

## Optimalisasi sistem pelayanan kesehatan berjenjang pada program kartu jakarta sehat

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### Abstrak

Peningkatan jumlah kunjungan pasien ke rumah sakit pada awal masa pemberlakuan program Kartu Jakarta Sehat (KJS) disebabkan belum optimalnya sistem pelayanan kesehatan berjenjang. PT Asuransi Kesehatan (PT Askes) bersama Dinas Kesehatan DKI Jakarta melakukan berbagai upaya dalam bentuk paket intervensi untuk mengoptimalkan sistem tersebut. Penelitian ini bertujuan untuk mengevaluasi efektivitas paket intervensi PT Askes dan Dinas Kesehatan DKI Jakarta dalam meningkatkan optimalisasi sistem rujukan pelayanan kesehatan. Penelitian ini menggunakan survei potong lintang dengan metode pengambilan sampel acak pada puskesmas di DKI Jakarta terhadap hasil intervensi PT Askes. Hasil intervensi diukur melalui wawancara pada kepala puskesmas atau petugas yang mewakili. Data dianalisis menggunakan tes statistik nonparametrik, yaitu uji Wilcoxon dan regresi Generalized Linear Model. Penelitian dilakukan pada bulan Oktober 2013 hingga Februari 2014. Terdapat perbedaan bermakna pada keempat indikator, terjadinya peningkatan kunjungan peserta KJS dipengaruhi oleh ketersediaan tempat tidur, jumlah peserta KJS terdaftar, intervensi dalam bentuk regulasi, serta persentase pengangguran terbuka. Meskipun ada perbedaan signifikan setelah dikelola PT Askes, hal ini belum cukup membentuk persepsi puskesmas untuk berpendapat bahwa PT Askes memiliki andil dalam mengoptimalkan sistem pelayanan kesehatan berjenjang pada program KJS.

*Increasing the number of patient visits to the hospital at the beginning of the implementation Healthy Jakarta Card (KJS) program was claimed to be associated with optimization of health care referral system. PT Asuransi Kesehatan (PT Askes) with the DKI Jakarta Department of Health Service made efforts to improve the optimalization that system. This study aimed to evaluate the effectiveness of intervention PT Askes's and DKI Jakarta Departement Of Health's packages in improving the optimization of health care referral system. This study used a cross sectional survey with a random sampling method in primary health centers in Jakarta related with the result of PT Askes's intervention package. The result of intervention were conducted by interview to the head of the primary health center or officer representing. Data were analyzed with nonparametric statistical tests, using the Wilcoxon test and Generalized Linear Regression Model. The study was conducted in October 2013 until February 2014. There were significant differences between the four indicators, an increase in visits KJS participants are influenced by the availability of beds, number of participants registered KJS, intervention in the regulation, and the percentage of open unemployment. Although there were significant differences after managed by PT Askes, these efforts were not enough to make primary health centers perception that PT Askes has contributed to the optimization of health care referral system in KJS program.*