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Evaluation of Healthcare Service Policies for Inpatients Using Social Security Administration at the Dr. Soedarso Regional Public Hospital

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ABSTRACT: This thesis research is intended to analyze the evaluation of the impact of health service policies on BPJS users in hospitalized patients at RSUD dr. Soedarso Pontianak. The purpose of this study is to describe and analyze the evaluation of the impact of health service policies on BPJS users in hospitalized patients at RSUD dr. Soedarso Pontianak, with aspects to be studied including: Effectiveness, Efficiency, Responsiveness and Appropriateness. The results of the study indicate that the implemented health service policies have not been running optimally. The effectiveness aspect has not been maximized because medical services have not significantly accelerated the healing process or improved the quality of treatment for BPJS patients. In terms of efficiency, there is wasted time and less than optimal utilization of resources and logistics. The responsiveness of officers, both medical and non-medical, is still weak in responding to patient complaints and needs quickly and empathetically. Meanwhile, the appropriateness of services has not been fully achieved, because the medical actions provided are not always in accordance with the clinical conditions and rights of BPJS patients. Based on this study, it is recommended that RSUD dr. Soedarso Pontianak and the BPJS (Social Security Agency) are improving the service system and financing mechanisms, accelerating administrative processes, increasing the capacity and number of medical personnel, and strengthening communication between staff and patients and their families. Regular evaluations are also crucial to ensure that implemented policies truly benefit and are fair to all BPJS participants.

KEYWORDS: Evaluation of Hearthcare Service, Healthcare Service Policy, Inpatients Using Social Security Administration

INTRODUCTION

Law No. 24 of 2011 concerning the Social Security Administering Body (BPJS) and Presidential Regulation No. 19 of 2016 concerning BPJS Health Contributions are strategic steps taken by the government to realize a comprehensive, equitable, and sustainable national social security system. Law No. 24 of 2011 aims to establish an independent, transparent, and efficient social security administering body to implement the constitutional mandate of providing social protection to all Indonesians. Meanwhile, Presidential Regulation No. 19 of 2016 was issued in response to the financing challenges of the National Health Insurance (JKN) program, by adjusting the contribution amount to ensure the system remains sustainable and health services can continue to improve.

These two regulations serve as a crucial foundation for strengthening access to and quality of health services for all BPJS participants. The JKN program, managed by BPJS Health, aims to provide comprehensive health protection for all Indonesians. Since its implementation in 2014, the program has transformed the national health care system, including aspects of financing and access to services. Dr. Soedarso Pontianak as the main referral hospital in West Kalimantan has an important role in providing health services for participants BPJS, especially for inpatients. However, various challenges remain in its implementation. Several reports indicate patient complaints regarding service quality, waiting times, limited facilities, and perceived complexity of administrative procedures. Hospitals also face challenges such as delayed claim payments, limited human resources, and high operational costs.

Evaluation of the health care policy for BPJS patients is crucial to assess the extent to which the policy has been implemented effectively and efficiently at Dr. Soedarso Regional General Hospital. This evaluation also aims to identify obstacles and opportunities for improvement in order to improve the quality of inpatient care, patient satisfaction, and the sustainability of the JKN program itself. As we know, hospitals, as one of the health care facilities owned, must play a very important and strategic role in efforts to accelerate the improvement and level of public health. This strategic role must be achieved by hospitals because hospitals have health facilities and technology. Problems often faced by the public in general in hospitals because hospitals are not able to

provide something that is truly expected by BPJS users. The main factor is because the services provided are low quality, so they cannot produce the good service that BPJS users truly expect.

To illustrate the utilization rate of BPJS Kesehatan services at Dr. Soedarso Regional General Hospital (RSUD) Pontianak, we present data on the number of inpatients using BPJS over the past three years. This data is important as a basis for evaluating health care policies, particularly in measuring the extent of public dependence on national health insurance services. Furthermore, the growth trend in the number of BPJS patients can also be an indicator of the effectiveness of the JKN program implementation and the hospital's readiness to meet inpatient care needs. The following data presents the number of inpatients using BPJS at Dr. Soedarso Regional General Hospital, Pontianak, from 2022 to 2024, in Table 1.1.

Table 1.1. Data on the Number of Inpatients Using BPJS at Dr. Soedarso Regional General Hospital Pontianak, from 2022 to 2024

Year	Number of inpatients	Number of BPJS Patients	Persentage of BPJS Patients
2022	19.050	13.870	72,8%
2023	20.500	15.375	75,0%
2024	21.700	16.700	77,0%

Source: RSUD Dr. Soedarso, Mei 2025

Based on the data in Table 1.1, there is an increasing trend in the number of inpatients using BPJS at Dr. Soedarso Pontianak Regional Hospital over the past three years. The number of BPJS patients increased from 13,870 in 2022 to 16,700 in 2024. The percentage of BPJS patients to the total number of inpatients also experienced a steady increase, from 72.8% to 77%. This indicates that BPJS services are increasingly becoming the public's primary choice for accessing healthcare services in hospitals, particularly for inpatient care.

To address the phenomenon occurring in healthcare services for inpatients using BPJS at Dr. Soedarso Pontianak Regional Hospital, integrated efforts are needed that include improving the effectiveness, efficiency, responsiveness, and efficiency of services. The hospital needs to strengthen internal coordination, increase the capacity of medical personnel, and utilize information technology to expedite the impact of BPJS administration and claims. Furthermore, communication training for healthcare workers is crucial to improving responsiveness and patient satisfaction. Evaluation of the referral system and implementation of clinical audits must also be carried out to ensure the efficiency of services according to the patient's medical condition. With these steps, it is hoped that healthcare services can be run more optimally, fairly, and oriented towards the needs of social security participants.

According to Dunn (2003:28), "evaluation produces policy-relevant knowledge about the discrepancy between expected policy performance and what is actually produced." Through evaluation, it can help policy makers at the policy assessment stage of the policy-making process, so that it not only produces conclusions about how far the problem has been resolved, but will also contribute to the clarification and criticism of the values underlying the policy, while also facilitating the adjustment and reformulation of the problem.

Evaluating a program or public policy requires criteria to measure its success. Regarding policy performance in generating information, according to Winarno (2017:184), the criteria for evaluating the impact of public policy include:

1. Effectiveness, namely the degree to which desired results are achieved.
2. Efficiency, namely the amount of effort required to produce an action.
3. Responsiveness, namely the degree to which a policy satisfies societal needs, preferences, or values.
4. Accuracy, namely the degree to which the method (effort, work) utilized time, energy, and costs is appropriate; usefulness; appropriateness; and reasonableness.

Based on Winarno's theory with the evaluation criteria of public policy impacts which include effectiveness, efficiency, responsiveness, and accuracy, it is a comprehensive and relevant approach to assess the implementation of health service policies for inpatients using BPJS at Dr. Soedarso Pontianak Regional General Hospital. These four criteria provide a comprehensive analytical framework to evaluate the extent to which the policy has been successfully implemented, able to meet patient needs, utilize resources optimally, and in accordance with the conditions and objectives of the policy. Thus, this theory becomes a strong foundation in describing the strengths, weaknesses, and opportunities for improvement in the implementation of health services at Dr. Soedarso Pontianak Regional General Hospital which is the main reference in West Kalimantan. By using Winarno's policy evaluation theory, researchers can obtain a comprehensive picture of the strengths and weaknesses of health service policies at Dr. Soedarso Regional General Hospital. Because the four indicators complement each other to assess the process of policy implementation objectively, systematically, and relevant to the complex context of public services such as in the health sector.

METHOD

This research will be conducted using descriptive research. Through this approach, researchers collect data from various sources, including observation, interviews, and documentation, to determine how the policy is implemented in practice, what obstacles are faced, and how BPJS patients perceive the services they receive. The research location was taken at the Regional General Hospital (RSUD) dr. Soedarso Pontianak with the consideration that the employees' understanding of Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS) and Presidential Regulation Number. 19 of 2016, concerning the Contribution of the Social Security Administering Body (BPJS) Health. The subjects of this research are employees of RSUD dr. Soedarso Pontianak, which are determined as follows: Director of RSUD dr. Soedarso Pontianak, Head of General Sub-Division, Medical and Non-Medical Personnel, Family of inpatients using BPJS as many as 3 people.

The data collection techniques used in the study on the evaluation of the health service policy process for patients using BPJS inpatients at Dr. Soedarso Pontianak Regional General Hospital include observation, interviews, and documentation. The data validity technique (validity test) used in qualitative research is a data collection technique using triangulation, meaning it is a data collection technique that combines various data collection techniques and existing data sources (2018:83). The data analysis technique used in this study is qualitative analysis. Data analysis in qualitative research is the process of simplifying data into a form that is easier to read and interpret.

RESULT AND DISCUSSION

Effectiveness of Healthcare Policies

The effectiveness of health care policies can be measured by the extent to which they achieve their primary objective, namely providing appropriate and prompt healthcare services that result in improved patient conditions. In the context of inpatient BPJS patients, effectiveness is closely related to the accuracy of diagnosis, speed of treatment, quality of medical intervention, and the success of the patient's recovery process. If the policy is implemented effectively, BPJS patients will experience direct benefits in the form of improved quality of life and accelerated recovery, without being burdened by cost constraints or delays in services.

Quality and equitable healthcare is a constitutional mandate and part of the social protection that the state is obligated to provide. Within this framework, the government, through Presidential Regulation Number 19 of 2016 concerning the Second Amendment to Presidential Regulation Number 12 of 2013 concerning Health Insurance, establishes policies regarding the amount of contributions and other provisions related to participation in the National Health Insurance (JKN) program administered by the Social Security Administering Body (BPJS Kesehatan). This regulation serves as an important foundation for financing healthcare services for the public, including inpatients who are BPJS participants**..**

Based on interviews with families of inpatients using BPJS, health services with BPJS are very helpful financially, however, in practice, obstacles are still often encountered that hinder the acceleration of the patient's healing process. Responding to this statement, it shows that although health service policies have provided broader access and guaranteed financing, in practice, various obstacles are still found that impact the slow process of patient healing. Frequent obstacles include long queues for followup examinations, limited medical personnel, and BPJS administrative processes that are considered slow, such as processing referrals or approval of medical procedures.

Another family member of a BPJS inpatient stated that administrative processes related to BPJS, such as referral verification or approval for follow-up procedures, sometimes take a significant amount of time. Even though the patient is registered as a BPJS participant, some medical needs must wait because availability depends on the procurement system and applicable claims procedures. This presents a challenge for healthcare workers in providing optimal care and raises concerns for the patient's family, who expect prompt and appropriate medical treatment. This situation reflects the need for improvements in logistics systems and technical policies to make BPJS-based healthcare services more responsive and effective.

Based on this statement, it can be seen that one of the main obstacles faced in providing healthcare services to inpatients using BPJS is the slow administrative process. Procedures such as referral verification, claim submission, or approval for further medical procedures often take considerable time. As a result, urgently needed medical procedures are delayed, which in turn can slow down the patient's recovery process.

Based on this statement, it can be assumed that the health care policy through BPJS Kesehatan has not had an optimal impact on improving the quality of services and patient treatment outcomes. Although this policy has expanded public access to medical services, limitations in the financing system, INA-CBG's tariff standards, and rigid bureaucratic procedures are major obstacles to its implementation. As a result, hospitals struggle to provide optimal care, both in terms of facilities, medicines, and allocation of medical staff time to patients. This indicates the need for comprehensive policy improvements, particularly in the aspects of funding and flexibility of hospital management, so that health care for BPJS patients can truly improve the quality of service and encourage overall treatment success.

Furthermore, budget constraints and a rigid financing system also impact hospitals' flexibility in providing optimal services. This limits hospitals' ability to provide modern medical equipment, certain medications, and the addition of much-needed specialized healthcare workers. The high daily burden of BPJS patients also impacts the workload of healthcare workers and reduces contact time between doctors and patients, which ultimately impacts the quality of diagnoses and the speed of recovery. Although hospitals strive to continuously improve service quality, the centralized policy system and administrative bureaucracy within BPJS services often hinder the speed of service delivery.

Based on field observations and documentation, it appears that the process of providing medical care to inpatients using BPJS at Dr. Soedarso Pontianak Regional Hospital is still not running optimally. This is evident in delays in medical procedures, long queues for follow-up examinations, and limited availability of urgently needed equipment and medications. This condition reflects that coordination between medical service units and administrative support units still needs to be improved so that the medical action process can run more efficiently and on time.

Efficiency of Health Service Policy

In the national healthcare system, efficiency is one of the main indicators of successful policy implementation, especially in the context of optimal resource utilization to provide the best service to the community. The healthcare policy for BPJS participants, as stipulated in Presidential Regulation Number 19 of 2016 concerning changes to BPJS Kesehatan contributions, has major implications for the governance of financing and the implementation of healthcare services at referral healthcare facilities, including Dr. Soedarso Pontianak Regional Hospital. Therefore, evaluating the efficiency of this policy is crucial to ensure that the available budget and facilities are used appropriately.

Based on interviews with families of inpatients using BPJS, it was stated that although health services through the BPJS program have provided financial convenience, in practice they have not had a significant impact on reducing waiting times for services in hospitals. Responding to this statement, it shows that the implemented health service policies have not fully reduced waiting times for services, both at the registration stage, examination, and the implementation of medical procedures. Although BPJS services financially help patients, in terms of time efficiency, there are still many obstacles experienced by service users.

Another family member of a BPJS inpatient stated that the imbalance between the number of patients and medical personnel was one of the main causes of long waiting times. Based on this statement, it can be analyzed that the imbalance between the number of patients and medical personnel is the main factor causing long waiting times for BPJS inpatient services at Dr. Soedarso Pontianak Regional Hospital. Although the hospital has implemented a structured queue system and service flow, the high volume of patients served each day makes the service process less than optimal in terms of speed.

Based on observations and documentation, it is clear that the BPJS patient registration process at Dr. Soedarso Pontianak Regional Hospital is still not running optimally. The registration process tends to take a long time due to long queues, limited counters, and a lack of staff to handle BPJS administrative validation. Furthermore, the suboptimal use of digital systems for data verification results in slow service delivery and inconvenience for patients and their families.

This situation indicates that the initial service flow system, which should be the main entry point for care, is not efficient and responsive to the high number of BPJS patients served each day. This suboptimal registration process has the potential to delay subsequent services, such as examinations and medical procedures. Therefore, improvements to the queuing system, additional human resources in the registration department, and enhanced information technology are needed to ensure a faster, more accurate, and more convenient initial service process for patients.

Responsiveness of Health Service Policies

Responsiveness is a key indicator in assessing the success of public service policies, particularly in the health sector. The main referral hospital in West Kalimantan, Dr. Soedarso Pontianak Regional General Hospital, receives thousands of BPJS patients annually, including inpatients with complex service needs. Evaluating the responsiveness aspect in the implementation of health service policies is important to determine whether the implemented service system provides sufficient space for patients to express opinions, complaints, or additional needs.

Interviews with families of inpatients using BPJS stated that, "The response from medical and non-medical personnel to the needs and complaints of patients and their families after the implementation of the health service policy is still perceived as less than optimal." This statement indicates that the response of medical and non-medical personnel to the needs and complaints of patients and families after the implementation of the health service policy is still less than optimal. Although access to services has become more widespread, in practice, the response tends to be slow, less communicative, and does not fully meet the expectations of patients and their families.

Another family of an inpatient using BPJS stated, "We still feel a lack of attention and empathy from some medical staff after the health care policy was implemented. This situation is most often felt when the hospital is crowded or when medical staff appear overwhelmed by the number of patients they have to treat." Based on this statement, it can be seen that even after the implementation

of the health care policy, there are still moments when the attention and empathy from medical staff are perceived as less than optimal. This generally occurs during times of high workload, high patient numbers, or when medical staff are exhausted, such as at night or on weekends.

Observations and documentation at Dr. Soedarso Hospital in Pontianak indicate that the response of medical and non-medical staff to complaints, questions, or requests from BPJS patients' families has not been optimal. It was found that many families had to wait long periods for a response or explanation, whether regarding the patient's condition, service procedures, or administrative information. Disconnected or unresponsive communication from some staff, especially during busy times, contributed to the decline in family satisfaction with the services provided.

Hospitals procedurally provide communication channels between patients' families and staff, but in practice, not all staff perform their functions proactively and empathetically. Lack of excellent service training, high workloads, and the lack of a complaints or rapid response system are key contributing factors. Therefore, increased public service capacity is needed, both in terms of human resources and support systems, so that patients' families feel heard, cared for, and actively involved in the patient care process.

Appropriateness of Health Care Policies

Appropriateness is a crucial dimension in evaluating health care policies, particularly in the context of the effectiveness of resource utilization in meeting patients' medical needs. Inappropriately targeted services, whether due to limited facilities or errors in medical decision-making, not only lead to patient dissatisfaction but also impact efficiency and the burden on the state budget. By evaluating the appropriateness of health care policies for inpatient BPJS patients at Dr. Soedarso Pontianak Regional Hospital, we can identify the extent to which policies have been implemented professionally and responsibly.

Another family member of a BPJS inpatient stated that, "The current health care policy is not fully capable of ensuring that every BPJS patient receives services fairly, proportionally, and in accordance with their rights and needs." Based on this statement, it can be seen that the healthcare policy implemented at Dr. Soedarso Pontianak Regional Hospital (RSUD) has not fully guaranteed that every BPJS patient receives fair and proportional care according to their rights and needs. Disparities in service remain, particularly in terms of speed of treatment, access to medication, and treatment by medical staff, leading some BPJS patients to feel treated differently than general patients.

Another interview with the Head of Medical and Non-Medical Personnel revealed that, "In practice, the medical procedures and services provided to BPJS patients are still not fully aligned with each patient's individual medical condition. This is because they often limit the choice of treatments or therapies available." Related to this statement, it can be seen that the medical procedures and services provided to BPJS patients do not fully reflect each patient's individual medical condition. Restrictions in the BPJS financing system, particularly limited facilities and medications, sometimes result in services not meeting actual clinical needs—either in the form of undertreatment or overtreatment.

Based on this implied statement, it can be assumed that the medical services and procedures provided to BPJS patients still do not fully reflect the medical needs and rights of patients fairly and comprehensively. The limitations of the BPJS financing scheme, such as the INA-CBG package system, limit the flexibility of medical personnel in providing services that fully align with the patient's clinical condition. Furthermore, the disparity in access to services between BPJS patients and general patients at Dr. Soedarso Hospital, Pontianak, remains an unresolved reality.

Meanwhile, observations and documentation at Dr. Soedarso Hospital, Pontianak, indicate that the alignment of medical procedures provided with BPJS patient diagnoses is not yet fully achieved. In several cases, the procedures performed are standard and not specifically tailored to each patient's clinical condition. This is generally influenced by the limitations of the BPJS financing system, which uses the INA-CBG package. Medical personnel must adjust the type and number of procedures to the available budget, rather than solely based on the patient's medical needs.

This situation impacts treatment effectiveness and patient satisfaction, with some patients not receiving optimal medical intervention or even receiving less relevant procedures. The lack of flexibility in implementing healthcare policies also makes it difficult for hospitals to make necessary adjustments quickly. Therefore, policy evaluation and reformulation are needed to ensure that medical treatments provided are not only cost-efficient but also truly aligned with the diagnoses and clinical needs of individual BPJS patients.

CONCLUSIONS

The effectiveness of health service policies for BPJS users inpatients at Dr. Soedarso Pontianak Regional General Hospital has not been optimal. This is indicated by the failure to achieve optimal service results, where the implemented policies have not significantly accelerated the healing process and other related aspects. The efficiency of health service policies for BPJS users inpatients at Dr. Soedarso Pontianak Regional General Hospital has not been optimally implemented. This is reflected in the continued waste of time in the service process. The responsiveness of health service policies for BPJS users inpatients at Dr. Soedarso Pontianak Regional General Hospital is still less than optimal. This is indicated by the slow response of medical and non-medical

staff to patient complaints and problems. The effectiveness of health service policies for BPJS users inpatients at Dr. Soedarso Pontianak Regional General Hospital has not been optimally implemented. This is evident in the continued use of medical procedures and service facilities that are not fully in accordance with the clinical conditions and real needs of patients.

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