

Analisis implementasi program rujuk balik peserta jaminan kesehatan nasional di Rumah Sakit Umum Daerah Sanjiwani Gianyar Bali tahun 2017 = Implementation analysis of referral back program participants of national health insurance in Hospital Sanjiwani Gianyar Bali 2017

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Abstrak

Pemerintah Indonesia bertanggung jawab atas pelaksanaan jaminan kesehatan masyarakat melalui Jaminan Kesehatan Nasional (JKN). Pelayanan kesehatan dalam program JKN diberikan secara berjenjang, efektif dan efisien dengan menerapkan sistem kendali mutu dan kendali biaya. Peserta JKN diberi identitas tunggal oleh Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan dan dalam pelaksanaannya dilakukan dengan sistem rujukan berjenjang. Tingginya rujukan dapat menyebabkan penumpukan pasien di rumah sakit sehingga menyebabkan lamanya waktu tunggu. Guna dapat meningkatkan kualitas layanan kesehatan dilakukan dengan optimalisasi Program Rujukan Balik (PRB) pasien kronis ke fasilitas layanan primer. Belum optimalnya implementasi PRB di RSUD Sanjiwani maka penelitian ini bertujuan mengidentifikasi faktor-faktor penentu yang berhubungan dengan optimalisasi implementasi PRB di RSUD Sanjiwani, yaitu faktor-faktor penentu yang bersumber dari pasien, penyedia layanan serta penyedia pembiayaan dan kebijakan. Penelitian ini menggunakan rancangan deskriptif dengan pendekatan kualitatif dengan metode analisa yang digunakan yakni konten analisis berdasarkan triangulasi metode, triangulasi sumber data dan triangulasi teori. Data diperoleh dengan mewawancarai pasien, sumber dari RSUD, dokter Fasilitas Kesehatan Tingkat Pertama (FKTP), Dinas Kesehatan, BPJS Kesehatan serta apotek jejaring BPJS. Hasil penelitian ini bahwa pemahaman dokter spesialis/sub spesialis tentang PRB belum maksimal, belum ada komunikasi antara RSUD dengan FKTP dan apotik jejaring BPJS, sosialisasi dari BPJS belum melibatkan semua petugas, serta masih kurangnya pengetahuan pasien tentang PRB.

.....The Indonesian Government has responsible for implementation of community health insurance through National Health Insurance (NHI). Health service in NHI program is given stages, effectively and efficiently with carry quality and cost control. Insurance participants are given a single identity by The Social Security Agency (BPJS) of Health and followed stages referral system. The ineffective implementation of stages referral system resulting in the highest refferal which can be seen in accumulation of the patients in the hospital. Accumulation of patients can lead to increased waiting time and reduced of time for consultation which decrease quality of heath services. Referral Back Program (RBP) to Primary Health Services in is needed to control this accumulation of patients and make healt services become better. RBP must be done to patient with chronic dissease if the patient already stabilized.

The aims to know identification of determinants factor optimizing the implementation of RBP in Sanjiwani Hospital. This study is used a qualitative approach with the method of analysis used content analysis based on triangulation method, triangulation of data sources, and triangulation theory. Data is got by interviewing people who associated with RBP which are specialist who threat in poly. Directur of Sanjiwani Hospital, Primary care Services, BPJS, Pharmacist, Head of Health Departement in Gianyar and patients whit cronic desiases.

The result from interviewing patient knowledge about RBP is low understanding of RBP by medical

praktitioner does not been maximal, no communication between Sanjiwani Hospital with Primary Health Services and pharmacy network BPJS. The Conclusion In Sanjiwani Hospital, RBP implementation is not optimal From National Health Insurance's role all patient with chronic disease in stable condition must did referral back to primary health care service. The recommendation is given to optimize the implementation of the RBP in Sanjiwani Hospital.