

Episode of care— Department of Veterans' Affairs funding indicator, yes/no code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Department of Veterans' Affairs funding indicator
METEOR identifier:	644877
Registration status:	<ul style="list-style-type: none">• Health, Standard 25/01/2018• Tasmanian Health, Standard 27/05/2020
Definition:	An indicator of whether an eligible person's episode of care is funded by the Department of Veterans' Affairs (DVA), as represented by a code.
Data Element Concept:	Episode of care—Department of Veterans' Affairs funding indicator

Value domain attributes

Representational attributes

Representation class:	Code						
Data type:	Boolean						
Format:	N						
Maximum character length:	1						
Permissible values:	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></tbody></table>	Value	Meaning	1	Yes	2	No
Value	Meaning						
1	Yes						
2	No						

Data element attributes

Collection and usage attributes

Guide for use:	Refer to the <i>Veterans' Entitlements Act 1986</i> (Cwth) for details of eligible DVA beneficiaries.
Collection methods:	Whether or not charges for this episode of care are met by the DVA is routinely established as part of hospital admission processes.

Comments:

Eligible veterans and war widows/widowers can receive free treatment at any public hospital, former Repatriation Hospitals (RHs) or a Veteran Partnering (VP) contracted private hospital as a private patient in a shared ward, with the doctor of their choice. Admission to a public hospital does not require prior approval from the DVA.

When treatment cannot be provided within a reasonable time in the public health system at a former RH or a private VP hospital, there is a system of contracted non-VP private hospitals which will provide care.

Admission to a contracted private hospital requires prior financial authorisation from DVA. Approval may be given to attend a non-contracted private hospital when the service is not available at a public or contracted non-VP private hospital.

In an emergency a Repatriation patient can be admitted to the nearest hospital, public or private, without reference to DVA.

If an eligible veteran or war widow/widower chooses to be treated under Veterans' Affairs arrangements, which includes obtaining prior approval for non-VP private hospital care, DVA will meet the full cost of their treatment.

To assist in analyses of utilisation and health care funding.

Relational attributes

Related metadata references:

Supersedes [Episode of care—funding eligibility indicator \(Department of Veterans' Affairs\), code N](#)

- [Health](#), Superseded 25/01/2018
- [Independent Hospital Pricing Authority](#), Standard 01/11/2012

Implementation in Data Set Specifications:

[Activity based funding: Emergency service care NBEDS 2018-19 Health](#), Superseded 17/10/2018

Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

[Activity based funding: Emergency service care NBEDS 2019-20 Health](#), Superseded 18/12/2019

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020

[Allied health non-admitted patient emergency department NBPDS Health](#), Standard 12/12/2018

[Emergency department presentation related data elements \(TDLU\) cluster Tasmanian Health](#), Standard 18/05/2021

[Emergency service care aggregate NBEDS 2022–23 Health](#), Standard 20/10/2021

Implementation start date: 01/07/2022

Implementation end date: 30/06/2023

[Emergency service care aggregate NBEDS 2023–24 Health](#), Qualified 27/09/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Emergency service care NBEDS 2020-21 Health](#), Superseded 05/02/2021

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

[Emergency service care NBEDS 2021-22 Health](#), Superseded 20/10/2021

Implementation start date: 01/07/2021

Implementation end date: 30/06/2022

[Emergency service care NBEDS 2022–23 Health](#), Standard 20/10/2021

Implementation start date: 01/07/2022

Implementation end date: 30/06/2023

[Emergency service care NBEDS 2023–24 Health](#), Recorded 26/09/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Emergency service care NBEDS 2023–24 Health](#), Recorded 30/09/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Non-admitted patient emergency department care NBEDS 2018-19 Health](#), Superseded 12/12/2018

Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

[Non-admitted patient emergency department care NBEDS 2019–20 Health](#), Retired 19/11/2019

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020

[Non-admitted patient emergency department care NMDS 2018-19 Health](#), Superseded 12/12/2018
[ACT Health \(retired\)](#), Candidate 08/08/2018

Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

[Non-admitted patient emergency department care NMDS 2019–20 Health](#), Superseded 18/12/2019

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020

[Non-admitted patient emergency department care NMDS 2020–21 Health](#), Superseded 05/02/2021

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

[Non-admitted patient emergency department care NMDS 2021–22 Health](#), Superseded 20/10/2021

Implementation start date: 01/07/2021

Implementation end date: 30/06/2022

[Non-admitted patient emergency department care NMDS 2022–23 Health](#), Standard 20/10/2021

Implementation start date: 01/07/2022

Implementation end date: 30/06/2023

[Non-admitted patient emergency department care NMDS 2023–24 Health](#), Recorded 26/09/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Non-admitted patient emergency department care NMDS 2023–24 Health](#), Recorded 30/09/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Tasmanian Demographics Data Set - 2020 Tasmanian Health](#), Standard 15/06/2020

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

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