The Comparison Of Service Quality For Bpjs And Non Bpjs Users In Batam Health Facilities

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Abstract.

BPJS and Non BPJS dependent patients have the same rights as other general patients to receive satisfying services just like other health care facilities. Considering that, this new program from the government in the health sector is aimed at controlling the quality and costs of health, so that it can be accessed by all levels of society, as well as having good prospects for hospitals and other health care facilities. Thus, hospitals are responsible for being able to provide satisfying and quality services so that they can be chosen by the community, both BPJS and non BPJS participants. The purpose of this study was to compare the quality of BPJS and Non BPJS dependent health services on the satisfaction of inpatients in health care facilities in the Riau Archipelago. This type of research is quantitative using a cross-sectional approach. The sample in this study was 60 people. The instrument used is a questionnaire. Data analysis in this study used the independent t-test. The results of the study found that there were significant differences between the quality of health services for the BPJS and Non BPJS respondent groups. And there is a significant difference between the satisfaction of inpatients in the BPJS and Non BPJS respondent groups. It is hoped that this research can be a reference for future research.

Keywords: Quality of service and satisfaction of BPJS and non BPJS inpatients

I. INTRODUCTION

As the world progresses into the globalization of market share, it then opens up opportunities and also gets tighter in competition then it will be more difficult to predict. For this reason, this condition creates and requires the company to create a superior product that is able to compete, therefore, with a competitive and continuous superior product, it will be able to provide the selling value of a quality product or service at best to customers or those patients. Hospital is one of the places of health services where there are many uses of discovery technology both in the field of medicine and other health fields. Hospitals as health care providers should be managed properly to improve the quality of health services and the number of patients. The increasing number of social condition of the community causes people to be more aware of the quality of services provided. Improved quality and service as well as health service oriented toward the patient satisfaction. In order to achieve patient satisfaction-oriented goals which include aspects of health care facilities, the role of doctors, nurses and non-medical health service, staff is deemed crucial since their performance will determine the patient's perception of the services provided. In accordance with the mandate of Law No. 40 of 2004 regarding the National Social Security System (SJSN) and Law No. 24 of 2011 concerning the Social Security Administering Body (BPJS), starting on January 1, 2014, every Government Hospital and Private Hospital in collaboration with BPJS, must serve patients participating in the National Health Insurance (JKN), whose financing will be the responsibility of the Social Security Administering Body (BPJS).

As stated in Presidential Regulation No. 12 of 2013 concerning Health Insurance, what is meant by BPJS patients are Health Insurance Participants who receive contribution assistance from the government (PBI) and they are neither Contribution Assistance Recipients (Non PBI) nor independent participants consisting of civil servants, Indonesian national army, Indonesian Republic police. BPJS dependent patients and Non BPJS patients also have the same rights as other general patients to receive satisfactory services from the hospital or other health care facilities. Looking at the fact, this new program from the government in the health sector is aimed at controlling the quality and costs of health, so that it can be accessed by all levels of society, having

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good prospects for hospitals and other health care facilities, Therefore, hospitals are responsible for being able to provide satisfying and quality services so that they can be chosen by the community, both BPJS and non BPJS participants. That sorts of problems that are frequently faced by BPJS will include limited access to hospital facilities. a number of health services in hospitals, some have registered or collaborated with BPJS health according to their respective types or classes, therefore, not all hospitals can be covered, when the hospital is not registered, the use of the BPJS card will not be valid, and a number of drugs will not be covered, and there will be long queues and fully occupied rooms. Meanwhile, for Non BPJS patients, there are still limited administrations that are very lengthy, the queues are still long, the rooms are already fully occupied, the cost of drugs is too expensive and a number of recipients with different services.

This is a complaint by BPJS and non-BPJS by the community for the above mentioned problems that cannot be resolved, also for recipients of good services for BPJS health and non-BPJS users. Today's society is starting to become more critical about looking at health services and health professionals. The community demands good health services from the hospital, On the other hand, the government has not been able to provide services as expected due to the limitations, except for business-oriented private hospitals, which provides good health services, especially those related to the availability of services obtained by the community through BPJS and non BPJS. This is also supported by the Regulation of the Minister of Health of the Republic of Indonesia Number 4 of 2018 concerning Hospital Obligations and Patient Obligations where the Hospital's Obligation to provide safe, quality, anti-discriminatory, and effective health services by prioritizing the interests of patients in accordance with hospital service standards. Hospital obligations provide correct information about hospital services to the public. The obligation of the hospital to provide facilities and services for the have-not or the poor. Meanwhile, the patient's right in the regulation is to obtain quality health services in accordance with professional standards and standard operating procedures. Based on the previous research, we obtained an overview of knowing the standard of BPJS dependent health services only for one health service facility such as a hospital or health center, such as research conducted before. Based on the description above, the authors have chosen several inpatient health care facilities, both in private hospitals based on type B or type C or inpatient hospitals that work with BPJS or Non BPJS, namely Budi Kemuliaan Hospital, Elizabeth Hospital, Batam Authority Hospital and Embung Fatimah Hospital so that we can compare the quality of health services for BPJS and Non BPJS users in terms of physical evidence, reliability, confidence, responsiveness and empathy for the satisfaction level of BPJS and Non BPJS dependent inpatients in a number of health care facilities. From this thought, the authors are encouraged to conduct research on "The Comparison of the Quality of Health Services for BPJS and Non BPJS users on Satisfaction of Inpatients at Health Service Facilities in Batam.

II. METHODS

The type of research used in this research is quantitative, with a cross sectional approach. This research was conducted to inpatients at Budi Kemuliaan Hospital Batam, Batam Authority Hospital, Elizabeth Hospital Batam and Embung Fatimah Hospital, as many as 30 BPJS patients and 30 non BPJS patients so that the total will be 60 respondents. In this study, the data collection instrument was in the form of a questionnaire covering the quality of service and satisfaction of inpatients (Sugiyono, 2014). To answer the hypothesis, this study uses independent t test data analysis (Sujarweni, 2015).

III. THE RESULTS OF THE RESEARCH

Table 1. Descriptive Frequency of Age, Gender, Health Dependents, Last Education and Occupation

Variable		n	%	
Age				
-	25-30 years	33	55%	
-	31-35 years	27	45%	
Sex	•			

Variable	n	%
- Male	18	30%
- Female	42	70%
Health Dependent		
- BPJS	30	50%
- Non BPJS	30	50%
Last Education		
 Junior High School 	7	11,7%
- Senior High School	35	58,3%
- Diploma/Bachelor Degree	18	30,3%
Occupation		
- unemployed	1	1,7%
- private	17	28,3%15,0%
- PNS/TNI/POLRI	9	33,3%
- Entrepreneur	20	21,7%
- Domestic wives	13	

Based on table 1 above, it is known that the descriptive frequency of respondents is seen from the characteristics based on age, gender, education, occupation and health dependents. The results showed that the majority of respondents aged 25-30 years were 33 people (55%). There are 42 women (70%). 35 people with high school education (58.3%). As many as 20 people (33.3%) works as entrepreneurs and 30 people (50%) have health dependents who use BPJS (50%) and 30 people (50%) have non-BPJS.

Table 2. BPJS Health Insurance

Variable	n	%	
Quality of Health service			
- Not Good	1	3,3%	
- well	29	96,7%	
inpatient Satisfaction			
-less satisfied	2	6,7%	
-satisfied	28	93,3%	

Based on table 2 above, it is known that of the 30 respondents who received health dependents from BPJS, 29 people (96.7%). And of the 30 respondents who received health dependents from BPJS stated that the majority of inpatients were satisfied which is about as many as 28 people (93.3%).

Table 3. Non BPJS Health dependents

Variable	n	%	
Quality of Health service			
- Not Good	5	16,7%	
- well	25	83,3%	
inpatient Satisfaction			
-less satisfied	5	16,7%	
-satisfied	25	83,3%	

Based on the table 3 above, it is known that from 30 respondents whose health dependents from non BPJS stated that the quality of service at the hospital was good, up to 25 people (83.3%). And of the 30 respondents whose health dependents were non-BPJS stated that the majority of inpatients were satisfied which is about as many as 25 people (83.3%).

Table 4. Normality Assumption Test

Tests of Normality

10000 011(01)								
	Kolmogo	orov-Sr	nirnovª	Sha	piro-W	ilk		
	Statistic df Sig. Statistic					Sig.		
Quality of Health Service	.089	60	.200*	.975	60	.250		
Inpatient Satisfaction	.067	60	.200*	.971	60	.168		

^{*.} This is a lower bound of the true significance.

a. Lilliefors Significance Correction

Based on table 4 above, it is known that the variables of health service quality and inpatient satisfaction variables are normally distributed because the Kolmogorov Smirnov significance value is 0.200 or greater than 0.05.

Tabel 5. Pearson Correlation Test

Correlations

		Kualitas Pelayanan Kesehatan	Kepuasan Pasien Rawat Inap
Quality of Health Service	Pearson Correlation	1	.741**
	Sig. (2-tailed)		.000
	N	60	60
Inpatient Satisfaction	Pearson Correlation	.741**	1
	Sig. (2-tailed)	.000	
	N	60	60

^{**.} Correlation is significant at the 0.01 level (2-tailed).

Based on table 5 above, it is known that there is a positive and significant effect on the quality of health services on inpatient satisfaction since the correlation coefficient value is 0.741 which is greater than r table = 0.254 and also the significance value is 0.000 or less than 0.05. The correlation coefficient value is 0.741, therefore, it is included in the category of strong correlation.

Table 6. Coefficient of Determination Test (R Square)

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the
Model	IX.	K Square	Adjusted R Square	Littilate
1	.741ª	.549	.542	7.162

a. Predictors: (Constant), Health Quality Service

Based on table 6 above, it is known that the R Square value is 0.549, which means that the variable quality of health services has an effect of 54.9% on inpatient satisfaction while the rest is influenced by other variables outside this study.

Table 7. Test T Independent test Health Quality Service

Independent Samples Test

Levene's Test for Equality of Variances						t-test for l	Equality (of Means		
		Std. 95% Confid Mean Error Interval of Sig. (2- Differe Differe			al of the					
		F	Sig.	t	df	tailed)	nce	nce	Lower	Upper
Health Quality Service	Equal variances assumed	1.885	.175	3.741	58	.000	9.433	2.521	4.386	14.480
	Equal variances not assumed			3.741	56.079	.000	9.433	2.521	4.383	14.484

Based on table 7, it is known that there is a significant difference between the quality of health services for the BPJS and Non BPJS respondent groups because the significance value of the independent t test is 0.000 or less than 0.05.

Table 8. Test T Independent test (inpatients satisfaction)

Independent Samples Test

		Test Equal	ene's t for lity of ances			t-test for	Equality	of Mean	S	
		F	Sig.	t	df	Sig. (2- tailed)	Mean Differe	Std. Error Differe nce	Interva	onfidence al of the erence Upper
Inpatient Satisfactio n	Equal variances assumed	.000	.982	4.040	58	.000	9.833	2.434	4.961	14.705
	Equal variances not assumed			4.040	57.933	.000	9.833	2.434	4.961	14.705

Based on table 8, it is known that there is a significant difference between inpatient satisfaction of BPJS and Non BPJS respondent groups as the significance value of the independent t test is 0.000 or less than 0.05

IV. DISCUSSION

A. The Description of the frequency distribution of characteristics of inpatients both BPJS and non BPJS in Batam health facilities

Based on the study result, it was found that based on the frequency distribution of the characteristics of BPJS and non BPJS inpatients seen from the age, the majority of respondents aged 25-30 years were 33 people (55%). There are 42 women (70%). 35 people have high school education (58.3%). As many as 20 people (33.3%) have jobs as entrepreneurs and 30 people (50%) have health dependents who use BPJS (50%) and 30 people (50%) have non-BPJS. This is similar to the study by Ozora Bitjoli, et all (2019) based on age which showed that the patients were mostly aged 31-40 years as many as 25 (36.8%). Most of the respondents have female sex as much as 49 (72.1%). Based on education, most of them have high school education as many as 54 (79.4%) and most of the respondents have household work as many as 25 (36.8%). Ozzi Zarra (2016) found that most of the respondents aged 30-39 years were 34.2%, female sex was 73.3%, those with high school/vocational education were 56.7%, and as a housewife there were 38, 3%. Similar to the research conducted by Zumria et all (2020) it was found that the highest frequency age characteristics were respondents aged 21-30 years as many as 35 people (39.8%). Most of the sexes were female, namely 48 people (54.5%). The education of the respondents is high school, as many as 55 people (62.5%).

B. The Quality of inpatient health services between BPJS and non BPJS patients at Batam health facilities

The quality of outpatient health services in BPJS patients is understandable that of the 30 respondents who received health dependents from BPJS stated that the quality of service at the hospital was 29 people (96.7%). While the quality of inpatient health services for non BPJS patients, it is understandable that from 30 respondents who are health dependents from non BPJS stated that the quality of service in hospitals is as many as 25 people (83.3%). The results of the study are similar to the research of Siregar et al (2018) that BPJS patients feel that the service quality is good 30 (66.7%) and Non BPJS patients feel that the service quality is

good 32 (71.1%). Health quality constitutes the level of excellence of health services that can meet the needs of patients provided by medical personnel, paramedics and medical support. Quality of service is a "must" that must be done so that health services can survive and continue to win the trust of customers. In this study, the quality of inpatient health services for BPJS and non-BPJS patients is great considering the quality of service from health care facilities in Batam, where they are treated well, all components of standard inpatient services that have been provided by these hospitals have shown good performance in serving both BPJS and non BPJS patients.

C. The Satisfaction of BPJS and non BPJS dependent inpatients in Batam health care facilities

It is known that out of 30 respondents who received health dependents from BPJS stated that the majority of inpatients were satisfied as many as 28 people (93.3%). Satisfaction of non BPJS inpatients, it is known that from 30 respondents whose health dependents from non BPJS stated that the majority of inpatients were satisfied as many as 25 people (83.3%). Research conducted by Siregar et al (2018) found that 26 (57.8%) BPJS patients were satisfied with health facilities. And non BPJS patients are satisfied with 28 health facilities (62.2%). Patient satisfaction is one of the goals of improving the quality of health services. Patient satisfaction is a level of patient feeling that arises as a result of the performance of health services obtained after the patient compares it with what he expects (Pohan, 2013). In this study, the satisfaction of BPJS and Non BPJS dependent inpatients, all patients in health care facilities in Batam, the majority showed a sense of satisfaction at health care facilities in Batam. In creating a sense of satisfaction for patients, every health facility should be able to understand the needs and desires of patients, because satisfied patients are a valuable asset for every hospital.

D. Differences in the comparison of the quality of health services with the satisfaction of BPJS and non BPJS dependent inpatients in Batam health care facilities

From the results of the independent t test research analysis on the quality of BPJS and non BPJS dependent health services, a significance value of 0.000 or less than 0.05 was obtained. This shows that there is a significant difference between the quality of health services for both BPJS and Non BPJS respondent groups. From the results of the analysis of the independent t test on the satisfaction of both BPJS and non BPJS dependent inpatients, a significance value of 0.000 or less than 0.05 was obtained. This shows that there is a significant difference between the satisfaction of inpatients in the BPJS and Non BPJS respondent groups. This is similar to the research conducted by Zumria et al. (2020) which states that there are differences in the level of satisfaction of both BPJS and Non BPJS patients in regard to the service quality (p = 0.001). Putri, et all (2018) showed the results of the study that there was a relationship between service quality and BPJS patient satisfaction (p = 0.001). Zaniarti (2011) states that there is a relationship between the quality of health services and inpatient satisfaction (p = 0.000). However, this is different from the research conducted by Yulenda (2019), which states that there is no significant difference between both BPJS and Non BPJS patients with the level of patient satisfaction (p = 0.378). Herman et al (2014) results show that there is no relationship between service quality (p = 0.057). In this study, the quality of health services and satisfaction of BPJS and non BPJS dependent inpatients both have significant differences. Although there are differences between BPJS and non BPJS dependent inpatients in terms of service quality and inpatient satisfaction, all patients will be feeling great and satisfied in getting the services . in the end, this concludes that health service facilities in Batam are good at providing inpatient health services.

V. CONCLUSION

The frequency description of the respondents' characteristics shows that the majority of respondents who aged 25-30 years is listed by 33 people (55%) at most. There are 42 women (70%). 35 people have high school education (58.3%). As many as 20 people (33.3%) works as entrepreneurs and 30 people (50%) with health dependents who use BPJS (50%) and 30 people (50%) with non-BPJS. Respondents felt that the quality of health services was greatly satisfying which is up to 54 people (90%) and respondents were satisfied as inpatients

which comes up to 53 people (88.3%). The quality of inpatient health services for BPJS patients in good hospitals is 29 people (96.7%), while the quality of inpatient health services for non-BPJS patients in good hospitals is 25 people (83.3%). Inpatient BPJS dependents who are satisfied are 28 people (93.3%). While non-BPJS inpatients who feel satisfied are 25 people (83.3%). There is a significant difference between the quality of health services for both BPJS and Non BPJS respondent groups (sig = 0.000) and there is a significant difference between the satisfaction of inpatients in the BPJS and Non BPJS respondent groups (sig = 0.000).

VI. SUGGESTIONS

It is hoped that this research can be a reference for future research and can add other variables that do not exist in this study.

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