

The Implementation of National Health Insurance Policy At Puri Medika Tanjung Priok Hospital, Jakarta Indonesia

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Abstract.

The present study reports the comprehensive study on BPJS health recently, as a form of change from PT. Askes in Indonesia, which previously became the organizer of health insurance for all Indonesian people. The JKN program organized by BPJS health aims to improve the social welfare of the community by providing convenience in public services, especially in the health sector. This study aims to examine how the implementation of the national health insurance policy and what are the obstacles in implementing the National Health Insurance policy through the Health Social Security Administering Agency (BPJS) at Puri Medika Hospital, Tanjung Priok, Jakarta, Indonesia. The researcher used a descriptive qualitative research method. The data used in the study were primary and secondary data. Data collection used interview, documentation and observation techniques. The data were analyzed using the Milles and Huberman data analysis model and presented in the form of a TOWS analysis diagram. The implementation of National Health Insurance at Puri Medika Hospital, Tanjung Priok, Jakarta, Indonesia is in the good category. The inhibiting factors for implementation are the limited number of registration officers, lack of public knowledge, and waiting times for health services that still need to be improved.

Keywords: *Bpjs, Health Insurance; National Health Insurance; Policy Implementation and Puri Medika Tanjung Priok Hospital Jakarta.*

I. INTRODUCTION

Health is one of the basic rights that every human being must have, this is also stated in the Republic of Indonesia Law Number 39 of 1999 Article 9 which states that the community is guaranteed the right to receive health services, maintain health, and prevent diseases that cause death. Therefore, good health insurance is needed to achieve this goal[1]. To meet the need for health services, the government gives full trust to the Social Security Administering Body which has been regulated in Law Number 24 of 2011 concerning the Social Security Administering Body (health insurance BPJS) which consists of BPJS Healthcare and BPJS Employment, for the health insurance program organized by BPJS Health, its implementation began on January 1, 2014[2]. The National Health Insurance Program is implemented in the form of health insurance BPJS. BPJS Health is a form of change from PT. Askes Indonesia which previously became the organizer of health insurance for all Indonesian people. According to Presidential Regulation of the Republic of Indonesia Number 12 of 2013 concerning Health Insurance, health insurance BPJS is a legal entity formed to implement the health insurance program in Indonesia[3]. In addition, the JKN Program organized by health insurance BPJS is in line with the state's goal of advancing public welfare as stated in the Preamble to the 1945 Constitution, which aims to improve the social welfare of the community by providing convenience in public services, especially in the health sector[4]. This program provides benefits in promotive, curative, and rehabilitative services aimed at all Indonesian people.

The JKN program implemented by the Indonesian government is intended so that the Indonesian people (JKN participants) can benefit from health care and receive protection in meeting basic health needs by improving the quality and access to health services (Ministry of Health of the Republic of Indonesia, in 2004)[5]. Health insurance BPJS (Health Social Security Administering Agency) is a State-Owned Enterprise

in Indonesia, specifically assigned by the government to organize health care insurance for all Indonesian people, especially for Civil Servants, PNS and TNI/POLRI Pension Recipients, Veterans, Independence Pioneers and their families and other Business Entities or ordinary people[6]. The national health insurance program is one of the government's strategies in improving the accessibility and quality of health services for all residents of a country. The main objective of this program is to provide financial protection to the community facing the costs of medical treatment and health care[7]. In many countries, national health insurance programs have become a crucial element in efforts to achieve universal health coverage (UHC), namely full access for the community to the necessary health services without any financial barriers. The implementation of this program involves various aspects, from policy formulation, organizing the administrative system, to providing quality and sustainable health services[8]. In the context of research and evaluation, an in-depth analysis of the implementation of the national health insurance program is important to understand the impacts, challenges, and potential involved. Through a comprehensive study, effective strategies can be identified in optimizing the benefits of this program for all stakeholders, including the government, health service providers, and the wider community.

Thus, research related to the national health insurance program has high relevance in the context of health policy and global health development[9]. The implementation of the health insurance policy at Puri Medika Priok Hospital, Jakarta Indonesia is a strategic step in optimizing access and quality of health services for the surrounding community. The hospital has a strategic position because it is in a densely populated area and is one of the leading health service centers in the region. By implementing a health insurance policy, it is expected that hospitals can provide better financial protection for patients, improve the efficiency of hospital administration, and strengthen the relationship between hospitals, patients, and other related parties. The health situation of the community around Puri Medika Priok Hospital Jakarta shows an urgent need for access to affordable and quality health services[10]. By looking at the high number of patient visits to this hospital, it is important to ensure that the health insurance system implemented can provide maximum benefits for patients. This includes aspects of financial protection, clarity of service costs, and the availability of health services that are in accordance with patient needs[11]. The Health Insurance Policy (JKN) supports hospitals as Advanced Referral Health Facilities to adjust to the service standards set by the government starting from clear and easy administrative procedures, availability of drugs, medical equipment, and services according to standards for hospital[12]. In addition, the health insurance policy at Puri Medika Priok Hospital is also part of the effort to align health services with the standards set by the health insurance management institution and applicable health regulations. In this context, the role of hospital management and the involvement of all stakeholders are key in ensuring that the implementation of health insurance policies can run well and have a positive impact on health services. This background is an important foundation for conducting further analysis of the implementation of health insurance policies at Puri Medika Priok Hospital[13].

II. METHODS

This type of research uses a descriptive qualitative research method. Qualitative research is research that emphasizes analysis on the deductive and inductive conclusion process and on the analysis of the dynamics of the relationship between observed phenomena, using scientific logic. The focus of this study is the implementation of the BPJS Healthcare program at Puri Medika Tanjung Priok Hospital in 2024[14]. The techniques and data sources used are primary and secondary data. Primary data is information data obtained directly from the source. Secondary data is data obtained indirectly from the source, namely from literature studies or other information materials related to the problem to be studied. In this study, informants were determined by purposive sampling. Purposive sampling, which is selected with certain considerations and purposes. This means that researchers deliberately choose informants who are considered to know the problems to be studied[15]. Therefore, the sample of informants in this study is more general, namely those who understand and know about the National Health Insurance (JKN) program policy at Puri Medika Tanjung Priok Hospital, Jakarta, Indonesia. The data collection techniques used are in-depth interviews, observation, documentation studies.

In this study, the author uses data analysis according to Miles and Huberman which describes an action of cross-checking or confirming the truth, which is combined from the results of observations through documentation and interview results to finally draw one essential conclusion from what is being studied and because of research findings. The data processing that will be used is TOWS analysis. TOWS analysis aims to formulate and implement strategies to achieve goals[16]. The data is grouped in a table based on internal strength factors, internal weakness factors, external opportunity factors and external threat factors, from the table, alternative strategies (SO), strategy (ST), strategy (WO) and strategy (WT) are obtained. So, to determine the extent to which the issue is strategic, the author uses the litmus test by Bryson. Strategic issues are the result of the interaction between internal and external factors in the TOWS analysis[6].

III. RESULT AND DISCUSSION

Puri Medika Priok Hospital Jakarta as an Advanced Referral Health Facility (FKRTL) serves National Health Insurance (JKN) participants or health insurance BPJS patients referred by Primary Health Facilities (FKTP). The following is data on patient visits to Puri Medika Priok Hospital, Jakarta.

Table 1. Inpatient and Outpatient Visits in 2023

No.	Patient Visit	Outpatient	Inpatient
1	BPJS PBI	562.734	16.673
2	BPJS Non PBI	190.949	4.979
3	General	1.361	55
4	Insurance	228	71
Total		755.272	21.778

Source: Puri Medika Priok Hospital Data

From the data above, it can be seen that outpatient visits in year 2023 amounted to 755.272 consisting of 562.734 BPJS PBI patients, 190.949 Non PBI patients, 1,361 general (private) patients, 228 insurance patients, and from the data above we also see that inpatient visits amounted to 21.778 consisting of 16.673 BPJS PBI patients, 4.979 Non PBI patients, 55 general or private patients and 71 insurance patients. The data above shows the interest of the community in the Tanjung Priok area to utilize health insurance JKN-BPJS for treatment at the Puri Medika General Hospital. From the data above, it shows the number of health insurance BPJS patient visits for outpatients is 755.272 and inpatients are 21.778, this number is much more than non-BPJS participants for outpatients 1.589 and inpatients 126 on that year. In its implementation, JKN faces various obstacles and constraints so that many problems occur in society. One of the problems that often appears is participation and service. The purpose of this study is to determine the implementation of the utilization of the National Health Insurance program in this case health insurance BPJS program at Puri Medika Priok General Hospital. The following is the data that can be displayed in the following table:

Table 2. Outpatient Satisfaction Index (Period Year 2023)

According to Permenpan RI No. 14 of 2017

No	Elements of Public Satisfaction Service	Service Element Value (NRR)	Service Unit Index Value	Category Conversion	Category
1	Requirements (U1)	3,00	$3,00 \times 0,11 = 0,33$	76,61 – 88,30	Good
2	System and Procedure (U2)	2,993	$2,993 \times 0,11 = 0,29$	76,61 – 88,30	Good
3	Completion Time (U3)	3,004	$3,004 \times 0,11 = 0,33$	76,61 – 88,30	Good
4	Cost / Tariff (U4)	3,400	$3,400 \times 0,11 = 0,37$	76,61 – 88,30	Good
5	Type of Service (U5)	3,693	$3,693 \times 0,11 = 0,41$	88,31 – 100,00	Very Good
6	Competence of Implementers (U6)	2,918	$2,918 \times 0,11 = 0,321$	65,00 – 76,60	Good
7	Behavior of Implementers (U7)	2,887	$2,887 \times 0,11 = 0,318$	76,61 – 88,30	Good
8	Handling of Complaints (U8)	2,916	$2,916 \times 0,11 = 0,321$	76,61 – 88,30	Good

No	Elements of Public Satisfaction Service	Service Element Value (NRR)	Service Unit Index Value	Category Conversion	Category
9	Infrastructure (U9)	2,883	$2,883 \times 0,11 = 0,317$	76,61 – 88,30	Good
Total Value of Registration Service Unit Index			$3,1 \times 25 = 77,5$		-
IKM Value after Conversion				Good	
Service Quality				Good	
Service Unit Performance				Good	

Source: Researcher, Data Processed 2024

In addition to outpatient and inpatient visits, here the researcher also explains the patient satisfaction index at Puri Medika Priok Hospital, obtained from 121 respondents, where this Patient Satisfaction Index is one of the National Indicators of Hospital Quality which is reported every six months. The Community Satisfaction Survey Technique is carried out using a questionnaire with face-to-face interviews, questionnaires through self-filling via goggleform. Respondents are selected randomly according to the scope of polyclinic services. According to the satisfaction index data above, then to clarify the implementation of the JKN Program Implementation at Puri Medika Hospital, researchers conducted interviews with JKN-BPJS healthcare participants[17], [18]. Based on the results of interviews with five health insurance BPJS participants, there was still a lack of alignment between the JKN objectives set by the government and implementation in the field. There are many procedures regarding the referral system in the implementation of JKN, such as: one referral letter is only valid for one type of disease, examination of other diseases is not allowed on the same day, routine checks for referred patients only once a month, and the lack of socialization regarding the implementation procedures for national health insurance to JKN-BPJS participants.

BPJS participants' dissatisfaction with the quality of service includes the waiting time for service which is still long, an average of 2.5 hours, and the presence of nurses who are not friendly to patients[19], [20].The community still gives a positive assessment because registration officers always provide socialization or notification of new things to the community. According to the satisfaction index data above, it shows that the quality of service and performance of the service unit is good, this is indicated by the existence of eight elements of service that have been implemented well, such as requirements, procedures, time, costs/tariffs, implementer competence, implementer behavior, complaint handling and infrastructure suggestions and one element of service very well, namely the type of service. Then to clarify the implementation of JKN, researchers conducted interviews with health insurance BPJS participants at Puri Medika Hospital, Tanjung Priok Jakarta Indonesia[21].

Implementation of the National Health Insurance Policy at Puri Medika Hospital, Tanjung Priok.

Every policy made has a specific purpose and objective for the common good of the government and the community in solving existing problems. The success of a program is seen from the implementation of the program. The implementation of the BPJS Health program at Puri Medika Hospital, Tanjung Priok is an implementation of the government program, namely the Public Health Insurance (JKN-BPJS)[22], [23].

Analysis of the Implementation of the National Health Insurance Policy or the Health Insurance Administering Body (BPJS) Policy at Puri Medika Hospital, Tanjung Priok.

Currently, users of health services at Puri Medika Hospital, Tanjung Priok who use BPJS insurance are 755.272 participants. In this study, the researcher used George Edward III's Policy Implementation Theory by using 4 dimensions of analysis, namely: Communication, Resources, Disposition, and Bureaucratic Structure.

Communication

Clarity of the implementation of the health insurance BPJS program with the clarity of the target objectives at Puri Medika Hospital, Tanjung Priok is very important, with the aim of improving services that are better than before. The form of direct targets is clearly addressed to patients/service recipients who are

sick or receiving treatment at Puri Medika Hospital, Tanjung Priok. There are important points in communication, namely:

- a. transition in the course of communication in implementing policies
- b. clarity in communicating between policy makers and implementers of the policy, because if the communication carried out is not clear, what happens is a misunderstanding or lack of understanding regarding the policies to be implemented.
- c. consistency, this consistency is a commitment or response from the implementer to the policies to be implemented.

Resources

Human resources in this case as the implementing actor are the Puri Medika Hospital, Tanjung Priok. In terms of the implementation of the health insurance BPJS program at Puri Medika Hospital, Tanjung Priok regarding resources in the form of employees, it is in accordance with the portion or in accordance with the calculation of the workload. Facilities and Infrastructure are facilities available at Puri Medika Hospital Tanjung Priok to support the implementation. Facilities that support the success of implementation in the form of health or medical equipment so far are good enough to handle patients at Puri Medika Hospital Tanjung Priok, and are very sufficient. So far, Puri Medika Hospital Tanjung Priok continues to maximize existing facilities and infrastructure to continue to show good performance and provide the best service for patients.

Disposition

- a. Honesty

Honesty in implementing the BPJS Kesehatan program is the attitude and behavior that must be possessed by the implementer or each officer. Honesty is carried out with an open attitude. Providing explanations to patients/visitors or the patient's family is a form of honesty given by the implementer or officer.

- b. Commitment

Commitment in supporting the success of an implementation can be assessed from the tasks given by BPJS Kesehatan to Puri Medika Hospital Tanjung Priok to be carried out in accordance with existing regulations.

Bureaucratic Structure

- a. Mechanism

As a support for the successful implementation of the JKN program at Puri Medika Tanjung Priok Hospital, the procedures or mechanisms that are carried out are in accordance with the registration process, or printing of Participant Eligibility Letters (ESP) to taking drugs to internal and external referral processes.

- b. Bureaucratic structure

The bureaucratic structure here will mean that a government or bureaucratic organization has a clear structure/SOP related to the tasks and responsibilities that have been assigned. Puri Medika Tanjung Priok Hospital has created an Standart Operating Procedure for running health insurance BPJS at Puri Medika Tanjung Priok Hospital in accordance with existing regulations.

Factors Influencing the Implementation of the National Health Insurance (JKN) Policy by Puri Medika Tanjung Priok Hospital Jakarta Indonesia :

Internal Factors

Strengths

- a. The existence of internal funds at Puri Medika Tanjung Priok Hospital to support the implementation of National Health Insurance.
- b. Commitment from Management to the implementing officers of Puri Medika Tanjung Priok Hospital to implement National Health Insurance.
- c. Completeness of Procedures related to health insurance BPJS Patient Services.
- d. Accreditation certification for Puri Medika Tanjung Priok Hospital has been obtained with a Full Level.

Weaknesses

- a. Limitations of several registration officers regarding health insurance BPJS Health regulations.
- b. Always changing registration officers.

- c. Long waiting times
- d. There are still officers who are not polite to patients.

External Factors

Opportunities

- a. Support and cooperation from Hospital Management in the implementation of National Health Insurance.
- b. Implementation of a tiered referral system from first-level health facilities to advanced levels.
- c. The existence of a high need and utilization of health facilities by the community.
- d. The increase in the number of health insurance BPJS members from year to year.

Threats

- a. Claims for National Health Insurance patient illness bills that are not covered or are disputed.
- b. Low public understanding of the implementation of National Health Insurance.
- c. Demands from the community regarding the quality of health services for National Health Insurance participants are increasing.
- d. The number of Private Hospitals in the North Jakarta area, especially for type C hospitals, which are participating in the National Health Insurance (JKN) program which are competitors in improving the quality and quantity of services.

Strategies that Should Be Used for the Successful Implementation of the National Health Insurance (JKN) Policy at Puri Medika Hospital, Tanjung Priok.

Very strategic issues, including:

The existence of periodic supervision, control and evaluation by the North Jakarta Branch Office of BPJS Healthcare regarding regulations and MOUs implemented in the field by health insurance BPJS and hospitals in the implementation of National Health Insurance, the implementation of communication and coordination forums routinely between health insurance BPJS and the implementing officers of Puri Medika Tanjung Priok Hospital[24]. The implementation of communication between hospital officers and the community in the implementation of National Health Insurance, implementing socialization related to the JKN program to the community in order to improve public understanding[23], [25]

Strategic issues, including:

To improving communication facilities and infrastructure in the implementation of National Health Insurance, implementing socialization related to the JKN program to the community in order to improve public understanding, improving the quality of health services to the community in the implementation of JKN[26], increasing the number of human resources in the implementation of National Health Insurance, operational issues, including: optimizing the function of existing officers to carry out their respective tasks in the implementation of National Health Insurance [27][28]

IV. CONCLUSION

Based on the implementation of the national health insurance policy at Puri Medika Hospital, Tanjung Priok Jakarta is in the good category. The best dimensions are the characteristics of the implementing agency, the socio-economic and political environment and the attitude of the implementation of the health insurance BPJS programs, communication between organizations (BPJS and hospitals) while the dimensions that are less good are resources and communication between fellow officers. Inhibiting factors for the implementation of the national health insurance program at Puri Medika Hospital, Tanjung Priok Jakarta are the limitations of several registration officers to BPJS health insurance regulations resulting in the constant replacement of registration officers, the lack of public knowledge of the JKN-BPJS policy, and the long waiting time for services.

Strategies that can be used for the successful implementation of the national health insurance policy at Puri Medika Tanjung Priok Hospital Jakarta are as follows: conducting periodic supervision, control and evaluation by the central government regarding regulations and MOUs implemented in the field by health insurance BPJS and hospitals, implementing regular communication and coordination forums between BPJS and implementing officers at Puri Medika Tanjung Priok Hospital and the community, optimizing financial

management patterns in implementing national health insurance, the central government and BPJS making budget plans and determining appropriate solutions to overcome late payments, implementing socialization related to the JKN program to the community in order to increase public understanding in the future.

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