

Assignment of Medicare Benefits for Bulk Billing

Episodic pre-agreement – diagnostic imaging

Patient/Assignor details

Patient Name (e.g. firstname initial lastname):

Is the assignor the patient: YES NO

Services Description sufficient to identify the MBS item/s:

Statement of Assignment:

I assign my right to benefits under the Health Insurance Act 1973 (HIA) for the service(s) specified above to the providing practitioner. I understand that, if the service is an R type diagnostic imaging service, this assignment also applies to any additional diagnostic imaging service that is not specified above where the providing practitioner (within the meaning of section 16B of the HIA):

- a) forms the opinion, on the basis of the results of the above service, that the additional service is necessary; or*
- b) forms the opinion that the additional service is more appropriate for the diagnosis of my condition than the above service, being an opinion that would be acceptable to the general body of specialists or consultant physicians in the practitioner's specialty.*

Date imaging procedure will be rendered:

 / /

Assignor's Signature:

Date: / /

Privacy Statement

Instruction: This is an example privacy statement. Practices or providers may insert their own statement and link to their relevant privacy policy.