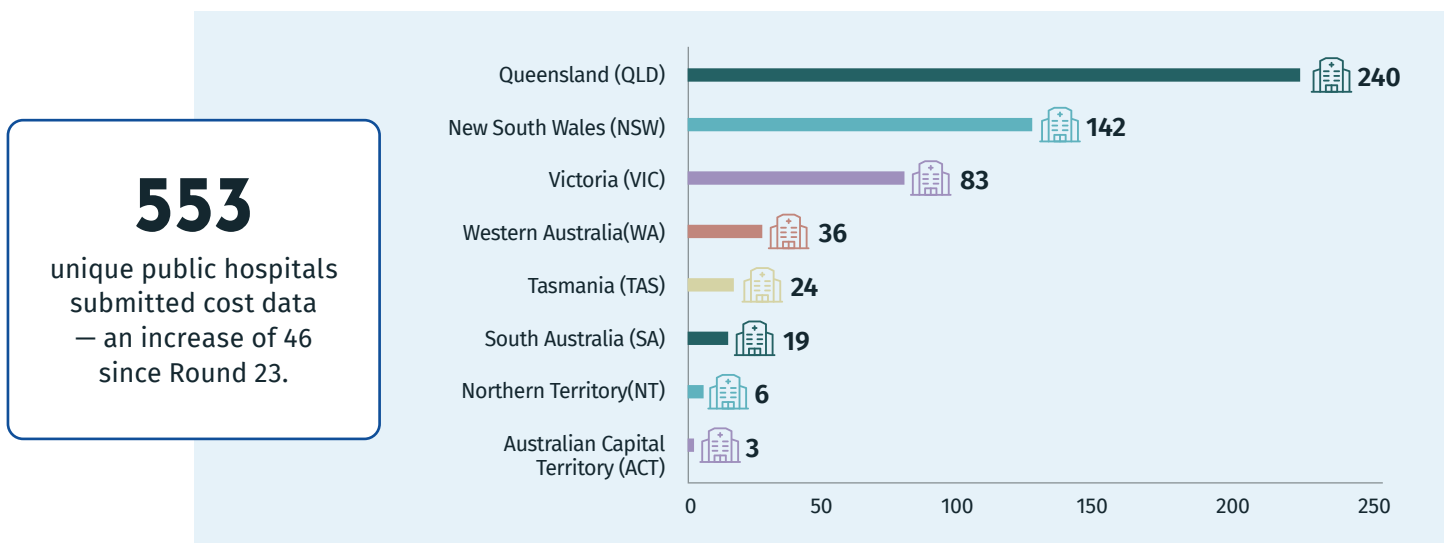
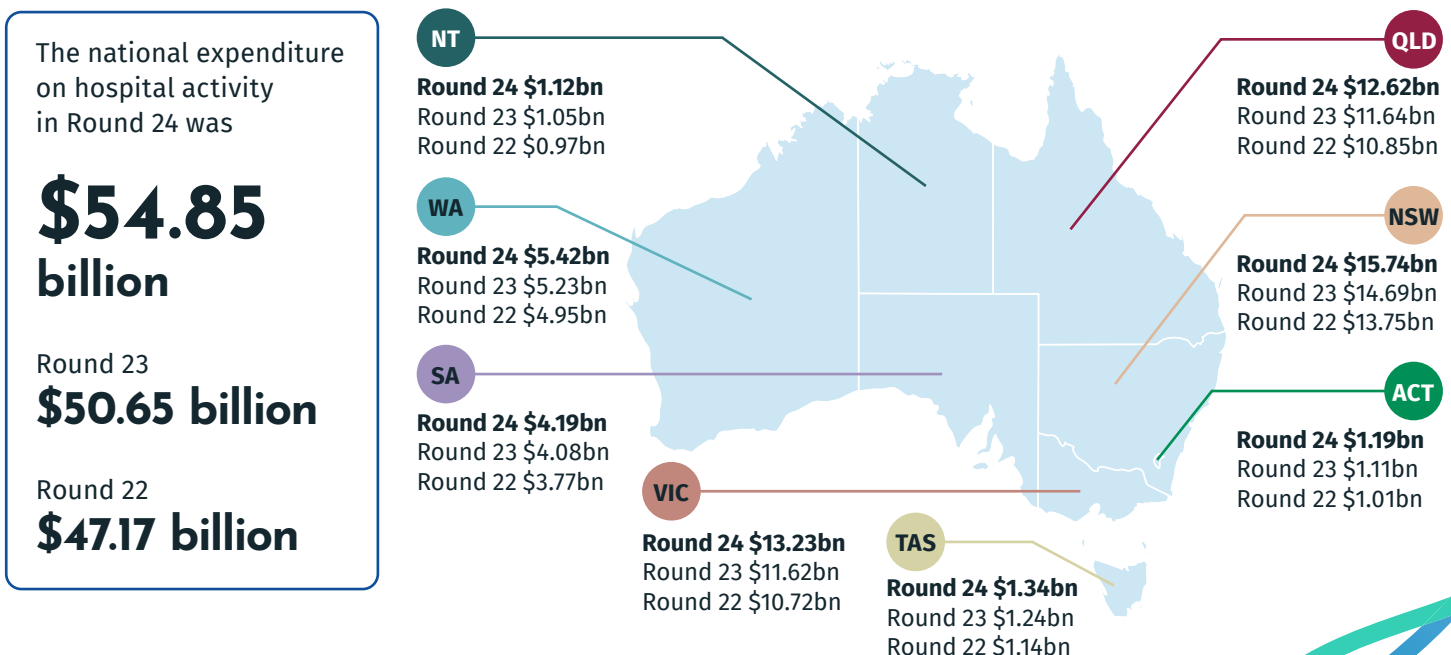


The Round 24 National Hospital Cost Data Collection (NHCDC) collected public hospital cost information for the 2019–20 financial year. It is important to note that the COVID-19 pandemic impacted the accuracy and completeness of public hospital expenditure and activity submitted to the Round 24 NHCDC. 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?



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.

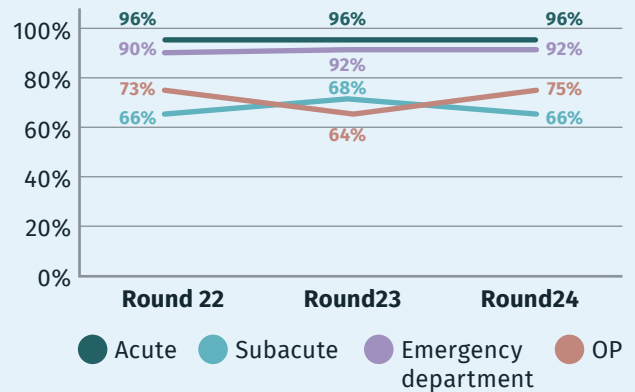
Costed activity

In addition to cost data submitted via the NHCDC, jurisdictions submit activity data to IHACPA for activity based funding purposes. When both activity and NHCDC cost data relating to a particular patient episode are submitted, IHACPA 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 IHACPA's activity data collection) had matching cost data.

Level of costed activity for Round 22-24



Cost buckets

IHACPA 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
Total (\$)	5,334.8	15,373.2	774.9	350.2	19,255.2	2,611.7

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 NHDC in Round 24.

Round 23

\$31.23 billion

Round 22

\$29.40 billion

Number of hospitals that submitted admitted acute care cost data



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 case 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 NHDC.

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, IHACPA 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	5,825
Average cost per weighted sep (\$)	4,737	4,894	5,224
Same-day (SD) as % of all seps	48%	48%	49%
Average length of stay (days)	2.86	2.86	2.86
Average length of stay (days) — exc. SD	4.57	4.61	4.67



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



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



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



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



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



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



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



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

Subacute and non-acute care

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

\$3.38 billion

6.17%

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

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**

IHACPA 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	930m
Total separations	82,289	84,253	79,520
Average cost per separation (\$)	10,159	10,669	11,691
Number of hospitals	91	93	91
Average length-of-stay (days)	9	10	10

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

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

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

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

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

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

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

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

Emergency department care

The national expenditure on emergency department patient activity was

\$6.33 billion

11.5%

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

Round 23

\$5.99 billion

Round 22

\$5.55 billion

Number of hospitals that submitted emergency department care cost data



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	1,969m
Average cost per ED presentation (\$)	680	700	766
Average cost per admitted ED presentation (\$)	957	981	1,058
Average cost per non-admitted ED presentation (\$)	575	594	659
Per cent of ED presentations admitted to hospital (%)	27%	27%	27%

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

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

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

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

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

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

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

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

Non-admitted care

The national expenditure on non-admitted care patient activity was

\$8.52 billion

15.5%

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

Round 23

\$6.89 billion

Round 22

\$6.82 billion

Number of hospitals that submitted non-admitted care cost data



315

Round 22



332

Round 23



362

Round 24



The average cost per non-admitted care service event was

\$350

Round 24
5.4% ↑

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

61.3%

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

IHACPA 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	2,202m
Total service events	7,376,347	7,066,650	7,717,128
Average cost per service event (\$)	262	264	285
Average cost per medical consultation – 20 series (\$)	299	291	321
Average cost per allied health / clinical nurse intervention – 40 series (\$)	190	187	208



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



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



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



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



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



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



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



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

Mental health care

The national expenditure on mental health care patient activity was

\$3.78 billion

6.9%

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

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.

IHACPA 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



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

To learn more about the Independent Health and Aged Care Pricing Authority get in touch with us via the details below.

+61 2 8215 1100 enquiries.ihacpa@ihacpa.gov.au www.ihacpa.gov.au



Independent Health and Aged Care Pricing Authority

Find us online to connect with us @IHACPA.

