

Medicare AoB Changes - Where to now?

HOSTED BY



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12:30pm AEST
(30 min duration)










In the spirit of reconciliation, HotDoc acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community.

We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.



Housekeeping

-  This session is being recorded & will be sent to you 4-6 hours after this session has concluded along with the resources.
-  Pre-submitted questions will be addressed at the end of today's session, we will do what we can to address additional questions submitted during the LIVE webinar
-  In the “related content” you’ll find our further feedback form.
-  Your certificate of attendance will be accessible at the 20 min mark, you can access via the  certificate icon on your console.
-  Have a play around with the console/ icons on your screen for an interactive experience.
-  Please take some time to complete our feedback survey to let us know what you thought of today's session.

Today, we will cover...

- 🌿 The government's last-minute changes - what's actually different now
- 🔺 What verbal consent means in practice, and how long it lasts
- 🟠 Enduring AoB: who qualifies from 1 July and how to set it up
- 🔹 What your practice still needs to do before the end of June
- 🟡 The digital and paper pathways and why you should keep preparing
- 🔸 Quick recap of how HotDoc can help at this point of the AOB journey



The Government's Last-Minute Changes

RELEASED MID-JUNE 2026

Three significant concessions were made in response to sector feedback:

1 12-month transition period

- Regulatory amendments introduced to ease implementation
- Education and prevention take priority over enforcement
- Department will explore further burden-reduction during this period

2 Verbal consent restored (temporarily)

- Verbal AoB is valid for all patients in all settings for 12 months
- Applies from 1 July 2026 to approximately 30 June 2027
- Record-keeping obligations still apply - agreements must be retained

3 Enduring AoB introduced from 1 July

- MyMedicare patients, aged care residents, ACCHO/AMS patients eligible
- Gazetted 25 June 2026 - commences 1 July 2026 (confirmed)
- Reduces how often eligible patients need to sign in future

Enduring AoB regulations (F2026L00824) gazetted 25 June 2026 and confirmed to commence 1 July 2026.
Practical setup details and the Services Australia registration system still to be published.

Verbal Consent: What It Means in Practice

What IS permitted

- Patients can verbally agree to assign their Medicare benefit
- Valid for ALL bulk billed patients in ALL settings
- Applies to in-person, telehealth, home visits, aged care
- Covers the 12-month period from 1 July 2026
- Staff can note verbal consent in their workflow - no patient signature required during this period

What you **STILL** must do

- A completed AoB agreement must still be created and retained
- Agreements must be kept for 2 years and available on request
- The required data set still applies to the written record
- ***Verbal consent does not remove compliance obligations***
- After 30 June 2027, a written/electronic signature will be required

Verbal consent buys you time - it does not reduce your documentation obligations. Use it as a bridge while you build your digital workflow.

Enduring AoB: Who Qualifies and How It Works

CONFIRMED – GAZETTED 25 JUNE 2026, COMMENCES 1 JULY

From 1 July 2026, eligible patients can make a one-time agreement that covers future bulk billed GP services.



MyMedicare-registered patients

- **GPs only** specialists and consultant physicians are excluded by law
- One enduring agreement covers all GPs at the patient's registered MyMedicare practice
- A patient cannot hold simultaneous MyMedicare enduring agreements at two different practices
- If the assignor is not the patient and the patient is 14+, the patient must also sign a written declaration
- GP must **notify** assignor within 24 hours of each Medicare claim



Residential aged care residents

- GPs only - specialists and consultant physicians are excluded by law
- Multiple enduring agreements allowed with different GPs
- Covers services at the aged care home and the GP's other practice locations
- A temporary hospital admission does not end the agreement
- Assignor (carer, family, Power of Attorney) can complete on the resident's behalf



ACCHO and AMS patients

- Covers all professionals employed by the ACCHO/AMS at any clinic the patient attends
- Multiple agreements allowed across different ACCHO/AMS services
- Agreement is entered with an agent of the ACCHO/AMS, not an individual professional
- Agreement ends if the patient ceases to be a patient of that ACCHO/AMS

Enduring consent agreement details still to come.

What Practices Should Do Before End of June

These changes go live 1 July 2026 - your final checklist:

- ✓ Brief your GPs and reception team on the verbal consent transition - they must know it's valid but record-keeping still applies
- ✓ Update or create an AoB agreement template that includes the required 7-point data set (patient name, date, assignment type, assignor Y/N, practitioner details, date of service, basic service description). Create autofill for Drs
- ✓ Check your PMS vendor's status - confirm what is going live on 1 July and what will come in a future update
- ✓ Update pathology request forms or confirm your lab's transition plan - pre-1 July forms valid for 12 months
- ✓ Confirm your HotDoc workflows are set up for pre-assignment at booking - check the HotDoc portal or ask your account manager
- ✓ If using DB4e or DB020 paper forms, ensure you have the updated versions ready from 1 July
- ✓ Prepare your aged care and home visit workflows - verbal consent available but agreements must still be documented
- ✓ Review online information daily - <https://www.health.gov.au/sites/default/files/2026-06/assignment-of-medicare-benefits-for-bulk-billing-frequently-asked-questions.pdf>

Digital and Paper Pathways: Keep Preparing

THE TRANSITION IS A TEMPORARY MEASURE



Digital pathway

- Pre-assignment via booking tools (e.g. HotDoc) - patient signs before they arrive
- Post-appointment SMS or online form sent by PMS
- Electronic signatures: tap 'I agree', type name in form, or sign on tablet - all valid under the Electronic Transactions Act 1999
- Records stored automatically for compliance - no manual filing



Paper pathway

- Updated DB4e and DB020 forms available at servicesaustralia.gov.au from 1 July
- Practices can create their own template - any format works if it includes the 7 required data points
- Old forms (pre-1 July versions) are no longer compliant - must use updated versions
- Paper agreements **must** be retained for 2 years (physical or scanned)



12-month temporary window. Practices that invest now in digital workflows will have a lower compliance risk, less admin burden, and be audit-ready well before the verbal consent window ends.

Assignment of Benefit

What's changing with HotDoc



Updated AoB form

Matches new Medicare data set requirements effective 1 July 2026.



Pre-consent - now available

Optional. Send up to 7 days before a consult. Post-consent remains the fallback.



Post-consent unchanged

Your existing workflow continues as-is. Auto-triggers on invoice if pre-consent was not completed. Resend available



Free with HotDoc

No additional cost. AoB tools are included in your existing HotDoc subscription.

Patient view of AoB

Delivered through HotDoc – the same place patients book, check in, and get reminders.

01

Pre-appointment notification

Patient receives a push notification or email up to 7 days before their consult – from a sender they already recognise.

02

Consent form

Patient reviews the service and bulk billing details, then provides consent in the HotDoc app or via email link.

03

Automatic fallback

If a patient doesn't pre-consent, or the billed service differs, post-consent sends automatically upon invoice. We also have a manual resend available in the dashboard.

Response rates - Email 72% · Push 67% · SMS 62%

Practice view of AoB

Everything lives in one place: Medicare Hub > Bulk Billing Consent.

Two steps

Send pre-consent

- Search upcoming appointments and select patients
- Choose the Basic Service Description.
- Send in bulk. Done.

Full visibility

Consent dashboard

- View pre- and post-consent status in one place
- Identify patients requiring follow-up and resend
- Completed forms auto-saved to your PMS (Best Practice and MD however ZedMed will require download and save to the patient file within 30 days) - two-year audit trail handled.

Automatic fallback

Post-consent

- Works exactly as it does today - no changes required
- Can be used standalone or alongside pre-consent
- Auto-sends on invoice generation if patient didn't pre-consent or billed item differs

What's next

Coming soon after launch - plus resources to help your practice go live on 1 July.

READY

Resend button

Re-send a consent request to patients who haven't responded, no manual workaround needed.

MID JULY

HotDoc sender ID for AOB

Mid July AoB consent requests will come from the HotDoc sender ID. You do not need to register your own sender ID.

IN DEVELOPMENT

Best Practice Oxford S1 sync

See each patient's consent status directly in the BP appointment book — without leaving your PMS.

SHAPE THIS WITH US

Over the next 12 months, let's build this together.



Your feedback after 1 July will directly shape how we improve the product - what works, what doesn't, and what's missing.

✓ What's working?

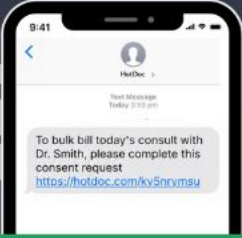
↗ What needs improving?

+ What's missing?

Assignment of Benefit Patient Education Resources - download via the link in the "related content" section


We're making bulk billing clearer for you.

To bulk bill, we need your consent.



This practice uses HotDoc to manage your Medicare consent.

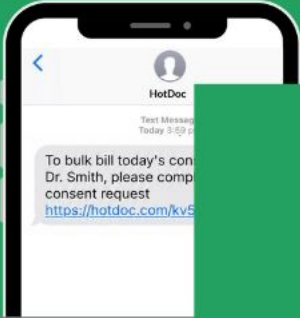
You'll receive a short message asking to confirm your details before or after your appointment. To make bulk billing possible, please respond.



Printable A3 posters

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This practice uses HotDoc to manage your Medicare consent.


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4K TV Screen Images

Check out our Broadcast via email template to contact your patients about the changes - find it in your HotDoc dashboard...

Broadcasts

Need Help?

Keep patients engaged

HotDoc Broadcast makes it easy to send targeted SMS* and Email messages to your patient base using demographic filters or uploading a.csv. Whether it's appointment updates, health alerts, or important announcements, Broadcast helps you keep your patients informed and engaged with your practice. Find out more about [How HotDoc Broadcasts work](#).

*SMS Broadcasts billed separately at \$0.063 per message

To begin, select a template or create one from scratch

500 SMS credits + New Broadcast

Templates All SMS Email

Create new broadcast SMS Email

Assignment of Benefit Patient Education Email

Holiday Opening Hours SMS

MyMedicare Enrolment Invitation Email

Bulk Billing Now Available SMS

Skin Check Service SMS

Routine Requests: Set Patient Expectations Email

MyMedicare Registration SMS

Email Message

Header Image

Drag & drop an image or [Browse Files](#)
Max file size: 6MB
(png, jpeg, jpg, gif)

Email Message

Hi {{patient-preferred-name}},

The Australian Government has updated the way patients provide consent for bulk billing. This helps make it clearer how your appointment is billed and ensures your Medicare benefit is only assigned with your permission.

As of **July 1st 2026**, you may receive an SMS, email, or push notification from HotDoc requesting your consent for Medicare bulk billing.

It allows your Medicare benefit to be processed as a bulk-billed service.

Please note:

- Consent requests are now mostly digital.
- Verbal consent is no longer accepted.
- You may now be sent a consent request **before** or **after** your appointment.
- You may receive a second request if billing details change or if you do not respond to our request.
- We are unable to bulk bill your consultation if consent is not provided.

If you're ever unsure whether a message is genuine, please contact our practice before clicking any links. Assignment of Benefit messages will be sent from HotDoc's registered number which is +61 4 0959 3783.

Email Preview

Hi Jacob,

The Australian Government has updated the way patients provide consent for bulk billing. This helps make it clearer how your appointment is billed and ensures your Medicare benefit is only assigned with your permission.

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Thank you,
Somerville Doctors
03 9376 9340

AoB Consent Paper Form

(not suitable for enduring consent)...

All resources are
downloadable via the link
in the related content
section.

Assignment of Medicare Benefit

Bulk billing consent

What this form is for
Bulk billing means you agree to assign your Medicare benefit for this service to the practitioner, who accepts that benefit as full payment. You will not be charged for the service covered by this agreement. Please check the details below, then sign to give your consent. Your practice will keep a copy for two years and give you a copy on request.

1 Patient details

PATIENT FULL NAME (PERSON WHO WILL RECEIVE THE SERVICE) _____ DATE OF BIRTH (OPTIONAL) _____

2 Practitioner details (COMPLETED BY THE PRACTICE)

PRACTITIONER NAME _____ PRACTITIONER PROVIDER NUMBER _____

3 Service details (COMPLETED BY THE PRACTICE)

SELECT YOUR AGREEMENT TYPE

This is a Pre-assignment agreement This is a Post-assignment agreement

BASIC SERVICE DESCRIPTION
Select a basic service description, a broad category that covers a range of item numbers.

GP - Short GP - Long
 GP - Standard Allied Health
 Other: _____

DATE OF SERVICE _____

MBS ITEM NUMBER(S)

Enter the MBS item number(s) for the service(s) provided.
DATE OF SERVICE _____

4 Your agreement

I assign to the practitioner named above my right to the Medicare benefit payable for the service(s) described in this form. I understand the practitioner accepts the Medicare benefit as full payment, and that I will not be charged for those service(s).

5 Signature

I am the patient I am signing on behalf of the patient

IF SIGNING ON BEHALF OF THE PATIENT: YOUR FULL NAME _____ RELATIONSHIP TO PATIENT* _____

*e.g. parent, partner, carer, relative, friend, or person holding power of attorney

SIGNATURE _____ DATE AGREEMENT SIGNED _____

The practice retains this agreement for at least two years and will provide a copy to the patient on request.

Questions



Thank You!

