

ABSTRAK

Biaya pelayanan kesehatan semakin meningkat tiap tahunnya dengan biaya terapi kanker menempati urutan ke 3 dari 10 peringkat terbesar biaya penyakit katastropik. Prevalensi tiga penyakit kanker tertinggi pada tahun 2020 kanker payudara 16,6 %, kanker serviks 9,2% dan kanker paru-paru 8,8%. Tujuan penelitian ini untuk mengetahui gambaran biaya medis langsung, determinan yang mempengaruhi biaya kanker dan perbandingan biaya klaim berdasarkan tarif INA-CBG's dengan biaya medis langsung penyakit kanker payudara, serviks dan paru-paru di rumah sakit.

Penelitian ini dilakukan dengan pendekatan observasional dengan rancangan penelitian *cross sectional* berdasarkan perspektif rumah sakit. Data diambil secara *retrospektif* dari catatan medis dan data keuangan pasien. Subyek penelitian ini pasien peserta Jaminan Kesehatan Nasional (JKN) yang menderita kanker payudara, kanker serviks dan kanker paru-paru pada bulan Januari-Desember 2020 di RS Kanker Dharmais yang memenuhi kriteria inklusi dengan usia 20-60 tahun. Data determinan pada penelitian ini dilihat dari tiga karakteristik yaitu karakteristik pasien, karakteristik penyakit, karakteristik terapi. Komponen biaya medis langsung dilihat dari masing-masing penyakit berdasarkan biaya utama terdiri dari biaya kemoterapi, biaya radioterapi, dan biaya prosedur bedah. Biaya terapi tambahan meliputi biaya obat lainnya, biaya laboratorium, biaya konsultasi dan dokter, biaya akomodasi kamar, administrasi dan biaya non pembedahan. Analisis data determinan dilakukan dengan uji statistik Anova, *Paired T-test* jika data terdistribusi normal, dan Kruskal wallis jika data tidak terdistribusi normal.

Rata-rata total biaya pasien kanker payudara sebesar Rp.30.663.935 ± Rp18.789.304; kanker serviks sebesar Rp.29.890.009 ± Rp.14.807.735; kanker paru-paru sebesar Rp.20.864.030 ± Rp.14.927.562. Komponen biaya tertinggi pada rawat inap adalah biaya pembedahan pada kanker payudara sebesar 36,99%, biaya radioterapi pada kanker serviks sebesar 38,82% dan pada kanker paru-paru komponen biaya tertinggi adalah 39,41% pada pembedahan. Determinan yang mempengaruhi biaya terapi pasien rawat inap pada penelitian ini adalah kelas, Stadium dan LOS (kanker payudara); jenis kelamin dan LOS (kanker paru-paru); dan pada pasien rawat jalan dipengaruhi oleh kelas, usia dan Stadium (kanker serviks); kelas dan usia (kanker paru-paru). Terdapat perbedaan signifikan pada tarif biaya medis langsung dengan tarif INA CBG's dengan rentang defisit pada kanker payudara sebesar 6,98%-22,89% pada biaya tindakan kemoterapi; 56,11% pada radioterapi; dan 1,38%-69,91% pada tindakan pembedahan. Rentang defisit pada kanker serviks 10,01%- 39,31% pada biaya tindakan kemoterapi; 27,36%-47,35% pada tindakan radioterapi; dan 3,25%–87,25% pada tindakan pembedahan. Kanker paru-paru rentang defisit sebesar 29,19%-65,40% pada tindakan kemoterapi; 40,35% pada tindakan radioterapi; 24,73%-87,13% pada tindakan pembedahan. Biaya defisit tertinggi pada kanker payudara tindakan Prosedur Pada Kulit, Jaringan Bawah Kulit Dan Payudara Berat (L-1-50-I); pada kanker serviks Tindakan Radioterapi Ringan (C-4-12-I) dan paru-paru tindakan Kemoterapi Ringan (C-4-13-I).

Kata kunci : Kanker Payudara, Kanker Serviks, Kanker Paru-paru, Biaya Determinan, INA-CBG's

ABSTRACT

The cost of health services is increasing every year with the cost of cancer therapy ranking 3rd out of 10 largest rankings of catastrophic disease costs. The prevalence of the three highest cancers in 2020 was breast cancer 16.6%, cervical cancer 9.2% and lung cancer 8.8%. The purpose of this study was to determine the description of direct medical costs, determinants that affect cancer costs and a comparison of claim costs based on INA-CBG's rates with direct medical costs for breast, cervical and lung cancer in hospitals.

This study was conducted using an observational approach with a cross-sectional study design based on the hospital perspective. Data were taken retrospectively from medical records and patient financial data. The subjects of this study were Jaminan Kesehatan Nasional (JKN) participants who suffered from breast cancer, cervical cancer and lung cancer in January-December 2020 at Dharmais Cancer Hospital who met the inclusion criteria with an age of 20-60 years. Determinant data in this study were seen from three characteristics, namely patient characteristics, disease characteristics, and therapy characteristics. The direct medical cost components are seen from each disease based on the main costs consisting of chemotherapy costs, radiotherapy costs, and surgical procedure costs. Additional therapy costs include other drug costs, laboratory costs, consultation and doctor costs, room accommodation costs, administration and non-surgical costs. Determinant data analysis was carried out using the Anova statistical test, Paired T-test if the data was normally distributed, and Kruskal Wallis if the data was not normally distributed.

The average total cost of breast cancer patients was IDR 30,663,935 \pm IDR 18,789,304; cervical cancer was IDR 29,890,009 \pm IDR 14,807,735; lung cancer was IDR 20,864,030 \pm IDR 14,927,562. The highest cost component in inpatient care was the cost of surgery for breast cancer at 36.99%, the cost of radiotherapy for cervical cancer was 38.82% and for lung cancer the highest cost component was 39.41% for surgery. The determinants that affect the cost of inpatient therapy in this study are class, stage and LOS (breast cancer); gender and LOS (lung cancer); and in outpatients influenced by class, age and stage (cervical cancer); class and age (lung cancer). There is a significant difference in direct medical cost rates with INA CBG's rates with a deficit range in breast cancer of 6.98% -22.89% in chemotherapy costs; 56.11% in radiotherapy; and 1.38% -69.91% in surgery. The deficit range in cervical cancer is 10.01% - 39.31% in chemotherapy costs; 27.36% - 47.35% in radiotherapy; and 3.25% - 87.25% in surgery. Lung cancer deficit range is 29.19% - 65.40% in chemotherapy; 40.35% in radiotherapy; 24.73%-87.13% in surgical procedures. The highest deficit cost in breast cancer is the procedure on the skin, subcutaneous tissue and breasts Heavy (L-1-50-I); in cervical cancer Light Radiotherapy Action (C-4-12-I) and lungs Light Chemotherapy action (C-4-13-I).

Keywords: Breast Cancer, Cervical Cancer, Lung Cancer, Determinant Cost, INA-CBG's