

## Efektivitas biaya strategi dots directly observed treatment shortcourse program tuberkulosis di rumah sakit swasta Kota Depok tahun 2017-2018 = Cost Effectiveness of DOTS Strategy TB Program At private Hospital Depok City 2017-2018

Fikrotul Ulya, author

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Abstrak

**ABSTRAK**

Tesis ini membahas kemampuan mahasiswa Fakultas Psikologi UAngka penemuan kasus menurut Global tuberculosis Report 2016 sebesar 77 dan dikawasan Asia Tenggara sebesar 46,5 . Sedangkan di Indonesia mengalami titik stagnan dalam 5tahun terakhir di kisaran 32 - 33 kasus. Angka penemuan kasus TBC di Kota Depok tahun2016 baru tercapai 58 dari target cakupan. Sedangkan di Kota Bekasi, cakupannya sebesar62 . Sejak tahun 2014 dengan menggunakan strategi PPM Public Private Mix di Kota Depokmelibatkan fasyankes Fasilitas Pelayanan Kesehatan swasta dalam penanganan TBCmenggunakan metode DOTS Directly Observed Treatment Shortcourse. Saat ini, dari 4 RSswasta yang sudah bekerja sama menjangkau 18,7 kasus TBC di seluruh Kota Depok.Penelitian ini bertujuan untuk mengetahui efektivitas biaya penerapan strategi DOTS di RumahSakit swasta Kota Depok. Penelitian ini merupakan penelitian evaluasi ekonomi dengan denganmetode kohort retrospektif. Penelitian ini akan dilakukan pada bulan Oktober ndash; April 2018dengan melakukan study comparative antara 3 alternatif Cost Effectiveness Analysis , yaituPuskesmas yang menggunakan DOTS, RS DOTS dan RS Tanpa DOTS. Peneliti melakukanpenghitungan microcosting dari perspektif societal/masyarakat dengan menghitung biaya yangdikeluarkan oleh pasien dan provider pelayanan kesehatan. Output yang dipakai untuk mengukurpenanganan TBC adalah angka pengobatan lengkap Success Rate . Estimasi biaya berdasarantarif Rumah Sakit, harga pasar, serta wawancara dari petugas RS.Hasil penelitian dari 36 sampel per kelompok menunjukkan bahwa Success Rate dipuskesmas 86,1 , RS dengan DOTS sebesar 77.78 sedangkan yang non DOTS sebesar 63.89 . Penambahan biaya provider di puskesmas dan RS DOTS meningkatkan success rate. Biayasocietal penatalaksanaan TBC di puskesmas 42 dari biaya di RS swasta. Dari perhitunganACER Average Cost Effectiveness Ratio didapatkan bahwa RS yang melaksanakan strategiDOTS lebih cost effective, dengan nilai ACER di Puskesmas adalah Rp 1.948.284, RS DOTS Rp3.989.576 dan RS tanpa DOTS sebesar Rp 5.390.323. Untuk menaikkan 1 angka kesuksesanpengobatan membutuhkan biaya Rp 10.084.572 dengan melakukan intervensi program DOTS keRS Swasta. Analisis bivariat menyatakan bahwa terdapat perbedaan bermakna efektivitas biayaperspektif societal pada pengobatan TBC di puskesmas, RS dengan DOTS, dan RS tanpa DOTS .Keywords : Cost effectiveness analysis, DOTS, Fasyankes swasta, Success Rate, ACER, ICER

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**ABSTRACT**

According to Global Tuberculosis Report 2016, the number of TB cases 77 andSoutheast Asia cases 46.5. While Indonesia was at a stagnant point in the last 5 years in therange 32 33 of cases. Case Detection Rate 2016 at Depok City only reached 58 of targetcoverage. While at Bekasi, coverage of 62. Since the year 2014 by using strategies of PPM Public Private Mix in the Depok City involves private health service facility to

handling TB using DOTS Directly Observed Treatment Shortcourse. Currently, partnership between Depok Health District Office with 4 private hospitals can increase 18.7% of TB cases. The aim of this study is to determine the cost effectiveness of DOTS strategy implementation in Private Hospital. This research is a study of the economic evaluation with method a retrospective cohort study. This research will be conducted in October until April 2018 by doing a comparative study between 3 alternatives Cost Effectiveness Analysis, i.e. Public Health Care PHC Puskesmas, DOTS and Non DOTS Private Hospitals. Researchers did a microcosting from the perspective of societal by calculating the costs incurred by the patient and health care provider. Output measured by the number of complete treatment Success Rate. Cost estimation based on Hospital rates, market prices, and interviews of the officers of hospital. From 36 samples per group shows that the Success Rate at PHC is 86.1% DOTS hospital of 77.78% and non DOTS hospital of 63.89%. The addition cost providers PHC and DOTS hospital increase success rate. The cost of TB treatment in PHC 42% of costs in a private hospital. ACER Average Cost Effectiveness Ratio is obtained that the hospital which carry out the strategy of DOTS is more cost effective. ACER in PHC is Rp 1,948,284, DOTS Hospital Rp 3,989,576 and Non DOTS Hospital is Rp 5,390,323. To increase 1% success rate of TB treatment costs Rp 10,084,572 with intervention DOTS programs into a private hospital. Bivariate analysis stated that cost effectiveness societal perspectives on TB treatment between PHC, DOTS hospital and Non DOTS hospital has a significant difference. Keywords Cost effectiveness analysis, DOTS, Fasyankes swasta, Success Rate, ACER, ICER