

The implementation of BPJS health program At public health center martapura in banjar regency

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Abstract:- Improving the quality of health services at the primary level is very important to reduce the burden of services which will be covered hospital when the BPJS program applied. The aimed of this study is to describe the implementation of the program of BPJS in Public Health Center (PHC) Martapura. This study was a qualitative research with case study design. The informants are the head of PHC and manager program were taken by purposive sampling. Data were collected through interviews using in-depth interview guide. Result of this study was since the enactment BPJS January 1, 2014, Banjar Regency Health Office only once to disseminate ie in March 2014. This makes the health center to get the barriers in the field of the sustainability of the information obtained from the health department with the information captured on the official website BPJS. Another barriers was the disbursement claims that have not been implemented which should have been right to health centers for services provided. Support from the health department and BPJS needed to inform about the national health insurance program regularly to health centers so that health centers do not confusion in implementing the program.

Keywords:- barriers,BPJS,implementation , primary level,Public Health Center (PHC)

I. INTRODUCTION

Organization of public health services in Indonesia on the ground level held by the public health center (PHC) which is a unit of functional organization of health districts / municipalities and given responsibility for public health as the manager of each district of the district / city concerned. One of the services provided by the health center is a ministry of the Social Security Agency or BPJS^[1]. BPJS is an institution that organizes the National Health Insurance (JKN) which is a public legal entity state-owned non-profit and accountable to the president. BPJS entered into force on January 1st, 2014. Participants of BPJS Health program are divided into 2 groups of new participants and the transfer of the previous program, the Health Insurance, Public Health Insurance, the Indonesian Armed Forces, the Police, and the Workers' Social Security. Improving the quality of health services at the primary level is very important to reduce the burden of services which will be borne by the hospital when the Social Security Agency (BPJS) applied^[2].

The patient's perception of the quality of health care is a thorough assessment of the patient's health care excellence received during a visit to a health care facility is one of the health centers. While patient satisfaction is one's feelings after comparing the level of performance or results which he felt to his expectations. Good quality health care will affect the patient's perception of the performance of health centers that affect patient satisfaction with services provided^[3].

PHC must provide optimum services and maintain the quality of service both from the aspect of administrative services, physician services, nursing services, medication services, facilities and service support facilities. Maintain the quality programs should pay attention to five dimensions, namely reliability, responsiveness, assurance, empathy and physical form. The program maintains the quality is expected to improve the credibility of the health center^[4]. Subekti research results indicate that there is a relationship between the patient's perception of the quality of administrative services, doctors, nurses and medicine with patient satisfaction^[5].

PHC Martapura as one of the spearheads of health services at the primary level has been prepared for the implementation of good BPJS workforce, facilities and infrastructure. Only during the third month running, there are still some patients visit BPJS listed as outside the health center visits. However, health centers continue to perform its obligation to provide health services in the hope of maintaining the maximum quality of services at the health center so that patient satisfaction can be achieved. Based on the above, the group interested in conducting patient satisfaction surveys at the health center Martapura to evaluate the extent to which the quality of health center services to meet the enactment BPJS begin early in 2014.

II. PURPOSE

To describe the implementation of BPJS health program in PHC Martapura and explain the problems that occurred at the beginning of BPJS health program.

III. METHODOLOGY AND DATA ANALYSIS

This study is a qualitative research with case study design. The informants were the head of PHC and manager program to assess the implementation of BPJS in PHC Martapura and any constraints faced by the clinic related to the implementation of the program BPJS. Informants were taken by purposive sampling based on inclusion criteria, that is, those who are involved in the implementation and management of the health center JKN in Martapura. Primary data were collected through in-depth interviews with key informants using in-depth interview guide. Once the data is collected, then carried Editing and Coding on the results of the interview transcript and then drawn conclusions based on the findings. Location studies in Technical and Operational Unit of at PHC Martapura in Banjar Regency during the month of April 2014.

IV. RESULTS AND DISCUSSION

Interviews showed that the implementation of the BPJS program in PHC Martapura had positive impact on society. This is consistent with the results of excerpts of interviews with informants, which states that: *"With the program BPJS whole community can access health services without any differences in quality of care received, especially at the level of basic services like we are here"* (Informant)

This is consistent with the vision of BPJS that held by government ie no later than January 1, 2019 the entire population of Indonesia has a national health insurance to obtain health care benefits and protection to meet basic health needs ^[6].

Health services provided by the health center to the patient as the BPJS participants in PHC Martapura were in accordance with the guidelines for the implementation of BPJS. One of the reasons given for the mechanism of the services provided to the patient participants BPJS not much different from the patient's care guarantee users better Askes, Jamkesmas, and Jamkesda. This is consistent with the results of excerpts of interviews with informants, which states that:

"We serve patients BPJS participants in accordance with the Regulation of the Minister of Health and care guidelines issued by the central BPJS exact mechanism of these services are not much different from patient service users guarantee good health insurance, health card, and Jamkesda before BPJS enforced" (Informant)

Guidance about BPJS patient care written in the Regulation of Minister of Health of Republic Indonesia number 12 year 2013 about Health Care in the National Health Insurance (JKN) as well as practical guidelines issued by the health services from BPJS. In the rules and guidelines it contains various types of service are eligible to come by patients on bail at the basic level health facilities in this health center as well as how the flow of service ^[7,8].

Socialization of BPJS Health Program of the health service has been carried out but the intensity of its implementation was lacking, so that given impact on the community knowledge toward the service of BPJS of Health. This is consistent with the results of excerpts of interviews with informants, which states that:

"Since the enactment BPJS 1st January last, the new Banjar district health department to disseminate as much as the first time in March yesterday. Although the actual information / knowledge of our health centers for the implementation of the mechanism is enough BPJS we get from guidance services on the website BPJS, but we expect that there is continuity of service delivery of information so that when there are barriers in the field can be immediately covered "

The type of services to BPJS participants in PHC Martapura already fit the needs of the community. This is consistent with the results of excerpts of interviews with informants, which states that:

"Here we serve promotive prevention, treatment, basic immunization, family planning, dental and many more which must be adapted to the guidelines issued BPJS services. And in terms of service, we do not distinguish between services provided to patients and the general patient BPJS "

This is in accordance with the procedures and implementation guidance BPJS, the National Social Security System (Navigation) or SJSN which are individual services in the form of health care that includes promotive, preventive, curative and rehabilitative, including drugs and medical materials needed ^[8]. The absence of differences in health center services Martapura in accordance with Article 28 H paragraph (1) which reads: Everyone has the right to live physical and spiritual prosperity, reside, and get a good environment and healthy and receive medical care ^[9].

Informants revealed that there were no significant barriers during the implementation of the BPJS program impact on the management of health centers. The problem faced in PHC Martapura one of which is the issue of participation of the patients who come to get health services from outside of health centers which have an impact on the difficulties in the process of billing claims for services beyond capitation rates. However, the

clinic continue to provide services to patients. This is consistent with the results of excerpts of interviews with informants, which states that:

"For 3 months imposed BPJS there are still some patients visit BPJS listed as outside the health center visits, when patients are already advised to report to the office BPJS if want PHC Martapura as unserved but nonetheless on the next visit the patient did not heed the advice of officers us. However, health centers continue to perform its obligation to provide health services in the hope of maintaining the maximum quality of services at the health center so that patient satisfaction can be achieved. (Informant) "

Based on the statements of informants can be seen that many people who use guarantees that went to PHC Martapura although participation was not in PHC Martapura. It can be indicated that the health centers perform well services so that patients feel satisfied and have an impact on patient loyalty to high health centers. Informants revealed the barriers that must be addressed by the health department and policies of BPJS that need to be corrected as follows:

"The barriers that should be addressed is the Health Department disbursement claims that have not been implemented until now. Therefore we expect the Local Government through the Department of Health immediately pay capitation has not realism from 1 January until now that should be right for the services the health center. "

Complaints revealed that under the rules of health ministry on a capitation system entitled BPJS of Health obtained PHC as one basic level of health care workers^[10].

V. CONCLUSION AND RECOMMENDATION

Constraints faced by PHC Martapura during BPJS imposed was for 3 months running there were still some patients visit BPJS listed as outside the health center visits. In addition, the claim of BPJS should be accepted by the Department of Health has not been paid since January until today. But such barriers do not impact on the management of health centers continue to perform its obligation to provide health care to the maximum in order to maintain service quality. Expected soon overcome the barriers that occur in health centers in terms of payment of claims / capitation of patients BPJS so that no one is harmed on the implementation of this BPJS of Health.

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