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Analysis of Health Services Based on the BPJS Program in Hospitals

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ABSTRACT

operational research and survey designs, and data collection is crosssectional. The population is all BPJS Kesehatan patients who visit or register at Praya General Hospital in the period February-May 2023. Sampling was done using a purposive sampling method. According to the researchers' objectives, respondents were taken from all visitors on service days between Monday and Thursday. The minimum number of samples taken is 5% of the average daily patient visits, namely 5% x 410 = 21 or 84 patients for four working days. Its realization for system analysis obtained a sample of 100 for each service counter, and for the patient perception study, a sample of 94 respondents was collected. Sample inclusion is a patient who is willing and able to be interviewed. The results of this study are the overall satisfaction aspect indicating that 50 respondents (60.0%) were very satisfied with the overall service provided by Praya General Hospital, while 35 respondents (48.0%) were dissatisfied. Customer expectations show that 27 respondents (33.0%) strongly agree that the services provided by Praya General Hospital meet patient expectations, while 18 strongly agree. Respondents (30.0%) indicated that they disagreed with this statement. Places of Interest Repurchasing showed that 12 respondents (26.0%) strongly agreed that they would return to Praya Hospital if they needed treatment, and 14 respondents (14.0%) said they did not plan to return for treatment. Based on the results of interviews with patient testimonials from hospital services, they said the following: In the service process, patients have to wait a long time before arriving at the ward. According to one patient (Ida) who complained and said that she had cancer for up to 9 consecutive days for class I (queue number 9) because the doctor said that the patient would be operated on when they got a room. In addition, patients report to the BPJS representative office located at Praya General Hospital, where patients receive referrals. It is clear from the

This study aimed to determine health services based on the BPJS program in hospitals. This type of research is a quantitative observational study with

Keywords: Health services, BPJS, Hospital

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patient's statements that the responsibility of BPJS officers is unfair to the

1. INTRODUCTION

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Health services are all efforts carried out individually or jointly in an organization to maintain and improve health, prevent and cure disease and restore the health of individuals, families, groups or communities [1][2]. Health services are essential services that are the community's rights and must be fulfilled by the government in a country as state administrators [3][4]. The legal basis for providing health services is regulated in Law No. 36 of 2009 and articles 53 and 54 concerning the Health Law. Given the importance of health in society, the government should provide reasonable and optimal health services solely to create a comfortable and peaceful community life [5]

complaints experienced by many patients.



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Health services are one of the most crucial forms carried out by a country because they involve the health of the public in the country [6][7]. According to Levely and Loomba are any efforts that are carried out alone or jointly in an organization to maintain and improve health, prevent disease and heal and restore the health of individuals, families, groups and communities [8][9]. One of the government's efforts in realizing optimal health services to increase the highest degree of health and the goal of developing health towards a healthy Indonesia, the government established the National Health Insurance (JKN) to make this happen. Since January 1 2014, the Ministry of Health of the Republic of Indonesia has launched BPJS Kesehatan. According to the Regulation of the Health Social Security Administrative Body No.1 of 2014 it is explained that health insurance is a guarantee in the form of health protection so that participants obtain the benefits of health care and protection in fulfilling basic health needs that are given to everyone who has paid contributions or whose contributions are paid by the government [10].

According to Triwibowo, the quality of health services is the degree to which the needs of society or individuals are met for health care by sound professional standards by using resources relatively, efficiently, and effectively within the limitations of government and society's capabilities, as well as being carried out safely and satisfying customers according to with good norms and ethics [11]. Good health services are a community need and often become a measure of the success of development. Recognizing that health services are a need for every citizen, the government tries from time to time to produce programs that can improve health services as a whole [12][13].

By the mandate of Law Number 40 of 2004 concerning the National Social Security System (SJSN) and Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS), it is stipulated that BPJS Kesehatan operations will begin on January 1, 2014. The hospital is a health service facility that is part of the resources needed to support the implementation of health efforts. The level of patient satisfaction can measure the ability of a hospital to meet patient needs. The Social Security Administering Body (BPJS) for Health is a public legal entity that administers the health insurance program. Social security participants consist of Contribution Assistance Participants (PBI) consisting of the poor and needy, non-PBI group participants or participants from the ASKES transition and independent participants. The Social Security Administering Body (BPJS) for Health cooperates with various health service facilities, including First-level health services (Puskesmas, Clinics, independent practising doctors, practising midwives and pharmacies) and hospitals as referrals.

The Health Insurance Program (JKN) is run nationally with the principle of social insurance and the principle of equity, and the system is in the form of a cooperation system where able and healthy participants will help poor and sick participants [14]. However, the public has a wrong perception of the JKN program. This is because knowledge and outreach about the BPJS health program are still low, so the whole community does not sufficiently understand the implementation of the BPJS program. Another fact is that BPJS membership does not fully cover the community, especially informal workers (labourers or farmers) or people in remote rural areas. Because not all of them are registered or have a BPJS card.

The most fundamental problem is the high tariffs for health services in Indonesia which are often not affordable by the community, especially the lower economic class. The government has carried out various innovations to reduce the cost of health services, and one is by presenting the BPJS program, a savings account for the community so that it is not too burdensome when one day the person concerned becomes ill. Not only that, Indonesia has now integrated health services with information technology to make it easier for people to reach efficient and effective health services [5].

Good service quality will lead to customer satisfaction or service users (patients). Customer satisfaction is the leading indicator of the standard of a health facility. A measure of service quality, low customer satisfaction will impact the number of visits which will affect the profitability of the health facility. The attitude of employees towards customers will also impact customer satisfaction, where customer needs will increase from time to time. Measuring customer satisfaction is one way to measure the hospital's performance in providing services to the community. Supervision of services provided to patients must always be carried out to improve service quality [15].

The results of preliminary observations by researchers showed that the queue for BPJS Kesehatan RSU patient registration services, especially in the morning, was very busy, and some patients had even queued since early in the morning. The hospital management has tried to overcome this by adding



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assistant officers at the outpatient number collection and registration counters, but the density of visitors still occurs. A higher arrival rate than the current service level indicates a condition that is not steady in the queuing system. If there are no improvements in queue management, it will cause conditions that are difficult to control and cause the low quality of service [16]. Based on the explanation above, this study aimed to discover the BPJS program-based health services in hospitals.

2. METHOD

This type of research is a quantitative observational study with operational research and *survey designs*, and data collection is *cross-sectional*. The population is all BPJS Kesehatan patients who visit or register at Praya General Hospital in the period February-May 2023. Sampling was done using a purposive sampling method. According to the researchers' objectives, respondents were taken from all visitors on service days between Monday and Thursday. The minimum number of samples taken is 5% of the average daily patient visits, namely $5\% \times 410 = 21$ or 84 patients for four working days. Its realization for system analysis obtained a sample of 100 for each service counter, and for the patient perception study, a sample of 94 respondents was collected. Sample inclusion is a patient who is willing and able to be interviewed.

3. RESULTS AND DISCUSSION

The process of service activities at the Praya General Hospital for outpatient and inpatient services. Praya General Hospital serves patients six days a week, including BPJS patients (Monday to Saturday) from 08.00 to 13.00. They were handled by reliable general practitioners and specialist doctors, assisted by professional and trained paramedics. The Praya Hospital building was built to the north of the village of Pengames. On August 18, 1959, the building was inaugurated, named Praya General Hospital and led by Dr Tang Hong Djwan until 1965 with the title Head of the Hospital. 62 on June 1, 2006, the Praya Hospital building was moved to Jalan H. Lalu Hasyim, Tiwu Galih Village (Decree of the Minister of Health number: HK.07.06/III-3/75/2007). Since June 5 1996, Praya Hospital has changed its type from Type D Hospital to Type C Hospital with the Decree of the Minister of Health. 46/Menkes/SK/VI/1996, then in 1998 and 2003, the basic level was fully accredited. In 2009 ISO certified. Then in 2011, Praya Hospital became a BLUD with the Regent's Decree Number 374 of 2011, dated October 1, 2011.

Satisfaction is an emotional reaction to perceived service quality; perceived service quality is an overall opinion or attitude related to service excellence. Quality health services are health services that can satisfy every user of health services by the level of satisfaction of the average population and implementation by the existing code of ethics and professional service standards. Inpatient services are a type of health service for patients who require further medical, nursing and non-medical action (within a certain period) and who require inpatient treatment at the hospital and this is because the disease suffered by the patient is considered to require intensive care. Intensively by medical, nursing and non-medical personnel to achieve optimal health.

Along with the acceptance of BPJS participant patients, of course, it will significantly impact the increase in the number of patients who are members of the general public because BPJS participants do not only come from the TNI-AD or civil servants. According to the data obtained, more than half of the patients in 2014 were BPJS patients. The study results also show that the number of BPJS participant patients from the general public is more significant than BPJS participant patients who are civil servants.

Praya General Hospital can be said to be very good (mean value 5.22); Empathy indicators can be said to be very good (mean value 5.21); the Reliability indicator can be said to be very good (mean value 4.79); the Responsiveness indicator can be said to be very good (mean value 5.34); and the Assurance indicator can be said to be good (mean value 4.30). The description of the respondent's answers to the patient satisfaction variable can be said to be good, with a mean value of 5.30. The results of distributing the questionnaires showed the characteristics of the respondents according to gender. Namely, the highest percentage of BPJS participant patients were 40 women; the rest were 55 male respondents. Based on the patient's age characteristics, most patients were 24-35 years, as many as 37 people, while the lowest was 68 years and over, two people.

BPJS patient satisfaction is also influenced by several aspects, such as The overall satisfaction aspect showing that 50 respondents (60.0%) were very satisfied with the overall services provided by



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Praya General Hospital. In comparison, 35 respondents (48.0%) were dissatisfied. Customer expectations show that 27 respondents (33.0%) strongly agree that the services provided by Praya General Hospital meet patient expectations, while 18 strongly agree. Respondents (30.0%) indicated that they disagreed with this statement. Places of Interest Repurchasing showed that 12 respondents (26.0%) strongly agreed that they would return to Praya Hospital if they needed treatment, and 14 respondents (14.0%) said they did not plan to return for treatment.

Based on the results of interviews with patient testimonials from hospital services, they said the following: In the service process, patients have to wait a long time before arriving at the ward. According to one patient (Ida) who complained and said that she had cancer for up to 9 consecutive days for class I (queue number 9) because the doctor said that the patient would be operated on when they got a room. In addition, patients report to the BPJS representative office located at Praya General Hospital, where patients receive referrals. It is clear from the patient's statements that the responsibility of BPJS officers is unfair to the complaints experienced by many patients. Accountability as an indicator of service quality illustrates the ability of public organizations to realize their vision and mission, primarily to fulfil them in response to community needs. In addition, the comfort BPJS patients enjoy at the Praya General Hospital facility is incomparable to the pain while the patient waits for the doctor to operate on him.

4. CONCLUSION

Based on the results above, it can be concluded that several aspects, such as % also influence BPJS patient satisfaction) not being satisfied. Customer expectations show that 27 respondents (33.0%) strongly agree that the services provided by Praya General Hospital meet patient expectations, while 18 strongly agree. Respondents (30.0%) indicated that they disagreed with this statement. Places of Interest Repurchasing showed that 12 respondents (26.0%) strongly agreed that they would return to Praya Hospital if they needed treatment, and 14 respondents (14.0%) said they did not plan to return for treatment. Based on the results of interviews with patient testimonials from hospital services, they said the following: In the service process, patients have to wait a long time before arriving at the ward. According to one patient (Ida) who complained and said that she had cancer for up to 9 consecutive days for class I (queue number 9) because the doctor said that the patient would be operated on when they got a room. In addition, patients report to the BPJS representative office located at Praya General Hospital, where patients receive referrals. It is clear from the patient's statements that the responsibility of the BPJS officers is unfair to the complaints experienced by many patients.

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