# THE EFFECT OF COMPLETENESS OF MEDICAL RECORDS OF OUTPATIENT IN THE INTERNAL MEDICINE POLYCLINIC ON BPJS CLAIMS AT MUHAMMADIYAH HOSPITAL BANDUNG

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*Abstract*

*For reasons including hospital reporting and BPJS Health claims activities, it is critical that patient medical record files be accurate and comprehensive while handling medical records. The purpose of this research is to find out how the BPJS claim procedure at Muhammadiyah Bandung Hospital is affected by the thoroughness of the MR file of internist poly outpatients. In this work, 98 samples of MR data were analyzed utilizing descriptive techniques that used quantitative methodologies. As a whole, patient files are 80% complete according to this survey, with 5% incomplete in the billing section, 7% in the SEP, 5% in the résumé, 2% in referrals, and 2% in supporting documents. According to the results of the Chi-Square test, there is a correlation between the thoroughness of patient records and the timeliness of BPJS claims; hence, an improvement in the thoroughness of patient records would result in a more rapid processing of BPJS claims. A comprehensive review of patient records prior to BPJS claim submission, prompt communication with DPJP or service providers in the event of incomplete MR files, and evaluation of officers' performance in relation to issues that lead to incomplete BPJS claim filing are all possible solutions.*

*Keywords: Completeness, File, Claim, BPJS*

## INTRODUCTION

Often referred to as Internal Medicine, Internist Polyclinic In the polyclinic, patients can receive treatment for diseases that attack several systems and organs of the body, including the cardiovascular system, respiratory system, digestive tract, liver, kidneys, and immune system. The main focus of this polyclinic is on identifying and treating more complex and serious health conditions than can be treated by general practitioners (Brawijaya University Hospital, 2023).

WHO (World Health Organization) records in 2022 have shown one example of internal medicine in Indonesia has a strong program in the care and prevention of TB (Tuberculosis), and is implementing all technical aspects described in the End TB Strategy, this country has not made sufficient progress to achieve the goal of eliminating TB by 2030, as set out by the End TB Strategy and the Sustainable Development Goals (SDGs). This is due to factors such as malnutrition, smoking habits, diabetes mellitus, and HIV infection which are drivers of the spread of tuberculosis in Indonesia. A hospital is a type of health facility. Based on Ministerial Regulation Number 3 of 2020 concerning Hospital Classification and Licensing, a facility is considered a hospital if it provides full inpatient, outpatient, and emergency health services. Public health services are the obligation of every hospital. As a general rule, general hospitals provide a variety of health services, including but not limited to: basic outpatient medical services, emergency installations, nursing, obstetrics, and recording and pharmacy. According to Suraja, Yohannes (2019), one of the most important parts in providing health services is recording patient medical records. This is because patient medical records contain useful information for many other fields, including public health, education, administr

ation, documentation, legislation, and finance. "Medical Records are documents containing patient identity data, examinations, treatments, procedures and other services that have been provided to patients." (Regulation of the Minister of Health Number 24 of 2022 Article 1 Paragraph 1), while "Electronic Medical Records are Medical Records created using an electronic system intended for Medical Record organizers." (Article 1 Paragraph 2), comes from the same source.

Because its primary responsibility is to process and report data related to patient letter archiving to produce correct information, medical record management is an important component of the infrastructure of every healthcare facility. To facilitate hospital reporting activities and BPJS Kesehatan claims for patients registered as BPJS participants, patient medical record files must be accurate and complete. (Suraja, Yohannes, 2019). Article 1 of Regulation Number 1 of 2014 states the purpose of establishing BPJS Kesehatan as a legal entity that manages the health insurance program. An important aspect of the hospital is to ensure the accuracy and completeness of records related to health services, membership administration, and service administration. Procedures for submitting BPJS Kesehatan claims. An important component in BPJS patient files is their completeness; otherwise, the claims process may be hampered. When submitting a BPJS outpatient claim, it is important to have all the necessary medical records. This includes the following: Participant Eligibility Letter (SEP), medical resume, references, control letters, supporting examination results, and accurate bill amounts (attached cost amounts). According to research by Mulyani et al. (2022), checking the completeness of files must be carried out with great care because all activities, both filling in fi

les by medical personnel and processing files by other health work ers, must be accounted for. Medical records officers are required to return incomplete files and immediately request that the DPJP a nd medical personnel providing patient services complete the missi ng information. Third parties such as BPJS cause delays in insuran ce claims due to incomplete medical record data. The findings of R ahmatiqa et al. (2020) confirm this, showing that claim submission s are hampered when patient files do not meet the completeness req uirements. Claim payment submissions depend on the completeness of medical records, according to other research (Wattimena, 2022). Th is highlights the importance of managing medical records/health in formation. This is also in line with research findings that found certain gaps in BPJS outpatient files for internal medicine clinic s, including missing social and medical information for several pa tients. This study intends to use these findings to determine how much influence the completeness of patient medical record files ha s on the hospital's BPJS claim procedure and the total number of c laims submitted and processed.

## METHODOLOGY

A technique or objective strategy for collecting data with t he aim of producing and validating it so that it can be used to ov ercome difficulties in a particular industry is called research me thodology. (Dr. Sri Rochani Mulyani, SE., M.Si, 2021). With variab le x as the dependent variable, this study uses a quantitative des criptive methodology, namely "Completeness of Outpatient Medical R ecord Files of the Internal Medicine Polyclinic" and variable y, n amely "BPJS Claims". The quantitative method in this study aims to determine the completeness of medical record files affecting BPJS

Health claims. From February to April 2024, a total of 6,173 RM fi les and thirteen casemix staff members became the population of th is study, which was conducted at the internal medicine clinic. Whi le the sample was 98 medical records which were medical record fil es of the internal medicine polyclinic for submitting BPJS Health claims obtained from the Slovin formula calculation as follows:

$$n = \frac{N}{1+(N.e^2)} = \frac{6137}{1+(6137.(0,1)^2}$$

$$= \frac{6137}{1+61,37} = \frac{6137}{62,37} = 98,39 = 98$$

Description:

n = Sample size

N = Population size

e = critical value (error limit (0.1))

The samples taken were obtained from a random sampling metho d, namely the Medical Records of the internal polyclinic for submi tting BPJS Health claims as a population with equal opportunities to be selected as a sample. This study uses a checklist table as a research tool. Data and information for this study come from vario us sources, including surveys, literature reviews, and observation al data.

RESULTS AND DISCUSSION 1. Research Results A. Results of Compl eteness of BPJS Outpatient Files of Internal Medicine Polyclin ic To find out whether the Completeness of Outpatient Files of Internal Medicine Polyclinic affects the BPJS Claim process at Muhammadiyah Hospital Bandung, a check of BPJS outpatient file s of internal medicine polyclinic was carried out using a chec

klist table. Data processing was carried out by analyzing the t
otal complete and incomplete files from the results of the che
cklist table for the completeness of BPJS outpatient files of i
nternal medicine polyclinic (variable X), namely:

Completeness of patient files = $\frac{number\ of\ complete\ patient\ files}{all\ patient\ files\ examined}$ x 100

$$= \frac{78}{98} \text{ x } 100 = 80\%$$

Incomplete of patient files = $\frac{number\ of\ incomplete\ patient\ files}{all\ patient\ files\ examined}$ x 100

$$= \frac{20}{98} \text{ x } 100 = 20\%$$

This calculation leads us to the conclusion that 80% of BPJS p
atient files for outpatient internal medicine clinics are comp
lete. Meanwhile, incomplete BPJS outpatient files for internal
medicine polyclinics are 20% of the total files studied.

Table 1 Details of Incomplete BPJS Claim Forms for Outpatients
of the Internal Medicine Polyclinic at Muhammadiyah Hospital,
Bandung

| No | Patient Identification | Sample | Incomplete | |
|----|------------------------|--------|--------|-----|
| | | | Number | % |
| 1 | *Biling* | 98 | 5 | 5% |
| 2 | SEP | 98 | 7 | 7% |
| 3 | Resume | 98 | 5 | 5% |
| 4 | Refferal | 98 | 1 | 1% |
| 5 | Supporting | 98 | 2 | 2% |

*Source: Internal Medicine Polyclinic Files February-April 2024*

Based on Table 1, it is known that several parts of the BPJS claim form for Outpatients of the Internal Medicine Polyclinic that are still incomplete are in the billing section by 5%, SEP by 7%, Resume by 5%, Referral by 1%, and supporting by 2%. It can be concluded that from the entire medical record files of BPJS internal medicine polyclinic patients, the incompleteness of the form files for the BPJS Health claim process is relatively low compared to the completeness of the files.

A. BPJS Patient Claims Results Table 2 BPJS Health Claims Questionnaire Results Data at Muhammadiyah Hospital Bandung

| Respondent Number | BPJS Claims | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | P1 | P2 | P3 | P4 | P5 | P6 | P7 | P8 | Total |
| 1 | 4 | 4 | 5 | 4 | 5 | 4 | 4 | 4 | 34 |
| 2 | 5 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 38 |
| 3 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 5 | 38 |
| 4 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 24 |
| 5 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 5 | 34 |
| 6 | 5 | 5 | 5 | 5 | 4 | 5 | 5 | 5 | 39 |
| 7 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 40 |
| 8 | 4 | 3 | 3 | 4 | 3 | 4 | 3 | 3 | 27 |
| 9 | 3 | 4 | 4 | 3 | 4 | 3 | 4 | 5 | 30 |
| 10 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 40 |
| 11 | 5 | 4 | 5 | 5 | 5 | 5 | 4 | 4 | 37 |
| 12 | 4 | 5 | 4 | 4 | 4 | 4 | 5 | 5 | 35 |
| 13 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 40 |

*Source: Processed by researchers (2024)*

To analyze BPJS Claims (Variable Y), refer to the table above and compare your overall score with the optimal score for the complete statement:

Maximum score : 5 x 13 x 8 = 520

Minimum score  : 1 x 13 x 8 = 104

Data processing of Health Service Cost Claims (Variable Y) resulted in a total score of 456. After reviewing the submitted Health Service Cost Claims, officers reached the following conclusions:

$$\frac{456}{520} \text{ x } 100\% = 87,69\% = 87,7\%$$

Overall, 87.7 percent of BPJS patient claims for outpatient internal medicine came from this calculation.

A. Analysis of Completeness of Patient Files Table 3 Frequency Distribution of Completeness of Patient Files

| Category | Frequency | Percentage |
|---|---|---|
| Complete | 78 | 80% |
| Incompelete | 20 | 20% |

*Source: Processed by Researchers(2024)*

Based on the table above, it was found that the BPJS outpatient patient files for internal polyclinics at Muhammadiyah Hospital Bandung were 78 RM files with a percentage of 80%. While for incomplete files were 20 RM files with a percentage of 20%.

A. BPJS Claim Analysis Table 4 Frequency Distribution of BPJS Claims

| Category | Frequency | Percentage |
|----------|-----------|------------|
| Totally Agree | 56 | 53, 8% |
| Agree | 32 | 30, 8% |
| Uncertain | 16 | 15, 4% |
| Disagree | 0 | 0 |
| Totally disagree | 0 | 0 |

*Source: Processed by Researchers(2024)*

From the data in the table, it can be concluded that from the BPJS claims submitted by the outpatient internal medicine poly clinic of Muhammadiyah Hospital Bandung, 53.8% were considered Totaally Agree, 30.8% Agree, and 15.5% Uncertain.

A. Validity Test

Sugiyono (2021) stated that "valid is the validity of an instrument." A question item is said to be certain or valid if r-count ≥ r-table with a significance of 5% or 0.05 and N = 13 (N = number of trial respondents).

Validity criteria:

The question is said to be valid if: r count ≥ r table The question is said to be invalid if: r count ≤ r table Technically, the research applied by the researcher uses SPSS 25 software. The instrument test was aimed at 13 case mix officers with a significance level of 5% (0.05) with N = 13, and an r table of 0.553 was obtained (according to the r product moment table).

The following is r product moment table

## NILAI-NILAI r PODUCT MOMENT

| N | Taraf Signifikan 5% | Taraf Signifikan 1% | N | Taraf Signifikan 5% | Taraf Signifikan 1% | N | Taraf Signifikan 5% | Taraf Signifikan 1% |
|---|---|---|---|---|---|---|---|---|
| 3 | 0,997 | 0,999 | 27 | 0,381 | 0,487 | 55 | 0,266 | 0,345 |
| 4 | 0,950 | 0,990 | 28 | 0,374 | 0,478 | 60 | 0,254 | 0,330 |
| 5 | 0,878 | 0,959 | 29 | 0,367 | 0,470 | 65 | 0,244 | 0,317 |
| 6 | 0,811 | 0,917 | 30 | 0,361 | 0,463 | 70 | 0,235 | 0,306 |
| 7 | 0,754 | 0,874 | 31 | 0,355 | 0,456 | 75 | 0,227 | 0,296 |
| 8 | 0,707 | 0,834 | 32 | 0,349 | 0,449 | 80 | 0,220 | 0,286 |
| 9 | 0,666 | 0,798 | 33 | 0,344 | 0,442 | 85 | 0,213 | 0,278 |
| 10 | 0,632 | 0,765 | 34 | 0,339 | 0,436 | 90 | 0,207 | 0,270 |
| 11 | 0,602 | 0,735 | 35 | 0,334 | 0,430 | 95 | 0,202 | 0,263 |
| 12 | 0,576 | 0,708 | 36 | 0,329 | 0,424 | 100 | 0,195 | 0,256 |
| 13 | 0,553 | 0,684 | 37 | 0,325 | 0,418 | 125 | 0,176 | 0,230 |
| 14 | 0,532 | 0,661 | 38 | 0,320 | 0,413 | 150 | 0,159 | 0,210 |
| 15 | 0,514 | 0,641 | 39 | 0,316 | 0,408 | 175 | 0,148 | 0,194 |
| 16 | 0,497 | 0,623 | 40 | 0,312 | 0,403 | 200 | 0,138 | 0,181 |
| 17 | 0,482 | 0,606 | 41 | 0,308 | 0,398 | 300 | 0,113 | 0,148 |
| 18 | 0,468 | 0,590 | 42 | 0,304 | 0,393 | 400 | 0,098 | 0,128 |
| 19 | 0,456 | 0,575 | 43 | 0,301 | 0,389 | 500 | 0,088 | 0,115 |
| 20 | 0,444 | 0,561 | 44 | 0,297 | 0,384 | 600 | 0,080 | 0,105 |
| 21 | 0,433 | 0,549 | 45 | 0,294 | 0,380 | 700 | 0,074 | 0,097 |
| 22 | 0,423 | 0,537 | 46 | 0,291 | 0,376 | 800 | 0,070 | 0,091 |
| 23 | 0,413 | 0,526 | 47 | 0,288 | 0,372 | 900 | 0,065 | 0,086 |
| 24 | 0,404 | 0,515 | 48 | 0,284 | 0,368 | 1000 | 0,062 | 0,081 |
| 25 | 0,396 | 0,505 | 49 | 0,281 | 0,364 | | | |
| 26 | 0,388 | 0,496 | 50 | 0,279 | 0,361 | | | |

Sumber: Sugiyono.2008. *Statistika untuk Penelitian*. Bandung: Alfabeta. Hal. 373

Table 5 Result of validity test of the patient file completeness instrument

| No. | R count | R table | Description |
|---|---|---|---|
| X1 | 0,932 | 0,553 | Valid |
| X2 | 0,846 | 0,553 | Valid |
| X3 | 0,932 | 0,553 | Valid |
| X4 | 0,971 | 0,553 | Valid |
| X5 | 0,809 | 0,553 | Valid |
| X6 | 0,760 | 0,553 | Valid |
| X7 | 0,932 | 0,553 | Valid |

*Sumber: Diolah oleh peneliti (SPSS 20, 2024)*

Berikut temuan korelasi nilai r dengan r tabel, berdasarkan data pada tabel: Koefisien korelasi X1, X2, X6, dan X7 masing-masing sebesar 0,932, 0,846, 0,760, dan 0,932. Pertanyaan-pertanyaan pada survei tersebut valid karena r hitung lebih besar atau sama dengan r tabel.

Tabel 6 Hasil Uji Validitas Instrumen Pengklaiman BPJS

| No | R hitung | R tabel | Keterangan |
|---|---|---|---|
| Y1 | 0,889 | 0,553 | Valid |
| Y2 | 0,868 | 0,553 | Valid |
| Y3 | 0,868 | 0,553 | Valid |
| Y4 | 0,846 | 0,553 | Valid |
| Y5 | 0,764 | 0,553 | Valid |
| Y6 | 0,889 | 0,553 | Valid |
| Y7 | 0,910 | 0,553 | Valid |
| Y8 | 0,773 | 0,553 | Valid |

*Source: Processed by Researchers (SPSS 20, 2024)*

The output obtained from the correlation value with r table is 0.533 as seen in the table above. The following variables were found to have r count values: Y1 is 0.889, Y2 is 0.868, Y3 is

0.868, Y4 is 0.846, Y5 is 0.764, Y6 is 0.889, Y7 is 0.910, and Y8 is 0.773. Furthermore, because r count is greater than or equal to r table, then the questionnaire questions are original.

**A.    Reliability Test**

In Aziz's research (2018:50), Suharsimi stated that a reliable instrument is an instrument that can be used for data collection. The Cronbach's Alpha formula is used to determine dependency. A very good indicator of the level of dependency of an instrument is a Cronbach's Alpha value of 0.700 or more

$$r_n = \left[\frac{k}{(k-1)}\right]\left[1 - \frac{\sum \sigma_b{}^2}{\sigma_t{}^2}\right]$$    mula is:

Keterangan:

| | |
|---|---|
| $r_n$ | : Reliabilitas instrument |
| $k$ | : Banyaknya butir pertanyaan |
| $\sum \sigma_b{}^2$ | : Jumlah varian butir |
| $\sum_t{}^2$ | : Varian skor total |

Table 7 Results of the Reliability Test of the Patient File Completeness Instrument

| Reliability Statistics | |
|---|---|
| Cronbach's Alpha | N of Items |
| .956 | 7 |

*Source: Processed by Researchers (SPSS 20, 2024)*

Data processing using SPSS 20 produced the following findings: Cronbach's Alpha for the Plus variable, Cronbach's Alpha is higher than the r table (0.956 > 0.553) which indicates reliability.

Table 8 Results of the BPJS Claim Instrument Reliability Test

| Reliability Statistics | |
|---|---|
| Cronbach's Alpha | N of Items |
| .945 | 8 |

Based on the results obtained from SPSS 20 data processing, it was found that Cronbach's Alpha for variable Y (BPJS Claims） was 0.945, which means that the number is greater than 0.700 and can be said to be reliable. In addition, Cronbach's Alpha is also greater than r table, namely 0.945> 0.553, which also means reliable.

A. Relationship between Completeness of Patient Files and BPJS Claims Table 9 Completeness of Patient Files and BPJS Claims

| Compeleteness of files | BPJS Claim | | | | Total | | *p-value* |
|---|---|---|---|---|---|---|---|
| | Normal | | Abnormal | | | | |
| | N | % | N | % | N | % | 0,000 |
| | 98 | 100% | 0 | 0% | 98 | 100% | |

The findings of the data analysis from the Chi-Square test show a P-value of 0.000 as seen in the table above. The conclusion that the Completeness of Patient Files is significantly re

lated to BPJS Claims can be drawn from these results, because the P-value is less than 0.05.

2.    Discussion

The correlation between comprehensive patient records and effective BPJS claims is shown using the Chi-Square test. In this case, the correlation is positive; This means that the BPJS claim procedure will be better if patient records are made as detailed as possible. Given the relationship between the completeness of patient files and the efficiency of BPJS claims, this is in line with the findings of a study entitled "Analysis of Completeness of Outpatient Files on BPJS Claim Efficiency" (2023) by Hasani and Susanti. The positive direction of this relationship indicates that the BPJS claim procedure becomes more efficient when patients provide more comprehensive documentation.

According to Lisnawaty and Andisiri (2018), the hospital's ability to provide complete and accurate medical records is a measure of how well it meets BPJS requirements. The BPJS claim procedure can also be accelerated if all data is filled in completely. The claim procedure can be accelerated with coordinated efforts between all health service providers.

Rahmatiqa, Sulrieni, and Sary's (2020) research on the topic of medical record files and BPJS claims at M. Zein Painan Regional Hospital is also consistent with these findings (p=0.019). The findings of this study indicate a correlation between the accuracy of patient records and BPJS claim approval in 2020 at M. Zein Painan Regional Hospital.

When filing a BPJS claim, medical records are crucial. The accuracy of the patient's files shows that the BPJS insurance claim

is accurate. To ensure that BPJS pays for treatment fairly and according to protocol, claims officers must conduct a thorough and comprehensive review of the patient's medical data. These findings are in line with Eldivira's (2021) research entitled "Analysis of the Completeness of Medical Records for Submitting BPJS Claims at the Haji General Hospital in Surabaya." The study found that 62.5% of medical record files were complete for the claim submission process that was considered, while 37.5% were incomplete. The results of this identification show the factors that influence both as drivers and inhibitors of the completeness of medical records for BPJS claims. The main inhibiting factors, as highlighted in the study, come from the human element, which includes miscommunication between officers resulting in negligence in completing medical records.

According to the research of Sandika and Anggraini (2019) entitled "The Effect of Incomplete Medical Record Files on Reporting Inpatient Morbidity Data (RL4a) at RSU Mitra Medika Medan", there is a lack of standards set in filling out medical record files. because the procedure involves incomplete information. medical records and the problem of missing or incorrect information in these files can be resolved by training room personnel so that the analysis is more precise. As soon as the room staff finds out that the resume sheet does not show a definite diagnosis, they should contact the relevant doctor.

In 2018, Lubis and Rizki conducted a review of incomplete medical records at IPI Medan Hospital for diabetes mellitus patients who were filing BPJS claims. The same thing was also found: incomplete medical record documents can cause BPJS claims to be delayed

and BPJS coding officers have too many files to handle. (Fantri Pa mungkas, 2013).

Research conducted by Pardede, Hamama, and Edison (2020) on B PJS inpatient claims at Dr. M. Djamil Padang General Hospital, Ind onesia, confirmed the findings of this study. The researchers also found that claims were still imperfect when an observation list fo r accurate diagnosis and a comprehensive medical resume were used. Due to inaccurate diagnosis codes and inadequate medical resumes, claims remained with BPJS.

Therefore, the hospital must comply with all regulations when submitting BPJS claim files, which include treatment orders, suppo rting result sheets, resumes, discharge narratives, and SEPs for r eimbursement. The claim submission procedure will be hampered if t he files are incomplete. Therefore, all parties involved in the ho spital must take care of medical record documents carefully and co operate.


CONCLUSION

The following conclusions can be drawn regarding the Influence of Completeness of Outpatient Medical Record Files of the Internist P olyclinic on BPJS Claims at Muhammadiyah Hospital Bandung:

1.    Completeness of patient files affects the BPJS claim process
.

2.    If there is incompleteness, the files submitted for the BPJS claim process will also be hampered.

3.    A thorough examination must be carried out so that there is no double processing in checking the claim files. Good communicat ion between all health workers is needed in order to create good r esponsibility in the health service process.

Several things that can be input based on the research on the I nfluence of Completeness of Medical Record Files of Outpatients o f Internal Medicine Polyclinics on BPJS Claims at Muhammadiyah Ho spital, Bandung, are as follows:

1. Conduct a thorough examination of patient files before the BPJ S claim submission process.

2. When there is incompleteness, the casemix officer immediately c ontacts the DPJP or nurse who provides the service.

3. Evaluate the performance of officers related to matters that c ause incompleteness in filling out files for submitting BPJS c laims.

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