

Gambaran Perilaku Petugas Koder Rekam Medis Dalam Melakukan Grouping INA-CBGTMs di Rawat Inap RSUD Dr. Adhyatma, MPH Semarang Tahun 2017

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ABSTRAK

Keterlambatan waktu grouping INA-CBGTMs pada pasien pulang di Rawat Inap RSUD Dr. Adhyatma, MPH Semarang menyebabkan terhambatnya pembayaran klaim BPJS Kesehatan. Berdasarkan survey awal ditemukan data ketidaktepatan waktu grouping INA-CBGTMs pasien penjaminan BPJS rawat inap mencapai 712 berkas. Penelitian ini bertujuan Mendeskripsikan gambaran perilaku petugas koder rekam medis dalam melakukan grouping INA-CBGTMS di Rawat Inap RSUD Dr. Adhyatma, MPH Semarang tahun 2017.

Penelitian ini menggunakan metode observasional kuantitatif dengan teknik pengumpulan data observasi, wawancara serta pendekatan cross sectional. Instrument penelitian menggunakan kuesioner dan lembar observasi. Data primer maupun sekunder diolah dan dianalisa secara deskriptif dengan menggunakan SPSS. Populasi penelitian berjumlah 13 orang. Penelitian dilakukan tahun 2017.

Hasil penelitian menunjukkan sebagian besar petugas koder sudah pendidikan DIII Rekam medis sebanyak 11 responden (84,6%). Lama kerja petugas koder cukup baik karena sebagian besar lama kerja petugas koder <3 tahun sebanyak 10 responden (76,9%). Sebagian besar jenis kelamin perempuan sebanyak 10 responden (76,9%). Pengetahuan petugas koder sebagian besar baik sebanyak 9 responden (69,2%). Dukungan pimpinan petugas koder sebagian besar baik sebanyak 8 responden (61,5%). Sarana dan prasarana yang ada cukup baik karena tidak ada ruang khusus, komputer dan alat tulis kerja yang disediakan rumah sakit khusus untuk petugas koder rekam medis.

Perlu adanya peningkatan pengetahuan pada kasus RULE MB, komplikasi dan komorbiditi dan penambahan sarana prasarana seperti komputer, mejakerja, alat tulis kerja sesuai kebutuhan petugas koder. Serta perlu peningkatan dukungan pimpinan dalam membantu petugas koder mengenai permasalahan kelengkapan dokumen rekam medis yang harus diisi oleh Dokter Penanggung Jawab. Pemberian hadiah/tambahan intensif dapat meningkatkan kinerja dan semangat kerja. Tidak ada hubungan antara umur, pendidikan, jenis kelamin, lama bekerja, dan tingkat golongan pekerjaan pada peraktik grouping INA-CBGTMs.

Kata Kunci : Koder , grouping INA-CBGTMs

**DESCRIPTION OF MEDICAL RECORD CODER BEHAVIORS IN DOING
IN-CBG`S GROUPING IN INSIDE DRUG DR. ADHYATMA, MPH
SEMARANG IN 2017**

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ABSTRACT

Delay time INA-CBG`s grouping in patients home on in-patient RSUD dr .Adhyatma , MPH semarang cause activities claim payments BPJS health. Based on the preliminary survey, the ina-cbg group`s inaccurate grouping data of inpatient bpjs patients reached 712 records. Description of medical record coder behaviors in doing in-cbg`s grouping in inside drug dr. adhyatma, mph semarang in 2017.

This study uses the method quantitative observational with technique data collection observation, interview and approach cross sectional. Instrument the study uses the questionnaire and a observation. Data primary and secondary processed and analysis in descriptive by using SPSS. The study population amounted 13 person. The study was done 2017.

The study showed that most of the Koder officers had DIII education Medical records were 11 respondents (84.6%). The length of work of the koder officer is quite good because most of the worker worker <3 years old as many as 10 respondents (76.9%). Most of the female gender were 10 respondents (76,9%). Koder officer knowledge is mostly good as much as 9 respondents (69.2%). The support of the chief of the coder officer was mostly good as many as 8 respondents (61.5%). Facilities and infrastructure are quite good because there is no special room, computer and stationery that provided a special hospital for medical recorder koder. There needs to be increased knowledge on RULE MB cases, complications and comorbidities and the addition of infrastructure facilities such as computers, workâ€™s stationery. as per the needs of the coder. And need to increase leadership behavior in assisting koder officer about problem of completeness of medical record document to be filled by Responsible Doctor. Gift giving / intensive additions can improve performance and morale. There is not relationship about age, education, gender, duration of work, and occupation level in INA-CBG`s grouping practitioners.

Keyword : coder, grouping INA-CBG`s