

## Strengthening the Marketing of Pediatric Cardiac Surgery Services to Support the Transformation of Health Services in Indonesia

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**Abstract.** This study aims to identify marketing or socialization strategies for hospitals that provide Cardiac Surgery Services in Indonesia. The findings of this study will contribute to optimizing the services available in the regions as well as contributing to the transformation of health services, particularly in cardiac surgery services. This study is observational descriptive research. Data were collected from Cardiothoracic and Vascular surgeons and hospital websites with cardiac surgery services. Through the marketing analysis approach of 7P, this study identifies problems and policy recommendations that can be alternative solutions. The price of the service is high, but most of the patients used BPJS, and it is found that the hospital rate is higher than BPJS claims. The hospital should provide the costing and financial analysis that generate the hospital rate to BPJS revise the BPJS's claims. It can only be done if hospitals from many regions produce similar rates or slight variations. Jabodetabek still dominates as the region (place) with the most cardiovascular surgery services in Indonesia, with 29 of 35 hospitals. The recommendations to respond to this issue include ensuring data on demand for cardiac surgery services from various regions and encouraging the government through specialist expert associations and legislation to provide cardiovascular surgery services in various regions. Regarding the specialist (people), the government must provide scholarships for doctors to take BTKV specialists, especially those who can perform pediatric ones.

**Keywords:** Marketing Strategy 7P; Cardiac Surgery Services

**Abstrak.** Penelitian ini bertujuan untuk mengidentifikasi strategi pemasaran atau penjangkauan rumah sakit yang menyediakan Layanan Bedah Jantung di Indonesia. Temuan studi ini akan berkontribusi dalam mengoptimalkan layanan yang tersedia di daerah-daerah serta berkontribusi dalam transformasi pelayanan kesehatan, khususnya pada pelayanan operasi jantung. Penelitian ini merupakan penelitian deskriptif observasional. Data dikumpulkan dari ahli Bedah Toraks, Kardiak dan Vaskular dan situs web rumah sakit dengan layanan bedah jantung. Melalui pendekatan analisis pemasaran 7P, penelitian ini mengidentifikasi permasalahan dan rekomendasi kebijakan yang dapat menjadi alternatif solusi. Harga layanannya tinggi, tetapi sebagian besar pasien menggunakan BPJS, dan ditemukan bahwa tarif rumah sakit lebih tinggi dari klaim BPJS. Rekomendasi yang dapat ditindaklanjuti untuk menanggapi hal tersebut adalah rumah sakit harus memberikan analisis biaya dan keuangan yang menghasilkan tarif rumah sakit kepada BPJS untuk merevisi klaim BPJS. Hal itu hanya bisa dilakukan jika rumah sakit dari berbagai daerah menghasilkan tarif yang sama atau sedikit variasi. Jabodetabek masih mendominasi sebagai wilayah (tempat) dengan pelayanan bedah kardiovaskuler terbanyak di Indonesia, dengan 29 dari 35 rumah sakit. Rumah sakit seharusnya dapat memastikan data permintaan layanan bedah jantung dari berbagai daerah dan mendorong pemerintah melalui asosiasi ahli spesialisik dan legislative (dewan perwakilan rakyat) untuk menyediakan layanan bedah jantung di berbagai daerah. Mengenai dokter spesialis (orang), pemerintah harus memberikan beasiswa kepada dokter untuk mengambil dokter spesialis BTKV, terutama yang bisa melakukan bedah jantung anak.

**Kata Kunci:** Strategi Pemasaran 7P, Pelayanan bedah jantung

## INTRODUCTION

Cardiac and vascular disease is a common disease and still the number 1 leading mortality in the world. World Health Organization (WHO) states that the number of people who die from cardiac and vascular disease is more than 17 million. Data from WHO in 2015 showed that cardiac disease that gave the largest percentage mortality was coronary heart disease (44%).(1) Meanwhile in 2019, Institute for Health Metrics and Evaluation (IHME) stated mortality rate in Indonesia from cardiac and vascular disease reached 651.481 population per year which divided into 331.394 due to stroke, 245.343 due to coronary heart disease, 50.620 due to hypertensive heart disease and the rest due to other cardiac and vascular disease.(2)

Based on data from Riskesdas (Basic Health Research) in 2018, the prevalence of coronary heart disease in Indonesia is still 1.5% same as data in 2013. When seen from the residence, urban residents have a prevalence of 1,6% more than rural residents with a prevalence of 1,3%. Based on Social Security Administrator (Badan Penyelenggara Jaminan Sosial-BPJS) data for 2020, it was said that almost half of total cost of health services is spent on cardiac and vascular disease and catastrophic diseases, namely Rp 8,2 trillion for cardiac and vascular disease, Rp 2,13 trillion for stroke and Rp 1,92 trillion by kidney failure.(2)

Treatment for coronary heart disease is revascularization which can be done with 2 options, namely Percutaneous Coronary Intervention (PCI) or Coronary Artery Bypass Graft (CABG).(3) Recent research also states that CABG surgery is still the gold standard in the treatment of coronary heart disease.(4)

But many people do not know that cardiac and vascular disease is not only adult's disease or even the elderly, but also children's disease which is usually acquired from birth and known as congenital heart disease (CHD). The number of congenital heart disease is 8-10 per 1.000 births or about 1%. If Indonesia's population is 200 million with a birth rate of 2%, the number of CHD increases by approximately 32.000 babies per year. In 2016 the birth rate was 4,8 million, so it is estimated that around 40.000 children were born with CHD. If CHD is not detected and handled properly, about 50% of deaths will occur in the first month of life.(5)

Cardiac surgery services for both adults and children are carried out by Cardiothoracic and Vascular Surgeons (Bedah Toraks, Kardiak dan Vaskular-BTKV) specialist and are done in type A or B hospitals or special hospitals because they require very large resources, which include human

resources, supporting facilities and infrastructure and sophisticated equipment that has a large impact on financing. Intervention needed to be done for CHD is around 20.000 cases every year, and National Cardiovascular Center Harapan Kita is operating only 10 percent of the number of cases and that caused the queue for congenital heart surgery reach 1.100 people in 2019.(6) Why can there be so many queues at the Harapan Kita Hospital? Do other hospitals not have pediatric heart surgery services or does the public not know because the hospital does not do marketing or promotion of this pediatric cardiac surgery service?

In the current era of globalization, hospitals must adapt to survive and compete in the free market. One thing that can be done by the hospital is to carry out a marketing strategy to be able to achieve the goals while still paying attention to cost efficiency. The legislation which is the legal basis for hospitals to carrying out marketing promotion actions is based on the 2015 Indonesian Hospital Code of Ethics (KODERSI) in Chapter I concerning General Hospital Obligations article 8 states that Hospitals in carrying out marketing promotions must be informative, not comparative, based on a real basis, not exaggerated, and based on the Indonesian Hospital Code of Ethics(7); based on the Law of the Republic of Indonesia No. 44 in 2009 concerning Hospitals Chapter VIII concerning Obligations and Rights article 29 Obligations of Hospitals to (a) provide correct information about Hospital services to the public, article 30 Rights of Hospitals namely (g) promote health services in Hospitals according to with the provisions of laws and regulations.(8) While the Law of the Republic of Indonesia number 36 in 2009 concerning Health it says in article 7 that everyone has the right to receive information and education about health in a balanced and responsible manner, article 17 that the government is responsible for the availability access to information, education and health service facilities to improve and maintain the highest degree of health, article 47 that health efforts are organized in the form of activities with promotive, preventive, curative and rehabilitative approaches that are carried out in an integrated, comprehensive and continuous manner.(9)

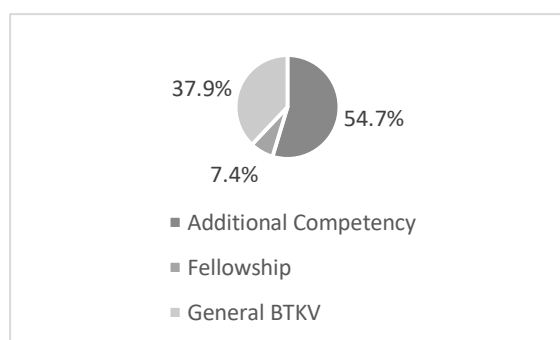
One form of marketing strategy that can be implemented to support product marketing, both goods and services to create customer satisfaction, is the implementation of the marketing mix.(10) According to Kotler & Armstrong, marketing strategy consists of 4P, namely: product, price, promotion and place, which in its development has become 7P with the addition of people, process and physical evidence.(11) How cardiac surgery services in hospitals in Indonesia are seen from the 7Ps as a marketing strategy will be discussed in this study.

**METHODS**

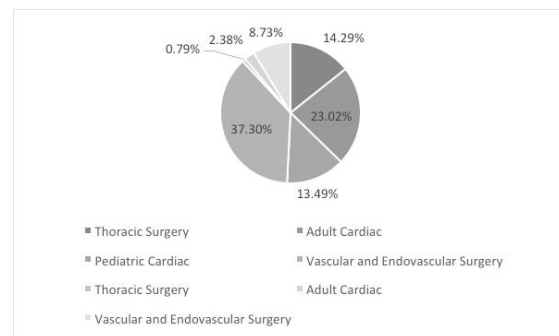
A descriptive observational cross-sectional study was conducted to obtain an overview of the promotion strategy carried out by cardiac surgery services in Indonesia, both adults and/or pediatric associated with the hospital that provides cardiac surgery services. The initial process is to sort out the number of Cardiothoracic and Vascular Surgeons (Bedah Toraks, Kardiak dan Vaskular-BTKV) specialists who perform cardiac surgery procedures, both in adults and/or pediatric. Then find out at which hospital the BTKV specialist works. After that, a search was carried out through the hospital's website regarding the promotion of cardiac surgery being carried out. These data were collected and presented descriptively and then analyzed related to the 7P strategy for promoting cardiac surgery services.

**RESULTS**

Of the total 203 BTKV specialists (including 10 new graduates in January 2023), they are divided into 4 Additional Competencies. This will differentiate payments made by BPJS regarding cases carried out in accordance with the Additional Competency they have. BTKV specialists who have Additional Competence in Thoracic Surgery as many as 18 people (8,9%), in Adult Cardiac Surgery as many as 29 people (14,3%), in Pediatric Cardiac Surgery as many as 17 people (8,4%), and Vascular and Endovascular Surgery as many as 47 people (23,2%). Meanwhile, 1 person (0,5%) has a Thoracic Surgery Fellowship, 3 Adult Cardiac Surgery fellowships (1,5%) and 11 people (5,4%) Vascular and Endovascular Surgery fellowships. This can be seen more clearly in the following graph.



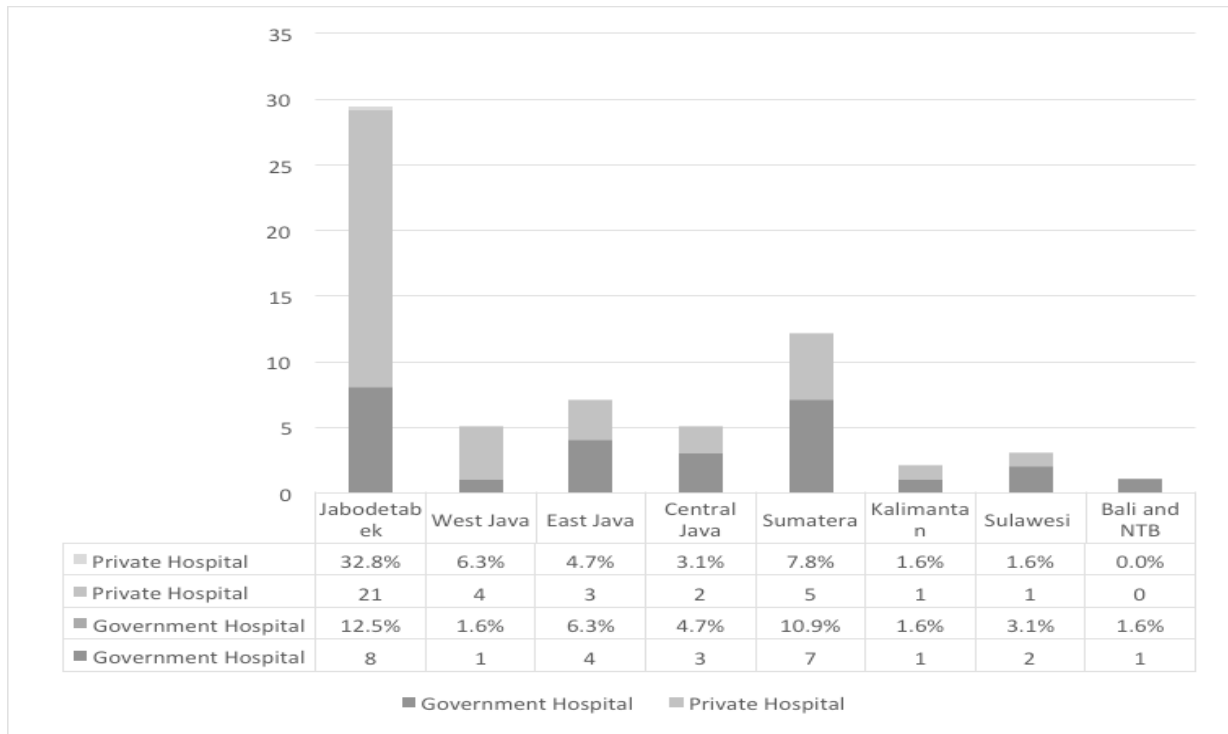
**Figure 1.** Percentage of Indonesian BTKV based on Additional, Fellowship & General Competency



**Figure 2.** Percentage of Indonesian BTKV by Type of Additional Competency & Fellowship

However, it is possible for BTKV specialists who do not have additional competence or fellowship to carry out adult or pediatric cardiac surgery as long as the doctor has competence in the actions he is performing.

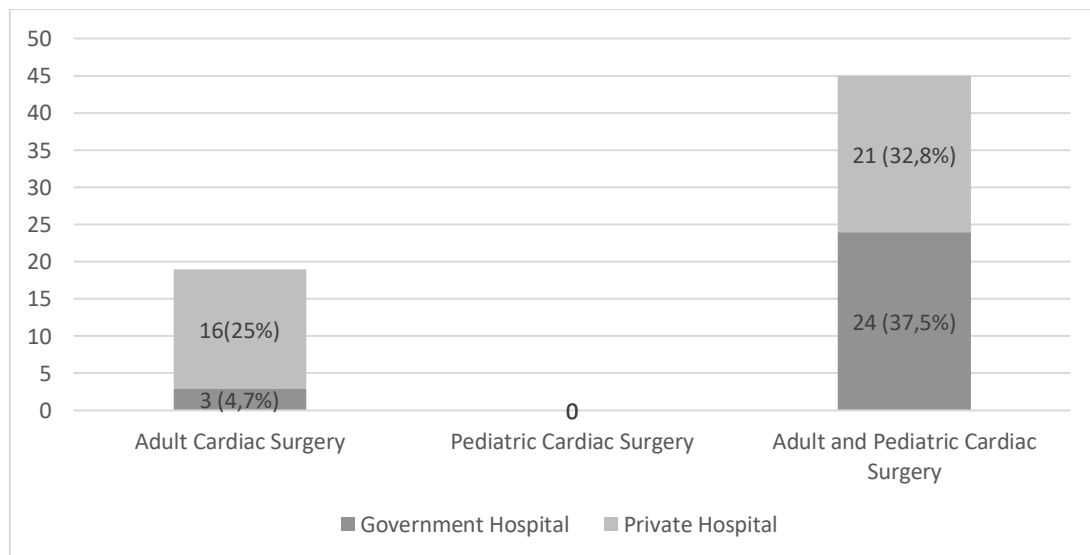
Then a follow-up search was carried out at the hospital where the BTKV specialist who did the cardiac surgery worked. Each of them has more than 1 workplace, but not in all places where the BTKV specialist services perform cardiac surgery. The hospitals are then grouped by government or private along with location (Jabodetabek, Java, Sumatra, Kalimantan, Sulawesi). The highest results were in Jabodetabek, namely 8 government hospitals (12,5%) and 21 private hospitals providing cardiac surgery services (32,8%). Then the second largest is the Java region which is divided into 1 government hospital (1,6%) and 4 private hospitals in West Java (6,3%), 4 government hospitals (6,3%) and 3 private hospitals (3,7%) in East Java, as well as 3 government hospitals (4,7%) and 2 private hospitals (3,1%) in Central Java. After that, the third position was mostly occupied by the island of Sumatra, namely 7 government hospitals (10,9%) and 5 private hospitals (7,8%) which served cardiac surgery. Sulawesi occupies the next position with 2 government hospitals (3,1%) and 1 private hospital (1,6%) providing cardiac surgery services. The provision of cardiac surgery services in Kalimantan is from 1 government hospital (1,6%) and 1 private hospital (1,6%), and in Bali only 1 government hospital (1,6%). This can be seen more clearly in the graph below.



**Figure 3.** Hospitals that are Active in Providing Cardiac Surgery Services by Region in Indonesia

After that, a grouping of hospitals was carried out, which only provided services for adult cardiac surgery, pediatric cardiac surgery and both cardiac surgeries. This hospital is still divided into government hospitals and private hospitals. It was found that 3 government hospitals (4,7%) and 16 private hospitals (25%) provided only adult cardiac

surgery services. Meanwhile, there are no hospitals that only provide pediatric cardiac surgery services, either in government hospitals or private hospitals. There are 24 government hospitals (37,5%) and 21 private hospitals (32,8%) providing services for both adult cardiac surgery and pediatric cardiac surgery. The results can be seen in the following graph.



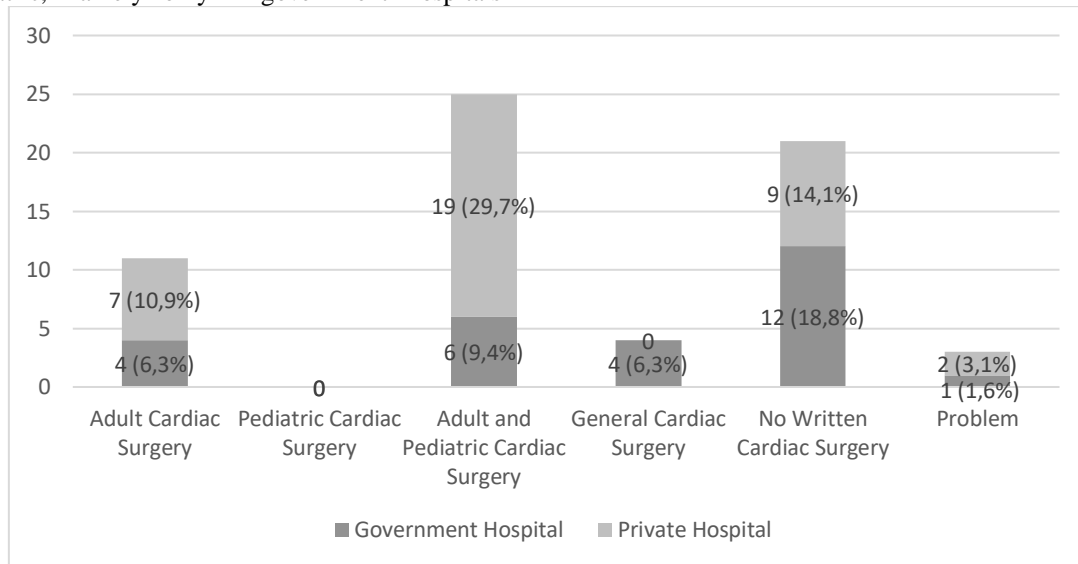
**Figure 4.** Hospitals Based on the Type of Cardiac Surgery Services Provided

A search of the hospital's website was carried out and looked at the services available, namely adult cardiac surgery, pediatric cardiac surgery, or both. But it turns out that there are websites that list

cardiac surgery services in general, or don't even write about cardiac surgery services. In addition, there are also websites that cannot be opened. Hospital websites that list adult cardiac surgery

services only are from 4 government hospitals (6,3%) and 7 private hospitals (10,9%). But there is no hospital that only lists pediatric cardiac surgery services. Hospital websites that list adult and pediatric cardiac surgery services are 6 government hospitals (9,4%) and 19 private hospitals (29,7%). While the website lists cardiac surgery services in general, it is not specific whether it is adults or pediatric, namely only 4 government hospitals

(6,3%). Hospital websites that do not include cardiac surgery services are 12 government hospitals (18,8%) and 9 private hospitals (14,1%). And there is 1 government hospital (1,6%) and 2 private hospitals (3,1%) that experience problems. The results can be seen in the following graphic display.



**Figure 5.** Website of Hospitals that Provide Cardiac Surgery Services

**DISCUSSION**

Marketing strategy is a marketing effort or tactic that is used to achieve the goals of an organization.(12) Indirectly, the marketing strategy carried out by Indonesian cardiac surgery services will also look at some of the marketing strategies of the hospital where the cardiac surgery service is located.

In the marketing strategy carried out by the hospital, it must be known or formally identified in advance the needs and problems of marketing. The marketing problem usually faced by hospitals is that there is a gap between what is offered by the hospital and what is actually needed and expected from patients. Marketing mix tools or marketing mix is one way to find out what this patient needs or expects.(13)

The marketing mix consists of 7P namely product, price, place, promotion, people, process and physical evidence. This marketing mix will be an attraction for a product, where consumers will evaluate a service and make decision to buy or not. For hospitals, this marketing mix encourages customer loyalty, increases profits, creates harmonious relationships, and encourages everyone in the hospital to work for a better purpose.(14)

The discussion of each of the 7P carried out by the Indonesian cardiac surgery service as a marketing

strategy, especially those related to the hospital where the cardiac surgery service is located will be elaborated.

Product. Products are all things in the form of goods or services produced by an organization or offered by the company to the target market and are able to satisfy consumers when used. The product in this case that will be seen is cardiac surgery services. These cardiac surgery services can be divided into adult cardiac surgery services and pediatric cardiac surgery services.

Adult cardiac surgery services consist of services for ischemic heart disease, valvular heart disease, great vessel disease, arrhythmic heart disease, other heart disease as well as transplantation and circulatory support.(15) Meanwhile, pediatric cardiac surgery services provide services for patients aged 18 and under and consist of services for congenital heart disease and acquired heart disease.(16)

Price. Price is the amount of money that must be paid by customers to obtain products or it can also be interpreted that price is the selling value provided by a company for products or services that are sold or marketed. Price is one of the factors that determine the type of service available and provided to patients.

Cardiac surgery services require enormous resources, which include human resources, supports in the form of facilities and infrastructure and sophisticated equipment which have a large financial impact. Most of the payments for cardiac surgery services come from BPJS, and only a few hospitals do not cooperate with BPJS, which means that patients have to pay private or using the insurance.(17)

Research conducted at a government hospital showed that there was a difference in hospital rates with BPJS claims to hospitals, namely billing and hospital rates that were 79% higher than claims and the remaining 21%, hospital rates were less than BPJS claim.(18) Research conducted by Putra in 2014 gave the result that the cost of INA-CBG is greater than the Fee for Service in non-surgical cases. And conversely the cost of INA-CBG is much lower than the Fee For Service in surgical cases.(19)

With the latest INA-CBG rates which is in 2023 (in the Minister of Health Regulation No. 3 of 2023 concerning Standard Health Service Rates in the Implementation of the Health Insurance Program) which replaces the previous INA-CBG rates in 2016, there is an increase in rates, also for services cardiac surgery for both adults and children. But further research is still needed whether hospital rates are still below or the same or already above the INA-CBG rates, especially for cardiac surgery services.(20)

New research was conducted in 2020 to find out the market attractiveness value of the cardiac health business in Jakarta, namely 61.5, which is still high. This was done using Basic Health Research (Risksedas) 2013 data where DKI Jakarta was in second place for Coronary Heart Disease (CHD) sufferers in Indonesia, namely 0,7%. Market demand calculations are carried out with the assumption that the population of Jakarta is 11.000.000 people with CHD sufferers of 0,7% of the total population and the average cost of coronary heart treatment is Rp 50.000.000.-. The market demand figure is obtained by multiplying all the components, so that it become Rp 3.850.000.000.000,- which is the total market demand for cardiac disease services. This number is still relatively high and for the development of the cardiac health service business it provides a significant market opportunity.(21)

Place. Place includes all the activities of the company that make the product available to targeted customers. This means that the location where the company's products or services are sold should have potential customers who will be interested in buying products from their company. From the results shown, it was found that hospitals providing cardiac surgery services were still concentrated in

Jabodetabek, namely a total of 29 hospitals, compared to outside Jabodetabek, which was a total of 35 hospitals, but they were spread throughout Indonesia.

Of the hospitals providing cardiac surgery services, it turns out that 19 hospitals (3 government hospitals and 16 private hospitals) only provide adult cardiac surgery services, compared to 45 Indonesian hospitals (24 government hospitals and 21 private hospitals) which provides cardiac surgery services for both adults and children. Meanwhile, there are no hospitals that only provide pediatric cardiac surgery services in Indonesia.

Promotion. Promotion as a coordination of all efforts initiated by the seller to build various channels of information and persuasion to sell goods and services to introduce an idea. In other words, promotion is all the strategies or methods used by companies that aim to make consumers know and know about the products or services offered, about their brands so that they are finally interested in buying the products being promoted. The use of the internet and social media as a hospital marketing strategy, namely a promotion strategy, is growing, especially in this digitalization era.

When the Covid-19 pandemic hit all nations in the world, it created a psychosocial disparity and the application of social restriction regulations. In Indonesia itself, the government stipulates the implementation of restrictions on community activities (PPKM) which have an impact on reducing patient visits to doctors to get health services. This will have an impact on hospital cash flow, especially due to a decrease in the number of patient visits.(22) With the Covid-19 pandemic, many companies, including hospitals, have had to make changes to their promotion strategy by utilizing digital marketing. This definition of digital marketing is an effort made in marketing using devices connected to the internet with various digital media and strategies whose goal is for companies to stay in touch through online communication with consumers. This digital marketing should be part of almost every major business decision from product development and pricing to public relations and even recruitment.(23) This digital promotion can be carried out by companies through channels such as websites, blogs, social media (instagram, whatsapp, line), smartphone applications, interactive audio videos (youtube, video), interactive audio (podcasts, soundcloud) or online advertisements. The advantage of this digital marketing is that it is more practical, requires less operating expenses than conservative promotional processes, and requires less time to respond to consumer complaints or needs.(24)

In one study at the Yadika hospital, it was found that before the pandemic, the marketing department of the hospital carried out more face-to-face promotions, visits to companies, insurance and clinics around the hospital, and organized health events or gatherings involving the community. When a pandemic occurs, it is said that hospitals can maintain the quality of existing services in several ways, one of which is the promotion of hospital health service products which is increased by the use of electronic media, namely social media and hospital websites. This aims to introduce service products as well as educate the public about existing diseases. Education is carried out with the aim of realizing public understanding of disease, especially in this superior service program which should be the focus of promotion that must be prepared.(25)

From searching the websites of hospitals that only promote pediatric cardiac surgery, there are none compared to hospitals that promote both cardiac surgery or even adult cardiac surgery only, namely 0 compared to 25 hospitals and 11 hospitals. This hospital website can be the main website of a large network hospital and then split into its hospital branches and specifically notify the superior services of each branch, but there is also a main hospital website that does not specifically share the superior services of each hospital branch. There are 4 websites that promote cardiac surgery in general, not specifically whether adult or pediatric cardiac surgery, and there are 21 hospitals that provide cardiac surgery services but do not list it on the hospital's website.

People. People are all human resources involved when providing services through goods or services to consumers. The people who provide cardiac surgery services are BTKV specialists and their team. The number of Cardiothoracic and Vascular Surgery (BTKV) specialists in Indonesia is indeed very small when compared to other specialist doctors, namely only 203 people to serve nearly 270 million Indonesians. Then these BTKV specialists are further divided into BTKV specialists who have Additional Competencies, fellowships or General BTKV. For BTKV specialists who have additional competencies in adult cardiac surgery or pediatric cardiac surgery who perform cardiac surgery services in Indonesia. However, it is possible for fellowships or General BTKV to also work if it is in accordance with their competence. Judging from the number of BTKV specialists with Additional Competency in pediatric cardiac surgery, it is indeed the least with the assumption that there are even fewer outside of BTKV specialists who do not have Additional Competence or fellowship in pediatric cardiac surgery who perform pediatric cardiac surgery.

The team involved in cardiac surgery apart from BTKV specialists includes cardiac surgery anesthesiologists (SpAn, KAKV), cardiac surgery special nurses and perfusion nurses (special nurses who operate cardiopulmonary bypass machines (CPB)). In addition, it is also needed post cardiac surgery team to care for post cardiac surgery patients.

Process. The process is the time when the producer delivers the product to the consumer. The process that must be passed to build a heart service unit is quite time consuming. Before a hospital, especially a government hospital, opens a cardiac surgery service unit, a proctorship process is carried out for BTKV specialists and the team at the hospital by another hospital with qualified cardiac surgery services, such as the Natioanl Cardiovascular Center Harapan Kita Hospital in Jakarta. As quoted from the latest news from the website of a regional hospital, namely RSUD dr. Iskak Tulungagung, that they needed almost 1 year to prepare for the first cardiac surgery at the Hospital.(26)

Physical Evidence. Physical evidence is an assumption or perception of the patient against everything that they can directly see and feel. Parking facilities, cleanliness of treatment rooms, uniformity of health workers while on duty are some indicators in the physical evidence factor.

## CONCLUSION

Cardiac surgery services in Indonesia still need to be improved, especially outside Jabodetabek, taking into account the high incidence and mortality from cardio and vascular disease. It must be realized that cardiac surgery services are not only for adults, but also for children, bearing in mind that the future of Indonesia depends on the hands of Indonesian children.

The strategy to be able to improve cardiac surgery services cannot be separated from the role of the government and hospitals as places for cardiac surgery services. The marketing strategy is seen from the 7Ps that have been described and improvements are needed on things that can be fixed immediately.

This cardiac surgery service is also not only developed for adults but also for children. In fact, for pediatric cardiac surgery, a team and equipment for cardiac surgery are needed, which are different from other surgical operations. However, adult cardiac surgery also requires a team and equipment for cardiac surgery that are almost the same as pediatric cardiac surgery.

So why are adult cardiac surgery services performed more compared to pediatric cardiac surgery

services? And why do many hospitals promote adult cardiac surgery services compared to pediatric cardiac surgery?

### POLICY RECOMMENDATIONS

Macro policies are related to health transformation, namely by adding a team for cardiac surgery, especially for pediatric cardiac surgery. This was driven by the central government by encouraging the Indonesian BTKV Collegium and Association to provide human resources and the government to provide other resources (equipment and the other) to expand old places or open new places for the General BTKV study program and also fellowships in adult cardiac surgery and pediatric cardiac surgery.

Providing scholarships by the central government or local government for general practitioners who will take BTKV and BTKV doctors who take fellowships and equal distribution of work places in the hospital after completing their education. The government also completes equipment and other facilities needed for heart surgery to be carried out in hospitals.

Apart from that, the central government has also solved the problem of financing which has become a major problem so that hospitals do not have the incentive to develop cardiac surgery, especially pediatric cardiac surgery. Further research needs to be done to find out whether the INA-CBG 2023 rates, especially in the field of cardiac surgery, can provide benefits to the hospital so that the hospital wants to develop this cardiac surgery. If not, the government should recalculate and issue INA-CBG rates which can provide benefits for hospitals so that hospitals can develop cardiac surgery services.

Due to the complexity of cardiac services, especially cardiac surgery, hospitals should make a policy to create a special unit under the director of medical services for general hospitals, while special heart hospitals can add service integrity. There also must be an equal distribution of information provided by all hospitals, especially through digital in this era so that the public can find out quickly and accurately about the services provided.

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