Analysis of Differences in the Quality of Health Services in Inpatient and Outpatient Patients Participating in National Health Insurance at Toto Kabila Hospital

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ABSTRACT

Health services are products in the form of services or goods produced by a producer, in this case, it can be a provider or health institution (Retnaningsih, 2013). The research formulation is whether there is a difference in the quality of health services for inpatients and outpatients participating in national health insurance at the Toto Kabila Regional General Hospital. This research aims to determine the differences in the level of quality of health services for inpatients and outpatients participating in national health insurance at the Toto Kabila Regional General Hospital. The sample in this study consisted of 48 inpatients and 48 outpatients at Toto Kabila Hospital. The results of data analysis showed significant differences in service quality based on service *availability* between inpatients and outpatients with a p-value = 0.004, namely ≤0.05. The difference in service quality based on service continuity is significant between inpatients and outpatients with a p-value = 0.000, namely ≤0.05. The difference in service quality based on medical support services is significant between inpatients and outpatients with a p-value = 0.000, namely ≤0.05.

KEYWORDS: Quality of Service, Health Insurance, Outpatient, Inpatient

ARTICLE DETAILS

I. INTRODUCTION

Health Services are the conformity of health services with professional standards by making good use of existing resources so that all customer needs and goals for achieving optimal health can be achieved (Latifah, 2017).

Service quality is the expected level of excellence and control over excellence to fulfill customer desires. Service quality focuses on efforts to fulfill customer needs and desires and the accuracy of delivery to match customer expectations.

National Health Insurance (JKN) participants are every person, including foreigners who have worked for a minimum of 6 (six) months in Indonesia, who have paid contributions, including participants receiving Health Insurance Contribution Assistance (PBI), namely the poor and underprivileged, with Determination of participants by statutory provisions and pesetas as Non-Recipients of Health Insurance Contribution Assistance (Non-PBI),

Namely participants who are not classified as poor and underprivileged. Non-PBI Mandiri participants include non-wage earners and non-employees. The stages of JKN participation are divided into two stages, the first stage starts on January 1, 2014, namely PBI (Jamkesmas), TNI/POLRI, social health insurance, and JPK social security (Azinar, 2018)

Based on health insurance coverage data, the population of Bone Bolango Regency in 2023 is 800,506 people (98.37%) or of the 813,771 residents of Bone Bolango Regency who have become National Health Insurance (JKN) participants and (1.63%) residents of Bone Bolango Regency who have not become a participant in national health insurance. (BPJS Gorontalo Province 2023).

METHODS

The location of this research is at Toto Kabila Hospital, Bone Bolango Regency, Gorontalo Province. This research will be carried out from December 2023 to January 2024. This research is an analytical observational study with a *cross-sectional study approach.* This research aims to

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determine the differences in the level of quality of health services among outpatients and in-patients participating in National Health Insurance at Toto Hospital. Kabila. The population in this study were patients who visited Toto Kabila Regional Hospital in the last 3 months, totaling 1136 patients consisting of inpatients and outpatients. The sampling technique in this research is *Purposive Sampling*. The number of samples in this research is determined based on sample calculations carried out using the *Simple Minimum Size formula*.

RESULTS AND DISCUSSION

Table 1. Analysis of differences in service quality for inpatients and outpatients participating in national health insurance based on *the availability* of services at Toto Kabila Regional Hospital in 2024.

	Patient Type	n	Mean	Std. Deviation	Sig. (2-tailed)
Availability	Inpatient	48	19.10	1,981	0.004
	Outpatient	48	20.29	1,924	

Source : Primary Data, 2024

Based on the table above, it can be seen that in the t-test calculation the sig. (2-tailed) = 0.004 which means $p<0.05$. With this, there is a significant difference in service quality for inpatient and outpatient National Health Insurance participants based on service availability and the hypothesis is accepted.

Table 2. Analysis of differences in service quality for inpatients and outpatients participating in National Health Insurance based on service continuity at Toto Kabila Regional Hospital in 2024.

	Patient Type	n	Mean	Std. Deviation	Sig. (2-tailed)
Continuity of Service	Inpatient	48	19.04	2,031	0,000
	Outpatient	48	21.33	2,382	

Source : Primary Data, 2024

Based on the table above, it can be seen that in the t-test calculation the sig. (2-tailed) = 0.000 which means $p<0.05$. With this, there is a significant difference in the quality of service for inpatients and outpatient National Health Insurance participants based on continuity of service and the hypothesis is accepted.

Table 3. Analysis of differences in service quality for inpatients and outpatients participating in National Health Insurance based on medical support services at Toto Kabila Regional Hospital in 2024.

	Patient Type	n	Mean	Std. Deviation	Sig. (2-tailed)
Medical Support Services	Inpatient	48	56.98	3,944	0,000
	Outpatient	48	61.33	4,023	

Source : Primary Data, 2024

Based on the table above, it can be seen that in the t-test calculation the sig. (2-tailed) = 0.000 which means $p<0.05$. With this, there is a significant difference in the quality of service for inpatient and outpatient National Health Insurance participants based on medical support services and the hypothesis is accepted.

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Service Quality is based on *the Availability* (availability) of the service

The results of the service quality research are based on Table 1. *Availability* (Availability) of services for health workers at Toto Kabila Regional Hospital, 41 patients stated that they were not good, these results show that inpatients there were more respondents whose service quality was less good because the patient respondents saw from all assessment aspects, for example hospital rooms, inadequate hospital beds so that patients have to wait for patients to come out, as well as facilities to support patient needs such as toilets that are not clean, patient rights that should be in class II must be entrusted to class III. In the results of the SPSS 16 *Independent Sample t-test,* the result was p<0.05, namely 0.004, which means there is a significant difference in service quality based on service *availability* between inpatient and outpatient National Health Insurance participants.

Service Quality Based on Service Continuity

The results of the research on quality of service are based on table 2. Continuity of service for workers at Toto Kabila Regional Hospital, 56 patients said that the service they received was good because in terms of friendliness, they always provided information to families and patients regarding the situation, took action according to procedures, and always convinced patients, while 16 patients stated that the service was not good because according to patients, especially outpatients, they said they were not yet efficient in carrying out treatment because patients could repeatedly return to the hospital and travel very long distances, making it difficult to get health services, so outpatients needed information. more clearly regarding the doctor's schedule and services every day. In the *Independent Sample t-test* SPSS 16 test results, p <0.05, namely 0.000, which means there is a significant difference in service quality based on continuity of service between inpatient and outpatient National Health Insurance participants.

Quality of Service based on medical support services

The results of the research on quality of service are based on Table 3 of medical support services for workers at Toto Kabila Regional Hospital, 58 patients stated that the quality of service is good, these results show that inpatients have the best service because the patients have experienced free medical support facilities, whereas for outpatients You can experience the completeness of the medical support facilities at Toto Hospital, but you will need to pay money to get other health service coverage. In the results of the SPSS 16 *Independent Sample t-test,* the result was p>0.05, namely 0.000, which means there is a significant difference in service quality based on service effectiveness between inpatient and outpatient National Health Insurance participants

CONCLUSIONS

Based on the research results, it can be concluded as follows:

1. Of the 48 inpatients and 48 outpatients, there were 42 patients, or (87.5%) who received poor service, namely 23 inpatients, or (47.9%), and those who received good service, namely 19 outpatients, or (39.6%). In the *Independent Sample T-Test* analysis, there was a significant difference in service quality based on service *availability* between inpatients and outpatients with a p-value = 0.004, namely ≤0.05.

2. Of the 48 inpatients and 48 outpatients, there were 56 patients (58.3%) who received good service, namely 29 inpatients (60.4%) and 27 outpatients (56.2%). In the *Independent Sample T-Test* analysis, there was a significant difference in service quality based on service continuity between inpatients and outpatients with a p-value = 0.000, namely ≤0.05.

3. Of the 48 inpatients and 48 outpatients, there were 58 patients (60.4%) who received good service, namely 24 inpatients (50.0%) and 34 outpatients (70.8%). In the *Independent Sample T-Test* analysis, there was a significant difference in service quality based on medical support services between inpatients and outpatients with a p-value = 0.000, namely ≤0.05.

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