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Open Access Maced J Med Sci. 2022 Apr 07; 10(T8):1-4. 1 Scientific Foundation SPIROSKI, Skopje, Republic of Macedonia Open Access Macedonian Journal of Medical Sciences. 2022 Apr 07; 10(T8):1-4. https://doi.org/10.3889/oamjms.2022.9454 eISSN: 1857-9655 Category: T8 –"APHNI: Health Improvement Strategies Post Pandemic Covid-19" Section: Public Health Education and Training A Comparison of Patient Satisfaction When Using the Insured and Non-insured in Public Health Center (Puskesmas Kasihan 1) Bantul, Indonesia Fatma Siti Fatimah*, Sumarni Mars, Raden Jaka Sarwadhamana, Rizka Mulyani, Putri Daru Handayani Department of Hospital Administration, Faculty of Health Science, Universitas Alma Ata, Yogyakarta, Indonesia Abstract BACKGROUND: In Indonesia, the health sector has experienced a very significant development. Fair and equi table health care is one way to fulfill the health rights of each individual. Therefore, puskesmas are required to provide good service through to with needs.

creation service will create customer satisfaction for service users when using health assurance and non-assurance. AIM: This was know comparison patient when the and in Health Center (Puskesmas Kasihan 1) Bantul, Indonesia. METHODS: This study was a cross-sectional study, with 222 samples with 111 respondents using health assurance and 111 non-assurance. Samples were collected with a cluster sampling technique taken from nine service polyclinics in Puskesmas Kasihan 1 Bantul. Data were analyzed using independent sample t-test. RESULTS: The found the patient with insurance 34.76 than average satisfaction non-health was Based the of analysis, mean sd of patient satisfaction with health insurance was 29.10 ± 3.04 compared to the satisfaction of non-health insurance patients, 34.76 3.61 a value 0.000, means there a difference patient satisfaction using the insured and non-insured.

CONCLUSIONS: Patients when using the health insured are more satisfied than patient's non-insured. Edited by: Sasho Stoleski Citation: Fatimah FS, Mars S, Sarwadhamana RJ, Mulyani R, Handayani RD. A Comparison of Patient Satisfaction When Using the Insured and Non-insured in Public Health Center (Puskesmas Kasihan 1) Bantul, Indonesia. Open Access Maced J Med Sci. 2022 Apr 07; 10(T8):1-4.

https://doi.org/10.3889/oamjms.2022.9454 Keywords: Patient satisfaction; JKN; Noninsured; Puskesmas, Public Health Center *Correspondence: Fatma Siti Fatimah, Department of Hospital Administration, Faculty of Health Science, Universitas Alma Ata, Yogyakarta, Indonesia. E-mail: fatmasitifatimah@almaata.ac.id Received: 21-Mar-2022 Revised: 28-Mar-2022 Accepted: 30-Mar-2022 Copyright: © 2022 Fatma Siti Fatimah, Sumarni Mars, Raden Jaka Sarwadhamana, Rizka Mulyani, Putri Daru Handayani Funding: This research did not receive any financial support Competing Interests: The authors have declared that no competing interests exist Open Access: This is an open-access article distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC 4.0) Introduction Puskesmas are a primary (basic) health facility, where patients receive initial care before being referred to secondary facility as hospital [1].

Puskesmas one the health facilities that are the benchmark of health development in Indonesia [2]. The population of Indonesia is increasing from to with increasing it necessary add health facilities and JKN Kesehatan Indonesia National insurance) encourage people to be more aware of health [3]. Based data the of (Kemenkes) 2019, number Puskesmas the Special of by or is Puskesmas, of inpatient and 72 Puskesmas Puskesmas a health that always to quality services.

is challenge health to change paradigm consumers patients health services, primary healthcare, are much better with the target patient [5]. targets in patient are services, service standards, and the provision of information and education Customer has significant effect on customer loyalty [7]. The that developed the media is about complaints from the public that there are differences the services by facilities, in this case the puskesmas to general patients compared to patients using JKN, where the puskesmas prioritize patient compared the services patients JKN JKN opened up accessibility services, the variation rates hospital has a impact participants Based the research, the longest waiting time at Puskesmas Lubuk Begalung 1 h min.

30% 70% patients said that they were not satisfied with the health services at the Puskesmas [10] and quality of service in Puskesmas impact on patient satisfaction [11]. Based this the is interested conducting with aim knowing comparison patient when using insured non-insured primary services (Puskesmas Kasihan 1) Bantul, Indonesia. 2 https://oamjms.eu/index.php/mjms/index Methods Research design This of is analytic

with cross-sectional design.

analysis research uses to analyzed using statistical and results generalized the from the is The research is activity collecting in study is out at in certain and research is only one data (observation) for all the variables studied, during the study. Respondents In study, sampling used is sampling, cluster type, namely, the sampling technique carried out by grouping research or units are to each With total 222, 111 each sample using insurance and non-insurance. Instruments Data were collected using questioner, which has been test 30 at Kasihan the of validity r > r table the obtained alpha value 0.6 a > so can concluded that patient questionnaire declared valid and reliable (Table 1).

Table 1: Validity and reliability test results customer satisfaction Item r table product moment r count (correlation) Cronbach alpha Information Q1 0,361 0,833 0,937 Valid and Reliable Q2 0,361 0,755 0,940 Valid and Reliable Q3 0,361 0,655 0,945 Valid and Reliable Q4 0,361 0,774 0,940 Valid and Reliable Q5 0,361 0,843 0,937 Valid and Reliable Q6 0,361 0,865 0,936 Valid and Reliable Q7 0,361 0,901 0,935 Valid and Reliable Q8 0,361 0,821 0,938 Valid and Reliable Q9 0,361 0,722 0,943 Valid and Reliable Q10 0,361 0,859 0,936 Valid and Reliable Q 0,361 0,805 0,938 Valid and Reliable Data collection Data was out at research in form a file distributing questionnaires to respondents with a number of samples that been by previous This implementation is carried out by fulfilling the health protocol to procedures Puskesmas Kasihan I Bantul Regency. Before researcher the questionnaire sheet to the respondents, the researcher will the objectives the for out questionnaire.

After the objectives and procedures of the research, respondents were to out informed form. Furthermore, respondents will be given a questionnaire sheet to be filled in. This uses questionnaire measure patient due the of studies, are significant between the of satisfaction the and the questionnaire method [12]. Data analysis Bivariate analysis is a data analysis conducted on variables analyze differences the variables. research have tested normality, Kolmogorov–Smirnov the data not distributed that test a test Mann–Whitney and results the as parametric to determine mean standard analyzed using the independent sample t-test.

Ethical clearance This has approval research from Ethics of the of Sciences, Ata on 2021 KE/AA/IV/10402/EC/2021. Respondents were given an explanation of the purpose and of research, who to participate then signed the informed consent. During the the personal will be saved confidential, no side effects will be caused and respondent free withdraw the at any time. Results Based on Table 2, it is known that the majority of respondents gender female, characteristics of respondents according to age are most patients aged 17-25, characteristics respondents to are majority housewives, the of

according the last level high These show that data characteristic's graph ic respondents from the group are the same. Based Table 3, is that is significant between satisfaction with insured non-insured a of Mean \pm SD on respondents with health assurance at 31.15–38.37 in assurance at 26, 06-32.14. Open Access Maced J Med Sci. 2022 Apr 07; 10(T8):1-4. 3 Discussion Health service indicators the most determinants patient [6]. Patient is important of outcomes [13].

There is no doubt patient satisfaction that is import indicator health [13]. result this shows results not any difference the of primary care between and residence. this was conducted rural areas.

Table Differences customer satisfaction with health insured between non-insured Variables Mean \pm SD p value Customer satisfaction with health assurance 34.76 \pm 3.61 <0,001 Customer satisfaction non-health assurance 29.10 \pm 3.04 The test show there a difference customer with assurance non-health Moreover, average in with health supported previous that analysis on of satisfaction national insurance assistance recipients, and national health insurance non- contribution recipients significant difference the satisfaction national health contribution recipients national insurance contribution Recipients Same research Fenny, number patients use were at waiting time, friendliness of staff, satisfaction at laboratory or X-ray although not statistically significant [15]. This shows patient with services more on in group with because do incur when receiving supported research which shows overall, (75.5%) the were satisfied with the outcome of health care provided at the NHIS (National Health Insurance Scheme) clinic. A statistically association = .00) by results show average of satisfaction the (Jaminan Aceh) group significantly primary care practices to the that patients [18].

The results of the previous research conducted by 2020, that insurance was to increase satisfaction and of patients This that Government Indonesia's to health status establishing can the goals also improved the of empathy, responsiveness, the of patients strongly by satisfaction. can satisfaction loyalty JKN in hospitals Puskesmas. that in study that the did conduct analysis the factors that affect patient satisfaction in the two groups. Conclusions Characteristics the in groups as The are age range years, as housewife, the education high There difference patient satisfaction using insured non-insured Public Center Kasihan Bantul, Indonesia.

when the insured more satisfied than patient's non-insured. Public Health Center to attention non-insured to patient and an on improving service quality. Author Contribution First author – initiated idea, research question, and the searching method. Coauthors were contributed to substantially data analysis and discussion. Ethical Approval The committee Universitas Ata with the number KE/AA/IV/10402/EC/2021 Table 2: Demo graphic data of group with insured and group non-insured Variables

Group with insured (n = 111) Group non-insured (n = 111) n % n % Gender Male Female 32 79 28,2 71,2 38 73 34,2 65,8 Age 17–25 26–35 36–45 46–55 56–65 33 27 20 14 17 29,7 24,3 18,0 12,6 15,3 24 21 21 22 23 21,6 18,9 18,9 19,8 20,7 Work Employment of civil servants Labor Private employees Entrepreneurs Housewives Not working 3 22 14 14 40 18 2,7 19,8 12,6 12,6 36,0 16,2 6 29 19 7 34 16 5,4 26,1 17,1 6,3 30,6 14,4 Last Education Elementary school Junior high school High school Higher education (D3, S1, S2, S3) 14 14 62 21 12,6 12,6 55,9 18,9 17 23 51 20 15,3 20,7 45,9 18,0 4 https://oamjms.eu/index.php/mjms/index Acknowledgments All authors would like to thank the participation of the respondents which join this research.

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