

EVALUATION OF THE COMPLETENESS OF ELECTRONIC MEDICAL RECORD IMPLEMENTATION BY NURSES AS SUPPORT FOR BPJS HEALTH INSURANCE CLAIMS ELIGIBILITY

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ABSTRACT

Background: Nurses have contribution in improving the quality of filling in Electronic Medical Record data. The prevalence of inappropriate outpatient claims reaches 15% per year and accumulates. Completely filled EMR data correlates with the smooth payment of BPJS Health insurance claims. Evaluation of EMR data for improving EMR quality. This hospital is a type C private hospital with 178 beds.

Purpose: Knowing the completeness of the application of EMR by nurses as a support for BPJS Health insurance claims.

Methods: The design of this research is mix method explanatory sequential, a sample of 2,000 EMR data (N=146,961) quantitative data collection, validated (confirm ability) by deep interview RAP (Rapid Assessment Procedures) interviews to explore the meaning of the numbers obtained in the initial study.

Results: The mean completeness of EMR data evaluated by the Qnote program was 86.8%. The lowest mean related to system review (0.4); family social history (70.1) and medical history (85.8) at the third lowest score. This data is strengthened by interviews with 5 cross-professional EMR stakeholders. Themes: (1) Problems and Needs; (2) Application of EMR; (3) Expectations of EMR in the future.

Conclusion: The complete application of EMR as a support for eligible claims needs to be supported by smart applications, nurses' and doctors' records must be integrated. The hope for the future is to increase the completeness of the EMR so that the verification process is fast and claims payments run smoothly.

Keywords: completeness evaluation, Electronic Medical Record, nurses, eligible claims, Health BPJS Kesehatan

EVALUASI KELENGKAPAN PENERAPAN ELECTRONIC MEDICAL RECORD (EMR) OLEH PERAWAT SEBAGAI PENUNJANG KLAIM LAYAK BAYAR BPJS KESEHATAN

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ABSTRAK

Latar Belakang: Perawat turut berperan meningkatkan kualitas pengisian data EMR (*Electronic Medical Record*). Prevalensi klaim rawat jalan tidak layak mencapai 15% pertahun dan terakumulasi. Data EMR yang terisi lengkap berkorelasi dengan kelancaran pembayaran klaim BPJS Kesehatan. Evaluasi data EMR untuk peningkatan kualitas EMR. Rumah sakit ini adalah rs swasta tipe C dengan jumlah bed 178.

Tujuan: Mengetahui kelengkapan penerapan EMR oleh perawat sebagai penunjang klaim layak bayar BPJS Kesehatan.

Metode: Desain penelitian ini mix method explanatory sequential, sampel 2.000 data EMR (N=146.961) pengambilan data kuantitatif, divalidasi (*confirm ability*) dengan wawancara *deep interview* RAP (*Rapid Assessment Prosedures*) untuk menggali makna angka yang telah diperoleh pada penelitian awal. Hasil kuantitatif dan kualitatif ditampilkan dalam *join display*.

Hasil: Mean kelengkapan data EMR dievaluasi dengan *Qnote program* sebesar 86,8%. Mean tertinggi pada keluhan utama, rencana perawatan dan informasi tindak lanjut. Sedangkan mean terendah terkait ulasan sistem(0,4); riwayat sosial keluarga(70,1) dan riwayat medis (85,8) pada skoring terendah ketiga. Data ini diperkuat dengan wawancara 5 *stakeholder* EMR lintas profesi. Tema: (1) Masalah dan Kebutuhan; (2) Penerapan EMR; (3) Harapan EMR dimasa depan.

Kesimpulan: Kelengkapan penerapan EMR sebagai penunjang klaim layak bayar perlu ditunjang aplikasi pintar yang memudahkan penulisan data, catatan perawat dan dokter harus terintegrasi. Harapan di masa depan, peningkatan kelengkapan EMR sehingga proses verifikasi cepat dan pembayaran klaim berjalan lancar.

Kata Kunci: evaluasi kelengkapan, *Electronic Medical Record (EMR)*, perawat, klaim layak bayar, BPJS Kesehatan