Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N

Exported from METEOR (AIHW's Metadata Online Registry)

Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Multiple health-care provider indicator
Synonymous names:	Multiple health-care provider flag
METEOR identifier:	679876
Registration status:	Health!, Superseded 05/02/2021
Definition:	An indicator of whether a non-admitted patient service event was delivered by multiple health-care providers, as represented by a code.
Data Element Concept:	Non-admitted patient service event—multiple health-care provider indicator
Value Domain:	Yes/no/not stated/inadequately described code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	1	Yes
	2	No
Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:	CODE 9 Not stated/inadequately described
	This code is not for use in primary data collections.

Data element attributes

Collection and usage attributes

Guide for use:	CODE 1 Yes

This code is used to indicate that direct care has been provided by multiple health-care providers.

CODE 2   No

This code is used to indicate that direct care has not been provided by multiple health-care providers.

CODE 9   Not stated/inadequately described

Collection methods:	This code is used when there is insufficient information to determine whether direct care has been provided by multiple health-care providers. The definition of the term 'multiple health-care provider' can vary depending on the context and/or collection in which the term is being applied.

For example, in the context of reporting non-admitted activity data for activity based funding, 'multiple health-care provider' means three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event. The health-care providers may be of the same profession (medical, nursing or allied health). However, they must each have a different speciality so that the care provided by each provider is unique and meets the definition of a non-admitted patient service event.

In practice, this should be interpreted as meaning that the patient can separately identify the unique care provided by each health-care provider. For example:

- A patient attends a pain management clinic for assessment. At the assessment there is a doctor specialising in chronic diseases, a doctor specialising in pain management, a nurse specialising in pain management and an occupational therapist. As each provider will provide unique clinical content to the assessment, this is counted as multiple health-care providers.
- A patient attends a rehabilitation clinic and sees a physiotherapist, an occupational therapist and then a nurse, all individually. This would be counted as multiple health-care providers.
- A patient attends a hydrotherapy clinic, sees a physiotherapist who provides a plan, and then completes the plan with a physiotherapist aid. This would not be counted as multiple health-care providers.

Source and reference attributes

Submitting organisation:	Independent Hospital Pricing Authority

Relational attributes

Related metadata references:	Supersedes Non-admitted patient service event—multiple health-care provider indicator, yes/no/not stated/inadequately described code N Health!, Superseded 25/01/2018
	Has been superseded by Non-admitted patient service event—multiple health-care provider indicator, yes/no/not applicable/not stated/inadequately described code N Health!, Standard 05/02/2021
	See also Appointment—multiple health care provider indicator, (derived) yes/no/not stated/inadequately described code N WA Health, Standard 01/06/2017
Implementation in Data Set Specifications:	Activity based funding: Non-admitted patient care aggregate NBEDS 2018-19 Independent Hospital Pricing Authority, Superseded 30/06/2019 ***Implementation start date:*** 01/07/2018 ***Implementation end date:*** 30/06/2019 ***DSS specific information:***

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Activity based funding: Non-admitted patient NBEDS 2018-19](#)
[Independent Hospital Pricing Authority](#), Superseded 30/06/2019
Implementation start date: 01/07/2018
Implementation end date: 30/06/2019
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient care aggregate NBEDS 2019-20](#)
[Health!](#), Superseded 18/12/2019
[Independent Hospital Pricing Authority](#), Standard 01/07/2019
Implementation start date: 01/07/2019
Implementation end date: 30/06/2020
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient care aggregate NBEDS 2020–21](#)
[Health!](#), Superseded 05/02/2021
Implementation start date: 01/07/2020
Implementation end date: 30/06/2021
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient care hospital aggregate NMDS 2018-19](#)
[Health!](#), Superseded 12/12/2018
Implementation start date: 01/07/2018
Implementation end date: 30/06/2019
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient care Local Hospital Network aggregate NBEDS 2018-19](#)
[Health!](#), Superseded 12/12/2018
Implementation start date: 01/07/2018
Implementation end date: 30/06/2019
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

[Non-admitted patient NBEDS 2018-19](#)
[Health!](#), Superseded 12/12/2018
Implementation start date: 01/07/2018
Implementation end date: 30/06/2019
DSS specific information:

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[Non-admitted patient NBEDS 2019-20](#)
    [Health!](#), Superseded 18/12/2019
    [Independent Hospital Pricing Authority](#), Standard 01/07/2019
Implementation start date: 01/07/2019
Implementation end date: 30/06/2020
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

Code 2 should not be reported for the multidisciplinary case conference Tier 2 classes (20.56 and 40.62).

[Non-admitted patient NBEDS 2020–21](#)
    [Health!](#), Superseded 05/02/2021
Implementation start date: 01/07/2020
Implementation end date: 30/06/2021
DSS specific information:

For the purposes of reporting non-admitted activity data for activity based funding, 'multiple health-care providers' is defined as three or more health-care providers who deliver care either individually or jointly within a non-admitted patient service event.

Code 2 should not be reported for the multidisciplinary case conference Tier 2 classes (20.56 and 40.62).