The Independent Hospital Pricing Authority (IHPA) was established under the National Health Reform Act 2011 (Cwlth) to contribute to significant reforms to improve Australian public hospitals. A vital component of these reforms is the implementation of activity based funding for public hospital services.

Each financial year, IHPA releases the annual national efficient price and national efficient cost to determine the Commonwealth Government's contribution to public hospitals.

The funding is then distributed by the Administrator of National Health Funding Pool.



National efficient cost National efficient price The fixed cost is The variable cost is \$5,797 2<sup>.265</sup> \$5,850 Average cost of a Average cost of an admitted episode small rural hospital of care in a public hospital small rural **hospitals** Australian public hospitals receive a fixed and variable amount of funding based on location, size and receive funding based on their activity levels. type of services they provide. The national efficient price (NEP) underpins the The national efficient cost (NEC) is based on a implementation of activity based funding. The NEP aims to fixed-plus-variable structure, which was introduced in consultation with states and territories in 2020-21. determine the levels of Commonwealth funding for public hospital services and to provide a cost benchmark. The total modelled cost of a small rural hospital is the sum To determine the NEP, IHPA relies on a vast amount of cost of a fixed cost component and variable cost component. data at a patient level, provided by states and territories This model has a more sophisticated approach in calculating using the National Hospital Cost Data Collection. block funding to better reflect the changes in activity delivered in small rural hospitals, and it ensures there is no disincentive for states and territories to provide services in rural areas. An additional loading of 44.1 per cent is Every hospital admission is then allocated a national applied for very remote hospitals. weighted activity unit (NWAU). The NWAU includes 'price adjustments' to reflect legitimate and unavoidable variations in the cost of delivering services, such as whether a patient lives in a remote area or is a child. **Pricing and funding** The 'average' hospital service is worth one NWAU. More intensive and expensive activities are worth multiple for safety and quality NWAUs. Simpler and less expensive activities are worth fractions of an NWAU. All Australian governments signed a Heads of Agreement in 2016 that committed to improving Australians' health outcomes and decreasing Price of a public hospital service = avoidable demand for public hospital services. NWAU x the NEP for the financial year IHPA continues to further develop and implement For example, a hip replacement (minor complexity) has a

weight of 3.4152 NWAU which equates to \$19,798.

pricing for safety and quality into the funding of

public hospital services.

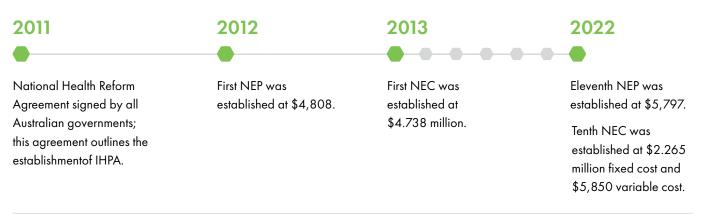
## Cost per national weighted activity unit



Cost per NWAU reduction in the rate of growth in costs since 2012–13, to a sustained growth rate of 2.5 per cent.

2006-07 2007-08 2008-09 2009-10 2010-11 2011-12 2012-13 2013-14 2014-15 2015-16 2016-17 2017-18 2018-19 2019-20

## Activity based funding timeline



## **Robust consultation process**

IHPA releases the <u>Pricing Framework for Australian Public Hospital Services</u> (Pricing Framework) before the release of NEP and NEC Determinations. This allows a range of stakeholders including all Australian governments, peak healthcare bodies, and the general public, to consider the principles and policies underpinning the Determinations, providing an extra level of transparency and accountability.



## **Further information**

To learn more about the Independent Hospital Pricing Authority, find us online, or get in touch using the details below.

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Independent Hospital Pricing Authority

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