

Insured Hospital Services Within Own Province or Territory					
	1997-1998	1998-1999	1999-2000	2000-2001	2001-2002
9. Average out-patient cost per visit for <u>all</u> facilities providing out-patient insured hospital services, by type of care: (\$)					
a. acute care	not available	not available	not available	not available	not available
b. chronic care	not available	not available	not available	not available	not available
c. rehabilitative care	not available	not available	not available	not available	not available
d. out-patient diagnostic care	not available	not available	not available	not available	not available
e. surgical day care (out-patient)	not available	not available	not available	not available	not available
f. other	not available	not available	not available	not available	not available
10. Average (in-patient and out-patient) cost per visit for <u>all</u> facilities providing insured hospital services, by type of care: (\$)					
a. acute care	not available	not available	not available	not available	not available
b. chronic care	not available	not available	not available	not available	not available
c. rehabilitative care	not available	not available	not available	not available	not available
d. other	not available	not available	not available	not available	not available
11. Number of private for-profit health care facilities providing insured hospital services, by the facility's primary type of care: (#)					
a. private surgical facilities	not applicable	not applicable	not applicable	not applicable	not applicable
b. private diagnostic imaging facilities	not applicable	not applicable	not applicable	not applicable	not applicable
c. Total private for-profit health care facilities	not applicable	not applicable	not applicable	not applicable	not applicable
12. Number of insured hospital services provided at private for-profit health care facilities, by the facility's primary type of care: (#)					
a. private surgical facilities	not applicable	not applicable	not applicable	not applicable	not applicable
b. private diagnostic imaging facilities	not applicable	not applicable	not applicable	not applicable	not applicable
c. Total insured hospital services provided at private for-profit health care facilities	not applicable	not applicable	not applicable	not applicable	not applicable
13. Total payments to private for-profit health care facilities providing insured hospital services by the facility's primary type of care: (\$)					
a. private surgical facilities	not applicable	not applicable	not applicable	not applicable	not applicable
b. private diagnostic imaging facilities	not applicable	not applicable	not applicable	not applicable	not applicable
c. Total payments to private for-profit health care facilities	not applicable	not applicable	not applicable	not applicable	not applicable

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c. Total insured hospital services provided at private for-profit health care facilities	0	0	0	0	0
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