

# Fold me over!

**NOTE** Sending a form via SMS will cost BpComms credits

<b>SMS</b>	Utilise either the Pre or Post Assignment of Benefit Template, delivered via SMS with Bp Comms.
<b>Printer</b>	Paper workflow that has been modified to remain valid.
<b>Managed externally</b>	If BpComms is not used for SMS messaging, select this option to manage Assignment of Benefit requests outside of Bp Premier through an external SMS provider. You can also select this option if you manage your bulk billed claims through a Tyro EFTOS machine. See the Tyro website for more information. The record of the completed assignment will be stored with the external third-party provider.

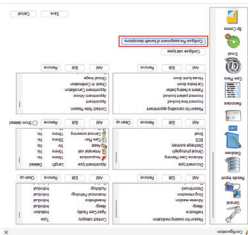
When generating an account for the patient, the selected default channel will be pre-selected and demographics for the SMS number.

1. From the main screen of Bp Premier, select Setup > Configuration.
2. Select the Billing tab from the left-hand panel.
3. In the Default Assignment of Benefit generation channel, select your practice's preferred method from the dropdown options.
4. Click Save.

## Set Default Assignment of Benefit generation channel (Printer/SMS/Managed Externally)

<b>GP Short (Level A)</b>	Items up to 5 minutes.	Assessments: GP Short
<b>GP Standard (Level B)</b>	Attendance items between 6 and 20 (or 25) minutes.	GP Care
<b>GP Long (Levels C, D, and E)</b>	Attendance items over 20 minutes.	Chronic condition management and health assessments.

Common BSD categories include:



1. From the main screen of Bp Premier, select Setup > Configuration.
2. Select the Lists tab from the left-hand panel.
3. Click Configure Pre-assignment of benefit descriptions.
4. From the Configure basic service descriptions window, select an appointment type to edit and use one of the 16 Medicare service categories for the appointment type.
5. Screen to configure basic service descriptions per appointment.

When a basic service description is set for an appointment type, it will populate in the pre-assignment request form when sending bulk automated SMS requests.

## Set a Basic Service Description for Appointment types

Assignment of Benefit Changes From July 1st 2026

# Collect a Pre-Service Assignment of Benefit



# Collect a Post-Service Assignment of Benefit

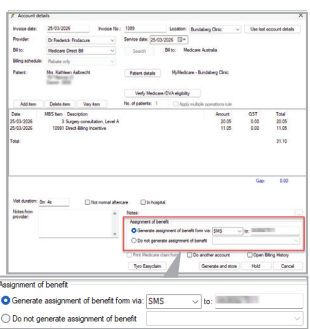
Assignment of Benefit Changes From July 1st 2026

Post-Assignment of Benefit(AOB) forms can be generated from the Account details screen.

## Send a digital form from Account details

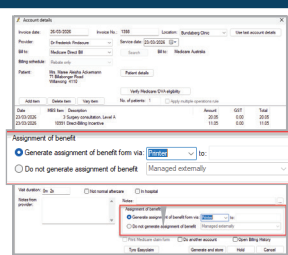
- Account Details can be accessed via :
- The patient has finished seeing the provider and the appointment status changes to **At Billing**, double-click the patient to open the **Account Details** screen.
  - From the main screen, select **Management > Create patient account**.
  - From the **Patient Billing History** screen, click **New Account**, or go to **File > New simple account**

1. On the **Account Details** screen, set the **Bill to field to Medicare Direct Bill**, then add the MBS item numbers to be billed as you normally would.
2. Under the **Assignment of benefit**, select **SMS** from the dropdown next to **'Generate assignment of benefit form via'**. The phone number will be automatically populated from what is recorded in the Patient details.
3. Click **Generate and store**. The Pre-Assignment of Benefit SMS Request is sent.
4. The patient receives an SMS of the Post AOB Form Request Template, and completes this to finalise recording their assignment of benefit.



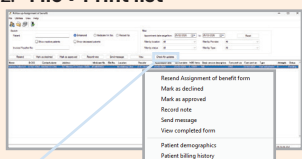
## Print a paper form from Account details

1. On the **Account Details** screen, set the **Bill to field to Medicare Direct Bill**, then add the MBS item numbers to be billed as you normally would.
2. Under the **Assignment of benefit**, select **SMS** from the dropdown next to **'Generate assignment of benefit form via'**.
3. Click **Generate** and **store**.
4. Ensure the correct printer is selected and click **OK**.
5. The Post-AOB form will be printed.



## Follow up AOB

1. Access the Follow up Assignment of Benefit window from the **Appointment Book > View**, or from the **Bp Premier main screen > Management**.
  2. **File > Print list**
- Selecting **Check for updates** refreshes the AoB status of all records displayed and the Appointment book icons.



## Change an item number for a rejected claim and generate a new post-AOB form

1. Go to **Management > Online Claiming**.
  2. From the **Online Claim** batch screen, double click on the rejected batch.
  3. Select a claim to adjust and click the **Adjust service** button.
  4. Select the **Change item number** radio button, and then click **Change**.
  5. Select a new item number from the **Search Medicare Benefits Schedule** screen.
  6. Ensure details are correct and click **OK**.
  7. Click **OK** from the **Adjust billing** screen.
  8. Click **Process** from the Online Claim batch screen.
- a. If SMS is selected as the generation method the Online Claiming Post Assignment of Benefit Form Bp Comms template will be sent to the patient(s).
- b. If Printer is selected as the generation method, the Print screen will appear. Ensure the correct printer is selected and click OK. The Post assignment of benefit form(s) will be printed.

# Fold me under!