



Print in **BLOCK LETTERS**

Note: Failure to complete fields correctly may lead to delays in stock delivery.

Date / /	Provider number (must be completed) <input type="text"/>	Provider's full name (not practice name)	
Street address including business name (a PO Box address is not acceptable for courier delivery)			

Post code	Email address		
Details of person placing the order			
Full name	Your signature	Daytime phone number ()	Fax number ()

Form description	Code	Content per unit	DE code	Number of units required
Aboriginal/Torres Strait Islander enrolment/amendment form	EN11a	10 forms	286	
Aboriginal/Torres Strait Islander enrolment and amendment form	EN11	25 forms	272	
Bulk bill (hospital only)	DB1Ha	5 forms	289	
Bulk bill (hospital only)	DB1H	100 forms	4	
Bulk bill continuous (2 part EDI)	DB4E	500 forms	19	
Bulk bill continuous (3 part)	DB4	500 forms	11	
Bulk bill voucher (Allied Health Professional)	DB2-AHa	20 forms	300	
Bulk bill voucher (Allied Health Professional)	DB2-AH	100 forms	297	
Bulk bill voucher (DB) Medicare Teen Dental	DB2-DBa	20 forms	734	
Bulk bill voucher (DB) Medicare Teen Dental	DB2-DB	100 forms	729	
Bulk bill voucher (dental practitioner)	DB2-DPa	20 forms	700	
Bulk bill voucher (dental practitioner)	DB2-DP	100 forms	692	
Bulk bill voucher (GP)	DB2-GPa	20 forms	275	
Bulk bill voucher (GP)	DB2-GP	100 forms	7	
Bulk bill voucher (OP)	DB2-OPa	20 forms	276	
Bulk bill voucher (OP)	DB2-OP	100 forms	8	
Bulk bill voucher (OT)	DB2-OTa	20 forms	277	
Bulk bill voucher (OT)	DB2-OT	100 forms	9	
Bulk bill voucher pathology	DB3a	20 forms	278	
Bulk bill voucher pathology	DB3	100 forms	10	
Copy/transfer application (remote areas only)	3170a	10 forms	287	
Copy/transfer application (remote areas only)	3170	50 forms	25	
EDI env stickers Medicare (GP-red)	HICDEDI	3 sheets	293	
EDI env stickers Medicare (pathology-green) Victoria only	EDIPATH	3 sheets	314	
Electronic Funds Transfer (EFT) details collection form	1579a	20 forms	650	
Enrolment application (remote areas only)	3101	100 forms	21	
Enrolment application form (remote areas only)	3101a	10 forms	284	
Envelopes DL size only	ENVa	10 forms	279	
Envelopes DL size only	ENV	100 forms	14	
General practitioners kit	KIT-GP	1 DB2-GP form [†]	1	
Medicare claim form	PC1	100 forms	717	
Medicare notification of deceased person form	3300	50 forms	315	
Medicare Safety Net family registration form	SN1	50 forms	296	
Medicare Teen Dental Claim form	DC-1a	50 forms	735	
Medicare Teen Dental Claim form	DC-1	100 forms	732	
Medicare Teen Dental Plan brochure holder	2198	1 brochure holder	809	
Medicare two-way claim form	TW1a	50 forms	283	
Medicare two-way claim form	TW1	100 forms	20	

Form description	Code	Content per unit	DE code	Number of units required
Non-hospital allied health professional	DB1N-AHa	5 forms	299	
Non-hospital patients	DB1Na	5 forms	288	
Non-hospital patients	DB1N	100 forms	5	
Non-hospital patients (dental practitioner)	DB1-DP	100 forms	693	
Non-hospital patients Allied Health Professional	DB1N-AH	100 forms	298	
Non-hospital patients Medicare Teen Dental	DB1N-DBa	20 forms	733	
Non-hospital patients Medicare Teen Dental	DB1N-DB	100 forms	728	
Optometrists kit	KIT-OP	1 DB2-OP form[†]	3	
Pathology continuous	DB5	1000 forms	12	
Specialists kit e.g. diagnostics	KIT-OT	1 DB2-OT form[†]	2	
Imprinter	IMP_MED	1 machine	97	

Promotional material				
Medicare Online starter kit	2539_19	1 kit	766	
Medicare Easyclaim starter kit	2539_20	1 kit	761	
Claiming your Medicare benefit at the doctor's brochure (Medicare Online)	2539_13	50 brochures	765	
Claiming your Medicare benefit at the doctor's brochure (Medicare Easyclaim)	2539_17	50 brochures	763	
Medicare Safety Net brochure	2102	50 brochures	713	
Medicare your questions answered brochure	1339	50 brochures	608	
AODR and Donate Life - Discover the facts about organ and/or tissue donation brochure	3030	50 brochures	521	
Medicare Teen Dental brochure	2207	50 brochures	738	
Medicare Australia's Online Services brochure	1523	50 brochures	573	
Our Online Services - care plan access history	2826	25 brochures	811	

[†] Each kit includes 100 DB1N forms, 100 envelopes, one reorder form and one set of instructions for the DB1 and DB2 forms.
For items not included on order form call **132 150**.

<p>Assistance</p> <p>If you need assistance completing this form call 1800 067 307 (call charges may apply) or go to www.medicareaustralia.gov.au > For health professionals > Forms, publications and statistics > Medicare forms > Stationery Orders</p>	<p>Lodgment</p> <p>Send the completed form to:</p> <p>Medicare Australia Locked Bag 4444 Tuggeranong ACT 2901 or fax to: 02 6160 3888</p>
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Privacy note: The information on this form will be used by Medicare Australia and its stationery supplier to forward the requested stationery to you. The collection of this information is authorised by the *Health Insurance Regulations 1975*. This information will not be disclosed to any other party unless authorised or required by law.