

Comparison of Types of Inpatient Services for BPJS Patients and Non BPJS Patients with Patient Satisfaction Level

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ABSTRACT

Patient satisfaction is an indicator of the quality of service we provide and patient satisfaction is a capital to get more patients to get loyal patients. Factors that influence patient satisfaction are product or service quality, price, emotional, performance, service, facilities, atmosphere, and communication. This study aims to determine inpatient services for BPJS and Non-BPJS patients with the level of patient satisfaction in H. Andi Sulthan Daeng Radja Bulukumba Hospital, This study is an analytic observational study with a comparative approach study. This sampling uses a nonprobability sampling method with the sampling technique is a consecutive sampling. The research sample taken amounted to 76 respondents each 38 BPJS patients and 38 Non-BPJS patients from a total population of 305 patients conducted in the inpatient room of H. Andi Sulthan Daeng Radja District Hospital. Bulukumba from May 16 to May 18, 2017. The measuring instrument used was a questionnaire with a Likert scale. The results of this study were 76 respondents from 38 BPJS patients and 38 Non-BPJS patients, from 38 BPJS patients, who were dissatisfied with 6 respondents (7,895), who were satisfied as many as 27 respondents (35,526%), who were very satisfied as many as 5 (6.679%) while from 38 Non-BPJS patients there were no dissatisfied patients, 27 respondents were satisfied (35,526%), who were very satisfied as many as 11 respondents (14.479%). The conclusion was that there were differences in the level of service satisfaction inpatients given to BPJS patients and Non-BPJS patients at H. Andi Sulthan Daeng Radja Bulukumba Hospital in 2017 with $p = 0.032 < \alpha = 0.05$

Keywords: BPJS Patients, Level of patient satisfaction

INTRODUCTION

Patient satisfaction is an indicator of the quality of service we provide and patient satisfaction is a capital to get more patients to get loyal patients. Loyal patients will re-use the same health services if needed again. It is even known that loyal patients will invite others to use the same health care facilities (Nursalam, 2014). Health service is a product in the form of services or goods produced by a producer, in this case, it can be a provider or health institution, at first glance, health services seem to be the same as other economic goods on the market. However, it must be realized that health services have unique characteristics possessed by other economic goods, so that special attention

is needed, the health services referred to here are the Social Security Administering Board (BPJS) and Non-BPJS (general) (Retnaningsih, 2013).

The Social Security Organizing Agency (BPJS) is a public legal entity that functions to organize a health insurance program for all Indonesians including foreigners who work for a minimum of 6 months in Indonesia. BPJS participants consist of Participants in Output Assistance (PBI) consisting of the poor and disadvantaged people, and non-PBI groups or participants from the ASKES transition (BPJS Law, 2011). Non-BPJS (fee-free service) is the high cost of health services issued by patients or the guarantor who uses their costs, especially for sophisticated tools based on medical reasons (Retnaningsih, 2013). BPJS participants in 2015 totaled 156,790,287 participants consisting of PBI 98,999,228 people and Non PBI participants totaling 57,791,059 people. PBI participants consist of participants with dues sourced from the APBN totaling 87,828,613 participants and those sourced from the APBD totaling 11,170,615 participants. Whereas the non-PBI participants consisted of 37,862,522 participants who received wages, 14,961,768 participants who were not recipients, and 4,966,769 participants. The percentage of BPJS participants as of December 31, 2015, was 61.38% of the total population, South Sulawesi Province was the 20th out of 35 Provinces in Indonesia with a percentage of 58.50% (Indonesia, Health Profile, 2015).

Previous research on patient satisfaction was conducted (Sari, 2015), which examined the differences in the level of satisfaction of BPJS Patients with General Patients at RSUD Dr. Soediran Mangun Sumarso Wonogiri, several complaints made by patients about administrative services, nurses, doctors, and medicine, so that the conclusion of this study "the level of general patient satisfaction is better than BPJS patients with an average difference of 39.51% in Dr. Sudirman Mangun Sumarso Wonogiri ". Another study was conducted by (Yuliadi, 2012), which examined "differences in the level of satisfaction with the quality of nursing services between patients using JAMKESMAS and general patients at Water Kulos Progo Hospital" researchers conducted interviews with 5 five jamkesmas patients, two of whom said patients had to wait more a long time to get health services compared to general patients who take precedence in getting health services. Recent research conducted by (Riska, 2016), which also examines "differences in the quality of inpatient services for patients using BPJS and Non-BPJS in Samarinda IAMoeis Hospital" researchers write the complaints of some BPJS patients about the speed and friendliness of officers in serving

so that patients must wait a long time to receive services and patients are increasingly lackluster whereas for the Non-BPJS complaints like this are rarely encountered because hospital staff is more friendly.

The difference in service satisfaction is felt by several hospitals, one of which is the Regional General Hospital (RSUD) H. Andi Sulthan Daeng Radja Bulukumba which is a hospital that accepts BPJS patients and Non-BPJS patients (general patients). Based on the report (RSUD H. Andi Sultan Daeng Radja Bulukumba, 2017) in November 2016-January 2017 BPJS patients numbered 257 (84.26%) participants and Non-BPJS patients numbered 48 (15.73%) participants. From observations and interviews on 01-02 February 2017 from several patients and their families about H. Andi Sultan Daeng Radja Bulukumba hospital services still have some problems in providing health services to BPJS patients, complaints are commonly expressed regarding the speed of service and friendliness of doctors or nurses, while Non BPJS patients say nurses are very friendly to them, say hello when entering a patient's room, often visit even if not asked, the doctor is also very clear in providing information to patients, so Non BPJS patients are satisfied with the services provided, some patients prefer not to use BPJS cards with the reason that the services provided can be better. Although not all patients say that, but some patients usually complain with the existing problems and cause some patients to feel less satisfied with the services provided. Based on the description of the existing problems, researchers are interested in researching on “ comparison of the level of satisfaction of inpatient services provided to BPJS Patients and Non BPJS Patients at H. Andi Sultan Daeng Radja Bulukumba Hospital ”

MATERIAL AND METHODS

Research design is a model or method used by researchers to conduct research that gives direction to the course of research (Dharma, 2011). This type of research is a quantitative study using an analytic observational design using a comparative study approach, research using a comparative study method is done by comparing similarities and differences as phenomena to look for what factors, or what situations lead to the occurrence of certain events both on the object under study and the object being compared (Notoatmodjo, 2012). In this study, researchers will analyze the comparison of types of inpatient services for BPJS patients and Non-BPJS patients with the level of patient satisfaction in H. Andi Sulthan Daeng Radja Bulukumba Hospital.

Population is a generalization area that consists of objects/subjects that have certain quantities and characteristics determined by researchers to be studied and then drawn conclusions (Sugiyono, 2012). The population in this study is the subject (for example humans; clients) who meet the established criteria. The population in this study was 305 patients. Sampling techniques are the methods taken in taking samples, to obtain samples that are truly following the overall object of research (Nursalam, 2016). The sampling technique used in this study is Non Probability Sampling, with consecutive sampling technique that is sampling technique all subjects that come, can be reached and meet the sample selection criteria until the number of subjects fulfilled .. The number of samples in this study were 76 patients.

The research instrument is a tool used by researchers to observe, measure or assess a phenomenon (Dharma, 2011). The instrument used in this study used questionnaire sheets and interviews. Bivariate analysis is an analysis carried out by more than two variables that serve to determine the relationship between variables (Sujarweni, 2011). Data obtained through questionnaire sheets were analyzed using the alternative chi-square test for Smirnova with the help of the SPSS program.

RESULTS

Table 1 Distribution of the Number of Respondents by Patient Characteristics

Age	n	Percentage (%)
<20	9	11,8
20-35	25	32,9
>35	42	55,3
Gender		
Male	44	57,9
Female	32	42,1
Level Of Education		
Bacic	34	44,7
Middle	29	38,2
High	13	17,1
Profession		
Work	41	53,9
Not Work	35	46,1
Amount	76	100

Based on table 1 above shows that of the 76 respondents based on the highest age distribution characteristics, those aged > 35 years were 42 respondents (55.3%) while the lowest respondents aged <20 years were 9 respondents (11.8%). The gender characteristics of the male were 44 respondents (57.9%) and women were 32

respondents (42.1%). The highest distribution of education characteristics of respondents is primary education with 34 respondents (44.7%) while the lowest distribution is higher education with 13 respondents (17.1%). Characteristics of respondents by occupation, most respondents worked as many as 41 respondents (53.9%) and did not work as many as 35 respondents (46.1%). Characteristics of respondents based on health services, respondents using BPJS and Non-BPJS respectively 38 respondents (50%). Characteristics of respondents based on the level of patient satisfaction, the highest distribution of respondents feeling satisfied as many as 54 respondents (71.1%) and the lowest distribution of respondents feeling dissatisfied as much as 6 respondents (7.9%).

Table 2. Distribution of Number of Respondents by Type of Health Service and Level of Patient Satisfaction

Health services	n	Percentage (%)
BPJS	38	50
Non BPJS	38	50
Patient satisfaction		
Not satisfied	6	7,9
Satisfied	54	71,1
Very satisfied	16	21,1
Amount	76	100

Based on table 2 above shows that of the 76 respondents based on health services, respondents who used BPJS and Non-BPJS respectively 38 respondents (50%). Characteristics of respondents based on the level of patient satisfaction, the highest distribution of respondents feeling satisfied as many as 54 respondents (71.1%) and the lowest distribution of respondents feeling dissatisfied as much as 6 respondents (7.9%).

Table 3. Comparison of Types of Inpatient Services for BPJS Patients and Non BPJS Patients with Patient Satisfaction Rates

Health Service	Patient satisfaction						Amount		p value
	Not satisfied		Satisfied		Very satisfied		n	%	
	n	%	n	%	n	%	n	%	
BPJS	6	7,895	27	35,526	5	6,679	38	50	0,032*
Non BPJS	0	0	27	35,526	11	14,474	38	50	
Amount	6	7,895	54	71,052	16	21,053	76	100	

Based on table 3 above shows that of 76 respondents who used BPJS as many as 38 respondents where respondents who were dissatisfied were 6 respondents (7,895), who were satisfied as many as 27 respondents (35,526%), who felt very satisfied as many as 5 (6,679%) while respondents who used Non BPJS as much as 38 respondents,

there were no respondents who felt dissatisfied, satisfied as many as 27 (35.526%) very satisfied 11 (14.474%). In the analysis of data using the Kolmogorof Smirnov alternative Chi-Square test the Pearson value (p) = 0.032 or smaller than α = 0.05, which means that there are differences in the type of inpatient services for BPJS patients and Non BPJS patients with the level of patient satisfaction.

DISCUSSION

The results showed that of 38 respondents, who were dissatisfied as many as 6 respondents (7,895), who were satisfied as many as 27 respondents (35,526%), who felt very satisfied as many as 5 (6,679%). This study is in line with research conducted by Eka Murtiana (2016) on the Relationship of Health Services to BPJS Patient Satisfaction in Kendari City Hospital 2016. Where the results of the study show that there is a relationship between the hospital environment and patient satisfaction with a p -value = 0.00. Another study conducted by (Wahyuliani, 2015) on the Relationship between Hospital Service Quality and BPJS Health Patient Satisfaction in Class III Rawat Inap Installation Panembahan Senopati General Hospital Bantul. Where the results of the study showed that there was a close relationship between the quality of hospital services with BPJS patient satisfaction in class III inpatient in Senopati Bantul Hospital with a value of p = 0,000.

Following the mandate of Law No. 40 of 2004 concerning the National Social Security System (SJSN) and Law No. 24 of 2011 concerning the Social Security Administration Agency (BPJS). The Social Security Organizing Agency (BPJS) of Health is a legal entity formed to organize a health insurance program, obliged to serve National Health Insurance (JKN) patients whose costs are borne by BPJS. This BPJS dependent patient has the same rights as other public patients to receive satisfactory services from the Hospital (JKN Handbook, 2011). Patient satisfaction is considered one of the most important dimensions and quality is one of the main indicators of the standard of a health facility which is a result of the influence of health services delivered by the hospital and this makes measurement of patient satisfaction an important component. Asking patients' opinions about the attention and care they have received is an important step to ensuring that health services meet what patients need (alrubaiee & alkaaida, 2011) cited in (Sari, 2015).

Patient dissatisfaction is more related to the attitude and behavior of hospital staff, delays in the service of doctors and nurses, doctors are difficult to find, doctors are less

communicative and not informative (even though the doctor and patient interactions are an internal part of the therapy process and are key to the patient's recovery process), nurses who are less friendly and responsive to patient needs, the length of time waiting for the examination, order, and comfort and safety of the hospital. (Satrianegara, 2014).

According to the researchers' analysis, the difference felt by patients from before and after the BPJS program. The patient turned out to be satisfied with the existence of BPJS to be more fulfilled for treatment because it does not cost more. But there are some things that are still awkward such as the services provided are still not in accordance with the expectations of the patient and his family so that patients still feel dissatisfied such as nurses who are not friendly, the environment is very hot, doctors who are not on time, although not all patients say that, in research conducted in the inpatient room of H. Andi Sulthan Daeng Radja Bulukumba Hospital there were 6 respondents (7.895%) who were dissatisfied even though there were some respondents who felt satisfied with the services provided.

The results showed that of the 38 respondents who used Non-BPJS (general patients) there were no patients who were dissatisfied, 27 respondents (35,526%) were very satisfied, who were very satisfied as many as 11 respondents (14.479%). This study is in line with research conducted by (Sari, 2015) on the Difference between BPJS Patient Satisfaction Levels and General Patients in Dr. Soediran Mangun Sumarso Wonogiri in 2015, where the results of the study showed that there was a significant difference between the level of satisfaction of BPJS patients and General patients at RSUD Dr. Soediran Mangun Sumarso Wonogiri with p-value (sig) = 0.001.

Fee-free service is a payment based on per item services such as diagnostic procedures, treatment services, and medical measures. Each action is calculated and the costs are added up. So the cost of medical services incurred by patients will cost more with personal money (Maulida, 2015). Services obtained from the place of first-time admission (IGD), to patients who visit to get the services needed by patients, because it can be said that this is where patients first get a good or bad impression of hospital services, if the patient feels satisfied then the patient will come back to get better service.

According to the analysis of Non-BPJS, patient researchers here are patients who do not use any health insurance or in other words, general patients, the pattern of payments

made is also different because in the services provided patients have to spend their own costs such as doctors, nurses, taking drugs carried out by own families, and patients also assume that the more costs incurred the better the services provided to patients so that patients will feel satisfied.

The results of research from Non BPJS patients at H. Andi Sulthan Daeng Radja Bulukumba Hospital showed that there were no dissatisfied patients, 27 (71.10%) dissatisfied patients, and 11 very satisfied (28.90%). Although patients still often complain about the state of the hot room but the patient still feels satisfied because the services provided are good and according to patient expectations. Based on the analysis using the Kolmogorov Smirnov test p values = $0.032 < \alpha = 0.05$. Based on these results it can be concluded that there are differences in the types of inpatient services for BPJS patients and Non-BPJS patients with the level of patient satisfaction at H. Andi Sulthan Daeng Radja Bulukumba Hospital in 2017.

The results of the study are in line with research conducted by (Yuliadi, 2012) about the Difference in the Level of Satisfaction with the Quality of Nursing Services between Jamkesmas and General Patients Users at Wates Kulon Progo Hospital in 2012, where the results of this study indicate there is a difference between general and satisfaction of patients JAMKESMAS on the quality of nursing services in Kulon Progo Regional Hospital with a value of $p = 0.028$. Another study conducted by (Annisa, 2016) on the Differences in the Level of Satisfaction of BPJS and Non-BPJS Patients on the Quality of Service Registration at the Central Air Force Hospital Dr. S. Hardjolukito Bantul in 2016. Where the results of the study showed that there were differences in the level of satisfaction of BPJS patients with the level of satisfaction of Non-BPJS patients in RSPAU dr. Hardjolukito with p -value = $0,000$.

The results of this study are not in line with research conducted by (Riska, 2016) on the Difference in Quality of Inpatient Services for BPJS and Non-BPJS Patients in Samarinda IAMoeis Hospital in 2016, where the results of this study indicate there is no difference in the quality of service for patients using BPJS patients with quality Non-BPJS patient services at IAMoeis Samarinda Regional Hospital with p -value = $- 11.81 < 1.96$. It is difficult to meet the satisfaction of all consumers in health services, namely the psychosocial role is the art of medical services. Many non-medical variables also determine patient satisfaction, including levels of education, social background, economy, culture, physical environment, work, personality, and life experience of

patients. Patient satisfaction is influenced by patient characteristics, namely, age, education, occupation, ethnicity, socioeconomic, and disease diagnosis. In addition to these factors, behavioral factors and attitudes of doctors, nurses, and other officers, the other components that also affect patient satisfaction are admission and administration services for patients being treated, finance, eating services (for inpatients), nursing services that rarely visit the state of the patient, laboratory services and other diagnostic support, the condition of the treatment room, as well as the cleanliness, comfort, safety of the hospital environment. (Satrianegara, 2014).

According to clinical (2007) in Nursalam (2014), several factors influence patient satisfaction, namely product or service quality, price, emotional, performance, aesthetics, product characteristics, service, location, facilities, communication, atmosphere, and visual design. The results of a bivariate analysis of BPJS patients showed that there were 6 respondents (7.895%) who were dissatisfied, 27 respondents (35.526%) were satisfied, 5 respondents (6.579%) were very satisfied. Whereas the Non-BPJS patients showed that there were no patients who were dissatisfied with the services provided, patients who were satisfied as many as 27 respondents (35.526%), who were very satisfied as many as 11 (14.474%) respondents with statistical test results obtained $p\text{-value} = 0.032$. This shows that there are differences in the level of satisfaction felt by BPJS patients and Non BPJS patients in H. Andi Sulthan Daeng Radja Bulukumba Hospital in 2017. According to the analysis of researchers from 76 respondents, each was divided into 38 BPJS patients and 38 Non-BPJS patients. Divided into several categories, namely:

- a. Services categorized as dissatisfied with BPJS patients, there are 6 respondents (7.895%) according to patients and families the services provided are still not following patient expectations such as the emergency room and treatment room, nurses are still less responsive when patients need help, friendliness of doctors and officers other health is still lacking, the treatment room is hot and there are still some health workers who still look at the patient's economic status when providing services. Whereas in the Non-BPJS patients there were no respondents who were dissatisfied with the services provided but complaints that often arose from patients and families about the hot treatment room but affected the level of patient satisfaction because they thought the services provided were good.

- b. b. Services with categorical satisfaction were 27 respondents (35.526%) in BPJS patients and 27 BPJS patients also (27.526%) patients said they were satisfied with the services provided such as nurses giving information about administration for patients, communication between nurses and staff in the emergency room, the doctor tells abstinence from illnesses from the patient's illness, cleanliness in the treatment room, the availability of rubbish bins in the treatment room, laboratory and radiology staff are friendly to the patient, the doctor speaks politely and maintains the neat appearance when meeting patients.
- c. c. Service with categorical very satisfied with BPJS patients there are 5 respondents (6.579%) according to patients and families of nurses and friendly doctors when patients arrive at the emergency room, service and medical actions of nurses and doctors are good, nurses and doctors behave kindly, health workers always look after hygiene of medical devices used, nurses and doctors are easily found. Whereas in Non-BPJS patients there are 11 respondents (14.474%) who have a higher rate than BPJS patients, according to patients and families the services provided in accordance with the wishes so that patients feel very satisfied with the services provided such as nurses give positive responses when patients need help, nurses help patients to obtain drugs, nurses, doctors, and other health workers pay attention to complaints that patients feel, doctors and nurses are friendly when checking the patient's condition.

CONCLUSIONS

There are different types of inpatient services for BPJS patients and Non BPJS patients with the level of patient satisfaction at H. Andi Sulthan Daeng Radja Bulukumba Hospital. In order to be material for information and evaluation to improve the quality of health services at H. Andi Sulthan Daeng Radja Bulukumba Hospital.

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