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Veterans' use of health services

Jonas Lloyd Phil Anderson

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Abbreviations

ACCMIS Aged and Community Care Management Information System

AIHW Australian Institute of Health and Welfare

CACP Community Aged Care Packages

CI confidence interval

DoHA Department of Health and Ageing (Australian Government)
DVA Department of Veterans' Affairs (Australian Government)

EACH Extended Aged Care at Home

EDA Extreme Disablement Adjustment

GP general practitioner LMO local medical officer

OR odds ratio

p probability of result occurring by chance (p = 0.05 equates to a 5% probability)

POW Prisoner of war

RAC residential aged care

RCS Resident Classification Scale

RPBS Repatriation Pharmaceutical Benefits Scheme

Symbols

- .. not applicable
- nil or rounded to zero, including null cells
- * statistically different at the 5% significance level
- ** statistically different at the 1% significance level

Summary

This report examines the patterns of use of DVA-funded health services by the Australian Government Department of Veterans' Affairs (DVA) gold cardholders. Comparisons in health service use are made between gold cardholders living in permanent residential aged care (RAC) and gold cardholders of the same age and sex living in the community for the years 2001–02, 2002–03 and 2003–04. This analysis was made possible through the linking of DVA and RAC data sets. The analysis is generally restricted to gold cardholders aged 70 years or older. The health services examined are:

- general practitioner (GP), including local medical officer (LMO), consultations
- medical specialist consultations
- pharmaceutical use under the Repatriation Pharmaceutical Benefits Scheme (RPBS)
- hospital use.

Key findings

- The largest difference in health service use between gold cardholders living in the community and those living in residential aged care occurs in the usage of medical specialists. More than three-quarters of gold cardholders living in the community consulted a specialist in 2003–04 compared with less than half of gold cardholders living in residential aged care.
- Older gold cardholders living in the community used hospitals more often and spent more time in them during the year than their younger counterparts. Hospital use and time spent in hospitals did not change markedly with age for gold cardholders living in residential aged care.
- Gold cardholders who died during the year were far more likely to experience high health service use or a hospital visit than other gold cardholders. This effect was larger for gold cardholders living in the community than for those living in residential aged care in relation to specialists and hospitals, but not for general practitioners.
- A move into residential aged care during the year was associated with high health service usage among gold cardholders.
- Death at the end of a hospital episode was associated with longer hospital episodes, particularly for gold cardholders living in the community.
- Hospital episodes for gold cardholders who moved into residential aged care during the year were nearly three times longer than hospital episodes for gold cardholders who did not enter residential aged care.

Overview of the gold cardholder population

The number of gold cardholders of all ages during 2003–04 was 275,000. Over this period, 27,100 gold cardholders spent at least a part of the year living in permanent residential aged care. With the ageing of this population, the proportion of gold cardholders living in permanent residential aged care has increased from 8% in 2001–02 to 10% in 2003–04.

Table S.1: DVA gold cardholders, 2001-02 to 2003-04

	2001–02	2002-03	2003–04
All DVA gold cardholders		Number	
Under 70 years	41,161	42,273	38,954
70–84	206,249	202,667	188,720
85+	32,385	39,897	47,464
Total	279,795	284,837	275,138
DVA gold cardholders living in permanent RAC ^(a)			
Under 70 years	199	188	173
70–84	13,190	13,926	14,026
85+	9,547	11,284	12,891
Total	22,936	25,398	27,090

⁽a) Gold cardholders who spent at least 1 day of the year living in permanent residential aged care.

Notes

Overall summary of health service use

- Gold cardholders living in residential aged care (RAC) received, on average, more
 general practitioner (GP) and DVA local medical officer (LMO) consultations, and fewer
 specialist consultations, had lower specialist use rates, filled more RPBS prescriptions
 and experienced lower hospital use than gold cardholders living in the community.
- During 2003–04, gold cardholders living in RAC received an average of 14.4 consultations by GPs and LMOs compared with 13.3 consultations for gold cardholders living in the community.
- Less than one-half (46%) of gold cardholders living in RAC consulted a medical specialist during 2003–04, compared with more than three-quarters (78%) of those living in the community. Among gold cardholders who used specialist services, those living in RAC received an average of 6.8 specialist consultations during the year compared with 7.7 consultations for those living in the community.
- During 2002–03, gold cardholders living in RAC filled an average of 52 RPBS
 prescriptions, compared with 48 RPBS prescriptions filled for gold cardholders living in
 the community.
- During 2002–03, 38% of gold cardholders living in RAC and 46% of gold cardholders living in the community spent some time in hospital. Gold cardholders living in RAC, on average, spent 14.2 days in hospital during the year, with 6.8 days per hospital episode;

^{1.} Table excludes gold cardholders whose ages were unknown.

Analysis based on AIHW linked data.

gold cardholders living in the community, on average, spent 13.0 days in hospital, with 5.3 days per hospital episode.

Table S.2: Health service usage of DVA gold cardholders, 2002-03 and 2003-04

Services received during the year ^(a)	Living in RAC ^(b)	Living in the community ⁽	
GP services			
% using	94.4	97.3	
Consultations (mean)	14.4	13.3	
\$ per consultation (mean)	42.04	37.00	
\$ per patient (mean)	605	492	
Specialist services			
% using	46.2	77.5	
Consultations (mean)	6.8	7.7	
\$ per consultation (mean)	62.33	60.31	
\$ per patient (mean)	435	463	
RPBS			
% using	91.3	94.8	
Prescriptions (mean)	51.7	47.8	
\$ per prescription (mean)	24.68	27.56	
\$ per patient (mean)	1,281	1,316	
Hospitals			
% using	37.6	45.6	
Days in hospital during year (mean)	14.2	13.0	
\$ per patient per year (mean)	8,753	8,538	

⁽a) Relates to GP and specialist services received in 2003–04 and RPBS and hospital services received in 2002–03.

Notes

- Among gold cardholders living in the community, older gold cardholders generally had more GP (including LMO) consultations, specialist consultations, periods in hospital and time spent in hospital during the year than their younger counterparts. Among gold cardholders living in RAC, specialist consultations and hospitalisation rates were slightly lower for older age groups. Among both groups, the number of RPBS prescriptions filled decreased with increasing age.
- In general, male gold cardholders who were DVA disability pensioners had higher service use than other male gold cardholders. The difference in health service use levels between male DVA disability pensioners and non-pensioners was generally greater for gold cardholders living in the community than for those living in RAC.
- The average cost per GP and specialist consultation was slightly higher for aged care residents than for people living in the community (\$42.04 and \$62.33 versus \$37.00 and \$60.31). While there were only small differences across age groups among aged care residents, cost generally increased with increasing age for gold cardholders living in the

⁽b) Gold cardholders who spent at least 1 day of the year living in permanent residential aged care.

⁽c) Gold cardholders who spent at least 1 day of the year living in the community.

^{1.} Table excludes gold cardholders whose ages were unknown.

^{2.} Analysis based on AIHW linked data.

community. The average cost per RPBS prescription was lower for aged care residents (\$24.68) than for people living in the community (\$27.56), with cost decreasing with increasing age in both groups. Annual hospital costs were marginally higher for aged care residents (\$8,753) than for people living in the community (\$8,538). However, while there were small differences across age groups for aged care residents, hospitalisation costs increased strongly with increasing age for gold cardholders living in the community.

- High use of GP, specialist and RPBS services and likelihood of hospital use varied across groups as follows:
 - All female gold cardholders were less likely than their male counterparts to have had high use of GP, specialist services or used a hospital service, but more likely to have experienced high use of RPBS services.
 - Gold cardholders living in the community who were prisoners of war were more likely to have had high RPBS use or used a hospital service than other gold cardholders living in the community. There was no difference for former prisoners of war living in RAC.
 - All gold cardholders who died during the year were more likely to have experienced a hospital episode, or high GP, specialist or RPBS use than other gold cardholders. For hospital use and high specialist use, this effect was larger for gold cardholders in the community than for those living in RAC.
 - Gold cardholders living in the community who moved into RAC during the year were more likely to have experienced high use of GP, specialist and RPBS services and hospital than other gold cardholders living in the community. Similarly, gold cardholders living in RAC who moved from the community during the year were more likely to have experienced high use of GP, specialist and RPBS services and hospital use than other gold cardholders living in RAC. For hospital use and high use of GP, specialist and RPBS services, the strength of this effect was greater for gold cardholders living in the community than for those living in RAC.

1 Introduction

1.1 Purpose

This report examines the patterns of use of health services funded by the Australian Government Department of Veterans' Affairs (DVA) by DVA gold cardholders living in permanent residential aged care (RAC), and compares these patterns with those of gold cardholders living in the community. The health services examined are:

- general practitioner (GP) and local medical officer (LMO) consultations
- medical specialist consultations
- Repatriation Pharmaceutical Benefits Scheme (RPBS) use
- hospital use.

The analysis investigates the personal characteristics of DVA gold cardholders that are associated with increasing the likelihood of high health service use and hospital use.

Health service use levels of DVA gold cardholders living in permanent RAC and those living in the community are compared for the years 2001–02, 2002–03 and 2003–04. The analysis was restricted to DVA gold cardholders aged 70 years or older, because the numbers of gold cardholders aged less than 70 years who live in RAC are very small.

Section 2 of the report provides a brief overview of the numbers of gold cardholders included in this analysis and trends over the 3 years from 2001–02 to 2003–04. Sections 3–6 examine gold cardholder use of the four DVA-funded health services: GP and LMO services, specialist services, RPBS and hospital use. For each of these services, the patterns of use by gold cardholders living in RAC and living in the community are described separately, followed by a comparison of health service use by the two groups of gold cardholders.

1.2 Background

The Residential Aged Care program

The aged care system is made up of a range of government and privately funded initiatives which includes community care and residential aged care (RAC) services. It is acknowledged that people generally prefer to remain living in their own homes and that RAC is accessed when formal and informal support systems are no longer sufficient to help them remain at home. There is a wide range of government-funded community care available to assist frail older people remain at home, including services available through the Home and Community Care program and the National Respite for Carer's program among others. Two additional community care programs, the Community Aged Care Packages (CACP) program and the Extended Aged Care at Home (EACH) program provide the equivalent of low- and high-care RAC in the person's home.

Permanent RAC services provide accommodation and support for older people who can no longer live at home. The government provides funding subsidies to aged care services based

on the resident's care needs and financial situation. Residents are required to pay daily care fees and an accommodation charge, and low-care residents are required to pay an accommodation bond. Entry into RAC, and its community equivalents (CACP and EACH), is subject to approval by an Aged Care Assessment Team.

RAC services also provide residential respite care to people living in the community. However, these services are not included in this analysis.

The Veterans' Home Care program, provided by the Department of Veterans' Affairs, also provides a wide range of low-level home care services designed to enable veterans and war widows/widowers to maintain their health and wellbeing and remain living independently in their own homes. These services are not included in this analysis.

Dependency levels in RAC

When admitted to permanent RAC, people are evaluated against an instrument called the Resident Classification Scale (RCS). The scale has eight levels, RCS 1 to RCS 8, reflecting the level of care needed by residents: RCS levels 1–4 constitute high-care and RCS levels 5–8 constitute low-care. These levels are useful for examining the relationship between dependency and health service usage for gold cardholders living in permanent RAC. High-level care usually involves 24-hour care. Nursing care is combined with accommodation, support services (cleaning, laundry and meals), personal care services (help with dressing, eating, toileting, bathing and moving around) and allied health services (physiotherapy, occupational therapy, recreational therapy and podiatry). Low-level care focuses on personal care services, but also provides support services and some allied health services. Nursing care is also provided when required.

The analysis presented in this report compares health service use of gold cardholders living in low- and high-care permanent RAC.

Veterans' and war widows' health care entitlements

Entitlements for veterans during the period of this study were administered under the *Veterans' Entitlement Act 1986*. The Act provides for compensation for veterans in the form of disability pensions and war widows' pensions, income support (service pensions), health care for veterans and their dependants, and allowances and other benefits for veterans and their dependants (DVA 2006a). The *Military Rehabilitation and Compensation Act 2004* provides for rehabilitation, compensation and other benefits to be provided for current and former members of the Australian Defence Force, including reservists and cadets, who suffer an injury or disease due to service after 1 July 2004 and for the dependants of members whose deaths were the result of an injury or disease due to service after 1 July 2004 (DVA 2006c).

There are two categories of health care entitlement available to veterans. Veterans with a gold card are entitled to assistance from DVA for the treatment of all health conditions, while veterans with a white card are entitled to health treatment only for conditions which are accepted as war or defence caused, or for specifically designated conditions (for example cancer or tuberculosis). A third card (orange card) can be issued to veterans for provision of pharmaceuticals. Only gold cardholders are considered in this study.

A broad range of health care and support services is available to gold cardholders. Various providers supply these services on behalf of DVA. Health care and support services include general practitioner services; specialist services including pathology and radiology; podiatry,

physiotherapy and other allied health services; dental care; community nursing; spectacles and hearing aids; care in public and private hospitals; and home support services. Gold cardholders are entitled to health care for all medical conditions, irrespective of whether they are service-related or not.

DVA clients are made up of a mixture of ex-service personnel and their spouses and some dependants. It is worth noting that those who had been servicemen and women would have been in good health and fitness at the time of enlistment. In addition, following their discharge and prior to entry into residential aged care, gold and white cardholders had access to the above range of DVA-funded health and community care services (although for white cardholders this would have been limited to specified conditions) in addition to those aged and community care programs available to the rest of the Australian population.

DVA disability pensions

A veteran may receive a pension by way of compensation if they have an injury or disease that is accepted as related to war service or eligible defence service. The amount of disability pension paid depends on the level of incapacity suffered. There are four categories of disability pension payable:

- General rate, payable in multiples of 10% up to 100%
- Intermediate rate
- Special rate if the gold cardholder was totally and temporarily incapacitated, totally and permanently incapacitated or blind
- Extreme Disablement Adjustment (EDA) (for those aged 65 years or older only).

The General rate is a scale of compensation that takes into account the medical impairment and lifestyle effects of a disability. It does not have regard to whether or not a veteran is employed. The Special rate takes into account incapacity from war- or defence-caused disabilities that, alone, are so great that a veteran cannot undertake any employment totalling more than 8 hours per week. The Intermediate rate takes into account incapacity from war- or defence-caused disabilities that, alone, are so great that a veteran cannot undertake any employment other than on a part-time or intermittent basis. These last two rates are not payable if a veteran is prevented from working by any other factor. The EDA rate is only payable to veterans who have reached 65 years of age, and so for whom the capacity to undertake employment is no longer relevant. As the name suggests, the degree of incapacity from war- or defence-caused conditions must be extreme.

Gold cardholders may have disabilities other than those that are service-related, and, in fact, the service-related disability may not be the person's most significant health condition. Consequently, not all gold cardholders are recipients of a DVA disability pension.

Because disability pension type is known for both groups of gold cardholders in this analysis, health service use is examined by DVA disability pension type. Due to the small numbers of females who receive a DVA disability pension, only males are included in these analyses. In addition, for the purposes of analysis for this report, the Intermediate rate pensioners are combined with the Special rate pensioners due to the small number of gold cardholders receiving the Intermediate rate.

1.3 Methods

The data

Department of Veterans' Affairs data sets

DVA administrative data sets contain records of all health services received by past and present DVA clients. Data for the analysis of GP, LMO and specialist services were available for the years 2001–02, 2002–03 and 2003–04 (Table 1.1). Data for the years 2001–02 and 2002–03 were available for analysis of RPBS use. Private hospital use data and associated costs were available for 2001–02 and 2002–03 for all states and territories. However, public hospital use data for 2001–02 and 2002–03 were available for all states and territories except Western Australia and the Northern Territory, and public hospital costs for these years were only available for New South Wales, Victoria, Queensland and the Australian Capital Territory.

Table 1.1: Availability of DVA health services data

DVA medical service	States and territories	Years available
General practitioners and local medical officers	All	2001–02, 2002–03 and 2003–04
Specialists	All	2001–02, 2002–03 and 2003–04
RPBS	All	2001–02 and 2002–03
Private hospitals	All	2001–02 and 2002–03
Public hospitals	All, except WA and NT	2001–02 and 2002–03
	Costs available only for NSW, Vic, Qld and ACT	

Residential aged care data

RAC data was extracted from the Aged and Community Care Management Information System (ACCMIS), owned by the Department of Health and Ageing. The selected records included all persons who used RAC between 1 July 2001 and 30 June 2004. This data contains information on a wide range of resident characteristics including age, sex, country of birth, Indigenous status, marital status and RCS dependency level.

Data linkage

Name-based statistical data linkage was undertaken to link client records appearing in the residential aged care data sets of ACCMIS to the relevant DVA client records. The resulting linked data set permits the identification of DVA clients in residential aged care as well as their use of health services.

Before data linkage was carried out, ethics approval to undertake the linkage and subsequent analysis was obtained from the Ethics Committees of the Australian Institute of Health and Welfare, the Department of Veterans' Affairs and the Department of Health and Ageing. Using the AIHW's data linkage protocol (Box 1), data linkage was carried out in a manner that protects the privacy and confidentiality of individuals whose information is contained in the data sets (AIHW 2006b). The key feature of this protocol is specifying processes that

ensure the separation of personal identifying information from general data to be used in analysis, and the absence of any record identifiers in the final linked data which would allow linking back to the source data.

Box 1: AIHW data linkage protocol

The principles underlying the data linkage protocol for internal AIHW linkage are that:

- data linkage is not carried out directly between original complete data sets
- data linkage is undertaken using purpose-specific linkage data sets that contain only the data required for establishing and validating links
- links between data sets are recorded using project-specific unique record identifiers so that links identified for a particular project (including longitudinal analyses) cannot be used to establish links between data sets outside the scope of the project using a chain of links ('consequential' linking)
- analysis files do not contain identifying data (such as name, date of birth and address, or the record number from the original data set)
- intermediate data sets and the project specific record identifiers are deleted following completion of the final linked analysis data sets.

More than 307,000 ACCMIS person records were matched against more than 1.5 million DVA person records. In a number of cases, a unique DVA client was linked to 2 or more different RAC clients (affected 95 DVA links) or a unique RAC client was linked to 2 or more different DVA clients (affected 1,899 ACCMIS links). In most cases the paired records were identical. All records relating to these multiple matches were identified and flagged, and all records for these persons were excluded from the analysis. As a consequence the number of DVA gold cardholders identified as living in RAC is slightly underestimated.

This process resulted in a linked data set of 72,798 person records.

Counting health service usage

Health service use was classified according to whether the DVA gold cardholder was living in permanent RAC or not at the time: a gold cardholder living in permanent RAC when a health service was received was classified as 'living in residential aged care'; a gold cardholder not living in permanent RAC at the time a health service was received was classified as 'living in the community'.

Because people can change their place of residency during a particular financial year, a gold cardholder may live both in the community and in permanent RAC in that year. Such people contribute to health service use statistics for both the 'living in residential aged care' group and the 'living in the community' group. Thus, a gold cardholder can only contribute to health service use statistics of one group at any point in time, but may contribute towards both groups if he/she spent some time living in permanent RAC and the community during the year. For example, if the gold cardholder spent the first 4 months of the year living in the community and the remaining 8 months living in permanent RAC, then the health services used by that person in the first 4 months would contribute towards the 'living in the community' category and the remaining 8 months' health service usage would contribute towards the 'living in residential aged care' category. During each of the years 2001–02,

2002–03 and 2003–04, approximately 30% of gold cardholders living in permanent RAC spent some of the year living in the community, and approximately 3% of gold cardholders living in the community spent some of the year living in permanent RAC.

Two measures of hospital use are examined: the total days spent in hospital during the year and the number of days per hospital episode within the year. The total days spent in hospital during the year counts the number of days during the year a person was in hospital, including same-day episodes. The number of days per hospital episode includes all episodes that overlap the financial year of interest, but the episode length is defined as the length of the episode within the financial year of interest. In both cases, the length of stay is calculated by subtracting the date the patient is admitted from the date of separation; a same-day patient is allocated a length of stay of 1 day. This is same method used for calculating length of stay as that in the *Australian hospital statistics* series (AIHW 2006a).

Logistic regression for high service use and hospital use

Regression analysis is a statistical method for analysing the relationship between a particular variable of interest and a set of other variables or factors. The regression models the relationship between the variable of interest with all the factors simultaneously, and adjusts for or controls for any confounding effects. Confounding occurs when a factor is associated with the variable of interest as well as a second factor. It is not possible to infer causation from the results of the regression model, and this can only be done on the basis of other knowledge.

In this report, logistic regression was used to determine which personal and demographic characteristics were important in predicting whether a gold cardholder would receive a high level of medical services or use a hospital during the year.

In this analysis, the variables of interest were:

- high use of GP services during 2003-04
- high use of specialist services during 2003–04
- high use of RPBS services during 2002–03
- hospital use during 2002–03.

High service use for GP, specialist and RPBS services was identified by whether a gold cardholder received an amount of services that put him/her in the top fifth of service users. Hospital use was identified by whether a gold cardholder used a hospital during the year.

Two separate models for each health service were fitted: one model for gold cardholders living in RAC and one for those living in the community. The community models used variables available for all gold cardholders: age group, sex, prisoner of war status, death during the year and movement into RAC during the year. A larger set of variables was available for the RAC models than for the community models, with additional variables being: marital status, country of birth, preferred language, Indigenous status, and RCS care level. For the hospital use models, the number of days spent living in the community or in RAC during the year was also included in the models. Other factors associated with the variable of interest for which (for obvious reasons) we do not have information could not be included in the models. The strength of the relationships between these variables and high service use or hospital use was quantified by *odds ratios*. The odds ratio is a relative measure which indicates whether it is more or less likely that someone for which a characteristic is present will have high service use or hospital use compared to someone in the reference group. An odds ratio of 1 implies that the event is equally likely in both groups. An odds

ratio greater than 1 implies that the event is more likely in that group than in the reference group. An odds ratio less than 1 implies that the event is less likely in that group than in the reference group. Details of the methods used and the results obtained from this analysis are given in Appendix B.

Survival analysis for length of hospital episodes

Survival analysis techniques were used in this study to determine which personal characteristics were associated with the number of days spent in hospital per hospital episode. To be included in the analysis, the hospital separation had to take place during the 2002–03 financial year, and the total episode length was used, even if the admission occurred in the previous financial year. This ensured that only completed episodes were included in the analysis.

Three models were fitted to identify differences in hospital episode lengths between residency sectors for:

- all gold cardholders (Model A)
- gold cardholders living in permanent RAC (Model B)
- gold cardholders living in the community (Model C).

Models A and C included variables available for all gold cardholders in the model-fitting process (age group, sex, prisoner of war status, death during the year and movement into RAC during the year). A larger set of variables was used for Model B because of the availability of additional data for people living in RAC (additional variables: marital status, country of birth, preferred language, Indigenous status and RCS care level). Details of the statistical methods used and the results are given in Appendix B.

2 Overview of gold cardholders: 2001–02 to 2003–04

During 2003–04, more than 275,000 people held a DVA gold card (Table 2.1). Of this number, 42% were women and 58% were men. Recent trends indicate that the proportion of female gold cardholders is increasing each year. The age profile of women and men differs in that the men are generally younger than the women: 5% of women were aged less than 65 years, compared with 16% of men, while 20% of women were aged 85 years or older compared with 15% of men. In general, the numbers of gold cardholders aged less than 80 years have decreased over recent years, while the numbers of those aged 80 years or older have increased. For example, from 2001–02 to 2003–04 the number of gold cardholders aged 70–79 years decreased by nearly 30%, while the number aged 80 years or older increased by 35%.

Table 2.1: Number of DVA gold cardholders, 2001-02 to 2003-04

Sex/age	2001–02	2002–03	2003–04	2001–02	2002–03	2003-04
Females		Number			Per cent	
Under 65	6,283	6,199	5,524	5.5	5.2	4.7
65–69	5,630	4,881	3,962	5.0	4.1	3.4
70–74	21,023	18,002	14,018	18.5	15.2	12.0
75–79	38,174	38,352	35,122	33.6	32.3	30.1
80–84	26,492	31,710	35,126	23.3	26.7	30.1
85–89	11,695	14,454	16,792	10.3	12.2	14.4
90–94	3,383	4,175	5,215	3.0	3.5	4.5
95+	870	957	1,083	0.8	0.8	0.9
Total females	113,550	118,730	116,842	100.0	100.0	100.0
Males						
Under 65	24,561	26,569	25,134	14.8	16.0	15.9
65–69	4,687	4,624	4,334	2.8	2.8	2.7
70–74	8,315	8,379	7,292	5.0	5.0	4.6
75–79	67,951	55,179	40,160	40.9	33.2	25.4
80–84	44,294	51,045	57,002	26.6	30.7	36.0
85–89	13,458	16,621	19,927	8.1	10.0	12.6
90–94	2,680	3,326	3,986	1.6	2.0	2.5
95+	299	364	461	0.2	0.2	0.3
Total males	166,245	166,107	158,296	100.0	100.0	100.0
Persons						
Under 65	30,844	32,768	30,658	11.0	11.5	11.1
65–69	10,317	9,505	8,296	3.7	3.3	3.0
70–74	29,338	26,381	21,310	10.5	9.3	7.7
75–79	106,125	93,531	75,282	37.9	32.8	27.4
80–84	70,786	82,755	92,128	25.3	29.1	33.5
85–89	25,153	31,075	36,719	9.0	10.9	13.3
90–94	6,063	7,501	9,201	2.2	2.6	3.3
95+	1,169	1,321	1,544	0.4	0.5	0.6
Total persons	279,795	284,837	275,138	100.0	100.0	100.0

Note: Table excludes gold cardholders whose ages were unknown.

Overall, less than one-half (43%) of gold cardholders during 2003–04 received a DVA disability pension (Table A4). Men were far more likely than women to be DVA disability pensioners (72% versus 3%), which is consistent with DVA disability pension eligibility requirements, that is, most gold cardholding women are likely to be war widows without service-related injuries or diseases. Of men who were DVA disability pensioners during 2003–04, 60% received the General rate, 25% the Intermediate/Special rate and 15% received the EDA.

2.1 Permanent RAC residents

In 2003–04, 10% (27,100) of gold cardholders spent some time living in permanent RAC (12% of women and 8% of men). There has been a trend from 2001–02 to 2003–04 for an increasing number and proportion of gold cardholders to spend time in permanent RAC, reflecting the ageing profile of gold cardholders: in 2001–02 and 2002–03, 8% and 9% of gold cardholders, respectively, spent some time living in permanent RAC (Table 2.2).

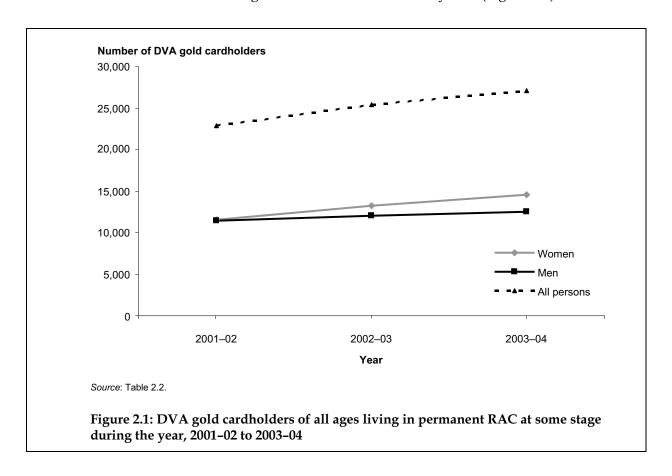
Table 2.2: DVA gold cardholders who spent some time living in permanent RAC during the year, 2001–02 to 2003–04

Sex/age	2001–02	2002–03	2003–04	2001–02	2002–03	2003–04
Females		Number		Per cen	t within age/sex g	roup
Under 65	38	35	37	0.6	0.6	0.7
65–69	63	57	45	1.1	1.2	1.1
70–74	499	428	387	2.4	2.4	2.8
75–79	2,019	2,130	1,990	5.3	5.6	5.7
80–84	3,399	4,088	4,565	12.8	12.9	13.0
85–89	3,269	3,976	4,492	28.0	27.5	26.8
90–94	1,628	1,942	2,375	48.1	46.5	45.5
95+	608	655	681	69.9	68.4	62.9
Total females	11,523	13,311	14,572	10.1	11.2	12.5
Males						
Under 65	47	55	50	0.2	0.2	0.2
65–69	51	41	41	1.1	0.9	0.9
70–74	186	179	142	2.2	2.1	1.9
75–79	2,972	2,423	1,847	4.4	4.4	4.6
80–84	4,115	4,678	5,095	9.3	9.2	8.9
85–89	2,837	3,242	3,703	21.1	19.5	18.6
90–94	1,033	1,257	1,406	38.5	37.8	35.3
95+	172	212	234	57.5	58.2	50.8
Total males	11,413	12,087	12,518	6.9	7.3	7.9
Persons						
Under 65	85	90	87	0.3	0.3	0.3
65–69	114	98	86	1.1	1.0	1.0
70–74	685	607	529	2.3	2.3	2.5
75–79	4,991	4,553	3,837	4.7	4.9	5.1
80–84	7,514	8,766	9,660	10.6	10.6	10.5
85–89	6,106	7,218	8,195	24.3	23.2	22.3
90–94	2,661	3,199	3,781	43.9	42.6	41.1
95+	780	867	915	66.7	65.6	59.3
Total persons	22,936	25,398	27,090	8.2	8.9	9.8

Note: Table excludes gold cardholders whose ages were unknown.

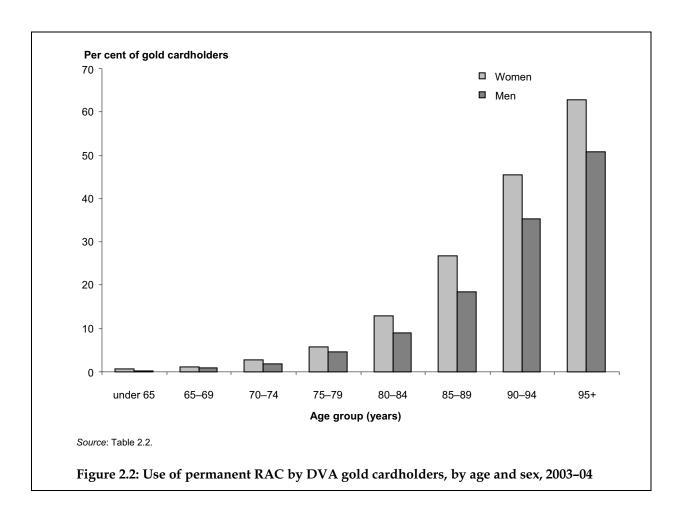
Sources: Tables 2.1 and A1.

Of the gold cardholders who spent time in RAC during 2003–04, 54% were women and 46% were men, a shift from the 50:50 split seen in 2001–02. The number of gold cardholders who spent time in RAC during 2003–04 represented a 7% increase from 2002–03 (25,400), and an increase of 18% from 2001–02 (23,000). The number of female gold cardholders living in RAC has increased more rapidly than the number of male gold cardholders living in RAC. From 2001–02 to 2003–04, the number of male gold cardholders living in RAC increased by nearly 10%, while the number of female gold cardholders increased by 26% (Figure 2.1).



Older gold cardholders are more likely than younger gold cardholders to spend time in permanent RAC during any year (Figure 2.2), particularly for gold cardholders aged 80 years or older. In 2003–04, 11% of gold cardholders aged 80–84 years spent some time in permanent RAC compared with 59% of gold cardholders aged 95 years or older. Across all age groups, women were more likely than men to spend time living in permanent RAC during the year.

From 2001–02 to 2003–04, the proportion of older gold cardholders living in RAC increased. For example, in 2001–02, nearly 42% of gold cardholders were aged 85 years or older, compared to 48% in 2003–04 (Table A1). The average age of gold cardholders in permanent RAC in 2001–02 was 83.5 years compared with 84.4 years in 2003–04.



In general, female gold cardholders living in RAC are older than male gold cardholders. In 2003–04, the average age of women living in RAC was 84.9 years and for men it was 83.9 years. In that year, 45% of women were aged between 75 and 84 years, compared with nearly 56% of men. On the other hand, nearly 5% of women were aged 95 years or older, compared with less than 2% of men (Table A1).

In 2003–04, 32% of all gold cardholders living in RAC received a DVA disability allowance or pension (Table A5). A much larger proportion of men than women received a DVA disability pension, consistent with eligibility requirements for these pensions which are paid in relation to war- or defence-caused injuries and diseases, and most gold cardholding women are likely to be war widows without such injuries or diseases. During 2003–04, nearly two-thirds (65%) of male gold cardholders living in RAC received a DVA disability pension, compared with just 3% of female gold cardholders living in RAC. Of all male gold cardholding DVA disability pensioners living in RAC during 2003–04, 64% received the General rate, 12% received the Intermediate/Special rate and 24% received the EDA.

A more detailed analysis of all veterans living in RAC can be found in *Veterans in residential aged care* (AIHW: Bowler et al. forthcoming).

2.2 Living in the community

Just over 248,000 gold cardholders lived only in the community during 2003–04 (women 41% and men 59%) (Table A3). This represented a 4% decrease from 2002–03 (259,000), and a 3% decrease from 2001–02 (257,000). From 2001–02 to 2003–04, the number of men living in the community decreased by 6%, while the number of women living in the community remained relatively constant.

In general, female gold cardholders living only in the community during 2003–04 were older than male gold cardholders (average ages 77.8 years and 75.9 years, respectively). However, in 2003–04, 62% of both men and women were aged between 75 and 84, while just over 15% of women were aged 85 or older, compared with 13% of men. Like aged care residents, the gold cardholder population living in the community is becoming older. For example, in 2001–02, nearly 9% of gold cardholders were aged 85 or older, compared to 14% in 2003–04 (Table A3). During this time the average age increased from 75.4 years to 76.7 years.

Nearly three-quarters (72%) of male gold cardholders living in the community at some stage during 2003–04 were DVA disability pensioners, compared with 3% of women (Table A6). Of male gold cardholding DVA disability pensioners living in the community at some stage during that year, 59% received the General rate, 26% received the Intermediate/Special rate and 15% received the EDA.

3 Use of general practitioner services

DVA funds the provision of all general practitioner (GP) services for gold cardholders, and use of GP services is one of the key DVA health services available to gold cardholders. These services may be provided by a general practitioner or a local medical officer (LMO), who is a general practitioner providing medical care to eligible members of the veteran community under an agreement with the Department of Veterans' Affairs (DVA 2004b). For ease of reference, the term 'general practitioner' is used to refer to services provided by GPs and DVA LMOs. This section examines the patterns of use of GP services by gold cardholders living in permanent RAC or the community. This section concentrates on service use during 2003–04, but also includes information on use during 2001–02 and 2002–03. The measures of GP service use investigated are:

- the proportion of gold cardholders using GP services while living in permanent RAC or the community during the year (or part-year)
- the average number of consultations received per gold cardholder who accessed GP services while living in permanent RAC or the community during the year (or part-year)
- the average cost per GP consultation received while living in permanent RAC or the community during the year (or part-year).

Note that costs are not adjusted for inflation.

Key findings

- During 2003–04, gold cardholders living in RAC for at least part of the year consulted a GP more frequently in that period than those living in the community at some stage during the year (14.4 and 13.3 consultations, respectively).
- Consultations received per year increased with increasing age for gold cardholders living in the community, while consultations were constant across age groups for gold cardholders living in RAC.
- Male gold cardholders who received a DVA disability pension consulted a GP more often than other male gold cardholders. This effect was greater for those living in the community than for those living in RAC.
- In both RAC and the community, women were less likely than men to be high users of GP services.
- High-care gold cardholders living in RAC were more likely than low-care gold cardholders living in RAC to be high users of GP services
- Married gold cardholders living in RAC were less likely than other gold cardholders living in RAC to be high users of GP services.
- In both RAC and the community, gold cardholders who died during the year were far more likely to be high users of GP services than other gold cardholders.
- Gold cardholders who moved into RAC during the year were more likely than other gold cardholders to be high users of GP services.

• The average cost per GP consultation was higher for gold cardholders living in RAC than for those living in the community (\$42.04 versus \$37.00). The average cost increased with increasing age among gold cardholders living in the community, but there was little difference in the average cost per consultation across age groups for aged care residents.

Table 3.1: General practitioner services received by DVA gold cardholders aged 70 years or older, 2003-04

		Use	of GP service	ces	Average number of GP consultations ^(a)			
	Living in RAC				Living in RAC			
	Low- care	High- care	Total ^(b)	Living in the community ^(c)	Low- care	High- care	Total ^(b)	Living in the community ^(c)
Age		Per cent	of gold card	holders	Number of consultations			
70–74	92.9	90.7	91.5	96.9	14.2	15.6	15.0	11.9
75–79	96.3	93.0	94.1	97.6	13.9	15.3	14.8	12.9
80–84	95.6	94.0	94.5	97.5	13.8	14.5	14.2	13.7
85–89	95.8	94.1	94.7	96.7	13.9	14.7	14.4	14.0
90–94	95.7	93.5	94.2	94.7	14.2	14.5	14.4	13.7
95+	96.6	92.9	93.7	93.9	15.0	14.0	14.2	13.8
Sex								
Females	95.3	92.6	93.6	97.1	13.8	15.0	14.5	13.0
Males	96.4	94.9	95.9	97.4	14.1	14.4	14.2	13.5
Received DVA disability pension (males only)								
No	95.3	92.9	94.1	95.6	12.8	13.7	13.3	11.1
Yes	95.5	95.1	95.9	98.2	14.8	14.8	14.7	14.7
All persons	95.7	93.7	94.4	97.3	13.9	14.7	14.4	13.3

⁽a) Average relates to people with at least 1 consultation.

Sources: Tables A7-A12.

⁽b) Aged care residents with missing RCS values were included in the total calculation. Hence, totals may be higher or lower than both of the low- and high-care figures.

 $[\]hbox{(c)} \hspace{0.5cm} \hbox{Gold cardholders whose ages were unknown were excluded from the analysis.} \\$

3.1 Use by gold cardholders living in RAC

Nearly all gold cardholders (94%) living in RAC consulted a GP during 2003–04 (94% of women and 96% of men) (Table 3.1). The average number of GP consultations received per gold cardholder was 14.4. This figure remained reasonably stable over the 3 years examined (14.4 in 2001–02 and 14.1 in 2002–03) (Table A7). There was no difference between men and women in the average number of GP consultations received per person in 2003–04, and this was also the case in 2001–02 and 2002–03. Of gold cardholders living in RAC who used a GP service during 2003–04, 40% received 1–9 consultations, one-half received 10–29 consultations, and 9% received 30 or more consultations (Table A13).

In 2003–04, the level of use and average number of GP consultations per gold cardholder across age groups were not markedly different (Table 3.1), and there were no major differences in GP use between low-care and high-care residents. A slightly larger proportion of gold cardholders in low-care received a consultation (96%) than those in high-care (94%); however, those in low-care used GP services fewer times during the year (13.9 times) than their high-care counterparts (14.7 times) (Figure 3.1).

Male gold cardholders who received a DVA disability pension, on average, received 10% more GP consultations during the year than other male gold cardholders. For low-care residents, this difference was 16% and for high-care residents it was 8% (Table 3.1).

In 2003–04, the average cost per consultation was \$42.04, with little difference across sex, age groups, care levels and DVA disability pension types (tables A27, A28, A29 and A33).

High service use

Among people who used GP services in 2003–04, those receiving the equivalent of 31 or more consultations per year were in the top fifth of GP users. These people were identified as high users of GP services, with sex, marital status, RCS care level, death during the year and a move into RAC during the year all having a statistically significant effect on whether a gold cardholder living in RAC was a high user of GP services (see Appendix B and Table B1.1):

- Women were less likely than men to be high users of GP services (OR=0.82, 95% CI 0.76–0.88).
- Married gold cardholders were less likely than others to be high users of GP services (OR=0.90, 95% CI 0.83-0.98).
- High-care gold cardholders were more likely than low-care gold cardholders to be high users of GP services (OR=1.36, 95% CI 1.25–1.45).
- Gold cardholders who died during the year were far more likely to be high users of GP services than other gold cardholders (OR=4.02, 95% CI 3.74–4.32).
- Gold cardholders who moved into RAC during the year were far more likely than other gold cardholders living in RAC to be high users of GP services (OR=2.38, 95% CI 2.22-2.56).

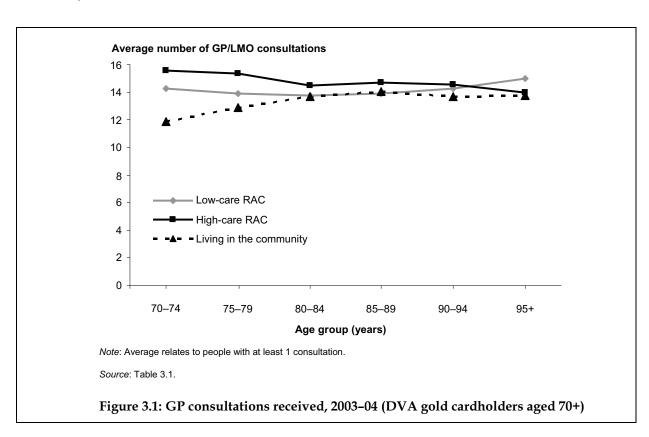
3.2 Use by gold cardholders living in the community

In 2003–04, 97% of gold cardholders in the community used a GP service (Table 3.1). This represents no change since 2001–02, with little difference in use between men and women (Table A10).

Overall, the average number of GP consultations received per gold cardholder in 2003–04 was 13.3, a slight increase since 2001–02 (12.8 consultations) (Table A10). Men consulted a GP slightly more often than women (13.5 and 13.0 consultations, respectively). General practitioner visits increased with age, peaking around the 85–89 year age group and stabilising for the older age groups (Figure 3.1). Of gold cardholders living in the community who accessed a GP during the year, 42% consulted a GP 1–9 times, one-half (52%) consulted a GP 10–29 times, and 6% consulted a GP 30 times or more (Table A14).

Male gold cardholders living in the community who received a DVA disability pension had higher service use than others, consulting a GP almost a third more often during the year than men who did not receive a DVA disability pension (14.7 and 11.1 consultations, respectively) (Table 3.1).

In 2003–04, the average cost per consultation was \$37.00, with cost increasing for older gold cardholders. For example, the average cost per consultation for gold cardholders aged 95 years or older was 22% higher than that for gold cardholders aged 70–74 years. The average cost per consultation was similar across sex and DVA disability pension types (tables A30 and A34).



High service use

In 2003–04, a use rate of 19 or more consultations per year represented the top fifth of GP consultations for gold cardholders living in the community who used GP services during the year. Using this measure to identify high service use, it was found that age, sex, death during the year and a move into RAC during the year all had a statistically significant effect on whether a gold cardholder living in the community was a high user of GP services (see Appendix B and Table B1.2):

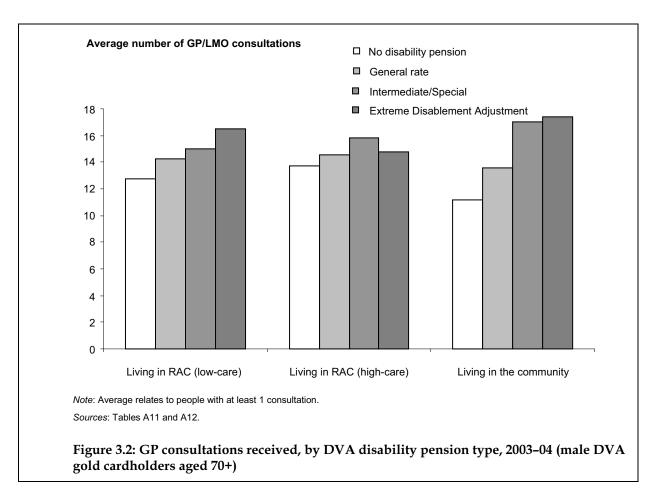
- Older gold cardholders were increasingly more likely to be high users of GP services: for example, those aged 75–79 years were more likely than those aged 70–74 years to be high users of GP services (OR=1.22, 95% CI 1.17–1.27), and gold cardholders aged 95 years or older were more likely than those aged 70–74 years to be high users of GP services (OR=1.86, 95% CI 1.58–2.20).
- Women were less likely than men to be high users of GP services (OR=0.93, 95% CI 0.91–0.95).
- Gold cardholders who died during the year were much more likely to be high users of GP services than other gold cardholders (OR=4.07, 95% CI 3.91–4.25).
- Gold cardholders living in the community who moved into RAC during the year were more likely than other gold cardholders living in the community to be high users of GP services (OR=2.51, 95% CI 2.38–2.64).

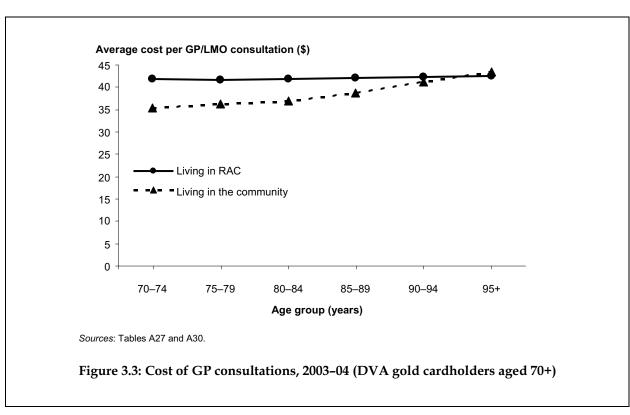
3.3 Comparing use in RAC and in the community

During 2003–04, slightly more gold cardholders living in the community used a GP service than those living in RAC (97% and 94%, respectively), yet those living in the community consulted a GP less frequently than those living in RAC (13.3 and 14.4 consultations, respectively), whether in high-care (14.7 consultations) or low-care (13.9 consultations). While average consultations per year were similar across age groups for those living in RAC, for those living in the community, older gold cardholders consulted their GP more often (Figure 3.1). For gold cardholders living in RAC, the likelihood of high GP use was equal across all age groups. However, for gold cardholders living in the community, each increase in 5 year age group was associated with an increase in the likelihood of high GP use.

In both RAC and the community, male gold cardholders who received a DVA disability pension consulted a GP more often than other male gold cardholders. Male DVA disability pensioners living in the community received 32% more GP consultations than other male gold cardholders living in the community, while male gold cardholders receiving a DVA disability pension while living in RAC received 10% more GP consultations than other male gold cardholders living in RAC (Figure 3.2).

The average cost per consultation was 14% higher for gold cardholders living in RAC than for those living in the community (\$42.04 and \$37.00, respectively). While there was little difference in the average cost per consultation across age groups for aged care residents, the average cost increased with increasing age among gold cardholders living in the community (Figure 3.3).





4 Use of specialist services

DVA funds the provision of all medical specialist services for gold cardholders, where a medical specialist is a medical practitioner who is qualified to practise a particular specialty of medicine (DVA 2004c). This analysis specifically examines the use of consultant physicians. For ease of reference, the term 'specialist' is used to refer to services provided by consultant physicians only. This section examines the patterns of use of specialist services by gold cardholders living in permanent RAC and gold cardholders living in the community. Analysis concentrates on service use during 2003–04, but also includes information on use during 2001–02 and 2002–03. The measures of specialist service use investigated are:

- the proportion of gold cardholders using specialist services while living in permanent RAC or the community during the year (or part-year)
- the average number of consultations received per gold cardholder who accessed specialist services while living in permanent RAC or the community during the year (or part-year)
- the average cost per consultation received while living in permanent RAC or the community during the year (or part-year).

Note that costs are not adjusted for inflation.

Key findings

- During 2003–04, use of specialist services was higher among gold cardholders living in the community than those living in RAC: 78% of gold cardholders living in the community consulted a specialist during the year compared with 46% for those living in RAC.
- On average, specialist service users in the community consulted a specialist slightly more often than those living in RAC (7.7 and 6.8 consultations per year, respectively).
- Older gold cardholders in the community consulted a specialist more often than
 younger gold cardholders in the community, while increasing age was associated
 with decreasing numbers of consultations among gold cardholders living in RAC.
- In both RAC and the community, male gold cardholders who were also DVA disability pensioners received more specialist consultations per user than other male gold cardholders.
- In both RAC and the community, female gold cardholders were less likely than their male counterparts to be high users of specialist services.
- High-care gold cardholders living in RAC were less likely than low-care gold cardholders living in RAC to be high users of specialist services.
- Married gold cardholders living RAC residents were less likely than other gold cardholders living in RAC to be high users of specialist services.
- In both RAC and the community, gold cardholders who died during the year were more likely to be high users of specialist services than other gold cardholders. This effect was larger for gold cardholders living in the community than for those living in RAC.

- In both RAC and the community, gold cardholders who moved into RAC during the year were more likely than other gold cardholders to be high users of specialist services. This effect was larger for gold cardholders living in the community than for those living in RAC.
- The average cost per specialist consultation was higher for gold cardholders living in RAC than for those living in the community (\$62.33 versus \$60.31). The average cost increased slightly with increasing age among gold cardholders living in the community, but there was little difference in the average cost per consultation across age groups for RAC residents.

4.1 Use by gold cardholders living in RAC

In 2003–04, 46% of gold cardholders living in RAC consulted a medical specialist (45% in 2001–02 and 2002–03) (Table A15). Men had slightly higher use than women: 48% and 45%, respectively, in 2003–04 (Table 4.1).

Overall, the average number of specialist consultations received by gold cardholders living in RAC was 6.8 in 2003–04, with a slight difference between men (7.0) and women (6.6). The average number of specialist consultations received per gold cardholder has remained stable over the last few years (6.7 in 2001–02 and 6.6 in 2002–03) (Table A15). Of gold cardholders living in RAC who consulted a specialist during the year, 43% consulted a specialist once or twice, 39% consulted a specialist 3–10 times and 18% consulted a specialist more than 10 times (Table A21).

The oldest permanent residents were less likely to access specialist services than their younger counterparts: only 33% of residents aged 95 years or older consulted a specialist in 2003–04, compared with 46% for all residents aged 70 years or older. In addition, older residents using specialist services consulted a specialist less often (Table 4.1).

Across all age groups, a much higher proportion of low-care than high-care residents consulted a specialist during the year (62% versus 39%) (Figure 4.1). However, there was no difference in the average number of specialist consultations received by care level (6.8 consultations for both low and high-care residents) (Table 4.1).

A larger proportion of male gold cardholders who received a DVA disability pension consulted a specialist than non-recipients (49% and 45%, respectively). Male DVA disability pensioners also, on average, consulted a specialist 18% more times than other male gold cardholders living in residential aged care (7.3 and 6.2 consultations, respectively) (Table 4.1). This difference varied with the type of DVA disability pension received and the resident's care level (Table A19). The greatest differences were among EDA recipients: on average, for those in low-care, EDA recipients had 10.1 consultations compared with 6.6 consultations for residents not in receipt of a DVA pension, while for those in high-care, EDA averaged 7.0 consultations compared with 6.0 for non-pension recipients

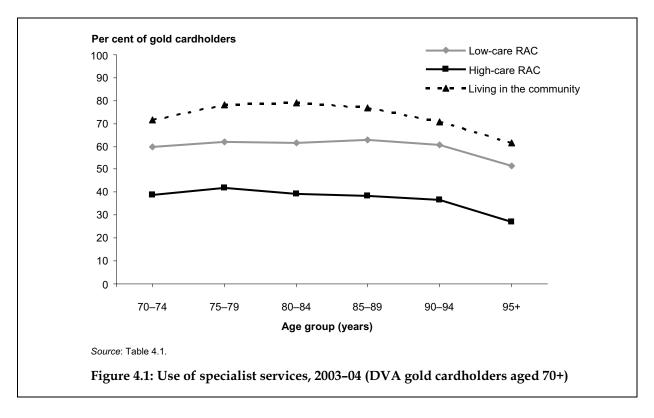
For gold cardholders living in RAC, the average cost per specialist consultation was \$62.33, with little difference across sex, age, care level and DVA disability pension type (tables A27, A28, A29 and A33).

Table 4.1: Specialist services received by DVA gold cardholders aged 70 years or older, 2003-04

	-	Use of s	specialist se	rvices	Average number of specialist consultations ^(a)			
	Li	ving in R	AC		Liv	ving in RA	vC	
	Low- care	High- care	Total ^(b)	Living in the community ^(c)	Low- care	High- care	Total ^(b)	Living in the community ^(c)
Age		Per cent	of gold card	holders		Numbe	r of consulta	tions
70–74	59.8	39.1	46.3	71.8	8.3	7.2	7.7	6.4
75–79	62.1	41.7	48.1	78.3	7.1	6.5	6.8	7.4
80–84	61.7	39.5	46.8	79.0	6.9	6.9	6.9	7.9
85–89	62.8	38.4	47.0	76.7	6.9	6.8	6.9	8.3
90–94	60.9	36.7	44.4	70.9	6.0	6.7	6.3	8.2
95+	51.7	27.1	32.7	61.5	6.0	5.6	5.7	8.1
Sex								
Females	60.3	36.4	44.8	74.1	6.3	6.9	6.6	6.9
Males	63.6	41.0	47.8	80.1	7.5	6.6	7.0	8.2
Received DVA disability pension (males only)								
No	57.5	38.9	44.8	73.6	6.6	6.0	6.2	6.9
Yes	65.9	41.7	49.4	83.6	7.9	7.0	7.3	8.8
All persons	61.7	38.6	46.2	77.5	6.8	6.8	6.8	7.7

⁽a) Average relates to people with at least 1 consultation.

Sources: Tables A15-A20.



⁽b) Aged care residents with missing RCS values were included in the total calculation. Hence, totals may be higher or lower than both of the low- and high-care figures.

⁽c) Gold cardholders whose ages were unknown were excluded from the analysis.

High service use

In 2003–04, for gold cardholders living in RAC a use rate equivalent to 13 or more consultations per year represented the top fifth of number of consultations for gold cardholders who accessed specialist services during the year. Using this measure to identify people with high service use, it was found that age, sex, marital status, RCS care level, death during the year and a move into RAC during the year all had a statistically significant effect on whether a gold cardholder living in RAC was a high user of specialist services (see Appendix B and Table B1):

- The oldest gold cardholders (95 years or older) were less likely than the youngest gold cardholders (70–74 years) to be high users of specialist services (OR=0.56, 95% CI 0.36–0.88).
- Women were less likely than men to be high users of specialist services (OR=0.83, 95% CI 0.75–0.91).
- Married residents were less likely than other residents to be high users of specialist services (OR=0.79, 95% CI 0.70–0.89).
- High-care residents were less likely than low-care residents to be high users of specialist services (OR=0.90, 95% CI 0.82–0.98).
- Gold cardholders who died during the year were far more likely to be high users of specialist services than other gold cardholders (OR=4.21, 95% CI 3.81–4.66).
- Gold cardholders who moved into RAC during the year were more likely than other gold cardholders living in RAC to be high users of specialist services (OR=1.57, 95% CI 1.43-1.74).

4.2 Use by gold cardholders living in the community

In 2003–04, 78% of gold cardholders living in the community consulted a medical specialist (75% in 2001–02 and 76% in 2002–03) (Table A18). Men used specialist services more than women (80% compared with 74% in 2003–04).

For gold cardholders living in the community in 2003–04, the average number of specialist consultations received was 7.7, with men consulting a specialist more often than women (8.2 consultations compared with 6.9 consultations, respectively) (Table 4.1). Of gold cardholders living in the community who consulted a specialist during the year, 31% consulted a specialist once or twice, 49% consulted a specialist 3–10 times and 20% consulted a specialist more than 10 times (Table A22).

The oldest gold cardholders were the age group least likely to have accessed specialist services, with 59% of women and 67% of men aged 95 years or older consulting a specialist during the year (Table A18). However, among gold cardholders who consulted a specialist, the average number of specialist consultations increased with age, peaking around the 85–89 year age group, and then stabilising for the older age groups (Figure 4.2).

A larger proportion of male gold cardholders who received a DVA disability pension consulted a specialist than other male gold cardholders (84% and 73%, respectively). The number of consultations that these gold cardholders received was also greater: 8.8 versus 7.0 consultations, respectively. Specialist use was greatest for recipients of the EDA, who received 64% more specialist consultations than male gold cardholders not in receipt of a DVA disability pension (11.5 and 7.0 consultations, respectively) (Table A20).

For gold cardholders living in the community, the average cost per specialist consultation was \$60.31, with a slight increase in cost for older gold cardholders. The average cost per specialist consultation was similar across sex and DVA disability pension types (tables A30 and A34).

High service use

In 2003–04, a use rate equivalent to 10 or more consultations per year represented the top fifth of specialist consultations for gold cardholders living in the community who accessed specialist services during the year. Identifying people in this top quintile of consultations as high users, it was found that age, sex, death during the year and a move into RAC during the year all had a statistically significant effect on whether a gold cardholder living in the community was a high user of specialist services (see Appendix B and Table B2):

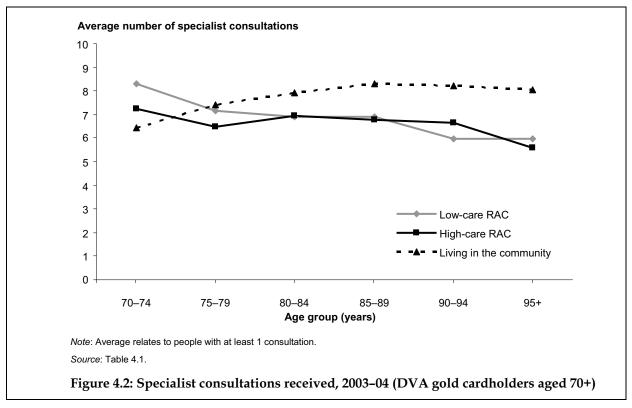
- Older gold cardholders were more likely than the youngest gold cardholders (those aged 70–74 years) to be high users of specialist services (for example, for those aged 85–89 years, OR=1.41, 95% CI 1.34–1.49).
- Women were less likely than men to be high users of specialist services (OR=0.77, 95% CI 0.75–0.79).
- Gold cardholders who died during the year were much more likely to be high users of specialist services than other gold cardholders (OR=7.28, 95% CI 6.94–7.65).
- Gold cardholders living in the community who moved into RAC during the year were much more likely than other gold cardholders to be high users of specialist services while living in the community (OR=4.79, 95% CI 4.51–5.10).

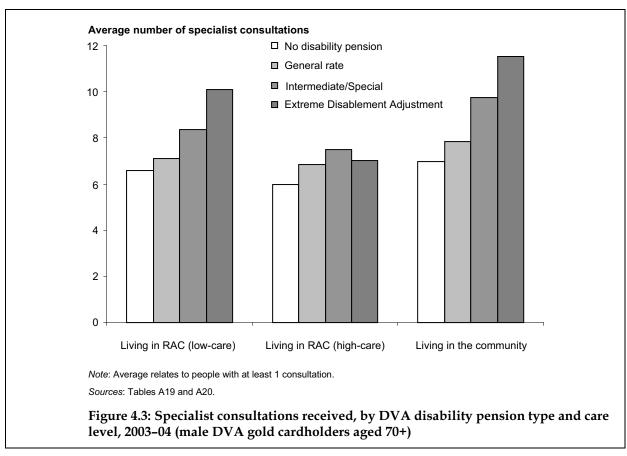
4.3 Comparing use in RAC and in the community

A gold cardholder living in the community was far more likely than a gold cardholder living in RAC to have consulted a specialist during 2003–04 (Figure 4.1): more than three-quarters (78%) of gold cardholders in the community consulted a specialist during 2003–04, while just under one-half (46%) of gold cardholders living in RAC consulted a specialist. Further, service users in the community consulted a specialist slightly more often than those living in RAC (averaging 7.7 and 6.8 consultations per year, respectively). Older gold cardholders in the community consulted a specialist more often than younger gold cardholders in the community, while increasing age was associated with decreasing numbers of consultations among gold cardholders living in RAC (Figure 4.2). In addition, use rate differences between male DVA disability pensioners and non-pensioners was greater among those living in the community: disability pensioners received 26% more specialist consultations per user than other male gold cardholders living in the community, compared with 18% more for aged care residents (Figure 4.3).

The average cost per specialist consultation was 3% higher for gold cardholders living in RAC than for those living in the community (tables A27, A28, A29 and A30).

The relationship between death or a move into RAC during the year and increased likelihood of high specialist use was greater for gold cardholders living in the community than for those living in RAC.





5 Use of pharmaceuticals

The Repatriation Pharmaceutical Benefits Scheme (RPBS) provides a wide range of pharmaceuticals and dressings for the treatment of eligible veterans, war widows/widowers and dependants (DVA 2006b). The range of medications available under the RPBS is much wider than the range under the Pharmaceutical Benefits Scheme, and includes medications such as aspirin and paracetamol in addition to wound dressings. Gold cardholders can obtain pharmaceuticals under the RPBS for all of their medical conditions. In the following discussion, the term 'prescriptions filled' is used to refer to the number of prescriptions a gold cardholder had filled by a pharmacist, and the term 'medications' is used to refer to the number of distinct RPBS items for which a gold cardholder had prescriptions filled during the year. Even though some RPBS items are not medications, these items comprise a very small proportion of prescriptions filled under the RPBS.

This section examines the patterns of use of the RPBS by gold cardholders living in permanent RAC and gold cardholders living in the community. It concentrates on RPBS use during 2002–03, but also includes information on use during 2001–02. The measures of RPBS use investigated are:

- the proportion of gold cardholders using the RPBS while living in RAC or in the community during the year (or part-year)
- the average number of RPBS prescriptions filled (including repeats) per gold cardholder who accessed the RPBS while living in RAC or in the community during the year (or part-year)
- the average number of medications for which prescriptions were filled per gold cardholder who accessed the RPBS while living in RAC or in the community during the year (or part-year)
- the average cost per RPBS prescription filled while living in RAC or in the community during the year (or part-year).

Note that costs are not adjusted for inflation.

Key findings

- During 2002–03, gold cardholders living in RAC filled 8% more RPBS prescriptions than gold cardholders living in the community (52 and 48 prescriptions filled, respectively).
- Female gold cardholders living in RAC filled 11% more RPBS prescriptions than men (54 and 49 prescriptions, respectively), yet there was no major difference in the number of RPBS prescriptions filled between female and male gold cardholders living in the community (48 prescriptions each).
- The average cost per prescription filled for gold cardholders living in the community was 11% higher than the cost for those living in RAC (\$27.56 versus \$24.68). For both groups of gold cardholders, the average cost per prescription filled decreased with age.

- In both RAC and the community, women's annual RPBS costs per patient were less than men's annual costs, despite women, on average, filling more prescriptions than men.
- Gold cardholders living in high-care RAC, on average, filled 11% fewer RPBS prescriptions than their low-care counterparts (50 and 56 prescriptions, respectively).
- Older gold cardholders generally filled fewer prescriptions during the year and received fewer RPBS medications.
- Male gold cardholders who also received a DVA disability pension filled more prescriptions than other gold cardholders. For male gold cardholders living in RAC the difference was 20%, while for those living in the community it was 43%.
- Women were more likely than men to be high users of the RPBS.
- High-care gold cardholders living in RAC were less likely than low-care gold cardholders living in RAC to be high users of the RPBS.
- For gold cardholders living in the community, former prisoners of war were more likely than other gold cardholders living in the community to be high users of the RPBS. This difference was not seen among gold cardholders living in RAC.
- Gold cardholders who died during the year were far more likely to be high users of the RPBS than other gold cardholders.
- Gold cardholders who moved into RAC during the year were more likely than other gold cardholders to be high users of the RPBS.

5.1 Use by gold cardholders living in RAC

In 2002–03, nearly 92% of gold cardholders living in RAC used the RPBS (Table 5.1), with 94% of men and 90% of women filling prescriptions under the scheme. These proportions are similar to those for 2001–02 (91% overall, 89% of women, and 93% of men) (Table A35). In 2002–03 the average RPBS user filled 52 prescriptions (including repeats) for an average of 12 different medications. In 2001–02, the corresponding figures were an average of 50 prescriptions filled for an average of 12 different medications.

The number of prescriptions filled and medications they related to varied widely across gold cardholding aged care residents. Of gold cardholders who used the RPBS during the year, more than one-third (36%) filled 1–29 prescriptions, just over one-half (51%) filled 30–99, while 13% filled 100 or more prescriptions (Table A41). Twelve per cent of RPBS users filled prescriptions for 1–4 different medications, over one-half (59%) filled prescriptions for 5–14 different medications, and 29% filled prescriptions for 15 or more different medications during 2002–03 (Table A44).

Table 5.1: RPBS services received by DVA gold cardholders aged 70 years or older, 2003-04

		U	se of RPBS		Average	number o	f RPBS pres	criptions filled ^(a)
	Li	ving in RA	AC.		Li	ving in RA	c	
	Low- care	High- care	Total ^(b)	Living in the community ^(c)	Low-	High- care	Total ^(b)	Living in the community ^(c)
Age		Per cent	of gold card	holders		Numbe	r of prescrip	tions
70–74	91.1	91.2	90.8	92.9	65.5	56.6	59.6	45.7
75–79	92.8	91.4	91.7	95.2	60.6	54.1	56.0	49.0
80–84	93.2	92.0	92.3	95.3	58.1	50.5	52.9	48.4
85–89	93.3	91.9	92.3	94.4	53.5	48.8	50.4	45.8
90–94	91.8	89.7	90.1	92.6	50.4	44.1	46.0	41.1
95+	86.2	86.4	86.3	88.7	42.1	42.1	41.9	35.5
Sex								
Females	91.4	89.2	89.9	94.2	58.7	52.1	54.4	48.1
Males	94.6	93.5	93.7	95.2	52.6	47.4	48.8	47.7
Received DVA disability pension (males only)								
No	92.7	92.4	92.3	92.1	46.3	42.0	43.2	37.0
Yes	95.6	94.1	94.4	96.8	56.1	50.3	51.9	52.9
All persons	92.8	91.3	91.7	94.8	56.0	49.7	51.7	47.8

⁽a) Average relates to people with at least one prescription filled.

Sources: Tables A35-A40.

Female gold cardholders living in RAC filled more prescriptions than their male counterparts. In 2002–03 women filled an average of 54 prescriptions and men filled 49, up slightly from use in 2001–02 (52 and 48, respectively) (Table A35). From 2001–02 to 2002–03, the total number of prescriptions filled by female gold cardholders increased by 24%, compared with an increase of 9% for men (unpublished AIHW analysis).

The youngest gold cardholders filled the highest average number of prescriptions in 2002–03, with the average number of prescriptions filled decreasing with increasing age. Women filled more prescriptions than men across all age groups, except for those aged 70–74 years (Figure 5.1).

The average annual value of the RPBS benefit received per gold cardholder in 2002–03 was \$1,281, an 11% increase from the 2001–02 average of \$1,154 (Table A79). While the average and total number of prescriptions filled by women were both higher than those for men, the average annual value of RPBS benefits for women was lower, indicating that the RPBS items received by women were less expensive than those received by men. In 2002–03 the average benefits received by women and men were \$1,267 and \$1,295, respectively (Table A79).

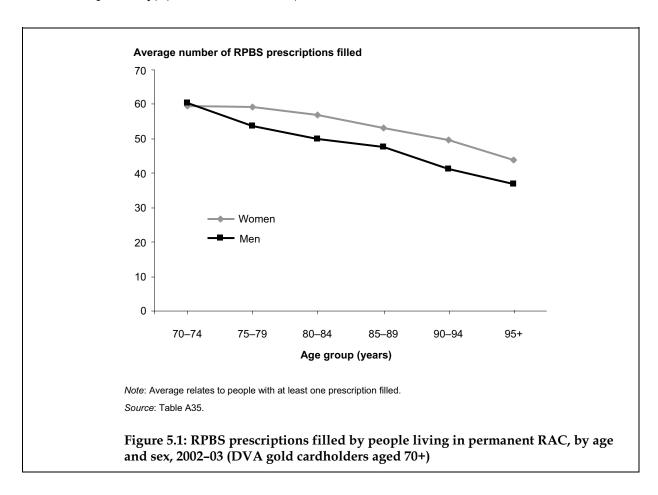
The average cost per prescription filled in 2002–03 was \$24.68, a 6% increase from 2001–02 (\$23.19). The average cost per prescription filled for men was approximately 15% higher than that for women in both 2002–03 (\$26.40 versus \$23.14) and 2001–02 (\$24.88 versus \$21.58). The average cost per prescription filled decreased with increasing age (Table A35).

⁽b) Aged care residents with missing RCS values were included in the total calculation. Hence, totals may be higher or lower than both of the low- and high-care figures.

⁽c) Gold cardholders whose ages were unknown were excluded from the analysis.

Male gold cardholders living in RAC who received a DVA disability pension filled 20% more prescriptions and used 17% more prescribed medications than other male gold cardholders living in residential aged care (tables 5.1 and A39).

In terms of care levels, the proportion of gold cardholders who used the RPBS during 2002–03 was slightly higher for low-care residents (93%) compared with high-care residents (91%). Across all age groups, except for those aged 95 years or older, low-care residents filled approximately 15% more prescriptions during the year than high-care residents (56 prescriptions and 50 prescriptions, respectively). Only minor differences in the average cost per prescription filled were seen between low- and high-care residents (\$25.27 and \$24.49, respectively) (tables A36 and A37).



High service use

In 2002–03, the top fifth of RPBS users filled the equivalent of 108 or more prescriptions per year. Defining people who filled 108 or more RPBS prescriptions as high users of the RPBS, it was found that age, sex, country of birth, RCS care level, death during the year and a move into RAC during the year all had a statistically significant effect on whether a gold cardholder living in RAC was a high user of the RPBS (see Appendix B and Table B1):

- Older gold cardholders were generally less likely to be high users of the RPBS than those aged 70–74 years (for example, for those aged 90–94 years, OR=0.40, 95% CI 0.30–0.54).
- Women were more likely than men to be high users of the RPBS (OR=1.11, 95% CI 1.03–1.20).

- Gold cardholders who were not born in Australia were less likely than other gold cardholders to be high users of the RPBS (OR=0.85, 95% CI 0.73–0.98).
- Gold cardholders living in high-care RAC were less likely than those living in low-care RAC to be high users of the RPBS (OR=0.90, 95% CI 0.83-0.97).
- Gold cardholders who died during the year were more likely to be high users of the RPBS than other gold cardholders (OR=2.25, 95% CI 2.09–2.44).
- Gold cardholders who moved into RAC during the year were more likely than other gold cardholders living in RAC to be high users of the RPBS while living in RAC (OR=1.61, 95% CI 1.49–1.73).

5.2 Use by gold cardholders living in the community

In 2002–03, 95% of gold cardholders living in the community used the RPBS, compared with 94% in 2001–02 (tables 5.1 and A38). In the same financial year, 94% of women and 95% of men used the RPBS at some stage. In 2002–03, gold cardholders filled an average of 48 prescriptions and received 11 different medications, compared with 45 prescriptions filled and 11 different medications in 2001–02.

Of gold cardholders living in the community who used the RPBS during the year, 38% filled 1–29 prescriptions, over half (54%) filled 30–99 prescriptions, while 8% filled 100 or more prescriptions (Table A42). In 2002–03, 18% of RPBS users filled prescriptions for 1–4 different medications; over half (57%) of filled prescriptions for 5–14 different medications, while nearly one-quarter (24%) filled prescriptions for 15 or more different medications during the year (Table A44).

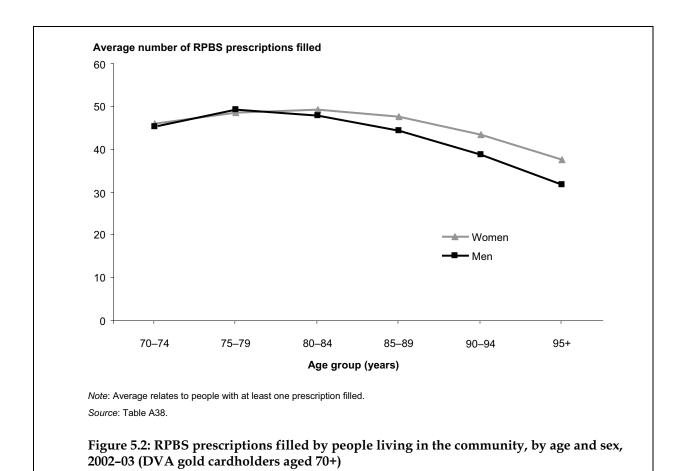
In 2002–03, women and men each filled an average of 48 RPBS prescriptions, up from an average of 45 prescriptions filled for women and 46 for men in 2001–02 (Table A38). From 2001–02 to 2002-03, the total number of prescriptions filled by female gold cardholders increased by 14%, compared with an increase of just 3% for men (unpublished AIHW analysis).

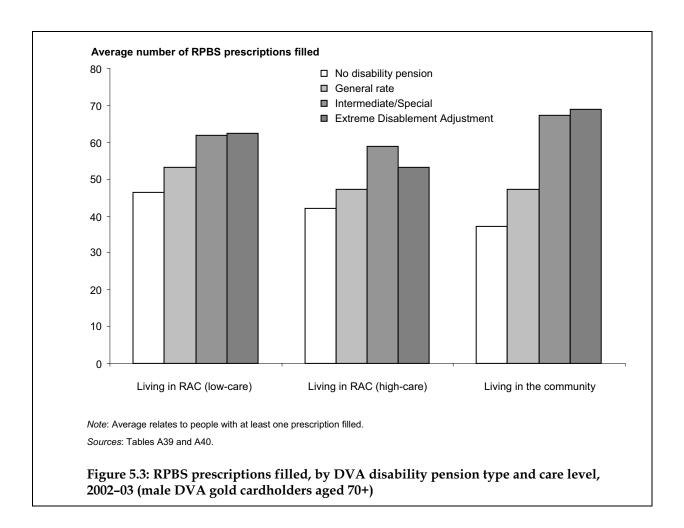
Older gold cardholders filled fewer prescriptions than younger gold cardholders: in 2002–03, on average, the oldest gold cardholders filled 25% less prescriptions than the youngest gold cardholders (36 and 46 prescriptions, respectively). Women generally filled more prescriptions than men across all age groups except for those aged 75–79 years (Figure 5.2).

The average total value of the RPBS benefit received per gold cardholder in 2002–03 was \$1,316, up from \$1,171 in the preceding year (Table A82). While the average and total number of prescriptions filled by women in 2001–02 and 2002–03 were similar to those for men, the average annual RPBS benefit for women was 16% lower.

The average cost per RPBS prescription filled in 2002–03 was \$27.56, a 7% increase from 2001–02 (\$25.80). The lower annual cost of the RPBS for women was a result of lower prescription costs: the average cost per prescription filled for men was approximately 20% higher than that for women in both 2002–03 (\$29.65 and \$24.73, respectively) and 2001–02 (\$27.66 and \$23.18, respectively) (Table A38).

Male gold cardholders living in the community who received a DVA disability pension filled, on average, 43% more prescriptions and received 43% more medications than other male gold cardholders living in the community. The largest differences in prescription and medication use were seen among gold cardholders receiving either the Intermediate/Special or EDA disability pension rates (Table A40 and Figure 5.3).





High service use

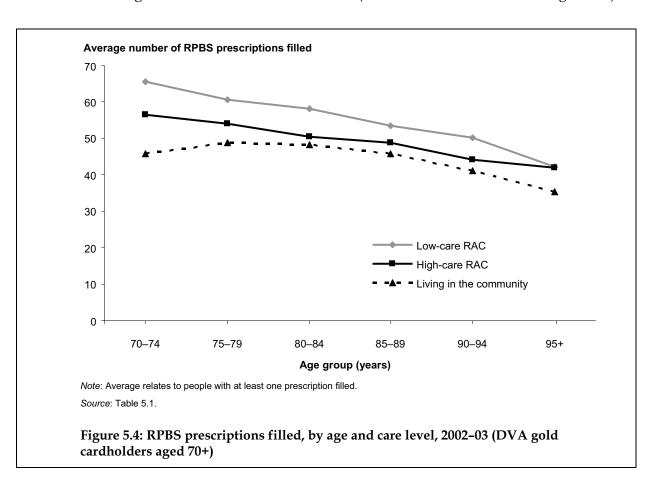
In 2002–03, a use rate equivalent to 76 or more prescriptions filled per year represented the top fifth of RPBS use for gold cardholders living in the community who accessed the RPBS during the year. Using this measure to identify high users of the RPBS, it was found that age, sex, country of birth, prisoner of war status, death during the year and a move into RAC during the year all had a statistically significant effect on whether a gold cardholder living in the community was a high user of the RPBS (see Appendix B and Table B2):

- Older gold cardholders were less likely than younger gold cardholders to be high users of the RPBS (for those aged 75–79 years OR=1.16, 95% CI 1.12–1.21; for those aged 95 years or older OR=0.63, 95% CI 0.50–0.80).
- Women were slightly more likely than men to be high users of the RPBS (OR=1.04, 95% CI 1.02–1.06).
- Former prisoners of war were more likely than other gold cardholders living in the community to be high users of the RPBS (OR=1.56, 95% CI 1.02–2.38).
- Gold cardholders who died during the year were much more likely to be high users of the RPBS than other gold cardholders (OR=2.93, 95% CI 2.81–3.05).

 Gold cardholders who moved into RAC during the year were more likely than other gold cardholders living in the community to be high users of the RPBS (OR=1.49, 95% CI 1.41–1.58).

5.3 Comparing use in RAC and in the community

Ninety-five per cent of gold cardholders living in the community and 92% of gold cardholders living in RAC filled at least 1 RPBS prescription during 2002–03. Gold cardholders living in RAC filled, on average, 8% more prescriptions during the year than those living in the community (52 and 48 prescriptions, respectively). The difference was largest among gold cardholders aged 70–74 years (Table 5.1 and Figure 5.4). There was little difference between aged care residents and gold cardholders in the community with respect to the number of different medications received. The average cost per prescription filled for gold cardholders living in the community was 11% higher than the cost for those living in RAC. For both groups of gold cardholders, the average cost per prescription filled decreased with increasing age (tables A35–A38). On average, gold cardholding male DVA disability pensioners living in the community filled 43% more prescriptions than their counterparts who did not receive a DVA disability pension; for gold cardholders living in RAC, this difference was 20% (tables 5.1, A39 and A40 and Figure 5.3).



6 Use of hospitals

Hospital care for veterans and war widows/widowers is provided through the Repatriation Private Patient Scheme. This allows DVA clients to be admitted directly to a public hospital, former Repatriation General Hospital or selected private hospitals (DVA 2004a). For gold cardholders, DVA funds their treatment in hospital for all medical conditions and covers all hospital and medical fees incurred while in hospital.

The following terms are used in this section to describe hospital use:

- A gold cardholder 'spent time in hospital' or was 'hospitalised' if the gold cardholder spent at least 1 day in hospital (including same-day episodes) during the year (or part-year).
- A hospital 'episode' refers to a continuous period of time spent in hospital (combining within- and between-hospital transfers and same-day episodes). This definition is different to that used in the *Australian hospital statistics* series (see, for example AIHW 2006a). In that series, all periods ending with a transfer within the hospital system are counted as separate episodes.
- The 'total length of time spent in hospital' relates to the total length of time spent in hospital across all hospital stays during the financial year.
- The 'cost' of hospitalisation relates to the cost of treatment in hospital for episodes
 which were completed during the financial year. Both hospital and medical costs
 associated with the hospital episode are included.

This section examines the patterns of hospital use by gold cardholders living in permanent RAC and gold cardholders living in the community. Analysis concentrates on hospital use during 2002–03, but also includes some information on use during 2001–02. The measures of hospital use investigated are:

- the proportion of gold cardholders using a hospital while living in RAC or in the community during the year (or part-year)
- the average time spent in hospital (including same-day episodes) per gold cardholder who used a hospital while living in RAC or in the community during the year (or part-year) (see Section 1.3 for definition of days)
- the average episode length per gold cardholder who used a hospital while in RAC or in the community during the year (or part-year) (see Section 1.3 for definition of days). For episodes going across financial year boundaries, only those days within the financial year contributed to the average
- the average cost of hospital use while living in RAC or in the community during the year (or part-year).

Note that costs are not adjusted for inflation.

When discussing hospital use and costs in this section, the following data limitations must be taken into account:

• Data were not available for public hospitals in Western Australia and the Northern Territory. Any discussion of overall and public hospital use includes all state and territories except Western Australia and the Northern Territory. Discussion of private hospital use includes data from all state and territories.

Public hospital cost data were only available for New South Wales, Victoria,
 Queensland and the Australian Capital Territory. Discussion of overall and public
 hospitalisation costs is based on hospitals in these states and territory only.
 Discussion of private hospital costs includes hospitals from all states and territories.

Key findings

- Across all age groups, 46% of gold cardholders living in the community and 38% of gold cardholders living in RAC used hospital services at some stage during 2002–03.
 While use varied little with age for gold cardholders living in RAC, it increased noticeably with increasing age for gold cardholders living in the community.
- Fewer gold cardholders living in RAC used private hospitals than those living in the community (20% and 34%, respectively), while more gold cardholders living in RAC used public hospitals (24% and 19%, respectively).
- Gold cardholders living in RAC, on average, spent 14.2 days in hospital during the year, with 6.8 days per hospital episode; gold cardholders living in the community, on average, spent 13.0 days in hospital, with 5.3 days per hospital episode.
- Time spent in hospital during the year increased with age for gold cardholders living in the community. For gold cardholders living in RAC, time spent in hospital during the year was similar across all age groups.
- Men in both groups of gold cardholders experienced higher rates of hospitalisation than women.
- Men receiving a DVA disability pension had higher hospital use than other men. The
 differences in hospital use were greater for men living in the community than for
 those living in RAC.
- Fewer gold cardholders living in high-care RAC (35%) used a hospital than low-care residents (42%). However, on average, hospitalised high-care residents spent 11% more time in hospital during the year than low-care residents.
- Female gold cardholders living in the community spent approximately 30% more time in hospital per episode than their male counterparts.
- Married gold cardholders living in RAC were less likely than other gold cardholders living in RAC to use a hospital service during the year.
- High-care gold cardholders living in RAC were less likely than low-care gold cardholders living in RAC to use a hospital service during the year.
- For gold cardholders living in the community, former prisoners of war were more likely to use a hospital during the year than other gold cardholders living in the community. There was no difference for former prisoners of war living in RAC.
- In both the community and RAC, gold cardholders who died during the year were more likely to use a hospital during the year than other gold cardholders. This effect was greater for gold cardholders living in the community than for those living in RAC.
- Gold cardholders who moved into RAC during the year were more likely to use a hospital during the year than other gold cardholders. Again, this effect was greater for gold cardholders living in the community than for those living in RAC.

- Hospital episodes were nearly 3 times longer for gold cardholders who moved into RAC from the community during the year than for other gold cardholders living in the community.
- The average annual cost of hospitalisation per patient for gold cardholders living in RAC (\$8,573) was marginally higher than the annual cost for gold cardholders living in the community (\$8,538). For hospitalised gold cardholders living in the community, annual hospital costs were 12% higher for men than for women, and increased with increasing age. These trends were not seen among hospitalised gold cardholders living in RAC.

Table 6.1: Hospital services used by DVA gold cardholders aged 70 years or older, 2002-03

		Н	lospital use	_	Average total time in hospital ^(a)			
	Li	ving in RA	AC		Liv	ving in RA	vC	
	Low- care	High- care	Total ^(b)	Living in the community ^(c)	Low-	High- care	Total ^(b)	Living in the community ^(b)
Age		Per cent	of gold card	holders			Days	
70–74	43.0	33.9	37.3	38.7	15.9	16.5	16.1	9.9
75–79	41.9	35.8	37.7	45.1	13.6	14.4	14.1	11.4
80–84	42.7	36.5	38.6	46.9	13.5	14.7	14.2	13.6
85–89	42.3	36.0	38.3	49.1	13.5	15.1	14.5	17.0
90–94	43.2	32.5	36.0	50.0	11.0	14.8	13.4	19.9
95+	33.3	26.4	28.1	52.6	12.4	13.6	13.3	25.8
Sex								
Females	39.3	32.6	35.0	40.3	13.1	15.1	14.3	12.7
Males	46.2	38.0	40.5	49.7	13.4	14.5	14.1	13.1
Received DVA disability pension (males only)								
No	43.7	36.1	38.7	42.7	12.6	13.7	13.3	12.5
Yes	46.8	38.6	41.5	53.2	13.8	14.9	14.6	13.4
All persons	42.3	35.3	37.6	45.6	13.3	14.8	14.2	13.0

⁽a) Average time relates to people with at least 1 hospital episode and includes only days in hospital in the financial year.

Note: Table includes all states and territories except Western Australia and the Northern Territory.

Sources: Tables A49-A54.

⁽b) Aged care residents with missing RCS values were included in the total calculation. Hence, totals may be higher or lower than both of the low- and high-care figures.

⁽c) Gold cardholders whose ages were unknown were excluded from the analysis.

Table 6.2: Type of hospital used by DVA gold cardholders aged 70 years or older, 2002-03

		Hos	pital use			
	L					
	Low-care	High-care	Total ^(b)	Living in the community ^(a)		
Type of hospital used	Per cent of gold cardholders					
Public hospitals only	18.5	16.9	17.9	10.5		
Private hospitals only	14.9	11.6	13.4	26.3		
Both public and private hospitals	7.3	4.9	6.3	8.8		
Total	40.7	33.4	37.6	45.6		

⁽a) Gold cardholders whose ages were unknown were excluded from the analysis.

Note: Table includes all states and territories except Western Australia and the Northern Territory.

Sources: Tables A45-A48.

6.1 Use by gold cardholders living in RAC

During 2002–03, 38% of gold cardholders living in RAC used a hospital at some time (tables 6.1 and A45). Nearly one-fifth (18%) of gold cardholders living in RAC used a public hospital only, 13% a private hospital only and 6% used both a public and private hospital during the year.

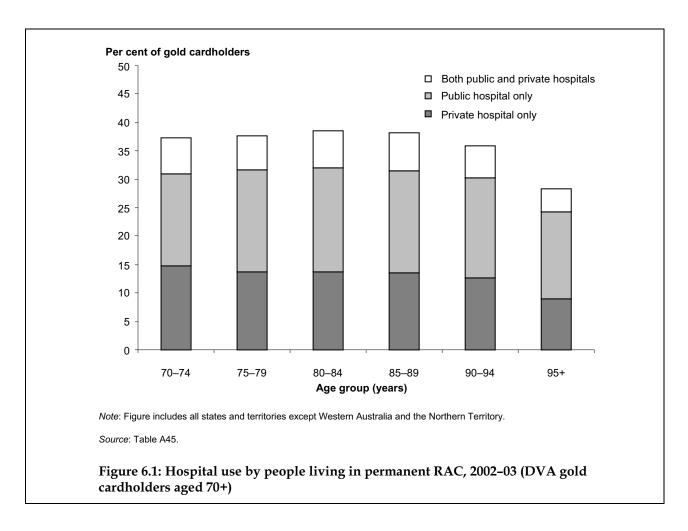
Women were less likely to use a hospital during the year than men, with 35% of women and 41% of men staying in a hospital in 2002–03 (Table A45). Most of the difference between women and men regarding hospital use can be accounted for by public hospital use, with 22% of women staying in a public hospital during the year compared with 27% of men (Table A69). Use of private hospitals was slightly lower for women (19%) than for men (21%) (Table A59).

There was little variation in hospital use across age groups for gold cardholders aged under 95 years (38%). However, gold cardholders aged 95 years or older were less likely than their younger counterparts to access a hospital during the year (28%) (Figure 6.1).

Of gold cardholders who used a hospital during 2002–03, 56% had 1 episode during the year, 24% had 2 episodes, 11% had 3 episodes and 5% had 4 episodes during the year. A further 5% of residents had 5 or more episodes in hospital throughout the year (Table A55). Of these periods of hospitalisation, 45% were for 1 day, 34% were 2–9 days long and 21% were 10 days or longer (Table A56).

On average, gold cardholders living in RAC spent 14.2 days in hospital during the year with 6.8 days per hospital episode. Female gold cardholders who used a hospital during 2002–03 on average spent a total of 14.3 days in hospital during the year, compared with 14.1 days for men (tables 6.1 and A49). Hospital episodes within the year were 13% longer for women than for men (7.3 days and 6.4 days, respectively). There were no significant age-related trends in total days spent in hospital by gold cardholders, but an increase in average episode length was seen with increasing age.

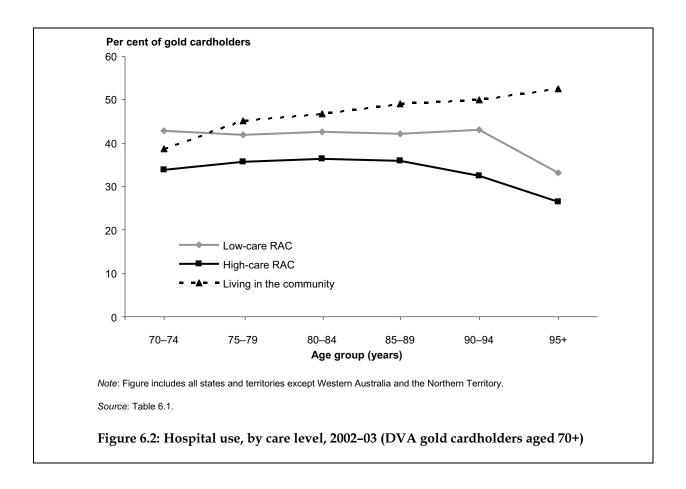
⁽b) Aged care residents with missing RCS values were included in the total calculation. Hence, totals may be higher or lower than both of the low- and high-care figures.



There was little difference between the proportion of male DVA disability pensioners hospitalised and the proportion of other male gold cardholders hospitalised during 2002–03 (41% and 39%, respectively). However, over the year, male DVA disability pensioners spent 10% more time in hospital than other male gold cardholders (14.6 and 13.3 days, respectively) (Table A53).

A higher proportion of low-care residents spent time in hospital during 2002–03 than high-care residents (42% and 35%, respectively) (Figure 6.2). This difference was seen across all age groups and in both men and women. However, among people hospitalised, low-care residents spent less time in hospital throughout the year than high-care residents (13.3 days and 14.8 days, respectively) (tables A50 and A51).

The average cost of hospitalisation during the year per patient was \$8,753, with decreasing cost observed with increasing age for men but not for women. (Table A79). Average hospital costs were 13% higher for male recipients of the Intermediate/Special DVA disability pension rate than for males who did not receive a DVA disability pension (Table A83).



Private hospital use

Twenty per cent of gold cardholders living in RAC used a private hospital at some stage during 2002–03 (Table A59). The oldest residents were the least likely to use a private hospital, with 13% of residents aged 95 years or older hospitalised in a private hospital during the year, while the youngest (those aged 70–74 years) were the most likely (especially for those in low-care) (Figure 6.3, tables A59–A61). Across the remaining age groups, there was little variation in the rate of private hospital use. The average number of days spent in private hospital during the year for all hospitalised residents was 13.5 days, with an average episode length of 7.2 days within the year. Episode length generally increased with age: those aged 75–79 had the shortest average episode length of 6.6 days, while those aged 95 and older had the longest average episode length of 10.7 days.

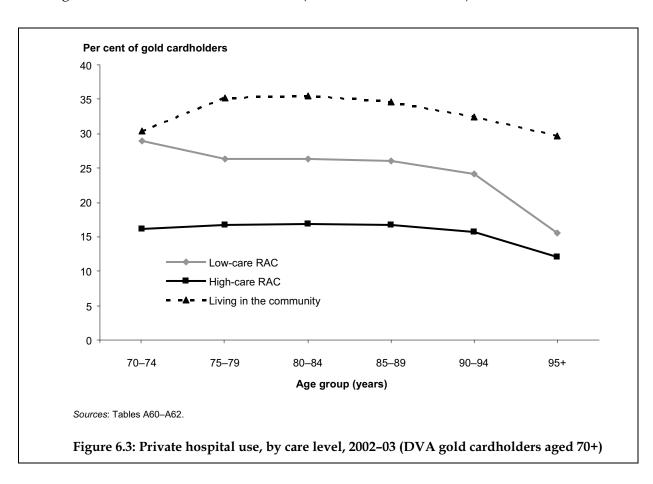
Among gold cardholders who used a private hospital, 65% had 1 episode in hospital during the year, 22% had 2 episodes, 7% had 3 episodes and 2% had 4 episodes. A further 3% had 5 or more episodes in a private hospital throughout the year (Table A65). Looking at these hospital episodes, 47% were for 1 day, 30% were 2–9 days long and 23% were 10 days or longer. The total time spent in private hospital by women tended to be longer than that spent by men: 26% of women's hospital episodes were 10 days or longer, compared with 20% of men's episodes (Table A66). The average length of time spent in private hospital during the year was 14.1 days for women (7.9 days per episode within the year) and 12.9 days for men (6.5 days per episode within the year) (Table A59).

A larger proportion of male DVA disability pensioners were hospitalised in private hospitals during 2002–03 than other male gold cardholders (22% and 19%, respectively). In addition,

male DVA disability pensioners spent more time in private hospital during the year than other male gold cardholders (13.3 and 12.0 days, respectively) (Table A63).

A higher proportion of low-care residents spent time in private hospitals during 2002–03 than high-care residents (26% and 16%, respectively). This difference was seen across all age groups and in both men and women. However, low-care residents generally spent less time in private hospitals throughout the year than high-care residents (12.1 days versus 14.6 days) (tables A60 and A61).

The average private hospital cost for the year per patient was \$7,005, with only minor differences between age groups (Table A79). However, the average annual private hospital costs were generally higher for male DVA disability pension recipients than for male non-recipients, ranging from 7% higher for recipients of the General rate to 18% higher for recipients of the Intermediate/Special rate (Table A83). The average annual private hospital cost for women was 6% higher than that for men, and the cost for high-care residents was 7% higher than that for low-care residents (tables A79, A80 and A81).



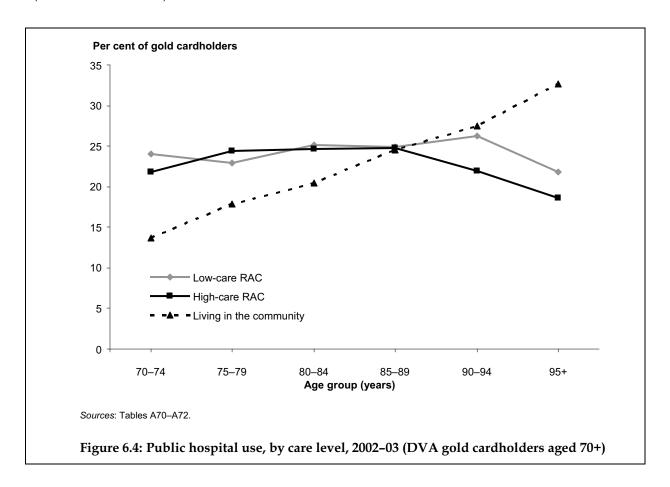
Public hospital use

Just under one-quarter (24%) of gold cardholding aged care residents used a public hospital at some stage during 2002–03 (Table A69). As with private hospitals, the oldest gold cardholders were the age group least likely to use a public hospital during the year (Figure 6.4). Just under one-fifth (19%) of residents aged 95 years or older had a period in a public hospital during the year, compared with 23% of those aged 70–74 years. The average number of days spent in public hospital during the year for all gold cardholding residents was 11.7 days, with an average episode length of 6.7 days within the year.

Two-thirds (66%) of hospitalised gold cardholders had 1 episode in a public hospital during the year, 21% had 2 episodes, 8% had 3 episodes and 3% had 4 episodes. A further 3% of hospitalised gold cardholders had 5 or more episodes in a public hospital throughout the year (Table A75). Of all public hospital episodes, 44% were single day episodes, 36% were 2–9 days long and 20% were 10 days or longer (Table A76).

Men and women spent a similar amount of time in public hospital during the year. During 2002–03 men had an average of 12.0 days in public hospitals and women 11.4 days. The average episode length for men was 6.5 days and for women 6.8 days (Table A69).

A similar proportion of low and high-care residents spent time in public hospitals during 2002–03 (25% and 24%, respectively). Similarly, time spent in public hospitals during the year was comparable for low- and high-care residents (11.2 days and 12.0 days, respectively) (tables A70 and A71).



There was little difference between the proportions of male DVA disability pensioners and other male gold cardholders hospitalised in public hospital during 2002–03 (28% and 27%, respectively). Male DVA disability pensioners spent slightly more time in public hospitals during the year than other male gold cardholders (12.4 days and 11.3 days, respectively) (Table A73).

The average public hospital cost for the year per patient was \$8,284, decreasing slightly with increasing age. The average annual public hospital cost for men was 10% higher than that for women, and was 10% higher for high-care residents than for low-care residents (tables A79–A81). Overall, annual public hospital costs for male DVA disability pensioners were 7% higher than those for other male gold cardholders. In particular, annual costs for gold cardholders receiving the Intermediate/Special rate were 17% higher than those for male gold cardholders not receiving a DVA disability pension (Table A83).

Likelihood of hospital use

In 2002–03, 38% of gold cardholders living in RAC used a hospital (Table A45). Age, sex, marital status, RCS care level, death during the year, a move into RAC during the year and the number of days in the year spent living in RAC all had a statistically significant effect on whether a gold cardholder living in RAC used a hospital during the year (see Appendix B and Table B1):

- The oldest gold cardholders (95 years or older) were less likely than those aged 70–74 years to use a hospital (OR=0.58, 95% CI 0.45–0.74).
- Women were less likely than men to use a hospital (OR=0.74, 95% CI 0.70-0.79).
- Married gold cardholders were less likely than other gold cardholders to use a hospital (OR=0.83, 95% CI 0.77-0.89).
- Gold cardholders living in high-care RAC were less likely than their low-care counterparts to use a hospital (OR=0.63, 95% CI 0.59–0.67).
- Gold cardholders who died during the year were far more likely than other gold cardholders to use a hospital (OR=3.71, 95% CI 3.38–4.07).
- Gold cardholders who moved into RAC during the year were more likely than other gold cardholders living in RAC to use a hospital (OR=1.28, 95% CI 1.17–1.39).
- As expected, the more time during the year that a gold cardholder spent living in RAC, the greater the likelihood of using a hospital within that period.

6.2 Use by gold cardholders living in the community

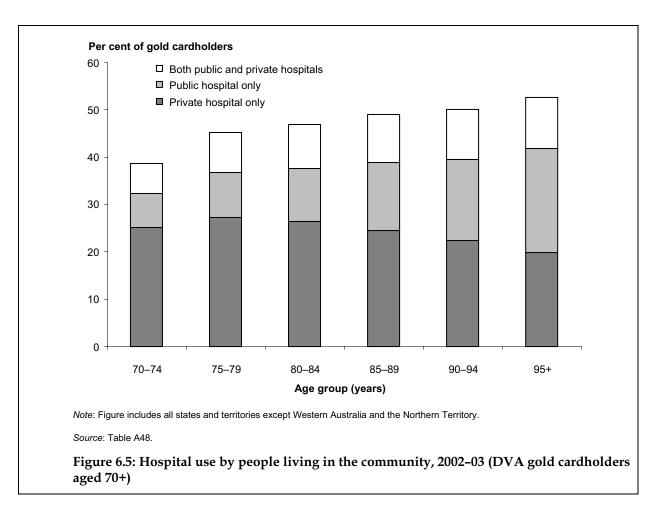
In 2002–03, just under one-half (46%) of gold cardholders living in the community spent some time in hospital (tables 6.1 and A48). Eleven per cent used public hospitals only, 26% private hospitals only and 9% used both public and private hospitals during the year.

Two-fifths (40%) of women and one-half (50%) of men used a hospital during 2002–03. Less than one-fifth (16%) of women spent time in a public hospital during the year, compared with 22% of men. Use of private hospitals was also lower for women (31%) than for men (38%) (Table A48).

Older gold cardholders were more likely to spend time in hospital than younger gold cardholders (Figure 6.5). For example, 39% of gold cardholders aged 70–74 years used a

hospital in 2002–03, compared with 53% of gold cardholders aged 95 years or older. Most of the increase in hospital use with age can be accounted for by increased use of public hospitals among older gold cardholders, with private hospital use tending to decrease with increasing age (tables A48 and A62).

Of gold cardholders who spent time in hospital during 2002–03, 51% had 1 episode in hospital during the year, 25% had 2 episodes, 12% had 3 episodes and 5% had 4 episodes. A further 8% of gold cardholders had 5 or more episodes in hospital throughout the year (Table A57). In terms of length of stay, 61% of the periods in hospital were for 1 day, 25% were for 2–9 days long, and 14% were for 10 days or longer (Table A58).



On average, gold cardholders living in the community spent 13.0 days in hospital during the year, with 5.3 days per hospital episode. Women who used a hospital during 2002–03 spent an average total of 12.7 days in hospital during the year and men 13.1 days. There was a significant increase in the total time spent in hospital with increasing age (Table A52): gold cardholders aged 95 years or older spent an average total of 25.8 days in hospital, which is 2.6 times more than the time spent by those aged 70–74 years (9.9 days). The average episode length for women (5.9 days) was 21% longer than that for men (4.9 days). As with the total time spent in hospital during the year, average episode length increased with increasing age. For example, the average episode in hospital for gold cardholders aged 95 years or older (13.1 days within the year) was 3.3 times the episode length for gold cardholders aged 70–74 years (3.9 days) (Table A52).

A larger proportion of male DVA disability pensioners than other male gold cardholders was hospitalised during 2002–03 (53% and 41%, respectively) (Table A54). Overall, hospitalised male DVA disability pensioners spent slightly more time in hospital during the year than male gold cardholders who did not receive a DVA disability pension (13.4 and 12.5 days, respectively). For men receiving the Intermediate/Special rate, the average time spent in hospital was 14.5 days, and for men receiving the EDA it was 17.9 days.

The average cost of hospitalisation during the year per patient was \$8,538, with greater hospitalisation costs for men (12% higher than women) or older gold cardholders (Table A82). Annual hospitalisation costs for male DVA disability pensioners were generally higher than those for men who didn't receive a DVA disability pension (18% higher for Intermediate/Special rate recipients and 40% higher for EDA recipients) (Table A84).

Private hospital use

Thirty-one per cent of women and 38% of men used a private hospital at some stage during 2002–03 (Table A62). The likelihood of private hospital use increased with increasing age, peaking during the ages 75–89 years and decreasing slightly for older ages. The average number of days spent in private hospital during the year for hospitalised cardholders was 9.8 days with an average episode length of 4.8 days within the year. The total length of time spent in private hospital during the year increased strongly with increasing age, with the oldest gold cardholders spending nearly 3 times as long in private hospital than the youngest age group.

Of gold cardholders who spent time in a private hospital during the year, 59% had 1 period of care, 24% had 2 periods, 9% had 3 periods and 4% had 4 periods of care. A further 4% had 5 or more periods of care in a private hospital throughout the year (Table A67). Nearly two-thirds (63%) of private hospital episodes were for 1 day, 23% were for 2–9 days, and 14% were for 10 days or more (Table A68).

There was only a small difference between men and women with respect to total time spent in private hospital during the year (9.7 days and 9.9 days, respectively). However, episode lengths within the year were 22% longer for women (5.5 days) than for men (4.5 days) (Table A62).

A larger proportion of male DVA disability pension recipients than non-recipients used a private hospital during 2002–03 (41% and 31%, respectively) (Table A64). In addition, male DVA disability pension recipients spent approximately 15% more time in private hospital during the year than non-recipients (10.1 and 8.9 days, respectively).

The average annual cost of private hospitalisation was \$6,694 per patient (Table A82). Annual private hospital costs were generally higher for older gold cardholders and male DVA disability pensioners (Table A84). For example, the average annual cost of private hospital use for those aged 70–74 years was \$5,953 compared with \$9,057 for those aged 95 years or older.

Public hospital use

Approximately one-fifth (19%) of gold cardholders living in the community spent time in public hospital at some stage during 2002–03 (Table A72). Unlike private hospitals, increasing age was associated with a higher likelihood of public hospital use during the year: 14% of gold cardholders aged 70–74 years used a public hospital during the year, compared with 33% of those aged 95 years or older. The average total time spent in public hospital during the year was 13.1 days, with an average episode length of 6.1 days within the year. Older gold cardholders spent more time in public hospital during the year than younger gold cardholders: gold cardholders aged 70–74 years spent, on average, a total of 10.5 days in public hospital during the year (with 4.3 days per episode within the year), while those aged 95 years or older spent an average of 20.9 days in public hospital during the year (with 14.5 days per episode within the year).

Among gold cardholders using public hospitals during 2002–03, 65% had 1 period of care, 20% had 2 periods, 8% had 3 periods and 3% had 4 periods of care. A further 4% had 5 or more episodes in public hospital throughout the year (Table A77). Over one-half (55%) of these periods in public hospital were for 1 day, 29% were for 2–9 days and 16% were for 10 days or more (Table A78).

While men and women spent approximately the same amount of total time in public hospital (13.2 and 12.8 days, respectively, over the year), women had longer episodes of care than men (6.9 days and 5.8 days within the year, respectively) (Table A72).

A slightly larger proportion of male DVA disability pension recipients than non-recipients used a public hospital during 2002–03 (23% and 19%, respectively) (Table A74). Interestingly, recipients of the General rate spent less time in public hospital during the year than those who didn't receive a DVA disability pension (12.0 days and 13.8 days, respectively), while those receiving the Intermediate/Special rate or the EDA spent more time in hospital than non-recipients of a DVA disability pension (14.0 and 15.4 days compared with 13.8 days, respectively).

The average public hospital cost during the year per patient was \$8,262, with little difference with age, apart from the oldest age group, whose annual costs were 59% higher than those of the youngest age group compared with 36% higher in 2001–02. Due to the small numbers of gold cardholders aged 95 years or older, such figures are likely to have high variability from year to year. The average annual public hospital cost for men was 12% higher than that for women (Table A82). Annual public hospital costs for male recipients of the Intermediate/Special DVA disability pension rate were 9% higher than costs for male non-recipients of a DVA disability pension, while costs for EDA recipients were 15% higher (Table A84).

Likelihood of hospital use

In 2002–03, 46% of gold cardholders living in the community used a hospital (Table A48). Using logistic regression analysis to investigate which demographic and personal characteristics are associated with the likelihood of a person using a hospital during the year, it was found that age, sex, prisoner of war status, death during the year, a move into RAC during the year and the number of days in the year spent living in the community all had a statistically significant effect on whether a gold cardholder used a hospital during the year while living in the community (see Appendix B and Table B2). In summary:

- All age groups, apart from those aged 95 years or older, were more likely than those aged 70–74 years to use a hospital.
- Women were less likely than men to use a hospital (OR=0.73, 95% CI 0.72-0.75).
- Former prisoners of war were more likely than other gold cardholders to use a hospital (OR=1.92, 95% CI 1.18–3.12).
- Gold cardholders who died during the year were much more likely than other gold cardholders to use a hospital (OR=12.27, 95% CI 11.42–13.18).
- Gold cardholders who moved into RAC during the year were much more likely than other gold cardholders living in the community to use a hospital (OR=5.09, 95% CI 4.73–5.47).
- As expected, the more time during the year that a gold cardholder spent living in the community, the greater the likelihood was of using a hospital in that period.

6.3 Episode length in hospital

Survival analysis was carried out to determine which characteristics were related to gold cardholders having longer episodes in hospital. The effects of a range of variables were examined, including, whether the gold cardholder died during the year and whether the gold cardholder moved into RAC during the year (see Section 1.3). Three distinct models were used to help identify differences between residency sectors: model A was fitted for all gold cardholders; model B for gold cardholders living in permanent RAC; and model C for those living in the community. It should be noted that a reduced set of variables was available for models A and C compared with model B (see Appendix B for a complete list of variables and details of the models used).

There were some notable differences between gold cardholders living in RAC and those living in the community when it came to hospital episode length (Table B2):

- Episodes for gold cardholders living in RAC were 41% longer than for those living in the community, controlling for all other available variables (p<0.0001, 95% CI 1.39–1.44; Model A).
- In both the community and RAC, there was a significant difference in the length of episodes between private and public hospital stays:
 - For gold cardholders living in the community, public hospital episodes were 13% longer than private hospital episodes (p<0.0001, 95% CI 1.12–1.15; Model C).
 - For gold cardholders living in RAC, public hospital episodes were 9% shorter than private hospital episodes (p<0.0001, 95% CI 0.88–0.95; Model B).
- Sex had a statistically significant effect on episode length for gold cardholders living in the community, but not for those living in RAC. In particular, for gold cardholders living in the community, women's episodes were 23% longer than men's episodes (p<0.0001, 95% CI 1.22–1.25; Model C).
- Age played a much larger role in episode length for gold cardholders living in the community than for those living in RAC:
 - For gold cardholders living in the community, increasing age was significantly associated with increasing episode lengths. Episodes ranged

from 15% longer for gold cardholders aged 75-79 years (p<0.0001, 95% CI 1.13–1.17) to twice as long for gold cardholders aged 90–94 years when compared with episodes for those aged 70–74 years (p<0.0001, 95% CI 1.97–2.15; Model C).

- For gold cardholders living in RAC, those aged 75–84 experienced shorter hospital episodes than those aged 70–74 years (Model B). In particular, episodes for those aged 75–79 years were 16% shorter (p<0.005, 95% CI 0.75–0.94) and episodes for those aged 80–84 years were 14% shorter (p<0.01, 95% CI 0.77–0.96) than episodes for those aged 70–74 years.
- RCS care level had a significant effect on episode length: episodes for gold cardholders living in high-care RAC were 43% longer than episodes for low-care gold cardholders living in RAC (p<0.0001 95% CI 1.38–1.48; Model B).
- Episodes for married gold cardholders living in RAC were 6% shorter than those for other gold cardholding residents (p<0.01, 95% CI 0.90–0.98; Model B).
- Episodes for gold cardholders living in RAC whose country of birth was outside of Australia were 10% longer than episodes for gold cardholding residents who were born in Australia (p<0.01, 95% CI 1.03–1.19; Model B).
- Death at the end of a hospital episode was associated with longer hospital episodes for gold cardholders living in the community:
 - Gold cardholders in the community who died in hospital had episodes which were 3.5 times as long as episodes for other gold cardholders in the community (p<0.0001, 95% CI 3.36–3.61; Model C).
 - There was no difference for gold cardholders living in RAC (95% CI 0.91–1.05; Model B).
- Gold cardholders who moved into RAC during the year had episodes which were 2.73 times longer than episodes for other gold cardholders (p<0.0001, 95% CI 2.67-2.79; Model A).

6.4 Comparing use in RAC and in the community

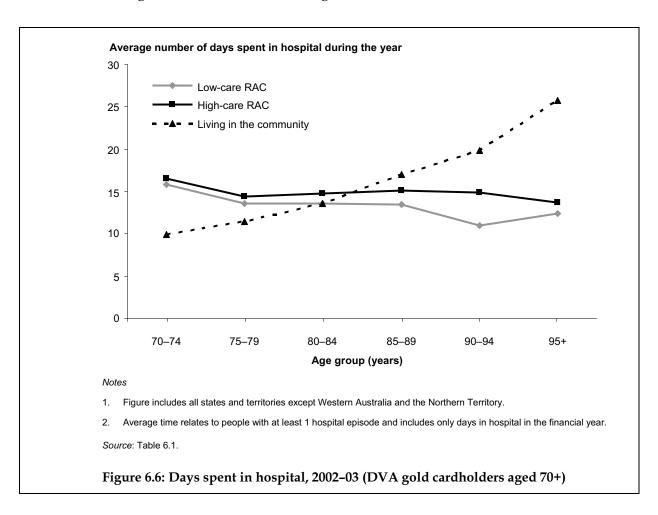
During 2002–03, 46% of gold cardholders living in the community and 38% of gold cardholders living in RAC used hospital services at some stage (table A45 and A48). Men in both groups of gold cardholders experienced higher rates of hospitalisation than females.

Looking across age groups, while hospital use varied little with age for gold cardholders living in RAC, it increased with increasing age for gold cardholders living in the community (Figure 6.2).

A much smaller proportion of gold cardholders living in RAC used private hospitals than those living in the community (20% and 35%, respectively), while a higher proportion of gold cardholders living in RAC used public hospitals (24% and 19%, respectively) (figures 6.3 and 6.4). For gold cardholders living in RAC, the rate of public hospital use was similar across age groups, while for those living in the community, hospitalisation increased sharply with age. On the other hand, private hospital use decreased slightly with age for gold cardholders living in RAC, while for those living in the community, use of such services increased with age to peak in the 80–84 year age group, and then declined slightly for the older age groups.

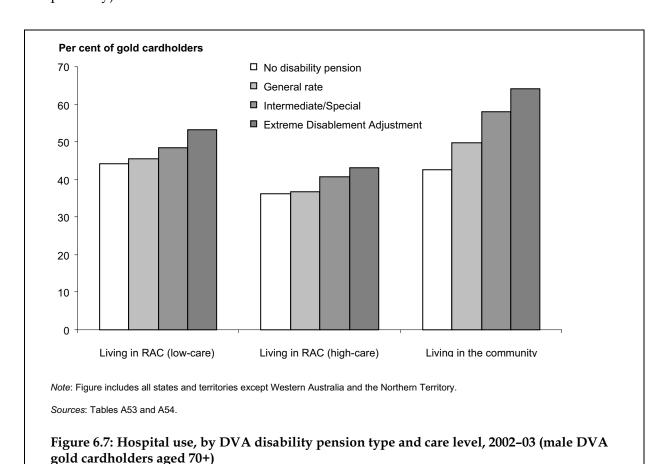
Total time spent in hospital during the year was more strongly associated with age for gold cardholders living in the community than for those living in RAC (Figure 6.6). In addition, gold cardholders aged under 85 years and living in RAC generally spent more time per episode and total time in hospital throughout the year than those living in the community. For older ages, the reverse was true (tables A49 and A52).

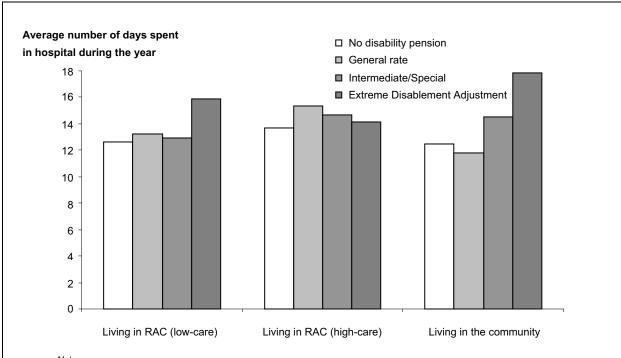
Several significant differences in hospital episode length were observed between gold cardholders living in RAC and those living in the community (table B2). Controlling for all other available variables, episodes for aged care residents were 41% longer than those for gold cardholders living in the community. Public hospital episodes for gold cardholders living in the community were 13% longer than private hospital episodes, while public hospital episode lengths were 9% shorter than private hospital episodes for gold cardholders living in RAC. Women living in the community had hospital episodes that were 23% longer than episodes for men in the community, while there was no difference in episode length between men and women in RAC (tables A49 and A52). Gold cardholders making the transition into RAC during the year had hospital episodes 2.73 times longer than episodes for other gold cardholders. For gold cardholders living in the community, death at the end of a hospital episode was associated with a threefold increase in episode length, while for gold cardholders living in RAC, death was not a significant factor.



Men receiving a DVA disability pension had higher hospital use than other male gold cardholders. The differences in hospital use for men in the various DVA disability pension categories were greater among those living in the community than for those living in RAC: among men living in the community, hospital use ranged from 43% for non-recipients of a DVA disability pension to 64% for EDA recipients; for gold cardholders living in RAC, hospital use ranged from 39% for non-recipients of a DVA disability pension to 46% for EDA recipients (Figure 6.7). Male DVA disability pensioners also spent differing lengths of time in hospital during the year depending on whether they were low-care or high-care residents in RAC or living in the community (Figure 6.8).

Average annual hospitalisation costs were similar for gold cardholders living in RAC and for those living in the community (\$8,753 and \$8,538, respectively) (tables A79 and A82). Hospital costs increased with increasing age for gold cardholders living in the community, but varied little across ages for those living in RAC. Among gold cardholders living in the community, hospitalisation costs for men were 12% higher than those for women (\$8,917 and \$7,934, respectively), compared with 3% higher for men living in RAC (\$8,888 and \$8,609, respectively).





Notes

- 1. Figure includes all states and territories except Western Australia and the Northern Territory.
- 2. Average time relates to people with at least 1 hospital episode and includes only days in hospital in the financial year.

Sources: Tables A53 and A54.

Figure 6.8: Days spent in hospital, by DVA disability pension type and care level, 2002–03 (DVA gold cardholders aged 70+)

Appendix A Appendix tables

Table A1: DVA gold cardholders who spent some time living in permanent RAC, 2001-02 to 2003-04

Sex/age	2001–02	2002-03	2003-04	2001–02	2002-03	2003-04
Females		Number			Per cent	
Under 65	38	35	37	0.3	0.3	0.3
65–69	63	57	45	0.5	0.4	0.3
70–74	499	428	387	4.3	3.2	2.7
75–79	2,019	2,130	1,990	17.5	16.0	13.7
80–84	3,399	4,088	4,565	29.5	30.7	31.3
85–89	3,269	3,976	4,492	28.4	29.9	30.8
90–94	1,628	1,942	2,375	14.1	14.6	16.3
95+	608	655	681	5.3	4.9	4.7
Total females	11,523	13,311	14,572	100.0	100.0	100.0
Males						
Under 65	47	55	50	0.4	0.5	0.4
65–69	51	41	41	0.4	0.3	0.3
70–74	186	179	142	1.6	1.5	1.1
75–79	2,972	2,423	1,847	26.0	20.0	14.8
80–84	4,115	4,678	5,095	36.1	38.7	40.7
85–89	2,837	3,242	3,703	24.9	26.8	29.6
90–94	1,033	1,257	1,406	9.1	10.4	11.2
95+	172	212	234	1.5	1.8	1.9
Total males	11,413	12,087	12,518	100.0	100.0	100.0
Persons						
Under 65	85	90	87	0.4	0.4	0.3
65–69	114	98	86	0.5	0.4	0.3
70–74	685	607	529	3.0	2.4	2.0
75–79	4,991	4,553	3,837	21.8	17.9	14.2
80–84	7,514	8,766	9,660	32.8	34.5	35.7
85–89	6,106	7,218	8,195	26.6	28.4	30.3
90–94	2,661	3,199	3,781	11.6	12.6	14.0
95+	780	867	915	3.4	3.4	3.4
Total	22,936	25,398	27,090	100.0	100.0	100.0

Table A2: DVA gold cardholders who spent some time living in the community, 2001–02 to 2003–04

Sex/age	2001–02	2002-03	2003-04	2001–02	2002-03	2003-04
Females		Number	-		Per cent	
Under 65	6,253	6,171	5,495	5.9	5.7	5.2
65–69	5,582	4,841	3,931	5.3	4.4	3.7
70–74	20,680	17,738	13,769	19.7	16.3	13.0
75–79	36,799	36,894	33,753	35.0	33.9	31.8
80–84	24,098	28,817	31,889	22.9	26.4	30.0
85–89	9,259	11,497	13,489	8.8	10.6	12.7
90-94	2,072	2,611	3,374	2.0	2.4	3.2
95+	352	397	495	0.3	0.4	0.5
Total females	105,095	108,966	106,195	100.0	100.0	100.0
Males						
Under 65	24,522	26,534	25,095	15.5	16.8	16.7
65–69	4,652	4,598	4,309	2.9	2.9	2.9
70–74	8,200	8,267	7,205	5.2	5.2	4.8
75–79	66,052	53,675	39,015	41.6	33.9	26.0
80–84	41,623	48,023	53,869	26.2	30.4	35.9
85–89	11,516	14,451	17,489	7.3	9.1	11.6
90–94	1,904	2,425	2,963	1.2	1.5	2.0
95+	169	206	276	0.1	0.1	0.2
Total males	158,638	158,179	150,221	100.0	100.0	100.0
Persons						
Under 65	30,775	32,705	30,590	11.7	12.2	11.9
65–69	10,234	9,439	8,240	3.9	3.5	3.2
70–74	28,880	26,005	20,974	11.0	9.7	8.2
75–79	102,851	90,569	72,768	39.0	33.9	28.4
80–84	65,721	76,840	85,758	24.9	28.8	33.4
85–89	20,775	25,948	30,978	7.9	9.7	12.1
90–94	3,976	5,036	6,337	1.5	1.9	2.5
95+	521	603	771	0.2	0.2	0.3
Total persons	263,733	267,145	256,416	100.0	100.0	100.0

Note: Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

Table A3: DVA gold cardholders living in the community at all times, 2001–02 to 2003–04

Sex/age	2001–02	2002-03	2003-04	2001–02	2002-03	2003-04
Females		Number			Per cent	
Under 65	6,245	6,164	5,487	6.1	5.8	5.4
65–69	5,567	4,824	3,917	5.5	4.6	3.8
70–74	20,524	17,574	13,631	20.1	16.7	13.3
75–79	36,155	36,222	33,132	35.4	34.4	32.4
80–84	23,093	27,622	30,561	22.6	26.2	29.9
85–89	8,426	10,478	12,300	8.3	9.9	12.0
90–94	1,755	2,233	2,840	1.7	2.1	2.8
95+	262	302	402	0.3	0.3	0.4
Total females	102,027	105,419	102,270	100.0	100.0	100.0
Males						
Under 65	24,514	26,514	25,084	15.8	17.2	17.2
65–69	4,636	4,583	4,293	3.0	3.0	2.9
70–74	8,129	8,200	7,150	5.3	5.3	4.9
75–79	64,979	52,756	38,313	42.0	34.3	26.3
80–84	40,179	46,367	51,907	26.0	30.1	35.6
85–89	10,621	13,379	16,224	6.9	8.7	11.1
90–94	1,647	2,069	2,580	1.1	1.3	1.8
95+	127	152	227	0.1	0.1	0.2
Total males	154,832	154,020	145,778	100.0	100.0	100.0
Persons						
Under 65	30,759	32,678	30,571	12.0	12.6	12.3
65–69	10,203	9,407	8,210	4.0	3.6	3.3
70–74	28,653	25,774	20,781	11.2	9.9	8.4
75–79	101,134	88,978	71,445	39.4	34.3	28.8
80–84	63,272	73,989	82,468	24.6	28.5	33.2
85–89	19,047	23,857	28,524	7.4	9.2	11.5
90–94	3,402	4,302	5,420	1.3	1.7	2.2
95+	389	454	629	0.2	0.2	0.3
Total persons	256,859	259,439	248,048	100.0	100.0	100.0

Note: Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

Table A4: DVA disability pensioners: gold cardholders of all ages, by sex and DVA disability pension type, 2001–02 to 2003–04

Sex/DVA disability pension type	2001–02	2002–03	2003–04	2001–02	2002–03	2003–04
Females		Number			Per cent	
None	110,414	115,382	113,569	97.2	97.2	97.2
General rate	2,522	2,666	2,607	2.2	2.2	2.2
Intermediate/Special	375	393	391	0.3	0.3	0.3
EDA	239	289	275	0.2	0.2	0.2
Total females	113,550	118,730	116,842	100.0	100.0	100.0
Males						
None	51,855	48,660	44,413	31.2	29.3	28.1
General rate	72,325	71,700	67,851	43.5	43.2	42.9
Intermediate/Special	27,818	29,351	28,923	16.7	17.7	18.3
EDA	14,247	16,396	17,109	8.6	9.9	10.8
Total males	166,245	166,107	158,296	100.0	100.0	100.0
All persons						
None	162,269	164,042	157,982	58.0	57.6	57.4
General rate	74,847	74,366	70,458	26.8	26.1	25.6
Intermediate/Special	28,193	29,744	29,314	10.1	10.4	10.7
EDA	14,486	16,685	17,384	5.2	5.9	6.3
Total persons	279,795	284,837	275,138	100.0	100.0	100.0

Table A5: DVA disability pensioners in RAC: gold cardholders of all ages who spent some time living in permanent RAC, by sex and DVA disability pension type, 2001–02 to 2003–04

Sex/DVA disability	2001–02	2002–03	2003–04	2001–02	2002–03	2003–04
pension type	2001-02	2002-03	2003-04	2001-02	2002-03	2003-04
Females		Number			Per cent	
None	11,133	12,892	14,125	96.6	96.9	96.9
General rate	292	313	344	2.5	2.4	2.4
Intermediate/Special	49	48	48	0.4	0.4	0.3
EDA	49	58	55	0.4	0.4	0.4
Total females	11,523	13,311	14,572	100.0	100.0	100.0
Males						
None	4,144	4,307	4,329	36.3	35.6	34.6
General rate	4,723	4,963	5,227	41.4	41.1	41.8
Intermediate/Special	1,002	999	1,001	8.8	8.3	8.0
EDA	1,544	1,818	1,961	13.5	15.0	15.7
Total males	11,413	12,087	12,518	100.0	100.0	100.0
All persons						
None	15,277	17,199	18,454	66.6	67.7	68.1
General rate	5,015	5,276	5,571	21.9	20.8	20.6
Intermediate/Special	1,051	1,047	1,049	4.6	4.1	3.9
EDA	1,593	1,876	2,016	6.9	7.4	7.4
Total persons	22,936	25,398	27,090	100.0	100.0	100.0

Table A6: DVA disability pensioners in the community: gold cardholders of all ages who spent some time living in the community, by DVA disability pension type, 2001–02 to 2003–04

Sex/DVA disability pension type	2001–02	2002–03	2003–04	2001–02	2002–03	2003–04
Females		Number			Per cent	
None	102,239	105,929	103,247	97.3	97.2	97.2
General rate	2,318	2,438	2,363	2.2	2.2	2.2
Intermediate/Special	336	355	353	0.3	0.3	0.3
EDA	202	244	232	0.2	0.2	0.2
Total females	105,095	108,966	106,195	100.0	100.0	100.0
Males						
None	49,005	45,772	41,522	30.9	28.9	27.6
General rate	69,228	68,444	64,523	43.6	43.3	43.0
Intermediate/Special	27,132	28,674	28,274	17.1	18.1	18.8
EDA	13,273	15,289	15,902	8.4	9.7	10.6
Total males	158,638	158,179	150,221	100.0	100.0	100.0
All persons						
None	151,244	151,701	144,769	57.3	56.8	56.5
General rate	71,546	70,882	66,886	27.1	26.5	26.1
Intermediate/Special	27,468	29,029	28,627	10.4	10.9	11.2
EDA	13,475	15,533	16,134	5.1	5.8	6.3
Total persons	263,733	267,145	256,416	100.0	100.0	100.0

Table A7: GP/LMO services in RAC: use of consultations by DVA gold cardholders living in permanent RAC, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002-	03	2003-	2003–04	
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	93.2	15.3	93.7	14.1	91.2	15.0	
75–79	93.0	15.0	92.4	14.6	93.5	14.7	
80–84	93.1	14.6	92.7	14.3	93.0	14.6	
85–89	94.1	14.5	93.3	14.1	94.1	14.4	
90-94	94.5	14.9	92.0	14.4	93.7	14.3	
95+	92.8	14.1	93.3	14.0	93.7	14.2	
Total females	93.5	14.7	92.7	14.3	93.5	14.5	
Males							
70–74	90.9	16.1	89.9	14.7	92.3	15.2	
75–79	94.6	14.3	94.3	14.2	94.5	15.0	
80–84	94.9	14.1	94.7	13.9	95.8	13.8	
85–89	95.6	14.2	95.6	13.9	95.3	14.3	
90–94	95.7	13.9	95.2	13.2	95.0	14.6	
95+	94.8	13.6	92.0	12.7	93.6	14.3	
Total males	95.0	14.2	94.7	13.9	95.2	14.2	
Persons							
70–74	92.6	15.5	92.6	14.3	91.5	15.0	
75–79	94.0	14.6	93.4	14.4	94.0	14.8	
80-84	94.1	14.3	93.7	14.1	94.5	14.2	
85–89	94.8	14.4	94.3	14.0	94.7	14.4	
90–94	95.0	14.5	93.2	13.9	94.2	14.4	
95+	93.2	14.0	93.0	13.7	93.7	14.2	
Total persons	94.3	14.4	93.6	14.1	94.3	14.4	

Table A8: GP/LMO services in low-care RAC: use of consultations by DVA gold cardholders living in permanent RAC, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002–	03	2003–04	
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number
70–74	97.3	15.8	94.8	14.1	93.6	14.3
75–79	95.6	15.2	95.8	14.2	95.9	14.1
80-84	95.5	13.9	93.8	13.8	94.5	13.7
85–89	95.4	14.3	94.7	13.4	95.6	13.6
90-94	96.9	14.0	94.1	14.4	95.8	14.2
95+	97.2	14.1	91.0	13.8	96.5	13.9
Total females	95.8	14.4	94.4	13.8	95.3	13.8
Males						
70–74	91.7	13.1	90.4	12.8	90.9	13.9
75–79	95.7	14.1	95.5	12.9	96.9	13.7
80-84	96.5	14.1	95.8	13.6	96.9	13.8
85–89	97.6	13.9	96.3	13.6	96.1	14.3
90–94	94.8	13.7	96.4	13.2	95.6	14.3
95+	97.7	13.9	93.5	11.4	97.0	17.1
Total males	96.4	14.0	95.9	13.4	96.4	14.1
Persons						
70–74	95.9	15.1	93.8	13.8	92.9	14.2
75–79	95.7	14.6	95.6	13.6	96.3	13.9
80–84	95.9	14.0	94.7	13.7	95.6	13.8
85–89	96.4	14.1	95.4	13.5	95.8	13.9
90–94	96.1	13.9	95.1	13.9	95.7	14.2
95+	97.3	14.1	91.7	13.1	96.6	15.0
Total persons	96.1	14.2	95.0	13.6	95.7	13.9

Table A9: GP/LMO services in high-care RAC: use of consultations by DVA gold cardholders living in permanent RAC, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002-	03	2003–04		
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	90.7	15.1	93.7	14.2	89.8	15.5	
75–79	91.5	14.9	90.8	14.9	92.4	15.1	
80–84	91.7	15.2	92.0	14.8	92.1	15.3	
85–89	93.3	14.7	92.4	14.7	93.3	15.0	
90–94	93.5	15.3	90.9	14.4	92.8	14.4	
95+	91.5	14.1	94.1	14.1	93.1	14.2	
Total females	92.3	14.9	91.9	14.7	92.6	15.0	
Males							
70–74	91.8	17.6	90.4	15.6	92.9	15.8	
75–79	94.2	14.5	93.8	14.8	93.7	15.6	
80–84	94.6	14.2	94.2	14.2	95.5	13.9	
85–89	94.6	14.6	95.3	14.2	95.1	14.3	
90–94	96.1	14.1	94.7	13.3	94.8	14.9	
95+	93.5	13.9	91.7	13.3	92.2	13.2	
Total males	94.6	14.4	94.3	14.2	94.9	14.4	
Persons							
70–74	91.0	15.8	92.6	14.7	90.7	15.6	
75–79	93.2	14.6	92.5	14.9	93.0	15.3	
80–84	93.4	14.6	93.3	14.4	94.0	14.5	
85–89	93.9	14.6	93.7	14.4	94.1	14.7	
90–94	94.5	14.9	92.4	14.0	93.5	14.5	
95+	91.9	14.1	93.6	13.9	92.9	14.0	
Total persons	93.5	14.7	93.1	14.4	93.7	14.7	

Table A10: GP/LMO services in the community: use of consultations by DVA gold cardholders living in the community, by age and sex, 2001–02 to 2003–04

Sex/age Females	2001–	02	2002-	-03	2003–04		
	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	96.0	11.5	96.2	11.4	97.1	11.8	
75–79	96.4	12.2	96.8	12.2	97.4	12.6	
80-84	96.3	12.8	96.7	13.0	97.4	13.5	
85–89	95.5	13.6	96.2	13.4	96.7	13.8	
90-94	93.1	13.4	94.6	13.7	94.3	13.5	
95+	91.2	14.2	92.4	13.5	94.5	13.7	
Total females	96.1	12.4	96.5	12.5	97.1	13.0	
Males							
70–74	94.8	13.1	94.8	11.8	96.5	12.0	
75–79	97.2	12.7	97.4	12.8	97.7	13.1	
80-84	97.2	13.6	97.4	13.5	97.6	13.8	
85–89	95.8	14.0	96.5	14.0	96.8	14.2	
90-94	92.6	14.0	94.4	13.8	95.2	14.0	
95+	94.1	13.5	92.2	13.6	92.8	13.9	
Total males	96.8	13.1	97.1	13.2	97.4	13.5	
Persons							
70–74	95.7	11.9	95.8	11.6	96.9	11.9	
75–79	96.9	12.5	97.2	12.6	97.6	12.9	
80–84	96.9	13.3	97.1	13.3	97.5	13.7	
85–89	95.6	13.8	96.3	13.7	96.7	14.0	
90–94	92.9	13.7	94.5	13.8	94.7	13.7	
95+	92.1	14.0	92.4	13.6	93.9	13.8	
Total persons	96.5	12.8	96.8	12.9	97.3	13.3	

Notes

^{1.} Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average relates to people with at least 1 consultation.

Table A11: GP/LMO services in RAC by DVA disability pensioners: use of consultations by male DVA gold cardholders aged 70 years or older living in permanent RAC, by care level and DVA disability pension type, 2001–02 to 2003–04

Care level/ DVA disability pension type	2001–	02	2002-	-03	2003–04		
Low-care RAC	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
None	95.2	12.6	94.5	12.1	96.0	12.8	
General rate	97.0	14.3	96.1	13.7	96.3	14.2	
Intermediate/Special	97.1	15.8	97.8	15.4	96.6	15.0	
EDA	97.4	16.0	97.7	14.7	97.8	16.5	
Low-care males	96.4	14.0	95.9	13.4	96.4	14.1	
High-care RAC							
None	92.9	13.8	92.1	13.6	93.4	13.7	
General rate	95.1	14.4	95.2	14.2	95.2	14.5	
Intermediate/Special	97.1	15.8	96.8	15.5	97.3	15.8	
EDA	95.6	15.0	95.9	14.8	96.3	14.8	
High-care males	94.6	14.4	94.3	14.2	94.9	14.4	
All RAC							
None	93.5	13.3	92.8	13.1	94.1	13.3	
General rate	95.6	14.3	95.5	14.0	95.5	14.4	
Intermediate/Special	97.0	15.8	96.9	15.4	96.9	15.5	
EDA	96.0	15.2	96.4	14.7	96.5	15.2	
All RAC males	95.0	14.2	94.8	13.9	95.3	14.2	

Table A12: GP/LMO services in the community by DVA disability pensioners: use of consultations by male DVA gold cardholders aged 70 years or older living in the community, by DVA disability pension type, 2001–02 to 2003–04

	2001-	-02	2002	-03	2003–04		
DVA disability pension type	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
None	94.8	10.8	95.1	10.8	95.6	11.1	
General rate	98.0	13.4	98.0	13.3	98.2	13.6	
Intermediate/Special	98.3	16.9	98.4	16.7	98.2	17.0	
EDA	98.1	17.6	98.1	17.3	98.4	17.4	
Total males	96.8	13.1	97.1	13.2	97.4	13.5	

Notes

^{1.} Table excludes gold cardholders whose ages were unknown (10, 10 and 5 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average relates to people with at least 1 consultation.

Table A13: Amount of GP/LMO use in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of GP/LMO consultations received, 2003–04

	GP/LMO consultations										
Sex/age	0	1–4	5–9	10–14	15–19	20–24	25–29	30–39	40–49	50+	Total
Females	Number of gold cardholders										
70–74	34	59	71	75	50	43	24	12	11	8	387
75–79	129	316	414	386	271	171	118	103	50	32	1,990
80–84	319	709	986	835	636	390	266	256	100	68	4,565
85–89	265	716	941	925	612	386	263	231	81	72	4,492
90–94	149	373	529	460	334	196	129	126	42	37	2,375
95+	43	95	142	150	107	58	35	29	18	4	681
Total females	939	2,268	3,083	2,831	2,010	1,244	835	757	302	221	14,490
Males											
70–74	11	32	25	14	20	16	8	8	5	3	142
75–79	102	293	392	344	255	162	109	102	56	32	1,847
80–84	216	907	1,182	965	667	460	294	245	90	69	5,095
85–89	173	635	821	705	487	341	207	194	95	45	3,703
90–94	70	238	303	276	182	128	75	79	29	26	1,406
95+	15	40	45	51	32	19	13	10	6	3	234
Total males	587	2,145	2,768	2,355	1,643	1,126	706	638	281	178	12,427
Persons											
70–74	45	91	96	89	70	59	32	20	16	11	529
75–79	231	609	806	730	526	333	227	205	106	64	3,837
80–84	535	1,616	2,168	1,800	1,303	850	560	501	190	137	9,660
85–89	438	1,351	1,762	1,630	1,099	727	470	425	176	117	8,195
90–94	219	611	832	736	516	324	204	205	71	63	3,781
95+	58	135	187	201	139	77	48	39	24	7	915
Total persons	1,526	4,413	5,851	5,186	3,653	2,370	1,541	1,395	583	399	26,917

(continued)

Table A13 (continued): Amount of GP/LMO use in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of GP/LMO consultations received, 2003–04

	GP/LMO consultations											
Sex/age	0	1–4	5–9	10–14	15–19	20–24	25–29	30–39	40–49	50+	Total	
Females					Per cent o	of gold ca	rdholders					
70–74	8.8	15.2	18.3	19.4	12.9	11.1	6.2	3.1	2.8	2.1	100.0	
75–79	6.5	15.9	20.8	19.4	13.6	8.6	5.9	5.2	2.5	1.6	100.0	
80–84	7.0	15.5	21.6	18.3	13.9	8.5	5.8	5.6	2.2	1.5	100.0	
85–89	5.9	15.9	20.9	20.6	13.6	8.6	5.9	5.1	1.8	1.6	100.0	
90–94	6.3	15.7	22.3	19.4	14.1	8.3	5.4	5.3	1.8	1.6	100.0	
95+	6.3	14.0	20.9	22.0	15.7	8.5	5.1	4.3	2.6	0.6	100.0	
Total females	6.5	15.7	21.3	19.5	13.9	8.6	5.8	5.2	2.1	1.5	100.0	
Males												
70–74	7.7	22.5	17.6	9.9	14.1	11.3	5.6	5.6	3.5	2.1	100.0	
75–79	5.5	15.9	21.2	18.6	13.8	8.8	5.9	5.5	3.0	1.7	100.0	
80–84	4.2	17.8	23.2	18.9	13.1	9.0	5.8	4.8	1.8	1.4	100.0	
85–89	4.7	17.1	22.2	19.0	13.2	9.2	5.6	5.2	2.6	1.2	100.0	
90–94	5.0	16.9	21.6	19.6	12.9	9.1	5.3	5.6	2.1	1.8	100.0	
95+	6.4	17.1	19.2	21.8	13.7	8.1	5.6	4.3	2.6	1.3	100.0	
Total males	4.7	17.3	22.3	19.0	13.2	9.1	5.7	5.1	2.3	1.4	100.0	
Persons												
70–74	8.5	17.2	18.1	16.8	13.2	11.2	6.0	3.8	3.0	2.1	100.0	
75–79	6.0	15.9	21.0	19.0	13.7	8.7	5.9	5.3	2.8	1.7	100.0	
80–84	5.5	16.7	22.4	18.6	13.5	8.8	5.8	5.2	2.0	1.4	100.0	
85–89	5.3	16.5	21.5	19.9	13.4	8.9	5.7	5.2	2.1	1.4	100.0	
90–94	5.8	16.2	22.0	19.5	13.6	8.6	5.4	5.4	1.9	1.7	100.0	
95+	6.3	14.8	20.4	22.0	15.2	8.4	5.2	4.3	2.6	0.8	100.0	
Total persons	5.7	16.4	21.7	19.3	13.6	8.8	5.7	5.2	2.2	1.5	100.0	

Table A14: Amount of GP/LMO use in the community: DVA gold cardholders living in the community by sex, age and number of GP/LMO consultations received, 2003–04

	GP/LMO consultations										
Sex/age	0	1–4	5–9	10–14	15–19	20–24	25–29	30–39	40–49	50+	Total
Females					Number	r of gold c	ardholde	rs			
70–74	406	2,216	4,313	3,216	1,762	873	411	371	110	91	13,769
75–79	868	4,412	10,115	8,229	4,769	2,440	1,246	1,057	358	259	33,753
80–84	844	3,892	8,633	7,604	4,884	2,729	1,442	1,134	417	310	31,889
85–89	451	1,769	3,463	3,136	1,973	1,102	665	554	209	167	13,489
90–94	192	531	841	710	468	271	131	137	50	43	3,374
95+	27	71	122	112	66	35	27	18	10	7	495
Total females	2,788	12,891	27,487	23,007	13,922	7,450	3,922	3,271	1,154	877	96,769
Males											
70–74	254	1,115	2,157	1,706	929	502	258	180	55	49	7,205
75–79	882	4,983	11,170	9,289	5,884	3,021	1,636	1,344	428	378	39,015
80–84	1,316	6,501	14,412	12,776	8,329	4,441	2,522	2,123	840	609	53,869
85–89	563	2,283	4,262	3,957	2,686	1,528	883	757	299	271	17,489
90–94	141	462	722	615	395	267	129	128	46	58	2,963
95+	20	53	63	47	36	19	14	13	4	7	276
Total males	3,176	15,397	32,786	28,390	18,259	9,778	5,442	4,545	1,672	1,372	120,817
Persons											
70–74	660	3,331	6,470	4,922	2,691	1,375	669	551	165	140	20,974
75–79	1,750	9,395	21,285	17,518	10,653	5,461	2,882	2,401	786	637	72,768
80–84	2,160	10,393	23,045	20,380	13,213	7,170	3,964	3,257	1,257	919	85,758
85–89	1,014	4,052	7,725	7,093	4,659	2,630	1,548	1,311	508	438	30,978
90–94	333	993	1,563	1,325	863	538	260	265	96	101	6,337
95+	47	124	185	159	102	54	41	31	14	14	771
Total	5,964	28,288	60,273	51,397	32,181	17,228	9,364	7,816	2,826	2,249	217,586

Table A14 (continued): Amount of GP/LMO use in the community: DVA gold cardholders living in the community by sex, age and number of GP/LMO consultations received, 2003-04

_	GP/LMO consultations											
Sex/age	0	1–4	5–9	10–14	15–19	20–24	25–29	30–39	40–49	50+	Total	
Females					Per cent c	of gold car	rdholders					
70–74	2.9	16.1	31.3	23.4	12.8	6.3	3.0	2.7	8.0	0.7	100.0	
75–79	2.6	13.1	30.0	24.4	14.1	7.2	3.7	3.1	1.1	8.0	100.0	
80–84	2.6	12.2	27.1	23.8	15.3	8.6	4.5	3.6	1.3	1.0	100.0	
85–89	3.3	13.1	25.7	23.2	14.6	8.2	4.9	4.1	1.5	1.2	100.0	
90–94	5.7	15.7	24.9	21.0	13.9	8.0	3.9	4.1	1.5	1.3	100.0	
95+	5.5	14.3	24.6	22.6	13.3	7.1	5.5	3.6	2.0	1.4	100.0	
Total females	2.9	13.3	28.4	23.8	14.4	7.7	4.1	3.4	1.2	0.9	100.0	
Males												
70–74	3.5	15.5	29.9	23.7	12.9	7.0	3.6	2.5	0.8	0.7	100.0	
75–79	2.3	12.8	28.6	23.8	15.1	7.7	4.2	3.4	1.1	1.0	100.0	
80–84	2.4	12.1	26.8	23.7	15.5	8.2	4.7	3.9	1.6	1.1	100.0	
85–89	3.2	13.1	24.4	22.6	15.4	8.7	5.0	4.3	1.7	1.5	100.0	
90–94	4.8	15.6	24.4	20.8	13.3	9.0	4.4	4.3	1.6	2.0	100.0	
95+	7.2	19.2	22.8	17.0	13.0	6.9	5.1	4.7	1.4	2.5	100.0	
Total males	2.6	12.7	27.1	23.5	15.1	8.1	4.5	3.8	1.4	1.1	100.0	
Persons												
70–74	3.1	15.9	30.8	23.5	12.8	6.6	3.2	2.6	0.8	0.7	100.0	
75–79	2.4	12.9	29.3	24.1	14.6	7.5	4.0	3.3	1.1	0.9	100.0	
80–84	2.5	12.1	26.9	23.8	15.4	8.4	4.6	3.8	1.5	1.1	100.0	
85–89	3.3	13.1	24.9	22.9	15.0	8.5	5.0	4.2	1.6	1.4	100.0	
90–94	5.3	15.7	24.7	20.9	13.6	8.5	4.1	4.2	1.5	1.6	100.0	
95+	6.1	16.1	24.0	20.6	13.2	7.0	5.3	4.0	1.8	1.8	100.0	
Total	2.7	13.0	27.7	23.6	14.8	7.9	4.3	3.6	1.3	1.0	100.0	

Note: Table excludes 23 gold cardholders whose ages were unknown in 2003–04.

Table A15: Specialist services in RAC: use of consultations by DVA gold cardholders living in permanent RAC, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002–	.03	2003–04		
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	45.3	7.7	44.6	5.9	46.0	7.9	
75–79	45.9	7.1	46.3	7.1	47.7	6.7	
80-84	46.8	7.1	46.3	6.8	45.7	6.8	
85–89	45.5	6.5	44.6	6.3	46.1	6.6	
90-94	40.0	5.1	39.5	5.7	42.2	6.0	
95+	32.1	5.6	33.3	5.8	30.5	5.7	
Total females	44.5	6.6	44.1	6.5	44.8	6.6	
Males							
70–74	47.8	10.1	43.6	10.2	47.2	7.0	
75–79	47.3	6.6	45.3	6.9	48.5	6.7	
80-84	45.8	7.1	46.7	6.8	47.7	7.0	
85–89	46.9	6.4	48.8	6.7	48.0	7.1	
90-94	43.0	6.8	46.1	6.8	48.2	6.9	
95+	44.8	9.4	35.8	5.5	38.9	5.8	
Total males	46.2	6.8	46.7	6.8	47.8	7.0	
Persons							
70–74	46.0	8.4	44.3	7.2	46.3	7.7	
75–79	46.7	6.8	45.8	7.0	48.1	6.7	
80-84	46.3	7.1	46.5	6.8	46.8	6.9	
85–89	46.2	6.5	46.5	6.5	47.0	6.8	
90–94	41.2	5.8	42.1	6.2	44.4	6.3	
95+	34.9	6.7	33.9	5.7	32.7	5.8	
Total persons	45.3	6.7	45.3	6.6	46.2	6.8	

Table A16: Specialist services in low-care RAC: use of consultations by DVA gold cardholders living in permanent low-care RAC, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002–	03	2003-	2003–04		
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number		
70–74	58.2	8.1	57.6	6.4	57.9	8.9		
75–79	61.3	7.5	61.4	6.9	61.1	6.4		
80–84	61.0	6.8	6.8 60.4 6.6		59.8	6.3		
85–89	61.8	6.8	58.8	6.5	61.8	6.6		
90-94	57.4	5.5	56.6	5.3	60.3	5.3		
95+	55.2	6.0	50.0	5.6	47.5	6.2		
Total females	60.5	6.8	59.1	6.4	60.3	6.3		
Males								
70–74	53.3	12.1	63.5	11.7	65.9	6.6		
75–79	64.7	7.7	61.5	7.1	63.4	8.1		
80-84	64.4	8.1	63.2	7.5	63.9	7.6		
85–89	61.6	7.0	62.3	7.3	64.2	7.4		
90-94	58.6	6.5	62.6	6.9	61.8	6.9		
95+	65.9	9.8	51.6	4.1	60.6	5.6		
Total males	63.0	7.6	62.3	7.3	63.6	7.5		
Persons								
70–74	57.0	9.0	58.9	7.7	59.8	8.3		
75–79	63.2	7.6	61.4	7.0	62.1	7.1		
80-84	62.6	7.5	61.7	7.0	61.7	6.9		
85–89	61.7	6.9	60.3 6.8		62.8	6.9		
90–94	57.8	5.9	59.0 6.0		60.9	6.0		
95+	57.8	7.0	50.5	5.1	51.7	6.0		
Total persons	61.6	7.2	60.5	6.8	61.7	6.8		

Table A17: Specialist services in high-care RAC: use of consultations by DVA gold cardholders living in permanent high-care RAC, by age and sex, 2001–02 to 2003–04

Sex/age	2001–	02	2002–	-03	2003-04		
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	37.9	7.2	36.5	5.4	39.2	7.2	
75–79	36.5	6.7	38.0	7.2	40.5	7.0	
80–84	37.2	7.5	37.3	7.0	37.4	7.3	
85–89	34.9	6.3	35.6	6.2	36.7	6.7	
90–94	31.1	4.7	31.3	6.0	33.9	6.5	
95+	25.0	5.3	28.3	5.9	26.2	5.5	
Total females	34.8	6.5	35.4	6.6	36.4	6.9	
Males							
70–74	44.3	9.1	34.4	9.3	38.8	7.3	
75–79	39.9	5.9	39.1	6.7	42.9	6.0	
80-84	38.2	6.3	39.7	6.3	41.1	6.7	
85–89	39.0	5.8	41.5	6.2	40.4	6.9	
90–94	34.8	7.1	38.1	6.8	41.5	6.8	
95+	38.2	9.3	28.3	6.0	29.9	5.9	
Total males	38.6	6.2	39.6	6.5	41.0	6.6	
Persons							
70–74	39.7	7.8	35.8	6.7	39.1	7.2	
75–79	38.6	6.2	38.6	6.9	41.7	6.5	
80–84	37.8	6.8	38.6	6.6	39.5	6.9	
85–89	36.8	6.1	38.4	6.2	38.4	6.8	
90–94	32.6	5.7	33.9	6.4	36.7	6.7	
95+	27.8	6.5	28.3	5.9	27.1	5.6	
Total persons	36.8	6.4	37.5	6.5	38.6	6.8	

Table A18: Specialist services in the community: use of consultations by DVA gold cardholders living in the community, by age and sex, 2001-02 to 2003-04

Sex/age	2001–	02	2002-	.03	2003–04		
Females	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
70–74	68.0	5.7	68.5	5.8	70.2	6.1	
75–79	72.2	6.1	73.4	6.4	75.2	6.6	
80-84	73.0	6.6	74.3	6.8	76.0	7.2	
85–89	70.7 7.1		72.3	7.1	73.3	7.7	
90-94	64.1 7.4		65.6	7.2	67.9	8.1	
95+	53.4	7.1	57.7	7.9	58.6	7.5	
Total females	71.1	6.3	72.4	6.5	74.1	6.9	
Males							
70–74	74.8	7.4	72.8	7.2	74.8	7.1	
75–79	78.6	7.4	79.6	7.7	81.1	8.0	
80-84	79.0	7.9	80.0	8.1	80.8	8.4	
85–89	76.7	8.3	78.2	8.4	79.4	8.7	
90-94	69.4	8.3	71.4	8.4	74.2	8.4	
95+	61.5	9.0	63.6	8.5	66.7	8.9	
Total males	78.2	7.6	79.0	7.9	80.1	8.2	
Persons							
70–74	69.9	6.2	69.9	6.2	71.8	6.4	
75–79	76.3	7.0	77.1	7.2	78.3	7.4	
80–84	76.8	7.4	77.9	7.6	79.0	7.9	
85–89	74.1	7.8	75.6	7.8	76.7	8.3	
90–94	66.6	7.8	68.4	7.8	70.9	8.2	
95+	56.0	7.8	59.7	8.1	61.5	8.1	
Total persons	75.2	7.1	76.1	7.3	77.5	7.7	

^{1.} Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average relates to people with at least 1 consultation.

Table A19: Specialist services in RAC by DVA disability pensioners: use of consultations by male DVA gold cardholders aged 70 years or older living in permanent RAC, by care level and DVA disability pension type, 2001–02 to 2003–04

Care level/ DVA disability pension type	2001–	02	2002-	-03	2003–04		
Low-care RAC	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
None	56.4	6.5	57.0	6.1	57.9	6.6	
General rate	65.7	7.4	64.3	7.2	65.3	7.1	
Intermediate/Special	65.0	8.4	69.5	8.0	68.9	8.3	
EDA	72.8	11.0	66.7	10.1	70.4	10.1	
Low-care males	63.0	7.6	62.3	7.3	63.6	7.5	
High-care RAC							
None	35.0	5.8	37.0	5.7	39.1	6.0	
General rate	39.1	6.3	39.7	6.4	40.2	6.8	
Intermediate/Special	40.9	6.9	41.9	8.0	40.8	7.5	
EDA	44.7	6.4	43.7	7.2	46.9	7.0	
High-care males	38.6	6.2	39.6	6.5	41.0	6.6	
All RAC							
None	41.9	6.1	43.3	5.8	44.8	6.2	
General rate	47.8	6.8	47.8	6.8	48.3	7.0	
Intermediate/Special	48.0	7.5	49.8	8.0	48.3	7.8	
EDA	51.8	8.1	49.8	8.3	52.8	8.0	
All RAC males	46.2	6.8	46.7	6.8	47.8	7.0	

Table A20: Specialist services in the community by DVA disability pensioners: use of consultations by male DVA gold cardholders aged 70 years or older living in the community, by DVA disability pension type, 2001–02 to 2003–04

	2001-	-02	2002	-03	2003–04		
DVA disability pension type	Per cent using services	Average number	Per cent using services	Average number	Per cent using services	Average number	
None	71.2	6.4	71.9	6.7	73.0	7.0	
General rate	80.7	7.3	81.2	7.5	82.3	7.9	
Intermediate/Special	85.3	9.7	85.3	9.7	85.7	9.7	
EDA	86.8	11.5	87.2	11.3	87.7	11.5	
Total males	78.2	7.6	79.0	7.9	80.1	8.2	

^{1.} Table excludes gold cardholders whose ages were unknown (10, 10 and 5 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average relates to people with at least 1 consultation.

Table A21: Amount of specialist use in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of specialist consultations received, 2003–04

					Specia	alist cons	ultations				
Sex/age	0	1–2	3–4	5–7	8–10	11–14	15–19	20–29	30–49	50+	Total
Females					Number	of gold c	ardholde	rs			
70–74	209	86	24	20	10	10	9	9	7	3	387
75–79	1,041	405	197	140	55	39	41	35	23	14	1,990
80–84	2,478	882	398	285	144	142	77	88	47	24	4,565
85–89	2,419	914	367	273	148	137	73	87	54	20	4,492
90–94	1,373	455	179	127	81	58	44	33	19	6	2,375
95+	473	104	33	21	17	13	6	8	5	1	681
Total females	7,993	2,846	1,198	866	455	399	250	260	155	68	14,490
Males											
70–74	75	25	8	14	7	4	4	3	2	_	142
75–79	952	394	158	128	64	50	35	32	23	11	1,847
80–84	2,665	1,012	400	364	185	168	116	96	67	22	5,095
85–89	1,927	733	287	256	161	112	88	73	45	21	3,703
90–94	729	291	107	98	59	38	39	23	12	10	1,406
95+	143	47	11	10	7	3	7	5	1	_	234
Total males	6,491	2,502	971	870	483	375	289	232	150	64	12,427
Persons											
70–74	284	111	32	34	17	14	13	12	9	3	529
75–79	1,993	799	355	268	119	89	76	67	46	25	3,837
80–84	5,143	1,894	798	649	329	310	193	184	114	46	9,660
85–89	4,346	1,647	654	529	309	249	161	160	99	41	8,195
90–94	2,102	746	286	225	140	96	83	56	31	16	3,781
95+	616	151	44	31	24	16	13	13	6	1	915
Total persons	14,484	5,348	2,169	1,736	938	774	539	492	305	132	26,917

Table A21 (continued): Amount of specialist use in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of specialist consultations received, 2003–04

					Special	ist consul	tations				
Sex/age	0	1–2	3–4	5–7	8–10	11–14	15–19	20–29	30–49	50+	Total
Females				Р	er cent c	of gold car	dholders				
70–74	54.0	22.2	6.2	5.2	2.6	2.6	2.3	2.3	1.8	8.0	100.0
75–79	52.3	20.4	9.9	7.0	2.8	2.0	2.1	1.8	1.2	0.7	100.0
80–84	54.3	19.3	8.7	6.2	3.2	3.1	1.7	1.9	1.0	0.5	100.0
85–89	53.9	20.3	8.2	6.1	3.3	3.0	1.6	1.9	1.2	0.4	100.0
90–94	57.8	19.2	7.5	5.3	3.4	2.4	1.9	1.4	8.0	0.3	100.0
95+	69.5	15.3	4.8	3.1	2.5	1.9	0.9	1.2	0.7	0.1	100.0
Total females	55.2	19.6	8.3	6.0	3.1	2.8	1.7	1.8	1.1	0.5	100.0
Males											
70–74	52.8	17.6	5.6	9.9	4.9	2.8	2.8	2.1	1.4	_	100.0
75–79	51.5	21.3	8.6	6.9	3.5	2.7	1.9	1.7	1.2	0.6	100.0
80–84	52.3	19.9	7.9	7.1	3.6	3.3	2.3	1.9	1.3	0.4	100.0
85–89	52.0	19.8	7.8	6.9	4.3	3.0	2.4	2.0	1.2	0.6	100.0
90–94	51.8	20.7	7.6	7.0	4.2	2.7	2.8	1.6	0.9	0.7	100.0
95+	61.1	20.1	4.7	4.3	3.0	1.3	3.0	2.1	0.4	_	100.0
Total males	52.2	20.1	7.8	7.0	3.9	3.0	2.3	1.9	1.2	0.5	52.2
Persons											
70–74	53.7	21.0	6.0	6.4	3.2	2.6	2.5	2.3	1.7	0.6	100.0
75–79	51.9	20.8	9.3	7.0	3.1	2.3	2.0	1.7	1.2	0.7	100.0
80–84	53.2	19.6	8.3	6.7	3.4	3.2	2.0	1.9	1.2	0.5	100.0
85–89	53.0	20.1	8.0	6.5	3.8	3.0	2.0	2.0	1.2	0.5	100.0
90–94	55.6	19.7	7.6	6.0	3.7	2.5	2.2	1.5	8.0	0.4	100.0
95+	67.3	16.5	4.8	3.4	2.6	1.7	1.4	1.4	0.7	0.1	100.0
Total persons	53.8	19.9	8.1	6.4	3.5	2.9	2.0	1.8	1.1	0.5	100.0

Table A22: Amount of specialist use in the community: DVA gold cardholders living in the community, by sex, age and number of specialist consultations received, 2003–04

	Specialist consultations										
Sex/age	0	1–2	3–4	5–7	8–10	11–14	15–19	20–29	30–49	50+	Total
Females					Number	of gold ca	ardholder	s			
70–74	4,107	3,509	2,260	1,716	854	535	314	270	134	70	13,769
75–79	8,378	8,897	5,613	4,527	2,267	1,556	993	807	488	227	33,753
80–84	7,665	8,039	5,230	4,271	2,253	1,594	1,064	955	577	241	31,889
85–89	3,606	3,240	1,983	1,694	922	720	488	419	300	117	13,489
90–94	1,082	803	422	346	196	152	128	130	86	29	3,374
95+	205	100	53	46	26	25	16	14	8	2	495
Total females	25,043	24,588	15,561	12,600	6,518	4,582	3,003	2,595	1,593	686	96,769
Males											
70–74	1,815	1,687	1,125	1,106	540	364	244	171	92	61	7,205
75–79	7,385	8,770	6,583	6,123	3,432	2,508	1,598	1,383	820	413	39,015
80–84	10,326	11,881	8,816	8,237	4,659	3,609	2,310	2,050	1,372	609	53,869
85–89	3,610	3,843	2,644	2,482	1,437	1,186	824	763	506	194	17,489
90–94	764	672	423	376	214	174	122	107	81	30	2,963
95+	92	57	35	33	14	8	12	11	12	2	276
Total males	23,992	26,910	19,626	18,357	10,296	7,849	5,110	4,485	2,883	1,309	120,817
Persons											
70–74	5,922	5,196	3,385	2,822	1,394	899	558	441	226	131	20,974
75–79	15,763	17,667	12,196	10,650	5,699	4,064	2,591	2,190	1,308	640	72,768
80–84	17,991	19,920	14,046	12,508	6,912	5,203	3,374	3,005	1,949	850	85,758
85–89	7,216	7,083	4,627	4,176	2,359	1,906	1,312	1,182	806	311	30,978
90–94	1,846	1,475	845	722	410	326	250	237	167	59	6,337
95+	297	157	88	79	40	33	28	25	20	4	771
Total persons	49,035	51,498	35,187	30,957	16,814	12,431	8,113	7,080	4,476	1,995	217,586

Table A22 (continued): Amount of specialist use in the community: DVA gold cardholders living in the community, by sex, age and number of specialist consultations received, 2003–04

					Special	ist consu	Itations				
Sex/age	0	1–2	3–4	5–7	8–10	11–14	15–19	20–29	30–49	50+	Total
Females				F	er cent c	of gold ca	rdholders	;			
70–74	29.8	25.5	16.4	12.5	6.2	3.9	2.3	2.0	1.0	0.5	100.0
75–79	24.8	26.4	16.6	13.4	6.7	4.6	2.9	2.4	1.4	0.7	100.0
80–84	24.0	25.2	16.4	13.4	7.1	5.0	3.3	3.0	1.8	8.0	100.0
85–89	26.7	24.0	14.7	12.6	6.8	5.3	3.6	3.1	2.2	0.9	100.0
90–94	32.1	23.8	12.5	10.3	5.8	4.5	3.8	3.9	2.5	0.9	100.0
95+	41.4	20.2	10.7	9.3	5.3	5.1	3.2	2.8	1.6	0.4	100.0
Total females	25.9	25.4	16.1	13.0	6.7	4.7	3.1	2.7	1.6	0.7	100.0
Males											
70–74	25.2	23.4	15.6	15.4	7.5	5.1	3.4	2.4	1.3	8.0	100.0
75–79	18.9	22.5	16.9	15.7	8.8	6.4	4.1	3.5	2.1	1.1	100.0
80–84	19.2	22.1	16.4	15.3	8.6	6.7	4.3	3.8	2.5	1.1	100.0
85–89	20.6	22.0	15.1	14.2	8.2	6.8	4.7	4.4	2.9	1.1	100.0
90–94	25.8	22.7	14.3	12.7	7.2	5.9	4.1	3.6	2.7	1.0	100.0
95+	33.3	20.7	12.7	12.0	5.1	2.9	4.3	4.0	4.3	0.7	100.0
Total males	19.9	22.3	16.2	15.2	8.5	6.5	4.2	3.7	2.4	1.1	100.0
Persons											
70–74	28.2	24.8	16.1	13.5	6.6	4.3	2.7	2.1	1.1	0.6	100.0
75–79	21.7	24.3	16.8	14.6	7.8	5.6	3.6	3.0	1.8	0.9	100.0
80–84	21.0	23.2	16.4	14.6	8.1	6.1	3.9	3.5	2.3	1.0	100.0
85–89	23.3	22.9	14.9	13.5	7.6	6.2	4.2	3.8	2.6	1.0	100.0
90–94	29.1	23.3	13.3	11.4	6.5	5.1	3.9	3.7	2.6	0.9	100.0
95+	38.5	20.4	11.4	10.2	5.2	4.3	3.6	3.2	2.6	0.5	100.0
Total persons	22.5	23.7	16.2	14.2	7.7	5.7	3.7	3.3	2.1	0.9	100.0

^{1.} Table excludes 23 gold cardholders whose ages were unknown in 2003–04.

^{2.} Average relates to people with at least 1 consultation.

Table A23: Per patient costs of GP/LMO and specialist services in RAC: costs for DVA gold cardholders living in permanent RAC, by sex and age group, 2001–02 to 2003–04

<u>-</u>	2001-	-02	2002-	-03	2003-	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services		
Females		Ave	erage annual per	patient costs (\$)				
70–74	598	462	574	366	638	508		
75–79	592	436	594	435	612	427		
80–84	577	429	589	424	610	438		
85–89	580	393	585	394	609	423		
90–94	590	314	600	359	608	385		
95+	566	346	583	360	607	377		
Total females	583	403	589	404	610	423		
Males								
70–74	623	621	600	634	607	450		
75–79	562	405	580	432	621	433		
80–84	559	424	574	422	584	451		
85–89	566	390	576	415	603	455		
90–94	555	415	547	426	614	442		
95+	539	560	520	361	602	384		
Total males	562	415	572	425	599	447		
Persons								
70–74	605	507	582	444	630	492		
75–79	574	417	586	433	616	430		
80–84	567	427	581	423	596	445		
85–89	574	392	581	404	606	438		
90–94	576	355	579	388	610	408		
95+	560	407	568	360	605	379		
Total persons	572	409	581	414	605	435		

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A24: Per patient costs of GP/LMO and specialist services in low-care RAC: costs for DVA gold cardholders living in permanent low-care RAC, by sex and age group, 2001–02 to 2003–04

_	2001-	-02	2002-	-03	2003-	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services		
Females		Av	erage annual per	patient costs (\$)				
70–74	605	475	580	375	608	563		
75–79	604	450	581	420	594	389		
80–84	553	403	571	406	571	398		
85–89	571	403	556	390	577	407		
90–94	574	329	611	328	606	336		
95+	575	363	580	347	593	387		
Total females	573	404	573	391	583	395		
Males								
70–74	528	747	549	729	559	404		
75–79	550	459	523	436	566	512		
80–84	544	474	546	451	570	472		
85–89	545	418	554	440	595	463		
90–94	541	383	543	420	586	435		
95+	575	597	464	277	722	371		
Total males	546	452	543	443	582	468		
Persons								
70–74	587	538	573	463	597	522		
75–79	576	455	554	428	582	443		
80–84	549	437	559	428	570	434		
85–89	560	410	555	412	585	431		
90–94	561	350	583	367	598	375		
95+	575	426	546	326	634	381		
Total persons	561	426	560	414	583	427		

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A25: Per patient costs of GP/LMO and specialist services in high-care RAC: costs for DVA gold cardholders living in permanent high-care RAC, by sex and age group, 2001–02 to 2003–04

_	2001-	-02	2002-	-03	2003-	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services		
Females		Av	erage annual per	patient costs (\$)				
70–74	599	447	574	357	661	466		
75–79	588	422	602	447	624	461		
80–84	597	462	606	448	635	477		
85–89	590	385	606	399	630	442		
90–94	599	302	595	389	610	426		
95+	565	337	584	367	611	372		
Total females	592	405	601	418	627	451		
Males								
70–74	671	564	625	578	628	485		
75–79	570	368	606	428	646	389		
80–84	571	390	591	403	594	439		
85–89	584	361	592	394	611	449		
90–94	566	448	555	435	632	448		
95+	541	547	546	385	555	382		
Total males	574	387	590	411	610	435		
Persons								
70–74	619	483	590	427	651	471		
75–79	577	387	604	436	635	424		
80–84	582	419	597	422	611	455		
85–89	587	373	599	397	621	445		
90–94	586	362	579	409	618	435		
95+	560	398	576	371	598	375		
Total persons	583	395	596	415	619	443		

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A26: Per patient costs of GP/LMO and specialist services in the community: costs for DVA gold cardholders living in the community, by sex and age group, 2001–02 to 2003–04

<u>-</u>	2001-	-02	2002-	-03	2003-	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services		
Females		Ave	erage annual per	patient costs (\$)				
70–74	380	326	396	339	422	365		
75–79	411	348	432	374	460	401		
80–84	447	377	476	399	507	435		
85–89	508	415	517	420	547	474		
90–94	539	439	563	434	564	508		
95+	594	427	563	485	602	485		
Total females	426	360	452	383	486	422		
Males								
70–74	428	424	402	420	419	426		
75–79	422	418	445	448	471	479		
80–84	460	445	481	468	505	502		
85–89	497	474	521	491	541	529		
90–94	527	488	543	504	562	513		
95+	529	553	557	533	585	575		
Total males	443	433	467	460	496	495		
Persons								
70–74	393	356	398	366	421	387		
75–79	418	394	440	419	466	444		
80–84	455	421	479	444	506	478		
85–89	502	449	519	461	544	506		
90–94	533	463	553	469	563	510		
95+	573	472	561	503	596	520		
Total persons	436	404	460	428	492	463		

^{1.} Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average patient cost relates to people with at least 1 consultation.

^{3.} Costs are not adjusted for inflation.

Table A27: Per consultation cost of GP/LMO and specialist services in RAC: cost for DVA gold cardholders living in permanent RAC, by sex and age group, 2001–02 to 2003–04

<u>-</u>	2001-	-02	2002-	-03	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services	
Females		A	verage cost per o	consultation (\$)			
70–74	39.17	60.20	40.71	61.73	42.62	61.73	
75–79	39.57	61.03	40.55	61.46	41.69	61.46	
80–84	39.52	60.56	41.19	62.74	41.63	62.74	
85–89	40.10	60.46	41.42	62.19	42.16	62.19	
90–94	39.68	61.79	41.61	63.46	42.54	63.46	
95+	40.23	62.07	41.55	62.40	42.85	62.40	
Total females	39.74	60.78	41.22	62.38	42.03	62.38	
Males							
70–74	38.61	61.46	40.72	62.23	39.83	62.23	
75–79	39.26	61.36	40.73	62.98	41.44	62.98	
80–84	39.72	60.10	41.17	62.13	42.17	62.13	
85–89	39.80	60.71	41.44	61.82	42.25	61.82	
90–94	39.87	60.98	41.48	62.42	42.07	62.42	
95+	39.53	59.44	40.99	65.56	42.04	65.56	
Total males	39.61	60.67	41.17	62.28	42.04	62.28	
Persons							
70–74	39.01	60.63	40.71	61.93	41.86	61.93	
75–79	39.39	61.23	40.65	62.25	41.57	62.25	
80–84	39.63	60.31	41.18	62.42	41.91	62.42	
85–89	39.96	60.58	41.43	62.01	42.20	62.01	
90–94	39.75	61.41	41.56	62.96	42.36	62.96	
95+	40.07	61.02	41.42	63.19	42.64	63.19	
Total persons	39.67	60.72	41.20	62.33	42.04	62.33	

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A28: Per consultation cost of GP/LMO and specialist services in low-care RAC: cost for DVA gold cardholders living in permanent low-care RAC, by sex and age group, 2001–02 to 2003–04

	2001-	-02	2002-	-03	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services	
Females		Α	verage cost per o	consultation (\$)			
70–74	38.35	58.74	41.00	58.35	42.41	63.21	
75–79	39.68	59.75	40.95	60.59	42.27	61.02	
80-84	39.75	59.25	41.36	61.40	41.66	63.15	
85–89	40.02	59.62	41.59	60.26	42.50	62.03	
90–94	40.95	60.07	42.33	61.80	42.68	63.23	
95+	40.65	60.09	42.04	62.17	42.60	62.25	
Total females	39.93	59.54	41.50	60.85	42.22	62.46	
Males							
70–74	40.25	61.59	42.89	62.35	40.34	61.72	
75–79	38.97	59.89	40.42	61.50	41.42	62.95	
80–84	38.59	58.11	40.13	60.09	41.23	62.16	
85–89	39.36	59.73	40.68	60.25	41.50	62.55	
90–94	39.44	58.75	41.15	61.16	41.05	62.76	
95+	41.48	60.99	40.75	68.19	42.11	66.46	
Total males	39.04	59.15	40.51	60.60	41.33	62.52	
Persons							
70–74	38.74	59.62	41.39	59.86	41.94	62.90	
75–79	39.31	59.82	40.71	61.02	41.91	61.99	
80–84	39.20	58.65	40.79	60.73	41.46	62.63	
85–89	39.74	59.67	41.20	60.26	42.07	62.27	
90–94	40.37	59.49	41.87	61.48	42.04	63.01	
95+	40.84	60.43	41.71	63.56	42.42	63.72	
Total persons	39.54	59.35	41.07	60.73	41.83	62.49	

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A29: Per consultation cost of GP/LMO and specialist services in high-care RAC: cost for DVA gold cardholders living in permanent high-care RAC, by sex and age group, 2001–02 to 2003–04

<u>-</u>	2001-	-02	2002-	-03	2003–04		
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services	
Females		А	verage cost per o	consultation (\$)			
70–74	39.66	61.71	40.49	66.04	42.73	64.77	
75–79	39.52	62.50	40.31	62.20	41.38	65.50	
80–84	39.38	61.93	41.05	64.08	41.61	65.47	
85–89	40.16	61.51	41.32	64.30	41.95	65.65	
90–94	39.08	63.65	41.26	64.71	42.47	65.17	
95+	40.12	63.60	41.39	62.52	42.92	67.60	
Total females	39.63	62.15	41.04	63.84	41.93	65.53	
Males							
70–74	38.11	61.65	39.95	62.00	39.64	66.00	
75–79	39.42	62.69	40.86	64.14	41.46	65.20	
80–84	40.23	62.13	41.62	63.82	42.58	65.53	
85–89	40.06	61.75	41.80	63.40	42.59	65.35	
90–94	40.05	62.76	41.60	63.48	42.56	65.74	
95+	38.91	58.67	41.04	64.51	42.00	65.16	
Total males	39.89	62.15	41.46	63.72	42.35	65.45	
Persons							
70–74	39.17	61.69	40.30	64.24	41.81	65.13	
75–79	39.46	62.62	40.62	63.26	41.42	65.36	
80–84	39.87	62.04	41.37	63.93	42.13	65.50	
85–89	40.11	61.62	41.54	63.85	42.25	65.50	
90–94	39.44	63.19	41.39	64.14	42.50	65.41	
95+	39.86	61.54	41.32	62.98	42.71	66.93	
Total persons	39.77	62.15	41.25	63.78	42.13	65.49	

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A30: Per consultation cost of GP/LMO and specialist services in the community: cost for DVA gold cardholders living in the community, by sex and age group, 2001–02 to 2003–04

<u>-</u>	2001-	-02	2002-	-03	2003-	-04
Sex/age	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services
Females		А	verage cost per o	consultation (\$)		
70–74	33.02	57.11	34.62	58.72	35.71	60.30
75–79	33.79	56.99	35.24	58.58	36.36	60.48
80-84	34.97	57.21	36.59	58.62	37.60	60.69
85–89	37.20	58.19	38.59	59.45	39.67	61.63
90–94	40.30	59.44	41.09	60.36	41.95	62.45
95+	41.71	60.34	41.60	61.55	43.99	64.26
Total females	34.50	57.28	36.17	58.78	37.43	60.80
Males						
70–74	32.79	56.97	33.99	58.40	34.91	60.02
75–79	33.21	56.36	34.89	57.94	36.00	59.70
80–84	33.91	56.52	35.57	58.01	36.64	59.97
85–89	35.60	57.37	37.14	58.51	38.06	60.49
90–94	37.75	58.81	39.26	59.85	40.18	61.47
95+	39.16	61.31	40.89	62.58	42.15	64.72
Total males	33.72	56.59	35.47	58.10	36.66	60.01
Persons						
70–74	32.95	57.06	34.42	58.60	35.43	60.19
75–79	33.41	56.55	35.03	58.16	36.16	60.01
80–84	34.28	56.74	35.94	58.20	36.99	60.20
85–89	36.30	57.69	37.77	58.87	38.75	60.93
90–94	39.06	59.11	40.21	60.08	41.10	61.96
95+	40.90	60.74	41.35	61.95	43.34	64.45
Total persons	34.03	56.83	35.76	58.35	37.00	60.31

^{1.} Table excludes gold cardholders whose ages were unknown (35, 32 and 23 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average consultation cost relates to people with at least 1 consultation.

^{3.} Costs are not adjusted for inflation.

Table A31: Per patient costs of GP/LMO and specialist services for DVA disability pensioners in RAC: costs for male DVA gold cardholders aged 70 years or older living in permanent RAC, by care level and DVA disability pension type, 2001–02 to 2003–04

	2001–	-02	200	2002–03		2003–04	
Care level/DVA disability pension type	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services	
Low-care RAC		Averag	e annual per	patient costs (\$	5)		
None	493	389	491	372	523	419	
General rate	550	431	557	436	589	440	
Intermediate/Special	609	497	601	483	619	521	
EDA	659	663	603	613	692	633	
Low-care males	546	452	543	443	582	468	
High-care RAC							
None	546	357	561	367	575	397	
General rate	572	396	588	409	614	444	
Intermediate/Special	630	422	647	499	673	495	
EDA	613	402	626	454	642	454	
High-care males	574	387	590	411	610	435	
All RAC							
None	524	372	536	368	556	403	
General rate	562	412	574	422	603	444	
Intermediate/Special	623	450	632	490	655	503	
EDA	623	496	619	514	653	513	
All RAC males	562	415	572	425	599	447	

Table A32: Per patient costs of GP/LMO and specialist services for DVA disability pensioners in the community: costs for male DVA gold cardholders aged 70 years or older living in the community, by DVA disability pension type, 2001–02 to 2003–04

	200	1–02	2002	2–03	200	2003–04		
DVA disability pension type	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services		
Males		Average annual per patient costs (\$)						
None	359	361	378	388	403	419		
General rate	447	411	467	435	495	467		
Intermediate/Special	584	552	612	570	637	589		
EDA	626	665	637	671	662	704		
Total males	443	433 467 460 496						

- 1. Table excludes gold cardholders whose ages were unknown (10, 10 and 5 in 2001–02, 2002–03 and 2003–04, respectively).
- 2. Average patient cost relates to people with at least 1 consultation.
- 3. Costs are not adjusted for inflation.

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

Table A33: Per consultation cost of GP/LMO and specialist services for DVA disability pensioners in RAC: cost for male DVA gold cardholders aged 70 years or older living in permanent RAC, by care level and DVA disability pension type, 2001–02 to 2003–04

	2001	-02	2002	.–03	2003	i–04
Care level/ DVA disability pension type	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services
Low-care RAC		Α	verage cost per	consultation (\$)		
None	38.99	60.01	40.50	61.11	40.98	63.58
General rate	38.56	58.09	40.59	60.24	41.35	61.71
Intermediate/Special	38.57	59.38	39.16	60.65	41.29	62.41
EDA	41.22	60.29	41.06	60.70	41.99	62.88
Low-care males	39.04	59.15	40.51	60.60	41.33	62.52
High-care RAC						
None	39.51	61.68	41.13	64.73	41.92	66.13
General rate	39.85	62.44	41.33	63.61	42.21	65.11
Intermediate/Special	39.83	61.12	41.60	62.26	42.44	66.21
EDA	40.86	62.89	42.33	63.26	43.40	64.82
High-care males	39.89	62.15	41.46	63.72	42.35	65.45
All RAC						
None	39.34	60.72	40.96	63.09	41.65	65.04
General rate	39.40	60.32	41.08	61.98	41.92	63.60
Intermediate/Special	39.45	60.30	40.92	61.62	42.15	64.61
EDA	40.93	61.64	41.99	62.11	43.01	64.01
All RAC males	39.61	60.67	41.17	62.28	42.04	64.19

Table A34: Per consultation cost of GP/LMO and specialist services for DVA disability pensioners in the community: cost for male DVA gold cardholders aged 70 years or older living in the community, by DVA disability pension type, 2001–02 to 2003–04

	2001	-02	2002	-03	2003–04		
DVA disability pension type	GP/LMO services	Specialist services	GP/LMO services	Specialist services	GP/LMO services	Specialist services	
Males		A	verage cost per	consultation (\$)			
None	33.25	56.43	34.95	57.90	36.15	59.93	
General rate	33.36	56.12	35.14	57.68	36.34	59.49	
Intermediate/Special	34.65	57.13	36.54	58.62	37.46	60.46	
EDA	35.46	57.91	36.83	59.21	38.03	61.16	
Total males	33.72	56.59	35.47	58.10	36.66	60.01	

^{1.} Average patient cost relates to people with at least 1 consultation.

^{2.} Costs are not adjusted for inflation.

^{1.} Table excludes gold cardholders whose ages were unknown (10, 10 and 5 in 2001–02, 2002–03 and 2003–04, respectively).

^{2.} Average consultation cost relates to people with at least 1 consultation.

^{3.} Costs are not adjusted for inflation.

Table A35: RPBS use in RAC: prescriptions, medications and cost for pharmaceuticals used by DVA gold cardholders living in permanent RAC, by age and sex, 2001–02 and 2002–03

		2	001–02			2	002–03	
Sex/age	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)
Females	Per cent using	Average	number	Average \$	Per cent using	Average	number	Average \$
70–74	90.2	59.0	12.3	24.19	91.6	59.4	11.9	26.88
75–79	88.4	56.8	12.3	23.98	89.7	59.1	12.4	25.80
80–84	89.8	53.2	11.9	22.35	90.3	56.7	12.2	24.55
85–89	89.6	49.8	11.6	20.69	91.0	53.0	11.8	22.11
90–94	87.8	46.9	11.1	18.61	88.3	49.5	11.4	19.83
95+	80.9	39.6	9.9	17.13	84.3	43.8	10.5	18.61
Total	88.7	51.5	11.7	21.58	89.9	54.4	11.9	23.14
Males								
70–74	88.2	57.5	13.0	28.78	88.8	60.2	12.4	28.85
75–79	93.4	51.3	11.9	26.07	93.5	53.4	12.1	28.07
80–84	93.2	48.1	11.8	25.32	94.0	49.7	11.8	27.13
85–89	92.4	45.9	11.5	23.92	93.9	47.3	11.5	25.53
90–94	91.8	41.6	10.9	21.77	93.0	40.9	10.8	23.78
95+	90.1	42.2	11.0	18.91	92.5	36.7	10.2	18.89
Total	92.8	47.9	11.7	24.88	93.7	48.8	11.7	26.40
Persons								
70–74	89.6	58.6	12.5	25.39	90.8	59.6	12.0	27.50
75–79	91.4	53.5	12.0	25.20	91.7	56.0	12.2	26.94
80–84	91.7	50.3	11.8	23.93	92.3	52.9	12.0	25.91
85–89	90.9	47.9	11.5	22.15	92.3	50.4	11.7	23.65
90–94	89.3	44.8	11.0	19.78	90.1	46.0	11.1	21.25
95+	82.9	40.2	10.1	17.58	86.3	41.9	10.4	18.66
Total	90.8	49.7	11.7	23.19	91.7	51.7	11.8	24.68

⁽a) Relates to filled RPBS prescriptions.

^{1.} Averages relate to people with at least 1 filled RPBS prescription.

^{2.} Costs are not adjusted for inflation.

Table A36: RPBS use in low-care RAC: prescriptions, medications and cost for pharmaceuticals used by DVA gold cardholders living in permanent low-care RAC, by age and sex, 2001–02 and 2002–03

		2	001–02			2	002–03	
Sex/age	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)
Females	Per cent using	Average	number	Average \$	Per cent using	Average	number	Average \$
70–74	92.4	63.8	12.8	24.34	92.4	65.6	12.5	26.36
75–79	90.9	63.0	13.2	24.84	91.8	63.6	12.9	26.71
80-84	92.1	58.1	12.5	22.89	91.2	61.3	12.8	25.53
85–89	92.0	54.4	12.2	21.69	92.5	56.0	12.2	22.58
90-94	90.4	49.8	11.4	19.62	90.6	53.6	11.9	20.40
95+	85.3	47.0	11.3	17.43	82.7	46.3	10.7	19.75
Total	91.4	56.7	12.4	22.49	91.4	58.7	12.4	24.13
Males								
70–74	90.0	63.1	12.7	29.42	86.5	64.9	13.3	29.64
75–79	94.8	58.2	12.6	26.17	94.0	57.4	12.2	28.30
80-84	94.9	54.9	12.4	26.07	95.5	54.7	12.3	26.86
85–89	93.2	50.8	12.0	24.55	94.4	50.1	11.6	26.28
90-94	94.3	41.4	10.5	21.76	93.5	45.8	11.1	25.92
95+	90.9	41.4	11.4	18.80	95.2	33.1	8.9	20.57
Total	94.2	53.2	12.2	25.35	94.6	52.6	11.9	26.86
Persons								
70–74	91.8	63.7	12.8	25.56	91.1	65.5	12.7	27.08
75–79	93.0	60.4	12.9	25.54	92.8	60.6	12.6	27.43
80-84	93.4	56.6	12.5	24.36	93.2	58.1	12.6	26.13
85–89	92.6	52.8	12.1	22.89	93.3	53.5	12.0	24.06
90–94	91.9	46.5	11.0	20.39	91.8	50.4	11.6	22.47
95+	86.6	45.6	11.3	17.74	86.2	42.1	10.1	19.95
Total	92.7	55.1	12.3	23.76	92.8	56.0	12.2	25.27

⁽a) Relates to filled RPBS prescriptions.

^{1.} Averages relate to people with at least 1 filled RPBS prescription.

^{2.} Costs are not adjusted for inflation.

Table A37: RPBS use in high-care RAC: prescriptions, medications and cost for pharmaceuticals used by DVA gold cardholders living in permanent high-care RAC, by age and sex, 2001–02 and 2002–03

		2	001–02			2	002–03	
Sex/age	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)
Females	Per cent using	Average	number	Average \$	Per cent using	Average	number	Average \$
70–74	88.7	56.4	12.0	24.07	91.7	55.6	11.4	27.31
75–79	87.2	53.3	11.8	23.33	88.8	56.7	12.1	25.17
80–84	88.2	50.2	11.5	21.94	89.8	54.1	11.8	23.84
85–89	88.1	46.9	11.2	19.90	90.2	51.2	11.6	21.78
90–94	86.5	45.6	10.9	18.02	87.4	47.7	11.2	19.54
95+	79.8	37.2	9.4	17.03	85.1	43.2	10.5	18.21
Total	87.2	48.6	11.3	20.99	89.2	52.1	11.6	22.72
Males								
70–74	87.7	54.6	13.0	28.29	90.4	58.8	12.1	28.51
75–79	92.8	48.7	11.6	26.03	93.5	52.1	12.1	27.93
80–84	92.8	45.6	11.5	24.97	93.6	47.8	11.6	27.24
85–89	92.1	43.5	11.2	23.29	93.8	46.2	11.5	25.11
90–94	90.8	41.8	11.1	21.81	93.2	38.7	10.7	22.51
95+	90.2	43.3	11.1	18.98	91.0	38.7	10.8	18.26
Total	92.3	45.7	11.5	24.62	93.5	47.4	11.6	26.37
Persons								
70–74	88.5	55.9	12.3	25.22	91.2	56.6	11.7	27.72
75–79	90.7	50.4	11.7	25.00	91.4	54.1	12.1	26.69
80–84	90.9	47.4	11.5	23.68	92.0	50.5	11.7	25.70
85–89	90.0	45.3	11.2	21.50	91.9	48.8	11.6	23.27
90–94	88.2	44.1	11.0	19.45	89.7	44.1	11.0	20.59
95+	82.0	38.6	9.8	17.54	86.4	42.1	10.5	18.22
Total	89.9	47.1	11.4	22.87	91.3	49.7	11.6	24.49

⁽a) Relates to filled RPBS prescriptions.

^{1.} Averages relate to people with at least 1 filled RPBS prescription.

^{2.} Costs are not adjusted for inflation.

Table A38: RPBS use in the community: prescriptions, medications and cost for pharmaceuticals used by DVA gold cardholders living in the community, by age and sex, 2001–02 and 2002–03

		2	001–02			2	002–03	
Sex/age	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)	Use of RPBS	Prescriptions filled	Medications prescribed ^(a)	Prescription cost ^(a)
Females	Per cent using	Average	number	Average \$	Per cent using	Average	number	Average \$
70–74	92.8	43.7	10.5	24.20	93.5	45.9	10.6	26.09
75–79	93.5	45.4	10.9	23.82	94.4	48.7	11.2	25.45
80-84	93.7	45.5	11.1	22.53	94.7	49.3	11.4	24.18
85–89	92.8	44.6	11.1	20.90	94.2	47.6	11.3	22.73
90-94	90.3	38.9	10.3	19.52	92.5	43.4	10.8	20.67
95+	86.6	35.8	9.8	17.73	88.9	37.5	9.8	19.59
Total	93.2	44.8	10.9	23.18	94.2	48.1	11.2	24.73
Males								
70–74	93.5	49.5	11.7	29.24	91.4	45.4	10.6	31.15
75–79	95.1	46.5	11.1	28.09	95.7	49.2	11.4	30.33
80–84	95.0	45.3	11.3	27.14	95.6	47.9	11.5	29.22
85–89	93.9	41.7	10.9	26.26	94.5	44.4	11.2	28.22
90–94	90.6	37.6	10.3	23.73	92.8	38.7	10.4	25.68
95+	88.8	28.7	8.2	21.17	88.3	31.7	9.2	22.26
Total	94.8	45.7	11.2	27.66	95.2	47.7	11.3	29.65
Persons								
70–74	93.0	45.4	10.8	25.77	92.9	45.7	10.6	27.82
75–79	94.5	46.1	11.1	26.60	95.2	49.0	11.3	28.26
80–84	94.5	45.4	11.2	25.50	95.3	48.4	11.5	27.41
85–89	93.4	43.0	11.0	23.80	94.4	45.8	11.2	25.82
90–94	90.4	38.3	10.3	21.50	92.6	41.1	10.6	22.97
95+	87.3	33.4	9.3	18.70	88.7	35.5	9.6	20.34
Total	94.1	45.3	11.1	25.80	94.8	47.8	11.2	27.56

⁽a) Relates to filled RPBS prescriptions.

^{1.} Table excludes gold cardholders whose ages were unknown (35 and 32 in 2001–02 and 2002–03).

^{2.} Averages relate to people with at least 1 filled RPBS prescription.

^{3.} Costs are not adjusted for inflation.

Table A39: RPBS use by DVA disability pensioners in RAC: prescriptions, medications and cost for pharmaceuticals used by male DVA gold cardholders aged 70 years or older living in permanent RAC, by care level and DVA disability pension type, 2001–02 and 2002–03

		20	01–02		2002–03				
Care level/ DVA disability pension type	Use of RPBS	Pre- scriptions filled	Medi- cations pre- scribed ^(a)	Pre- scription cost ^(a)	Use of RPBS	Prescrip- tions filled	Medi- cations pre- scribed ^(a)	Pre- scription cost ^(a)	
Low-care RAC	Per cent using	Average	number	Average \$	Per cent using	Average	number	Average \$	
None	92.6	45.2	10.5	25.41	92.7	46.3	10.5	26.54	
General rate	94.9	53.7	12.4	25.34	95.6	53.2	12.1	27.08	
Intermediate/Special	96.4	64.2	14.3	24.88	95.5	61.9	13.3	27.03	
EDA	95.6	69.6	15.3	25.60	95.9	62.3	14.6	26.82	
Low-care males	94.2	53.2	12.2	25.35	94.6	52.6	11.9	26.86	
High-care RAC									
None	90.3	40.7	10.4	24.52	92.4	42.0	10.5	26.36	
General rate	93.5	45.8	11.5	24.46	93.8	47.3	11.5	26.19	
Intermediate/Special	92.8	55.4	13.1	24.97	95.0	58.9	13.1	26.75	
EDA	93.8	51.3	12.9	24.99	94.2	53.2	13.0	26.57	
High-care males	92.3	45.7	11.5	24.62	93.5	47.4	11.6	26.37	
All RAC									
None	90.8	41.9	10.4	24.85	92.3	43.2	10.5	26.43	
General rate	93.8	48.2	11.8	24.77	94.2	49.0	11.7	26.52	
Intermediate/Special	93.9	57.9	13.4	25.06	95.1	59.5	13.2	26.81	
EDA	94.1	55.9	13.5	25.24	94.6	55.5	13.5	26.67	
All RAC males	92.8	47.9	11.7	24.90	93.7	48.8	11.7	26.54	

⁽a) Relates to filled RPBS prescriptions.

Table A40: RPBS use by DVA disability pensioners in the community: prescriptions, medications and cost for pharmaceuticals used by male DVA gold cardholders aged 70 years or older living in the community, by care level and DVA disability pension type, 2001–02 and 2002–03

		200	01–02		2002–03					
	Use of RPBS	Pre- scriptions filled	Medi- cations pre- scribed ^(a)	Pre- scription cost ^(a)	Use of RPBS	Prescrip- tions filled	Medi- cations pre- scribed ^(a)	Pre- scription cost ^(a)		
DVA Disability pension type	Per cent using	Average	number	Average \$	Per cent using	Average number		Average \$		
None	91.6	35.1	8.7	27.98	92.1	37.0	8.8	29.98		
General rate	96.3	46.0	11.4	27.43	96.5	47.1	11.3	29.49		
Intermediate/Special	97.4	66.0	15.5	26.35	97.6	67.3	15.5	28.40		
EDA	97.1	67.4	16.1	28.66	97.6	68.8	16.0	30.27		
All males	94.8	45.7	11.2	27.66	95.2	47.7	11.3	29.65		

⁽a) Relates to filled RPBS prescriptions.

^{1.} Averages relate to people with at least 1 filled RPBS prescription.

Costs are not adjusted for inflation.

^{1.} Table excludes gold cardholders whose ages were unknown (10 each in 2001–02 and 2002–03).

^{2.} Averages relate to people with at least 1 filled RPBS prescription.

^{3.} Costs are not adjusted for inflation.

Table A41: Number of RPBS prescriptions used in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of prescriptions filled, 2002–03

Number of prescriptions filled											
Sex/age	0	1–9	10–19	20–29	30–39	40–49	50-59	60–74	75–99	100+	Total
Females					Numbe	r of gold	cardholde	ers			
70–74	36	48	44	42	18	39	27	50	55	69	428
75–79	219	201	192	194	197	192	148	210	250	327	2,130
80–84	395	408	417	362	358	365	309	414	487	573	4,088
85–89	356	456	397	391	347	358	329	390	479	473	3,976
90–94	228	220	217	166	187	174	145	221	204	180	1,942
95+	103	87	82	54	83	47	50	52	48	49	655
Total females	1,337	1,420	1,349	1,209	1,190	1,175	1,008	1,337	1,523	1,671	13,219
Males											
70–74	20	18	19	21	10	16	13	12	26	24	179
75–79	158	263	301	250	211	233	203	219	261	324	2,423
80–84	282	573	570	497	494	436	395	455	471	505	4,678
85–89	197	451	389	356	331	312	255	313	353	285	3,242
90–94	88	200	204	143	130	111	76	124	104	77	1,257
95+	16	42	31	31	18	26	13	15	5	15	212
Total males	761	1,547	1,514	1,298	1,194	1,134	955	1,138	1,220	1,230	11,991
Persons											
70–74	56	66	63	63	28	55	40	62	81	93	607
75–79	377	464	493	444	408	425	351	429	511	651	4,553
80–84	677	981	987	859	852	801	704	869	958	1,078	8,766
85–89	553	907	786	747	678	670	584	703	832	758	7,218
90–94	316	420	421	309	317	285	221	345	308	257	3,199
95+	119	129	113	85	101	73	63	67	53	64	867
Total	2,098	2,967	2,863	2,507	2,384	2,309	1,963	2,475	2,743	2,901	25,210

Table A41 (continued): Number of RPBS prescriptions used in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of prescriptions filled, 2002-03

				ı	Number o	f prescrip	tions fille	d			
Sex/age	0	1–9	10–19	20–29	30–39	40–49	50-59	60–74	75–99	100+	Total
Females					Per cent	of gold ca	rdholders	3			
70–74	8.4	11.2	10.3	9.8	4.2	9.1	6.3	11.7	12.9	16.1	100.0
75–79	10.3	9.4	9.0	9.1	9.2	9.0	6.9	9.9	11.7	15.4	100.0
80–84	9.7	10.0	10.2	8.9	8.8	8.9	7.6	10.1	11.9	14.0	100.0
85–89	9.0	11.5	10.0	9.8	8.7	9.0	8.3	9.8	12.0	11.9	100.0
90–94	11.7	11.3	11.2	8.5	9.6	9.0	7.5	11.4	10.5	9.3	100.0
95+	15.7	13.3	12.5	8.2	12.7	7.2	7.6	7.9	7.3	7.5	100.0
Total females	10.1	10.7	10.2	9.1	9.0	8.9	7.6	10.1	11.5	12.6	100.0
Males											
70–74	11.2	10.1	10.6	11.7	5.6	8.9	7.3	6.7	14.5	13.4	100.0
75–79	6.5	10.9	12.4	10.3	8.7	9.6	8.4	9.0	10.8	13.4	100.0
80–84	6.0	12.2	12.2	10.6	10.6	9.3	8.4	9.7	10.1	10.8	100.0
85–89	6.1	13.9	12.0	11.0	10.2	9.6	7.9	9.7	10.9	8.8	100.0
90–94	7.0	15.9	16.2	11.4	10.3	8.8	6.0	9.9	8.3	6.1	100.0
95+	7.5	19.8	14.6	14.6	8.5	12.3	6.1	7.1	2.4	7.1	100.0
Total males	6.3	12.9	12.6	10.8	10.0	9.5	8.0	9.5	10.2	10.3	100.0
Persons											
70–74	9.2	10.9	10.4	10.4	4.6	9.1	6.6	10.2	13.3	15.3	100.0
75–79	8.3	10.2	10.8	9.8	9.0	9.3	7.7	9.4	11.2	14.3	100.0
80–84	7.7	11.2	11.3	9.8	9.7	9.1	8.0	9.9	10.9	12.3	100.0
85–89	7.7	12.6	10.9	10.3	9.4	9.3	8.1	9.7	11.5	10.5	100.0
90–94	9.9	13.1	13.2	9.7	9.9	8.9	6.9	10.8	9.6	8.0	100.0
95+	13.7	14.9	13.0	9.8	11.6	8.4	7.3	7.7	6.1	7.4	100.0
Total persons	8.3	11.8	11.4	9.9	9.5	9.2	7.8	9.8	10.9	11.5	100.0

Table A42: Number of RPBS prescriptions used in the community: DVA gold cardholders living in the community, by sex, age and number of prescriptions filled, 2002–03

					Numbe	r of presci	iptions fill	led			
Sex/age	0	1–9	10–19	20–29	30–39	40–49	50–59	60–74	75–99	100+	Total
Females					Numbe	er of gold	cardholde	rs			
70–74	1,150	1,966	2,140	2,290	2,251	1,867	1,466	1,617	1,680	1,311	17,738
75–79	2,078	3,525	3,973	4,479	4,542	4,129	3,449	3,812	3,793	3,114	36,894
80–84	1,519	2,567	2,933	3,423	3,434	3,466	2,745	3,145	3,220	2,365	28,817
85–89	665	1,101	1,218	1,383	1,384	1,321	1,170	1,239	1,191	825	11,497
90–94	197	329	307	309	305	285	253	251	226	149	2,611
95+	44	72	62	44	42	34	23	34	24	18	397
Total	5,653	9,560	10,633	11,928	11,958	11,102	9,106	10,098	10,134	7,782	97,954
Males											
70–74	709	1,110	1,023	1,050	949	725	598	712	708	683	8,267
75–79	2,302	5,267	6,157	6,805	6,510	5,889	4,831	5,461	5,472	4,981	53,675
80–84	2,098	4,766	5,588	6,173	6,086	5,345	4,326	4,752	4,817	4,072	48,023
85–89	790	1,585	1,860	1,957	1,875	1,524	1,252	1,346	1,305	957	14,451
90–94	174	345	361	349	305	245	175	189	177	105	2,425
95+	24	42	38	26	21	12	18	10	10	5	206
Total males	6,097	13,115	15,027	16,360	15,746	13,740	11,200	12,470	12,489	10,803	127,047
Persons											
70–74	1,859	3,076	3,163	3,340	3,200	2,592	2,064	2,329	2,388	1,994	26,005
75–79	4,380	8,792	10,130	11,284	11,052	10,018	8,280	9,273	9,265	8,095	90,569
80–84	3,617	7,333	8,521	9,596	9,520	8,811	7,071	7,897	8,037	6,437	76,840
85–89	1,455	2,686	3,078	3,340	3,259	2,845	2,422	2,585	2,496	1,782	25,948
90–94	371	674	668	658	610	530	428	440	403	254	5,036
95+	68	114	100	70	63	46	41	44	34	23	603
Total	11,750	22,675	25,660	28,288	27,704	24,842	20,306	22,568	22,623	18,585	225,001

Table A42 (continued): Number of RPBS prescriptions used in the community: DVA gold cardholders living in the community, by sex, age and number of prescriptions filled, 2002–03

				ı	Number o	f prescrip	tions fille	d			
Sex/age	0	1–9	10–19	20–29	30–39	40–49	50-59	60–74	75–99	100+	Total
Females					Per cent	of gold ca	rdholders	3			
70–74	6.5	11.1	12.1	12.9	12.7	10.5	8.3	9.1	9.5	7.4	100.0
75–79	5.6	9.6	10.8	12.1	12.3	11.2	9.3	10.3	10.3	8.4	100.0
80–84	5.3	8.9	10.2	11.9	11.9	12.0	9.5	10.9	11.2	8.2	100.0
85–89	5.8	9.6	10.6	12.0	12.0	11.5	10.2	10.8	10.4	7.2	100.0
90–94	7.5	12.6	11.8	11.8	11.7	10.9	9.7	9.6	8.7	5.7	100.0
95+	11.1	18.1	15.6	11.1	10.6	8.6	5.8	8.6	6.0	4.5	100.0
Total females	6.4	10.9	11.3	12.3	12.0	10.9	8.9	9.9	9.8	7.6	100.0
Males											
70–74	8.6	13.4	12.4	12.7	11.5	8.8	7.2	8.6	8.6	8.3	100.0
75–79	4.3	9.8	11.5	12.7	12.1	11.0	9.0	10.2	10.2	9.3	100.0
80–84	4.4	9.9	11.6	12.9	12.7	11.1	9.0	9.9	10.0	8.5	100.0
85–89	5.5	11.0	12.9	13.5	13.0	10.5	8.7	9.3	9.0	6.6	100.0
90–94	7.2	14.2	14.9	14.4	12.6	10.1	7.2	7.8	7.3	4.3	100.0
95+	11.7	20.4	18.4	12.6	10.2	5.8	8.7	4.9	4.9	2.4	100.0
Total males	5.3	11.7	12.7	13.1	12.2	10.5	8.4	9.2	9.1	7.9	100.0
Persons											
70–74	7.1	11.8	12.2	12.8	12.3	10.0	7.9	9.0	9.2	7.7	100.0
75–79	4.8	9.7	11.2	12.5	12.2	11.1	9.1	10.2	10.2	8.9	100.0
80–84	4.7	9.5	11.1	12.5	12.4	11.5	9.2	10.3	10.5	8.4	100.0
85–89	5.6	10.4	11.9	12.9	12.6	11.0	9.3	10.0	9.6	6.9	100.0
90–94	7.4	13.4	13.3	13.1	12.1	10.5	8.5	8.7	8.0	5.0	100.0
95+	11.3	18.9	16.6	11.6	10.4	7.6	6.8	7.3	5.6	3.8	100.0
Total persons	5.7	11.4	12.1	12.8	12.1	10.7	8.6	9.5	9.4	7.7	100.0

Note: Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

Table A43: Number of RPBS medications used in RAC: DVA gold cardholders living in permanent RAC, by sex, age and number of medications received, 2002–03

		Number	of different m	edications pre	scribed and fi	lled	
Sex/age	0	1–4	5–9	10–14	15–19	20+	Total
Females			Number o	of gold cardho	lders		
70–74	36	57	102	100	84	49	428
75–79	219	222	535	538	317	299	2,130
80–84	395	408	1,047	1,075	656	507	4,088
85–89	356	416	1,079	1,062	601	462	3,976
90–94	228	228	492	544	269	181	1,942
95+	103	94	168	169	83	38	655
Total females	1,337	1,425	3,423	3,488	2,010	1,536	13,219
Males							
70–74	20	21	48	37	31	22	179
75–79	158	234	680	650	395	306	2,423
80–84	282	482	1,361	1,302	726	525	4,678
85–89	197	394	912	886	503	350	3,242
90–94	88	154	419	328	165	103	1,257
95+	16	34	59	62	26	15	212
Total males	761	1,319	3,479	3,265	1,846	1,321	11,991
Persons							
70–74	56	78	150	137	115	71	607
75–79	377	456	1,215	1,188	712	605	4,553
80–84	677	890	2,408	2,377	1,382	1,032	8,766
85–89	553	810	1,991	1,948	1,104	812	7,218
90–94	316	382	911	872	434	284	3,199
95+	119	128	227	231	109	53	867
Total persons	2,098	2,744	6,902	6,753	3,856	2,857	25,210

 $Table A43 \ (continued): Number of RPBS \ medications \ used in RAC: DVA \ gold \ cardholders \ living in permanent RAC, by sex, age and number of medications received, 2002–03$

Sex/age	Number of different medications prescribed and filled							
	0	1–4	5–9	10–14	15–19	20+	Total	
Females	Per cent of gold cardholders							
70–74	8.4	13.3	23.8	23.4	19.6	11.4	100.0	
75–79	10.3	10.4	25.1	25.3	14.9	14.0	100.0	
80–84	9.7	10.0	25.6	26.3	16.0	12.4	100.0	
85–89	9.0	10.5	27.1	26.7	15.1	11.6	100.0	
90–94	11.7	11.7	25.3	28.0	13.9	9.3	100.0	
95+	15.7	14.4	25.6	25.8	12.7	5.8	100.0	
Total females	10.1	10.8	25.9	26.4	15.2	11.6	100.0	
Males								
70–74	11.2	11.7	26.8	20.7	17.3	12.3	100.0	
75–79	6.5	9.7	28.1	26.8	16.3	12.6	100.0	
80–84	6.0	10.3	29.1	27.8	15.5	11.2	100.0	
85–89	6.1	12.2	28.1	27.3	15.5	10.8	100.0	
90–94	7.0	12.3	33.3	26.1	13.1	8.2	100.0	
95+	7.5	16.0	27.8	29.2	12.3	7.1	100.0	
Total males	6.3	11.0	29.0	27.2	15.4	11.0	100.0	
Persons								
70–74	9.2	12.9	24.7	22.6	18.9	11.7	100.0	
75–79	8.3	10.0	26.7	26.1	15.6	13.3	100.0	
80–84	7.7	10.2	27.5	27.1	15.8	11.8	100.0	
85–89	7.7	11.2	27.6	27.0	15.3	11.2	100.0	
90–94	9.9	11.9	28.5	27.3	13.6	8.9	100.0	
95+	13.7	14.8	26.2	26.6	12.6	6.1	100.0	
Total persons	8.3	10.9	27.4	26.8	15.3	11.3	100.0	

 $Table A 44: \ \ Number of RPBS \ medications \ used in the \ community: DVA \ gold \ cardholders \ living \ in the \ community, by \ sex, \ age \ and \ number \ of \ medications \ received, 2002–03$

	Number of different medications prescribed and filled								
Sex/age	0	1–4	5–9	10–14	15–19	20+	Total		
Females	Number of gold cardholders								
70–74	1,150	3,059	5,489	4,061	2,258	1,721	17,738		
75–79	2,078	5,343	11,132	9,060	5,198	4,083	36,894		
80-84	1,519	3,828	8,494	7,411	4,215	3,350	28,817		
85–89	665	1,502	3,358	3,050	1,724	1,198	11,497		
90–94	197	383	800	633	360	238	2,611		
95+	44	75	119	88	38	33	397		
Total females	5,653	14,190	29,392	24,303	13,793	10,623	97,954		
Males									
70–74	709	1,623	2,423	1,637	978	897	8,267		
75–79	2,302	8,542	16,011	12,730	7,278	6,812	53,675		
80-84	2,098	7,232	14,021	11,852	6,716	6,104	48,023		
85–89	790	2,162	4,343	3,555	1,966	1,635	14,451		
90-94	174	419	747	583	289	213	2,425		
95+	24	49	62	41	15	15	206		
Total males	6,097	20,027	37,607	30,398	17,242	15,676	127,047		
Persons									
70–74	1,859	4,682	7,912	5,698	3,236	2,618	26,005		
75–79	4,380	13,885	27,143	21,790	12,476	10,895	90,569		
80-84	3,617	11,060	22,515	19,263	10,931	9,454	76,840		
85–89	1,455	3,664	7,701	6,605	3,690	2,833	25,948		
90–94	371	802	1,547	1,216	649	451	5,036		
95+	68	124	181	129	53	48	603		
Total persons	11,750	34,217	66,999	54,701	31,035	26,299	225,001		

Table A44 (continued): Number of RPBS medications used in the community: DVA gold cardholders living in the community, by sex, age and number of medications received, 2002–03

Sex/age	Number of different medications prescribed and filled							
	0	1–4	5–9	10–14	15–19	20+	Total	
Females	Per cent of gold cardholders							
70–74	6.5	17.2	30.9	22.9	12.7	9.7	100.0	
75–79	5.6	14.5	30.2	24.6	14.1	11.1	100.0	
80–84	5.3	13.3	29.5	25.7	14.6	11.6	100.0	
85–89	5.8	13.1	29.2	26.5	15.0	10.4	100.0	
90–94	7.5	14.7	30.6	24.2	13.8	9.1	100.0	
95+	11.1	18.9	30.0	22.2	9.6	8.3	100.0	
Total females	6.4	15.8	29.9	24.0	13.5	10.4	100.0	
Males								
70–74	8.6	19.6	29.3	19.8	11.8	10.9	100.0	
75–79	4.3	15.9	29.8	23.7	13.6	12.7	100.0	
80–84	4.4	15.1	29.2	24.7	14.0	12.7	100.0	
85–89	5.5	15.0	30.1	24.6	13.6	11.3	100.0	
90–94	7.2	17.3	30.8	24.0	11.9	8.8	100.0	
95+	11.7	23.8	30.1	19.9	7.3	7.3	100.0	
Total males	5.3	17.8	30.4	22.9	12.5	11.1	100.0	
Persons								
70–74	7.1	18.0	30.4	21.9	12.4	10.1	100.0	
75–79	4.8	15.3	30.0	24.1	13.8	12.0	100.0	
80–84	4.7	14.4	29.3	25.1	14.2	12.3	100.0	
85–89	5.6	14.1	29.7	25.5	14.2	10.9	100.0	
90–94	7.4	15.9	30.7	24.1	12.9	9.0	100.0	
95+	11.3	20.6	30.0	21.4	8.8	8.0	100.0	
Total persons	5.7	17.0	30.2	23.4	12.9	10.8	100.0	

Note: Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

Table A45: Hospital use by RAC residents: DVA gold cardholders who spent time in hospital while living in permanent RAC, by hospital sector, age and sex, 2001–02 and 2002–03

	2001–02				2002–03			
Sex/age	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals
Females				Per cent of go	ld cardholders			
70–74	12.6	14.6	6.0	33.3	14.7	15.4	5.1	35.2
75–79	14.6	17.1	6.8	38.5	14.0	15.2	5.0	34.2
80-84	15.6	15.7	6.3	37.7	13.9	15.7	6.5	36.1
85–89	14.8	16.1	5.6	36.4	13.4	16.5	6.2	36.0
90–94	13.1	14.6	5.3	33.0	12.4	17.6	4.2	34.2
95+	9.2	16.9	3.7	29.8	8.7	14.5	4.1	27.3
Total females	14.4	15.9	5.9	36.2	13.3	16.1	5.7	35.0
Males								
70–74	13.1	22.5	9.4	45.0	14.8	18.8	9.4	43.0
75–79	14.3	19.2	7.1	40.6	13.7	20.1	7.1	40.9
80–84	14.5	19.4	7.0	40.9	13.7	20.6	6.4	40.7
85–89	15.0	18.9	7.4	41.3	13.7	20.0	7.3	41.0
90–94	14.7	19.9	5.4	40.0	13.0	17.8	7.9	38.7
95+	16.8	12.6	9.1	38.5	9.8	17.9	4.6	32.4
Total males	14.6	19.2	7.0	40.9	13.6	20.0	7.0	40.5
Persons								
70–74	12.8	16.7	6.9	36.3	14.7	16.4	6.3	37.3
75–79	14.4	18.4	7.0	39.8	13.8	17.8	6.1	37.7
80–84	15.0	17.7	6.7	39.5	13.8	18.3	6.5	38.6
85–89	14.9	17.4	6.4	38.7	13.5	18.1	6.7	38.3
90–94	13.7	16.7	5.3	35.7	12.6	17.7	5.7	36.0
95+	10.8	16.0	4.9	31.6	8.9	15.3	4.2	28.4
Total persons	14.5	17.6	6.5	38.5	13.4	17.9	6.3	37.6

Note: Table includes all states and territories except Western Australia and the Northern Territory.

Table A46: Hospital use by low-care RAC residents: DVA gold cardholders who spent time in hospital while living in permanent low-care RAC, by hospital sector, age and sex, 2001–02 and 2002–03

		200	1–02			2002	2–03	
Sex/age	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals
Females				Per cent of go	ld cardholders			
70–74	17.9	11.4	6.0	35.3	20.3	14.5	5.2	40.1
75–79	20.5	14.0	9.7	44.2	19.9	12.1	5.7	37.7
80–84	20.4	12.9	6.8	40.0	18.0	12.0	7.1	37.1
85–89	19.4	13.5	7.3	40.2	18.2	13.5	6.4	38.1
90–94	19.7	13.6	5.5	38.8	16.3	17.6	5.5	39.3
95+	14.7	16.8	7.0	38.5	11.5	16.7	2.6	30.8
Total females	19.7	13.4	7.3	40.4	18.0	13.5	6.3	37.7
Males								
70–74	25.0	18.3	8.3	51.7	25.0	11.5	15.4	51.9
75–79	22.0	15.3	9.7	47.0	19.5	15.8	7.7	43.0
80–84	21.8	15.4	9.6	46.9	18.8	18.1	8.8	45.8
85–89	21.9	15.5	9.9	47.2	19.1	16.6	8.9	44.6
90–94	20.1	18.4	4.6	43.1	19.7	16.3	7.9	43.9
95+	22.7	11.4	11.4	45.5	14.5	11.3	4.8	30.6
Total males	21.8	15.7	9.2	46.7	19.1	16.8	8.6	44.5
Persons								
70–74	19.7	13.1	6.6	39.3	21.4	13.8	7.6	42.9
75–79	21.3	14.7	9.7	45.7	19.7	13.8	6.7	40.2
80–84	21.1	14.1	8.1	43.3	18.4	14.9	7.9	41.2
85–89	20.5	14.3	8.4	43.2	18.6	14.8	7.5	40.8
90–94	19.8	15.5	5.2	40.5	17.6	17.1	6.5	41.2
95+	16.6	15.5	8.0	40.1	12.4	15.1	3.2	30.7
Total persons	20.7	14.5	8.1	43.2	18.5	14.9	7.3	40.7

Table A47: Hospital use by high-care RAC residents: DVA gold cardholders who spent time in hospital while living in permanent high-care RAC, by hospital sector, age and sex, 2001–02 and 2002–03

		200	1–02			2002	2–03	
Sex/age	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals
Females				Per cent of go	ld cardholders			
70–74	10.6	14.8	5.5	30.9	11.5	14.7	4.8	31.0
75–79	11.0	16.7	4.1	31.9	11.1	14.8	4.0	29.8
80–84	12.5	15.2	5.1	32.7	11.4	15.8	5.2	32.4
85–89	11.9	15.3	3.6	30.9	11.1	15.7	5.0	31.9
90–94	9.6	13.0	4.5	27.0	11.0	14.6	2.8	28.4
95+	7.8	14.6	2.4	24.8	8.1	11.7	4.2	24.0
Total females	11.2	15.1	4.3	30.6	11.0	15.2	4.5	30.7
Males								
70–74	10.7	19.7	8.2	38.5	12.0	17.6	4.0	33.6
75–79	11.9	18.4	5.0	35.3	12.1	19.5	5.9	37.5
80–84	12.4	18.8	5.1	36.3	12.5	19.2	4.6	36.2
85–89	12.6	18.1	4.9	35.6	12.2	18.8	5.3	36.4
90–94	13.2	17.5	5.3	36.0	11.8	15.5	6.8	34.1
95+	13.8	11.4	7.3	32.5	7.6	15.9	3.4	26.9
Total males	12.4	18.3	5.1	35.8	12.2	18.7	5.2	36.1
Persons								
70–74	10.6	16.2	6.2	33.0	11.7	15.6	4.5	31.8
75–79	11.6	17.8	4.7	34.0	11.7	17.4	5.0	34.1
80–84	12.4	17.3	5.1	34.8	12.0	17.7	4.8	34.6
85–89	12.2	16.7	4.2	33.2	11.6	17.2	5.1	33.9
90–94	11.0	14.7	4.8	30.5	11.3	15.0	4.4	30.6
95+	9.1	13.9	3.4	26.4	8.0	12.7	4.1	24.7
Total persons	11.8	16.8	4.7	33.3	11.6	16.9	4.9	33.4

Table A48: Hospital use in the community: DVA gold cardholders who spent time in hospital while living in the community, by hospital sector, age and sex, 2001–02 and 2002–03

		200	1–02			2002	2–03	
Sex/age	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals	In private hospitals only	In public hospitals only	In private and public hospitals	Total in hospitals
Females				Per cent of go	ld cardholders			
70–74	23.3	6.8	5.6	35.7	23.6	7.0	5.3	35.9
75–79	25.0	8.3	6.6	39.8	25.2	8.1	6.6	39.9
80–84	24.2	10.2	7.5	42.0	24.2	9.8	7.4	41.3
85–89	23.0	12.7	9.2	45.0	23.0	13.2	8.3	44.5
90–94	21.1	17.7	9.3	48.0	20.4	16.6	9.2	46.2
95+	21.2	19.9	10.0	51.1	16.8	19.8	13.0	49.7
Total females	24.1	9.1	6.9	40.2	24.2	9.3	6.9	40.3
Males								
70–74	30.5	9.1	9.9	49.4	28.3	8.1	8.6	45.0
75–79	29.1	9.9	9.3	48.3	28.7	10.3	9.8	48.8
80–84	28.5	12.0	10.7	51.2	27.9	12.0	10.4	50.3
85–89	26.4	15.2	12.5	54.0	25.7	15.2	11.8	52.8
90–94	23.9	20.9	12.3	57.1	24.8	17.5	12.0	54.3
95+	27.2	25.9	8.2	61.2	26.4	25.8	6.2	58.4
Total males	28.7	11.2	10.1	49.9	28.0	11.5	10.2	49.7
Persons								
70–74	25.3	7.4	6.8	39.5	25.0	7.4	6.3	38.7
75–79	27.6	9.3	8.3	45.2	27.3	9.4	8.5	45.1
80–84	26.9	11.4	9.6	47.8	26.5	11.2	9.3	46.9
85–89	24.8	14.1	11.0	49.9	24.5	14.3	10.2	49.1
90–94	22.4	19.2	10.7	52.3	22.5	17.0	10.5	50.0
95+	23.1	21.8	9.4	54.4	20.0	21.8	10.8	52.6
Total persons	26.7	10.3	8.8	45.8	26.3	10.5	8.8	45.6

^{1.} Table excludes gold cardholders whose ages were unknown (35 and 32 in 2001–02 and 2002–03, respectively).

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A49: Hospital use by RAC residents: use and time in hospital for DVA gold cardholders who spent time in hospital while living in permanent RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	Average	days	Per cent of gold cardholders	Average	days
70–74	33.3	17.7	6.4	35.2	13.3	6.9
75–79	38.5	17.4	7.7	34.2	14.5	6.3
80–84	37.7	16.8	8.5	36.1	14.8	7.3
85–89	36.4	15.4	8.6	36.0	14.3	7.5
90–94	33.0	14.9	9.2	34.2	13.2	7.9
95+	29.8	15.9	10.2	27.3	13.4	8.6
Total females	36.2	16.3	8.3	35.0	14.3	7.3
Males						
70–74	45.0	20.4	8.8	43.0	22.3	8.6
75–79	40.6	14.3	6.5	40.9	13.8	6.2
80–84	40.9	14.6	6.9	40.7	13.8	5.9
85–89	41.3	14.1	7.4	41.0	14.7	6.9
90–94	40.0	14.5	8.3	38.7	13.5	7.7
95+	38.5	15.8	8.9	32.4	13.1	8.5
Total males	40.9	14.5	7.1	40.5	14.1	6.4
Persons						
70–74	36.3	18.6	7.1	37.3	16.1	7.6
75–79	39.8	15.5	7.0	37.7	14.1	6.3
80–84	39.5	15.5	7.6	38.6	14.2	6.4
85–89	38.7	14.8	8.0	38.3	14.5	7.2
90–94	35.7	14.7	8.8	36.0	13.4	7.8
95+	31.6	15.9	9.9	28.4	13.3	8.6
Total persons	38.5	15.3	7.7	37.6	14.2	6.8

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A50: Hospital use by low-care RAC residents: use and time in hospital for DVA gold cardholders who spent time in hospital while living in permanent low-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	Average	days	Per cent of gold cardholders	Average	days
70–74	35.2	19.3	7.3	40.9	14.7	8.2
75–79	46.7	15.9	6.7	39.0	13.3	4.9
80–84	41.6	14.4	6.6	38.6	13.9	7.2
85–89	42.1	15.3	8.0	39.6	13.1	6.1
90–94	40.6	14.2	8.5	41.8	10.7	6.1
95+	41.3	15.6	9.0	33.3	13.1	8.8
Total females	42.2	15.2	7.3	39.3	13.1	6.3
Males						
70–74	54.7	20.3	8.5	51.2	19.4	7.8
75–79	49.7	14.8	5.5	45.3	13.9	5.6
80–84	48.7	14.5	6.5	47.4	13.2	5.6
85–89	47.8	13.2	6.5	46.0	14.0	6.4
90–94	45.6	13.1	7.4	45.3	11.4	6.3
95+	51.5	18.6	8.3	33.3	10.6	5.8
Total males	48.5	14.2	6.3	46.2	13.4	5.9
Persons						
70–74	39.9	19.6	7.7	43.0	15.9	8.1
75–79	48.3	15.3	6.0	41.9	13.6	5.2
80–84	44.9	14.4	6.5	42.7	13.5	6.3
85–89	44.6	14.4	7.3	42.3	13.5	6.3
90–94	42.5	13.7	8.0	43.2	11.0	6.2
95+	43.5	16.3	8.8	33.3	12.4	7.9
Total persons	45.1	14.7	6.8	42.3	13.3	6.1

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A51: Hospital use by high-care RAC residents: use and time in hospital for DVA gold cardholders who spent time in hospital while living in permanent high-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	Average	days	Per cent of gold cardholders	Average	days
70–74	32.5	16.8	5.8	31.8	12.0	5.9
75–79	33.7	18.5	8.5	31.4	15.4	7.7
80–84	35.1	18.7	10.4	34.6	15.5	7.3
85–89	32.7	15.7	9.3	34.0	15.3	8.7
90–94	29.3	15.5	9.7	30.5	14.8	9.1
95+	26.6	16.1	10.9	25.3	13.6	8.5
Total females	32.7	17.2	9.3	32.6	15.1	8.0
Males						
70–74	40.0	20.8	9.2	38.7	24.6	9.2
75–79	36.9	14.2	7.4	39.3	13.7	6.5
80–84	37.8	14.5	7.1	38.0	14.2	6.0
85–89	37.9	14.7	8.1	38.2	15.0	7.2
90–94	37.2	15.5	9.0	35.6	14.9	8.6
95+	34.3	15.1	9.5	30.6	13.7	9.5
Total males	37.5	14.7	7.6	38.0	14.5	6.7
Persons						
70–74	34.5	18.0	6.7	33.9	16.5	7.3
75–79	35.7	15.7	7.8	35.8	14.4	6.9
80–84	36.7	16.1	8.3	36.5	14.7	6.5
85–89	35.2	15.2	8.6	36.0	15.1	7.9
90–94	32.4	15.5	9.4	32.5	14.8	8.9
95+	28.2	15.8	10.5	26.4	13.6	8.8
Total persons	35.2	15.8	8.3	35.3	14.8	7.3

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A52: Hospital use by people in the community: use and time in hospital for DVA gold cardholders who spent time in hospital while living in the community, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	Average	days	Per cent of gold cardholders	Average	days
70–74	35.7	10.1	4.2	35.9	9.8	4.1
75–79	39.8	11.3	5.2	39.9	11.0	5.1
80–84	42.0	14.3	6.8	41.3	13.4	6.4
85–89	45.0	19.8	9.9	44.5	17.6	9.0
90–94	48.0	22.6	12.1	46.2	20.2	11.0
95+	51.1	27.5	15.5	49.7	24.8	11.9
Total females	40.2	13.2	6.1	40.3	12.7	5.9
Males						
70–74	49.4	10.3	3.8	45.0	10.1	3.8
75–79	48.3	11.6	4.4	48.8	11.7	4.2
80–84	51.2	13.9	5.3	50.3	13.7	5.2
85–89	54.0	17.7	7.5	52.8	16.6	6.7
90–94	57.1	21.9	10.5	54.3	19.6	8.9
95+	61.2	28.0	15.8	58.4	27.6	15.5
Total males	49.9	13.1	5.0	49.7	13.1	4.9
Persons						
70–74	39.5	10.2	4.1	38.7	9.9	3.9
75–79	45.2	11.5	4.6	45.1	11.4	4.5
80–84	47.8	14.0	5.7	46.9	13.6	5.5
85–89	49.9	18.5	8.4	49.1	17.0	7.5
90–94	52.3	22.2	11.3	50.0	19.9	9.8
95+	54.4	27.7	15.6	52.6	25.8	13.1
Total persons	45.8	13.1	5.4	45.6	13.0	5.3

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

^{1.} Table excludes gold cardholders whose ages were unknown (35 and 32 in 2001–02 and 2002–03, respectively).

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A53: Hospital use by DVA disability pensioners in RAC: use and time in hospital for male DVA gold cardholders aged 70 years or older who spent time in hospital while living in permanent RAC, by care level and DVA disability pension type, 2001–02 and 2002–03

	_	2001–02			2002–03	
Care level/DVA disability pension type			Episode length ^(b)	Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)
Low-care RAC	Per cent of gold cardholders			Per cent of gold cardholders	Average	days
None	45.0	12.9	6.1	44.1	12.6	6.6
General rate	48.5	14.3	6.9	45.4	13.2	6.0
Intermediate/Special	52.2	14.9	7.1	48.5	12.9	4.3
EDA	57.5	17.0	5.4	53.1	15.9	5.6
Low-care males	48.5	14.2	6.3	46.2	13.4	5.9
High-care RAC						
None	35.4	14.9	7.6	36.3	13.7	6.8
General rate	38.2	14.2	7.4	36.7	15.3	7.3
Intermediate/Special	37.2	16.0	8.2	40.8	14.7	5.6
EDA	40.7	14.7	7.7	43.1	14.1	6.0
High-care males	37.5	14.7	7.6	38.0	14.5	6.7
All RAC						
None	38.5	14.0	7.0	38.7	13.3	6.7
General rate	41.5	14.3	7.2	39.6	14.5	6.8
Intermediate/Special	41.5	15.4	7.7	42.8	14.1	5.2
EDA	44.8	15.4	6.7	45.8	14.8	5.9
All RAC males	40.9	14.5	7.1	40.5	14.1	6.4

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

Table A54: Hospital use by DVA disability pensioners in the community: use and time in hospital for male DVA gold cardholders aged 70 years or older who spent time in hospital while living in the community, by care level and DVA disability pension type, 2001–02 and 2002–03

		2001–02	_	2002–03				
DVA disability pension type	Spent time in hospital	• • • • • • • • • • • • • • • • • • • •		Spent time in hospital	Total time in hospital ^(a)	Episode length ^(b)		
	Per cent of gold cardholders	Average o	days	Per cent of gold cardholders	Average	days		
None	42.7	12.3	5.3	42.7	12.5	5.3		
General rate	50.6	11.6	4.8	49.8	11.8	4.7		
Intermediate/Special	59.6	15.4	5.1	58.0	14.5	4.7		
EDA	65.6	18.5	5.2	64.1	17.9	4.9		
All males	49.9	13.1	5.0	49.7	13.1	4.9		

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

^{1.} Table excludes gold cardholders whose ages were unknown (10 each in 2001–02 and 2002–03).

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A55: Periods in hospital for RAC residents: DVA gold cardholders who spent time in hospital while living in permanent RAC, by age, sex and number of episodes in hospital, 2002–03

			Pe	riods spent	in hospital			
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Nun	nber of gold	cardholders	}		
70–74	75	33	17	6	7	1	_	139
75–79	384	140	72	14	36	4	5	655
80–84	760	328	122	68	49	8	5	1,340
85–89	731	311	123	61	47	5	1	1,279
90–94	357	129	59	20	17	1	_	583
95+	100	41	13	4	2	_	_	160
Total females	2,407	982	406	173	158	19	11	4,156
Males								
70–74	29	20	7	1	6	_	1	64
75–79	465	232	101	53	30	4	6	891
80–84	951	377	196	87	90	11	11	1,723
85–89	618	309	140	47	67	6	3	1,190
90–94	263	84	47	20	18	_	_	432
95+	36	15	1	3	1	_	_	56
Total males	2,362	1,037	492	211	212	21	21	4,356
Persons								
70–74	104	53	24	7	13	1	1	203
75–79	849	372	173	67	66	8	11	1,546
80–84	1,711	705	318	155	139	19	16	3,063
85–89	1,349	620	263	108	114	11	4	2,469
90–94	620	213	106	40	35	1	_	1,015
95+	136	56	14	7	3	_	_	216
Total persons	4,769	2,019	898	384	370	40	32	8,512

Table A55 (continued): Periods in hospital for RAC residents: DVA gold cardholders who spent time in hospital while living in permanent RAC, by age, sex and number of episodes in hospital, 2002–03

			Pe	riods spent i	n hospital			
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Per	ent of gold o	ardholders			
70–74	54.0	23.7	12.2	4.3	5.0	0.7	_	100.0
75–79	58.6	21.4	11.0	2.1	5.5	0.6	0.8	100.0
80–84	56.7	24.5	9.1	5.1	3.7	0.6	0.4	100.0
85–89	57.2	24.3	9.6	4.8	3.7	0.4	0.1	100.0
90–94	61.2	22.1	10.1	3.4	2.9	0.2	_	100.0
95+	62.5	25.6	8.1	2.5	1.3	_	_	100.0
Total females	57.9	23.6	9.8	4.2	3.8	0.5	0.3	100.0
Males								
70–74	45.3	31.3	10.9	1.6	9.4	0.0	1.6	100.0
75–79	52.2	26.0	11.3	5.9	3.4	0.4	0.7	100.0
80–84	55.2	21.9	11.4	5.0	5.2	0.6	0.6	100.0
85–89	51.9	26.0	11.8	3.9	5.6	0.5	0.3	100.0
90–94	60.9	19.4	10.9	4.6	4.2	_	_	100.0
95+	64.3	26.8	1.8	5.4	1.8	_	_	100.0
Total males	54.2	23.8	11.3	4.8	4.9	0.5	0.5	100.0
Persons								
70–74	51.2	26.1	11.8	3.4	6.4	0.5	0.5	100.0
75–79	54.9	24.1	11.2	4.3	4.3	0.5	0.7	100.0
80–84	55.9	23.0	10.4	5.1	4.5	0.6	0.5	100.0
85–89	54.6	25.1	10.7	4.4	4.6	0.4	0.2	100.0
90–94	61.1	21.0	10.4	3.9	3.4	0.1	_	100.0
95+	63.0	25.9	6.5	3.2	1.4	_	_	100.0
Total persons	56.0	23.7	10.5	4.5	4.3	0.5	0.4	100.0

^{1.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A56: Hospital episode length for RAC residents: DVA gold cardholders who spent time in hospital while living in permanent RAC, by age, sex and days spent in hospital per episode, 2002–03

				Number	of days pe	r episode	in hospita	I		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	115	19	16	15	57	24	17	3	1	267
75–79	807	86	61	69	203	156	97	22	3	1,504
80–84	1,239	176	131	111	444	374	218	35	5	2,733
85–89	1,008	169	114	138	441	337	209	32	4	2,452
90–94	315	71	72	64	212	150	83	14	_	981
95+	78	17	19	12	49	46	24	5	_	250
Total females	3,562	538	413	409	1,406	1,087	648	111	13	8,187
Males										
70–74	75	10	5	6	28	28	8	4	1	165
75–79	972	122	94	94	336	224	121	21	2	1,986
80–84	2,029	227	201	224	658	432	235	37	3	4,046
85–89	1,078	168	120	151	451	328	186	23	5	2,510
90–94	282	45	42	37	172	105	66	8	2	759
95+	34	5	4	3	20	9	9	2	_	86
Total males	4,470	577	466	515	1,665	1,126	625	95	13	9,552
Persons										
70–74	190	29	21	21	85	52	25	7	2	432
75–79	1,779	208	155	163	539	380	218	43	5	3,490
80–84	3,268	403	332	335	1,102	806	453	72	8	6,779
85–89	2,086	337	234	289	892	665	395	55	9	4,962
90–94	597	116	114	101	384	255	149	22	2	1,740
95+	112	22	23	15	69	55	33	7	_	336
Total	8,032	1,115	879	924	3,071	2,213	1,273	206	26	17,739

Table A56 (continued): Hospital episode length for RAC residents: DVA gold cardholders who spent time in hospital while living in permanent RAC, by age, sex and days spent in hospital per episode, 2002–03

			ı	Number of	days per	episode in	hospital			
Sex/age	1	2	3	4	5–9	10–19	20-49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	43.1	7.1	6.0	5.6	21.3	9.0	6.4	1.1	0.4	100.0
75–79	53.7	5.7	4.1	4.6	13.5	10.4	6.4	1.5	0.2	100.0
80–84	45.3	6.4	4.8	4.1	16.2	13.7	8.0	1.3	0.2	100.0
85–89	41.1	6.9	4.6	5.6	18.0	13.7	8.5	1.3	0.2	100.0
90–94	32.1	7.2	7.3	6.5	21.6	15.3	8.5	1.4	_	100.0
95+	31.2	6.8	7.6	4.8	19.6	18.4	9.6	2.0	_	100.0
Total females	43.5	6.6	5.0	5.0	17.2	13.3	7.9	1.4	0.2	100.0
Males										
70–74	45.5	6.1	3.0	3.6	17.0	17.0	4.8	2.4	0.6	100.0
75–79	48.9	6.1	4.7	4.7	16.9	11.3	6.1	1.1	0.1	100.0
80–84	50.1	5.6	5.0	5.5	16.3	10.7	5.8	0.9	0.1	100.0
85–89	42.9	6.7	4.8	6.0	18.0	13.1	7.4	0.9	0.2	100.0
90–94	37.2	5.9	5.5	4.9	22.7	13.8	8.7	1.1	0.3	100.0
95+	39.5	5.8	4.7	3.5	23.3	10.5	10.5	2.3	_	100.0
Total males	46.8	6.0	4.9	5.4	17.4	11.8	6.5	1.0	0.1	100.0
Persons										
70–74	44.0	6.7	4.9	4.9	19.7	12.0	5.8	1.6	0.5	100.0
75–79	51.0	6.0	4.4	4.7	15.4	10.9	6.2	1.2	0.1	100.0
80–84	48.2	5.9	4.9	4.9	16.3	11.9	6.7	1.1	0.1	100.0
85–89	42.0	6.8	4.7	5.8	18.0	13.4	8.0	1.1	0.2	100.0
90–94	34.3	6.7	6.6	5.8	22.1	14.7	8.6	1.3	0.1	100.0
95+	33.3	6.5	6.8	4.5	20.5	16.4	9.8	2.1	_	100.0
Total persons	45.3	6.3	5.0	5.2	17.3	12.5	7.2	1.2	0.1	100.0

^{1.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A57: Periods in hospital for people in the community: DVA gold cardholders who spent time in hospital while living in the community, by age, sex and number of episodes in hospital, 2002–03

			Р	eriods spent	in hospital			
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Nu	mber of gold	cardholders	3		
70–74	3,350	1,355	540	241	245	58	38	5,827
75–79	7,337	3,389	1,426	597	583	125	51	13,508
80–84	5,948	2,734	1,119	506	501	89	22	10,919
85–89	2,525	1,149	531	219	208	25	4	4,661
90–94	632	256	96	52	49	6	1	1,092
95+	97	49	20	8	8	_	1	183
Total females	19,889	8,932	3,732	1,623	1,594	303	117	36,190
Males								
70–74	1,598	760	375	200	224	45	32	3,234
75–79	11,442	5,828	2,876	1,396	1,673	330	188	23,733
80–84	10,455	5,585	2,713	1,388	1,494	259	141	22,035
85–89	3,171	1,758	894	380	517	93	31	6,844
90–94	568	279	129	72	83	7	2	1,140
95+	56	27	15	4	2	_	_	104
Total males	27,290	14,237	7,002	3,440	3,993	734	394	57,090
Persons								
70–74	4,948	2,115	915	441	469	103	70	9,061
75–79	18,779	9,217	4,302	1,993	2,256	455	239	37,241
80–84	16,403	8,319	3,832	1,894	1,995	348	163	32,954
85–89	5,696	2,907	1,425	599	725	118	35	11,505
90–94	1,200	535	225	124	132	13	3	2,232
95+	153	76	35	12	10	_	1	287
Total persons	47,179	23,169	10,734	5,063	5,587	1,037	511	93,280

Table A57 (continued): Periods in hospital for people in the community: DVA gold cardholders who spent time in hospital while living in the community, by age, sex and number of episodes in hospital, 2002–03

			Pe	riods spent i	n hospital			
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Pero	ent of gold o	ardholders			
70–74	57.5	23.3	9.3	4.1	4.2	1.0	0.7	100.0
75–79	54.3	25.1	10.6	4.4	4.3	0.9	0.4	100.0
80–84	54.5	25.0	10.2	4.6	4.6	0.8	0.2	100.0
85–89	54.2	24.7	11.4	4.7	4.5	0.5	0.1	100.0
90–94	57.9	23.4	8.8	4.8	4.5	0.5	0.1	100.0
95+	53.0	26.8	10.9	4.4	4.4	_	0.5	100.0
Total females	55.0	24.7	10.3	4.5	4.4	0.8	0.3	100.0
Males								
70–74	49.4	23.5	11.6	6.2	6.9	1.4	1.0	100.0
75–79	48.2	24.6	12.1	5.9	7.0	1.4	0.8	100.0
80–84	47.4	25.3	12.3	6.3	6.8	1.2	0.6	100.0
85–89	46.3	25.7	13.1	5.6	7.6	1.4	0.5	100.0
90–94	49.8	24.5	11.3	6.3	7.3	0.6	0.2	100.0
95+	53.8	26.0	14.4	3.8	1.9	_	_	100.0
Total males	47.8	24.9	12.3	6.0	7.0	1.3	0.7	100.0
Persons								
70–74	54.6	23.3	10.1	4.9	5.2	1.1	0.8	100.0
75–79	50.4	24.7	11.6	5.4	6.1	1.2	0.6	100.0
80–84	49.8	25.2	11.6	5.7	6.1	1.1	0.5	100.0
85–89	49.5	25.3	12.4	5.2	6.3	1.0	0.3	100.0
90–94	53.8	24.0	10.1	5.6	5.9	0.6	0.1	100.0
95+	53.3	26.5	12.2	4.2	3.5	_	0.3	100.0
Total persons	50.6	24.8	11.5	5.4	6.0	1.1	0.5	100.0

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{3.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A58: Hospital episode length in the community: DVA gold cardholders who spent time in hospital while living in the community, by age, sex and days spent in hospital per episode, 2002–03

				Number	of days pe	er episode	in hospita	I		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	9,516	728	525	437	1,358	905	455	76	26	14,026
75–79	17,741	1,606	1,161	1,040	3,522	2,481	1,413	210	52	29,226
80–84	12,271	1,320	945	906	3,081	2,405	1,462	309	61	22,760
85–89	3,748	544	475	410	1,541	1,198	925	184	44	9,069
90–94	624	115	113	91	391	329	293	44	11	2,011
95+	132	24	11	18	69	57	52	15	2	380
Total females	44,032	4,337	3,230	2,902	9,962	7,375	4,600	838	196	77,472
Males										
70–74	5,918	473	342	281	937	476	228	45	9	8,709
75–79	43,305	3,542	2,774	2,180	6,719	4,321	2,154	411	104	65,510
80–84	35,852	3,207	2,611	2,141	6,754	4,592	2,567	544	158	58,426
85–89	8,840	1,066	799	740	2,398	1,759	1,115	231	62	17,010
90–94	1,018	160	155	98	418	342	264	53	7	2,515
95+	45	12	8	12	38	24	35	9	2	185
Total males	94,978	8,460	6,689	5,452	17,264	11,514	6,363	1,293	342	152,355
Persons										
70–74	15,434	1,201	867	718	2,295	1,381	683	121	35	22,735
75–79	61,046	5,148	3,935	3,220	10,241	6,802	3,567	621	156	94,736
80–84	48,123	4,527	3,556	3,047	9,835	6,997	4,029	853	219	81,186
85–89	12,588	1,610	1,274	1,150	3,939	2,957	2,040	415	106	26,079
90–94	1,642	275	268	189	809	671	557	97	18	4,526
95+	177	36	19	30	107	81	87	24	4	565
Total	139,010	12,797	9,919	8,354	27,226	18,889	10,963	2,131	538	229,827

Table A58 (continued): Hospital episode length in the community: DVA gold cardholders who spent time in hospital while living in the community, by age, sex and days spent in hospital per episode, 2002–03

			ı	Number of	days per	episode in	hospital			
Sex/age	1	2	3	4	5–9	10–19	20-49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	67.8	5.2	3.7	3.1	9.7	6.5	3.2	0.5	0.2	100.0
75–79	60.7	5.5	4.0	3.6	12.1	8.5	4.8	0.7	0.2	100.0
80–84	53.9	5.8	4.2	4.0	13.5	10.6	6.4	1.4	0.3	100.0
85–89	41.3	6.0	5.2	4.5	17.0	13.2	10.2	2.0	0.5	100.0
90–94	31.0	5.7	5.6	4.5	19.4	16.4	14.6	2.2	0.5	100.0
95+	34.7	6.3	2.9	4.7	18.2	15.0	13.7	3.9	0.5	100.0
Total females	56.8	5.6	4.2	3.7	12.9	9.5	5.9	1.1	0.3	100.0
Males										
70–74	68.0	5.4	3.9	3.2	10.8	5.5	2.6	0.5	0.1	100.0
75–79	66.1	5.4	4.2	3.3	10.3	6.6	3.3	0.6	0.2	100.0
80–84	61.4	5.5	4.5	3.7	11.6	7.9	4.4	0.9	0.3	100.0
85–89	52.0	6.3	4.7	4.4	14.1	10.3	6.6	1.4	0.4	100.0
90–94	40.5	6.4	6.2	3.9	16.6	13.6	10.5	2.1	0.3	100.0
95+	24.3	6.5	4.3	6.5	20.5	13.0	18.9	4.9	1.1	100.0
Total males	62.3	5.6	4.4	3.6	11.3	7.6	4.2	0.8	0.2	100.0
Persons										
70–74	67.9	5.3	3.8	3.2	10.1	6.1	3.0	0.5	0.2	100.0
75–79	64.4	5.4	4.2	3.4	10.8	7.2	3.8	0.7	0.2	100.0
80–84	59.3	5.6	4.4	3.8	12.1	8.6	5.0	1.1	0.3	100.0
85–89	48.3	6.2	4.9	4.4	15.1	11.3	7.8	1.6	0.4	100.0
90–94	36.3	6.1	5.9	4.2	17.9	14.8	12.3	2.1	0.4	100.0
95+	31.3	6.4	3.4	5.3	18.9	14.3	15.4	4.2	0.7	100.0
Total persons	60.5	5.6	4.3	3.6	11.8	8.2	4.8	0.9	0.2	100.0

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{3.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A59: Private hospital use by RAC residents: use and time in private hospital for DVA gold cardholders who spent time in private hospital while living in permanent RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	Av	verage days	Per cent of gold cardholders	Av	verage days
70–74	18.8	20.2	7.2	20.1	12.2	7.0
75–79	20.9	14.1	7.9	18.8	14.9	7.5
80–84	21.4	14.9	8.2	19.9	14.5	7.6
85–89	19.9	14.2	9.5	19.4	13.6	8.9
90–94	17.8	12.4	9.0	16.3	13.4	8.8
95+	12.8	14.6	10.2	12.7	15.0	11.1
Total females	19.8	14.4	8.5	18.7	14.1	7.9
Males						
70–74	24.2	20.4	5.2	24.0	27.0	11.3
75–79	21.4	12.2	6.6	20.6	11.9	5.9
80–84	21.7	13.7	7.8	20.2	12.9	6.3
85–89	22.6	12.2	6.8	21.3	13.0	6.3
90–94	20.6	13.8	8.2	21.4	12.4	8.4
95+	25.0	15.6	8.8	14.6	13.5	9.5
Total males	21.8	13.1	7.2	20.7	12.9	6.5
Persons						
70–74	20.3	20.3	6.4	21.3	17.1	8.8
75–79	21.2	13.0	7.1	19.8	13.2	6.6
80–84	21.5	14.2	8.0	20.1	13.6	6.9
85–89	21.2	13.2	8.0	20.2	13.3	7.5
90–94	18.9	13.0	8.6	18.3	13.0	8.6
95+	15.5	14.9	9.7	13.1	14.6	10.7
Total persons	20.8	13.7	7.8	19.6	13.5	7.2

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A60: Private hospital use by low-care RAC residents: use and time in private hospital for DVA gold cardholders who spent time private hospital while living in permanent low-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders	A	verage days	Per cent of gold cardholders		Average days
70–74	23.9	21.8	11.7	25.6	13.9	9.3
75–79	30.2	14.0	6.9	25.6	13.3	6.5
80–84	27.2	13.3	6.5	25.1	13.2	8.4
85–89	26.7	13.6	8.8	24.6	12.1	7.7
90–94	25.2	13.9	9.7	21.8	10.5	6.5
95+	21.7	19.1	12.3	14.1	14.0	9.0
Total females	27.0	14.1	7.8	24.3	12.6	7.6
Males						
70–74	33.3	16.6	8.3	40.4	30.2	15.5
75–79	31.7	12.3	5.8	27.2	10.8	4.9
80–84	31.5	13.1	6.8	27.7	11.0	6.0
85–89	31.7	11.7	6.0	28.0	11.8	5.5
90–94	24.7	13.5	6.8	27.6	11.5	7.5
95+	34.1	15.3	5.1	19.4	8.8	5.0
Total males	31.0	12.6	6.3	27.7	11.6	5.9
Persons						
70–74	26.2	20.2	10.6	29.0	19.2	11.6
75–79	31.0	13.1	6.3	26.4	12.1	5.7
80–84	29.2	13.2	6.7	26.3	12.1	7.1
85–89	28.9	12.7	7.3	26.0	12.0	6.6
90–94	25.0	13.7	8.4	24.1	10.9	7.0
95+	24.6	17.9	8.8	15.6	12.1	7.5
Total persons	28.8	13.4	7.0	25.8	12.1	6.8

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A61: Private hospital use by high-care RAC residents: use and time in private hospital for DVA gold cardholders who spent time in private hospital while living in permanent high-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	16.1	18.7	5.1	16.3	8.6	4.3
75–79	15.1	14.0	9.2	15.1	16.5	8.5
80–84	17.6	16.7	10.6	16.6	15.9	7.1
85–89	15.5	15.2	10.4	16.1	15.0	10.1
90–94	14.1	11.1	8.5	13.8	15.5	10.7
95+	10.2	11.6	8.6	12.3	15.4	12.0
Total females	15.5	14.9	9.4	15.5	15.4	8.6
Males						
70–74	18.9	14.3	5.3	16.0	25.9	8.6
75–79	16.9	12.3	7.7	18.0	12.3	6.4
80–84	17.5	13.8	8.4	17.0	14.3	6.6
85–89	17.5	12.7	7.8	17.6	14.1	7.0
90–94	18.5	14.1	9.5	18.6	13.2	9.2
95+	21.1	16.7	14.9	11.0	15.3	13.6
Total males	17.5	13.3	8.2	17.4	13.9	6.9
Persons						
70–74	16.9	17.3	5.2	16.2	14.3	6.1
75–79	16.2	12.9	8.2	16.7	14.0	7.2
80–84	17.5	15.0	9.3	16.8	15.0	6.8
85–89	16.5	13.9	9.0	16.8	14.6	8.4
90–94	15.8	12.5	9.0	15.6	14.5	10.0
95+	12.5	13.4	10.6	12.0	15.4	12.3
Total persons	16.6	14.0	8.7	16.4	14.6	7.7

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A62: Private hospital use by people in the community: use and time in private hospital for DVA gold cardholders who spent time in private hospital while living in the community, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	28.0	7.9	4.1	28.2	7.6	3.9
75–79	30.8	8.8	4.8	31.1	8.5	4.7
80–84	31.2	11.2	6.3	31.2	10.8	5.9
85–89	31.6	15.2	9.1	31.0	13.8	8.2
90–94	29.4	18.1	11.1	29.1	17.1	10.6
95+	29.0	24.1	16.9	28.5	22.1	11.9
Total females	30.3	10.1	5.6	30.5	9.9	5.5
Males						
70–74	35.6	8.9	4.0	35.3	7.8	3.6
75–79	30.9	10.6	4.7	38.0	8.6	3.8
80-84	44.0	9.2	4.3	38.2	10.1	4.8
85–89	47.1	10.5	5.0	37.5	12.5	6.0
90–94	45.8	13.0	7.0	36.0	15.6	8.4
95+	39.1	19.9	10.9	32.0	21.9	12.0
Total males	37.1	10.0	4.6	37.8	9.7	4.5
Persons						
70–74	30.2	8.2	4.1	30.5	7.7	3.8
75–79	30.9	9.9	4.8	35.2	8.6	4.1
80–84	39.3	9.8	4.9	35.6	10.3	5.1
85–89	40.2	12.1	6.2	34.7	13.0	6.8
90–94	37.3	15.1	8.6	32.4	16.3	9.3
95+	32.2	22.4	14.2	29.7	22.0	11.9
Total persons	34.3	10.1	4.9	34.6	9.8	4.8

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

^{1.} Table excludes gold cardholders whose ages were unknown (35 and 32 in 2001–02 and 2002–03, respectively).

^{2.} Table includes all states and territories.

Table A63: Private hospital use by DVA disability pensioners in RAC: use and time in private hospital for male DVA gold cardholders aged 70 years or older who spent time in private hospital while living in permanent RAC, by care level and DVA disability pension type, 2001–02 and 2002–03

		2001–02			2002-03	
Care level/DVA disability pension type	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
Low-care RAC	Per cent of gold cardholders	Av	erage days	Per cent of gold cardholders	A	Average days
None	26.4	11.2	6.3	24.5	10.3	6.4
General rate	31.9	12.5	6.4	27.3	11.6	5.2
Intermediate/Special	36.1	13.5	5.1	34.6	14.0	6.3
EDA	39.1	16.0	7.0	34.2	13.1	7.2
Low-care males	31.0	12.6	6.3	27.7	11.6	5.9
High-care RAC						
None	15.2	13.7	9.6	15.7	13.4	8.3
General rate	17.9	11.9	7.2	16.8	14.3	6.7
Intermediate/Special	19.2	15.7	8.2	18.8	15.6	5.3
EDA	21.0	14.2	8.2	22.1	13.1	6.8
High-care males	17.5	13.3	8.2	17.4	13.9	6.9
All RAC						
None	19.0	12.7	8.0	18.5	12.0	7.5
General rate	22.6	12.3	6.9	20.4	13.1	6.0
Intermediate/Special	24.3	15.0	6.0	23.1	14.9	5.6
EDA	25.5	14.8	7.7	25.3	13.1	6.9
All RAC males	21.8	13.1	7.2	20.7	12.9	6.5

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

Table A64: Private hospital use by DVA disability pensioners in the community: use and time in private hospital for male DVA gold cardholders aged 70 years or older who spent time in private hospital while living in the community, by care level and DVA disability pension type, 2001–02 and 2002–03

		2001–02			2002–03	
DVA disability pension type	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)	Spent time in private hospital	Total time in private hospital ^(a)	Episode length ^(b)
	Per cent of gold cardholders	Av	erage days	Per cent of gold cardholders	Av	erage days
None	31.6	8.8	4.6	31.1	8.9	4.6
General rate	39.5	8.8	4.3	38.7	8.8	4.2
Intermediate/Special	46.0	11.4	5.2	45.3	10.7	4.8
EDA	51.1	14.3	5.1	49.6	13.6	4.9
All males	38.2	9.7	4.6	37.8	9.7	4.5

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average. Notes

^{1.} Table excludes gold cardholders whose ages were unknown (10 each in 2001–02 and 2002–03).

^{2.} Table includes all states and territories.

Table A65: Periods in private hospital for RAC residents: DVA gold cardholders who spent time in private hospital while living in permanent RAC, by age, sex and number of episodes in private hospital, 2002–03

			Period	ls spent in p	rivate hospi	tal		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Nun	nber of gold	cardholders	;		
70–74	57	14	8	3	3	1	_	86
75–79	252	85	34	9	17	1	3	401
80–84	539	186	41	27	13	4	4	814
85–89	519	173	49	16	10	4	_	771
90–94	230	47	25	6	8	1	_	317
95+	66	9	6	1	1	_	_	83
Total females	1,663	514	163	62	52	11	7	2,472
Males								
70–74	24	9	6	2	1	_	1	43
75–79	312	120	40	11	13	1	3	500
80–84	591	210	78	20	34	9	4	946
85–89	440	148	57	17	17	5	5	689
90–94	187	53	17	8	4	_	_	269
95+	22	8	_	_	1	_	_	31
Total males	1,576	548	198	58	70	15	13	2,478
Persons								
70–74	81	23	14	5	4	1	1	129
75–79	564	205	74	20	30	2	6	901
80–84	1,130	396	119	47	47	13	8	1,760
85–89	959	321	106	33	27	9	5	1,460
90–94	417	100	42	14	12	1	_	586
95+	88	17	6	1	2	_	_	114
Total persons	3,239	1,062	361	120	122	26	20	4,950

Table A65 (continued): Periods in private hospital for RAC residents: DVA gold cardholders who spent time in private hospital while living in permanent RAC, by age, sex and number of episodes in private hospital, 2002–03

_			Period	s spent in pr	ivate hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Per	ent of gold o	cardholders			
70–74	66.3	16.3	9.3	3.5	3.5	1.2	_	100.0
75–79	62.8	21.2	8.5	2.2	4.2	0.2	0.7	100.0
80–84	66.2	22.9	5.0	3.3	1.6	0.5	0.5	100.0
85–89	67.3	22.4	6.4	2.1	1.3	0.5	_	100.0
90–94	72.6	14.8	7.9	1.9	2.5	0.3	_	100.0
95+	79.5	10.8	7.2	1.2	1.2	_	_	100.0
Total females	67.3	20.8	6.6	2.5	2.1	0.4	0.3	100.0
Males								
70–74	55.8	20.9	14.0	4.7	2.3	_	2.3	100.0
75–79	62.4	24.0	8.0	2.2	2.6	0.2	0.6	100.0
80–84	62.5	22.2	8.2	2.1	3.6	1.0	0.4	100.0
85–89	63.9	21.5	8.3	2.5	2.5	0.7	0.7	100.0
90–94	69.5	19.7	6.3	3.0	1.5	_	_	100.0
95+	71.0	25.8	_	_	3.2	_	_	100.0
Total males	63.6	22.1	8.0	2.3	2.8	0.6	0.5	100.0
Persons								
70–74	62.8	17.8	10.9	3.9	3.1	8.0	8.0	100.0
75–79	62.6	22.8	8.2	2.2	3.3	0.2	0.7	100.0
80–84	64.2	22.5	6.8	2.7	2.7	0.7	0.5	100.0
85–89	65.7	22.0	7.3	2.3	1.8	0.6	0.3	100.0
90–94	71.2	17.1	7.2	2.4	2.0	0.2	_	100.0
95+	77.2	14.9	5.3	0.9	1.8	_	_	100.0
Total persons	65.4	21.5	7.3	2.4	2.5	0.5	0.4	100.0

^{1.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{2.} Table includes all states and territories.

Table A66: Private hospital episode length for RAC residents: DVA gold cardholders who spent time in private hospital while living in permanent RAC, by age, sex and days spent in private hospital per episode, 2002–03

			Nu	mber of d	ays per ep	isode in p	rivate hos	pital		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	79	12	9	4	24	9	9	2	1	149
75–79	412	34	30	32	113	97	62	13	5	798
80–84	752	80	66	48	225	212	143	23	3	1,552
85–89	414	73	48	61	235	196	128	20	1	1,176
90–94	155	33	33	22	98	83	48	10	_	482
95+	30	7	7	3	20	25	16	4	_	112
Total females	1,842	239	193	170	715	622	406	72	10	4,269
Males										
70–74	50	5	4	1	16	14	8	3	2	103
75–79	554	53	39	46	135	110	61	10	1	1,009
80–84	997	114	74	80	297	214	135	23	1	1,935
85–89	710	84	49	72	210	171	110	10	_	1,416
90–94	132	25	19	18	96	62	37	8	_	397
95+	16	1	1	_	13	7	5	1	_	44
Total males	2,459	282	186	217	767	578	356	55	4	4,904
Persons										
70–74	129	17	13	5	40	23	17	5	3	252
75–79	966	87	69	78	248	207	123	23	6	1,807
80–84	1,749	194	140	128	522	426	278	46	4	3,487
85–89	1,124	157	97	133	445	367	238	30	1	2,592
90–94	287	58	52	40	194	145	85	18	_	879
95+	46	8	8	3	33	32	21	5	_	156
Total	4,301	521	379	387	1,482	1,200	762	127	14	9,173

Table A66 (continued): Private hospital episode length for RAC residents: DVA gold cardholders who spent time in private hospital while living in permanent RAC, by age, sex and days spent in private hospital per episode, 2002–03

			Num	ber of day	s per epis	ode in priv	/ate hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20–49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	53.0	8.1	6.0	2.7	16.1	6.0	6.0	1.3	0.7	100.0
75–79	51.6	4.3	3.8	4.0	14.2	12.2	7.8	1.6	0.6	100.0
80–84	48.5	5.2	4.3	3.1	14.5	13.7	9.2	1.5	0.2	100.0
85–89	35.2	6.2	4.1	5.2	20.0	16.7	10.9	1.7	0.1	100.0
90–94	32.2	6.8	6.8	4.6	20.3	17.2	10.0	2.1	_	100.0
95+	26.8	6.3	6.3	2.7	17.9	22.3	14.3	3.6	_	100.0
Total females	43.1	5.6	4.5	4.0	16.7	14.6	9.5	1.7	0.2	100.0
Males										
70–74	48.5	4.9	3.9	1.0	15.5	13.6	7.8	2.9	1.9	100.0
75–79	54.9	5.3	3.9	4.6	13.4	10.9	6.0	1.0	0.1	100.0
80–84	51.5	5.9	3.8	4.1	15.3	11.1	7.0	1.2	0.1	100.0
85–89	50.1	5.9	3.5	5.1	14.8	12.1	7.8	0.7	_	100.0
90–94	33.2	6.3	4.8	4.5	24.2	15.6	9.3	2.0	_	100.0
95+	36.4	2.3	2.3	_	29.5	15.9	11.4	2.3	_	100.0
Total males	50.1	5.8	3.8	4.4	15.6	11.8	7.3	1.1	0.1	100.0
Persons						20.2				
70–74	51.2	6.7	5.2	2.0	15.9	9.1	6.7	2.0	1.2	100.0
75–79	53.5	4.8	3.8	4.3	13.7	11.5	6.8	1.3	0.3	100.0
80–84	50.2	5.6	4.0	3.7	15.0	12.2	8.0	1.3	0.1	100.0
85–89	43.4	6.1	3.7	5.1	17.2	14.2	9.2	1.2	0.0	100.0
90–94	32.7	6.6	5.9	4.6	22.1	16.5	9.7	2.0	_	100.0
95+	29.5	5.1	5.1	1.9	21.2	20.5	13.5	3.2	_	100.0
Total persons	46.9	5.7	4.1	4.2	16.2	13.1	8.3	1.4	0.2	100.0

^{1.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{2.} Table includes all states and territories.

Table A67: Periods in private hospital for people in the community: DVA gold cardholders who spent time in private hospital while living in the community, by age, sex and number of episodes in private hospital, 2002–03

			Perio	ds spent in p	rivate hospi	tal		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Nu	mber of gold	cardholders	;		
70–74	3,228	1,084	367	146	108	46	19	4,998
75–79	7,097	2,779	951	298	252	80	30	11,487
80–84	5,656	2,139	660	260	214	53	17	8,999
85–89	2,269	821	285	104	70	13	4	3,566
90–94	516	163	47	14	16	3	2	761
95+	75	28	6	1	2	_	1	113
Total females	18,841	7,014	2,316	823	662	195	73	29,924
Males								
70–74	1,649	705	266	128	121	34	18	2,921
75–79	11,431	4,989	1,974	904	783	215	114	20,410
80–84	10,268	4,610	1,794	757	669	151	79	18,328
85–89	3,032	1,334	564	233	200	44	18	5,425
90–94	509	211	79	42	26	3	2	872
95+	37	15	10	1	3	_	_	66
Total males	26,926	11,864	4,687	2,065	1,802	447	231	48,022
Persons								
70–74	4,877	1,789	633	274	229	80	37	7,919
75–79	18,528	7,768	2,925	1,202	1,035	295	144	31,897
80–84	15,924	6,749	2,454	1,017	883	204	96	27,327
85–89	5,301	2,155	849	337	270	57	22	8,991
90–94	1,025	374	126	56	42	6	4	1,633
95+	112	43	16	2	5	_	1	179
Total persons	45,767	18,878	7,003	2,888	2,464	642	304	77,946

Table A67 (continued): Periods in private hospital for people in the community: DVA gold cardholders who spent time in private hospital while living in the community, by age, sex and number of episodes in private hospital, 2002–03

_			Period	s spent in pr	ivate hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Per	ent of gold o	ardholders			
70–74	64.6	21.7	7.3	2.9	2.2	0.9	0.4	100.0
75–79	61.8	24.2	8.3	2.6	2.2	0.7	0.3	100.0
80–84	62.9	23.8	7.3	2.9	2.4	0.6	0.2	100.0
85–89	63.6	23.0	8.0	2.9	2.0	0.4	0.1	100.0
90–94	67.8	21.4	6.2	1.8	2.1	0.4	0.3	100.0
95+	66.4	24.8	5.3	0.9	1.8	_	0.9	100.0
Total females	63.0	23.4	7.7	2.8	2.2	0.7	0.2	100.0
Males								
70–74	56.5	24.1	9.1	4.4	4.1	1.2	0.6	100.0
75–79	56.0	24.4	9.7	4.4	3.8	1.1	0.6	100.0
80–84	56.0	25.2	9.8	4.1	3.7	0.8	0.4	100.0
85–89	55.9	24.6	10.4	4.3	3.7	0.8	0.3	100.0
90–94	58.4	24.2	9.1	4.8	3.0	0.3	0.2	100.0
95+	56.1	22.7	15.2	1.5	4.5	_	_	100.0
Total males	56.1	24.7	9.8	4.3	3.8	0.9	0.5	100.0
Persons								
70–74	61.6	22.6	8.0	3.5	2.9	1.0	0.5	100.0
75–79	58.1	24.4	9.2	3.8	3.2	0.9	0.5	100.0
80–84	58.3	24.7	9.0	3.7	3.2	0.7	0.4	100.0
85–89	59.0	24.0	9.4	3.7	3.0	0.6	0.2	100.0
90–94	62.8	22.9	7.7	3.4	2.6	0.4	0.2	100.0
95+	62.6	24.0	8.9	1.1	2.8	_	0.6	100.0
Total persons	58.7	24.2	9.0	3.7	3.2	0.8	0.4	100.0

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{3.} Table includes all states and territories.

Table A68: Private hospital episode length for people in the community: DVA gold cardholders who spent time in private hospital while living in the community, by age, sex and days spent in private hospital per episode, 2002–03

			Nu	umber of o	days per e _l	oisode in p	rivate hos	pital		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	6,684	515	339	263	899	664	308	40	15	9,727
75–79	13,181	1,110	728	641	2,181	1,759	961	122	29	20,712
80–84	9,469	903	557	531	1,926	1,672	1,027	188	31	16,304
85–89	2,720	347	267	225	892	809	583	108	19	5,970
90–94	411	65	66	47	239	194	178	21	9	1,230
95+	87	11	5	6	31	30	28	11	1	210
Total females	32,552	2,951	1,962	1,713	6,168	5,128	3,085	490	104	54,153
Males										
70–74	4,458	332	222	204	642	367	153	25	7	6,410
75–79	31,178	2,496	1,813	1,338	4,274	2,871	1,388	223	45	45,626
80–84	24,632	2,174	1,548	1,285	4,115	3,086	1,638	278	78	38,834
85–89	6,277	742	483	427	1,418	1,092	713	126	24	11,302
90–94	694	97	91	68	253	227	156	32	4	1,622
95+	25	9	7	11	25	20	18	6	_	121
Total males	67,264	5,850	4,164	3,333	10,727	7,663	4,066	690	158	103,915
Persons										
70–74	11,142	847	561	467	1,541	1,031	461	65	22	16,137
75–79	44,359	3,606	2,541	1,979	6,455	4,630	2,349	345	74	66,338
80–84	34,101	3,077	2,105	1,816	6,041	4,758	2,665	466	109	55,138
85–89	8,997	1,089	750	652	2,310	1,901	1,296	234	43	17,272
90–94	1,105	162	157	115	492	421	334	53	13	2,852
95+	112	20	12	17	56	50	46	17	1	331
Total	99,816	8,801	6,126	5,046	16,895	12,791	7,151	1,180	262	158,068

Table A68 (continued): Private hospital episode length for people in the community: DVA gold cardholders who spent time in private hospital while living in the community, by age, sex and days spent in private hospital per episode, 2002–03

			Num	ber of day	s per epis	ode in priv	ate hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20-49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	68.7	5.3	3.5	2.7	9.2	6.8	3.2	0.4	0.2	100.0
75–79	63.6	5.4	3.5	3.1	10.5	8.5	4.6	0.6	0.1	100.0
80–84	58.1	5.5	3.4	3.3	11.8	10.3	6.3	1.2	0.2	100.0
85–89	45.6	5.8	4.5	3.8	14.9	13.6	9.8	1.8	0.3	100.0
90–94	33.4	5.3	5.4	3.8	19.4	15.8	14.5	1.7	0.7	100.0
95+	41.4	5.2	2.4	2.9	14.8	14.3	13.3	5.2	0.5	100.0
Total females	60.1	5.4	3.6	3.2	11.4	9.5	5.7	0.9	0.2	100.0
Males										
70–74	69.5	5.2	3.5	3.2	10.0	5.7	2.4	0.4	0.1	100.0
75–79	68.3	5.5	4.0	2.9	9.4	6.3	3.0	0.5	0.1	100.0
80–84	63.4	5.6	4.0	3.3	10.6	7.9	4.2	0.7	0.2	100.0
85–89	55.5	6.6	4.3	3.8	12.5	9.7	6.3	1.1	0.2	100.0
90–94	42.8	6.0	5.6	4.2	15.6	14.0	9.6	2.0	0.2	100.0
95+	20.7	7.4	5.8	9.1	20.7	16.5	14.9	5.0	_	100.0
Total males	64.7	5.6	4.0	3.2	10.3	7.4	3.9	0.7	0.2	100.0
Persons										
70–74	69.0	5.2	3.5	2.9	9.5	6.4	2.9	0.4	0.1	100.0
75–79	66.9	5.4	3.8	3.0	9.7	7.0	3.5	0.5	0.1	100.0
80–84	61.8	5.6	3.8	3.3	11.0	8.6	4.8	0.8	0.2	100.0
85–89	52.1	6.3	4.3	3.8	13.4	11.0	7.5	1.4	0.2	100.0
90–94	38.7	5.7	5.5	4.0	17.3	14.8	11.7	1.9	0.5	100.0
95+	33.8	6.0	3.6	5.1	16.9	15.1	13.9	5.1	0.3	100.0
Total persons	63.1	5.6	3.9	3.2	10.7	8.1	4.5	0.7	0.2	100.0

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{3.} Table includes all states and territories.

Table A69: Public hospital use by RAC residents: use and time in public hospital for DVA gold cardholders who spent time in public hospital while living in permanent RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	20.6	10.0	5.6	20.5	11.6	7.0
75–79	23.9	15.9	7.4	20.2	12.4	5.9
80–84	22.1	14.6	9.2	22.2	11.2	7.2
85–89	21.6	13.2	8.3	22.6	11.2	6.5
90–94	19.9	13.2	9.4	21.8	11.6	7.9
95+	20.6	14.1	10.4	18.6	9.7	6.9
Total females	21.8	14.0	8.4	21.7	11.4	6.8
Males						
70–74	31.9	17.6	9.6	28.2	17.4	9.6
75–79	26.3	13.3	6.7	27.2	12.0	6.2
80–84	26.4	11.8	6.4	27.0	11.6	5.8
85–89	26.3	12.4	7.6	27.3	12.7	7.5
90–94	25.3	12.4	8.0	25.7	10.8	7.6
95+	21.7	10.1	6.1	22.5	10.0	7.2
Total males	26.3	12.5	6.9	26.9	12.0	6.5
Persons						
70–74	23.6	12.7	7.0	22.6	13.6	8.0
75–79	25.3	14.3	7.0	23.9	12.2	6.1
80–84	24.4	12.9	7.4	24.8	11.5	6.3
85–89	23.8	12.8	7.9	24.7	12.0	7.0
90–94	22.0	12.8	8.7	23.3	11.3	7.8
95+	20.8	13.2	9.3	19.5	9.8	7.0
Total persons	24.0	13.2	7.6	24.2	11.7	6.7

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A70: Public hospital use by low-care RAC residents: use and time in public hospital for DVA gold cardholders who spent time in public hospital while living in permanent low-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	19.4	10.0	3.9	21.4	11.6	6.7
75–79	26.4	12.5	6.1	19.5	12.9	4.2
80–84	21.6	11.4	7.1	21.0	10.5	6.3
85–89	23.0	12.4	7.4	22.4	9.9	4.9
90–94	21.0	10.3	7.3	25.4	9.0	6.3
95+	28.1	7.9	5.9	22.2	10.3	7.2
Total females	22.9	11.6	6.8	21.8	10.4	5.4
Males						
70–74	30.2	17.7	9.1	34.1	16.9	9.8
75–79	28.4	13.6	5.3	26.7	13.3	5.4
80–84	27.7	11.4	6.3	29.9	11.9	5.7
85–89	28.0	11.8	6.6	28.4	12.6	7.0
90–94	26.2	11.1	6.9	27.5	8.6	5.7
95+	27.3	12.4	6.2	20.8	8.9	5.6
Total males	27.8	12.1	6.2	28.5	12.0	6.0
Persons						
70–74	22.0	12.6	5.3	24.0	13.1	7.6
75–79	27.4	13.1	5.6	22.9	13.1	4.8
80–84	24.4	11.4	6.7	25.1	11.2	5.9
85–89	25.1	12.1	7.0	24.9	11.2	5.8
90–94	23.0	10.7	7.1	26.2	8.8	6.0
95+	27.9	8.8	6.0	21.9	9.9	6.7
Total persons	25.1	11.9	6.4	24.7	11.2	5.7

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A71: Public hospital use by high-care RAC residents: use and time in public hospital for DVA gold cardholders who spent time in public hospital while living in permanent high-care RAC, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	21.6	10.0	7.1	20.2	11.6	7.2
75–79	22.7	18.3	8.2	20.5	12.2	7.6
80–84	22.5	16.4	10.8	23.0	11.7	8.0
85–89	20.9	13.9	9.1	23.0	12.0	7.9
90–94	19.6	14.8	10.6	20.0	13.0	8.7
95+	18.5	16.9	12.2	17.3	9.6	6.9
Total females	21.3	15.6	9.6	21.7	12.0	7.9
Males						
70–74	32.4	17.9	10.2	25.5	18.3	9.7
75–79	25.6	13.2	7.6	27.5	11.6	6.6
80–84	26.1	12.0	6.4	25.9	11.6	5.9
85–89	25.6	12.8	8.3	26.7	12.5	7.7
90–94	24.9	13.2	8.7	24.9	12.2	8.8
95+	21.0	9.1	6.1	23.1	10.7	8.1
Total males	25.7	12.7	7.3	26.3	12.0	6.8
Persons						
70–74	24.5	12.9	8.4	21.8	14.0	8.2
75–79	24.5	15.0	7.8	24.4	11.8	7.0
80–84	24.6	13.7	7.8	24.6	11.6	6.6
85–89	23.1	13.3	8.7	24.8	12.3	7.8
90–94	21.7	14.1	9.7	21.9	12.6	8.8
95+	19.0	15.2	10.8	18.6	9.9	7.2
Total persons	23.6	14.0	8.3	24.0	12.0	7.2

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

Table A72: Public hospital use by people in the community: use and time in public hospital for DVA gold cardholders who spent time in public hospital while living in the community, by sex and age, 2001–02 and 2002–03

		2001–02			2002–03	
Sex/age	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)
Females	Per cent of gold cardholders		Average days	Per cent of gold cardholders		Average days
70–74	12.4	10.7	4.4	12.3	10.6	4.4
75–79	14.8	11.7	5.9	14.7	11.5	5.8
80–84	17.8	13.7	7.6	17.2	12.7	7.5
85–89	22.0	18.9	11.6	21.5	16.6	10.4
90–94	26.9	20.3	13.5	25.8	16.9	11.3
95+	29.9	23.2	15.2	32.9	17.5	12.3
Total females	16.1	13.5	7.0	16.2	12.8	6.9
Males						
70–74	19.0	10.2	4.4	16.7	10.4	4.3
75–79	19.2	12.2	5.0	20.1	12.0	5.0
80–84	22.7	13.4	5.9	22.4	13.7	5.8
85–89	27.7	16.7	8.9	27.1	15.5	8.0
90–94	33.2	19.7	11.6	29.5	17.0	9.1
95+	34.0	28.6	18.1	32.0	28.0	19.0
Total males	21.3	13.2	5.8	21.8	13.2	5.8
Persons						
70–74	14.2	10.5	4.4	13.7	10.5	4.3
75–79	17.6	12.0	5.3	17.9	11.9	5.2
80-84	20.9	13.5	6.4	20.5	13.4	6.2
85–89	25.1	17.6	9.9	24.6	15.9	8.8
90–94	29.9	20.0	12.4	27.5	16.9	10.1
95+	31.2	25.1	16.2	32.6	20.9	14.5
Total persons	19.1	13.3	6.2	19.3	13.1	6.1

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

^{1.} Table excludes gold cardholders whose ages were unknown (35 and 32 in 2001–02 and 2002–03, respectively).

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A73: Public hospital use by DVA disability pensioners in RAC: use and time in public hospital for male DVA gold cardholders aged 70 years or older who spent time in public hospital while living in permanent RAC, by care level and DVA disability pension type, 2001–02 and 2002–03

	,	2001–02			2002-03	
Care level/DVA disability pension type	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)
Low-care RAC	Per cent of gold cardholders	Av	erage days	Per cent of gold cardholders	A	verage days
None	27.3	10.9	6.1	28.4	11.2	7.1
General rate	27.0	12.9	7.1	28.2	12.0	6.4
Intermediate/Special	27.9	13.6	7.9	25.7	12.9	4.0
EDA	32.7	12.3	4.0	31.5	13.7	4.8
Low-care males	27.8	12.1	6.2	28.5	12.0	6.0
High-care RAC						
None	24.4	13.1	6.9	25.8	11.3	6.2
General rate	26.7	12.6	7.5	25.7	12.7	8.2
Intermediate/Special	26.1	12.4	8.0	28.2	11.5	6.4
EDA	26.1	12.4	7.7	28.1	11.9	5.7
High-care males	25.7	12.7	7.3	26.3	12.0	6.8
All RAC						
None	25.2	12.2	6.6	26.5	11.3	6.5
General rate	26.6	12.7	7.3	26.4	12.4	7.5
Intermediate/Special	26.7	12.6	7.9	27.5	11.8	5.5
EDA	27.6	12.4	6.0	29.0	12.5	5.4
All RAC males	26.3	12.5	6.9	26.9	12.0	6.5

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

Table A74: Public hospital use by DVA disability pensioners in the community: use and time in public hospital for male DVA gold cardholders aged 70 years or older who spent time in public hospital while living in the community, by care level and DVA disability pension type, 2001–02 and 2002–03

		2001–02		2002–03			
DVA disability pension type	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	Spent time in public hospital	Total time in public hospital ^(a)	Episode length ^(b)	
	Per cent of gold cardholders	Average days		Per cent of gold cardholders	Average days		
None	17.8	13.7	6.5	18.6	13.8	6.6	
General rate	20.6	11.9	5.7	20.7	12.0	5.8	
Intermediate/Special	27.4	14.7	5.0	26.5	14.0	4.7	
EDA	32.4	15.3	5.4	32.0	15.4	5.1	
All males	21.3	13.2	5.8	21.8	13.2	5.8	

⁽a) Total time in hospital relates to number of days within the financial year for which the person was in hospital.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average.

⁽b) For episodes crossing financial year boundaries, only that portion in the financial year of interest contributes to the average. Notes

^{1.} Table excludes gold cardholders whose ages were unknown (10 each in 2001–02 and 2002–03).

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A75: Periods in public hospital for RAC residents: DVA gold cardholders who spent time in public hospital while living in permanent RAC, by age, sex and number of episodes in public hospital, 2002–03

Sex/age	Periods spent in public hospital								
	1	2	3	4	5–9	10–19	20+	Total	
Females	Number of gold cardholders								
70–74	79	25	9	4	6	_	_	123	
75–79	640	201	80	19	29	4	7	980	
80–84	1,308	387	167	51	43	4	9	1,969	
85–89	1,027	366	117	47	35	2	2	1,596	
90–94	463	133	43	7	13	_	_	659	
95+	102	38	6	1	1	_	_	148	
Total females	3,619	1,150	422	129	127	10	18	5,475	
Males									
70–74	27	9	2	1	3	_	_	42	
75–79	372	127	59	16	13	2	4	593	
80–84	738	228	105	36	28	1	8	1,144	
85–89	488	192	65	21	25	1	1	793	
90–94	210	53	14	4	6	_	_	287	
95+	28	8	2	1	_	_	_	39	
Total males	1,863	617	247	79	75	4	13	2,898	
Persons									
70–74	106	34	11	5	9	_	_	165	
75–79	1,012	328	139	35	42	6	11	1,573	
80–84	2,046	615	272	87	71	5	17	3,113	
85–89	1,515	558	182	68	60	3	3	2,389	
90–94	673	186	57	11	19	_	_	946	
95+	130	46	8	2	1	_	_	187	
Total persons	5,482	1,767	669	208	202	14	31	8,373	

Table A75 (continued): Periods in public hospital for RAC residents: DVA gold cardholders who spent time in public hospital while living in permanent RAC, by age, sex and number of episodes in public hospital, 2002–03

_ Sex/age	Periods spent in public hospital							
	1	2	3	4	5–9	10–19	20+	Total
Females	Per cent of gold cardholders							
70–74	64.2	20.3	7.3	3.3	4.9	_	_	100.0
75–79	65.3	20.5	8.2	1.9	3.0	0.4	0.7	100.0
80–84	66.4	19.7	8.5	2.6	2.2	0.2	0.5	100.0
85–89	64.3	22.9	7.3	2.9	2.2	0.1	0.1	100.0
90–94	70.3	20.2	6.5	1.1	2.0	_	_	100.0
95+	68.9	25.7	4.1	0.7	0.7	_	_	100.0
Total females	66.1	21.0	7.7	2.4	2.3	0.2	0.3	100.0
Males								
70–74	64.3	21.4	4.8	2.4	7.1	_	_	100.0
75–79	62.7	21.4	9.9	2.7	2.2	0.3	0.7	100.0
80–84	64.5	19.9	9.2	3.1	2.4	0.1	0.7	100.0
85–89	61.5	24.2	8.2	2.6	3.2	0.1	0.1	100.0
90–94	73.2	18.5	4.9	1.4	2.1	_	_	100.0
95+	71.8	20.5	5.1	2.6	0.0	_	_	100.0
Total males	64.3	21.3	8.5	2.7	2.6	0.1	0.4	100.0
Persons								
70–74	64.2	20.6	6.7	3.0	5.5	_	_	100.0
75–79	64.3	20.9	8.8	2.2	2.7	0.4	0.7	100.0
80–84	65.7	19.8	8.7	2.8	2.3	0.2	0.5	100.0
85–89	63.4	23.4	7.6	2.8	2.5	0.1	0.1	100.0
90–94	71.1	19.7	6.0	1.2	2.0	_	_	100.0
95+	69.5	24.6	4.3	1.1	0.5	_	_	100.0
Total persons	65.5	21.1	8.0	2.5	2.4	0.2	0.4	100.0

^{1.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A76: Public hospital episode length for RAC residents: DVA gold cardholders who spent time in public hospital while living in permanent RAC, by age, sex and days spent in public hospital per episode, 2002–03

			Nu	mber of d	lays per e _l	oisode in p	oublic hos	pital		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	43	8	10	11	35	17	8	2	_	134
75–79	446	53	34	42	106	73	47	13	_	814
80–84	517	100	69	65	235	180	92	15	3	1,276
85–89	627	104	69	79	227	157	95	16	3	1,377
90–94	169	39	42	44	124	76	46	9	_	549
95+	55	11	12	9	31	24	9	2	_	153
Total females	1,857	315	236	250	758	527	297	57	6	4,303
Males										
70–74	26	5	1	5	17	14	6	2	_	76
75–79	546	74	60	49	216	125	67	12	1	1,150
80–84	1,117	123	130	151	385	241	121	22	2	2,292
85–89	523	91	75	88	262	184	98	16	5	1,342
90–94	165	21	23	22	86	48	38	3	2	408
95+	24	4	4	3	10	3	5	1	_	54
Total males	2,401	318	293	318	976	615	335	56	10	5,322
Persons										
70–74	69	13	11	16	52	31	14	4	_	210
75–79	992	127	94	91	322	198	114	25	1	1,964
80–84	1,634	223	199	216	620	421	213	37	5	3,568
85–89	1,150	195	144	167	489	341	193	32	8	2,719
90–94	334	60	65	66	210	124	84	12	2	957
95+	79	15	16	12	41	27	14	3	_	207
Total	4,258	633	529	568	1,734	1,142	632	113	16	9,625

Table A76 (continued): Public hospital episode length for RAC residents: DVA gold cardholders who spent time in public hospital while living in permanent RAC, by age, sex and days spent in public hospital per episode, 2002–03

			Num	ber of day	/s per epis	sode in pul	blic hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20–49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	32.1	6.0	7.5	8.2	26.1	12.7	6.0	1.5	_	100.0
75–79	54.8	6.5	4.2	5.2	13.0	9.0	5.8	1.6	_	100.0
80–84	40.5	7.8	5.4	5.1	18.4	14.1	7.2	1.2	0.2	100.0
85–89	45.5	7.6	5.0	5.7	16.5	11.4	6.9	1.2	0.2	100.0
90–94	30.8	7.1	7.7	8.0	22.6	13.8	8.4	1.6	_	100.0
95+	35.9	7.2	7.8	5.9	20.3	15.7	5.9	1.3	_	100.0
Total females	43.2	7.3	5.5	5.8	17.6	12.2	6.9	1.3	0.1	100.0
Males										
70–74	34.2	6.6	1.3	6.6	22.4	18.4	7.9	2.6	_	100.0
75–79	47.5	6.4	5.2	4.3	18.8	10.9	5.8	1.0	0.1	100.0
80–84	48.7	5.4	5.7	6.6	16.8	10.5	5.3	1.0	0.1	100.0
85–89	39.0	6.8	5.6	6.6	19.5	13.7	7.3	1.2	0.4	100.0
90–94	40.4	5.1	5.6	5.4	21.1	11.8	9.3	0.7	0.5	100.0
95+	44.4	7.4	7.4	5.6	18.5	5.6	9.3	1.9	_	100.0
Total males	45.1	6.0	5.5	6.0	18.3	11.6	6.3	1.1	0.2	100.0
Persons										
70–74	32.9	6.2	5.2	7.6	24.8	14.8	6.7	1.9	_	100.0
75–79	50.5	6.5	4.8	4.6	16.4	10.1	5.8	1.3	0.1	100.0
80–84	45.8	6.3	5.6	6.1	17.4	11.8	6.0	1.0	0.1	100.0
85–89	42.3	7.2	5.3	6.1	18.0	12.5	7.1	1.2	0.3	100.0
90–94	34.9	6.3	6.8	6.9	21.9	13.0	8.8	1.3	0.2	100.0
95+	38.2	7.2	7.7	5.8	19.8	13.0	6.8	1.4	_	100.0
Total persons	44.2	6.6	5.5	5.9	18.0	11.9	6.6	1.2	0.2	100.0

Notes

^{1.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{2.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A77: Periods in public hospital for people in the community: DVA gold cardholders who spent time in public hospital while living in the community, by age, sex and number of episodes in public hospital, 2002–03

			Perio	ds spent in p	ublic hospita	al		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Nur	nber of gold	cardholders			
70–74	1,392	346	128	51	55	11	18	2,001
75–79	3,405	924	334	140	129	26	23	4,981
80–84	3,084	914	289	126	102	16	7	4,538
85–89	1,512	452	151	65	63	5	1	2,249
90–94	431	111	40	12	15	_	_	609
95+	87	25	6	_	3	_	_	121
Total females	9,911	2,772	948	394	367	58	49	14,499
Males								
70–74	778	217	99	37	47	10	13	1,201
75–79	6,199	1,955	767	322	391	64	75	9,773
80–84	6,099	2,099	828	328	342	63	69	9,828
85–89	2,160	779	288	124	117	29	12	3,509
90–94	413	122	35	26	18	4	2	620
95+	39	12	3	3	_	_	_	57
Total males	15,688	5,184	2,020	840	915	170	171	24,988
Persons								
70–74	2,170	563	227	88	102	21	31	3,202
75–79	9,604	2,879	1,101	462	520	90	98	14,754
80–84	9,183	3,013	1,117	454	444	79	76	14,366
85–89	3,672	1,231	439	189	180	34	13	5,758
90–94	844	233	75	38	33	4	2	1,229
95+	126	37	9	3	3	_	_	178
Total persons	25,599	7,956	2,968	1,234	1,282	228	220	39,487

Table A77 (continued): Periods in public hospital for people in the community: DVA gold cardholders who spent time in public hospital while living in the community, by age, sex and number of episodes in public hospital, 2002–03

_			Period	s spent in pu	ublic hospita	al		
Sex/age	1	2	3	4	5–9	10–19	20+	Total
Females			Per o	ent of gold o	cardholders			
70–74	69.6	17.3	6.4	2.5	2.7	0.5	0.9	100.0
75–79	68.4	18.6	6.7	2.8	2.6	0.5	0.5	100.0
80–84	68.0	20.1	6.4	2.8	2.2	0.4	0.2	100.0
85–89	67.2	20.1	6.7	2.9	2.8	0.2	0.0	100.0
90–94	70.8	18.2	6.6	2.0	2.5	_	_	100.0
95+	71.9	20.7	5.0	_	2.5	_	_	100.0
Total females	68.4	19.1	6.5	2.7	2.5	0.4	0.3	100.0
Males								
70–74	64.8	18.1	8.2	3.1	3.9	0.8	1.1	100.0
75–79	63.4	20.0	7.8	3.3	4.0	0.7	0.8	100.0
80–84	62.1	21.4	8.4	3.3	3.5	0.6	0.7	100.0
85–89	61.6	22.2	8.2	3.5	3.3	0.8	0.3	100.0
90–94	66.6	19.7	5.6	4.2	2.9	0.6	0.3	100.0
95+	68.4	21.1	5.3	5.3	_	_	_	100.0
Total males	62.8	20.7	8.1	3.4	3.7	0.7	0.7	100.0
Persons								
70–74	67.8	17.6	7.1	2.7	3.2	0.7	1.0	100.0
75–79	65.1	19.5	7.5	3.1	3.5	0.6	0.7	100.0
80–84	63.9	21.0	7.8	3.2	3.1	0.5	0.5	100.0
85–89	63.8	21.4	7.6	3.3	3.1	0.6	0.2	100.0
90–94	68.7	19.0	6.1	3.1	2.7	0.3	0.2	100.0
95+	70.8	20.8	5.1	1.7	1.7	_	_	100.0
Total persons	64.8	20.1	7.5	3.1	3.2	0.6	0.6	100.0

Notes

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Periods in hospital relate to periods of hospitalisation that overlapped the financial year of interest.

^{3.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A78: Public hospital episode length for people in the community: DVA gold cardholders who spent time in public hospital while living in the community, by age, sex and days spent in public hospital per episode, 2002–03

			Nı	umber of o	days per ep	oisode in p	rivate hos	pital		
Sex/age	1	2	3	4	5–9	10–19	20–49	50–99	100+	Total
Females					Number	of episode	s			
70–74	3,180	264	213	191	524	293	167	37	11	4,880
75–79	5,352	599	490	445	1,483	848	503	103	26	9,849
80–84	3,517	499	440	418	1,281	858	515	142	35	7,705
85–89	1,231	239	229	204	711	471	381	92	28	3,586
90–94	272	53	54	47	175	150	127	26	3	907
95+	45	13	6	12	38	28	26	4	1	173
Total females	13,597	1,667	1,432	1,317	4,212	2,648	1,719	404	104	27,100
Males										
70–74	1,804	178	151	111	361	155	92	24	4	2,880
75–79	14,456	1,300	1,116	958	2,820	1,747	893	211	65	23,566
80–84	13,326	1,250	1,201	979	3,009	1,781	1,094	292	95	23,027
85–89	3,123	424	366	363	1,126	782	476	124	45	6,829
90–94	487	75	70	41	191	141	121	29	4	1,159
95+	23	6	2	3	16	11	18	3	2	84
Total males	33,219	3,233	2,906	2,455	7,523	4,617	2,694	683	215	57,545
Persons										
70–74	4,984	442	364	302	885	448	259	61	15	7,760
75–79	19,808	1,899	1,606	1,403	4,303	2,595	1,396	314	91	33,415
80–84	16,843	1,749	1,641	1,397	4,290	2,639	1,609	434	130	30,732
85–89	4,354	663	595	567	1,837	1,253	857	216	73	10,415
90–94	759	128	124	88	366	291	248	55	7	2,066
95+	68	19	8	15	54	39	44	7	3	257
Total	46,816	4,900	4,338	3,772	11,735	7,265	4,413	1,087	319	84,645

Table A78 (continued): Public hospital episode length for people in the community: DVA gold cardholders who spent time in public hospital while living in the community, by age, sex and days spent in public hospital per episode, 2002–03

			Num	ber of day	/s per epis	sode in pul	olic hospit	al		
Sex/age	1	2	3	4	5–9	10–19	20–49	50-99	100+	Total
Females				Р	er cent of	episodes				
70–74	65.2	5.4	4.4	3.9	10.7	6.0	3.4	8.0	0.2	100.0
75–79	54.3	6.1	5.0	4.5	15.1	8.6	5.1	1.0	0.3	100.0
80–84	45.6	6.5	5.7	5.4	16.6	11.1	6.7	1.8	0.5	100.0
85–89	34.3	6.7	6.4	5.7	19.8	13.1	10.6	2.6	0.8	100.0
90–94	30.0	5.8	6.0	5.2	19.3	16.5	14.0	2.9	0.3	100.0
95+	26.0	7.5	3.5	6.9	22.0	16.2	15.0	2.3	0.6	100.0
Total females	50.2	6.2	5.3	4.9	15.5	9.8	6.3	1.5	0.4	100.0
Males										
70–74	62.6	6.2	5.2	3.9	12.5	5.4	3.2	8.0	0.1	100.0
75–79	61.3	5.5	4.7	4.1	12.0	7.4	3.8	0.9	0.3	100.0
80–84	57.9	5.4	5.2	4.3	13.1	7.7	4.8	1.3	0.4	100.0
85–89	45.7	6.2	5.4	5.3	16.5	11.5	7.0	1.8	0.7	100.0
90–94	42.0	6.5	6.0	3.5	16.5	12.2	10.4	2.5	0.3	100.0
95+	27.4	7.1	2.4	3.6	19.0	13.1	21.4	3.6	2.4	100.0
Total males	57.7	5.6	5.0	4.3	13.1	8.0	4.7	1.2	0.4	100.0
Persons										
70–74	64.2	5.7	4.7	3.9	11.4	5.8	3.3	8.0	0.2	100.0
75–79	59.3	5.7	4.8	4.2	12.9	7.8	4.2	0.9	0.3	100.0
80–84	54.8	5.7	5.3	4.5	14.0	8.6	5.2	1.4	0.4	100.0
85–89	41.8	6.4	5.7	5.4	17.6	12.0	8.2	2.1	0.7	100.0
90–94	36.7	6.2	6.0	4.3	17.7	14.1	12.0	2.7	0.3	100.0
95+	26.5	7.4	3.1	5.8	21.0	15.2	17.1	2.7	1.2	100.0
Total persons	55.3	5.8	5.1	4.5	13.9	8.6	5.2	1.3	0.4	100.0

Notes

^{1.} Table excludes 32 gold cardholders whose ages were unknown in 2002–03.

^{2.} Episode length relates to hospital episodes that overlapped the financial year of interest.

^{3.} Table includes all states and territories except Western Australia and the Northern Territory.

Table A79: Per patient costs of hospitalisation^(a) and RPBS use by RAC residents: annual costs for DVA gold cardholders living in permanent RAC, by service type, age and sex, 2001–02 and 2002–03

		2001-	-02		2002–03				
Sex/age	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	
Females			Avera	ge annual p	er patient cost	(\$)			
70–74	11,341	9,216	8,852	1,427	6,412	5,094	7,495	1,597	
75–79	8,733	6,115	9,157	1,361	8,626	7,877	8,207	1,524	
80–84	8,813	6,788	8,073	1,189	8,904	7,492	7,492	1,393	
85–89	8,392	6,564	8,106	1,030	8,850	7,069	8,125	1,171	
90–94	7,473	5,427	7,626	873	7,805	6,680	7,662	982	
95+	8,206	6,469	7,473	679	9,003	7,058	9,222	815	
Total females	8,605	6,514	8,238	1,115	8,609	7,221	7,888	1,267	
Males									
70–74	12,349	9,312	10,769	1,654	13,116	12,867	12,149	1,736	
75–79	8,036	5,914	8,607	1,338	9,042	6,031	9,523	1,500	
80–84	8,696	6,814	8,256	1,217	8,931	6,974	8,587	1,347	
85–89	7,979	5,917	7,993	1,097	8,968	6,915	8,566	1,209	
90–94	6,749	5,822	6,555	907	7,819	6,183	6,978	972	
95+	7,725	5,949	6,902	798	5,988	7,545	5,176	694	
Total males	8,243	6,294	8,189	1,192	8,888	6,791	8,639	1,295	
Persons									
70–74	11,658	9,247	9,517	1,487	8,501	7,685	9,089	1,637	
75–79	8,300	5,994	8,810	1,347	8,870	6,853	9,011	1,511	
80–84	8,746	6,802	8,180	1,205	8,919	7,214	8,125	1,368	
85–89	8,186	6,243	8,049	1,061	8,907	6,996	8,342	1,188	
90–94	7,165	5,595	7,157	886	7,811	6,452	7,378	978	
95+	8,078	6,284	7,343	707	8,193	7,190	8,187	783	
Total	8,412	6,399	8,212	1,154	8,753	7,005	8,284	1,281	

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western Australia.

⁽c) Hospitalisation costs for private hospitals include all states and territories.

Table A80: Per patient costs of hospitalisation^(a) and RPBS use by low-care RAC residents: annual costs for DVA gold cardholders living in permanent low-care RAC, by service type, age and sex, 2001–02 and 2002–03

		2001-	-02		2002-03					
Sex/age	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS		
Females			Avera	ge annual p	er patient cost	(\$)				
70–74	11,447	9,473	8,663	1,554	7,285	5,176	9,553	1,730		
75–79	8,488	6,413	7,891	1,565	8,104	7,652	7,857	1,699		
80–84	8,288	6,492	7,039	1,331	8,559	7,016	6,909	1,566		
85–89	8,196	6,224	8,138	1,179	7,759	6,519	7,175	1,265		
90–94	6,747	5,798	5,350	978	6,560	5,728	6,427	1,093		
95+	8,218	7,646	5,838	819	7,459	6,842	9,152	914		
Total females	8,260	6,460	7,387	1,275	7,904	6,740	7,226	1,417		
Males										
70–74	12,675	7,553	11,744	1,857	13,350	16,562	13,303	1,925		
75–79	7,896	6,353	8,225	1,522	9,038	5,943	10,098	1,624		
80–84	8,823	7,022	8,497	1,431	8,645	6,894	8,078	1,469		
85–89	7,379	6,131	7,172	1,247	8,585	6,729	8,137	1,317		
90–94	6,280	5,531	5,926	901	7,074	5,785	5,995	1,187		
95+	5,774	3,931	6,811	778	7,016	6,801	7,878	681		
Total males	8,062	6,445	7,916	1,349	8,586	6,747	8,308	1,412		
Persons										
70–74	11,844	8,873	9,631	1,627	8,540	8,855	10,458	1,773		
75–79	8,161	6,380	8,070	1,541	8,602	6,820	9,132	1,663		
80–84	8,562	6,760	7,777	1,379	8,605	6,956	7,548	1,519		
85–89	7,819	6,179	7,685	1,209	8,144	6,614	7,639	1,287		
90–94	6,561	5,695	5,593	947	6,777	5,754	6,243	1,132		
95+	7,689	6,435	6,041	809	7,339	6,828	8,788	841		
Total	8,164	6,452	7,641	1,309	8,234	6,743	7,771	1,415		

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western Australia.

⁽c) Hospitalisation costs for private hospitals include all states and territories.

Table A81: Per patient costs of hospitalisation^(a) and RPBS use by high-care RAC residents: annual costs for DVA gold cardholders living in permanent high-care RAC, by service type, age and sex, 2001–02 and 2002–03

		2001-	-02			2002-	-03	
Sex/age	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS
Females			Avera	ge annual p	er patient cost	(\$)		
70–74	11,270	8,990	8,965	1,358	5,592	4,074	5,753	1,518
75–79	8,957	5,779	10,065	1,244	8,975	8,149	8,388	1,429
80–84	9,294	7,163	8,713	1,100	9,132	7,988	7,842	1,291
85–89	8,597	6,974	8,122	934	9,549	7,577	8,635	1,116
90–94	7,921	5,107	8,702	821	8,337	7,326	7,998	931
95+	8,201	5,692	8,213	634	9,591	7,136	9,243	786
Total females	8,903	6,611	8,768	1,020	9,034	7,631	8,208	1,184
Males								
70–74	12,264	6,491	10,412	1,545	13,674	10,007	12,277	1,676
75–79	8,192	5,635	8,806	1,267	9,114	6,065	9,372	1,456
80–84	8,581	6,563	8,177	1,137	9,143	7,074	8,875	1,301
85–89	8,446	5,649	8,474	1,014	9,081	7,073	8,661	1,159
90–94	7,068	6,076	6,849	912	8,304	6,509	7,541	872
95+	8,698	7,512	6,937	822	5,141	6,406	4,317	706
Total males	8,381	6,076	8,342	1,125	9,068	6,824	8,807	1,250
Persons								
70–74	11,569	8,202	9,479	1,410	8,597	6,019	8,332	1,570
75–79	8,450	5,685	9,210	1,259	9,060	6,891	9,007	1,444
80–84	8,863	6,812	8,380	1,122	9,139	7,465	8,458	1,297
85–89	8,518	6,300	8,308	973	9,321	7,332	8,648	1,136
90–94	7,549	5,546	7,884	857	8,323	6,951	7,810	907
95+	8,339	6,340	7,911	678	8,502	6,984	8,089	767
Total	8,610	6,316	8,523	1,076	9,052	7,208	8,531	1,217

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western Australia.

⁽c) Hospitalisation costs for private hospitals include all states and territories.

Table A82: Per patient costs of hospitalisation^(a) and RPBS use by people in the community: annual costs for DVA gold cardholders living in the community, by service type, age and sex, 2001–02 and 2002–03

		2001–	02 ^(d)			2002–	03 ^(e)	
Sex/age	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	AII hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS
Females			Avera	ge annual p	er patient cost	(\$)		
70–74	6,304	4,993	6,840	1,058	7,083	5,656	7,478	1,197
75–79	6,882	5,342	7,396	1,081	7,545	6,057	7,580	1,239
80–84	8,043	6,072	8,019	1,026	8,115	6,676	7,384	1,193
85–89	9,306	7,184	8,803	933	9,271	7,400	8,615	1,083
90–94	10,560	7,352	9,714	760	9,783	8,075	8,092	897
95+	11,209	8,905	10,070	635	12,607	8,935	9,740	735
Total females	7,430	5,711	7,758	1,039	7,934	6,399	7,698	1,188
Males								
70–74	7,131	5,582	7,181	1,446	8,191	6,461	7,847	1,413
75–79	7,571	5,688	8,024	1,306	8,605	6,559	8,610	1,491
80–84	8,304	6,278	8,020	1,229	9,074	7,053	8,547	1,398
85–89	9,131	6,577	8,698	1,096	9,746	7,501	8,874	1,254
90–94	9,978	7,558	8,838	893	9,667	7,991	8,688	993
95+	10,786	9,945	8,374	607	13,291	9,267	16,794	705
Total males	7,966	5,984	8,064	1,265	8,917	6,878	8,599	1,414
Persons								
70–74	6,603	5,201	6,969	1,169	7,504	5,953	7,623	1,265
75–79	7,353	5,580	7,832	1,227	8,221	6,378	8,257	1,389
80–84	8,221	6,213	8,020	1,155	8,758	6,929	8,169	1,322
85–89	9,201	6,818	8,740	1,024	9,555	7,461	8,771	1,178
90–94	10,260	7,460	9,269	824	9,723	8,030	8,380	943
95+	11,052	9,286	9,505	625	12,880	9,057	12,091	725
Total	7,769	5,885	7,954	1,171	8,538	6,694	8,262	1,316

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western

⁽c) Hospitalisation costs for private hospitals include all states and territories.

⁽d) Excludes 20 gold cardholders of unknown ages for all hospitals and public hospitals and 35 gold cardholders of unknown ages for private hospitals.

⁽e) Excludes 18 gold cardholders of unknown ages for all hospitals and public hospitals and 32 gold cardholders of unknown ages for private hospitals.

Table A83: Per patient costs of hospitalisation^(a) and RPBS use by DVA disability pensioners in RAC: annual costs for male DVA gold cardholders aged 70 years or older living in RAC, by service type, care level and DVA disability pension type, 2001–02 and 2002–03

		2001–0	02		2002–03				
Care level/disability pension type	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	
Low-care RAC			Averag	e annual p	er patient cost	(\$)			
None	7,964	5,790	8,079	1,148	8,022	6,290	7,363	1,228	
General rate	7,401	6,314	7,483	1,361	8,223	6,538	7,982	1,441	
Intermediate/Special	9,139	7,025	9,886	1,598	9,253	7,955	11,864	1,675	
EDA	9,775	7,976	7,404	1,783	10,428	7,543	9,703	1,670	
Low-care males	8,062	6,445	7,916	1,349	8,586	6,747	8,308	1,412	
High-care RAC									
None	8,253	5,986	8,463	998	8,903	6,457	9,154	1,107	
General rate	8,461	5,839	8,367	1,120	9,108	7,063	8,230	1,239	
Intermediate/Special	8,678	6,401	8,338	1,383	9,853	7,779	9,561	1,576	
EDA	8,242	6,609	8,006	1,283	8,819	6,521	9,121	1,413	
High-care males	8,381	6,076	8,342	1,125	9,068	6,824	8,807	1,250	
All RAC									
None	8,120	6,011	8,321	1,042	8,570	6,363	8,575	1,141	
General rate	8,070	6,086	8,082	1,193	8,747	6,836	8,127	1,300	
Intermediate/Special	8,728	6,829	8,681	1,451	9,643	7,823	10,024	1,595	
EDA	8,694	7,107	7,855	1,411	9,372	6,929	9,314	1,481	
All RAC males	8,243	6,294	8,189	1,192	8,888	6,791	8,639	1,295	

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

Table A84: Per patient costs of hospitalisation^(a) and RPBS use by DVA disability pensioners in the community: annual costs for male DVA gold cardholders aged 70 years or older living in the community, by service type and DVA disability pension type, 2001–02 and 2002–03

		2001–0	2 ^(d)		2002–03 ^(d)						
DVA disability pension type	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS	All hospitals ^(b)	Private hospitals ^(c)	Public hospitals ^(b)	RPBS			
Males		Average annual per patient cost (\$)									
None	7,444	5,504	8,023	983	8,234	6,396	8,455	1,110			
General rate	7,385	5,666	7,562	1,262	8,318	6,493	8,126	1,390			
Intermediate/Special	9,081	6,764	8,816	1,738	9,728	7,418	9,219	1,910			
EDA	10,426	7,789	9,171	1,931	11,501	8,720	9,707	2,082			
All males	7,966	5,984	8,064	1,265	8,917	6,878	8,599	1,414			

⁽a) Refers to hospital costs for all days in hospital for separations during the financial year of interest.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western Australia.

⁽c) Hospitalisation costs for private hospitals include all states and territories.

⁽b) Hospitalisation costs for all hospitals and public hospitals exclude Northern Territory, South Australia, Tasmania, Victoria and Western Australia.

⁽c) Hospitalisation costs for private hospitals include all states and territories.

⁽d) Excludes 4 gold cardholders of unknown ages for all hospitals and public hospitals and 10 gold cardholders of unknown ages for private hospitals

Appendix B Statistical methods and results

Regression analysis is a statistical method for analysing the relationship between a particular variable of interest and a set of other variables or factors. The method models the relationship between the variable of interest with all the factors simultaneously, and adjusts, or controls, for any confounding effects, which occur when a factor is associated with the variable of interest as well as a second factor. A wide range of regression models can be fitted, including logistic regression and survival analysis.

B.1 Logistic regression for high service use

In this analysis, the factors affecting a number of aspects of health service use were of interest. The issues investigated using logistic regression were:

- high use of GP and LMO services during 2003–04
- high use of specialist services during 2003–04
- high use of RPBS services during 2002–03
- hospital use during 2002–03.

For GP/LMO, specialist and pharmaceutical services, a gold cardholder was defined as either being high user of services or not. For this study, high use was classified according to whether the gold cardholder received an amount of services in the top fifth of service users. Similarly, each gold cardholder may or may not use a hospital during the year. Hence, each of the four variables of interest listed above is binary in nature, having only two possible values, and as such, logistic regression is the most appropriate regression method to use.

Whether or not a person uses services while they are living in a certain place depends to some extent on the length of time being considered; for example, people living in residential aged care for a whole year are more likely to have accessed a doctor more times while living there than people who were in residential aged care for only part of the year. Consequently, because not all gold cardholders spend the entire year living in one residency sector, high service users were identified after adjusting for time in the sector. These annualised estimates of the number of GP consultations, specialist consultations and RPBS prescriptions filled were calculated as follows:

Annualised use =
$$\frac{365 \times \text{observed use}}{\text{Days living in sector}}$$

Gold cardholders who spent less than 30 days living in a residency sector during the year were excluded from the analysis so that the inaccurate estimates of use obtained over short periods would not affect the annualised estimates of use too greatly.

The logistic regression models included the following factors:

- age
- sex
- marital status (only available for residential aged care)
- country of birth (only available for residential aged care)
- preferred language (only available for residential aged care)
- Indigenous status (only available for residential aged care)
- RCS care level (only available for residential aged care)
- prisoner of war status
- days in the financial year spent living in residential aged care or living in the community (for hospital use model only)
- move into RAC (indicating whether the gold cardholder moved from the community into residential aged care during the year)
- death indicator (indicating whether the gold cardholder died during the financial year).

There may be other factors associated with high service use or hospital use for which we did not have information and so could not include in the model. Further, it is not possible to infer causation from the results of the regression model, and this can only be done on the basis of other knowledge.

Based on the top fifth of service users (using annualised estimates of usage), the three high use variables for gold cardholders living in residential aged care were defined as follows:

- receiving 31 or more GP or LMO consultations during the year
- receiving 13 or more specialist consultations during the year
- having 108 or more RPBS prescriptions filled (including repeats) during the year.

Similarly, high use for gold cardholders living in the community was defined to be:

- receiving 19 or more GP or LMO consultations during the year
- receiving 10 or more specialist consultations during the year
- having 76 or more RPBS prescriptions filled (including repeats) during the year.

The logistic regression model is expressed as an equation that estimates or predicts the probability of high service use or hospital use and is of the form:

$$logit(p) = \beta_0 + \beta_1 \times AGE1 + \beta_2 \times AGE2 + \beta_3 \times AGE3 + \beta_4 \times AGE4 + \beta_5 \times AGE5 + \beta_6 \times SEX + \beta_7 \times MARRIED + \beta_8 \times COB + \beta_9 \times LANG + \beta_{10} \times INDIG + \beta_{11} \times RCS + \beta_{12} \times POW + \beta_{13} \times DEATH + \beta_{14} \times CHANGE + \beta_{15}DAYS$$

where

$$logit(p) = ln\left(\frac{p}{1-p}\right)$$

p = probability of having the variable of interest (high usage or hospital admission) β_0 to β_{15} are regression coefficients

AGE1 = 1 if aged 75–79 years, 0 otherwise

AGE2 = 1 if aged 80–84 years, 0 otherwise

AGE3 = 1 if aged 85–89 years, 0 otherwise

AGE4 = 1 if aged 90–94 years, 0 otherwise

AGE5 = 1 if aged 95 years or older, 0 otherwise

SEX = 1 for females, 0 for males

MARRIED = 1 for married, 0 otherwise

COB = 1 for country of birth other than Australia, 0 for Australia

LANG = 1 for non-English, 0 for English

INDIG = 1 if the gold cardholder identifies as being Indigenous, 0 otherwise

RCS = 1 for high-care residential aged care residents, 0 for low-care residents

POW = 1 for prisoners of war, 0 otherwise

DEATH = 1 if the gold cardholder died during the year, 0 otherwise

RACMOVE = 1 if the gold cardholder moved into RAC during the year, 0 otherwise

DAYS = Number of days of the financial year spent living in the community or in residential aged care (only for the hospital use model).

Note: Information regarding marital status, country of birth, preferred language, RCS care level and Indigenous status was available only for gold cardholders living in residential aged care, and so could not be included in the models for gold cardholders living in the community (that is, β_7 to β_{11} set to 0). Also, β_{15} was included only for the hospital use model.

The regression analysis provides estimates of the effects of each of the factors included in the model. Factors whose regression coefficient estimates are different to 0 at the 5% significance level are said to have a statistically significant relationship with the variable of interest (high service use or hospital use), while controlling for the effects of other factors included in the model.

Odds ratios

In addition to estimated regression coefficients, output of logistic regression analysis includes the odds ratio, which is calculated for each variable entered into the model (tables B1.1 and B1.2). The odds ratio is a relative measure which indicates whether it is more or less likely that someone for which a characteristic is present will have high service use or hospital use compared to someone in the reference group. An odds ratio of 1 implies that the event, for example hospital use, is equally likely in both groups. An odds ratio greater than 1 implies that the event is more likely in that group than the reference group. An odds ratio less than 1 implies that the event is less likely in that group than in the reference group. Note that for the reference group, the odds ratio will always be 1.

The odds of an event are calculated as the number of events divided by the number of non-events. For example, if 40 people used a hospital during the year and 100 didn't, the odds would be 40/100=0.4. The odds ratio is calculated by dividing the odds in the group of interest (for example, those aged 75–59 years) over the odds in the reference group (in the case of age, those aged 70–74 years). In logistic regression, we obtain the odds ratio for a factor relative to the reference group, controlling for the presence of all other variables. For example, those aged 75–79 years living in the community have an odds ratio of 1.22 for high

GP use (Table B1.2). This means that the odds of high GP use for those aged 75–79 years are 22% higher than the odds for those aged 70–74 years. Gold cardholders living in the community and 95 years or older have an odds ratio of high GP use of 1.86, indicating that their odds of high GP use are 86% higher than the odds for those aged 70–74 years. For integer variables (for example, days), the interpretation of odds ratios is slightly different, with the odds ratio comparing the odds of the event for a unit increment in the variable. For example, an odds ratio of hospital use by gold cardholders living in the community of 1.004 indicates that with each extra day living in the community, the odds of using a hospital increases by 0.4% from the previous day.

Models for each of the four variables of interest were fitted separately for people living in the community and in residential aged care. The results are presented in tables B1.1 and B1.2.

Table B1.1: High service use and hospital use for DVA gold cardholders aged 70 years or older living in permanent RAC: odds ratios from logistic regression analysis, 2002–03 and 2003–04

Parameter	High GP ւ	ıse (2003–04)	High specialis	st use (2003–04)
		Odds ratio (95% c	onfidence interval)	
Age (70–74) (reference)	1.00		1.00	
Age (75–79)	1.09	(0.84–1.40)	0.78	(0.56–1.09)
Age (80-84)	0.95	(0.75–1.22)	0.92	(0.67–1.27)
Age (85–89)	0.94	(0.73–1.20)	0.84	(0.61–1.16)
Age (90–94)	0.97	(0.75–1.25)	0.80	(0.57–1.11)
Age (95 or older)	0.87	(0.65–1.18)	*0.56	(0.36-0.88)
Male (reference)	1.00		1.00	
Female	**0.82	(0.76-0.88)	**0.83	(0.75–0.91)
Not prisoner of war (reference)	1.00		1.00	
Former prisoner of war	0.89	(0.63–1.26)	1.01	(0.60-1.69)
Alive for entire year (reference)	1.00		1.00	
Died during year	**4.02	(3.74–4.32)	**4.21	(3.81–4.66)
Did not move into RAC during year (reference)	1.00		1.00	
Moved into RAC during year	**2.38	(2.22–2.56)	**1.57	(1.43–1.74)
Other marital status (reference)	1.00		1.00	
Married	*0.90	(0.83-0.98)	**0.79	(0.70-0.89)
Low RCS dependency (reference)	1.00		1.00	
High RCS dependency	**1.36	(1.25–1.45)	*0.90	(0.82-0.98)
Country of birth Australia (reference)	1.00		1.00	
Country of birth not Australia	1.02	(0.89–1.16)	1.00	(0.83-1.20)
Preferred language English (reference)	1.00		1.00	
Preferred language not English	1.30	(0.65–2.61)	0.55	(0.18–1.71)
Not Indigenous (reference)	1.00		1.00	
Indigenous	0.73	(0.29–1.85)	0.71	(0.13–3.84)
Each day spent living in permanent RAC during the year (reference = 1 day)				

Table B1.1 (continued): High service use and hospital use for DVA gold cardholders aged 70 years or older living in permanent RAC: odds ratios from logistic regression analysis, 2002-03 and 2003-04

Parameter	High RPBS ւ	se (2002–03)	Hospita	l use (2002–03)
		Odds ratio (95% con	fidence interval)	
Age (70-74) (reference)	1.00		1.00	
Age (75–79)	0.96	(0.78–1.19)	0.96	(0.80–1.17)
Age (80-84)	*0.79	(0.65–0.98)	0.99	(0.82–1.19)
Age (85–89)	**0.64	(0.52-0.78)	0.95	(0.79–1.15)
Age (90–94)	**0.46	(0.36–0.57)	0.85	(0.70-1.04)
Age (95 or older)	**0.40	(0.30–0.54)	**0.58	(0.45-0.74)
Male (reference)	1.00		1.00	
Female	*1.11	(1.03–1.20)	**0.74	(0.70-0.79)
Not prisoner of war (reference)	1.00		1.00	
Former prisoner of war	1.18	(0.83–1.67)	0.74	(0.54–1.02)
Alive for entire year (reference)	1.00		1.00	
Died during year	**2.25	(2.09–2.44)	**3.71	(3.38–4.07)
Did not move into RAC during year (reference)	1.00		1.00	
Moved into RAC during year	**1.61	(1.49–1.73)	**1.28	(1.17–1.39)
Other marital status (reference)	1.00		1.00	
Married	0.96	(0.88–1.05)	**0.83	(0.77–0.89)
Low RCS dependency (reference)	1.00		1.00	
High RCS dependency	**0.90	(0.83-0.97)	**0.63	(0.59-0.67)
Country of birth Australia (reference)	1.00		1.00	
Country of birth not Australia	*0.85	(0.73-0.98)	1.03	(0.92–1.16)
Preferred language English (reference)	1.00		1.00	
Preferred language not English	0.85	(0.39–1.87)	1.18	(0.61–2.28)
Not Indigenous (reference)	1.00		1.00	
Indigenous	0.95	(0.35–2.57)	0.94	(0.84–1.06)
Each day spent living in permanent RAC during the year (reference = 1 day)			**1.004	(1.004–1.004)

Statistically significantly different from reference group at 5% level. Statistically significantly different from reference group at 1% level. Not applicable to the model.

 $Table \ B1.2: \ High \ service \ use \ and \ hospital \ use for \ DVA \ gold \ cardholders \ aged \ 70 \ years \ or \ older \ living \ in \ the \ community: odds \ ratios \ from \ logistic \ regression \ analysis, 2002–03 \ and 2003–04$

Parameter	High GP ւ	ıse (2003–04)	High specialist	use (2003-04)
		Odds ratio (95% o	confidence interval)	
Age (70–74) (reference)	1.00		1.00	
Age (75–79)	**1.22	(1.17–1.27)	**1.23	(1.17–1.29)
Age (80-84)	**1.45	(1.39–1.51)	**1.33	(1.27–1.39)
Age (85–89)	**1.61	(1.54–1.69)	**1.41	(1.34–1.49)
Age (90-94)	**1.63	(1.52–1.74)	**1.32	(1.21–1.43)
Age (95 or older)	**1.86	(1.58–2.20)	*1.32	(1.06–1.64)
Male (reference)	1.00		1.00	
Female	**0.93	(0.91–0.95)	**0.77	(0.75–0.79)
Not prisoner of war (reference)	1.00		1.00	
Former prisoner of war	1.34	(0.88–2.02)	1.11	(0.67–1.83)
Alive for entire year (reference)	1.00		1.00	
Died during year	**4.07	(3.91–4.25)	**7.28	(6.94–7.65)
Did not move into RAC during year (reference)	1.00		1.00	
Moved into RAC during year	**2.51	(2.38–2.64)	**4.79	(4.51–5.10)
Each day spent living in permanent RAC during the year (reference = 1 day)				

Table B1.2 (continued): High service use and hospital use for DVA gold cardholders aged 70 years or older living in the community: odds ratios from logistic regression analysis, 2002–03 and 2003–04

Parameter	High RPBS ι	ıse (2002–03)	Hospita	l use (2002–03)
		Odds ratio (95% con	fidence interval)	
Age (70–74) (reference)	1.00		1.00	
Age (75–79)	**1.16	(1.12–1.21)	**1.14	(1.11–1.18)
Age (80-84)	**1.15	(1.11–1.19)	**1.16	(1.13–1.20)
Age (85–89)	1.03	(0.98–1.07)	**1.18	(1.14–1.23)
Age (90-94)	**0.84	(0.77–0.91)	**1.12	(1.04–1.20)
Age (95 or older)	**0.63	(0.50-0.80)	1.06	(0.88–1.27)
Male (reference)	1.00		1.00	
Female	**1.04	(1.02–1.06)	**0.73	(0.72-0.75)
Not prisoner of war (reference)	1.00		1.00	
Former prisoner of war	*1.56	(1.02–2.38)	**1.92	(1.18–3.12)
Alive for entire year (reference)	1.00		1.00	
Died during year	**2.93	(2.81–3.05)	**12.27	(11.42–13.18)
Did not move into RAC during year (reference)	1.00		1.00	
Moved into RAC during year	**1.49	(1.41–1.58)	**5.09	(4.73–5.47)
Each day spent living in permanent RAC during the year (reference = 1 day)			**1.004	(1.004–1.004)

Statistically significantly different from reference group at 5% level. Statistically significantly different from reference group at 1% level. Not applicable to the model.

B.2 Survival analysis for length of hospital episodes

In this study, survival analysis techniques were used to determine which personal characteristics were associated with the days spent in hospital per hospital episode. To be included in the analysis, separations from hospital took place during the 2002–03 financial year, and the total episode length was used, even if the admission occurred in the previous financial year. This ensured that only completed episodes were included in the analysis.

A parametric regression model assuming a Weibull distribution for the survival distribution was used. The form of the regression equation is similar to that of the logistic regression model, except that, in this case, the variable of interest is length of time in hospital. The fitted model is of the form:

$$\begin{split} &\ln(T) = \beta_0 + \beta_1 \times AGE1 + \beta_2 \times AGE2 + \beta_3 \times AGE3 + \beta_4 \times AGE4 + \beta_5 \times AGE5 + \beta_6 \times SEX \\ &+ \beta_7 \times MARRIED + \beta_8 \times COB + \beta_9 \times LANG + \beta_{10} \times INDIG + \beta_{11} \times RCS \\ &+ \beta_{12} \times POW + \beta_{13} \times DEATH + \beta_{14} \times CHANGE \end{split}$$

where

T = Length of hospital episode (days), for hospital separations occurring during 2002–03 financial year

 β_0 to β_{14} are regression coefficients

AGE1 = 1 if aged 75–79 years, 0 otherwise

AGE2 = 1 if aged 80–84 years, 0 otherwise

AGE3 = 1 if aged 85–89 years, 0 otherwise

AGE4 = 1 if aged 90–94 years, 0 otherwise

AGE5 = 1 if aged 95 years or older, 0 otherwise

SEX = 1 if female, 0 if male

MARRIED = 1 for married, 0 otherwise

COB = 1 for country of birth other than Australia, 0 for Australia

LANG = 1 for non-English, 0 for English

INDIG = 1 if the gold cardholder identifies as being Indigenous, 0 otherwise

RCS = 1 for high-care residential aged care residents, 0 for low-care residents

POW = 1 for prisoner of war, 0 otherwise

DEATH = 1 if the gold cardholder died in hospital during the episode, 0 otherwise

RACMOVE = 1 if the gold cardholder moved into RAC during the year, 0 otherwise.

Note: Information regarding marital status, country of birth, preferred language, RCS care level and Indigenous status is available only for gold cardholders living in residential aged care, and so could not be included in the models for gold cardholders living in the community (that is, β_7 to β_{11} set to 0).

In the above survival analysis, we are interested in looking at how median lengths of hospital episodes differ between people with different demographic characteristics. The survival ratio is the ratio of median episode length for the category of interest to the reference category. A survival ratio of 1 implies that the median episode length is equivalent in both groups. A survival ratio greater than 1 implies that the episode length is longer in that group than the reference group, while a survival ratio of less than 1 implies that the episode length is shorter in that group than in the reference group. Note that the survival ratio for the reference group is always equal to 1 (Table B2). All variables are binary in nature, except for age, for which the 70–74 year age group is the reference group. The survival ratios, obtained from the regression models, estimate the relative difference in median episode length in hospital between two levels of variables, while controlling for the presence of all of the other variables in the model.

Three models were used to examine differences in hospital episode lengths between residency sectors:

- Model A: All gold cardholders, using all variables in common (age group, sex, prisoner of war status, death during the year and move into RAC during the year).
- Model B: Gold cardholders living in permanent RAC, using the following variables: age group, sex, marital status, country of birth, preferred language, Indigenous status, RCS care level, prisoner of war status, death during the year and move into RAC during the year.
- Model C: Gold cardholders living in the community, using the following variables: age group, sex, prisoner of war status, death during the year and move into RAC during the year.

Results for these models are presented in Table B2.

Table B2: Survival ratios for hospital episode lengths for DVA gold cardholders aged 70 years or older, 2002-03

-	Model A		Model B		Model C	
Parameter	All gold	cardholders ^(a)	Gold cardholders living in RAC		Gold cardholders living in the community ^(a)	
		Surviv	val ratio ^(b) (95	% confidence int	terval)	
Living in the community (reference)	1.00					
Living in RAC	**1.41	(1.39–1.44)				
Private hospital (reference)	1.00		1.00		1.00	
Public hospital	**1.09	(1.08–1.10)	**0.91	(0.88-0.95)	**1.13	(1.12–1.15)
Age (70–74) (reference)	1.00		1.00		1.00	
Age (75–79)	**1.14	(1.12–1.16)	**0.84	(0.75-0.94)	**1.15	(1.13–1.17)
Age (80–84)	**1.30	(1.28–1.33)	**0.86	(0.77-0.96)	**1.33	(1.30–1.35)
Age (85–89)	**1.55	(1.51–1.58)	0.93	(0.83-1.03)	**1.61	(1.58–1.65)
Age (90–94)	**1.84	(1.77–1.90)	1.01	(0.90-1.13)	**2.06	(1.97–2.15)
Age (95 or older)	**1.85	(1.70–2.01)	1.10	(0.94-1.29)	**1.95	(1.73–2.19)
Male (reference)	1.00		1.00		1.00	
Female	**1.20	(1.19–1.21)	1.02	(0.97–1.07)	**1.23	(1.22–1.25)
Not prisoner of war (reference)	1.00		1.00		1.00	
Former prisoner of war	**1.72	(1.48–2.00)	1.15	(0.94-1.40)	**2.49	(1.97–3.15)
Did not die in hospital (reference)	1.00		1.00		1.00	
Died in hospital	**2.97	(2.88–3.07)	0.98	(0.91–1.05)	**3.54	(3.42-3.67)
Remained in same residency sector throughout year (reference)	1.00		1.00		1.00	
Moved into RAC during year	**2.73	(2.67–2.79)	**2.48	(2.39–2.57)	**2.69	(2.62-2.77)
Other marital status (reference)			1.00			
Married			**0.94	(0.90-0.98)		
Low RCS dependency (reference)			1.00			
High RCS dependency			**1.43	(1.38–1.48)		
Country of birth Australia (reference)			1.00			
Country of birth not Australia			**1.10	(1.03–1.19)		
Preferred language English (reference)			1.00			
Preferred language not English			0.97	(0.63–1.48)		
Not Indigenous (reference)			1.00			
Indigenous			1.74	(0.98–3.07)		

⁽a) Gold cardholders whose ages were unknown were excluded from the analysis.

⁽b) The survival ratios, obtained from the regression models, estimate the relative difference in episode length in hospital between two levels of variables, while controlling for the presence of all of the other variables in the model.

Statistically significantly different from reference group at 5% level. Statistically significantly different from reference group at 1% level. Not applicable to the model.

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