

# UB04 Box 53 - Noting an Assignment of Benefits on an institutional claim

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On your institutional claim, you will need to notate that you either have **(Y)** a signed assignment of benefits from the patient permitting direct payment from the payer to the provider, **(N)** if there is no signed assignment of benefits on file which will direct the payer to send payment to the patient, or **(W)** if a signed assignment of benefits is not applicable.

DrChrono makes it easy to note all three of these situations from within the patient's claim.

1. Navigate to **Billing > Live Claims Feed > Inside the patient's appointment > Right side of the screen > Insurance tab**

The screenshot shows the 'Insurance' tab in the DrChrono interface. It displays two sections for 'Primary Insurer' and 'Secondary Insurer'. Each section includes fields for 'Primary Insurer', 'Plan ID', 'Release Info', 'Subscriber', 'Ins Group', and 'Payer pre-auth #'. The 'Release Info' dropdown menu is highlighted with a red box, and the 'AOB' option is selected. The 'AOB' dropdown menu is also highlighted with a red box. The 'AOB' dropdown menu is highlighted with a red box. The 'AOB' dropdown menu is highlighted with a red box.

Options from the dropdown include:

Y: Provider has a signed assignment of benefits on file

N: Provider does not have a signed assignment of benefits on file

W: A signed assignment of benefits does not apply to the claim

Box 53A is for the primary insurer; Box 53B is for the secondary insurer

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Y
N

