

# Dampak Kebijakan Kapitasi Berbasis Kinerja terhadap Pelayanan Kesehatan Peserta Penderita Diabetes Mellitus dalam Program Jaminan Kesehatan Nasional = Impact of Performance-Based Capitation Policy on Health Services for Diabetes Mellitus Participants in the National Health Insurance Program

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## Abstrak

Kenaikan jumlah penderita penyakit Diabetes Mellitus (DM) termasuk beban biaya pelayanannya mendorong penerapan kebijakan untuk melakukan pencegahan sekunder di pelayanan Tingkat pertama termasuk melalui penerapan kebijakan Kapitasi Berbasis Kinerja (KBK). Studi ini melakukan evaluasi terhadap kebijakan KBK terhadap pola pelayanan Kesehatan pasien DM baik di Fasilitas Kesehatan Tingkat Pertama (FKTP) dan Fasilitas Kesehatan Rujukan Tingkat Lanjutan, menggunakan metode Regression Discontinuity in Time (RDIT) terhadap Data Sampel BPJS Kesehatan 2015-2020. Ditemukan adanya kenaikan pada pemanfaatan pelayanan Kesehatan di FKTP dengan tingkat kepercayaan 99% dan 95%, namun tidak diikuti dengan tren penurunan rujukan pelayanan Kesehatan dari FKTP ke FKRTL serta penurunan tingkat pelayanan Kesehatan di FKRTL yang diharapkan terjadi paska penerapan KBK. Temuan ini mendukung literatur terkait penerapan konsep pay for performance dalam pelayanan Kesehatan Tingkat pertama dan dampaknya pada perbaikan pelayanan Kesehatan Tingkat pertama terkait pelayanan DM. Perbaikan kebijakan KBK perlu dilakukan dalam penetapan indikator, target serta kebijakan pendukung lainnya dalam pencapaian kinerja FKTP yang didasarkan pada temuan pada pengumpulan data secara kualitatif melalui wawancara mendalam.

.....The increase in number of people suffering from Diabetes Mellitus, including the burden of service costs, has encouraged the implementation of policies to carry out secondary prevention in primary healthcare level, including to implement Performance Based Capitation (KBK) policy. This study aim to evaluate the KBK policy implemented by BPJS Health on health services for Diabetes Mellitus patients both in Primary Health Care Facilities and Referral Health Facilities, using the Regression Discontinuity in Time (RDIT) method on BPJS Health Sample Data 2015-2020. It was found that there was a slight increase in the level of utilization of Health services at FKTP with confidence levels of 99% and 95%, but this was not followed by a trend of decreasing referrals for Health services. This increase is not accompanied by a decrease in the level of health services at FKRTL which was expected to occur after the implementation of the KBK. These findings support the literature related to the application of the pay for performance concept in first level health services and its impact on improving first level health services related to Diabetes Mellitus services. Apart from that, the findings also encourage the need to improve the KBK policy both in determining indicators, targets and other supporting policies in achieving FKTP performance, based on qualitative data findings through in depth interview.