

NHCDC Public Sector 2022–23



This National Hospital Cost Data Collection (NHCDC) collected public hospital, and health services, cost information for the 2022–23 financial year. It is important to note that the results presented this year use NHCDC records that were linked to activity data, and are in-scope for NHCDC reporting. This is different from the 2020–21 infographic, which included all submitted NHCDC records.

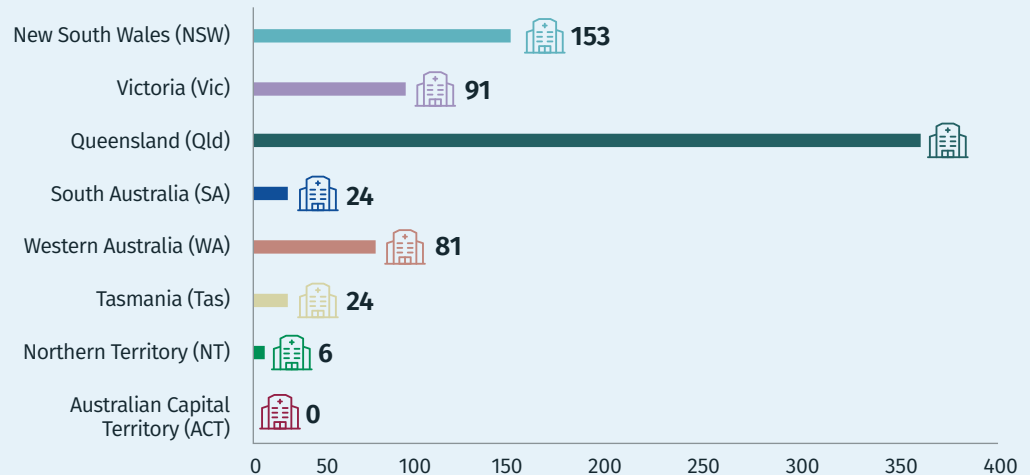
The NHCDC Public Sector Report contains a detailed summary of the NHCDC data. Data Quality Statements provided by each jurisdiction describe the methodology used to allocate costs to patient activity when preparing their NHCDC data. The figures below show the number of public hospitals and health services participating, including contracted care facilities. A contracted care activity occurs when a public institution, such as a public hospital, commissions another institution, such as a private hospital, to provide a service.

Note IHACPA did not receive NHCDC data from the Australian Capital Territory (ACT) for 2022–23.

Number of public hospitals (including health service providers) that submitted NHCDC data

738

unique health service providers submitted cost data, an increase of 71 from 2021–22.



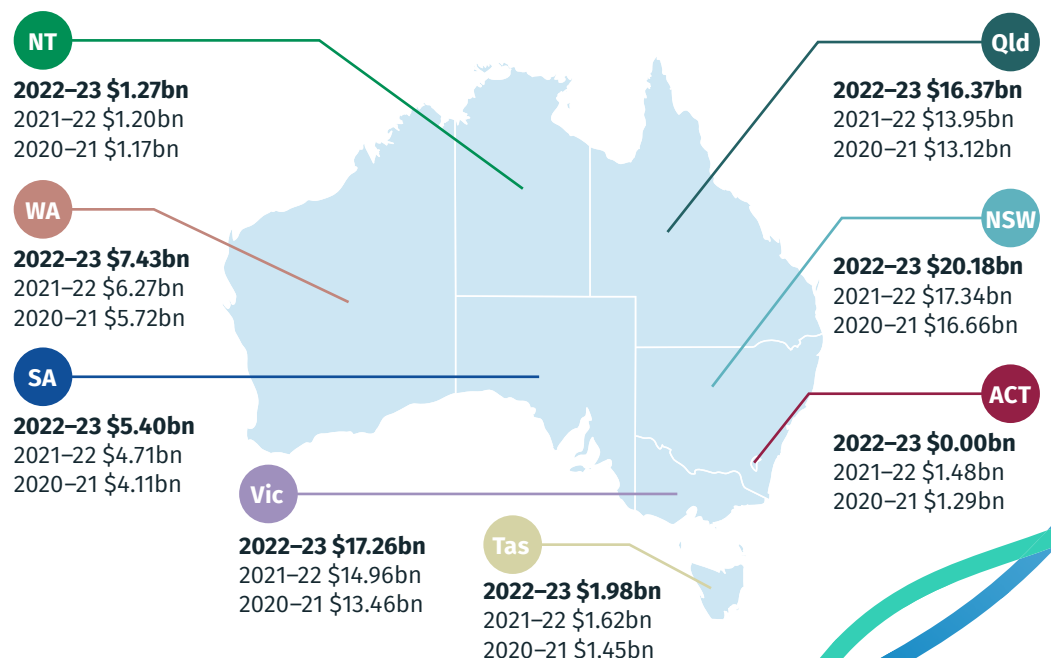
How much cost allocated to patient activity is submitted in the NHCDC?

The national expenditure on public sector activity in 2022–23 was

\$69.88 billion

2021–22
\$61.93 billion

2020–21
\$56.97 billion



Patient activity streams

Patient activity refers to services and procedures received by a patient in relation to their care. The NHCDC results are presented by the following 5 broad patient activity streams.



Admitted acute care

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



Non-admitted care

A non-admitted care **service event** represents a patient encounter that has not undergone the formal hospital admission process and does 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 **episodes and phases** 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 care **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 **phase or episode** represents the delivery of a mental health care service to a patient and can be provided either in an admitted or a community setting.

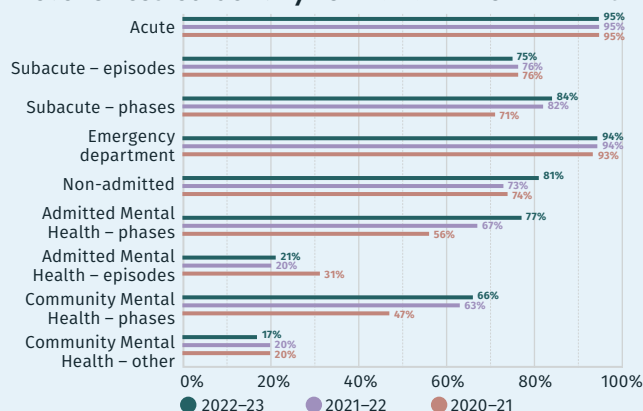
Costed activity

In addition to submitting cost data to 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 encounter 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'.

95.1% of the admitted acute care episodes, submitted through IHACPA's activity data collection, were linked to cost data.

Level of costed activity for 2020–21 to 2022–23



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 pathology department.

For 2022-23, the nursing cost bucket accounted for the biggest share of the costs for the admitted acute, admitted subacute and non-acute, admitted mental health, and community mental health activity streams. The medical cost bucket accounted for the biggest share of the costs for emergency department and non-admitted activity streams. The table below provides the proportion of costs by selected cost buckets.

Proportion of costs by selected cost buckets by activity stream

Cost bucket	Acute %	Subacute (%) – episodes	Subacute (%) – phases	Emergency Dept. (%)	Non-admitted (%)	Admitted mental health (%) – phases	Admitted mental health (%) – episodes	Community mental health (%) – phases	Community mental health (%) – other
Nursing	18.6	31.0	33.8	21.4	14.4	36.4	35.6	24.4	25.6
Medical	12.1	11.9	15.5	24.5	16.4	15.2	15.8	14.4	17.5
On-costs	8.4	9.5	9.5	8.6	7.9	10.3	9.0	12.6	8.9
Clinical Supplies	8.1	11.9	10.3	9.1	9.0	9.6	14.2	9.2	11.2
Non Clinical	6.3	10.5	11.1	8.9	9.6	11.6	9.8	13.3	13.1
Pathology	3.4	1.1	0.7	6.6	3.2	0.9	0.9	0.4	0.9
Allied Health	3.2	11.0	6.0	1.0	11.2	4.5	4.6	21.3	17.9
Prosthesis	2.5	0.0	0.1	0.1	0.2	0.0	0.0	0.0	0.0
Imaging	2.4	0.7	0.5	10.2	3.9	0.3	0.2	0.0	0.0
Total (%)	65.0%	87.6%	87.5%	90.4%	75.8%	88.9%	90.1%	95.6%	95.1%

Number of encounters per activity stream

	2020-21	2021-22	2022-23
Admitted acute separations	6,360,259	6,224,642	6,506,233
Subacute and non-acute episodes	148,487	151,706	164,415
Subacute phases	57,445	64,477	72,889
Emergency department presentations	8,362,442	8,270,175	8,574,940
Non-admitted service events	28,199,096	32,394,791	27,799,857
Admitted mental health phases	69,419	79,935	92,898
Admitted mental health episodes	45,096	27,918	29,812
Community mental phases	405,815	555,828	729,442
Community mental other	228,356	219,032	216,179

Total number of encounters for 2022-23

44,202,611

Admitted acute care

The admitted acute care expenditure reported in the NHCDC was

\$40.59 billion

The proportion of total hospital expenditure reported in the NHCDC in 2022–23.

58.1%

2021–22

\$36.16 billion

2020–21

\$33.80 billion

Number of hospitals that submitted admitted acute care cost data



414

2022–23



379

2021–22



375

2020–21



The national average cost per admitted acute care separation for 2022–23 was

\$6,239



The data contains detailed cost information for

6,506,233

admitted acute care separations

14.7%

Admitted acute care accounted for **14.7%** of all hospital patient activity reported in the NHCDC for 2022–23.

The separations were captured through the 801 different Australian Refined Diagnosis Related Groups (AR-DRGs) in Version 11.0 of the classification. The most commonly reported AR-DRGs were haemodialysis, pharmacotherapy for neoplastic disorders and colonoscopy, minor complexity.

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 2022–23, a single heart transplant patient separation accounts for **37.35 weighted separations**. A colonoscopy (minor complexity) accounts for **0.48 weighted separations**. This reflects the greater complexity of heart transplants.

If a jurisdiction's average cost per weighted separation is lower than its average cost per separation, that jurisdiction's activity is comprised of a higher proportion of complex AR-DRGs.

Highest volume AR-DRGs for 2022–23

AR-DRG	Description	Separations	Average length of stay	Average cost (\$)	Cost weight
L61Z	Haemodialysis	1,413,034	1.0	688	0.11
R63Z	Pharmacotherapy for Neoplastic Disorders	306,481	1.0	2,716	0.44
G48B	Colonoscopy, Minor Complexity	91,553	1.1	2,988	0.48
F74B	Chest Pain, Minor Complexity	87,852	1.1	1,004	0.16
C16Z	Lens Interventions	72,927	1.0	3,520	0.56

Highest volume AR-DRGs for 2021–22

AR-DRG	Description	Separations	Average length of stay	Average cost (\$)	Cost weight
L61Z	Haemodialysis	1,368,880	1.0	637	0.11
R63Z	Pharmacotherapy for Neoplastic Disorders	304,739	1.0	2,467	0.42
F74B	Chest Pain, Minor Complexity	106,232	1.1	903	0.16
G48B	Colonoscopy, Minor Complexity	91,034	1.1	2,824	0.49
O66C	Antenatal and Other Admissions related to Pregnancy, Childbirth and the Puerperium, Minor Complexity	67,464	1.1	1,161	0.20

National results for admitted acute care



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,164	5,812	6,038
Same-day (SD) as % of all seps	51%	50%	51%
Average length of stay (days)	2.83	3.13	3.07
Average length of stay (days) — exc. SD	4.72	5.25	5.22



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,389	5,838	6,299
Same-day (SD) as % of all seps	62%	63%	63%
Average length of stay (days)	2.25	2.26	2.32
Average length of stay (days) — exc. SD	4.32	4.46	4.58



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	4,884	5,134	5,631
Same-day (SD) as % of all seps	62%	61%	62%
Average length of stay (days)	2.00	2.11	2.11
Average length of stay (days) — exc. SD	3.66	3.89	3.90



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,551	6,044	6,745
Same-day (SD) as % of all seps	55%	56%	55%
Average length of stay (days)	2.52	2.59	2.74
Average length of stay (days) — exc. SD	4.34	4.58	4.86



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,923	6,563	7,243
Same-day (SD) as % of all seps	63%	64%	64%
Average length of stay (days)	2.07	2.14	2.19
Average length of stay (days) — exc. SD	3.92	4.17	4.32



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	6,271	6,888	7,906
Same-day (SD) as % of all seps	58%	62%	61%
Average length of stay (days)	2.63	2.48	2.59
Average length of stay (days) — exc. SD	4.84	4.86	5.12



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	7,052	7,692	7,760
Same-day (SD) as % of all seps	72%	73%	72%
Average length of stay (days)	1.84	1.93	1.94
Average length of stay (days) — exc. SD	4.05	4.47	4.42



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,666	6,578	—
Same-day (SD) as % of all seps	56%	57%	—
Average length of stay (days)	2.49	2.61	—
Average length of stay (days) — exc. SD	4.39	4.74	—



	2020-21	2021-22	2022-23
Average cost per weighted sep (\$)	5,315	5,809	6,239
Same-day (SD) as % of all seps	59%	59%	59%
Average length of stay (days)	2.34	2.44	2.47
Average length of stay (days) — exc. SD	4.26	4.55	4.62

Subacute and non-acute care

The subacute and non-acute expenditure reported in the NHCDC was

\$4.38 billion

This represents **6.3%** of total hospital expenditure reported in the NHCDC for 2022-23.

6.3%

2021-22

\$3.71 billion

2020-21

\$3.32 billion

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



368
2022-23



349
2021-22



340
2020-21



The national average cost per AN-SNAP separation in 2022-23 was

\$23,356 per episode and **\$7,456** per phase

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

2021-22
\$21,402 per episode and **\$7,238** per phase

2020-21
\$19,484 per episode and **\$7,419** per phase

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

164,415 episodes and **72,889** phases

0.5%

This represents **0.5%** of all hospital patient activity reported in the NHCDC for 2022-23.

National average cost per subacute care type

	2020-21	2021-22	2022-23
Psychogeriatric care	45,845	52,607	59,865
Geriatric evaluation and management	19,165	21,596	23,943
Rehabilitation care	19,603	23,312	22,163
Palliative care per episode	12,705	12,520	12,558
Palliative care per phase	7,419	7,258	7,456
Maintenance	19,161	18,159	25,226

National results

NSW	2020-21	2021-22	2022-23
Number of hospitals	88	88	93
Total expenditure (\$m)	920	924	1,150
Episodes	45,016	35,623	45,876
Average cost per episode (\$/ep)	16,504	20,916	20,489
ALOS per episode	14.0	16.6	16.8
Phases	30,691	28,082	35,010
Average cost per phase (\$/ph)	5,758	6,358	6,002
ALOS per phase	4.1	4.2	3.9

SA	2020-21	2021-22	2022-23
Number of hospitals	18	19	20
Total expenditure (\$m)	241	316	375
Episodes	11,840	13,363	16,261
Average cost per episode (\$/ep)	20,354	21,988	21,490
ALOS per episode	16.6	17.4	17.1
Phases	-	2,918	3,397
Average cost per phase (\$/ph)	-	7,446	7,495
ALOS per phase	-	4.5	4.4

NT	2020-21	2021-22	2022-23
Number of hospitals	6	6	6
Total expenditure (\$m)	55	68	60
Episodes	765	900	814
Average cost per episode (\$/ep)	59,995	63,268	60,459
ALOS per episode	34.7	39.4	36.6
Phases	1,257	1,152	1,120
Average cost per phase (\$/ph)	7,536	9,855	9,694
ALOS per phase	3.6	3.8	3.8

Vic	2020-21	2021-22	2022-23
Number of hospitals	63	66	65
Total expenditure (\$m)	828	917	1,104
Episodes	30,786	30,342	32,473
Average cost per episode (\$/ep)	23,333	26,252	29,676
ALOS per episode	20.7	22.5	24.2
Phases	14,969	15,741	15,824
Average cost per phase (\$/ph)	7,314	7,624	8,854
ALOS per phase	4.8	4.8	5.0

WA	2020-21	2021-22	2022-23
Number of hospitals	31	33	35
Total expenditure (\$m)	315	366	390
Episodes	12,396	11,914	12,383
Average cost per episode (\$/ep)	25,377	30,753	31,515
ALOS per episode	16.4	18.8	18.2
Phases	-	-	-
Average cost per phase (\$/ph)	-	-	-
ALOS per phase	-	-	-

ACT	2020-21	2021-22	2022-23
Number of hospitals	3	3	-
Total expenditure (\$m)	95	114	-
Episodes	5,247	4,731	-
Average cost per episode (\$/ep)	18,171	24,006	-
ALOS per episode	14.0	16.9	-
Phases	-	-	-
Average cost per phase (\$/ph)	-	-	-
ALOS per phase	-	-	-

Qld	2020-21	2021-22	2022-23
Number of hospitals	110	113	128
Total expenditure (\$m)	803	943	1,210
Episodes	39,850	52,240	53,214
Average cost per episode (\$/ep)	17,006	15,525	19,885
ALOS per episode	12.6	12.0	13.1
Phases	9,902	15,871	16,822
Average cost per phase (\$/ph)	12,686	8,317	9,005
ALOS per phase	5.6	4.9	5.0

Tas	2020-21	2021-22	2022-23
Number of hospitals	21	21	21
Total expenditure (\$m)	62	68	95
Episodes	2,587	2,593	3,394
Average cost per episode (\$/ep)	22,155	24,478	26,315
ALOS per episode	20.7	22.9	20.9
Phases	626	713	716
Average cost per phase (\$/ph)	7,810	6,050	7,538
ALOS per phase	4.6	4.4	3.5

National	2020-21	2021-22	2022-23
Number of hospitals	340	349	368
Total expenditure (\$m)	3,319	3,715	4,383
Episodes	148,487	151,706	164,415
Average cost per episode (\$/ep)	19,484	21,402	23,356
ALOS per episode	15.6	16.7	17.4
Phases	57,445	64,477	72,889
Average cost per phase (\$/ph)	7,419	7,258	7,456
ALOS per phase	4.5	4.5	4.4

Emergency department care

The emergency department expenditure reported in the NHCDC was

\$8.40 billion

This represents **12.0%** of total hospital expenditure reported in the NHCDC for 2022–23.

12.0%

2021–22

\$7.37 billion

2020–21

\$6.61 billion

Number of hospitals that submitted emergency department care cost data



275

2022–23



261

2021–22



263

2020–21



The national average cost per emergency department presentation in 2022–23 was

\$980

2021–22
\$891

2020–21
\$790

The data contains detailed cost information for

8,574,940

emergency department presentations

19.4%

Emergency department care accounted for **19.4%** of all hospital patient activity reported in the NHCDC for 2022–23.

National results

NSW	2020–21	2021–22	2022–23
Total expenditure (\$m)	2,012	2,234	2,597
Avg cost per ED presentation (\$)	798	907	953
Avg cost per admitted ED presentation (\$)	1,107	1,318	1,420
Avg cost per non-admitted ED presentation (\$)	688	775	797
% of ED presentations admitted to hospital	26%	24%	25%

Vic	2020–21	2021–22	2022–23
Total expenditure (\$m)	1,441	1,671	1,912
Avg cost per ED presentation (\$)	846	919	1,022
Avg cost per admitted ED presentation (\$)	1,235	1,375	1,551
Avg cost per non-admitted ED presentation (\$)	618	682	742
% of ED presentations admitted to hospital	37%	34%	35%

Qld	2020–21	2021–22	2022–23
Total expenditure (\$m)	1,524	1,625	1,929
Avg cost per ED presentation (\$)	663	751	858
Avg cost per admitted ED presentation (\$)	1,032	1,123	1,300
Avg cost per non-admitted ED presentation (\$)	524	600	680
% of ED presentations admitted to hospital	27%	29%	29%

SA	2020–21	2021–22	2022–23
Total expenditure (\$m)	488	518	602
Avg cost per ED presentation (\$)	846	905	1,007
Avg cost per admitted ED presentation (\$)	1,210	1,351	1,505
Avg cost per non-admitted ED presentation (\$)	679	713	815
% of ED presentations admitted to hospital	32%	30%	28%

WA	2020–21	2021–22	2022–23
Total expenditure (\$m)	690	806	928
Avg cost per ED presentation (\$)	904	1,053	1,197
Avg cost per admitted ED presentation (\$)	1,466	1,684	1,875
Avg cost per non-admitted ED presentation (\$)	731	866	985
% of ED presentations admitted to hospital	24%	23%	24%

Tas	2020–21	2021–22	2022–23
Total expenditure (\$m)	168	198	239
Avg cost per ED presentation (\$)	989	1,141	1,373
Avg cost per admitted ED presentation (\$)	1,702	1,928	2,317
Avg cost per non-admitted ED presentation (\$)	729	831	979
% of ED presentations admitted to hospital	27%	28%	29%

NT	2020–21	2021–22	2022–23
Total expenditure (\$m)	167	171	193
Avg cost per ED presentation (\$)	939	998	1,063
Avg cost per admitted ED presentation (\$)	1,458	1,568	1,905
Avg cost per non-admitted ED presentation (\$)	677	759	672
% of ED presentations admitted to hospital	34%	30%	32%

ACT	2020–21	2021–22	2022–23
Total expenditure (\$m)	118	144	–
Avg cost per ED presentation (\$)	767	1,006	–
Avg cost per admitted ED presentation (\$)	1,188	1,628	–
Avg cost per non-admitted ED presentation (\$)	550	717	–
% of ED presentations admitted to hospital	34%	32%	–

National	2020–21	2021–22	2022–23
Total expenditure (\$m)	6,608	7,367	8,401
Avg cost per ED presentation (\$)	790	891	980
Avg cost per admitted ED presentation (\$)	1,176	1,335	1,494
Avg cost per non-admitted ED presentation (\$)	631	716	776
% of ED presentations admitted to hospital	29%	28%	28%

Non-admitted care

The non-admitted expenditure reported in the NHCDC was

\$11.19 billion

This represents **16.0%** of total hospital expenditure reported in the NHCDC for 2022–23.

16.0%

2021–22

\$10.50 billion

2020–21

\$9.63 billion

Number of hospitals that submitted non-admitted care cost data



439

2022–23



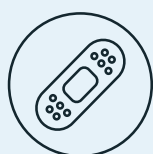
421

2021–22



407

2020–21



The national average cost per non-admitted care service event in 2022–23 was

\$403

2021–22
\$324

2020–21
\$341

The data contains detailed cost information for

27,799,857

non-admitted patient service events

62.9%

Non-admitted care accounted for **62.9%** of all hospital patient activity reported in the NHCDC for 2022–23.

IHACPA uses the Tier 2 Non-Admitted Services Classification (Tier 2) to classify non-admitted care. Tier 2 categorises a hospital's non-admitted services into classes based on the nature of the service provided and the type of clinician providing the service.

Tier 2 results from 2022–23

Tier 2	Description	Service events	Total expenditure (\$m)	Average cost per service event (\$)
Procedures (10 series)	Clinics with healthcare professionals that provide procedural based health services, which include treatment related to chemotherapy, renal dialysis and radiation therapy.	1,556,074	1,375	884
Medical consultation (20 series)	Clinics where medical consultation is provided by a medical or nurse practitioner, which includes treatment related to ophthalmology, orthopaedics, and obstetrics.	11,760,618	5,660	481
Diagnostic service (30 series)	Clinics that provide diagnostic services as inputs to the healthcare services of other non-admitted clinics, which includes pathology and mammography screening.	322,460	121	377
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, which includes midwifery, physiotherapy, and primary healthcare.	14,160,705	4,038	285

National results for non-admitted care



	2020-21	2021-22	2022-23
Total expenditure (\$m)	3,036	3,242	3,577
Total service events	10,363,280	9,923,216	10,329,842
Average cost per service event (\$)	293	327	346
Average cost per medical consultation – 20 series (\$)	371	399	435
Average cost per allied health / clinical nurse intervention – 40 series (\$)	225	247	248



	2020-21	2021-22	2022-23
Total expenditure (\$m)	1,610	1,787	2,013
Total service events	4,393,960	4,726,182	4,962,830
Average cost per service event (\$)	366	378	406
Average cost per medical consultation – 20 series (\$)	427	458	497
Average cost per allied health / clinical nurse intervention – 40 series (\$)	267	261	285



	2020-21	2021-22	2022-23
Total expenditure (\$m)	2,463	2,714	3,066
Total service events	6,774,890	8,554,330	6,998,983
Average cost per service event (\$)	364	317	438
Average cost per medical consultation – 20 series (\$)	393	426	462
Average cost per allied health / clinical nurse intervention – 40 series (\$)	327	335	346



	2020-21	2021-22	2022-23
Total expenditure (\$m)	897	1,009	1,011
Total service events	1,960,074	3,534,331	1,862,756
Average cost per service event (\$)	458	285	543
Average cost per medical consultation – 20 series (\$)	579	592	629
Average cost per allied health / clinical nurse intervention – 40 series (\$)	203	198	257



	2020-21	2021-22	2022-23
Total expenditure (\$m)	902	1,015	1,096
Total service events	2,683,334	2,829,078	2,673,077
Average cost per service event (\$)	336	359	410
Average cost per medical consultation – 20 series (\$)	428	468	511
Average cost per allied health / clinical nurse intervention – 40 series (\$)	239	252	298



	2020-21	2021-22	2022-23
Total expenditure (\$m)	269	235	268
Total service events	699,461	835,257	660,413
Average cost per service event (\$)	384	282	406
Average cost per medical consultation – 20 series (\$)	624	417	450
Average cost per allied health / clinical nurse intervention – 40 series (\$)	296	306	342



	2020-21	2021-22	2022-23
Total expenditure (\$m)	173	162	162
Total service events	357,560	306,629	311,956
Average cost per service event (\$)	483	527	521
Average cost per medical consultation – 20 series (\$)	538	593	594
Average cost per allied health / clinical nurse intervention – 40 series (\$)	370	376	347



	2020-21	2021-22	2022-23
Total expenditure (\$m)	277	341	–
Total service events	966,537	1,685,768	–
Average cost per service event (\$)	287	202	–
Average cost per medical consultation – 20 series (\$)	448	433	–
Average cost per allied health / clinical nurse intervention – 40 series (\$)	240	316	–



	2020-21	2021-22	2022-23
Total expenditure (\$m)	9,627	10,504	11,194
Total service events	28,199,096	32,394,791	27,799,857
Average cost per service event (\$)	341	324	403
Average cost per medical consultation – 20 series (\$)	422	446	481
Average cost per allied health / clinical nurse intervention – 40 series (\$)	262	270	285

Mental health care

The mental health expenditure reported in the NHCDC was

\$5.30 billion

This represents **7.6%** of total hospital expenditure reported in the NHCDC for 2022–23.

7.6%

2021–22

\$4.17 billion

2020–21

\$3.56 billion



Mental health care is provided to patients in both admitted and community settings. IHACPA reports admitted mental health costs using the Australian Mental Health Care Classification (AMHCC) and the AR-DRG classification.

Community mental health costs are reported at the phase level using the AMHCC. However, when costed activity cannot be split into single phases these results are described below as “Other”.

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.

Number of hospitals that submitted **admitted mental health** care phase data



2022–23	2021–22	2020–21
122	106	107
phases	phases	phases

The national average cost per admitted mental health patient in 2022–23 was **\$25,720 per phase** and **\$20,975 per episode**.

Number of hospitals that submitted **admitted mental health** care episode data



2022–23	2021–22	2020–21
136	133	140
episodes	episodes	episodes

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.

Number of services that submitted **community mental health** care phase data



2022–23	2021–22	2020–21
223	208	198
phases	phases	phases

The national average cost per community mental health patient phase in 2022–23 was **\$2,273 per phase**.

Number of services that submitted **community mental health** care episode data



2022–23	2021–22	2020–21
178	116	109
other	other	other

Mental health care summary, 2021–22 to 2022–23

Mental health setting	2021–22			2022–23		
	Phases	Episodes/Other	Total expenditure (\$m)	Phases	Episodes/Other	Total expenditure (\$m)
Admitted mental health	79,935	27,918	2,577	92,898	29,812	3,015
Community mental health	555,828	219,032	1,595	729,442	216,179	2,271

Further information

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

(02) 8215 1100 enquiries.ihacpa@ihacpa.gov.au ihacpa.gov.au

Find us online to connect with us.



Independent Health and Aged Care Pricing Authority



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