Quantifying impact of COVID-19 on hospital costs in a post-pandemic environment

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Outline

- Introduction to IHACPA and Australian hospital funding
- COVID-19 in Australia
- Data exploration
- Model assumptions
- Methodology
- Results
- Next steps





Introduction

- Independent Health and Aged Care Pricing Authority (IHACPA) is independent of all governments.
- Elected by states, territories, and the Commonwealth.
- Established to facilitate implementation of national activity based funding for public hospitals.
- Strong consultation and transparency values.



Introduction





- IHACPA

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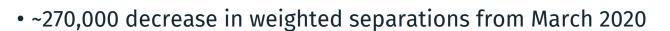


COVID-19 in Australia

- ~8,000 cases at 20 June 2020
- ~7,000 recovered
- ~2,600 hospitalisations
- ~100 deaths
- ~50 cases per day



The data tells us...



- ~2,600 COVID-19 hospitalisations
- Total costs remained consistent through the pandemic response*
- Average cost increase of ~16%

Partly due to fully staffed, operating under capacity





Assumptions for 2022

Developed in 2021

- 1. Volume will return to historical trends
- 2. Price relativities will remain stable within streams of care
- 3. Step increase in average cost (additional cleaning, screening, etc)
- 4. Funding guarantee top up was used in full
- 5. Technical assumption around inflexible labour costs

Paraphrased from https://www.ihacpa.gov.au/resources/national-efficient-price-determination-2022-23

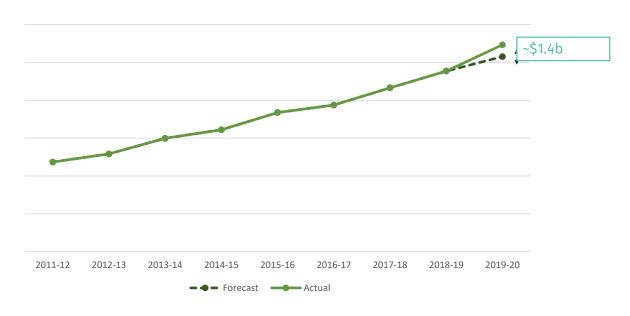


Method

- Use pre-pandemic data to fit non-COVID cost model
- Normalise activity assume hospitals operating at capacity
- Normalise cost estimate increase in variable component of cost for normalised activity
- Measure difference in expected vs actual cost



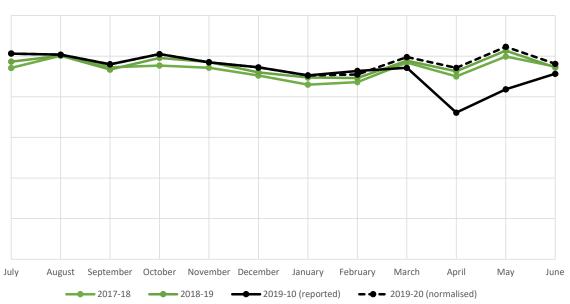
Forecast non-COVID costs





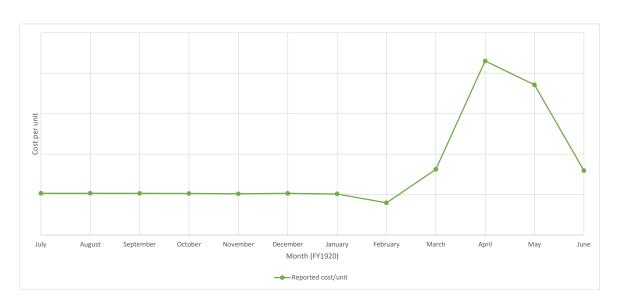
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Normalise activity





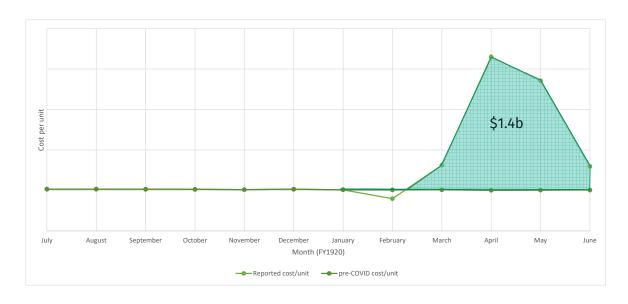
Average costs





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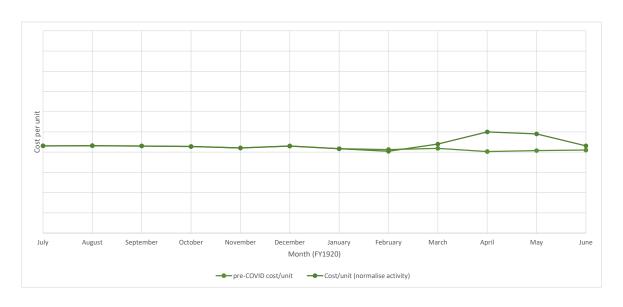
Average costs





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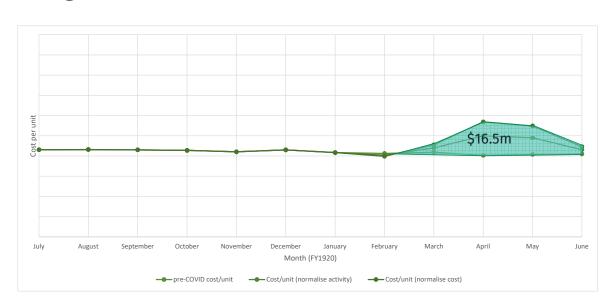
Average costs





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Average costs







Next steps

- The COVID-19 pandemic continued
- 2020-21 was a relatively quiet year
- 2021-22 data collection underway...
- 2022-23 data will let us test assumptions



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