Medicare Assignment of Benefit Agreement

Patient consent to assign a Medicare benefit • Bulk-billed services • One agreement per service

A. PRACTITIONER AND PRACTICE DETAILS

Practitioner name	
Practice name and address	
Medicare provider number	

Include the practitioner's name and practice address, or the provider number. Either satisfies the regulations; both is best practice.

B. PATIENT AND SERVICE DETAILS

Patient name (person receiving the service)	
Date of service	
MBS item number(s), or service description if agreed before the service	
Date of this agreement	

C. TYPE OF AGREEMENT (TICK ONE)

☐ Pre-agreement: entered into before the service is provided (describe the service in Section B)

☐ Post-agreement: entered into after the service is provided (record the MBS item number in Section B)

D. ASSIGNOR

Is the assignor the patient? ☐ Yes ☐ No (a responsible person may sign, e.g. parent or guardian)

Assignor name (if not the patient):	Relationship to patient:

E. ASSIGNMENT OF BENEFIT

I assign my right to the payment of the Medicare benefit(s) payable for the professional service(s) described in this agreement to the practitioner named above. I understand that the practitioner accepts the assigned Medicare benefit(s) as full payment for the service(s).

Assignor signature	**Full name (print)**	**Date**

Privacy: Services Australia collects and handles personal information in accordance with the Privacy Act 1988 for the purposes of assessing entitlement to, and administration of, Medicare payments and services.

Record keeping: the practice must keep a copy of this completed agreement for 2 years from the date the claim is made, and must give the assignor a copy on request.

Scope: for bulk-billed services other than pathology and diagnostic imaging, which have additional requirements. Not for services funded by the Department of Veterans' Affairs (DVA).

How to use this template

A quick guide for practice managers and front-desk teams

WHAT CHANGED ON 1 JULY 2026

Medicare's assignment of benefit (AoB) rules were modernised on 1 July 2026. You no longer need to use an approved Services Australia form. Any written agreement works, as long as it contains the particulars required by the Health Insurance Regulations 2018. This template contains those particulars for standard bulk-billed services.

During a 12-month transition period, verbal assignment of benefit is still accepted. From 1 July 2027, every bulk-billed service will need a documented agreement like this one, signed on paper or accepted electronically.

FILLING IT IN: THREE STEPS

1. Complete Sections A and B: practitioner details, patient name, date of service, and the MBS item number (or a description of the service if you're completing the form before the consult).

2. Tick the agreement type in Section C, and record in Section D whether the person signing is the patient or a responsible person signing on their behalf.

3. Have the assignor sign and date Section E before you submit the bulk bill claim. File the completed form and give the patient a copy if they ask for one.

PRE-AGREEMENT OR POST-AGREEMENT?

Both are valid. A post-agreement (signed after the consult) is simplest: the MBS item number is known, so it can go straight on the form. Use a pre-agreement (signed at booking or in the waiting room) when you want consent sorted before the appointment. Describe the service in plain terms if the exact item number isn't known yet.

COMPLIANCE CHECKLIST

- One agreement per bulk-billed service (this is a per-service form, not an ongoing consent).
- The assignor must sign. The practitioner no longer needs to.
- Keep the completed agreement for 2 years from the date the claim is made.
- Give the assignor a copy if they request one.
- Don't use "patient unable to sign". That notation was abolished on 1 July 2026; a responsible person can sign instead.
- Pathology and diagnostic imaging services have different requirements, so don't use this template for those.

SOURCES AND FURTHER READING

Services Australia, Assignment of benefit for bulk bill claims: servicesaustralia.gov.au/assignment-benefit-for-bulk-bill-claims

Department of Health, Disability and Ageing, Improving the assignment of benefit process: health.gov.au/our-work/improving-the-assignment-of-benefit-process

Health Insurance Amendment (Assignment of Medicare Benefits and Other Measures) Regulations 2025 (F2025L00983), new s 65C.

This template is provided as general information, not legal or billing advice. Requirements may change, so check the Services Australia guidance above before relying on it. Current at July 2026.