

Australian Health Performance Framework: PI 2.5.1—Bulk-billing for non-referred (GP) attendances, 2020

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Australian Health Performance Framework: PI 2.5.1–Bulk-billing for non-referred (GP) attendances, 2020

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	AHPF PI 2.5.1–Bulk-billing for non-referred (GP) attendances, 2020
METEOR identifier:	728349
Registration status:	Health , Standard 13/10/2021
Description:	The number and rates of services for non-referred General Practitioner (GP) attendances bulk billed in a year.
Indicator set:	Australian Health Performance Framework, 2020 Health , Superseded 11/07/2023

Collection and usage attributes

Population group age to:	All ages
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Computation description: Bulk-billing is an arrangement in which a GP bills Medicare directly for any eligible medical or allied health service that the patient receives, and imposes no other 'gap payment' on the patient. In this arrangement the provider accepts the Medicare benefit as full payment for the service and the patient assigns their right to a Medicare benefit to the service provider.

GP attendances are Medicare benefit-funded patient/doctor encounters, such as visits and consultations, for which the patient has not been referred by another doctor. GP attendances exclude services provided by practice nurses and Aboriginal and Torres Strait Islander health practitioners on a GP's behalf.

In terms of 'Broad Type of Service' Groups, GP attendances comprise all items in Broad Type of Services Groups:

- 'A' - GP/Vocationally Registered (VR)GP non-referred attendances
- 'M' - Enhanced Primary Care and
- 'B' - Non-referred other attendances as published in official Medicare Benefits Schedule statistics by the Department of Health.

In published bulk billing statistics from 2009-10, the patient's geographic location is determined using their geocoded Medicare enrolment address at the date the claim was processed. There may be minor changes to the statistics in subsequent publications as geospatial information is updated.

Statistics are published by Modified Monash Model (MMM) and by state/territory of patient. The MMM is a geographical classification that categorises different areas in Australia into seven remoteness categories. The MMM classifies metropolitan, regional, rural and remote areas according to geographical remoteness, as defined by the Australian Bureau of Statistics (ABS), and town size.

The MMM is used to determine eligibility for a range of health programs.

Presented in numbers and percentages.

Modified Monash Category	Description (including the Australian Standard Geographical Classification (ASGS) – Remoteness Area (2016))
MM 1	Metropolitan areas: Major cities accounting for 70% of Australia's population. All areas categorised ASGS-RA1
MM 2	Regional centres: Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are in, or within a 20km drive of a town with over 50,000 residents
MM 3	Large rural towns: Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are not MM 2 and are in, or within a 15km drive of a town between 15,000 to 50,000 residents
MM 4	Medium rural towns: Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are not MM 2 or MM 3, and are in, or within a 10km drive of a town with between 5,000 to 15,000 residents
MM 5	Small rural towns: All remaining Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas. Islands that have an MM 5 classification with a population of less than 1,000 without bridges to the mainland are classified as MM 6
MM 6	Remote communities: Remote mainland areas (ASGS-RA 4) AND remote islands less than 5kms offshore. Islands that have an MM 5 classification with a population of less than 1,000 without bridges to the mainland are classified as MM 6
MM 7	Very remote communities: Very remote areas (ASGS-RA 5) and all other remote island areas more than 5kms offshore.

Computation: (Numerator ÷ Denominator) x 100

Bulk-billed GP attendances

Numerator: Number of bulk-billed GP attendances claimed through the Medicare Benefits Schedule (MBS)

Numerator data elements:

Data Element / Data Set

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

Data Source

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

Data Element / Data Set

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

Data Source

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

Data Element / Data Set

[Service event—bulk billed General Practitioner \(GP\) service, total number NN\[N\]](#)

Data Source

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

Guide for use

Data source type: Administrative by-product data

Denominator: Total GP attendances for year of processing

Denominator data elements:

Data Element / Data Set

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

Data Source

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

Disaggregation: By state/territory and by Modified Monash Model (MMM) Category.

Disaggregation data elements:

Data Element / Data Set

Region of patient - geographic remoteness MMM remoteness classification

Data Source

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

Data Element / Data Set

[Service/care provider—Australian state/territory identifier, ACT-prioritised Australian state/territory code N](#)

Data Source

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

Representational attributes

Representation class:	Count
Data type:	Real
Unit of measure:	Service event
Format:	N[N8].N N[NN].N

Data source attributes

Data sources:

Data Source

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

Frequency

Annually

Data custodian

Department of Health

Accountability attributes

Reporting requirements:	Australian Health Performance Framework
Organisation responsible for providing data:	Department of Health

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Steward:	Australian Institute of Health and Welfare
Origin:	Department of Health

Relational attributes

Related metadata references:	See also National Health Performance Authority, Healthy Communities: Bulk-billed GP attendances, 2013–14 National Health Performance Authority (retired) , Retired 01/07/2016
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