



## **Cost Sharing Paid by Social Askes Participants at Pelamonia Hospital Makassar and Faisal Islamic Hospital Makassar**

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### **Abstract**

The cost of hospital services in Indonesia in general is a complex problem with many obstacles and we can see that the publication of cost information is often unclear. In Government Hospitals, in particular, budget allocations are still inadequate, this is due, among other things, to the costs that must be borne by the Hospital, especially equipment costs, operational and maintenance costs, which seem to tend to increase following advances in increasingly sophisticated health technology. The aim of the research is to obtain an overview of the cost sharing that will be incurred by Askes Social participants at Pelamonia Hospital and Islamic Faisal Hospital Makassar, reviewed in terms of additional costs incurred/types of patient inpatient treatment in terms of class/rank and linked to Regional Regulations. The type of research used is survey research with a descriptive approach, with the aim of obtaining information about cost sharing costs for health services in the inpatient unit of Pelamonia Hospital Makassar and Islamic Faisal Hospital Makassar. The results of this study and previous research show that patients participating in Askes tend to use nursing classes that are better than those specified. The conclusion is that the Cost Sharing for Social Health Insurance patients based on group/rank in the inpatient unit at Faisal Islamic Hospital is IDR 795,000,- while at Pelamonia Hospital Makassar it is IDR 1,125,000.

**Keywords:** Cost Sharing, Social Askes Participants, Costs, Hospital, Makassar





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## 1. Introduction

To further improve services, in 1984 PP.NO.22/1984 was issued concerning the rights of ASKES participants in the form of: other examinations to confirm the diagnosis, emergency measures and other measures for healing, dental prostheses and other prostheses, family planning, physical fitness and activities for healing (Astuti, Sri, S.2007).

Government Regulation No.6 of 1992 concerning the expansion and status of Perum Husada Bakti to become PT. (Persero) ASKES Indonesia, which in this case is responsible for improving health services for Civil Servants and their family members as well as expanding ASKES membership, does not have its own health facilities. Increased quality of service, especially for patients participating in PT. ASKES Indonesia will bring benefits, namely increased patient satisfaction and patient expectations, patient loyalty and improved hospital image. For patients, satisfaction with good hospital service includes recovery from illness, increased health status, speed of service, satisfaction with the physical environment, and adequate rates.

The results of the 1995 and 1998 Susenas show that between 1995 and 1998 there was a shift in the choice of outpatient service facilities from PPK network PPK to non-network PPK.

In 1996, cost-sharing was established for inpatient services in classes II and I, then in 1998 cost-sharing was implemented for all participants who used hospital services, both for outpatient and inpatient care. For this reason, in theory, the method of determining the premium proportional to income (2% of basic salary) is fairer than the risk-based premium, however, because the take home pay for employees in groups I and II is greater than in groups III and IV.





Based on PERDA number 4 of 2008 concerning Health Service Levy at Pelamonia Hospital, the amount of inpatient treatment rates is set differently. For VIP A class Rp. 450,000,-/day, VIP B Rp. 400,000,-/day, VI.IP Rp. 1,000,000,-/day class I Rp. 200,000,-/day, class II Rp. 175,000,-/day, class III Rp. 150,000,-/day. Meanwhile, the tariff for health services at the hospital for ASKES class I, IV, III, and retirement participants is IDR 200,000/day. Meanwhile, the Health Service levies that have been determined at the Faisal Islamic Hospital in Makassar also vary. For VIP class IDR 350,000/day, class I IDR 200,000/day, class II IDR 175,000/day. Meanwhile, the tariff for health services at the hospital for class I ASKES participants is IDR 200,000/day, class II IDR 175,000/day.

## 2. Research methods

The type of research used is survey research with a descriptive approach, with the aim of obtaining information about cost sharing costs for health services in the inpatient unit of Pelamonia Hospital Makassar and Islamic Faisal Hospital Makassar.

## 3. Results and Discussion

### a. Results

1. Additional costs in terms of class/rank at the Faisal Islamic Hospital Makassar

Table 1  
 Additional costs in terms of class/rank in the Patient Inpatient Unit  
 at the Faisal Islamic Hospital Makassar

Group and class of care	Room charges	ASKES dependents	Cost Sharing
Goal 2 1st class	200,000,-	175,000,-	25,000,-
Goal 3 VIP B class	360,000,-	200,000,-	160,000,-
VIP A class 4 goals	350,000,-	200,000,-	150,000,-
VIP A class 4 goals	350,000,-	200,000,-	150,000,-
VIP B class 4 goals	360,000,-	200,000,-	160,000,-
VIP B class 4 goals	350,000,-	200,000,-	150,000,-
<b>total Cost Sharing</b>			<b>795,000,-</b>

Source: Secondary data





Table 1 shows that of the Askes participants for inpatients at the Faisal Islamic Hospital Makassar in the month the highest *Cost Sharing costs* were in group 4 VIP A class at IDR. 160,000,-, and the lowest is in class 2 class 2 at Rp. 25,000,-

2. Additional costs in terms of type of procedure at the Faisal Islamic Hospital Makassar

Table 2

Additional costs in terms of type of procedure in the Inpatient Patient Unit at Faisal Islamic Hospital Makassar

type of action	hospital costs	ASKES dependents	<i>Cost Sharing</i>
Anesthesia	246,500	246,500	-
Laboratory	272,000	122,000	150,000
Radiology	100,000	53,000	47,000 -
ICCU	660,000	660,000	225,000
Physiotherapy	525,000	300,000	
<b>total <i>Cost Sharing</i></b>			<b>422,000,-</b>

Source: Secondary Data

Table 2 shows that of the Askes participants for inpatients at the Faisal Islamic Hospital in Makassar in the month the highest *Cost Sharing costs* were for the type of physiotherapy service, amounting to Rp. 225,000,-, and the lowest was for radiology procedures at Rp. 47,000,-.

3. Additional costs in terms of types of drug services at the Faisal Islamic Hospital Makassar

Table 3

Additional costs in terms of types of drug services in the Inpatient Patient Unit at the Islamic Faisal Hospital Makassar

Drug Costs	ASKES dependents	<i>Cost Sharing</i>





135,000	135,000	-
125,400	110,000	15,400
235,000	235,000	-
348,000	327,000	21,000
127,500	105,000	22,500
162,700	150,400	12,300
198,200	175,000	23,200
126,600	126,600	-
213,500	202,500	11,000
112,400	102,300	10,100
152,300	143,200	9,100
89,400	74,300	2,100
64,800	86,300	3,100
127,800	59,900	4,900
	127,800	-
<b>Total Cost Sharing</b>		<b>134,700,-</b>

Source: Secondary Data

Table 3 shows that of the Askes participants, inpatients at Faisal Islamic Hospital Makassar in the month the *Cost Sharing costs* were highest for the 7th patient, amounting to Rp. 23,200,-, and the lowest was in the 12th patient at Rp. 2,100,-

#### 4. Additional costs in terms of class/rank at Pelamonia Hospital Makassar

Table 4

Additional costs in terms of class/rank in the Patient Inpatient Unit  
at Pelamoni Hospital Makassar

Treatment Groups and Classes	Room charges	Dependent on health insurance	<i>Cost sharing</i>
Goal 2 1st class	200,000,-	175,000,-	25,000,-
Goal 3 VIP B class	400,000,-	200,000,-	200,000,-
VIP A class 4 goals	450,000,-	200,000,-	250,000,-
VIP A class 4 goals	450,000,-	200,000,-	250,000,-
VIP B class 4 goals	400,000,-	200,000,-	200,000,-
VIP B class 4 goals	400,000,-	200,000,-	200,000,-
<b>Total Cost Sharing</b>			<b>1,125,000,-</b>

Source: Secondary Data

Table 4 shows that of the Askes participants for inpatients at Pelamonia Hospital Makassar in the month the highest *Cost Sharing costs*





were in group 4 VIP A class at IDR. 250,000,-, and the lowest is in class 2, class 1, Rp. 25,000,-

5. Additional costs in terms of type of procedure at Pelamonia Hospital Makassar

Table 5  
 Additional costs in terms of types of procedures in the Inpatient Patient Unit at Pelamoni Hospital Makassar

Action type	Hospital costs	Dependent on health insurance	Cost sharing
Radiology	1,447,000,-	975,000,-	
Laboratory	342,000,-	262,000,-	
Anesthesia	240,000,-	240,000,-	472,000,-
ICCU	660,000,-	660,000,-	80,000,- - -
Physiotherapy	450,000,-	395,000,-	55,000,-
<b>total cost sharing</b>			<b>607,000,-</b>

Source: Secondary Data

Table 5 shows that of the Askes participants for inpatients at Pelamonia Hospital Makassar in that month the highest *Cost Sharing costs* were for radiology services amounting to Rp. 472,000,-, and the lowest were for physiotherapy procedures amounting to Rp. 55,000,-

6. Additional costs in terms of types of drug costs at Pelamonia Hospital Makassar

Table 6  
 Additional costs in terms of types of drug costs in the Inpatient Patient Unit at Pelamonia Hospital Makassar

Drug Costs	ASKES dependents	Cost Sharing
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1,198,000	125,000	978,500	125,000	
235,000	348,000	195,500	348,000	
1,723,000	162,700	1,685,000	150,400	
198,500	126,600	198,500	120,000	
1,396,000	112,400	1,253,000	102,300	219,500 - 39,500 -
152,300	766,000	143,200	766,000	38,000 12,300 - 6,600
89,400	64,800	86,300	59,900	143,000 10,100 9,100 -
127,800		127,800		3,100 4,900 -
<b>Total Cost Sharing</b>				<b>486,100</b>

Source: Secondary Data

Table 6 shows that of the Askes participants for inpatients at Pelamoni Hospital Makassar in the month the *Cost Sharing costs* were highest for the 1st patient at Rp. 219,500,-, and the lowest was in the 13th patient at Rp. 3,100,-

#### 7. Comparison results between two hospitals in terms of class/rank type

Table 7

Results of comparison of additional costs in terms of class/rank type in the Patient Inpatient Unit at Faisal Islam Hospital and Pelamonia Hospital Makassar

Hospital name	<i>Cost Sharing</i> Amount	Comparison of two hospitals
RSI Faisal Makassar	Rp. 795,000,-	<b>Rp. 330,000,-</b>
Pelamonia Hospital Makassar	Rp. 1,125,000,-	

Source: Secondary Data

Table 7 shows that the additional costs incurred by Social Askes patients at Faisal Islamic Hospital Makassar in terms of group and class of care are lower by Rp. 795,000,- compared to Rp. 795,000 at Pelamonia Makassar Hospital. 1,125,000,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 330,000,- compared to Faisal Islamic Hospital.

#### 8. Comparison results between two hospitals in terms of types of procedures





Table 8

Results of comparison of additional costs in terms of type of procedure in the Inpatient Patient Unit at Faisal Islam Hospital and Pelamonia Hospital Makassar

Hospital name	<i>Cost Sharing</i> Amount	Comparison of two hospitals
RSI Faisal Makassar	Rp. 422,000,-	Rp. 115,000,-
Pelamonia Hospital Makassar	Rp.607,000,-	

Source: Secondary Data

Table 8 shows that the additional costs incurred by Social Askes patients at the Faisal Islamic Hospital in Makassar in terms of the type of action of the hospital's health workers are lower by Rp. 422,000,- compared to Rp. 422,000 at Pelamonia Makassar Hospital. 607,000,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 115,000 ,- compared to the Faisal Islamic Hospital Makassar.

#### 9. Comparison results between two hospitals in terms of types of drug costs

Table 9

Results of comparison of additional costs in terms of types of drug costs in the Inpatient Patient Unit at Faisal Islam Hospital and Pelamonia Hospital Makassar

Hospital name	<i>Cost Sharing</i> Amount	Comparison of two hospitals
RSI Faisal Makassar	Rp. 134,700,-	Rp. 351,400,-
Pelamonia Hospital Makassar	Rp. 486,100,-	

Source: Secondary Data

Table 9 shows that the additional costs incurred by Social Askes patients at Faisal Islamic Hospital Makassar in terms of types of drug services are lower by Rp. 134,700,- compared to Rp. 134,700 at Pelamonia Makassar Hospital. 486,100,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 351,400 , - compared to Faisal Islamic Hospital.





## b. Discussion

Cost Sharing is the amount of additional costs that must be paid by patients participating in Askes because they receive health services at Faisal Islam Hospital and Pelamonia Hospital Makassar which are obtained from reducing the tariff by the amount of costs borne by Askes. These additional costs can come from medicines that are not included in the Drug Price List and Ceiling (DPHO), medical services and occupying treatment classes that do not correspond to their class.

### 1) Rank/Group

The existence of Askes so far is a type of insurance that guarantees health services for Civil Servants (PNS), but not all types of health services can be covered by Askes. The consequences of the type of service that can be provided have an impact on Askes participants. There are still additional costs (Cost Sharing) that must be paid by Askes participating patients. There are several factors that can cause this high Cost Sharing, one of which is class/rank which influences the amount of additional costs that must be borne by inpatients participating in Askes.

Class/rank is a position that allows the level of a Civil Servant in a series of civil service arrangements and is used as a basis for remuneration (Siagian, 1998).

The class/rank of Civil Servants (PNS) will determine the class of care they receive, if they have to be treated intensively in hospital. Determination of treatment classrooms for inpatient care is determined based on the class of civil servants, namely class I and II civil servants and their family members in class 2, while class III and IV civil servants and their family members are in class 1. The facilities available in each Each class is different, from class 1 there are 2 patient beds, AC, TV, cupboard and bathroom, to class II there are 3 patient beds, AC, TV. Cupboard and bathroom while VIP has 1 patient bed, AC, TV, refrigerator, cupboard, bathroom and patient waiting chairs.





Based on PERDA number 4 of 2008 concerning Health Service Levy at Pelamonia Hospital, the amount of inpatient treatment rates is set differently. For VIP A class Rp. 450,000,-/day , VIP B Rp. 400,000,-/day, VI.IP Rp. 1,000,000,-/day class I Rp. 200,000,-/day, class II Rp. 175,000,-/day, class III Rp. 150,000,-/day. Meanwhile, the tariff for health services at the hospital for ASKES class I, IV , III, and retirement participants is IDR 200,000/day.

Meanwhile, the Health Service levies that have been determined at the Faisal Islamic Hospital in Makassar also vary. For VIP class IDR 350,000/day, class I IDR 200,000/day, class II IDR 175,000/day. Meanwhile, the tariff for health services at the hospital for class I ASKES participants is IDR 200,000/day, class II IDR 175,000/day.

The results of the research show that the additional costs incurred by Social Askes patients at the Faisal Islamic Hospital in Makassar in terms of class and class of care are lower by Rp. 795,000,- compared to Rp. 795,000 at Pelamonia Makassar Hospital. 1,125,000,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 330,000 ,- compared to Faisal Islamic Hospital.

Research by Safwan Yasir (2009) shows that as many as 52.4 % of Askes patients are in a better treatment class than they should receive.

The results of this study and previous research show that patients participating in Askes tend to use nursing classes that are better than those that have been determined.

Based on the results of research regarding the description of nurses' knowledge regarding wound management at Bhayangkara Hospital, Manado, North Sulawesi, the following conclusions can be drawn:

- 1) The description of the level of knowledge of nurses regarding emergency management of injured patients at Bhayangkara Hospital, Manado, North Sulawesi is good (95.0%).





The description of the level of education of nurses in emergency care for injured patients at Bhayangkara Hospital, Manado, North Sulawesi is high education (92.5%).

The description of the length of work experience of nurses in emergency care for injured patients at Bhayangkara Hospital, Manado, North Sulawesi, is that 39 people (97.5%) have long work experience. This is due to the patient's desire to get better service.

The use of treatment classes that are better than the established policy is also caused by the patient's desire to receive service and peace of mind because the illness they suffer from requires a calm atmosphere, so they tend to choose treatment class I or VIP.

## 2) Medical Services/type of action

Health services are any efforts carried out individually or jointly within an organization to maintain and improve health, prevent and cure disease and restore the health of individuals, families, groups and communities.

The severity or severity of patients treated in hospitals is difficult to predict, and hospitals cannot have patients treated for certain reasons. In connection with the severity of the disease being treated in hospital, the more serious the disease a person suffers, the more complex the medical examination/action that will be carried out. For example, patients who suffer from stroke, kidney disease and others. This situation has other consequences, namely higher costs. Apart from that, the severity of the disease makes a different contribution to the amount of unit costs that must be incurred per day.

The results of this research show that Askes participants have received more financial assistance in terms of hospitalization rates, while medicines and medical procedures are still inadequate, because for certain medical procedures the amount (Rp) that patients have to pay is much greater than that covered by PT. Askes.





Cost Sharing costs incurred by Social Health Insurance patients at Faisal Islamic Hospital Makassar in terms of the type of action of hospital health workers are lower by Rp. 422,000,- compared to Rp. 422,000 at Pelamonia Makassar Hospital. 607,000,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 115,000 ,- compared to the Faisal Islamic Hospital Makassar.

### 3) Drug Services

Drug services are the provision of drugs other than standard drugs included in the hospital package, which are required for health services in accordance with medical indications and with the Drug Price Ceiling List (DPHO) used for participants and their families by PT. Askes in accordance with the decree of the Minister of Health. The drugs included in the Drug Price Ceiling List (DPHO) are not generic drugs, but the required drugs can be provided at prices that meet a certain ceiling list.

The selection of the type of drug is carried out by pharmacology and clinical experts, apart from that, an analysis is also carried out from the price aspect for making DPHO which refers to the National Essential Medicines (DOEN) list that has been prepared by the government. This is because the medicines in DOEN are the medicines of choice that are most needed and absolutely necessary. Several types of medicines included in DOEN range from antibiotics, anti-inflammatory, anti-depression, anti-hypertension, anti-fungal, asthma medicine, ulcer medicine to skin medicine.

The amount of drug costs that must be borne by the patient really depends on the type of drug given by the doctor to the patient. If a prescription is given without paying attention to whether the drug is covered by PT. Askes means patients will pay more.

The results of the research show that the additional costs incurred by Social Askes patients at the Faisal Islamic Hospital in Makassar in terms of types of drug services are lower by Rp. 134,700,- compared to Rp. 134,700 at





Pelamonia Makassar Hospital. 486,100,-. This shows that the additional costs incurred by Social Askes patients at Pelamonia Hospital are much higher, amounting to Rp. 351,400 , - compared to Faisal Islamic Hospital.

The results of the research show that drug costs are costs that must be borne by the patient, which means that Access has not been able to provide all the drugs needed by patients as a main component of disease treatment when compared with the inpatient tariff component which has been more important to Askes.

#### 4. Conclusion

1. Great Cost Sharing Social Health Insurance patients based on class/rank in the Faisal Islamic Hospital inpatient unit are Rp. 795,000, - while at Pelamonia Hospital Makassar it is Rp. 1,125,000,-.
2. Great Cost Sharing Social Health Insurance patients. The cost of medical care and services in the Faisal Islamic Hospital inpatient unit is IDR. 422,000 ,- while at Pelamonia Hospital Makassar it is Rp. 607,000 ,-.
3. Great Cost Sharing Social Health Insurance patients. The cost of drug services that are not included in the DPHO in the inpatient unit at Faisal Islam Hospital is Rp. 134,700,- while at Pelamonia Hospital Makassar it is Rp. 486,100,-

#### 5. Compliance with ethical standards

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##### Disclosure of conflict of interest

This research collaboration is a positive thing for all researchers so that conflicts, problems and others are absolutely no problem for all writers.

##### Statement of informed consent





Every action we take as authors is a mutual agreement or consent.

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