



Analysis of Availability of Input for Submission of National Health Insurance (NHI) Claims in Intensive Patients at Regional General Hospital Kendari City, Southeast Sulawesi Province

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Abstract

National health insurance is organized by the Social Security Administration (SSA) which aims to raise funds for health. Hospitals as health service providers have the right to demand compensation for services provided to SSA Health. Claims management is the process for filing and paying claims for advanced healthcare. The claim rate approved by SSA can affect the hospital's income. During the implementation process, many hospitals experienced delays in the SSA claim submission process. The purpose of the study was to analyze the availability of input for submitting claims for national health insurance in inpatients at the Kendari City Regional General Hospital (RGH). The type of research used is qualitative research. Data was collected by means of in-depth interviews, observation and document review. Data analysis was performed using Content Analysis Matrix. The results showed that from the analysis using the Content Analysis Matrix between input nodes, it was found that the Standard Operating Procedure (SOP) variable got the highest number, followed by the Claim file variable. Based on this analysis, it can be seen that the SOP variables and claim files are one of the main causes of delays in the implementation of claim submissions at the Kendari City Hospital, followed by HR, rewards and Computerized Information Technology (ICT) variables as supporting variables for delays in NHI claims.

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Conclusion: The ratio of NHI claims officers is not proportional to the workload, There is no reward given by the hospital to health workers involved in the implementation of SSA claim submissions. There are still many medical record files that are often filled out incompletely by the Doctor in charge of patients and nurses, There is no SOP on the implementation of claim submissions in the case mix room and SOP for filling out medical records, ICT is still inadequate. Recommendation; the need for additional claims officers, training officers, giving rewards, fulfilling the availability of SOPs, and adding computerized information technology tools.

Keywords: NHI claim; HR; SOP; Reward; ICT.

1. Introduction

The government as the organizer of the state has a main role in health development, the main goal is to provide protection and fulfillment of the needs of every citizen in order to create a level of public health that is equitable and sustainable throughout the territory of the Republic of Indonesia. In the context of health development, the state through the government provides health services, which can be accessed by the community. In reality, not all people are able to meet their needs because of their limitations. Likewise, the role of the state is limited in the distribution of health services so that not all citizens of the country can receive these health services. The existence of limited public finances, uneven distribution of services, difficulty in accessing services, the lack of availability of health facilities, limited health resources and the decreasing availability of government funds have forced the community and government to look for other alternatives to fulfill health needs, one of which is through the insurance program. national health [1]

In Law Number 40 of 2004 which contains the National Social Security System, SSA is a non-profit legal entity. According to Law No. 24 of 2011 contains about SSA is divided into 2, SSA health and SSA employment. SSA is directly responsible to the President. SSA has the authority to collect contributions, place funds, supervise and check the compliance of participants and employers [2]

The National Health Insurance Program is officially implemented by the Indonesian government starting January 1, 2014. The NHI program is organized by the Health Social Security Administration which is regulated in Law No. 24 of 2011. The purpose of this NHI program is to meet the needs of decent public health. Health services in the NHI program are provided to everyone who has paid dues or the contributions are paid by the government [3].

Since SSA health was enacted on January 1, 2014, technical implementation arrangements have been formulated in the form of presidential regulations, ministerial regulations of health, SSA regulations and regional regulations as practical guidelines. In health services, the importance of managing patient health in every medical service institution, the availability of medical record management is a major concern. Therefore, there is a need for synergistic collaboration between SSA Health and hospital health institutions. In the Minister of Health Regulation number: 269 / MENKES / PER / III / 2008 it is explained that medical records are documents that contain records and documents including patient identity, examination results, drugs given, and other actions and services that have been provided to patients. After treatment, a medical history will be

released. Medical resumes must be filled in to maintain the quality of medical records, and are often used for administrative purposes when submitting SSA claims.

One of the subsystems included in the health system is the health financing subsystem. Therefore, to have a clear and complete understanding of the health system, the subsystem of health financing must also be understood. However, in reality there are still problems between the medical services received and the claims and hospital requirements, namely when a claim is submitted without following the procedures and rates of the "Partnership Agreement". This still causes public understanding and lack of understanding [4]

Based on the Cooperation Agreement between the Kendari City Hospital and SSA Health, the submission of claims is carried out every 10th of the following month and SSA Health is required to pay for the Health Facilities for services provided to participants no later than 15 days after the complete claim document is received. Based on an initial survey at the Kendari City Hospital, it was found that the submission of SSA claims for inpatients was not in accordance with the date agreed upon in the cooperation agreement between the SSA health and the Kendari City Hospital. The delay in collecting medical record files from the patient care room to the case mix room is one of the obstacles in the process of submitting a claim to SSA Health. In December 2020 SSA patients who received inpatient services at the Kendari City Hospital were 508 patients. However, the file for filing an inpatient claim, which should be collected on the 10th of each following month, is still around 55% (279) of the submission file and about 45% (228) of the file has not been collected from the treatment room on the grounds that the file has not been filled in by the doctor in charge of the patient. and limited nursing staff. So this can have an impact on the SSA claim submission process. So it is necessary to evaluate the delay in filing claims for inpatients in an effort to improve the implementation of SSA Health claims at the Kendari Hospital.

Good claims management activities are very necessary. Submission of claims that are effective and efficient will have an impact on the hospital's finances, because the disbursement of hospital claims on time will not disrupt the hospital's finances. However, if the claim management is not carried out properly, the claim disbursement will be delayed and the bigger impact is that it can disrupt the hospital's financial cycle so that this can reduce the quality of hospital services. Thus, the importance of this research is to identify and find the factors causing the delay in the management of hospital claims and then find solutions to fix the problems found. The purpose of the study was to analyze the availability of input for submitting NHI claims for inpatients at the Kendari City Regional General Hospital.

2. Materials and Methods

The type of research used is qualitative research, using a case study approach. Research informants are Medical Recorders and Health Information Coding Section, Head of Case mix Room, Doctor in Charge of Patients, Head of Treatment Room, Registration Officer and Internal Verifier. Data was collected by observation, in-depth interviews and document review. Data analysis by analyzing the problem is done descriptively, which emphasizes the analysis on the process of inferring the dynamics between the observed phenomena, using logic and formal and argumentative ways of thinking [5].

3. Results

Human Resources (HR)

Human resources are people who are ready, willing and able to contribute to the achievement of the goals of an organization. The findings during in-depth observations and interviews showed that there was a mismatch in the number of human resources with the division of tasks, there was a compatibility between education and work, but the workload was still high enough that this had an impact on the workload, as stated by the following informants;

... In my opinion the suitability of the number of officers with needs is not enough, there are only 3 officers serving at the registration area, sometimes there are many inpatients and there are not enough officers to serve other patients so that patients/patient families queue for a long time even though the service should be fast because we enter the registration of the Emergency Installation, (IF1)...

... Still lacking, not in accordance with the workload in the work unit, (IF2-IF4)...

... I think that's enough, we are nurses here for the rose room, there are 17 people in all and there are 19 beds, (IF6)...

The availability of human resources who are directly involved in the implementation of the NHI claim submission at the Kendari City Hospital is not in accordance with the existing workload, so that this can be a factor causing delays in submitting claims. This can be seen in the case mix section, where there are only 2 coder officers available, not proportional to the number of patients receiving treatment, the impact is in the form of more workloads in completing workers. Likewise, there is only 1 person who inputs the inpatient claim file, which is not proportional to the workload being carried out, so that it has an impact on high work fatigue.

Another finding was that most of the human resources had never received training in submitting NHI claims, as stated by the following informants;

...Ever, training on medical records related to the flow of patient medical records in hospitals, (IF1)...

...So far no training has been held here, (IF2-IF4, IF6)...

Although not all health workers have received training in medical records and NHI claim submissions, in general they understand and are able to complete work well in terms of completeness of claim files and implementation of claim submissions to SSA

Rewards/Incentives

Reward is a form of remuneration given to an employee or group for the achievement of the work that has been done. The findings during observations and in-depth interviews showed that there were incentives received by the claim submission officers given by the Hospital, as stated by the following informants;

...There is nothing if we provide incentives here, only we are given SSA/month services, (IF2-IF4)...

...Here we have 2, there are SSA services as well as special incentives for officers on duty day and night, (IF1, IF6-IF7)...

The deepening of these findings revealed that the provision of special rewards to NHI claim submission officers was not given entirely to case mix officers who were directly involved, but the hospital provided services to all officers based on the number of patient visits each month. Incentives given by the hospital are only for day/night duty officers, namely nursing room nurses and hospitalization central registration officers.

Medical record form

A form can be defined as a piece of paper or media that has space to be filled with various information as the basis for recording transactions or economic activities of an organization. Material is a supporting factor for the implementation of SSA Health claims so that it can run well. Is a tool that can be used by humans to do a job to be completed more quickly and as a support in the implementation of the health care system. In this study, the material input variable is the medical record form/claim file. The findings during in-depth interviews and observations showed that the medical record form files were available and prepared by officers at the patient registration and treatment rooms, but medical record resumes were often incompletely filled out by doctors and difficult to read by claims officers, as stated by several the following informants;

...Here, we have prepared to take the medical record form at the registration area, so later we will prepare it for our friends in the room, but some are usually stored in the treatment room for the medical record form. Sheets that must be present in inpatients, inpatient cover letters, SEP (participant eligibility letters) inpatients, medical record files (resume, NHI verification forms, CPPT and others), (IF1)...

...Many claim files are not attached with supporting documents, sometimes the details that are filled in are also not totaled, making it difficult for the entry clerk to recalculate and input the E-claim application, (IF2-IF3)...

...often found writing doctor diagnoses that are difficult to read and resumes that are often incomplete, (IF4)...

SOP Availability

SOP is a form of office administration embodied in written instructions. Also referred to as a special guide so that operational activities can run as desired. The findings during in-depth interviews and observations showed that in the implementation of the claim for SSA Health inpatients, there were still some sections that did not have SOPs and some officers did not understand the contents of the SOPs, as stated by the following informants;

...Yes, there is an SOP regarding the flow of patient admissions, stored in a non-medical support room, (IF1)...

....There is no SOP yet, so we work based on the PKS letter (cooperation agreement) from the hospital and SSA only, (IF2-IF4)...

...Maybe there is, but I don't know because it has never been socialized, (IF6)...

...None, (IF7)...

Another finding was that in the determination of the SOP, it had been prepared based on the conditions in the hospital and in its implementation based on the provisions in the SOP. Likewise, in every decision or policy regarding medical record files, it is based on applicable SOPs, obtaining approval and approval from the Hospital Director.

Information Technology Availability

Information technology is a variety of facilities consisting of hardware and software to support and improve the quality of information for the public quickly and with quality. The findings during in-depth observations and interviews showed that all activities in the claim submission process had utilized information technology so as to facilitate officers in the claim submission process at SSA Health. The application used is SIM-RS to assist patient registration at the inpatient registration section. Furthermore, for the implementation of disease codification and medical actions, the INA-CBG's application has been used, especially for inputting NHI patient data, as stated by the following informants;

...The usage is in accordance with the needs, here we use SIM-RS and if we want to print the participant eligibility letter we have to make it first in V-Claim but sometimes the network is not good so the V-Claim application is interrupted, (IF1)...

...In my opinion it is appropriate because we use the e-claim application from SSA but for now the server we are using is almost full of storage, so there are often problems with the application we use to input SSA claims, (IF3)...

Another finding is that the use of information and communication technology has been running according to existing needs, but there are still some problems that often arise, including slowing down the internet network, and the server used for data storage is close to full so that it can interfere with the claim submission process. Based on the results of the analysis using the Content Analysis Matrix between input nodes, it was found that the SOP variable got the highest number, followed by the Claim file variable. Based on this analysis, it can be seen that the SOP variables and claim files are one of the main causes of delays in the implementation of claim submissions at the Kendari City Hospital, followed by HR, reward and ICT variables as supporting variables for delays in NHI claims.

4. Discussion

Human Resources (HR)

Human Resources are humans who work in an organization, also called personal workforce, workers or employees. Human Resources as human potential as the driving force of the organization in realizing its existence. Human Resources become potential which is an asset and functions as capital in business organizations, which can be realized into real potential physically and non-physically in realizing the existence of the organization [6]

From the findings that have been made at the time of the study, it was found that the number of officers implementing NHI claims at the Kendari city hospital was still relatively low, so this had an impact on their workload. Thus, an excessive workload will affect the quality of service and the performance of the officers in the hospital, at a higher level it can cause work stress for officers. This finding is in line with the results of research conducted by [7] at KIA PKU Muhammadiyah Hospital Kotagede Jogjakarta that things that can affect performance in filling out medical records / claim files are a lot of workload where in the study it was found that health workers in the implementation of health services often make various mistakes such as forgetting to fill out medical records because they are in a hurry due to the large number of patients who come to visit. Based on research that has been done by [8] shows that the number of officers in the coding section of the hospital is inadequate compared to the number of patients who visit the hospital so that it is the cause of the increased workload. In addition, it was also found that many claim files were filled out incompletely, especially the results of laboratory examinations. This has an impact on delays in payment of claims by SSA Health to hospitals.

Research results [9] resources are the implementation of a program. Failures that often occur in the implementation of a policy, one of which is often caused by inadequate or inadequate humans so that it can reduce the quality of a service.

Another finding in this study is that there are still many health workers who have never received training/socialization related to filling out medical records. Training for health workers is very important to do to increase knowledge, skills and competence development in the hope that it can help officers in completing work properly. According to [10] training for employees is a process to teach certain knowledge and skills and attitudes so that employees can be more skilled and able to carry out their responsibilities better, in accordance with existing standards. According to [11] in HR management activities it is also explained that there is a need for HR development efforts through training to improve the performance of these HR. HR is an asset owned by an organization that needs to be managed effectively in order to provide added value to the organization. The number and qualifications of HR involved in each stage of claim implementation need to be considered, such as training, expectations and attitudes of HR as implementers in implementing patient service claims whether to accept or reject the system.

Based on the constraints found in the results of research related to HR on the occurrence of delays in submitting SSA claims for inpatients at the Kendari City Hospital, it can be concluded that the performance of the registration officer is indirectly influenced by the number of patients who come to visit to get services at the hospital, should be made to increase the number of officers based on the existing workload. And there are still many health workers who do not really understand about filling out medical record files because of the lack of socialization and training provided to officers in order to know how to fill in medical records properly and

correctly. This is in line with previous research conducted by [4] regarding the analysis of SSA Health claim submissions at RSU Dr. Sam Ratulangi Tondona who stated that one of the components that influence the success of a system is HR. In managing health data and information, reliable human resources are needed. The human resources needed in every proposal to submit a claim for health facilities to SSA Health are qualified human resources and an adequate number of personnel.

Rewards/Incentives

Giving rewards/incentives needs to be done to increase employee motivation and provide a sense of responsibility for the duties of each officer in the hospital. Rewards are one of the determining factors for employee job satisfaction.

Companies need to pay special attention to employee job satisfaction by providing rewards (gifts, rewards, and promotions) to their employees. Rewards given by the company to employees aim to increase employee job satisfaction. Quality human resources are needed in achieving the goals. So that it becomes a necessity for hospitals to improve the quality of their employees, one way is by providing rewards/incentives.

From the results of research conducted at the Kendari City Hospital, it was found that the hospital never gave rewards or incentives to health workers in submitting claims to SSA Health. In all service units, no reward/incentive is given, but officers only get services for services that have been carried out to SSA patients per month. Based on research conducted by [12], it was found that incentives are a very coveted part of every workforce, incentives are the most effective way and affect work motivation, which in the end can directly increase work productivity itself. Incentives are one type of award that is associated with work performance. The higher the work performance carried out, it is expected that the greater the incentives will be given. The main function of incentives is to give responsibility and encouragement to employees.

The absence of rewards/incentives given can directly affect the implementation of the submission of claims from the Kendari City Hospital to SSA. So to overcome these obstacles, it is necessary to provide additional rewards/incentives to health workers who are directly involved in the implementation of SSA Health claim submissions. This is also a form of concern and appreciation that can be given from the hospital to the officers.

From the results of the study, it was found that in general hospitals did not provide rewards or incentives in submitting claims to SSA. In the implementation of SSA Health claims, special incentives are only given to the case-mix team consisting of the head of the medical record unit and coder staff. For other health workers, the amount of service fees can be seen from the number of claims submitted, education level and length of service. Based on research by [13] it was found that employee achievement is influenced by the provision of rewards. This study also discusses policies in the form of rewards that can be felt by the benefits of every health worker. This policy is a form of development that has increased from previous years. Employee performance is getting better if the rewards given are also getting better.

According to [14], to increase the work motivation of officers and a sense of responsibility for their respective duties, it is necessary to provide rewards for filling out medical records in the form of certificates of appreciation and certificates given to medical record officers every month. The lack of rewards can directly affect the submission of claims for the Kendari City Hospital to SSA Health. To overcome the obstacles by providing an additional number of rewards and this is also a form of concern and appreciation from the hospital.

Availability of medical record form

Materials are raw materials that can be used by humans as a support to implement the existing health care system in hospitals. If there are materials that do not meet the requirements, it can cause incompleteness in the claim file to be submitted to SSA Health. The material in this study is as a supporting material for inpatient medical record services so that it can be carried out properly in the form of a medical record form.

The results of the research that have been carried out are related to medical record forms / claim files, namely many medical record files that are often filled out incompletely by health workers who provide services. Filling in the medical record itself requires a long process so that it can be filled out completely and accurately. It takes the role of all parties involved in patient care in order to obtain valuable medical records. In addition to filling out medical records, supporting results from patient medical records are often not attached. So that it can have an impact on the SSA Health claim submission process at the Kendari City Hospital. According to the Minister of Health Number 269 of 2008 concerning medical records, it has been emphasized that medical records must be made in writing, complete and clear or electronically.

Based on the results of research conducted by [15] stated that the completeness of the form in the claim file is an important part and must be considered in the claiming process. The requirement for completeness of the claim file is one of the conditions for accepting or not submitting a claim that will be submitted by the hospital. The complete claim file consists of Participant Eligibility Letter, medical resume/patient status report/diagnostic statement from the treating doctor if needed, evidence of services such as results of supporting examinations, therapy protocol and regimen (drug administration schedule), details of hospital bills (manual or automatic billing), and other necessary supporting files [16] Research conducted by [17], said that the reason for the return of the claim file by the SSA was caused by a coding error because the coder had difficulty reading the doctor's writing so that he made the wrong code and there were still many incomplete files submitted to the SSA Health. According to the 2014 SSA Health Verification Technical Instructions, claim submissions must pay attention to several things to avoid claims errors, including coding using ICD 9 and ICD 10.

Based on the constraints found in the results of this study related to the claim file form, it can be concluded that the officers were not careful enough in filling out the medical records so that it could lead to incompleteness in filling out the medical records and the incompleteness of other supporting files in the claim file to be submitted. This is in line with the results of secondary data processing on the completeness of filling out medical record files in April 2021, that of the 620 claim files to be submitted, 90 incomplete files were found. Date of birth is a component of many unfilled claim files, as many as 46 files, medical support 35 claim files, and incomplete medical resumes as many as 9 claim files.

SOP Availability

The method in this study is a way that is taken so that an activity can be carried out in accordance with the rules that have been set by an organization. The method used in this study is the SOP, that every implementation of the SSA Health claim submission must be based on the SOP that has been made. In determining the SOP, it must be adjusted to the existing conditions with the hospital and must be based on the existing provisions.

Based on the results of research that has been carried out regarding SOPs, it was found that Kendari City Hospital does not yet have SOPs as guidelines for submitting SSA Health claims. It is often found that claim files are incomplete due to lack of communication between fellow health workers resulting in the return of claim files. This is in line with research conducted by [18], there must be a SOP that clearly regulates the SSA claim flow at the hospital so that it does not become an obstacle in the implementation of the claim to be made. The absence of SOPs on health services in hospitals will have an impact on services in the form of job clarity, authority, work completion time, administrative responsibility, service effectiveness, decision making and structured work processes in hospitals.

Research conducted by [19] at Dr. RSUP. Hasan Sadikin said that there is an SOP on coding for diagnoses and actions that are in accordance with the INA-CBGs system but have been expiration so they cannot be used anymore. The regulations applied in the case mix unit are currently still using the coding SOP in general, so there is no specific SOP that can be used as a benchmark in the claim submission process and has an impact on the delay in the claim submission process.

The quality of a hospital service can be influenced by the services provided by medical officers and the completeness of filling out medical record documents. In a study conducted at the University Hospital of Muhammadiyah Malang, it was said that the main factors were the incomplete filling of medical record files and the difference in perceptions of the completeness of filling out good and correct medical records due to the absence of SOPs that could be used as guidelines at the hospital [20].

Based on the constraints found in the results of this study related to SOPs in the implementation of SSA Health claim submissions, it can be concluded that SOPs greatly affect the implementation of SSA Health claim submissions. The availability of the SOP is expected to prevent the incompleteness that is often found in the claim file. This is in line with research [21] that SOPs can be one factor in the delay in filing claims for SSA Health patients.

Information Technology Availability

Availability of information technology is the readiness of information technology facilities, tools or materials that can be used in the service process or data processing, information processing, compilation, storage, distribution with the aim of creating accurate, quality, objective, relevant and usable information by all users, including managerial decision making. Information technology devices include computers, application software, electronic devices, and telecommunication devices that can be used for service and management of national health insurance claims administration in hospitals.

In the results of this study, it was found that in the process of submitting claims all activities have used information technology that can assist the process of submitting claims at the Kendari City Hospital. The applications used are the SIM-RS and the INA CBG's (V-claim) application for SSA patients at the outpatient and inpatient registration areas. SIM-RS itself is an application that can be used to input patient's social data and make a systematic medical record number. While in the case mix room using the INA CBG's application (E-claim), INA CBG's itself is a SSA application to make it easier for hospitals to make a payment system through a package system based on the patient's illness. Meanwhile, at the Kendari City Hospital itself, the SIM-RS and INA CBG's applications have not been integrated so that it becomes an obstacle to the implementation of claim submissions. This is in line with previous research conducted by [22] that the SIM-RS information technology factor that has not been integrated with INA CBG's is one of the factors causing delays in filing claims.

From the results of the study, it was also found that the obstacles faced related to information technology were the internet network which sometimes had errors and the server storage was almost full so that it often hampered the claim submission process. This is in line with research conducted by [23] at Bhayangkara Hospital Semarang, that computers and internet networks often hamper the work of officers, due to internet connections and computer errors.

Limitations in this study include the time of conducting the research which is quite limited because the opportunities for informants are very limited with their busy work at the hospital. It is difficult to arrange the time for conducting interviews with informants and the implementation of research documentation is also limited

5. Conclusion

The ratio of NHI claim officers is not proportional to the workload. There is no reward given by the hospital to health workers involved in the implementation of SSA claim submissions. There are still many medical record files that are often filled out incompletely by doctors in charge of patients and nurses, There is no SOP on the implementation of claim submissions in the case mix room and SOPs for filling out medical records, Computerized information technology is still inadequate. Recommendation; the need for additional claims officers, training officers, giving rewards, fulfilling SOPs, and adding information technology tools.

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