Evaluation of the Economic Impact of Implementing National Health Insurance (JKN) on Hospitals at RSUD Tenriawaru Kab. bone

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ABSTRACT

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The National Health Insurance Program (JKN) through the Social Security Administering Body has been running since January 1 2014, the Tenriawaru Regional General Hospital in Bone Regency is one of the hospitals under the auspices of the local government that works closely with BPJS Kesehatan. The Bone Regency Government has registered 237,381 people into the National Health Insurance (JKN) program. In general, this study aims to analyze the economic impact of the implementation of the National Health Insurance (JKN) on hospital income, hospital financing and financial compensation for hospital employees at Tenriawaru Hospital, Kab, Bone.

This study uses a qualitative descriptive research method that aims to obtain an in-depth evaluation study on evaluating the economic impact of the implementation of the National Health Insurance (JKN) program on hospitals. The informants in this study totaled 5 people consisting of the Head of Finance Subdivision, the JKN case mix officer, the Head of Service Subdivision, the Head of HR Subdivision and the Head of Public Relations Subsection.

The results of the study show that the implementation of the National Health Insurance (JKN) program has an impact on hospital income. The implementation of JKN provides great benefits for the hospital. the implementation of the National Health Insurance (JKN) program also has an impact on hospital financing, JKN covers hospital operational costs, JKN claims have their respective portions for hospital human resources, drug resources and BHP in hospitals. The implementation of the National Health Insurance (JKN) program has no impact on the financial compensation of employees in hospitals, salaries, bonuses and semi-annual incentives that employees get have no effect on the implementation of JKN in service hospitals that get a portion each for the operational needs of the hospital not for employee financial compensation.

Key words: Financial, JKN, Compensation, Income, Financing.

INTRODUCTION

In 2011 the government passed Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS). The law contains the implementation of universal social security for Indonesian citizens. It aims to provide national health services that are more equitable and accessible to all groups, and help the people, by using the principle of mutual help or mutual cooperation, all will be helped by the presence The National Health Insurance (JKN) is sheltered by government agencies through the National Health Insurance Administration Agency (BPJS).¹

National Health Insurance (JKN) participation in Indonesia is an obligation for citizens according to the mandate of Law Number 40 of 2004 concerning the National Social Security System and Law Number 24 of 2011 concerning Social Security Administering Bodies. As of the end of June 2020, there were 221,021,174 JKN participants.²

The National Health Insurance Program (JKN) through the Social Security Administering Body has been running since January 1 2014. Since the JKN Program was implemented a few years ago, the Government has made efforts to realize health insurance for all Indonesians or commonly known as universal health coverage (Universal Health Coverage). UHC is the hope and target that the state (in this case the government as the implementer of the policy) wants to achieve. This

aims to guarantee health service facilities according to the basic health needs of the community.³

As the implementation of this program progresses, as with other new programs or initiatives, of course various challenges arise and require immediate handling, whether they are internal challenges or external opposition. There are challenges with various regulations or regulations related to JKN that arise at the national, provincial and also district/ city levels. One of the challenges of the JKN program is regulations that are still changing and health care centers that are not evenly distributed (Teresa, 2021).

However, the state's economic/financial situation has not been paid attention to in the implementation of the JKN guarantee program. APBN capacity is limited, because tax collection is still low. The APBN should be focused first on the poor and underprivileged. The addition to the APBN should be to expand the network of health facilities in areas that do not have strong fiscal capabilities. Additional APBN for BPJS Health needs to be done carefully. Don't let the additions be given to cover gaps in the segment of capable participants who have greater access (PBPU).

Impact can be defined as a collision between two objects that have a very strong influence, bringing about negative or positive consequences, thereby causing a significant increase in the momentum (pasa) of the system that experiences the collision.

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The development of a program since planning aims to improve socioeconomic, so that theoretically the impact of a program must be positive for the local, provincial, national or international community. However, in reality what we encounter is not always the case. Provincial and national level institutions have had positive impacts but local communities have had little or no positive impact. (Suratmo, 2013).

The JKN funding deficit has not been monitored in detail, especially the investigation into the causes of the deficit based on membership segments and premium adequacy of each segment. Utilization of health facilities between participant segments and between regions is also still unequal. Adverse selection in the PBPU group causes high costs, and is the main cause of the deficit in JKN financing. The situation during these 5 years has not been transparent and is contrary to the principle that should exist (mutual cooperation). As a result, it is difficult to find solutions to deficit problems.⁴ Therefore, it is necessary to evaluate the economic impact of implementing the JKN program in hospitals in terms of service rates, claim payments and loyalty aspects.

Economic impact is a strong influence on economic activity either directly or indirectly. This impact affects every side of the economy in terms of sales, income, price increases and demand for goods. The measurement of the economic impact consists of three impacts, namely direct, indirect and secondary impacts.⁵

The Bone Regency Government has registered 237,381 people in the National Health Insurance (JKN) program and paid their dues. This figure is the largest number of people in the entire South Sulawesi Province registered by the Regional Government for the JKN Program. Tenriawaru Hospital is a referral hospital located in Bone Regency, Tenriawaru Hospital is a hospital owned by the Bone Regency government which is located on Jln DR. Wahidin Sudirohusodo Watampone, Macanang Village, West Tanete Riattang District. This hospital was built in 1985. Tenriawaru Hospital has received recognition from KARS (Hospital Accreditation Committee).

Based on these statements, it is necessary to carry out an Impact Evaluation of the implementation of the National Health Insurance program at the Tenriawaru Regional General Hospital, Bone Regency in terms of the aspects of economic impact, organizational impact and impact on social institutions and systems. So the authors are interested in researching related to "Evaluation of economic impact based on the income aspect of the implementation of the JKN program at Tenriawaru Hospital, Bone Regency".

METHODS

This study uses a qualitative research method with a qualitative descriptive approach, with secondary data collection techniques, secondary data, namely data collected using various sources such as journals, articles, news, books and institutional administration documents, data analysis, namely data reduction with the aim of to summarize or conclude important information from various sources so that it is easy to understand.⁶

Qualitative research methods are used to obtain strong data, in-depth information about the issues or problems to be solved.⁷ This study aims to obtain in-depth information regarding the evaluation of the economic impact based on the income aspect of the implementation of the National Health Insurance at Tenriawaru General Hospital, Bone Regency.

RESULTS

The research conducted by the researcher succeeded in conducting interviews with the head of finance and accounting sub-division of Tenriawaru Hospital, where the head of finance and accounting subdivision of Tenriawaru Hospital was a key informant in this study while those included as supporting informants were the JKN officer in charge of Case mix, and as for other informants, namely the Head of sub-division services, Head of Public Relations and Head of HR.

Income

This research discusses the impact of the implementation of the National Health Insurance on hospital income from Tenriawaru General Hospital. From the income aspect, the dimensions referred to are the contribution of JKN to hospital investment costs, profit targets, hospital development costs. Here it is also meant how the impact of the implementation of the National Health Insurance (JKN) has an impact on income in hospitals.

Based on in-depth interviews conducted at Tenriawaru Hospital, what is the impact of the implementation of National Health Insurance on income at the Hospital, namely from investment costs, profit targets, development costs incurred by the head of finance and accounting subdivision as well as the form of information and services provided by the service sector in Tenriawaru General Hospital turned out to be very influential on income in Tenriawaru General Hospital.

As for the results of interviews with informants regarding investment costs, development costs, there is no significant effect between the implementation of the National Health Insurance and hospital income from the aspect of investment costs and development costs on hospital income in terms of service rates at Tenriawaru Hospital, the researchers obtained the following answers:

"Investments, for example, are tools, in the long term, we are government BLUDs, usually investing in medical devices has a value of up to billions and tens of billions. Even the building isn't from JKN, the funds are from regional subsidies, the funds are different, JKN covers operational costs for the hospital, it's not an investment." The main main investment is from the regional government subsidy APBD." (RN, 37 Years July 6, 2023)

"In terms of development, the investment is like before, the investment includes medical equipment, including the development of the building, JKN doesn't really have a significant effect because if the costs are large, the large-scale hospital development will come from local government subsidies" (RN, 37 years July 6, 2023)

Unlike what was conveyed by other supporting informants and their statements

"Yes, it depends on income. In fact, if there is a lot of income, if there are a lot of droplets, we will be able to develop the facilities in the hospital better." (SF, 37 Years July 6, 2023)

There is an influence of the implementation of JKN in Tenriawaru General Hospital on hospital income in terms of profit targets. The implementation of JKN has an impact on aspects of service rates at Tenriawaru Hospital.

"In general, it is based on hospital service rates. First of all, patients make it easier for patients to come to the hospital in terms of costs, automating patients who come, they don't need to think before there is JKN, private patients, there are still many patients, maybe in general, not just at home. It hurts that I think and even think twice about going to the hospital because of how much to pay, so once JKN is in place, it makes it easier for patients to come for treatment, they don't need to worry about how much they pay, the effect on going to the hospital is that the higher our visits from JKN participants automatically our income will be higher" (RN, 37 Years July 6, 2023)

"The target is high profit if JKN is more than 50% and even 70-80% of the hospital's revenue comes from JKN" (RN, 37 Years July 6, 2023)

In line with the information provided by other informants, the statement follows

Table 1: Hospital income from BPJS 2014-2022.	
Period	Value
2014	29,112,049,242
2015	34,401,188,113
2016	55,175,323,171
2017	61,648,485,618
2018	61,803,881,671
2019	72,674,424,006
2020	78,106,061,285
2021	52,959,581,637
2022	64,458,275,762

Data Primer, 2022

"From the automatic economic impact with the JKN collaboration, is it better than no cooperation at all? (FI, 36 Years 6 July 2023)

"In my opinion, the impact of this is that the income at the hospital is quite helpful, even though we know that there is a tariff, it's called cross-subsidy, so there is mutual cover for each other.

The existing packages, although there are still certain packages, if we look at each of them, they are detrimental, but we have the name of this package, it's called cross subsidies, so from an evaluation point of view, it's still useful for the hospital's income, if from a funding point of view, it's good. right now, especially now that JKN is per March there is an increase in rates so it can really add to the hospital's income" (SF, 37 Years July 6, 2023)

"Of course, big" (FI, 36 Years 6 July 2023)

"Yes, there is" (BR, 50 Years 6 July 2023)

From the answers above which consist of several questions to gather information from informants regarding the economic impact of the implementation of the National Health Insurance based on the revenue aspect of hospital income, it can be concluded that hospital income is greatly influenced by the implementation of the National Health Insurance (JKN) in hospitals.

However, in terms of investment costs and development costs, the National Health Insurance funds are not very influential because long-term investments, which are large in number, come from APBD funds while the National Health Insurance (JKN) funds cover hospital operating costs, but the more participants the National Health Insurance (JKN), the more Hospital income is getting bigger so that hospitals can develop facilities and infrastructure at the hospital.

As for the benefits of implementing the National Health Insurance (JKN) in hospitals, it is very profitable, even according to the information received by key informants, it is that the benefits you get at the hospital are quite high, more than 50%, it can even be 70-80% of the hospital's income. from JKN.

So that the implementation of the National Health Insurance (JKN) in hospitals greatly impacts the hospital's income from. the implementation of JKN has a very large influence on income in hospitals, this can be proven by data obtained from hospitals, these data are presented in table form.

Table 2.3 shows that hospital income from BPJS has increased almost every year, so it can be concluded that the implementation of JKN has had a big impact on income at the Tenriawaru Regional General Hospital, Bone Regency.

Financing

Hospital financing from the implementation of National Health Insurance (JKN) is influenced by Health Insurance Contributions, the Contribution in question is the amount of money paid regularly by Participants, Employers, and/or the Government for the Health Insurance program (Article 16, Presidential Decree No. 12/ 2013 concerning Health Insurance).

Payment of contributions: For PBI Participants, contributions are paid by the Government, for Wage Receiving Worker Participants, contributions are paid by the Employer and Worker, for Non-Wage Receiving Worker Participants and Non-Working Participants the contribution is paid by the relevant Participant, the amount of the National Health Insurance Contribution is determined through Regulations President and periodically reviewed according to social, economic developments and basic needs for a decent life. on the implementation of the National Health Insurance (JKN) in Tenriawaru Hospital.

Based on the results of in-depth interviews, the implementation of National Health Insurance (JKN) in hospitals always pays claims at hospitals on time. This claims process is very important for hospitals, as reimbursement for insurance patients who have received treatment. Facilities that collaborate with BPJS Health must be able to submit claims every month on a regular basis no later than the 10th of the following month, accompanied by the required documents that must be completed according to BPJS Health verification procedures. This variable aims to find out how JKN affects hospital income in terms of claim payments

"JKN pays hospitals. So far, we have BPJS. If we quickly submit a claim to them, they will also quickly verify it because here there is a range, for example, it looks like the 10-15th or the following month, if we have submitted it, it could be 10-15 days. The results will be out. Verification from BPJS that the funds have been released" (RN, 37 Years July 6, 2023) "So if you say it's smooth, it's considered smooth" (RN, 37 Years July 6, 2023)

"Claim payments, as far as we feel, are very smooth, in the sense that as long as the conditions of JKN are met, for example, this means claims per patient, if for example there has been a complete visitor examination for a month, that's when and other things they pay, so if we Thank God, I've never been in arrears, for example up to 3 months, so far it's been smooth." (FI, 36 Years 6 July 2023).

"Just smooth and on time" (SF, 37 Years July 6, 2023)

The results of interviews obtained by key informants regarding the economic impact of JKN implementation on financing in terms of HR financing, Medicine Source Financing and BHP financing at Tenriawaru Regional Hospital are as follows

"Yes, it has a big impact, almost the majority of hospital operations are covered by JKN. JKN claims have their own portion, for example in one total month the claim has a portion for the patient's medication use, as well as the use of BHP as well as the actions taken. by medical personnel and another portion for hospital facilities services"

(FI, 36 Years 6 July 2023)

From the answers above which consist of several questions, it can be concluded that information from informants about the implementation of JKN has a big impact on financing at hospitals because claims paid by JKN have a big impact on income at Tenriawaru Regional Hospital and it can also be seen that payment of claims by JKN to hospitals depends on from the timeliness of the hospital in verifying the requirements of JKN. Payment of claims from JKN to hospitals is very smooth and on time so it can be concluded that the implementation of JKN in hospitals has a big impact on hospital income in terms of claim payments.

Financial Compensation

The financial compensation referred to is the impact of implementing the JKN program on the financial compensation of employees at Tenriawaru Hospital. Financial compensation can be given directly or indirectly. Financial compensation in the form of salary, wages, bonuses and semester work incentives. This variable aims to determine the effect of the implementation of National Health Insurance (JKN) on the financial compensation of hospital employees. Where the implementation of the National Health Insurance (JKN) program has the benefit of helping provide profit prospects for hospitals, especially for hospital employees themselves.

The following is information obtained from the statements of informants regarding the dimensions of salary, bonuses and semester incentives for employees of Tenriawaru Hospital Kab. Bone, with the implementation of National Health Insurance (JKN), there is no significant effect on the financial compensation of employees at RSUD Tenriawaru Kab. Bone. To see the effect of JKN implementation on employee financial compensation, researchers conducted interviews regarding their views regarding financial compensation with the JKN program.

"If it is related to financial compensation in terms of salary, there is no influence, it's just that it is said that facilities and infrastructure services are not solely from JKN, so if it is related to the influence of JKN on employee salaries or bonuses, there is no influence."

(FI, 36 Years 6 July 2023)

"If we look at the bones, we can see that many of the patients are poor, but of these patients, it cannot be denied that many do not have BPJS JKN and we know that patients like this end up in the hospital whether they want to or not. to be served, it becomes a separate problem for the hospital because when you enter the hospital, there are operational funds, there are drugs, what's wrong. It has an effect that the more JKN users, the higher the services we receive."

(FI, 36 Years 6 July 2023)

"Yes, speaking of their loyalty, we are trying to keep the cooperation going. The operational source cannot be denied, the funding source is from BPJS because the operational source is for services, although in general we are still trying to equalize all services."

(BR, 50 Years 6 july 2023)

"If he can't afford to go to the private sector, if he doesn't have JKN, who will guarantee that? So in fact, we really hope that for patients who don't have BPJS, they all have BPJS so that they all have health insurance. If they have health insurance, the service will be there too. So, it's more comfortable, right? It's more so that patients don't worry, but if for example the long treatment days are operational funds, how do surgical patients have no guarantors? That's often a problem if Bone has UHC, so all the patients who come in are already Bone residents. they register using their family card, it's automatically covered by JKN and the government"

(FI, 36 years 6 July 2023)

Supported by key informant statements, namely as follows

"As for the patients themselves, their loyalty is to use JKN, because it's free, so they don't have to worry anymore about going to the hospital. I wonder how much I'll pay if I follow the rates without JKN. Automatically the costs won't be as small as the fees they pay, you know, even JKN. it's free, they don't have to pay anything if they use JKN, not from the hospital, from the local government. Overall, we at the hospital are those JKN participants who choose us for treatment, but for them to use JKN, that's the strategy of the regional government, in this case the health service. "How they educate patients to activate BPJS has an impact because we are here, there is an impact on employee welfare, the more patients we serve, automatically the more services we will receive from the results."

(RN, 36 years July 6, 2023)

Based on in-depth interviews conducted at Tenriawaru Hospital, what is the economic impact of the implementation of National Health Insurance (JKN) on hospitals at Tenriawaru District Hospital? Bone, namely the implementation of JKN on employee financial compensation does not have a significant effect in Tenriawaru Hospital, Kab. Bone.

Through the information of the key informant, in this case represented by the head of the finance and accounting sub-division, the hospital's highest income is from the JKN collaboration with the hospital which impacts the services received by the employees of the Tenriawaru Regency Regional Hospital. Bone, however, has no impact on employee salaries, allowances or bonuses because the services obtained have their respective portions for the hospital's operational needs, not only for employee financial compensation. As for supporting informants, namely JKN officers, it can be concluded that the implementation of JKN does not have a significant effect on the financial compensation of hospital employees. Of course, there are differences between hospitals that collaborate with JKN and hospitals that do not collaborate with JKN, but the results from JKN are for hospital operations, not just for employee financial compensation. Based on information from informants, draw the conclusion that the implementation of JKN has no effect on employee financial compensation. Tenriawaru District Hospital Bone.

DISCUSSION

The implementation of JKN in hospitals of course has an impact on hospitals, such as the economic impact from the revenue aspect. To find out more about the research results obtained from the research informant's statement data and after data reduction and data presentation, the researcher then discussed the research results by analyzing the data and comparing them with theories and previous research results regarding BPJS Health. Based on Stynes' (2013) theory, the economic impact is influenced by income, financing and financial compensation.

Income

Hospitals are expected to be able to provide quality health services to the community. Adequate financial support is needed to carry out operational activities and hospital development. However, many hospitals are still faced with financing problems. The challenge for hospital managers is to search for sources of funds that can be used to meet hospital costs. Every hospital must have sound financial planning, including setting appropriate rates. Apart from cost analysis through accurate unit cost calculations, tariff determination should also take into account the public's ability and willingness to pay, competitors' tariffs and the objectives of the tariff setting itself.

The implementation of JKN has had an impact on hospitals from the increasing income of patients using JKN who seek treatment at Tenriawaru Regional Hospital, the greater the income earned by the hospital, the key informants in this research stated that the profit target of collaborating with BPJS reaches 70-80% in line with research from (Yohana 2021)⁸ Since the introduction of the National Health Insurance (JKN) program in hospitals in mid-2014, there has been a surge in patient visits, especially outpatients. Hospital rates are an aspect that is highly paid attention to by private hospitals as well as by government-owned hospitals.

This research is also in line with research from Wijayani (2018)⁶ which stated that the increase in service revenue occurred due to the drastic increase in visitors in 2014. Based on informants, the majority of patients at the Ministry of Health's Vertical Hospital were JKN patients. The increase in patients at type A hospitals occurs because the referral system is not yet effective. As stated by Kompasiana (2016), in the

first year of JKN implementation or what is often called the transition period, the patient referral system was considered less effective and efficient, resulting in a buildup of patients in large hospitals.

This research is also in line with research from (Hardiani & Eryando, 2020)⁹ which states that since the launch of the National Health Insurance (JKN) program, the number of visits to health facilities has continued to increase. Cataract surgery is a service covered by the JKN program.

The implementation of JKN in hospitals has a very significant effect on hospital income in terms of service rates for case mix officers at Tenriawaru Regional Hospital stated that if there was an increase in JKN rates it could really increase income at Tenriawaru Regional Hospital. This research is also in line with research from (Arofah *et al.*, 2022)¹⁰ which states that the JKN program has an impact on health costs in Indonesia at Advanced Level Health Facilities. These impacts include the discovery of a patient's tendency to use the benefits of BPJS membership only to finance expensive or high-cost health services.

The JKN program also has an impact on hospital income. Apart from that, the JKN program caused an increase in Gross Profit Margin and a decrease in Net Profit Margin in a number of hospitals. However, apart from the positive impact of entering the JKN era, this program has shortcomings. The JKN program, especially the BPJS, is not fully effective, as laboratory equipment is inadequate, so that people sometimes have to pay their own way to bring tissue samples to other hospital laboratories. Apart from that, this program also affects the satisfaction of medical staff, according to whom the INA-CBGs rate is still considered low compared to the standard (Neni, 2021).

Financing

The National Health Insurance Program (JKN) held by BPJS Kesehatan has brought major changes in health services in Indonesia. One of the big changes is the payment of claims which so far has used the Fee For Service (FFS) mechanism to become a Prospective Payment System (PPS) through INA-CBGs (Indonesia Case Base Groups). The payment system for Health Service Providers through Capitation (Prepaid Capitation System) for First Level Health Facilities, and a package system for Referral Level Health Facilities where BPJS will pay according to the INA CBG's package system. the number of claims billed depends on the services provided to patients or participants so that hospitals can freely determine what services are provided to patients. Meanwhile, INA-CBGs use a package mechanism based on the patient's illness.⁶

The results of this study indicate that there is a significant impact from the implementation of JKN on hospital financing in terms of payment of claims at the hospital. and the BPJS claims cover the operational costs of the Hospital in accordance with the portion of each that is used for Hospital HR, Hospital SDO and BHP at the Hospital.

This research is not in line with research from (Arofah et al., 2022)¹⁰ which states that based on interview results, several factors have been found that affect hospital efficiency, especially at this time in the implementation of the JKN program, namely the frequent delays in paying BPJS Health claims and several rates. INA CBGs are still not rational so that the real costs incurred by the hospital are greater than the rates received. This has had a negative impact on the efficiency level of the hospital.

However, this research is in line with research from (Irwandy & Sjaaf, 2018)¹¹ which states that the implementation of the policy of implementing universal health insurance has a positive impact, namely increasing access and the number of public visits to health service facilities, but on the other hand this policy has also drained the available resources. large and require intensive monitoring.

Financial compensation

The National Health Insurance Program (JKN) organized by BPJS Health is a program that developed rapidly at the beginning of its existence in terms of achieving membership coverage. To maintain the continuity of the program, it is necessary to have proper participant service management at each service point. Measuring the financial needs of employees in the JKN program is important to do, apart from the suitability of the application with the JKN program as social insurance, also because of the urgency of providing information and policy bases for BPJS Health as the program organizer to be able to maintain continuity and protect its participants in relation to providing guarantees. health (Rhamdani, 2021).

This research found that the implementation of JKN had no effect on the financial compensation of employees in hospitals, the habits and beliefs of patients in using JKN had a significant impact on hospital operations but there was no significant impact on the financial compensation of employees at RSUD Tenriawaru Kab. Key Informant statements that have been reduced in this research, namely the finance and accounting division, stated that the highest income for hospitals is from JKN collaboration with hospitals because JKN covers hospital operational costs, not employee financial compensation. There is no strategy in getting used to and convincing patients to use JKN because with JKN patients don't need to worry about hospital costs so automatically patients will be loyal to using JKN while the impact for hospitals is that more and more patients use JKN automatically and more services will be received by them. Hospital.

This research is also in line with Putra's (2014)¹² research which concluded that RSU has the same view of the JKN program, as almost all informants gave a positive response to the program and thought this program was good and had clearer regulations so that it would be difficult to commit fraud. Almost all informants also stated that the JKN program was better than the previous program (Jamkesmas).

The results of this research are in line with research from (Agusianita, 2023) which states that in Indonesia, low income with the obligation to pay insurance and receiving services that do not meet the expectations of JKN users are indicators that encourage feelings of dissatisfaction with services. Low loyalty of JKN users will of course impact on decreased revenue in the hospital.

This research is also in line with research from (Wiliana *et al.*, 2019)¹³ Patient loyalty is very necessary in the long term because mutual benefits between related parties or from the hospital side make patients loyal and have a stable relationship. Patient loyalty is very important because each patient can make a large contribution to hospital income. The high level of patient loyalty to hospitals is because patients have a high sense of trust in the hospital they choose.¹⁴⁻¹⁷

This research is not in line with research from (Armansyah 2020) which states that based on research conducted at BPJS Health Palu Branch, it shows that BPJS Health Palu Branch provides various types of compensation to support the performance of its employees. for example, direct compensation such as providing salaries that employees receive every month. Apart from that, BPJS Health Palu Branch also provides incentives if employee performance exceeds predetermined work standards, with the aim of motivating employees to have high productivity and to support employee performance.

Bonuses are also compensation given by BPJS Health Palu Branch to its employees using a target and work performance system with report cards made once every quarter. These report cards are made to determine bonuses and calculate the achievement of performance targets for each employee that have been determined by BPJS Health Palu branch. Apart from that, BPJS Health Palu Branch also provides indirect compensation, for example health benefits to its employees and benefits for employees when they are not working, such as annual employee leave, holiday leave and leave for important reasons (Armansyah, 2020).

CONCLUSION

Based on research results from evaluating the economic impact based on the implementation of National Health Insurance at the Tenriawaru Regional Hospital, District. Bone, the following conclusions can be drawn:

Income

Implementation of the National Health Insurance (JKN) program at RSUD Tenriawaru Kab. bones. Impact on hospital income. The existence of the National Health Insurance (JKN) program has led to an increase in hospital service revenues, so that the implementation of the National Health Insurance (JKN) provides big benefits for hospitals from an economic perspective.

Financing

Implementation of the National Health Insurance program at RSUD Tenriawaru Kab. bones. Impact on financing in hospitals. Hospitals have resources which are operational income originating from JKN user patients who utilize the health service facilities at the hospital. BPJS claims have their respective portions for the use of HR, SDO and BHP financing in hospitals. JKN always smoothly pays claims to RSUD Tenriawaru Kab. bones.

Financial compensation

The implementation of National Health Insurance (JKN) has no impact on the financial compensation of employees at Tenriawaru Regional Hospital. In terms of bonuses, salaries and semester intensives, there is no influence on the implementation of JKN in hospitals. As for additional services for hospital employees, they are non-compensation services received from JKN for hospital employees, so it can be concluded that there is implementation of JKN at Tenriawaru Regional Hospital. has no impact on the financial compensation of employees at RSUD Tenriawaru Kab. bones.

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