

EFFECT OF BPJS (Social Insurance Administration Organization) RECEIVABLES MANAGEMENT AND INACTION OF BPJS CLAIM REPAYMENT ON PRIVATE HOSPITAL FINANCIAL FUNDS FLOW IN SURAKARTA

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Abstract : This study aims to examine the effect of BPJS (Social Insurance Administration Organization) receivable management, and the inaction of BPJS (Social Insurance Administration Organization) claim repayment, on private hospitals funds flow in Surakarta. The independent variable used is BPJS receivable management, the disbursement of payment of BPJS (Social Insurance Administration Organization) claims and the dependent variable is the flow of financial funds of private hospitals. The population in this study is a private hospital in collaboration with BPJS (Social Insurance Administration Organization) in Surakarta City. Samples were taken by purposive sampling method. The data analysis was performed using multiple linear regression, t test, F, and R^2 . Based on the results of the classical assimilation test analysis shows that this study is normally distributed and there is no multicollinearity, autocorrelation and heteroscedasticity in the regression model. The results of multiple linear coefficient equation $Y = -3,551 + 1,019X_1 + 4,018X_2 + e$. The results of the t test show that the BPJS (Social Insurance Administration Organization) receivable management variables and the inaction in repayment of BPJS claims partially have a significant effect on the flow of financial funds of private hospitals in Surakarta. And the F test results show that BPJS (Social Insurance Administration Organization) accounts receivable management variables and the repayment inaction of BPJS claims simultaneously affect the financial flow of private hospitals in Surakarta. Whereas, the R^2 test results (determination coefficient) obtained R Square value of 0.990, which means that BPJS accounts receivable management variables and inactions in paying BPJS claims contribute 99% to the private Hospital financial flow funds, while the remaining 1% is influenced by other variables not examined in this research.

Keywords : *BPJS receivable management, repayment inaction of BPJS claims, and the financial funds flow of private hospitals.*

1. Introduction

Health is a human right of every person. Everyone has the same rights to access safe, quality and affordable health services (Law No. 36/2009). Health is an important component in well-being, so the

state must ensure that its citizens can live healthy and productive lives (Samuelson, 2003). Health services are all efforts carried out alone or jointly by organizations to maintain and improve health, prevent and cure diseases and

restore the health of individuals, families and communities. Health services according to Pohan (2007: 28) are tools used to describe the quality of health services into operational terminology, providing information to people involved in health services to be carried out in the system, both patients, health care providers, support health services and management of health care organizations, and will be accountable in carrying out their respective duties and roles.

The ability of a person or family to access or achieve health services is different. For those who are capable, this is not a big problem; they can choose health services according to their wishes, while for poor families it will be a separate problem. Some of the obstacles faced in the provision of health services include people who are unable to access available health services due to limited facilities and infrastructure, social and cultural values of the community, health services that are not in accordance with the needs / expectations, the quality of the implementation of low health services, and allocation and the use of resources for inadequate service delivery (Gani et al, 2008).

Hospital is an institution that is useful for handling health services to the general public. Where the Hospital is a form of non-profit or non-profit organization. Technological developments in the health sector and increasing competence in the field of health services, a hospital is required to be able to develop a business, improve the quality of services by empowering resources effectively and efficiently. In the recent time the government issued a free health program that was named BPJS as the organizing body of health insurance to the community. Hospitals are institutions that are useful for handling health services to the general public. Where the Hospital is a form of

non-profit or non-profit organization. Technological developments in the health sector and increasing competence in the field of health services, a hospital is required to be able to develop a business, improve the quality of services by empowering resources effectively and efficiently. In the recent time the government issued a free health program named BPJS/ Social Insurance Administration Organization as the organizing body for health insurance to the public.

According to Republic of Indonesia Law number 24 of 2011 concerning the Social Security Administering Body, hereinafter referred to as BPJS, is a legal entity established to organize social security programs, the Government must prepare a National Social Security System organized by the Health BPJS and Employment BPJS. Starting January 1, 2014 Askes Ltd. will switch to BPJS Health and Jamsostek Ltd. to become BPJS Employment, effectively operating on July 1, 2015 ([http:// www. Kompas .com](http://www.kompas.com)). The social security BPJS program is divided into 5 types of social security programs and its implementation is made in 2 programs, namely: Programs organized by the successor of *Askes Ltd.*, with the program being Health Insurance that is valid from 1 January 2014 and the Program organized by BPJS Employment, with the program is a Guarantee Occupational Accidents, Old Age Guarantees, Pension Insurance, and Death Guarantees that began on July 1, 2015.

Government policy on *Jamkesmas* or *Askeskin* organized by the Ministry of Health is intended to maintain the continuity of health services for the poor and disadvantaged during the transition period. The transformation was followed by the transfer of participants, programs, assets and liabilities, employees, as well as rights and obligations. Currently the

government is strengthening health insurance through *Jamkesmas* as the beginning of achieving health insurance for all residents. Based on past experience and learning from the experiences of various other countries, the social health insurance system is an appropriate choice for managing the health service subsystem in line with the health financing subsystem.

Public health insurance (*Jamkesmas*) will be a driver of changes in fundamental changes such as structuring service standardization, tariff standardization, structuring rational drug use and enhancing capabilities and encouraging hospital management and other health facilities to be more efficient which impact on quality control and cost control (Kepmenkes , 2010).

Shifting the pattern of health care financing through Hospital services from its own cost (out of pocket) to payment through BPJS health insurance, forcing the related Hospital as one of the public health service institutions to be able to manage its financial management so that it can still compete with other Hospitals through ease in patient administration services. The hospital does not only receive income from financing services that have been made in cash, but also on credit for all forms of services provided.

Credit acceptance occurs when cash is not received directly by the hospital from patients who have finished treatment at the hospital, but the patient uses a health insurance card from the JKN program, namely the national health care security so that there is a certain grace period for receiving cash. according to Rusdi Akbar (2004: 199) states that the definition of accounts receivable includes all rights or claims of companies in other organizations to receive a certain amount of cash, goods, or services in the future as a result of past events. Whereas according to Van Horne and Wachowicz is the amount of money

transferred by ownership to a company by customers who have purchased goods or services on credit. Credit according to Smith is that receivables can be defined in the broad sense as rights or claims against other parties for money, goods, and services. However, for accounting purposes, this term is generally treated as a claim that is expected to be resolved through cash receipts and the definition of accounts receivable according to M. Munandar is a company bill to another party whose payment will be requested when it has reached maturity. These trade receivables are normally expected to be collected in a relatively short period of time.

In the field of accounting, F.W. Taylor developed the concept of control in management accounting. Control in accounting is related to controlling costs and budget controlled through accounting accountability centers, while third party collateral guarantees receivables have a significant proportion in contributing to hospital income. Every hospital that works with Health BPJS usually has an INA-CBGS application. . This application will calculate the operational costs needed by a patient to recover. Therefore, it is necessary to manage accounts receivable by Hospital management to avoid potential losses due to rejected claims.

2. Underlying Theory

2.1 The Effect of BPJS accounts receivable management on the flow of financial funds of private hospitals in Surakarta

Receivables are one of the elements of current assets in a company's balance sheet that arise as a result of the sale of goods and services or the provision of credit to debtors whose payments are generally given within 30 days (thirty days) to 90 days (ninety days). In a broad sense, accounts receivable are claims against

other parties in the form of money, goods or services sold on credit. Receivables for narrower accounting purposes mean that is to show demands on parties outside the company that are expected to be settled by receiving cash amounts. Receivables can be classified into two categories, namely trade receivables and other receivables. According to Soemarso accounts receivable is the delivery of assets or other services to parties with whom he owes: "The company has the right to claim against someone or another company with this claim right the company can demand payment in the form of money".

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2.2 The Effect of delays in repaying BPJS claims on the flow of financial funds of private hospitals in Surakarta

Private hospitals have recently faced delays in claim payments from the Health Social Security Administering Body (BPJS Kesehatan). The delay makes private hospitals forced to bail out costs for hospital operating costs until disbursed by the government. Drug companies are also reluctant to supply drugs if the costs are not distributed immediately. According to the Deputy Chairperson of the Indonesian

Private Hospital Association (ARSSI), Noor Arida Sofiana said the impact of the delay in payment of the drug resulted in the Hospital being unable to pay for the drug and support the hospital's operational costs. "This condition will create a vacuum of medicine because the hospital is late in paying the drug to the distributor of drugs and fulfilling other operational needs". Based on the description above, it can be formulated as follows:

H_2 = Delays in repaying BPJS claims significantly influence the financial flow of private hospitals in Surakarta.

2.3 Influence of BPJS accounts receivable management, late repayment of BPJS claims simultaneously, to the flow of financial funds at private hospitals in Surakarta

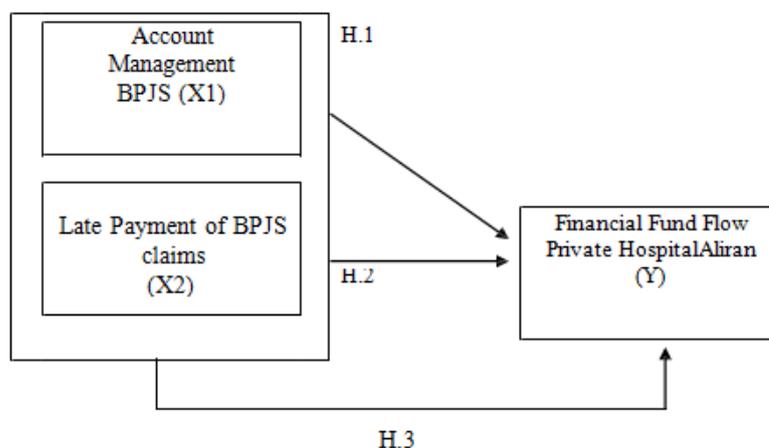
Funds obtained from BPJS are donation funds for health services, so each BPJS transaction will change the Hospital's equity, namely the financial position report on service receivables, then the operational report adds income from services provided. if there is a delay in repaying a claim that has been sent to the BPJS, then the financial position to increase income will also affect.

The installment policy for patients should be able to increase hospital income, on the one hand income is expected to rise, but in installments will generate investment in accounts receivable, and the funds used to invest in receivables have additional costs or capital, then from the receivable management system policy BPJS, late payment of claims, and hospital strategy in addressing the risk of unpaid receivables affect each other the flow of financial funds of the hospital. Based on the description above, it can be formulated as follows:

H_3 = Management of BPJS accounts receivable, and late repayment of BPJS claims simultaneously affects the flow of

funds of private hospitals in Surakarta.

This research framework can be described as follows:



Picture 1. Theoretical Framework

3. Research Method

This study uses primary data and secondary data. Primary data refers more to information obtained directly from observing the object under study. The example of primary data is information obtained through interviews with predetermined informants, while secondary data is data obtained from existing sources or in other words the data is obtained indirectly but through intermediary media (obtained and recorded by other parties). The example of secondary data used is in the form of monthly reports and annual reports in 2016 and 2017. These secondary data can be obtained from the results of financial statements obtained directly from the finance department at the relevant Private Hospital.

The type of research method used is a type of quantitative research method, using a descriptive quantitative approach. In this study, it will be described how the hospital records about funds granted by the BPJS for private hospitals in order to improve service to the community and have an interest in improving the quality of financial reports. Data collection techniques in this study are in three ways:

interviews, observation, and document study. This research was conducted in 3 private hospitals in Surakarta City.

The dimension of the research time used was cross sectional, which means that this research was carried out at a certain time. In this study the observation period used is in 2016 and 2017.

The population used in this study is a private hospital located in the city of Surakarta, and the sampling in this study was conducted by purposive sampling technique. Sampling is based on certain considerations or criteria. Data were obtained from 3 Private Hospitals in Surakarta with a total sample of 36 data.

In the research, the dependent variable is the financial flow of private hospitals in Surakarta. Where that can be sampled in the testing of this dependent variable is the total claim cost of BPJS services in the Hospital for one month that has been submitted to the central BPJS. Hospital financial fund variables can be measured from the data that has been obtained during the research process, both through the interview process of several informants, namely the Head of Finance and Hospital Accountants, as well as through financial

reports obtained directly from the finance department in the related private hospitals.

In this study there were 2 (two) independent variables namely the influence of BPJS accounts receivable management, and the delay in repayment of BPJS claims. The independence variables in this study are the factors that influence the flow of financial funds of private hospitals in Surakarta. BPJS Receivables Management is the financing of health services through Hospital services from its own costs (out of pocket) to payments through BPJS health insurance, then the related Hospital as one of the public health service institutions must be able to manage its financial management in order to remain competitive with the Hospital others through ease in patient administration services. In this study, receivable management variables can be defined as monthly claim repayment costs based on

the claim submission fee by the Hospital to the central BPJS.

Delay in Paying BPJS Claims is the late payment of claims from the Health Social Security Administering Body (BPJS Health) for the services provided. The delay made the private hospital forced to cover operational costs for the cost of patient health insurance coverage (BPJS) until it was disbursed by the central BPJS and the government. The delay in repayment of claims in this study can be seen from the accounts receivable age report based on financial statements in the related private hospital.

This study uses a quantitative approach. Data analysis method used in this study is to use descriptive statistical tests and classical assumption tests. While the method of hypothesis analysis uses multiple linear regression analysis, t test, F test and R^2 test.

4. Hypothesis Test Result

Table 1. Results of Descriptive Data Analysis
Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Flow	36	520764000,00	2618442300,00	1005215264,11	517541472.53070
M. credit	36	520764000,00	2618442300,00	1005215264,11	509750415.48298
Delay	36	0,00	3,00	0,5278	0,87786
Valid N (listwise)	36				

Source: Secondary data processed, 2018

Based on the interpretation of the results the descriptive statistics of each variable can be summarized as follows:

Hospital financial fund flow values have a minimum value of 520,764,000.00 in January and a maximum value of 2,618.44,300.00 in March, both occurred at Hospital A in 2016. The average value (mean) generated was 1.005.215.264.1111 while the standard deviation value

amounting to 517,541,472.53070. The balance value of BPJS accounts receivable management has a minimum value of 520,764,000.00 in January and a maximum value of 2,618.44,300.00 in March, both of which occur at Hospital A in 2016. The average value (mean) generated is 1,005,215,264,1111 while the standard deviation value is 509,750,415.48298. The delay in repayment of claims that occur in 3 private

hospitals has a minimum value of 0.00 months in Hospital A in 2016 and a maximum value of 3.00 months occurred in August at Hospital B and in January at

the Hospital C in 2016. The average value (mean) produced is 0.5278 months while the standard deviation value is 0.87786 months.

4.1 Multiple linear regression analysis

**Table 1. Analysis Test Results
Multiple Linear Regression**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	-3.551	2.206		-1.610	0.117
M_Credit	1.019	0.018	1.004	55.520	0.000
Delay	4.018	1.066	0.068	3.769	0.001

Source: Secondary data processed, 2018.

Thus the regression equation is as follows:

$$Y = -3.551 + 1.019 (X1) + 4.018 (X2) + e$$

Based on the results of the analysis of the research on Table 2 can be summarized as follows:

BPJS accounts receivable management obtained a Beta value of 1.019 which means that if the management of BPJS accounts receivable increases, the financial flow of private hospitals will also increase.

Whereas for the delay in repayment of BPJS claims obtained a Beta value of 4.018 which means that if the submission of BPJS claims gets longer, the possibility of late payment of claims will also increase, then this will increase the flow of financial funds of private hospitals.

4.2 Significant Individual Parameter Test (t test)

Based on the results of the analysis of the research on Table 2 can be summarized as follows:

The results of the t test analysis for BPJS accounts receivable management obtained the value of t_{count} of 55,550 > t table of 2,03452, and significance of 0,000 < 0,05, so H_1 is Received. These results indicate that BPJS accounts receivable management affects the financial flow of private hospitals in Surakarta.

The results of the t-test analysis for the delay in repayment of BPJS claims obtained t_{count} of 3.769 > t table of 2.03452 with a significance of 0.001 < 0.05, so H_2 is accepted. These results indicate that delays in paying BPJS claims affect the flow of financial funds of private hospitals.

4.3 Determination Coefficient Test (R^2 Test)

Table 3. R^2 Test Results

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.995 ^a	.990	.989	5.45696E7

Source: Secondary data that has been processed, 2018.

Based on table 4 obtained the R Square value of 0.990 means that the variability of private hospital financial fund flow variables can be explained by BPJS accounts receivable management variables and the delay in repayment of BPJS claims by 99% while the remaining 1% is influenced by other variables not examined in this study.

5. Discussion

5.1 Effect of BPJS accounts receivable management on the financial flow of private hospitals in Surakarta

The results of this study indicate that BPJS accounts receivable management affects the flow of financial funds of private hospitals ($p = 0.000 < 0.05$). These results indicate that the management of BPJS accounts receivable greatly influences the flow of financial funds of private hospitals. This is supported by previous research by Sharfina (2016) that obtains results that management of accounts receivable managed by IPAT is administratively well organized, but there are several causes of claims rejected by BPJS including services not according to procedures, service of one episode claimed separately, and there is a difference in the perception of coding when inputting the ING CBG's application system. This means that BPJS accounts receivable management has a significant effect on the flow of financial funds of private hospitals.

5.2 Effect of delays in repayment of BPJS claims on the financial flow of private hospitals in Surakarta

The results of this study indicate that the delay in repayment of BPJS claims affects the financial funds of private hospitals in Surakarta ($p = 0.001 > 0.05$). And the t count is 3.769. This means that if the variable delay in repayment of BPJS

claims increases by 1 unit and the receivable management variables are fixed, the delay in repayment of BPJS claims increases by 3.769. This is in accordance with previous research conducted by Sani (2000) by obtaining results that cause the amount of the balance of the inpatient service receivable due to the length of time in the process of submitting bills to debtors.

5.3 Effect of BPJS accounts receivable management and late repayment of BPJS claims on the financial flow of private hospitals in Surakarta

The test results together show that BPJS accounts receivable management and late repayment of BPJS claims affect the financial funds of private hospitals in Surakarta. ($p = 0.00 < 0.05$) means that this study shows that BPJS accounts receivable management variables and delays in paying BPJS claims, simultaneously affect the financial funds of private hospitals in Surakarta, with the reason that when the balance of BPJS receivables increases, the submission of BPJS claims will also increase for a long time, the possibility of a delay in repayment of claims will also increase, so this will increase the flow of financial funds of private hospitals. This study is in accordance with previous research conducted by Sani (2000) by contributing 90% of the research results in which the amount of the receivable balance occurs due to the delay in filing a claim to the central BPJS for the cost of services that have been carried out for one month.

6. Conclusion and Suggestion

Based on the results of the study and discussion of the influence of BPJS accounts receivable management and the delay in repayment of BPJS claims on the flow of financial funds of private hospitals

in Surakarta, the following conclusions can be drawn as follows.

First, partially BPJS accounts receivable management variables have a significant effect on the flow of financial funds of private hospitals in Surakarta, with a significance value of $0.000 > 0.05$ in accordance with the conditions for receiving the t test.

Second, partially the delay in paying off BPJS claims has a significant effect on the flow of financial funds of private hospitals in Surakarta, with a significance value of $0.001 < 0.05$ in accordance with the conditions for receiving the t test.

Third, simultaneously BPJS accounts receivable management variables and late repayment of BPJS claims affect the flow of financial funds of private hospitals in Surakarta with a significance value of $0,000 < 0.05$ according to the terms of receipt of the F test. And fourth, BPJS accounts receivable management variables and late repayment of BPJS claims simultaneously affect the flow of financial funds of private hospitals in Surakarta with a significance value of R Square of 0.990 means that BPJS accounts receivable management variables and late repayment of claims together influence the financial flow of the house Private hospital is 99%. In this independent variable which includes the management of BPJS accounts receivable and the delay in repayment of BPJS claims contributes 99% to the flow of private hospital financial funds, while the remaining 1% is influenced by other variables not examined in this study. The thing that can be suggested for future research based on the discussion of the research is expected in sampling not only in the financial report of Inpatient services. Need to add variables that are thought to have an influence on the value of the flow of financial funds that are not used in this study. It also needs to be compared between private hospitals and

government hospitals. Whereas what can be suggested for the relevant agencies is that each hospital should make a policy regarding the limits of the collection of eligibility of the BPJS patient service files that will be claimed before the deadline for submitting claims to the central BPJS, so that there is no delay in submitting claims every month.

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