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## THE INFLUENCE OF COMPLETENESS OF OUTPATIENT INTERNAL MEDICINE POLYCLINIC MEDICAL RESUME ON BPJS CLAIMS AT MUHAMMADIYAH HOSPITAL IN BANDUNG

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### Abstract

In the current era of BPJS, there are still frequent issues related to the completeness of patient medical records, especially for those who undergo outpatient visits. These records summarize all the treatments received by patients during their time in the hospital. This situation significantly impacts the process of claiming BPJS Health benefits. Within the procedure of BPJS Health claims, medical records are a crucial document that must be attached. Additionally, within the patient's medical records, there are diagnoses and procedures that serve as the basis for coders to determine and input these codes into the INA CBS'S application. Therefore, this study aims to test and measure the extent of the influence of the completeness of outpatient medical records on BPJS Health claims using a quantitative descriptive approach. Data collection is conducted through observation, questionnaires, and literature review. The research sample consists of 97 patient medical records selected using Simple Random Sampling, involving 15 respondents in completing questionnaires. The test results indicate a correlation of 0.802, demonstrating a significant influence. Furthermore, the coefficient of determination test reveals that the influence of the completeness of patient medical records on BPJS Health claims is 64%, while 35.7% is influenced by other variables. The primary factor causing this issue is the lack of attention and precision by nurses or healthcare personnel providing services in completing patient medical records. Therefore, the researchers suggest that the hospital formulate Standard Operating Procedures (SOPs) to address the issue of incomplete patient medical records and implement monitoring for the completion of patient medical records.

**Keywords:** Medical Resume, Completeness of medical resume, BPJS Claims

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### Introduction

The important role of healthcare institutions in supporting community health efforts is widely acknowledged, especially in providing quality services. The assessment of health quality is not solely limited to its end results, but also influenced by other aspects contributing to healthcare. One of these aspects is the implementation of health information management based on well-integrated data and information, with medical records being a primary source.

Medical records are not limited to recording activities alone, but also encompass the management that starts from the moment patient information is recorded during medical services. After being recorded, the management of medical records involves secure storage and the retrieval of medical records for specific purposes (Mangentang, 2015 : 162). The patient's medical resume form is one of the important components of the medical record file. The medical resume encompasses aspects of treatment information, medication, and the plan for follow-up patient care. Therefore, the medical resume must be completed comprehensively, accurately, and precisely (Hidayat et al, 2020 : 16).

The completeness of medical records plays a crucial role in ensuring the smoothness and effectiveness of the BPJS claims process. According to Law Number 24 of 2011 concerning the Badan Penyelenggara Jaminan Sosial (BPJS), it is a legal entity aimed at providing social health insurance to the community. This insurance is given to every individual who has paid contributions or received contributions paid by the government. In the procedure of claiming to the BPJS, the hospital must complete and include the required claim requirements as specified, so that the patient's treatment costs can be covered by BPJS Health.

**Health insurance claims** are requests made by healthcare institutions to insurance companies to request payment for services provided to insured members. These claims are submitted by hospitals or other healthcare providers through a claims administration process, aiming to process claim payments legitimately and efficiently according to applicable

regulations. The administrative procedures used in submitting BPJS Health claims utilize the INA-CBGs package system (Amran, 2023 : 152)

In the current era of BPJS, the completeness of filling out patients' medical records has become an extremely crucial matter. This is especially applicable to the completion of medical records for patients receiving outpatient care at Muhammadiyah Hospital in Bandung. These medical records contain information about the patient's diagnosed illness, and this information serves as the foundation for coding personnel to determine the accurate diagnosis code. This has been stipulated in the Practical Technical Guidelines for BPJS Health Claims Verification (2017), which state that the required complete documents include the SEP (Eligibility Verification Letter), proof of service that includes signed diagnosis and procedure details by the Attending Physician, medical records, patient diagnosis code, service cost, and procedures that are entered according to INA CBG'S codes.

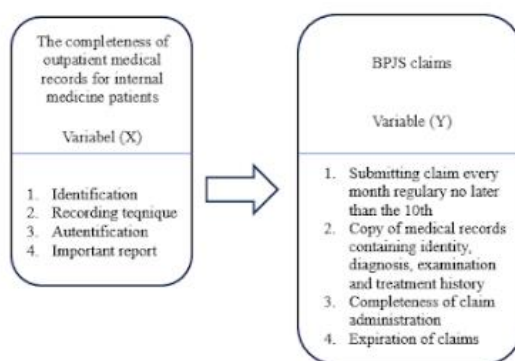
However, there is an issue of incompleteness in filling out outpatient medical records, which ultimately affects the smoothness and effectiveness of BPJS Health claims. Hence, the completeness of medical records is of utmost importance in healthcare services. Some crucial points that need to be filled in the medical records include the patient's name, medical record number, disease diagnosis, provided treatments, and a clear signature and name of the doctor.

The results of interviews conducted by the researcher with casemix staff during the fieldwork practice carried out from March 27th to May 27th, 2023 at Muhammadiyah Bandung Hospital indicate that the completeness level of filling out outpatient medical records is not yet fully optimal. According to the information provided by the staff and the research findings on-site, the internal medicine clinic is one of the departments with the highest number of cases of incomplete patient medical record content compared to other clinics. After patients are examined by doctors, some essential points on the patient's medical record sheet are not fully filled out by the doctor. For instance, the primary diagnosis and doctor's authentication on the patient's medical record sheet.

Therefore, the aim of this study is to assess the extent of the influence of the completeness of outpatient medical records for internal medicine patients on BPJS Health claims at Muhammadiyah Bandung Hospital.

## Methods

A suitable framework of thought will theoretically illustrate the relationship between the variables under investigation. This framework reflects a conceptual model of how theory interacts with factors that have been identified as significant issues (Sugiyono, 2017 : 60).



**Figure 1. Thinking Framework**

## Research methods

This study employs a quantitative method with a descriptive approach. Data collection is conducted through observation, questionnaires, and literature review. The research is carried out at Muhammadiyah Bandung Hospital from March to May 2023. The independent variable in this study is the outpatient medical records for internal medicine patients. The population selected comprises the outpatient medical records for internal medicine patients recorded in

March and April 2023, totaling 3,643 records. Sampling is done using simple random sampling technique, resulting in 97 samples of outpatient medical records. Meanwhile, the dependent variable in this study is BPJS Health claims. The questionnaire is administered to 15 casemix staff members, and the responses are measured using a Likert scale technique to assess attitudes, opinions, and perceptions of individuals or groups regarding social phenomena. Data analysis is conducted using the Statistical Product and Service Solutions (SPSS) software version 25 for statistical analysis.

**Results**

From the research conducted on 97 outpatient medical records of internal medicine clinic patients, the author collected data for completeness analysis meticulously, as follows:

**Table 1. The Completeness of Outpatient Medical Records of Internal Medicine Polyclinics Patient**

No	Indicator	Identification			
		Complete		Incomplete	
		Total	%	Total	%
<b>Patient Identification</b>					
1	No RM	85	88%	12	12%
2	Patient's Name	89	92%	8	8%
3	Date of Birth	89	92%	8	8%
4.	Date of Admission & Discharge	88	91%	9	9%
<b>Average</b>		<b>88</b>	<b>91%</b>	<b>9</b>	<b>9%</b>
<b>Recording Technique</b>					
1	Clearly	91	94%	6	6%
2	Readable	91	94%	6	6%
<b>Average</b>		<b>91</b>	<b>94%</b>	<b>6</b>	<b>6%</b>

No	Indicator	Important Report			
		Complete		Incomplete	
		Total	%	Total	%
<b>Authentication</b>					
1	Doctor's Full Name	88	91%	11	11%
2	Doctor Signature	90	91%	7	7%
<b>Average</b>		<b>88</b>	<b>92%</b>	<b>9</b>	<b>9%</b>
<b>Important Report</b>					
1	Results of physical and supporting examinations	85	88%	12	12%
2	Diagnose	82	85%	15	15%
3	Treatment	87	90%	10	10%
<b>Average</b>		<b>85</b>	<b>88%</b>	<b>12</b>	<b>12%</b>

Results of testing the influence of the completeness of outpatient medical resume on BPJS health claims using the coefficient of determination test with SPSS version 25.

**Table 2. The Result of the Coefficient of Determination (R<sup>2</sup>)**

<b>Model Summary<sup>b</sup></b>				
Model	R	R Square	Adjust R Square	Std. Error of the Estimate
1	0,802	0,643	0,616	1,47535

- a. Predictors: (Constamt), The Completeness of Outpatient Medical Records
- b. Dependent Variable: BPJS Claims

## Discussion

Referencing table 1, the indicators of the analysis results of the completeness of filling out outpatient medical records in the internal medicine outpatient department at Muhammadiyah Hospital Bandung in March and April 2023, the following findings were obtained:

### 1. Patient Identification

In the patient identification indicator, the component with the highest completeness is the patient's name and date of birth, with a total of 89 complete entries out of 97 medical records. This corresponds to a percentage of 92%. On the other hand, the component with the highest incompleteness is the medical record number, with 12 incomplete entries out of 97 medical records. This represents a percentage of 12%

### 2. Recording Technique

In the patient recording technique indicator, the analysis results show an equal number for the "clear" and "legible" indicators. The completeness count is 91 out of 97 medical records, representing a percentage of 94%. Meanwhile, the count of incompleteness is 6 out of 97 medical records, representing a percentage of 6%.

### 3. Authentication

In the authentication indicator, the component with the highest completeness is the doctor's signature, with a count of 90 out of 97 medical records, or a percentage of 91%. Meanwhile, the component with the highest incompleteness is the clear name of the doctor, with a count of 11 out of 97 medical records, or if calculated as a percentage, it's 11%.

### 4. Important Report

In the important report indicator, the component with the highest completeness is the procedure, with a count of 87 out of 97 medical records, or if calculated as a percentage, it's 90%. Meanwhile, the component with the highest incompleteness is the diagnosis, with a count of 82 out of 97 medical records, or if calculated as a percentage, it's 15%.

Based on Table 2, the researcher also conducted a coefficient of determination (R<sup>2</sup>) test to measure the extent of the influence of medical record completeness on BPJS Health claims. The data were collected from the questionnaire responses of 15 casemix officers, and the researcher utilized SPSS version 25 to process the data. The coefficient of determination (R<sup>2</sup>) test result, indicated in the R Square column, is 0.643. This means that the influence of medical record completeness for outpatient cases at the internal medicine clinic on BPJS claims is 64.3%, while the remaining 35.7% is influenced by other variables or errors.

## Problems in Completeness of Outpatient Medical Resume Sheets in the Internal Medicine Polyclinic on BPJS Claims at Muhammadiyah Hospital Bandung

1. Insufficient attention, precision, and occasional negligence in filling out medical record sheets by doctors, nurses, or other healthcare personnel.
2. Standard Operating Procedures (SOPs) regarding the completion of comprehensive medical record sheets have not been clearly integrated.
3. Insufficient supervision over the complete filling of medical record sheets.

## Efforts to Address the Issue of the Influence of Completeness Outpatient Medical Resume in the Internal Medicine Polyclinic on BPJS Claims at Muhammadiyah Hospital Bandung

1. Conducting training, seminars, or guidance sessions by the hospital administration regarding medical records, especially resume medis, to ensure that healthcare staff understand the significance of medical records in a hospital for smooth claim processing.
2. Hospital formulate Standard Operating Procedures (SOPs) to address the issue of incomplete patient medical records.
3. Implement monitoring for the completion of patient medical resumes.

## Conclusion

Based on respondent answers, the data was analyzed using the coefficient of determination test, leading to the conclusion that the completeness of outpatient internal medicine unit medical records significantly affects BPJS claims at Muhammadiyah Hospital in Bandung. This influence is at 64.3%, while the remaining 35.7% is influenced by other variables or errors. Therefore, it can be concluded that there is a very strong relationship between variable X and variable Y, as indicated by the correlation coefficient interval value in the R column, which is 0.802, demonstrating a very strong level of correlation.

Insufficient attention, precision, and occasional negligence in filling out medical record sheets by doctors, nurses, or other healthcare personnel. Standard Operating Procedures (SOPs) regarding the completion of comprehensive medical record sheets have not been clearly integrated. Insufficient supervision over the complete filling of medical record sheets. Therefore, the researchers suggest that the hospital formulate Standard Operating Procedures (SOPs) to address the issue of incomplete patient medical records and implement monitoring for the completion of patient medical records.

## Reference

- Sugiyono. (2017). Metode Penelitian Kuantitatif, Kualitatif, dan R&D
- Mangentang. (2015). Kelengkapan Resume Medis dan Kesesuaian Penulisan Diagnosis Berdasarkan ICD – 10 Sebelum dan Sesudah JKN di RSUD Bahteramas
- Amran. (2023). Prosedur BPJS dan Klaim BPJS oleh Rumah Sakit
- Kepesertaan BPJS. (2015). Buku Panduan Praktis Administrasi Klaim Fasilitas Kesehatan.
- Widjaya .(2017). Manajemen Informasi Kesehatan II
- Undang – Undang Republik Indonesia Nomor 24 Tahun 2011. Tentang Badan Penyelenggara Jaminan Sosial