



Assignment of benefit changes in Communicare v23.3

Assignment of benefit

From 1 July 2026, new assignment of benefit (AoB) arrangements come into effect. These changes affect how services confirm that a patient has agreed to assign their Medicare benefit for a bulk billed service.

Under the new arrangements, patient agreement can be recorded:


- before the service is provided, known as pre-assignment
- after the service is provided, known as post-assignment

Agreement can be captured using approved paper-based or electronic options.

Until enduring assignment of benefit commences, these arrangements will apply on an episodic basis. This means patient agreement must be recorded for each episode of care. Enduring assignment of benefit is expected to commence in 2027 and will allow patients to provide one-off consent for future ongoing services.

Changes in Communicare

Communicare v23.3 has introduced episodic post-assignment AoB in line with Services Australia requirements. Pre-assignment AoB is not yet available in Communicare and will be covered in a separate Central update in early July. Enduring AoB is planned for a later release, subject to specifications from Services Australia.

Post assignment of Medicare benefit information is now available in the  **Service Recording** window, on the **Post Assignment of Benefit** tab.

When a patient is selected in the  **Service Recording** window, staff can see:

- **Detail tab** – the date, duration and priority of the service, along with patient and file IDs.
- **Medicare tab** – the items claimed, each with a status icon. These icons show whether a claim has been sent or is pending, rejected, or paid. They also appear when the **Service Record** is opened from the **Online Claiming** window, making it easier to track claim progress.
- **Post Assignment of Benefit tab** – the assignment details, including:
 - **AoB Date** – the date the DB4 Post Assignment form is printed.
 - **AoB Type** – shown as *Post Assignment*.
 - **Is the Assignor the Patient** – shows whether the patient is responsible for assigning their post-assignment Medicare benefit to the service before the DB4 form is printed.
 - **Is AoB form Printed** – displays **Yes** once the DB4 Post Assignment form has been printed.



STEPS TO PRINT THE DB4 CLAIM FORM

The **Claim Form** option is only available after **Claim Now** or **Claim Later** has been selected in the

Service Record window, on the **Medicare** tab.

- Click **Service Recording**.
- In the **Service Recording** window, double-click the patient for whom you want to submit a claim.
- Click **Edit Service Details**, then select the **Medicare** tab.

Service Record

Change service details for DIAZ, DOT 45yrs

Detail **Medicare** Requirements

CentreLink Card Expiry MBS Items History

DVA Card Expiry Inpatient

This service is not claimable Claim another MBS item

Selected	Item No.	Amount	Claiming Provider	Description	Referred
<input checked="" type="checkbox"/>	715	241.85	Christine Ellison	Aboriginal and TSI Health Assessment	
<input type="checkbox"/>	3	19.60		Brief Consult Level A	
<input type="checkbox"/>	23	42.85		Standard Consult Level B, <20 min	
<input type="checkbox"/>	36	82.90		Long Consult Level C, 20-40 min	
<input type="checkbox"/>	44	122.15		Prolonged Consult Level D, >40 min	
<input type="checkbox"/>	10990	7.15		Additional bulk billing incentive	
<input type="checkbox"/>	64990	6.70		Radiology bulk billing incentive	
<input type="checkbox"/>	74990	6.70		Pathology bulk billing incentive	

Service Text Not normal aftercare item

Amount Claimed Number of patients seen Not duplicate service

LSPN Field Quantity Not multiple procedure

Provider Override Type

Specialist Services Use last referrer

Referring Provider No Provider Name

Referral Issue Date Referring Period Type

Override Type Referral Period (months)

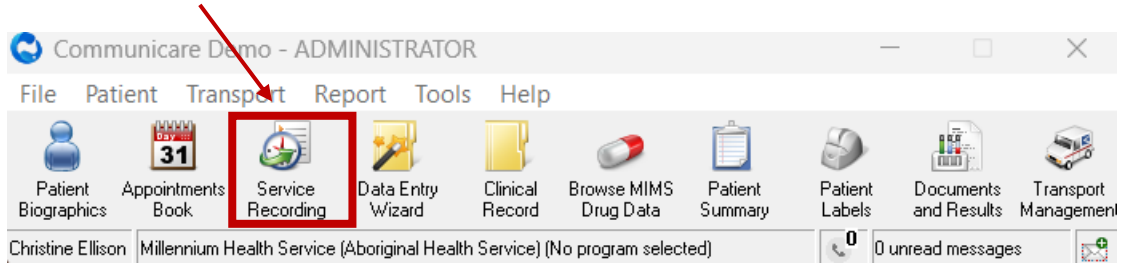
Default Claiming Provider: Christine Ellison (30 minutes)


Claim now Claim later Not claimable

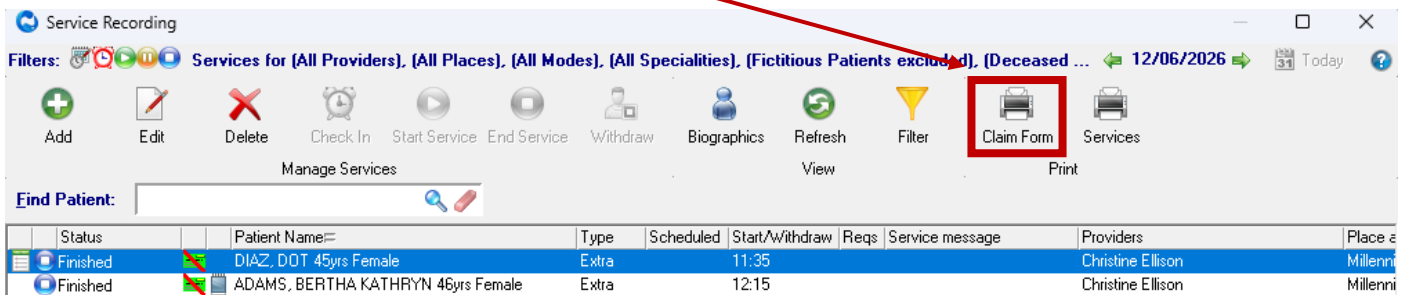
Save Cancel Help



- Open the **Service Recording** window

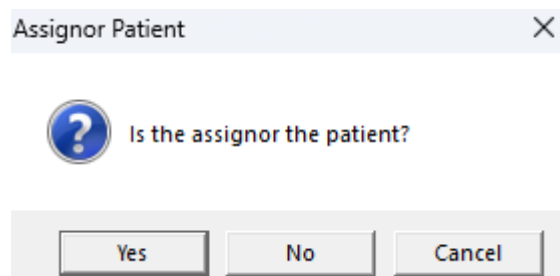


- Select the relevant patient
- Click  **Claim Form**



In the Assignor Patient window:

- Select **Yes**
 - If the patient is responsible for assigning their Medicare benefit
- Select **No**
 - If the patient is not responsible



For more detailed instructions, refer to the [Submit a Claim to Medicare](#) guide in the Communicare knowledge portal.