

Inpatient Service Procedures for Insurance and Non-Insurance Patients at National Hospital Surabaya

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ABSTRACT

The research aims to make it easier for patients to get comprehensive health services and establish patient diagnoses and plan appropriate therapy for patients. The research method uses empirical normative methods, which means research whose object of study is aimed at written regulations and valid data in the field so that this research is very closely related to libraries and data in the field. The results of the research on legal protection for patients are listed in Law Number 36 of 2009 concerning Health, Law Number 29 of 2004 concerning Medical Practice, Law Number 44 of 2009 concerning Hospitals, and because patients are consumers of services, provisions also apply in Law Number 8 of 1999 concerning Consumer Protection. The relationship between the patient and the hospital is a civil law relationship. If one party defaults, the other party, in this case the patient, can file a lawsuit/claim for compensation against the default party. The provisions of Article 1365 can also be used as a reference for patients to make claims for compensation against hospitals or health workers, because they have caused harm to patients, both physically and non-physically.

Keywords: Hospitals, Hospitalization, Insurance, Services. Constitution

1. INTRODUCTION

The goal of hospital services is to provide good, quality, professional health services, and be accepted by patients (Febry, 2018). However, nowadays this cannot be done easily and practically. With various hospital staff who are of course competent in their respective fields, this cannot necessarily satisfy the needs of a patient and his family (Hidajahningtyas et al., 2013). Today's health services are far more complex than they were a few decades ago. These factors include:

1. The greater the demands of patients or the public for quality, effective and efficient health services.
2. Health service standards must comply with advances in technology and medical science.
3. The patient's background is very diverse (level of education, economy, social, and culture).
4. Health services involve various disciplines and institutions.

With various complexities in health services, it often complicates communication between patients/families and health care providers (Etika, 2007). The existence of good communication



can help solve various problems in hospital services and the Indonesian Hospital Ethics Council (hereinafter abbreviated as Guidelines). So with these guidelines it is hoped that the application of COOPERATIVES in hospital services will become a reality so that hospitals in Indonesia are able to carry out a noble mission in improving the health status of the Indonesian people (Sipahutar, 2020).

In order to facilitate the application of the guidelines, it is necessary to formulate general provisions and basic definitions as follows:

1. Hospital is a health service institution that has been determined and regulated by the laws of the Republic of Indonesia. The hospital as a health service facility is a socio-economic unit, must prioritize humanitarian tasks and prioritize its social functions.
2. Hospital personnel are those who are involved in the organization and management of the hospital.
3. The Indonesian Hospital Code of Ethics is a summary of the moral norms that have been codified by the Association of Indonesian Hospitals (PERSI) as a professional organization in the field of Indonesian hospitals.
4. The Hospital Code of Ethics is a non-structural organizational device formed in a hospital to assist hospital leaders in implementing the CODERS.
5. The Association of Indonesian Hospitals (PERSI) is an organization that brings together and represents hospitals throughout Indonesia.
6. The Indonesian Hospital Ethics Council (MAKERSI) is an autonomous PERS body specially formed at the central and regional levels to carry out KODERSI.

2. RESEARCH METHOD

The research method used is the empirical normative method, which means research whose object of study is aimed at written regulations and valid data in the field so that this research is very closely related to libraries and data in the field because it will require secondary data, about general conditions. hospital National Hospital Surabaya (general description and object of research), as well as an analysis of patient opinions about the inpatient system and services at National Hospital Surabaya.

3. RESULTS AND DISCUSSION

Factors Affecting Service Quality

Quality is the ability level of the appearance of something being observed. . Quality is a property possessed by a program. Quality is the totality of the form and characteristics of the status of goods or services, which includes the sense of security or the fulfillment of the needs of users. . Quality is compliance with established standards. Based on the description above, it can be concluded that quality is a decision related to the service process, contributing to the outcome value, fulfilling the needs of service users or goods that are multidimensional (Haryanto &Olivia, 2011).

In conducting research on service quality is not easy because service quality is multidimensional. Each person can make an assessment from a different dimension, depending on their respective backgrounds and interests. Research conducted by Robert and Prevost has succeeded in proving the existence of different dimensions, namely:

1. For users of health services, the quality of health services is more related to the dimensions of responsiveness of staff in meeting patient needs, concern and friendliness of staff in serving patients or healing diseases that are being suffered by patients.
2. For health service providers, the quality of health services is more related to the dimensions of suitability of health services provided with the latest developments in science and technology and professional autonomy in providing health services according to patient needs.
3. For health service funders, the quality of health services is more related to the dimensions of efficiency in the use of funding sources, the fairness of financing, and the ability to withstand the funder's cost burden.

To overcome the differences in dimensions regarding the problem of the quality of health services, the guidelines used should be based on the basic nature of the implementation of these health services. The basic nature in question is to meet the needs and demands of users of health services, which if successfully fulfilled will lead to a sense of satisfaction (client satisfaction) with the health services provided. So what is meant by the quality of health services is to refer to the level of perfection of health services in creating a sense of satisfaction in each patient. The more perfect the satisfaction, the better the quality of health services (Afifah & Paruntu, 2015).

Even though the notion of quality related to satisfaction has been widely accepted, its application is not as easy as one might think. The main problem that was found was because the satisfaction turned out to be subjective. Each person, depending on their background, may have a



different level of satisfaction for the same quality of health services. In addition, it is often found that health services, even though the value has satisfied the patient, but when viewed from the code of ethics and professional service standards, are not fulfilled. To overcome this problem, it is necessary to agree on restrictions, namely:

1. Limitations on the degree of patient satisfaction. In order to avoid individual subjectivity which can complicate the implementation of quality assurance programs, it is stipulated that what is meant by satisfaction here, it is stipulated that the measure used is of a general nature, namely in accordance with the level of satisfaction of the average population.
2. Restrictions on attempts made. The agreed-upon limitations are those concerning efforts to generate patient satisfaction. To protect the interests of users of health services, who are generally unfamiliar with medical procedures. It was determined that the efforts made must be in accordance with the code of ethics and professional service standards, not quality health services. In other words, in terms of the quality of health services, it also includes the perfection of the procedures for administering them in accordance with the code of ethics and professional service standards that have been implemented.

Thus in general it can be said that what is meant by quality of service is that which refers to the level of perfection of health services in creating a sense of satisfaction in each patient. The dimensions of the quality of health services that have been widely used to measure the quality of health services that have been widely used to measure the quality of health services are known as the SERVQUAL (service quality) model developed by Zeithaml and Parasuraman which is widely used as the basis for the research concept, known as RATER. . The five dimensions of service quality include the following:

1. Reliability, namely the ability to provide services in accordance with the promises offered. The assessment of service quality is seen from the ability of the hospital related to the timeliness of service, time to process registration, time to start treatment/examination, suitability between expectations and actual time for patients.
2. Assurance (Guarantee) includes the employee's ability to know the product correctly, guarantee safety, skills in providing security in instilling customer trust in the company.
3. Tangibles (appearance/physical evidence) is a form of physical convenience which includes the appearance and completeness of physical facilities such as comfortable treatment rooms, buildings and front office rooms, availability of parking spaces,

cleanliness, tidiness, and comfort of waiting rooms and examination rooms, equipment communication equipment, and appearance.

4. Empathy, namely individual attention given by the hospital to patients and their families such as ease of contact, ability to communicate, high attention from officers, ease of communication, high attention from officers, ease of reaching locations, ease of pay, and take care of administration.
5. Responsiveness (responsiveness and concern), namely the response or readiness of employees in helping customers and providing fast and responsive service, which includes employee readiness in serving customers, employee speed in handling transactions, and handling customer or patient complaints.

Health services is a concept used in providing health services to the community. The definition of health services according to (Putri, 2022) is a subsystem of health services whose main purpose is preventive (prevention) and promotive (health improvement) services with the target community. Health according to Law no. 36/2009 on Health consists of two elements, namely "health efforts" & "health resources". What is meant by health resources, consists of health human resources (health workers, namely doctors, pharmacists, midwives, nurses) & health facilities (including hospitals, health centers, polyclinics, doctors' offices) (Iskandar, 2016).

Several kinds of forms and types that differ in the level of service and also the ability to serve. The following are types of health services:

1. Primary Health Services

Primary health services are services that are basic in nature, are the first referral health services that are easily accessible to the people in their environment and are carried out with the community.

2. Secondary Health Services

Secondary health services are services that are more specialist in nature and sometimes even sub-specialist services, but they are still limited. Secondary and tertiary health care (secondary and tertiary health care), is a hospital, where people need further treatment (referral). In Indonesia there are various levels of hospitals, ranging from type D hospitals to class A hospitals.

3. Tertiary Health Services

Tertiary health services are services that prioritize subspecialty and broad subspecialty services.



Talking about quality, the word quality itself has many different definitions, from conventional to strategic. The conventional definition of quality usually describes the characteristics of a product such as performance, reliability, ease of use, aesthetics, and so on. Quality in the strategic definition means everything that is able to meet the wants and needs of customers (meeting the needs of customers).

According to the Big Indonesian Dictionary (1995: 467), quality is defined as "the good or bad level of something". Service quality is strongly influenced by consumer expectations or service users. The expectations of service users can vary from one user to another, even though all of these users are given the same service (Listiyono, 2015). Service quality itself is something abstract that cannot be seen but can be felt. Quality may be seen as a weakness when consumers or service users have too high expectations for the services provided.

The service quality indicators put forward by Zeithaml and Parasuraman in the previous paragraph affect customer expectations and the reality they receive. If in fact the customer receives service beyond their expectations, then the customer will say the service is of high quality and if in fact the customer receives less service than they expected, then the customer will say the service is not of high quality or unsatisfactory (Akbar et al., 2022).

Health services in Indonesia are still far behind compared to other ASEAN countries such as Malaysia. People choose to undergo treatment or check-ups in other countries, meaning that the quality of hospitals in Indonesia must be improved. To assess the quality of hospital services, the National Health Services (NHS) introduced 6 (six) requirements in assessing the performance of hospital services, one of which is efficiency.

Organizational Structure of National Hospital Surabaya

National Hospital Surabaya is one of the organizations in the health sector in which there is a group of people or legal entities that guarantee good relations between one another and then have an agreement to achieve certain goals. A good organization in a company is an organization that can help achieve the vision and mission or goals of the company that supervises it. Some ways include placing people who are competent in their fields to occupy certain positions or positions in accordance with their obligations and responsibilities. The division of tasks and authorities based on the level where the high power in the operation is under the leadership of a main director. The main director then oversees a general manager. In addition, there are also several departments that interact with each other.

At National Hospital there is an Executive Office Department which oversees all departments in National Hospital Surabaya and has full authority to carry out all of the hospital's operational activities.

National Hospital Surabaya products

As an international scale hospital, National Hospital Surabaya has facilities and products that are sold that are not inferior to other hospitals. National Hospital Surabaya offers facilities and products to make patients feel comfortable when hospitalized at National Hospital Surabaya. Some of the main accommodations or products available at National Hospital Surabaya include:

1. Patient Room (room)

National Hospital Surabaya is a hospital that has a total of 300 beds. This number includes executive class, VIP class, 2 bedded class, and ward class. For the average price of patient rooms are as follows:

- Suite room : IDR 2,200,000 / day
- Junior suite : IDR 1,500,000 / day
- Executive suite : IDR 1,250,000 / day
- VVIP : IDR 1,100,000 / day
- VIP : IDR 800,000 / day
- Class I : IDR 600,000 / day
- Class II : IDR 450,000 / day
- Class III : IDR 225,000 / day
- Transit room : IDR 600,000 / day
- NICU : IDR 900,000 / day

2. Featured Facilities

- Cardiology
 - Orthopedics
 - Gastrologi
3. 24 hour Emergency Room
 4. Stroke Center
 5. Klinik Hemoroid
 6. Diabetes and wound clinic
 7. Incontinence Clinic
 8. Pain Clinic
 9. Spine clinic and child development



10. Free Wifi Access
11. Lobby

National Hospital Surabaya Organizational Structure Chart

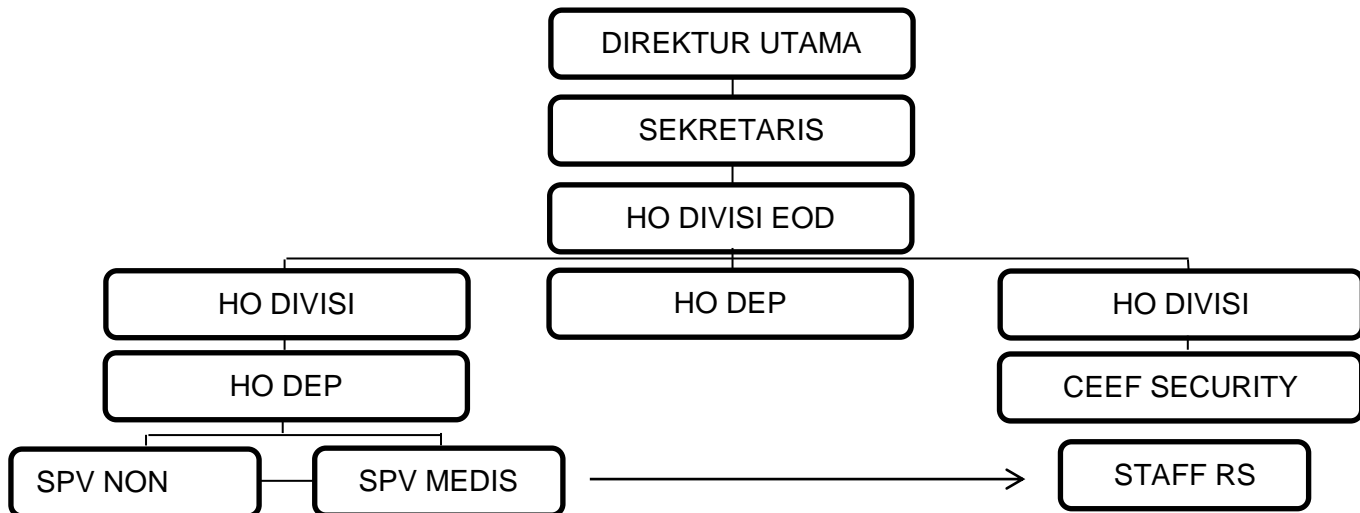


Image 1. Looks Home of Hospitals and Inpatient Rooms and Information Services

The Effect of Service Quality on Patient Satisfaction

Quality of service becomes a necessity or obligation that must be given by a company in order to survive and continue to gain customer trust. Consumer consumption patterns and lifestyles demand companies to be able to provide the best and quality service (Utami et al., 2016). The

company's success in providing quality services can be determined by an approach called service quality. Service quality is how far the difference between the expectations and reality of customers for the service they receive. Service quality can be identified by comparing customer perceptions of the actual service they expect. Service quality refers to the customer's assessment of the core of the service, namely the service provider himself or the entire organization involved in the service. Most people are now starting to show demands for maximum and excellent service, they no longer just need quality products but they prefer to enjoy the convenience of service (Dewi, 2017). The results of the study show that service quality has a significant effect on customer satisfaction, in this case, patients at National Hospital Surabaya.

Effect of Price on Patient Satisfaction

Price is the amount of money charged for an item or service or the sum of all the values exchanged by consumers or the benefits of having or using the product/goods or service (Setyawati et al., 2018). Price is the amount of money that must be paid to obtain the right to use a product/goods or service. A company must set prices appropriately in order to be successful in marketing goods or services (Hosang, 2016). Price is the only element of the marketing mix that provides income or income for the company. Price seen from the consumer's point of view is often used as an indicator of value if the price is related to the perceived benefits of an item or service. The results of the research in the scientific periodical efficiency journal volume 16 No.01 of 2016 show that price has no significant effect on patient satisfaction. This means that every increase or decrease in price does not really affect the increase or decrease in the level of patient or consumer satisfaction itself. So that consumers or patients do not necessarily think that price is the only factor that will give them satisfaction.

4. CONCLUSION

Overall the quality of service at National Hospital Surabaya is quite good, but still requires improvement in several respects, namely: the physical condition of the building, the supply of medical devices, linen and household appliances that are still lacking, the empowerment of professional staff, the selection and recruitment system according to standards, implementation of actions according to standards. The problems found at the National Hospital Surabaya are the factors causing the low service provided, including: the quality of staff and the type of staff in inpatient rooms, especially medical staff, are still lacking, the number of administrations is greater, the availability of water/electricity, the facilities are still lacking, the development of continuing education for paramedic staff is still lacking, the physical condition of the building is still under

repair, the attitude of the service staff is still not friendly, the service time is still long and the implementation of easy SOPs is not optimal.

Legal protection for patients is contained in Law Number 36 of 2009 concerning Health, Law Number 29 of 2004 concerning Medical Practice, Law Number 44 of 2009 concerning Hospitals, and because patients are consumers of services, provisions in this Law also apply. -Law Number 8 of 1999 concerning Consumer Protection. The relationship between the patient and the hospital is a civil law relationship. If one party defaults, the other party, in this case the patient, can file a lawsuit/demand for compensation against the default party. The provisions of Article 1365 can also be used as a reference for patients to make claims for compensation against hospitals or health workers, because they have caused harm to patients, both physically and non-physically.

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