

ABSTRAK

Latar Belakang : Pada tahun 2023, sekitar 1,3 juta penduduk Indonesia meninggal akibat penyakit kronis. Program Rujuk Balik (PRB) merupakan salah satu strategi BPJS Kesehatan dalam pengelolaan pasien penyakit kronis untuk mempertahankan kualitas hidup. Namun, capaian PRB di Daerah Istimewa Yogyakarta pada tingkat FKRTL masih rendah, dengan hanya 7 dari 30 rumah sakit memenuhi target PRB hingga Desember 2024. Oleh karena itu, penelitian ini bertujuan mengidentifikasi implementasi Program Rujuk Balik bagi peserta Jaminan Kesehatan Nasional di unit rawat jalan RSUAD (Rumah Sakit Universitas Ahmad Dahlan).

Metode : Penelitian ini menggunakan metode deskriptif kualitatif. Pengumpulan data penelitian menggunakan data primer. Data primer dikumpulkan melalui metode wawancara mendalam terhadap DPJP, manajemen dan staff, pasien PRB serta staff BPJS Kesehatan. Analisa dilakukan untuk mengetahui bagaimana implementasi program rujuk balik pasien jaminan kesehatan nasional di unit rawat jalan RSUAD.

Hasil : Implementasi layanan PRB di RSUAD dipengaruhi oleh adanya pengetahuan, sikap dan persepsi informan yang masih kurang mengenai layanan PRB di RSUAD. Alur pelayanan sudah dipahami oleh informan RSUAD. Belum adanya SPO dan monitoring yang tertulis mengatur jalannya PRB walaupun ada surat edaran untuk DPJP. Adanya kebijakan yang adaptif berupa otomatisasi system informasi untuk deteksi pasien potensi PRB di RSUAD. Kompleksitas layanan PRB diantaranya faktor sosial budaya, akses ke fasilitas kesehatan, beban FKTP, ketersediaan obat dan ego sektoral.

Kesimpulan : RSUAD melaksanakan layanan PRB dengan adaptif. Adanya faktor karakteristik individu, pengaturan internal dan eksternal, proses implementasi serta karakteristik intervensi yang mempengaruhi jalannya layanan PRB.

Kata kunci : PRB, BPJS Kesehatan, Rumah Sakit Universitas Ahmad Dahlan

ABSTRACT

Background: In 2023, around 1.3 million Indonesian residents died due to chronic diseases. The Back-Referral Program (BRP) is one of BPJS Health's strategies in managing chronic disease patients to maintain their quality of life. However, the achievement of PRB in the Special Region of Yogyakarta at the FKRTL level remains low, with only 7 out of 30 hospitals meeting the PRB target by December 2024. Therefore, this study aims to identify the implementation of the Referral Back Program for National Health Insurance participants in the outpatient unit of RSUAD (Ahmad Dahlan University Hospital).

Methods: This study used a qualitative descriptive method. Research data collection employed primary data. Primary data were obtained through in-depth interviews with DPJP (attending physicians), management and staff, PRB patients, as well as BPJS Kesehatan staff. The analysis was carried out to determine how the referral back program for national health insurance patients is implemented in the outpatient unit of RSUAD

Results: The implementation of PRB services at RSUAD is influenced by the limited knowledge, attitudes, and perceptions of the informants regarding PRB services at RSUAD. The service flow has already been understood by RSUAD informants. There is no written SOP or monitoring system regulating the implementation of PRB, although a circular letter has been issued for the attending physicians (DPJP). An adaptive policy exists in the form of automated information systems to detect potential PRB patients at RSUAD. The complexity of PRB services includes socio-cultural factors, access to healthcare facilities, the workload of primary healthcare providers (FKTP), drug availability, and sectoral ego.

Conclusion: RSUAD implements PRB services adaptively. Individual characteristics, internal and external settings, implementation processes, and intervention characteristics all influence the course of PRB services.

Keywords: BRP, BPJS Health, Ahmad Dahlan University Hospital