

The Effectiveness of Health Service at the Social Security Office of the Governing Body (BPJS). in Indonesia

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Abstract:- Types of qualitative research approach through Phenomenology, as results showed that the Ministry of health coverage has yet to be implemented, the number of optimal complaints caused latest healthcare at home ill give an indication that a health security card yet bersinergis optimally with the management of the hospital, it is compounded by the availability of resources as well as support of man means and infrastructure that is still minimal, required the cooperation and attention from all parties of good government, private, stake holder, the world of education, relevant agencies to support each other and together contribute in supporting the Ministry of health.

Keywords:- Health, Ministry, Effectiveness, Cooperation, Attention To.

I. INTRODUCTION

Pancasila State philosophy and basic especially the fifth sila also recognizes the rights of citizens over health. This right is also enshrined in the Constitution article 28 H 45 and section 34, and regulated in law No. 23/1992 which was later replaced by ACT 36/2009 of health. In law 36/2009 asserted that everyone has equal rights to obtain access to resources in the areas of health and obtain health services that are safe, high quality, and affordable. Instead, everyone also has duties in social health assurance program.

To realize the global commitments and the Constitution of the above, the Government is responsible for the implementation of the healthcare community through the national health coverage (JKN) for individual health.

Efforts in that direction indeed pioneered the Government organises some form of social security in the health field, such as through PT Askes (Persero) and PT Jamsostek (Persero) serving civil servants, among others, recipients, veterans, and employees of the private sector. For the poor, the Government is unable to give the assurance of public health Assurance Scheme (Jamkesmas) and health coverage area (Jamkesda). Nevertheless, the scheme-the scheme is still fragmented, divided-for. Health costs and quality of service be difficult under control.

To overcome it, in 2004, issued law No. 40 of the national social security System (SJSN). This 40/2004 ACT mandates that social security is mandatory for the entire population including national health Guarantee (JKN) through a governing body social security (BPJS).

In the implementation of the BPJS, still found plenty of problems that led to complaints from the public: the complicated registration process, less satisfying service, room maintenance not in accordance with the type of the BPJS dues, and still many others. This is because of the lack of preparation in the implementation of the BPJS. Not only that, many of the public who do not know the procedure of registration and workings of the BPJS. For that, we need to know the BPJS deeper so that we not only shipped with existing complaints but could also help solve the problem together. See the still large number of problems cause unknown BPJS then interested constituents in this paper to discuss the introduction of BPJS, how to structure its organisation and others. Due to enter and participate in a government program as well as other programs at least we already know about the workings of the program.

- *Problem*

How the implementation of the health service In the Office of the BPJS.

II. A REVIEW OF THE LITERATURE

In this 21st century challenges faced by public administration. According to j. Cooper (1998) in his book entitled: public administration for the twenty-First Century, the challenges include: Diversity; accountability; privatization; empowering the civil Effect of High Technology.

As for Hughes (1994) in management and Public Administration portrays the Challenges, Opportunities and Directions in a number issues on u.s. public administration:

- The culture Mileu of Public Administration
- Crisis/Disaster Management
- Strengthening of local level institutions
- Promoting Accountability in public management
- Human resources Development
- The Impact of Technology of public administration
- Managing Economic and Technology Interdependencies.

Of the challenges, demands and expectations in advance of the last truly needed any change, either in concept or theory of State administration and also figure the Public Administrator. Thanks to changes in the Administration that is caused by a variety of challenges and expectations, then changed the competence that is related to

the "Traditional Public Administration" (NPM). The nuances of State Administration (public) that had indicated as the dotted press on bureaucracies COP (Control, Order and prediction), Rigidity, bound by the political Authority, tightening control, to be given and following the instruction later claimed as a new Republic Administration indications ACE (Alignment, Creativity and Empowering), Flexible, bound by political commitment, has a strategy, oriented output/result, nuanced privatization or contracting out.

A. Performance.

- *Understanding the performance*

Performance which means work achievement, comes from a sense of performance. Based on the large Indonesian Language Dictionary (KBBI), the performance comes from the word "work" that translates a Word from a foreign language "achievement". Can also mean "the work". Timpl Dale. A (1999:47) defines performance as the accumulation of interconnected elements, among others: (1) skill level, namely sejahmana employees have the knowledge, ability, skills, to produce performance. (2) the level of effort, that is the motivation that encourages employees to complete the work.

Although the employees have the skills to carry out his job, they will not work well if only a little bit of effort, no effort, (3) external condition, is the extent to which the external conditions, supports productivity employees. The level of skill that are owned not be able to be implemented if the external condition does not support and is outside the control of the employees.

In Veithzal Rivai dkk (2011:15) suggests that there is some sense of performance as follows:

1. Performance is a set of results achieved and refers to the Act of achievement as well as the execution of any work requested (Stoloviteh and Keeps: 1992)
2. Performance is one of the Group's total of the work in an employee/worker (Griffin: 1987)
3. Performance is affected by the purpose (Moudy and Premeaux: 1987)
4. Performance is a function of motivation and ability to complete a task or job, one must have one's degree of willingness and skills is not enough to effectively work on something without a clear understanding of What will be done and how to do it (Business and Blanchard: 1993)
5. Performance refers to the achievement of the objectives of the task conferred upon employees (Casio: 1992)
6. Performance refers to a level of success in carrying out the task as well as the ability to achieve the goals that have been set. Performance is expressed good and successful if the desired goals can be achieved with good (Donnelly, Gibson and Ivancevich: 1994)

7. The achievement of a goal that has been set is one benchmark the performance of individuals, namely: (a) individual tasks; (b) individual behavior; and (c) the characteristics of the individual (Robbin: 1996)

8. Performance as the quality and quantity of the achievement of the tasks, whether committed by individuals, groups or changes (Sehermerhorn, the Hunt and Osborn: 1991)

9. Performance as a function of the interaction between the ability or ability (A), motivation or motivation (M) and the chance or opportunity (O) performance: $f(A \times M \times O)$. Meaning: the performance is a function of ability, motivation and opportunity (Robbins: 1996). Thus, performance is determined by factors of the ability, motivation and opportunity.

Although the performance is derived from a translation of "performance" which means "achievement" or "appearance". While according to Bernardin and Russel and Sulistiyani (2003:223-224) States that the performance is the record outcomes resulting from specific employee functions or activities performed during a given period.

- *Performance Assessment*

Byars and Rue (1994:312) argues that performance appraisal is a process to establish and communicate on the employees of either bad their work and to make a plan of improvement or progress. Work achievement not only provides information to employees about his work, but also to motivate employees in order to achieve a level of effort and direction of a task which is better in the future.

According to Armstrong (1998:178) utilizing the performance assessment is to ensure that its superiors and subordinates aware of what needs to be done to improve the work achievement, and gives feedback (feed back) so that people know where they are, where they should go and what if it arrived there. Meanwhile according to As'ad (1995:63) that the aspects used, in performance assessment include: quality, quantity, time used, position held, attendance and safety in carrying out its tasks.

Performance assessment must be conducted in a fair, impartial and must describe the actual performance. Therefore, to ensure a fair and accurate assessment, there must be certainty that the cause of the performance is also known as performance evaluation, is essentially a process used by the Organization to evaluate job performance, evaluation performance if done correctly, will provide important benefits for employees starting from subordinates to superiors or the leadership in an organization or agency.

- *The Bureaucracy*

Bureaucracy, according to the dictionary of large Indonesian Language is a system of Government that is run by Government employees because it had adhered to the hierarchy and level position. Or in another definition of bureaucracy is a way of working or the arrangement of the work, as well as slow paced according to the grammar rules of the many twists and turns. Good governance is often

interpreted as an indicator of bureaucratic reform achieved by meeting such principles, community participation, erect the rule of law, transparency, concern to stakeholders, oriented to the consensus, equity, effectiveness and efficiency, accountability, and strategic vision.

In the science of public administration, bureaucracy has a number of meanings, which are government run by a Bureau which is usually called by the Government's executive body, officialism (the executive organs of government), and overall public official (public officials), be it high or low. Among these three, meaning the General characteristics inherent in the bureaucracy is its existence as a government agency. The meaning of the bureaucracy as a government agency comes as government agencies in general have always shaped the bureaucracy. Large government organization scale and area of coverage encourages them to choose the bureaucracy that is characterized as the Weberian bureaucracy.

On the community that develops an imbalance will occur due to the demands of society that can not be met. According to Hutington (1968, in Joko Pramono, 2011) on the development of a thriving community will engender the formation of political institutions, the medium that will fight for peoples demands that cannot be met by the elite of the time it.

B. Services

According to Munir in Hendra Hadiwijaya (2011:224) services are activities by someone or a group of people with a grounding system through material factors, specific methods and procedures in order to meet the needs of others in accordance with the its rights. It is explained that the Ministry is a form of systems, procedures or methods that are given to certain other oarang in this case the customer so that the customer's needs can be fulfilled in accordance with their expectations.

A friendly and professional service has become a condition that must be met by providers in the administration of the State (Waworuntu in Suratno, S.Ag., MAP, 2013). Siagian in Hasma Erpianti H (2009:9) renders services are often defined as activities take care, prepare something good in the form of goods or services against its users (stakeholders), customer (user) and consumers. It is also expected that the good climate service within the work unit, better customer assessment of employees will service quality (i.e., the employee's performance). Eventually, customers will be more loyal to the organization when they assess the performance of the employees are more positive (Salanova Marisa and Sonia Agut, 2005).

Empirical evidence suggests that, with employees who are able to provide high quality service the extent to which employees are able to, customers are more likely to evaluate the results of the meetings service, satisfaction, and experience increase their purchases and their future visits frequency (for example, Borucki & Burke, 1999; Bowen, Siehl, & Schneider, in Liao Hui and Chuang Achia: 2004).

III. RESEARCH METHODS

Qualitative Research Approach Through Kind Of Phenomenology

IV. DISCUSSION

A. Implementation of the Health Service in the Office of the Bpjs

Adding tens of millions of participants national health Guarantee from business entity years 2015 feared t idak served well. This is because the distribution of doctors and healthcare facilities in the country have not been evenly distributed, especially not all private hospitals that serve program participants. Governing body, social security (BPJS) additional participants from target Health workers wage is around 30 million people. If all workers are married and have two children, the addition of participants actually 120 million people. According to the Chairman of the Center for Economic and Policy Studies Faculty of Health public health University of Indonesia Thabrany Hasbullah, Mon (12/1), in Jakarta, the Government should not impose that all business entities registering workers into JKN BPJS Health participants this year. The goal, so that it cannot occur in the healthcare system riot each business entity, if it is imposed it will be like this is a problem the current BPJS. "Don't be forced to sign up if health facilities is not optimal. Fix the first medical facilities, new recruits a lot of participants," he said. For example, there are clinics with 25,000 participants, whereas there are only two doctors. Ideally, one doctor had 3,500 participants so that the maximum service.

Responding to the problems of the current head of the BPJS Publicist BPJS Health Irfan Humaidi admitted, the addition of a health facility that works closely with Health BPJS was unable to match the pace of additional participants. Need additional first-level health facilities 16,802 and 37,443 bed in referral health facilities.

Feedback about this problem then BPJS currently Chairman of Trustees of the great bonds of Indonesia Zainal Abidin Physician sets forth, in Indonesia there are 119,580 15,439 general practitioners and medical specialists. In almost all the capital of the province the number of physicians exceeding the requirement. "The problem is, the spread amount of physicians is uneven," he said. This problem and if it only then it would be systemic problems. She exemplifies, per December 2013, the number of doctors in Palembang, South Sumatra, 1,596 people for 1.45 million residents. With a ratio of 1 doctor for needs of 2,500 inhabitants, the number of doctors the advantages of 1,014 people. Ogan Komering Ilir temporarily, to 727,000 residents, there are only 99 doctor so lack 192 doctors. Number of doctors of interregional inequality lead to overload the number of doctors patients, let alone there is an additional participant JKN of wage workers so that quality of service decreasing. "One day, the doctor should ideally deal with 25-30 patients. The doctor any need rest because of fatigue can lower the quality of the service," he said. It is undeniable this problem eventually if the BPJS today.

In addition, the distribution of health facilities does not evenly so that the communities that are far from health facilities has been hampered transportation. To that end, the Government should encourage the participation of private hospitals in JKN. "The spread of private hospital Coverage is broader than government hospitals," said the Adviser to the Association of private hospitals Indonesia, Mus Aida. Participation in private hospitals will help the Government anticipate JKN addition participants JKN. According to the Directorate General of community development efforts of Health the Ministry of health, of a total of 2,411 hospitals in Indonesia, 1,400 units are private hospitals. But whether the problem will be reduced currently the BPJS? From the radar MedikaNews.com, health care for participants of JKN BPJS Health in some areas are not yet adequate. In addition because of limited facilities and physician workforce, it happened also because of the growing number of patients and many patients not yet JKN know if participants must pass a medical examination at the first level health facilities.

To get maximum BPJS service, here are some facts about the BPJS health Note:

- Not as health insurance from the private companies that generally have limits and terms of some kind of disease, BPJS Health designed to take all kinds of diseases.. BPJS BPJS members will bear the Health of the entire hierarchy of the age of the patient and all levels of severity of the disease suffered. In the year 2019, expected the entire citizens of Indonesia is already a member of the BPJS health.
- The BPJS tiered referral patterns adhere to Health, so there can be free checked himself in a hospital or health facility. First, patients need to be treated to the first-level health facilities namely, clinics, clinic, or doctor's practice of individuals who cooperate with the BPJS. Then, if the health facilities are not able to, it will be referred to the health facility.
- Limitations of hospitals or health facilities in cooperation with the BPJS, making members of the BPJS often have to queue up to get service. However, now that more and more hospitals that serve the BPJS participants health. This is the positive side of the BPJS, consider health is doctors and hospitals have the certainty of treatment costs.
- Most patients require additional services that cannot be provided by a hospital in collaboration with the BPJS, for example laboratory. Meanwhile, the costs incurred for such services is quite high. You need to know, drugs and laboratory examinations are also included in the health services BPJS. The patient does not have to pay more for those services, unless it is considered not in accordance with the procedures or rules.
- Withdrawal of charges against patients BPJS, among others, if the participant requesting higher facilities of rights which should be obtained. For example, when a patient asked a class of treatment is higher than the right.

To that end, patients need to tell it to the BPJS health and hospital officials.

Haris Vishnu, 75, with a pleasantly greeted one by one delegate from eleven countries incorporated in the Joint Learning Network or it JLN who visited the family doctor, Clinic or Clinics DK, on the streets of the Northern Ringroad, Yogyakarta, Thursday (2/3).

With great enthusiasm in the United Kingdom an eloquent language, male descendants of India-this Java deliver satisfaction over ministries Clinic DK during the last 10 years.

He became a loyal patients the clinic. Already 20 years Vishnu sugar disease. Exactly since he retired from his job as a construction worker. Despite feeling lousy because of her illness, Vishnu assessing chronic disease management programs or Prolanis, program initiatives BPJS health, which runs private clinics is so help him.

Vishnu is not alone there. The story of Vishnu on the quality of service to the health clinic presented by the BPJS were admit by four other patients attended at the time.

They regularly consult the education, gymnastics, following healthy and receives the visit of the clinic's medical personnel.

Therefore, these routines, they also have a community to share the excitement. DK clinic is one of the many clinics that pretty well run national health assurance program – Healthy Indonesia Card or JKN-ACTS of the BPJS health.

The clinic was chosen as an example of the success of the program to distribute to delegations that visited Indonesia JLN.

Prior to the site visit, shared Health BPJS JKN recently signed a memorandum of understanding for cooperation in the field of cross country healthcare in order to enrich the perspectives and ideas for a better health service.

JLN is a community of practitioners and policy makers in the field of health that was set up to share our experience and knowledge in the field of health. Community JLN currently covers 27 countries from Asia, Africa, Europe, Latin America, and the Middle East.

This completes the field visit seminar held earlier to introduce to the delegation program and method of JLN health services run by the Government of Indonesia at the moment.

Nyatanya, not all first-level health facilities (FKTP) Health BPJS has quality service that is as good as the toughest Challenges. Clinical DK thus occur in clinics the clinic who is a FKTP belonging to the Government.

Maya Amiarny Rusady, Director of the Health Ministry of the BPJS, acknowledging it. JKN-KIS program currently is still far from ideal, although the scope of service in four

years could reach 70% of the population belongs to Indonesia very quickly compared to many countries.

Maya says, the findings of the team of Auditors indicates not all indicators of quality are met by FKTP. About 68% of cases that are referred to outpatient hospital should be handled independently by the FKTP.

This obviously poses harm to Health, because besides the BPJS must pay a fixed value kapitasi to FKPT, have to bear the BPJS claims from hospitals.

To that end, the party i will implement Health System BPJS Kapitasi Based Commitment (KBK) for the entire district level clinics in the city. The program already applied around 960 clinics in the capital of the Province began last year. With that system, BPJS Health pay value kapitasi corresponds to the proportion of the quality of the services provided. If bad, kapitasi given will not achieve 100% of the total number of participants of the BPJS Health listed on FKTP. Since it was enacted, KBK reaped positive results. The ratio of references to non-including specialised outpatient down to 0.9% from the previous nearly 5%. Clinics also became more orderly administration and more active promotif and preventive activities are running, especially contact with participants and increase the ratio of participants visit Prolanis.

V. CONCLUSION

Health care professional holding important roles in building a society that is prosperous, healthy, community health development does not stand alone but rather have a synergy with other fields such as education, the Ministry of the social, economic, cultural etc., the number of health care issues at home sick even though society has had a health security card proves that is not the only party responsible BPJS but rather the management of the hospital along with the entire health team doctors, nurses, employees are required to be able to synergize cera fast, precise and profesional, in addition to Government support in the form of policies and supervision and the construction should be more intensive and focus, it is also very expected involvement of all elements of the stake holder, private health care contributed to the mutually synergistic.

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