

SIMULASI ANALISIS PERBEDAAN KAPITASI BERBASIS PEMENUHAN KOMITMEN PELAYANAN DAN STRATEGINYA

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INTISARI

Latar Belakang: Sebagaimana besar Fasilitas Kesehatan Tingkat Pertama mengalami peningkatan kapitasi, namun dengan adanya indikator komitmen pelayanan yang harus dipenuhi, akan menurunkan kapitasi aktual yang diterima. Tidak adanya kenaikan norma kapitasi sejak 2014 dan meningkatnya harga obat berdampak terhadap kapitasi, persentase biaya obat terhadap kapitasi.

Tujuan: Penelitian ini bertujuan untuk mengetahui perbedaan kapitasi, prosentase biaya obat sebelum dan sesudah simulasi pendapatan kapitasi berbasis pemenuhan komitmen pelayanan Klinik Pratama di Kota Cirebon dan mengetahui strateginya dalam memenuhi indikator komitmen pelayanan.

Metode: Penelitian ini menggunakan pendekatan kuantitatif dan kualitatif atau mixed methode, dengan rancangan penelitian sekuensial eksplanatori. Pengumpulan data kuantitatif menggunakan *worksheet*, dan data kualitatif menggunakan wawancara. Data kuantitatif dianalisis dengan Wilcoxon, untuk menguji perbedaan kapitasi, persentase biaya obat terhadap kapitasi sebelum dan sesudah simulasi. Data kualitatif dianalisis menggunakan analisa SWOT kualitatif untuk menentukan strategi dalam memenuhi indikator komitmen pelayanan.

Hasil : Hasil uji Wilcoxon diperoleh *significancy* 0,000 ($p < 0,05$) antara penerimaan kapitasi, persentase biaya obat terhadap kapitasi sebelum dan sesudah simulasi. Strategi yang tepat memenuhi indikator komitmen pelayanan

adalah peningkatan kompetensi tenaga medis, menghitung *unit cost*, menerapkan program promotif dan preventif, dan penerapan SOP.

Kesimpulan: Terdapat perbedaan yang signifikan antara penerimaan kapitasi, persentase biaya obat terhadap kapitasi sebelum dan sesudah simulasi. Klinik Pratama harus menerapkan strategi promotif dan preventif, dan kendali biaya melalui menghitung *unit cost*, serta pemenuhan standar baik itu kompetensi maupun prosedur pelayanan.

Kata kunci : simulasi, kapitasi berbasis pemenuhan komitmen pelayanan, dan strategi

SIMULATION ANALYSIS DIFFERENCES IN CAPITATION BASED SERVICE COMMITMENT FULFILLMENT AND STRATEGIES

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ABSTRACT

Background: Most Primary Health Center (PHCs) have increased capitation, but with an indicator of service commitment to be met, it will reduce actual capitation received. Has not change the norm of capitation since since January 2014 and increase drug price have an impact on capitation, percentage of drug cost on capitation.

Purpose: This study aims to determine the differences of capitation, drug cost percentage before and after simulation of capitation income based of fulfillment of service commitment of Private Primary Health Centers in Cirebon and knowing its strategy in archieving and indicator of service commitment.

Methods: This research uses quantitative and qualitative approach or mixed method, with explanatory sequential research design. Quantitative data collection uses worksheet, and qualitative data using interviews. Quantitative data were analyzed with Wilcoxon to test for difference of capitation, gross profit, percentage of drug costs on capitation before and after simulation. Qualitative data are analyzed using qualitative SWOT analysis to determine strategy in fulfilling indicator of service commitment.

Results: Wilcoxon test result obtained significance 0,000 ($p<0.05$) between capitation acceptance, gross profit, and drug cost percentage of capitation before and after simulation. The right strategy to meet the

indicators of service commitment is to increase the competence of medical, calculate unit cost, implement promotive and preventive programs, and the application SPO.

Conclusion: There is a significant difference between receiving capitation, gross profit, and drug percentage of capitation before and after simulation. The Private Primary Clinic should apply promotive and preventive strategies, and cost control through calculating unit costs, as well as compliance with standards of both competence and service procedures.

Keywords: *Simulation, Capitation based service commitment fulfillment, and strategies*