International Journal of Social Science And Human Research

ISSN(print): 2644-0679, ISSN(online): 2644-0695

Volume 05 Issue 11 November 2022

DOI: 10.47191/ijsshr/v5-i11-43, Impact factor- 5.871

Page No: 5134-5138

Relationship between The Status and Length of Membership with Patient Satisfaction of BPJS (Social Security Administrator)

Mohamad Sadli [1], Syamsul Huda[2]

[1,2]Sekolah Tinggi Ilmu Kesehatan Cirebon, West Java, Indonesia.

ABSTRACT: The regional public hospital (RSUD) of Arjawinangun's service performance has yet to be fully optimal. One indication is from the Bed Occupancy Ratio (BOR) is still around 55% in 2019. This condition must reach the ideal BOR range from 60-85%. This 30% BOR is certainly a problem for the performance of the regional public hospital, especially when it is associated with patient or customer satisfaction, especially in 2020 the BOR has dropped to 50%. This study aimed to determine the relationship between the status and length of membership with patient satisfaction at the Outpatient Installation of the RSUD of Arjawinangun, Cirebon Regency, West Java, Indonesia, in 2021. The associative quantitative method was employed in this study. The population in this study were all BPJS participants who visited the RSUD of Arjawinangun, which recorded until May 2021 as many as 43,998 people with a sample of 110 respondents. The results showed that the number of non-PBI respondents was more than PBI, with as many as 76 people (69.1%). The analysis results show that the average length of patient membership in the RSUD of Arjawinangun is about 27 months. Respondents with the lowest length of membership were two months, and the highest length of membership was 38 months with a median of 36 months. The results of the analysis related to patient satisfaction 55.5% stated they were not satisfied. There is no relationship between membership status and patient satisfaction with services; however, there is a tendency for a negative relationship. There was no relationship between the length of membership and patient satisfaction with services; however, there was a tendency for a positive relationship. Based on this, the suggestion for hospitals is to maintain patient satisfaction with services, where the flow of the patient registration system needs to be revised again, so there are no crowds at the registration counter, especially in this pandemic situation. The system must consider the distance between the registrants, the provision of hand-washing facilities, and the supply of masks. In addition, the facilities and infrastructure in the registration area should have been transformed into a healthy and well-organized area.

KEYWORDS: BPJS, Status of Membership, Length of Membership, Patient Satisfaction

INTRODUCTION

Factors that affect human health are 1) lifestyle, 2) environment (social, economic, political, cultural), 3) health services, and 4) genetic factors (heredity) (Agyemang, 2019; Amaliah et al., 2022; Magnan, 2020; Subramanian et al., 2020). Health is very important for the sustainability of human life (Exner & Strüver, 2020; Kasmad et al., 2022; Rokhmatul Hikhmat et al., 2022). During the Covid-19 period, maintaining health is the main focus (Nurcahyati et al., 2022; Tavolacci et al., 2021). When humans experience health problems, a hospital is a place to go for treatment (Ahmed et al., 2020; Grimm, 2020). In general, the hospital is the most visited place for treatment by people in Indonesia in obtaining health services, which is 37.29% (Napitupulu, 2021). Hospitals in the BPJS (Social Security Administrator) system have a major role in BPJS health participants (Ratnawati & Kholis, 2019). If the Puskesmas (Public health center) services provided are promising (Herlinawati et al., 2022; Supriatin et al., 2022), more BPJS participants will take advantage of health services (Dewi & Israhadi, 2021), but the opposite can happen if the service is felt to be inadequate.

The level of satisfaction with health services is subjective and is influenced by many factors, including the service provider and the consumer (Singh & Sirdeshmukh, 2000; Tanner et al., 2020). The service provider factor consists of medical and non-medical aspects (Moghadasi et al., 2022). Factors of customers are influenced by age, gender, education, and others (Chakraborty & Paul, 2022; El Chaarani & Raimi, 2022). The customer satisfaction is influenced by the customer's background, social position, economic level, culture, education, age, and gender (Ayyildiz et al., 2022; Yang & Xia, 2022).

The regional public hospital (RSUD) of Arjawinangun is one of the hospitals in Cirebon Regency, West Java, Indonesia. The hospital implemented BPJS (Social Security Administrator) in April 2014. The number of BPJS patient visits at the RSUD of Arjawinangun in 2019 was 26,785; in 2020, it was 33,655. The increasing number of BPJS patient visits at the RSUD of Arjawinangun shows the ease of access to health services. However, the problem that arises later is the number of patients who demand to queue for a long time at the registration, examination, and drug collection counters. The author encountered this

incident directly when conducting a preliminary study in January 2021 through interviews with BPJS patients, getting the result that patients using BPJS 4 out of 7 said the services provided by the hospital were good, the service was not complicated, it was easy to get referrals. 3 out of 7 said they were uncomfortable with young doctors, had to queue for a long time at the examination counter and take medicine, and were uncomfortable during examinations because there was no limit between one doctor and another. The increase in patient visits in 2019 and 2020 challenges health service providers. The increase in patients must still pay attention to the quality of services provided, considering that hospitals are health facilities widely trusted by the surrounding community.

In addition, every hospital must have limitations. A competitive market, of course, only allows market players who also have competitive values. Like most hospitals that run business processes, RSUD of Arjawinangun must also be able to finance itself. The business process of providing the best service and getting the best financing is closely interrelated. On the one hand, the hospital must provide the best service to attract consumers so that they get the best income to finance themselves.

On the other hand, the best financing must be provided to the best service. Hospitals are sellers of services, and the main thing of the best service is to provide satisfaction to customers or patients to provide added value for customers to continue using the service on other occasions as well as promotional value for hospitals by other customers. It is just that at the RSUD of Arjawinangun, the service performance has only partially run optimally. One indication is from the occupancy rate or bed usage or, in other terms, the Bed Occupancy Ratio (BOR), which is still around 55% in 2019. This condition is still far from the BOR. The ideal range is 60-85%. This 30% BOR is undoubtedly a problem for the performance of the RSUD, mainly when it is associated with patient or customer satisfaction, especially in (2020) the BOR has dropped to 50%. Considering these conditions, it is necessary to conduct research to improve hospital performance. It can analyze various data and information about hospital business processes, such as demand and community needs for quality health services, including the level of satisfaction of patients/customers who have used hospital services.

METHOD

The associative quantitative method was employed in this study to examine the interaction or relationship between two or more variables (Pratomo & Kuswati, 2022). This research will be conducted at the RSUD of Arjawinangun of Outpatient Installation from November 2021 and with a population of outpatients. The sampling technique used is Accidental Sampling, which is based on the factor of spontaneity, meaning anyone who accidentally meets the researcher and according to the characteristics of the research respondents. This research is to find out the factors related to patient satisfaction at the Outpatient Installation of RSUD of Arjawinangun, Cirebon Regency, West Java, Indonesia, in 2021

RESULTS

Table 1. Frequency Distribution by Membership Status

Membership Status	Frequency (n)	Percentage (%)
PBI	34	30.9
Non PBI	76	69.1
Total	110	100

The above shows the non-PBI membership status is more dominant (69.1%).

Table 2. Frequency Distribution based on Membership Length

Length of Membership Min-max	Mean	Median	SD	95% CI
2 months – 38 months	27.29	36	12.15	24.9% - 29.59 %

Based on table 2 above, it can be seen that the average length of patient membership at the RSUD Arjawinangun is around 27 months, where the latest patient membership is 2 months, and the longest is 38 months. 95% of researchers believe it is in the range of 24.9 - 29.59 months with a standard deviation of 12.15.

Table 3. Frequency Distribution based on Patient Satisfaction

Patient Satisfaction	Frequency (n)	Percentage (%)
Less satisfy	61	55.5
Very satisfy	49	45.5
Total	110	100

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Table 3 above shows that patients who are less satisfied get more dominant satisfaction (55.5%).

Table 4. Relationship between Membership Status and BPJS Patient Satisfaction

Membership Status	Less Satisfy		Very Satisfy		Total		*p*	r
	n	%	n	%	n	%		
PBI	15	44.1	19	55.9	34	100	0.112	-0.153
Non PBI	46	60.5	30	39.5	76	100		
Total	51	55.5	49	45.5	110	100		

Table 4 above shows that 76 respondents (100%) had BPJS Non-PBI membership status, 46 people (60.5%) felt unsatisfactory and 30 people (39.5%) felt very satisfied. The results of the Spearman Correlation test obtained p value = 0.112, where p value > 0.05 which means there is no significant relationship between participation status and patient satisfaction. The correlation coefficient value is -0.153, which means that there is a tendency for an unsatisfactory relationship.

Table 5. Relationship between Length of Membership and BPJS Patient Satisfaction

Patient Satisfaction	Length of Membership						*p*	r
	Min-Max	Mean	Median	SD	95 % CI	Total		
Less satisfy	2 – 38 months	26.33	26.00	11.433	23.40%-29.26%	61	0.302	0.099
Very satisfy	2 – 38 months	28.49	36.00	13.007	28.75%-32.23%	49		

Table 5 above shows that 61 people (100%) were dissatisfied with the average length of patient membership which was around 26 months with the latest membership being 3 months and the longest being 38 months. The results of the Spearman Correlation test obtained p value = 0.302, where p value > 0.05, which means that there is no significant relationship between the length of membership and patient satisfaction. The correlation coefficient value is 0.099, which means that there is a tendency for a very satisfying relationship.

DISCUSSION

The results showed that the number of non-PBI respondents was greater than that of PBI: 76 people (69.1%). The analysis results show that the average length of patient membership in RSUD of Arjawinangun is around 27 months. Respondents with the lowest length of membership were 2 months, and the highest length of membership was 38 months with a median of 36 months. The analysis results related to patient satisfaction, 55.5% said they were not satisfied, and 45.5% said they were very satisfied.

Relationship between Membership Status and BPJS Patient Satisfaction

The analysis using the Spearman correlation showed no relationship between membership status and patient satisfaction with services (p = 0.112 r = -0.153). However, there is a tendency for a negative relationship, meaning that more respondents with non-PBI membership status feel dissatisfied with the service because the expected value is greater than the reality they receive. Yıldız & Erdoğmuş (2004) suggests that the insurer feels more dissatisfied than the insured because the insurer has an obligation to pay and tends to demand better service.

While filling out the questionnaire, the researchers found several non-PBI patients who complained about slow and long service, full registration counters, and even some respondents who said, "I pay on time for BPJS every month, but the service is long and not on time". The case is different with Contribution Assistance Recipient (PBI) patients who feel more satisfied; usually, they are treated with the status of general patients with fast but paid services. Now they are treated with status as BPJS PBI patients with long services even though they are not paid.

Relationship between Length of Membership and BPJS Patient Satisfaction

The analysis using the Spearman correlation showed no relationship between the length of membership and patient satisfaction with services (p = 0.302 r = 0.099). However, there is a tendency for a positive relationship, meaning that respondents with an average membership length of 26 months are more highly satisfied with the service because the actual value received is greater than expected. There are usually few demands for a more extended membership period because they already understand the service, which affects their satisfaction. Vice versa in old patients with new membership.

CONCLUSION

The results showed that the number of respondents who were non-PBI was more than PBI, as many as 76 people (69.1%). The analysis results show that the average length of patient membership in RSUD of Arjawinangun is about 27 months. Respondents

with the lowest length of membership were 2 months, and the highest length of membership was 38 months with a median of 36 months. The results of the analysis related to patient satisfaction 55.5% said they were not satisfied. There is no relationship between membership status and patient satisfaction with services (p = 0.112 r = -0.153). However, there is a tendency for a negative relationship. There is no relationship between the length of membership and patient satisfaction with services (p = 0.302 r = 0.099). However, there is a tendency for a positive relationship.

ACKNOWLEDGMENT

The authors would like to thank the Chairperson of STIKes Cirebon for supporting this research.

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