# The Influence of BPJS Service Quality on Community Social Strata at the Central Hospital Prof. Dr. I. G. N. G Ngoerah in Bali Province

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| Article Info | Abstract |
|---|---|
| | This research aims to identify the impact of the quality of BPJS Health services at Prof.Dr.I.G.N.G Ngoerah Central Hospital on patient satisfaction, with a focus on various social strata of the community utilizing the services at the hospital. This type of research is quantitative research using a questionnaire with Likert scale measurement. The findings of this research reveal that the quality of BPJS Health services rated into the "good" category with a score of 66%. Patient satisfaction also rated into the "good" category, with a score of 64%. The influence of the service quality variable on BPJS patient satisfaction at Prof.Dr.I.G.N.G Ngoerah Central Hospital is 80.7%, categorized as "very good." Different social strata of the community experience varying impacts of service quality, but an overall improvement in service quality can enhance patient satisfaction comprehensively. |
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| Info Article | Abstrak |
| | Penelitian ini bertujuan untuk mengidentifikasi pengaruh kualitas pelayanan BPJS Kesehatan di Rumah Sakit Umum Pusat Prof.Dr.I.G.N.G Ngoerah terhadap kepuasan pasien, dengan fokus pada berbagai strata sosial masyarakat yang menggunakan layanan di rumah sakit tersebut. Jenis penelitian ini adalah penelitian kuantitatif dengan teknik pengumpulan data menggunakan kuesioner dengan skala pengukuran *Likert*. Hasil penelitian ini menunjukkan bahwa kualitas pelayanan BPJS Kesehatan tergolong kategori baik dengan nilai sebesar 66%. Kepuasan pasien tergolong kategori baik dengan nilai sebesar 64%. Pengaruh antara variabel kualitas pelayanan terhadap variabel kepuasan pasien BPJS di Rumah Sakit Umum Pusat Prof.Dr.I.G.N.G Ngoerah sebesar 80.7% atau kategori sangat baik. Berbagai strata sosial masyarakat merasakan dampak kualitas pelayanan yang berbeda, namun peningkatan kualitas layanan secara keseluruhan dapat meningkatkan kepuasan pasien secara menyeluruh |
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# 1. INTRODUCTION

Health is the main thing that must be owned by every community in the country to achieve a sustainable life. Every local government is obliged to provide facilities and infrastructure as a form of health support to create a prosperous society. Therefore, changes in health services are basically the main capital of human resources to obtain public welfare, because health is the main cause of public welfare that the government wants to realize, then health is certainly the main interest of the government as a manager of public services.

Service quality must start with good performance so that people can get what they need and achieve a level of satisfaction with the community, as well as a positive perception of service quality. As a party that buys and consumes services, the community that receives services becomes a benchmark for the quality of services provided by the local government and the company concerned.

As a party that provides services, the satisfaction of service users (patients) is the main goal that must be achieved by every hospital. Patient satisfaction is the benchmark of success

of every hospital, with its expectations (Kotler, 2007). So, to increase patient satisfaction, especially BPJS patients, it can be created through good quality service by medical personnel.

Since the enactment of the regulation on the Social Security Organizing Agency (BPJS) Health which functions to provide health care insurance for all Indonesian people began to run since January 1, 2014, it has made services seem slow and selective, in accordance with the social strata of the community. Although the class of infrastructure facilities that will be obtained by the community is differentiated, the community will certainly be more critical in assessing how hospital services receive BPJS patients with different classes.

Based on the services at the Central Hospital Prof.Dr.I.G.N.G Ngoerah there are services that have not been in accordance with the wishes of the community, due to hospital officers who arrive late, lack of medical equipment facilities so that patients are referred to other hospitals, and discriminatory attitudes towards patients using BPJS. Problems related to patient satisfaction that must be considered by health care providers are the quality of service by looking at physical facilities and infrastructure, the ability to provide health services, speed in providing services, assurance and certainty and empathy given to patients so as to create patient satisfaction. However, currently the contribution of health services, especially those using BPJS, not only looks at the final results that provide healing, but they also assess the results seen and felt during the treatment process. Related to these issues, then health care providers should not act as they wish, but must be able to create trust, service and good commitment for health service users so that it has an impact on satisfaction.

## 2. RESEARCH METHODS

This type of research is Quantitative, which is data used to examine the population or sample, namely ordinal data obtained from the results of questionnaires. This type of research is a type of descriptive research, because researchers obtain data through direct observation (observation), questionnaires (questionnaires) and documentation to obtain information about how well the Effect of BPJS Service Quality on Community Social Strata at the Central Hospital Prof.Dr.I.G.N.G Ngoerah in Bali Province.

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The population in this study was all outpatients of BPJS participants who were registered to receive services at the Prof. Ngoerah Central Hospital as many as 13500 people for (2) two months. To determine the required number of samples, researchers use the slovin formula.

Slovin formula : $\mathbf{n = N/(1+N.(e)^2)}$

Information:

n = Number of samples

N = Total Population

e = Error Tolerance Limit (12%)

**(Sujarweni and Wiratna, 2014:16)**

Then:n = $13500/(1+13500.( 0.12)^2)$

n = 13500/(1+13500.( 0,0144)

n = 13500/(1+194.4)

n = 13500/195.4 = 69.08

n= 70 patients (rounding up)

The samples in this study were patients participating in BPJS who sought treatment at the Central Hospital Prof.Dr.I.G.N.G Ngoerah in Bali Province, totaling 70 people. The sampling technique  carried out by researchers is using *nonprobability sampling*. And the determination of the sample is carried out using incidental sampling techniques where the determination of sampling based on chance, that is, anyone who coincidentally or incidentally meets the researcher can be used as a sample, if it is considered that the person who happened to be met is suitable as a source of data.

## 3. RESULTS AND DISCUSSION

In this study, a validity test was carried out to determine the suitability of the questionnaire between the lamp and the respondent, where the validity test was taken by comparing the r-calculate value. If the calculated value is greater than rtable, the questionnaire is valid, while if the calculated value is smaller than rtable, it is invalid. The results of the validity test are stiffened by comparing rcalculate with rtabel, where all indiactors in this study are larger than rtabel. The test results are as follows:

**Service Quality Validity Table**

| No. | r calculate | r table | Information |
|---|---|---|---|
| 1 | 0,755 | 0,235 | Valid |
| 2 | 0,547 | 0,235 | Valid |
| 3 | 0,612 | 0,235 | Valid |
| 4 | 0,706 | 0,235 | Valid |
| 5 | 0,675 | 0,235 | Valid |
| 6 | 0,716 | 0,235 | Valid |
| 7 | 0,712 | 0,235 | Valid |
| 8 | 0,743 | 0,235 | Valid |
| 9 | 0,619 | 0,235 | Valid |
| 10 | 0,665 | 0,235 | Valid |
| 11 | 0,748 | 0,235 | Valid |
| 12 | 0,699 | 0,235 | Valid |
| 13 | 0,775 | 0,235 | Valid |
| 14 | 0,761 | 0,235 | Valid |
| 15 | 0,700 | 0,235 | Valid |
| 16 | 0,653 | 0,235 | Valid |
| 17 | 0,606 | 0,235 | Valid |
| 18 | 0,657 | 0,235 | Valid |
| 19 | 0,694 | 0,235 | Valid |
| 20 | 0,690 | 0,235 | Valid |
| 21 | 0,736 | 0,235 | Valid |
| 22 | 0,698 | 0,235 | Valid |
| 23 | 0,640 | 0,235 | Valid |
| 24 | 0,721 | 0,235 | Valid |
| 25 | 0,682 | 0,235 | Valid |

Source : SPSS data processing results, June 2019

**Patient Satisfaction Validity Table**

| No. | r calculate | r table | Information |
|-----|-------------|---------|-------------|
| 1 | 0,685 | 0,235 | Valid |
| 2 | 0,713 | 0,235 | Valid |
| 3 | 0,560 | 0,235 | Valid |
| 4 | 0,542 | 0,235 | Valid |
| 5 | 0,661 | 0,235 | Valid |
| 6 | 0,726 | 0,235 | Valid |
| 7 | 0,660 | 0,235 | Valid |
| 8 | 0,742 | 0,235 | Valid |
| 9 | 0,693 | 0,235 | Valid |
| 10 | 0,732 | 0,235 | Valid |
| 11 | 0,697 | 0,235 | Valid |
| 12 | 0,725 | 0,235 | Valid |
| 13 | 0,712 | 0,235 | Valid |
| 14 | 0,785 | 0,235 | Valid |
| 15 | 0,790 | 0,235 | Valid |

Source : SPSS data processing results, June 2019

After conducting a validity test, the next stage is to conduct a reliability test with the aim of seeing whether the questionnaire still has consistency. Reliability testing is done by looking at the limit using *Cronbach's Alpha*, which is where a factor is declared *Reliable* if the alpha coefficient is greater than 0.60. The following are the measures of dimensional reliability/indicators contained in the study:

**Service Quality Variable Reliability Table**

| Reliability Statistics | |
|-------------------------|---|
| Cronbach's Alpha | N of Items |
| .733 | 25 |

Source : Data processing results, June 2019

Based on the table above, it can be seen that the value of the Alpha coefficient is 0.733. A variable is said to be reliable if its alpha value is more than 0.60. So this can be interpreted as 0.733> of 0.60 so that the instrument is reliable.

**Table of Variable Religibility of Patient Satisfaction**

| Reliability Statistics | |
|-------------------------|---|
| Cronbach's Alpha | N of Items |
| .716 | 15 |

Source : SPSS data processing results, June 2019

Based on the table above, it can be seen that the value of the Alpha coefficient is 0.716. A variable is said to be reliable if its alpha value is more than 0.60. So this can be interpreted as 0.716> from 0.60 so that the instrument is reliable.

**Table Coeffisients**

**Coefficientsa**

| Type | Unstandardized Coefficients | | Standardized Coefficients | T | Sig. |
|------|------|------|------|------|------|
| | B | Std. Error | Beta | | |
| 1 (Constant) | 12.764 | 8.277 | | 1.54 | .128 |

| | | | .607 | 2 | |
|---|---|---|---|---|---|
| Kualitas_Pelay anan | .476 | .076 | | 6.29 4 | .000 |

a. Dependent Variable: Kepuasan_Pasien

Based on the results of data processing seen in table 4.9 in the *column Unstandardized* coefficients part B, a multiple linear regression equation model is obtained as follows:

$$Y = 12.764 + 0.476 X$$

The constant of 12,764 states that if there is no Service Quality variable (X) then patient satisfaction (Y) obtained is 12,764 The regression coefficient value of the Service Quality variable (X) is 0.476 meaning that an increase of 1 unit in the Service Quality variable (X) will have an influence on increasing the Visitor Satisfaction variable (Y) by 0.476.

**Model Summary *Table***

**Model Summaryb**

| Type | R | R Square | Adjusted R Square | Std. Error of the Estimate | Durbin-Watson |
|---|---|---|---|---|---|
| 1 | 807a | .763 | .759 | 3.706 | 1.756 |

a. Predictors: (Constant), Kualitas_Pelayanan

b. Dependent Variable: Kepuasan_Pasien

From the *Model Summary* table above, we can see the results of the regression analysis as a whole show an R of 0.807 which means that Service Quality has a strong influence of 80.7%. is said to be strong, because the number is above 0.5 or above 50% while the R Square value or detemination coefficient value is 0.763 which means that the dependent variable (patient satisfaction) can be explained by the independent variable (quality of service) of 76.3% and the remaining 23.7% (100% - 76.3%) can be explained by other factors not included in this study. Then the coefficient of determination (R2) is 0.759 or 75.9% of the influence of the independent variable on the dependent variable.

## 4. CONCLUSION

The results of this study show that the quality of BPJS Health services is classified as a good category with a value of 66%. Patient satisfaction is classified as good category with a value of 64%. The influence between service quality variables on BPJS patient satisfaction variables at the Central Hospital Prof.Dr.I.G.N.G Ngoerah was 80.7% or the very good category. Different social strata of society feel the impact of different service quality, but improving overall service quality can improve overall patient satisfaction.

Based on the discussion and conclusions above, suggestions that can be given for the quality of service at the Central Hospital Prof.Dr.I.G.N.G Ngoerah need to be maintained and continue to be improved in terms of physical facilities, completeness of medical equipment and friendliness and skills of officers must be improved for the comfort of patients.

BPJS Patient Satisfaction at the Central Hospital Prof.Dr.I.G.N.G Ngoerah needs to be maintained and continuously improved in terms of recommending that BPJS user services at the Central Hospital Prof.Dr.I.G.N.G Ngoerah are very good.

## 5. BIBLIOGRAPHY

Abidin. 2014. "*Pengaruh Kualitas Pelayanan BPJS Kesehatan Terhadap Kepuasan Pasien Di Puskesmas Cempae Kota Parepare*". Skripsi: Fakultas Kesehatan Masyarakat, Universitas Hasanuddin.

Arikunto, S. 2010. *Prosedur Penelitian Suatu Pendekatan praktik*. Jakarta:Rineke Cipta.

Brata, Atep Adya. 2003. *Dasar-DasarPelayanan Prima, PersiapanMemebangun Budaya Pelayanan Prima Untuk Meningkatkan Kepuasandan Loyalitas Pelanggan*. Jakarta:

Elex  Media Kompetindo.

Dewi, Mutia. 2016. "*Pengaruh Kualitas Pelayanan terhadap  Kepuasan Pasien Pengguna BPJS pada Rumah Sakit Rehabilitasi Medik Kabupaten Aceh Timur*". Skripsi: Fakultas Ekonomi, Universitas Samudra.

Dwiyanto, Agus. 2011. *Manajemen Pelayanan Publik (Peduli, Inklusif, dan Kolaboratif.* Yogyakarta: Gadjah Mada University Press

Fadilah, Putra. 2001. *Paradigma Kritis dalam Studi kebijakan Publik*, Yogyakarta: PustakaPelajar Offset.

Haedar.2016. "*Pengaruh Kualitas Layanan Terhadap Kepuasan Pasien pada Rumah Sakit Umum Daerah Pangkep*". Skripsi: Fakultas Ekonomi, Universitas Hasanuddin.

Juliantara, Dadang. 2005. *PeningkatanKapasitasPemerintah DaerahDalamPeningkatan*. Yogyakarta: Pembaruan.

JurnalPendayagunaanAparatur Negara. 2012. *BirokrasiBersih, Kompeten, danMelayani*. Edisi 2 Tahun 2012, Jakarta.

Kotlerdan Keller, 2007. *ManajemenPemasaran*, Edisi 12, Jilid 1. Jakarta:PT.Indeks.

Keputusan Menteri Pendayagunaan Aparatur Negara Nomor 63 Tahun 2003 tentang Pedoman Umum Penyelenggara Pelayanan Publik.

Keputusan Menteri Pendayagunaan Aparatur Negara Nomor 25 Tahun 2009 tentang Pelayanan Publik.

Lupiyoadi, Hamdani. 2006. *Manajemen Pemasan Jasa Edisi Kedua*. Jakarta: Penerbit Salemba Empat.

Moenir. 2001. *Manajemen Pelayanan Umum di Indonesia*. Jakarta: PT. Bumi Aksara.

Sinambela, Litjan Poltak, dkk. 2011. *Reforemasi Pelayanan Publik: Teori,Kebijakan, dan Implementasi*. Jakarta: PT Bumi Aksara.

Sujarweni, V. Wiratna. 2003. *Metode Penelitian: Lengkap, praktis, danMudah Dipahami*. Yogyakarta: pustaka Baru Press.

Supriatna, Tjahya. 2003. *Administrasi Birokrasi dan Pelayanan Publik*. Jakarta: Nimas Multima.

Sugiyono. 2004. Metode Penelitian: Bandung: Alfabeta

Tjiptono. 2012. *Service Manajemen Mewujudkan Layanan Prima*. Yogyakarta: CV Andi Offset.

Tjiptono. 2004. *Manajemen Jasa*, *Edisi Pertama.* Yogyakarta: CV AndyOffset.

Undang–Undang Republik Indonesia Nomor 24 Tahun 2011 tentang Badan Penyelenggara Jaminan Sosial (BPJS).

Waluyo. L. 2007. *Mikrobiologi Umum*. Malang: UMM Press