Analysis of BPJS Patient Satisfaction Level Towards Community Health Center Health Services

Efranita Somasi Crownlina Ndruru[1], Asriwati[2], Sitti Subaedah[3]
[1,2,3] *Institut Kesehatan Helvetia, Medan, Indonesia*
Email: asriwati033@gmail.com

ABSTRACT

High patient satisfaction will indicate how well the health center is able to provide high-quality medical care. The Service Quality Approach (SERVQUAL) can be used to measure the level of patient satisfaction consisting of fitness, assurance, physical evidence, empathy, and responsiveness. This study examines how satisfied BPJS patients are with medical services. This study was conducted at the Bawomataluo Health Center in Fanayama District. Sampling was carried out using the Accidental Sampling method totaling 99 people. The results of the study showed the influence of reliability, assurance), real evidence, empathy, and no influence of responsiveness to health services. The conclusion of this study is that there is no influence when viewed from the five dimensions in terms of performance level, but there is an influence when viewed from the aspects of completeness, assurance, physical evidence, empathy, and responsibility on the level of BPJS patient satisfaction with health services. It is hoped that the Health Center can improve patient happiness, including attention from health workers who are very important in meeting patient needs to get special care.

Keywords: patient satisfaction level, service, quality

INTRODUCTION

Handling of health services in the form of individual health efforts is carried out through improvement, prevention, treatment, recovery and palliatives aimed at individuals, and implemented in a comprehensive, integrated and sustainable manner (Syafira et al, 2023). The government's program to address and provide health insurance for the community is the National Health Insurance (JKN). By improving access and quality of health services, the main aim of this health insurance is for participants to obtain health care benefits and protection to meet their basic needs (Setiawan et al., 2022).

Health services guaranteed by BPJS Health are health services at first and advanced level health facilities, emergency services, drug services, medical devices, ambulance services, health screening services. The number of BPJS participants continues to increase to date. Based on BPJS Health data, currently more than 70% of the Indonesian population are BPJS Health participants (Lambuena et al., 2023).

In the JKN era, puskesmas are expected to be able to handle 155 disease diagnoses according to the competency of general practitioners which can be handled at Primary Health Facilities so that JKN participants no longer need to seek treatment directly at the puskesmas, because at FKTP they can already be treated. Based on the results of the initial survey interview from the head of the Bawomataluo Community Health Center, Fanayama District, there were 10 cases of diseases that frequently occurred, namely pharyngitis/ARI, hypertension, rheumatoid, gastritis, dental and oral disease, vertigo, diarrhea, dyspepsia, insomnia and diabetes. However, it does not rule out the possibility that in these cases you can go directly to the health center for treatment by considering the time (length of the course of the disease), age (age of the patient), complications (complications of the disease/level of difficulty), comorbidities, and condition of the health facility) (Mariani et al., 2023).

Puskesmas is one of the health facilities that has the function of providing health preparations, pharmaceutical preparations (medicines), with the aim of the community obtaining the medicines they need easily in order to improve the level of public health. Meistika et al., (2021) therefore, health facilities such as community health centers are obliged and expected to provide services that comply with service quality standards and provide satisfaction to patients and the community.

Based on the results of interviews and initial survey observations of BPJS patients at the Bawomataluo Community Health Center, several said that the service at the Community Health Center was good, but they were not satisfied due to several things, such as paying fees which were quite expensive each month for them, general practitioners were not always present on site. when they make a visit. The absence of a general practitioner makes them sometimes a little disappointed because they cannot convey their complaints directly, they are more often handled by nurses or other health workers. Apart from that, several patients said that there was no dentist at the health center so that when they experienced dental disease the health workers there gave them temporary pain relievers. Head of the Bawomataluo Community Health Center UPTD, he conveyed several problems that occurred, namely related to health services for patients who use BPJS. Bawomataluo Community Health Center is included as a community health center that is frequently visited by patients because the location is prone to traffic accidents, where annually 15 thousand-18 thousand patients visit in total.

The novelty in the study consists of the number of samples and location. Where in this study the sample numbered 99 people, the study was conducted at the Bawomataluo Health Center, where at this location no research related to BPJS patient satisfaction has ever been conducted.

METHODS

The design of this study was cross-sectional. The study was conducted at Bawomataluo Health Center. The population of the study were BPJS patients. The sampling technique used purposive sampling with inclusion criteria consisting of: 1) willing to be respondents, 2) able to read, and 3) BPJS patients. Enclusion criteria consisted of: 1) unwilling to be respondents, 2) unable to read, and 3) general patients.

Data collection was carried out using a questionnaire sheet containing patient satisfaction with health center services. Before distributing the questionnaire, the researcher first explained the purpose of the study and how to fill out the questionnaire, then asked the respondents to be willing to become research subjects by signing the informed consent. The data that had been collected was then analyzed consisting of univariate analysis to see the frequency distribution of each variable, bivariate analysis was conducted to see the correlation between the independent variable and the dependent variable using the Customer Satisfaction Index Calculation, and multivariate analysis was conducted to see the dominant variables in patient satisfaction using the T-test.

RESULTS

The research results consist of characteristics, bivariate, and multivariate which can be seen in the following table:

Table 1. Frequency Distribution of Respondent Characteristics

Characteristics	f	%
Age	15	15.2
17-25 years old	17	17.2
26-35 years old	17	17.2
36-45 years old	19	19.2
46-55 years old	31	31.3
56-65 years old	15	15.2
Gender		
Man	17	17.2
Woman	82	82.8

Characteristics	f	%
Education		
No school	0	0
Finished elementary school	7	7.1
Finished middle school	13	13.1
Finished high school	69	69.7
Completed D1/D3/College	10	10.1
Work		
Student/Students	13	13.1
Self-employed	6	6.1
Housewife	52	52.5
Civil servants/TNI/Polri	28	28.3

Based on 1 known that of 99 respondents, some big majority respondents 56-65 years old, as many as 31 (31.3%), the least 17-25 years old, that is as many as 15 (15.2%). In category type sex known part big respondents own manifold sex Woman as many as 82 (82.8%) while amount respondents with type sex man as many as 17 (17.2%). In category education known part big respondent own education completed high school, as many as 69 (69.7%). In category work, the majority respondents with Housewife work, that is as many as 52 (52.5%).

Table 2. Patient Satisfaction Level Based on The Average Score of The Level of Importance and Level of Performance of The Dimensions of Health Service Quality

Dimensions of mutual health services	Mean Importance Score	Weighted Factor (WF)	Mean Performance Level Score	Weighted Score (WS)
Reliability	3.54	19,50	3.03	0,59
Responsiveness	3.56	19,61	3,5	0,68
Assurance	3,65	20,11	3.64	0,73
Tangible	3,67	20,22	3,65	0,73
Empathy	3,73	20,55	3,75	0,77
Mean	3,63		3,51	
Total	18,15			
Weighted Total				3,50
Customer Satisfaction Index (CSI)				70,00

One of the things that can assess the success of a Health Center is the level of patient satisfaction with the services they receive. The dimension that received the highest score was the empathy dimension of 74.8%, followed by the assurance dimension of 73.2%, the responsiveness dimension of 72.8%, the reliability and responsiveness dimension of

70%. All five are in the satisfied category. The assessment obtained using the CSI method to assess the level of satisfaction of BPJS participants with health services at the Bawomataluo Health Center if the five dimensions are combined is 70% which means it is included in the satisfied category. The Health Center which is a First Level Health Facility as the first line of health services must be strengthened and continue to be committed so that it can continue to provide optimal services. In this case, high support and commitment from the Health Center are needed to create quality primary services so that they become trusted health facilities and provide the best services for BPJS Health participants.

Table 3. Test of the Significance of the Partial Effect of Performance Level

	Coefficients [a]							
		Unstandardized Coefficients		Standardized Coefficients			Collinearity Statistics	
Model		B	Std. Error	Beta	t	Sig.	Tolerance	VIF
1	(Constant)	-9,172	9,800		-,936	,352		
	Reliability	-,992	2,995	-,059	-,331	,741	,326	3,072
	Responsiveness	-2,336	3,278	-,131	-,713	,478	,306	3,269
	Guarantee	-,713	4,092	-.035	-,174	,862	,251	3,989
	Physical Evidence	2,791	4,000	,126	,698	,487	,317	3,152
	Empathy	**4,898**	3,993	,202	1,227	,223	,383	2,611

Based on the t test results in Table 4.19, the results obtained are: Y = -9.172 - 0.992X1 - 2.336X2 - 0.713X3 + 2.791X4 + 4.898X5 + e. Based on the simultaneous test (T test), the most influential dimension in terms of performance level is the empathy dimension. The Empathy dimension is said to be the most influential because it has the highest Beta value, namely 4.8 98.

DISCUSSION

Health service hours are not on time, where health workers should come at 8 am but in reality the officers come at 9 am. In conveying patient health information and patient diagnosis is not accurate. This makes patients dissatisfied with the services provided at the Health Center. This research is in line with research conducted by Leny Ramadhan in 2023 which shows the results that reliability, responsiveness, assurance, empathy, physical evidence simultaneously have a positive influence on satisfaction as a patient. In

a partial test (T test), the dimensions of reliability, responsiveness and guarantee have a positive and significant effect on people's satisfaction as patients (Ramadhan, 2023). Khairullah Azhar et al in 2023 regarding analysis of the influence of tangible, reliability, responsiveness, assurance and empathy on outpatient satisfaction. It can be concluded that the dimensions of physical evidence and reliability have a significant and positive effect on outpatient satisfaction, while the dimensions of responsiveness, assurance and empathy have an insignificant but positive effect, then based on the adjusted R-Squared value of 0.937 or 93.7%, the remaining 6.3% are other factors which also influences patient satisfaction, including errors (Azhar et al., 2023).

The dimension of reliability is the ability to display the promised service promptly and accurately. The reliability dimension gets a score of 70% through CSI calculations, which shows that respondents are satisfied with the quality of health services if they get a score of 66% -80.99%. There are seven questions for the reliability dimension. If you look at each question, it turns out that the average level of importance (3.54) is greater than the average level of performance (3.03). The majority of patients are satisfied with what they think is good service, as well as skilled and professional doctors. However, this study is not in line with the study conducted by Julianti (Tampubolon, 2023) that most respondents felt dissatisfied with the services.

The responsiveness dimension variable has a sig value of 0.007, namely < 0.05 significance level, meaning that responsiveness has a significant influence on BPJS patient satisfaction. It is known that the regression coefficient value of the responsiveness variable is 3,568, which is positive. Because the coefficient value is positive, responsiveness has a positive and significant influence on patient satisfaction. The study Roslinda Salaga in 2022 regarding satisfaction analysis of inpatient BPJS patients shows that the dimensions of reliability, responsiveness, confidence, physical evidence and empathy have a positive and partially significant effect on the satisfaction of inpatients at Bina Kasih Hospital, Medan. The results of the research show that several service quality factors influence the level of satisfaction of inpatients, including the speed of staff in providing services, the timeliness of services, the timeliness of nurses when patients need help, and the speed of administrative officers in serving consumers (Roslinda, 2022)

This research is not in line with research conducted by Ningsih et al., (2023) regarding the influence of the quality of health services on the satisfaction of outpatient BPJS participants. The results of the hypothesis test above show that responsiveness has a negative but significant effect on patient satisfaction. These results show that the staff Health Center they are sensitive in providing services and are not quick in completing them.

Responsiveness or responsiveness is a willingness to help and provide fast and accurate service to customers. The dimension of responsiveness gets a score of 70%. There are six questions for the guarantee dimension. If we look at each question, it turns out that the average level of importance (3.56) is almost comparable to the average level of performance (3.5).

The research results show that one aspect of perceived responsiveness that needs to be improved in health services is friendly and polite service. This is very important to provide healthcare services that satisfy patients because patients really need support. Friendly and polite service with a smile and greeting can make patients feel well served, which will help them in their healing process. Responsiveness and sensitivity to patient needs will improve the quality of health services.

The relationship between perceived responsiveness and patient satisfaction is the result of stimuli and patients' perceptions of the services they receive. If their perception of the service they receive is in accordance with what they received, then patients will feel satisfied with the responsiveness of health workers, and vice versa, if what they expect does not match reality then patients will be dissatisfied (Anjayati, 2021).

The guarantee dimension variable has a sig value of 0.024, namely <0.05 significance level, meaning that guarantees have a significant influence on BPJS patient satisfaction at the Health Center. It is known that the regression coefficient value of the guarantee variable is 3,708, which is positive. Because the coefficient value is positive, the guarantee has a positive and significant influence on patient satisfaction. This study is not in line with the study conducted by Dewi and Jihad (2023) which showed that in the dimension of assurance, the level of patient satisfaction was less than good.

This research is in line with research conducted by Leny Ramadhan in 2023 regarding BPJS Patient Quality Analysis of Outpatient Services at Pasar Rebo Hospital, East Java,

showing the results that reliability, responsiveness, assurance, empathy, physical evidence simultaneously have a positive effect on satisfaction as patient. Partially, reliability, responsiveness and guarantee have a positive and significant effect on people's satisfaction as patients. Meanwhile, empathy and physical evidence have a positive and insignificant effect on people's satisfaction as patients (Ramadhan, 2023)

The guarantee dimension gets a value of 72.8% through CSI calculations. There are seven questions for the guarantee dimension, which shows that respondents are satisfied with the quality of health services if they get a score of 66% -80.99%. If we look at each question, it turns out that the average level of importance (3.65) is almost comparable to the average level of performance (3.64). In this study, using the CSI method, the guarantee dimension value was obtained at 72.8%, which means that the majority of respondents were satisfied with the responsive service.

The research results show that community health centers must improve the education of health workers and their ability to serve patients. This is because the education and skills of health workers ensure that the patient's healing process goes smoothly, which greatly influences patient confidence and makes patients feel safe when they receive care from health workers. These results are in line with the theory of quality assurance which means convincing people, securing or protecting and providing fairness to patients by using techniques in accordance with procedures to improve patient care. The insurance factor is very important because a patient's recovery is in the hands of the health workers who treat him during hospitalization. Health workers must have appropriate knowledge and follow existing procedures to provide health services because patients need proper and guaranteed healing.

The physical evidence dimension variable has a sig- value of 0.024, namely < 0.05 significance level, meaning that the physical evidence dimension has a significant influence on BPJS patient satisfaction at the Bawomataluo Community Health Center. It is known that the regression coefficient value of the physical evidence variable is 3,766, which is positive. Because the coefficient value is positive, physical evidence has a positive and significant influence on patient satisfaction.

This research is in line with research conducted by Abdu and Patarru (2023) regarding analysis of the quality of inpatient services using the servqual method approach in the

Inpatient Room of the Stella Maris Health Center Makassar which states that the results of the research are servqual score (gap) in the dimensions of tangible, assurance, responsiveness and empathy each have a positive value. This means that the service the patient receives is more than what the patient expected. The performance of the puskesmas according to patient perception in terms of service quality is very good. However, in terms of the responsiveness dimension, doctors' dexterity in responding to patient problems needs to receive attention from community health center managers because the Servqual score is negative (Abdu & Patarru, 2023)

The physical evidence dimension received a score of 73.2% through CSI calculations, which shows that respondents are satisfied with the quality of health services if they get a score of 66% -80.99%. There are seven questions for the guarantee dimension. If we look at each question, it turns out that the average level of importance (3.67) is almost comparable to the average level of performance (3.65). In this study, using the CSI method, the physical evidence dimension value was 73.2%, which means that the majority of respondents were satisfied with the physical evidence provided by the Bawomataluo Community Health Center.

The empathy variable has a sig- value of 0.031, namely <0.05 significance level, meaning that empathy has a significant influence on BPJS patient satisfaction at the Bawomataluo Community Health Center. It is known that the regression coefficient value of the Empathy variable is 4,598, which is positive. Because the coefficient value is positive, empathy has a positive and significant influence on patient satisfaction.

This research is in line with research conducted by Ningsih et al., (2023) regarding the influence of the quality of health services on the satisfaction of outpatient BPJS participants at the Antang Perumnas Health Center, stating that the results of statistical tests show that partially the variables are physical evidence (tangible), reliability, and empathy has a positive and significant effect on patient satisfaction. Aldianur et al in 2023 regarding Analysis of Patient Satisfaction Levels with the Decision to Change BPJS Patient Care Classes at Ulin Regional Hospital, Banjarmasin, showing that the factors that have a significant influence include Assurance and Empathy (Norhikmah et al., 2022)

The empathy dimension received a score of 74.8% through CSI calculations, which shows that respondents are satisfied with the quality of health services if they get a score of 66%

-80.99%. There are seven questions for the guarantee dimension. If we look at each question, it turns out that the average level of importance (3.73) is almost comparable to the average level of performance (3.75). In this study, using the CSI method, the physical evidence dimension value was 73.2%, which means that the majority of respondents were satisfied with the physical evidence provided by the Bawomataluo Community Health Center. Another factor that influences BPJS patient satisfaction is empathy. This can be caused by the ability to communicate and provide attention, as well as the ability of health care providers (doctors, nurses) to understand what patients need when they receive care and expect the best health services from the health center.

CONCLUSIONS

There is an influence on the level of BPJS patient satisfaction on health services at the Bawomataluo Community Health Center, Fanayama District when viewed from the aspects of reliability , assurance, tangibles, empathy , but there is no influence when viewed from the aspect of responsiveness in terms of level of performance.

LIMITATIONS

The researcher only looked at several factors that influence BPJS patient satisfaction in this study. It is hoped that further researchers will examine other risk factors besides the factors that have been studied here.

REFERENCES

Abdu, S., & Patarru, F. (2023). Analisis Kualitas pelayanan rawat inap dengan menggunakan pendekatan metode Servqual. *Jurnal Keperawatan Florence Nightingale, 6*(2), 52–58. https://doi.org/10.52774/jkfn.v6i2.117

Anjayati, S. (2021). Review artikel: Analisis kualitas pelayanan terhadap kepuasan pasien di Puskesmas menggunakan metode Servqual. *Nursing Care and Health Technology Journal (NCHAT), 1*(1), 31–38. https://doi.org/10.56742/nchat.v1i1.7

Azhar, K., Ruspitasari, W., & Bukhori, M. (2023). Analisis pengaruh tangible, reliability, responsiveness, assurance dan empathy terhadap kepuasan pasien rawat jalan di rumah sakit umum daerah Pambalah Batung Kabupaten Hulu Sungai Utara. *Al-Kharaj : Jurnal Ekonomi, Keuangan & Bisnis Syariah, 6*(3), 3579–3595. https://doi.org/10.47467/alkharaj.v6i3.5232

Dewi, R., & Jihad, F. (2023). Hubungan kualitas pelayanan kesehatan dengan kepuasan pasien rawat jalan pesertsa BPJS Kesehatan. *Jurnal Kesehatan Tambusai, 4*(3), 3662–3671.

Lambuena, J., Sitorus, B., Chandra, P. B., Kes, M., Simangunsong, P. M. J., Km, S., & Kes, M. (2023). Faktor-faktor yang mempengaruhi kepuasan pasien terhadap layanan Jaminan Kesehatan Nasional di ruang rawat inap Puskesmas Bagan Batu Tahun 2022. J*ournal of Healthcare Technology and Medicine, 9*(2), 822–828.

Mariani, T., Rahma, S., Amira, A. P., & Gurning, F. P. (2023). Literatur review: Analisis pemahaman pasien terhadap sistem rujukan berjenjang Jaminan Kesehatan Nasional (JKN). *El-Mujtama: Jurnal Pengabdian Masyarakat*, *4*(2), 981–991. https://doi.org/10.47467/elmujtama.v4i2.4592

Meistika, S., Lestari, N., Pramuningtyas, R., & Ichsan, B. (2021). Kepuasan pasien BPJS Terhadap waktu tunggu pelayanan Puskesmas di Sukoharjo. *Proceeding Book National Symposium and Workshop Continuing Medical Education XIV*, 1156–1183.

Ningsih, S. M. H., Haeruddin., & Multazam, A. (2023). Pengaruh kualitas pelayanan kesehatan terhadap kepuasan pasien rawat jalan peserta BPJS di Puskesmas Antang Perumnas Kota Makassar. *Window of Public Health Journal*, *4*(6), 1085–1093. https://doi.org/10.33096/woph.v4i6.455

Norhikmah, P., Farid, F. M., & Lestia, A. S. (2022). Pemodelan Regresi data panel pada tingkat partisipasi angkatan kerja perempuan di Provinsi Kalimantan Selatan, *RAGAM: Journal of Statistics and Its Application, 01*, 1–10.

Ramadhan, L. (2023). Analisis kepuasan pasien BPJS Terhadap pelayanan rawat jalan di RSUD Pasar Rebo. *Jurnal Kesehatan Tambusai*, *4*(3), 2347–2354.

Roslinda, S. (2022). Analisis dimensi kualitas pelayanan terhadap kepuasan pasien BPJS Mandiri rawat jalan pada rumah sakit Bina Kasih Medan. *Manajemen dan Bisnis*, *22*, 490–515.

Setiawan, M. D., Fauziah, F., Edriani, M., & Gurning, F. P. (2022). Analisis mutu pelayanan kesehatan program jaminan kesehatan nasional (A: Systematic review). *Jurnal Pendidikan Tambusai*, *6*(2), 12869–12873. https://doi.org/https://doi.org/10.31004/jptam.v6i2.4456

Syafira, M., Yoserizal., & Putera, R. E. (2023). Analisis kinerja puskesmas seberang padang dalam memberikanpelayanan kesehatan. *Jurnal Ranah Publik Indonesia Kontemporer (Rapik), 3*(1), 15–26. Retrieved from https://rapik.pubmedia.id/index.php/rapik/article/view/35