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**Konsentrasi Sistem Informasi Manajemen Kesehatan**  
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**ABSTRAK**

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**Evaluasi Sistem Informasi Manajemen Jaminan Kesehatan Nasional Indonesia Case Base Group dengan Menggunakan Metode *HOT-fit* di Rumah Sakit Umum Daerah Kabupaten Majalengka**  
**xvi + 134 halaman + 4 tabel + 14 gambar + 9 lampiran**

Sistem informasi manajemen jaminan kesehatan nasional Indonesia case based groups diharapkan mampu menunjang pelaksanaan JKN di RSUD Kab. Majalengka untuk menunjang kelancaran dalam klaim biaya pelayanan pasien, SIM JKN INA CBGs di RSUD Kab. Majalengka belum sesuai dengan PERMENKES No. 27 tahun 2014 tentang petunjuk teknis INA CBGs dan PERMENKES No.28 tahun 2014 tentang JKN. Untuk mengetahui permasalahan sistem informasi manajemen tersebut perlu dilakukan evaluasi dengan pendekatan *Human, Organization, Technology* dan *Net Benefit (HOT fit Model)*.

Jenis Penelitian adalah deskriptif kualitatif. Semua petugas yang terlibat dalam sistem Informasi tersebut sebagai subyek penelitian, (informan Utama sebanyak 7 orang dan informan triangulasi sebanyak 2 orang) Pengumpulan data melalui wawancara mendalam menggunakan pedoman wawancara. Pengolahan dan analisis data menggunakan pendekatan analisis isi (*content analysis*).

Hasil penelitian bila ditinjau dari faktor manusia, SIM INA CBGs mudah pelaksanaannya, belum ada supervisi yang terjadwal, belum ada pelatihan atau sosialisasi. Faktor organisasi belum ada dukungan dari manajemen, dengan tidak dibentuknya Tim JKN atau Tim *Casemix* yang disahkan oleh direktur, tidak adanya juklak/juknis dan prosedur kerja. teknologi dibantu dengan aplikasi SIMRS dan INA CBGs, komunikasi antar sesama anggota pelaksana JKN belum berjalan lancar, output belum digunakan secara optimal, hanya digunakan untuk penagihan biaya pasien ke BPJS.

Disarankan membentuk Tim JKN INA CBGs, membuat prosedur pelaksanaan, juklak, juknis dan uraian kerja, melaksanakan sosialisasi dan pelatihan bagi anggota Tim dan pegawai di lingkungan RSUD. Majalengka, melakukan pengawasan berkesinambungan yang terjadwal, memperbaiki mutu rekam medis, memperbaiki kecepatan dan mutu klaim, memanfaatkan data klaim, menambah jumlah tenaga dibagian tertentu yang sesuai antara pendidikan dengan kebutuhan.

Kata kunci : JKN, INA-CBGs, Evaluasi HOT-fit

Kepustakaan :53( 1989 –2014 )

## **ABSTRACT**

**Gugun Priyadi**

**Evaluation of Management Information System of National Health Insurance of Indonesia Case Base Groups using the Method of HOT-fit at Majalengka Regency Public Hospital**

**xvi + 134 pages + 4 tables + 14figures + 9appendices**

Management information system (MIS) of national health insurance (NHI) of Indonesia case base groups (INA-CBGs) is expected can support the implementation of NHI at Majalengka Regency Public Hospital to expedite claim of the patient service cost. The MIS available at the hospital was not in accordance with a Regulation of Health Minister Number: 27 Year 2014 about a technical guideline of INA-CBGs and a Regulation of Health Minister Number: 28 Year 2014 about NHI. To identify these problems, evaluation needed to be performed using Human, Organisation, Technology, and Net Benefit (HOT fit Model) approach.

This was a descriptive-qualitative study. All officers involved in the MIS were selected as research participants. Number of main informants were seven persons whereas number of informants for triangulation purpose were two persons. Data were collected by conducting indepth interview using an interview guideline and analysed using content analysis.

The results of this research showed that viewed from the human factor, the MIS of INA-CBGs was easy to implement. There was no schedule of supervision. Training and socialisation were unavailable. Regarding the factor of organisation, support from the management was unavailable. Teams of NHI and Casemix approved by the Director were not formed. A technical guideline and a work procedure were unavailable. Applications of Hospital MIS and INA-CBGs were used. There was lack of communication between members of NHI implementers. Output had not been utilised optimally. It was just used for claim to BPJS.

Teams of NHI and INA-CBGs need to be formed. A work procedure, a technical guideline, and job description need to be arranged. Socialisation and training for team members and staffs at the hospital need to be conducted. Monitoring activities need to be performed regularly. Quality of medical record needs to be improved. Speed and quality of claim need to be improved. Claim data need to be utilised. Number of staffs at a specific department need to be added in accordance with the necessities.

**Keywords** :NHI, INA-CBGs, Evaluation of HOT-fit

**Bibliography:** 53 (1989-2014)