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THE EFFECT OF SERVICE QUALITY TO THE PATIENT SATISFACTION OF PREMIUM RECIPIENT AND NON-PREMIUM RECIPIENT OF NATIONAL HEALTH INSURANCE (JKN PBI AND NON PBI) PARTICIPANTS IN OUT-PATIENT UNIT OF RS X JEMBER DISTRICT

Ahmad Fausi*[1], Dewi Rokhmah[2] and Hadi Prayitno[3]

[1]Public Health Graduate Program, Jember University, Indonesia.
[2]Faculty of Medicine, University of Jember Indonesia.
[3]Faculty of Public Health Jember University of Jember, Indonesia.

*Corresponding author: Ahmad Fausi
Public Health Graduate Program, Jember University, Indonesia.
Email Id: ahmadfauzi100788@gmail.com.

ABSTRACT

This research aimed to identify effects of service quality to the patient satisfaction of premium recipient (PBI) and non-premium recipient (Non-PBI) of National Health Insurance in out-patient unit of RS X, Jember District. The method of this research was quantitative, while based on the research time, it was included into cross sectional research. The total sample of this research were 110 sample, which were taken from purposive sampling. The data was then analyzed through ordinal regression test in order to test the effects with significance value ($\alpha > 0.05$). The test result on effects of service quality and patient satisfaction on this research showed that the significance level value 0,000 was fewer than T table value 0,005, thus, H0 was approved, which stated that there was effect between service quality and patient satisfaction in the out-patient unit of RS X, Jember District, particularly the total N were 110 respondents. This research concluded the effect between service quality and patient satisfaction of premium recipient and non-premium recipient of National Health Insurance participants in the out-patient unit of RS X, Jember Distrcit.

KEYWORDS: The effect of service quality to the patient satisfaction.

INTRODUCTION

The service in a health sector is a form of service that is regarded as the most needed by society. One of health service means that has the most significant role to provide health service to the society is hospital. According to the Laws of Republic Indonesia 40th, 2004 about the System of National Social Insurance (SJSN/Sistem Jaminan Sosial Nasional), it has been regulated about the implementation of this insurance. The National Health Insurance (JKN/Jaminan Kesehatan Nasional) is a form of protection in health sector which given to participants who have paid the premium or invoice to the government, so the participants can get benefit of health maintenance and protection for the better fulfillment of health basic needs (Official Regulation, 2013).

The quality is a form of submission to standard, the quality health service is defined as a health service which always attempts to fulfill patient's expectation, so the patients will always feel satisfied as well as be thankful to the service they have gotten (Bustami, 2011), according to Pohan (2007), the quality health service is a kind of health service that needed nowadays, in this context, it will be determined by the health service profession and affordability due to the society purchasing ability or standard. Whilst, the satisfaction is explained as a level of condition which is felt by individual from the comparison result between product demonstration or outcome and its relation to the individual expectation. (Joko Wijono, 2000). Further, several factors that can influence the patient satisfaction according to Moison, Walter, and White (in Nooria, 2008), are characteristic, product, price or cost, service quality, location, facility, visual design, environment and communication.

According to the report from BPJS Kesehatan 2017, based on the utilization of health service in advanced level of health service facility, the patient visit of Advanced Level Out-patient in 2016, it has reached to 49.283.264 total visit or increase in about 23,79% if it is compared to the realization in 2015 39.813.424 total visit, with the visit rate of advanced level outpatient unit

in 2016 24,79%, the average of total visit of advanced level outpatient unit in 2016 has reached to 4.106.939 total visit per month (Based on Data of BPJS Kesehatan, 2017)

Based on the data from medical record report of RS X, Jember district in 2019, the level of patient's total visit from National Health Insurance participants in each period has been increased more, due to the type of patient's insurance or guaranty, there are two groups of National health Insurance participant, Premium Recipient and Non-Premium Recipient. The data of insurance visit number in outpatient installation of RS X, Jember District from the period of January – June, 2019, the total are 20020 patients, the patients from National Health Insurance participants are in the main rank than the other kinds of insurance, in approximately 12753 patients, they are from participants of social health insurance 1993 patients, independent national health insurance and private employee 3624 patients who are categorized into patients of non-premium recipients, while 8136 patients are premium recipients of national health insurance, from all the number of national health insurance participants in the outpatient installation, the most dominant are the participants of premium recipient of national health insurance (Data from Medical Record Report of RS X, Jember District in 2019).

The preliminary research findings that has been done by the researchers in September, 2019 which exerts questionnaire of patient satisfaction index to the visitors in outpatient unit of RS X, Jember District as many as 25 patients from either premium recipient or non-premium recipient of national health insurance. According to the survey result of preliminary research, it shows that as many as 15 patients have been satisfied to the service, while the other 10 patients felt less satisfied, this dissatisfaction is due to the waiting period of service from the health officer and other problems as lack of knowledge of service stages or procedures and outpatient administrative requirements from the participants of premium recipient of national health insurance to get the health service, as well as the same treatment of health service between patients of premium recipient and non-premium recipient of national health insurance in the outpatient unite of RS X, Jember District.

METHODS

This research was included into analytic observational research and quantitative research, while based on the research time, it was included into cross sectional research. The dependent variable was patient satisfaction which covered to the overall satisfaction, product compatibility to the expectation, and level of satisfaction during patient's experience. Next, the independent variables were dimension of service quality in outpatient installation unit which covered a number of indicators like reliability, assurance, tangible, empathy, and responsiveness. The total sample of this research were 110 sample, which were taken through purposive sampling method. The data was then analyzed through ordinal regression method which aimed to test the effect of significance level ($\alpha > 0.05$) through help of SPSS computer application program. The technique of data collection was questionnaite in likert scale measurement. The researchers also conducted research ethics test at medical faculty of Jember University with certificate number 663 / UN25.8 / KEPK / DL / 2019.

RESULTS

Respondent Characteristics
Gender
Table 1. Distribution of Respondent's Gender.

Gender	Total	Percentage (%)
Male	27	24.5
Female	83	75.4
Total	**110**	**100**

Based on the table 1, it was known that the distribution of respondent's gender showed that most of patients from national health insurance participant in outpatient unit of RS X, Jember District were female in approximately 75.4% respondents from the total 110 respondents. One of service user characteristics was respondent's gender. According to Kotler & Keller (2009), gender determined favor and type of service/product which would be chosen or used. Kotler, Shalowits & Steven 92008) also stated that female or woman mostly utilized the health service than man did.

Age
Table 2: Frequency Distribution of Respondent's Age.

Age	Total	Percentage (%)
< 40 Years Old	64	58
$\leq$ 40 Years Old	46	41,8
Total	**96**	**100 %**

Based on the table 2, it was referred that the distribution of respondent's age that have been examined showed that the most patients from national health insurance participant in outpatient installation of RS X were in the age range < 40 years old in approximately 58% respondents from the total 100 respondents. This result was in line with the previous research done by Sudami (2009) that the age of patient in > 41 years old, their life quality would decrease than the age of patient < 41 years old who would have the better quality of life. Also, the theory from Sinulingga (2010), the group of productive age (15-60 years old) was the age or period which tended utilizing the health service facility.

Educational Background
Table 3: Distribution of Respondent's Educational Background.

Educational Background	Total (n)	Percentage (%)
Elementary School	61	55,4
Junior High School	15	13,6
Senior High school	22	20
Diploma/Bachelor	12	10,9
Total	**110**	**100%**

Based on the table 3, it was indicated that the distribution of respondent's educational background showed that most patients from national health insurance participants in outpatient installation unit of RS X were from elementary school graduation in approximately 61 or 55,4% respondents from the total 110 respondents. This result was supported by the previous research accomplished by Aly (2013) that the patients with low educational degree were more visiting the hospital than those who with high educational degree. Based on the theory proposed by Aguswina (2011), the individual who have high educational degree would have broader knowledge and enable that patient to control their selves

in order to solve the problems, have high self-confidence, have more experiences, and have a good way of thinking to settle with the condition, easy to understand to what the health officer recommended to, and be able to reduce anxiety, then, they could help to make decision.

Service Quality
The service quality was illustrated on table 4. The score of service quality showed that the patient's response to the service quality, whether it was poor, adequate, or has been good.

Table 4: Service Quality.

Financing Status	Service Quality						Total
	Poor		Adequate		Good		
	N	%	N	%	N	%	
Premium Recipient (JKN PBI)	0	0	17	26,2	48	73,8	65
Non-premium Recipient (JKN Non PBI)	0	0	22	48,9	23	51,1	45
Total	0	0	39	87,4	71	112,6	110

The score of service quality with status of premium recipient of national health insurance (JKN PBI) 0% as poor category, 26,2% as adequate category, and 73,8% as good category. While, the respondents with status of non-premium recipient of national health insurance (JKN Non PBI) 0% as poor category, 48,9% as adequate category, and 51,1% as good category. The value of service quality with the good category was mostly at the status of premium recipient of national health insurance (JKN PBI) in approximately 738%. The adequate category was mostly at the financing status of non-premium recipient of national health insurance (JKN

Non PBI) in approximately 48,9%. Last, the poor category was at the financing status of both premium recipient and non-premium recipient of national health insurance in approximately 0%.

Patient Satisfaction
The patient satisfaction was illustrated on table 5 below. The score of this service quality showed the patient's response to the service that they have gotten, whether they felt as satisfied, quite satisfied, less satisfied, and not satisfied.

Table 5: Service Satisfaction.

Financing Status	Service Satisfaction								Total
	Dissatisfied		Less Satisfied		Quite Satisfied		Very Satisfied		
	N	%	N	%	N	%	N	%	
Premium Recipient (JKN PBI)	0	0	0	0	31	47,7	34	52,3	65
Non-Premium Recipient (JKN Non PBI)	0	0	0	0	29	64,4	16	35,6	45
Total	0	0	0	0	60	112,1	50	87,9	110

The score of service satisfaction with status of premium recipient of national health insurance (JKN PBI) 0% as dissatisfied, 0% as less satisfied, 47,7% as quite satisfied, and 52,3% as very satisfied. Meanwhile, the respondents with status of non-premium recipient of national health insurance (JKN Non PBI) 0% as dissatisfied, 0% as less

satisfied, 64,4% as quite satisfied, and 35,6% as very satisfied. The score of service satisfaction with very satisfied category was mostlt at the status of premium recipient of national health insurance (JKN PBI) in approximately 52,3%. The score with quite satisfied category was mostly at the status of non-premium

recipient of national health insurance (JKN Non PBI) in approximately 64,4%. Last, the score with less satisfied category was mostly at the status of both premium recipient and non-premium recipient of national health insurance in approximately 0%.

The Effect of Service Quality to the Patient Satisfaction of Premium Recipient and Non-premium Recipient of National Health Insurance (JKN PBI and Non PBI) in Outpatient Unit of RS X Jember District
The effect of service quality to the patient satisfaction was derived from the respondents of premium recipient and non-premium recipient of national health insurance in the outpatient unit of RS X, Jember District and tested through ordinal regression analysis method. The result of test was shown on table 6.

Table 6: The Effect of Service Quality to the Patient satisfaction of Premium Recipient and Non-premium Recipient of National Health Insurance (JKN PBI and Non PBI) in the Outpatient Unit of RS X Jember District.

Service Quality	N	Sig.
Ordinal Regression	110	0,000

Based on the table 6, it was demonstrated that the effect of service quality to the patient satisfaction of premium recipient and non-premium recipient of national health insurance in the outpatient unit of RS X, Jember District was about 0,000. The significance level value 0,000 was fewer than the T table value 0,005, thus, H0 was approved, which asserted the effect between service quality and patient satisfaction in outpatient unit of RS X, Jember District, with the total 110 respondents.

The coefficient of service quality effect to the patient satisfaction was derived from the respondents of premium recipient and non-premium recipient of national health insurance in the outpatient unit of RS X, Jember District and tested through ordinal regression analysis. The result of test was shown on table 7.

Table 7: Coefficient of Service Quality to the Patient satisfaction of Premium Recipient and Non-premium Recipient of National Health Insurance (JKN PBI and Non PBI) Participants in Outpatient Unit of RS X Jember District.

Service Quality	Estimate	Std Error	Wald	Sig.
Constant	8,767	1,875	21,873	0,000
Quality	3,077	0,658	21,887	0,000

Based on the table 7, referring to the coefficient of service quality effect to the patient satisfaction of premium recipient and non-premium recipient of national health insurance in the outpatient unit of RS X, Jember District, it showed the equation of ordinal regression in the effect of service quality to the patient satisfaction of premium recipient and non-premium recipient of national health insurance (JKN PBI and Non PBI) in the outpatient unit of RS X, Jember District, which represented the satisfaction score = 8,767 + 3,077 (service quality). Based on the regression equation, it was explained that the score increase of service quality in outpatient unit of RS X, Jember District tended to be followed with the rise of service satisfaction, which quantitatively, the service quality could contribute to the patients' satisfaction of premium recipient and non-premium recipient of national health insurance (JKN PBI and Non PBI) 3,077 to the positive direction with constant value 8,767.

DISCUSSION
Service Quality
The service quality was shown on the table 4, which referred that the majority patients of premium recipient and non-premium recipient of national health insurance (JKN PBI and Non PBI) stated in good category, from this result, it referred that all patients agreed to the current service, therefore, they stated it as good. This result was in line with the research done by Etlindawati (2018), she stated in her research about the relation between health service quality and patient satisfaction of national health insurance participants in Community Health Center (Puskesmas) 1 Sokaraja. The development of health service quality was aimed to raise the patient satisfaction to the national health insurance to keep improving. This research was supported by another research done by Eninurkhayatun (2017), from her research finding, it showed that the compatibility level between expectation and reality to the service was approximately (77,00%), which meant that the level of patient satisfaction was in less satisfied category.

The majority patients of premium recipient and non-premium recipient of national health insurance (JKN PBI and Non PBI) have said that the service quality was already good, from this result, it referred that all patients agreed to the current service, therefore, they valued it as good, although, from the background of patient's financing status was different, where the premium recipient of national health insurance (JKN PBI) was paid by the government, while the non-premium recipient of national health insurance (JKN Non PBI) was paid by themselves from either payroll deduction or personal payment, it was summed up that although the premium payment was different, but they equally stated that the service quality in RS X, Jember District was in good category.

Patient satisfaction
The satisfaction level was demonstrated on the table 5, which showed that the majority patients of premium recipient of national health insurance (JKN PBI) very satisfied, while the respondents of non-premium recipient of national health insurance (JKN Non PBI) said that they quite satisfied, from this result, it indicated that all patients of premium recipient of national health

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