

Hubungan sistem pembayaran paket pelayanan esensial(PPE) dan inas CBG'S terhadap besaran klaim demam berdarah dengue dan apendiktomi di 4 RSUD Provinsi DKI Jakarta = Relation between (PPE) and INA CBG'S payment system to quantity claim of dengue haemmoragic fever and appendictomy in 4 Regional Public Hospitals of DKI Jakarta's Province

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Abstrak

[ABSTRAK

Guna membuktikan, apakah terjadi efisiensi dalam pembiayaan kesehatan, maka dilakukan analisa terhadap hubungan sistem pembayaran dengan besaran klaim pada pasien Rawat Inap kasus Demam Berdarah Dengue dan Apendiktomi di 4 (empat) RSUD di DKI Jakarta. Penelitian ini, berupa penelitian evaluasi, dengan membandingkan hasil statistik besaran klaim kasus DBD dan Apendiktomi Program KJS dan Program JPK Gakin. Penelitian menggunakan 928 sampel, terdiri dari 329 sampel Program JPK Gakin, dan sisanya sebanyak 599 sampel. Total kasus Apendiktomi sebanyak 454 sampel, terbagi menjadi sistem PPE sebanyak 201, dan sistem INA CBG?s sebanyak 253 sampel. Sedangkan pada kasus Demam Berdarah Dengue sebanyak 474 sampel, yang terdiri dari 128 sampel menggunakan sistem PPE, dan sisanya sebanyak 346 sampel menggunakan sistem INA CBG?s. Penelitian dilakukan di UP Jamkesda dengan menggunakan data sekunder, berupa rekapan klaim Rawat Inap kasus DBD dan Apendiktomi yang diajukan oleh 4 (empat) Rumah Sakit Umum Daerah. Adapun nama ? nama 4 (empat) RSUD tersebut yaitu RSUD Budhi Asih, RSUD Koja, RSUD Cengkareng, dan RSUD Tarakan. Dari hasil analisa bivariat didapatkan terjadi penurunan rata ? rata besaran klaim kasus Apendiktomi pada sistem INA CBG?s, hasil uji T Independen menyatakan ada perbedaan signifikan rata ? rata besaran klaim antara sistem PPE dan INA CBG?s. Sedangkan pada kasus Demam Berdarah Dengue, dari hasil uji statistik didapatkan nilai $p = 0,692$, berarti pada alpha 5 % terlihat tidak ada perbedaan yang signifikan antara sistem PPE dan INA CBG?s. Berarti pada kasus DBD, sistem INA CBG?s tidak lebih efektif dibandingkan dengan sistem PPE.

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ABSTRACT

To prove the efficiency in health financing, then analyzed the relation of payment system, with the amount claims in patients of hospitalization of DHF case and Apendiktomi at four hospitals in Jakarta. This research is a study to compare the results of statistical evaluation of the amount claims of DHF case and Apendictomy between KJS Programme and JPK Gakin program. This study used 928 samples, which are 329 samples of JPK Gakin program, and leftover 599 samples. Total cases of Apendictomy are 454 samples, wich are 201 of PPE system, 253 samples of INA CBG?s. Meanwhile, in cases of Dengue Haemorrhagic Fever are 474 samples, wich are 128 samples of PPE system, and 346 samples of the INA CBG?s. The study was conducted in UP

Jamkesda used secondary data, such as recap of inpatient claims and Apendiktomi dengue cases filed by four Regional Public Hospital. The Regional General Hospitals are Budhi Asih Hospital, Koja Hospital, Cengkareng Hospital and Tarakan Hospital.

From the analysis results of bivariate statistical, founded the decline in average amount of claims in the Apendictomy case of the INA CBG's system, but the result of the Independent T test revealed, there are significant difference in the average amount of claims between the PPE system and the INA CBG's. Meanwhile in the case of DHF Fever based on the results of statistical test, pvalue = 0.692. It means that at 5% alpha there are no significant difference between the PPE system and the INA CBG's. Therefore, in the case of dengue High fever, the INA CBG's is not more effective than PPE system.;To prove the efficiency in health financing, then analyzed the relation of payment system, with the amount claims in patients of hospitalization of DHF case and Apendiktomi at four hospitals in Jakarta. This research is a study to compare the results of statistical evaluation of the amount claims of DHF case and

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