Number of MBS-subsidised services for repeat colonoscopy per 100,000 people of all ages, 2018-19

Exported from METEOR (AIHW's Metadata Online Registry)

Number of MBS-subsidised services for repeat colonoscopy per 100,000 people of all ages, 2018-19

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Repeat colonoscopy, 2018-19
METEOR identifier:	726354
Registration status:	Australian Commission on Safety and Quality in Health Care, Standard 27/04/2021
Description:	Number of MBS-subsidised services for repeat colonoscopy per 100,000 people, all ages, age-sex standardised.
Indicator set:	Australian Atlas of Healthcare Variation 2021 Australian Commission on Safety and Quality in Health Care, Standard 27/04/2021

Collection and usage attributes

Population group age from:	All ages
Computation description:	

Inclusion codes, description and additional requirements

MBS code	Description	Additional requirements
32084	Flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy up to the hepatic flexure	A colonoscopy is a repeat colonoscopy if it meets all of the following: - has one of the listed MBS codes - occurred in 2018-19 - occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months). For example, there are three colonoscopies on different dates. The index colonoscopy of the third colonoscopy is the second colonoscopy. The index colonoscopy of the second colonoscopy is the first colonoscopy. A colonoscopy is an index colonoscopy if it meets all of the following: - has one of the MBS listed codes - occurred between 1 September 2015 and 30 June 2019. The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience.

| 32087 | Flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy up to the hepatic flexure, for removal of polyps | A colonoscopy is a repeat colonoscopy if it meets all of the following:

- has one of the listed MBS codes

- occurred in 2018-19

- occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months).

For example, there are three colonoscopies on different dates. The index colonoscopy of the third colonoscopy is the second colonoscopy. The index colonoscopy of the second colonoscopy is the first colonoscopy.

A colonoscopy is an index colonoscopy if it meets all of the following:

- has one of the MBS listed codes

- occurred between 1 September 2015 and 30 June 2019.

The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience. |
| 32088 | Fibreoptic colonoscopy beyond the hepatic flexure, following a positive faecal occult blood test | A colonoscopy is a repeat colonoscopy if it meets all of the following:

- has one of the listed MBS codes

- occurred in 2018-19

- occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months).

For example, there are three colonoscopies on different dates. The index colonoscopy of the third colonoscopy is the second colonoscopy. The index colonoscopy of the second colonoscopy is the first colonoscopy.

A colonoscopy is an index colonoscopy if it meets all of the following:

- has one of the MBS listed codes

- occurred between 1 September 2015 and 30 June 2019.

The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience. |

| 32089 | Fibreoptic colonoscopy beyond the hepatic flexure, for removal of polyps, following a positive faecal occult blood test | A colonoscopy is a repeat colonoscopy if it meets all of the following:

- has one of the listed MBS codes

- occurred in 2018-19

- occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months).

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- has one of the MBS listed codes

- occurred between 1 September 2015 and 30 June 2019.

The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience. |
| 32090 | Fibreoptic colonoscopy beyond the hepatic flexure | A colonoscopy is a repeat colonoscopy if it meets all of the following:

- has one of the listed MBS codes

- occurred in 2018-19

- occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months).

For example, there are three colonoscopies on different dates. The index colonoscopy of the third colonoscopy is the second colonoscopy. The index colonoscopy of the second colonoscopy is the first colonoscopy.

A colonoscopy is an index colonoscopy if it meets all of the following:

- has one of the MBS listed codes

- occurred between 1 September 2015 and 30 June 2019.

The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience. |

32093	Fibreoptic colonoscopy beyond the hepatic flexure for removal of polyps	A colonoscopy is a repeat colonoscopy if it meets all of the following: - has one of the listed MBS codes - occurred in 2018-19 - occurred within 2 years and 10 months of the last previous colonoscopy (index colonoscopy)for the same person (a repeat colonoscopy can only be counted once, regardless of two or more previous colonoscopies within 2 years and 10 months). For example, there are three colonoscopies on different dates. The index colonoscopy of the third colonoscopy is the second colonoscopy. The index colonoscopy of the second colonoscopy is the first colonoscopy. A colonoscopy is an index colonoscopy if it meets all of the following: - has one of the MBS listed codes - occurred between 1 September 2015 and 30 June 2019. The interval of 2 years and 10 months allows identification of repeat colonoscopies that were done earlier than the 3-year period recommended for most repeat procedures, according to clinical guidelines. The timeframe is aimed at excluding appropriate three-yearly colonoscopies, scheduled a few weeks early for convenience.

For a full description of the MBS code included for this indicator see the last **MBS schedule** for 2018-19.

Presented as the following rates:

(a) number of services per 100,000 people

(b) number of people with a repeat colonoscopy per 100,000 people

Rates are directly age-sex standardised, to the 2001 Australian population, using 5-year age groups: 0-4, 5-9, … , 80-84, 85 years and over. For more information about age-standardisation in general see glossary item **Age-standardised rate.**

A patient's age is calculated in years as the difference between the patient's date of birth and date of service, as recorded in the MBS claim. A patient can be in two age groups if the patient had a repeat colonoscopy before their birthday, and a repeat colonoscopy after their birthday. In this example, one repeat colonoscopy and half a patient are allocated to the two age groups. Date of birth and sex are as recorded on a patient's last processed claim for any service in the processing period. Date of claim processing is up to 29 February 2020.

Claim records are allocated to a financial year based on the date the service was provided to the patient.

Analysis by Statistical Area Level 3 (SA3) 2016 is based on the patient's Medicare enrolment postcode at date of service, as recorded in the MBS claim.

Suppress data (number and rate) if at least one of the following conditions are met:

- the total denominator is less than 1,000
- the total numerator is less than 20
- number of services is less than 6
- number of patients is less than 6

- number of service providers is less than 6
- top service provider contributed more than 85% of services
- top two service providers contributed more than 90% of services.

Age-sex standardised rates are also suppressed where the denominator for at least one of the age-sex groups used to calculate the rate is below 30 and results of sensitivity analysis indicate that the rates are volatile. However, for SA3 data, if the volatility of the rate is not found to have a material impact on its decile, the rate is published with caution. For more information about the sensitivity analysis, see the Technical supplement of the Fourth Atlas.

Consequential suppression may be applied to preserve confidentialised data.

Computation:	(a), (b) 100,000 x (Numerator ÷ Denominator)
Numerator:	(a) number of MBS-subsidised services for repeat colonoscopy
	(b) number of people who had a repeat colonoscopy
Numerator data elements:	

Data Element / Data Set

Person—date of birth, DDMMYYYY

Data Source

Medicare (MBS) data

Guide for use

NMDS/DSS

Medicare Benedits Schedule (MBS) data 2015-16 to 2018-19
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

NMDS/DSS

Medicare Benedits Schedule (MBS) data 2015-16 to 2018-19
Data source type: Administrative by-product data

Data Element / Data Set

Person—Medicare personal identifier number, N(9)

Data Source

Medicare (MBS) data

Guide for use

NMDS / DSS
Medicare Benefits Schedule (MBS) data 2015-19
Data source type: Administrative by-product data

Data Element / Data Set

Person—sex, code A

Data Source

[Medicare (MBS) data](#)

Guide for use

NMDS/DSS

Medicare Benedits Schedule (MBS) data 2015-16 to 2018-19
Data source type: Administrative by-product data

Data Element / Data Set

[Service event—date of Medicare service, DDMMYYYY](#)

Data Source

[Medicare (MBS) data](#)

Guide for use

NMDS/DSS

Medicare Benedits Schedule (MBS) data 2015-16 to 2018-19
Data source type: Administrative by-product data

Data Element / Data Set

[Service event—Medicare Benefits Schedule (MBS) item identifier, NN[NNN]](#)

Data Source

[Medicare (MBS) data](#)

Guide for use

NMDS/DSS

Medicare Benedits Schedule (MBS) data 2015-16 to 2018-19
Data source type: Administrative by-product data

Denominator: (a) (b) total population as at 30 June 2018

Denominator data elements:

Data Element / Data Set

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

Data Source

[ABS Australian Demographic Statistics](#)

Guide for use

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

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Data Element / Data Set

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

Data Source

[ABS Regional Population by Age and Sex, Australia](#)

Guide for use

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

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Disaggregation: (a) SA3 2016 by:

Remoteness (ASGS Remoteness structure 2016)
Socio-Economic Indexes for Areas (SEIFA 2016) Index of Relative Socioeconomic Disadvantage (IRSD 2016)

Primary Health Network (PHN) 2017

State and territory by:

- repeat colonoscopy without polyp removal

Australia by:

- remoteness
- IRSD

(b) State and territory

Disaggregation data elements:

Data Element / Data Set

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

Guide for use

NMDS / DSS
Complete - Medicare Benefits Schedule (MBS) claim service detail
GPO postcodes 2001, 2124, 3001, 4001, 5001, 6843 excluded from the SA3 and PHN level analysis but included in state/territory and national level analysis.

Data source type: Administrative by-product data

Used for disaggregation by Statistical Area Level 3.

Data Element / Data Set

[Address—statistical area, level 3 (SA3) code (ASGS 2016) NNNNN](#)

Representational attributes

Representation class:	Rate
Data type:	Integer
Unit of measure:	Service event
Format:	Unit of measure:

(a) Service event, (b) People

NN[NNNN]

Data source attributes

Data sources:

Accountability attributes

Methodology: Statistical Area Level 3 (SA3s) are geographic areas defined in the ABS Australian Statistical Geography Standard (ASGS). The aim of SA3s is to create a standard framework for the analysis of ABS data at the regional level through clustering groups of SA2s that have similar regional characteristics. There are 340 spatial SA3s covering the whole of Australia without gaps or overlaps. They are designed to provide a regional breakdown of Australia. SA3s generally have a population of between 30,000 and 130,000 people. There are approximately 78 with fewer than 30,000 people and 46 with more than 130,000 as at 30 June 2016. The Other Territories of Jervis Bay, Cocos (Keeling) Islands, Christmas Island and Norfolk Island are each represented by a SA3 in the 2016 ASGS. For further information see the ABS publication, Population by Age and Sex, Regions of Australia, 2016. ABS. cat. no. 3235.0.

Further information on the Medicare Benefits Schedule (MBS) can be found at [MBS Online](#).

Reporting requirements: Australian Commission on Safety and Quality in Health Care

Australian Atlas of Healthcare Variation 2021

Organisation responsible for providing data: Australian Institute of Health and Welfare

Accountability: Australian Commission on Safety and Quality in Health Care

Release date: 28/04/2021

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Relational attributes

Related metadata references: See also [ABS Estimated resident population (total population), QS Health](#), Standard 08/06/2011