

Episode of care—inter-hospital contracted patient status, code N

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Episode of care—inter-hospital contracted patient status, code N

Identifying and definitional attributes

| | |
|------------------------------|---|
| Metadata item type: | Data Element |
| Short name: | Inter-hospital contracted patient |
| METEOR identifier: | 647105 |
| Registration status: | Health , Standard 05/10/2016 |
| Definition: | An episode of care for an admitted patient whose treatment and/or care is provided under an arrangement between a hospital purchaser of hospital care (contracting hospital) and a provider of an admitted service (contracted hospital), and for which the activity is recorded by both hospitals, as represented by a code. |
| Context: | Admitted patient care: To identify patients receiving services that have been contracted between hospitals. This metadata item is used to eliminate potential double-counting of hospital activity in the analysis of patterns of health care delivery and funding and epidemiological studies. |
| Data Element Concept: | Episode of care—inter-hospital contracted patient status |
| Value Domain: | Inter-hospital contracted patient sector code N |

Value domain attributes

Representational attributes

| | | |
|----------------------------------|--------------|--|
| Representation class: | Code | |
| Data type: | Number | |
| Format: | N | |
| Maximum character length: | 1 | |
| | Value | Meaning |
| Permissible values: | | Contracted (destination) hospital |
| | 1 | Inter-hospital contracted patient from public sector hospital |
| | 2 | Inter-hospital contracted patient from private sector hospital |
| | | Contracting (originating) hospital |
| | 3 | Inter-hospital contracted patient to public sector hospital |
| | 4 | Inter-hospital contracted patient to private sector hospital |
| | 5 | Not inter-hospital contracted |
| Supplementary values: | 9 | Not stated |

Data element attributes

Collection and usage attributes

Guide for use:

Hospital activity provided under contract is to be reported by both the contracting (originating) hospital and by the contracted (destination) hospital, where the activity is recorded by both hospitals.

A specific arrangement should apply (either written or verbal) whereby one hospital contracts with another hospital for the provision of specific services. The arrangement may be between any combination of hospital; for example, public to public, public to private, private to private, or private to public.

This data element is designed to enable elimination of double counting of episodes of admitted patient care in national data compiled as per the Admitted patient care National Minimum Data Set. As such, contracted arrangements where the patient is only admitted to one hospital (i.e. contract type 4 where contract role=A) are not considered to be inter-hospital contracted care for the purposes of this data element. In contracted arrangements where the patient is admitted to both hospitals, provide data according to the guide for use below. In contracted arrangements where the patient is only admitted to one hospital, use code 5.

This data element item will be derived, using data elements [Hospital—contract role, code A](#) and [Hospital—contract type, code N](#) as follows.

If Contract role = B (Hospital B, that is, the provider of the hospital service; contracted hospital), and Contract type = 2, 3, or 5 (that is, a hospital (Hospital A) purchases the activity, rather than a health authority or other external purchaser, and admits the patient for all or part of the episode of care, and/or records the contracted activity within the patient's record for the episode of care). Then record a value of 1, if Hospital A is a public hospital or record a value of 2, if Hospital A is a private hospital.

If Contract role = A (Hospital A, that is, the hospital purchasing the activity; contracting hospital), and Contract type = 2, 3, or 5 (that is, the reporting hospital purchases the activity and admits the patient for all or part of the episode of care, and/or records the contracted activity within the patient's record for the episode of care). Then record a value of 3, if Hospital B is a public hospital or record a value of 4, if Hospital B is a private hospital.

Collection methods:

All services provided at both the originating and destination hospitals should be recorded and reported by both hospitals. The destination hospital should record the admission as an 'Inter-hospital contracted patient' so that these services can be identified in the various statistics produced about hospital activity.

Relational attributes

Related metadata references:

Supersedes [Episode of care—inter-hospital contracted patient status, code N](#) [Health](#), Superseded 05/10/2016

Is formed using [Hospital—contract role, code A](#) [Health](#), Standard 01/03/2005

Is formed using [Hospital—contract type, code N](#) [Health](#), Standard 01/03/2005

Implementation in Data Set Specifications: [Admitted patient care NMDS 2017-18](#)
[Health](#), Superseded 25/01/2018
Implementation start date: 01/07/2017
Implementation end date: 30/06/2018

[Admitted patient care NMDS 2018-19](#)
[Health](#), Superseded 12/12/2018
Implementation start date: 01/07/2018
Implementation end date: 30/06/2019

[Admitted patient care NMDS 2019-20](#)
[Health](#), Superseded 18/12/2019
Implementation start date: 01/07/2019
Implementation end date: 30/06/2020

[Admitted patient care NMDS 2020-21](#)
[Health](#), Superseded 05/02/2021
Implementation start date: 01/07/2020
Implementation end date: 30/06/2021

[Admitted patient care NMDS 2021-22](#)
[Health](#), Superseded 20/10/2021
Implementation start date: 01/07/2021
Implementation end date: 30/06/2022

[Admitted patient care NMDS 2022-23](#)
[Health](#), Superseded 20/12/2022
Implementation start date: 01/07/2022
Implementation end date: 30/06/2023

[Admitted patient care NMDS 2023-24](#)
[Health](#), Superseded 06/12/2023
Implementation start date: 01/07/2023
Implementation end date: 30/06/2024

[Admitted patient care NMDS 2024-25](#)
[Health](#), Standard 06/12/2023
Implementation start date: 01/07/2024
Implementation end date: 30/06/2025