

PENGARUH *CLINICAL PATHWAY* SPONDILITIS TUBERKULOSA TERHADAP LAMA RAWAT DAN BIAYA RAWAT PASIEN DI RSUP NASIONAL DR. CIPTO MANGUNKUSUMO JAKARTA

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ABSTRAK

Latar belakang:

Penanganan Spondilitis Tuberkulosa salah satunya operatif dengan tindakan debridement dan stabilisasi segmen tulang belakang bila didapatkan ketidakstabilan.

Tindakan operasi pada Spondilitis Tuberkulosa dan implant yang digunakan belum termasuk spesial prosedur dan spesial prothesa yang bisa dilakukan *Top-Up* dalam sistem klaim pasien Jaminan Kesehatan Nasional (JKN) di Indonesia.

Salah satu upaya peningkatan mutu di era JKN adalah penerapan *clinical pathway*. Efektifitas penggunaan *clinical pathway* sebagai alat kendali mutu dan biaya memang masih menjadi perdebatan. Data klaim BPJS bulan Januari – Desember 2014 didapatkan total selisih negatif maka peneliti ingin menilai pengaruh *clinical pathway* Spondilitis Tuberkulosa terhadap lama rawat dan biaya rawat.

Metode:

Penelitian ini merupakan jenis penelitian Deskriptif Kuantitatif dengan menggunakan desain penelitian *one post test only group*. Data retrospektif diambil dari tahun 2013 – 2014 berupa data kuantitatif.

Hasil Penelitian :

Penelitian ini menunjukkan hasil tidak ada perbedaan ($p=0.691$) lama rawat antara pasien sebelum penerapan *clinical pathway* (14 hari) dan sesudah penerapan *clinical pathway* Spondilitis Tuberkulosa (13 hari). Biaya rawat juga tidak berbeda ($p=1$) pada pasien sebelum penerapan *clinical pathway* Spondilitis Tuberkulosa (Rp 93.932.369) dan setelah penerapan *clinical pathway* (Rp 97.317.193). Biaya rawat pasien juga tidak dipengaruhi harga implant ($p=0.316$), namun dipengaruhi oleh merk implant ($p=0.004$).

Kesimpulan

Kesimpulan penelitian ini adalah tidak ada pengaruh *clinical pathway* Spondilitis Tuberkulosa terhadap lama rawat dan biaya rawat pasien.

Kata kunci:

Clinical Pathway, Spondilitis Tuberkulosa

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THE EFFECT OF SPONDYLITIS TUBERCULOSA'S CLINICAL PATHWAY TO LENGTH OF STAY AND HOSPITAL COST FOR INPATIENT AT CENTRE NATIONAL GENERAL HOSPITAL Dr. CIPTO MANGUNKUSUMO JAKARTA

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ABSTRACT

Background: One of the Spondylitis Tuberculosis treatment is surgery with debridement and stabilization of spinal segments when obtained instability. Procedure surgery and implants that are used do not include special procedures and special prosthesis can do Top-Up in the patient's system of National Health Insurance claims (JKN) in Indonesia. One quality improvement efforts in JKN era is the implementation of clinical pathways. Effective use of clinical pathways as a means of quality control and the cost is still a debate. The claims data BPJS January - December 2014 obtained the total negative difference, the researchers wanted to assess the effect of clinical pathways on the length of tuberculosis spondylitis and hospitalization costs.

Method:

This research is descriptive research with quantitative research design post test only one group. Retrospective data retrieved from the year 2013 - 2014 in the form of quantitative data.

Result:

This study shows the results of no difference ($p = 0.691$) between the length of the patient prior to the application of clinical pathways (14 days) and after implementation of clinical pathways tuberculosis spondylitis (13 days). Cost of care is no different ($p = 1$) in patients before the implementation of clinical pathways tuberculosis spondylitis (Rp 93,932,369) and after the implementation of clinical pathways (Rp 97,317,193). The cost of patient care is also not affected the price of the implant ($p = 0.316$), but influenced by the brand of implant ($p = 0.004$).

Conclusions :

The conclusion that there was no effect of clinical pathways on the length of tuberculosis spondylitis and cost of patient care.

Keywords:

Clinical Pathway, Spondylitis Tuberculosis

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