



This form to be used only when the individual submitting an Assignment of Payment (AOP) form has not set up authentication through a mobile BC Services Card. To submit AOP forms electronically, submitter authentication is required. To set up authentication through a mobile BC Services Card, go to: www.gov.bc.ca/mobilebcservicescard.

If the individual submitting AOP forms cannot set up authentication through a mobile BC Services Card, they may submit AOP forms, with completed Mail-In Contact Information, to: **Health Insurance BC Provider Programs, PO Box: 9480, Victoria, BC, V8W 9E7.**

PLEASE COMPLETE ONE CONTACT INFORMATION FORM FOR EACH ASSIGNMENT OF PAYMENT FORM SUBMITTED

For more information see: <http://www.gov.bc.ca/assignmentofpayment> or email HIBC.AOP@gov.bc.ca

SUBMITTER'S CONTACT INFORMATION		
First Name	Last Name	Phone Number
Email Address	Organization	
Comments		

If confirmation of practitioner credentials is needed, it **MUST** be submitted at the same time as the related AOP form or the AOP cannot be processed.

Confirmation of Physician Credentials Included? Yes No

IMPORTANT INFORMATION

An Assignment of Payment (AOP) form must be fully processed within 90 days of the effective date of service to receive payment from the Medical Services Plan.

When submitting an AOP form after the Effective Start Date, it is strongly recommended you submit within 60 days from the effective start date to allow 30 days for Health Insurance BC to complete processing of the AOP form. See the AOP Submission Timeline below.

AOP SUBMISSION TIMELINE

