

## Determinan variasi biaya sendiri (Out-of-pocket) pelayanan rawat inap peserta askes wajib di RSUD Kota Cilegon th.2004

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### Abstrak

POSTGRADUATE PROGRAM PUBLIC HEALTH SCIENCE STUDIES HEALTH ECONOMIC AND INSURANCE THESIS, August 2005 Roxanna Kuswandhani SELF-EXPENSE (OUT-OF-POCKET) VARIATION DETERMINANT OF IN-PATIENT SERVICES FOR COMPULSORY HEALTH INSURANCE MEMBERS IN CILEGON GENERAL HOSPITAL IN 2004 xv + 77 pages + 12 tables + 1 appendix ABSTRACT Based on the Government Regulation No. 69/91, PT (Persero) Askes is permitted to charge cost sharing to health insurance (Askes) members. The mistake in financing system implemented is that all premiums are carried on by the members. However, in practice, guarantees provided for the members are emphasized more on medical treatment and recovery by charging quite lots of cost sharing, though the services are delivered in Health Service Provider (PPK) net appointed. Consequently, civil servants still have to pay quite lots of self-expense (out-of-pocket). This causes chronic problem for social health insurance in Indonesia, which lead to complaints and blasphemies. Cilegon General Hospital implements health service tariff based on Cilegon Administrative Regulation. The tariff is higher than tariff packet released by PT (Persero) Askes based on a Joint Decree. To avoid more subsidies, compulsory health insurance members who utilize health services in the hospital have to pay by themselves (out-of-pocket) amounting the rest of health service tariff reduced by expense guaranteed by Askes plus Non-DPHO drug cost. This research was carried out in Cilegon General Hospital. The research object is Self-expense (Out-of-Pocket) Variation Determinants of In-Patient Services for Compulsory Health Insurance Members in Cilegon General Hospital in 2004. Data are from the 2004 in-patient register of compulsory health insurance members of Cilegon General Hospital, the 2004 compulsory health insurance member in-patient payment bill, at Cilegon General Hospital finance division, and the 2004 drug usage and prescription report of compulsory health insurance member in-patients of Cilegon General Hospital This research is an analytical survey using quantitative cross sectional approach. Dependent and independent variables are measured simultaneously. The result indicates that of 240 patient populations, self-expense (out-of-pocket) variable has an average value of 671,719 rupiahs, with deviation standard 842,414 rupiahs and median 265,143 rupiahs. Meanwhile, the lowest self-expense (out-of-pocket) is 0 rupiahs and the highest is 5,683,925 rupiahs. Using bivariate analysis, variables related to self-expense (out-of-pocket) are age, officialdom level, education level, medical treatment pattern, medical care class choice, and length of care. The last modeling in multivariate analysis using double linear regression analysis yielded self-expense (out-of-pocket) =  $4.908 + 0.06 * \text{length of care} + 0.156 * \text{local administration subsidies} - 0.683 * \text{medical treatment pattern} + 0.579 * \text{medical care class choice} + 0.472 * \text{education 2(D3)} - 0.323 * \text{level (officialdom level II)}$ . It is recommended that PT Askes evaluate the determination of packet tariff and DHPO drugs periodically, disseminate medical treatment packets and medical care classes appropriate for their level/right and advocate PPK the proportional medical treatment days. It is also recommended for the next research to obtain more complete information on how much the expense for non-DHPO drugs is from respondents. It is

hoped that Cilegon General Hospital provide qualified services in spite of different medical service class, upgrade their data so that they can help education, research and development of health. References: 42 (1985&mdash;2005)