# National Health Performance Authority, Healthy Communities: Expenditure on specialist attendances, 2012–13

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# National Health Performance Authority, Healthy Communities: Expenditure on specialist attendances, 2012–13

## Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Expenditure on specialist attendances, 2012–13
METEOR identifier:	547958
Registration status:	National Health Performance Authority (retired), Retired 01/07/2016
Description:	The average expenditure on non-hospital specialist attendances per person in a year.
Indicator set:	National Health Performance Authority: Healthy Communities: 2011– National Health Performance Authority (retired), Retired 01/07/2016

### Collection and usage attributes

Population group age from:	All ages
Computation description:	Average Medicare benefits expenditure per person for non-hospital specialist attendances.
	Attendances in this indicator are non-hospital specialist attendances.
	Specialist attendances are Medicare benefit funded referred patient/doctor encounters, such as visits, consultations and attendances (including video conferencing), involving medical practitioners who have been recognised as specialists or consultant physicians for Medicare benefits purposes.
	Specialist attendances comprise all items in Broad Type of Services Group 'C', as published in official MBS statistics by the Department of Human Services and the Department of Health.
	In terms of the MBS structure, specialist attendances comprise all items in Group A3 (specialist attendances to which no other item applies), Group A4 (consultant physician attendances to which no other item applies), Group A8 (consultant psychiatrist attendances to which no other item applies), Group A9 (contact lens attendances), Group A12 (consultant occupational physician attendances to which no other item applies), Group A9 (contact lens attendances), Group A12 (consultant occupational physician attendances to which no other item applies), Group A13 (public health physician attendances to which no other item applies), Group A21 (medical practitioner (emergency physician) attendances to which no other item applies), Group A21 (medical practitioner (emergency physician) attendances to which no other item applies), Group A24 (pain and palliative medicine), Group A26 (neurosurgery attendances to which no other item applies), Group A28 (geriatric medicine), Group A29 (early intervention for children with autism, pervasive developmental disorder or disability) and Group T6, Subgroup 1 (anaesthesia consultations)
	Rates directly age-standardised to the 2001 Australian population.
	Total Medicare benefits expenditure for relevant attendances/visits – source MBS claims data.
	Total Estimated Resident Population (ERP) as supplied by ABS.
	In undertaking age standardisation of MBS data, the age of each person was determined from the last MBS service of any type, processed by the Department of Human Services in 2012–13. All MBS services for each individual processed in 2012–13 were attributed to the age in question.

	For MBS data, Medicare Local and SA3 were determined having regard to the enrolment postcode for each person from the last MBS service of any type, processed by the Department of Human Services in 2012–13. All MBS services for each individual processed in 2012–13, were attributed to the postcode in question.
	MBS postcode level data were allocated to Medicare Local and SA3 regions using concordance files provided by the ABS.
	Numerator based on Medicare (MBS) data provided by Department of Health for the financial year of processing, 2012–13.
	Denominator data – Estimated Resident Population at 30 June 2012 provided by the ABS.
	Data elements used in computing the numerator were MBS item number, age of patient (based on age derived from the last MBS service processed for each individual in 2011–12) and patient enrolment postcode (based on the enrolment postcode from the last MBS service processed for each individual in 2011–12).
	Presented per person.
	Before MBS data are published by NHPA all confidential data cells are suppressed.
	The current definition of confidential data is as follows:
	<ul> <li>For number of MBS services and Medicare benefits expenditure: <ul> <li>if number of services is less than 6 or</li> <li>if number of services is equal to or greater than 6 but</li> <li>one provider provides more than 85% of services or two providers provide more than 90% of services or</li> <li>one patient receives more than 85% of services or two patients receive more than 90% of services.</li> </ul> </li> <li>If data on number of services is confidential, corresponding data on other measures such as MBS benefit paid is also regarded as confidential.</li> </ul>
Computation:	Numerator ÷ Denominator
	Expenditure on specialist attendances
	Expenditure on specialist attendances, age-standardised
	Expenditure on specialist attendances variations within Medicare Locals
	Expenditure on specialist attendances variations <i>within</i> Medicare Locals, age- standardised
Numerator:	Total Medicare benefits expenditure for specialist attendances claimed through the Medicare Benefits Schedule (MBS)

#### -Data Element / Data Set

Person-age, total years N[NN]

Data Source

Medicare (MBS) data

Guide for use

Data source type: Administrative by-product data

#### -Data Element / Data Set-

Person—specialist MBS health assessment indicator, yes/no code N

Data Source

Medicare (MBS) data

Guide for use

Data source type: Administrative by-product data.

A count of Yes's is used for the numerator.

#### -Data Element / Data Set-

Person—Medicare Benefits Schedule (MBS) benefit for specialist service, total Australian currency N[N(8)]

Data Source

Medicare (MBS) data

Guide for use

Data source type: Administrative by-product data

#### - Data Element / Data Set

Service event—Medicare Benefits Schedule (MBS) processing date, DDMMYYYY

Data Source

Medicare (MBS) data

Guide for use

Data source type: Administrative by-product data

Denominator:

elements:

**Denominator data** 

– Data Element / Data Set –

Total estimated resident population (ERP)

Person-estimated resident population of Australia, total people N[N(7)]

Data Source

ABS Estimated resident population (total population)

Disaggregation:

By Medicare Local catchments, Medicare Local peer groups and Statistical Area 3

Disaggregation data elements:	Data Element / Data Set
	Address—statistical area, level 3 (SA3) code (ASGS 2011) NNNNN
	Data Element / Data Set
	Administrative health region—Medicare Local identifier, code AANNN
	Data Element / Data Set
	Administrative health region-Medicare Local peer group, code N
Comments:	Apart from services involving eligible war veterans and their dependents, MBS has complete coverage for out-of-hospital, but only covers private services in hospital. Since MBS specialist attendances data do not include attendances involving public patients in hospital and public outpatients, MBS specialist attendances data have only been published for non-hospital specialist attendances.
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### **Representational attributes**

Representation class:	Mean (average)
Data type:	Monetary amount
Unit of measure:	Currency
Format:	\$NN.NN

## Indicator conceptual framework

Framework and	PAF-Efficiency
dimensions:	

### Data source attributes

Data sources:

	-Data Source
	ABS Estimated resident population (total population)
	Frequency
	Quarterly
	Data quality statement
	ABS Estimated resident population (total population), QS
	Data custodian
	Australian Bureau of Statistics
_	-Data Source
	Medicare (MBS) data
	Frequency
	Annually
	Data custodian
	Department of Health

## Accountability attributes

Methodology:	National Health Performance Agreement-Performance and Accountability Framework
Organisation responsible for providing data:	For MBS Department of Health
	For ERP Australian Bureau of Statistics
Accountability:	National Health Performance Authority
Source and reference attributes	

### Source and reference attributes

Submitting organisation:	National Health Performance Authority
Origin:	Healthy Communities
Reference documents:	National Health Performance Agreement-Performance and Accountability Framework

# **Relational attributes**

Related metadata references:	Supersedes National Health Performance Authority, Healthy Communities: Expenditure on specialist attendances, 2011–12 National Health Performance Authority (retired), Superseded 27/03/2014
	Has been superseded by <u>National Health Performance Authority, Healthy</u> <u>Communities: Expenditure on specialist attendances, 2013–14</u> <u>National Health Performance Authority (retired)</u> , Retired 01/07/2016