

Strategy Development of BPJS and Non BPJS Patient Services in Bogor City General Hospital

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ABSTRACT

One of the BPJS program organizers is Bogor City Regional General Hospital with the majority of hospital patients being BPJS patients, namely 92.85% of the total Bogor City Regional General Hospital patients in 2017, but in 2018 there was a change in regulations regarding hospital referral systems so that Made experienced a decline in the number of BPJS patients which is 90.11% of the total Bogor City Regional General Hospital patients. The purpose of this study is to identify and map the existing conditions of Bogor City Regional General Hospital, identify and analyze internal and external environmental factors that become opportunities, threats, strengths and weaknesses of Bogor City Regional General Hospital using the SWOT method and formulating the right Strategic Architecture to be applied by Bogor City Regional General Hospital, Strategic architecture method was chosen because it has a flexible strategic character with a long period of time, so that if there are changes to the business or there are new challenges in the future, Bogor City Regional General Hospital can overcome them. The results of the analysis using SWOT showed that Bogor City Regional General Hospital has 8 Strengths, 4 Weaknesses, 5 Opportunities and 2 Threats. With 6 S-O (aggressive) strategies, 3 W-O (Conservative) Strategies, 1 S-T (Competitive) strategy and 1 WT (Defensive) Strategy. More specifically from the overall strategy, RSUD has 4

alternative strategies for developing BPJS patient service and 8 alternative strategies in development of non BPJS patient services. From this choice of strategy, a strategic architecture in the form of a road map for Bogor City Hospital is created that is expected to be a solution in developing business in the next 4 years.

Keywords: RSUD, Business development, Strategic Architecture and SWOT

INTRODUCTION

Health innovation carried out by the Indonesian government in the field of health is the establishment of Badan Penyelenggaraan Jaminan Sosial (BPJS) on January 1, 2014, BPJS itself adheres to the concept of Universal Health Coverage (UHC), a concept that forces participants to follow a tiered referral system to obtain comprehensive health services. , cheap, affordable, but quality (Primasari, 2015). One of the hospitals that helped organize the BPJS Program is the Bogor City Regional General Hospital which is the only regional general hospital owned by the Bogor City government (RSUD, 2017), with the title of a regional-owned hospital and with fairly complete facilities Bogor City Regional General Hospital can attract BPJS participant patients, this is evidenced by the number of BPJS patients more than the number of non BPJS patients in Bogor City Regional General Hospital, this can be seen in table 1.

Table 1. Number of patients in Bogor City General Hospital in 2017-2018

NO	INFORMATION	Year 2017			Year 2018		
		NON BPJS	BPJS	Total	NON BPJS	BPJS	Total
1	Emergency	7.472	41.853	49.325	4.853	25.650	30.503
2	Outpatient	13.660	239.021	252.681	17.824	175.219	193.043
3	Inpatient	2.105	20.700	22.805	1.593	20.387	21.980
Total		23.237	301.574	324.811	24.270	221.256	245.526
Percentage (%)		7,15	92,85	100	9,89	90,11	100

Source: LKPJ RSUD Kota Bogor Tahun 2017 & LKPJ RSUD Kota Bogor Tahun 2018

From table 1 it can be seen that in 2017 amounted to (92.85%) patients of Bogor City General Hospital are BPJS patients and amounted to (7.15%) were non BPJS patients. Whereas in 2018 BPJS patients in Bogor City General Hospital were (90.11%) and non BPJS patients were (9.89%). The significant difference between BPJS and Non BPJS patients in the Bogor City Regional General Hospital is one of the proofs that BPJS patients are the largest revenue earner of the Bogor City Regional General Hospital.

In 2018 there was a decrease in patients at the Bogor City General Hospital, this decline occurred after the stipulation of the Social Security Organizing Agency Regulation No. 1 of 2018 concerning Emergency Evaluation and Procedures for Reimbursing Emergency Services which governs the BPJS patient service process, System Confirmation This tiered referral has an impact on the reduction in the number of patients visited by the Bogor City General Hospital in 2018, because the Bogor City Regional Hospital is a Type B Hospital, thus making the Bogor City Regional Hospital have to wait for BPJS patients with a severity level higher or not able to be handled by health facilities I (puskesmas) and Basabih type C Hospital (2017), to be clearer about the decline in patients of Bogor City General Hospital, it can be seen in table 1.

The decrease in patients shows that the strategy adopted by Bogor City General Hospital is still stiff, focusing only on BPJS patients, when there is a change in BPJS patient referral policy, the Bogor City Regional General Hospital cannot overcome the problem and remains focused on carrying out a strategy that there, so that the

Bogor City Regional General Hospital requires a new strategy that is more sustainable and flexible that does not focus on BPJS patients only, but also on non BPJS patients, so that if a similar problem occurs the Bogor City Regional General Hospital can deal with it. To support this, the concept of strategic architecture is a suitable concept for use by the Bogor City Regional General Hospital.

METHOD

Research Location and Time

The study was conducted at the Bogor City Regional General Hospital, Jl. Sumeru No.120, Menteng, Bogor Baru. Bogor city. The research data will be collected in the period May - June 2019.

Types and Data Sources

Types and sources of data used in this study consisted of:

1. The data used in this research are primary data and secondary data, primary data itself is a data source that directly provides data to data collectors Sugiyono (2017), for primary data itself is taken by way of discussion and in-depth interviews (In-depth interview) The Purposive Interview method is sampling by deliberate and planned selection of respondents
2. Secondary data are research resources obtained indirectly through intermediary media (obtained and recorded by other parties) sugiyono (2014). Company Performance Reports, Company Strategic Plan, and other secondary data can also be obtained from documentation data, archives, literature studies, books, articles from print and internet media and so on.

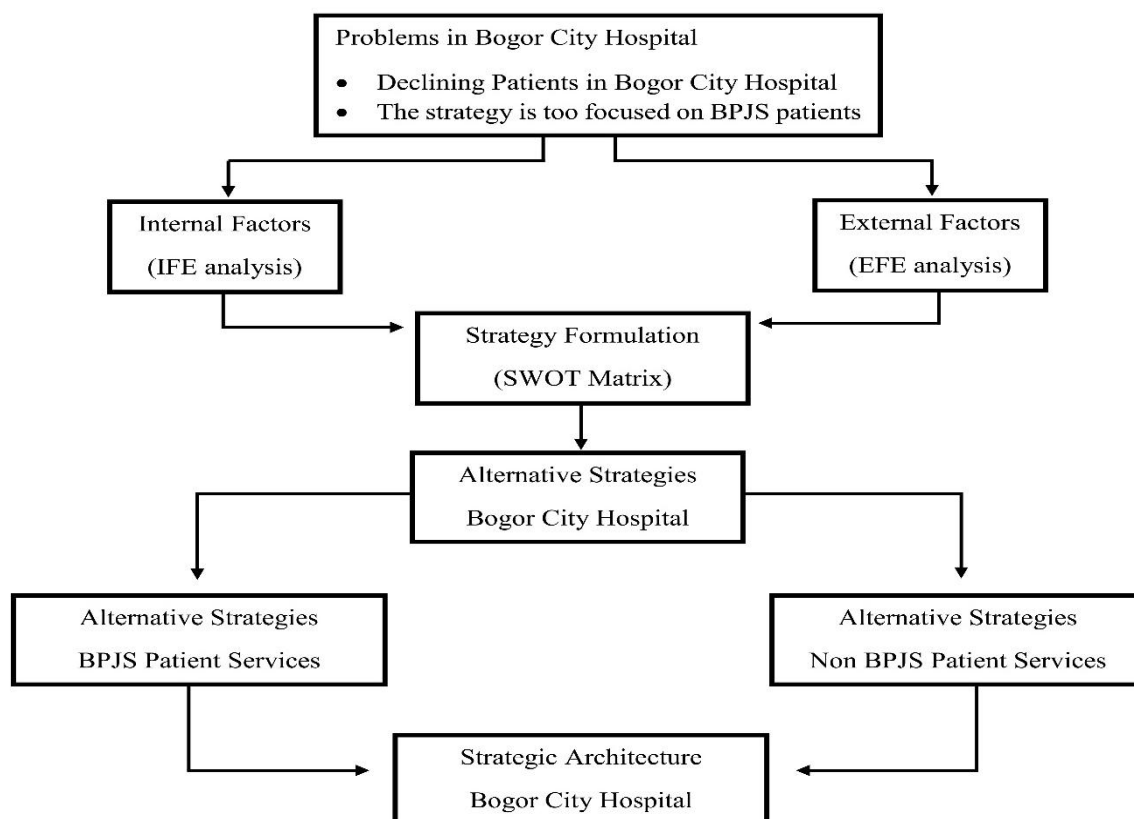


Figure 1: Research Thinking Framework

RESULTS

Internal Environmental Analysis

The internal environment for the Bogor City Regional General Hospital is to include factors within the company that are relevant and influential for the Bogor City Regional General Hospital Business. By using the concept of Focus Group Discussion (FGD)

with internal parties, 8 factors are included, including 4 strengths and weaknesses.

Matrix Internal Factors Evaluation (IFE)

Internal factors that have been obtained are then arranged into a matrix IFE table by listing the weights and ratings for each factor in accordance with the results of a survey conducted by researchers, for more details, it can be seen in Table 2.

Table 2 Internal Factor Evaluation Matrix (IFE) of Bogor City General Hospital

No	Factor	Weight	Rating	Weight X Rating
Strength				
1	Type of complete health services	0.088	4	0.350
2	The High Number of BPJS Patients in Bogor City General Hospital	0.084	4	0.334
3	The number of Registration spots that you have	0.079	3	0.237
4	The policy for patients does not differentiate between BPJS and non BPJS	0.087	3	0.261
5	Complete facilities of Bogor City General Hospital infrastructure	0.089	4	0.358
6	The quality of human resources is always above 97% of KPI	0.093	3	0.278
7	Complete Pharmacy Facilities	0.090	3	0.270
8	Hospital Management Information System (SIMRS) Section	0.084	4	0.337
Weakness				
1	Doctor's arrival is not on time	0.092	2	0.184
2	Exterior and Interior of the Hospital Area that looks old	0.071	2	0.142
3	Parking spaces that are not yet proportional to the number of patients	0.072	2	0.144
4	Unavailable Marketing Section at Bogor City Regional General Hospital	0.071	2	0.142
Total		1.000		3.039

External Environmental Analysis

External factors are factors outside the company that are relevant and influential for the Bogor City Regional General Hospital Business. By using the FGD system, 5 factors were

included including opportunities and 6 factors including threats to the Bogor City Regional General Hospital.

Matrix External Factors Evaluation (EFE)

Based on external factors that have been obtained, then arranged into a matrix EFE table by listing the weights and ratings for each factor in accordance with the results of a survey conducted by researchers, for more details, it can be seen in Table 3.

Table 3 Matrix of External Factors Evaluation (EFE) of Bogor City Regional General Hospital.

No	Faktor	Bobot	Rating	Bobot X Rating
	Opportunity			
1	The Second Mission of the City of Bogor concerning Bogor City Public Health	0.151	4	0.604
2	Bogor City Regional Budget funds which can still help the construction of Bogor City Regional General Hospital	0.147	4	0.587
3	E-catalog system that helps the purchasing process needs of the Bogor City Regional General Hospital	0.152	3	0.456
4	Have a great opportunity to get health assistance funds from the province / country because it is the only Hospital in Bogor	0.121	3	0.364
5	Operational Cooperation Regulation (KSO) of Bogor City Regional General Hospital with third parties	0.152	4	0.609
	Threat			
1	Outside parties who often take advantage of business processes conducted by the Bogor City Regional General Hospital	0.120	2	0.240
2	BPJS Regulations regarding BPJS Patient Referral Systems which must be according to the Type of Hospital	0.157	2	0.313
Total		1.000		3.173

IE Matrix Analysis

EFE value and IFE value in internal and external factor analysis of Bogor City General Hospital aims to see the parameters that become internal strength and external flow (Rangkuti, 2001), seen from the results of the EFE matrix which is 3.173 and IFE which is 3.039 when combined into a Matrix IE produces values (3,173; 3,039) that are in cell I (Figure 2). The position of the Bogor City Regional General Hospital in cell I shows the direction of the grand strategy of the Bogor City Regional General Hospital is the Grow and Build Strategy, so the strategy recommendations that can be given to the Bogor City Regional General Hospital are intensive strategies (market penetration, market development and product development) or integrative (backward integration, forward integration and horizontal integration).

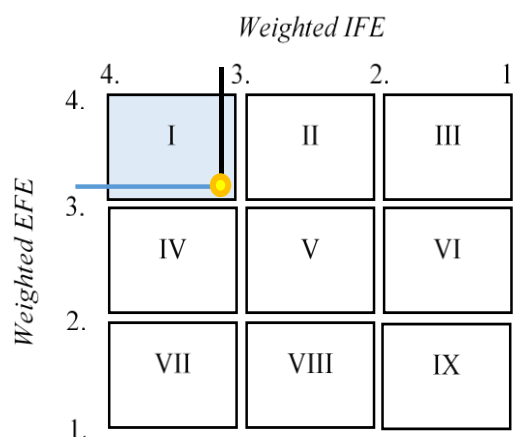


Figure 2 Position of the Bogor City Regional General Hospital on the Internal-extrenal matrix

SWOT Matrix Analysis

The results of the SWOT matrix analysis of the Bogor City General Hospital showed that based on the existing strategies, alternative strategies were divided into 6 SO strategies, 3 WO strategies, 1 ST strategy and 1 WT strategy. each strategy has been considered to be implemented by the Bogor City Regional General Hospital by taking into account the current conditions and potential of company resources.

Table 4 SWOT Matrix of Bogor City General Hospital

Internal	Strenght	Weaknes
	<ol style="list-style-type: none"> 1. Type of complete health services 2. The High Number of BPJS Patients in Bogor City Hospital 3. Number of qualified registration places 4. The policy for patients does not differentiate between BPJS and non BPJS 5. Complete hospital infrastructure 6. The quality of human resources is always above 97% of KPIs 7. Complete Pharmacy Facilities 8. Section of Hospital Management Information System (SIMRS) 	<ol style="list-style-type: none"> 1. Doctor's arrival is not on time 2. Exterior and Interior of the Hospital Area that looks old 3. Parking lots that are not proportional to the number of patients 4. The unavailability of the Marketing Section at Bogor City Hospital
External	Strategy SO	Strategy WO
Opportunities	Strategy ST	Strategy WT
<ol style="list-style-type: none"> 1. The Second Mission of Bogor City on Public Health in the City of Bogor 2. Bogor City budget funds that can still help the construction of Bogor City Hospital 3. E-catalog system that helps the purchasing process needs of Bogor City Hospital 4. Have a great opportunity to get health assistance funds from the province / country because it is the Only Hospital in Bogor City 5. Operational Cooperation Regulation (KSO) of Bogor City Hospital with third parties 	<ol style="list-style-type: none"> 1. Revitalization / Renovation of Bogor City Hospital Building (S1, S2, S3, S5, S7, O1, O2, O3) 2. Recruiting potential Ko-assiten (Ko-as) doctors who have practiced in Bogor City Hospital (S6, O4) 3. Proposing the creation of a Bogor City Regulation regarding referral patients to Bogor City Hospital (S2, O2) 4. Collaborating with third parties to create new types of Health and Public services in Bogor City Hospital (S1, S5, S8, O5) 5. Making policies along with special facilities for general / non BPJS patient care (S3, S4, S5, S6, S7, S8, O, O5) 6. Create a special application for the registration of Bogor City Hospital (S3, S8, O5) 	<ol style="list-style-type: none"> 1. Create an attendance system for doctors (W1, O4, O5) 2. Building a parking lot with an electronic parking system (W3, O2, O5) 3. Creating a marketing department for Bogor City Hospital (W4, O2)
<ol style="list-style-type: none"> 1. Outside parties who often take advantage of business processes carried out by RSUD 2. BPJS Regulations regarding BPJS Patient Referral Systems which must be in accordance with the Type of 	<ol style="list-style-type: none"> 1. Creating a Special Application for Operational Cooperation (KSO) (S5, S6, S8, T1) 2. Conduct Operational Cooperation (KSO) so that both parties get benefits (S1, T1) 	<ol style="list-style-type: none"> 1. Collaborating with third parties regarding the marketing of Bogor City Hospital (W4, T1)

DISCUSSION

Strategic Architecture

Strategies for business growth in Bogor City Hospital that have been selected in the SWOT analysis stage are then

mapped into a Road Map in a strategic architectural design. The design of the strategic architecture is depicted with the X-axis and Y-axis. The X-axis shows the time for each stage in the holding period and the

Y-axis describes the program that will be implemented. Strategic architectural design is needed to give priority and strategic stages to achieve the goals and objectives to be achieved by the company in the next few years (Jourdan 2018). In this case the goal set by Bogor City Hospital is to become the best regional-owned Hospital by providing quality health services. With the objectives to be achieved consist of:

1. Increasing BPJS and Non BPJS Patients Every Year

Namely the increase in patients due to the addition of the number of beds, the number of types of health services, a professional marketing team, along with complete facilities and infrastructure.

2. Become an independent BLUD Hospital
Namely the Bogor City Hospital has not burdened the City of Bogor Government, with all business activities carried out by the Hospital

Strategic architecture also provides an overview of the challenges facing Bogor City Hospital. These challenges are:

1. Changes to the BPJS referral system
2. Changes in the price of BPJS contributions
3. Growth in the number of hospitals in Bogor City
4. Changes in Government policy regarding health
5. The advancement of health technology is increasingly rapid

In the strategic architecture design of Bogor City Hospital, the chosen strategies are grouped into two categories, namely routine and stepwise strategies. The work program that is carried out routinely is chosen by considering the capability and needs of Bogor City Hospital for the output

of the program that is needed on an ongoing basis.

The strategy stages from 2019 to 2022 Bogor City Hospital in the form of a strategy road map can be seen in Figure 3. In the road map the routine strategy consists of:

1. Collaborating with third parties to create new types of health and public services in Bogor City Hospital (S1, S5, S8, O5)
2. Recruit potential co-assistant doctors who have practiced at Bogor City Hospital (S6, O4)
3. Creating an absence system for doctors (W1, O4, O5)
4. Conduct Operational Cooperation (KSO) so that both parties get benefits (S1, T1)

The phased strategy consists of:

1. Revitalization / renovation of Bogor City Hospital building (S1, S2, S3, S5, S7, O1, O2, O3)
2. Proposing the creation of a Bogor City Regulation regarding referral patients to Bogor City Hospital (S2, O2)
3. Making policies along with special facilities for general / non BPJS patient services (S3, S4, S5, S6, S7, S8, O4, O5)
4. Create a special application for the registration of Bogor City Hospital (S3, S8, O5)
5. Build parking lots with electronic parking systems (W3, O2, O5)
6. Creating a marketing section for Bogor City Hospital (W4, O2)
7. Collaborating with third parties regarding the marketing of Bogor City Hospital (W4, T1)
8. Create a special application for Operational Cooperation (KSO) (S5, S6, S8, S1)

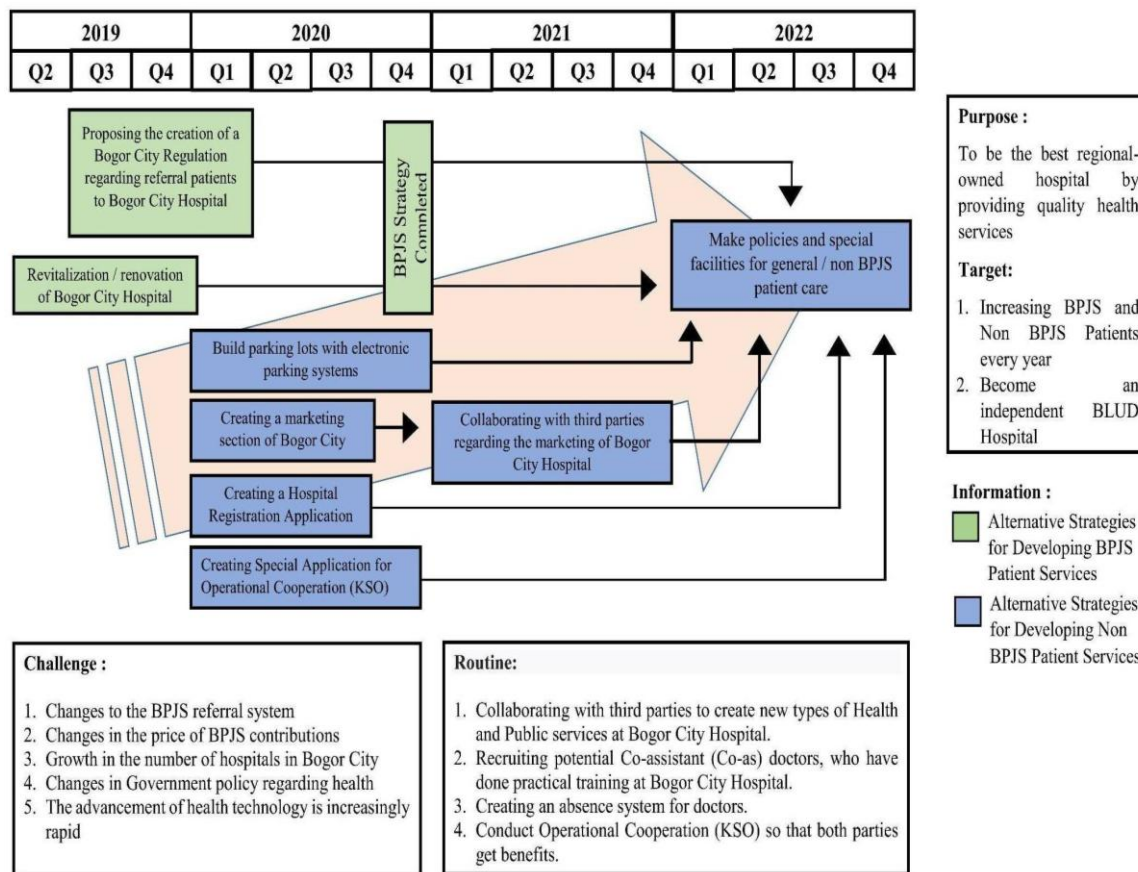


Figure 5 Strategic Architecture Road Map of Bogor City Hospital

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

In this study, the conclusion is the formulation of answers to the research objectives. The conclusions of this study are as follows:

1. The SWOT analysis shows that Bogor City Hospital has 8 Strengths, 4 Weaknesses, 5 Opportunities and 2 Threats. Then in IE Analysis positioned Bogor City Hospital on cell I which showed the Grand Strategy Grow & Build with a choice of intensive strategies with alternative strategies as: 1) Revitalization / Renovation of Bogor City Hospital Building; 2) build electronic parking lots; 3) create a marketing section of Bogor City Hospital; 4) make a Registration Application; 5) make policies along with special facilities for general / non BPJS patient care, while for the Integrated Strategy have alternative strategies as

follows: 1) Cooperate with third parties to create new types of Health and Public services in Bogor City Hospital; 2) make a special application Operational Cooperation (KSO). In cell I position it shows that Bogor City Hospital still has many business opportunities that can still be developed.

2. In accordance with the position of RSUD in cell I with the Grand Strategy Grow & Build, the choice of strategies made emphasizes the SO (Strengths-Opportunities) strategy that creates 6 SO strategies (aggressive), 3 WO Strategies (Conservative), 1 ST strategy (Competitive)) and 1 WT (Defensive) Strategy. More specific than the overall strategy of RSUD has 4 alternative strategies for developing BPJS patient service and 7 alternative strategies in developing non BPJS patient services, both of which are expected to help hospitals to achieve their company's goals in the future

3. Strategic Architecture for Bogor City Hospital is illustrated through the strategic architecture road map of Bogor City Hospital in 2019-2022, which illustrates that Bogor City Hospital has 4 Routine Strategies and 8 Routine Strategies, on the strategic architecture road map it also lists 5 challenges, objectives and targets that can be considered by Bogor City Hospital when implementing the strategies that have been described on the road map.

Recommendations

The strategy depicted in the architecture of the Bogor City Hospital Road Map is a strategy that is made by looking at the current condition of the company, and considering the industry foresight in the future. However, it is still recommended for RSUD management to always evaluate and supervise the conditions of the external and internal environment, so that the RSUD Bogor City can still implement strategies that are in accordance with the existing environmental conditions.

To increase company attractiveness or increase USP (Unique Selling Proposition) Bogor City Hospital can add herbal medicine services, by collaborating with professional parties who develop herbal remedies, for example, the Bogor Institute of Agriculture.

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