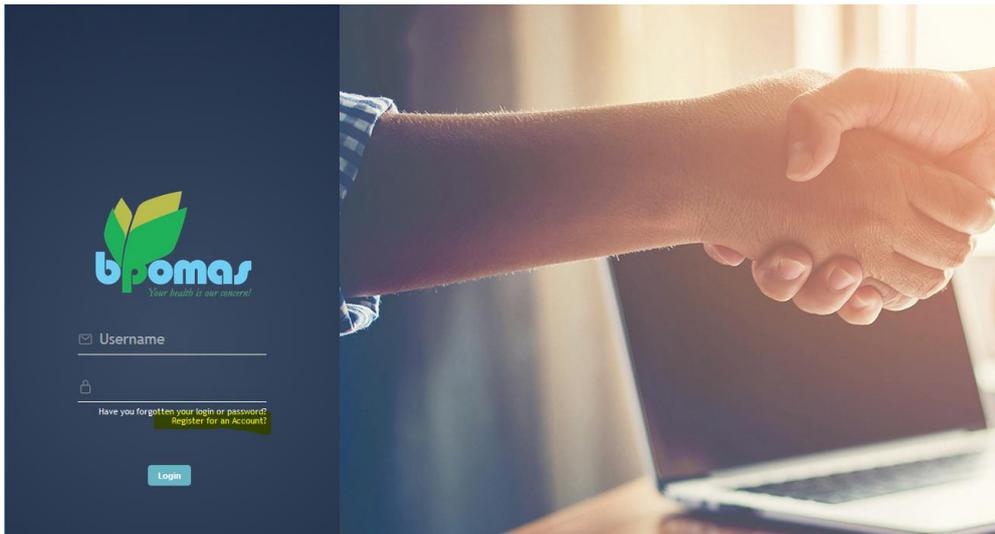
## Web Login

Go to the BPOMAS website and follow the Login / register menu.

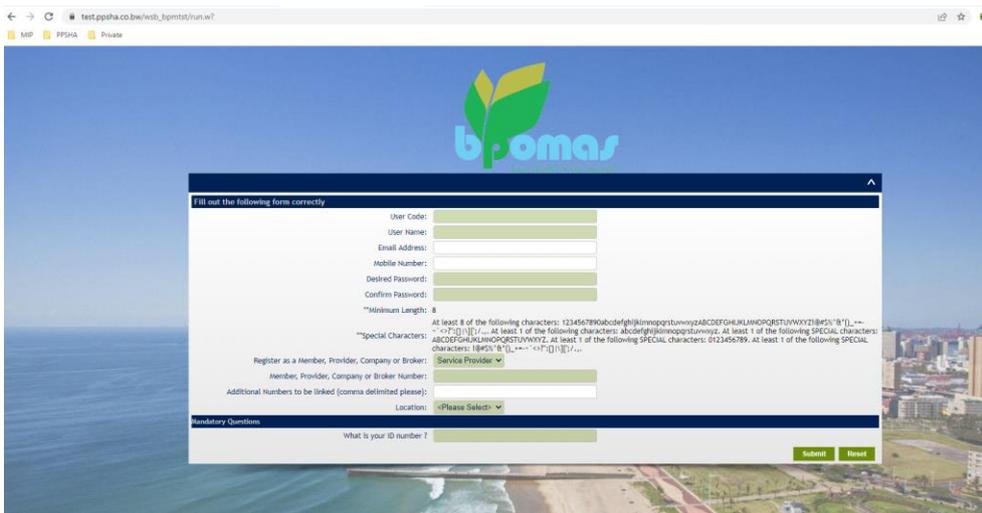




Once you have selected to login as a Provider from the BPOMAS website, the **BPOMAS Login** screen will display.



If you do not have a profile/ login – please use the **“Register for an account”** link, to create a login and password, and follow below steps on screen.



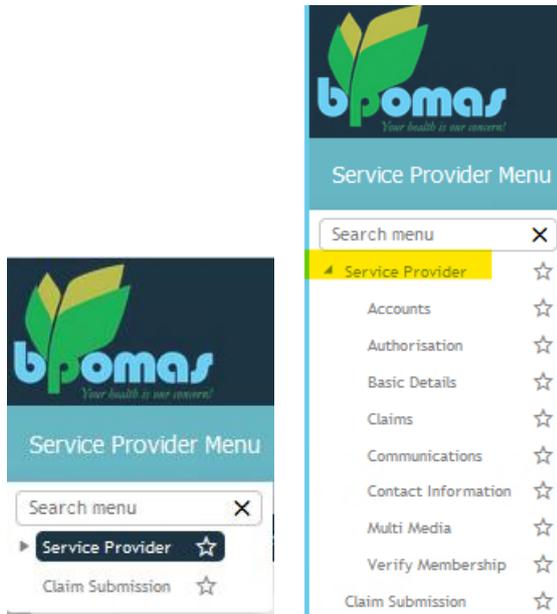
- User code (Login): Choose a user code of your choice (suggestion to use provider practice number)
- User name field: Use the same name as the User code
- Email address: Insert your e-mail address
- Mobile number: Insert your mobile number in this field
- Desired password: Insert the password that you would like to use
- Confirm password: Confirm the password that you want to use again
- Minimal Length: This indicates the number of characters needed for the password
- Register as a Member, Provider, Company or Broker- on this field there is a drop-down list where you can select an option, for example Provider
- Member, Provider, Company, or Broker number: insert your Provider number in this field
- What is your ID number: This is a mandatory field, and you have to insert your ID number.





## Basic details

To access any information that does not display on the **Basic Details** menu, click on the down arrow next to the **Service Provider** option, to view the additional menus.



## Accounts details



The Menu for **Accounts** will indicate the history on your account (EFT Payments / Cheques / Account Transactions)

Account Transactions

Scheme	Account Type	Doctor Account Type	Transaction Date	Transaction Type	Transaction Name	Reference	Narration	Amount	Balance	Proc Date	Claims
61 - High Option	Current	D	2023/06/12	96	Provider Claims ex Payment run		Doctor claims ex cheque run	-589.58	-589.58	2023/06/12	Yes
60 - Premium Opt	Current	D	2023/06/12	96	Provider Claims ex Payment run		Doctor claims ex cheque run	-450.00	-1,039.58	2023/06/12	Yes

Cheques Issued  
No Cheques Issued



## Banking details

The Menu for **Banking Details** will reflect the bank Account number that claim payments will be paid into.

Service Provider Banking Details																
Bank	Branch	Currency	Account Number	Account Name	Account Type	Account Effective Date	Account End Date	Verified Date	Status	Eft Type	Eft Type Effective Date	Eft Type End Date	Strike Day	Audit	Audit Eft Type	EFT
FIRST NATIONAL BANK BOTSWANA	288467 - FNB Botswana	BWP - Botswana Pula	[REDACTED]	[REDACTED]	Current Account	2020/07/10			Active	PAY - Payment	2020/07/10		0	Audit	Audit Eft Type	EFT
FIRST NATIONAL BANK BOTSWANA	288467 - FNB Botswana	BWP - Botswana Pula	[REDACTED]	[REDACTED]	Current Account	2020/07/10			Active	PCO - Payrun Collections	2020/07/10		0	Audit	Audit Eft Type	EFT



## Provider Basic details

The Menu for **Basic Details** will reflect the provider contact and general information received upon provider registration.

DEFAULT - BPOMAS - Service Provider Details

**Service Provider Menu**

- Search menu
- Service Provider
- Accounts
- Authorisation
- Basic Details**
- Claims
- Communications
- Contact Information
- Multi Media
- Verify Membership
- Claim Submission

**Service Provider**

Number: 9914394	Name: [REDACTED]
Start Date: 2020/07/10	ID Number Type: [REDACTED]
End Date: [REDACTED]	ID Number: [REDACTED]
Paid by Schedule: <input type="checkbox"/> Allow Rams Update: <input type="checkbox"/> Dispense: <input type="checkbox"/> Use Email: <input checked="" type="checkbox"/> VAT Number: [REDACTED] VAT Effective Date: [REDACTED]	SANC Number: [REDACTED] Pay Method: Assessing Decision Hold Credit: <input type="checkbox"/> Education: [REDACTED]
Discipline Code: 014 - General Practice	Termination Date: [REDACTED]
Sub Discipline Code: [REDACTED]	
Activate Date: 2020/07/10	

**Contact Information**

Emergency Number: [REDACTED]	Cell Number: [REDACTED]
Email: [REDACTED]	Fax Number: [REDACTED]
Telephone: [REDACTED]	Home Number: [REDACTED]
Physical Address: [REDACTED]	Postal Address: [REDACTED]
MOGODITSHANE	GABORONE
Suburb: MOGODITSHANE	Suburb: GABORONE
City: [REDACTED]	City: GABORONE
Post Code: [REDACTED]	Post Code: [REDACTED]

**Discipline Codes**

Service Provider	Discipline Code	Description	Sub Discipline Code	Sub Discipline Description	Activated Date	End Date
9914394	014	General Practice			2020/07/10	

# Claims details



The Menu for **Claims** will reflect the provider Claiming profile. That screen enables the user to search for any specific claim based on the below search criteria:

Service Provider Menu

DEFAULT - BPOMAS - Claim search for doctor

Service Provider: 9914394  
 Name: [Redacted]  
 Telephone: [Redacted]  
 Start Date: 2020/07/10  
 End Date: [Redacted]  
 Cell Number: [Redacted]  
 Email: [Redacted]

Assessed

Trade Number: [Redacted]

Not Loaded

Load Date: [Redacted]

Batch Number: [Redacted]

Member Number: [Redacted]

Trade Number: [Redacted]

Search Criteria for Assessed Claims

View:  Default  Claim Event Only  Medicine Details

Sort By:  Date Only  Provider and Date

Member Number: [Redacted]

Member ID Num: [Redacted]

Cross Reference Number: [Redacted]

Scheme Code: All

Diagnosis Code: [Redacted]

From Treatment Date: [Redacted]

To Treatment Date: [Redacted]

Assess Date From: [Redacted] To: [Redacted]

Payment Date: [Redacted]

Claim Year: All

Payee: All

Number of Claims: 100

Reference: [Redacted]

Claim Number: [Redacted]

Assessed, not yet paid:

Tariff Code: [Redacted]

Claim Code: [Redacted]

Authorization No: [Redacted]

Reject Code: [Redacted]

External Reference: [Redacted]

Nappi Code: [Redacted]

Show Hidden Claims:



If more than 50 claims are available, increase the QTY in the “**Number of claims**” field in order to displayed more than 50 Records on the screen.

To view more details with regards to a specific claim you can click on the underlined treatment date on the screen, and it will display more specific claims details.

Service Provider Menu

Service Provider Claims

Search Criteria for EDI Not Assessed

Search Criteria for EDI Claims Not Loaded

Search Criteria for Assessed Claims

View:  Default  Claim Event Only  Medicine Details

Sort By:  Date Only  Provider and Date

Member Number: [Redacted]

Member ID Num: [Redacted]

Cross Reference Number: [Redacted]

Scheme Code: All

Diagnosis Code: [Redacted]

From Treatment Date: [Redacted]

To Treatment Date: [Redacted]

Assess Date From: [Redacted] To: [Redacted]

Payment Date: [Redacted]

Claim Year: All

Payee: All

Number of Claims: 100

Reference: [Redacted]

Claim Number: [Redacted]

Assessed, not yet paid:

Tariff Code: [Redacted]

Claim Code: [Redacted]

Authorization No: [Redacted]

Reject Code: [Redacted]

External Reference: [Redacted]

Nappi Code: [Redacted]

Show Hidden Claims:

Search Cancel Save to Excel

Colour keys: Red = Assessed, Blue = EDI, Green = Family, Green = Claim suspended, Purple = Claim short-paid, Brown = Discount/Patched

Treatment Date	Member	Dependant	Tariff Code	Nappi Code	Diagnosis	Claimed	Benefit	Discount	Short Payment	Note Code	Payment Date	Payee	Reference	Claim Number	Claim Type	Claim Code	Authorisation	Gen.Claim Nr	Option	External Reference	Free Text?
<u>2023/03/09</u>	10255	02		00181	J06.9	224.00	201.60	0.00	22.40	ASY	2023/03/11	Provider		32748310	C	110 - MEDICAL PRACTITIONERS (GP/SPEC/PSYC)	0	32748310	60- Premium Opt		60-
																110 - MEDICAL					

When you click on the underlined treatment date; the following claim details will appear:

**Claim Details**

Scheme Code: 60	Scheme: Premium Option
Member Number: 10255	Tariff Code: 00181
Claim Number: 22748310	Units: 1.00
Tariff Description: CONSULTATION/VISIT FOR NEW PAT	EDI Line number:

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**Patient and Doctor Details**

Dependant: 2 Service Provider: 9914394 Practice Type: 014 Prov pr Number: 9914394 Referred By: 0 Referred To: 0	Name: ██████████ Name: ██████████ Description: General Practice Name: ██████████ Name: ██████████	Payee: Provider Pay Vendor Number: 0 Negotiation Group: Negotiation Group:
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**Amounts**

Orig Invoice Amt: 224.00 Invoice Curr: Botswana Pula Claimed: 224.00 Claimed Curr: Botswana Pula Invoice Co-insurer Amt: 0.000000 Invoice Co-insurer Curr:	Invoice Benefit Amt: 201.60 Invoice Benefit Curr: Botswana Pula Benefit: 0.00 Assessed Benefit Curr: Tariff Amount: 224.00 Discount: 0.00 COP: 0.00 Third Party: 0.00	Invoice Copy Amt: 22.40 Invoice Copy Curr: Botswana Pula Assessed Co-insurer Amt: 0.00 Assessed Co-insurer Curr: Copay: 22.40 Short Payment: 22.40 Percent: 0.00 RPL: 0.00
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**Benefit Limit Allocation**

Total Benefit: 201.60 Owe: 0.00 Discount: 0.00 PWB Amount: 0.00 Logged To Limit: 201.60	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">L.#</th> <th style="text-align: left;">Description</th> <th style="text-align: right;">Amount</th> </tr> <tr> <td>777</td> <td>Member 10% Co Payment</td> <td style="text-align: right;">22.40</td> </tr> </table>	L.#	Description	Amount	777	Member 10% Co Payment	22.40
L.#	Description	Amount					
777	Member 10% Co Payment	22.40					

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**Treatment and Dates**

Claim Code: 110 Treatment date: 2023/03/09 Received date: 2023/03/09 Assess Date: 2023/03/09 00:00:00.000 Payment Date: 2023/03/11	Description: MEDICAL PRACTITIONERS (GP/SPEC/PSYC) Authorization Number: Days: Treatment to Received: 0 Days: Received to Assessed: 0 Days: Received to Payment: 2	Claim Type: C Reference Auth Number: Received: Credit Card Used: Suspend Until:
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**Note Code / Rejections**

Reason: Note Code: ASY - INTERPHARM ONLINE CLAIM SUBMIS	Rejection Code 1: AGG - PROCESSED AS PER RULES Rejection Code 3:	Rejection Code 2: Rejection Code 4:
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**Extras**

Modifier: Scan Code: Reg Article Number: Reference: Note Code:	Suspended: <input type="checkbox"/> Reported After resign: <input type="checkbox"/>	Trade Number: 0 Trade Partner: Paper Assessor:
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**Diagnosis Details**

Diagnosis Code: J06.9 Asterisk Code: - Morphology Code: - Base rate: SCHEME Alternate Reimbursement Rate:	Diagnosis: Acute upper respiratory infection, unspecified Description: SCHEME RATE BPOMAS Registered for Condition: no Mouth Parts: 0 0 0 0 0 0
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**Diagnosis for this Claim**

No Diagnosis records match the Filter Criteria

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**Medicines**

No Medicine records match the Filter Criteria

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**Resources for this Claim**

There are no resources for this claim

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**External references for this Claim**

Interface Type	Interface Description	Reference Code	Reference Description	Reference Value	Last Modified Datetime	Claim Origin
MIP	MIP ADMIN SYSTEM	PAYTYPE	BPOP		2023/05/18 09:00:39.975	
MIP	MIP ADMIN SYSTEM	TARIFFDESC	00181 - Consultation		2023/05/18 09:00:39.975	
MIP	MIP ADMIN SYSTEM	CATCODE	CATCODE = B01 ; SUBCATCODE = B01		2023/05/18 09:00:39.975	

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**Contact Information**

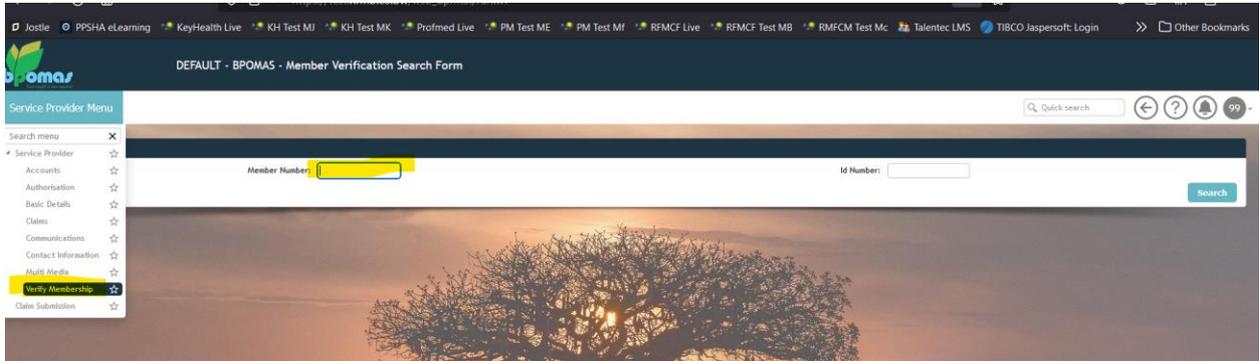
	Members Home Tel: ██████████ Work Tel: ██████████ Cell: ██████████ Serv. Prov. Work: ██████████ Cell: ██████████
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## Verify Member details

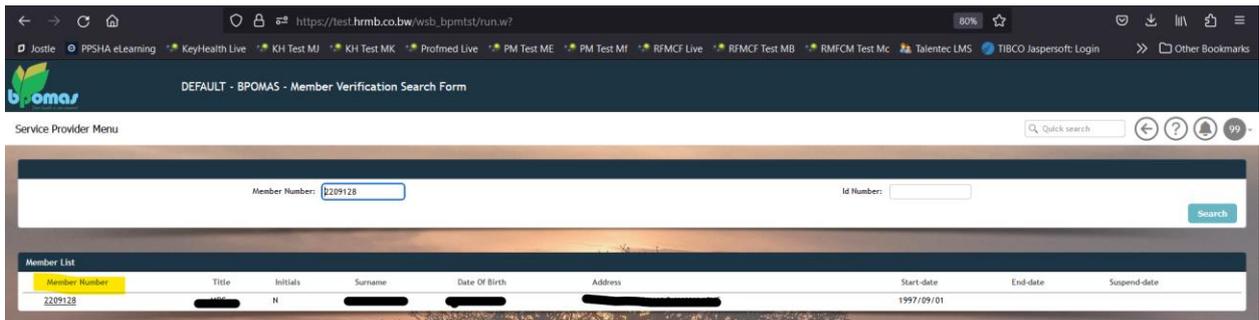


The Menu for **Verify Membership** will reflect scheme membership details with regards to member validity and relevant Benefit limits that would be required by the specific Provider discipline.

You can now enter the desired member number and press search:



Results upon search  
Select the member number underlined.



You will note a “**General Member Detail**” Container will display which provides high level detail on the requested member such as (option name/ dependent and their relation to main member, spouse, child etc. / birth-, join-, benefit-, resign-, suspend date)

