

Independent Hospital Pricing Authority



IHPA

**National Hospital Cost
Data Collection
Australian Public
Hospitals Cost Report
2010-2011, Round 15**

National Hospital Cost Data Collection - Cost Report - Round 15

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Executive summary

The National Health Reform Act 2011 established the Independent Hospital Pricing Authority (IHPA) as part of the National Health Reform agenda. The key purpose of IHPA is to promote improved efficiency in, and access to, public hospital services through setting the National Efficient Price (NEP) and levels of block funding for hospital services. The National Hospital Cost Data Collection (NHCDC) is the primary data collection used to develop the NEP.

This Cost Report 2010-11 (Round 15) is IHPA's first cost report and continues in number sequencing from the previous reports published. Previous NHCDC cost reports can be found on the IHPA web site.

The Round 15 NHCDC results include data from a sample of Australian public hospitals for the financial year 2010-11. The number of participating hospitals has increased with the addition of 72 hospitals bringing the Round 15 sample to 352 hospitals. This cost report aims to provide a number of comparative statistics on the various types of patients and their associated costs treated in public hospitals in 2011-12.

The average costs for Round 15 have increased from Round 14. Increases to note are:

- the actual average admitted acute cost per weighted separation has increased from \$4,426 to \$4,676 reflecting a change of 3.39%
- the average emergency department cost per presentation has increased from \$479 to \$496, a change of 3.69%
- the average outpatient cost per service event has increased from \$287 to \$322, a change of 12.2% (this represents data at Tier 2 and aggregate levels)

Average costs for the new sub-acute care classification 'AN-SNAP' have not been published due to the small sample size. IHPA will undertake development work for the AN-SNAP classification in 2013 to ensure future samples are more robust.

Readers of the report are reminded that the results published should not be compared to the NEP. The NEP includes a series of adjustments to the NHCDC results to account for variations in the cost of delivering services, based on factors such as location, indigenous status and paediatrics. Further information about the NEP adjustments can be found on the [IHPA web site](http://www.ihipa.gov.au) (www.ihipa.gov.au).

Lastly, it is worth noting that the NHCDC has undergone significant developments over the past few years and therefore the Pricing Authority has recommended a complete review. The review was carried out in early 2013 and will be published shortly on the IHPA website.

1. Introduction

1.1 Background

In 1996, the Commonwealth Government established the National Hospital Cost Data Collection (NHCDC). Initially, the NHCDC was required to provide retrospective, detailed, national cost weights for admitted acute patient services (based on data under the Australian Refined Diagnosis Related Groups (AR-DRG classification), and only summary information on other patient services such as subacute, emergency departments and outpatients.

The NHCDC moves from a voluntary cost data collection that was largely focused on the production of acute cost weights to the primary data collection to develop the national efficient price (NEP) for all public hospital services e.g. admitted acute, subacute, emergency departments and outpatient clinics.

Since the announcement of ABF there have been many developments to improve the consistency and comparability of state and territory NHCDC processes. Round 15 has shown some significant improvements in the processing and treatment of cost data through all levels of the NHCDC process.

1.2 Objectives of the NHCDC

The primary objective of the NHCDC is to provide all governments and the health care industry with a nationally consistent method of costing all types of hospital activity and publishing meaningful results. This is an essential pre-requisite for the development of ABF funding models.

The current goals of the NHCDC are to:

- produce robust estimates of hospital costs and casemix relativities
- provide continual refinement in the costing of hospital products
- provide a platform for inter- and intra-state comparison of hospital costs
- promote a framework for national hospital costing standards
- encourage hospitals to examine their cost structures and produce costing information
- develop an effective hospital costing infrastructure at Commonwealth, state and local levels
- provide data to inform the ongoing refinement of casemix classifications

1.3 Data quality issues affecting the results

1. Work-in-progress

During Round 15, there were different practises for the allocation and/or reporting of 'work-in-progress' patients across jurisdictions. These differences may impact on the comparability and accuracy of jurisdictional submissions. As a result the data only includes admitted and discharged patients within the 2010-11 financial year. IHPA is working with the jurisdictions to improve the consistency of treatment of work-in-progress for the Round 16 collection.

2. Teaching, Training and Research (TTR)

There is currently not an agreed national definition for TTR, so whilst some jurisdictions have complied with the Australian Hospital Patient Costing Standards (AHPCS), others have chosen not to change the reporting of these products until such time as there are nationally agreed definitions. TTR development work will commence in 2013.

3. Small samples for outpatients and subacute patients

The majority of jurisdictions have attempted to provide patient level cost data for the subacute classification 'AN-SNAP' and the outpatients classification 'NHCD Tier 2 Clinics' for Round 14 and 15 respectively. However regardless of best efforts the data coverage was lower than ideal and exhibited wide variations. To some extent the varying results were expected given the infancy of the two classifications. For the ongoing development of the NEP it is critical to have a robust cost dataset for these services and therefore IHPA will undertake development work for these classifications in 2013.

4. Blood Costs

The allocation of blood costs directly to patients varies across jurisdictions in that the majority of jurisdictions hold the expense of blood products at the state level. Version 2.0 AHPCS require hospitals to allocate blood costs and IHPA is facilitating improvement in this area.

Some jurisdictions have or are in the process of redirecting expenses back to hospitals so that costs can be allocated directly to patients as specified in the AHPCS.

5. Depreciation

There continues to be variations across hospitals for the methodologies used to allocate depreciation expenses. Round 16 should see this issue resolved with implementation of the new depreciation standards in Version 2.0 AHPCS.

6. Other impacts of implementation of AHPCS

Most jurisdictions implemented the AHPCS for the first time in Round 14, resulting in changes in cost allocation methodologies, therefore costs shifts will be observed between cost buckets. This should be considered when comparing Round 14 and 15 data with previous years.

1.4 Independent financial review

KPMG were engaged to conduct an assessment of the Round 15 submissions, focusing on accuracy, completeness and compliance to the Australian Hospital Costing standards (AHPCS). KPMG performed the independent financial review of the costing processes from a sample of participating Round 15 NHCD (2010/11) state and territory hospitals.

1.5 Release notes and confidentiality

To ensure hospital and patient confidentiality is maintained, IHPA has taken the following actions:

- Where a DRG is based on less than five separations, the figures have been replaced by asterisks (*****)
- If the number of contributing hospitals for a particular DRG is less than three, the figures have been replaced by dashes (-----) and
- Where data cannot be published for confidentiality reasons, the figures have been replaced with (np)

Other considerations:

- Where data has not been submitted, the figures have been replaced with (na) and
- Where a particular peer grouping is not relevant for a jurisdiction, the figures have been replaced with (nr)

2. Round 15 (2010-2011) summary

The public hospitals that participated in the NHCDC ('the sample') provide detailed costing and activity data for aggregation into the national cost weights and associated tables. In Round 15, there was a sample of 352 public hospitals (patient costed and cost modelled sites) that participated.

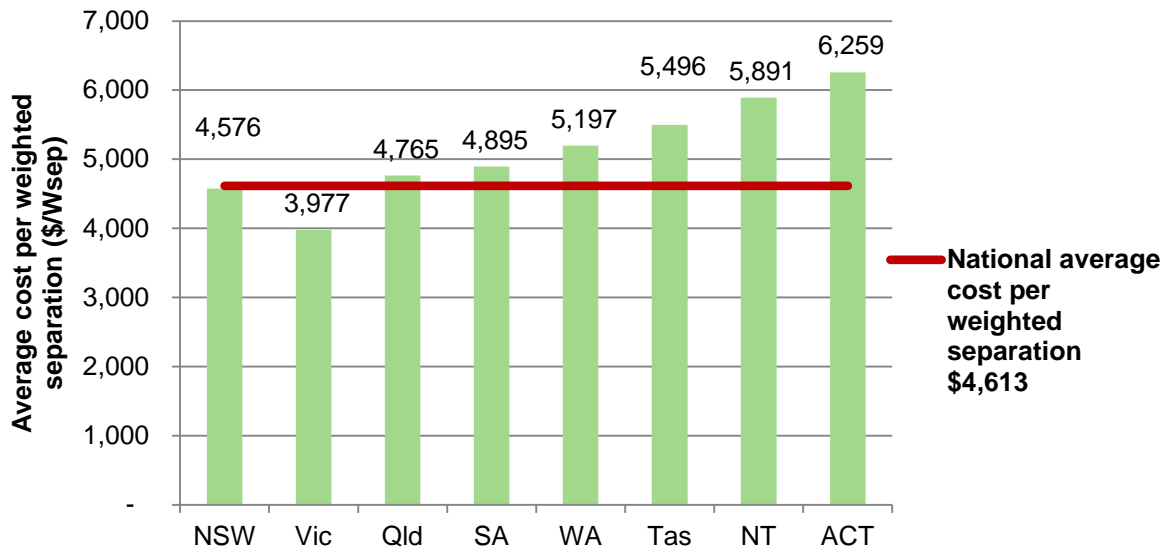
Round 15 results have been reported in the following classifications:

- Admitted acute data – Australian Refined Diagnosis Related Groups (AR-DRG) Version 6.0x
- Emergency department data patient level - Urgency Related Groups (URGs) V1.2
- Emergency department data aggregate level – Urgency Disposition Groups (UDGs) V1.2
- Outpatient Tier 2 clinics patient level – Outpatient Tier 2 Classification V1.2
- Outpatient activity and costs at the aggregate level
- Subacute – care types – AN-SNAP V1 and AN-SNAP V2

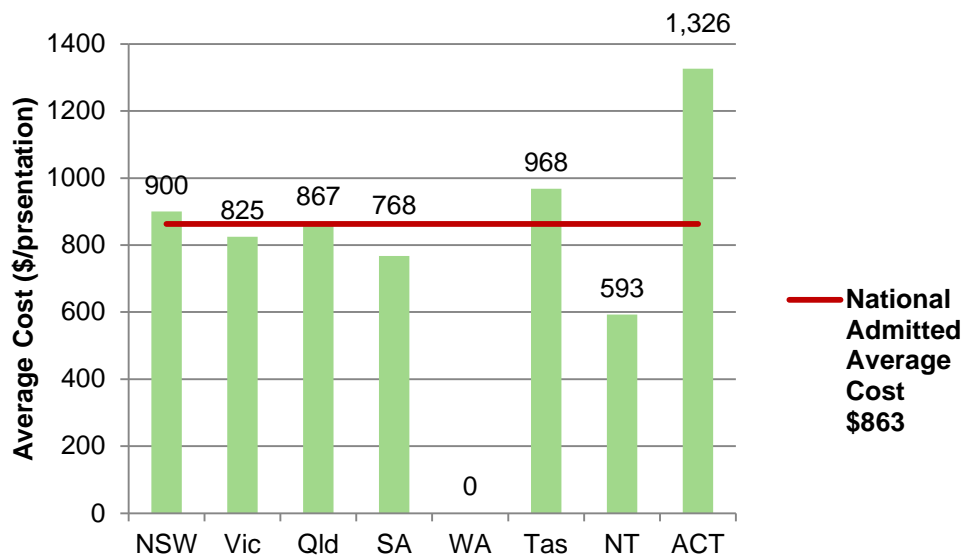
2.1 The Australian public hospital average cost

The national and jurisdictional average cost for the three major products, Admitted acute AR-DRG 6.0x, URG emergency department (admitted and non-admitted) and outpatient Tier 2 clinics are shown below in graphs 1 to 4.

Graph 1: Admitted acute AR-DRG 6.0x estimated average cost per weighted separation



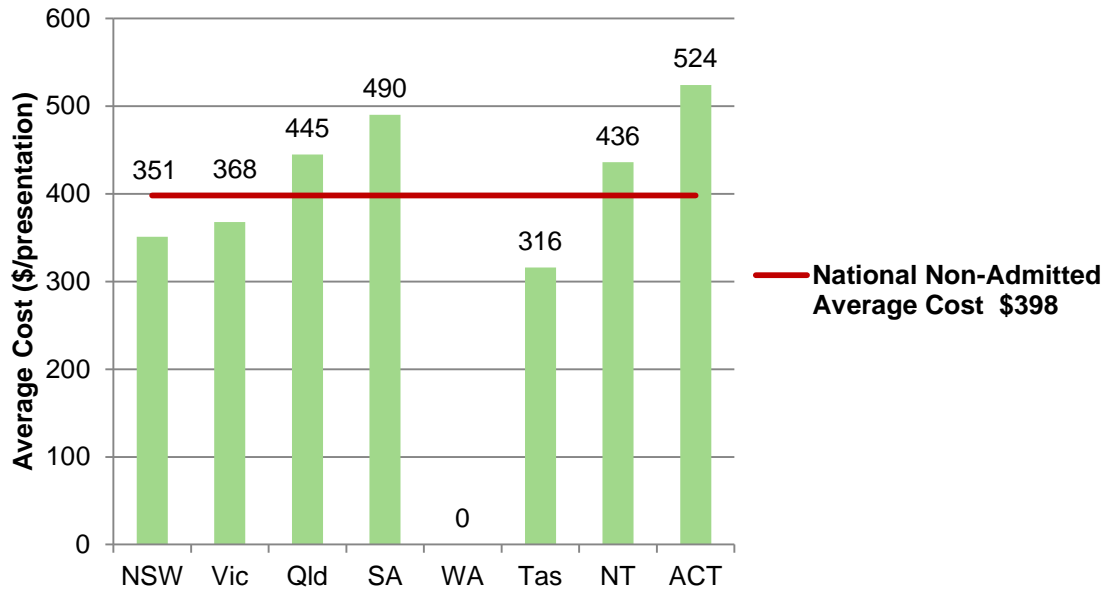
Graph 2: Emergency department admitted average cost per presentation



Note:

- The graph above includes URG data only
- WA did not submit URG data

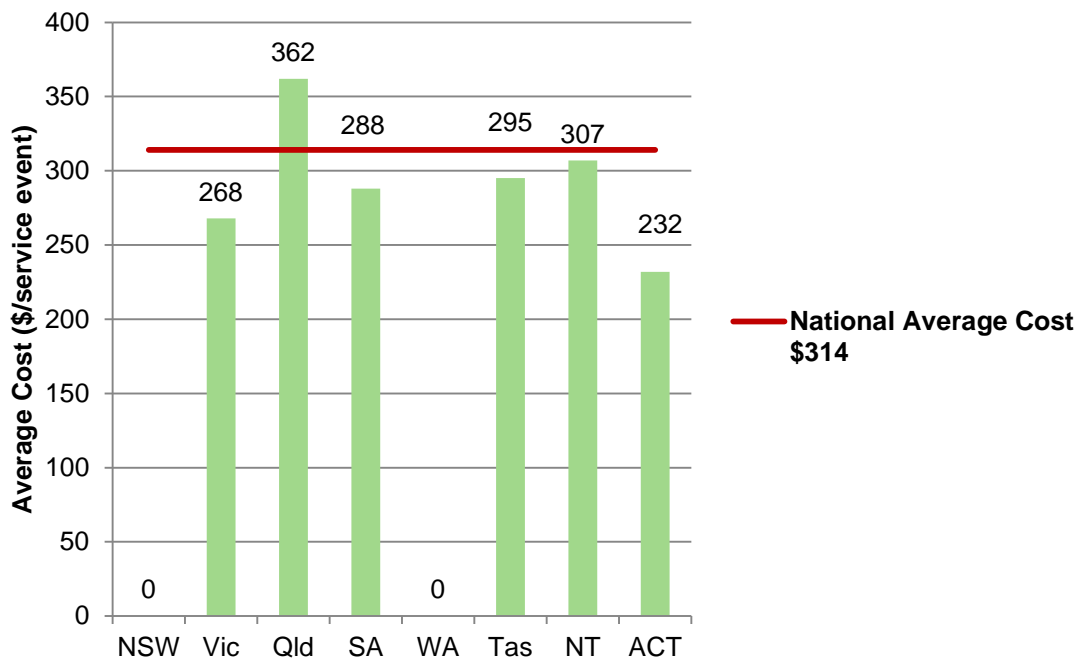
Graph 3: Emergency department non-admitted average cost per presentation



Note:

- The graph above includes URG data only
- WA did not submit URG data

Graph 4: Outpatients Tier 2 average cost per service event



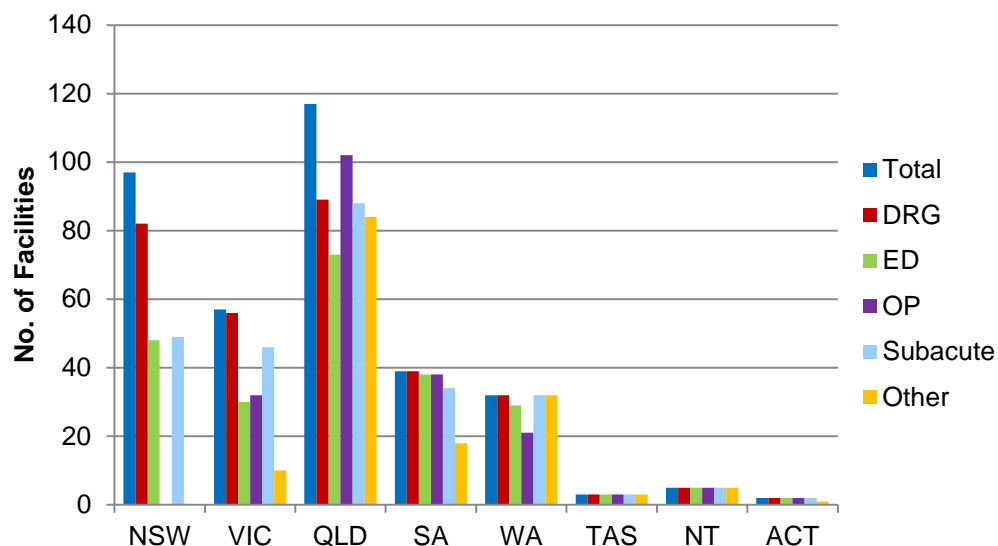
Note:

- The graph above includes Tier 2 outpatient clinic data only
- NSW and WA did not submit outpatient Tier 2 clinic data

2.2 Profile of Participating Hospitals

A number of hospitals do not provide cost data at the class level and therefore these hospitals costs are excluded from the national average costs.

Graph 5: Sample hospitals by jurisdiction and product

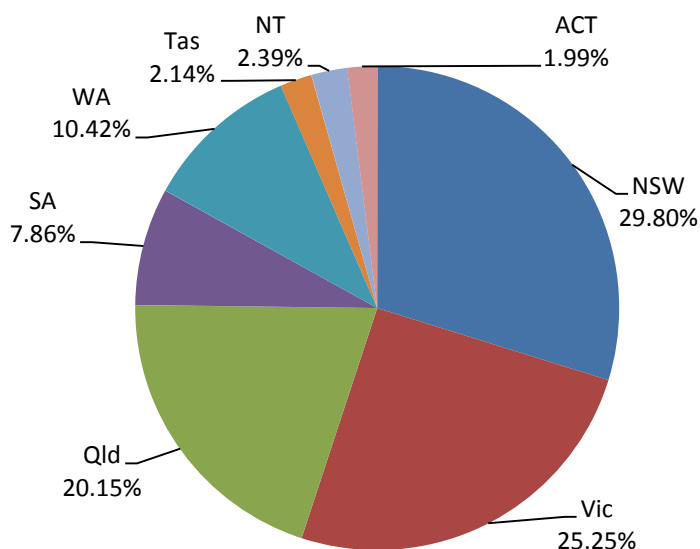


	NSW	Vic	Qld	SA	WA	Tas	NT	ACT
Total	97	57	117	39	32	3	5	2
DRG	82	56	89	39	32	3	5	2
ED	48	30	73	38	29	3	5	2
OP	0	32	102	38	21	3	5	2
Subacute	49	46	88	34	32	3	5	2
Other	0	10	84	18	32	3	5	1

2.3 Participating Hospitals for each NHCDC Product

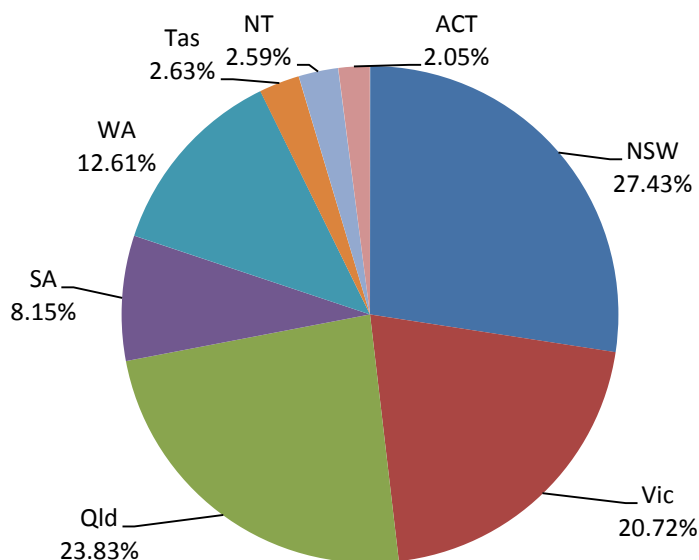
The following graphs 6 to 9 provide a summary of the proportion of data provided by each jurisdiction for the major NHCDC products including admitted acute, emergency departments, subacute and outpatients.

Graph 6: Admitted acute separations



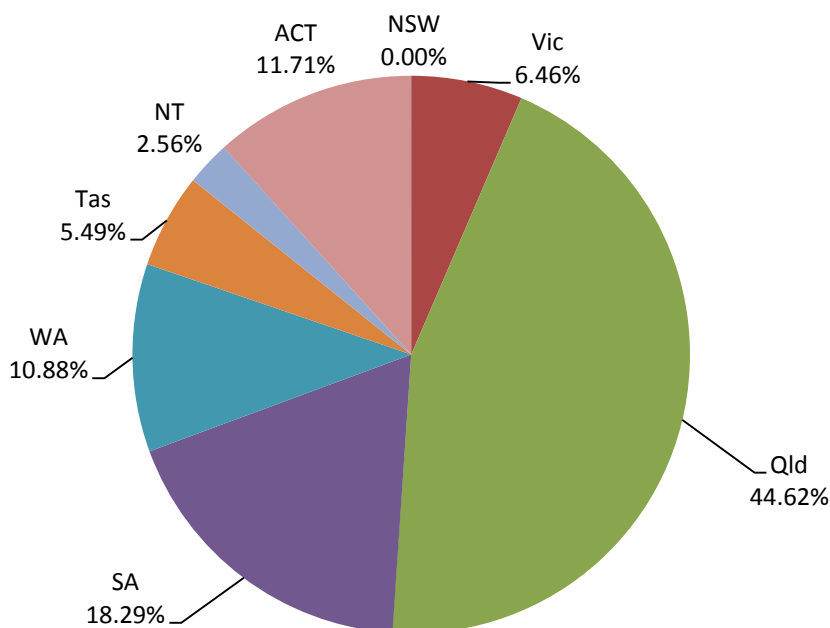
The overall contribution for admitted acute episodes has remained steady from previous rounds, however, Victoria has changed their admission policies from emergency departments which could explain their large decrease from Round 14 by 8.23% with most other jurisdictions increasing between 4% and 8%.

Graph 7: Emergency department presentations



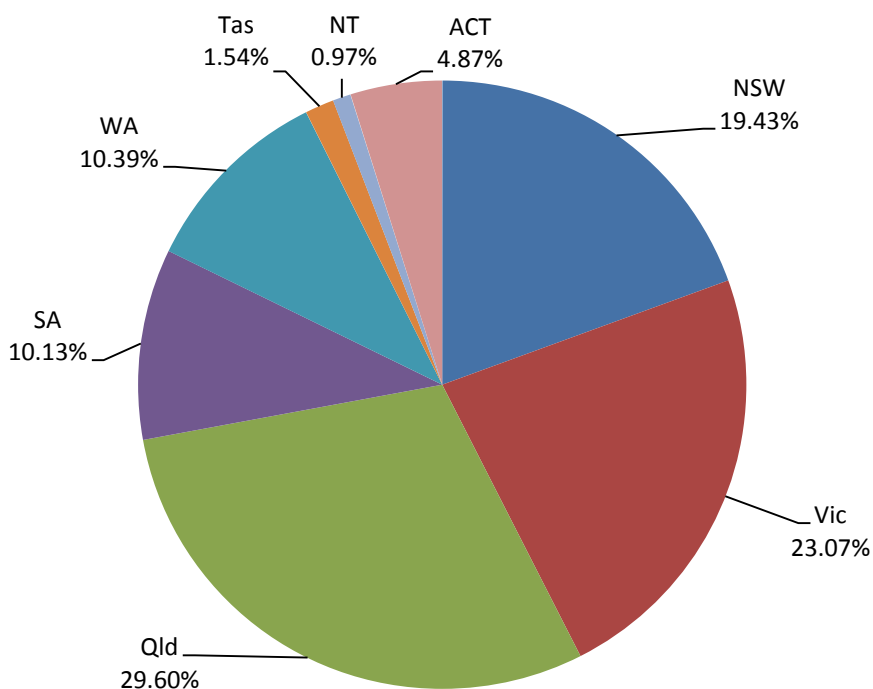
Most jurisdictions contributed their emergency department presentations data at the URG level, with the exception of WA and SA who mostly submitted aggregate level data.

Graph 8: Outpatient service events



The data represented above is based on all submissions with Tier 2 or aggregate levels. The outpatient category has had a reduction by 33% in service events from Round 14.

Graph 9: Subacute episodes



The data represents all subacute product types which include all Rehabilitation, Palliative Care, GEM, Psychogeriatric and Maintenance care. The level of data submitted for subacute has remained consistent between Round 14 and 15.

2.3.1 Sample profiles

The table below shows the various characteristics of the sample hospitals and also the participation rates by jurisdictions.

Table 1: Sample hospitals by peer group and product

Profile by Products	State/Territory								National
	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	
<i>Total Sample Submitted</i>	97	57	117	39	32	3	5	2	352
<i>Admitted acute AR-DRG 6.0X</i>	82	56	89	39	32	3	5	2	308
Emergency department									
<i>Reported by URG*</i>	48	30	69	10	0	3	5	2	167
<i>Reported by Non-URG**</i>	0	0	4	28	29	0	0	0	61
Total	48	30	73	38	29	3	5	2	228
Outpatient									
<i>Outpatient by clinics</i>	0	24	92	38	0	3	5	2	164
<i>Outpatient aggregated</i>	0	8	53	0	21	0	0	0	82
Total	0	32	145	38	21	3	5	2	246
Subacute and Other									
<i>Subacute***</i>	49	46	88	34	32	3	5	2	259
<i>Other****</i>	0	10	84	17	30	3	5	1	150
<i>Research</i>	0	0	0	0	11	0	5	0	16
<i>Teaching</i>	0	5	0	3	11	0	5	0	24
Peer group (acute only)									
<i>A1-Principal referral</i>	27	16	16	4	4	2	2	1	72
<i>A2-Specialist Women's and Children's</i>	3	2	3	1	2	nr	nr	nr	11
<i>B1-Large Major City</i>	11	7	2	1	2	nr	nr	1	24
<i>B2-Large Regional</i>	4	7	1	nr	1	1	nr	nr	14
<i>C1-Medium (between 5,000 and 10,000 Wseps)</i>	9	4	3	4	5	nr	nr	nr	25
<i>C2-Medium Other</i>	19	13	9	9	2	nr	nr	nr	52
<i>D1-Small Regional</i>	4	1	21	9	4	na	nr	nr	39
<i>D3-Small Remote</i>	na	na	2	2	8	na	3	nr	15
<i>G-Subacute and Non-Acute</i>	5	6	32	9	4	na	nr	nr	56
Total	82	56	89	39	32	3	5	2	308

Notes:

*Includes admitted and non-admitted URGs

**Includes admitted and non-admitted ED0

***Subacute includes rehab, palliative care, GEM, psychogeriatric, and maintenance

****Other includes other admitted patient care, outreach and community, organ procurement, border and other

na – data not available at submission

nr – not relevant to that state

The following table shows the various characteristics of the sample hospitals and average cost by jurisdictions.

Table 2: Sample hospitals actual average cost by peer group and product

<i>Average cost by Products (\$)</i>	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>SA</i>	<i>WA</i>	<i>Tas</i>	<i>NT</i>	<i>ACT</i>	<i>National</i>
<i>Admitted acute AR-DRG6.0x (sample average cost per weighted separation)</i>	4,623	4,029	4,815	4,952	5,270	5,506	5,949	6,325	4,676
<i>Emergency department by URG (average cost per presentation)</i>									
<i>Admitted#</i>	900	825	867	768	na	968	593	1,326	863
<i>Non Admitted</i>	351	368	445	490	na	316	436	524	398
<i>Outpatient by clinics (average cost per service event)</i>	na	268	362	288	na	295	307	232	314
<i>Subacute ***</i>									
<i>Average cost per episode</i>	12,299	14,361	11,853	10,850	14,902	19,008	26,935	13,358	13,063
<i>Average cost per day</i>	556	746	996	790	896	884	1,482	1,314	797
<i>Peer group (acute only) (sample average cost per weighted separation)</i>									
<i>A1-Principal referral</i>	4,629	3,981	4,918	4,900	5,235	np	np	np	4,681
<i>A2-Specialist Women's and Children's</i>	4,995	np	4,840	np	np	nr	nr	nr	5,093
<i>B1-Large Major City</i>	4,379	4,022	np	np	np	nr	nr	np	4,351
<i>B2-Large Regional</i>	4,849	4,021	np	nr	np	np	nr	nr	4,605
<i>C1-Medium (between 5,000 and 10,000 Wseps)</i>	4,605	3,646	3,182	4,747	5,153	nr	nr	nr	4,478
<i>C2-Medium Other</i>	4,509	3,550	5,170	4,531	np	nr	nr	nr	4,356
<i>D1-Small Regional</i>	4,537	7,486	4,053	4,418	5,219	na	nr	nr	4,456
<i>D3-Small Remote</i>	na	na	np	4,411	8,450	na	6,440	nr	7,257
<i>G-Subacute and Non-Acute</i>	5,163	4,765	3,960	5,851	4,797	na	nr	nr	4,632

Notes:

- ***Subacute includes rehab, palliative care, GEM, psychogeriatric, and maintenance
- #Admitted included cost from URGs with and without linking field (which links the admitted ED cost to the acute cost)
- na – data not available at submission
- nr – not relevant to that state
- np - not published for confidentiality reasons

2.4 Admitted acute results

2.4.1 Summary results

Table 3 displays the Round 15 estimated results in Australian public hospitals by jurisdictions and table 4 displays the estimated average cost per weighted separation by jurisdictions for the last five collections.

Table 3: Summary of estimated average cost per weight separation by jurisdiction

	<u>Number of hospitals</u>			<u>Number of separations</u>				<u>National cost per weighted separation (Wsep)</u>		
	<i>Sample</i>	<i>Population</i>	<i>Percentage in NHCDC (%)</i>	<i>Sample</i>	<i>Population</i>	<i>Weighted</i>	<i>Percentage in NHCDC Sample to Population (%)</i>	<i>Acuity Divisor Weighted Separations divided by Population Separations (Col7/Col6)</i>	<i>Average cost per Wsep including depreciation (\$)</i>	<i>Average cost per Wsep excluding depreciation (\$)</i>
Jurisdiction										
NSW	82	209	39.23	1,310,821	1,386,874	1,491,738	94.52	1.08	4,576	4,408
Vic	56	120	46.67	1,110,730	1,291,147	1,269,071	86.03	0.98	3,977	3,945
Qld	89	136	65.44	886,343	913,984	883,678	96.98	0.97	4,765	4,695
SA	39	74	52.70	345,832	374,652	392,791	92.31	1.05	4,895	4,738
WA	32	86	37.21	458,359	549,189	510,090	83.46	0.93	5,197	5,045
Tas	3	13	23.08	94,034	97,813	101,728	96.14	1.04	5,496	5,300
NT	5	5	100.00	105,156	105,156	71,901	100.00	0.68	5,891	5,694
ACT	2	2	100.00	87,513	87,513	85,080	100.00	0.97	6,259	6,070
National	308	645	47.75	4,398,788	4,806,328	4,806,328	91.52	1.00	4,613	4,501

Table 4: Estimated average cost per weighted separation by jurisdiction, Round 11 to Round 15

Jurisdiction	<u>Round 11</u> <u>(2006-07)</u> (\$)	<u>Round 12</u> <u>(2007-08)</u> (\$)	<u>Round 13</u> <u>(2008-09)</u> (\$)	<u>Round 14</u> <u>(2009-10)</u> (\$)	<u>Round 15</u> <u>(2010-11)</u> (\$)	<u>Round 14 to 15</u> <u>Percentage Change</u> (%)
NSW	3,754	3,808	4,032	4,426	4,576	3.39
Vic	3,408	3,544	3,687	3,893	3,977	2.16
Qld	3,694	3,990	4,155	4,667	4,765	2.10
SA	3,575	3,897	4,235	4,659	4,895	5.07
WA	4,355	4,717	5,219	5,302	5,197	-1.98
Tas	4,209	4,279	4,801	5,707	5,496	-3.70
NT	4,680	5,170	4,669	5,740	5,891	2.63
ACT	4,285	4,340	4,547	5,701	6,259	9.79
National	3,722	3,907	4,133	4,500	4,613	2.51

Notes:

The number of hospitals in the population column is the total number of acute hospitals in Australia which are eligible to participate in the collection; they are not the total number of hospitals in Australia.

Weighted separations (Wsep) in column 7 of Table 3 are calculated by multiplying the state's population separations (by DRG) by the national public sector estimated DRG cost weights.

2.4.2 Summary results by peer group

Table 5 displays the Round 15 actual results of Australian public hospitals by peer group and table 6 displays the actual average cost per weighted separation by peer group for the last two collections.

Table 5: Summary of actual average cost per weighted separation by peer group

	<u>Number of hospitals</u>			<u>Number of separations</u>				Acuity Divisor Weighted Separations divided by Population Separations (Col8/Col6)	<u>National cost per separation (\$)</u>	
	Sample	Population	Percentage in NHCDC (%)	Sample	Population	Percentage in NHCDC Sample to Population (%)	Sample Weighted separations		Average cost per Wsep including depreciation (\$)	Average cost per Wsep excluding depreciation (\$)
Public Sector by Peer Group										
A1-Principal referral	72	75	96	3,034,099	3,159,630	96.03	3,207,161	1.06	4,681	4,571
A2-Specialist Women's and Children's	11	11	100	228,665	228,665	100	270,734	1.18	5,093	4,960
B1-Large Major City	24	25	96	373,663	389,497	95.93	351,850	0.94	4,351	4,267
B2-Large Regional	14	16	87.5	180,697	208,966	86.47	148,638	0.82	4,605	4,532
C1-Medium (between 5,000 and 10,000 Wseps)	25	29	86.21	242,579	288,165	84.18	169,069	0.70	4,478	4,348
C2-Medium Other	52	61	85.25	202,462	233,048	86.88	145,990	0.72	4,356	4,235
D1-Small Regional	39	117	33.33	50,659	122,887	41.22	38,324	0.76	4,456	4,331
D3-Small Remote	15	40	37.5	45,684	63,053	72.45	32,439	0.71	7,257	6,560
G-Subacute and non-acute	56	271	20.66	40,280	112,417	35.83	35,115	0.87	4,632	4,497
National	308	645	47.75	4,398,788	4,806,328	91.52	4,399,320	1.0	4,613	4,501

Table 6: Actual average cost per weighted separation by peer group, Round 14 to Round 15

	<i>Round 14 (2009-10) (\$)</i>	<i>Round 15 (2010-11) (\$)</i>	<i>Round 14 to 15 Percentage Change (%)</i>
Public Sector by Peer Group			
A1-Principal referral	4,604	4,681	1.67
A2-Specialist Women's and Children's	5,143	5,093	-0.97
B1-Large Major City	4,188	4,351	3.89
B2-Large Regional	4,270	4,605	7.85
C1-Medium	4,375	4,478	2.35
C2-Medium Other	4,152	4,356	4.91
D1-Small Regional	4,649	4,456	-4.15
D3-Small Remote	6,716	7,257	8.06
G-Subacute and non-acute	4,516	4,632	2.57
National	4,500	4,613	2.51

Notes – apply to table 5 and 6:

For the purpose of this report, the peer groups; small non-acute, multi-purpose services and other non-acute hospitals, were rolled into the “Subacute and Non-acute” peer group. This is due to the small sample size.

Peer group is not a stratification variable which means population estimation is not possible. Thus, sample average cost, per weighted separation, was used.

Weighted separations (Wsep) in column 8 of Table 5 are calculated by multiplying the state's sample separations (by DRG) by the national public sector sample DRG cost weights.

54% of the Specialist, Women's and Children's hospitals showed a reduction in average cost per separation of between 19.7% and 5.0% from Rounds 14 to 15. The remaining hospitals showed an increase of between 1.1% and 8.6%. It is important to note however that the number of separations for individual DRGs in these hospitals are highly varied between years, potentially impacting on the costing results.

2.4.3 Costed activity versus the population

The table below displays sample and population hospitals with separation data in Australian public hospitals for Rounds 11 to 15.

There has been an increase in the number of Australian public hospitals in 2010-11 as well as hospitals submitting data to the NHCDC in Round 15. Whilst there has been a decrease in the sample acute separations in Round 15 compared to Round 14 there has been an increase in the percentage of sample to population separations.

Table 7: Comparison of sample and population hospitals, Round 11 to Round 15

	<i>Round 11 (2006-07)</i>	<i>Round 12 (2007-08)</i>	<i>Round 13 (2008-09)</i>	<i>Round 14 (2009-10)</i>	<i>Round 15 (2010-11)</i>
Sample acute separations	3,932,857	4,032,587	4,234,988	4,399,161	4,398,788
Per cent change (%)		2.54	5.02	3.88	-0.01
Population acute separations	4,422,191	4,508,800	4,663,335	4,865,608	4,806,328
Per cent sample to population (%)		89.44	90.81	90.41	91.52
Sample hospitals	238	241	262	280	308
Per cent change (%)		1.26	8.71	6.87	10.00
Population hospitals	511	508	503	582	645
Per cent sample to population (%)		47.44	52.09	48.11	47.75

2.4.4 Cost bucket analysis

The following table compares the public sector national average costs per separation by cost buckets including both direct and overhead costs, between Rounds 11 to 15.

From Round 14, there was a change to the allocation of cost to the cost buckets, to be more in line with the AHPCS. This was the first round as reflected in Round 14.

Table 8: Comparison of total estimated average cost by cost bucket, Round 11 to Round 15

<i>Cost Buckets</i>	<i>Total Cost</i>				
	<i>Round 11</i> <i>(2006-07)</i>	<i>Round 12</i> <i>(2007-08)</i>	<i>Round 13</i> <i>(2008-09)</i>	<i>Round 14</i> <i>(2009-10)</i>	<i>Round 15</i> <i>(2010-11)</i>
	(\$)	(\$)	(\$)	(\$)	(\$)
Ward Medical	469	497	549	641	582
Ward Nursing	899	943	1001	1053	946
Non-clinical Salaries	175	194	200	213	289
Pathology	129	134	148	171	168
Imaging	116	121	123	138	138
Allied Health	89	81	91	104	118
Pharmacy	174	183	189	197	206
Critical Care	290	296	303	332	320
Operating Rooms	481	512	534	553	625
Emergency department	183	195	221	215	148
Ward Supplies	172	199	202	257	328
Specialised Procedure Suites	44	43	40	48	44
Prostheses	115	118	129	133	136
On-costs	185	194	197	218	311
Hotel	117	111	125	128	142
Depreciation	85	87	83	99	113
National	3,722	3,907	4,133	4,500	4,613

Direct costs can be directly attributable to patients rather than other cost centres. Overhead costs are supplementary costs that do not have a direct relationship to a specific episode of patient care. Through the costing process, overhead costs are redistributed across the direct cost centres so that statistics can be created for specific patient care costs.

The table below shows the percentage of each cost bucket of the average cost (estimated) at the jurisdiction level in the public sector.

Table 9: Percentage of each cost bucket of the total estimated average cost by jurisdiction

State / Territory	Total Cost																
	Total (%)	Ward Medical (%)	Ward Nursing (%)	Non-clinical Salaries (%)	Path. (%)	Imaging (%)	Allied Health (%)	Pharm. (%)	Critical Care (%)	Operating Room (%)	ED (%)	Ward Supplies (%)	SPS (%)	Pros (%)	On-costs (%)	Hotel (%)	Deprec (%)
NSW	100.00	11.92	20.60	6.77	4.71	3.46	2.21	3.57	7.06	12.63	3.54	6.33	0.76	2.87	5.68	4.21	3.68
Vic	100.00	12.64	19.02	7.00	2.95	2.75	3.44	5.48	7.26	14.66	2.00	6.60	0.94	3.42	8.65	2.42	0.77
Qld	100.00	13.72	22.64	5.53	4.28	2.63	2.98	3.85	7.81	15.12	3.46	5.18	0.92	2.63	6.11	1.67	1.47
SA	100.00	11.63	18.37	3.61	2.10	2.71	1.77	4.45	7.01	13.46	3.31	12.59	1.40	3.10	6.46	4.81	3.22
WA	100.00	16.21	23.05	6.75	1.84	3.17	1.89	4.94	4.40	10.44	3.45	7.80	1.33	3.04	5.61	3.16	2.94
Tas	100.00	9.19	17.66	3.85	3.83	2.33	2.52	9.77	5.89	17.21	4.31	7.15	0.92	3.17	7.05	1.56	3.60
NT	100.00	6.07	19.52	9.78	3.93	2.27	1.44	3.75	7.00	9.83	2.96	17.29	0.04	0.48	11.30	0.91	3.42
ACT	100.00	7.03	15.17	5.03	5.81	3.62	2.14	3.41	8.84	17.15	5.75	6.04	1.01	3.05	9.81	3.07	3.06
National	100.00	12.61	20.50	6.25	3.65	2.99	2.55	4.46	6.94	13.55	3.21	7.11	0.95	2.96	6.74	3.09	2.45

2.4.5 Twenty highest ranked DRGs

The following table identifies the highest estimated DRGs by average cost for Round 15 and compares them to Round 14. "A10Z -Insertion of Ventricular Assist Devices" DRG remains the highest average cost at \$234,356. The highest 20 ranked DRGs for Round 15 remain similar to Round 14 due to the estimated average cost remaining high even though there have been decreases from Round 14 to Round 15.

Table 10: Twenty highest DRGs estimated average cost per separation

Rnd 14 Rank	Rnd 15 Rank	DRG	Description	Rnd 15 separations	Rnd 14 separations	Rnd 15 average LOS	Rnd 14 average LOS	Rnd 15 total expenditure	Rnd 15 average cost by separation	Rnd 14 average cost by separation	Rnd 14 to 15 change in average cost (\$)	Rnd 14 to 15 change in average cost (%)
1	1	A10Z	Insertion Of VAD	43	38	45.88	49.88	10,193,680	234,356	258,801	-24,445	-9.45
2	2	A06A	Tracheostomy W Vent>95 +Ccc	2,212	2,849	46.62	48.58	435,900,328	197,059	190,457	6,602	3.47
3	3	P61Z	Neonate, Admission Wt <750 G	250	367	78.72	76.84	44,516,406	177,828	189,658	-11,830	-6.24
5	4	Y01Z	Vent Burn&Sev Full Thick Burn	117	153	38.04	53.35	17,836,116	152,976	174,422	-21,446	-12.30
4	5	A40Z	ECMO	201	229	26.85	32.34	30,157,560	149,969	189,526	-39,557	-20.87
6	6	A01Z	Liver Transplant	195	197	31.32	34.27	28,969,472	148,382	145,565	2,817	1.94
8	7	P62Z	Neonate, Admission Wt 750-999G	480	624	64.41	62.45	62,897,722	130,959	131,782	-823	-0.62
7	8	A05Z	Heart Transplant	59	70	26.69	40.87	7,452,705	127,173	134,479	-7,306	-5.43
10	9	A03Z	Lung Or Heart/Lung Transplant	147	118	28.12	32.02	17,842,484	120,970	116,292	4,678	4.02
9	10	P02Z	Neo, Cardiothoracic/Vascular Pr	158	178	29.11	33.69	19,017,912	120,709	121,775	-1,066	-0.88
11	11	A06B	Trch&Vnt-Ccc Or Trch/Vnt+Ccc	6,531	6,865	23.98	26.51	568,348,315	87,025	87,165	-140	-0.16
12	12	P03Z	Neo, Admwt 1000-1499G+Sig Or Pr	630	688	46.98	46.5	51,595,850	81,880	83,840	-1,960	-2.34
13	13	A07Z	Allog Bone Marrow Transplant	505	503	29.81	33.41	39,872,961	78,951	83,569	-4,618	-5.53
15	14	P06A	Neo, Admwt >2499G+Sig Or Pr+Mmp	446	499	25.58	29.86	28,637,691	64,141	67,498	-3,357	-4.97
16	15	F03A	Crdc Valv Pr+Pmp+Inv Inves+Ccc	414	422	21.88	22.34	26,414,821	63,832	61,440	2,392	3.89
21	16	P04Z	Neo, Admwt 1500-1999G+Sig Or Pr	316	339	32.71	32.13	18,352,171	58,073	52,121	5,952	11.42
18	17	W01Z	Ventiln/Crania Mult Sig Trauma	458	485	18.22	20.52	24,792,880	54,140	57,469	-3,329	-5.79
24	18	I02A	Mcrvas Tt/Skin Graft+Cscs-Hand	795	833	28.09	29.54	42,028,115	52,867	51,399	1,468	2.86
20	19	P05Z	Neo, Admwt 2000-2499G+Sig Or Pr	230	219	25.49	28.82	11,889,182	51,747	53,686	-1,939	-3.61
19	20	A06C	Ventilation>95 - Ccc	240	283	12.94	15.02	12,391,849	51,607	57,349	-5,742	-10.01

Note: A comparison between years of DRGs with low volumes may be invalid

The table below identifies the DRGs with the highest separations in Round 15 and compares it to Round 14.

“L61Z-Haemodialysis” DRG is still the most commonly performed DRG and accounts for 20% of the total national public sector separations and has six times the volume of the next highest DRG “R64Z-Chemotherapy”. The top three DRGs that have increased the most in volume from Round 14 are “O60C-Vaginal Delivery Single Uncomplicated” by 82%, “O66B-Antenatal & Other Obstetric Admission, Same Day” by 16% and “Q61B-Red Blood Cell Disorders without catastrophic or severe complications” by 26%. The instability can be attributed to the increased sample size for the 2010-11 period.

Table 11: Twenty highest DRGs estimated separations comparison

Rnd 14 Rank	Rnd 15 Rank	DRG	Description	Rnd 15 separations	Rnd 14 separations	Rnd 15 Average cost by separation	Rnd 14 Average cost by separation	Rnd 14 to Rnd 15 change in Average cost (%)	Rnd 14 to Rnd 15 change in separations	Rnd 14 to Rnd 15 change in separations (%)
1	1	L61Z	Haemodialysis	962,148	904,022	578	590	-2.03	58,126	6.43
2	2	R63Z	Chemotherapy	139,975	135,747	1,413	1,473	-4.07	4,228	3.11
3	3	O60B	Vaginal Delivery -Csc	96,623	116,175	5,005	4,878	2.60	-19,552	-16.83
4	4	F74Z	Chest Pain	85,574	93,460	1,856	1,827	1.59	-7,886	-8.44
5	5	C16Z	Lens Procedures	70,500	65,340	2,682	2,492	7.62	5,160	7.90
6	6	G48C	Colonscopy, Sd	68,618	62,844	1,476	1,471	0.34	5,774	9.19
7	7	G70B	Other Digestive Sys Diag -Csc	53,016	61,026	2,474	2,184	13.28	-8,010	-13.13
16	8	Q61B	Red Blood Cell Disders - Csc	51,721	41,016	1,519	1,601	-5.12	10,705	26.10
11	9	Z64B	Oth Fctr Infl Health Status, Sd	46,341	46,483	1,043	984	6.00	-142	-0.31
13	10	G47C	Oth Gastroscopy, Sd	43,902	44,439	1,296	1,269	2.13	-537	-1.21
17	11	Z40Z	Endo+Dx Oth Cnt Hlth Srv Sd	43,167	40,112	1,165	1,121	3.93	3,055	7.62
14	12	J11Z	Other Skin, Subc Tis & Brst Pr	42,809	42,013	2,399	2,312	3.76	796	1.89
15	13	J64B	Cellulitis -Csc	42,410	41,804	3,799	3,518	7.99	606	1.45
8	14	G66Z	Abdmnl Pain/Mesentrc Adents	40,985	53,222	2,240	1,919	16.73	-12,237	-22.99
9	15	G67B	Oesphs, Gastr -Csc	39,337	48,959	2,298	1,912	20.19	-9,622	-19.65
44	16	O60C	Vaginal Del Single Uncompl	38,729	21,319	4,419	4,174	5.87	17,410	81.66
18	17	E65B	Chronic Obstruct Airway Dis -Ccc	38,315	38,465	5,478	5,281	3.73	-150	-0.39
10	18	X60B	Injuries - Csc	37,394	46,589	2,095	1,771	18.29	-9,195	-19.74
25	19	O66B	Antenatal&Oth Obstetric Adm, Sd	36,910	31,833	614	702	-12.54	5,077	15.95
12	20	O01C	Caesarean Delivery -Csc	36,292	45,379	9,700	9,389	3.31	-9,087	-20.02

The table below identifies the Adjacent DRGs sorted by the highest estimated total expenditure in Round 15 and compares their average cost to Round 14.

Slight fluctuations are observed in the ranking and average costs of the adjacent DRGs in this table with adjacent DRG "A06- Tracheostomy or Ventilation >95" having the highest expenditure of \$1,029,961,395. Overall, the table demonstrates a general year to year stability in NHCDC at the Adjacent DRG level.

Table 12: Twenty highest adjacent DRGs (6x) estimated total expenditure comparison between Round 14 and 15

Rnd 14 Rank	Rnd 15 Rank	AdjDRG60x	Description	Rnd 15 separations	Rnd 14 separations	Rnd 15 total expenditure	Rnd 15 average cost by separations	Rnd 14 average cost by separations	Rnd 14 to Rnd 15 change in average cost (%)
1	1	A06	Tracheostomy Or Ventilation>95	9,375	10,357	1,029,961,395	109,860	113,064	-2.83
2	2	O60	Vaginal Delivery	149,716	152,166	767,411,099	5,126	5,035	1.81
4	3	L61	Admit For Renal Dialysis	962,148	904,022	555,785,186	578	590	-2.03
3	4	O01	Caesarean Delivery	51,008	59,664	548,860,507	10,760	10,262	4.85
6	5	E62	Respiratory Infectn/Inflamm	65,795	61,062	426,272,402	6,479	6,250	3.66
5	6	U61	Schizophrenia Disorders	24,743	23,139	406,773,239	16,440	18,285	-10.09
7	7	E65	Chronic Obstructive Airway Dis	47,266	47,209	300,861,008	6,365	6,113	4.12
8	8	I03	Hip Revision Or Replacement	13,490	13,132	278,254,500	20,627	21,056	-2.04
10	9	G02	Major Small & Large Bowel Pr	11,262	11,360	268,477,431	23,839	23,023	3.54
9	10	U63	Major Affective Disorders	18,267	17,791	261,379,929	14,309	14,984	-4.50
11	11	B70	Stroke	26,046	28,009	250,292,291	9,610	9,219	4.24
12	12	I08	Other Hip & Femur Proc	13,653	13,169	249,730,077	18,291	18,045	1.36
14	13	F62	Heart Failure & Shock	33,497	31,893	245,022,789	7,315	7,037	3.95
13	14	I04	Knee Replacement & Reattach	12,630	11,881	239,988,121	19,002	19,054	-0.27
16	15	J64	Cellulitis	49,786	48,746	232,074,336	4,661	4,303	8.32
15	16	B02	Craniotomy	8,296	8,094	230,936,904	27,838	27,041	2.95
22	17	P67	Neonatal Admwt >2499G-Sig Or Pr	42,249	34,577	217,268,180	5,143	5,088	1.08
19	18	L63	Kidney & Urinary Tract Infect	43,820	43,373	213,581,147	4,874	4,477	8.87
17	19	G70	Other Digestive System Diag	64,064	72,191	209,663,352	3,273	2,883	13.53
20	20	I13	Humerus, Tibia, Fibula, Ankle Pr	17,776	17,218	199,173,685	11,205	11,247	-0.37

2.4.6 Medical, surgical and other DRG type comparison

The table below shows that “P61Z-Neonate, Admission WT <750 G” remains the most expensive medical DRG from Round 14 to 15 with an average cost per separation of \$177,716 in Round 15. However, there have been some fluctuations in the rankings in this table from Round 14 to Round 15. The average cost per separation for “R60A-Acute Leukaemia + Catastrophic CC” has increased average cost by 39.22% with its ranking increasing from 8 to 3. “B60B- Acute Paraplegia/Quadriplegia W or W/O OR Procs W/O Catastrophic CC” has also shown a significant increase in ranking from 30 to 17, displaying an increase by 34.11 % in average cost from Round 14 to Round 15.

Table 13: Twenty medical DRGs by highest estimated average cost per separation comparison

Rank Rnd 14	Rank Rnd 15	DRG	Description	Average cost Rnd 15	Separations Rnd 15	ALOS Rnd 15	Average cost Rnd 14	Separations Rnd 14	ALOS Rnd 14	Change in average cost from Rnd 14 to Rnd 15 (\$)	Change in average cost from Rnd 14 to Rnd 15 (%)
1	1	P61Z	Neonate, Admission Wt <750 G	177,716	250	78.72	189,509	367	76.84	-11,793	-6.22
2	2	P62Z	Neonate, Admission Wt 750-999G	130,851	480	64.41	131,650	624	62.45	-799	-0.61
8	3	R60A	Acute Leukaemia + Ccc	43,744	1,341	22.83	31,398	2,041	17.64	12,346	39.32
3	4	B60A	Acute Para/Quad+/-Or Pr +Ccc	41,285	87	23.65	48,192	86	30.38	-6,907	-14.33
5	5	S65A	HIV-Related Diseases +Ccc	35,549	250	19.55	33,811	245	18.36	1,738	5.14
10	6	P64Z	Neo, Admwt 1250-1499G-Sig Or Pr	35,068	748	27.1	30,524	911	25.11	4,544	14.89
4	7	P63Z	Neo, Admwt 1000-1249G-Sig Or Pr	34,857	401	25.13	38,853	373	28.57	-3,996	-10.28
6	8	B82A	CHR Unsp Para/Quad+/-Or Pr+Ccc	30,731	1,166	20.81	32,238	1,213	24	-1,507	-4.67
7	9	P65A	Neo, Admwt 1500-1999G-Sg Or+Mmp	30,608	334	24.28	32,212	321	24.97	-1,604	-4.98
9	10	B61A	Spinal Cord Cond+/-Or Pr +Csc	28,873	519	16.09	30,691	448	16.98	-1,818	-5.92
11	11	F61A	Infective Endocarditis +Ccc	28,484	327	22.09	28,551	333	24.1	-67	-0.23
14	12	R61A	Lymphma &N-Acute Leukaemia+Ccc	27,027	1,687	16.38	22,513	2,185	14.46	4,514	20.05
13	13	P65B	Neo, Admwt 1500-1999G-Sg Or+Mjp	26,588	1,036	20.95	23,760	973	20.46	2,828	11.90
17	14	U66Z	Eating & Obsessv-Compulsv Dsr	23,593	1,824	18.07	21,565	1,956	19.49	2,028	9.40
16	15	P66A	Neo, Admwt 2000-2499G-Sg Or+Mmp	23,458	341	17.83	22,224	311	16.24	1,234	5.55
12	16	U63A	Mjr Affect Dsr A>69/+Csc	22,865	2,472	24.78	25,134	2,039	26.52	-2,269	-9.03
30	17	B60B	Acute Para/Quad+/-Or Pr -Ccc	21,483	96	11.73	16,019	98	10.65	5,464	34.11
19	18	T64A	Oth Infectous&Parstic Dis +Ccc	21,166	642	14.37	20,631	605	14.04	535	2.59
21	19	P65C	Neo, Admwt 1500-1999G-Sg Or+Otp	20,924	1,286	18.33	19,535	1,358	18.46	1,389	7.11
22	20	S65B	HIV-Related Diseases +Sc	20,921	194	10.47	19,179	222	10.02	1,742	9.08

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The table below shows the average cost for the twenty highest medical DRGs with a breakdown into cost buckets.

Table 14: Twenty medical DRGs by highest estimated average cost per separation by cost bucket

DRG	Description	Cost Bucket Breakdown																
		Average Cost Rd 15	Ward Med	Ward Nurs	Non Clinical	Path	Imag	Allied	Pharm	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec
P61Z	Neonate, Admission Wt <750 G	177,716	10,795	5,308	2,862	4,355	1,902	867	2,941	121,170	551	6	3,235		19	14,930	4,232	4,544
P62Z	Neonate, Admission Wt 750-999G	130,851	7,650	5,345	2,517	2,818	1,374	669	2,486	85,989	289	6	2,870		25	11,262	3,624	3,929
R60A	Acute Leukaemia + Ccc	43,744	3,709	9,769	2,506	5,157	1,236	1,129	10,508	1,415	443	217	2,640	725	38	2,420	1,062	770
B60A	Acute Para/Quad+/-Or Pr +Ccc	41,285	4,382	11,668	2,307	1,531	1,531	2,642	1,674	2,865	2,656	297	2,344	1,131	1,326	2,605	1,314	1,012
S65A	HIV-Related Diseases +Ccc	35,549	6,818	6,542	2,715	2,537	1,026	1,324	5,071	1,579	441	478	2,382	394	121	2,191	1,403	526
P64Z	Neo, Admwt 1250-1499G-Sig Or Pr	35,068	4,443	7,380	1,638	638	334	305	799	12,388	41	4	2,178	0	3	3,159	836	923
P63Z	Neo, Admwt 1000-1249G-Sig Or Pr	34,857	3,380	5,478	1,298	692	414	295	832	15,578	25	57	1,833	1	3	3,068	853	1,048
B82A	CHR Unsp Para/Quad+/-Or Pr+Ccc	30,731	3,489	9,660	2,392	1,114	822	1,437	1,444	1,632	1,680	406	2,390	111	390	2,192	947	624
P65A	Neo, Admwt 1500-1999G-Sg Or+Mmp	30,608	3,937	4,899	1,140	789	373	355	895	12,447	1	1	1,631	16	3	2,840	568	715
B61A	Spinal Cord Cond+/-Or Pr +Csc	28,873	2,605	7,989	1,961	972	1,168	1,774	742	1,414	2,622	377	1,954	69	1,833	1,796	946	651
F61A	Infective Endocarditis +Ccc	28,484	4,307	7,302	2,124	1,489	1,115	1,044	1,914	2,107	261	418	2,673	226	22	2,016	868	596
R61A	Lymphma &N-Acute Leukaemia+Ccc	27,027	2,791	6,520	1,824	2,753	943	896	4,928	964	172	260	1,815	261	17	1,651	745	487
P65B	Neo, Admwt 1500-1999G-Sg Or+Mjp	26,588	3,267	5,590	1,264	520	254	249	421	9,846	10	1	1,522		3	2,320	625	697
U66Z	Eating & Obsessv-Compulsv Dsr	23,593	3,789	8,664	2,682	405	88	1,420	552	130	44	241	2,165	5	4	2,023	775	606
P66A	Neo, Admwt 2000-2499G-Sg Or+Mmp	23,458	3,228	3,916	1,115	672	251	327	451	8,813	38	12	1,314		2	2,257	545	517
U63A	Mjr Affect Dsr A>69/+Csc	22,865	3,869	8,678	2,153	422	215	857	598	90	582	331	1,890	25	10	1,761	905	478
B60B	Acute Para/Quad+/-Or Pr -Ccc	21,483	2,272	5,902	1,422	575	756	1,417	557	674	2,204	246	1,334	101	1,497	1,383	648	493
T64A	Oth Infectous&Parstic Dis +Ccc	21,166	2,729	5,078	1,567	1,172	810	640	3,305	905	275	398	1,651	82	15	1,593	526	419
P65C	Neo, Admwt 1500-1999G-Sg Or+Otp	20,924	3,222	5,255	1,066	380	99	183	336	6,129	12	1	1,370		3	1,820	527	522
S65B	HIV-Related Diseases +Scc	20,921	4,818	4,214	1,751	1,368	479	722	2,649	234	407	488	1,258	149	14	1,333	762	272

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The table below shows “A10Z-Insertion of Ventricular Assist Devices” is the highest ranking surgical DRG in both Round 14 and 15, with an average cost of \$234,356 in Round 15. Most twenty highest rankings remain similar between Round 14 and 15, however “P04Z- Neonate, AdmWt 1500-1999 g W Significant OR Procedure” has increased in ranking from 18 to 13, with an increase in the average cost of 11.5% and “I01A- Bilateral/Multiple Major Joint Proc of Lower Extremity W Revision or W Cat CC” has shown a decrease in ranking from 14 to 18, with a decrease in average cost of 11.3%.

Table 15: Twenty surgical DRGs by highest estimated average cost comparison

Rank Rnd 14	Rank Rnd 15	DRG	Description	Average cost Rnd 15	Separations Rnd 15	ALOS Rnd 15	Average cost Rnd 14	Separations Rnd 14	ALOS Rnd 14	Change in average cost from Rnd 14 to Rnd 15 (\$)	Change in average cost from Rnd 14 to Rnd 15 (%)
1	1	A10Z	Insertion Of VAD	234,356	43	45.88	258,801	38	49.88	-24,445	-9.40
2	2	A06A	Tracheostomy W Vent>95 +Ccc	196,849	2,212	46.62	190,261	2,849	48.58	6,588	3.50
3	3	Y01Z	Vent Burn&Sev Full Thick Burn	152,908	117	38.04	174,274	153	53.35	-21,366	-12.30
4	4	A01Z	Liver Transplant	148,382	195	31.32	145,565	197	34.27	2,817	1.90
5	5	A05Z	Heart Transplant	127,173	59	26.69	134,479	70	40.87	-7,306	-5.40
7	6	A03Z	Lung Or Heart/Lung Transplant	120,970	147	28.12	116,292	118	32.02	4,678	4.00
6	7	P02Z	Neo, Cardiothoracic/Vascular Pr	120,709	158	29.11	121,775	178	33.69	-1,066	-0.90
8	8	A06B	Trch&Vnt-Ccc Or Trch/Vnt+Ccc	86,957	6,531	23.98	87,076	6,865	26.51	-119	-0.10
9	9	P03Z	Neo, Admwt 1000-1499G+Sig Or Pr	81,721	630	46.98	83,757	688	46.5	-2,036	-2.40
10	10	A07Z	Allog Bone Marrow Transplant	78,951	505	29.81	83,569	503	33.41	-4,618	-5.50
12	11	P06A	Neo, Admwt >2499G+Sig Or Pr+Mmp	64,122	446	25.58	67,463	499	29.86	-3,341	-5.00
13	12	F03A	Crdc Valv Pr+Pmp+Inv Inves+Ccc	63,800	414	21.88	61,400	422	22.34	2,400	3.90
18	13	P04Z	Neo, Admwt 1500-1999G+Sig Or Pr	58,036	316	32.71	52,072	339	32.13	5,964	11.50
15	14	W01Z	Ventiln/Crania Mult Sig Trauma	54,080	458	18.22	57,445	485	20.52	-3,365	-5.90
21	15	I02A	Mcrvas Tt/Skin Graft+Cscs-Hand	52,799	795	28.09	51,339	833	29.54	1,460	2.80
17	16	P05Z	Neo, Admwt 2000-2499G+Sig Or Pr	51,697	230	25.49	53,592	219	28.82	-1,895	-3.50
16	17	A06C	Ventilation>95 - Ccc	51,472	240	12.94	57,222	283	15.02	-5,750	-10.00
14	18	I01A	Bl/Mlt Mj Jt Pr Lwr Ext+Rv/Ccc	51,292	193	23.64	57,849	195	28.72	-6,557	-11.30
19	19	F07A	Other Cardthor/Vasc Pr+Pmp+Ccc	50,282	506	11.98	51,892	473	13.05	-1,610	-3.10
20	20	I06Z	Spinal Fusion + Deformity	49,934	450	9.3	51,568	397	9.39	-1,634	-3.20

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The table below shows the average cost for the twenty highest surgical DRGs with a breakdown into buckets.

Table 16: Twenty surgical DRGs by highest estimated average cost by cost bucket

DRG	Description	Cost Bucket Breakdown															
		Ward Medical	Ward Nursing	Non Clinical	Path	Imag	Allied	Pharm	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec
A10Z	Insertion Of VAD	19,869	6,823	6,559	10,844	3,250	5,347	5,828	91,411	14,939	141	7,433	528	43,074	11,064	4,072	3,176
A06A	Tracheostomy W Vent>95 +Ccc	8,385	9,687	3,860	8,022	5,020	5,089	4,891	113,665	8,931	372	4,161	317	2,038	13,260	4,289	4,860
Y01Z	Vent Burn&Sev Full Thick Burn	8,742	16,559	4,301	8,597	2,378	5,410	4,005	55,283	20,408	438	9,279	4	1,058	9,408	3,734	3,305
A01Z	Liver Transplant	22,214	14,403	7,366	8,390	3,221	2,566	17,039	22,483	25,713	86	8,948	23	1,772	8,437	2,667	3,053
A05Z	Heart Transplant	13,971	8,374	5,108	8,394	1,805	3,795	9,448	36,398	18,033	52	7,871	288	1,270	7,688	2,861	1,818
A03Z	Lung Or Heart/Lung Transplant	9,878	9,942	3,103	6,635	2,741	4,039	12,744	38,015	15,852	53	5,248	159	1,644	6,081	3,304	1,533
P02Z	Neo, Cardiothoracic/Vascular Pr	15,404	8,482	5,656	6,804	2,536	2,799	1,621	43,264	13,009	41	4,506	0	861	9,687	2,013	4,026
A06B	Trch&Vnt-Ccc Or Trch/Vnt+Ccc	4,989	5,503	2,246	4,666	2,612	2,152	2,678	41,452	6,057	368	2,412	281	1,349	6,011	1,934	2,246
P03Z	Neo, Admwt 1000-1499G+Sig Or Pr	6,323	4,400	1,877	1,906	969	465	1,799	49,666	262	0	2,054	0	32	7,051	2,240	2,676
A07Z	Allog Bone Marrow Transplant	5,758	15,767	4,253	7,247	1,280	2,496	23,167	5,049	458	23	4,523	2,325	83	3,815	1,400	1,309
P06A	Neo, Admwt >2499G+Sig Or Pr+Mmp	6,820	5,339	1,909	2,475	1,445	1,072	1,945	29,328	2,867	29	2,154	0	217	5,634	1,253	1,634
F03A	Crdc Valv Pr+Pmp+Inv Inves+Ccc	5,994	5,269	2,227	3,070	1,206	1,201	1,572	13,432	11,379	189	3,145	1,781	6,668	3,892	1,418	1,357
P04Z	Neo, Admwt 1500-1999G+Sig Or Pr	4,362	5,519	1,741	1,628	962	530	1,368	30,649	538	0	2,146	0	40	5,076	1,667	1,809
W01Z	Ventiln/Crania Mult Sig Trauma	3,886	6,118	2,023	2,036	3,341	1,783	1,283	14,130	8,109	564	2,048	24	2,653	3,352	1,467	1,262
I02A	Mcrvas Tt/Skin Graft+Csc-Hand	6,010	10,491	2,974	1,477	1,400	1,359	2,153	1,636	12,789	275	3,365	146	2,728	3,395	1,547	1,055
P05Z	Neo, Admwt 2000-2499G+Sig Or Pr	5,744	4,403	1,489	1,713	1,053	649	1,429	24,311	1,722	22	1,622	1	211	4,767	1,243	1,320
A06C	Ventilation>95 - Ccc	2,939	2,203	1,292	2,520	1,400	1,128	1,018	27,907	2,783	352	1,110	49	543	3,462	1,156	1,610
I01A	Bl/Mlt Mj Jt Pr Lwr Ext+Rv/Ccc	4,563	9,309	2,145	1,605	766	1,390	1,720	1,373	9,912	122	3,011	82	10,775	2,454	1,222	842
F07A	Other Cardthor/Vasc Pr+Pmp+Ccc	5,149	4,036	2,453	2,104	926	1,051	969	10,165	12,407	53	2,061	192	2,173	3,555	960	2,029
I06Z	Spinal Fusion + Deformity	3,467	4,192	1,547	791	487	1,576	471	2,830	9,300	3	1,272	889	19,701	2,011	745	652

The table below shows the comparison of “other” DRGs in Round 14 and 15. The “other” DRG category comprises of services that are not considered to be medical or surgical. Between Round 14 and 15 “A40Z-Extracorporeal membrane oxygenation” remains the highest ranking with an average cost of \$149,928 in Round 15. Rankings of the remaining DRGs are similar between Round 14 and 15, however “T40Z-Infectious and Parasitic Diseases W Ventilator Support” has increased in its ranking from 4 to 2, with an increase in average cost of 20.08%.

Table 17: Twenty other DRGs by highest estimated average cost

<i>Rank Rnd 14</i>	<i>Rank Rnd 15</i>	<i>DRG</i>	<i>Description</i>	<i>Average Cost Rnd 15</i>	<i>Separations Rnd 15</i>	<i>ALOS Rnd 15</i>	<i>Average Cost Rnd 14</i>	<i>Separations Rnd 14</i>	<i>ALOS Rnd 14</i>	<i>Change in Average Cost from Rnd 14 to Rnd 15 (\$)</i>	<i>Change in Average Cost from Rnd 14 to Rnd 15 (%)</i>
1	1	A40Z	ECMO	149,928	201	26.85	189,526	229	32.34	-39,598	-20.89
4	2	T40Z	Infect&Paras Dis+Vent Support	34,993	248	12.81	29,142	288	11.55	5,851	20.08
2	3	B42A	Nerv Sys Dx W Vent Support+Ccc	33,972	440	13	30,941	373	12.91	3,031	9.80
3	4	E40A	Resp Dx W Ventilator Suppt+Ccc	32,691	912	11.13	30,736	849	11.61	1,955	6.36
5	5	F40A	Circ Sys Dx+Ventiltr Suppt+Ccc	31,549	477	9.68	28,091	416	9.96	3,458	12.31
6	6	K40A	Endo/Invest Pr Metab Dis +Ccc	27,314	221	19.92	26,404	255	20.11	910	3.45
7	7	E40B	Resp Dx W Ventilator Suppt-Ccc	24,665	381	7.62	23,462	367	7.76	1,203	5.13
8	8	E42A	Bronchoscopy +Ccc	23,207	903	15.52	23,371	887	16.35	-164	-0.70
10	9	E41Z	Resp Sys Dx +Non-Invas Ventiln	22,476	3,550	11.5	20,866	3742	11.61	1,610	7.72
9	10	F40B	Circ Sys Dx+Ventiltr Suppt-Ccc	22,361	262	5.04	21,048	260	5.36	1,313	6.24
13	11	B42B	Nerv Sys Dx W Vent Support-Ccc	21,874	552	6.42	20,060	536	6.55	1,814	9.04
11	12	H40A	Endo Pr Bleed Oes Varices +Ccc	21,038	290	9.69	20,290	227	10.8	748	3.69
12	13	X40Z	Inj, Pois, Tox Eff Drug W Vent	20,489	893	6.61	20,247	810	7.49	242	1.20
15	14	F43Z	Circ Sys Diag W Niv	19,675	700	11.3	17,862	787	11.29	1,813	10.15
14	15	G46A	Complex Gastroscopy+Ccc	19,408	1,425	13.18	18,095	1381	12.96	1,313	7.26
16	16	G47A	Oth Gastroscopy +Ccc	15,355	1,824	11.12	13,747	1850	10.55	1,608	11.70
17	17	H43A	ERCP Procedure +Csc	14,292	1,929	9.93	13,533	1948	9.89	759	5.61
18	18	F41A	Crc Dsr+Ami+Inva Inve Pr+Csc	12,955	1,709	7.64	13,079	1905	7.61	-124	-0.95
19	19	F42A	Crc Dsr+Ami+lc In Pr +Csc	12,401	2,996	7.6	12,020	2724	7.37	381	3.17
20	20	G48A	Colonscopy +Csc	12,371	2,034	9.24	11,600	2056	9.12	771	6.65

The table below shows the average cost for the twenty highest other DRGs with a breakdown into cost buckets.

Table 18: Twenty other DRGs by highest estimated average cost by cost bucket

DRG	Description	Cost Bucket Breakdown															
		Ward Medical	Ward Nursing	Non Clinical	Path	Imag	Allied	Pharm	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec
A40Z	ECMO	10,962	4,063	4,687	10,464	2,966	3,443	5,444	70,955	11,758	99	4,433	195	2,030	10,445	3,111	4,875
T40Z	Infect&Paras Dis+Vent Support	2,222	3,331	1,268	2,555	1,267	943	1,503	15,365	514	454	1,236	21	61	2,567	786	900
B42A	Nerv Sys Dx W Vent Support+Ccc	2,361	4,213	1,406	1,687	1,482	1,317	845	14,276	383	525	1,159	13	56	2,649	844	755
E40A	Resp Dx W Ventilator Suppt+Ccc	2,027	2,836	997	1,913	913	863	894	16,360	270	400	1,032	97	19	2,602	717	752
F40A	Circ Sys Dx+Ventilr Suppt+Ccc	1,790	1,863	848	1,805	890	789	628	17,071	363	444	904	292	34	2,377	716	735
K40A	Endo/Invest Pr Metab Dis +Ccc	3,938	8,343	2,061	1,596	1,019	1,159	1,496	1,003	605	461	2,053	134	31	1,902	928	587
E40B	Resp Dx W Ventilator Suppt-Ccc	1,556	1,716	691	1,184	608	584	464	13,323	353	386	645	118	14	1,846	533	643
E42A	Bronchoscopy +Ccc	3,130	5,638	1,761	1,432	1,022	972	1,970	1,231	784	365	1,777	192	29	1,706	699	499
E41Z	Resp Sys Dx +Non-Invas Ventiln	2,306	4,361	1,210	1,032	482	791	908	6,467	173	536	1,169	215	12	1,607	647	560
F40B	Circ Sys Dx+Ventilr Suppt-Ccc	975	866	453	1,077	569	384	257	13,495	407	469	436	197	34	1,490	617	634
B42B	Nerv Sys Dx W Vent Support-Ccc	1,206	1,759	614	969	966	663	346	10,985	619	527	474	25	52	1,527	513	629
H40A	Endo Pr Bleed Oes Varices +Ccc	2,113	3,276	975	2,068	492	450	1,047	4,808	1,792	406	1,076	93	78	1,421	471	473
X40Z	Inj, Pois, Tox Eff Drug W Vent	1,258	1,488	690	1,005	541	503	325	11,071	211	469	471	12	12	1,430	498	505
F43Z	Circ Sys Diag W Niv	2,166	3,670	1,057	1,117	501	517	695	5,537	126	582	1,093	77	20	1,427	607	485
G46A	Complex Gastroscopy+Ccc	2,618	4,665	1,318	1,328	673	706	1,192	1,270	1,219	398	1,355	171	151	1,356	596	392
G47A	Oth Gastroscopy +Ccc	2,111	3,940	1,118	952	563	610	827	869	754	437	1,123	92	31	1,081	523	325
H43A	ERCP Procedure +Csc	2,048	3,313	1,019	825	770	331	761	731	937	346	1,078	146	177	994	469	348
F41A	Crc Dsr+Ami+Inva Inve Pr+Csc	1,636	1,793	752	604	430	295	436	3,134	149	353	826	813	98	937	371	327
F42A	Crc Dsr+Ami+lc In Pr +Csc	1,794	1,993	798	570	471	283	411	1,873	290	346	896	979	147	836	349	365
G48A	Colonscopy +Csc	1,923	3,323	911	766	507	347	693	308	606	370	933	85	28	873	439	260

2.5 Emergency department summary results

The average cost for the emergency department of \$496 has increased slightly by 3.69% or \$18 from Round 14. The admitted triage group has increased more than the non-admitted group by 5.59% or \$27. The admitted average cost for Round 15 is \$865 and the non-admitted is \$395 (which includes URG and Non URG data). It is important to note that NSW and Victoria had changes in the coding of their ED patients in Round 15 data. IHPA was requested to reclassify a number of admitted patients to non-admitted patients for the determination of the NEP. This reclassification is not reflected in the table below as it is comparing actual submitted data between Round 14 and 15.

Table 19: Urgency Related Groups (URGs) and Urgency Disposition Groups (UDGs) comparison, actual data, patient costed and cost modelled sites

<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>		<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
Emergency department - no Triage							
ED0	Emergency department - admitted - no Triage	19,931	742	189,803	524	852.30	-29.34
ED0	Emergency department - non admitted - no Triage	84,891	130	625,403	384	636.71	194.63
National emergency department - no Triage		104,822	247	815,206	417	677.71	68.99
Emergency department - Triaged - URG & UDG							
Admitted Triaged							
3	Adm_T1_Injury	4,629	1,336	5,404	1,950	16.74	46.00
4	Adm_T1_Poisoning	1,287	1,204	1,265	1,396	-1.71	16.01
5	Adm_T1_Respiratory system illness	2,946	1,286	3,668	1,461	24.51	13.60
6	Adm_T1_Circulatory system illness	4,625	981	6,021	1,217	30.18	24.11
7	Adm_T1_All other MDB groups	5,926	1,273	7,087	1,508	19.59	18.44
9	Adm_T2_Poisoning	712	1,101	4,545	1,060	538.34	-3.80
10	Adm_T2_Injury	21,551	885	22,053	1,140	2.33	28.76

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<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>	<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
11 Adm_T2_Gastrointestinal system illness	13,635	978	15,295	1,136	12.17	16.18
12 Adm_T2_Respiratory system illness	29,297	909	35,081	1,014	19.74	11.50
14 Adm_T2_Neurological illness	14,589	997	16,770	1,138	14.95	14.20
15 Adm_T2_Toxic effects of drugs	5,672	977	1,242	1,057	-78.10	8.16
16 Adm_T2_Circulatory system illness	86,085	890	95,704	953	11.17	7.18
17 Adm_T2_All other MDB groups	29,497	931	33,305	980	12.91	5.23
19 Adm_T3_Blood / Immune system illness	10,705	803	12,419	889	16.01	10.79
20 Adm_T3_Injury	54,725	736	57,266	819	4.64	11.22
21 Adm_T3_Neurological illness	45,891	868	48,898	934	6.55	7.70
22 Adm_T3_Obstetric/Gynaecological illness	16,242	545	16,881	538	3.93	-1.27
23 Adm_T3_Gastrointestinal system illness	99,644	818	106,829	914	7.21	11.79
24 Adm_T3_Circulatory system illness	74,634	809	80,261	875	7.54	8.10
25 Adm_T3_Poisoning/Toxic effects of drugs	9,944	870	10,066	870	1.23	-0.04
26 Adm_T3_Urological illness	29,502	815	30,212	905	2.41	11.13
27 Adm_T3_Respiratory system illness	66,371	799	75,864	863	14.30	8.10
29 Adm_T3_All other MDB groups	70,320	859	83,088	841	18.16	-2.01
30 Adm_T4_Poisoning/Toxic effects of drugs	16,215	656	3,075	700	-81.04	6.79
31 Adm_T4_Respiratory system illness	21,067	714	22,110	732	4.95	2.49

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<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>		<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
32	Adm_T4_Gastrointestinal system illness	61,238	716	59,537	775	-2.78	8.15
33	Adm_T4_All other MDB groups	121,710	693	127,249	710	4.55	2.51
34	Adm_T4_Injury	29,020	601	42,858	643	47.68	6.96
35	Adm_T4_Psychiatric/Social problem/Other presentation	21,316	766	23,228	784	8.97	2.41
36	Adm_T5_Psychiatric/Social problem/Other presentation	3,230	518	3,988	528	23.47	1.92
37	Adm_T5_All other MDB groups	17,134	532	19,676	596	14.84	12.06
AE2	Error - Triage not=1,2,3,4 or 5	61	529	33	543	-45.90	2.59
AE3	Error - Blank Diagnosis Code	2,101	660	14,829	701	605.81	6.32
AE4	Error - Invalid Diagnosis Code	59,973	812	43,642	848	-27.23	4.53
AE5	Error - Diagnosis Code – No MDB map	1,731	844	1,622	964	-6.30	14.16
EDAdm1	Emergency admission Triage 1	7,632	1,683	-	-	-	-
EDAdm2	Emergency admission Triage 2	77,548	893	-	-	-	-
EDAdm3	Emergency admission Triage 3	184,658	764	-	-	-	-
EDAdm4	Emergency admission Triage 4	94,582	620	-	-	-	-
EDAdm5	Emergency admission Triage 5	9,488	463	-	-	-	-

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<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>	<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
National admitted triaged	1,427,133	791	1,131,071	865	-20.75	9.32
Non-admitted triaged						
38 Dead on Arrival w any Triage w any MDB	2,532	240	3,986	169	57.42	-29.80
39 N-A_T1_All MDB groups	4,158	1,197	6,366	1,468	53.10	22.69
40 N-A_T2_Alcohol/drug abuse	1,818	836	2,866	879	57.65	5.22
42 N-A_T2_Musculoskeletal/connective tissue illness	2,352	665	3,078	707	30.87	6.21
43 N-A_T2_Circulatory system / Respiratory system illness	44,052	747	71,623	840	62.59	12.38
44 N-A_T2_Injury	21,817	786	29,432	834	34.90	6.10
45 N-A_T2_Poisoning	2,398	739	3,945	820	64.51	10.96
46 N-A_T2_All other MDB groups	37,976	676	55,693	751	46.65	11.15
48 N-A_T3_Circulatory system illness	52,077	602	82,193	649	57.83	7.84
50 N-A_T3_Injury	127,237	527	159,828	553	25.61	4.96
51 N-A_T3_Genitourinary illness	43,767	589	62,606	626	43.04	6.22
52 N-A_T3_Gastrointestinal system illness	90,575	565	128,172	607	41.51	7.31
53 N-A_T3_Neurological illness	45,628	594	66,256	629	45.21	5.82
55 N-A_T3_Respiratory system illness	75,478	462	100,247	510	32.82	10.50
56 N-A_T3_Musculoskeletal/connective tissue illness	10,825	511	15,026	543	38.81	6.30
57 N-A_T3_All other MDB groups	161,901	473	224,866	490	38.89	3.70

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<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>		<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
58	N-A_T4_Injury	366,551	322	434,911	343	18.65	6.35
60	N-A_T4_Genitourinary illness	74,566	361	90,982	407	22.02	12.75
61	N-A_T4_Circulatory system / Respiratory system illness	112,793	333	149,082	369	32.17	10.64
62	N-A_T4_Gastrointestinal system illness	117,673	381	160,501	422	36.40	10.71
63	N-A_T4_Musculoskeletal/connective tissue illness	37,657	358	53,036	382	40.84	6.83
65	N-A_T4_Illness of the ENT	49,809	269	68,375	286	37.27	6.02
66	N-A_T4_Illness of the eyes	34,115	248	51,543	250	51.09	0.95
67	N-A_T4_Other presentation block	94,256	300	109,494	338	16.17	12.55
68	N-A_T4_All other MDB groups	197,298	343	286,707	344	45.32	0.54
69	N-A_T5_Poisoning/Toxic effects of drugs	2,700	257	3,812	257	41.19	0.15
70	N-A_T5_Injury	83,738	227	110,355	236	31.79	3.94
71	N-A_T5_Other presentation block	89,279	183	102,520	206	14.83	12.81
72	N-A_T5_All other MDB groups	137,695	209	172,661	235	25.39	12.35
73	Did Not Wait	225,731	200	258,865	155	14.68	-22.77
EDDC1	Emergency discharge Triage 1	1,592	641	-	-	-	-
EDDC2	Emergency discharge Triage 2	48,660	534	-	-	-	-
EDDC3	Emergency discharge Triage 3	273,115	453	-	-	-	-
EDDC4	Emergency discharge Triage 4	601,058	358	-	-	-	-

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<i>Urgency Related Groups (URGs) V1.2 and Urgency Disposition Group (UDGs)</i>		<i>Round 14 presentations</i>	<i>Round 14 average Cost /Pres</i>	<i>Round 15 presentations</i>	<i>Round 15 average cost /Pres</i>	<i>% Change from Round 14 to 15 presentations</i>	<i>% Change from Round 14 to 15 average cost /Pres</i>
EDDC5	Emergency discharge Triage 5	180,719	216	-	-	-	-
EDDNW	Emergency Did not wait	70,933	41	-	-	-	-
NE1	Error - Episode End Status not=1,2,3,4,5,6 or 7	25,728	419	22,356	346	-13.11	-17.43
NE2	Error - Triage not=1,2,3,4 or 5	182	376	156	699	-14.29	85.63
NE3	Error - Blank Diagnosis Code	38,552	319	178,959	242	364.20	-24.11
NE4	Error - Invalid Diagnosis Code	122,893	412	189,587	396	54.27	-3.66
NE5	Error - Diagnosis Code – No MDB map	6,468	428	14,383	453	122.37	5.89
National non-admitted triaged		3,718,352	365	3,474,468	395	-6.56	8.15
National emergency department - triaged - URG & UDG		5,145,485	484	4,605,539	511	-10.49	5.59
National emergency department presentations		5,250,307	479	5,420,745	496	3.25	3.69

2.6 Outpatient Tier 2 clinic summary results

In Round 15, outpatient clinic data was reported to the NHCDC level according to version 1.2 of the Tier 2 outpatient classification which consists of 107 clinics. However, four clinics including 10.14 Pain Management Interventions, 20.37 Assisted Reproductive Technology, 40.10 Sexual Health and 40.20 Chronic Obstructive Pulmonary Diseases, were not costed in Round 15. Tier 2 differs from other classifications in that it is based more on the type of service provided by the outpatient clinic and the clinician providing the service to the patient, rather than on patient diagnosis. However, as the classification incorporates the speciality of the clinician and clinic, this ensures some clinical meaningfulness.

In Round 15, 164 hospitals have submitted data for outpatients. Of those, only 126 had viable outpatient Tier 2 clinic data. Although the number of sites has increased this is not a reflection of the actual separations that have been submitted. Based on data provisions for Round 15, the table below represents the data only for Vic, Qld, Tas, NT and ACT.

For Round 15 a number of issues have arisen with the costing of outpatient Tier 2 clinic results. These are identified as:

- “Classification” – the class of clinic services that determines the outpatient product. It is likely that some adjustment to the existing 107 clinic types will occur. Based on further refinement of the classification and mapping, it is anticipated that the submissions will improve over the next few rounds.
- “Bundling” rules are unclear. Current practices in the way outpatient clinics deliver and record treatment often result in no clear demarcation of which services should be bundled and mapped to clinics. This also impacts on the “counting rules”. This will be refined as data availability improves and is better understood.

To gain a better understanding of the factors impacting on outpatient clinic submissions, IHPA is undertaking a review of the costing methodology for future rounds. The table below shows a summary of outpatient Tier 2 clinic results for Round 15 and a comparison to Round 14.

Table 20: Outpatient Tier 2 clinics, average cost comparison, actual data

Outpatient Clinic Code	Description	Round 15			Round 14			Variation separations (%)	Variation average cost (%)
		Service Events	Avg cost	Cost weight	Service Events	Avg cost	Cost weight		
10.01	Hyperbaric Medicine	2,005	1,445	4.48	1,261	479	1.67	59.00	201.67
10.02	Interventional Imaging	7,671	543	1.69	-	-	-	-	-
10.03	Minor Surgical	4,039	692	2.15	-	-	-	-	-
10.04	Dental	1,265	435	1.35	9,191	363	1.27	-86.24	19.83
10.05	Angioplasty/Angiography	5,153	1,200	3.72	-	-	-	-	-
10.06	Endoscopy - Gastrointestinal	20,190	1,131	3.51	11,530	894	3.11	75.11	26.51

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Outpatient Clinic Code	Description	Round 15			Round 14			Variation separations (%)	Variation average cost (%)
		Service Events	Avg cost	Cost weight	Service Events	Avg cost	Cost weight		
10.07	Endoscopy- Urological/Gynaecological	12,324	292	0.9	9,900	270	0.94	24.48	8.15
10.08	Endoscopy- Orthopaedic	1,076	318	0.99	-	-	-	-	-
10.09	Endoscopy - Respiratory/ENT	413	3,122	9.69	3,351	209	0.73	-87.68	1393.78
10.10	Renal Dialysis	11,059	756	2.35	3,302	647	2.25	234.92	16.85
10.11	Medical Oncology (Treatment)	59,322	709	2.2	25,912	745	2.59	128.94	-4.83
10.12	Radiation Oncology (Treatment)	286,336	336	1.04	48,543	576	2.01	489.86	-41.67
10.13	Minor Medical Procedures	472	1,291	4	66	518	1.8	615.15	149.23
20.01	Transplants	22,744	863	2.68	10,258	756	2.63	121.72	14.15
20.02	Anaesthetics	20,897	288	0.89	66,070	280	0.97	-68.37	2.86
20.03	Pain Management	19,983	511	1.58	14,085	715	2.49	41.87	-28.53
20.04	Developmental Disabilities	8,358	377	1.17	6,466	277	0.96	29.26	36.10
20.05	General Medicine	243,364	309	0.96	212,638	338	1.18	14.45	-8.58
20.06	General Practice and Primary Care	73,681	199	0.62	34,594	254	0.88	112.99	-21.65
20.07	General Surgery	191,988	280	0.87	200,661	248	0.86	-4.32	12.90
20.08	Genetics	1,056	261	0.81	1,890	632	2.2	-44.13	-58.70
20.09	Geriatric Medicine	10,613	355	1.1	16,346	313	1.09	-35.07	13.42
20.10	Haematology	61,074	631	1.96	45,507	582	2.03	34.21	8.42
20.11	Paediatric Medicine	97,329	349	1.08	98,278	332	1.16	-0.97	5.12
20.12	Paediatric Surgery	10,191	388	1.2	13,725	209	0.73	-25.75	85.65
20.13	Palliative Care	21,300	214	0.66	16,528	78	0.27	28.87	174.36
20.14	Epilepsy	5,288	330	1.02	1,244	321	1.12	325.08	2.80
20.15	Neurology	27,034	368	1.14	37,012	347	1.21	-26.96	6.05
20.16	Neurosurgery	17,697	391	1.21	32,074	355	1.23	-44.82	10.14
20.17	Ophthalmology	99,045	203	0.63	153,796	237	0.82	-35.60	-14.35
20.18	Ear, Nose and Throat (ENT)	61,982	262	0.81	82,589	213	0.74	-24.95	23.00
20.19	Respiratory	64,303	366	1.13	60,875	334	1.16	5.63	9.58
20.20	Respiratory - Cystic Fibrosis	5,081	1,443	4.48	4,113	1,217	4.24	23.54	18.57

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Outpatient Clinic Code	Description	Round 15			Round 14			Variation separations (%)	Variation average cost (%)
		Service Events	Avg cost	Cost weight	Service Events	Avg cost	Cost weight		
20.21	Anti coagulant Screening and Management	1	42	0.13	1,205	846	2.95	-99.92	-95.04
20.22	Cardiology	137,276	336	1.04	119,685	332	1.16	14.70	1.20
20.23	Cardiothoracic	10,494	296	0.92	7,924	375	1.31	32.43	-21.07
20.24	Vascular Surgery	25,305	335	1.04	30,624	294	1.02	-17.37	13.95
20.25	Gastroenterology	65,004	633	1.96	68,871	492	1.71	-5.61	28.66
20.26	Hepatobiliary	1,065	588	1.82	1,741	458	1.6	-38.83	28.38
20.27	Craniofacial	1,684	540	1.68	5,247	281	0.98	-67.91	92.17
20.28	Metabolic Bone	1,241	185	0.58	92	876	3.05	1248.91	-78.88
20.29	Orthopaedics	384,328	229	0.71	418,497	219	0.76	-8.16	4.57
20.30	Rheumatology	24,208	393	1.22	26,963	368	1.28	-10.22	6.79
20.31	Spinal	3,432	714	2.22	1,421	368	1.28	141.52	94.02
20.32	Breast	7,116	175	0.54	7,940	361	1.26	-10.38	-51.52
20.33	Dermatology	33,777	289	0.9	38,459	298	1.04	-12.17	-3.02
20.34	Endocrinology	38,018	446	1.38	60,637	350	1.22	-37.30	27.43
20.35	Nephrology	73,120	632	1.96	69,744	599	2.09	4.84	5.51
20.36	Urology	64,846	283	0.88	79,943	257	0.9	-18.88	10.12
20.38	Gynaecology	95,749	284	0.88	127,262	233	0.81	-24.76	21.89
20.39	Gynaecology Oncology	57,321	223	0.69	12,451	403	1.4	360.37	-44.67
20.40	Obstetrics	378,985	216	0.67	527,160	190	0.66	-28.11	13.68
20.41	Immunology	9,930	641	1.99	6,217	530	1.84	59.72	20.94
20.42	Medical Oncology (Consultation)	111,773	570	1.77	113,610	550	1.92	-1.62	3.64
20.43	Radiation Oncology (Consultation)	81,853	518	1.61	29,491	452	1.57	177.55	14.60
20.44	Infectious Diseases	24,253	565	1.75	39,105	821	2.86	-37.98	-31.18
20.45	Psychiatry	56,822	1,105	3.43	42,731	342	1.19	32.98	223.10
20.46	Plastic and Reconstructive Surgery	62,666	193	0.6	77,452	189	0.66	-19.09	2.12
20.47	Rehabilitation	15,448	733	2.27	13,028	712	2.48	18.58	2.95
20.48	Multidisciplinary Burns Clinic	1,747	797	2.47	1,054	371	1.29	65.75	114.82

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Outpatient Clinic Code	Description	Round 15			Round 14			Variation separations (%)	Variation average cost (%)
		Service Events	Avg cost	Cost weight	Service Events	Avg cost	Cost weight		
20.49	Geriatric Evaluation and Management (GEM)	19	222	0.69	752	786	2.74	-97.47	-71.76
20.50	Psychogeriatric	1,034	201	0.62	-	-	-	-	-
20.51	Sleep Disorders	6,812	702	2.18	6,173	577	2.01	10.35	21.66
30.01	General Imaging	150,944	242	0.75	110,613	373	1.3	36.46	-35.12
30.02	Medical Resonance Imaging (MRI)	12,107	765	2.37	-	-	-	-	-
30.03	Computerised Tomography (CT)	10,785	417	1.29	-	-	-	-	-
30.04	Nuclear Medicine	3,455	1,163	3.61	-	-	-	-	-
30.05	Pathology (Microbiology, Haematology, Biochemistry)	101,701	121	0.37	186,338	119	0.41	-45.42	1.68
30.06	Positron Emission Tomography (PET)	1,964	1,918	5.95	-	-	-	-	-
30.07	Mammography Screening	18,713	330	1.02	-	-	-	-	-
30.08	Clinical Measurement	69,719	354	1.1	59,200	286	1	17.77	23.78
40.01	Aboriginal Health Clinic	37	289	0.9	-	-	-	-	-
40.02	Aged Care Assessment	21,665	114	0.35	-	-	-	-	-
40.03	Aids and Appliances	3,211	176	0.55	3,162	135	0.47	1.55	30.37
40.04	Clinical Pharmacology	158,001	407	1.26	159,277	529	1.84	-0.80	-23.06
40.05	Hydrotherapy	239	348	1.08	-	-	-	-	-
40.06	Occupational Therapy	61,275	193	0.6	37,277	166	0.58	64.38	16.27
40.07	Pre-Admission and Pre-Anaesthesia	158,326	330	1.02	120,028	343	1.19	31.91	-3.79
40.08	Primary Health Care	372,986	278	0.86	2,778	358	1.25	13326.42	-22.35
40.09	Physiotherapy	182,405	189	0.59	172,100	254	0.88	5.99	-25.59
40.11	Social Work	37,887	294	0.91	43,088	164	0.57	-12.07	79.27
40.12	Rehabilitation	6,954	157	0.49	10,831	189	0.66	-35.80	-16.93
40.13	Wound Management	38,498	194	0.6	23,296	223	0.78	65.26	-13.00
40.14	Neuropsychology	1,728	528	1.64	755	565	1.97	128.87	-6.55
40.15	Optometry	2,351	747	2.32	179	118	0.41	1213.41	533.05
40.16	Orthoptics	5,090	97	0.3	4,684	102	0.35	8.67	-4.90

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Outpatient Clinic Code	Description	Round 15			Round 14			Variation separations (%)	Variation average cost (%)
		Service Events	Avg cost	Cost weight	Service Events	Avg cost	Cost weight		
40.17	Audiology	10,530	474	1.47	16,087	315	1.1	-34.54	50.48
40.18	Speech Pathology	21,818	220	0.68	23,681	174	0.6	-7.87	26.44
40.19	Asthma	991	689	2.14	395	257	0.89	150.89	168.09
40.21	Cardiac Rehabilitation	7,741	434	1.35	1,156	354	1.23	569.64	22.60
40.22	Stomal Therapy	6,275	213	0.66	1,835	387	1.35	241.96	-44.96
40.23	Nutrition/Dietetics	47,602	142	0.44	39,283	143	0.5	21.18	-0.70
40.24	Orthotics	4,846	246	0.76	3,021	367	1.28	60.41	-32.97
40.25	Podiatry	24,884	335	1.04	21,304	183	0.64	16.80	83.06
40.26	Diabetes	74,895	264	0.82	67,679	198	0.69	10.66	33.33
40.27	Family Planning	669	297	0.92	1,573	340	1.18	-57.47	-12.65
40.28	Midwifery	87,576	158	0.49	101,413	162	0.56	-13.64	-2.47
40.29	Psychology	11,253	475	1.47	6,445	243	0.85	74.60	95.47
40.30	Alcohol and Other Drugs	24,268	184	0.57	2,907	424	1.48	734.81	-56.60
40.31	Burns	9,880	200	0.62	3,695	226	0.79	167.39	-11.50
40.32	Continence	1,373	349	1.08	-	-	-	-	-
40.33	General Counselling	13,010	482	1.5	16,034	203	0.71	-18.86	137.44
40.34	Community Mental Health	251,227	166	0.51	321,187	114	0.4	-21.78	45.61
National	All clinics	5,268,539	322	1	4,725,781	287	1	11.49	12.20

2.7 Subacute summary results

The table below shows the number of separations, average cost per separation and average cost per day for the subacute groups of Rehabilitation, Psychogeriatric, Geriatric Evaluation and Management (GEM), Palliative care and Maintenance by jurisdiction in the public sector.

Table 21: Comparison of separations and expenditure for subacute patients, actual data

	<i>Rehab</i>			<i>Palliative care</i>			<i>GEM</i>			<i>Psychogeriatric</i>			<i>Maintenance</i>		
	<i>Seps</i>	<i>Avg cost/ sep (\$)</i>	<i>Avg cost/ day (\$)</i>	<i>Seps</i>	<i>Avg cost/ sep (\$)</i>	<i>Avg cost/ day (\$)</i>	<i>Seps</i>	<i>Avg cost/ sep (\$)</i>	<i>Avg cost/ day (\$)</i>	<i>Seps</i>	<i>Avg cost/ sep (\$)</i>	<i>Avg cost/ day (\$)</i>	<i>Seps</i>	<i>Avg cost/ sep (\$)</i>	<i>Avg cost/ day (\$)</i>
State / Territory															
NSW	10,068	19,616	825	10,550	5,092	256	128	11,354	612	94	28,900	523	622	13,786	484
VIC	10,342	16,151	799	3,601	8,932	778	11,398	14,459	698	-	-	-	141	15,120	538
QLD	18,635	10,090	946	6,364	9,579	1,170	2,060	18,189	1,017	574	13,803	1,063	5,059	18,581	1,001
SA	5,288	4,308	756	1,234	11,804	1,073	1,234	14,557	932	228	33,874	951	3,203	18,260	709
WA	8,275	14,437	844	885	10,396	1,051	786	6,302	815	527	40,366	1,162	1,005	16,233	1,012
Tas	1,026	19,539	898	202	22,589	1,933	132	24,351	744	1	10,806	1,801	339	13,258	595
NT	429	26,163	1,345	316	23,358	2,159	38	23,079	1,010	1	25,716	1,429	287	32,570	1,372
ACT	2,630	12,338	1,243	611	16,012	1,475	598	15,633	1,493	19	23,920	904	1,523	13,033	1,308
National	56,693	13,380	866	23,763	8,094	569	16,374	14,662	769	1,444	27,789	1,013	12,179	17,505	875

Note:

na – data not available at submission

np - not published for confidentiality reasons

3. Appendix A: List of participating hospitals

Public hospitals contributing data to Round 15 of the NHCDC

Hospital Name	Location	Status	Peer Group
ACT			
Calvary Hospital	Major Urban	Teaching	B1 - Large Major City
The Canberra Hospital	Major Urban	Teaching	A1 - Principal referral
NSW			
Armidale and New England Hospital	Non Major Urban	Non Teaching	C1 - Medium
Auburn District Hospital	Major Urban	Non Teaching	B1 - Large Major City
Bankstown/Lidcombe Hospital	Major Urban	Teaching	A1- Principal Referral
Bathurst Base Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Bateman's Bay District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Bega District Hospital	Non Major Urban	Non Teaching	C1 - Medium
Blacktown Hospital	Major Urban	Non Teaching	A1- Principal Referral
Blue Mountains DHS - Katoomba Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Belmont Hospital	Major Urban	Non Teaching	C1 - Medium
Ballina District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Bowral and District Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Broken Hill Base Hospital	Non Major Urban	Non Teaching	C1 - Medium
Bourke Street Health Service	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Bulli Hospital	Major Urban	Non Teaching	G - Sub Acute and Non Acute
Camden Hospital	Major Urban	Non Teaching	G - Sub Acute and Non Acute
Canterbury District Hospital	Major Urban	Non Teaching	B1 - Large Major City
Casino District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Cumberland Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Cessnock District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Campbelltown Hospital	Major Urban	Non Teaching	A1- Principal Referral
Coffs Harbour and District Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Coledale Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Concord Hospital	Major Urban	Teaching	A1- Principal Referral
Cowra District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Cooma District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
David Berry Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Deniliquin Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Dubbo Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Fairfield Hospital	Major Urban	Non Teaching	B1 - Large Major City
Forbes District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Grafton Health Service - Grafton Base	Non Major Urban	Non Teaching	B2 - Large Regional
Gosford District Hospital	Major Urban	Teaching	A1- Principal Referral
Goulburn Base Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Greenwich Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Griffith Base Hospital	Non Major Urban	Non Teaching	C1 - Medium
Gunnedah District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional

Hospital Name	Location	Status	Peer Group
Hornsby & Ku-ring-gai Hospital	Major Urban	Non Teaching	B1 - Large Major City
Inverell Dist Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
John Hunter Hospital	Major Urban	Teaching	A1- Principal Referral
Kempsey Hospital	Non Major Urban	Non Teaching	C1 - Medium
Kurri Kurri District Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Lismore Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Lithgow District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Liverpool Hospital	Major Urban	Teaching	A1- Principal Referral
Long Jetty Healthcare Centre	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Maitland Hospital	Non Major Urban	Non Teaching	B1 - Large Major City
Macksville and District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Manly District Hospital	Major Urban	Non Teaching	B1 - Large Major City
Mercy Health Service - Albury	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Macleay District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Mercy Care Centre, Young	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mount Druitt Hospital	Major Urban	Non Teaching	B1 - Large Major City
Moree District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Moruya District Hospital	Non Major Urban	Non Teaching	C1 - Medium
Mona Vale & District Hospital	Major Urban	Non Teaching	B1 - Large Major City
Manning River Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Mudgee District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Murwillumbah District Hospital	Non Major Urban	Non Teaching	C1 - Medium
Muswellbrook District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Nepean Hospital	Major Urban	Teaching	A1- Principal Referral
Neringah Home of Peace	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Narrabri Health Service	Non Major Urban	Non Teaching	D1 - Small Regional
Newcastle Mater Misericordiae Hospital	Major Urban	Non Teaching	B1 - Large Major City
Orange Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Parkes District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Port Kembla District Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Port Macquarie Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Prince Of Wales Hospital	Major Urban	Teaching	A1- Principal Referral
Queanbeyan District Hospital	Major Urban	Non Teaching	C2 - Medium Other
Rachel Forster Hospital	Major Urban	Teaching	C2 - Medium Other
Royal Hospital For Women	Major Urban	Teaching	A2 - Specialist Women's and Children's
Royal North Shore Hospital	Major Urban	Teaching	A1- Principal Referral
Royal Prince Alfred Hospital	Major Urban	Teaching	A1- Principal Referral
Royal Rehabilitation - Hospital units	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Ryde Hospital	Major Urban	Non Teaching	B1 - Large Major City
Sacred Heart Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Sydney Children's Hospital	Major Urban	Teaching	A2 - Specialist Women's and Children's
St. George Hospital	Major Urban	Teaching	A1- Principal Referral
Shellharbour Hospital	Major Urban	Non Teaching	B1 - Large Major City

Hospital Name	Location	Status	Peer Group
Shoalhaven and District Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Singleton District Hospital	Major Urban	Non Teaching	C2 - Medium Other
St Joseph's Hospital, Auburn	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Springwood Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Sutherland Hospital	Major Urban	Non Teaching	A1- Principal Referral
St. Vincent's Public Hospital	Major Urban	Teaching	A1- Principal Referral
Sydney Hospital & Sydney Eye Hospital	Major Urban	Non Teaching	C1 - Medium
Tamworth Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
The Children's Hospital At Westmead	Major Urban	Teaching	A2 - Specialist Women's and Children's
Tweed Heads District Hospital	Major Urban	Non Teaching	A1- Principal Referral
Milton - Ulladulla Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Wagga Wagga Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Wauchope District Memorial Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Wingham Memorial Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Westmead Hospital	Major Urban	Teaching	A1- Principal Referral
Wollongong Hospital	Major Urban	Teaching	A1- Principal Referral
Woy Woy Hospital	Major Urban	Non Teaching	G - Sub Acute and Non Acute
Wyong Hospital	Major Urban	Non Teaching	A1- Principal Referral
Victoria			
Alfred The	Major Urban	Teaching	A1- Principal Referral
The Royal Talbot Rehab Centre - Kew (Austin)	Major Urban	Teaching	G - Sub Acute and Non Acute
The Austin Heidelberg Repatriation Hospital	Major Urban	Teaching	C1 - Medium
Austin Hospital [Heidelberg]	Major Urban	Teaching	A1- Principal Referral
Geelong Hospital	Non Major Urban	Teaching	A1- Principal Referral
Bairnsdale Regional Health Service	Non Major Urban	Non Teaching	C1 - Medium
Caulfield General Medical Centre	Major Urban	Teaching	C2 - Medium Other
Ballarat Health Services [Base Campus]	Non Major Urban	Non Teaching	A1- Principal Referral
Broadmeadows Health Services	Major Urban	Non Teaching	C2 - Medium Other
Box Hill Hospital	Major Urban	Teaching	A1- Principal Referral
Casey Hospital	Major Urban	Teaching	A1- Principal Referral
Central Gippsland Health Service [Sale]	Non Major Urban	Non Teaching	B2 - Large Regional
Angliss Hospital	Major Urban	Teaching	B1 - Large Major City
Dandenong Hospital - Cranbourne Integ Care Centre	Major Urban	Teaching	C2 - Medium Other
Dandenong Campus	Major Urban	Teaching	A1- Principal Referral
Gippsland Southern Health Service	Non Major Urban	Non Teaching	C2 - Medium Other
Goulburn Valley Health [Shepparton]	Non Major Urban	Non Teaching	A1- Principal Referral
Goulburn Valley - Tatura	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Goulburn Valley - Waranga	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Healesville and District (Eastern Health)	Major Urban	Teaching	G - Sub Acute and Non Acute
Latrobe Regional Hospital [Traralgon]	Non Major Urban	Non Teaching	A1- Principal Referral
Mercy Public Hospital Inc.[East Melbourne]	Major Urban	Teaching	B1 - Large Major City
Mildura Base Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Monash Medical Centre [Clayton]	Major Urban	Teaching	A1- Principal Referral

Hospital Name	Location	Status	Peer Group
Kingston Centre - Cheltenham (Monash Med Centre)	Major Urban	Teaching	G - Sub Acute and Non Acute
Moorabbin - Monash Medical Centre	Major Urban	Teaching	B1 - Large Major City
West Gippsland Healthcare Group [Warragul]	Non Major Urban	Non Teaching	B2 - Large Regional
Maroondah Hospital [East Ringwood]	Major Urban	Teaching	A1- Principal Referral
Mercy Public Hospital Inc.[Werribee]	Major Urban	Teaching	B1 - Large Major City
Peter James Centre, The	Major Urban	Teaching	C2 - Medium Other
Peter Maccallum Cancer Institute	Major Urban	Teaching	B1 - Large Major City
Orygen Inpatient Unit - Footscray (RMH MHS)	Major Urban	Teaching	G - Sub Acute and Non Acute
Royal Victorian Eye & Ear Hospital, The	Major Urban	Teaching	B1 - Large Major City
Royal Women's Hospital [Carlton]	Major Urban	Teaching	A2 - Specialist Women's and Children's
Sandringham & District Memorial Hospital	Major Urban	Teaching	B1 - Large Major City
Royal Children's Hospital [Parkville]	Major Urban	Teaching	A2 - Specialist Women's and Children's
Royal Melbourne Hospital [Parkville]	Major Urban	Teaching	A1- Principal Referral
Royal Park Campus	Major Urban	Teaching	G - Sub Acute and Non Acute
Sunshine Hospital	Major Urban	Teaching	A1- Principal Referral
St Vincent's Hospital [Fitzroy]	Major Urban	Teaching	A1- Principal Referral
Northern Hospital The [Epping]	Major Urban	Non Teaching	A1- Principal Referral
Northeast Health Wangaratta	Non Major Urban	Non Teaching	B2 - Large Regional
Western Hospital [Footscray]	Major Urban	Teaching	A1- Principal Referral
Wonthaggi District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Wimmera Base Hospital [Horsham]	Non Major Urban	Non Teaching	B2 - Large Regional
Wodonga Regional Health Service	Non Major Urban	Non Teaching	B2 - Large Regional
South West Healthcare [Warrnambool]	Non Major Urban	Non Teaching	B2 - Large Regional
Williamstown Hospital	Major Urban	Teaching	C1 - Medium
Swan Hill District Hospital [Swan Hill]	Non Major Urban	Non Teaching	C1 - Medium
Kyneton District Health Service	Non Major Urban	Non Teaching	C2 - Medium Other
Benalla & District Memorial Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
East Wimmera Health Service	Non Major Urban	Non Teaching	D1 - Small Regional
Colac Community Health Services	Non Major Urban	Non Teaching	C2 - Medium Other
Kyabram & District Memorial Community Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Mt Alexander Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Maryborough District Health Service	Non Major Urban	Non Teaching	C2 - Medium Other
Seymour District Memorial Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Queensland			
Atherton Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Ayr Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Babinda Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Bamaga Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Beaudesert Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Baillie Henderson Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Biggenden Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Biloela Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Biggenden Multi Purpose Health Service	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute

Hospital Name	Location	Status	Peer Group
Boonah Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Bundaberg Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Bowen Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Caboolture Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Caloundra Hospital	Non Major Urban	Non Teaching	C1 - Medium
Cairns Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Cherbourg Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Childers Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Chillagoe Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Chinchilla Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Clermont Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Collinsville Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Childers Multi Purpose Health Service	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Cooktown Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Charters Towers Rehabilitation Unit	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Croydon Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Charters Towers Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Cairns Private Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Dalby Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Dimbulah Outpatients Clinic	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Dysart Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Ellen Barron Centre	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Eventide Charters Towers	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Eidsvold Multi Purpose Health Service	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Eidsvold Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Emerald Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Esk Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Forsayth Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gatton Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gayndah Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Georgetown Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gin Gin Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Gladstone Hospital	Non Major Urban	Non Teaching	C1 - Medium
GLENMORGAN OUTPATIENTS CLINIC	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gold Coast Hospital	Major Urban	Non Teaching	A1- Principal Referral
Goondiwindi Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gordonvale Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Gympie Hospital	Non Major Urban	Non Teaching	C1 - Medium
Halwyn Centre Ihu	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Herberton Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Hervey Bay Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Home Hill Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Hughenden Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute

Hospital Name	Location	Status	Peer Group
Inglewood	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Ingham Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Innisfail Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Ipswich Hospital	Major Urban	Non Teaching	A1- Principal Referral
Jandowae Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Kingaroy Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Kilcoy Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Kirwan Rehabilitation Unit	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Laidley Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Logan Hospital	Major Urban	Non Teaching	A1- Principal Referral
Mackay Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Magnetic Island Health Service Centre	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Maleny Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Maryborough Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Mater Adult Hospital	Major Urban	Teaching	A1- Principal Referral
Mater Children's Hospital	Major Urban	Teaching	A2 - Specialist Women's and Children's
Mareeba District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
MEANDARRA OUTPATIENTS CLINIC	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mount Garnet Outpatients Clinic	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Miles Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Millmerran Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mater Mother's Hospital	Major Urban	Teaching	A2 - Specialist Women's and Children's
MILLAA MILLAA OUTPATIENTS CLINIC	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Moonie Outpatients Clinic	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Metro North Transition Care Brighton	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Moranbah Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Malanda Outpatients Clinic	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Monto Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Mossman Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mary Rose Centre	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mount Perry Health Centre	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mundubbera Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Mundubbera Multi Purpose Health Service	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Murgon Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Nambour Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Nanango Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Oakey Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Palm Island Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
The Prince Charles Hospital	Major Urban	Teaching	A1- Principal Referral
Princess Alexandra Hospital	Major Urban	Teaching	A1- Principal Referral
Proserpine Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Queen Elizabeth II Jubilee Hospital	Major Urban	Non Teaching	B1 - Large Major City
Ravenshoe Outpatients Clinic	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute

Hospital Name	Location	Status	Peer Group
Royal Brisbane Hospital	Major Urban	Teaching	A1- Principal Referral
Royal Children's Hospital	Major Urban	Teaching	A2 - Specialist Women's and Children's
Redland Hospital	Major Urban	Non Teaching	B1 - Large Major City
Redcliffe Hospital	Major Urban	Non Teaching	A1- Principal Referral
Richmond Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Rockhampton Base Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Sarina Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Southern Ahs Trans Care Program-Gld Cst	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
STANTHORPE HOSPITAL	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Tara Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Texas Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Toowoomba Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Townsville General Hospital	Major Urban	Teaching	A1- Principal Referral
Tully Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Wandoan Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Warwick Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Wide Bay Transition Care	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Wynnum Hospital	Major Urban	Non Teaching	G - Sub Acute and Non Acute
THE PARK CENTRE FOR MENTAL HEALTH	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Wondai Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Yeppoon Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Yarrabah Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
SA			
Angaston Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Bordertown Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Ceduna Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Clare Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Crystal Brook Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Central Yorke Peninsula Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Flinders Medical Centre Hospital	Major Urban	Teaching	A1- Principal Referral
Gawler Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Gumeracha Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Jamestown Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Kangaroo Island Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Kapunda Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Lyell Mcewin Health Service Hospital	Major Urban	Teaching	A1- Principal Referral
Loxton Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Millicent Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Mt Barker Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Mt Gambier Hospital	Non Major Urban	Non Teaching	C1 - Medium
Mount Pleasant Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Murray Bridge Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Naracoorte Hospital	Non Major Urban	Non Teaching	C2 - Medium Other

Hospital Name	Location	Status	Peer Group
Noalunga Hospital	Major Urban	Non Teaching	C1 - Medium
Northern Yorke Pen Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Penola Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Pt Augusta Hospital	Non Major Urban	Non Teaching	C1 - Medium
Pt Lincoln Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Pt Pirie Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Royal Adelaide Hospital	Major Urban	Teaching	A1- Principal Referral
Repatriation General Hospital	Major Urban	Teaching	B1 - Large Major City
Riverland Berri	Non Major Urban	Non Teaching	C2 - Medium Other
Baramba District Health Service	Non Major Urban	Non Teaching	D1 - Small Regional
Renmark & Paringa District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
South Coast Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Southern Yorke Pen Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Strathalbyn Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Tanunda Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
The Queen Elizabeth Hospital	Major Urban	Teaching	A1- Principal Referral
Waikerie Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Women's & Children's Hospital	Major Urban	Teaching	A2 - Specialist Women's and Children's
Whyalla Hospital	Non Major Urban	Non Teaching	C1 - Medium
WA			
Albany Regional Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Armadale/Kelmscott District Memorial Hospital	Major Urban	Non Teaching	B1 - Large Major City
Bentley Hospital	Major Urban	Non Teaching	C1 - Medium
Bunbury Regional Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Broome District Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Busselton District Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Carnarvon Regional Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Collie District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Derby Regional Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Esperance District Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Fremantle Hospital	Major Urban	Teaching	A1- Principal Referral
Geraldton Regional Hospital	Non Major Urban	Non Teaching	C1 - Medium
Kalgoorlie Regional Hospital	Non Major Urban	Non Teaching	C1 - Medium
Katanning District Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Kalamunda Community District Hospital	Major Urban	Non Teaching	G - Sub Acute and Non Acute
King Edward Memorial Hospital For Women	Major Urban	Teaching	A2 - Specialist Women's and Children's
Kununurra District Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Moora District Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Merredin District Hospital	Non Major Urban	Non Teaching	G - Sub Acute and Non Acute
Margaret River District Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Narrogin Regional Hospital	Non Major Urban	Non Teaching	C2 - Medium Other
Newman District Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Nickol Bay Hospital	Non Major Urban	Non Teaching	D3 - Small Remote

Hospital Name	Location	Status	Peer Group
Northam Regional Hospital	Non Major Urban	Non Teaching	D1 - Small Regional
Osborne Park Hospital	Major Urban	Non Teaching	C1 - Medium
Port Hedland Regional Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Princess Margaret Hospital For Children	Major Urban	Teaching	A2 - Specialist Women's and Children's
Rockingham - Kwinana District Hospital	Non Major Urban	Non Teaching	C1 - Medium
Royal Perth Hospital	Major Urban	Teaching	A1- Principal Referral
Sir Charles Gairdner Hospital	Major Urban	Teaching	A1- Principal Referral
Swan Districts Hospital	Major Urban	Non Teaching	B1 - Large Major City
Warren District Hospital (Manjimup)	Non Major Urban	Non Teaching	D1 - Small Regional
TAS			
Launceston General Hospital	Major Urban	Teaching	A1- Principal Referral
North West Regional Hospital	Non Major Urban	Non Teaching	B2 - Large Regional
Royal Hobart Hospital	Major Urban	Teaching	A1- Principal Referral
NT			
Alice Springs Hospital	Non Major Urban	Non Teaching	A1- Principal Referral
Gove Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Katherine Hospital	Non Major Urban	Non Teaching	D3 - Small Remote
Royal Darwin Hospital	Major Urban	Teaching	A1- Principal Referral
Tennant Creek Hospital	Non Major Urban	Non Teaching	D3 - Small Remote

4. Appendix B: AIHW peer group classification for Australian public hospitals

The Public Hospital Peer Group Classification was developed by the AIHW in 1999 to explain variability in the average cost per casemix-adjusted separation. This allows for more meaningful analysis of public hospital data than comparison at the jurisdiction level would allow.

The classification also groups public hospitals into similar groups in terms of their range of admitted patient activities, and geographical location. The peer groups are allocated names that are broadly descriptive of the types of hospitals included in each category, as outlined below.

Peer Group	Peer Group Description	Peer Group Code
Principal referral	Principal referral hospitals are major city hospitals with more than 20,000 and regional hospitals with more than 16,000 acute (casemix-adjusted) separations per year.	A1
Specialist women's & children's	Specialist hospitals are specialised acute womens' and childrens' hospitals with more than 10,000 (casemix-adjusted) separations per year.	A2
Large major city	Large metropolitan hospitals are major city acute hospitals with more than 10,000 (casemix-adjusted) separations per year.	B1
Large regional	Large rural hospitals are regional acute hospitals with more than 8,000 and remote acute hospitals with more than 5,000 (casemix-adjusted) separations per year	B2
Medium	Medium acute hospitals in regional and major city areas treating between 5,000 and 10,000 acute (casemix-adjusted) separations per year	C1
Medium Other	Medium acute hospitals in regional and major city areas treating between 2,000 and 5,000 acute (casemix-adjusted) separations per year, and acute hospitals treating less than 2,000 (casemix-adjusted) separations per year but with more than 2,000 separations per year	C2
Small regional	Small non-acute hospitals, treating less than 2,000 (casemix-adjusted) separations per year and with more than 40 per cent non-acute and outlier patient days of total patient days.	D1
Small remote	Small remote hospitals treating less than 5,000 acute (casemix-adjusted) separations but which are not multi-purpose and not small non-acute. Most have less than 2,000 separations per year	D3
Subacute and non-acute	Small non-acute hospitals, treating less than 2,000 (casemix-adjusted) separations per year and with more than 40 per cent non-acute and outlier patient days of total patient days.	G

5. Appendix C: Glossary

Actual data	<p>The hospital data received by the NHCDC that is used as the sample data to produce national average costs. Actual data (or sample data) is used in the estimation process as defined by the NHCDC (see Estimated).</p> <p>Note: As actual data is a sample only; caution should be taken when comparing this data as it is not necessarily representative of the population.</p>
Acuity adjusted cost	<p>An acuity adjusted cost is described in Part 4 Notes.</p>
Acute inpatient	<p>An admitted patient whose illness is acute, and has one or more problems which require short-term health care in an admitted patient setting.</p> <p>In the Casemix context, episodes of care which can appropriately be classified by AR-DRG, and which do not meet the definitions for rehabilitation, palliation, or non-acute admitted patient.</p>
Admitted patient	<p>A patient who has been formally admitted to a hospital.</p> <p>Sub-categories of overnight stay and same-day are defined. Further, admitted patients are categorised into acute, rehabilitation, palliation, and non-acute.</p>
Adjacent DRGs	<p>Adjacent DRGs consist of one or more DRGs generally defined by the same diagnosis or procedure code list.</p> <p>DRGs within adjacent DRGs have differing levels of resource consumption and are partitioned on the basis of several factors, including complicating diagnoses/procedures, age and/or the patient clinical complexity level (PCCL).</p> <p>The fourth character of a DRG code represents the severity of a DRG. A severity code of "A" indicates the highest consumption of resources; a severity code of "B" indicates the next highest consumption of resources; code "C" indicates the next highest consumption of resources; and severity code "D" indicates the least consumption of resources within a DRG.</p> <p>A severity code of "Z" indicates that there is no split for the DRG. Therefore the adjacent DRG data for DRG with a severity code of "Z" has no change to the cost by volume.</p>
ALOS	<p>See average length of stay.</p>
AR-DRG	<p>Australian Refined Diagnosis Related Groups.</p> <p>A variant of the DRG system designed specifically for use in Australia. The national standard. The current version in use is Version 6.0x, which recognises 708 categories of DRG.</p>

Average cost	<p>In the costing context, the total cost of production divided by the number of products in a period. Also known as full average cost.</p> <p>In contrast, marginal cost is the estimated cost of producing one additional unit of output.</p>
Average Length of Stay	The average (or mean) number of days of stay in hospital for a group of patients. Abbreviated to ALOS.
Care type	The overall nature of a clinical service provided to an admitted patient during an episode of admitted care (e.g. acute, rehabilitation, palliative, psychogeriatric, maintenance, newborn and other admitted patient care).
Casemix-adjusted separation	See weighted separation
Clinical costing	See patient costing. A term frequently used in Australia to mean a variant of patient costing.
COMBO	The computer software package which supports this product costing study.
Component costs	See cost buckets
Cost buckets	Also known as 'cost components', cost buckets determine the detail of the reporting framework for NHCDC products. For a complete list of the cost buckets and what they include and exclude, see the Definitions chapter in the <i>Hospital Reference Manual</i> .
Cost centre (CC)	An accounting entity where all costs associated with a particular type of activity can be recorded. Sometimes abbreviated to CC.
Cost modelling (CM)	A popular term for a type of product costing which makes minimal use of measures of resource consumption by individual patients, and aims only to estimate mean costs for classes of patients. CM sites are hospitals that 'model' their cost centres using pre-determined statistics and 'weights' in order to apportion their costs across product groups and types. This is also known as 'top down' costing because you start with an aggregate cost and apportion it across cost centres.
Cost weight	A measure of the average cost of an AR-DRG, compared with the average cost of a reference AR-DRG. Usually the average cost across all AR-DRGs is chosen as the reference value, and given a weight of 1.
Critical Care Unit	A patient care area in a hospital which is staffed and equipped to handle patients at particular risk due to high severity of illness. Includes intensive care units, neonatal intensive care units and coronary care units.

Direct cost centre	<p>In the product costing context, cost centres are generally classified as either overhead or direct product. The latter type is also known as 'Direct Cost Centres'.</p> <p>Direct products are those able to be delivered directly to the customer. The main types of direct products are patient episodes of care. Direct product cost centres therefore include all those which provide their services to patients rather than to other cost centres (as is the case for overhead cost centres). Examples are nursing, emergency department, and imaging.</p> <p>Other direct products include research and teaching.</p>
Estimated data	<p>The total costs are estimated by, increasing within each stratum, the sample of hospitals data to the estimated volumes for the total population. The public stratum within the NHCDC is defined by state/location/separation.</p> <p>The aim is to minimise any bias in the collection caused by the sample of the participating hospitals, by weighting the sample results according to the known characteristics of the population.</p>
Formal separation	<p>The administrative process by which a hospital records the cessation of treatment and/or accommodation of a patient.</p>
Grouper	<p>An analytical tool (usually a computer program) which supports the assignment of patient care episodes to Casemix classes.</p>
ICD-10-AM	<p>See International Classification of Diseases, 10th Revision, Australian Modification.</p>
ICU	<p>Intensive Care Unit. See Critical Care Unit.</p>
Indirect costs	<p>Used in several ways to designate costs which are not easily able to be related to specific products.</p> <p>In the standard product costing method, costs which are passed to cost centres from overhead cost centres.</p>
Inpatient	<p>See admitted patient.</p>
Intensive Care Unit (ICU)	<p>See Critical Care Unit.</p>
Intermediate product	<p>In product costing, a product which is created as a step towards creating something able to be delivered to the client. It is of limited use to the client by itself.</p> <p>In the health care context, it includes such products as a drug which is manufactured in the hospital pharmacy, and a pathology result which is produced in the microbiology laboratory.</p>

A modification of the international standard classification of diagnoses and procedures (ICD–9), which was developed by the US government. It has been clinically modified for morbidity coding, and especially for use in acute care.

Line item	A set of costs defined by input type (rather than type of function), and which define resource types being used by a cost centre. For example, they might be drugs, prostheses, or nursing salaries. (In Round 2 of the NHCDC, this term was replaced by NHCDC line item.)
Length of stay (LOS)	The number of days an inpatient spends in hospital. It is calculated in different ways for different purposes. The most common involves subtracting the admission date from the discharge date.
Overhead costs	<p>In the product costing context, cost centres are generally classified as either overhead or direct products (patient care).</p> <p>An overhead cost centre provides its services to other cost centres rather than directly to patients (as is the case for patient care cost centres). Examples are building costs and linen services.</p>
Patient costing (PC)	A generic term for a type of product costing which makes use of measures of resource consumption by individual patients, and aims to estimate costs for each individual patient care episode. PC sites are hospitals that are able to calculate the cost of care at the patient level. Generally, this is done using actual patient level consumption data. The PC method of costing is also known as a 'bottom up' method of costing because cost aggregates are devised from individual items of patient consumption.
Peer Group	A classification assigning public hospitals into broadly similar groups in terms of their range of admitted patient activity and their geographical location. See Appendix B.
Product costing	A process whereby the costs of inputs (supplies, labour, etc) are allocated among the products (patient care episodes by type, research, teaching, etc).
Relative value unit (RVU)	<p>A measure of the relative value of one product compared with all other products of a similar type.</p> <p>In product costing, it is most commonly used to indicate the cost of one intermediate product relative to other products of the same type (such as one imaging procedure compared with the other imaging procedures).</p>

Same-day patient	A patient admitted to hospital who arrives and departs on the same-day. In Australia, same-day patients are a subset of admitted patients.
Sample data	See Actual data
Service weights	The relative costs of a service for each type of patient care product. For example, the relative costs of imaging or nursing across all AR-DRGs. Also known as service weights.
Separations	The NHDD version 10.0 defines a separation as “the process by which an episode of care for an admitted patient ceases. A separation may be formal or statistical.
Statistical separation	The administrative process by which a hospital records the cessation of an episode of care for a patient within the one hospital stay”
Units of service	In the context of the collection, the number of units of consumption of a particular component service during an individual episode of care. Reported in File CDCB2 by Group D (patient costing) sites.
Weighted separation	<p>A weighted separation (or ‘casemix-adjusted separation’) is an indicator of the efficiency of public acute care hospitals. It is a measure of the average recurrent expense for each admitted patient, adjusted using AR-DRG cost weights for the resources expected to be used for each separation. The formula to calculate weighted separations is: $WSeps = \sum_{i=1}^k n_i \times CW_i$ where:</p> <p>$WSeps$ is the weighted separations</p> <p>n_i is the number of separations in the <i>ith</i> DRG</p> <p>k is the number of DRGs (in ARDRG v5.2 it is 665)</p> <p>CW_i is the cost weight for the <i>ith</i> DRG</p>

6. References

[Commonwealth of Australia 2011, Australian Hospital Patient Costing Standards Version 2.0](http://www.ihsa.gov.au/internet/ihsa/publishing.nsf/Content/Australia-Hospital-Patient-Costing-Standards.htm), Department of Health and Ageing, Canberra,
(<http://www.ihsa.gov.au/internet/ihsa/publishing.nsf/Content/Australia-Hospital-Patient-Costing-Standards.htm>)

[Independent Hospital Pricing Authority 2013, Codes for AR-DRG \(Version 6.0x\), Emergency Department URG \(Version 1.2\) and UDG \(Version 1.2\), Outpatient Tier 2 Clinics \(Version 1.2\): ABF Price Model Reference Classifications](http://www.ihsa.gov.au/internet/ihsa/publishing.nsf/Content/ABF-Price-Model-Reference-Classifications-for-2012-13), IHPA, Sydney
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