

## Analysis of Patient Satisfaction with BPJS (Social Security Administration) and Non-BPJS Health Services

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### ABSTRACT

**Background.** Patient satisfaction is an important issue in hospitals, both in Indonesia and abroad. Low satisfaction levels can negatively impact the development of hospitals. Patient satisfaction is a key indicator in health services, as it reflects patients' assessment of the services received, compared to their expectations of services in health facilities.

**Purpose.** This study aims to determine the difference in service satisfaction between BPJS and non-BPJS patients in hospitals, as an effort to identify factors that affect patient satisfaction in both groups.

**Method.** The method used in this study is a literature review, in which various journals from various sources relevant to this topic are analyzed. This approach allows for a deeper understanding of the differences in satisfaction levels between BPJS and non-BPJS patients based on previous studies.

**Results.** The results of this study show that there is a difference in satisfaction levels between BPJS and non-BPJS patients. Factors such as waiting times, quality of interaction with health workers, and availability of facilities affect the difference in satisfaction in these two patient groups.

**Conclusion.** This study concludes that the difference in service satisfaction between BPJS and non-BPJS patients shows the importance of service adjustment based on the needs and expectations of each patient group. Improving the quality of service for BPJS and non-BPJS patients is expected to increase overall patient satisfaction, which in turn supports the development of the hospital in the long term.

### KEYWORDS

BPJS and Non-BPJS Patients, Health Services, Satisfaction

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### INTRODUCTION

National Health Insurance is a guarantee in the form of health protection so that the public can obtain health maintenance benefits and protection in meeting basic health needs provided to everyone who has paid contributions or their contributions are paid by the government (Abidin & Yacob, 2022; Multazam et al., 2024).

Every community is required to have health insurance. In easing the burden on the community on health costs, the government has provided health insurance to the public in the form of BPJS (Social Security Organizing Agency) health which is a legal entity formed to provide social security as social protection



to ensure that all Indonesian people can meet their basic needs (Amelia, 2020). The Puskesmas as one of the First Level Health Facilities (FKTP) provides the first service to BPJS Kesehatan participants (Winaka et al., 2022).

The high cost of health makes it increasingly difficult for people to obtain health services. One of the methods that can be used in easing the burden of health financing is by using insurance. Efforts have been made by the government in providing health insurance for the community, such as the National Health Insurance (JKN) (Nurfaizal & Wahyudi, 2022). Based on law number 24 of 2011, the Social Security Administration Agency (BPJS) will replace a number of social security institutions in Indonesia, namely the health insurance institution PT. Askes Indonesia became BPJS Kesehatan. In early 2014, PT (Irfan & Kusri, 2024). Askes became BPJS Kesehatan. BPJS is expected to be able to provide better health services to the community from the initial level to the plenary service (Putri, 2014).

Patient satisfaction is a problem for hospitals both in Indonesia and abroad. The low patient satisfaction rate will have an impact on the development of hospitals (Girsang et al., 2023). Patient satisfaction is one of the important indicators that must be considered in health services because patient satisfaction is the result of an assessment of health services by comparing what is expected in accordance with the reality of health services received in a hospital health order. (Yanti, et al., 2022)

The quality of health services is greatly influenced by the physical quality, supporting facilities and infrastructure, the service process itself, and the compensation received by the community who uses these health services. All efforts are made to be able to improve the quality of service in order to provide maximum satisfaction to its users. Consumer satisfaction with the service received can be measured by comparing expectations with the quality of service they receive (Karim, 2021). If the consumer expects a certain level of service and the service he receives is higher than he expects, then the consumer is very satisfied. If consumers expect a certain level of service and what they receive is in accordance with their expectations, then consumers will be satisfied. On the other hand, if the quality of service they receive is lower than they expected, the consumer will be disappointed or dissatisfied (Sesrianty et al., 2019).

According to Wijono (in Safrudin, 2012), quality health services using the company's main competitive strategy, which is oriented towards patient satisfaction, will be able to survive in the midst of increasingly strong global competition. Both subjectively and objectively, the quality dimension is measured by six dimensions, namely safety, effectiveness, efficiency, timeliness, patient centeredness, and equity (Cahyono, 2008). The study only took the variables of safety, effectiveness and efficacy into a unit, as well as patient centeredness.

The purpose of this study is to analyze the level of patient satisfaction with health services provided by BPJS and non-BPJS based on a literature review. Through a descriptive qualitative approach, this study seeks to identify the main factors that affect patient satisfaction, such as service quality, accessibility, cost, and convenience. By understanding various perspectives from the relevant literature, this study is expected to provide a comprehensive overview of patients' perceptions of these two types of health services and provide useful inputs for policy development in improving the quality of health services in Indonesia.

## RESEARCH METHODOLOGY

This research method uses qualitative descriptions. Qualitative descriptive research is research that uses or describes the object of research based on facts that appear or as they are (Nawawi and Martini, 1996). The type of research uses a literature study. The libraries studied are journals obtained from e-journals, google searches and google scholars. The data collection technique used is to analyze the journals related to this study ([Adlini et al., 2022](#); [Hands, 2022](#)).

The population in this study includes all literature or scientific works that discuss patient satisfaction with BPJS and non-BPJS health services. The sample of this research is a relevant and purposively selected article, journal, or research report, based on its suitability to the research topic. The inclusion criteria are set so that the literature taken reflects important and useful findings in providing a comprehensive overview of the topic being researched ([Bakken, 2023](#); [Binder, 2021](#)).

The instrument used in this study is a list of literature analysis that contains points of consideration to identify key aspects of patient satisfaction, such as service quality, accessibility, cost-effectiveness, and comfort level. Each literature will be analyzed based on these points to obtain consistent and comprehensive data ([Colonna, 2023](#); [Egorov, 2021](#)).

This research procedure includes searching for literature from various verified and relevant sources, such as national and international journal databases, online libraries, and research portals that provide related scientific works. Each selected literature will be critically reviewed and analyzed to understand the concepts and findings produced by previous authors, as well as to identify factors that affect patient satisfaction in BPJS and non-BPJS health services. The results of the analysis will be presented in the form of an in-depth description in accordance with the descriptive qualitative method ([England, 2022](#); [Hamilton & Finley, 2019](#)).

## RESULT AND DISCUSSION

The data source in this study uses two studies obtained from e-journal, google search and google scholar. The study contains service satisfaction for BPJS and non-BPJS patients. The research that is the reference for this research is as follows:

**The Relationship between BPJS and Non-BPJS Patient Satisfaction** with the Quality of Health Services in the Inpatient Room of Bahteramas Hospital, Southeast Sulawesi Province by Nur Fitriani, La Ode Muhammad Sety and Fikki Prasetya 2023

**Satisfaction level of BPJS patients and general patients** by Riska Yanuarti, Eva Oktavidiati, Henni Febriawati and Oktarianita 2021

Satisfaction according to Oliver in (Sari, 2008) is the level of feelings of a person (customer) after comparing the performance or perceived results (services received and felt) with the expected. Furthermore, Rahmayanty (2013) defines patient satisfaction as a positive evaluation of the various dimensions of services provided by service providers. Satisfaction is the level of feelings of a person (customer) after comparing the performance or results felt (services received and felt) with what he expects (Sari, 2008). Wijono was quoted by Nugroho (2009) as revealing that customer satisfaction of hospitals or other health service organizations or patient satisfaction is influenced by many factors, including the approach and behavior of officers, the quality of information, agreement procedures, waiting times, available public facilities, hospitality facilities for patients such as food quality, visit arrangements and "privacy" of the outcomes of therapy and treatment received. In addition, it is also influenced by gender factors, patient age, education, therapeutic communication, attitude and approach of staff, and service quality (Budiastuti in Liestrana, 2010).

Patient satisfaction is an abstract thing and the results vary greatly because it basically depends on each individual's perception. Patient satisfaction is influenced by several factors such as

patient membership registered in BPJS members, services obtained and costs that must be incurred by patients at First Level Health Facilities. Patient satisfaction will be fulfilled if the services provided are in accordance with their expectations.

Patient satisfaction is an emotional response of patients that arises as a result of the performance of health services obtained after the patient compares with what they feel. Patients will feel satisfied if the performance of the health center services that they feel meets or exceeds what the patient expects (Pertiwi, A: 2017).

Patient satisfaction is the level of feelings that arise after a patient receives health services and compares them with what is expected (Pohan, 2007). Satisfaction is the result of consumer evaluation (assessment) of various aspects of service quality. Quality assessment is carried out by comparing expectations with real performance of perceived quality. The smaller the gap between expectations and perceived quality, the higher the satisfaction. On the other hand, the wider the gap between expectations and quality performance, the lower the level of satisfaction will be (Kotler and Keller, 2007). It can be interpreted that customers are satisfied if what they receive is greater than expected (perceived > expected) (Cahyono, 2008).

According to Wijono (in Safrudin, 2012), quality health services using the company's main competitive strategy, which is oriented towards patient satisfaction, will be able to survive in the midst of increasingly strong global competition (Trisnaeni, 2014).

According to Zeithaml and Bitner (in Pratiwi 2014), to find out the concept of service quality, it is stated that the quality of service received by consumers is expressed in the measure of the magnitude of the discrepancy between expectations and desires and their level of perception of the service to be obtained. The perception of service quality is then interpreted on the difference between the perception of service quality and the expectations that will be received by consumers. Service quality is an indicator of health services which is one of the indicators that determine the image of health service institutions in the community. Hospital quality is used as a health service on the quality of medical and nursing services provided to patients using a quality assurance activity strategy. Both subjectively and objectively, the quality dimension is measured by six dimensions:

#### **Safety or Patient Safety**

According to the Minister of Health Regulation No. 1691 concerning Hospital Patient Safety, patient safety is a system in which hospitals make patient care safely which includes identification, risk assessment, and management of everything related to patients, incident reporting and analysis, sustainability of learning from incidents, and implementation to minimize the occurrence of risks and prevent injuries caused by an action.

Patient safety is part of quality. The focus on improving management services to reduce pain in patients is an implication of actions to improve service quality and increase patient satisfaction (Glowacki, 2015). Patient safety has an impact that can be directly felt by patients as a result of hospital services. Quality service will certainly not harm patients and is certainly safe. On the other hand, a secure service is not necessarily of quality, not necessarily free from errors. According to IOM, patient safety is defined as a service that does not injure or harm patients (safety is defined as freedom from accidental injury) (Cahyono, 2008).

#### **Effective and Efficiency atau Efektifitas dan Efisiensi**

Technically, the definition of effective is easier to understand when it is related to clinical application, namely clinical effectiveness. Randomized controlled trials (RCTs) are key to clinical effectiveness research. So, the definition of effective here is synonymous with predetermined

standards or current standards. The standard that is considered correct and up-to-date is the results of research that is RCT (the best) (Cahyono, 2008).

Peter F. Drucker, an expert in modern management, gives the meaning of the word efficient, which is doing things right. The health service system is required to be more efficient. Efficient service means avoiding all waste in the provision of equipment, reducing the hospitalization period, and reducing unnecessary diagnostic and therapeutic examinations (Cahyono, 2008).

#### **Patient centeredness atau Berorientasi pada Pasien**

Patient-focused services are not a new concept, but this value has been ignored by doctors. The current trend is technology-centered, doctor-centered, hospital-centered, and disease-centered. Patient values such as hopes, feelings, desires, and anxieties that arise during a patient's interaction with a doctor are often overlooked. Dissatisfaction, malpractice claims, and medical injuries occur as a result of non-patient-centered services. Patient-focused services aim to create a more balanced doctor-patient relationship (Cahyono, 2008).

Patient-centered care is the hope in today's service environment. Patients are placed as the first group in the health system to optimize the quality and safety of services. The principles of patient-centered care provide a sense of security, effectiveness, efficiency, timeliness, and equitable care (Ricards & Adam, 2015). The patient's recovery does not only depend on the correctness of the diagnosis, but also depends on other things such as trust. Times have changed, patients and families are getting smarter and better understand their rights. They want to be involved in decision-making. This relationship pattern is known as partnership or shared decision making.

In the two studies that we reviewed, there were differences in the results of the two studies, in the first study conducted by Nur Fitriani, La Ode Muhammad Sety and Fikki Prasetya concluded that:

**There is a relationship between** BPJS and non-BPJS patient satisfaction reviewed from the reliability dimension at Bahteramas Hospital, Southeast Sulawesi Province.

**There was no relationship** between patient satisfaction between BPJS and non-BPJS participants in terms of responsiveness at Bahteramas Hospital, Southeast Sulawesi Province.

**There was no relationship between patient satisfaction** between BPJS and non-BPJS participants reviewed from the assurance dimension at Bahteramas Hospital, Southeast Sulawesi Province.

**There is a relationship of** BPJS and non-BPJS patient satisfaction reviewed from the dimension of empathy (empathy) at Bahteramas Hospital, Southeast Sulawesi Province.

**There is a relationship between** BPJS and non-BPJS patient satisfaction reviewed from the tangible dimension (physical evidence) at Bahteramas Hospital, Southeast Sulawesi Province

And in the second study conducted by Riska Yanuati, Eva Oktavidiati, Henni Febriawati and Oktarianita concluded that:

**The results of the study showed** that in BPJS patients, 50% of patients expressed satisfaction with the service, and 50% were dissatisfied. Meanwhile, in general patients, 52.5% expressed satisfaction and 47.5% were dissatisfied with the services they received at the Betungan Health Center, Bengkulu City. Research by Mustika & Sari (2019) also shows that from all respondents most of them are satisfied with the service, where the dimension of service quality has a significant effect on patient satisfaction.

**showed that there was a difference** in the satisfaction of BPJS patients and general patients based on the tangible dimension, where patients assessed the physical appearance of the building, facilities and infrastructure as well as the appearance of the health center staff.



**shows that there is a difference** in satisfaction between BPJS patients and general patients based on the reliability dimension. In this study, the reliability dimension assessed by patients is how reliable and alert doctors and nurses are in providing services to patients.

**shows that there is a difference** in the satisfaction of BPJS patients and general patients based on the responsiveness dimension, which is included in the responsiveness dimension that patients assess is how doctors and nurses are quick to respond in serving patients.

**showed that there was a difference** in the satisfaction of BPJS patients and general patients based on the assurance dimension. The assurance dimension shows how patients are guaranteed in services and based on table 8 there is a difference in the satisfaction of BPJS patients and general patients based on the empathy dimension. The empathy dimension is how the attention from doctors and nurses to patients during service. The results of the statistical test showed that there was a difference in the satisfaction of BPJS patients and general patients based on the dimensions of reliability, responsiveness, assurance and empathy with a p-value of 0.001 each.

## CONCLUSION

Based on the results of the two studies above, there are differences in service satisfaction from the dimensions of reliability, responsiveness, assurance, empathy and tangible in BPJS and non-BPJS patients in each hospital.

The conclusion of this study shows that patient satisfaction with BPJS and non-BPJS health services is influenced by several main factors, namely service quality, accessibility, cost, and convenience. From the literature analysis conducted, it was found that patients were generally more satisfied with faster, more efficient, and more accessible services. On the other hand, although BPJS provides services at a more affordable cost, some literature indicates that there are obstacles such as long waiting times and limited facilities, which have an impact on patient satisfaction. This highlights the difference in perception between BPJS and non-BPJS patients in assessing the quality of health services.

This study also reveals that improvements in accessibility and service quality in the BPJS system are needed to increase patient satisfaction. This literature study provides an overview that policies to increase resources, provide adequate facilities, and increase service effectiveness can contribute significantly to increasing BPJS service user satisfaction. This finding is expected to be a reference for the organizers and the government in formulating better policies to improve the quality of health services in Indonesia, so that they can optimally meet the expectations and needs of patients.

## AUTHORS' CONTRIBUTION

Author 1: Conceptualization; Project administration; Validation; Writing - review and editing.

Author 2: Conceptualization; Data curation; Investigation.

Author 3: Data curation; Investigation.

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