

Analisis keakuratan diagnosis dan coding kasus seksio sesarea kelas III BPJS kesehatan terhadap selisih klaim INA CBGs RSUPN Dr. Cipto Mangunkusumo tahun 2016 = Accuracy diagnosis and coding of third class caesarean section of BPJS with INA CBGs claims at RSUPN dr. Cipto Mangunkusumo in 2016 / Imam Rahmadi

Imam Rahmadi, author

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Abstrak

ABSTRAK

Tujuan Penelitian: Untuk melihat keakuratan koding diagnosis dan prosedur medis serta faktor-faktor yang mempengaruhi terjadinya perbedaan klaim INA CBGs RSUPN Dr. Cipto Mangunkusumo.

Metode: Deskriptif observasional, simple random sampling, perhitungan kuantitatif menggunakan data retrospektif, data resume medis elektronik pasien.

Hasil: Didapatkan 43% coding diagnosis utama oleh dokter tidak sesuai. 62% koding diagnosis sekunder DPJP tidak sesuai, namun mengalami perbaikan setelah dilakukan reseleksi dan entry data oleh coder sebesar 97%. Kesesuaian coding prosedur medis sebesar 98% dan 100% grouper yang sesuai, tapi masih ditemukan kesalahan coding dan severity level sebesar 27,7%. Akibat ketidaksesuaian coding dan grouping severity level menimbulkan kerugian Rp 584.099 per kasus pada tahun 2016, dan bila dihitung berdasarkan biaya riil terhadap klaim INA CBGs maka didapatkan selisih negatif yang jauh lebih besar yaitu Rp 17.263.241 per kasus.

Kesimpulan: Penyebab kerugian klaim RSUPN Dr. Cipto Mangunkusumo diakibatkan ketidakcermatan dokter dalam penulisan resume medis elektronik dan coding, serta diperburuk oleh ketidaktelitian coder dalam melakukan reseleksi dan prosedur entry coding.

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ABSTRACT

Objective : To know the accuracy of diagnostic coding, medical procedures and factors affecting the difference in claims of hospital INA CBGs and BPJS Health

Methods: observational descriptive, simple random sampling methode,retrospective data sourced from patient's electronic medical resume .

Results: 43% of the principal diagnosis codes were not appropriate. 62% of secondary diagnosis codes by Doctor are not appropriate, but improved to 97% after the reselection and data entry by the coder. The suitability of medical procedures coding reaches 98% and 100% accuracy of diagnosis grouping. However, there is still 27.7% cases of difference in severity level due to mismatch of coding and causing potential loss of Rp 584.099 IDR each case during period of 2016, If calculated based on the ratio of hospital real cost tariff to the INA CBGs claims, there will be a much larger negative difference of 17.263.241 IDR each case. Conclusion: Causes of negative claims (loss) of RSUPN Dr. Cipto Mangunkusumo with BPJS payments due to incompleteness in electronic medical resume input and bad coding standard, and continued with the coder s inaccuracy in reselection diagnosis and data entry that causes potential losses.