

# National Healthcare Agreement: PI 13- Proportion of children with 4th year developmental health check, 2011 QS

## Identifying and definitional attributes

Metadata item type:	Quality Statement
METEOR identifier:	447985
Registration status:	<ul style="list-style-type: none"><li><a href="#">Health</a>, Superseded 04/12/2012</li></ul>

## Relational attributes

Indicators linked to this Quality statement:	<a href="#">National Healthcare Agreement: PI 13-Proportion of children with 4th year developmental health check, 2011 Health</a> , Superseded 30/10/2011
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## Data quality

Quality statement summary:	<ul style="list-style-type: none"><li>The MBS items included in this indicator do not cover all developmental health check activity such as that conducted through State and Territory early childhood health assessments in preschools and community health centres.</li><li>The analyses by state/territory, remoteness and SEIFA are based on postcode of residence of the client as recorded by Medicare Australia at the date the last service was received in the reference period. As clients may receive services in locations other than where they live, this data does not necessarily reflect the location in which services were received.</li><li>No adjustment was made to this indicator to account for under-identification of Indigenous children in Medicare data.</li></ul>
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<b>Institutional environment:</b>	<p>The MBS claims data are an administrative by-product of Medicare Australia's administration of the Medicare fee-for-service payment systems.</p> <p>Medicare Australia collects the MBS data under the Medicare Australia Act 1973. This data is then regularly provided to the Department of Health and Ageing.</p> <p>The indicator was calculated by the Department of Health and Ageing, using a denominator supplied by the AIHW. The Department of Health and Ageing drafted the initial data quality statement (including providing input about the methodology used to extract the data and any data anomalies) and then further comments were added by the AIHW, in consultation with the Department. The AIHW did not have the relevant datasets required to independently verify the data tables for this indicator. For further information see the AIHW website.</p>
<b>Timeliness:</b>	<p>MBS claims data are available within 14 days of the end of a month. The indicator relates to all claims processed in the 2009 10 financial year.</p>
<b>Accessibility:</b>	<p>Information is available for MBS Claims data from:</p> <p><a href="http://www.health.gov.au/internet/mbsonline/publishing.nsf/content/medicare-benefits-schedule-mbs-1">http://www.health.gov.au/internet/mbsonline/publishing.nsf/content/medicare-benefits-schedule-mbs-1</a></p>
<b>Interpretability:</b>	<p>Medicare claims statistics are available at:</p> <p><a href="http://www.health.gov.au/internet/main/publishing.nsf/Content/Medicare+Statistics-1">http://www.health.gov.au/internet/main/publishing.nsf/Content/Medicare+Statistics-1</a>  <a href="https://www.medicareaustralia.gov.au/statistics/mbs_item.shtml">https://www.medicareaustralia.gov.au/statistics/mbs_item.shtml</a></p>
<b>Relevance:</b>	<p>The measure relates to specific identified Medicare services for which claims data are available. Medicare data allows disaggregation by the demographics of the person and area (based on postcode) using data held on the Medicare system.</p> <p>The MBS items included in this indicator do not cover all developmental health check activity such as that conducted through State and Territory early childhood health assessments in preschools and community health centres.</p> <p>The figures for the Northern Territory exclude children receiving Northern Territory Emergency Response Child Health Checks.</p> <p>Data for total children was calculated using the total number of patients aged 3 to 5 at the time of service with MBS Items 701, 703, 705, 707, 708, 709, 711, 715 or 10986.</p> <p>Data for Indigenous children included only those children receiving MBS Items 708 and 715.</p> <p>The analyses by state/territory, remoteness and SEIFA are based on postcode of residence of the client as recorded by Medicare Australia at the date the last service was received in the reference period. As clients may receive services in locations other than where they live, this data does not necessarily reflect the location in which services were received. Further, all MBS services received by clients who moved residences during the reference period are allocated to the postcode of their address at the date the last service was received.</p>

**Accuracy:** As with any administrative system a small degree of error may be present in the data captured.  
Medicare claims data used for statistical purposes is based on enrolment postcode of the patient. This postcode may not reflect the current postcode of the patient if an address change has not been notified to Medicare Australia.

Financial-year data are based on the date on which a Medicare claim was processed by Medicare Australia, not when the service was rendered. The use of data based on when the claim was processed, rather than when the service was rendered, produces little difference in the total number of persons included in the numerator for the reference period.

Children who received more than one type of health check are counted once only in the calculations for this indicator. Where an Indigenous child received more than one Aboriginal and Torres Strait Islander Peoples Health Assessment during the reference period, the child was only counted once in the numerator.

Medicare data presented for Aboriginal and Torres Strait Islander Peoples Health Assessments have not been adjusted to account for known under-identification of Indigenous status in MBS data.

Cells have been suppressed where rates are highly volatile (for example, the denominator is very small), or data quality is known to be of insufficient quality (for example, where Indigenous identification rates are low).

**Coherence:** The following changes to MBS items occurred on 1 May 2010, but are unlikely to impact time-series analysis.

As of 1 May 2010, the Healthy Kids Check Item 709 has been replaced with four new MBS health assessment items (based on time and complexity) that cover all ages — Items 701 (brief), 703 (standard), 705 (long) and 707 (prolonged).

Under these new reporting arrangements it is possible that health assessments for refugees and humanitarian entrants and for people with an intellectual disability (previously claimed under items 714, 718 or 719 and now claimed under the new MBS health assessment items) have been counted. This is likely to have little impact on the totals reported as the usage rates for these health assessments are low to extremely low for children aged 3–5 years.

A Healthy Kids Check provided by a practice nurse or a registered Aboriginal health worker on behalf of a medical practitioner (previously item 711) has been retained under a new MBS item number – 10986. The change to the MBS item number does not impact time series analysis.

The Aboriginal and Torres Strait Islander Child Health Check (previously item 708) has been replaced by the Aboriginal and Torres Strait Islander People's Health Assessment (715) that has no designated time or complexity requirements and covers all ages. The change to the MBS item number does not impact time series analysis.

## Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

## Relational attributes

**Related metadata references:** Supersedes [National Healthcare Agreement: P13-Proportion of children with 4th year developmental health checks, 2010 QS](#)

- [Health](#), Superseded 08/06/2011

Has been superseded by [National Healthcare Agreement: P1 13-Proportion of children with 4th year developmental health check, 2012 QS](#)

- [Health](#), Retired 14/01/2015

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