

Bungur Medika Hospital Business Model: Review based on Value Proportional Canvas Perpectives

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ABSTRACT

The assessment of Bungur Medika Hospital's business model is carried out using the Value Proposition Canvas, which includes two main perspectives, namely Value Proposition and Customer Segments. Based on Value Proposition analysis, Bungur Medika Hospital offers competitive value in the form of high quality medical services, modern facilities, and comfort for patients. However, this study focuses on patient-related hospital services that are expected to be fulfilled is to get quality health services for BPJS Kesehatan participants in health service facilities ranging from First Level Health Facilities (FKTP) to Advanced Health Facilities (FKTL) with electronic system interoperability. So this study aims to find out the profile of Bungur Medika Hospital related to BPJS services. The method used is qualitative analysis, which is an analysis carried out on data, written descriptions, and verbal descriptions. The results showed that the priority of patient wants and needs that are expected to be met is to get quality health services for BPJS Kesehatan participants in health service facilities ranging from First Level Health Facilities (FKTP) to Advanced Health Facilities (FKTL) with electronic system interoperability.

INTRODUCTION

Deputy Director of the Social Security Administration Agency (BPJS) for health in the Jabodetabek region Bonna Evita expressed her appreciation to the DKI Jakarta Provincial Government for its achievements in *Universal Health Coverage (UHC)* until March 2022 has covered more than 98% or 11,038,892 people exceeding the target of the National Medium-Term Development Plan (RPJMN) 2020 – 2024 (National, 2019) . This achievement is thanks to the support of the DKI Jakarta Provincial Government through the Health Office in managing Non-Wage Earner Workers (PBPU) who are registered as Participants of the National Health Insurance – Healthy Indonesia Card (JKN – KIS) in collaboration with the Manpower, Transmigration and Energy Office to ensure that workers in the DKI Jakarta area have been registered with JKN-KIS (Prabowo, 2018; Siregar, 2021).

The DKI Jakarta Provincial Government since 2015 began to implement the smart city concept which was inaugurated by the Governor of DKI Jakarta for the 2014-2017 period Basuki Tjahaja Purnama. Jakarta Smart City has 7 indicators as the main focus, including Smart

Governance, Smart Economy, Smart Mobility, Smart Environment, Smart *Living* and *Smart Branding* (Akarambe, 2020). With the vision of realizing Jakarta a developed city with IT-based public services (*smartcity*) that solve various city and citizen problems effectively (Firmansyah, 2019).

DKI Jakarta apart from being the center of national government is also a financial and business center. With a total population density in 2020 reaching 21,959 people/km² (Setra & Tjahjani, 2022). The need for information and communication technology (ICT) devices is an important need for the people of DKI Jakarta where 84.32% of DKI residents have used ICT devices and 73.46% have accessed the internet.

The Ministry of Health of the Republic of Indonesia through remarks by the Minister of Health of the Republic of Indonesia at the XVI Congress of PERSI (Association of Indonesian Hospitals) in August 2022 is also committed to transforming the health system with 6 pillars of transformation, where the second pillar is the transformation of referral services that focus on access and quality of secondary and tertiary services (A. R. P. S. Putri & Ningtyas, 2023).

Kemenkes berkomitmen untuk melakukan transformasi sistem kesehatan
6 pilar transformasi penopang kesehatan Indonesia

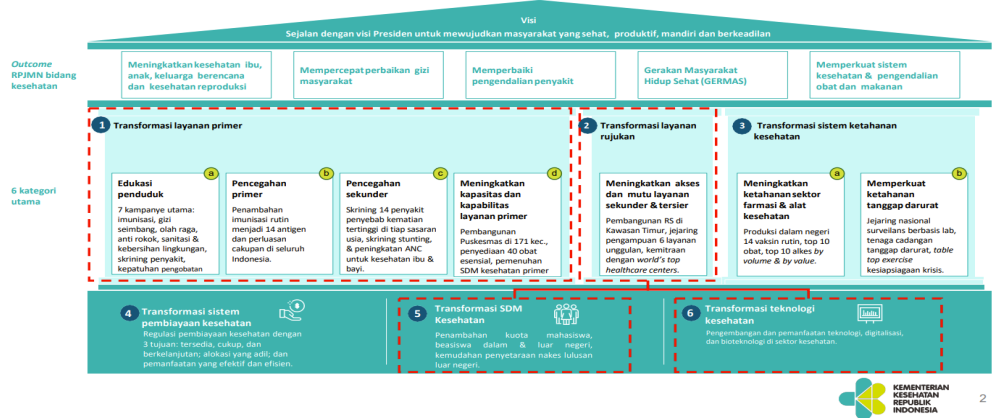


Figure 1. Six pillars of health system transformation

Indonesia has great potential in health transformation and digitalization, In February 2022 around 204 million internet users with an increase in smartphone usage of 94.1%. However, the obstacle faced in the health sector is the fragmented data of around 400 systems and applications in the Indonesian Ministry of Health separate from the BPJS, BPOM and BKKBN databases. The Ministry of Health in PERMENKES No. 24 of 2022 concerning medical records requires every health facility to organize electronic medical records no later than December 31, 2023 (Lissa et al., 2023; Yunisca et al., 2022). Electronic systems used in the implementation of electronic medical records must have compatibility and/or interoperability capabilities (Erawantini et al., 2021). The implementation of electronic medical records also applies to health care facilities that organize telemedicine (Kuntardjo, 2020).

Data from the BPJS Health ecosystem in 2022, the number of health facilities that have collaborated with BPJS Kesehatan is around 27,082. In Central Jakarta alone there are 36 hospitals consisting of; 4 Type A Hospitals, 20 Type B Hospitals, 7 Type C Hospitals and 5 Type D Hospitals. Where from 7 Type C Hospitals, only 4 hospitals collaborate with BPJS Kesehatan.

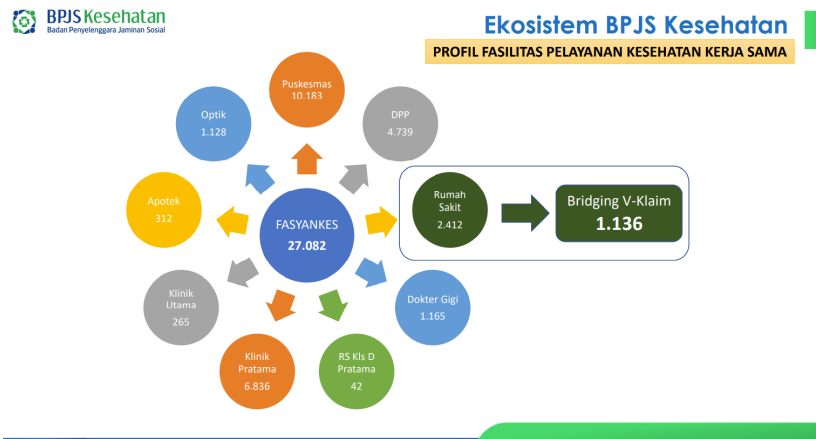


Figure 2 BPJS Kesehatan Ecosystem

Based on data obtained by 2,412 hospitals that have collaborated with BPJS Health, only 1,136 hospitals have been *bridging* with the BPJS system. This study aims to determine the profile of Bungur Medika Hospital related to BPJS services.

METHODS

In this study, the author uses qualitative analysis (Creswell & Creswell, 2017), namely analysis carried out on data, written descriptions, and verbal descriptions then connected with data, written descriptions, and other verbal descriptions to gain clarity about the truth or vice versa so that new perspectives are obtained or strengthen existing opinions (Basias & Pollalis, 2018). This research is included in descriptive research because this study intends to describe an event, namely human resource planning at Bungur Medika Hospital with the development of hospital services as an effort to improve employee performance. The approach in this study uses an interdisciplinary approach.

RESULTS AND DISCUSSION

1.2.1 Job To be done

The priority of patient wants and needs that are expected to be fulfilled is to get quality health services for BPJS Kesehatan participants (A. D. Putri et al., 2016) at health service facilities ranging from First Level Health Facilities (FKTP) to Advanced Health Facilities (FKTL) with electronic system interoperability.

1.2.2 Customer Pains

Based on the Regulation of the Director of Health Service Insurance BPJS Year 2018, medical referrals must indeed go through First Level Health Facilities (FKTP) before going to type D, C, B and A hospitals. This is often a patient complaint because the queue system in Mobile JKN has not been connected to the queue at the hospital so that arriving at the hospital still need to queue again, even stranger the Mobile JKN queue is even numbered from patients who come directly (Anonymous, interview, 2022).

Table 1. 1 Complaints of BPJS patients and hospital casemix officers

No	Name	Age	Complaints related to BPJS
1	Mr. D	25th	The list for treatment must be two days before so that you can get the opportunity to seek treatment, queue for 1 hour list, queue for treatment 1 hour, queue for medicine 5 hours even until something must be taken the next day.

2	Dr P	33 th	Casemix claims are often pending due to incomplete files such as operation reports and supporting checks
3	Mr. R	25th	Referral letters and control letters still need to be taken from the puskesmas to the hospital, once the referral letter is lost and you have to ask again to the puskesmas.
4	Mrs. L	35th	My son has dengue fever and queues at the emergency room, he said it is full, but if you pay using the general guarantee, there is a room immediately.

(Source : Interview, 2022)

From interviews with Hospital Information and Complaint Handling officers (PIPP-RS) in the West Jakarta area, it was conveyed that the accumulation of patients that caused long queues still occurred in several puskesmas and hospitals, especially in the morning around 8 to 10 am. To get a referral letter from the puskesmas, especially in the morning, patients still need to queue with other patients who will seek treatment and the queue that occurs is quite long, ranging from 1-2 hours. After arriving at the hospital again, the queue occurred between 3-4 hours. In some hospitals with thousands of patients per day the queue can be even worse (Hanna, interview, 2022).

1.2.3 Customer Gains

The community expects a supportive alternative such as:

1. Quality service.
2. Prioritizing patient safety
3. Home delivery of the drug
4. Convenient facilities and infrastructure.
5. Post-hospitalization patient monitoring.
6. Access patient health data through the patient's electronic device.

1.3 Business Solutions

Understanding the identification of problems and opportunities above, the construction of a Private General Hospital 4.0 (Type C) called Bungur Medika Hospital will be one of the alternative solutions for the community. Where BPJS Kesehatan patients can access health services at the hospital easily because it is supported by referral network cooperation with surrounding clinics or puskesmas using an electronic referral system between health facility networks (Rachmayanti, 2017). In addition, the hospital also developed internal systems to reduce waste and shorten patient visit time to the hospital including finger scan machines and independent SEP printers, independent tension checks, as well as queuing systems at pharmacy counters for time efficiency. As a solution to the hospital's problems with BPJS Kesehatan related to claims so that there is no rework and incomplete files, an integrated system was created so that complete files arrived at the casemix team.

1.3.1 Pain Reliever

There are several *Pain Relievers*, namely:

1. *Online* registration system connected to JKN mobile.
2. Cooperation with clinics and local health centers for *an online* referral system.
3. Patients get health services without any additional costs that are not in accordance with the rules.
4. Elective surgery queue system is *online* so patients can monitor from home.

1.3.2 Gain Creator

To answer the Gain from *Customer Segment*, some of the *Gain Creators* prepared are:

1. Creating quality human resources both from medical doctors and nurses as well as non-medical administration and IT
2. Establish partnerships in drug delivery and services through Halodok, Gojek and Grab.
3. Financing cooperation with private insurance (COB) *Coordination of benefits*.
4. Reduce *onsite* patient queue time by using self-service patient platforms/self-service registration.
5. Integration of Satu Sehat platform or other platform software with ERM SIMRS so that it can be monitored on the devices used by patients.

1.3.3 Products/Services

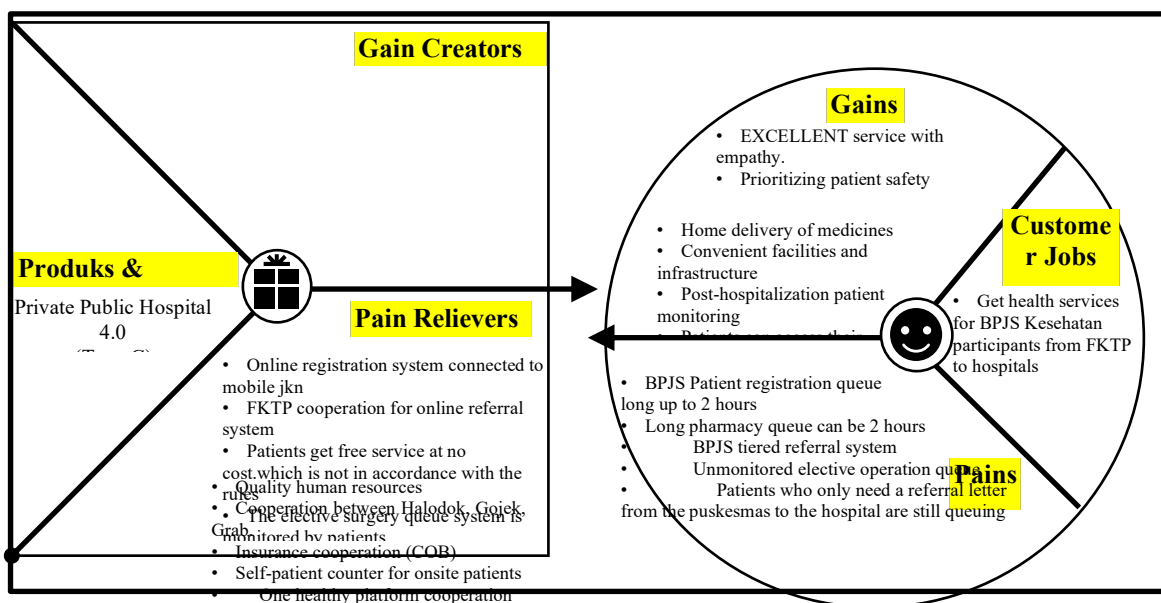


Figure 1.3 The Value Proposition Canvas

1.4 Vision and Mission

1.4.1 Company Vision and Mission

The vision of Bungur Medika Hospital is to become the first choice hospital for BPJS participants who are able to provide PRIMA services in the Central Jakarta area.

This Hospital has the following missions:

1. Digitalization of the hospital service system for easy access for BPJS healthcare patients.
2. Providing affordable healthcare with high quality of service and patient safety culture.
3. Creating qualified and professional human resources in providing health services.
4. Forming a network of health facilities around the hospital.
5. Provide good profitability for *stakeholders*

1.4.2 Company Profile

Bungur Medika Hospital in carrying out its operations will be managed under PT Bungur Medika Jaya as a form of representation from the owner, in accordance with the applicable rules in the establishment of the company, namely Law No. 40 of 2007 concerning Limited Liability Companies. The process of establishing a company in the form of a Limited Liability Company (PT) is carried out through a Notary.

The establishment of Bungur Medika Hospital is located at the address Jl. Letjen Suprpto No 45 Bungur Kec. Senen Kota Central Jakarta.

Table 1. 2 *Company Profile*

Company Name	PT Bungur Medika Jaya
Company Type	Limited Liability Company
Year Established	2025
Company Location	Jl. Lt. Gen. Suprpto No. 45 Bungur, Senen District, Central Jakarta.
Initial Capital	IDR 88,153,600,000
Company Products	Hospital

1.4.3 Company Logo



Figure 1. 4 Logo of RS Bungur Medika

Explanation of the meaning of the company logo, as follows:

1. Blue color, has the meaning of providing calm, trust and professionalism.
2. Palang Kesehatan, has the meaning of safety and health
3. The image of a green leaf in the middle of the image of the health cross, has the meaning of giving coolness and hope
4. Figure 2 curved lines in the form of a circle like embracing, has the meaning of providing the best service through technology

1.4.4 *Tagline*

RS Bungur Medika has a *tagline*, namely "*Our Purpose for Your Health*". The tagline means that our purpose is for your health, because your health is the most important thing for us.

CONCLUSION

The priority of patient wants and needs that are expected to be met is to get quality health services for BPJS Kesehatan participants in health service facilities ranging from First Level Health Facilities (FKTP) to Advanced Health Facilities (FKTL) with electronic system interoperability. Based on the Regulation of the Director of Health Service Insurance BPJS Year 2018, medical referrals must indeed go through the First Level Health Facility (FKTP) before going to type D, C, B and A hospitals. Bungur Medika Hospital in carrying out its operations will be managed under PT Bungur Medika Jaya as a form of representation of the owner, in accordance with the applicable rules in the establishment of the company, namely Law No. 40 of 2007 concerning Limited Liability Companies.

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