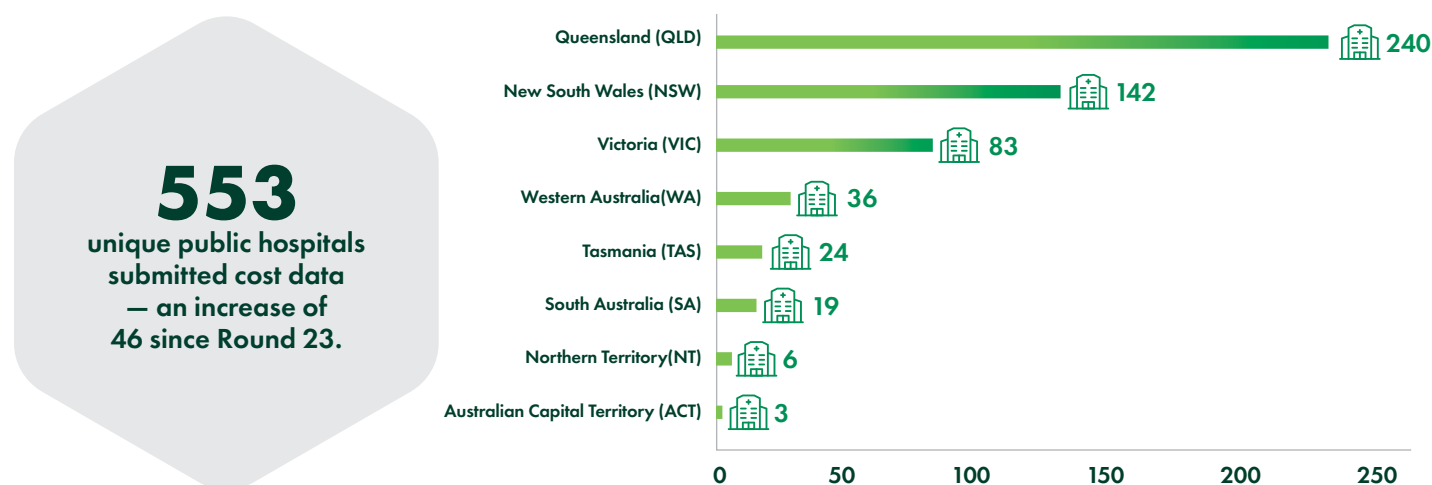


The Round 24 National Hospital Cost Data Collection (NHCDC) collected public hospital cost information for the 2019–20 financial year. It is important to note that the COVID-19 pandemic impacted the accuracy and completeness of public hospital expenditure and activity submitted to the Round 24 NHCDC. The Round 24 NHCDC data may not be consistent with prior years and across states and territories. The NHCDC report contains detailed summary tables of all reported figures. Data quality statements provided by each jurisdiction describe the methodology applied when allocating costs to activity when preparing their NHCDC.

## Number of hospitals that submitted cost data to the NHCDC



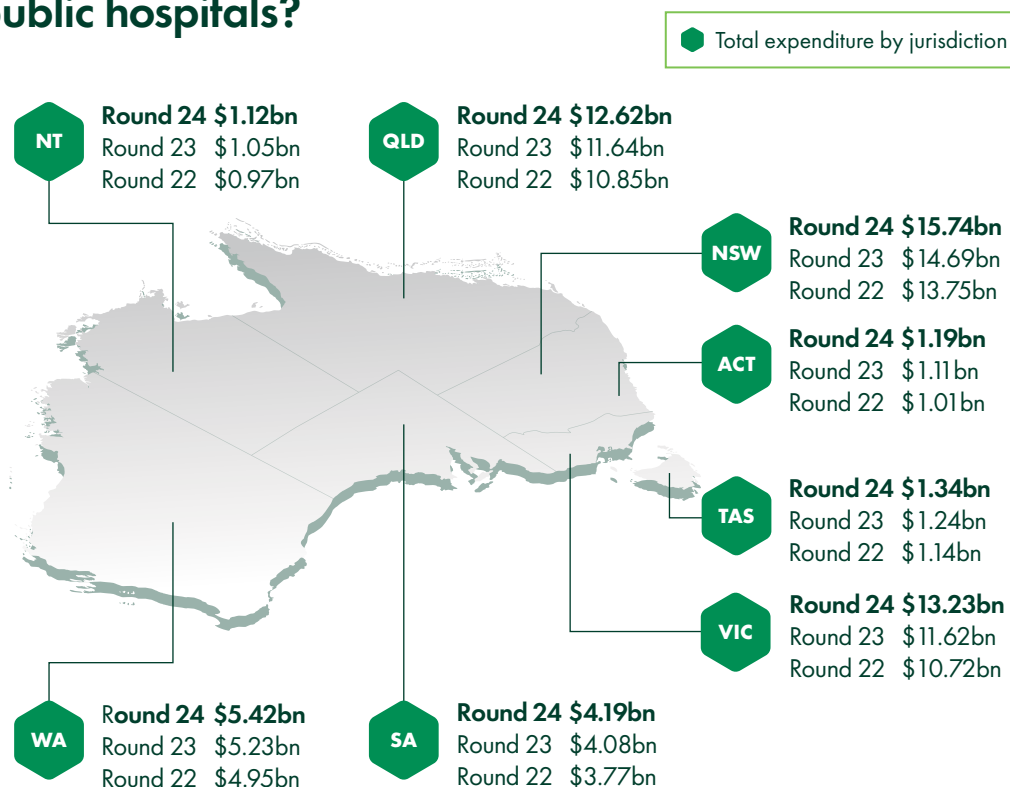
## How much does patient activity cost in Australia's public hospitals?

The national expenditure on hospital activity in Round 24 was

**\$54.85 billion**

Round 23  
**\$50.65 billion**

Round 22  
**\$47.17 billion**



## Patient activity streams

Patient activity refers to services and procedures received by the patient in relation to their care. The NHCDC results are presented by the following five broad patient activity streams.



### Admitted acute care

An admitted acute care **patient separation** represents a formal admission to hospital to receive short-term treatment. This includes treating illnesses, injuries, performing surgery or diagnostic procedures and manage childbirth.



### Non-admitted care

A non-admitted **patient service event** represents a patient encounter that has not undergone the formal hospital admission process and do not occupy a hospital bed. This includes hospital outpatient clinics, community based clinics and patients' homes.



### Subacute and non-acute care

Subacute and non-acute care **patient separations** represent the delivery of a specialised care service that is related to the optimisation of the patient's functioning and quality of life. This includes psychogeriatric care, geriatric evaluation and management care, rehabilitation and palliative care.



### Emergency department care

An emergency department **presentation** represents the delivery of a service provided to a patient in a hospital's emergency department. Emergency departments are dedicated hospital-based facilities specifically designed and staffed to provide 24-hour emergency care.



### Mental health care

A mental health care **service event** or **phase** represents the delivery of a mental health care service to a patient and can be provided either in an admitted or a community setting.

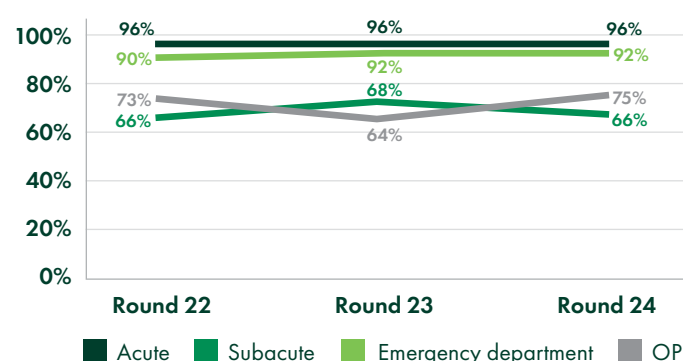
## Costed activity

In addition to cost data submitted via the NHCDC, jurisdictions submit activity data to IHPA for activity based funding purposes. When both activity and NHCDC cost data relating to a particular patient episode are submitted, IHPA links the data.

The completeness of the NHCDC is measured by the percentage of linked activity data, this is also known as 'costed activity'.

**96 per cent** of the admitted acute care episode (submitted via IHPA's activity data collection) had matching cost data.

### Level of costed activity for Round 22–24



## Cost buckets

IHPA reports on cost data submitted to the NHCDC using cost buckets. Cost buckets represent cost pools within a hospital which relate to a particular function of the hospital – for example, the hospital operating room.

For Round 24, the ward nursing cost bucket accounted for the biggest share of the costs for the admitted acute (19.1 per cent of costs), subacute (32.8 per cent) and admitted mental health (36.7 per cent) activity streams. The table below provides the proportion of costs by selected cost buckets, as well as the total average cost by activity stream.

### Proportion of costs by selected cost buckets, by activity stream

Cost bucket	Acute per cent	Subacute per cent	Emergency Dept. per cent	Non-admitted per cent	Admitted mental health per cent	Community mental health per cent
Ward medical	12.4	12.9	0.9	17.2	15.2	15.6
Ward nursing	19.1	32.8	1.9	14.7	36.7	25.0
Allied health	3.2	11.7	0.5	11.9	5.2	24.0
Non-clinical	6.7	11.4	0.9	10.5	10.6	12.1
On-costs	7.1	8.9	7.3	6.8	9.2	9.6
Pathology	3.6	1.0	6.2	4.4	0.8	0.4
Imaging	2.4	0.8	9.8	4.3	0.3	0.1
Prosthesis	2.9	0.1	0.0	0.3	0.0	0.0
<b>Total (\$)</b>	<b>5,334.8</b>	<b>15,373.2</b>	<b>774.9</b>	<b>350.2</b>	<b>19,255.2</b>	<b>2,611.7</b>

### Number of encounters per activity stream

	R22	R23	R24
Admitted acute separations	6,019,003	6,212,682	6,141,848
Subacute and non-acute separations	218,434	231,385	220,018
Emergency department presentations	7,877,053	8,184,682	8,172,976
Non-admitted service events	21,529,952	20,731,176	24,318,538
Admitted mental health records	118,756	136,640	118,363
Community mental records	56,619	193,875	467,539

Total number of encounters for Round 24

# 39,702,010

# Admitted acute care

The national expenditure on admitted acute care patient activity was

**\$32.77 billion**

**59.7%**

This represents the total hospital expenditure reported in the NHCDC in Round 24.

Round 23  
**\$31.23 billion**

Round 22  
**\$29.40 billion**

## Number of hospitals that submitted admitted acute care cost data



**342**

Round 22



**346**

Round 23



**354**

Round 24



The average cost per admitted acute care separation for Round 24 was

**\$5,335**

Round 23  
**\$5,027**

Round 22  
**\$4,885**

The data contains detailed cost information for

**6,141,848**  
admitted acute care patient separations

**15.5%**

Taken together, admitted acute care accounted for 15.5 per cent of all hospital patient activity reported to Round 24 of the NHCDC.

The separations were represented by 795 different Australian Refined Diagnosis Related Groups (AR-DRGs) Version 10.0. The most commonly reported related to haemodialysis, chemotherapy and chest pain.

## Comparing patient complexity

To compare costs between jurisdictions, IHPA uses 'weighted patient separations'. A weighted separation considers the relative complexity associated with treating each patient. This is based on the average cost required to treat that separation type at the national level.

For example, in Round 24, a single heart transplant patient separation accounts for 36.56 weighted separations. A colonoscopy, major complexity accounts for 1.24 of a weighted separation. This reflects the greater complexity of heart transplants.

If a jurisdiction's average cost per weighted separation is lower than the actual average, its mix of services provided to patients is more complex than the national average.

## Highest volume AR-DRGs for Round 24

AR-DRG	Description	Separations	ALOS	Average cost (\$)
C16	Lens interventions	59,826	1.0	3,176
F74	Chest pain	112,322	1.1	899
G48	Colonoscopy	92,106	1.1	2,565
L61	Haemodialysis	1,271,068	1.0	606
R63	Chemotherapy	272,429	1.0	2,126

## Highest volume AR-DRGs for Round 23

AR-DRG	Description	Separations	ALOS	Average cost (\$)
C16	Lens interventions	73,378	1.0	3,030
F74	Chest pain	130,705	1.2	1,066
G48	Colonoscopy	102,678	1.3	2,917
L61	Haemodialysis	1,201,517	1.0	606
R63	Chemotherapy	267,344	1.0	2,041

# Results across Australia



	R22	R23	R24
Average cost per sep (\$)	5,267	5,443	<b>5,825</b>
Average cost per weighted sep (\$)	4,737	4,894	<b>5,224</b>
Same-day (SD) as % of all seps	48%	48%	<b>49%</b>
Average length of stay (days)	2.86	2.86	<b>2.86</b>
Average length of stay (days) — exc. SD	4.57	4.61	<b>4.67</b>



	R22	R23	R24
Average cost per sep (\$)	4,282	4,505	<b>4,919</b>
Average cost per weighted sep (\$)	4,563	4,746	<b>5,104</b>
Same-day (SD) as % of all seps	61%	61%	<b>62%</b>
Average length of stay (days)	2.23	2.21	<b>2.22</b>
Average length of stay (days) — exc. SD	4.17	4.14	<b>4.19</b>



	R22	R23	R24
Average cost per sep (\$)	4,523	4,542	<b>4,879</b>
Average cost per weighted sep (\$)	4,720	4,799	<b>5,137</b>
Same-day (SD) as % of all seps	59%	60%	<b>61%</b>
Average length of stay (days)	2.09	2.06	<b>2.03</b>
Average length of stay (days) — exc. SD	3.64	3.67	<b>3.66</b>



	R22	R23	R24
Average cost per sep (\$)	6,032	6,345	<b>6,287</b>
Average cost per weighted sep (\$)	5,644	5,782	<b>5,778</b>
Same-day (SD) as % of all seps	51%	52%	<b>53%</b>
Average length of stay (days)	2.68	2.65	<b>2.58</b>
Average length of stay (days) — exc. SD	4.43	4.43	<b>4.35</b>



	R22	R23	R24
Average cost per sep (\$)	5,827	5,864	<b>5,792</b>
Average cost per weighted sep (\$)	5,821	5,859	<b>5,960</b>
Same-day (SD) as % of all seps	59%	60%	<b>62%</b>
Average length of stay (days)	2.16	2.15	<b>2.08</b>
Average length of stay (days) — exc. SD	3.85	3.89	<b>3.85</b>



	R22	R23	R24
Average cost per sep (\$)	5,772	5,940	<b>6,658</b>
Average cost per weighted sep (\$)	5,188	5,602	<b>6,432</b>
Same-day (SD) as % of all seps	54%	55%	<b>57%</b>
Average length of stay (days)	2.67	2.63	<b>2.61</b>
Average length of stay (days) — exc. SD	4.63	4.60	<b>4.73</b>



	R22	R23	R24
Average cost per sep (\$)	3,696	3,695	<b>3,821</b>
Average cost per weighted sep (\$)	6,231	6,518	<b>6,736</b>
Same-day (SD) as % of all seps	72%	73%	<b>73%</b>
Average length of stay (days)	1.93	1.89	<b>1.85</b>
Average length of stay (days) — exc. SD	4.26	4.27	<b>4.17</b>



	R22	R23	R24
Average cost per sep (\$)	5,319	5,690	<b>6,076</b>
Average cost per weighted sep (\$)	5,057	5,243	<b>5,704</b>
Same-day (SD) as % of all seps	54%	53%	<b>54%</b>
Average length of stay (days)	2.58	2.59	<b>2.63</b>
Average length of stay (days) — exc. SD	4.42	4.38	<b>4.57</b>



	R22	R23	R24
Average cost per sep (\$)	4,885	5,027	<b>5,335</b>
Average cost per weighted sep (\$)	4,885	5,027	<b>5,335</b>
Same-day (SD) as % of all seps	56%	57%	<b>58%</b>
Average length of stay (days)	2.40	2.38	<b>2.35</b>
Average length of stay (days) — exc. SD	4.19	4.21	<b>4.23</b>

# Subacute and non-acute care

The national expenditure on subacute and non-acute care patient activity was

**\$3.38 billion**

This represents **6.17 per cent** of total hospital expenditure reported in the NHCDC in Round 24.

**6.17%**

Round 23

**\$3.23 billion**

Round 22

**\$2.93 billion**

## Number of hospitals that submitted subacute and non-acute care cost data



**332**

Round 22



**337**

Round 23



**332**

Round 24



The national average cost per AN-SNAP class was

**\$15,373**

IHPA uses the Australian National Subacute and Non-Acute Patient Classification (AN-SNAP) system to classify subacute and non-acute care.

Round 23  
**\$13,974**

Round 22  
**\$13,393**

The subacute and non-acute care data contain detailed cost information for

**220,018**  
patient separations

**0.6%**

## National average cost per subacute care type

	R22	R23	R24
Psychogeriatric care	39,139	41,038	42,809
Geriatric evaluation and management	17,011	17,635	18,713
Rehabilitation care	16,004	16,974	18,822
Palliative care	6,367	7,167	7,556

## Results across Australia

NSW	R22	R23	R24
Total expenditure (\$)	836m	899m	<b>930m</b>
Total separations	82,289	84,253	<b>79,520</b>
Average cost per separation (\$)	10,159	10,669	<b>11,691</b>
Number of hospitals	91	93	<b>91</b>
Average length-of-stay (days)	9	10	<b>10</b>

VIC	R22	R23	R24
Total expenditure (\$)	762m	916m	<b>963m</b>
Total separations	53,550	62,061	<b>59,556</b>
Average cost per separation (\$)	14,223	14,768	<b>16,165</b>
Number of hospitals	61	62	<b>62</b>
Average length-of-stay (days)	16	15	<b>15</b>

QLD	R22	R23	R24
Total expenditure (\$)	679m	714m	<b>729m</b>
Total separations	48,229	49,566	<b>44,027</b>
Average cost per separation (\$)	14,081	14,395	<b>16,563</b>
Number of hospitals	103	102	<b>100</b>
Average length-of-stay (days)	10	10	<b>12</b>

SA	R22	R23	R24
Total expenditure (\$)	165m	198m	<b>221m</b>
Total separations	12,284	13,330	<b>14,309</b>
Average cost per separation (\$)	13,470	14,849	<b>15,422</b>
Number of hospitals	18	17	<b>17</b>
Average length-of-stay (days)	12	12	<b>13</b>

WA	R22	R23	R24
Total expenditure (\$)	311m	298m	<b>325m</b>
Total separations	11,918	11,847	<b>12,151</b>
Average cost per separation (\$)	26,059	25,123	<b>26,744</b>
Number of hospitals	31	33	<b>33</b>
Average length-of-stay (days)	17	17	<b>17</b>

TAS	R22	R23	R24
Total expenditure (\$)	63m	55m	<b>58m</b>
Total separations	3,180	3,530	<b>3,401</b>
Average cost per separation (\$)	19,845	15,460	<b>17,114</b>
Number of hospitals	21	21	<b>20</b>
Average length-of-stay (days)	17	16	<b>17</b>

NT	R22	R23	R24
Total expenditure (\$)	44m	64m	<b>64m</b>
Total separations	1,051	1,230	<b>1,911</b>
Average cost per separation (\$)	42,216	52,050	<b>33,248</b>
Number of hospitals	5	6	<b>6</b>
Average length-of-stay (days)	24	29	<b>17</b>

ACT	R22	R23	R24
Total expenditure (\$)	65m	90m	<b>93m</b>
Total separations	5,933	5,568	<b>5,143</b>
Average cost per separation (\$)	11,009	16,207	<b>18,161</b>
Number of hospitals	2	3	<b>3</b>
Average length-of-stay (days)	9	11	<b>14</b>

National	R22	R23	R24
Total expenditure (\$)	2,926m	3,233m	<b>3,382m</b>
Total separations	218,434	231,385	<b>220,018</b>
Average cost per separation (\$)	13,393	13,974	<b>15,373</b>
Number of hospitals	332	337	<b>332</b>
Average length-of-stay (days)	12	12	<b>12</b>

# Emergency department care

The national expenditure on emergency department patient activity was

## \$6.33 billion

This represents **11.5 per cent** of total hospital expenditure reported in the NHCDC in Round 24.

11.5%

Round 23

## \$5.99 billion

Round 22

## \$5.55 billion

## Number of hospitals that submitted emergency department care cost data



## 274

Round 22



## 276

Round 23



## 276

Round 24



The Round 24 average cost per emergency department presentation was

## \$775

Round 23  
**\$732**

Round 22  
**\$705**

The data contains detailed cost information for

## 8,172,976

emergency department presentations

20.6%

Taken together, emergency department presentations accounted for 20.6 per cent of all hospital patient activity reported to Round 24 of the NHCDC.

## Results across Australia

NSW	R22	R23	R24
Total expenditure (\$)	1,755m	1,854m	<b>1,969m</b>
Average cost per ED presentation (\$)	680	700	<b>766</b>
Average cost per admitted ED presentation (\$)	957	981	<b>1,058</b>
Average cost per non-admitted ED presentation (\$)	575	594	<b>659</b>
Per cent of ED presentations admitted to hospital (%)	27%	27%	<b>27%</b>

VIC	R22	R23	R24
Total expenditure (\$)	1,134m	1,255m	<b>1,368m</b>
Average cost per ED presentation (\$)	653	698	<b>714</b>
Average cost per admitted ED presentation (\$)	965	1,032	<b>1,121</b>
Average cost per non-admitted ED presentation (\$)	472	502	<b>511</b>
Per cent of ED presentations admitted to hospital (%)	37%	37%	<b>33%</b>

QLD	R22	R23	R24
Total expenditure (\$)	1,325m	1,441m	<b>1,440m</b>
Average cost per ED presentation (\$)	713	729	<b>740</b>
Average cost per admitted ED presentation (\$)	1,024	1,067	<b>1,088</b>
Average cost per non-admitted ED presentation (\$)	570	570	<b>573</b>
Per cent of ED presentations admitted to hospital (%)	31%	32%	<b>32%</b>

SA	R22	R23	R24
Total expenditure (\$)	371m	406m	<b>438m</b>
Average cost per ED presentation (\$)	741	787	<b>827</b>
Average cost per admitted ED presentation (\$)	953	1,046	<b>1,086</b>
Average cost per non-admitted ED presentation (\$)	639	667	<b>702</b>
Per cent of ED presentations admitted to hospital (%)	33%	32%	<b>33%</b>

WA	R22	R23	R24
Total expenditure (\$)	626m	656m	<b>689m</b>
Average cost per ED presentation (\$)	857	861	<b>922</b>
Average cost per admitted ED presentation (\$)	1,443	1,464	<b>1,499</b>
Average cost per non-admitted ED presentation (\$)	667	675	<b>741</b>
Per cent of ED presentations admitted to hospital (%)	25%	24%	<b>24%</b>

TAS	R22	R23	R24
Total expenditure (\$)	128m	134m	<b>156m</b>
Average cost per ED presentation (\$)	784	805	<b>1,012</b>
Average cost per admitted ED presentation (\$)	1,670	1,608	<b>1,896</b>
Average cost per non-admitted ED presentation (\$)	397	435	<b>659</b>
Per cent of ED presentations admitted to hospital (%)	30%	32%	<b>28%</b>

NT	R22	R23	R24
Total expenditure (\$)	106m	124m	<b>138m</b>
Average cost per ED presentation (\$)	665	753	<b>837</b>
Average cost per admitted ED presentation (\$)	908	1,009	<b>1,141</b>
Average cost per non-admitted ED presentation (\$)	532	613	<b>662</b>
Per cent of ED presentations admitted to hospital (%)	36%	35%	<b>37%</b>

ACT	R22	R23	R24
Total expenditure (\$)	110m	119m	<b>134m</b>
Average cost per ED presentation (\$)	744	799	<b>957</b>
Average cost per admitted ED presentation (\$)	1,249	1,414	<b>1,643</b>
Average cost per non-admitted ED presentation (\$)	517	521	<b>621</b>
Per cent of ED presentations admitted to hospital (%)	31%	31%	<b>33%</b>

National	R22	R23	R24
Total expenditure (\$)	5,554m	5,991m	<b>6,333m</b>
Average cost per ED presentation (\$)	705	732	<b>775</b>
Average cost per admitted ED presentation (\$)	1,030	1,076	<b>1,144</b>
Average cost per non-admitted ED presentation (\$)	561	579	<b>616</b>
Per cent of ED presentations admitted to hospital (%)	31%	31%	<b>30%</b>



# Non-admitted care

The national expenditure on non-admitted care patient activity was

**\$8.52 billion**

This represents **13.6 per cent** of total hospital expenditure reported in the NHCDC in Round 24.



Round 23  
**\$6.89 billion**

Round 22  
**\$6.82 billion**

## Number of hospitals that submitted non-admitted care cost data



The average cost per non-admitted care service event was

**\$350**

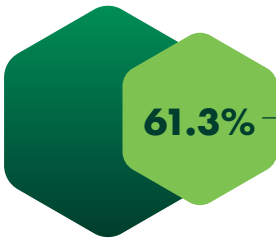


An increase of 5.4 per cent since Round 23

The data contains detailed cost information for

**24,318,538**

non-admitted care patient service events



Taken together, non-admitted care accounted for 61.3 per cent of all hospital patient activity reported to Round 24 of the NHCDC.

IHPA uses the Non-Admitted Services Classification (Tier 2) to classify non-admitted care. The classification is split between clinics where procedures are undertaken and clinics that are led by medical, nurse practitioner or allied health personnel.

## Description of Tier 2 groups and results from Round 24

Tier 2	Description	Service events	Total expenditure (\$m)	Average cost per service event
Procedures (10 series)	Clinics with health care professionals which provide procedural based health services — this includes treatment related to chemotherapy, renal dialysis, radiation therapy.	1,596,445	1,078	675
Medical consultation (20 series)	Clinics where medical consultation is provided by a medical or nurse practitioner — this includes treatment related to ophthalmology, orthopaedics, and obstetrics.	10,522,436	4,291	408
Diagnostic service (30 series)	Clinics that provide diagnostic services as inputs to the healthcare services of other non-admitted clinics — includes pathology, mammography screening.	580,406	132	228
Allied health or clinical nurse specialist intervention (40 series)	Clinics where there are allied health personnel or clinical nurse specialists providing the majority of services in a clinic — includes midwifery, physiotherapy, and primary health care.	10,811,434	2,741	254

This table excludes 807,817 service events with missing Tier 2 classifications.

# Results across Australia



	R22	R23	R24
Total expenditure (\$)	1,933m	1,863m	<b>2,202m</b>
Total service events	7,376,347	7,066,650	<b>7,717,128</b>
Average cost per service event (\$)	262	264	<b>285</b>
Average cost per medical consultation — 20 series (\$)	299	291	<b>321</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	190	187	<b>208</b>



	R22	R23	R24
Total expenditure (\$)	1,257m	966m	<b>1,684m</b>
Total service events	4,000,358	2,829,584	<b>4,872,486</b>
Average cost per service event (\$)	314	341	<b>346</b>
Average cost per medical consultation — 20 series (\$)	358	417	<b>415</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	221	229	<b>239</b>



	R22	R23	R24
Total expenditure (\$)	1,701m	1,938m	<b>2,335m</b>
Total service events	4,991,063	5,456,805	<b>6,074,761</b>
Average cost per service event (\$)	341	355	<b>384</b>
Average cost per medical consultation — 20 series (\$)	362	382	<b>399</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	273	281	<b>325</b>



	R22	R23	R24
Total expenditure (\$)	701m	778m	<b>857m</b>
Total service events	1,450,208	1,537,493	<b>1,699,229</b>
Average cost per service event (\$)	483	506	<b>504</b>
Average cost per medical consultation — 20 series (\$)	516	564	<b>601</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	214	220	<b>228</b>



	R22	R23	R24
Total expenditure (\$)	702m	759m	<b>817m</b>
Total service events	2,068,728	2,168,321	<b>2,255,748</b>
Average cost per service event (\$)	339	350	<b>362</b>
Average cost per medical consultation — 20 series (\$)	435	445	<b>469</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	238	234	<b>240</b>



	R22	R23	R24
Total expenditure (\$)	164m	207m	<b>215m</b>
Total service events	565,660	552,297	<b>564,802</b>
Average cost per service event (\$)	290	375	<b>380</b>
Average cost per medical consultation — 20 series (\$)	319	353	<b>402</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	242	277	<b>314</b>



	R22	R23	R24
Total expenditure (\$)	146m	152m	<b>158m</b>
Total service events	280,840	301,056	<b>311,963</b>
Average cost per service event (\$)	521	506	<b>508</b>
Average cost per medical consultation — 20 series (\$)	600	566	<b>598</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	293	286	<b>305</b>



	R22	R23	R24
Total expenditure (\$)	216m	226m	<b>248m</b>
Total service events	796,748	818,970	<b>822,421</b>
Average cost per service event (\$)	271	276	<b>301</b>
Average cost per medical consultation — 20 series (\$)	385	391	<b>421</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	201	199	<b>234</b>



	R22	R23	R24
Total expenditure (\$)	6,820m	6,890m	<b>8,516m</b>
Total service events	21,529,952	20,731,176	<b>24,318,538</b>
Average cost per service event (\$)	317	332	<b>350</b>
Average cost per medical consultation — 20 series (\$)	366	387	<b>408</b>
Average cost per allied health / clinical nurse intervention — 40 series (\$)	223	228	<b>254</b>



# Mental health care

The national expenditure on mental health care patient activity was

## \$3.78 billion

This represents **6.9 per cent** of total hospital expenditure reported in the NHCDC in Round 24.

6.9%

Round 23

## \$3.23 billion

Round 22

## \$2.40 billion

Mental health care is provided to patients in both admitted and community settings in Australia

The admitted setting includes consumers who are formally admitted for treatment in a general ward or a designated psychiatric unit in a general or a psychiatric hospital.

The community setting includes mental health care services delivered to consumers who are not admitted to an inpatient facility or reside in a residential mental health care facility.

IHPA reports mental health costs using the Australian Mental Health Care Classification.

## Number of hospitals that submitted mental health care cost data



## 234

Round 22



## 286

Round 23



## 306

Round 24

These hospitals were identified by the reported patient care types.



The national average cost per admitted mental health patient separation was

## \$19,255

The national average cost per community setting mental health care service event was

## \$2,612

## Mental health care results from Round 23 and Round 24

Mental health setting	Round 23				Round 24			
	Number of hospitals	Episodes	Phases	Total expenditure (\$m)	Number of hospitals	Episodes	Phases	Total expenditure (\$m)
Admitted mental health	222	44,338	92,302	2,473.4	169	45,427	72,936	2,279.1
Community mental health	123	82,387	111,488	696.2	173	22,332	445,207	1,221.1

This table excludes 163,399 episodes, which are unlinked in Round 23 and 242,634 episodes, which are ungroupable in Round 24.

## Further information

Access the complete Round 24 NHCDC report and tables online: [www.ihipa.gov.au/NHCDC](http://www.ihipa.gov.au/NHCDC)