

AoB post-assignment requests

Version: 1 | Last Modified on 19/06/2026 9:21 am AEST

Important update

Following strong RACGP advocacy, the Federal Government has announced significant modifications to the new assignment of benefit process scheduled to begin on 1 July 2026.

Read the details here:

<https://www.racgp.org.au/advocacy/advocacy-resources/assignment-of-benefit-and-signature-requirements>

From 1 July 2026, an Assignment of Benefit (AoB) requests must be provided by the patient **before** or **after** an appointment using paper or digital forms. This guide is for Zedmed's AoB post-assignment request process.

This feature requires **Zedmed v39.5** or later.

Additional resources:

- Zedmed [AoB Frequently Asked Questions](#)
- Zedmed [AoB guidance and changes](#) article.

Workflow summary

The process starts in billing, where an AoB request is sent to the patient via SMS. The patient accepts it on their phone and the status is shown on the Invoice screen and Account Enquiry. Once accepted, the claim can be sent, or the invoice can be suppressed while waiting for the patient response. Suppressed claims with accepted AoBs can be transmitted collectively.

Step 1 - Send AoB request to patient

This step can be performed by:

- **Reception** when billing from the Invoice screen.
- **Practitioners** from the Billing Wizard.

To send the AoB request:

1. Create the invoice.
2. Check that the **Payer** is either **Medicare** or **DVA**.
3. Add the service items.
4. Select the **Send Assignment of Benefits Consent** button.

Date	Item#	Description	Fee	Tax	Unit Value	Qty	Amount	Notes	Estim. Refund	Gap
11/06/2026			MC	FRE	0.00	1	0.00		0.00	0.00
11/06/2026	23	Level B Surgery Consultation	MC	FRE	42.85	1	42.85		0	0

Properties Add Change Delete **Total 42.85 Disc. 0.00 Gap 0.00**

Doctor Assigned Billing Codes Message Add All

Billing Instructions **Send Assignment of Benefits Consent**

Defer Family ECLIPSE MA Online **Bulk Bill** Combo Inv. Print Email Suppress Quick Pay Cancel Help

Or, if the practitioner can send the AoB request using the Billing Wizard:

- Select **Medicare** or **DVA** as the payer.
- Select **Send Assignment of Benefits Consent**.

Billing Details

Patient Name Holloway, Mr Knut DVA Medicare Number 59502861421
 DOB 19/05/1952 HCC Pension Status Full DVA

Payer **Medicare P4 \$0.00**

Send Assignment of Benefits Consent

Search for item by number or description Selected Items

- Reception or the practitioner reviews the **Assignment of Benefits Request** dialog.
 If required, you can change the mobile number to the person acting **on the patient's behalf**.

Claim

Services

Date	Item#	Description	Fee	Tax	Unit Value	Qty	Amount	Notes	Estim. Refund	Gap
11/06/2026	23	Level B Surgery Consultation	MC	FRE	42.85	1	42.85		0	0

Properties Add Change Delete **Total 42.85 Disc. 0.00 Gap 0.00**

Doctor Assigned Billing Codes Message Add All

Billing Instructions **Send Assignment of Benefits Consent**

Defer Family ECLIPSE MA Online **Bulk Bill** Combo Inv. Print Email Suppress Quick Pay Cancel Help

Assignment of Benefits Request

An Assignment of Benefits Request will be sent to the patient using the mobile phone number and date of birth displayed below. Data can be changed here without affecting the patient record.

Patient Name Mr Happy Jones

Mobile Number A valid mobile phone number is required

Date of Birth 04/12/1964

Send Cancel

- Select **Send**.
- Advise the patient to action the AoB request.
- Proceed to step 2 and 3, where the patient accepts the AoB and you select **Bulk Bill** to send the claim, or **Suppress**.

Step 2 - Patient accepts the AoB

When the patient is sent an AoB request, they:

- Open the SMS.
- Tap the URL:
 - Enter the patient's date of birth.

- b. Select **Verify**.
 - c. Select **I am the Patient** or **I am assisting the Patient**.
 - d. Select **Accept**.
3. **Optional:** select **Download copy of consent** to save a record.

The image shows three sequential screenshots of the Medicare consent process. The first screenshot shows a 'Post Assignment of Benefits' form with a 'Verify' button (a) and two radio button options: 'I am the Patient' (b) and 'I am assisting the patient' (c). The second screenshot shows a 'Request Approved' notification with a 'Download copy of consent' button (c). The third screenshot shows an 'Accept' button (d) and patient details including Medicare Card No., Patient name, Date of Birth, Address, and Servicing Provider Name.

Step 3: Workflow option 1 - Submit claim (approval received)

Proceed with billing:

1. If present, wait for the patient to accept the AoB request.
2. On the invoice, check the request status - it must show **Medicare consent received**.

The screenshot shows a billing software interface. In the 'Billing Instructions' section, there is a message that says 'Medicare consent received 10/05/2024 01:43 pm' with a green checkmark icon. The interface also shows 'Doctor Assigned Billing Codes' with the value '23' and an 'Add All' button.

- o If it shows **Medicare Consent Pending**, the patient has not yet actioned the request.
 - o If it shows **Medicare Consent Declined**, DO NOT use Medicare or DVA as the Payer.
3. Select **DVA** or **Bulk Bill** to submit the claim.
 4. A patient's consent is also shown in **Account Enquiry** under the **Bulk Billing Consent** column.

The screenshot shows an 'Account Enquiry' window for patient 'Jones, Happy'. The payer is 'Medicare'. The table below shows transactions with their respective values and outstanding amounts. The 'Bulk Billing Consent' column shows 'ACCEPTED' for all transactions.

Transaction	Invoice#	Date	Patient	HIC	CLM#	Br	Dr	Value	Outstanding	Bulk Billing Consent
> -- I	9	10/05/2024	JONES, HAPPY			MED	WH	41.40	41.40	ACCEPTED
> -- I	6	06/05/2024	JONES, HAPPY			MED	PD	81.30	81.30	ACCEPTED
> -- I	4	06/05/2024	JONES, HAPPY			MED	PD	41.40	41.40	ACCEPTED
> -- I	1	03/05/2024	JONES, HAPPY			MED	PD	41.40	41.40	ACCEPTED

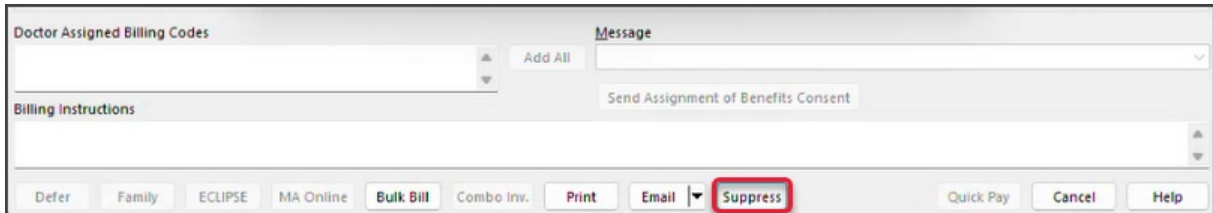
You can also view the AoB request in the [Patient record](#) > Messages and [Message Manager](#)

Step 3: Workflow option 2 - Suppress invoice and transmit later

For this workflow, the AoB acceptance is delayed.

To suppress invoices and transmit accepted AoB claims later:

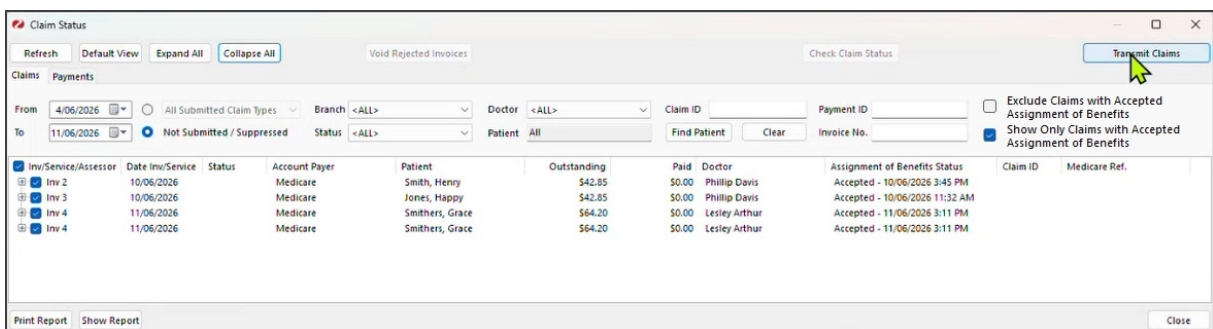
1. Select **Suppress** on the **New Invoice** screen.



The screenshot shows the 'New Invoice' screen. At the bottom, there is a row of buttons: Defer, Family, ECLIPSE, MA Online, Bulk Bill, Combo Inv., Print, Email, Suppress, Quick Pay, Cancel, and Help. The 'Suppress' button is highlighted with a red rectangle.

When you are ready to transmit suppressed claims:

2. Open **Claims** > **Claims tab**.
3. Select the **Not Submitted / Suppressed** radio button.
4. Filter by **Accepted Assignment of Benefits**.
5. Select the **Invoice** check boxes followed by **Transmit Claims**.



The screenshot shows the 'Claim Status' window. The 'Not Submitted / Suppressed' radio button is selected. The 'Show Only Claims with Accepted Assignment of Benefits' checkbox is checked. A table of claims is displayed below. The 'Transmit Claims' button is highlighted with a yellow mouse cursor.

Inv/Service/Assessor	Date Inv/Service	Status	Account Payer	Patient	Outstanding	Paid	Doctor	Assignment of Benefits Status	Claim ID	Medicare Ref.
Inv 2	10/06/2026		Medicare	Smith, Henry	\$42.85	\$0.00	Phillip Davis	Accepted - 10/06/2026 3:45 PM		
Inv 3	10/06/2026		Medicare	Jones, Happy	\$42.85	\$0.00	Phillip Davis	Accepted - 10/06/2026 11:32 AM		
Inv 4	11/06/2026		Medicare	Smithers, Grace	\$64.20	\$0.00	Lesley Arthur	Accepted - 11/06/2026 3:11 PM		
Inv 4	11/06/2026		Medicare	Smithers, Grace	\$64.20	\$0.00	Lesley Arthur	Accepted - 11/06/2026 3:11 PM		

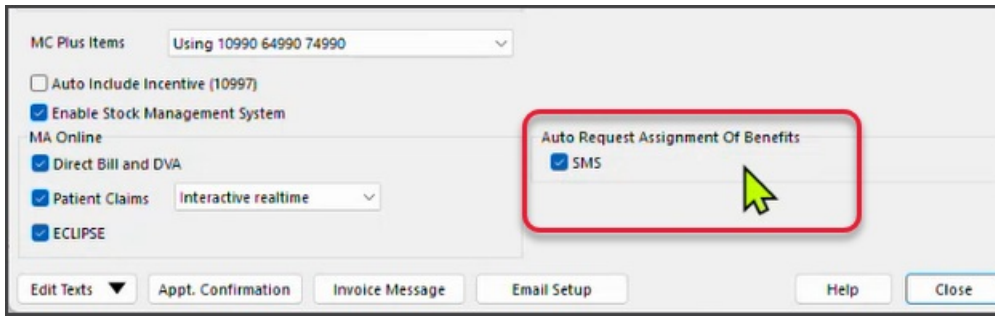
To learn more, see our [Suppress Invoices and Manually Transmit Claims](#) guide.

Using automatic AoB requests

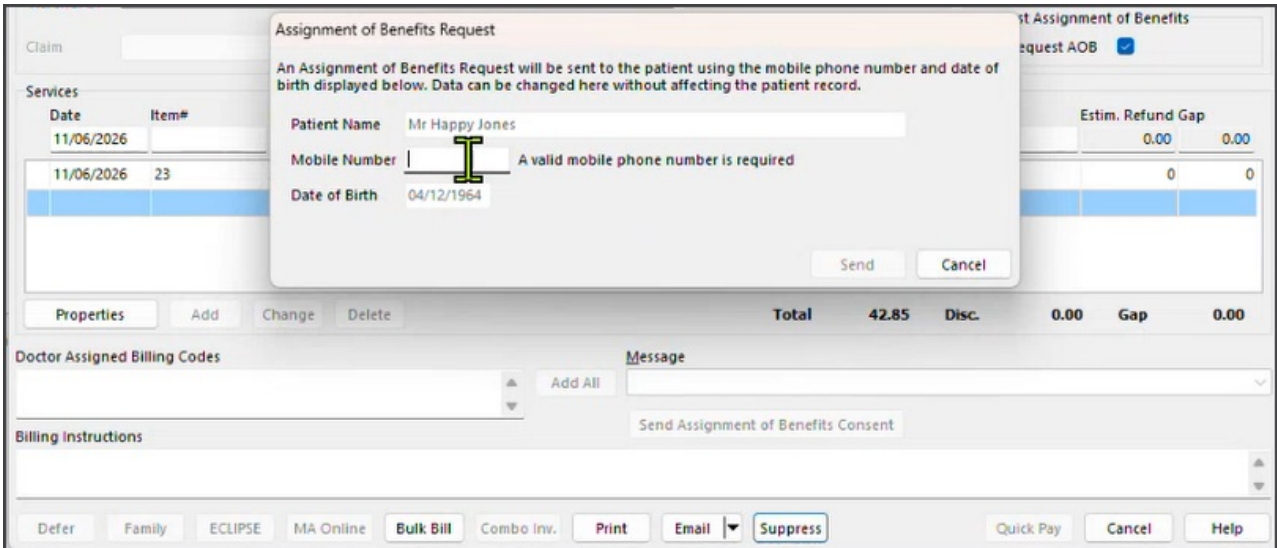
To avoid forgetting to send an AoB request, you can set the Assignment of Benefit to automatically open when billing.

To enable:

1. Go to **Branches**.
2. Select **Branch Options**.
3. Select **Auto Request Assignment of Benefits**.
4. Repeat for each Branch.



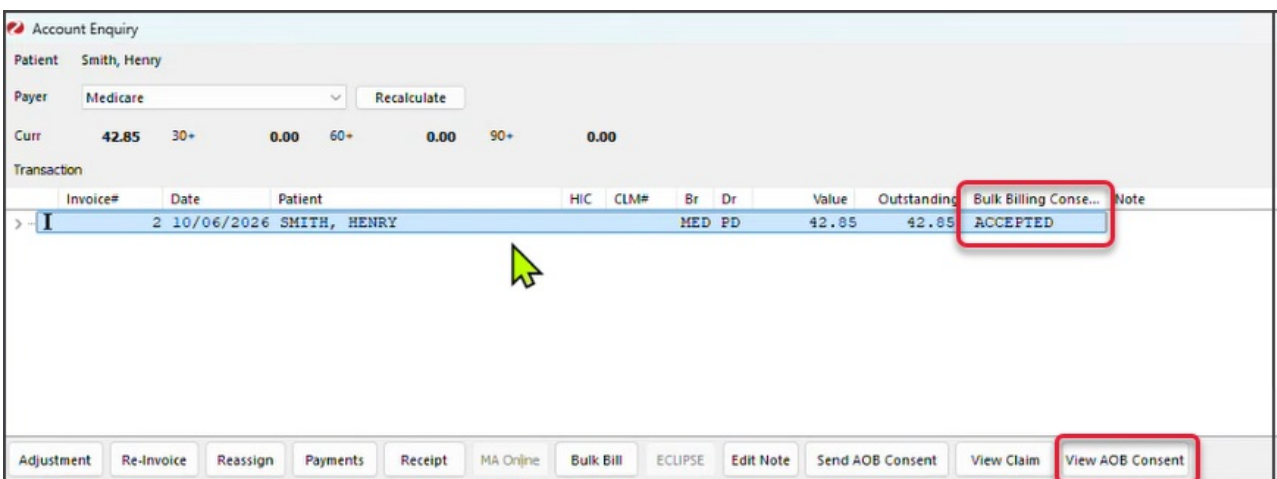
When auto AoB requests are enabled, the request dialogue will open when you select **Bulk Bill**, **DVA** or **Suppress**.



Providing an AoB consents for an audit

If a practice is asked to prove that AoB consent was received:

1. Select the invoice in **Account Enquiry**.
2. Select **View AOB Consent**.



The patient's post-assignment approval will open and can be downloaded.

Post Assignment of Benefits

We require your consent to assign your Medicare benefits to Branch 1

Patient Details

Medicare Card No:	29513860241
IRN:	1
Patient name:	Henry, Smith
Date of Birth:	17/06/1940
Address:	12 Wattle St DUBBO 2830
Is the assignor the patient:	Yes

Provider Details

Servicing Provider Name:	Dr Phillip Davis
Servicing Provider No:	2121331W
Appointment attended:	2026-06-10 10:32

 Request Approved

You approved this request by the healthcare provider listed above to bulk bill your appointment. You submitted this form 10/06/2026, 3:45:57 pm
TC+10:00

26-06-10 - 23 - Level B Surgery Consultation

Please contact your healthcare provider if you require any additional information.

Thank you for your patronage.

[Download copy of consent](#)