

Analysis of Factors Causing Pending BPJS Inpatient Claims at The RSU dr. H.

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ABSTRACT

Dr. H. Koesnadi Bondowoso General Hospital reported that from February to April 2024, out of 4,918 inpatient BPJS claim files, 25 files (1.5%) had pending claim status. This affected the timely disbursement of BPJS claim funds, disrupting the hospital's cash flow as the expected payments were not received as anticipated. The aim of this study is to analyze the factors causing pending inpatient BPJS claims at Dr. H. Koesnadi Bondowoso General Hospital. This research employs a qualitative approach with data collection techniques including observation, in-depth interviews, and documentation. Problem prioritization is conducted using the USG method, and problem-solving is achieved through brainstorming. Data analysis involves data collection, data reduction, problem-solving efforts, and drawing conclusions. The research subjects include 1 Head of Control Installation, 2 DPJPs (Attending Physicians), 1 Internal Verifier Officer, 2 Inpatient Coding Officers, 2 Entry Officers, and 1 Administrator. The research findings indicate that the Motivation factor is not a cause of pending claims as there is already a sense of responsibility among DPJP, coding officers, and entry officers. The Opportunity factor causes pending claims due to uneven training among coding staff and the absence of a job description outlining the duties of claim staff. The Ability factor causes pending claims due to the lack of knowledge among coding and entry staff, differences in perceptions between DPJP and BPJS in the claim process, and the presence of new, inexperienced coding and entry staff. The top priority problem identified (USG) is the lack of knowledge among claim staff regarding the BPJS claim submission process. The proposed solutions include conducting regular socialization related to claim submission procedures, sending claim staff for training, and educating them about the claim process.

Keywords: BPJS, Brainstorming, Claims, Pending, Performance, USG.