


Analysis Of Inpatient Satisfaction Of National Health Insurance Towards The Quality Of Health Services In The Hospital: Literature Review

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Article Info	ABSTRACT
<p>Keywords: BPJS Inpatient, Hospital, Satisfaction patients, quality of service.</p>	<p>The hospital is functioning as place reference service health For health centers, especially in matter care and recovery patient. focus The main hospital is to organize maintenance healing and rehabilitation patients, and as the result is important for they For own system management efficient operations For give service health to patient. The purpose of study This is For know level satisfaction patient take care BPJS hospitalization against quality service House sick. Research This using the literature review process. Information taken from the Garuda Ristekbrin electronic database and Google Scholar. For look for relevant articles, terms search used is satisfaction BPJS patients at home sick. Search the found 3,856 items. Articles that are not fulfil condition For entered No accepted. For analysis studies Here, a total of 13 publications were selected with score satisfaction patient take care BPJS hospitalization about service House sick. Articles This show How elements quality maintenance health influence satisfaction JKN patients at home pain. Tangible, reliability, responsiveness, assurance, and empathy are elements that influence satisfaction JKN patients at home sick. Hospital must always make an effort increase standard service for satisfaction patient increase.</p>
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INTRODUCTION

The hospital is functioning as place reference service health For health centers, especially in matter care and recovery patient. focus The main hospital is to organize maintenance healing and rehabilitation patients, and as the result is important for they For own system management efficient operations For give service health to the patient. ¹ role management operational in sector service health is very vital, including in supervision activity operational at the facility health. This includes effectiveness and capacity House Sick For provide adequate and reliable service. ²

According to Law Number 24 of 2011 of the Republic of Indonesia, every Indonesian citizen, including foreign citizens who have worked for at least six months, are required to register for the social security system. ³ Target number 3.8 of the Sustainable Development Goals (SDG) is Universal Health Coverage (UHC), which aims to For ensure that everyone has access to service health the basis on which they need without face difficulty finance. The gap large coverage Still exist in many low-income countries intermediate to below which is another word for lower-middle-income countries (LMC). In addition, those who use service often comes out cost own big one. Cost too alone big can become disaster for family class down and become barrier for individual For accept the care they need. ⁴

System National Social Security (SJSN) which has started effective as of January 1, 2014 in Constitution Number 40 of 2004. A an institution called the Organizing Agency Social Security, or BPJS, was established For overseeing the Indonesian Social Security Program in the industry maintenance health. Law Number 24 of 2011 concerning BPJS which is divided into two parts, namely BPJS Employment and BPJS Health. Each reports completed by BPJS as part from his work program responsible answer direct to President. BPJS is able supervise and verify compliance giver work and participants, collect contribution must from BPJS participants, and distribute cash based on needs. Guarantee program health in a way logical held based on principle insurance social and just. The mutual cooperation work model requires healthy participants For help other participants who are sick and not well. ⁴

A total of 95.75% of the Indonesian population is registered as Program participants Organizing Agency Social Security (BPJS) Health. Until end 2023, participant data become base calculation The total number of BPJS Health participants reached 606.7 million. soul and numbers the increase drastic in period time ten last year. ⁵ Satisfaction patient to service the health he received as participant National Health Insurance is one of variables used in implementation of the JKN program which influences quality health services. ⁶

When the fun somebody to a activity and a product in accordance with hope, they it is said satisfied. Fulfill or beyond hope consumer is base For level pleasure this. One of metrics used For evaluate quality care provided at home Sick is satisfaction patient as service users. ⁷

Needs, expectations and preferences patient must become base service quality health high. Therefore that, provider service health must provide service health in a way effective and efficient. ⁸ Study This aiming For know level satisfaction participant to quality service House sick in between those covered in the JKN program.

METHOD

The literature review approach used in study This is a search strategy article national and international combined with search library with use approach methodical For search, collect, understand, analyze, synthesize, and evaluate the right sources For made into runway main discussion produced. Literature review This aiming For give proof from library use answer problem research. Related with main selected topics, with Topic problem about factors quality service influence satisfaction JKN patients at home Sick.

Methods used in conducting a literature review is identification, selection eligibility, and selection of writings/ articles, for to select literature. The database used For look for article are Garuda Ristekbrin and Google Scholar. The term " Satisfaction JKN Patients in Hospitals" with the keywords. Accessing use technique documentation with open access libraries. There are several steps involved in the data collection process. Initial step is observation, namely observe online database resource for collect data. Title and abstract article Then used For filter and select Results. A total of 3,856 search data were obtained through the identification of search strategies using Google Scholar and Garuda Ristekbrin. Six articles were collected and subjected to independent assessment after screening. The use of inclusion and exclusion criteria facilitated the search.

Table 1. Inclusion Criteria and Exclusion Criteria

Criteria Inclusion	<ol style="list-style-type: none"> 1. Articles or journals are available online and have been accredited. 2. Publication of articles is in the range of 2020 to 2024. 3. The article is the full version.
Exclusion Criteria	<ol style="list-style-type: none"> 1. The article displayed cannot be accessed in full. 2. The article does not match the title and abstract.

Next step is a literature review. At stage this, researcher inspect information from journal found in the associated database with literature review methodology. Selected related articles Then undergo inspection addition For gather accurate and comprehensive reference related satisfaction JKN patients against service House sick. Lastly, documentation completed, and at the stage this data is entered to in the Mendeley program.

RESULTS AND DISCUSSION

Results

Table 2. Research Results

Researcher	Title	Location	Number of Samples	Results
2020, Fitriani	Connection between quality service with satisfaction patient user BPJS	Baptist Hospital, Batu City, East Java	76	Satisfaction patients and quality service each other related for BPJS patients undergoing maintenance take care hospitalization at Batu Baptist Hospital. Satisfaction very good patient by 73.36%, and the quality excellent service by 78.94%. Satisfaction patient increase along with quality care received patient. Hospital must increase quality poor service both that he gave, including facility physical, especially patient toilets, speed giving medicine, and training and expertise staff medical. ⁹
2020, Zumria	Differences in BPJS and Non-BPJS Patient Satisfaction Levels Regarding the Quality of Service in the Inpatient Room of Kendari City Hospital	Kendari City Hospital, Kediri City, East Java Province	355	Based on results study, part big the community at BPJS Health assesses quality very good service on dimension following : tangible, responsiveness, assurances, empathy, and felt faithful. Respondents the including 18 people (40.9%), 20 people (45.5%), 17 people (38.6%), 19 people (43.2%), and 18 people (40.9%). The majority non BPJS respondents stated level quality service both in the dimensions : tangible, responsiveness, assurances, empathy, and felt faithful; dimensions the stated by 19 respondents (43.2%), 21 respondents (47.7%), 20 respondents (45.5%), 20 assurance respondents (45.5%), and 18 respondents (40.9%) in general sequentially. BPJS patients and patients without BPJS shows difference satisfaction to quality service ; Quality service tangible form has p- value of

Researcher	Title	Location	Number of Samples	Results
				0.001, reliability of 0.001, responsiveness of 0.001, assurances of 0.000, and empathy of 0.001, all of which show higher p-value small from α value of 0.05. ¹⁰
2021, Ayyi Puteri Pujaswari	Analysis Satisfaction Inpatients Organizing Body Participants Social Security (BPJS) Health at Lembang Regional Hospital	Lembang Regional Hospital, Bandung, West Java Province	30	According to research, there is strong correlation between satisfaction patients and assurance ; Patients who have very good guarantee more satisfied with service House sick, which in turn build trust patient to service House Sick. Research result show that patients at Lembang Regional Hospital in general satisfied (42.8%) with service assurance provided. Patients specifically like with ability doctor For diagnose disease in a way accurate and make they feel comfortable, and fast nurse responsive and appreciative patients. On the other hand, 28.6% of patients state dissatisfaction with the guarantee. ¹¹
Amir Mahmud, 2022	Analysis of patient satisfaction of inpatient BPJS health participants at Ar-Rasyid Islamic Hospital, Palembang	Hospital Islam ar-rashid Palembang, South Sumatra	73	Based on results research, 54.8% of patients BPJS Health participants generally feel satisfied with service received. It looks like that there is sufficient relationship significant between fifth aspect quality with satisfaction patient, with p value between tangible (0.003), reliability (0.000), responsiveness (0.000), assurance (0.000), empathy (0.000) in the Chi Square test results. ¹²
2022 Annisa Fasmi Putri Setiadi et al.	Comparison between Satisfaction Levels Related BPJS and Non-BPJS Patients Health Services in the	Assyifa Islamic Hospital Sukabumi, West Java	100	Based on results research, good Both BPJS and non-BPJS patients stated that they were very satisfied to responsiveness and assurance indicators, and very satisfied based on indicators of reliability, tangible, and empathy. While that, based on five

Researcher	Title	Location	Number of Samples	Results
	Inpatient Room of Assyifa Islamic Hospital Sukabumi			indicators, the majority BPJS and non-BPJS patients stated satisfied to service medical given in the room take care Assyifa RSI Hospital Sukabumi. With using the sample T test independent in study statistics, level satisfaction BPJS and Non-BPJS patients are proven more high in group BPJS patients. ³
2022, Moh Niko Fajrul is Confident	Analysis satisfaction BPJS and non-BPJS patients against service health at the Inpatient Installation of RSI PKU Muhammadiyah Tegal	RSI Muhammadiyah Tegal, West Java	PKU 70	In this study, the average level of satisfaction in the dimension of " tangibles " was 90.55% for BPJS patients, meaning satisfied and 79.19% for non-BPJS patients, meaning dissatisfied; in the dimension of "empathy" it was 90.65% for BPJS patients, meaning satisfied and 75.23% for non-BPJS patients, meaning dissatisfied; in the dimension of "reliability" it was 92.17% for BPJS patients, meaning satisfied and 76.25% for non-BPJS patients, meaning dissatisfied; in the dimension of "responsiveness" it was 91.76% for BPJS patients, meaning satisfied and 75.69% for non-BPJS patients, meaning dissatisfied; in the dimension of "assurance" it was 95% for BPJS patients and 80.81% for non-BPJS patients, meaning they were satisfied. The Fisher exact test was used to analyze the data, and the resulting p-value was = 0.0001. ¹³
2023, Sayid Arifin	Quality service increase patient BPJS take care stay Queen Aji Putri Regional Hospital, Botung	Ratu Aji Putri Botung Hospital, Kalimantan East	96	With average score 73.7%, response Respondent show that they own the general opinion positive to tangible dimension. With score 70.9%, quality overall service component empathy considered strong. This is show that although perception feeling care staff medical positive, evaluation attention individual they Still bad. Patient give dimensions

Researcher	Title	Location	Number of Samples	Results
				responsiveness quality maintenance score tall by 68.8%, which shows that they has accept very good response from staff medical. However, in matter will paramedic For accommodate requirements and demands unique patient, consumer give it to him bad rating. Patient evaluate quality maintenance dimensions dependence as high as 73.2%, which shows that they can depend on paramedic For do work they. Patients own good perception to capabilities of Ratu Aji Putri Botung Hospital For give strong guarantee in matter service health, as indicated by the score House Sick by 77.8% in quality service with dimension of assurance. ¹⁴
Halawa et al., 2020	Analysis level satisfaction patient take care stay user National Health Insurance at the Level II Bhayangkara Hospital in Medan	Bhayangkara Level II Hospital Medan, North Sumatra	100	Satisfaction patients and tangibles, reliability, responsiveness, assurance, and empathy that are mutually related. In case influence happiness patient, factors dependence is factor most important. Variables reliability is factor the most important thing to measure level satisfaction patients at the Bhayangkara Level II Hospital Medan, treatment unit stay, according to results studies regression logistics. ¹⁵
2022, Agung Laksana et al.	of Inpatient Satisfaction Levels JKN Participants Against Quality Services at Harapan Anda Islamic Hospital	Harapan Anda Islamic Hospital, Tegal, Central Java	100	With total score 52 out of 346, tangible component of satisfaction patients (ER facilities and rooms) take care complete and pleasant stay) shows level satisfaction very satisfied patient. With total score 50 out of 331, dependability component (access) House easy pain) is fulfilled. With total score 47 out of 317, dimensions responsiveness —which involves the doctor explained disease patient — assessed

Researcher	Title	Location	Number of Samples	Results
				satisfying. With total score 52 out of 346, assurance dimension (politeness) in attitudes and behavior officer to patients and families) were considered very satisfactory. With total score 44 out of 318, empathy dimension (where the doctor ask complaint patient) is assessed satisfying. When JKN participants get treatment in the regular KRIS room, level satisfaction they usually range between 42.9% to very happy up to 42.5% for satisfied, 13.8% for not enough happy, and 0.8% for not satisfied. ¹⁶
2021, Raihan Utari, et al.	Satisfaction Level Inpatients BPJS health Class III Against Services at Avicenna Bireuen Hospital	Avicenna Hospital Bireuen, Aceh.	93	Based on data analysis, part big respondents (89.2%) stated satisfied to component proof directly. stated satisfied to component dependency (82.8%) stated satisfied to component Power responsive (79.6%) stated satisfied to component proof certainty (88.2%) stated satisfied to component proof empathy (73.1%). Satisfaction level Avicenna District Hospital patients Bireuen rated satisfied by some big respondents (83.9%). ¹⁷
2024, Alfiani Rizqi., et al.	Quality of Health Services Towards Satisfaction Inpatients in Internal Medicine Ward of BPJS Class III Participants at Linggajati Regional Hospital	Linggajati Regional Hospital, Kuningan, West Java	54	Amount incoming patients to the BPJS Class III Internal Medicine Room at Linggajati Regional Hospital Regency Brass in 2023 as many as 54 patients. Based on analysis with the Spearman correlation test it is known that all over patient own quality service good, with an outcome of 100%. Based on results analysis statistics with Spearman 's correlation test found connection between quality service with level appropriate proximity and correlation of 0.498 with satisfaction patients ; a p- value of 0.000 <a = 0.05 was achieved.

Discussion

Response emotional direct patient to performance a service called satisfaction. Gap between the expected hope patient with performance perceived service will influence level satisfaction.¹⁸ One of size quality home service Sick is satisfaction patient as user services. Requirements, expectations, and preferences patient must become base service quality health high. Therefore that, the implementation service health at home Sick must effective and efficient. Based on survey to six publication, found that quality service health which includes dimensions *tangible, reliability, responsiveness, assurance, and empathy* greatly influence satisfaction JKN patients in hospital.¹⁹

According to Halawa et al.'s research (2020), characteristics of tangible, reliability, responsiveness, assurance and empathy is factor main influencing factors satisfaction JKN patients at the Level II Bhayangkara Hospital in Medan. Based on results findings tangible variables of the Medan Level II Bhayangkara Hospital, as many as 35% of patients feel No satisfied to the services they received, while 65 % of patients feel satisfied in a way general. The majority the patient stated No satisfied state that room maintenance not enough clean and noisy, Therefore that, the party House Sick must more notice order, tranquility, and conditions room Wait patients. In addition, the room Wait service Not yet Enough wide and less comfortable. Regarding reliability dimension, as many as 46% of patients state No satisfied to the service he received, especially related delay doctor come, explanation from giver service health not enough adequate, and people are not given Enough time For consult more carry on about situation them. With similar way with dimensions of responsiveness, capacity member staff House Sick For explain various matter to patient and how long it will take For get service. More far, satisfaction Patients are also greatly influenced by the aspects of assurance and empathy.¹⁵

In research other found moment arrive in the room take care inpatient, respondent No satisfied with duration time to come they finish it For get medicine. Respondents who have ever get treatment at RS. Baptist Batu said time giving drug moment arrived at home Sick need long time. Patient Actually anticipate will accept treatment quick after they enter room, which helps to ease discomfort they. Minister of Health Regulation No. 129/Menkes/SK/II/2008, which outlines criteria minimum service for House sick, set that service treatment finished must completed in 30 minutes time, and service drug concoction must completed in 60 minutes time. One of the method For measure satisfaction patient is with see how long the patient must wait prescription service.¹⁸

Six respondents state dissatisfaction to low quality services, according to tabulated data cross based on Dwi Wulan Fitriani's research at Batu Baptist Hospital. Respondents state dissatisfaction to condition room small frequent patients seen No clean and smells good No delicious. Respondents also did not satisfied with services provided by nurses young said. According to respondents, nurses who are still new seen not enough professional and less experienced in give service to patient. How many lots of them has done For increase service nursing in accordance with standard professional and service, while also considering capabilities and limitations government and society consumers and take advantage of source

Power House Sick as much as possible Possible with ethical, legal, normative, safe and fulfilling expectations. 9

One of the main reasons why government health care facilities are underutilized or not utilized at all in the community is because, in general, the quality of health care services they offer is still far from what is anticipated by the community and/or patients. In providing public services, a person's attitude and behavior are influenced by a number of elements, according to Aftab and Razzaq. These factors include work, recognition, achievement, responsibility, compensation, status, and facilities. Health workers need to have a number of competencies, such as the capacity to identify or recognize their own emotions and understand the relationship between emotions, thoughts, and behavior; the capacity to manage emotions, which requires controlling one's feelings to allow for appropriate and appropriate expression; the capacity to inspire oneself with positive outlooks and optimistic thinking; the capacity to read and recognize the emotions of others (empathy); and the capacity to form relationships with others. ²⁰

CONCLUSION

Service health care provided House Sick to JKN participants have an impact on satisfaction patient with a number of related criteria with dimensions quality service, namely : tangible, reliability, responsiveness, assurance, and empathy. Service quality medical House Sick impact on the variables those. Most of them patient feel satisfied with the service he received, but House Sick Still need increase standard service. This is covering development more facilities and infrastructure adequate, provision service fast administration, improvement capacity staff in give friendly, polite and responsive service, development empathy staff medical, and providing comfort to patient.

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