

Pricing Framework, National Efficient Price and National Efficient Cost Determinations 2023-24

The Independent Health and Aged Care Pricing Authority (IHACPA) 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, IHACPA 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 Price

\$6,032

Average cost of an admitted episode of care in a public hospital



493 Australian Public Hospitals

receive funding based on their activity levels.

National Efficient Cost

The fixed cost is **\$2.169m** The variable cost is **\$5,984**

Million

Average cost of a small rural hospital



368 small rural hospitals

receive a fixed and variable amount of funding based on location, size and type of services they provide.

The **national efficient price** (NEP) underpins the implementation of activity based funding. The NEP aims to determine the levels of Commonwealth funding for public hospital services and to provide a cost benchmark.

To determine the NEP, IHACPA relies on a vast amount of cost data at a patient level, provided by states and territories using the [National Hospital Cost Data Collection](#).

Every hospital admission is then allocated a **national 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.

The 'average' hospital service is worth one NWAU. More intensive and expensive activities are worth multiple NWAUs. Simpler and less expensive activities are worth fractions of an NWAU.

Price of a public hospital service = NWAU x the NEP for the financial year

For example, a hip replacement (minor complexity) has a weight of 3.9330 NWAU which equates to \$23,724.

The **national efficient cost** (NEC) is based on a fixed-plus-variable structure, which was introduced in consultation with states and territories in 2020-21. The total modelled cost of a small rural hospital is the sum of a fixed cost component and variable cost component. This model has a more sophisticated approach in calculating 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 48.3 per cent is applied for very remote hospitals.

Pricing and funding for safety and quality

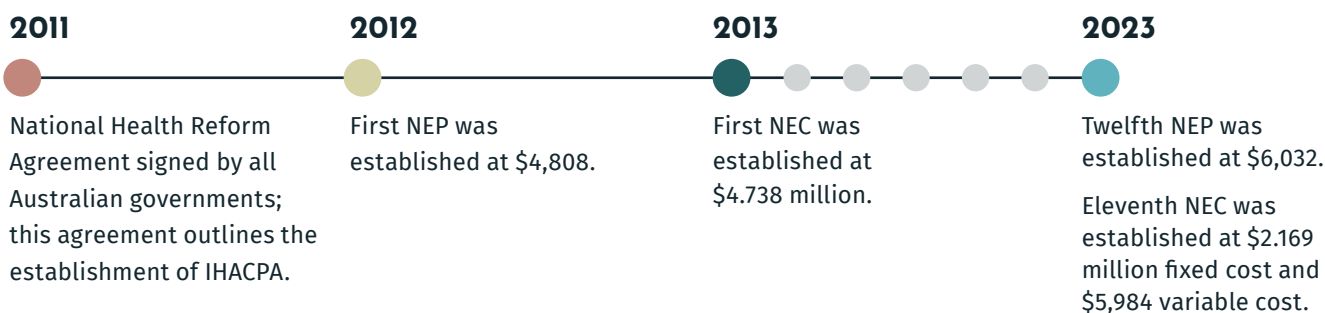
All Australian governments signed a [Heads of Agreement](#) in 2016 that committed to improving Australians' health outcomes and decreasing avoidable demand for public hospital services. IHACPA continues to further develop and implement pricing for safety and quality into the funding of public hospital services.

Cost per national weighted activity unit



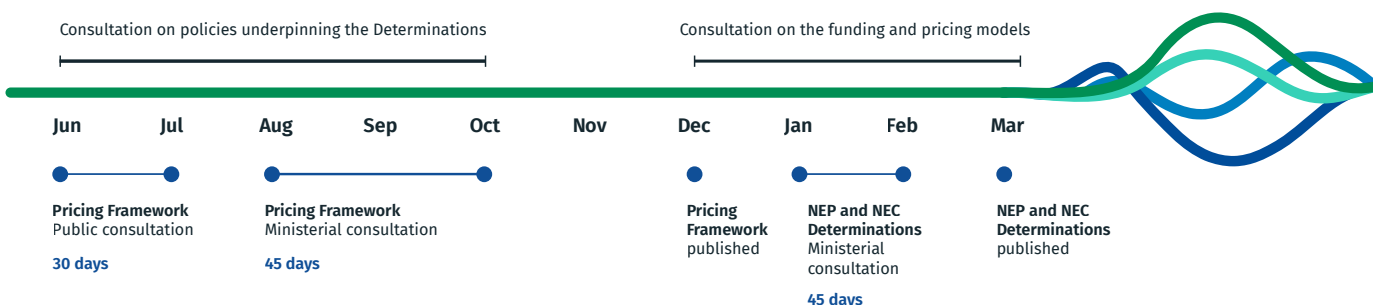
Cost per NWAU reduction in the rate of growth in costs since 2015-16, to a sustained growth rate of 2.7 per cent.

Activity based funding timeline



Robust consultation process

IHACPA releases the [Pricing Framework for Australian Public Hospital Services](#) (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 Health and Aged Care Pricing Authority, get in touch with us via the details below.

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Find us online to connect with us.

Independent Health and Aged Care Pricing Authority

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