

A COMPARATIVE STUDY OF SERVICE QUALITY BEFORE AND AFTER THE IMPLEMENTATION OF JKN ON PRIVATE AND PUBLIC HOSPITALS

STUDY PERBANDINGAN KUALITAS PELAYANAN SEBELUM DAN SESUDAH IMPLEMENTASI JKN PADA RUMAH SAKIT SWASTA DAN PEMERINTAH

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Abstract: The right to have an adequate level of life, health, and welfare of people is a part of human right and recognized by all nations in the world, including Indonesia. The problem is that not all citizens of Indonesia can afford health care services. On December 31, 2013 the government established BPJS as the administrator of the National Health insurance of Indonesia called JKN (Jaminan Kesehatan Nasional). JKN helps the citizens, but as for the Hospitals, there are so many changes that exhibit and they need to change their payment system from fee for service to INACBG's. With INACBG the Hospitals will Receive the payment after they make monthly claim. Currently, BPJS is experiencing deficit, and this is effecting the claim process. The purpose of this study is to make a comparison of service quality of the hospitals before and after the implementation of JKN. Using Wilcoxon signed rank test and descriptive analysis. It is found that there is no significant difference of the service quality of Hospitals before and after the implementation of JKN and the users want to use JKN again for financial ease. In order to make JKN a successful program, the government need to make sure that all of the parties within the cycle of JKN need to work together.

Keyword: *bpjs, jkn, health care, service quality.*

Abstrak: Hak untuk tingkat kehidupan, kesehatan, dan kesejahteraan manusia yang memadai merupakan bagian dari hak asasi manusia dan diakui oleh semua bangsa di dunia, termasuk Indonesia. Masalahnya adalah tidak semua warga negara Indonesia mampu membayar layanan perawatan kesehatan. 31 Desember 2013 pemerintah mendirikan BPJS sebagai administrator asuransi Kesehatan Nasional Indonesia yang disebut JKN (Jaminan Kesehatan Nasional). JKN membantu warga, tetapi untuk Rumah Sakit, ada begitu banyak perubahan yang terjadi dan mereka perlu mengubah sistem pembayaran mereka dari biaya untuk layanan ke INACBG's. Dengan INACBG, Rumah Sakit akan menerima pembayaran setelah mereka membuat klaim bulanan. Saat ini, BPJS mengalami defisit, dan ini mempengaruhi proses klaim. Tujuan penelitian ini adalah untuk membuat perbandingan kualitas layanan rumah sakit sebelum dan sesudah pelaksanaan JKN. Penelitian ini menggunakan Wilcoxon signed rank test dan analisis deskriptif. Ditemukan bahwa tidak ada perbedaan yang signifikan dari kualitas layanan Rumah Sakit sebelum dan sesudah penerapan JKN dan pengguna ingin menggunakan JKN lagi untuk kemudahan finansial. Untuk menjadikan JKN sebagai program yang sukses, pemerintah perlu memastikan bahwa semua peserta di dalam siklus JKN harus bekerja sama.

Kata Kunci: *bpjs, jkn, pelayanan kesehatan, kualitas pelayanan.*

INTRODUCTION

Research Background

At the beginning of 2014 Indonesian Government introduced JKN (Jaminan Kesehatan Nasional), administered by an agency known as BPJS (Badan Penyelenggara Jaminan Sosial). While the government were still trying to make the realization of “all the citizen shall registered as JKN users”, there were some problems that happened to and through JKN. Currently, the biggest problem that BPJS faces is having a deficit of funds. Because of this deficit, BPJS will not be able to pay all of the claim from the health facilities (Hospital, Drugstore, Family doctors). Currently, most of the patient who came to the hospital are the users of JKN which means when they ask for services from the hospitals they will use JKN as the payment method. Therefore, most of the income of the hospitals comes from JKN, meaning that the system of JKN which are the health facilities have to provide the services first and then claim the money through INA CBG's to BPJS. Hospitals have to buy the supplies first, whereas BPJS have deficit, this means that there are some hospitals that will not receive their claim on time. With the problems that occur because of the deficit, it would be difficult for the government, BPJS, and the hospitals to keep the same standard of the service quality.

Cash flow is important in running business. Payment must be made to BPJS employees, medicines must be purchased, also tools, equipment, and facilities must be upgraded. BPJS need to keep giving training their employees, and give rewards to increase productivity to ensure a good performance, all of these require fund. Lack of budget may lower the service quality. Service quality is one of the success factor of Hospitals. According to Zarei, et al, (2012) providing patients with the services according to their needs and expectations is crucial for survival and success of the organization in the competitive environment of the health care market.

This research tries to find out, if these problems that BPJS face through JKN will affect the hospitals service quality, also to know users of JKN point of view, whether they feel any difference in the service quality before and after JKN. Their choice to use JKN again will be discovered and problems of JKN may be identified.

Research Objectives

The main purpose of this research is to compare the service quality of the hospitals before and after the implementation of JKN. There are 2 key outlines of the objectives, that is to compare the service quality of the Hospitals before and after the implementation of JKN and to find out the decision of JKN users whether they will keep using JKN or not. To find out the reasons of the users' decisions.

THEORETICAL REVIEW

Hospital Management

Hospital is an institution or an industry that focuses on providing health care services. The hospital really pay attention to the human itself not only the profit that the human will give and with this we could see why it is different from the management that applies to the other industry that produce services and products. The tasks of hospital management can be described as pertaining to two large areas: quality management and allocation of resources (Biller-andorno, Lenk and Leititis, 2003).

JKN

BPJS is a Government agency founded by the government as the Social Security Administrator for Health. JKN stands for “*Jaminan Kesehatan Nasional*” The main duty of BPJS is to carry out and managing JKN that are intended for the citizen of Indonesia. INA-CBGs (Indonesia Case Base Groups), a payment model used by BPJS Health to replace claims billed by hospitals. INA-CBG is a payment system with a "package" system, based on the illness suffered by the patients. The hospital will get a payment based on the INA CBGs rate, which is the average cost spent by a diagnosis group (BPJS, 2014). The objective of BPJS and JKN is to help the citizens of Indonesia to have easier access to health care from the financial aspect or expenses (KEMENKES RI, 2013).

Service Quality

If the company have a good service quality the customers will feels happy and satisfied since their needs and want that they try to achieve through the company's service are meet with their expectation. Service quality can be measured using five indicators of service quality dimension, Tangibles, Reliability, Responsiveness, Assurance, and Empathy (Parasuraman, Zeithaml and Berry, 1988). Maximum service quality

will lead to the emergence of good perceptions from customers and customer satisfaction will be higher, thus the level of business income will increase (Erviana, 2013).

Consumer Satisfaction

Customer satisfaction, one thing that a company need to maintain. If the customer satisfaction did not fulfilled the future of the company will be in danger. If the performance did not meet with the expectation, the customer will dissatisfied. It will damaging the loyalty relationship between the company and the customer. In other hand, if the performance meet the expectation than it will makes the loyalty relationship stronger (Kotler, et al, 2012).

Consumer Behavior

The field of consumer behavior covers a lot of ground: it is the study of the processes involved when individuals or groups select, purchase, use or dispose of products, services, ideas or experiences to satisfy needs and desires. Needs and desires to be satisfied range from hunger and thirst to love, status or even spiritual fulfilment (Bamossy, et al, 2016).

Effect of Service Quality to Customer Satisfaction

Quality provides an encouragement to customers to establish strong ties with the company (Panjaitan, and Yuliati, 2016). the better the indicators of service quality which are tangible, reliability, responsiveness, assurance, and empathy, the better the customer satisfaction will be, otherwise if tangible, reliability, responsiveness, assurance, and empathy are getting worse, customer satisfaction is lower (Nugroho, 2016).

Previous Research

Suhadi, et al, (2016) this research analyze the effectiveness of the implementation of NHI from the aspect of the health care system at the Hospital Regional Public Service Bahteramas province. Rolindrawan (2015), this research examine the impact of various health social security programs implementation in the healthcare access and to set appropriate policies for the optimal health social security implementation.

Hypothesis

This research have hypothesis as follows:

H₀: There is significant difference of service quality of the Hospitals before and after the implementation of JKN.

H₁: There is no significant difference of service quality of the Hospitals before and after the implementation of JKN.

Conceptual Framework

The figure below is a research model that shows how the variables were used in this research.



Figure 1. Conceptual Framework
Source: *Data Analysis Method, 2018*

RESEARCH METHOD

Research Approach

This research is a quantitative research, and data were analyzed using descriptive analysis and Wilcoxon test.

Population, Sample and Sampling Technique

The population of this research are the users of JKN in North Sulawesi. A sample is a subset of the individuals in a population; there is typically data available for individuals in samples (Hanlon and Larget, 2011). The sample that used in this research are the users of JKN in Bitung city, North Minahasa, and Manado city. The quota for the respondent is minimal 150 respondent and the data used for this research are from 172 respondent. The criteria of the sample for this research are, The respondent must be a user of JKN, Ever used hospitals services or ever goes to hospital (visiting acquaintances or taking care of family member in the Hospital), before and after the implementation of JKN, Age above 22 years old (already working)., Respondents are people that already working. Choosing 2 Hospitals as the representative of the Hospitals in North Sulawesi in order to support the results of the analysis for this research, to be carried out using the Wilcoxon test.

Data Collection Method

For this research, the questionnaire consists questions about the opinion of the respondent, before and after the implementation of JKN.

Technical Analysis

To analyze the data, this research used Wilcoxon test and descriptive analysis Wilcoxon signed rank test is a Non-parametric hypothesis test. This test compared the service quality of Hospitals before and after the implementation of JKN. The data is the 5Q (Tangibles, Reliability, Responsiveness, Assurance, Empathy) of the Hospitals before and after the implementation of JKN and from the same population which are the users of JKN.

Descriptive analysis described the decision of the users of JKN to use JKN again or not after they experienced the service of the Hospitals, and their reasons. Also, the data from the hospitals perspective, represented by the employees of the Hospital, non-medical and medical employees. The data that is analyzed from the Hospital's perspective, are about the performance of the employees and the development that happens inside the Hospital after the implementation of JKN. From this analysis we found the validity of the result from Wilcoxon test, if there are any changes in the service quality after the implementation of JKN or not.

RESULT AND DISCUSSION

With the Wilcoxon test, the hypothesis of this research are tested. Service quality have 5 indicators, tangibles, reliability, responsiveness, assurance, and empathy. Using Wilcoxon test, this research compared these 5 indicators of service quality, before and after the implementation of JKN.

Table 1. Wilcoxon Test of Tangibles

	TANGAFTR – TANGBFR
Z	-5.123 ^b
Asymp. Sig. (2-tailed)	.000

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Source: Data Processed, 2018

Table 1 shows that, the significance level of tangibles before and after the implementation of JKN is below 0.05. Means that, there is no change in the tangibles in the service quality of the hospital.

Table 2. Wilcoxon Test of Reliability

	RELIAFTR - RELIBFR
Z	-3.747 ^b

Asymp. Sig. (2-tailed)	.000
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a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Source: Data Processed, 2018

Table 2 shows that, the significance level of Reliability before and after the implementation of JKN is below 0.05. It means, there is no change in the Reliability in the service quality of the Hospital.

Table 3. Wilcoxon Test of Responsiveness

RESSAFTR - RESSBFR	
Z	-1.615 ^b
Asymp. Sig. (2-tailed)	.106

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Source: Data Processed, 2018

Table 3 shows that, the significance level of Responsiveness before and after the implementation of JKN is below 0.05. Meaning, there is no change in the Responsiveness in the service quality of the Hospital.

Table 4 .Wilcoxon Test of Assurance

ASSAFTR - ASSBFR	
Z	-4.624 ^b
Asymp. Sig. (2-tailed)	.000

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Source: Data Processed, 2018

Table 4 shows that, the significance level of assurance before and after the implementation of JKN is below 0.05. Which means, there is no change in the Assurance in the service quality of the hospital.

Table 5. Wilcoxon Test of Empathy

EMPAFTR – EMPBFR	
Z	-3.397 ^b
Asymp. Sig. (2-tailed)	.001

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Source: Data Processed, 2018

Table 5 shows that, the significance level of empathy before and after the implementation of JKN is below 0.05. Meaning, there is no change in the Empathy in the service quality of the hospital.

If the level of significance is < 0.05 , there is significant difference between before and after data. Otherwise, if the level of significance is > 0.05 , there is no significant difference between before and after data. The result of the significance level of 5 indicator of service quality have results >0.05 . From this analysis's data we could conclude that there are no significance changes in the service quality of the hospitals in North Sulawesi.

Descriptive Analysis

The Hospitals point of view also analyzed, in order to support the result of the Wilcoxon test, represented by the employees. The data was taken from 1 Public Hospital, RSUD Maria Walanda Maramis and 1 Private Hospital, RSU Hermana Lembean from each Hospital we took 20 employees.

a. From the answer that we got from the question in the questionnaire, 100% of the respondent choose to use JKN again if they need to get treatment from the Hospitals.

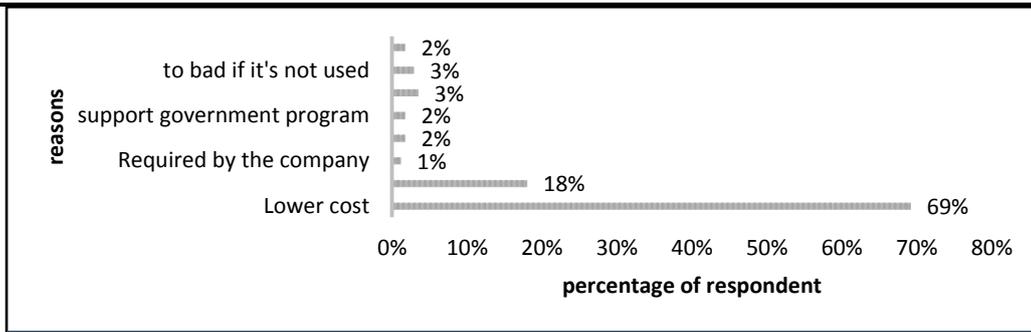


Figure 2. Reasons to Use JKN again

Source: Data Processed, 2018

Figures 2 Shows that, one of the main reason that most of the respondent choose, is about the expenses. From the answer from the respondent they feels that with using JKN it could help them with the cost. b. From the Hospitals point of view, four questions are distributed.

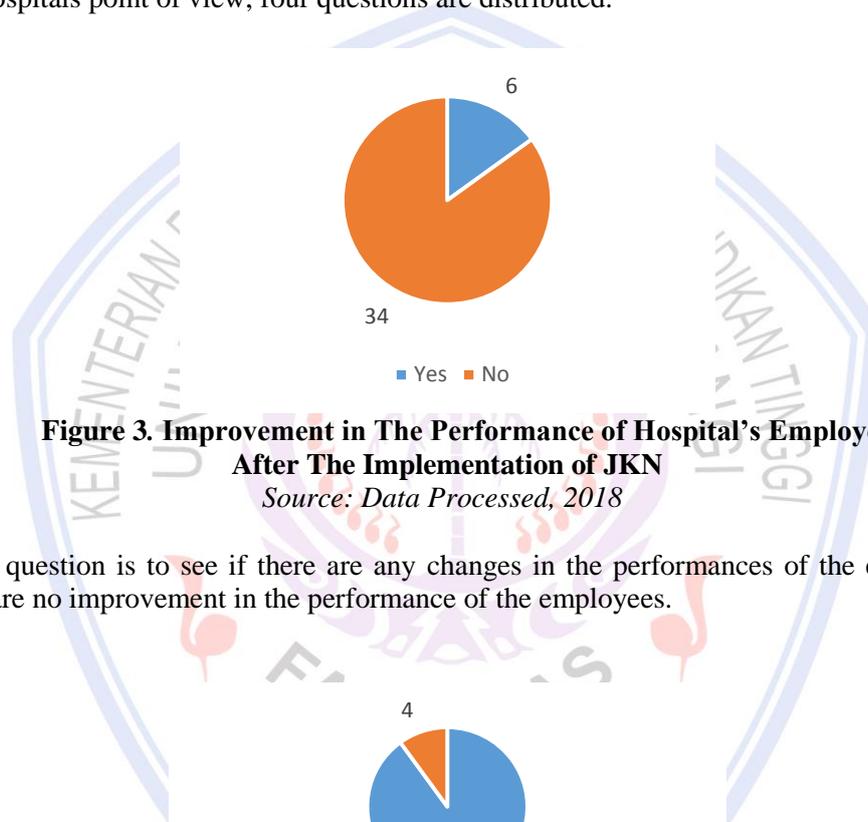


Figure 3. Improvement in The Performance of Hospital’s Employees After The Implementation of JKN

Source: Data Processed, 2018

The first question is to see if there are any changes in the performances of the employees. Figure 3 shows that, there are no improvement in the performance of the employees.



Figure 4. Developments in All Aspects of The Hospital After The Implementation of JKN

Source: Data Processed, 2018

The second question is to see if there are any developments in the Hospitals after the implementation of JKN. Figure 4 shows that, there are specifics developments in all aspect of the Hospitals after the implementation of JKN. The third question is to ask if the developments in the Hospitals are related or because of the implementation of JKN.

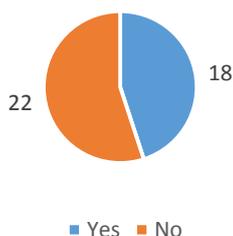


Figure 5. Developments in The Hospital are Related To The Implementation of JKN

Source: Data Processed, 2018

Figure 5 shows that, most of the respondents thinks that the developments that happened in Hospitals are not because of the implementation of JKN.

The fourth question is to see, which areas are the most affected in its development, by the implementation of JKN. The Pharmacy, Medical, Nursing, Financial, Infrastructures, or the Service. This question gives support to the hypothesis that chosen from the Wilcoxon test. Which is, there are no significant change on service quality of the Hospitals, after the implementation of JKN. Also, this question reveals information about, which areas of Hospitals get affected by the implementation of JKN the most. For this question the respondents are allowed to choose more than 1 option.

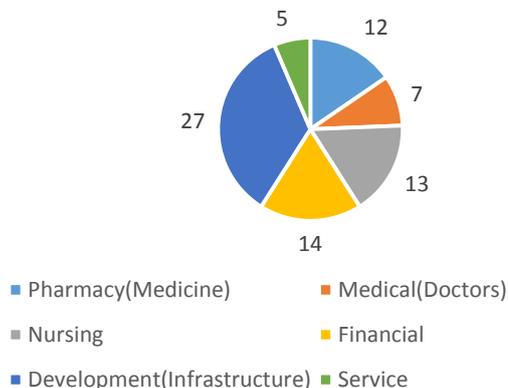


Figure 6. Fields That Affected by The Implementation of JKN

Source: Data Processed, 2018

Figure 6 shows that most of the respondents choose infrastructure as area that developed after the implementation of JKN, followed by financial, nursing, pharmacy, medical, and the last service. The conclusion of this data interpretation, there are no change in the service quality of the Hospitals.

Form this analysis we could see opinion of the users of JKN about JKN itself, we could understand their reason to keep using JKN. All of the analysis results and all of the data shows that, the impact of JKN from the Hospitals point of view. This research found that the impact that the Hospitals get from the implementation of JKN are still under control. The areas that go impacted the most by the implementation of JKN is the infrastructure and financial of the Hospitals.

Discussion

Service is the global judgement related to overall superiority of service (Kumar, Manjunath, and Chethan, 2012). The enactment of National Health Insurance through National Agency for Social Insurance in Health (BPJS) institution brings the impact felt by health service actors such as public and private hospitals. For the hospital Government, an increase in profits, as well as private hospitals BPJS (Pitoyo, Winarni, Hariyanti, 2010).

The JKN program is held to ensure equitable health for the people of Indonesia. Mutual cooperation is the goal of implementing this program. Middle and upper classes work together for health costs for people who cannot afford to pay for treatment. The application of the JKN program also facilitates patients in transactions during treatment only by showing a referral letter (Putri, and Kartika, 2017).

From the result of Wilcoxon test for before and after the implementation of JKN to the Hospitals, the significance level of the 5 indicators is > 0.05 , which means, there is no significant difference between service quality of the hospitals before and after the implementation of JKN. Based on this result, the null hypothesis (H_0) is rejected and the alternative hypothesis (H_1) is accepted.

Table. 6 Mean of the Variables Key Questions

Variables	Before	After	Difference
Tangibles	7.472	7.826	0.354
Reliability	7.553	7.806	0.253
Responsiveness	7.473	7.609	0.136
Assurance	7.726	7.966	0.24
Empathy	7.795	7.938	0.143

Source: Data Processed, 2018

The table above shows that the mean of the key questions of every variable, this data also shows that there are no significance difference of the service quality before and after the implementation of JKN to the Hospitals in North Sulawesi. The difference of the variables before and after the implementation of JKN are very small, none of them reach 0.5.

The conclusion of the data and results is even the hospitals are having troubles facing the impact of the deficit that BPJS faces currently, The hospital still tries to maintain their service quality. The hospital still prioritize the customer satisfaction and they shows that their main purpose is not only gaining profit from the patients, but about saving lives. Politeness and friendliness within the service still have big influence on patient satisfaction because it is important factors on patient satisfaction. There is a significant influence on some dimensions of service quality which is punctuality; politeness and friendliness; the responsibilities of officers; the convenience in obtaining services; services; and ease in obtaining service (Arbitera, Sjaaf, and Sulistiadi, 2017).

The result of the descriptive analysis of the users of JKN is, they are willing to use JKN again. Most of the reasons are related to financial matter. The result show that, JKN really helps the citizen of Indonesia to receive a good medical service at an affordable price. People who are still fighting with poverty can get medical service for free.

This research is limited to the location and time to do the research. There are 72, 2% of the population of Indonesia who have become the users of JKN. With limited time and budget this research could only cover 3 regions of North Sulawesi. Which means this research could only represent the comparative study in North Sulawesi. The recommendation is for future researcher to make comparative study in different aspect such as, supply chain, finance, operation system, management system.

CONCLUSION AND RECOMMENDATION

Conclusion

From the normality test it can be seen that the data used for this research are not normally distributed, that is why a non-parametric hypothesis test which is the Wilcoxon signed rank test is used. The result from the Wilcoxon signed rank test that run on the data for this research, shows that there are no significance difference on all of the indicators. This means that there is no significant difference of service quality before and after the implementation of JKN.

Descriptive analysis is used to analyze the decision of the users of JKN to use JKN again or not. All of the respondent chose yes as their answer, that they will use JKN again. There are 8 most favorite reasons for them to use JKN again. Starting from lower cost, facilities, good services, supporting government's program, for assurance, they have already paid the dues, and some of them think that the JKN program is beneficial.

To support the result of the Wilcoxon test that there are no significant difference on the service quality before and after the implementation of JKN, this research also analyze information from Hospital's perspective. The result of the analysis is that there are changes in the performance of the employee but it is not significant, in the service quality the changes are small.

From this we could conclude that, even the hospitals are having trouble with deficit they still try to maintain their service quality. The Hospitals still prioritize the customer satisfaction and showing that their main purpose is not to gain profit, but also to save lives.

Recommendation

In order to make JKN a success program, the government need to make sure that all of the participant inside the cycle of JKN need to work together. Government, BPJS, Hospitals, drug store, other health care businesses, doctor, nurse, and of course the citizen of Indonesia need to work together to understand each other, to support JKN.

1. Recommendation for Hospitals are :

The Hospitals must keep increasing their level of service quality, ensure customer satisfaction also, they have to continuously give training to their employees about JKN and INACBG's, by attending training programs from BPJS and government about JKN. The Hospitals must also build teamwork and leadership of the managers and workers and set the standards of using the tools and medicines for certain illness, collaborate with the medical staff to promote services by implementing quality control and cost control.

2. Recommendation to the government is to make sure that all of the citizens especially the users of JKN know about how JKN works. They also must have knowledge on the fees payment in due time. Lack of information on JKN may lead to morale hazard.

3. Recommendation to the users of JKN, is the users of JKN may receive the best benefit from JKN, not only by paying the dues monthly, but they should learn more about JKN. For minor ailments, users should getting medicines from the drug store, before going to the doctor or the public health center (PUSKESMAS).

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