



## A Narative Review: The Difference of Satisfaction Level in BPJS Patient and General Patient Toward The Quality of Health Service in Inpatient' s Unit

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### ABSTRACT

**Background:** Many studies show that the quality of services at various health facilities is influenced by the source of financing. The same thing was also found in the Inpatient Unit. Various data show that there are differences in patient care between general patients and BPJS patients. This is of course contrary to the Presidential Regulation of the Republic of Indonesia No.82 of 2018 that BPJS participants are entitled to health services according to the medical needs required. Therefore, this study aims to discuss how much difference the level of satisfaction of BPJS patients and general patients with the quality of service in the Inpatient Unit. **Subject and Methodology:** The study method was carried out with a Narrative review approach sourced from the PubMed, Google Scholar and IJPHS databases. There are 39,970 articles found with the keywords patient satisfaction and quality of health services; patient satisfaction and quality of health services. Then the articles were identified, filtered, so that 5 articles that met the criteria were obtained for in-depth review. **Results:** Broadly speaking, there are differences in the satisfaction level of BPJS patients and general patients with the quality of service in the Inpatient Unit. The difference lies in satisfaction in the dimensions of reliability / tangible, responsiveness / responsiveness, assurance, caring / empathy, and direct evidence / reliability. **Conclusion:** As many as 60% of studies show that there is a difference in the level of satisfaction between BPJS patients and general patients in the Inpatient Unit which can be used as an evaluation for Health Service Providers so that there is no difference in patient satisfaction levels. This is because every patient is unable to get the same health services according to their medical needs.

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### Kata kunci:

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### ABSTRAK

**Latar Belakang:** Banyak penelitian yang menunjukkan bahwa kualitas layanan pada berbagai fasilitas kesehatan dipengaruhi oleh sumber pembiayaan. Hal serupa juga ditemukan di Unit Rawat Inap. Berbagai data menunjukkan bahwa ada perbedaan layanan pasien antara pasien umum dan pasien BPJS. Hal ini tentunya bertentangan dengan Peraturan Presiden Republik Indonesia No.82 Tahun 2018 bahwa peserta BPJS berhak mendapatkan layanan kesehatan sesuai dengan kebutuhan medis yang diperlukan. Oleh karena itu, penelitian ini bertujuan untuk membahas seberapa besar perbedaan tingkat kepuasan pasien BPJS dan pasien umum terhadap mutu pelayanan di Unit Rawat Inap. **Subjek dan Metodologi:** Metode studi dilakukan dengan pendekatan Narrative review yang

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bersumber pada database PubMed, Google scholar dan IJPHS. Terdapat 39.970 artikel yang ditemukan dengan kata kunci kepuasan pasien dan mutu layanan kesehatan; patient satisfaction and quality of health services. Selanjutnya artikel tersebut diidentifikasi, disaring, hingga diperoleh 5 artikel yang memenuhi kriteria untuk kemudian diulas secara mendalam. Hasil: Secara garis besar terdapat perbedaan tingkat kepuasan pasien BPJS dan pasien umum terhadap mutu pelayanan di Unit Rawat Inap. Perbedaan terletak pada kepuasan pada dimensi kehandalan/tangible, daya tanggap/responsiveness, jaminan/assurance, peduli/empathy, dan bukti langsung/reliability. Kesimpulan: Sebanyak 60% penelitian menunjukkan adanya perbedaan dalam tingkat kepuasan antara pasien BPJS dan pasien umum di Unit Rawat Inap dapat dijadikan evaluasi bagi Pelaksana Layanan Kesehatan sehingga tidak ada lagi perbedaan tingkat kepuasan pasien. Hal ini dikarenakan setiap pasien berhak mendapatkan layanan kesehatan yang sama sesuai dengan kebutuhan medisnya.

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## INTRODUCTION

Service quality is one of the important indicators for patient satisfaction in health services. Various ways can be used to measure service quality, one of the best ways is to measure service quality from the consumer's point of view. Quality must start from customer needs and end at customer perception (Kotler, 2005 in Afandi et al., 2019). In general, there are 5 dimensions that are commonly used in service satisfaction studies including: reliability/tangible, responsiveness/responsiveness, assurance/assurance, caring/empathy, and direct evidence/reliability (Parasuraman et al., 1985).

According to the Law of the Republic of Indonesia Number 36 of 2009 everyone has the right to obtain safe, quality, and affordable health services. In other words, the quality of health services provided to the community must be of quality according to their medical needs (Presidential Regulation of the Republic of Indonesia No. 82 of the Republic of Indonesia President, 2018). If health services have good quality, patient satisfaction will be achieved. This is because satisfaction is the result of consumer evaluation (assessment) of various aspects of service quality (Pratiwi, et al., 2014).

Quality health services cannot be separated from the costs charged by patients to obtain these health services. Sources of financing for health services can be obtained from the government through BPJS services (BPJS patients) or self-financing by patients (General Patients).

Arlina and Kurnia's research (2016) shows that there is no difference in patient satisfaction between BPJS patients and general patients on the quality of service at the State Hospital. However, the opposite result is shown by the research of Odi et al, (2019) where there is a difference between the quality of service for BPJS patients and the quality of service for general patients in the Inpatient Unit of the PKU Muhammadiyah Hospital Medan. These different findings become an interesting thing to study, especially in inpatient units. This is because inpatient is one of the most important facilities of the hospital to meet the needs of patients. Based on the differences in the results of several studies mentioned above, this study aims to discuss how big the difference in the level of satisfaction of BPJS patients and general patients with the quality of service in the Inpatient Unit.

## METHOD

This study uses the Narrative review method, literature search using strategies, such as searching articles in research journal databases, searching through the internet, reviewing articles. Journals and articles are then filtered by title and abstract. The articles selected by the researchers were based on the desired criteria, namely the quality of service for general patients and BPJS for inpatient satisfaction. Meanwhile, journals that are not in accordance with the research topic will be excluded. The selected journals were evaluated using the inclusion and exclusion criteria of the study, based on the sorting of these criteria, journals were found that were suitable for a Narrative review. The inclusion criteria used are 1) articles are full text 2) articles published in the 2010 to 2020 range on patient satisfaction and quality of health services; 3) the article discusses the differences in the satisfaction of BPJS patients and general patients with the quality of health services; 4) the article focuses on the differences in the satisfaction of BPJS patients and general patients in inpatient units; 5) articles are scientific articles from national journals or international journals. The exclusion criteria used are 1) the article is not the full text; 2) articles published before 2010; 3) the article does not discuss the differences in the satisfaction of BPJS patients and general patients with the quality of health services; 4) the article does not focus on inpatient units; 5) thesis, thesis, or dissertation. The results of the literature search, obtained 39,970 articles on google schooler, IJHPS, and Pubmed data. The articles were then identified and filtered according to the inclusion and exclusion criteria that had been set so that only 5 articles could be extracted and then described. The stages of a systematic search regarding the difference in the level of satisfaction of BPJS patients and general patients on the quality of inpatient services can be seen in Figure 1. The articles that have been obtained are then extracted. Extraction of articles based on the author of the article, the year of publication of the article, the number of samples used, the sampling location, the satisfaction parameters used, and the results of the research conducted.

## RESULTS AND DISCUSSION

Law Number 40 of 2004 concerning the National Social Security System and Law Number 24 of 2011 concerning the Social Security Administering Body. BPJS is a legal entity formed to administer social security programs. BPJS consists of BPJS Health and BPJS Employment. Social Security is a form of social protection to ensure that all people can fulfill their basic needs for a decent life. BPJS Health is a public body that organizes the Health Insurance program. Social Security Fund is a mandated fund belonging to all participants which is a collection of contributions and the results of its development which is managed by BPJS for the payment of benefits to participants and the operational financing of the implementation of the Social Security program. Contribution is a sum of money that is paid regularly by the Participant, the employer, and/or the Government. Contribution Assistance is Contribution paid by the Government for the poor and underprivileged as participants of the Social Security program.

The purpose of the implementation of this national health insurance program is to meet the needs of proper public health that is given to everyone who has paid dues or whose contributions are paid by the government. The health insurance benefits that can be obtained from this system are between one's services which include preventive, curative and rehabilitative services. Including the necessary drugs and medical consumables. For general/non-BPJS patients, patients are required to pay after receiving services that have been provided and used at the hospital, while BPJS patients have made payments or contributions before receiving services.

Inpatient services are one of the service units in hospitals that provide comprehensive services to help solve health problems experienced by patients, where the inpatient installation is one of the hospital revenue centers so that the level of customer or patient satisfaction can be used as one of the indicator categories. good quality health services in a place of health service providers (Nursalam. 2001). Inpatient services are a group of health services in a hospital which is a combination of several service functions. The category of patients admitted to hospital is patients who need intensive care or close observation because of their illness. Inpatient care is an individual health service which includes observation, treatment, nursing, medical rehabilitation by staying in an inpatient room at a public and private hospital health facility, as well as a health center and maternity hospital where because of the illness the patient has to stay overnight and experience a level of transformation, namely the patient since entering the treatment room, carrying out treatment until the patient is declared cured, they can go home or do outpatient treatment for the recovery process (Muninjaya, 2004).

After a systematic search was carried out based on inclusion and exclusion factors, 5 articles were obtained that matched the criteria. These five articles were then extracted in order to answer the objectives of this study. The results of the extraction of articles regarding the differences in the level of satisfaction of BPJS patients and general patients on the quality of inpatient services can be seen in Table 1.

The Inpatient Unit is one of the service installations that is widely used by patients, both BPJS patients and general patients. Managers of health care facilities should implement excellent service regardless of the type of financing. The quality of inpatient services in a health agency can be measured by looking at the level of satisfaction. Each individual has a different level of satisfaction according to the system and values that apply to him. The higher the assessment of the activity is felt in accordance with the wishes of the individual, the higher the satisfaction with the activity. Thus, health service satisfaction is the result of an evaluation that describes a person or feeling his attitude is happy or unhappy, satisfied or dissatisfied with a service provided (Imelda et al., 2015).

Table 1 illustrates that 60% of the research results show that there are differences in the level of satisfaction of BPJS patients and general patients on the quality of inpatient unit services. This happened in the Inpatient Unit of the Muhammadiyah Hospital in Medan (Odi et al., 2019), H. Andi Sulthan Daeng Radja Bulukumba Hospital (Haerani, Haerati, 2018), and Tuan Rondahaim Hospital Pamatang Raya (Ayune et al., 2020 ).

BPJS patients have lower satisfaction than general patients. This is due to ineffective and inefficient services. Based on the facts in the field, the problems of patient dissatisfaction that occur are delays in the services of doctors and nurses, doctors are difficult to find, length of inpatient admission process, limited drugs and equipment, availability of facilities such as toilets and trash cans, and hospital order and cleanliness. The number of complaints and poor judgments from BPJS participants on the quality of health services makes consumers feel dissatisfied. Starting from a convoluted system, there are no clear financing limits, drug restrictions, and even services that are considered long for BPJS participants (Odi et al., 2019). Dissatisfaction with facilities and infrastructure is also shown in the results of the research by Haerani et al (2018) with a level of dissatisfaction reaching 71.10%. This is because the inpatient room is hot. In general, it can be described that the difference in the level of satisfaction of BPJS patients and general patients in inpatient units lies in service procedures, facilities and infrastructure, professionalism, reputation, reliability, and improvement (Ayune et al., 2020).

The opposite was shown in the Inpatient Unit of I.A. Moeis Samarinda Hospital (Sanastya Riska Ts, 2016) and Adam Malik General Hospital Medan (Imelda et al., 2015). Many things show that these two hospitals have carried out inpatient service procedures in accordance with those described in Law No. 36 of 2009 articles 5 and 6. This law confirms that everyone has the same rights in obtaining health services without there are differences and everyone has the right to a healthy environment for the achievement of health status.

It is imperative for every health facility manager to pay attention to service quality which includes 5 dimensions of patient satisfaction, namely Tangible, Reliability, Responsiveness, Assurance and Empathy. The examples of the implementation of service quality assurance in care can be seen in Table 2.

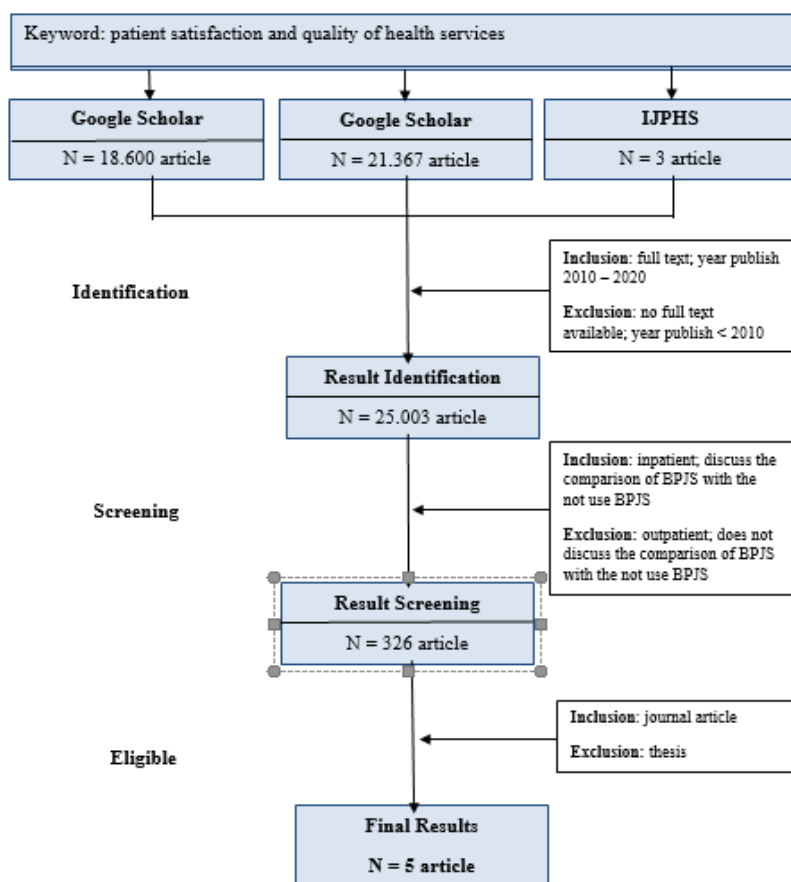


Figure I. Stages of systematic search regarding the difference in the level of satisfaction of BPJS patients and general patients on the service quality of inpatient units

**Table 1.**  
**Article Extraction Results**

No	Author	Title	Setting the Study	Number of Sample	Method	Parameter	Result
1	Imelda et.al., 2015	Analysis of the Quality Level of Inpatient Services in an Effort to Increase Patient Satisfaction at Adam Malik Hospital Medan (Comparative Study Between General Patients and BPJS Patients)	RSUP Adam Malik Medan	66 sample	Crosssectional	Tangible, Empathy, Reliability, Responsiveness, Assurance	Based on the results of hypothesis testing, it is known that the level of patient satisfaction does not have a difference between non BPJS patients and BPJS patients.
2	(Ayune et al., 2020)	Analysis of Differences in Service Quality for BPJS Patients and General Patients in the Inpatient Unit of Mr Rondahaim Hospital Pamatang Raya	Place: RSUD Tuan Rondahaim	138 sample	Crosssectional	<i>Technical quality, professionalism and skills, functional quality</i>	There are differences in service procedures, facilities and infrastructure, professionalism, reputation, attitude, reliability, service improvement and patient satisfaction for BPJS patients and general patients in the inpatient unit of RSUD Tuan Rondahaim Pamatang Raya (p=0.000)
3	(Haerani, Haerati, 2018)	View of Comparison of Types of Inpatient Services for BPJS Patients and Non BPJS Patients with Patient Satisfaction Level	RSUD H. Andi Sulthan Daeng Radja Bulukumba	76 Sample	Quantitative research using analytical observational design using a comparative study approach	Product or service quality, price, emotion, performance, service, facilities, atmosphere, and communication	There are different types of inpatient services for BPJS and Non BPJS patients with the level of patient satisfaction at H. Andi Sulthan Hospital Daeng Radja Bulukumba
4	(Sanastya Riska Ts, 2016)	Differences in the Quality of Inpatient Services for BPJS and Non BPJS Users at I.A. Moeis Hospital Samarinda	RSUD I.A. Moeis Samarinda	185 sample	Descriptive - Quantitative	<i>Tangible, Empathy, Reliability, Responsiveness, Assurance</i>	There is no difference in the quality of service for patients using BPJS with the quality of service for non-BPJS patients.
5	(Odi et al., 2019)	Differences in Service Quality for BPJS Patients and Inpatient General Patients at Muhammadiyah Hospital Medan in 2019	Rumah Sakit Muhammadiyah Medan	260 sample	Crosssectional	<i>Tangible, Empathy, Reliability, Responsiveness, Assurance</i>	There is a difference between the quality of service for BPJS patients and the quality of service for general patients at the Muhammadiyah General Hospital in 2019

**Table 2.**

***Bukti Tangible, Reliability, Responsiveness, Assurance dan Emphaty di RS RSUD I.A.Moeis Samarinda (Sanastya Riska Ts, 2016)***

Number	Dimensions / Parameters	Proof
1	Tangibles	The comfort of the bed used by the patient is always noticed for the tidiness and cleanliness of the room which is kept clean every day even though there are some respondents who answer not well and the appearance and discipline of the officers are observed every day
2	Reliability	The reliability of the officers is quite good because they have tried to provide satisfactory service to patients
3	Responsiveness	The officer is quite good in responding to the patient because he has tried his best to fulfill the patient's wishes.
4	Assurance	Officers have been good in carrying out their duties which are seen from trust, courtesy and mutual respect
5	Empathy	The empathy that the officers have is good but needs to be improved, especially the officers who are still

## CONCLUSIONS AND SUGGESTIONS

As many as 60% of studies show that there is a difference in the level of satisfaction between BPJS patients and general patients in the Inpatient Unit which can be used as an evaluation for Health Service Providers so that there is no difference in the level of patient satisfaction. This is because every patient has the right to receive the same health services according to their medical needs.

In conducting research on service quality and satisfaction of BPJS and Non BPJS patients, it is necessary to pay attention to the patient care class and type of hospital, both for BPJS and non BPJS patients. The proportion of respondents taking BPJS membership types needs to be considered to avoid biased conclusions because each type of BPJS membership has characteristics that can affect the results of the study. It is advisable to examine the comparison of patient satisfaction with hospital services using a quantitative research method with a cross sectional approach because this method uses an instrument (data collection tool) that produces numerical data (numbers). Data analysis was carried out using statistical techniques to reduce and group data, determine relationships and identify differences between data groups.

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