

Administrator National Health Funding Pool

ANNUAL REPORT **2013-14**

FURTHER INFORMATION

If you require further information or have any queries in relation to this Annual Report, please contact:

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An accessible copy of this Annual Report is available online at: www.publichospitalfunding.gov.au/publications/annual-reports

LETTER OF TRANSMITTAL



Office of the Administrator GPO Box 1252 Canberra ACT 2601

Telephone: 1300 930 522 Email: nhfa.administrator@nhfa.gov.au

28 October 2014

The Hon Peter Dutton MP Minister for Health Commonwealth of Australia

The Hon David Davis MP Minister for Health Victoria

The Hon Kim Hames MLA Minister for Health Western Australia

The Hon Michael Ferguson MP Minister for Health Tasmania

The Hon Robyn Lambley MLA Minister for Health Northern Territory The Hon Jillian Skinner MP Minister for Health New South Wales

The Hon Lawrence Springborg MP Minister for Health Queensland

The Hon Jack Snelling MP Minister for Health South Australia

Ms Katy Gallagher MLA Minister for Health Australian Capital Territory

Dear Ministers,

Administrator of the National Health Funding Pool Annual Report 2013-14

I am pleased to submit to you, for tabling in your respective Parliaments, my Annual Report for the year ended 30 June 2014.

This report has been prepared in accordance with the requirements of sections 241 to 243 of the Commonwealth *National Health Reform Act 2011* (the Act) and corresponding state and territory national health reform legislation.

The report includes a combined Financial Statement of the National Health Funding Pool accounts, and a Financial Statement for each state and territory State Pool Account audited by the respective Auditor-General. The report also includes the reporting required under section 241(2) of the Act on national health reform funding and payments, on a national level and for each state and territory.

Yours sincerely,

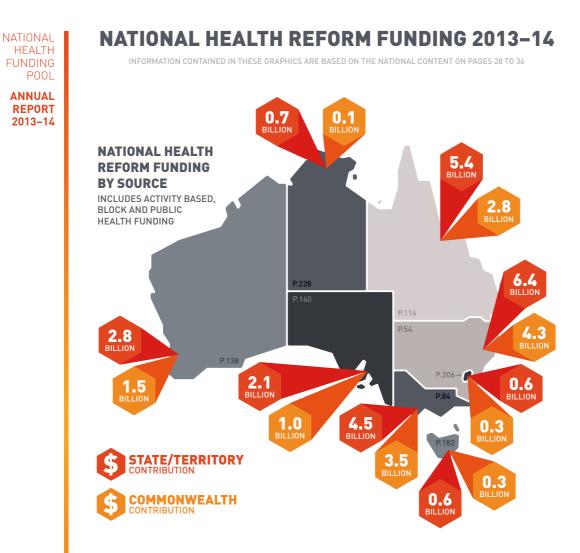
Bob Sendt

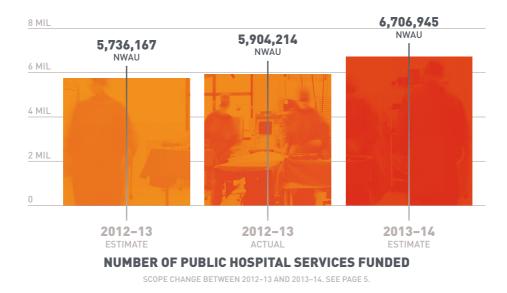
RJ Sendt Administrator National Health Funding Pool

NATIONAL HEALTH FUNDING POOL

ANNUAL REPORT 2013-14







IV



PAYMENTS TO LOCAL HOSPITAL NETWORKS



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NATIONAL HEALTH FUNDING POOL

> ANNUAL REPORT 2013-14

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NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013-14

MESSAGE FROM THE ADMINISTRATOR

I am pleased to present my Annual Report for the year ended 30 June 2014, the second year of operation of the National Health Funding Pool (the Pool) and the role of Administrator.

In 2013–14 I have again worked closely with the National Health Funding Body (NHFB) to deliver independence and transparency in the calculation, payment and reporting of public hospital funding in Australia.

During 2013–14 one of my key responsibilities was to calculate the Commonwealth Government's funding contribution into the Pool comprising activity based, block and public health funding — totalling nearly \$14 billion. 2013–14 was the second year of a two-year transition period in which the Commonwealth provided funding to states and territories equivalent to the amount that would otherwise have been paid under the former National Healthcare Specific Purpose Payment.

> BOB SENDT ADMINISTRATOR NATIONAL HEALTH FUNDING POOL

The 2013–14 calculations differed from 2012–13 as the scope of activity based funding services was broadened to include sub–acute and admitted mental health. This was in line with the intention of the National Health Reform Agreement (the Agreement) to move more health services to an activity basis of funding. In addition, in 2013–14 I was also required to calculate the Commonwealth block funding component of national health reform funding.



In 2013–14 nearly \$74 billion in funding and payment transactions was processed through the National Health Funding Pool and state managed funds, and I directly oversaw the payment of over \$33 billion in funding from the Pool to local hospital networks, state managed funds and other parties.

As required by section 241(3) of the National Health Reform Act 2011 (the Act), this Annual Report includes a financial statement for each state and territory State Pool Account (audited by the respective Auditor–General) and a financial statement for the combined State Pool Accounts. Also included for each state and territory is a set of tables satisfying the reporting requirements of section 241(2) of the Act. These tables provide detail on funding and payments for each state and territory Pool Account and state managed fund.

FORWARD OUTLOOK

GROWTH AND FUNDING GUARANTEES

From July 2014 to June 2017, my calculation of Commonwealth funding will be linked to the level of services delivered by public hospitals in each state and territory. This funding will be calculated on a 2013–14 base plus 45% of the efficient growth in volume and activity each financial year, as outlined in the Agreement. My calculation (and subsequent advice to jurisdictions and the Commonwealth Treasurer) will also include the calculation of funding guarantees as set out in the Agreement.

DATA PROVISION

With the move to growth funding from 2014–15, there will be an increasing imperative for the supply of patient and aggregate level data to support the accurate calculation of the Commonwealth contribution. My data requirements were detailed in my *Three Year Data Plan* released on 14 March 2014.

The continued timely supply of data to support my monthly public reporting of funding and payments is integral to the transparency of contribution and payment flows. These reports are available from my Public Hospital Funding website:

www.publichospitalfunding.gov.au.

DATA MATCHING

Clause A6 of the Agreement states that the Commonwealth will not fund patient services through the Agreement if the same service is funded through the Medical Benefits Schedule (MBS) or the Pharmaceuticals Benefits Scheme (PBS).

NATIONAL HEALTH FUNDING POOL

ANNUAL REPORT 2013-14 NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Together with the NHFB I have undertaken significant data preparation and analysis in order to progress this data matching requirement across 2012–13 and 2013–14. My intention over the next year is to work towards implementing this clause of the Agreement.

STRUCTURAL CHANGE

In its 2014–15 Budget, the Commonwealth flagged its intention to create a new health productivity and performance commission by merging several existing bodies including the Administrator and the NHFB. I will work with the NHFB, the Commonwealth, and states and territories to ensure that effective stakeholder relationships are maintained during this process.

ACKNOWLEDGEMENTS

My role necessitates working in collaboration with a wide range of stakeholders across the Commonwealth, states, territories and other national health agencies. The success of the operations of the Pool depends on the engagement and support of stakeholders and I extend my thanks to those who have contributed their time and expertise in 2013–14. The NHFB is integral in assisting me to discharge my functions. The enthusiasm and commitment of this small but hardworking team of professionals is to be commended.

Bob Sendt

RJ Sendt Administrator *National Health Funding Pool*

ANNUAL REPORTING: LEGISLATIVE REQUIREMENTS

The Administrator of the National Health Funding Pool is required to prepare an annual report of operations and present it to Commonwealth and state/territory Health Ministers.

The information included in this Annual Report includes the mandatory reporting of:

- An individual financial statement for each state and territory's State Pool Account and a combined financial statement.
- National health reform funding and payments.

This reporting is on both a national level and for each state and territory, reflecting all national health reform amounts transacted in 2013–14.

State and territory financial statements are audited and certified by the relevant Auditor–General.

Both of these financial reporting components have been compiled on a cash basis and are in Australian dollars. All amounts are rounded to the nearest thousand dollars unless otherwise specified. NATIONAL HEALTH FUNDING POOL

ANNUAL REPORT 2013-14 NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 This reporting is pursuant to the following jurisdictional national health reform legislation:

JURISDICTION	FINANCIAL STATEMENTS	NATIONAL HEALTH REFORM FUNDING AND PAYMENTS REPORTING
COMMONWEALTH	s.241(3), s.242 and s.243 of the National Health Reform Act 2011	s.241(2) of the National Health Reform Act 2011
NEW SOUTH WALES	schedule 6A clauses 16(3), 17 and 18 of the <i>Health Services</i> <i>Act 1997</i>	schedule 6A clause 16(2) of the <i>Health Services Act 19</i> 97
VICTORIA ¹	s.17(3), s.18 and s.19 of the Health (Commonwealth State Funding Arrangements) Act 2012	s.17(2) of the Health (Commonwealth State Funding Arrangements) Act 2012
QUEENSLAND	s.53S(3), s.53T and s.53U of the <i>Hospital and Health Boards</i> <i>Act 2011</i>	s.53S(2) of the Hospital and Health Boards Act 2011
SOUTH AUSTRALIA	s.22(3), s.23 and s.24 of the National Health Funding Pool Administration (South Australia) Act 2012	s.22(2) of the National Health Funding Pool Administration (South Australia) Act 2012
WESTERN AUSTRALIA	s.19(3), s.20 and s.21 of the National Health Funding Pool Act 2012	s.9(2) of the National Health Funding Pool Act 2012
TASMANIA	s.18[3], s.19 and s.20 of the National Health Funding Administration Act 2012	s.18(2) of the National Health Funding Administration Act 2012
AUSTRALIAN CAPITAL TERRITORY	s.18(2) of the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012	s.5(2) of the Health (National Health Funding Pool and Administration) Act 2013
NORTHERN TERRITORY	s.18[3], s.19 and s.20 of the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012	s.18(2) of the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012

Table 1 Jurisdictional national health reform legislation

OVERVIEW

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

THE ADMINISTRATOR OF THE NATIONAL HEALTH FUNDING POOL

The Administrator is a single independent statutory office holder, appointed to the position under legislation of the Commonwealth and each state and territory.

The Administrator is independent of Commonwealth and state and territory governments and is not subject to the control or direction of any Commonwealth Minister.

The Administrator's functions are set out in the Agreement and the *National Health Reform Act 2011.*

The Administrator is required to:

- Calculate and advise the Commonwealth Treasurer of the Commonwealth contribution to hospital funding in each state and territory (*National Health Reform* Act 2011 s.238).
- Oversee the payment of Commonwealth hospital funding into State Pool Accounts (*National Health Reform Act 2011* s.238).

- Make payments from each State Pool Account in accordance with the directions of the State concerned (common provisions of the National Health Funding Pool legislation in each state and territory).²
- Monitor state payments into each State Pool Account (common provisions of National Health Funding Pool legislation in each state and territory).³
- Reconcile estimated and actual service delivery volumes and calculate any necessary payment adjustments so that Commonwealth payments can be adjusted to reflect the actual level of services provided (National Health Reform Act 2011 s.238).
- Undertake data matching to determine if hospital services otherwise in scope for activity based funding are ineligible for Commonwealth funding because the service has been paid for by the Commonwealth under the Medical Benefits Schedule (MBS) or the Pharmaceutical Benefits Scheme (PBS) (Clause A6 of the National Health Reform Agreement).
- Report publicly on the national health reform funding and payments (*National Health Reform Act 2011* s.240).

² A list of the state and territory legislation containing the common provisions can be found at page XII.
 ³ As above.

OVERVIEW

THE NATIONAL HEALTH FUNDING POOL

Under the Agreement, the Commonwealth, state, and territory governments are jointly responsible for funding public hospital services, using either activity based or block funding.

Commonwealth national health reform funding for public hospitals is paid monthly into the Pool which consists of eight state/territory bank accounts with the Reserve Bank of Australia.

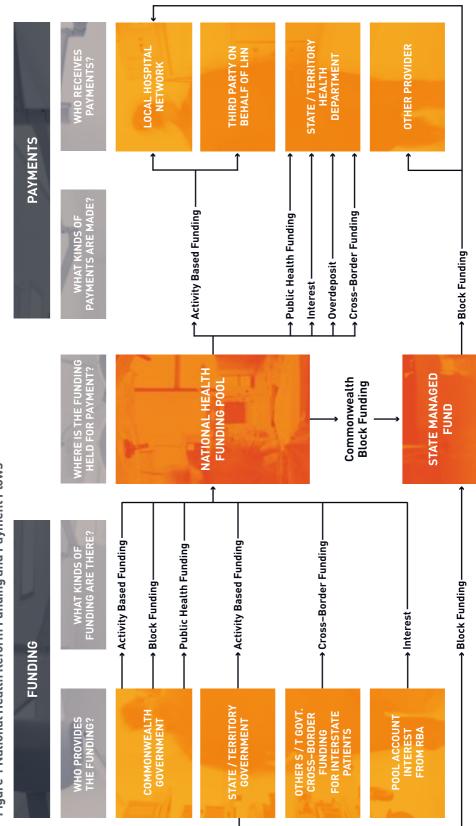
These are known as state pool accounts and are established under state and territory national health reform legislation for the purposes of:

- receiving all Commonwealth national health reform funding
- + receiving activity based state/ territory public hospital funding
- distributing funds and making payments according to the Agreement.

The national health reform funding and payment flows are outlined in Figure 1.



Figure 1 National Health Reform Funding and Payment Flows



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As depicted in Figure 1, funding providers and payment recipients are described as:

FUNDING PROVIDERS

The funding providers are the Commonwealth Government and state/territory governments for their own hospital activity and for cross-border funding for interstate patients. National health reform funding occurs when contributors have paid into a state pool account or state managed fund.

PAYMENT RECIPIENTS

The payment recipients are the local hospital networks, third parties on behalf of the local hospital networks, state/territory Health Departments and other providers. Recipients receive payments from the state pool account or state managed fund.

NATIONAL HEALTH REFORM FUNDING TYPES

The types of funding and payments available under national health reform arrangements are described below.

ACTIVITY BASED FUNDING

Activity based funding is a system for funding public hospital services based on the number of services provided to patients and the price to be paid for delivering those services. Activity based funding uses national classifications, cost weights and state/ territory and Commonwealth prices to determine the amount of funding for each activity or service.

The Commonwealth's activity based funding contribution to local hospital networks is based on an efficient price per service known as the National Efficient Price, for as many services estimated to be provided (and later, when data are available, for services actually provided).

The following service categories were funded through activity based funding for 2013–14:

- + Acute admitted services
- + Emergency department services
- + Non-admitted services
- + Sub-acute and non-acute services
- + Admitted mental health services.

The scope of activity based funded services was wider in 2013–14 than for 2012–13, with the addition of sub–acute and admitted mental health services. NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

BLOCK FUNDING

Block funding is provided to states and territories where the technical requirements of activity based funding are not able to be satisfied.

Many small hospitals are entirely block funded. Small hospitals in rural areas often have low–volume or fluctuating activity that would result in unpredictable revenue if funded on the basis of activity.

The Independent Hospital Pricing Authority (IHPA), in consultation with jurisdictions, develops block funding criteria and identifies whether hospital services and functions are eligible for block funding only or mixed activity based funding and block funding.

The following categories of services were block funded for 2013–14:

- + Small rural hospitals
- + Teaching, training and research
- Non-admitted mental healthservices
- + Other non-admitted services.

PUBLIC HEALTH FUNDING

Public Health Funding is paid by the Commonwealth into the Pool, and from there to state/territory Health Departments for the purposes of population health activities. States and territories have full discretion over the application of public health funding to the outcomes set out in the Agreement. This amount represents the sum of amounts identified under the Agreement to support national public health, youth health services and essential vaccines (service delivery).

CROSS-BORDER ACTIVITY BASED FUNDING

When a resident of one state or territory receives hospital treatment in another state or territory, the 'resident' state or territory compensates the 'provider' state or territory for its share of the cost of that service. This is known as a cross-border activity based payment. The Commonwealth share of the cost of these services is made directly to the 'provider' state or territory.

Cross–border agreements, including the scope of services and payment arrangements, can occur bilaterally between all states and territories.

INTEREST

When a state pool account has an overnight credit balance, interest accrues in the account, and is paid periodically by the Reserve Bank of Australia to the state or territory account holder. If the interest is paid into the pool account, it can be used as a component of state and territory funding.

OVER DEPOSIT

If more money is deposited into the state pool account than required, this money can either be earmarked as an 'over deposit' and paid to the state or territory health department or can be used as part of the next payment to local hospital networks. OVERVIEW



OPERATIONS: 2013–14 HIGHLIGHTS

CALCULATING THE COMMONWEALTH CONTRIBUTION

2013–14 COMMONWEALTH FUNDING

The processes for calculating the 2013–14 Commonwealth contribution were a consolidation of those used in 2012–13. The \$13.9 billion in Commonwealth funding for activity based, block and public health funding was calculated using a transparent, robust and independently reviewed methodology.

This year saw the first determination of public hospital funding by the Commonwealth Treasurer based on the advice of the Administrator the 2012–13 determination subsequent to the Final Budget Outcome (FBO).

Figure 2 outlines the timing of payments processed by the Administrator (supported by the NHFB) during 2013–14. Figure 2: Commonwealth payments processed by the Administrator in 2013–14



The Mid–Year Economic and Fiscal Outlook (MYEFO) is a mid–year budget report that provides information on the Commonwealth Government's fiscal position. The 2013–14 MYEFO statement was released in December 2013.

The FBO is a report produced no later than three months after the end of the financial year and describes Commonwealth Government fiscal outcomes for the preceding financial year.

The MYEFO and FBO reports both incorporate revised parameter changes, some of which (e.g. revised population estimates) impact the calculation of the National Healthcare Specific Purpose Payment (SPP) to states and territories. In 2013–14 the Commonwealth provided national health reform funding to states and territories equivalent to the amount that would otherwise have been paid under the SPP. Consequently, the 2013–14 funding incorporated these adjustments following the release of these reports.

The MYEFO and FBO statements are available from <u>www.budget.gov.au</u>.

RECONCILIATION OF 2012–13 ACTUAL ACTIVITY

Both Commonwealth and state/territory contributions are made prospectively, based on the estimated activity that is set out in Service Agreements that are negotiated between the states and territories and their local hospital networks. Each state and territory is required to provide confirmed aggregate weighted and estimated service volumes for each LHN in the preceding financial year. These estimates serve as the basis for calculating the Commonwealth's funding contribution to each state and territory for activity based funding.

At the conclusion of the six month (July to December) and twelve month (July to June) periods, states and territories submit information on the actual volume of patient level services delivered for all hospital services funded on an activity basis. A reconciliation between estimated and actual service volumes is then performed to ensure that all local hospital networks receive the correct Commonwealth contribution based on their actual activity.

The first six–month and annual reconciliation of service estimates and actual activity for 2012–13 data were successfully completed in October 2013 and March 2014, respectively.

OPERATIONS: 2013–14 HIGHLIGHTS

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

FUNDING CALCULATION METHODOLOGY IN 2014–15

The calculation process in the transition period, covering 2012–13 and 2013–14, provided a strong foundation for all future calculation processes, including internal and external assurance, ongoing collaboration with stakeholders and development of a robust methodology.

This work over the transition period provides the components for the funding calculations that will be undertaken from 2014–15 onwards.

MONTHLY REPORTING

Section 240 of the *National Health Reform Act 2011* requires the Administrator to provide monthly reports to the Commonwealth and each state and territory and to make these publicly available.

In 2013–14 the NHFB produced a total of 1,824 monthly reports on behalf of the Administrator. Each month a National report, a State report for each state and territory and a report for each local hospital network are produced.

These monthly reports are available from: <u>www.publichospitalfunding.gov.</u> <u>au/reports</u>. Table 2 shows the release dates for the Administrator's monthly reports in 2013–14.

Table 2: Monthly Report PublicationDates for 2013–14

MONTH	DATE RELEASED	
May 2013	10 July 2013	
June 2013	28 August 2013	
July 2013	30 October 2013	
August 2013	13 November 2013	
September 2013	5 December 2013	
October 2013	30 January 2014	
November 2013	20 February 2014	
December 2013	20 February 2014	
January 2014	28 March 2014	
February 2014		
March 2014	7 May 2014	
April 2014	5 June 2014	

STRATEGIC AND OPERATIONAL DOCUMENTS RELEASED

	2013–14 Data Plan File Specifications 22 July 2013				
	2012–13 Reconciliation Framework 30 July 2013				
	Administrator of the National Health Funding Pool: Annual Report 30 October 2013				
	Data Compliance Policy 29 November 2013				
	Data Privacy, Secrecy and Security Policy 3 December 2013				
A REPORT OF	Business Rules for determining hospital services eligible for Commonwealth Funding—Volume 2: Proof of Concept 18 December 2013				
	September quarter <i>Compliance Report</i> 19 December 2013				
	1 and the second				
	December quarter <i>Compliance Report</i> 25 February 2014				
1	Data Plan 2014–15 to 2016–17 14 March 2014				
	Growth and Funding Guarantees document and supporting materials				

2 May 2014 March quarter *Compliance Report*

28 May 2014

The following strategic documents were published during 2013–14:

+ 2012–13 Reconciliation Framework specifies the reconciliation processes for those public hospital functions funded on an activity basis. Funding is initially based on estimated activity and is subsequently reconciled to actual service delivery activity. + **Data Compliance Policy** outlines the Administrator's policy on jurisdictional data compliance with the Three Year Data Plan.

 the Three Year Data Plan.
 Data Privacy, Secrecy and Security Policy describes the data privacy, secrecy and security

policies and protocols the Administrator has in place with regard to the collection, storage, disclosure and destruction of data.

- Business Rules volume 2

 outlines the business and data matching rules in relation to clause A6 of the Agreement, where Commonwealth funding eligibility is assessed against other Commonwealth programs.
- Administrator's Three Year Data Plan 2014–15 to 2016–17 (and associated file specifications) describes the Administrator's determination of the minimum level of data required from jurisdictions in order to calculate the Commonwealth's contribution to funding public hospital services, conduct reconciliation activities and ensure national comparability. This plan has been aligned in content and structure with the data plans of the IHPA and the National Health Performance Authority (NHPA).
- Growth and Funding Guarantees sets out the Administrator's approach and process for calculating the growth and funding guarantee clauses of the Agreement.

OPERATIONS: 2013–14 HIGHLIGHTS



NATIONAL



Combined Financial Statement



NATIONAL

NATIONAL HEALTH FUNDING POOL — COMBINED STATE POOL ACCOUNTS SPECIAL PURPOSE COMBINED FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011.



Combined State Pool Accounts Special purpose financial statement for the year ended 30 June 2014

NATIONAL

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	NSW \$'000	VIC \$'000	QLD \$'000	WA \$'000	SA \$'000
CASH AT BANK AS AT 1 JULY 2013	-	-	-	-	9,391
RECEIPTS					
From Commonwealth					
Activity based funding	3,555,059	2,952,361	2,384,822	1,226,895	841,671
Block funding	684,639	450,781	365,254	256,209	143,066
Public health funding	103,150	80,034	64,892	35,297	23,166
From State / Territory					
Activity based funding	5,160,022	3,870,426	4,768,902	2,170,052	1,848,159
Cross border contribution	78,725	-	-	-	-
From other States or Territories					
Cross border receipts	14,303	-	-	-	-
From Reserve Bank of Australia					
Interest receipts	2,095	1,300	710	1	3,619
TOTAL RECEIPTS	9,597,993	7,354,902	7,584,580	3,688,454	2,859,681
PAYMENTS					
To Local Hospital Networks					
Activity based funding	8,715,081	6,822,143	7,153,724	3,396,947	2,702,840
To State Managed Fund					
Block funding	684,639	450,781	365,254	256,209	143,066
Cross border transfer	-	-	-	-	-
To State / Territory Health Departm	ent				
Public health funding	103,150	80,034	64,892	35,297	23,166
Interest payments	2,095	1,300	710	1	-
Cross border transfer	14,303	-	-	-	-
Over deposit withdrawal	-	644	-	-	-
To other States or Territories					
Cross border payments	78,725	_	-	-	-
To Reserve Bank Australia					
Penalty interest	-	_	-	-	-
TOTAL PAYMENTS	9,597,993	7,354,902	7,584,580	3,688,454	2,869,072
CASH AT BANK AT 30 JUNE 2014	-	-	-	-	-

FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

HEALTH

NATIONAL

	TAS \$'000	ACT \$'000	NT \$'000	TOTAL \$'000
CASH AT BANK AS AT 1 JULY 2013	-	-	15	9,406
RECEIPTS				
From Commonwealth				
Activity based funding	238,897	247,801	116,628	11,564,134
Block funding	46,460	22,064	14,616	1,983,089
Public health funding	7,090	5,316	3,346	322,291
From State / Territory				
Activity based funding	350,095	492,293	271,830	18,931,779
Cross border contribution	_	14,303	-	93,028
From other States or Territories				
Cross border receipts	-	78,725	-	93,028
From Reserve Bank of Australia				
Interest receipts	2	-	16	7,743
TOTAL RECEIPTS	642,544	860,502	406,436	32,995,092
PAYMENTS				
To Local Hospital Networks				
Activity based funding	588,992	818,819	388,458	30,587,004
To State Managed Fund				
Block funding	46,460	22,064	14,616	1,983,089
Cross border transfer	-	-	-	-
To State / Territory Health Departme	nt			
Public health funding	7,090	5,316	3,346	322,291
Interest payments	2	_	_	4,108
Cross border transfer	_	_	_	14,303
Over deposit withdrawal	-	-	-	644
To other States or Territories				
Cross border payments	-	14,303	-	93,028
To Reserve Bank Australia				
Penalty interest	-	-	14	14
TOTAL PAYMENTS	642,544	860,502	406,434	33,004,481
CASH AT BANK AT 30 JUNE 2014	-	-	17	17

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	NSW* \$'000	VIC* \$'000	QLD* \$'000	WA* \$'000	SA* \$'000
CASH AT BANK AS AT 1 JULY 2012	-	-	-	-	-
RECEIPTS					
From Commonwealth					
Activity based funding	2,771,509	1,690,549	1,906,154	1,024,177	592,667
Block funding	1,300,576	653,237	441,700	341,316	139,087
Public health funding	99,901	56,386	56,553	32,653	17,494
From State / Territory					
Activity based funding	4,609,383	2,108,527	3,708,716	2,654,929	1,201,000
Cross border contribution	53,063	-	-	-	-
From other States or Territories					
Cross border receipts	24,127	63,286	-	-	-
From Reserve Bank of Australia					
Interest receipts	1,863	1,853	646	-	2,322
TOTAL RECEIPTS	8,860,422	4,573,838	6,113,769	4,053,075	1,952,570
PAYMENTS					
To Local Hospital Networks					
Activity based funding	7,380,892	3,724,978	5,615,173	3,679,106	1,786,176
To State Managed Fund					
Block funding	1,300,576	653,237	441,397	341,316	139,087
Cross border transfer	24,127	-	-	-	-
To State / Territory Health Departm	nent				
Public health funding	99,901	56,386	56,553	32,653	17,494
Interest payments	1,863	1,853	646	-	422
Cross border transfer	-	39,159	-	-	-
Withdrawal of over-deposit	-	74,098	-	-	-
To other States or Territories					
Cross border payments	53,063	24,127	-	-	-
To Reserve Bank Australia					
Penalty interest	-	-	-	-	-
TOTAL PAYMENTS	8,860,422	4,573,838	6,113,769	4,053,075	1,943,179
CASH AT BANK AT 30 JUNE 2013	-	-	-	-	9,391

* Refer to note (j) for commencement date.

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NATIONAL HEALTH

FUNDING

POOL ANNUAL REPORT 2013–14

NATIONAL

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	TAS* \$'000	ACT* \$'000	NT* \$'000	TOTAL \$'000
CASH AT BANK AS AT 1 JULY 2012	-	-	-	-
RECEIPTS				
From Commonwealth				
Activity based funding	233,205	71,570	71,116	8,360,947
Block funding	51,887	8,560	33,521	2,969,884
Public health funding	6,829	1,565	2,638	274,019
From State / Territory				
Activity based funding	236,838	135,187	210,684	14,865,264
Cross border contribution	10,223	-	-	63,286
From other States or Territories				
Cross border receipts	-	-	-	87,413
From Reserve Bank of Australia				
Interest receipts	20	_	15	6,719
TOTAL RECEIPTS	539,002	216,882	317,974	26,627,532
PAYMENTS				
To Local Hospital Networks				
Activity based funding	470,043	206,757	281,800	23,144,925
To State Managed Fund				
Block funding	51,887	8,560	33,521	2,969,581
Cross border transfer	-	_	-	24,127
To State / Territory Health Departme	ent			
Public health funding	6,829	1,565	2,638	274,019
Interest payments	20	_	_	4,804
Cross border transfer	-	-	-	39,159
Withdrawal of over-deposit	-	-	-	74,098
To other States or Territories				
Cross border payments	10,223	-	-	87,413
To Reserve Bank Australia				
Penalty interest	-	-	-	-
TOTAL PAYMENTS	539,002	216,882	317,959	26,618,126
CASH AT BANK AT 30 JUNE 2013	-	-	15	9,406

* Refer to note (j) for commencement date.

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Combined State Pool Accounts Notes to the special purpose financial statement for the year ended 30 June 2014

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Combined State Pool Accounts, which were established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The special purpose financial statement has been prepared in accordance with Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 19 September 2014.

(C) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(D) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for the Jurisdiction, multiplied by the National Weighted Activity Units (NWAU) estimate provided by the Jurisdiction. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment; and
- ii. an annual adjustment.

NATIONAL

The six–monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(E) BLOCK FUNDING

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POOL

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the respective state/territory's 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(F) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(G) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(H) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(I) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

(J) DATE OF COMMENCEMENT

The dates of commencement for transacting within the National Health Funding Pool were as follows:

- + New South Wales 1 July 2012
- + Tasmania 1 July 2012
- + Western Australia 1 July 2012
- + Queensland 1 August 2012
- + Victoria 28 September 2012
- + Northern Territory 1 October 2012
- + South Australia 1 October 2012
- + Australian Capital Territory 1 March 2013

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by states/territories and forms part of the Administrator's monthly reporting requirements, located at www.publichospitalfunding.gov.au/ reports. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The information contained in this chapter is on a national basis; detailed information for each state/territory appears in the chapters following. The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the

National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

NATIONAL

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

			Amount paid by Sta	Amount paid by State/Territory (\$'000)		
State or Territory		2013-14			2012-13	
	State Pool Account — ABF*	State Managed Fund — Block	Total	State Pool Account — ABF*	State Managed Fund — Block	Total
New South Wales	5,238,747	1,210,670	6,449,417	4,662,446	2,168,572	6,831,017
Victoria	3,870,426	610,744	4,481,171	3,073,520	1,185,848	4,259,368
Queensland	4,768,902	625,752	5,394,654	4,046,879	1,110,595	5,157,474
Western Australia	2,170,052	598,783	2,768,835	2,654,929	754,837	3,409,766
South Australia	1,848,159	234,911	2,083,070	1,519,989	235,918	1,755,907
Tasmania	350,095	285,588	635,683	247,061	242,086	489,147
Australian Capital Territory	506,596	45,842	552,438	350,054	43,289	393,342
Northern Territory	271,830	389,563	661,393	260,914	256,727	517,640
NATIONAL TOTAL	19,024,807	4,001,854	23,026,661	16,815,791	5,997,871	22,813,661
					•	

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

For each state/territory's basis of payments, refer to individual state/territory 'National health reform funding and payments' chapters.

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

			Amount paid by	Amount paid by Commonwealth into State Pool Account (\$'000)	into State Pool Ad	:count (\$'000)		
:		2013-14	-14			2012-13	-13	
State or Territory	Activity based funding	Block funding	Public Health funding	Total	Activity based funding	Block funding	Public Health funding	Total
New South Wales	3,555,059	684,639	103,150	4,342,849	2,771,509	1,300,577	99,901	4,171,986
Victoria	2,952,361	450,781	80,034	3,483,176	2,279,067	880,647	75,689	3,235,403
Queensland	2,384,822	365,254	64,892	2,814,967	2,086,953	483,606	61,829	2,632,388
Western Australia	1,226,895	256,209	35,297	1,518,400	1,024,177	341,316	32,653	1,398,146
South Australia	841,671	143,066	23,166	1,007,904	798,102	187,305	23,469	1,008,876
Tasmania	238,897	46,460	7,090	292,447	233,205	51,887	6,829	291,921
Australian Capital Territory	247,801	22,064	5,316	275,181	226,866	16,705	4,706	248,277
Northern Territory	116,628	14,616	3,346	134,590	95,330	44,922	3,527	143,780
NATIONAL TOTAL	11,564,134	1,983,089	322,291	13,869,514	9,515,210	3,306,964	308,603	13,130,777

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NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 The basis of Commonwealth national health reform funding for 2013–14 (as specified in the National Health Reform Agreement (clause A33)) is as follows:

For 2013–14, the Commonwealth is providing funding to each state and territory equivalent to the amount that would otherwise have been payable through the former National Healthcare Specific Purpose Payment (SPP). This amount is divided into the following funding streams:

- a. the amount for public health activities in 2012–13 indexed by the former National Healthcare SPP growth factor.
- b. discrete amounts, calculated by the Administrator based on the IHPA's determination at clause A27, as endorsed by the Council of Australian Government for:
 - block funded public hospital services provided at each local hospital network;
 - ii. teaching and training functions performed at each local hospital network or other organisations (such as universities and training providers); and

- iii. research functions performed at each local hospital network.
- c. the residual amount is divided between the following ABF service categories based on advice from the IHPA:
 - i. acute admitted public patients,
 - ii. eligible private patients,
 - iii. emergency department services,
 - iv. mental health services (not already captured by clause A33(c)(i)),
 - v. eligible non-admitted patient services, and
 - vi. sub-acute admitted public patients.

Subject to further adjustments for cross-border arrangements, the residual amounts in c) above represent the funds available for Commonwealth activity based funding for each state or territory. Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

		đ		Amount paid from State Pool Account (including CW and S/T) (\$'000)	nt lincluaing cw	(UUU ¢) (1 /< DUB		
:		2013-14	-14			2012-13	-13	
State or lerritory	Local Hospital Networks	State Managed Fund	Other organisations or funds	Total	Local Hospital Networks	State Managed Fund	Other organisations or funds	Total
New South Wales	8,715,081	684,639	198,273	9,597,994	7,380,892	1,324,703	154,827	8,860,422
Victoria	6,822,143	450,781	81,978	7,354,902	5,278,489	880,647	214,926	6,374,062
Queensland	7,153,724	365,254	65,602	7,584,580	6,134,135	483,302	62,474	6,679,912
Western Australia	3,396,947	256,209	35,298	3,688,453	3,679,106	341,316	32,653	4,053,075
South Australia	2,702,840	143,066	23,166	2,869,072	2,310,600	187,305	23,891	2,521,796
Tasmania	588,992	46,460	7,092	642,544	470,043	51,887	17,072	539,002
Australian Capital Territory	818,819	22,064	19,619	860,502	576,920	16,705	4,706	598,331
Northern Territory	388,458	14,616	3,360	406,434	356,243	44,922	3,527	404,693
NATIONAL TOTAL 30	30,587,004	1,983,089	434,388	33,004,481	26,186,429	3,330,788	514,077	30,031,294

For detailed information regarding each state/territory, including basis of payments refer to individual state/territory 'National health reform funding and payments' chapters. NATIONAL

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Joint contact con			Amount paid (Amount paid from State Managed Fund (including CW and S/T) (\$'000)	und (including CW and	S/T) (\$'000)	
THOLY Hospital Hospital Networks Local Hospital Networks Other Hospital Networks Other	:		2013-14			2012-13	
(1,768,976) $(1,26,376)$ $(1,266,376)$ $(1,268,323)$ $(7,786)$ $(7,786)$ $(1,030,827)$ $(2,6,14)$ $(2,6,5,7,44)$ $(2,26,6,6,7)$ $(3,9,7,96)$ $(3,9,7,96)$ $(1,030,152)$ $(2,9,1,006)$ $(2,9,1,006)$ $(1,593,800)$ $(1,96,153)$ $(1,96,153)$ $(1,030,152)$ $(2,25,25,22)$ $(2,26,26,27)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,030,152)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,01,12)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,12)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,12)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,12)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,12)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(2,27,22)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(1,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ $(2,12,12)$ <	State or Territory	Local Hospital Networks	Other organisations or funds	Total	Local Hospital Networks	Other organisations or funds	Total
1030,827 26,614 1,057,441 2,026,697 39,798 991,006 991,006 1,593,800 1,593,800 39,798 852,852 852,852 991,006 1,593,800 39,797 852,852 852,852 1096,153 1096,153 1096,153 852,852 991,006 852,852 1096,153 13,885 852,852 991,006 932,048 932,048 13,885 852,874 852,874 15,946 91,649 13,885	New South Wales	1,768,979	126,331	1,895,310	3,368,233	76,788	3,445,021
(1) (1) <td>Victoria</td> <td>1,030,827</td> <td>26,614</td> <td>1,057,441</td> <td>2,026,697</td> <td>39,798</td> <td>2,066,495</td>	Victoria	1,030,827	26,614	1,057,441	2,026,697	39,798	2,066,495
(1) (1) <td>Queensland</td> <td>991,006</td> <td>I</td> <td>991,006</td> <td>1,593,800</td> <td>I</td> <td>1,593,800</td>	Queensland	991,006	I	991,006	1,593,800	I	1,593,800
(1) (2) <td>Western Australia</td> <td>852,852</td> <td>I</td> <td>852,852</td> <td>1,096,153</td> <td>I</td> <td>1,096,153</td>	Western Australia	852,852	I	852,852	1,096,153	I	1,096,153
1 332,048 332,048 13,885 13,985 13,985 13,985 13,985 13,985 13,985 13,995 <td>South Australia</td> <td>377,977</td> <td>I</td> <td>377,977</td> <td>423,222</td> <td>I</td> <td>423,222</td>	South Australia	377,977	I	377,977	423,222	I	423,222
Territory 67,906 - 67,906 59,993 - - * *	Tasmania	332,048	I	332,048	280,088	13,885	293,972
404,179 - 404,179 301,649 - 5,825,774 152,945 5,978,719 9,149,836 130,471	Australian Capital Territory	67,906	I	67,906	59,993	I	59,993
5,825,774 152,945 5,978,719 9,149,836 130,471	Northern Territory	404,179	I	404,179	301,649	I	301,649
	NATIONAL TOTAL	5,825,774	152,945	5,978,719	9,149,836	130,471	9,280,307

For detailed information regarding each state/territory, including basis of payments refer to individual state/territory 'National health reform funding and payments' chapters. Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

	Number of ABF p	ublic hospital service	s funded (NWAU)
State or Territory	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
New South Wales	2,143,305	1,850,794	1,731,562
Victoria	1,689,796	1,470,988	1,314,041
Queensland	1,297,949	1,135,913	1,263,410
Western Australia	682,068	612,744	618,967
South Australia	538,164	500,886	486,690
Tasmania	114,078	114,082	112,698
Australian Capital Territory	125,570	115,991	115,604
Northern Territory	116,016	102,816	93,194
NATIONAL TOTAL	6,706,945	5,904,214	5,736,167

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

States/territories provide NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

The amounts listed are aggregates for each state/territory, for detailed state/ territory information refer to individual state/territory 'National health reform funding and payments' chapters.

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NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 no state or territory reported 'other public hospital services and functions funded' from the National Health Funding Pool or state managed fund.

NEW SOUTH WALES

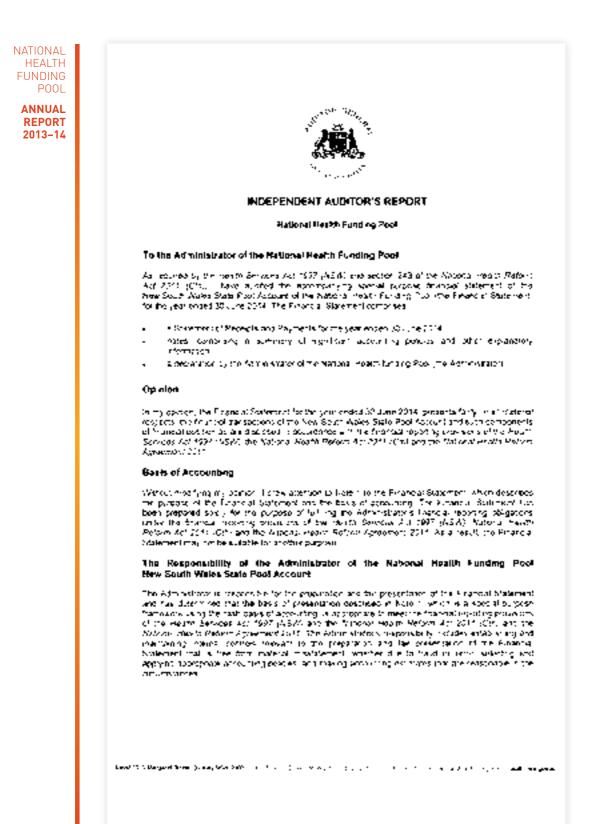
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Financial Statement

NEW SOUTH WALES

NATIONAL HEALTH FUNDING POOL — NEW SOUTH WALES STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and the New South Wales Health Services Act 1997.



Auditor's Responsibility

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NEW SOUTH WALES

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New South Wales State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		-	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	3,555,059	2,771,509
Block funding		684,639	1,300,576
Public health funding		103,150	99,901
From New South Wales			
Activity based funding	2,6	5,160,022	4,609,383
Cross border contribution		78,725	53,063
From other States or Territories			
Cross border receipts	3	14,303	24,127
From Reserve Bank of Australia			
Interest receipts		2,095	1,863
TOTAL RECEIPTS		9,597,993	8,860,422
PAYMENTS OUT OF THE STATE POOL ACCOUNT	IT		
To Local Hospital Networks			
Activity based funding	4,6	8,715,081	7,380,892
To New South Wales State Managed Fund			
Block funding		684,639	1,300,576
Cross border transfer		-	24,127
To New South Wales Ministry of Health			
Public health funding		103,150	99,901
Interest payments		2,095	1,863
Cross border transfer		14,303	-
To other States or Territories			
Cross border payments	5	78,725	53,063
TOTAL PAYMENTS		9,597,993	8,860,422
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		-	-
CLOSING CASH BALANCE		-	-

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

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The above statement of receipts and payments should be read in conjunction with the accompanying notes.

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the New South Wales State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The New South Wales State Pool Account was established in accordance with the New South Wales *Health Services Act 1997* and the special purpose financial statement has been prepared in accordance with that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 12 September 2014.

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(C) COMPARATIVE FIGURES

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Prior year comparative information has been disclosed. The results for 2012–13 are for a full year of operations and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for New South Wales, multiplied by the National Weighted Activity Units (NWAU) estimate provided by New South Wales. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

NEW SOUTH WALES

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the New South Wales 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts paid into the New South Wales State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	3,555,059	2,771,509
New South Wales activity based funding	5,160,022	4,609,383
TOTAL	8,715,081	7,380,892

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3 CROSS BORDER RECEIPTS

Total cross border receipts into the New South Wales State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
Victoria	-	24,127
Queensland	-	-
Western Australia	_	_
South Australia	_	_
Australian Capital Territory	14,303	_
Tasmania	-	-
Northern Territory	-	_
TOTAL	14,303	24,127

Where no cross border receipts are reported through the New South Wales State Pool Account, other bilateral arrangements between the states and territories may exist.

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4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the New South Wales State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Central Coast Local Health District	432,451	331,502
Far West Local Health District	51,465	38,858
Hunter New England Local Health District	920,314	817,230
Illawarra Shoalhaven Local Health District	480,978	388,328
Mid North Coast Local Health District	281,098	264,371
Murrumbidgee Local Health District	193,571	164,644
Nepean Blue Mountains Local Health District	452,413	324,915
Northern NSW Local Health District	383,507	326,809
Northern Sydney Local Health District	751,323	591,552
South Eastern Sydney Local Health District	939,375	775,809
South Western Sydney Local Health District	1,019,125	872,279
Southern NSW Local Health District	179,194	122,035
St Vincents Health Network	235,783	236,669
Sydney Local Health District	862,792	734,551
Sydney Children's Hospital Network	387,284	368,596
Western NSW Local Health District	324,889	235,380
Western Sydney Local Health District	819,519	787,364
TOTAL	8,715,081	7,380,892

The Administrator makes payments from the New South Wales State Pool Account in accordance with the directions of the New South Wales Minister for Health.

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5 CROSS BORDER PAYMENTS

Total cross border payments out of the New South Wales State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
Victoria	-	53,063
Queensland	-	-
Western Australia	-	-
South Australia	-	_
Australian Capital Territory	78,725	-
Tasmania	-	-
Northern Territory	-	-
TOTAL	78,725	53,063

Where no cross border payments are reported through the New South Wales State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total New South Wales and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from New South Wales	5,160,022	4,609,383
Total activity based funding receipts from the Commonwealth	3,555,059	2,771,509
Less activity based funding payments to local hospital networks	(8,715,081)	(7,380,892)
PAYMENTS IN EXCESS OF RECEIPTS	-	-

The Administrator makes payments from the New South Wales State Pool Account in accordance with the directions of the New South Wales Minister for Health. The New South Wales Minister for Health directed all activity based funding contributions be paid to local hospital networks.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by New South Wales and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by New South Wales (\$'000)	
	2013-14	2012-13
State Pool Account — Activity based funding*	5,238,747	4,662,446
State Managed Fund — Block funding	1,210,670	2,168,572
NSW TOTAL	6,449,417	6,831,017

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

The basis used to determine New South Wales national health reform funding and payments for 2013–14 (at June 2014) was advised by the New South Wales Ministry of Health to be as follows:

BASIS USED TO DETERMINE NHR PAYMENTS TO LOCAL HOSPITAL NETWORKS (LHNS) — NEW SOUTH WALES

The process for determining 2013–14 NHR payments to LHNs encompassed three distinct elements of preparation for the individual LHN Service Agreements, including development of annual activity estimates, discussion/negotiation of activity levels with individual LHNs, and total state-wide activity across each activity type. NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Consistent with last year's methodology and pursuant with the National Health Reform Agreement (NHRA), the Ministry of Health has adopted the National Weighted Activity Unit (NWAU) as the currency for Activity Based Funding with the applicable version being NWAU13, which is different from the previous year (NWAU12). In addition, the scope of services under the NHRA from 1 July 2013 has now been expanded to include Mental Health services (Admitted only) and Sub and non acute services (Admitted and Non–Admitted), as such a greater number of facilities are now in scope for ABF.

The Independent Hospital Pricing Authority (IHPA) has also introduced a National Efficient Cost funding model that applies to small regional and remote hospitals. NSW has adopted the mechanics of this funding model expressed in a matrix to determine the funding allocation to LHNs for these small hospitals.

Ensuring access to health services for local populations is a key objective of NSW health policy. The Health Services Act 1997 stipulates that in determining LHN budgets, the Minister have regard to the size and health needs of the local population and provision of services to residents outside the local area. Accordingly, targets are adjusted considering factors appropriate to each LHN and service type, rather than simple extrapolation from historical activity data. The factors considered are reviewed on an annual basis.

In 2013–14 a series of elements were applied to each in scope service stream to ensure that activity targets are tailored to the requirements and patterns of each LHN. Activity targets are developed by the Ministry and LHNs based on analysis of activity levels over four years to 2011–12 plus forecast 2012–13 activity. This analysis was further informed in 2013–14 by the following factors:

- + Weighted population change: providing an indication of expected 'natural' growth
- + Rate of unplanned re-admissions within 28 days, to offset growth
- + Potentially preventable hospitalisation (PPH), to offset growth
- + Relative Utilisation Rate (RUR) and Health Need Index (HNI)
- + Inter-district and cross-border flows (where relevant)
- + Current year activity relative to targets
- + Known service changes and developments, including planned capacity increases.

Price weight adjustments which are being applied in 2013–14 include:

- + Specialist paediatric hospitals
- + Aboriginal patients
- + Patients from outer regional, remote or very remote locations
- + Private patients (service and accommodation adjustments).

Provisional activity estimates are generally created at a facility level to provide the basis for discussion and negotiation with individual health services to determine agreed LHN level activity targets, with the activity volumes measured using the weights for each Service Category. Additionally, where applicable, activity estimation is split by financial class to allow differential funding mechanisms to be applied to the respective service groups to reflect the variation in funding source. These financial classes include Public, Private and Compensable (DVA, MVA, Workers Compensation, Other Compensable).

Provisional estimates and historical activity measures provide the basis for discussions with individual Health Services and subsequent negotiations for approval or adjustment.

The negotiation process allows for relevant local LHN service issues and activity impact to be communicated with the NSW Ministry of Health (Ministry) to assess the potential impact on future year activity volumes and the relevance of related service strategies to address these. It is important that negotiation processes recognise that funding and purchasing are undertaken in the environment of a capped State / Commonwealth funding pool for 2013–14 and recognition that NSW contributes the larger portion of these funds as well as being responsible for management of the system as a whole. When negotiations have concluded, the Ministry incorporates the final activity targets in each LHN's annual Service Agreement. Where an LHN achieves delivery of selected services through Affiliated Health Organisations or contracted services with a private provider these arrangements are to be specified in agreements between the LHN and the respective provider. Both the funding (and subsidy) and associated activity pertaining to such providers are included in the budget and the activity estimates appearing in the LHN's annual Service Agreement.

Cash payments processed within the National Health Funding Pool (NHFP) Payments System and included within the Administrator's monthly reports are based on the accrued budget for both ABF and in-scope block funding derived from the LHN Service Agreements after deducting an allowance to recognise own sourced revenue earned, and retained by the LHNs and liabilities for superannuation and long service leave which are accepted by the Crown.

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NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 The resultant cash value is processed through the state pool account (ABF) or the state managed fund (in–scope block). Although a consistent methodology has been applied, variations in cash prices between LHNs reflect the differing mix of the above components (own sourced revenue and Crown accepted liabilities) of each local hospital network's accrued cost.

In addition to receiving weekly cash payments from the state pool account and the state managed fund, LHNs also receive direct State Government funding for 2013–14 for all "out of scope" services not subject to the National Health Reform Agreement arrangements as required under their 2013–14 Service Agreements.

MONTHLY REPORTS - BASIS ON WHICH PAYMENTS WERE MADE

For NSW, all dollar values included in the tables issued by the Administrator are cash payments from either the NSW state pool account to LHNs or cash payments from the state managed fund to LHNs, and one exception that requires a quarterly cash payment to the Victorian Department of Health for NSW contribution for the Albury–Wodonga inter–jurisdictional agreement.

The weekly cash payment to an LHN reflects the estimated cost of patient related services anticipated to be delivered during the monthly cash payment period. The estimated monthly activity and the weekly cash payments are determined based on the annual LHN Service Agreements.

Cash payments from the NSW state pool account and from the state managed fund to LHNs are processed each Tuesday. Reporting by the Administrator is based on cash payments made during a given month and is therefore dependent on the number of Tuesdays in a particular month. During 2013–14, July 2013, October 2013, December 2013 and April 2014 each have five Tuesdays, with all other months having four Tuesdays. If accrual accounting principles were being applied within the NHFA Payments System, the value of the reported cash payments would recognise only the number of calendar days in a particular month, not the 35 days (five weeks paid) or 28 days (four weeks paid), as reported by the Administrator.

Cash payments to LHNs from both the NSW state pool account and state managed fund are generally calculated based on equal weekly instalments to health services unless otherwise negotiated. Other payments will occur in 2013–14 that are outside the regular weekly (Tuesday) payment cycle. Such payments include the full year insurance premium, quarterly payments to the Australian Red Cross Blood Service, quarterly payments to Victoria Health for the Albury–Wodonga inter–jurisdictional agreement and payments to other States/Territories for NSW residents treated in their public hospitals. Payments to LHNs may also vary where their cash entitlement alters during the financial year.

Monthly comparison of cash payments from the NSW state pool and state managed fund can vary month to month predominately due to these planned payments.

Adjustments are made for cash flow needs and costs administered by the Ministry of Health on behalf of LHDs. Due to the timing and processing of these adjustments, Nepean Blue Mountains Local Health District shows a negative amount for the block payment in June 2014.

The cash payments from the NSW state pool account or state managed fund do not reflect the full budgeted funding available to health services in NSW. Other sources of funds available to LHNs include separate payments from the Crown (for example, defined superannuation scheme and long service leave cash recovery) as well as own sourced revenues earned and retained by each LHN.

In June 2014, the residual amount of May Commonwealth funding (\$7,149,404.58) in the NSW state pool account relating to Western Sydney Local Health District was disbursed.

Due to cashflow timing needs, the State was required to make an additional deposit into the NHFP to meet operational requirements in the first week of June prior to the Commonwealth making its monthly payment to the NHFP in the second week of June. The value of this cashflow timing payment by the State was \$24,795,608.65. It was disbursed to the following LHNs: Hunter New England Local Health District (\$10,097,958.44), Murrumbidgee Local Health District (\$5,679,367.54), Western NSW Local Health District (\$4,590,326.50), Western Sydney Local Health District (\$732,639.81) and St Vincents Health Network (\$3,695,316.36). This money was re-cashflowed once the Commonwealth had made its deposit. This cashflow adjustment was one off and related solely to ensuring the timing of payments into the NHFP matched disbursements.

In 2013–14, LHNs were fully paid their State and Commonwealth entitlement.

For more information on budget allocations, see the 2013–14 LHN Service Agreements which are available on each NSW LHN website from 1 September 2013.

NEW SOUTH WALES NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Between March and June 2014, the Commonwealth provided New South Wales with additional public hospital funding of \$44,543,791.21 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

Component	Amount paid by Commonwealth into NSW State Pool Account (\$'000)	
	2013-14	2012–13
Activity based funding	3,555,059	2,771,509
Block funding	684,639	1,300,577
Public Health funding	103,150	99,901
NSW TOTAL	4,342,849	4,171,986

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

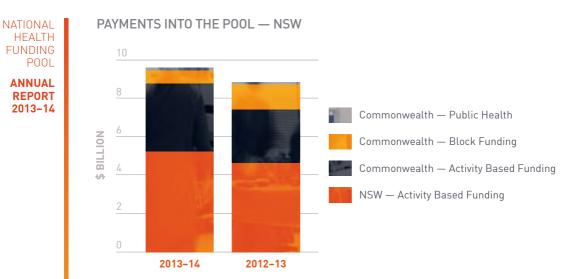
Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

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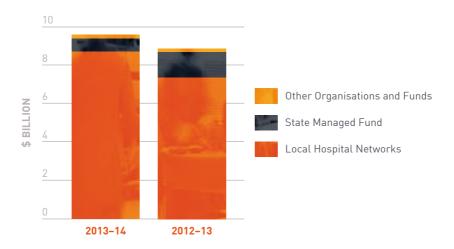
Recipient	Amount paid from NSW State Pool Account (\$'000)	
	2013–14	2012-13
Central Coast Local Health District	432,451	331,502
Far West Local Health District	51,465	38,858
Hunter New England Local Health District	920,314	817,230
Illawarra Shoalhaven Local Health District	480,978	388,328
Mid North Coast Local Health District	281,098	264,371
Murrumbidgee Local Health District	193,571	164,644
Nepean Blue Mountains Local Health District	452,413	324,915
Northern NSW Local Health District	383,507	326,809
Northern Sydney Local Health District	751,323	591,552
South Eastern Sydney Local Health District	939,375	775,809
South Western Sydney Local Health District	1,019,126	872,278
Southern NSW Local Health District	179,194	122,035
St Vincent's Health Network	235,783	236,669
Sydney Children's Hospitals Network	387,284	368,596
Sydney Local Health District	862,792	734,551
Western NSW Local Health District	324,889	235,380
Western Sydney Local Health District	819,519	787,364
TOTAL LOCAL HOSPITAL NETWORKS	8,715,081	7,380,892
STATE MANAGED FUND	684,639	1,324,703
OTHER ORGANISATIONS OR FUNDS*	198,273	154,827
NSW TOTAL	9,597,994	8,860,422

*Includes a New South Wales cross-border contribution to other states or territories.

For the New South Wales basis of payments, refer to part a) of this chapter.



PAYMENTS OUT OF THE POOL - NSW

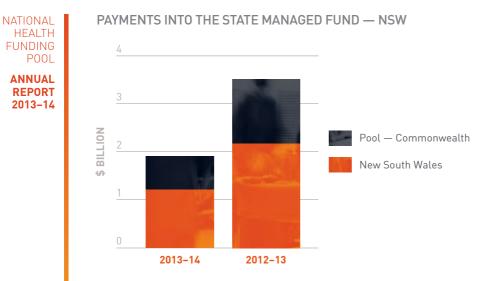


Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

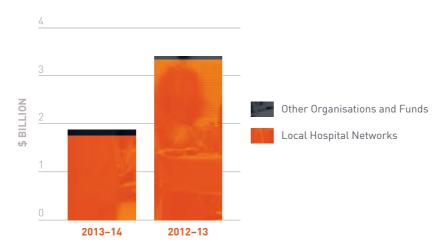
NEW SOUTH WALES

Recipient	Amount pai State Manage	
	2013–14	2012-13
Central Coast Local Health District	48,635	151,577
Far West Local Health District	19,310	30,040
Hunter New England Local Health District	330,633	517,257
Illawarra Shoalhaven Local Health District	64,482	177,067
Justice Health and Forensic Mental Health Network	130,251	48,277
Mid North Coast Local Health District	79,528	108,348
Murrumbidgee Local Health District	138,105	172,222
Nepean Blue Mountains Local Health District	51,533	131,313
Northern NSW Local Health District	77,644	157,192
Northern Sydney Local Health District	187,575	340,403
South Eastern Sydney Local Health District	60,628	247,045
South Western Sydney Local Health District	57,585	231,386
Southern NSW Local Health District	58,631	116,732
St Vincent's Health Network	22,935	58,494
Sydney Children's Hospitals Network	34,525	56,436
Sydney Local Health District	106,153	299,169
Western NSW Local Health District	161,054	327,457
Western Sydney Local Health District	139,771	197,818
TOTAL LOCAL HOSPITAL NETWORKS	1,768,979	3,368,233
OTHER ORGANISATIONS OR FUNDS	126,331	76,788
NSW TOTAL	1,895,310	3,445,021

For the New South Wales basis of payments, refer to part a) of this chapter.



PAYMENTS OUT OF THE STATE MANAGED FUND — NSW



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Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

NEW SOUTH WALES

Local Heavited Distaint		Number of ABF public hospital services funded (NWAU)		
Local Hospital District	2013–14 Estimate	2012–13 Actual	2012–13 Estimate	
Central Coast Local Health District	103,176	80,723	84,725	
Far West Local Health District	9,334	8,779	10,232	
Hunter New England Local Health District	223,398	192,949	208,303	
Illawarra Shoalhaven Local Health District	114,123	102,482	84,073	
Mid North Coast Local Health District	72,218	60,554	60,088	
Murrumbidgee Local Health District	46,219	36,889	35,131	
Nepean Blue Mountains Local Health District	102,809	88,714	69,316	
Northern NSW Local Health District	88,918	82,366	74,947	
Northern Sydney Local Health District	176,996	140,469	141,176	
South Eastern Sydney Local Health District	243,356	199,184	180,524	
South Western Sydney Local Health District	246,888	235,984	217,983	
Southern NSW Local Health District	39,915	27,020	27,031	
St Vincent's Health Network	68,707	53,238	52,334	
Sydney Children's Hospitals Network	93,199	83,149	82,362	
Sydney Local Health District	204,740	189,599	180,897	
Western NSW Local Health District	78,252	60,718	57,898	
Western Sydney Local Health District	231,057	207,976	164,543	
NSW TOTAL	2,143,305	1,850,794	1,731,562	

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

New South Wales provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments. NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 New South Wales did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.



Financial Statement

VICTORIA

NATIONAL HEALTH FUNDING POOL — VICTORIAN STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under Section 242 of the Commonwealth National Health Reform Act 2011. NATIONAL HEALTH FUNDING POOL

ANNUAL REPORT 2013-14

VAGO

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INDEPENDENT AUDITOR'S REPORT

To the Administrator, National Health Funding Pool - Victorian State Pool Account

The Financial Statement

The accompanying financial statement for the period ended 30 June 2014, being a special purpose financial statement, of the Victorian State Pool Account of the National Health Funding Pool which comprises a statement of receipts and payments, notes comprising a summary of significant accounting policies and other explanatory information, and the Administrator's declaration has been audited

The Responsibility of the Administrator of the National Health Funding Pool for the Financial Statement

The Administrator of the National Health Funding Pool (the Administrator) is responsible for the preparation of the financial statement that gives a true and fair view in accordance with the financial reporting provisions of the National Health Reform Act 2011, and has determined that the basis of preparation described in note 1(b) to the financial statement is appropriate. The Administrator is also responsible for such internal control as the Administrator determines is necessary to enable the preparation of the financial statement that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

As required by section 243 of the National Health Reform Act 2011, my responsibility is to express an opinion on the financial statement based on the audit, which has been conducted in accordance with Australian Auditing Standards. Those standards require compliance with relevant ethical requirements relating to audit engagements and that the audit be planned and performed to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The audit procedures selected depend on judgement, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, consideration is given to the internal control relevant to the Administrator's preparation of the financial statement in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made by the Administrator, as well as evaluating the overall presentation of the financial statement.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Auditing in the Public Interest

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Independent Auditor's Report (continued)

Independence

The Auditor-General's independence is established by the Constitution Act 1975. The Auditor-General is not subject to direction by any person about the way in which his powers and responsibilities are to be exercised. In conducting the audit, the Auditor-General, his staff and delegates complied with all applicable independence requirements of the Australian accounting profession.

Opinion

In my opinion, the financial statement gives a true and fair view of the receipts and payments of the Victorian State Pool Account of the National Health Funding Pool for the year ended 30 June 2014 in accordance with the basis of preparation described in note 1(b), and the financial reporting provisions of the National Health Reform Act 2011.

Basis of Accounting for Financial Statement

Without modifying my opinion, I draw attention to Note 1(b) to the financial statement, which describes the purpose of the financial statement and basis of accounting. The financial statement has been prepared using the cash basis of accounting and for the purpose of fulfilling the Administrator's financial reporting obligations under the National Health Reform Act 2011. As a result, the financial statement may not be suitable for another purpose.

Matters Relating to the Electronic Publication of the Audited Financial Statement

This auditor's report relates to the financial statement of the Victorian State Pool Account for the period ended 30 June 2014 included in the National Health Funding Pool Administrator's annual report. The auditor's report may be posted on the National Health Funding Pool Administrator's website or the Victorian Department of Health's website. The Administrator of the National Health Funding Pool and the Secretary of the Victorian Department of Health are responsible for the integrity of their respective websites. I have not been engaged to report on the integrity of these websites. The auditor's report refers only to the subject matter described above. It does not provide an opinion on any other information which may have been hyperlinked toffrom these statements. If users of the financial statement are concerned with the inherent risks arising from publication on a website, they are advised to refer to the hard copy of the audited financial statement.

MELBOURNE 1 August 2014

Auditor-General

Auditing in the Public Interest



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Victorian State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		-	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	2,952,361	1,690,549
Block funding		450,781	653,237
Public health funding		80,034	56,386
From Victoria			
Activity based funding	2,6	3,870,426	2,108,527
Cross border contribution		-	-
From other States or Territories			
Cross border receipts	3,7	-	63,286
From Reserve Bank of Australia			
Interest receipts		1,300	1,853
TOTAL RECEIPTS		7,354,902	4,573,838
PAYMENTS OUT OF THE STATE POOL ACCOUNT	T		
To Local Hospital Networks			
Activity based funding	4	6,822,143	3,724,978
To Victorian State Managed Fund			
Block funding		450,781	653,237
Cross border transfer		-	-
To Victorian Health			
Public health funding		80,034	56,386
Interest payments		1,300	1,853
Cross border transfer	7	-	39,159
Withdrawal of over-deposit	6	644	74,098
To other States or Territories			
Cross border payments	5,7	-	24,127
TOTAL PAYMENTS		7,354,902	4,573,838
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		-	-
CLOSING CASH BALANCE		-	-

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The above statement of receipts and payments should be read in conjunction with the accompanying notes. Additional notes on the right hand page.

The results for 2013–14 year represent the operations for the financial year ended 30 June 2014. The results for 2012–13 represent the operations for the period from 28 September 2012 to 30 June 2013. The Victorian State Pool Account commenced operations on 28 September 2012.

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Victorian State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Victorian State Pool Account was established in accordance with the Victorian *Health (Commonwealth State Funding Arrangements) Act 2012* and the special purpose financial statement has been prepared in accordance with Section 18 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

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Victorian State Pool Account Notes to the special purpose financial statement for the year ended 30 June 2014

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 29 July 2014.

(C) COMPARATIVE FIGURES

Prior year comparative information has been disclosed. The results for 2012–13 are for the period from 28 September 2012 to 30 June 2013 and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for Victoria, multiplied by the National Weighted Activity Units (NWAU) estimate provided by Victoria. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six–monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Victorian 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPAs 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non-government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non-government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Victorian State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	2,952,361	1,690,549
Victorian activity based funding	3,870,426	2,108,527
TOTAL	6,822,787	3,799,076

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3 CROSS BORDER RECEIPTS

Total cross border receipts into the Victorian State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	_	53,063
Queensland	_	-
Western Australia	_	-
South Australia	_	-
Australian Capital Territory	_	-
Tasmania	_	10,223
Northern Territory	-	
TOTAL	-	63,286

Where no cross border receipts are reported through the Victorian State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Victorian State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Albury Wodonga Health	78,215	41,623
Alfred Health	528,087	288,517
Austin Health	462,564	248,735
Bairnsdale Regional Health Service	40,754	24,105
Ballarat Health Services	171,621	94,308
Barwon Health	316,928	168,729
Bass Coast Regional Health	23,547	11,972
		Continued.

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Benalla Health	14,879	9,003
Bendigo Health Care Group	162,977	84,778
Calvary Health Care Bethlehem	23,137	-
Castlemaine Health	16,436	7,164
Central Gippsland Health Service	44,859	25,960
Colac Area Health	19,214	11,973
Contracted Services LHN Victoria	43,509	-
Djerriwarrh Health Services	33,912	22,227
East Grampians Health Service	13,754	8,840
Eastern Health	526,579	267,408
Echuca Regional Health	29,553	17,680
Gippsland Southern Health Service	15,186	9,333
Goulburn Valley Health	110,572	58,750
Kyabram and District Health Service	11,020	7,221
Latrobe Regional Hospital	121,798	61,726
Maryborough District Health Service	13,642	9,299
Melbourne Health	478,495	214,632
Mercy Public Hospitals Incorporated	222,789	122,519
Monash Health	883,119	487,865
Northeast Health Wangaratta	69,122	40,096
Northern Health	279,826	151,279
Peninsula Health	306,518	159,960
Peter MacCallum Cancer Institute	75,689	51,913
Portland District Health	18,833	11,223
Ramsay Healthcare Australia (Mildura Base Hospital) *	78,231	43,728
The Royal Victorian Eye and Ear Hospital	65,953	47,167
South West Healthcare	83,230	47,622
St Vincent's Hospital (Melbourne)	353,055	199,289
Stawell Regional Health	11,078	6,859
		Continued.

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Swan Hill District Hospital	25,667	16,440
The Royal Children's Hospital	313,871	205,868
The Royal Women's Hospital	165,315	102,723
West Gippsland Healthcare Group	48,972	25,642
Western District Health Service	28,765	18,145
Western Health	451,394	269,481
Wimmera Health Care Group	39,478	23,176
TOTAL	6,822,143	3,724,978

* Previously known as MTAA Superannuation Fund — Mildura Base Hospital.

Payments are made from the Victorian State Pool Account in accordance with the directions of the Victorian Health Minister.

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Victorian State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	_	24,127
Queensland	_	_
Western Australia	_	-
South Australia	_	-
Australian Capital Territory	_	-
Tasmania	_	-
Northern Territory	-	-
TOTAL	-	24,127

Where no cross border payments are reported through the Victorian State Pool Account, there may be other bilateral arrangements between the states and territories.

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6 WITHDRAWAL OF OVER-DEPOSIT

Total Victorian and Commonwealth activity based funding contribution and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from the Commonwealth	2,952,361	1,690,549
Total activity based funding receipts from Victoria	3,870,426	2,108,527
Less activity based funding payments to local hospital networks	(6,822,143)	(3,724,978)
WITHDRAWAL OF OVER-DEPOSIT	644	74,098

For 2014 the difference relates to withdrawals to the Victorian Department of Health of \$644k (June 2014) which resulted in the net zero [\$0] cash balance at year end as reported on the face statement.

For 2013 the difference relates to withdrawals to the Victorian Department of Health of \$24.759m (May 2013) and \$49.339m (June 2013) which resulted in the net zero [\$0] cash balance at year end as reported on the face statement.

7 WITHDRAWAL OF NET CROSS BORDER RECEIPTS

	2014 \$ '000	2013 \$ '000
Cross border receipt as per note 3	_	63,286
Cross border payment as per note 5	_	(24,127)
WITHDRAWAL OF NET CROSS BORDER RECEIPTS	-	39,159

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by Victoria and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by Victoria (\$'000)		
	2013-14 2012-13		
State Pool Account — Activity based funding*	3,870,426	3,073,520	
State Managed Fund — Block funding	610,744	1,185,848	
VIC TOTAL	4,481,171	4,259,368	

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

The basis used to determine Victorian national health reform funding and payments for 2013–14 (at June 2014) was advised by the Victorian Department of Health to be as follows:

Payments in Victoria are based upon "Statement of priorities" agreements between Victorian public health services (LHNs) and the Minister for Health (or Secretary). These annual agreements detail the service profile, strategic priorities and deliverables the local hospital network will achieve in the year ahead; list the key financial, access and service performance priorities and agreed targets; and list funding estimates and associated service activity. Once agreed, Statements of priorities are published at www.health.vic.gov.au/hospitals/sops.htm.

Funding details are aggregated into ABF funded services (including NWAU equivalent service volume), Block funded services and Other funding for the purpose of determining payments to and from the state pool account and the state managed fund.

Payments are made twice monthly on the basis of one-twelfth of the agreed funding budget, adjusted for cash flow requirements of individual Victorian public health services.

While the basis of NHR payments are reported on a cash basis by the Administrator, LHNs generally report revenue and expenditure on an accrual basis.

Victorian LHNs receive ABF, block and other payments for different services and purposes. Adjustments are made by the Victorian Department of Health for cash flow needs and costs administered by the Department on behalf of LHNs. Due to the timing and processing of these adjustments, The Royal Women's Hospital show a negative amount for the block payment in June 2014.

Calvary Health Care Bethlehem Limited was registered as an LHN in the Victorian Funding Pool in July 2013. For this reporting period, only the state funding contribution was paid through the Funding Pool. Victoria is yet to advise the Administrator of estimated NWAU services to attract a Commonwealth contribution for the services provided by this LHN.

Between March and June 2014, the Commonwealth provided Victoria with additional public hospital funding of \$43,177,819.95 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

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Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

Component	Amount paid by Commonwealth into VIC State Pool Account (\$'000)		
	2013-14 2012-13		
Activity based funding	2,952,361	2,279,067	
Block funding	450,781	880,647	
Public Health funding	80,034	75,689	
VIC TOTAL	3,483,176	3,235,403	

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

Recipient	VIC State Po	Amount paid from VIC State Pool Account (\$'000)		
	2013-14	2012-13		
Albury Wodonga Health	78,215	56,595		
Alfred Health	528,087	434,110		
Austin Health	462,564	359,901		
Bairnsdale Regional Health Service	40,754	32,069		
Ballarat Health Services	171,621	126,041		
Barwon Health	316,928	245,720		
Bass Coast Regional Health	23,547	19,108		
Benalla Health	14,879	12,676		
Bendigo Health Care Group	162,977	113,188		
Calvary Health Care Bethlehem Limited	23,137	_		
Castlemaine Health	16,436	9,565		
Central Gippsland Health Service	44,859	37,894		
Colac Area Health	19,214	16,512		
Contracted services LHN — Victoria	43,509	-		

Continued.

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Recipient	Amount paid from VIC State Pool Account (\$'000)		
	2013-14	2012-13	
Djerriwarrh Health Services	33,912	29,451	
East Grampians Health Service	13,754	11,830	
Eastern Health	526,579	392,741	
Echuca Regional Health	29,553	25,552	
Gippsland Southern Health Service	15,186	13,251	
Goulburn Valley Health	110,572	83,927	
Kyabram District Health Services	11,020	10,153	
Latrobe Regional Hospital	121,798	86,888	
Maryborough District Health Service	13,642	12,159	
Melbourne Health	478,495	347,033	
Mercy Public Hospitals Inc.	222,789	177,530	
Monash Health (previously Southern Health)	883,119	681,077	
Northeast Health Wangaratta	69,122	54,506	
Northern Health	279,826 2		
Peninsula Health	306,518		
Peter Maccallum Cancer Institute	75,689	70,327	
Portland District Health	18,833	16,350	
Ramsay Healthcare Australia (Mildura Base Hospital)*	78,231		
Royal Victorian Eye and Ear Hospital	65,953	62,594	
South West Healthcare	83,230	64,744	
St Vincent's Hospital (Melbourne) Limited	353,055	267,512	
Stawell Regional Health	11,078	9,216	
Swan Hill District Hospital	25,667	22,077	
The Royal Children's Hospital	313,871	277,455	
The Royal Women's Hospital	165,315	139,982	
West Gippsland Healthcare Group	48,972	39,032	
Western District Health Service	28,765	24,542	

Continued.

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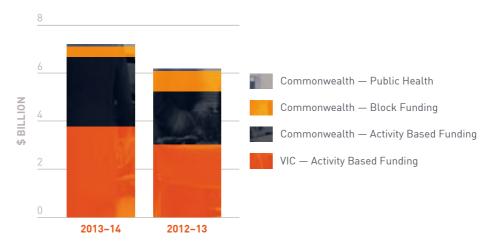
Recipient	Amount paid from VIC State Pool Account (\$'000)		
	2013-14 2012-13		
Western Health	451,394	368,146	
Wimmera Health Care Group	39,478	33,552	
TOTAL LOCAL HOSPITAL NETWORKS**	6,822,143	5,278,489	
STATE MANAGED FUND	450,781	880,647	
OTHER ORGANISATIONS OR FUNDS***	81,978	214,926	
VIC TOTAL	7,354,902	6,374,062	

* Previously MTAA Superannuation Fund.

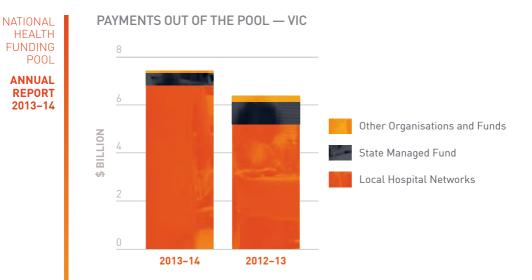
**In the 2012–13 Annual Report the 2012–13 notional local hospital network figure was shown as an aggregate amount.

***Includes a Victorian cross-border contribution to other states or territories in 2012-13.

For the Victorian basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL - VIC



Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Recipient		Amount paid from VIC State Managed Fund (\$'000)		
	2013-14	2012-13		
Albury Wodonga Health	17,156	24,584		
Alexandra District Hospital	4,986	4,877		
Alfred Health	51,675	124,291		
Alpine Health	9,996	9,453		
Austin Health	43,859	118,985		
Bairnsdale Regional Health Service	1,267	6,447		
Ballarat Health Services	26,367	59,767		
Barwon Health	38,689	82,736		
Bass Coast Regional Health	992	3,985		
Beaufort and Skipton Health Service	3,747	3,384		
Beechworth Health Service	3,350	4,954		
Benalla Health	315	1,545		
Bendigo Health Care Group	37,470	74,938		
Boort District Health	1,991	1,827		
Calvary Health Care Bethlehem Limited	1,044	24,255		
Casterton Memorial Hospital	3,152	3,044		
Castlemaine Health	335	6,382		

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Recipient	Amount paid from VIC State Managed Fund (\$'000)		
	2013-14	2012-13	
Central Gippsland Health Service	1,421	6,131	
Cobram District Health	5,099	5,073	
Cohuna District Hospital	4,419 4		
Colac Area Health	601	2,106	
Dental Health Services Victoria	15	_	
Djerriwarrh Health Services	616	2,700	
Dunmunkle Health Services	959	918	
East Grampians Health Service	380	1,566	
East Wimmera Health Service	8,946	8,566	
Eastern Health	75,929	174,552	
Echuca Regional Health	1,787	3,650	
Edenhope and District Memorial Hospital	3,162	3,095	
Gippsland Southern Health Service	359	1,445	
Goulburn Valley Health	20,084	39,161	
Heathcote Health	1,787	1,930	
Hepburn Health Service	7,270	6,958	
Hesse Rural Health Service	1,665	1,687	
Heywood Rural Health	2,104	1,982	
Inglewood and Districts Health Service	1,622	1,618	
Kerang and District Health	5,536	5,085	
Kilmore and District Hospital	9,439	8,515	
Kooweerup Regional Health Services	4,560	4,118	
Kyabram District Health Services	154	234	
Kyneton District Health Service	7,750	7,117	
Latrobe Regional Hospital	32,405	57,085	
Lorne Community Hospital	2,080	1,929	
Maldon Hospital	965	975	
Mallee Track Health and Community Service	3,446	3,318	
Mansfield District Hospital	5,667	5,104	
Maryborough District Health Service	586	1,200	
Melbourne Health	116,159	222,812	

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Recipient	Amount paid from VIC State Managed Fund (\$'000)		
	2013-14	2012-13	
Mercy Public Hospitals Inc.	24,961	41,638	
Monash Health (previously Southern Health)	104,102	221,428	
Moyne Health Services	3,194	3,057	
Nathalia District Hospital	1,669	1,476	
Northeast Health Wangaratta	2,641	15,280	
Northern Health	11,006	63,739	
Numurkah District Health Service	7,009	6,899	
Omeo District Health	1,532	1,452	
Orbost Regional Health	5,463	5,142	
Otway Health and Community Services	2,336	2,189	
Peninsula Health	34,370	92,284	
Peter Maccallum Cancer Institute	8,610	9,890	
Portland District Health	800	2,183	
Ramsay Healthcare Australia (Mildura Base Hospital)*	10,039	19,685	
Robinvale District Health Services	4,882	4,675	
Rochester and Elmore District Health Service	4,386	4,338	
Royal Victorian Eye and Ear Hospital	2,597	2,396	
Rural Northwest Health	7,379	7,073	
Seymour District Memorial Hospital	10,347	10,249	
South Gippsland Hospital	4,871	4,177	
South West Healthcare	14,486	28,596	
St Vincent's Hospital (Melbourne) Limited	55,595	120,498	
Stawell Regional Health	431	1,734	
Swan Hill District Hospital	970	2,668	
Tallangatta Health Service	2,961	2,720	
Terang and Mortlake Health Service	4,698	4,515	
The Royal Children's Hospital	26,569	48,611	
The Royal Women's Hospital**	-976	451	
Timboon and District Healthcare Service	3,372	3,174	
Upper Murray Health and Community Services	3,311	3,203	

Continued.

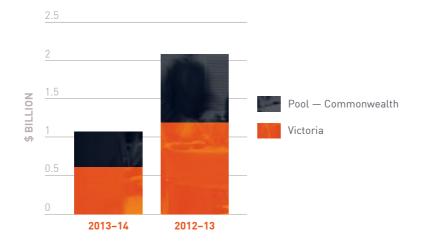
Recipient	Amount paid from VIC State Managed Fund (\$'000)		
	2013-14	2012–13	
Victorian Institute Of Forensic Mental Health	42,619	40,056	
West Gippsland Healthcare Group	2,158	6,182	
West Wimmera Health Service	11,254	10,781	
Western District Health Service	4,019 6		
Western Health	19,159	70,251	
Wimmera Health Care Group	1,143	4,695	
Yarram and District Health Service	4,464	4,344	
Yarrawonga District Health Service	6,975	5,921	
Yea and District Memorial Hospital	2,062 1,		
TOTAL LOCAL HOSPITAL NETWORKS***	1,030,827	2,026,697	
OTHER ORGANISATIONS OR FUNDS	26,614	39,798	
VIC TOTAL	1,057,441	2,066,495	

* Previously MTAA Superannuation Fund.

**Victorian local hospital networks receive activity-based funding, block funding and other payments for different services and purposes. Adjustments are made for cash flow needs and costs administered by the Victorian Department of Health on behalf of local hospital networks. Due to the timing and processing of these adjustments, The Royal Women's Hospital received a negative amount from the State Managed Fund in 2013–14.

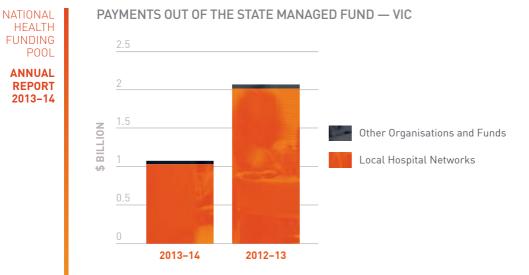
***In the 2012–13 Annual Report the 2012–13 notional local hospital network figure was shown as an aggregate amount.

For the Victorian basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE STATE MANAGED FUND - VIC

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Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Hospital District		Number of ABF public hospital services funded (NWAU)		
Local Hospital District	2013–14 Estimate	2012–13 Actual	2012–13 Estimate	
Albury Wodonga Health	17,550	14,307	15,082	
Alfred Health	125,346	116,143	103,275	
Austin Health	108,253	91,296	85,746	
Bairnsdale Regional Health Service	11,231	9,648	9,332	
Ballarat Health Services	43,416	37,931	33,491	
Barwon Health	84,042	74,745	63,553	
Bass Coast Regional Health	6,214	4,861	5,463	
Benalla Health	3,029	2,885	3,055	
Bendigo Health Care Group	45,129	37,023	31,450	
Castlemaine Health	3,626	1,948	2,460	
Central Gippsland Health Service	10,919	9,935	9,483	
Colac Area Health	3,938	3,366	3,784	
Contracted Services LHN — Victoria	9,055	-	_	
Djerriwarrh Health Services	7,066	6,569	5,980	
East Grampians Health Service	3,081	2,734	2,703	
Eastern Health	135,291	118,497	99,431	

Continued.

Number of ABF public hospital services funded (NWAU) **Local Hospital District** 2013-14 Estimate Actual Estimate 6,335 Echuca Regional Health 6.501 6,349 Gippsland Southern Health Service 3,266 2,987 2,779 27,871 Goulburn Valley Health 24,038 22,405 2,589 2,582 2,454 Kyabram District Health Services Latrobe Regional Hospital 31,713 27,681 23,225 2.993 2.699 Maryborough District Health Service 2.652 Melbourne Health 112,984 98,286 86,006 Mercy Public Hospitals Inc. 53,345 46,332 42,111 Monash Health (previously Southern Health) 228,985 203.344 176,546 17,607 14,788 13,770 Northeast Health Wangaratta Northern Health 78,805 62,540 52,681 Peninsula Health 80.533 64,566 60.530 Peter Maccallum Cancer Institute 20.386 19.958 20.051 Portland District Health 4,065 3,210 3,868 Ramsay Healthcare Australia 18,341 16,981 15,385 (Mildura Base Hospital)* Royal Victorian Eye and Ear Hospital 18.494 19.144 16.233 South West Healthcare 20,114 16,708 17,357 St Vincent's Hospital (Melbourne) Limited 77.755 65.564 59.790 Stawell Regional Health 2.638 2.209 2.437 Swan Hill District Hospital 6,430 5,825 5,844 The Royal Children's Hospital 64,225 61,749 53,099 42.388 34.997 The Royal Women's Hospital 33.611 West Gippsland Healthcare Group 12,548 10.762 10.121 Western District Health Service 7,285 6,466 5,635 Western Health 121,311 110,317 95,602 Wimmera Health Care Group 9.438 9.064 9.179 **VIC TOTAL** 1,689,796 1,470,988 1,314,041

* Previously MTAA Superannuation Fund.

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

Victoria provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 Victoria did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.



Financial Statement

NATIONAL HEALTH FUNDING POOL — QUEENSLAND STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and section 53 of the Queensland Hospital and Health Boards Act 2011.

NATIONAL HEALTH FUNDING POOL	
ANNUAL REPORT 2013–14	INDEPENDENT AUDITOR'S REPORT
	To the Administrator, National Health Funding Pool
	Report on the Financial Report
	I have audited the accompanying financial report, being a special purpose financial report, of the Queensland State Pool Account, prepared in order to report on the receipt and disbursement of funding provided during 2013-14 to the Queensland Department of Health in accordance with Section 53T of the Queensland Hospital and Health Boards Act 2011.
	The financial report comprises the statement of receipts and payments for the year ended 30 June 2014 and notes comprising the basis of preparation and other explanatory information and the certificate provided by the Administrator of the National Health Funding Pool.
	The financial report has been prepared using a cash basis of accounting as described in the Basis of Preparation note in the statements.
	Administrator of the National Health Funding Pool's Responsibility for the Financial Report
	The Administrator of the National Health Funding Pool is responsible for the preparation and fair presentation of the financial report in accordance with the basis of preparation described in Note 1(b) and ensuring that the financial report is both appropriate and is in the required format, so as to meet the information needs of the National Health Funding Body. The Administrator's responsibility also includes such internal control as the Administrator determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.
	Auditor's Responsibility
	My responsibility is to express an opinion on the financial report based on the audit. The audit was conducted in accordance with the Auditor-General of Queensland Auditing Standards, which incorporate the Australian Auditing Standards. Those standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance about whether the financial report is free from material misstatement.
	An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control, other than in expressing an opinion on compliance with prescribed requirements. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, made by the National Health Funding Pool, as well as evaluating the overall presentation of the financial report.
	I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my audit opinion.
100	

Independence

The Auditor-General Act 2009 promotes the independence of the Auditor-General and all authorised auditors. The Auditor-General is the auditor of all Queensland public sector entities and can be removed only by Parliament.

The Auditor-General may conduct an audit in any way considered appropriate and is not subject to direction by any person about the way in which audit powers are to be exercised. The Auditor-General has for the purposes of conducting an audit, access to all documents and property and can report to Parliament matters which in the Auditor-General's opinion are significant.

Opinion

In accordance with the Section 53U of the Queensland Hospital and Health Boards Act 2011, I have audited the financial report, and -

- (a) I have received all the information and explanations which I have required: and
- (b) in my opinion the attached special purpose financial report for the year ended 30 June 2014 is based on properly maintained financial records and gives a true and fair view of the matters required by the Queensland Hospital and Health Boards Act 2011, the Commonwealth National Health Reform Act 2011 and the National Health Reform Agreement 2011.

Emphasis of Matter - Basis of Accounting

Without modifying my opinion, attention is drawn to Note 1 (b) to the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the Administrator's financial reporting responsibilities under the Queensland Hospital and Health Boards Act 2011. As a result, the financial report may not be suitable for another purpose.

A M GREAVES FCA PCPA

Auditor-General of Queensland

AUDITOR GENERAL 11 1 SEP 2014 OF QUEENSLAND

Queensiand Audit Office Brisbane



Queensland State Pool Account
Special purpose financial statement
for the year ended 30 June 2014

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Queensland State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		-	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	2,384,822	1,906,154
Block funding		365,254	441,700
Public health funding		64,892	56,553
From Queensland			
Activity based funding	2,6	4,768,902	3,708,716
Cross border contribution		-	-
From other States or Territories			
Cross border receipts	3	-	_
From Reserve Bank of Australia			
Interest receipts		710	646
TOTAL RECEIPTS		7,584,580	6,113,769
PAYMENTS OUT OF THE STATE POOL ACCOUNT	іт		
To Local Hospital Networks			
Activity based funding	4,6	7,153,724	5,615,173
To Queensland State Managed Fund			
Block funding		365,254	441,397
Cross border transfer		-	_
To Queensland Health			
Public health funding		64,892	56,553
Interest payments		710	646
Cross border transfer		-	-
To other States or Territories			
Cross border payments	5	-	-
TOTAL PAYMENTS		7,584,580	6,113,769
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		-	-
CLOSING CASH BALANCE		-	-

The results for 2012–13 represent the operations for the period from 1 August 2012 to 30 June 2013. The Queensland State Pool Account commenced operations on 1 August 2012.

The above statement of receipts and payments should be read in conjunction with the accompanying notes.

FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL HEALTH

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Queensland State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Queensland State Pool Account was established in accordance with the Queensland *Hospital and Health Boards Act 2011* and the special purpose financial statement has been prepared in accordance with Section 53 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 8 September 2014.

QUEENSLAND

(C) COMPARATIVE FIGURES

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POOL

Prior year comparative information has been disclosed. The results for 2012–13 are for the period from 1 August 2012 to 30 June 2013 and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for Queensland, multiplied by the National Weighted Activity Units (NWAU) estimate provided by Queensland. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Queensland 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Queensland State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	2,384,822	1,906,154
Queensland activity based funding	4,768,902	3,708,716
TOTAL	7,153,724	5,614,870

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POOL ANNUAL REPORT 2013–14

NATIONAL HEALTH

FUNDING

3 CROSS BORDER RECEIPTS

Total cross border receipts into the Queensland State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	_	-
Victoria	_	-
Western Australia	_	-
South Australia	-	-
Australian Capital Territory	-	-
Tasmania	-	-
Northern Territory	-	_
TOTAL	-	-

Where no cross border receipts are reported through the Queensland State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Queensland State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Cairns and Hinterland Hospital and Health Service	443,333	338,377
Central Queensland Hospital and Health Service	245,877	180,999
Children's Health Queensland Hospital and Health Service	206,306	182,372
Darling Downs Hospital and Health Service	265,541	174,281
Gold Coast Hospital and Health Service	719,962	506,956
Mackay Hospital and Health Service	196,229	142,749
Mater Misericordiae Health Service Brisbane	530,022	413,926
		Continued.

Queensland State Pool Account Notes to the special purpose financial statement for the year ended 30 June 2014

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Metro North Hospital and Health Service	1,642,921	1,349,332
Metro South Hospital and Health Service	1,308,101	1,069,319
North West Hospital and Health Service	64,099	52,775
Sunshine Coast Hospital and Health Service	470,547	364,339
Townsville Hospital and Health Service	496,297	389,525
West Moreton Hospital and Health Service	242,020	185,437
Wide Bay Hospital and Health Service	322,469	264,786
TOTAL	7,153,724	5,615,173

The Administrator makes payments from the Queensland State Pool Account in accordance with the directions of the Queensland Minister for Health.

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Queensland State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	_	_
Victoria	-	-
Western Australia	_	_
South Australia	-	-
Australian Capital Territory	_	_
Tasmania	-	-
Northern Territory	_	-
TOTAL	-	-

Where no cross border payments are reported through the Queensland State Pool Account, there may be other bilateral arrangements between the states and territories. FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL HEALTH

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total Queensland and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from Queensland	4,768,902	3,708,716
Total activity based funding receipts from the Commonwealth	2,384,822	1,906,154
Less activity based funding payments to local hospital networks	(7,153,724)	(5,615,173)
PAYMENTS IN EXCESS OF RECEIPTS	-	(303)

The Administrator makes payments from the Queensland State Pool Account in accordance with the directions of the Queensland Minister for Health. The Queensland Minister for Health directed all activity based funding contributions paid to local hospital networks.

Queensland Health allocated Commonwealth block funding amounts in May 2013 to activity based funding for local hospital networks (refer to Statement of Receipts and Payments).

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by Queensland and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by Queensland (\$'000)	
	2013–14	2012-13
State Pool Account — Activity based funding*	4,768,902	4,046,879
State Managed Fund — Block funding	625,752	1,110,595
QLD TOTAL	5,394,654	5,157,474

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

QUEENSLAND

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

The basis used to determine Queensland national health reform funding and payments for 2013–14 was advised by the Queensland Department of Health to be as follows:

Service agreements between the Department of Health and each Hospital and Health Service (HHS) in 2013–14 were based on the department's funding and purchasing models. In broad terms, the funding model determines the price at which the department purchases services from HHSs, and the purchasing model determines the volume of services that are purchased.

In terms of the funding model:

- 34 of the largest public hospitals were funded through the Queensland Activity Based Funding (ABF) model, which sets prices at a disaggregated level for each type of public hospital service. The Queensland ABF model is based largely on the national ABF model, but includes a number of modifications to reflect Queensland priorities.
- + 89 public hospitals, predominantly small regional and rural hospitals, were funded based on historical funding levels. In 2013–14 Queensland did not adopt the National Efficient Cost Determination.
- + Most non-hospital services (e.g. preventive health, primary and community health) were funded based on historical funding levels. However, some services, such as oral health and breast screening, are funded based on a price per unit of output.

The purchasing model determines the volume of services that the Department agrees to purchase from each HHS through the service agreement. The model is informed by Estimated Future Activity for each HHS and other key priorities for investment.

Between February and June 2014, the Commonwealth provided Queensland with additional public hospital funding of \$41,461,823.22 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

Component	Amount paid by Commonwealth into QLD State Pool Account (\$'000)	
	2013–14	2012-13
Activity based funding	2,384,822	2,086,953
Block funding	365,254	483,606
Public Health funding	64,892	61,829
QLD TOTAL	2,814,967	2,632,388

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

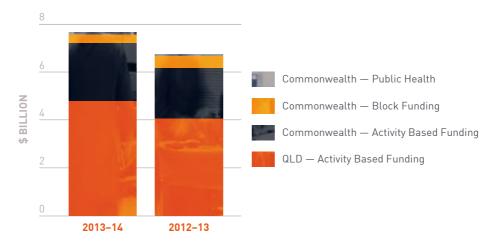
Recipient	Amount paid from QLD State Pool Account (\$'000)		
	2013–14	2012–13	
Cairns and Hinterland Hospital and Health Service	443,333	369,729	
Central Queensland Hospital and Health Service	245,877	200,236	
Children's Health Queensland Hospital and Health Service	206,306	197,735	
Darling Downs Hospital and Health Service	265,541	191,450	
Gold Coast Hospital and Health Service	719,962	554,545	
Mackay Hospital and Health Service	196,229	157,281	
Mater Misericordiae Health Service Brisbane	530,022	443,383	
Metro North Hospital and Health Service	1,642,921	1,474,754	
Metro South Hospital and Health Service	1,308,101	1,172,961	
North West Hospital and Health Service	64,099	57,855	
Sunshine Coast Hospital and Health Service	470,547	396,847	
Townsville Hospital and Health Service	496,297	426,216	

Continued.

HEALTH FUNDING POOL	
ANNUAL REPORT 2013-14	

Recipient		Amount paid from QLD State Pool Account (\$'000)		
	2013-14	2012–13		
West Moreton Hospital and Health Service	242,020	202,218		
Wide Bay Hospital and Health Service	322,469	288,924		
TOTAL LOCAL HOSPITAL NETWORKS	7,153,724	6,134,135		
STATE MANAGED FUND	365,254	483,302		
OTHER ORGANISATIONS OR FUNDS	65,602	62,474		
QLD TOTAL	7,584,580	6,679,912		

For the Queensland basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL — QLD

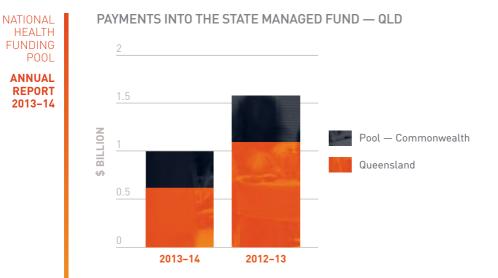


PAYMENTS OUT OF THE POOL — QLD

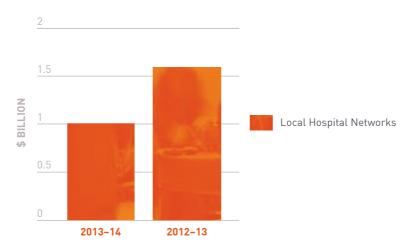
Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Recipient	Amount paid from QLD State Managed Fund (\$'000)	
	2013–14	2012–13
Cairns and Hinterland Hospital and Health Service	65,304	88,664
Cape York Hospital and Health Service	20,705	40,283
Central Queensland Hospital and Health Service	70,917	106,017
Central West Hospital and Health Service	24,864	31,323
Children's Health Queensland Hospital and Health Service	21,806	31,184
Darling Downs Hospital and Health Service	160,091	207,469
Gold Coast Hospital and Health Service	33,480	91,945
Mackay Hospital and Health Service	37,979	76,211
Mater Misericordiae Health Service Brisbane	14,063	20,483
Metro North Hospital and Health Service	65,802	196,420
Metro South Hospital and Health Service	100,846	189,343
North West Hospital and Health Service	18,778	30,140
South West Hospital and Health Service	52,721	58,645
Sunshine Coast Hospital and Health Service	29,504	58,312
Torres Strait — Northern Peninsula Hospital and Health Service	46,238	62,235
Townsville Hospital and Health Service	82,068	128,144
West Moreton Hospital and Health Service	111,207	110,976
Wide Bay Hospital and Health Service	34,634	66,005
TOTAL LOCAL HOSPITAL NETWORKS	991,006	1,593,800
OTHER ORGANISATIONS OR FUNDS	-	-
QLD TOTAL	991,006	1,593,800

For the Queensland basis of payments, refer to part a) of this chapter.



PAYMENTS OUT OF THE STATE MANAGED FUND — QLD



Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Monthal District	Number of ABF public hospital services funded (NWAU)		
Local Hospital District	t 2013–14 Estimate		2012–13 Estimate
Cairns and Hinterland Hospital and Health Service	87,731	76,385	76,899
Central Queensland Hospital and Health Service	45,206	37,895	41,719
Children's Health Queensland Hospital and Health Service	28,047	28,821	41,126
Darling Downs Hospital and Health Service	52,117	40,441	39,819

Continued.

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Local Hansital District	Number of ABF public hospital services funded (NWAU)		
Local Hospital District	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
Gold Coast Hospital and Health Service	139,547	112,354	115,499
Mackay Hospital and Health Service	35,256	28,964	32,712
Mater Misericordiae Health Service Brisbane	83,540	80,765	77,454
Metro North Hospital and Health Service	281,084	253,419	306,729
Metro South Hospital and Health Service	243,223	214,841	245,068
North West Hospital and Health Service	12,545	10,621	12,033
Sunshine Coast Hospital and Health Service	90,328	73,397	82,539
Townsville Hospital and Health Service	88,339	82,795	89,457
West Moreton Hospital and Health Service	49,088	41,993	42,142
Wide Bay Hospital and Health Service	61,899	53,224	60,214
QLD TOTAL	1,297,949	1,135,913	1,263,410

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

Queensland provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 Queensland did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.



WESTERN AUSTRALIA

Financial Statement

WESTERN AUSTRALIA

NATIONAL HEALTH FUNDING POOL — WESTERN AUSTRALIAN STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and section 20 of the Western Australian National Health Funding Pool Act 2012. NATIONAL HEALTH FUNDING POOL **ANNUAL** REPORT 2013-14 Auditor General INDEPENDENT AUDITOR'S REPORT To the Parliament of Western Australia WESTERN AUSTRALIAN STATE POOL ACCOUNT Report on the Special Purpose Financial Statement As required by section 21 of the National Health Funding Pool Act 2012 (WA) and section 243 of the National Health Reform Act 2011, I have audited the accompanying special purpose financial statement (the financial statement) of the Western Australian State Pool Account of the National Health Funding Pool for the year ended 30 June 2014. The financial statement comprises a Statement of Receipts and Payments for the year ended 30 June 2014, notes comprising a summary of significant accounting policies and other explanatory information, and the Administrator's declaration. The Responsibility of the Administrator of the National Health Funding Pool for the Financial Statement The Administrator of the National Health Funding Pool (the Administrator) is responsible for the preparation of the financial statement that gives a true and fair view in accordance with the National Health Funding Pool Act 2012 (WA) and the National Health Reform Act 2011, and has determined that the basis of preparation described in Note 1 to the financial statement is appropriate to meet these requirements. The Administrator is also responsible for such internal control as the Administrator determines is necessary to enable the preparation of the financial statement that is free from material misstatement, whether due to fraud or error. Auditor's Responsibility My responsibility is to express an opinion on the financial statement based on my audit. The audit was conducted in accordance with Australian Auditing Standards, the National Health Funding Pool Act 2012 (WA), and the National Health Reform Act 2011. The auditing standards require that the auditor comply with relevant ethical requirements and that the auditor plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial statement that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of internal controls. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made by the Administrator, as well as the overall presentation of the financial statement. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion. Page 1 of 2 7th Floor Albert Facey House 459 Weilington Street Perth 18AA, TO, Perth BC PO Box 5459 Perth VBA.6649 TEL: 08 6557 7500 FAX: 08 6557 7600

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WESTERN AUSTRALIA

Opinion

In my opinion, the financial statement gives a true and fair view of the receipts and payments of the Western Australian State Pool Account of the National Health Funding Pool for the year ended 30 June 2014 in accordance with the National Health Funding Pool Act 2012 (WA) and National Health Reform Act 2011.

Independence

In conducting this audit, I have complied with the independence requirements of the Auditor General Act 2006 and Australian Auditing Standards, and other relevant ethical requirements.

Basis of Accounting

Without modifying my opinion, I draw attention to Note 1 to the financial statement, which describes the purpose of the financial statement and basis of accounting. The financial statement has been prepared using the cash basis of accounting and for the purpose of fulfilling the Administrator's financial reporting obligations under the National Health Funding Pool Act 2012 (WA), and the National Health Reform Act 2011. As a result, the financial statement may not be suitable for another purpose.

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ACTING AUDITOR GENERAL FOR WESTERN AUSTRALIA Perth, Western Australia 15 September 2014

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Western Australian State Pool Account Special purpose financial statement for the year ended 30 June 2014

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Western Australian State Pool Account Statement of reciepts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		-	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	1,226,895	1,024,177
Block funding		256,209	341,316
Public health funding		35,297	32,653
From Western Australia			
Activity based funding	2,6	2,170,052	2,654,929
Cross border contribution		-	-
From other States or Territories			
Cross border receipts	3	-	-
From Reserve Bank of Australia			
Interest receipts		1	-
TOTAL RECEIPTS		3,688,454	4,053,075
PAYMENTS OUT OF THE STATE POOL ACCOUN	Т		
To Local Hospital Networks			
Activity based funding	4,6	3,396,947	3,679,106
To Western Australia State Managed Fund			
Block funding		256,209	341,316
Cross border transfer		-	-
To Western Australia Health			
Public health funding		35,297	32,653
Interest payments		1	-
Cross border transfer		-	-
To other States or Territories			
Cross border payments	5	-	-
TOTAL PAYMENTS		3,688,454	4,053,075
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		-	-
CLOSING CASH BALANCE		-	-

The above statement of receipts and payments should be read in conjunction with the accompanying notes.

NATIONAL HEALTH

FUNDING

POOL ANNUAL REPORT 2013–14 **1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Western Australian State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Western Australian State Pool Account was established in accordance with the Western Australian *Health Funding Pool Act 2012* and the special purpose financial statement has been prepared in accordance with Section 20 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

POOL ANNUAL REPORT 2013–14

NATIONAL

HEALTH

Western Australian State Pool Account Notes to the special purpose financial statement for the year ended 30 June 2014

The financial statement was authorised for issue by the Administrator on 10 September 2014.

(C) COMPARATIVE FIGURES

Prior year comparative information has been disclosed and comparatives have not been restated.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for Western Australia, multiplied by the National Weighted Activity Units (NWAU) estimate provided by Western Australia. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six–monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

WESTERN AUSTRALIA

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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HEALTH

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2013-14

POOL

In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Western Australian 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPAs 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Western Australian State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	1,226,895	1,024,177
Western Australian activity based funding	2,170,052	2,654,929
TOTAL	3,396,947	3,679,106

WESTERN AUSTRALIA

3 CROSS BORDER RECEIPTS

Total cross border receipts into the Western Australian State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	_	_
Victoria	_	_
Queensland	_	_
South Australia	-	-
Australian Capital Territory	-	-
Tasmania	-	-
Northern Territory	-	
TOTAL	-	-

Where no cross border receipts are reported through the Western Australian State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Western Australian State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Child and Adolescent Health Service	256,594	259,907
North Metropolitan Health Service	1,208,574	1,247,260
South Metropolitan Health Service	1,472,728	1,514,285
WA Country Health Service	459,051	657,654
TOTAL	3,396,947	3,679,106

The Administrator makes payments from the Western Australian State Pool Account in accordance with the directions of the Western Australian Minister for Health.

NATIONAL HEALTH

FUNDING

ANNUAL REPORT

2013-14

POOL

WESTERN AUSTRALIA

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Western Australian State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	-	_
Victoria	-	_
Queensland	-	_
South Australia	-	_
Australian Capital Territory	-	-
Tasmania	_	-
Northern Territory	-	-
TOTAL	-	-

Where no cross border payments are reported through the Western Australian State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total Western Australian and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from Western Australia	2,170,052	2,654,929
Total activity based funding receipts from the Commonwealth	1,226,895	1,024,177
Less activity based funding payments to local hospital networks	(3,396,947)	(3,679,106)
PAYMENTS IN EXCESS OF RECEIPTS	-	-

The Administrator makes payments from the Western Australian State Pool Account in accordance with the directions of the Western Australian Minister for Health. The Western Australian Minister for Health directed all activity based funding contributions paid to local hospital networks.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by Western Australia and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by Western Australia (\$'000)		
	2013–14	2012-13	
State Pool Account — Activity based funding*	2,170,052	2,654,929	
State Managed Fund — Block funding	598,783	754,837	
WA TOTAL	2,768,835	3,409,766	

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

The basis used to determine Western Australia national health reform funding and payments for 2013–14 (at June 2014) was advised by the Western Australian Department of Health to be as follows:

The 2013–14 annual funding allocations have been developed using the Western Australian Activity Based Funding program methodology. Activity profiles have been developed consistent with the WA Health clinical services framework. The funding allocations include activity based services, block funded services and specified programs.

WESTERN AUSTRALIA

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 The national ABF classifications and associated price weights including all of the adjustments (Specialised Paediatric, Rural/remote, Indigenous, ICU and private patient) have been used to define activity based funding profiles.

The State Transitioning Price, calculated using a methodology more closely aligned to the National ABF framework, provide a more transparent basis for comparing the cost of delivering hospital services in Western Australia against the national cost benchmark (Projected Average Cost (PAC)). The gap between the total price of all hospital activity funded at the State Transition Price and the total cost of all hospital activity funded at the PAC, is called the Community Service Subsidy (CSS) payment.

Block funding is based on budget to budget build from the previous year using State Government funding parameters consistent with the State budget.

Between March and June 2014, the Commonwealth provided Western Australia with additional public hospital funding of \$17,814,236.81 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Component	Amount paid by Commonwealth into WA State Pool Account (\$'000)		
	2013-14 2012-13		
Activity based funding	1,226,895	1,024,177	
Block funding	256,209	341,316	
Public Health funding	35,297	32,653	
WA TOTAL	1,518,400	1,398,146	

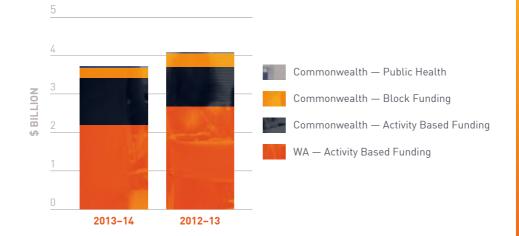
Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

Amount paid from WA State Pool Account Recipient (\$'000) 2013-14 2012-13 Child and Adolescent Health Service 256,594 259,906 North Metropolitan Health Service 1,208,574 1,247,260 South Metropolitan Health Service 1,472,728 1,514,285 459,051 WA Country Health Service 657,654 **TOTAL LOCAL HOSPITAL NETWORKS** 3,396,947 3,679,106 STATE MANAGED FUND 256,209 341,316 **OTHER ORGANISATIONS OR FUNDS** 35,298 32,653 WA TOTAL 3.688.453 4.053.075

For the Western Australia basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL — WA

WESTERN AUSTRALIA

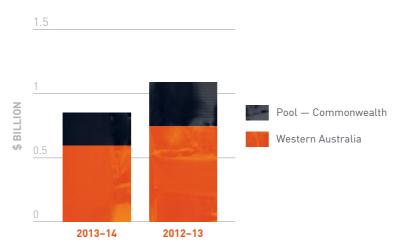


Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Recipient	Amount paid from WA State Managed Fund (\$'000)		
	2013-14 2012-13		
Child and Adolescent Health Service	86,184	124,530	
North Metropolitan Health Service	218,206	269,556	
South Metropolitan Health Service	209,421	219,086	
WA Country Health Service	339,040	482,981	
TOTAL LOCAL HOSPITAL NETWORKS	852,852	1,096,153	
OTHER ORGANISATIONS OR FUNDS	-	-	
WA TOTAL	852,852	1,096,153	

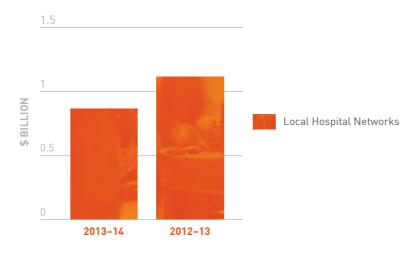
For the Western Australia basis of payments, refer to part a) of this chapter.

POOL ANNUAL REPORT



PAYMENTS INTO THE STATE MANAGED FUND — WA

PAYMENTS OUT OF THE STATE MANAGED FUND — WA



WESTERN AUSTRALIA NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013-14 Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Hearital District	Number of ABF public hospital services funded (NWAU)		
Local Hospital District			2012–13 Estimate
Child and Adolescent Health Service*	50,740	47,096	48,262
North Metropolitan Health Service*	244,892	208,088	216,653
South Metropolitan Health Service*	298,631	272,386	272,581
WA Country Health Service	87,805	85,174	81,471
WA TOTAL	682,068	612,744	618,967

*The 2012–13 NWAU estimates shown for these local hospital networks differ from those published in the 2012–13 Annual Report.

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

Western Australia provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 Western Australia did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.

SOUTH AUSTRALIA

Financial Statement

SOUTH AUSTRALIA

NATIONAL HEALTH FUNDING POOL — SOUTH AUSTRALIAN STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and section 23 of the South Australian National Health Funding Pool Administration (South Australia) Act 2012. POOL ANNUAL REPORT 2013-14

NATIONAL HEALTH FUNDING

INDEPENDENT AUDITOR'S REPORT



Government of South Australia

Auditor-General's Department

Level 9 State Administration Centre 205 Victoria Square Addarde SA 5000 01:59208 Victoria Square Se + 618 8226 9680 Fax + 618 8226 9688 ABN 53 327 061 470 avdgmadBaudit sa gora au www.audit sa gora au

To the Administrator of the National Health Funding Pool

As required by section 24 of the National Health Funding Pool Administration (South Australia) Act 2012 and section 243 of the National Health Reform Act 2011, I have audited the accompanying special purpose financial statement (the financial statement) of the South Australian State Pool Account of the National Health Funding Pool for the year ended 30 June 2014. The financial statement comprises:

- a Statement of Receipts and Payments for the period 1 July 2013 to 30 June 2014
- notes to and forming part of the financial statement
- the Administrator's declaration

The Responsibility of the Administrator of the National Health Funding Pool for the Financial Statement

The Administrator of the National Health Funding Pool (the Administrator) is responsible for the preparation of the financial statement that gives a true and fair view in accordance with the National Health Funding Pool Administration (South Australia) Act 2012, the National Health Reform Act 2011 and the National Health Reform Agreement 2011, and for such internal control as the Administrator determines is necessary to enable the preparation of the financial statement that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on the financial statement based on the audit. The audit was conducted in accordance with Australian Auditing Standards and the National Health Funding Pool Administration (South Australia) Act 2012, National Health Reform Act 2011 and the National Health Reform Agreement 2011. The auditing standards require that the auditor comply with relevant ethical requirements and that the auditor plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial statement that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made by the Administrator, as well as the overall presentation of the financial statement.

SOUTH AUSTRALIA

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the attached special purpose financial statement for the period ended 30 June 2014 is based on properly maintained financial records and gives a true and fair view of the matters required by the National Health Funding Pool Administration (South Australia) Act 2012, the National Health Reform Act 2011 and the National Health Reform Agreement 2011.

Basis of Accounting

Without modifying my opinion, I draw attention to note 1 to the financial statement, which describes the purpose of the financial statement and basis of accounting. The financial statement has been prepared using the cash basis of accounting and for the purpose of fulfilling the Administrator's financial reporting obligations under the National Health Funding Pool Administration (South Australia) Act 2012, the National Health Reform Act 2011 and the National Health Reform Agreement 2011. As a result, the financial statement may not be suitable for another purpose.

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S O'Neill AUDITOR-GENERAL 15 September 2014



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South Australian State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		9,391	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	841,671	592,667
Block funding		143,066	139,087
Public health funding		23,166	17,494
From South Australia			
Activity based funding	2,6	1,848,159	1,201,000
Cross border contribution		-	-
From other States or Territories			
Cross border receipts	3	-	-
From Reserve Bank of Australia			
Interest receipts		3,619	2,322
TOTAL RECEIPTS		2,859,681	1,952,570
PAYMENTS OUT OF THE STATE POOL ACCOUNT	IT		
To Local Hospital Networks			
Activity based funding	4,6	2,702,840	1,786,176
To South Australian State Managed Fund			
Block funding		143,066	139,087
Cross border transfer		-	-
To South Australia Health			
Public health funding		23,166	17,494
Interest payments		-	422
Cross border transfer		-	-
To other States or Territories			
Cross border payments	5	-	-
TOTAL PAYMENTS		2,869,072	1,943,179
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		-9,391	9,391
CLOSING CASH BALANCE		-	9,391

The results for 2012–13 represent the operations for the period from 1 October 2012 to 30 June 2013. The South Australian State Pool Account commenced operations on 1 October 2012.

The above statement of receipts and payments should be read in conjunction with the accompanying notes.

FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL HEALTH **1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the South Australian State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The South Australian State Pool Account was established in accordance with the South Australian *National Health Funding Pool Administration (South Australia) Act 2012* and the special purpose financial statement has been prepared in accordance with Section 23 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011.*

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

FUNDING POOL ANNUAL REPORT 2013–14

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South Australian State Pool Account Notes to the special purpose financial statement for the year ended 30 June 2014

The financial statement was authorised for issue by the Administrator on 9 September 2014.

(C) COMPARATIVE FIGURES

Prior year comparative information has been disclosed. The results for 2012–13 are for the period from 1 October 2012 to 30 June 2013 and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for South Australia, multiplied by the National Weighted Activity Units (NWAU) estimate provided by South Australia. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

SOUTH AUSTRALIA

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the South Australian 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the South Australian State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	841,671	592,667
South Australian activity based funding	1,848,159	1,201,000
TOTAL	2,689,830	1,793,667

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POOL ANNUAL REPORT 2013-14

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FUNDING

3 CROSS BORDER RECEIPTS

Total cross border receipts into the South Australian State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	-	-
Victoria	_	-
Queensland	_	-
Western Australia	-	-
Australian Capital Territory	_	-
Tasmania	-	-
Northern Territory	_	-
TOTAL	-	-

Where no cross border receipts are reported through the South Australian State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the South Australian State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Central Adelaide Local Health Network	983,287	630,862
Country Health SA Local Health Network	288,238	281,339
Northern Adelaide Local Health Network	466,732	218,624
Southern Adelaide Local Health Network	688,841	460,056
Women's and Children's Health Network	275,742	195,295
TOTAL	2,702,840	1,786,176

The Administrator makes payments from the South Australian State Pool Account in accordance with the directions of the South Australian Health Minister.

SOUTH AUSTRALIA

5 CROSS BORDER PAYMENTS

Total cross border payments out of the South Australian State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	_	-
Victoria	-	-
Queensland	-	_
Western Australia	-	-
Australian Capital Territory	-	-
Tasmania	_	-
Northern Territory	-	-
TOTAL	-	-

Where no cross border payments are reported through the South Australian State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total South Australian and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from South Australia	1,848,159	1,201,000
Total activity based funding receipts from the Commonwealth	841,671	592,667
Less activity based funding payments to local hospital networks	(2,702,840)	(1,786,176)
PAYMENTS IN EXCESS OF RECEIPTS	-13,010	7,490

The Administrator makes payments from the South Australian State Pool Account in accordance with the directions of the South Australian Minister for Health. The South Australian Minister for Health directed all activity based funding contributions to local hospital networks.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by South Australia and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by South Australia (\$'000)		
	2013–14	2012-13	
State Pool Account — Activity based funding*	1,848,159	1,519,989	
State Managed Fund — Block funding	234,911	235,918	
SA TOTAL	2,083,070	1,755,907	

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

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The basis used to determine South Australian national health reform funding and payments for 2013–14 (at June 2014) was advised by the South Australian Department of Health to be as follows:

In determining the annual funding allocation for all LHNs, the budget has been built up predominantly on an activity basis applying an internally developed allocation methodology that is designed to equitably distribute funding to each local hospital network relative to all LHNs in South Australia. This occurs within the confines of a limited funding pool that includes adjustments to recognise cost improvements and the attainment of service efficiencies that are also equitably allocated on an activity basis. Supplementation is provided as block funding where an activity-based approach is not appropriate. This captures the provision of services including teaching, training and research, some mental health services and the delivery of out of hospital strategies incorporating primary health.

Monthly allocations to LHNs will vary for a variety of reasons, but they are predominantly cash flow financed based on need which includes the activity demand on hospital services.

Between March and June 2014, the Commonwealth provided South Australia with additional public hospital funding of \$17,146,588.96 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Component	Amount paid by Commonwealth SA State Pool Account Component (\$'000)	
	2013-14	2012-13
Activity based funding	841,671	798,102
Block funding	143,066	187,305
Public Health funding	23,166	23,469
SA TOTAL	1,007,904	1,008,876

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

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FUNDING

2013-14

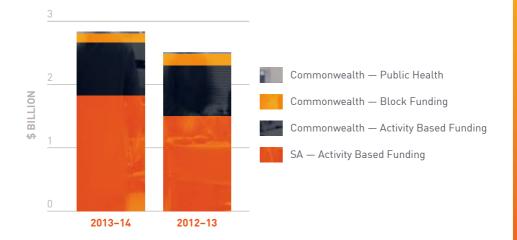
POOL ANNUAL REPORT

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

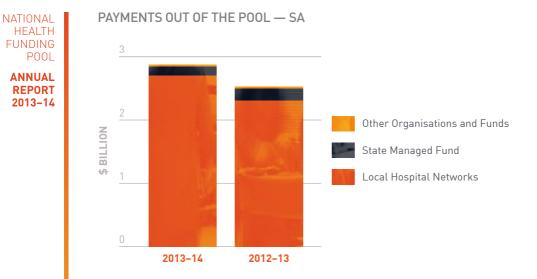
Amount paid from SA State Pool Account Recipient (\$'000) 2013-14 2012-13 983,288 Central Adelaide Local Health Network 817,495 Country Health SA Local Health Network 288.238 354,615 Northern Adelaide Local Health Network 466,732 289,358 Southern Adelaide Local Health Network 688,841 600,012 Women's and Children's Health Network 275.742 249,121 **TOTAL LOCAL HOSPITAL NETWORKS** 2,702,840 2,310,600 STATE MANAGED FUND 143,066 187,305 **OTHER ORGANISATIONS OR FUNDS** 23,166 23,891 SA TOTAL 2,869,072 2,521,796

For the South Australian basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL — SA

SOUTH AUSTRALIA

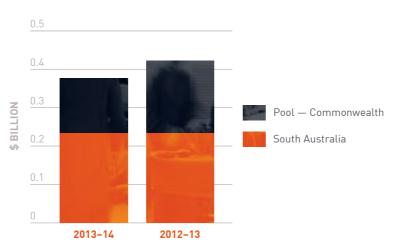


Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Recipient	Amount paid from SA State Managed Fund (\$'000)		
	2013-14	2012-13	
Central Adelaide Local Health Network	69,351	171,765	
Country Health SA Local Health Network	205,698	117,459	
Northern Adelaide Local Health Network	40,396	42,604	
Southern Adelaide Local Health Network	48,895	69,418	
Women's and Children's Health Network	13,637	21,976	
TOTAL LOCAL HOSPITAL NETWORKS	377,977	423,222	
OTHER ORGANISATIONS OR FUNDS	-	-	
SA TOTAL	377,977	423,222	

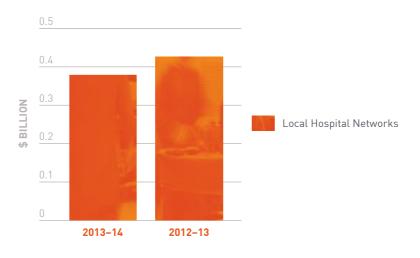
For the South Australian basis of payments, refer to part a) of this chapter.

HEALTH FUNDING POOL ANNUAL REPORT 2013-14



PAYMENTS INTO THE STATE MANAGED FUND — SA

PAYMENTS OUT OF THE STATE MANAGED FUND — SA



SOUTH AUSTRALIA

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Hospital District	Number of ABF public hospital services funded (NWAU)		
	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
Central Adelaide Local Health Network	195,793	166,625	162,612
Country Health SA Local Health Network	57,384	77,241	70,935
Northern Adelaide Local Health Network	92,925	79,996	81,497
Southern Adelaide Local Health Network	137,147	125,305	120,327
Women's and Children's Health Network	54,916	51,718	51,320
SA TOTAL	538,164	500,886	486,690

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

South Australia provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 South Australia did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.

TASMANIA



Financial Statement

TASMANIA

NATIONAL HEALTH FUNDING POOL — TASMANIAN STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and section 19 of the Tasmanian National Health Funding Administration Act 2012. NATIONAL HEALTH FUNDING POOL





Independent Auditor's Report

To Members of the Parliament of Tasmania

National Health Funding Pool – Tasmanian State Pool Account

Special Purpose Financial Statement for the Year Ended 30 June 2014

Report on the Special Purpose Financial Statement

As required by section 20 of the National Health Funding Administration Act 2012 (Tasmania) and section 243 of the National Health Reform Act 2011 (Commonwealth), I have audited the accompanying special purpose financial statement of the Tasmanian State Pool Account of the National Health Funding Pool (the financial statement) for the year ended 30 June 2014. The financial statement comprises a statement of receipts and payments for the year ended 30 June 2014, cash balances at the beginning and end of that year, notes comprising a summary of significant accounting policies, other explanatory information and a declaration by the Administrator of the National Health Funding Pool (the Administrator).

Auditor's Opinion

In my opinion the financial statement for the year ended 30 June 2014 presents fairly, in all material respects, the financial transactions of the Tasmanian State Pool Account and such components of financial position at that date, as are disclosed, in accordance with the *National Health Funding Administration Act 2012* (Tasmania), the *National Health Reform Act 2011* (Commonwealth) and the National Health Reform Agreement 2011.

Basis of Accounting

Without modifying my opinion, I draw attention to Note 1 to the financial statement, which describes the purpose of the financial statement and the basis of accounting. The financial statement has been prepared solely for the purpose of fulfilling the Administrator's financial reporting obligations under the financial reporting provisions of section 19 of the *National Health Reform Act 2011* (Commonwealth), the National Health Reform Agreement 2011 and section 17 of the *Audit Act 2008* (Tasmania). As a result, the financial statement may not be suitable for another purpose.

The Responsibility of the Administrator for the Financial Statement

The Administrator is responsible for the preparation and fair presentation of the financial statement and has determined that the basis of presentation described in Note 1, which is a special purpose framework using the cash basis of accounting, is appropriate to meet the financial reporting provisions of section 19 of the *National Health Funding Administration Act 2012* (Tasmania), section 242 of the *National Health Reform Act 2011* (Commonwealth), the National Health Reform Agreement 2011 and section 17 of the *Audit Act 2008* (Tasmania). The Administrator's responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial statement that is free from material misstatement,

To provide independent assurance to the Parliament and Community on the performance and accountability of the Taumanian Public sector. Professionalism | Respect | Camanaderie | Continuous Improvement | Customer Focus

Strive | Lead | Excel | To Make a Difference

TASMANIA

whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

My responsibility is to express an opinion on the financial statement based on my audit. My audit was conducted in accordance with Australian Auditing Standards. Auditing standards require that the auditor comply with relevant ethical requirements and that the auditor plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement.

My audit involved performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. Procedures selected depend on my judgement, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, I considered internal control relevant to the Administrator's preparation of the financial statement in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the accounting policies used and the reasonableness of accounting estimates made by the Administrator, as well as the overall presentation of the financial statement.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Independence

In conducting my audit, I have complied with the independence requirements of the Australian Auditing Standards and relevant ethical pronouncements. The *Audit Act 2008* (Tasmania) further promotes independence by:

- providing that only Parliament, and not the executive government, can remove an Auditor-General; and
- mandating the Auditor-General as auditor of state entities but precluding the provision of non-audit services, thus ensuring the Auditor-General and the Tasmanian Audit Office are not compromised in their role by the possibility of losing clients or income.

Tasmanian Audit Office

H M Blake Auditor-General Hobart, 16 September 2014

...2 of 2

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Tasmanian State Pool Account
Special purpose financial statement
for the year ended 30 June 2014

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Tasmanian State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		-	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	238,897	233,205
Block funding		46,460	51,887
Public health funding		7,090	6,829
From Tasmania			
Activity based funding	2,6	350,095	236,838
Cross border contribution		-	10,223
From other States or Territories			
Cross border receipts	3	-	-
From Reserve Bank of Australia			
Interest receipts		2	20
TOTAL RECEIPTS		642,544	539,002
PAYMENTS OUT OF THE STATE POOL ACCOU	JNT		
To Local Hospital Networks			
Activity based funding	4,6	588,992	470,043
To Tasmanian State Managed Fund			
Block funding		46,460	51,887
Cross border transfer		-	-
To Tasmanian Department of Health and Huma	an Services		
Public health funding		7,090	6,829
Interest payments		2	20
Cross border transfer		-	-
To other States or Territories			
Cross border payments	5	-	10,223
TOTAL PAYMENTS		642,544	539,002
NET RECEIPTS/(PAYMENTS) FOR THE YEAR	1	-	-
CLOSING CASH BALANCE		-	-

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The above statement of receipts and payments should be read in conjunction with the accompanying notes.

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Tasmanian State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Tasmanian State Pool Account was established in accordance with the Tasmanian *National Health Funding Administration Act 2012* and the special purpose financial statement has been prepared in accordance with Section 19 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 9 September 2014.

TASMANIA

(C) COMPARATIVE FIGURES

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Prior year comparative information has been disclosed. The results for 2012–13 are for a full year of operations and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for Tasmania, multiplied by the National Weighted Activity Units (NWAU) estimate provided by Tasmania. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Tasmanian 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Tasmanian State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	238,897	233,205
Tasmanian activity based funding	350,095	236,838
TOTAL	588,992	470,043

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3 CROSS BORDER RECEIPTS

Total cross border receipts into the Tasmanian State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	-	-
Victoria	-	-
Queensland	-	-
Western Australia	-	-
South Australia	-	-
Australian Capital Territory	-	-
Northern Territory	_	-
TOTAL	-	-

Where no cross border receipts were reported through the Tasmanian State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Tasmanian State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Tasmanian Health Organisation — North West	78,102	55,396
Tasmanian Health Organisation — South	327,115	246,857
Tasmanian Health Organisation — North	183,775	167,790
TOTAL	588,992	470,043

The Administrator makes payments from the Tasmanian State Pool Account in accordance with the directions of the Tasmanian Minister for Health.

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Tasmanian State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	-	-
Victoria	_	10,223
Queensland	_	-
Western Australia	-	-
South Australia	-	-
Australian Capital Territory	-	-
Northern Territory	-	_
TOTAL	-	10,223

Where no cross border payments are reported through the Tasmanian State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total Tasmanian and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from Tasmania	350,095	236,838
Total activity based funding receipts from the Commonwealth	238,897	233,205
Less activity based funding payments to local hospital networks	(588,992)	(470,043)
PAYMENTS IN EXCESS OF RECEIPTS	-	-

The Administrator makes payments from the Tasmanian State Pool Account in accordance with the directions of the Tasmanian Minister for Health. The Tasmanian Minister for Health directed all activity based funding contributions paid to local hospital networks.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by Tasmania and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by Tasmania (\$'000)	
	2013–14	2012-13
State Pool Account — Activity based funding*	350,095	247,061
State Managed Fund — Block funding	285,588	242,086
TAS TOTAL	635,683	489,147

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

The basis used to determine Tasmanian national health reform funding and payments for 2013–14 (at June 2014) was advised by the Tasmanian Department of Health and Human Services to be as follows:

Tasmania has developed a funding model (Tasmanian ABF Model) which will take a prospective orientation (i.e. it will produce the forward allocation based on the volumes of services to be funded that are determined in accordance with State planning processes). While in 2013–14 THO budget allocations continued to be developed on a historical basis, the ABF Model was used to develop an activity profile and block funded services allocation for each THO for 2013–14, capped by the historical budget allocation.

TASMANIA

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013-14 The funding arrangements and associated pricing focussed on the four ABF work streams of:

- + acute admitted,
- + other admitted (include sub-acute admitted and mental health), and
- + emergency department

Tasmanian pricing applied in 2013–14 with THOs has not used the NEP. In this regard, Tasmania has used the national average cost per work stream based on Round 15 National Health Cost Data Collection (NHCDC) data for 2010–11 indexed to 2013–14. For ICU and non–admitted, the State Average cost has been used. The National Average Cost was considered the most appropriate (where available) as it provides a National benchmark without the complication of NWAUs and the NEP.

Therefore the 2013–14 Tasmanian ABF Model pricing is based on the following:

- Overnight Acute Admitted Patients and Same day Admitted Patients price per weighted separation (National Average Cost indexed),
- Length of Stay Outliers a per diem rate will be paid (based on the National Average Cost indexed),
- + ICU Cases the proposed pricing model will be based on (State Average Cost indexed)
 - + price per ICU hour, and
 - + price per hour of mechanical ventilation.
- + Non Admitted Patients price per service event (State Average Cost indexed).
- + Emergency Department Patients price per UDG (Urgency Disposition Group) (National Average Cost indexed).

The Tasmanian ABF Model also allocates block grants to THOs covering services provided and activities undertaken that are not within the ABF work streams. This includes teaching, training and research, non ABF hospitals and other operational grants costs which are deemed out of scope for Commonwealth funding.

Between February and June 2014, the Commonwealth provided Tasmania with additional public hospital funding of \$5,167,765.41 under the funding measure: National Partnership on public hospital system — additional funding.

This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

Component	Amount paid by Commonwealth into TAS State Pool Account (\$'000)	
	2013–14	2012-13
Activity based funding	238,897	233,205
Block funding	46,460	51,887
Public Health funding	7,090	6,829
TAS TOTAL	292,447	291,921

For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

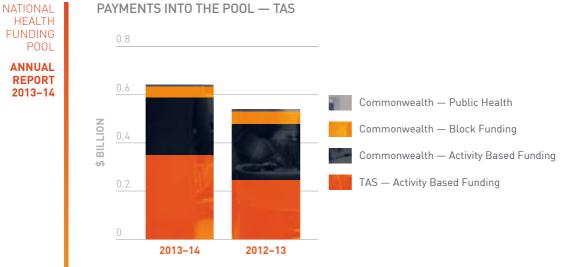
Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

Recipient	Amount paid from TAS State Pool Account (\$'000)	
	2013–14	2012-13
Tasmanian Health Organisation — North	183,775	167,790
Tasmanian Health Organisation — North West	78,102	55,396
Tasmanian Health Organisation — South	327,115	246,857
TOTAL LOCAL HOSPITAL NETWORKS	588,992	470,043
STATE MANAGED FUND	46,460	51,887
OTHER ORGANISATIONS OR FUNDS*	7,092	17,072
TAS TOTAL	642,544	539,002

*Includes a Tasmanian cross-border contribution to other states or territories in 2012–13.

For the Tasmanian basis of payments, refer to part a) of this chapter.

TASMANIA



PAYMENTS OUT OF THE POOL — TAS

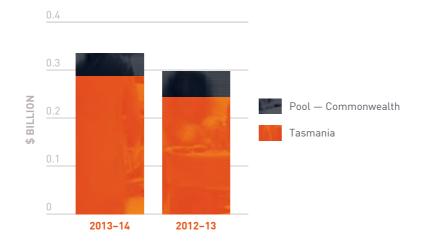


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Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

Recipient	Amount paid from TAS State Managed Fund (\$'000)	
	2013–14	2012-13
Tasmanian Health Organisation — North	97,567	83,748
Tasmanian Health Organisation — North West	55,588	55,999
Tasmanian Health Organisation — South	178,893	140,341
TOTAL LOCAL HOSPITAL NETWORKS	332,048	280,088
OTHER ORGANISATIONS OR FUNDS	-	13,885
TAS TOTAL	332,048	293,972

For the Tasmanian basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE STATE MANAGED FUND — TAS

TASMANIA



PAYMENTS OUT OF THE STATE MANAGED FUND — TAS

Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Heavited Distaint	Number of ABF public hospital services funded (NWAU)		
Local Hospital District	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
Tasmanian Health Organisation — North*	47,904	36,711	37,218
Tasmanian Health Organisation — North West*	16,091	15,212	15,702
Tasmanian Health Organisation — South*	50,083	62,159	59,778
TAS TOTAL*	114,078	114,082	112,698

*The 2012–13 NWAU estimate shown for each local hospital network differs from that published in the 2012–13 Annual Report.

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

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Tasmania provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 Tasmania did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.

TASMANIA



AUSTRALIAN CAPITAL TERRITORY

Financial Statement

AUSTRALIAN CAPITAL TERRITORY

NATIONAL HEALTH FUNDING POOL — AUSTRALIAN CAPITAL TERRITORY STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth National Health Reform Act 2011 and section 26 of the Australian Capital Territory Health (National Health Funding Pool and Administration) Act 2013. NATIONAL HEALTH FUNDING POOL

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INDEPENDENT AUDIT REPORT

Australian Capital Territory State Pool Account

To the Administrator of the National Health Funding Pool

Report on the special purpose financial statement

The special purpose financial statement (financial statement) for the Australian Capital Territory State Pool Account for the year ended 30 June 2014 has been audited. The financial statement comprises a statement of receipts and payments, accompanying notes and Administrator's declaration.

Responsibility for the financial statement

The Administrator of the National Health Funding Pool (the Administrator) is responsible for the preparation and presentation of the financial statement that gives a true and fair view in accordance with the Health (National Health Funding Pool and Administration) Act 2013, National Health Reform Act 2011 and National Health Reform Agreement 2011. This includes responsibility for maintaining adequate accounting records and internal controls that are designed to prevent and detect fraud and error, and the accounting policies used in the preparation of the financial statement.

The auditor's responsibility

My responsibility is to express an independent audit opinion on the financial statement provided by the Administrator. The audit was conducted in accordance with the Health (National Health Funding Pool and Administration) Act 2013, National Health Reform Act 2011 and National Health Reform Agreement 2011. The audit was also conducted in accordance with Australian Auditing Standards to provide reasonable assurance that the financial statement is free of material misstatement.

I formed the audit opinion following the use of audit procedures to obtain evidence about the amounts and disclosures in the financial statement. As these procedures are influenced by the use of professional judgement, selective testing of evidence supporting the amounts and other disclosures in the financial statement, inherent limitations of internal control and the availability of persuasive rather than conclusive evidence, an audit cannot guarantee that all material misstatements have been detected.

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Although the effectiveness of internal controls is considered when determining the nature and extent of audit procedures, the audit was not designed to provide assurance on internal controls.

Independence

Applicable independence requirements of the Australian professional ethical pronouncements were followed in conducting the audit.

Audit opinion

In my opinion, the financial statement prepared by the Administrator for the year ended 30 June 2014:

- gives a true and fair view of the receipts and payments of the Australia Capital Territory State Pool Account of the National Health Funding Pool; and
- (ii) is in accordance with the Health (National Health Funding Pool and Administration) Act 2013, National Health Reform Act 2011 and National Health Reform Agreement 2011.

Basis of preparation

Without modifying the audit opinion, I draw attention to Note 1(b): 'Basis of preparation' of the financial statement, which describes the purpose of the financial statement and basis of accounting.

The financial statement has been prepared using the cash basis of accounting and for the purpose of fulfilling the Administrator's financial reporting responsibilities under the Health (National Health Funding Pool and Administration) Act 2013, National Health Reform Act 2011 and National Health Reform Agreement 2011. As a result, the financial statement may not be suitable for another purpose.

Maxine

Auditor-General 13 August 2014



Australian Capital Territory State Pool Account

I report that, as indicated in note 1 (a) to the special purpose financial statement, I have determined that the attached special purpose financial statement comprising a receipts and payments account with attached notes provides a fair presentation in accordance with the Australian Capital Territory *Health (National Health Funding Pool and Administration) Act 2013*, the Commonwealth *National Health Reform Act 2011* and the National Health Reform Agreement 2011.

In my opinion, the attached special purpose financial statement for the year ended 30 June 2014 is based on properly maintained financial records and gives a true and fair view of the matters required by the Australian Capital Territory *Health (National Health Funding Pool Administrator) Act 2013*, the Commonwealth *National Health Reform Act 2011* and the National Health Reform Agreement 2011.

Bob Senat

RJ Sendt Administrator National Health Funding Pool

12 August 2014

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14

AUSTRALIAN CAPITAL TERRITORY

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Australian Capital Territory State Pool Account Statement of receipts and payments for the year ended 30 June 2014

Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE	-	-
RECEIPTS INTO THE STATE POOL ACCOUNT		
From Commonwealth		
Activity based funding 2, 6	247,801	71,570
Block funding	22,064	8,560
Public health funding	5,316	1,565
From Australian Capital Territory		
Activity based funding 2, 6	492,293	135,187
Cross border contribution	14,303	-
From other States or Territories		
Cross border receipts 3	78,725	-
From Reserve Bank of Australia		
Interest receipts	-	-
TOTAL RECEIPTS	860,502	216,882
PAYMENTS OUT OF THE STATE POOL ACCOUNT		
To Local Hospital Networks		
Activity based funding 4, 6	818,819	206,757
To Australian Capital Territory State Managed Fund		
Block funding	22,064	8,560
Cross border transfer	-	-
To Australian Capital Territory Health Directorate		
Public health funding	5,316	1,565
Interest payments	-	-
Cross border transfer	-	-
To other States or Territories		
Cross border payments 5	14,303	-
TOTAL PAYMENTS	860,502	216,882
NET RECEIPTS/(PAYMENTS) FOR THE YEAR	-	-
CLOSING CASH BALANCE	-	-

The results for 2012–13 represent the operations for the period from 1 March 2013 to 30 June 2013. The Australian Capital Territory State Pool Account commenced operations on 1 March 2013.

The above statement of receipts and payments should be read in conjunction with the accompanying notes.

FUNDING POOL ANNUAL REPORT 2013–14

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1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The significant accounting policies adopted in the preparation of the financial statement are set out below. The financial statement is for the Australian Capital Territory State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, Australian Institute of Health and Welfare, Independent Hospital Pricing Authority, National Hospital Performance Authority, National Health Funding Body and Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Australian Capital Territory State Pool Account was established in accordance with the Australian Capital Territory *Health (National Health Funding Pool and Administration) Act 2013* and the special purpose financial statement has been prepared in accordance with Section 26 of that Act and Section 242 of the Commonwealth *National Health Reform Act 2011*.

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 12 August 2014.

(C) COMPARATIVE FIGURES

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Prior year comparative information has been disclosed. The results for 2012–13 are for the period from 1 March 2013 to 30 June 2013 and results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. iacute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for the Australian Capital Territory, multiplied by the National Weighted Activity Units (NWAU) estimate provided by the Australian Capital Territory. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment; and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period from 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

AUSTRALIAN CAPITAL TERRITORY

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

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HEALTH FUNDING

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POOL

In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Australian Capital Territory 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

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AUSTRALIAN CAPITAL TERRITORY

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Australian Capital Territory State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	247,801	71,570
Australian Capital Territory activity based funding	492,293	135,187
TOTAL	740,094	206,757

3 CROSS BORDER RECEIPTS

Total cross border receipts into the Australian Capital Territory State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	78,725	_
Victoria	-	_
Queensland	-	_
Western Australia	-	-

States and Territories	2014 \$ '000	2013 \$ '000
South Australia	-	_
Tasmania	-	-
Northern Territory	_	-
TOTAL	78,725	-

Where no cross border receipts are reported through the Australian Capital Territory State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Australian Capital Territory State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
ACT Local Hospital Network Directorate	818,819	206,757
TOTAL	818,819	206,757

The Administrator makes payments from the Australian Capital Territory State Pool Account in accordance with the directions of the Australian Capital Territory Minister for Health.

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Australian Capital Territory State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	14,303	-
Victoria	_	-
Queensland	-	-
Western Australia	-	-

Continued.

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AUSTRALIAN CAPITAL TERRITORY

States and Territories	2014 \$ '000	2013 \$ '000
South Australia	_	-
Tasmania	_	-
Northern Territory	-	-
TOTAL	14,303	-

Where no cross border payments are reported through the Australian Capital Territory State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total Australian Capital Territory and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from the Australian Capital Territory	492,293	135,187
Total activity based funding receipts from the Commonwealth	247,801	71,570
Cross border receipts	78,725	-
Less: Activity based funding payments to the ACT Local Hospital Network Directorate	(818,819)	(206,757)
PAYMENTS IN EXCESS OF RECEIPTS	-	-

Total activity based payments for 2013–14 to the ACT Local Hospital Network Directorate include cross border receipts of \$78,725 from New South Wales.

The Administrator makes payments from the Australian Capital Territory State Pool Account in accordance with the directions of the Australian Capital Territory Minister for Health. The Australian Capital Territory Minister for Health directed all activity based funding contributions paid to the ACT Local Hospital Network Directorate.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by the Australian Capital Territory and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

Section 241(2)(a) — the amounts paid into each State Pool Account and
State Managed Fund by the relevant State and the basis on which the payments
were made

Component	Amount paid by Australian Capital Territory (\$'000)		
	2013-14	2012–13	
State Pool Account — Activity based funding*	506,596	350,054	
State Managed Fund — Block funding	45,842	43,289	
ACT TOTAL	552,438	393,342	

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

AUSTRALIAN CAPITAL TERRITORY

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

The basis used to determine Australian Capital Territory national health reform funding and payments for 2013–14 (at June 2014) was advised by the Australian Capital Territory Health Directorate to be as follows:

The annual funding allocation for the ACT in 2013–14 is based on budget neutral modelling. This modelling is based on the historical cost of providing services plus cost indexation. The activity to be funded through activity–based funding is projected on historical activity levels with an allowance for growth for public hospital services in the ACT and derived through the application of the Independent Hospital Pricing Authority determinations.

The payments made by the ACT Government and the Commonwealth Government in June 2014 through the ACT Local Hospital Network Directorate were net of third party revenues, and were paid on the basis of estimated ACT local hospital network activity for the month of June 2014.

Between February and June 2014, the Commonwealth provided Australian Capital Territory with additional public hospital funding of \$4,372,547.61 under the funding measure: National Partnership on public hospital system — additional funding. This funding was provided to offset the downward adjustments to 2013–14 NHR funding applied at the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) and the 2014–15 Budget, due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that it is passed on in full through the National Health Funding Pool and / or State Managed Fund to LHNs for activity based and block funding, and state and territory health departments for public health funding.

Component	Amount paid by Commonwealth into ACT State Pool Account (\$'000)	
	2013-14 2012-13	
Activity based funding	247,801	226,866
Block funding	22,064	16,705
Public Health funding	5,316	4,706
ACT TOTAL	275,181	248,277

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

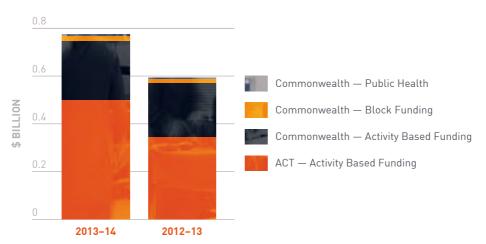
For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made AUSTRALIAN CAPITAL TERRITORY

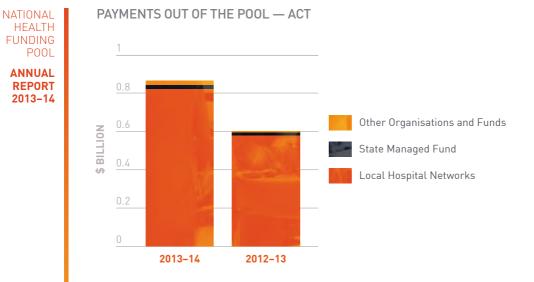
Recipient	Amount paid from ACT State Pool Account (\$'000)		
	2013-14	2012–13	
ACT Local Hospital Network Directorate	818,819	576,920	
TOTAL LOCAL HOSPITAL NETWORK	818,819	576,920	
STATE MANAGED FUND	22,064	16,705	
OTHER ORGANISATIONS OR FUNDS*	19,619	4,706	
ACT TOTAL	860,502	598,331	

*Includes an Australian Capital Territory cross-border contribution to another state or territory in 2013–14.

For the Australian Capital Territory basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL - ACT

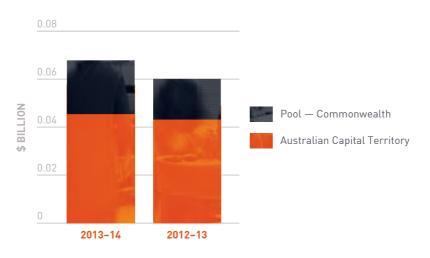


Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

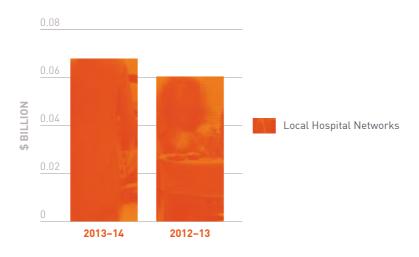
Recipient	Amount paid from ACT State Managed Fund (\$'000)		
	2013–14	2012-13	
ACT Local Hospital Network Directorate	67,906	59,993	
TOTAL LOCAL HOSPITAL NETWORK	67,906	59,993	
OTHER ORGANISATIONS OR FUNDS	-	-	
ACT TOTAL	67,906	59,993	

For the Australian Capital Territory basis of payments, refer to part a) of this chapter.

PAYMENTS INTO THE STATE MANAGED FUND — ACT



PAYMENTS OUT OF THE STATE MANAGED FUND — ACT



AUSTRALIAN CAPITAL TERRITORY NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013-14 Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Hospital District	Number of ABF public hospital services funded (NWAU)		
	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
ACT Local Hospital Network Directorate	125,570	115,991	115,604
ACT TOTAL	125,570	115,991	115,604

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

The Australian Capital Territory provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 the Australian Capital Territory did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.

NORTHERN TERRITORY

Financial Statement

NORTHERN TERRITORY

NATIONAL HEALTH FUNDING POOL — NORTHERN TERRITORY STATE POOL ACCOUNT SPECIAL PURPOSE FINANCIAL STATEMENT FOR THE YEAR ENDED 30 JUNE 2014

Issued by the Administrator of the National Health Funding Pool under section 242 of the Commonwealth *National Health Reform Act 2011* **and section 20 of the Northern Territory** *National Health Funding Pool and Administration (National Uniform Legislation) Act 2012.*



NORTHERN TERRITORY



Auditor-General

Independent Auditor's Report to the Minister for Health

Northern Territory State Pool Account of the National Health Funding Pool

As required by section 20 of the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012 and section 243 of the National Health Reform Act 2011, I have audited the accompanying special purpose financial statement (the financial statement) of the Northern Territory State Pool Account of the National Health Funding Pool for the year ended 30 June 2014. The financial statement comprises:

- a Statement of Receipts and Payments for the year ended 30 June 2014;
- notes, comprising a summary of significant accounting policies and other explanatory information; and
- the Administrator's declaration.

The Responsibility of the Administrator of the National Health Funding Pool for the Financial Statement

The Administrator of the National Health Funding Pool (the Administrator) is responsible for the preparation of the financial statement that gives a true and fair view in accordance with the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012 and the National Health Reform Act 2011 and the National Health Reform Agreement 2011, and for such internal control as the Administrator determines is necessary to enable the preparation of the financial statement that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on the financial statement based on the audit. The audit was conducted in accordance with Australian Auditing Standards and the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012, National Health Reform Act 2011 and the National Health Reform Agreement 2011. The auditing standards require that the auditor comply with relevant ethical requirements and that the auditor plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misutatement of the financial statement, whether due to finaud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial statement that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made by the Administrator, as well as the overall presentation of the financial statement.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the financial statement gives a true and fair view of the receipts and payments of the Northern Territory State Pool Account of the National Health Funding Pool for the year ended 30 June 2014 in accordance with the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012, National Health Reform Act 2011 and the National Health Reform Agreement 2011.

Basis of Accounting

Without modifying my opinion, I draw attention to Note 1 to the financial statement, which describes the purpose of the financial statement and basis of accounting. The financial statement has been prepared using the cash basis of accounting and for the purpose of fulfilling the Administrator's financial reporting obligations under the National Health Funding Pool and Administration (National Uniform Legislation) Act 2012, National Health Reform Act 2011 and the National Health Reform Agreement 2011. As a result, the financial statement may not be suitable for another purpose.

Gener / Catto

Susan J Cooper Acting Auditor-General for the Northern Territory Darwin, Northern Territory 12 September 2014

Level 12 Northern Territory House 22 Mitchell Street Darwin 0800 Tel: 08 8999 7155



Northern Territory State Pool Account
Special purpose financial statement
for the year ended 30 June 2014

CONTENTS

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Northern Territory State Pool Account Statement of receipts and payments for the year ended 30 June 2014

	Notes	2014 \$ '000	2013 \$ '000
OPENING CASH BALANCE		15	-
RECEIPTS INTO THE STATE POOL ACCOUNT			
From Commonwealth			
Activity based funding	2,6	116,628	71,116
Block funding		14,616	33,521
Public health funding		3,346	2,638
From Northern Territory			
Activity based funding	2,6	271,830	210,684
Cross border contribution		-	-
From other States or Territories			
Cross border receipts	3	-	-
From Reserve Bank of Australia			
Interest receipts		16	15
TOTAL RECEIPTS		406,436	317,974
PAYMENTS OUT OF THE STATE POOL ACCOUNT	NT		
To Local Hospital Networks			
Activity based funding	4,6	388,458	281,800
To Northern Territory State Managed Fund			
Block funding		14,616	33,521
Cross border transfer		-	-
To Northern Territory Health Department			
Public health funding		3,346	2,638
Interest payments		-	-
Cross border transfer		-	-
To other States or Territories			
Cross border payments	5	-	-
To Reserve Bank of Australia			
Penalty Interest		14	_
TOTAL PAYMENTS		406,434	317,959
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		2	15
CLOSING CASH BALANCE		17	15

The above statement of receipts and payments should be read in conjunction with the accompanying notes. Additional notes on the right hand page.

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FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

HEALTH

The results for 2012–13 represent the operations for the period from 1 October 2012 to 30 June 2013. The Northern Territory State Pool Account commenced operations on 1 October 2012.

1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) REPORTING ENTITY

The Administrator of the National Health Funding Pool (Administrator) is an independent statutory office holder, distinct from the Commonwealth, state and territory governments, established under legislation of the Commonwealth and state and territory governments.

The principal accounting policies adopted in the preparation of the financial statement re set out below. The financial statement is for the Northern Territory State Pool Account, which was established at the Reserve Bank of Australia (RBA) in 2012–13 and is a special purpose financial statement.

In its 2014–15 Budget, the Commonwealth announced that it will consult with States and Territories with the intention of creating a new health productivity and performance commission. Subject to this consultation, the new commission would be formed by merging the functions of the Australian Commission on Safety and Quality in Health Care, the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, the National Hospital Performance Authority, the National Health Funding Body and the Administrator of the National Health Funding Pool. Information available at the time of issue of this special purpose financial statement indicates that there will be no effect on state pool accounts for the following 12 months.

(B) BASIS OF PREPARATION

The Northern Territory State Pool Account was established in accordance with the Northern Territory *Health Funding Pool and Administration (National Uniform Legislation) Act 2012* and the special purpose financial statement has been prepared in accordance with Section 19 of that Act and Section 242 of the Commonwealth National Health *Reform Act 2011.*

The special purpose financial statement has been prepared on a cash accounting basis. On this basis, receipts are recognised when received rather than earned, and payments are recognised when paid rather than incurred.

NORTHERN TERRITORY

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

Northern Territory State Pool Account Notes to the special purpose financial statement for the year ended 30 June 2014

The financial statement is presented in Australian dollars and values are rounded to the nearest thousand dollars.

The financial statement was authorised for issue by the Administrator on 10 September 2014.

(C) COMPARATIVE FIGURES

Prior year comparative information has been disclosed. The results for 2012–13 are for the period from 1 October 2012 to 30 June 2013 and the results for 2013–14 are for the year ended 30 June 2014.

(D) NATIONAL HEALTH FUNDING POOL

The National Health Funding Pool (Funding Pool) consists of eight state and territory bank accounts (State Pool Accounts).

(E) ACTIVITY BASED FUNDING (ABF)

ABF is a system for funding public hospital services provided to individual patients using national classifications, cost weights and national efficient prices developed by the Independent Hospital Pricing Authority (IHPA). ABF is paid by both states and territories and the Commonwealth into the Funding Pool.

In 2012–13, ABF consisted of three service categories:

- i. acute admitted services;
- ii. emergency department services; and
- iii. non-admitted services.

In 2013–14, ABF consisted of five service categories:

- i. acute admitted services;
- ii. emergency department services;
- iii. non-admitted services;
- iv. mental health services (not already captured by(i)); and
- v. sub-acute services.

State or territory ABF contributions into the Funding Pool are calculated by the state or territory as the system manager of the public hospital system. The service agreement between the state or territory (as the system manager) and each Local Hospital Network (LHN) specifies the service delivery and funding parameters.

Commonwealth ABF contributions into the Funding Pool are calculated by the Administrator by applying the relevant National Efficient Price (NEP) determination issued by the IHPA, multiplied by the Commonwealth contribution percentage rate for Northern Territory, multiplied by the National Weighted Activity Units (NWAU) estimate provided by Northern Territory. In respect of a particular funding year, these contributions are first determined by the Administrator as preliminary funding entitlements for a year. Final funding entitlements for the year are calculated after actual data on hospital services become available. This calculation will generally result in reconciliation adjustments being made to the Commonwealth ABF contribution to each LHN.

In accordance with the National Health Reform Agreement (the Agreement), in 2013–14 there were two rounds of reconciliation adjustments relating to actual activity in 2012–13:

- i. a six-monthly adjustment, and
- ii. an annual adjustment.

The six-monthly adjustment was based on the reconciliation between the actual volume of services provided by each LHN in the period 1 July 2012 to 31 December 2012 against the estimated volume of services.

The annual adjustment was based on the reconciliation between the actual volume of services provided by each LHN in 2012–13 against the estimated volume of services. The annual adjustment took into account the six month adjustment and the quantum of cross–border services for the year.

(F) BLOCK FUNDING

Block funding is provided by the Commonwealth into the Funding Pool for states and territories to support teaching and research undertaken in public hospitals, and for some public hospital services where it is more appropriate to be block funded, particularly for smaller rural and regional hospitals.

NORTHERN TERRITORY

In 2012–13, block funding consisted of five service categories. In 2013–14, block funding consisted of four service categories.

In 2012–13 the Commonwealth calculated block funding on proportions agreed between the Commonwealth Health Minister and each state or territory Health Minister, and supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. sub-acute services;
- iv. mental health services; and
- v. other.

NATIONAL

HEALTH FUNDING

ANNUAL REPORT

2013-14

POOL

In 2013–14 the Commonwealth block funding supported the following:

- i. small rural hospitals;
- ii. teaching, training and research;
- iii. non-admitted mental health; and
- iv. other non-admitted services.

The amount of Commonwealth 2013–14 block funding for each of these block funded service categories was calculated by the Administrator by applying the Northern Territory 2013–14 Commonwealth contribution percentage of NEP to the total expenditure (Commonwealth and state or territory) of each block funded service category as advised in the IHPA's 2013–14 National Efficient Cost (NEC) determination.

(G) PUBLIC HEALTH FUNDING

The Commonwealth contributes amounts into the Funding Pool for Public Health Funding. This is calculated by the Commonwealth Treasury and includes amounts for national public health, youth health services and essential vaccines.

(H) CROSS BORDER

When a resident of one state receives hospital treatment in another state, the 'resident state' compensates the treating or 'provider state' for the cost of care through a cross border payment.

This interstate compensation consists of two parts — the Commonwealth share of the cost of treating the patient (paid through the Funding Pool), and the resident state's share (paid either through the Funding Pool or directly to the provider state).

(I) INTEREST

Interest earned and deposited by the RBA into the State Pool Account is recognised as interest received at the time the deposit is made.

Interest paid from the State Pool Account to the state or territory is recognised as an interest payment at the time the payment is made from the State Pool Account.

(J) TAXATION

State Pool Accounts are not subject to income tax. The majority of government funding, from both the Commonwealth and state or territory, to LHNs is not subject to the Goods and Services Tax (GST). However, in some cases hospital funding to non–government entities does attract GST, for example, denominational hospitals, privately and commercially owned health facilities, or other non–government third party providers of health services or related supplies.

2 ACTIVITY BASED FUNDING RECEIPTS

Total receipts into the Northern Territory State Pool Account in respect of activity based funding were as follows:

	2014 \$ '000	2013 \$ '000
Commonwealth activity based funding	116,628	71,116
Northern Territory activity based funding	271,830	210,684
TOTAL	388,458	281,800

NORTHERN TERRITORY

POOL ANNUAL REPORT 2013–14

NATIONAL HEALTH

FUNDING

3 CROSS BORDER RECEIPTS

Total cross border receipts into the Northern Territory State Pool Account from other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border receipts		
New South Wales	-	-
Victoria	_	-
Queensland	_	-
Western Australia	-	-
South Australia	-	-
Australian Capital Territory	-	-
Tasmania	_	-
TOTAL	-	-

Where no cross border receipts are reported through the Northern Territory State Pool Account, other bilateral arrangements between the states and territories may exist.

4 ACTIVITY BASED FUNDING PAYMENTS

Total payments made out of the Northern Territory State Pool Account in respect of each local hospital network were as follows:

Local Hospital Networks	2014 \$ '000	2013 \$ '000
Central Australian Hospital Network	136,701	104,111
Top End Hospital Network	251,757	177,689
TOTAL	388,458	281,800

The Administrator makes payments from the Northern Territory State Pool Account in accordance with the directions of the Northern Territory Minister for Health.

NORTHERN TERRITORY

5 CROSS BORDER PAYMENTS

Total cross border payments out of the Northern Territory State Pool Account to other states and territories were as follows:

States and Territories	2014 \$ '000	2013 \$ '000
Cross border payments		
New South Wales	-	_
Victoria	-	_
Queensland	-	-
Western Australia	-	-
South Australia	-	-
Australian Capital Territory	-	-
Tasmania	-	-
TOTAL	-	-

Where no cross border payments are reported through the Northern Territory State Pool Account, there may be other bilateral arrangements between the states and territories.

6 ACTIVITY BASED FUNDING RECEIPTS AND PAYMENTS

Total Northern Territory and Commonwealth activity based funding contributions and total local hospital network activity based funding payments were as follows:

	2014 \$ '000	2013 \$ '000
Total activity based funding receipts from Northern Territory	271,830	210,684
Total activity based funding receipts from the Commonwealth	116,628	71,116
Less activity based funding payments to local hospital networks	(388,458)	(281,800)
PAYMENTS IN EXCESS OF RECEIPTS	-	-

The Administrator makes payments from the Northern Territory State Pool Account in accordance with the directions of the Northern Territory Minister for Health. The Northern Territory Minister for Health directed all activity based funding contributions paid to local hospital networks.

End of Audited Special Purpose Financial Statement.

National Health Reform Funding and Payments



Section 241(2) of the *National Health Reform Act 2011* (the Act) outlines certain disclosures to be included in this Annual Report.

The information reported is specific to the transactions of the 'relevant state or territory'. For the purposes of this legislative reporting, the 'relevant state or territory' is the state or territory that holds the bank accounts opened under the laws of that state or territory for National Health Reform Agreement purposes.

The values are rounded to the nearest thousand dollars unless otherwise specified. As such, figures may not add to the totals shown due to rounding.

The information disclosed in the following tables is provided by Northern Territory and forms part of the Administrator's monthly reporting requirements, located at <u>www.publichospitalfunding.gov.au/reports</u>. For further information on the types of national health reform funding, refer to the 'Overview' chapter of this Annual Report.

The amounts listed for 2012–13 reflect both amounts transacted under national health reform legislation and 'notional' amounts. Notional amounts were funds paid into and out of departmental bank accounts by some states or territories that would have been transacted through the National Health Funding Pool and/or state managed fund had the national health reform funding arrangements been in place from 1 July 2012. The 2012–13 edition of this Annual Report separately disclosed notional amounts and those transacted under national health reform legislation in 2012–13.

Section 241(2)(a) — the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made

Component	Amount paid by Northern Territory (\$'000)	
	2013–14	2012-13
State Pool Account — Activity based funding*	271,830	260,914
State Managed Fund — Block funding	389,563	256,727
NT TOTAL	661,393	517,640

*In accordance with the provisions of the Act, this table does not include Interest deposited in the Pool account and cross-border receipts from other states/territories, as these were made from contributors other than the relevant state or territory. Details of these flows are located in the Pool Account Special Purpose Financial Statement of each state/territory.

NORTHERN TERRITORY

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

NATIONAL

The basis used to determine Northern Territory national health reform funding and payments for 2013–14 (at June 2014) was advised by the Northern Territory Department of Health to be as follows:

The annual funding allocation for the Top End and Central Australian Health and Hospital Services of Northern Territory has been determined on a historical basis for both the activity based funding (ABF) and block service streams, supplemented by a level of growth based on Northern Territory Government Wage and Consumer Price Index parameters. Projected activity increases are not budgeted for and both local hospital networks are required to meet demand increases from within existing resources as a cost containment strategy.

Variations to monthly payments to the Northern Territory LHNs are made based on cash requirements. Cash requirements are impacted by the Northern Territory Salary payment cycle and other monthly variations, such as contractual obligation payment cycles which the LHNs are engaged in. The LHNs in the Northern Territory have been in a transitional phase and payments during this period have varied based on costs held centrally being transitionally transferred over.

In May 2014, the Commonwealth provided Northern Territory with additional public hospital funding of \$183,371.57 under the 2013–14 Mid–Year Economic and Fiscal Outlook (MYEFO) funding measure: Public Hospital System — additional funding. This funding was provided to offset the downward adjustment to 2013–14 NHR funding applied at the MYEFO due to the application of updated NHR funding indexation parameters. A requirement of the provision of this funding was that the funding be provided to LHNs through the National Health Funding Pool and/or State Managed Fund.

NT State		by Commonwealth into ate Pool Account (\$'000)	
	2013-14 2012-13		
Activity based funding	116,628	95,330	
Block funding	14,616	44,922	
Public Health funding	3,346	3,527	
NT TOTAL	134,590	143,780	

Section 241(2)(b) — the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made

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For the Commonwealth basis of payments, refer to part b) of the 'National health reform funding and payments — National' chapter.

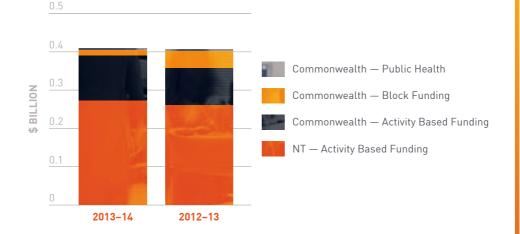
Section 241(2)(c) — the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made

NORTHERN TERRITORY

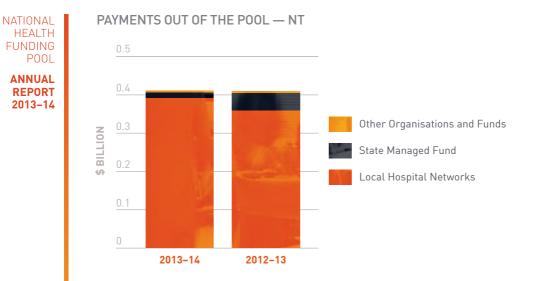
Recipient	Amount paid from NT State Pool Account (\$'000)	
	2013–14	2012-13
Central Australian Hospital Network	136,701	132,745
Top End Hospital Network	251,757	223,499
TOTAL LOCAL HOSPITAL NETWORKS	388,458	356,243
STATE MANAGED FUND	14,616	44,922
OTHER ORGANISATIONS OR FUNDS*	3,360	3,527
NT TOTAL	406,434	404,693

*Of the 2013–14 total amount of \$3,360,000 against 'Other organisations or funds', \$14,000 was penalty interest to the Reserve Bank of Australia.

For the Northern Territory basis of payments, refer to part a) of this chapter.



PAYMENTS INTO THE POOL - NT

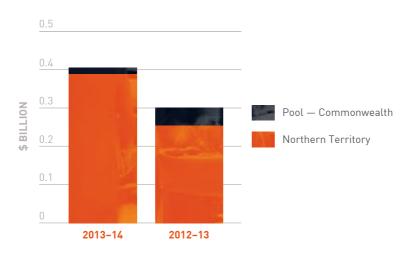


Section 241(2)(d) — the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made

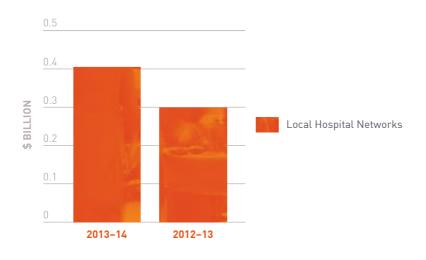
Recipient	Amount paid from NT State Managed Fund (\$'000)	
	2013-14	2012-13
Central Australian Hospital Network	96,006	57,795
Top End Hospital Network	308,173	243,854
TOTAL LOCAL HOSPITAL NETWORKS	404,179	301,649
OTHER ORGANISATIONS OR FUNDS	-	-
NT TOTAL	404,179	301,649

For the Northern Territory basis of payments, refer to part a) of this chapter.

PAYMENTS INTO THE STATE MANAGED FUND - NT



PAYMENTS OUT OF THE STATE MANAGED FUND - NT



NORTHERN TERRITORY

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Section 241(2)(e) — the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding

Local Hospital District	Number of ABF public hospital services funded (NWAU)		
Local Hospital District	2013–14 Estimate	2012–13 Actual	2012–13 Estimate
Central Australian Hospital Network	41,920	34,647	35,838
Top End Hospital Network	74,096	68,170	57,357
NT TOTAL	116,016	102,816	93,194

The National Weighted Activity Unit (NWAU) is the unit of measurement for the activity based funding system. It is a measure of health service activity expressed as a common unit, against which the national efficient price is paid. It provides a way of comparing and valuing each activity based funded public hospital service, by weighting it for its clinical complexity.

Northern Territory provides NWAU estimates at the start of each financial year for Commonwealth payment purposes. These estimates may be revised during the course of the year, and form the basis of Commonwealth funding until actual service volumes become available. Funding adjustments as a result of the reconciliation to actual public hospital services (NWAU) for 2012–13 form part of the 2013–14 Commonwealth payments.

Section 241(2)(f) — the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund

Unlike the unit of measurement for activity based services (i.e. NWAU), there is currently no nationally standardised measurement system for 'other public hospital services'. In the absence of such a national system, the National Health Reform Agreement allows for information to be based on the unit measurement classification and funding arrangements used in individual state and territories.

However, in 2012–13 and 2013–14 Northern Territory did not report any 'other public hospital services and functions funded' from their Pool Account or state managed fund.

ACRONYMS, ABBREVIATIONS AND GLOSSARY



Table 3: Acronyms, abbreviations and glossary

TERM	MEANING
(the) Act	The National Health Reform Act 2011.
activity based funding	A system for funding public hospital services based on the actual number of services provided to patients and the efficient cost of delivering those services. Activity based funding uses national classifications, cost weights and nationally efficient prices to determine the amount of funding for each activity or service.
(the) Administrator	The Administrator of the National Health Funding Pool (the Administrator) is an independent statutory office holder, distinct from Commonwealth and state and territory government departments, established under legislation of the Commonwealth and state and territory governments.
	The role of the Administrator, with support from the National Health Funding Body, is to administer the payment of public hospital funding according to the National Health Reform Agreement, and to oversee payments into and out of the State pool account for each state and territory, collectively known as the National Health Funding Pool (the Pool).
(the) Agreement	See National Health Reform Agreement.
block funding	A system of funding public hospital functions and services as a fixed amount based on population and previous funding.
	Under National Health Reform, block funding will be provided to states and territories to support teaching and research undertaken in public hospitals and for some public hospital services where it is more appropriate, particularly smaller rural and regional hospitals.
Independent Hospital Pricing Authority (IHPA)	An independent statutory body established under Commonwealth legislation to calculate and deliver an annual National Efficient Price (NEP) used in the calculation of national activity based funding for Australian public hospitals.
Local hospital networks (LHNs)	An organisation that provides public hospital services in accordance with the National Health Reform Agreement. A local hospital can contain one or more hospitals and is usually defined as a business group, geographical area or community. Every Australian public hospital is part of a local hospital network. Local hospital networks receive activity based and block funding under the Agreement.
	Some states and territories use their own terminology to describe local hospital networks, such as 'local health districts'.
Medicare Benefits Schedule (MBS)	A listing of the Medicare services subsidised by the Australian Government.
National Health Funding Body (NHFB)	An independent statutory body established under Commonwealth legislation to assist the Administrator in carrying out his or her functions under Commonwealth, state and territory legislation.

Continued.

NATIONAL

HEALTH FUNDING POOL ANNUAL REPORT 2013–14

TERM	MEANING
National Health Funding Pool (the Pool)	A collective name for the state pool accounts of all states and territories, also known as the 'the Pool'. The Pool was established under Commonwealth and state and territory legislation for the purpose of receiving all Commonwealth and activity based state and territory public hospital funding, and for making payments under the Agreement.
National Health Performance Authority (NHPA)	An independent statutory authority established under Commonwealth legislation to report on the performance of hospitals and primary health care organisations across Australia.
National health reform	National health reform included reforms to the way in which public hospitals are funded nationally in Australia, as set out in the National Health Reform Agreement entered into by all states, territories and the Commonwealth in August 2011.
National Health Reform Agreement (the Agreement)	The National Health Reform Agreement outlines the funding, governance, and performance arrangements for the delivery of public hospital services in Australia. The Agreement was entered into by all states, territories and the Commonwealth in August 2011.
Pharmaceutical Benefits Scheme (PBS)	Details of the medicines subsidised by the Australian Government.
(the) Pool	See 'National Health Funding Pool'.
state managed fund	A separate bank account or fund established by a state or territory for the purposes of health funding under the Agreement which must be undertaken in the state or territory through a state managed fund.
state pool account	A Reserve Bank account established by a state or territory for the purpose of receiving all Commonwealth and activity based state and territory public hospital funding, and for making payments under the Agreement. The state pool accounts of all states and territories are collectively known as the National Health Funding Pool or the Pool.

ACRONYMS, ABBREVIATIONS AND GLOSSARY



DISCLOSURE INDEX

NATIONAL HEALTH FUNDING POOL ANNUAL REPORT 2013–14 Sections 241(2) and (3) of the *National Health Reform Act 2011* set out the list of required information that must be included in this Annual Report.

Table 4: Disclosure Index of required information

SECTION	DESCRIPTION	LOCATION — NATIONAL LEVEL	LOCATION — STATE/TERRITORY LEVEL
	E ANNUAL REPORT MUST INCLUDE THE FINANCIAL YEAR	FOLLOWING INFORM	ATION FOR THE
(a)	the amounts paid into each State Pool Account and State Managed Fund by the relevant State and the basis on which the payments were made	Page 30	
(b)	the amounts paid into each State Pool Account by the Commonwealth and the basis on which the payments were made	Pages 31-32	NSW p.54–66
(c)	the amounts paid from each State Pool Account to local hospital networks, a State Managed Fund or other organisations or funds and the basis on which the payments were made	Page 33	VIC p.84–96 QLD p.114–121 WA p.138–144
(d)	the amounts paid from each State Managed Fund to local hospital networks or other organisations or funds and the basis on which the payments were made	Page 34	SA p.160–166 TAS p.182–189 ACT p.206–212 NT p.228–234
(e)	the number of public hospital services funded for each local hospital network in accordance with the system of activity based funding	Page 35	
(f)	the number of other public hospital services and functions funded from each State Pool Account or State Managed Fund	Page 36	

Continued.

SECTION	DESCRIPTION	LOCATION — NATIONAL LEVEL	LOCATION — STATE/TERRITORY LEVEL
241 (3) THE ANNUAL REPORT IS TO BE ACCOMPANIED BY			
(a)	an audited financial statement for each State Pool Account	N/A	NSW p.38–53
			VIC p.68–83
			QLD p.98–112
			WA p.124–137
			SA p.146–159
			TAS p.168–181
			ACT p.192–205
			NT p.214–227
(b)	a financial statement that combines the audited financial statements for each State Pool Account	Pages 16–27	N/A

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