

National Health Performance Authority, Healthy Communities: Expenditure on after-hours GP attendances, 2013–14

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Expenditure on after-hours GP attendances, 2013–14
METEOR identifier:	620178
Registration status:	<ul style="list-style-type: none">• National Health Performance Authority (retired), Retired 01/07/2016
Description:	The total Medicare benefits expenditure for after-hours GP attendances claimed through the Medicare Benefits Schedule (MBS).
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:	<p>Average Medicare benefits expenditure per person on GP after-hours attendances.</p> <p>GP after-hours attendances are Medicare benefit-funded after-hours patient/doctor encounters, such as visits and consultations, for which the patient has not been referred by another doctor. They include urgent and non-urgent non-referred attendances.</p> <p>Relevant non-referred Medicare Benefits Schedule (MBS) items used in this indicator are:</p> <p>For urgent attendances after hours, all items in MBS Group A11 (Urgent attendance after hours).</p> <p>For non-urgent attendances after hours, all items in MBS Groups A22 (General practitioner attendances to which no other item applies) and A23 (other non-referred after hours attendances to which no other item applies).</p> <p>Expenditure on GP attendances does not include benefits paid for bulk billing items (MBS items 10990, 10991, and 10992). These items are in 'Miscellaneous Services' (Category 9) in the MBS and are claimed as 'stand alone' items where the bulk billed service is a non-hospital unreferred service (other than pathology or diagnostic imaging) involving a person who is under 16 years of age or concessional. Since it is not always possible to determine the MBS item to which the incentive item relates expenditure on these items is included in 'Other MBS' (Broad Type of Service Group 'L') in official statistics.</p> <p>For the year of processing expenditure on bulk billing incentive items (MBS items 10990, 10991 and 10992) other than pathology and diagnostic imaging was \$542.6 million.</p> <p>Rates are directly age-standardised to the 2001 Australian population. 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 2013–14. All MBS services for each individual processed in 2013–14, were attributed this age. For MBS data, Primary Health Network (PHN) and SA3 were derived from the enrolment postcode for each person from the last MBS service of any type, processed by the Department of Human Services in</p>

2013–14. All MBS services for each individual processed in 2013–14 were attributed to this postcode. MBS postcode level data were allocated to PHN and SA3 regions using concordance files provided by the Australian Bureau of Statistics (ABS).

SA3 level data for 2013-14 are not directly comparable to previous years due to a change in method for allocating post-office box (PO box) addresses to SA3 geographies. The change in method means that data for people with a PO box postcode recorded as their residential address may be included in SA3 totals.

Individual SA3 level data has been provided for the Northern Territory for 2013-14. Previously, this data was provided at the state level only.

Numerator data - Medicare (MBS) data provided by Department of Health for the financial year of processing, 2013-14.

Denominator data – Estimated Resident Population at 30 June 2013 provided by ABS

Presented per person.

Before MBS data are published by NHPA all confidential data cells are suppressed.

- For number of MBS services and Medicare benefits expenditure:
 - if number of services is less than 6 or
 - if number of services is equal to or greater than 6 but
 - one provider provides more than 85% of services or two providers provide more than 90% of services or
 - one patient receives more than 85% of services or two patients receive more than 90% of services.
- If data on number of services is confidential, corresponding data on other measures such as MBS benefit paid is also regarded as confidential.

Computation:

(Numerator ÷ Denominator)

Medicare benefits expenditure on after-hours GP attendances 2013-14

Medicare benefits expenditure on after-hours GP attendances, age standardised 2013-14

For more information about age-standardisation, please see:

</content/index.phtml/itemId/327276>

Numerator:

Total Medicare benefits expenditure for after-hours GP attendances claimed through the Medicare Benefits Schedule (MBS)

Numerator data elements:

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

[Address—Australian postcode, Australian postcode code \(Postcode datafile\) {NNNN}](#)

Data Source

[Medicare \(MBS\) data](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Person—Medicare Benefits Schedule \(MBS\) benefit for General Practitioner 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

[Person—General Practitioner MBS out of hours health assessment indicator, yes/no code N](#)

Data Source

[Medicare \(MBS\) data](#)

Guide for use

Data source type: Administrative by-product data.

Denominator:

Total estimate resident population (ERP)

Denominator data elements:

Data Element / Data Set

[Person—estimated resident population of Australia, total people N\[N\(7\)\]](#)

Data Source

[ABS Estimated resident population \(total population\)](#)

Guide for use

Data source type: Census based plus administrative by-product data

Data Element / Data Set

[Person—General Practitioner MBS out of hours health assessment indicator, yes/no code N](#)

Data Source

[Medicare \(MBS\) data](#)

Guide for use

Data source type: Administrative by-product data

Disaggregation:

By Primary Health Network areas

Disaggregation data elements:

Data Element / Data Set

[Address—statistical area, level 3 \(SA3\) code \(ASGS 2011\) NNNNN](#)

Data Element / Data Set

[Administrative health region—Primary Health Network identifier, code AAANNN](#)

Representational attributes

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

Indicator conceptual framework

Framework and dimensions: [PAF-Equity of access](#)

Data source attributes

Data sources:	<p>Data Source</p> <p>ABS Estimated resident population (total population)</p> <p>Frequency</p> <p>Quarterly</p> <p>Quality statement</p> <p>ABS Estimated resident population (total population), QS</p> <p>Data custodian</p> <p>Australian Bureau of Statistics</p> <p>Data Source</p> <p>Medicare (MBS) data</p> <p>Frequency</p> <p>Annually</p> <p>Data custodian</p> <p>Department of Health</p>
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Accountability attributes

Reporting requirements:	National Health Performance Authority-Performance & Accountability Framework
Organisation responsible for providing data:	For MBS data, Department of Health. For ERP data, Australian Bureau of Statistics.
Accountability:	National Health Performance Authority
Release date:	19/11/2015

Source and reference attributes

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

Relational attributes

Related metadata references:	<p>Supersedes National Health Performance Authority, Healthy Communities: Expenditure on after-hours GP attendances, 2012–13</p> <ul style="list-style-type: none"> • National Health Performance Authority (retired), Retired 01/07/2016
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