



Stroke Treatment Cost Analysis for Consideration on Health Cost Determination Using INA- CBGs



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ABSTRACT

Indonesian Case Based Groups (INA-CBGs) implementation on hospital financing for stroke patient using Jaminan Kesehatan Masyarakat (Jamkesmas) at 3rd class hospitalization requires therapy plan management and cost analysis. The study objectives was to determine the suitability cost between real stroke treatment cost and health financing based on INA-CBGs.

This cross sectional observational study used retrospective sampling method. The subjects were taken from all stroke patient population using Jamkesmas insurance at Jogja Hospital, were hospitalized between January 2011-April 2012. Patient's length of stay and costs were defined as study variable. Data was analysed using descriptive analysis and Mann Whitney test.

Through this study we conclude the average rate of real stroke treatment cost at Jogja Hospital was higher insignificantly than INA-CBGs based cost.

BACKGROUND

Stroke was occurred in more than 700,000 people per year with 150,000 mortality rate.

The "expensive" disease → further treatment and long-term rehabilitation.

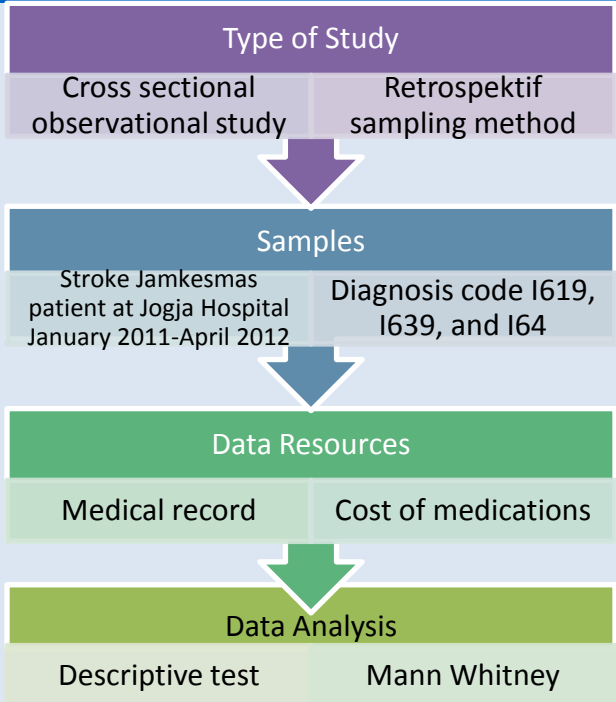
Complications disease and comorbid factors → longer hospitalization and higher expenses.

Jamkesmas patients → INA-CBGs → hospital's ability to manage rates → policy development.

OBJECTIVE

To determine the suitability cost between the stroke's real cost therapy and health financing based on INA-CBGs.

METHODS



RESULTS

Cost (Rp.)	Intracerebral Hemorrhage (I619)			Cerebral Infarction (I639)			Unspecified Stroke (I64)		
	Mean	DS	p	Mean	DS	p	Mean	DS	p
Real Cost	3.726.576	2.389.797	0.305	4.151.119	1.386.113	0.108	3.482.623	2.269.066	0.404
INA-CBGs	2.227.484	0		4.599.523	1.088.482		2.936.805	508.833	

CONCLUSION

•The average rate of real stroke treatment cost at Jogja Hospital was higher insignificantly than INA-CBGs based cost.