

6 Administrative data for admitted patients

Introduction

This chapter presents a summary of patient-level administrative information, including admitted patient election status, Medicare eligibility status, funding source, cross border flows, care type, urgency of admission, mode of admission, mode of separation and inter-hospital contracted patient status. The data are derived from the Institute's National Hospital Morbidity Database, a compilation of patient-level data for separations from public and private hospitals in Australia. The tables in this chapter present separation, patient day, average cost weight and average length of stay statistics for these administrative elements. Separations were included for all care types except *Hospital boarders*, *Organ procurement – posthumous* and *Newborn* episodes that did not include qualified days. Tables 6.10 and 6.11 also include *Newborn* episodes without qualified days and records provided optionally by the States and Territories for episodes of *Organ procurement – posthumous*.

For *Australian Hospital Statistics 1999–00* (AIHW 2001a) the first five tables were based on the data element 'Patient accommodation eligibility status'. This data element has been replaced by three different data elements for version 9 of the *National Health Data Dictionary* (NHDC 2000). The new data elements are 'Admitted patient election status', 'Department of Veterans' Affairs patient' and 'Medicare eligibility status'. These data are as supplied by the States and Territories and, in the case of Department of Veterans' Affairs (DVA) patients, their eligibility to receive hospital treatment as a DVA patient may not necessarily have been confirmed by DVA.

States and Territories also supplied data on the 'Compensable status' of each patient. A compensable patient is defined as any person who is entitled to receive a compensation payment with respect to an injury or disease for which he or she is receiving care and treatment (i.e. compensation payment for claims for damages under Motor Vehicle Third Party Insurance, worker's compensation, or under public liability or common law damages).

A new data element, 'Funding source for hospital patient' was included in version 10 of the *National Health Data Dictionary* (NHDC 2001) and was implemented from July 2001. This data element is designed to provide information about the principal source of funds for an admitted patient episode or non-admitted patient service event. To provide some continuity between this and subsequent publications, the information in Tables 6.1 to 6.5 has been presented to reflect the structure of the *National Health Data Dictionary* version 10 data element 'Funding source for hospital patients', using the *National Health Data Dictionary* version 9 data elements; 'Admitted patient election status', 'Department of Veterans' Affairs patient', 'Medicare eligibility status' and 'Compensable status'. Thus:

- separations are first categorised as Medicare eligible or otherwise (using 'Medicare eligibility status');
- Medicare eligible separations were categorised as public (Medicare) patients or private patients (using 'Admitted patient election status');

- private patients were categorised as compensable, DVA or other (using ‘Department of Veterans’ Affairs patient’ and ‘Compensable status’).

‘*Other private patient*’ in this structure therefore refers to patients whose ‘Admitted patient election status’ is private and who were not DVA or compensable patients. These patients would include those who paid for hospital treatment themselves or used private hospital insurance

For cross-border flow information, the State or Territory of usual residence is reported as one of the six States, the Australian Capital Territory, the Northern Territory, other Australian territories (including Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory) or other (including resident overseas, at sea, no fixed address) (see Tables 6.6 to 6.8). More detailed information on the area of usual residence of the patient is stored in the National Hospital Morbidity Database as the Statistical Local Area of residence and has been used to generate the maps in Chapter 7 (Figures 7.8 and 7.9).

Care type was reported for most separations, but was not available for almost half of the private hospital separations in Tasmania. The care type defines the overall nature of a clinical service provided to an admitted patient during an episode of care. Definitions of each care type are contained in the *National Health Data Dictionary* version 9 and are summarised in the Glossary. They are:

- acute care
- rehabilitation care – delivered in a designated unit
- rehabilitation care – according to a designated program
- rehabilitation care – principal clinical intent
- palliative care – delivered in a designated unit
- palliative care – according to a designated program
- palliative care – principal clinical intent
- geriatric evaluation and management
- psychogeriatric care
- maintenance care
- newborn care
- other admitted patient care.

Not all States and Territories supplied information to this level of detail for rehabilitation and palliative care. For rehabilitation, a category of *Rehabilitation, not further specified* was used by some States and Territories and is included in the tables in this chapter. Due to the small number of separations reported in the palliative care categories, only *Palliative care, not further specified* has been used in Tables 6.10 and 6.11. Victoria also did not use the *Psychogeriatric care* or *Maintenance care* categories.

The *Newborn care* type is used for all patients aged 9 days or less at admission. *Newborn* episodes of care comprise separations with qualified days only, separations with a mixture of qualified and unqualified days and separations with unqualified days only. Most States and Territories have implemented this *Newborn* definition; however, Tasmania reported all *Newborns* as *Newborns* with unqualified days and the Northern Territory only reported *Newborns* with qualified days and *Newborns* with unqualified days (see the Glossary and Appendix 3 for more information). Therefore a new episode of care would have been reported for each change in qualification status for these records. The care type *Organ*

procurement – posthumous is not regarded as the care or treatment of an admitted patient, but this activity is registered by the hospital.

The mode of admission element records the mechanism by which a patient begins an episode of care (transferred from another hospital, statistical admission – care type change, other planned and unplanned admissions), as shown in Table 6.12.

The mode of separation records the status of the patient (discharged, transferred, care type change, died) at the time of separation and for some categories the place to which the person was discharged or transferred, as shown in Table 6.13.

Table 6.15 reports on the element 'Inter-hospital contracted patient'. Data on inter-hospital contracted patient status were provided by six jurisdictions. An inter-hospital contracted patient is defined in the *National Health Data Dictionary* version 9 as an episode of care for an admitted patient whose treatment and/or care is provided under an arrangement between a hospital purchaser of hospital care and a provider of an admitted service and for which the activity is recorded by both hospitals. Separations can be reported as *Inter-hospital contracted patient from public sector*, *Inter-hospital contracted patient from private sector*, *Not contracted* or *Not reported*. Some States supplied this element as *Inter-hospital contracted patient from unspecified sector*, *Other* or *Not reported*. This data element provides information on whether the contracted care episodes were purchased by public or private hospitals and indicates the extent to which double counting occurs for contracted patients.

A table (Table 6.16) has been included on 'Insurance status' for private patients who were not reported as compensable or Department of Veterans' Affairs patients (i.e. '*Other private patient*'). Data on insurance status indicates whether a patient has hospital insurance; that is, insurance providing benefits related to charges for hospital accommodation and services. Individuals can elect to be admitted in public hospitals as public or private patients irrespective of their insurance status, and may or may not have used their insurance to fund the reported episodes of care.

Table 6.17 reports on the new data element 'Urgency of admission'. It shows whether the admission was assigned an urgency status, and if so, whether the admission occurred on an emergency or an elective basis.

Medicare eligibility and funding source

Medicare eligible patients accounted for 99.0% of all separations from all hospitals in Australia, with 0.4% recorded as not eligible for Medicare; eligibility status was not reported for the remaining 0.6% (Table 6.1).

For the Medicare eligible separations, 56.8% elected to be treated as public patients and 43.2% elected to be treated as private patients. Medicare eligible public patients accounted for 86.7% of separations from public hospitals (3,353,250), compared with 12.9% for private patients (497,113). The two major categories were reversed in private hospitals, with Medicare eligible public patients making up 4.5% (101,612) and private patients 93.7% (2,127,023) of all separations. Department of Veterans' Affairs patients (classified as private patients, see above) made up 5.1% of all separations. 26.9% of private patients attending public sector hospitals were Department of Veterans' Affairs patients as were 8.6% of private patients attending private sector hospitals.

Overall, around 2% of patients (122,252) were compensable in 2000–01. In the public sector, 1.1% of patients (40,719) fell into this category, while in the private sector 3.6% of patients (81,533) were compensable.

For both sectors combined there were 174.2 separations per 1,000 population (age-standardised) for Medicare eligible public patients, compared with 127.4 for Medicare eligible private patients (Table 6.2). The latter figure is underestimated because separations were not available for the Northern Territory private hospital, nor for a number of private hospitals and/or private free-standing day hospital facilities in Victoria, the Australian Capital Territory and South Australia (see Appendix 5 for further details). The Northern Territory recorded the highest Medicare eligible public patient separation rate (340.6 per 1,000). The separation rates for Medicare eligible public patients in private hospitals in Western Australia (23.8 per 1,000) and Tasmania (26.1 per 1,000) were markedly higher than those recorded for other States and Territories. The private sector in the Australian Capital Territory and Tasmania had not implemented separate episodes of care in 2000–01 and this would have had the effect of reducing the number of separations and the separation rates for these hospitals in comparison with the others.

Table 6.3 presents the average cost weight of separations in each State and Territory by hospital sector, Medicare eligibility and funding source. The table has been restricted to separations with a care type of *Acute, Newborn* (with at least one qualified patient day) or *Not reported*. In all States and Territories, the average cost weights for Medicare eligible private patients were higher than that for Medicare eligible public patients in public hospitals. In the public sector, compensable patients had average cost weights markedly higher than these hospitals' main patient groups of eligible public and eligible private patients respectively. More detail about the AR-DRG classification and cost weights is included in Chapter 11 and, in reference to the effects of the integration of public psychiatric services into public hospital systems, in Chapter 2.

Table 6.4 shows the number of patient days reported for each funding source category, by State or Territory and hospital sector. Medicare eligible *public* patients accounted for 59.9% of total patient days, *compensable* patients 2.0%, *Department of Veterans' Affairs* patients 7.8%, and '*other private*' patients 28.7% of patient days. Of the Medicare eligible patients, 60.8% of patient days recorded were for public patients and 39.2% were for private patients.

Between 1996–97 and 2000–01, the number of separations for private patients increased each year, as did the number of separations for private patients who were not compensable or DVA patients (Table 6.5). Separations for public patients increased each year until 1999–00, and then declined by 0.4%. The decline in the numbers of separations recorded by Medicare eligible private patients in public hospitals was also reversed for the latest year, when an increase of 6.6% was recorded. The number of separations and patient days attributable to Medicare eligible public patients in private hospitals increased each year, to account for 4.5% and 4.7%, respectively, of private hospital activity in 2000–01. Private hospitals also showed steady growth in DVA patients treated, increasing from 10.3% of patient days in 1996–97 to 13.8% in 2000–01.

During this period, the Department of Veterans' Affairs either integrated its repatriation hospitals into State public systems or sold them to private companies. Many veterans continue to access former repatriation hospitals, including the two privatised hospitals in Western Australia and Queensland. In addition, as each repatriation hospital was integrated or sold, the Repatriation Private Patient Scheme was introduced in that State. The Repatriation Private Patient Scheme allows veterans easier access to the private sector if public hospital services are not available. The rising numbers of people entitled to treatment at Department of Veterans' Affairs expense, in conjunction with easier access to the private system, have also contributed to more veterans being treated in the private sector.

Cross-border flows

Table 6.6 shows how many separations in each State and Territory were for patients who were interstate residents. Overall, 97.7% (5,995,353) of separations were for patients who resided in the State or Territory where they were treated (Table 6.8). However, in the Australian Capital Territory only about 76.8% were for Australian Capital Territory residents (65,991), with the majority of the remainder resident in New South Wales. This is mainly because the Australian Capital Territory acts as a referral centre for the surrounding districts, which are part of New South Wales.

Age-standardised separation rates per 1,000 population for each State and Territory, by hospital sector and State or Territory of usual residence, are presented in Table 6.7. The cross-border flow rate was highest for Northern Territory residents attending South Australian hospitals and was also high for Australian Capital Territory residents attending New South Wales hospitals.

The average cost weight of separations in each State and Territory by each hospital sector and State or Territory of usual residence is presented in Table 6.9. As for Table 6.3, this table has been restricted to separations with a care type of *Acute*, *Newborn* (with at least one qualified day) or *Not reported* (for more detail see Chapter 2 and Chapter 11). Public hospitals generally had average cost weights that were higher for interstate patients than for patients from their own state. Separations for Northern Territory residents had higher average cost weights for the public sector in most States (except the Australian Capital Territory) than in the Northern Territory, consistent with a tendency for movement of Territory residents with more complex treatment requirements to hospitals in other States. Tasmanian residents also had higher average cost weights provided by the private sector in most other States and Territories than in their own State. The high average cost weight for Other Australian territories residents in Queensland public hospitals was caused by the small number of separations (12) in this category, two of which were classified into very high cost weight Diagnosis Related Groups (DRGs) (see Chapter 11 for more information on DRGs).

Care type

Table 6.10 presents separations by care type. For public and private sectors together, 92.6% of separations were classified as episodes of *Acute care*, 3.9% as *Newborn* and 1.8% as *Rehabilitation care*. There was some variation among the States and Territories and between the public and private sectors. For example, the proportion of public hospital separations that was for *Rehabilitation care* ranged from 0.6% (374) in the Northern Territory to 2.8% in Queensland (20,097). Almost half of all private hospital separations for Tasmania had a care type of *Not reported*.

Newborn separations with all unqualified days (see Appendix 3 for more information) have only been included in Tables 6.10 and 6.11 in this report and, as such, will cause total separations in Table 6.10 to differ from those of other tables. They accounted for an additional 194,406 separations, the majority (154,984 or 79.7%) in the public sector. Victoria did not provide data for *Newborn* separations with unqualified days only in the private sector, which means that the total number of newborn episodes is incomplete in this State. The same is true for South Australia, for which the such *Newborn* separations are significantly unreported.

Average length of stay for episodes of *Acute care* in private hospitals (2.7 days) was shorter than in public hospitals (3.4 days) (Table 6.11). The average length of stay for *Newborn* episodes with a mixture of qualified and unqualified days has been presented split into the average number of qualified days and the average number of unqualified days. In the public sector, the average length of stay overall for these 'mixed' separations was 3.0 qualified days and 2.5 unqualified days, compared with 10.3 days for newborns with qualified days only and 2.9 days for newborns with no qualified days. In the private sector, the average length of stay overall for these 'mixed' separations was 5.4 qualified days and 4.2 unqualified days, compared with 6.9 days for qualified newborns and 4.7 days for unqualified newborns.

Mode of admission

In both public and private hospitals (Table 6.12), most separations had a mode of admission of *Other* (95.5%, 5,861,976), the term used to refer to all planned and unplanned admissions, except transfers from other hospitals and statistical admissions. Public hospitals recorded higher proportions of both *Admitted patient transferred from another hospital* (4.1%, 158,582) and *Statistical admission: type change* (1.1%, 44,449) than were reported for private hospitals (2.7%, 61,424 and 0.3%, 6,027, respectively). New South Wales had the highest proportion (4.4%) of *Admitted patient transferred from another hospital*.

Mode of separation

The majority of patients (5,648,010, 92.0%) were included in the *Other* category, suggesting that most patients go home after separation from hospital. This was particularly the case in the private sector, where 95.4% of separations (2,166,784) were categorised as *Other*; in the public sector, this figure was 90.0% (3,481,226) (Table 6.13). The main difference between the sectors was that more patients were transferred to other hospitals in the public sector (5.2%) than in the private sector (1.8%). There were also greater proportions of separations in the public sector for *Died* and the *Left against medical advice/discharge at own risk* category. Tasmania recorded a very high proportion of private hospital patients with a mode of separation of *Statistical discharge: type change* (29.4%) and also for *Discharge/transfer to other health care accommodation* (13.3%).

There is a discrepancy between the number of patients reporting a mode of separation of *Discharged/transferred to an(other) hospital* (acute and psychiatric) (241,315) and the number of patients who recorded a mode of admission of *Admitted patient transferred from another hospital* (220,006) (Tables 6.12, 6.13). This may indicate that not all patients who are transferred from one hospital to another are having this recorded as their mode of admission.

Data on patients aged over 70 years may provide information that is useful to assess continuity of care. Table 6.14 presents information by care type and mode of separation for patients aged over 70 years. For most care types, the mode of separation with the highest number of separations reported was *Other*, which includes discharge to usual residence/own accommodation/welfare institution (84.5%). For separations where care type was *Palliative care*, the most frequent mode of separation was *Died* (7,156, 55.8%). Of the patients whose mode of separation was *Discharge/transfer to a residential aged care service*,

73.1% (31,546) had an acute care type, 7.4% (3,210) had a care type of rehabilitation, 1.0% (413) had a palliative care type and 18.5% (7,967) were for other care.

Inter-hospital contracted patient status

Table 6.15 presents information on separations by inter-hospital contracted patient status and hospital sector for each State and Territory and also provides information on whether the contracted care episodes were purchased by public or private hospitals. This data element was previously reported only for same day patients and should now be reported for all separations.

A number of States and Territories did not employ the *National Health Data Dictionary* version 9 definition of 'Inter-hospital contracted patient', while Tasmania and the Australian Capital Territory did not provide the data. Queensland expressed concern over the quality of their data for this data element. The national data should be interpreted with these caveats in mind.

For the six States and Territories which reported these data, 0.8% of all separations were for contracted care. The number of inter-hospital contracted patients was higher for private hospitals (42,620) than for public hospitals (5,609).

Four States and Territories specified the sector of the hospital purchasing the contracted care. For these States and Territories, 29.5% (633 separations) of contracted care provided by public hospitals was purchased by the private sector and 93.3% (8,153 separations) of contracted care provided by private hospitals was purchased by the public sector.

As inter-hospital contracted patients are admitted patients of both the contracting and contracted hospital, these separations represent double counting of hospital activity in the National Hospital Morbidity Database.

Insurance status for private patients

Data on insurance status determines whether a patient has hospital insurance – that is, insurance providing benefits related to charges for hospital accommodation and services. These codes are assigned: *Hospital insurance* (if they have hospital insurance with either a registered health insurance fund or a general insurance company), *No hospital insurance*, or *Not reported*. These data do not necessarily indicate the funding source for the patient's episode of care. Individuals can elect to be admitted in public hospitals as public or private patients irrespective of their insurance status, and private patients may use their insurance or other sources to pay for care as a private patient. The data reported on insurance status is likely to be more accurate for private patients other than compensable and DVA patients (that is, for patients who could use their insurance to meet the hospital charges for the episode of care), so the data in Table 6.16 is restricted to separations for those patients. These patients could also have met the hospital charges as out-of-pocket expenses, or they could have been met by family, friends or other benefactors.

Approximately 84.2% (1,840,651) of 'other private' patients were recorded as having hospital insurance. The proportion of 'other private' patients with hospital insurance was higher for private hospitals (85.3%, 1,589,540 separations) than for public hospitals (77.8%, 251,111 separations). For the States and Territories for which these data were comprehensively reported, Western Australia reported the highest percentage of separations for patients with hospital insurance (92.6%, 189,485 separations).

Urgency of admission

Table 6.17 reports on the new data element 'Urgency of admission'. This element shows whether the admission was assigned an urgency status, and if so, whether the admission occurred on an emergency or an elective basis. Separations may be coded as *Emergency*, *Elective*, *Not assigned* or *Not reported*. For 2000–01 the Northern Territory did not report on this data element (but will report next year) while the Australian Capital Territory did not report this data for private hospitals. Tasmania reported a large proportion of private hospital separations as *Not reported* and South Australia did not use the code *Not assigned*, which would be expected to be applied to statistical admissions, scheduled readmissions for treatment, admissions for normal deliveries, or admissions that include the birth of the patient.

Six States and Territories (New South Wales, Victoria, Queensland, Western Australia, Tasmania and the Australian Capital Territory) reported separations for all three categories of urgency of admission (in Tasmania and the Australian Capital Territory, only for public hospitals). For both the private and public sectors combined, these States and Territories reported that 28.9% (1,601,257) of all separations were assigned an *Emergency* status, 59.7% of all separations (3,305,893) were assigned an *Elective* status and the *Not assigned* status was recorded for 10.5% of all separations. In the public hospital sector 41.5% of separations (1,431,099) were assigned an *Emergency* status and 45.6% (1,574,367 separations) were assigned an *Elective* status. In the private sector (excludes Tasmania and the Australian Capital Territory) only 8.5% of separations (170,158 separations) were assigned an *Emergency* status, while 84.7% of separations (1,692,079) were assigned an *Elective* status.

Figure 6.1 illustrates urgency of admission by month of the year for the public sector for New South Wales, Victoria, Queensland, Western Australia, Tasmania and the Australian Capital Territory. The fewest separations for the public sector was recorded for January 2001 (257,267) while the highest number of separations was for August 2000 (310,819) – a difference of 53,552 separations. *Elective* admissions represented 76.9% of this difference (41,202 additional separations) and *Emergency* admissions represented 20.5% (10,969 additional separations). The monthly separations for *Elective* admissions in the public sector showed greater variance (ranging from 103,749 to 144,951) than for *Emergency* admissions (ranging from 109,709 to 127,734) and contributed most to the variation in total monthly separations.

Figure 6.2 illustrates urgency of admission by month of the year for the private sector for New South Wales, Victoria, Queensland and Western Australia. The fewest separations for the private sector was recorded in January 2001 (143,565) while the highest number of separations was for May 2001 (184,452) – a difference of 40,887 separations. As *Elective* admissions represent 84.7% of total separations for the private sector, variations in this category are the major cause of this difference (92.9% or an additional 37,998 separations in May 2001 compared with January 2001). The monthly separations for *Elective* admissions in the private sector ranged from 118,984 to 156,982, while *Emergency* admissions ranged from 13,046 to 15,017.

Table 6.1: Separations, by Medicare eligibility status, funding source and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Medicare eligible	1,227,539	1,027,623	686,547	361,442	356,267	71,804	60,805	58,336	3,850,363
Public	1,014,656	911,043	624,320	325,798	308,778	58,918	53,543	56,194	3,353,250
Private	212,883	116,580	62,227	35,644	47,489	12,886	7,262	2,142	497,113
Compensable	13,358	14,109	3,973	3,457	3,516	1,065	453	788	40,719
Department of Veterans' Affairs	56,138	33,485	14,564	8,722	14,590	4,080	1,526	412	133,517
Other private	143,387	68,986	43,690	23,465	29,383	7,741	5,283	942	322,877
Not Medicare eligible	9,331	672	2,098	1,000	685	91	497	341	14,715
Not reported	1,574	341	2	203	107	0	6	296	2,529
Total:	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,308	58,973	3,867,607
Private hospitals									
Medicare eligible	636,583	580,353	505,773	249,376	183,754	65,256	7,540	n.a.	2,228,635
Public	20,291	5,798	17,442	45,073	283	12,725	0	n.a.	101,612
Private	616,292	574,555	488,331	204,303	183,471	52,531	7,540	n.a.	2,127,023
Compensable	15,390	20,813	28,159	7,326	7,218	2,389	238	n.a.	81,533
Department of Veterans' Affairs	49,320	46,878	58,674	15,821	7,958	3,611	3	n.a.	182,265
Other private	551,582	506,864	401,498	181,156	166,295	46,531	7,298	n.a.	1,863,225
Not Medicare eligible	3,174	67	3,300	609	551	0	51	n.a.	7,752
Not reported	5	0	17,240	144	0	0	17,015	n.a.	34,404
Total:	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	2,270,791
All hospitals									
Medicare eligible	1,864,122	1,607,976	1,192,320	610,818	540,021	137,060	68,345	58,336	6,078,998
Public	1,034,947	916,841	641,752	370,871	309,061	71,543	53,543	56,194	3,454,862
Private	829,175	691,135	550,568	239,947	230,960	65,417	14,802	2,142	2,624,136
Compensable	28,748	34,922	32,132	10,783	10,734	3,454	691	788	122,252
Department of Veterans' Affairs	105,458	80,363	73,238	24,543	22,548	7,691	1,529	412	315,782
Other private	694,969	575,850	445,188	204,621	197,678	54,272	12,582	942	2,186,102
Not Medicare eligible	12,505	739	5,398	1,609	1,236	91	548	341	22,467
Not reported	1,579	341	17,242	347	107	0	17,021	296	36,933
Total separations	1,878,206	1,609,066	1,214,960	612,774	541,364	137,151	85,914	58,973	6,138,398

n.a. not available.

Note: Public refers to those patients who are funded under Australian Health Care Agreement arrangements (Medicare patients)

Table 6.2: Separation rates^(a) per 1,000 population by Medicare eligibility status, funding source and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT ^(b)	NT	Total
Public hospitals									
Medicare eligible	180.0	204.2	188.8	190.8	222.6	145.5	207.8	356.5	193.0
Public	150.4	181.9	172.2	172.1	195.3	121.0	182.2	340.6	169.1
Private	29.6	22.4	16.6	18.7	27.3	24.5	25.5	15.9	23.9
Compensable	2.1	2.9	1.1	1.8	2.4	2.4	1.4	3.9	2.1
Department of Veterans' Affairs	6.8	5.6	3.6	4.5	6.6	6.6	6.0	6.4	5.7
Other private	20.7	13.8	11.8	12.3	18.2	15.5	18.2	5.5	16.0
Not Medicare eligible	1.5	0.1	0.6	0.5	0.5	0.2	1.6	1.8	0.8
Not reported	0.2	0.1	0.0	0.1	0.1	0.0	0.0	1.9	0.1
Total	181.7	204.5	189.4	191.4	223.1	145.7	209.4	360.3	193.9
Private hospitals									
Medicare eligible	91.1	112.1	134.5	129.7	107.6	127.7	25.6	n.a.	109.4
Public	3.0	1.1	4.7	23.8	0.2	26.1	0.0	n.a.	5.1
Private	88.2	111.0	129.8	106.0	107.4	101.6	25.6	n.a.	104.3
Compensable	2.3	4.1	7.6	3.7	4.5	4.8	0.7	n.a.	4.1
Department of Veterans' Affairs	8.5	11.1	20.3	11.5	5.2	8.1	0.0	n.a.	11.0
Other private	79.8	99.0	107.5	94.2	98.2	91.0	24.9	n.a.	92.3
Not Medicare eligible	0.5	0.0	1.0	0.3	0.4	0.0	1.7	n.a.	0.4
Not reported	0.0	0.0	4.5	0.1	0.0	0.0	55.3	n.a.	1.7
Total	91.6	112.1	139.9	130.1	108.0	127.7	83.1	n.a.	111.5
All hospitals									
Medicare eligible	271.2	316.4	323.3	320.5	330.2	273.2	233.3	356.5	301.6
Public	153.4	183.0	176.9	195.9	195.4	147.1	182.2	340.6	174.2
Private	117.8	133.4	146.4	124.7	134.8	126.1	51.1	15.9	127.4
Compensable	4.3	7.1	8.7	5.5	6.9	7.2	2.1	3.9	6.2
Department of Veterans' Affairs	12.9	13.4	18.3	12.6	10.3	12.4	6.0	6.4	13.6
Other private	100.6	112.9	119.3	106.5	117.5	106.5	43.0	5.5	107.6
Not Medicare eligible	2.0	0.2	1.5	0.9	0.8	0.2	1.8	1.8	1.2
Not reported	0.2	0.1	4.5	0.2	0.1	0.0	57.4	1.9	1.8
Total separations	273.3	316.6	329.3	321.6	331.1	273.4	292.5	360.3	304.5

(a) The rates were directly age-standardised to the Australian population at 30 June 1991. For details see Appendix 3.

(b) The numerator of the rate for Australian Capital Territory includes a substantial proportion of non-ACT residents (see Table 6.8), therefore the population rates for Australian Capital Territory are overstated. n.a. not available.

Note: Public refers to those patients who are funded under Australian Health Care Agreement arrangements (Medicare patients).

Table 6.3: Average cost weight of separations^(a) by Medicare eligibility status, funding source and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	Public acute hospitals								
Medicare eligible	1.06	0.96	0.97	0.93	0.99	1.11	0.97	0.78	0.99
Public	1.03	0.93	0.96	0.90	0.97	1.10	0.92	0.76	0.97
Private	1.18	1.14	1.05	1.20	1.12	1.15	1.29	1.30	1.15
Compensable	1.44	1.67	1.76	1.78	1.68	1.72	1.95	1.95	1.58
Department of Veterans' Affairs	1.22	1.10	1.12	1.25	1.24	1.05	1.35	0.91	1.18
Other private	1.14	1.06	0.97	1.11	1.00	1.12	1.22	0.95	1.08
Not Medicare eligible	1.17	1.52	1.25	1.35	1.04	1.41	0.70	1.07	1.29
Not reported	1.68	2.21	..	1.09	0.99	..	1.52	0.97	1.53
Total	1.06	0.96	0.97	0.93	0.99	1.11	0.96	0.78	0.99
	Private hospitals								
Medicare eligible	0.85	0.86	0.85	0.84	0.95	0.97	0.97	n.a.	0.86
Public	1.09	0.41	0.56	0.69	0.92	0.93	..	n.a.	0.76
Private	0.84	0.86	0.86	0.87	0.95	0.98	0.97	n.a.	0.87
Compensable	0.90	0.90	1.13	0.85	0.99	0.78	1.13	n.a.	0.99
Department of Veterans' Affairs	1.15	1.22	1.08	1.27	1.33	1.26	0.43	n.a.	1.17
Other private	0.82	0.83	0.91	0.84	0.93	0.96	0.97	n.a.	0.83
Not Medicare eligible	0.90	1.68	0.84	0.95	0.87	..	0.83	n.a.	0.88
Not reported	0.43	..	0.93	3.67	..	..	1.04	n.a.	1.00
Total	0.85	0.86	0.85	0.84	0.95	0.97	1.02	n.a.	0.87

(a) Separations for which the care type was reported as acute, or as newborn with qualified patient days, or was not reported. For further details see Chapter 11.
n.a. not available.

Note: Public refers to those patients who are funded under Australian Health Care Agreement arrangements (Medicare patients).

Table 6.4: Patient days, by Medicare eligibility status, funding source and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Medicare eligible	5,568,639	3,869,926	2,434,374	1,389,070	1,482,219	377,660	215,004	191,987	15,528,879
Public	4,504,639	3,350,620	2,208,371	1,224,928	1,234,905	260,486	180,516	182,954	13,147,419
Private	1,064,000	519,306	226,003	164,142	247,314	117,174	34,488	9,033	2,381,460
Compensable	67,262	61,346	20,285	21,199	20,629	5,345	2,853	5,220	204,139
Department of Veterans' Affairs	376,017	202,210	75,285	49,879	93,658	19,373	8,693	1,599	826,714
Other private	620,721	255,750	130,433	93,064	133,027	92,456	22,942	2,214	1,350,607
Not Medicare eligible	39,482	2,292	7,704	3,536	2,848	457	1,237	1,300	58,956
Not reported	117,592	21,079	36	794	3,299	0	29	948	143,777
Total	5,725,713	3,893,297	2,442,114	1,393,500	1,488,366	378,117	216,270	194,235	15,731,612
Private hospitals									
Medicare eligible	1,780,483	1,763,202	1,515,105	722,482	584,937	213,180	22,009	n.a.	6,601,398
Public	73,692	7,773	77,325	115,211	1,865	40,949	0	n.a.	316,815
Private	1,706,791	1,755,429	1,437,780	607,271	583,072	172,231	22,009	n.a.	6,284,583
Compensable	37,077	99,457	77,085	14,545	17,805	4,332	584	n.a.	250,865
Department of Veterans' Affairs	238,870	235,007	295,983	99,720	39,535	21,042	3	n.a.	930,160
Other private	1,430,844	1,420,965	1,064,712	493,006	525,732	146,857	21,422	n.a.	5,103,538
Not Medicare eligible	7,969	261	7,980	1,459	809	0	92	n.a.	18,570
Not reported	5	0	58,540	693	0	0	58,135	n.a.	117,373
Total	1,788,457	1,763,463	1,581,625	724,634	585,746	213,180	80,236	n.a.	5,737,341
All hospitals									
Medicare eligible	7,349,122	5,633,128	3,949,479	2,111,552	2,067,156	590,840	237,013	191,987	22,130,277
Public	4,578,331	3,358,393	2,285,696	1,340,139	1,236,770	301,435	180,516	182,954	13,484,234
Private	2,770,791	2,274,735	1,663,783	771,413	830,386	289,405	56,497	9,033	8,666,043
Compensable	104,339	160,803	97,370	35,744	38,434	9,677	3,437	5,220	455,024
Department of Veterans' Affairs	614,887	437,217	371,268	149,599	133,193	40,415	8,696	1,599	1,756,874
Other private	2,051,565	1,676,715	1,195,145	586,070	668,759	239,313	44,364	2,214	6,454,145
Not Medicare eligible	47,451	2,553	15,684	5,095	3,657	457	1,329	1,300	77,525
Not reported	117,597	21,079	58,576	1,487	3,299	0	58,164	948	261,150
Total patient days	7,514,170	5,656,760	4,023,739	2,118,134	2,074,112	591,297	296,506	194,235	22,468,953

n.a. not available.

Note: Public refers to those patients who are funded under Australian Health Care Agreement arrangements (Medicare patients).

Table 6.5: Separations and patient days, by Medicare eligibility status, funding source, hospital sector and year, Australia, 1996-97 to 2000-01

	1996-97		1997-98		1998-99		1999-00		2000-01	
	Separations	Patient days	Separations	Patient days	Separations	Patient days	Separations	Patient days	Separations	Patient days
Public hospitals										
Medicare eligible	3,627,346	16,352,980	3,746,443	15,975,004	3,839,380	15,997,754	3,854,035	16,077,822	3,850,363	15,528,879
Public	3,075,874	13,542,776	3,241,001	13,405,151	3,363,784	13,543,735	3,387,768	13,809,906	3,353,250	13,147,419
Private	551,472	2,810,204	505,442	2,569,853	475,596	2,454,019	466,267	2,267,916	497,113	2,381,460
Compensable	40,416	219,104	40,355	215,877	41,178	202,597	40,891	207,678	40,719	204,139
Department of Veterans' Affairs	114,428	765,986	108,597	675,436	114,713	697,872	127,408	783,240	133,517	826,714
Other private	396,628	1,825,104	356,480	1,678,540	319,705	1,553,750	297,968	1,276,998	322,877	1,350,607
Not Medicare eligible	12,033	54,610	13,062	53,504	13,936	55,029	16,760	102,639	14,715	58,956
Not reported	2,588	124,137	10,593	531,921	6,375	221,445	2,020	62,654	2,529	143,777
Total	3,641,967	16,531,727	3,770,098	16,560,429	3,859,691	16,274,228	3,872,815	16,243,115	3,867,607	15,731,612
Private hospitals										
Medicare eligible	1,663,606	5,797,441	1,766,426	5,938,951	1,843,174	5,981,128	2,010,768	6,310,300	2,228,635	6,601,396
Public	39,603	169,578	43,563	175,263	54,389	202,405	80,914	272,534	101,612	316,915
Private	1,624,003	5,627,863	1,722,863	5,763,688	1,788,785	5,778,722	1,929,854	6,037,666	2,127,023	6,284,583
Compensable	67,557	239,428	73,866	245,234	70,698	210,739	65,382	166,723	81,533	290,885
Department of Veterans' Affairs	109,231	600,227	134,622	714,365	158,278	794,251	167,408	866,286	182,265	930,160
Other private	1,447,215	4,788,208	1,514,355	4,804,089	1,559,809	4,773,732	1,637,064	4,964,657	1,853,225	5,103,536
Not Medicare eligible	2,690	7,169	4,886	13,048	5,517	14,090	5,887	13,233	7,752	18,570
Not reported	18,652	29,488	21,664	42,702	26,667	49,595	9,334	37,466	34,404	117,373
Total	1,684,948	5,834,098	1,792,976	5,994,701	1,875,358	6,044,813	2,025,989	6,360,999	2,270,791	6,737,341
All hospitals										
Medicare eligible	5,290,952	22,150,421	5,512,869	21,913,955	5,682,554	21,978,882	5,864,803	22,388,122	6,078,998	22,130,277
Public	3,115,477	13,712,354	3,284,564	13,580,414	3,418,173	13,748,141	3,468,682	14,082,540	3,454,862	13,484,234
Private	2,175,475	8,438,067	2,228,305	8,333,541	2,264,381	8,232,741	2,396,121	8,305,582	2,624,136	8,666,043
Compensable	107,973	458,532	114,251	461,111	111,876	413,336	106,273	394,401	122,252	455,024
Department of Veterans' Affairs	223,659	1,366,223	243,219	1,389,801	272,991	1,491,923	294,816	1,649,526	315,782	1,756,874
Other private	1,843,843	6,613,312	1,870,835	6,482,628	1,879,514	6,327,482	1,995,032	6,261,655	2,186,102	6,454,145
Not Medicare eligible	14,723	61,779	17,948	66,552	19,453	69,119	22,647	115,872	22,467	77,526
Not reported	21,240	153,625	32,257	574,623	33,042	271,040	11,354	100,120	36,933	261,150
Total separations/patient days	5,326,915	22,365,825	5,563,074	22,555,130	5,735,049	22,319,041	5,898,804	22,604,114	6,138,398	22,468,953

Note: . Public refers to those patients who are funded under Australian Health Care Agreement arrangements (Medicare patients).

Table 6.6: Separations, by State or Territory of usual residence and hospital sector, States and Territories, 2000-01

State or Territory of usual residence	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
New South Wales	1,214,082	16,208	9,038	466	1,583	111	14,337	274	1,256,099
Victoria	6,622	1,005,378	1,419	422	2,308	197	139	203	1,016,688
Queensland	7,199	751	673,398	209	233	66	107	248	682,211
Western Australia	459	372	284	359,842	221	55	37	890	361,960
South Australia	556	1,155	381	197	350,056	36	37	1,252	353,670
Tasmania	247	1,145	173	45	59	71,335	20	37	73,061
Australian Capital Territory	2,074	155	159	29	39	17	46,555	20	49,048
Northern Territory	240	159	275	243	1,794	57	4	56,038	58,810
Other Australian territories ^(a)	91	419	12	108	0	0	7	0	637
Not elsewhere classified ^(b)	0	2,022	3,062	1,284	766	21	0	11	7,166
Not reported	9,874	872	446	0	0	0	65	0	8,257
Total	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,303	58,973	3,867,607
Private hospitals									
New South Wales	627,660	5,341	18,458	168	1,272	92	4,994	n.a.	657,985
Victoria	5,889	573,002	1,179	102	1,020	79	29	n.a.	581,300
Queensland	3,342	460	504,308	81	164	41	34	n.a.	508,430
Western Australia	222	179	161	249,275	91	16	3	n.a.	249,947
South Australia	176	358	256	31	180,281	16	10	n.a.	181,128
Tasmania	161	596	163	31	47	64,907	2	n.a.	65,907
Australian Capital Territory	1,251	134	89	15	33	9	19,436	n.a.	20,967
Northern Territory	142	139	377	80	902	11	4	n.a.	1,655
Other Australian territories ^(a)	24	2	77	30	0	0	0	n.a.	133
Not elsewhere classified ^(b)	395	193	1,180	316	495	85	0	n.a.	3,164
Not reported	0	16	65	0	0	0	94	n.a.	176
Total	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	2,270,791

(a) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(b) Includes resident overseas, at sea, no fixed address, n.e. not available.

Table 6.7: Separation rates^(a) per 1,000 population, by State or Territory of usual residence and hospital sector, States and Territories, 2000-01

State or Territory of usual residence	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	Public hospitals								
New South Wales	178.0	2.4	1.4	0.1	0.2	0.0	2.1	0.0	184.2
Victoria	1.3	199.8	0.3	0.1	0.5	0.0	0.0	0.0	202.1
Queensland	2.0	0.2	185.1	0.1	0.1	0.0	0.0	0.1	187.6
Western Australia	0.2	0.2	0.1	189.9	0.1	0.0	0.0	0.5	191.1
South Australia	0.4	0.8	0.2	0.1	218.6	0.0	0.0	0.8	220.6
Tasmania	0.5	2.5	0.3	0.1	0.1	144.5	0.0	0.1	148.2
Australian Capital Territory	6.8	0.5	0.5	0.1	0.1	0.1	158.4	0.1	166.6
Northern Territory	1.7	0.8	1.5	1.3	11.1	0.4	0.0	340.3	357.0
Other Australian territories ^(b)	37.6	153.8	7.1	36.0	0.0	0.0	2.3	0.0	236.7
Private hospitals									
New South Wales	89.9	0.8	2.6	0.0	0.2	0.0	0.7	n.a.	94.1
Victoria	1.2	110.7	0.2	0.0	0.2	0.0	0.0	n.a.	112.3
Queensland	0.9	0.1	134.0	0.0	0.0	0.0	0.0	n.a.	135.2
Western Australia	0.1	0.1	0.1	129.7	0.0	0.0	0.0	n.a.	130.1
South Australia	0.1	0.2	0.1	0.0	105.6	0.0	0.0	n.a.	106.1
Tasmania	0.3	1.2	0.3	0.1	0.1	127.0	0.0	n.a.	129.0
Australian Capital Territory	4.1	0.4	0.3	0.0	0.1	0.0	65.2	n.a.	70.2
Northern Territory	0.9	0.8	2.3	0.4	5.5	0.1	0.0	n.a.	10.1
Other Australian territories ^(b)	7.8	0.5	59.6	8.1	0.0	0.0	0.0	n.a.	76.0
All hospitals									
New South Wales	267.9	3.2	3.9	0.1	0.4	0.0	2.8	0.0	278.3
Victoria	2.5	310.5	0.5	0.1	0.7	0.1	0.0	0.0	314.4
Queensland	2.9	0.3	319.2	0.1	0.1	0.0	0.0	0.1	322.7
Western Australia	0.4	0.3	0.2	319.6	0.2	0.0	0.0	0.5	321.1
South Australia	0.5	1.0	0.4	0.1	324.1	0.0	0.0	0.8	327.0
Tasmania	0.8	3.6	0.6	0.2	0.2	271.6	0.0	0.1	277.2
Australian Capital Territory	10.9	0.9	0.8	0.1	0.2	0.1	223.6	0.1	236.8
Northern Territory	2.6	1.6	3.7	1.7	16.6	0.5	0.0	340.3	367.1
Other Australian territories ^(b)	45.4	154.2	66.7	44.1	0.0	0.0	2.3	0.0	312.7

(a) The rates were directly age-standardised to the Australian population at 30 June 1991. For details see Appendix 3.

(b) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.
n.a. not available.

Table 6.8: Per cent of separations, by State or Territory of usual residence and hospital sector, States and Territories, 2000-01

State or Territory of usual residence	NSW							Vic	Qld	WA	SA	Tas	ACT	NT	Total
	NSW	NSW	NSW	NSW	NSW	NSW	NSW								
Public hospitals															
New South Wales	98.0	1.6	1.3	0.1	0.4	0.2	23.4	0.5	32.5						
Victoria	0.5	97.7	0.2	0.1	0.6	0.3	0.2	0.3	26.3						
Queensland	0.6	0.1	97.8	0.1	0.1	0.1	0.2	0.4	17.6						
Western Australia	<0.1	<0.1	<0.1	98.2	0.1	0.1	0.1	1.5	9.4						
South Australia	<0.1	0.1	0.1	0.1	98.0	0.1	0.1	2.1	9.1						
Tasmania	<0.1	0.1	<0.1	<0.1	<0.1	99.2	<0.1	0.1	1.9						
Australian Capital Territory	0.2	<0.1	<0.1	<0.1	<0.1	<0.1	75.9	<0.1	1.3						
Northern Territory	<0.1	<0.1	<0.1	0.1	0.5	0.1	<0.1	95.0	1.5						
Other Australian territories ^(a)	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1						
Not elsewhere classified ^(b)	<0.1	0.2	0.4	0.4	0.2	<0.1	<0.1	<0.1	0.2						
Not reported	0.6	0.1	0.1	<0.1	<0.1	<0.1	0.1	<0.1	0.2						
Total	99.9	99.9	99.9	99.9	100.0	99.9	99.9	99.9	100.0						
Private hospitals															
New South Wales	98.1	0.9	3.5	0.1	0.7	0.1	20.3	n.a.	29.0						
Victoria	0.9	98.7	0.2	<0.1	0.6	0.1	0.1	n.a.	25.6						
Queensland	0.5	0.1	95.8	<0.1	0.1	0.1	0.1	n.a.	22.4						
Western Australia	<0.1	<0.1	<0.1	99.7	<0.1	<0.1	<0.1	n.a.	11.0						
South Australia	<0.1	0.1	<0.1	<0.1	97.8	<0.1	<0.1	n.a.	8.0						
Tasmania	<0.1	0.1	<0.1	<0.1	<0.1	99.5	<0.1	n.a.	2.9						
Australian Capital Territory	0.2	<0.1	<0.1	<0.1	<0.1	<0.1	79.0	n.a.	0.9						
Northern Territory	<0.1	<0.1	0.1	<0.1	0.5	<0.1	<0.1	n.a.	0.1						
Other Australian territories ^(a)	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	n.a.	<0.1						
Not elsewhere classified ^(b)	0.1	<0.1	0.2	0.1	0.3	0.1	<0.1	n.a.	0.1						
Not reported	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	0.4	n.a.	<0.1						
Total	99.9	100.0	99.8	99.9	99.9	100.0	99.9	n.a.	100.0						

(a) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(b) Includes resident overseas, at sea, no fixed address.
n.a. not available.

Table 6.9: Average cost weight of separations,^(a) by State or Territory of usual residence and hospital sector, States and Territories, 2000-01

State or Territory of usual residence	Public hospitals							Total	
	NSW	Vic	Qld	WA	SA	Tas	ACT		NT
New South Wales	1.05	0.98	1.45	1.04	1.80	1.16	1.19	1.25	1.05
Victoria	1.15	0.95	1.00	1.17	1.34	1.12	1.46	0.94	0.95
Queensland	1.14	1.19	0.86	0.93	1.14	1.04	1.04	1.03	0.96
Western Australia	1.15	1.60	1.08	0.93	1.48	0.70	0.74	0.91	0.93
South Australia	1.17	1.64	0.88	1.16	0.98	1.61	1.19	0.80	0.98
Tasmania	1.26	2.17	1.07	1.03	1.03	1.11	1.12	0.95	1.13
Australian Capital Territory	1.61	1.39	0.97	0.99	0.99	0.93	0.89	1.00	0.92
Northern Territory	1.26	2.36	1.34	1.37	2.48	1.71	0.57	0.77	0.84
Other Australian territories ^(b)	0.92	0.95	3.00	1.19	..	..	2.03	..	1.04
Not elsewhere classified ^(c)	..	1.08	1.32	1.32	1.44	2.75	..	0.73	1.27
Not reported	1.34	1.23	1.20	..	..	..	1.23	..	1.32
Total	1.06	0.96	0.97	0.93	0.99	1.11	0.96	0.78	0.99
	Private hospitals								
New South Wales	0.85	1.02	0.95	0.85	1.21	1.03	1.18	n.a.	0.96
Victoria	0.79	0.86	0.91	0.97	0.99	1.19	1.13	n.a.	0.86
Queensland	0.69	1.11	0.85	1.00	1.18	0.94	0.97	n.a.	0.85
Western Australia	1.14	1.15	0.94	0.84	1.04	0.99	1.36	n.a.	0.84
South Australia	0.91	0.97	0.96	0.96	0.94	1.07	1.12	n.a.	0.64
Tasmania	1.28	1.39	0.94	1.86	1.42	0.97	0.33	n.a.	0.98
Australian Capital Territory	1.27	1.04	1.04	1.88	0.83	1.29	0.98	n.a.	0.99
Northern Territory	1.14	0.86	0.96	1.30	1.39	1.22	0.68	n.a.	1.23
Other Australian territories ^(b)	0.51	1.21	1.19	0.81	..	..	1.40	n.a.	0.99
Not elsewhere classified ^(c)	1.56	1.33	0.95	1.00	1.11	0.85	..	n.a.	1.18
Not reported	..	0.73	1.10	..	..	..	0.72	n.a.	0.83
Total	0.85	0.86	0.85	0.84	0.95	0.97	1.02	n.a.	0.87

(a) Separations for which the care type was reported as acute, or as newborn with qualified patient days, or was not reported. For further details see Chapter 11.

(b) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(c) Includes resident overseas, at sea, no fixed address.

n.a. not available.

.. not applicable.

Table 6.10: Separations, by care type and hospital sector, States and Territories, 2000-01

Care type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Acute care	1,180,798	985,112	652,548	353,080	343,692	68,584	59,778	56,851	3,700,443
Rehabilitation care—not further specified	22,380	17,338	0	3,740	3,633	676	477	374	48,618
Rehabilitation care—delivered in a designated unit	0	0	15,897	0	0	0	0	0	15,897
Rehabilitation care—according to a designated program	0	0	2,625	0	0	0	0	0	2,625
Rehabilitation care—principal clinical intent	0	0	1,575	0	0	0	0	0	1,575
<i>Rehabilitation total</i>	22,380	17,338	20,097	3,740	3,633	676	477	374	68,715
Palliative care, not further specified	7,775	4,255	3,214	873	1,308	372	419	23	18,239
Geriatric evaluation and management	1,012	9,499	317	0	26	64	7	0	10,925
Psychogeriatric care	905	0	248	691	57	6	1	0	1,908
Maintenance care	7,076	0	4,385	1,762	1,111	619	65	453	15,471
Newborn—qualified days only	10,866	8,682	5,603	2,104	2,251	1,552	460	1,210	32,728
Newborn—qualified and unqualified days	5,023	2,041	2,002	395	1,290	0	66	0	10,817
Newborn—unqualified days only	54,411	37,276	30,275	14,746	10,696	2,350	3,055	2,175	154,984
<i>Newborn total</i>	70,300	47,999	37,880	17,245	14,237	3,902	3,581	3,385	196,529
Other admitted patient care	2,083	1,709	233	0	3,691	0	35	12	7,763
Organ procurement—posthumous	1	0	26	17	0	0	0	3	47
Not reported	526	0	0	0	0	22	0	50	596
Total	1,292,856	1,065,912	718,948	377,408	367,755	74,245	64,363	61,151	4,022,638
Private hospitals									
Acute care	610,768	568,355	505,114	244,844	182,454	28,973	24,536	n.a.	2,165,044
Rehabilitation care—not further specified	16,468	8,727	0	1,364	1,111	0	0	n.a.	27,690
Rehabilitation care—delivered in a designated unit	0	0	3,273	0	0	0	0	n.a.	3,273
Rehabilitation care—according to a designated program	0	0	3,380	0	0	0	0	n.a.	3,380
Rehabilitation care—principal clinical intent	0	0	7,940	0	0	0	0	n.a.	7,940
<i>Rehabilitation total</i>	16,468	8,727	14,593	1,364	1,111	0	0	n.a.	42,283
Palliative care, not further specified	596	341	2,064	1,845	182	0	0	n.a.	5,028
Geriatric evaluation and management	2	12	2	0	2	6	9	n.a.	33
Psychogeriatric care	0	0	79	0	4	5,851	0	n.a.	5,934
Maintenance care	530	0	838	427	25	415	0	n.a.	2,235
Newborn—qualified days only	2,399	2,875	1,044	897	519	516	53	n.a.	8,303
Newborn—qualified and unqualified days	465	0	645	752	0	0	0	n.a.	1,862
Newborn—unqualified days only ^(a)	17,703	0	11,519	7,640	37	1,239	1,284	n.a.	39,422
<i>Newborn total</i>	20,567	2,875	13,208	9,289	556	1,755	1,337	n.a.	49,587
Other admitted patient care	8,514	110	1,934	0	8	0	8	n.a.	10,574
Organ procurement—posthumous	0	0	1	0	0	0	0	n.a.	1
Not reported	0	0	0	0	0	29,495	0	n.a.	29,495
Total	657,465	560,420	537,833	257,769	184,342	66,495	25,890	n.a.	2,310,214

(a) Victorian and South Australian private hospitals did not report a large majority of Newborns—unqualified days only, therefore the number of these separations is understated. n.a. not available.

Table 6.11: Average length of stay (days), by care type and hospital sector, States and Territories, 2000-01

Care type	Public hospitals						Total
	NSW	Vic	Qld	WA	SA	Tas	
Acute care	3.8	3.1	3.1	3.3	3.3	4.1	3.4
Rehabilitation care—not further specified	19.5	17.3	..	26.8	29.2	25.9	20.2
Rehabilitation care—delivered in a designated unit	..	..	6.0	..	..	..	6.0
Rehabilitation care—according to a designated program	..	..	5.0	..	..	..	5.0
Rehabilitation care—principal clinical intent	..	..	14.6	..	..	..	14.6
Rehabilitation total	19.5	17.3	6.6	26.8	29.2	25.9	16.7
Palliative care, not further specified	11.7	16.7	9.4	8.6	11.7	15.0	12.4
Geriatric evaluation and management	20.5	29.4	22.4	..	21.0	16.4	28.3
Psychogeriatric care	56.5	..	30.1	60.9	206.7	30.8	59.0
Maintenance care	62.5	..	33.9	32.3	146.5	91.3	56.6
Newborn—qualified days only	9.3	10.3	10.6	13.4	13.3	7.4	10.3
Newborn—qualified and unqualified days (qualified days)	3.4	3.0	2.3	5.3	1.9	..	3.0
Newborn—qualified and unqualified days (unqualified days)	2.5	2.5	2.3	2.8	3.0	..	2.5
Newborn—unqualified days only	2.9	3.0	2.5	3.3	3.0	3.5	2.9
Newborn total	4.1	4.5	3.8	4.7	4.8	5.0	4.3
Other admitted patient care	26.3	48.2	71.8	..	5.7	..	22.6
Organ procurement—posthumous	21.0	..	1.0	..	..	..	1.4
Not reported	2.7	..	..	..	..	3.4	3.4
Total ^(a)	4.6	3.8	3.5	3.8	4.2	5.3	4.1
Private hospitals							
Acute care	2.5	2.8	2.8	2.7	3.1	3.2	2.7
Rehabilitation care—not further specified	9.1	16.9	..	21.9	16.7	..	12.5
Rehabilitation care—delivered in a designated unit	..	..	11.2	..	..	..	11.2
Rehabilitation care—according to a designated program	..	..	4.2	..	..	..	4.2
Rehabilitation care—principal clinical intent	..	..	2.5	..	..	..	2.5
Rehabilitation total	9.1	16.9	4.8	21.9	16.7	..	9.9
Palliative care, not further specified	14.3	13.3	10.6	11.9	14.1	..	11.8
Geriatric evaluation and management	4.0	7.5	9.5	..	10.0	11.0	7.8
Psychogeriatric care	..	..	37.5	..	48.8	2.6	3.1
Maintenance care	13.6	..	41.4	22.7	148.1	5.9	25.8
Newborn—qualified days only	5.7	5.5	13.2	7.6	6.4	6.5	6.9
Newborn—qualified and unqualified days (qualified days)	12.0	..	3.2	3.2	..	..	5.4
Newborn—qualified and unqualified days (unqualified days)	4.3	..	3.9	4.4	..	..	4.2
Newborn—unqualified days only ^(b)	4.6	..	4.7	4.8	4.4	3.8	4.7
Newborn total ^(b)	5.0	5.5	5.5	5.3	6.3	4.6	5.2
Other admitted patient care	6.7	157.8	3.7	..	5.5	..	7.7
Organ procurement—posthumous	..	..	1.0	..	..	..	1.0
Not reported	..	..	..	..	..	3.4	3.4
Total ^(a)	2.8	3.0	3.0	2.9	3.2	3.3	3.0

(a) Excluding Newborn episodes with unqualified days only and Organ procurement—posthumous.

(b) Victorian and South Australian private hospitals did not report a large majority of Newborns—unqualified days only, therefore the average length of stay for Newborn separations for these states does not include those with unqualified days only.

.. not available.
.. not applicable.

Table 6.12: Separations, by mode of admission and hospital sector, States and Territories, 2000-01

Mode of admission	Public hospitals							Total	
	NSW	Vic	Qld	WA	SA	Tas	ACT		NT
Admitted patient transferred from another hospital	62,598	36,430	21,286	20,701	13,660	1,953	1,479	475	158,582
Statistical admission: type change	14,159	9,781	8,742	2,089	7,710	1,146	430	392	44,449
Other ^(a)	1,161,687	982,425	658,619	339,855	329,863	68,796	59,399	58,076	3,658,740
Not reported	0	0	0	0	5,806	0	0	30	5,836
Total	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,308	58,973	3,867,607
	Private hospitals								
Admitted patient transferred from another hospital	20,820	20,696	7,496	4,675	4,990	2,159	588	n.a.	61,424
Statistical admission: type change	1,828	814	1,621	1,068	76	402	18	n.a.	6,027
Other ^(a)	617,114	558,910	516,996	244,386	179,146	62,695	23,989	n.a.	2,203,236
Not reported	0	0	0	0	93	0	11	n.a.	104
Total	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	2,270,791
	All hospitals								
Admitted patient transferred from another hospital	83,418	57,126	28,782	25,376	18,650	4,112	2,067	475	220,006
Statistical admission: type change	15,987	10,595	10,563	3,157	7,786	1,548	448	392	50,476
Other ^(a)	1,778,801	1,541,335	1,175,615	584,241	509,029	131,491	83,388	58,076	5,851,976
Not reported	0	0	0	0	5,899	0	11	30	5,940
Total	1,878,206	1,609,056	1,214,960	612,774	541,364	137,151	85,914	58,973	6,138,398

(a) Other refers to all planned and unplanned admissions except transfers from other hospitals and statistical admissions.
n.a. not available.

Table 6.13: Separations, by mode of separation and hospital sector, States and Territories, 2000-01

Mode of separation	NSW						Public hospitals						NT	Total
	NSW	Vic	Qld	WA	SA	Tas	ACT	ACT	NT	NT	Total			
Discharge/transfer to an(other) acute hospital	73,410	55,251	29,939	14,950	15,339	2,542	1,673	1,699	1,699	194,803				
Discharge/transfer to residential aged care service ^(a)	15,083	10,284	5,048	2,024	6,606	781	451	147	147	40,424				
Discharge/transfer to an(other) psychiatric hospital	2,343	0	259	1,273	1,267	0	19	4	4	5,155				
Discharge/transfer to other health care accommodation ^(b)	2,771	279	1,985	1,239	1,003	841	306	1,439	1,439	9,963				
Statistical discharge: type change	14,924	10,309	9,251	2,343	5,093	1,647	439	390	390	44,396				
Left against medical advice/discharge at own risk	12,194	4,485	5,528	3,388	2,043	253	143	1,572	1,572	29,516				
Statistical discharge from leave	4,736	13	588	1,798	171	0	61	0	0	7,368				
Died	21,874	13,748	8,195	3,343	4,796	1,324	726	325	325	54,331				
Other ^(c)	1,091,199	934,267	627,854	332,286	320,267	64,507	57,490	53,356	53,356	3,481,226				
Not reported	0	0	0	0	484	0	0	41	41	525				
Total	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,308	58,973	58,973	3,867,607				
Private hospitals														
Discharge/transfer to an(other) acute hospital	11,554	13,427	7,941	3,207	4,550	55	258	n.a.	n.a.	40,992				
Discharge/transfer to residential aged care service ^(a)	1,409	2,336	1,917	562	2,148	74	22	n.a.	n.a.	8,468				
Discharge/transfer to an(other) psychiatric hospital	110	0	15	118	119	0	3	n.a.	n.a.	365				
Discharge/transfer to other health care accommodation ^(b)	583	3	484	341	86	8,672	32	n.a.	n.a.	10,201				
Statistical discharge: type change	1,571	912	1,872	1,170	108	19,159	0	n.a.	n.a.	24,792				
Left against medical advice/discharge at own risk	715	168	418	241	31	105	1	n.a.	n.a.	1,679				
Statistical discharge from leave	134	0	25	42	3	0	0	n.a.	n.a.	204				
Died	2,603	3,978	4,188	1,911	1,588	204	100	n.a.	n.a.	14,572				
Other ^(c)	621,083	559,596	509,453	242,537	172,938	36,987	24,190	n.a.	n.a.	2,166,784				
Not reported	0	0	0	0	2,734	0	0	n.a.	n.a.	2,734				
Total	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	n.a.	2,270,791				

(a) Unless this is the usual place of residence.

(b) Includes mothercraft hospitals, except in jurisdictions where mothercraft facilities are considered acute.

(c) Includes discharge to usual residence/own accommodation/welfare institution (including prisons, hostels and group homes providing primarily welfare services), n.a. not available.

Table 6.14: Separations for patients over 70 years, by care type and mode of separation, all hospitals, Australia, 2000-01

Care type	Discharge/ transfer to acute hospital	Discharge/ transfer to residential aged care service ^(a)	Discharge/ transfer to psychiatric hospital	Discharge/ transfer to other health care accommodation ^(b)	Statistical discharge: type change	Left against medical advice/ discharge at own risk	Statistical discharge from leave	Died	Other ^(c)	Not reported	Total
Acute care	93,887	31,546	620	6,059	28,329	2,208	634	38,780	1,279,652	440	1,482,155
Rehabilitation care—not further specified	3,550	2,849	15	654	3,108	151	339	502	36,032	7	47,207
Rehabilitation care—delivered in a designated unit	107	246	0	33	775	9	3	47	7,863	0	9,103
Rehabilitation care—acc. to a designated program	24	40	0	3	61	0	0	5	1,478	0	1,611
Rehabilitation care—principal clinical intent	155	75	0	13	293	3	0	22	1,277	0	1,838
Rehabilitation total	3,836	3,210	15	703	4,237	163	342	576	46,670	7	59,759
Palliative care—not further specified	417	317	3	45	184	11	80	5,849	3,188	0	10,094
Palliative care—delivered in a designated unit	28	59	0	18	68	1	0	766	682	0	1,622
Palliative care—acc. to a designated program	23	10	0	1	18	0	0	147	233	0	432
Palliative care—principal clinical intent	47	27	0	8	41	1	0	394	157	0	675
Palliative care total	515	413	3	72	311	13	80	7,156	4,260	0	12,823
Geriatric evaluation and management	967	2,362	0	22	909	45	11	585	4,580	1	9,502
Psychogeriatric care	140	357	17	78	143	2	122	48	1,564	0	2,471
Maintenance care	1,217	4,340	10	330	1,269	16	54	1,231	5,025	1	13,493
Other admitted patient care	227	888	0	5	174	3	1	193	2,223	1	3,715
Not reported	28	15	0	0	6,269	64	53	48	3,140	1	9,618
Total	100,817	43,151	665	7,269	41,641	2,514	1,297	48,617	1,347,114	451	1,593,536

(a) Unless this is the usual place of residence.

(b) Includes mothercraft hospitals, except in jurisdictions where mothercraft facilities are considered acute.

(c) Includes discharge to usual residence/own accommodation/welfare institution (including prisons, hostels and group homes providing primarily welfare services).
Note: acc. = according

Table 6.15: Separations, by inter-hospital contracted patient status and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Inter-hospital contracted patient status									
Public hospitals									
Inter-hospital contracted patient from public sector	n.a.	n.a.	143	660	700	n.a.	n.a.	10	1,513
Inter-hospital contracted patient from private sector	n.a.	n.a.	0	92	7	n.a.	n.a.	534	633
Inter-hospital contracted patient from unspecified sector	1,293	2,170	0	0	0	n.a.	n.a.	0	3,463
Not contracted	1,236,647	1,026,125	0	361,893	350,546	n.a.	n.a.	58,429	3,033,640
Not reported	504	341	688,504	0	5,806	71,895	61,308	0	828,356
Total	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,308	58,973	3,867,607
Private hospitals									
Inter-hospital contracted patient from public sector	n.a.	n.a.	797	7,152	204	n.a.	n.a.	n.a.	8,153
Inter-hospital contracted patient from private sector	n.a.	n.a.	582	3	0	n.a.	n.a.	n.a.	585
Inter-hospital contracted patient from unspecified sector	27,680	6,202	0	0	0	n.a.	n.a.	n.a.	33,882
Not contracted	612,082	574,213	1,097	242,974	184,008	n.a.	n.a.	n.a.	1,614,379
Not reported	0	0	523,837	0	93	65,256	24,606	n.a.	613,792
Total	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	2,270,791
All hospitals									
Inter-hospital contracted patient from public sector	n.a.	n.a.	940	7,812	904	n.a.	n.a.	10	9,666
Inter-hospital contracted patient from private sector	n.a.	n.a.	582	95	7	n.a.	n.a.	534	1,216
Inter-hospital contracted patient from unspecified sector	28,973	8,372	0	0	0	n.a.	n.a.	0	37,345
Not contracted	1,848,729	1,600,343	1,097	604,867	534,554	n.a.	n.a.	58,429	4,648,019
Not reported	504	341	1,212,341	0	5,899	137,151	85,914	0	1,442,150
Total separations	1,878,206	1,609,056	1,214,960	612,774	541,364	137,151	85,914	58,973	6,138,398

n.a. not available

Table 6.16: Insurance status for Medicare eligible private patients,^(a) by hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Hospital insurance status									
Hospital insurance	125,276	52,937	24,805	21,640	22,896	n.a.	2,881	676	251,111
No hospital insurance	8,809	16,045	17,670	1,825	4,492	n.a.	2,258	224	51,323
Not reported	9,302	4	1,215	0	1,995	7,741	144	42	20,443
Total	143,387	68,986	43,690	23,465	29,383	7,741	5,283	942	322,877
Private hospitals									
Hospital insurance	457,430	431,474	355,244	167,845	152,712	18,030	6,805	n.a.	1,589,540
No hospital insurance	91,408	75,390	44,834	13,311	11,228	465	494	n.a.	237,130
Not reported	2,744	0	1,420	0	4,355	28,036	0	n.a.	36,555
Total	551,582	506,864	401,498	181,156	168,295	46,531	7,299	n.a.	1,863,225
All hospitals									
Hospital insurance	582,706	484,411	380,049	189,465	175,608	18,030	9,686	676	1,840,651
No hospital insurance	100,217	91,435	62,504	15,136	15,720	465	2,752	224	286,453
Not reported	12,046	4	2,635	0	5,350	35,777	144	42	56,998
Total separations	694,969	575,850	445,188	204,621	197,678	54,272	12,582	942	2,186,102

(a) Other than compensable and DVA patients.
n.a. not available.

Table 6.17: Separations, by urgency of admission and hospital sector, States and Territories, 2000-01

	NSW	Vic	Qld	WA	Tas	ACT	Total ^(a)
Urgency of admission							
	Public hospitals						
Emergency	565,035	349,232	307,607	159,739	30,081	19,405	1,431,089
Elective	567,222	598,519	223,431	132,344	30,265	22,586	1,574,367
Not assigned	105,673	80,544	157,609	70,470	11,549	19,316	445,161
Not reported	514	341	0	92	0	1	948
Total	1,238,444	1,028,636	688,647	362,645	71,895	61,308	3,451,575
	Private hospitals						
Emergency	40,233	30,287	71,272	28,366	0	0	170,158
Elective	581,223	534,783	385,135	190,938	39,447	0	1,731,526
Not assigned	18,306	15,350	69,906	30,825	0	0	134,387
Not reported	0	0	0	0	25,809	21,606	47,415
Total	639,762	580,420	526,313	250,129	65,256	21,606	2,083,466
	All hospitals						
Emergency	605,268	379,519	378,879	188,105	30,081	19,405	1,601,257
Elective	1,148,445	1,133,302	608,566	323,282	69,712	22,586	3,305,893
Not assigned	123,979	95,894	227,515	101,295	11,549	19,316	579,548
Not reported	514	341	0	92	25,809	21,607	48,363
Total separations	1,878,206	1,609,056	1,214,960	612,774	137,151	82,914	5,535,061

(a) Total figure excludes South Australia and the Northern Territory. South Australia did not use the 'Not assigned' category for urgency of admission status. Northern Territory did not report urgency of admission status.

