The Effect of Covid-19 Pandemic on The Financial Performance of Public Service Agencies: a Case Study at Jakarta Hospital

Marlina Masloman ; Aditya Nazikra R ; Muhammad Alghiffari ; Rizky S Pambudi ; Nursanita Nasution

Sekolah Tinggi Ilmu Ekonomi Indonesia JakartaJln Kayu Jati Raya No. 11A, Rawamangun, Jakarta Timurmaslomanmarlina@gmail.com, steinursanita@gmail.com

Abstract

This study was conducted at The Jakarta hospital Hospital which is a Public Service Agency, aiming to determine the financial condition of the hospital before the covid-19 pandemic in 2018 and 2019 compared to after the covid–19 pandemic in 2020 and 2021. The type of research used is comparative descriptive research, and the data used in this study is a type of secondary data in the form of Financial Statements of Jakarta hospital, 2018 to 2021. The financial performance analysis used refers to the regulation of the Director General of Treasury No PER-24/PB/2018 on amendments to the regulation of the Director General of Treasury No PER-36/PB/2016 on guidelines for performance assessment of the Public Service Agency for Health Services and focuses on the financial aspects of the financial ratio subaspect of RS Jakarta. The results showed that the analysis of financial performance, financial aspects, sub-aspects of financial ratios before the Covid-19 pandemic compared to during the Covid-19 pandemic at Jakarta hospital, there was no decrease in non-tax revenues. Based on the ratio of PNBP income to operating costs or the ability of Jakarta hospital to finance hospital operations from its PNBP income, the Covid-19 pandemic condition has no effect on the ratio of PNBP income to operating costs.

Keyword : Hospital Financial Performance ; BLU performance assessment ; Non-tax revenue ratio ; Financial Ratios ; Covid-19 Pandemic.

I.   INTRODUCTION

The COVID-19 pandemic, which has lasted from 2020 to the present, affects all sides of life. Almost all sectors of life are affected by COVID-19, ranging from the industrial sector, services, education and of course health. All sectors mentioned above are experiencing a slowdown, except the health sector which needs a lot of innovation and development, to support the handling of COVID-19.

Hospitals are one of the backbones in carrying out countermeasures against the impact of the COVID-19 pandemic. In addition to COVID-19 referral hospitals, of course, other hospitals

are needed that are able to accommodate non-COVID-19 patients, including Jakarta hospital which is a health service institution of the Public Service Agency (BLU) which provides health services to the general public.

During the pandemic, almost all hospitals experienced financial problems due to the fact that most people refrained from going to the hospital for fear of contracting COVID-19 in health care facilities. This reality led to a decrease in income in almost all hospitals.

In this study focuses on the analysis of financial aspects or financial performance. Financial performance is a series of financial activities in a certain period reported in the financial statements. The financial statement is a record of financial information as a basis for assessing the performance of the hospital in a certain period of time. The financial statements assess a hospital's ability to meet its obligations. Performance is the activity of each component of the hospital during a certain period. Performance measurement is a major factor in the success of the hospital to improve the quality of an effective organization. Factors that can indicate whether or not the financial performance of the hospital is using financial statement analysis. The financial report was prepared to determine the financial condition of hospitals before the covid-19 pandemic compared to after the covid–19 pandemic, namely from 2018 to 2021. The analysis of financial statements used is by using financial ratio analysis to determine the financial condition of Jakarta hospital with reference to the regulation of the Director General of Treasury number PER-36/PB/2016 on guidelines for performance assessment of the Public Service Agency for Health Services. These guidelines are used to assess the achievement of hospital objectives as a public service. Regulation of the Director General of Treasury No PER-24/PB/2018 on amendments to the regulation of the Director General of Treasury No PER-36/PB / 2016 on guidelines for the performance assessment of Public Service Agencies in the field of Health Services states that the performance assessment of Public Service agencies includes assessment of financial aspects and assessment of service aspects. In this study only focuses on the financial aspects of financial ratios subaspect only because of limited access to data that can be analyzed.

According To The Regulation Of The Directorate General Of Treasury No.36 year 2016, Public Service Agency, hereinafter referred to as BLU, is an agency within the Central Government established to provide services to the community in the form of the provision of goods and/or services sold without prioritizing profit and in carrying out its activities based on the principles of efficiency and productivity. According to Kasmir (2018), financial statements are reports that show the company's financial position during a certain period. According to Raymond Budiman (2020), the financial statement is a document that describes the financial condition of the company and the company's performance in a certain period. According To Werner R. Murhadi (2019), financial statements are the language of business. In the financial statements contain information about the financial condition of the company to the user. By understanding the financial statements of a company, various interested parties can see the financial health of a company. According to Hery (2017), "financial statements are the end product of a series of processes for recording and summarizing business transaction data".

According to, Munawir quote from book V. Wiratna Sujarweni (2017), financial statement analysis is a process of learning a relationship to determine the financial position and results of company operations. According to Kasmir (2019), the objectives of Financial Statement Analysis are as follows:

a. To determine the amount of wealth, liabilities, capital, and results of operations that have been achieved and then reported in the financial records in one period;

b. Can find any weaknesses that the company lacks;

c. To know the powers that;

d. Can find any remedial measures that need to be done related to the current financial condition of the company;

e. To conduct an assessment of management performance that is considered unsuccessful or failed;

f. To be used as a material consideration of the company.

From some of the above understanding it can be concluded that financial statement analysis is a process to study financial data so that it can be easily understood to determine the financial position, operating results and development of a company by studying the relationship of financial data and trends contained in a financial statement, so that financial statement analysis can be used as a basis for decision making.

According To S. Munawir (2014), analytical techniques used in the analysis of financial statements are as follows:

a. Comparative analysis of financial statements is a method and technique of analysis carried out by comparing financial statements for two or more periods, by showing: a) Absolute Data or amounts in rupiah. increase or decrease in percentage. C) increase or decrease in the amount of rupiah. D) the ratio expressed by the ratio.

b. Trend or tendency of the company's financial position and progress expressed in percentage (trend percentage analysis), is an analysis technique to determine the tendency of financial conditions that show a fixed or declining tendency.

c. Common size statement, is a method of analysis to determine the percentage of investment in each of its assets so as to determine the capital structure and linking it with sales.

d. Analysis of sources and use of working capital is an analysis to determine the sources and use of working capital and the causes of changes in working capital in a certain period.

e. Cash flow statement analysis is an analysis to determine the causes of changes in the amount of cash or to determine the sources of cash use during a certain period.

f.   Ratio analysis is a method of analysis to determine the relationship of certain items in the balance sheet or income statement in combination of the two reports.

g.   Gross profit analysis is an analysis technique to determine the causes of changes in gross profit from one period to another.

h.   Break even analysis, is an analysis to determine the level of sales that must be achieved by the company so as not to experience losses and have not gained profits in various levels of sales.

II.   RESEARCH METHODS

The type of research used is comparative descriptive research. Comparative research aims to compare the financial health of Jakarta hospitals before and after the covid-19 pandemic. This study refers to the regulation of the Director General of Treasury number PER-36/PB/2016 and the regulation of the Director General of Treasury No PER-24/PB/2018. The type of data used in this study is the type of secondary data in the form of Financial Statements of Jakarta hospital, 2018 to 2021.

III.   DISCUSSION

Based on the financial statements of RS Jakarta in 2018 to 2021, namely the performance reporting period before the Covid-19 pandemic and after the Covid-19 pandemic, the financial ratio calculation is carried out using the financial data contained in the BLU Financial Statement post, exceeding the Cash Ratio, Current Ratio (return on fixed assets), imbalance in fixed assets (return on equity), non-tax state revenue ratio (PNBP).

Table-1. Financial Ratio Calculation Results :

No.	Rasio Keuangan	Tahun 2018		Tahun 2019		Tahun 2020		Tahun 2021	
		Nilai	Skor	Nilai	Skor	Nilai	Skor	Nilai	Skor
1	Cash Ratio	20%	0,5	18%	0,5	41%	0,5	48%	0,5
2	Current Ratio	69%	0,5	78%	0,5	99%	0,5	92%	0,5
3	Collection Period	49	1,25	66	0,75	33	1,75	8	2,25
4	Fixed Asset Turnover	20%	1,75	21%	2,25	18%	1,75	18%	1,75
5	Return on Fixed Asset	-0,14%	-	4%	1,5	3%	1,25	0,24%	-
6	Return on Equity	-0,16%	-	4%	1,25	3%	1,05	0,29%	0,62

| 7 | Inventory Turnover | 0,05 | - | 0,08 | - | 0,08 | - | 0,07 | - |
| 8 | Rasio Pendapatan PNBP terhadap Biaya Operasional | 99% | 2,75 | 116% | 2,75 | 113% | 2,75 | 101% | 2,75 |

Source : (2022)

Table-1 Above is a financial ratio analysis that refers to the regulation of the director general of Treasury number PER-36/PB/2016 and regulation of the Director General of Treasury no PER-24/PB/2018 to measure the performance of RS Jakarta.
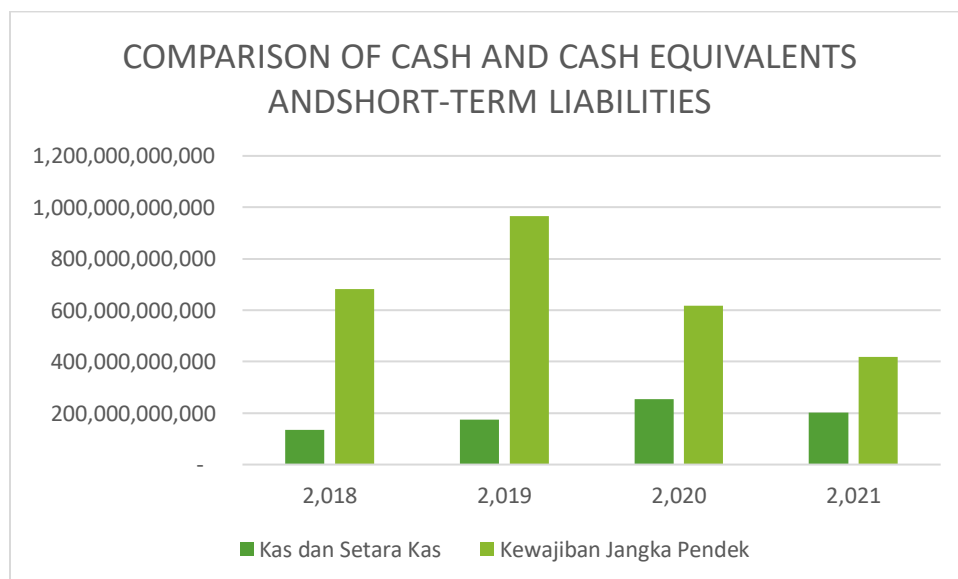

COMPARISON OF CASH AND CASH EQUIVALENTS ANDSHORT-TERM LIABILITIES

Figure-1. Comparison of cash and cash equivalents with short-term liabilities
Period 2018 to 2021

From Table - 1 and Figure-1 Above It can be seen that the value of the cash ratio decreased in 2019, this is due to short-term liabilities in 2019 to Rp. 725M where most of the short-term liabilities are pharmaceutical procurement costs of Rp. 415M. As for the value of cash and cash equivalents in 2019, there was a slight increase from 2018, so the difference between the value of cash and cash equivalents and the value of short-term liabilities from 2018 compared to 2019 became wider. The sharp decline in the value of short-term liabilities in 2020 was the impact of the Covid-19 pandemic. The impact that occurred at the hospital was the decrease in the number of visits by Non-Covid-19 patients, so that the purchase of pharmaceutical goods was reduced. As it is known that pharmaceutical goods are the largest component in the short-term obligations of hospitals. Similarly, in 2021 where the pandemic is still ongoing, this resulted in the cash ratio after the pandemic in 2020 and 2021 being better than the cash ratio before the pandemic in 2018 and 2019.
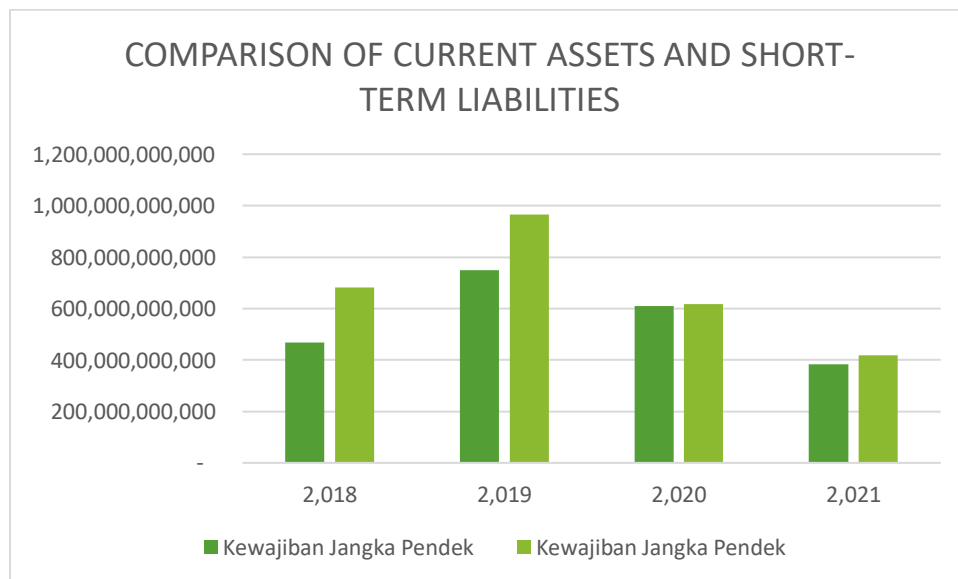

Figure-3. Receivables collection period 2018 to 2021

From the data analyzed, there was a fairly high increase in 2019 which was caused by an increase in revenue from the state budget allocation of 78.64% compared to 2018, while public service revenue increased only by 10.48% compared to 2018. In addition, it is also reported that

there is service revenue from other entities amounting to Rp. 1.4 M. State budget allocation revenues still increased in 2020 by 14.16%, the addition of this state budget allocation is intended for building capital expenditure, medical equipment capital expenditure and consumable medical goods expenditure. This additional expenditure is to support the management policy of the Jakarta hospital which conducts a special zoning policy for Covid-19 patients. On the other hand, public service revenues decreased by 12% compared to 2019 due to the pandemic. Service revenues from other entities in 2020 received an addition of Rp. 43M from the original Rp. 1.4 M. In addition, there is also an additional income from the 2020 BLU grant of Rp. 1,6 M from the original 85M. Similarly, in 2021, the income for public services is still decreasing compared to 2019. APBN allocation revenues were also reduced despite an increase in service revenues from other entities. Overall, there was still a decline in operating income in 2021. Accounts receivable is the result of BLU's operational activities, therefore the value of accounts receivable is directly proportional to the value of community service income.

From the calculation of the receivables billing period of RS Jakarta, in 2018 the receivables billing period for 49 days. In 2019 the billing period became 66 days. In 2020, there was a reduction in the length of the receivables collection period to 33 days, and it got better in 2021 with a length of the receivables collection period of 8 days. This resulted in better receivables collection periods in 2020 and 2021 compared to 2018 and 2019.
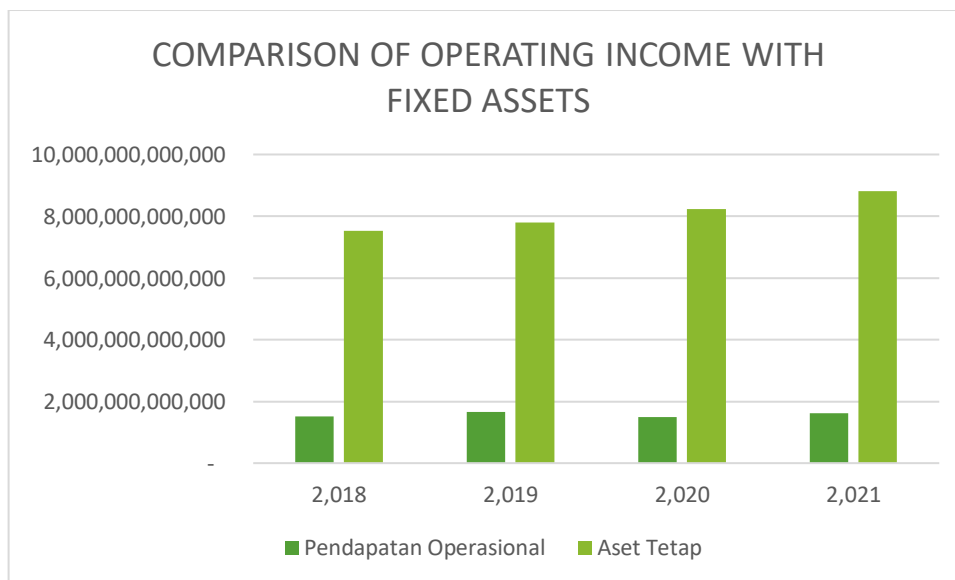

Figure-4. Comparison Of Operating Income With Fixed Assets
Period 2018 to 2021

In 2020 there was a decrease in community service income of Rp. 200m caused by the pandemic that hit, while the value of fixed assets occurred in the addition of equipment and machinery posts and building and building posts caused by zoning policies to anticipate the needs of health services for both Non-Covid-19 patients and Covid-19 patients who need facilities in the form of buildings and buildings and infrastructure in the form of equipment and machinery. This resulted in a better Fixed Asset Turnover ratio in 2018 and 2019 compared to 2020 and 2021.
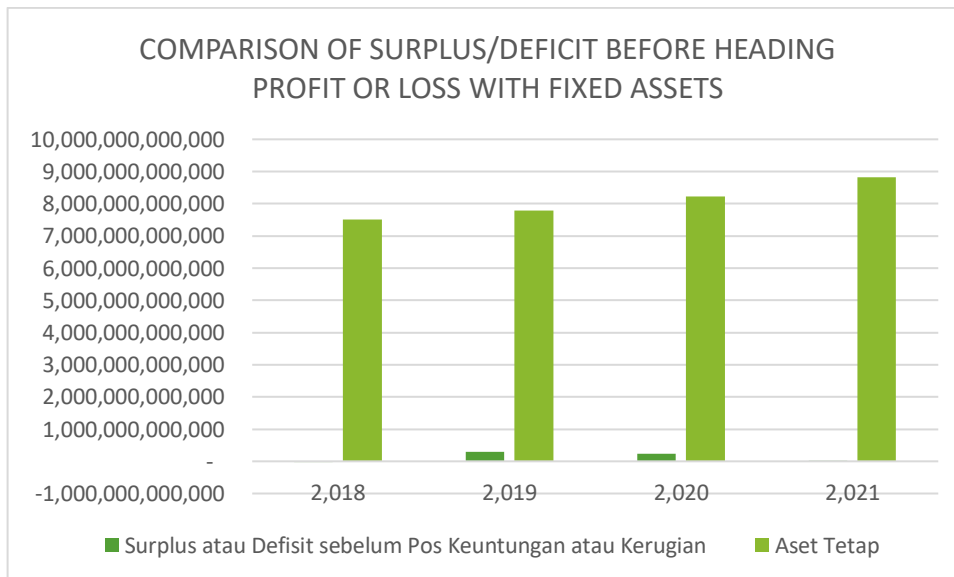

Figure-5. Comparison of Surplus/deficit before heading profit/loss with fixed assets
Period 2018 to 2021

The Return on Fixed Asset value of RS Jakarta both before the Covid-19 pandemic and after Covid-19 is not good enough, this is due not only to the lack of optimal use of assets in RS Jakarta but also because the largest component of RS Jakarta assets is land, which affects the value of the Return on Fixed Asset calculation. If analyzed further, only in 2018 RS Jakarta experienced a deficit, so the value of Return on Fixed assets became negative. For 2019 to 2021, RS Jakarta experienced a surplus in its financial statements.
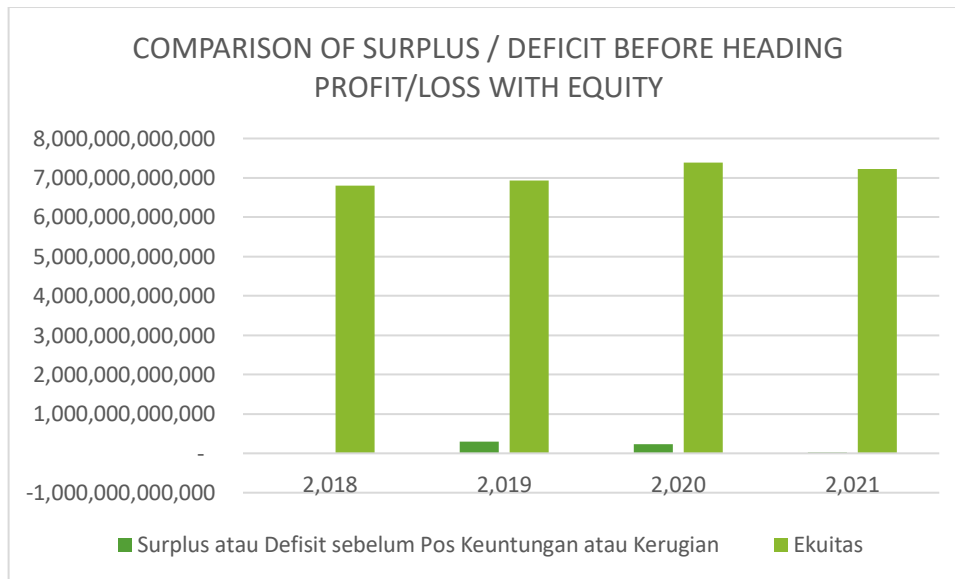
Figure-6. Comparison of Surplus / deficit before heading Profit/Loss With equity
Period 2018 to 2021

The same thing happened to the Return on Equity value, both before the Covid-19 pandemic and after Covid-19, The Return on Equity value of RS Jakarta was not good enough.
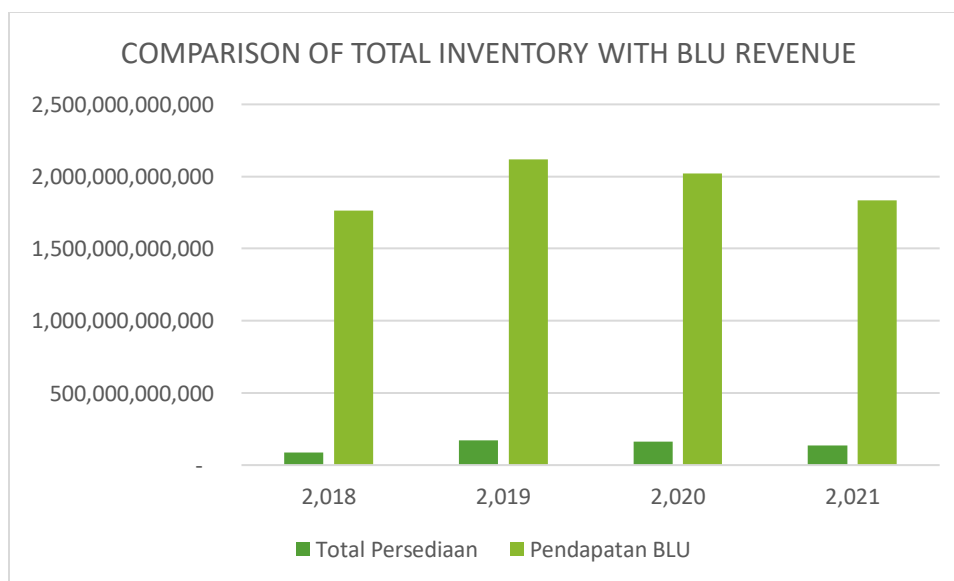

Figure-7. Comparison of total inventory with BLU revenue

The period of 2018 is the same as 2021

In the value of Inventory Turnover both before the Covid-19 pandemic and after the Covid-19 pandemic is below the value of 1, this needs to be further analyzed because the low value of Inventory Turnover describes low inventory turnover, need comparative data with the number of service activities, in the form of patient visits, the number of procedures and surgical action.
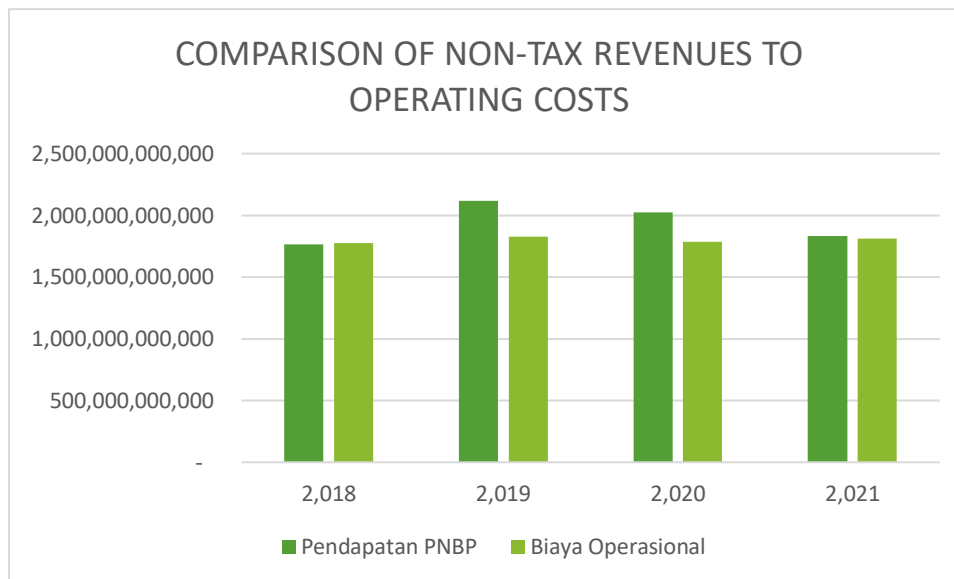

Figure-8. Comparison of non-tax revenues with operating costs

Period 2018 to 2021

Changes in the value of non-tax revenues are directly proportional to operating costs during 2018 to 2021. In 2018 there was a decrease in the burden of goods and services worth more than Rp. 200M. From the picture above, it can be conveyed that there was an increase in the financial independence of Jakarta hospital where in 2018 before the Covid-19 pandemic, the value of operating costs was still higher than non-tax revenues, but after the Covid-19 pandemic in 2019 and 2020 the value of non-tax revenues was higher than the value of operating costs even though in 2021 the value of operating costs was almost the same as the value of non-tax revenues. This resulted in a better ratio of non-tax revenues to operating costs in 2020 and 2021 compared to 2018 and 2019.

Based on the financial statements of RS Jakarta in 2018 to 2021, namely the performance reporting period before the Covid-19 pandemic and after the Covid-19 pandemic, the financial ratio calculation is carried out using the financial data contained in the BLU Financial Statement post, exceeding the Cash Ratio, Current Ratio (return on fixed assets), imbalance in fixed assets (return on equity), non-tax state revenue ratio (PNBP).

Table-1. Financial Ratio Calculation Results

No.	Rasio Keuangan	Tahun 2018		Tahun 2019		Tahun 2020		Tahun 2021	
		Nilai	Skor	Nilai	Skor	Nilai	Skor	Nilai	Skor
1	Cash Ratio	20%	0,5	18%	0,5	41%	0,5	48%	0,5
2	Current Ratio	69%	0,5	78%	0,5	99%	0,5	92%	0,5
3	Collection Period	49	1,25	66	0,75	33	1,75	8	2,25
4	Fixed Asset Turnover	20%	1,75	21%	2,25	18%	1,75	18%	1,75
5	Return on Fixed Asset	-0,14%	-	4%	1,5	3%	1,25	0,24%	-
6	Return on Equity	-0,16%	-	4%	1,25	3%	1,05	0,29%	0,62
7	Inventory Turnover	0,05	-	0,08	-	0,08	-	0,07	-
8	Rasio Pendapatan PNBP terhadap Biaya Operasional	99%	2,75	116%	2,75	113%	2,75	101%	2,75

Table - 1 Above is a financial ratio analysis that refers to the regulation of the Director General of Treasury number PER-36/PB/2016 and the regulation of the Director General of Treasury No PER-24/PB/2018 to measure the performance of RS Jakarta.

Below is a comparison of the score value of the Jakarta hospital financial ratio for the period before the Covid-19 pandemic in 2018 and 2019 to the period after the Covid-19 pandemic in 2020 and 2021, compared to the highest score value based on the Director General of Treasury Regulation Number PER-36/PB/2016 and the Director General of Treasury Regulation No per-24/PB/2018.

Table-2. Financial ratio score value in 2018 to 2021

No.	Rasio Keuangan	Tahun 2018	Tahun 2019	Tahun 2020	Tahun 2021	Perdirjen Perbend No. 24 Th 2018
1	Cash Ratio	0,50	0,50	0,50	0,50	2
2	Current Ratio	0,50	0,50	0,50	0,50	3
3	Collection Period	1,25	0,75	1,75	2,25	2
4	Fixed Asset Turnover	1,75	2,25	1,75	1,75	2
5	Return on Fixed Asset	-	1,50	1,25	-	2
6	Return on Equity	-	1,25	1,05	0,62	2
7	Inventory Turnover	-	-	-	-	2
8	Rasio Pendapatan PNBP terhadap Biaya Operasional	2,75	2,75	2,75	2,75	4
	Total Skor	**6,75**	**9,50**	**9,55**	**8,37**	**19**

Based on Table-2 above, it can be concluded that the overall financial ratio score value of RS Jakarta after the Covid-19 pandemic is better than the total financial ratio score value before the Covid-19 pandemic. Some of the opposite conditions occurred in 2019 where the value of Fixed Asset Turnover score received a maximum value of 2.25 points. The same score value during the study period occurred in the Cash Ratio, Current Ratio, Inventory Turnover and the ratio of

non-tax revenues to operating expenses. The lowest score based on the assessment guidelines used, obtained in the calculation of Inventory Turnover and occurred during the study period. Then the lowest score value was also obtained at the Return on Fixed Assets Ratio in 2018 and 2021. In addition, the lowest score value was also obtained at the Return on Equity ratio in 2018. The highest score value based on the assessment guidelines used is the Director General of Treasury Regulation Number PER-36/PB/2016 and Director General of Treasury Regulation No PER-24/PB/2018 obtained at the ratio of non-tax revenues to operating costs during the research period, namely in 2018 to 2021.

IV. CONCLUSION

From the results of the discussion above, it can be concluded that if the highest score is based on the Regulation of the Director General of the Treasury Number PER-36/PB/2016 and the Regulation of the Director General of the Treasury No PER-24/PB/2018 Regulation of the Director General of the Treasury Number PER-36/PB/ 2016 and the Regulation of the Director General of Treasury No PER-24/PB/2018, which is 19 points, is the achievement target, so the score obtained by the Jakarta Hospital during the research period both before the Covid-19 pandemic and after the Covis-19 pandemic is still far from the target.

Although the billing period has improved in 2020 and 2021, it should be noted that the reduced number of service activities caused by the Covid-19 pandemic, which of course resulted in a decrease in the value of receivables for public services, is only one of the factors that contributed to the the reduction in the length of days in the receivable collection process, so that efficiency and effectiveness in the receivable collection process still need to be improved so that the score can be maintained.

Analysis of financial performance, financial aspects, sub-aspects of financial ratios before the Covid-19 pandemic compared during the Covid-19 pandemic at the Jakarta Hospital based on the Comparison Ratio of PNBP Revenue to Operational Costs or the ability of the Jakarta Hospital to finance hospital operations from its PNBP income above 100 % since 2019 as well as in 2020 and 2021, meaning that the Covid-19 pandemic has no effect on the ratio of PNBP Revenue to Operational Costs, because research data shows that there has been no decline in PNBP income after the Covid-19 pandemic.

REFERENCES

Annafi, 2018, Kajian Kemandirian Keuangan Rumah Sakit Umum Daerah Sebagai Badan Layanan Umum Daerah, OPTIMAL : Jurnal Ekonomi dan KewirausahaanVol.12No.2 2018

Ariyani, 2021, Kajian Kemandirian Keuangan Badan Layanan Umum Daerah Bidang Kesehatan Pada Masa Pandemi COVID-19, Jurnal Indonesia Sosial Teknologi:p–ISSN: 2723 -6609e-ISSN : 2745-5254Vol. 2, No.3 Maret 2021

Budiman, Raymond. 2020. Rahasia Analisis Fundamental Saham Memahami Laporan Keuangan. Jakarta: PT Elex Media Komputindo.

Astuti, 2020, Tingkat Kemandirian Keuangan Rumah Sakit Umum Pusat Badan Layanan Umum Milik Kementerian Kesehatan Republik Indonesia, AKURASI: Jurnal Riset Akuntansi Dan Keuangan, 2 (2), 51 -62.

Candrasari, 2018, Analisis Kinerja Keuangan dan Pelayanan dengan Kemandirian Rumah Sakit di RSUD Dr.Abdoer Rahem Situbondo, e-Journal Ekonomi Bisnis dan Akuntansi, 2018, Volume V (1) : 94-99, ISSN : 2355-4665

Creswell, John W. 2015. Research Design Qualitative, Quantitative, and Mixed Methods Approaches, Terjemah, Achmad Fawaid, Research Design Pendekatan Kualitatif, Kuantitatif, dan Mixed. Yogyakarta: Pustaka Pelajar.

Depkes RI. 2005. Buku Petunjuk Pengisian, Pengolahan, dan Penyajian Data Rumah Sakit. Depkes RI.2005. Jakarta

Fahmi. 2017. Analisis Laporan Keuangan. Alfabeta, Bandung.

Gani. A. 1996. Analisis Biaya Rumah Sakit, Makalah Seri Manajmen Keuangan Pelayanan Kesehatan. Jakarta.

Harahap, Sofyan Syafri. 2013. Analisa Kritis atas Laporan Keuangan. Jakarta: PT Raja Grafindo Persada, Jakarta.

Hery. 2017. Akuntansi Dasar. Jakarta: Grasindo.

Horne, James C. Van dan John M Wachowicz Jr. 2012. Prinsip-Prinsip Manajemen Keuangan (Edisi 13). Jakarta : Salemba Empat.

Huffman, Edna K. Illinois, 1994. Health Information Management: Psycians Record Company. 1994.

Hutauruk. 2017. Akuntansi Perusahaan Jasa (Aplikasi Program Zahir Versi 6). Jakarta: Indeks

Ikatan Akuntan Indonesia . 2007 . Standar Akuntansi Keuangan. Edisi 2007. Penerbit : Salemba Empat . Jakarta.

Johnson, R.B. & Christensen, L. B. (2008). Educational Research: Quantitative, Qualitative, and Mixed Approaches (3rd ed.). Thousand Oaks, CA : Sage.

Kasmir, 2018. Analisis Laporan Keuangan. Depok: PT. Raja Grafindo Persada.

Keputusan Menteri Kesehatan Nomor 1243/ Menkes//sk/VIII/2005

Lembaga Administrasi Negara. 1999. Pedoman Penyusunan Akuntabilitas Kinerja Instansi Pemerintah.Jakarta

Lidyawati, 2019, Analisis Layanan Keuangan Dalam Penilaian Kinerja Keuangan Badan Layanan Umum Daerah Kota Bekasi, Goodwill : Jurnal Penelitian Akutansi Goodwill : Jurnal Penelitian Akutansi Volume 1, Nomor 1, April 2019 Hal 25-32

Madjid, Noor Choolis., Cahyono, Heru dan Tohirin. 2009. Evaluasi Antara Kinerja Keuangan Dan Operasional Pada Satker Rumah Sakit Umum Pemerintah Yang Menerapkan Pola Pengelolaan Badan Layanan Umum. Kajian Akademis BPPK.

Mahsun (2006). Pengukuran Kinerja Sektor Publik, Edisi Pertama. Yogyakarta: BPFE, Yogyakarta.

Mamduh, M. Hanafi. M. (2016). Analisis Laporan Keuangan, Edisi Kelima, UPP STIM YKPN

Mardiasmo.(2005). Akuntansi Sektor Publik : Penentuan harga pelayanan publik, Yogyakarta.

Munawir, S. 2014. Analisis laporan Keuangan Edisi keempat. Cetakan Ke-17 Belas. Yogyakarta: Liberty

Murhadi, Werner R. 2019. Analisis Laporan Keuangan Proyeksi dan Valuasi Saham. Jakarta: Salemba Empat.

Nordiawan, Dedi., Iswahyudi Sondi Putra, Maulidah Rahmawati. 2007. Akuntansi Pemerintahan. Jakarta: Salemba Empat.

Nurlih, 2020, Analisis Kinerja Keuangan Pada Badan Layanan Umum (BLU) Rumah Sakit Umum, Jurnal Tata Kelola Vol 1 No. 1, Juni(2020)

Perdirjen RI, 2016, Peraturan Direktur Jenderal Perbendaharaan Nomor PER-36/PB/2016 Tentang Pedoman Penilaian Kinerja Badan Layanan Umum Bidang Layanan Kesehatan.

Permenkes RI. 2011. Peraturan Menteri Kesehatan Republik Indonesia NOMOR 1171/MENKES/PER/VI/2011 Tentang Sistem Informasi Rumah Sakit tertanggal 15 Juni 2011

Permenkes RI. 2016. Peraturan Menteri Kesehatan Nomor 63 Tahun 2016 Tentang Pedoman Pengelolaan Keuangan Badan Layanan Umum Di Lingkungan Kementerian Kesehatan

Permenkes RI. 2019. Peraturan Menteri Kesehatan Republik Indonesia Nomor 30 Tahun 2019 Tentang Klasifikasi dan Perizinan Rumah Sakit. Jakarta

Pudjirahardjo. 1998, Analisis Biaya Satuan dan Penyesuaian Tarif Pelayanan Rumah Sakit. Surabaya: Program Studi AKK FKM UNAIR.

Republik Indonesia, Peraturan Direktur Jenderal Perbendaharaan No PER-24/PB/2018 tentang Perubahan atas Peraturan Direktur Jenderal Perbendaharaan Nomor PER-36/PB/2016

Republik Indonesia, Peraturan Pemerintah Republik Indonesia Nomor: 23 Tahun 2005 tentang Pengelolaan Keuangan Badan Layanan Umum, Jakarta

Republik Indonesia, Undang-Undang No. 44 tahun 2019

Subramanyam dan John J. Wild. 2012. Analisis Laporan Keuangan. Jakarta: Salemba Empat.

Sugiyono. (2016). Metode Penelitian Kuantitatif Kualitataif dan Kombinasi (Mixed Methods). Bandung: Alfabeta.

Suteja, Jaja. 2018. Manajemen Investasi dan Portofolio. Bandung: PT Refika Aditama

Tama, 2018, Kajian Kemandirian Keuangan Rumah Sakit Umum Daerah Sebagai Badan Layanan Umum Daerah, OPTIMAL : Jurnal Ekonomi dan Kewirausahaan Vol.12 No.2 2018

Tama, 2020, Faktor-Faktor Yang Mempengaruhi Kemandirian Keuangan Rumah Sakit Umum Daerah Sebagai Badan Layanan Umum Daerah, 2020, Jurnal PETA Vol. 5 No. 2 ,Juli 2020

Wijayanti, Handayani Tri. Dan Sriyanto. 2015. Evaluasi Kinerja Pelayanan Dan Keuangan RSUD Yang Menerapkan Pola Pengelolaan Keuangan BLUD di Subosukowonosrtaen. Jurnal Ekonomi, Bisnis & Perbankan. Vol. 1. No. 1.

V. Wiratna Sujarweni, 2017. Analisis Laporan Keuangan. Pustaka Baru Press, Yogyakarta.