

ANALYSIS OF MEDICATION MANAGEMENT IN BPJS PATIENTS AT THE ROYAL PRIMA GENERAL HOSPITAL MEDAN IN 2024

Jetendra P. Sihombing¹, Linda Purwanti², Ade Aulia Siahaan³

¹²³ STIKes Arta Kabanjahe

e-mail: jetendra.07.hombing@gmail.com

Abstract.

This research aims to find out and obtain information about drug management in BPJS patients at the Royal Prima Medan Hospital. The technique for selecting research subjects or informants used was purposive sampling, where the informants have knowledge related to the research topic. More specifically, the informants selected were five people with professional backgrounds related to drug management. The data collection technique used was in-depth interviews. In the end, checking the validity of the data used is source triangulation. , namely researchers use various data sources (written documents, official documents, observation results, interview results) that can be used during the research. Based on the research results, it was found that according to informants, drug management for BPJS patients at the Royal Prima General Hospital is in accordance with the 2010 Ministry of Health announcement stating that the management of pharmaceutical supplies or the pharmaceutical supplies management system is a cycle of activities starting from planning to evaluation which are interrelated. between one another. Activities include planning, procurement, storage, control, distribution, plus applicable hospital policies. The drug list is also adjusted to the National Formulary as a reference in administering drugs to BPJS patients and implementing home policies Sick Which No violate or deviated moment carry out medication management in hospitals. Suggestions that can be given are providing comprehensive policy information for each staff to avoid misunderstandings in providing information between staff or also to patients.

Keywords: Drug Management, Hospital, National Formulary

I. INTRODUCTION

In the context of comprehensive health development in Indonesia, the government issued Law No. 40 of 2004 concerning the National Social Security System (SJSN) through PT Askes and PT Jamsostek. To realize the commitment that health insurance is mandatory for all Indonesian residents, the government issued Law No. 24 of 2011 which mandates that the implementation of National Health Insurance (JKN) is carried out through a Social Security Administering Body (BPJS)(Ministry of Health, 2013). Minister of Health Decree No HK.01.07/Menkes/659/2017 states that inIn

order to improve the quality of health services, it is necessary to ensure the accessibility of safe, efficacious, quality and affordable medicines in sufficient types and quantities and the implementation of Health Insurance.

National needa list of drugs is prepared in the form of a National Formulary. (Ministry Health, 2017).

The National Formulary aims to provide a national reference for hospitals and other health service facilities that implement SJSN, providing a reference for medical personnel to determine appropriate, efficacious and safe drug choices, at affordable prices,

encouraging rational use of drugs according to standards. , so that health services are of higher quality (Ministry of Health of the Republic of Indonesia, 2015).

Decree of the Minister of Health Number 1197/Menkes/SK/X/2004 also explains that management of pharmaceutical supplies is a process that is a cycle of activities, starting from selection, planning, procurement, receiving, storage, distribution, control, elimination, administration and reporting and evaluation required for service activities (Ministry of Health, 2006; 6).

According to a previous study conducted by Guswani (2016) at IFRSUD Lanto Daeng Pasewang, Jeneponto Regency, stated that drug management starts from providing until with the elimination of drugs based on the national formulary. Meanwhile, according to the results of research conducted by Pratiwi et al, (2017) at RSU Bandung, it was stated that there was a difference between the suitability of writing prescriptions and the formulary on the quality of service. The higher the percentage of compliance of prescriptions with the national formulary in hospitals, the better the quality of pharmacy installation services.

Royal Prima Medan General Hospital is a private hospital that joined BPJS in February 2015. Currently, there are 15,600 BPJS patient visitors to RSU Royal Prima Medan in 2023, as many as 15,600 inpatients and 120,847 outpatients. The results of interviews with 5 respondents managing medicines in Hospital Pharmacy Installations consisting of 1 Head of Hospital Pharmacy Installations, 3 pharmacist assistants and 1 pharmacist staff said that if a BPJS patient needs medicine but it is not on the national formulary list, the medicine needed will be

given to the patient with the terms and conditions of hospital policy.

The aim of the research is to analyze drug management for BPJS patients at RSU Royal Prima Medan and find out the description of drug management starting from planning, procurement, storage, control, distribution, as well as hospital policies in charge of Royal Prima Hospital Medan.

II. LITERATURE REVIEW

According to a previous study conducted by Guswani (2016) at IFRSUD Lanto Daeng Pasewang, Jeneponto Regency, stated that drug management starts from providing until with the elimination of drugs based on the national formulary. Meanwhile, according to the results of research conducted by Pratiwi et al, (2017) at RSU Bandung, it was stated that there was a difference between the suitability of writing prescriptions and the formulary on the quality of service. The higher the percentage of compliance of prescriptions with the national formulary in hospitals, the better the quality of pharmacy installation services.

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conditions and conditions. provisions of hospital policy.

III. RESEARCH METHODS

This research was conducted at the Royal Prima General Hospital. In qualitative research, the sample selection was chosen based on the principle of suitability (purposive) where informants have knowledge related to the research topic taken from 5 informants. Sources of informants consisted of 1 Head of the Pharmacy Installation Room, 3 Pharmacist Assistants, and 1 Pharmacist.

Information Collection and Processing

Observation

The data collection method used begins with preliminary study observations and interviews with open questions with informants who are experts in the field that is the research topic. Apart from that, secondary data collection found notes or data sheets in the form of Standard Operating Procedures (SPO) in units related to the Royal Prima Hospital Medan Pharmacy Installation.

In-depth Interview

In-depth interviews were conducted to obtain information by asking questions and answering face to face with the informant using an interview guide. The event will be carried out on 3 groups of informants, namely, Room Heads, Pharmacists, and Pharmacist Assistants.

Data processing

Data processing was carried out by making a transcript of notes from the recorded in-depth interviews into the QDA application on the laptop. Data analysis is

carried out by interpreting the data after classifying it by categorizing the data. The results of the analysis are presented in a narrative, table or matrix according to the research objectives.

IV. RESEARCH RESULTS AND DISCUSSION

Discussion

Medication Planning

Drug planning is one of the functions in the process of procuring pharmaceutical supplies in hospitals which aims to determine the type and quantity according to disease patterns and service needs in the hospital. Drug planning at the Royal Prima Medan General Hospital involves several personnel at the hospital, namely the pharmacist, finance department and pharmacy warehouse. In applying for medicines, a pharmacist has an important role in filling in the list of medicines that will be needed and then the application form is reviewed by the finance department. The types of drugs that are often included in the list of drug applications are analgesics, antibiotics and other chronic drugs.

Drug Procurement

According to Seto et al (2012) procurement is a business or activity to fulfill operational needs that have been determined in the planning function. The process of implementing procurement plans from the planning and requirements determination function, as well as financing plans from the budgeting function. Royal Prima General Hospital provides medication after the medication plan has been received by the finance department for review. After that, the drug will be ordered by the purchasing party to the drug

distributor. Usually, drug procurement at the Royal Prima General Hospital fulfills the hospital's needs more than promotions from sponsors or distributors.

Drug Storage

Storage is an activity and effort to organize spatial planning. The results of the interviews from the five informants said the same thing regarding the layout of drug storage in accordance with the requirements of the Ministry of Health in 2010 which consist of: (1) differentiated according to dosage form and type,

(2) differentiated according to temperature, stability,

(3) whether it is easy to explode/burn,

(4) whether or not it is resistant to light.

Medicine storage at the Royal Prima General Hospital Pharmacy Installation uses an alphabetical list to make it easier to take medicines, the layout is adjusted to the type of medicine such as vaccines, narcotic medicines, high alert medicines and lasa medicines which cannot be combined in one storage with other types of medicines.

Drug Control

Drug control is carried out so that work functions can run effectively and efficiently. Drug control at the Royal Prima General Hospital Pharmacy Installation is fully handled by all staff based on work schedules. Each staff member has responsibility for each work task starting from receiving medicines, checking medicines periodically, and distributing medicines.

Drug Distribution

Distribution is the activity of distributing pharmaceutical supplies in hospitals for

individual services in the therapy process for inpatients and outpatients as well as to support medical services. The aim of distribution is the availability of pharmaceutical supplies in service units on time, in the right type and quantity. The drug distribution procedure at the Royal Prima General Hospital Pharmacy Installation is based on the SPO (Drug Request Letter) for each health room such as the treatment room. Meanwhile, for outpatients, medication administration is adjusted to the patient's identity on the outpatient card with records in the hospital system.

Hospital Policy

Hospital services use the National Formulary as a reference in drug management, plus there is a separate policy from the hospital. Hospitals have a policy of meeting patients' drug needs even though they are not covered by health insurance (BPJS), but are adjusted to applicable regulations. The management of medicines in the hospital pharmacy installation is under the supervision of all pharmaceutical staff on duty without the BPJS taking part in the management of medicines in the hospital. Hospital policy also gives permission to staff to provide medication that patients need even if it is not in the National Formulary provided it has been confirmed by a doctor and pharmacist and it is clear that the type of medication needed is not on the National Formulary list in accordance with the Decree of the Minister of Health of the Republic of Indonesia number K.01.07/MENKES/659/2017 Regarding the National Formulary, if the required drug is not listed in the National Formulary, other drugs can be used on a

limited basis based on the approval of the local Hospital Director.

V. CONCLUSIONS AND RECOMMENDATIONS

Based on the results of data analysis and discussion in the previous chapter, the following conclusions can be drawn:

1. Drug planning is carried out by pharmacists, case managers, purchasing and the pharmaceutical warehouse department. An important role in planning is the pharmacist as staff who is directly related to drug management. Usually antibiotics and analgesics are always listed in the plan.
2. Drug procurement is carried out after the required drug planning has been received by the Case Manager and procurement through purchasing. In drug distribution, BPJS usually uses a special form 2 manual and submits it to the distributor as the drug procurer.
3. Storage of medicines is carried out by arranging the location according to the type of medicine such as high alert medicines, narcotics, vaccines, brand of medicine, required temperature, lasa medicines where these types of medicines cannot be combined in one storage. Apart from that, the arrangement is arranged alphabetically to make it easier for staff to search for medicines.
4. Drug control is carried out by all related staff and adjusted to the shift schedule in carrying out work duties. Drug control carried out based on the inspection schedule expired medicine, person in charge in receiving medication requests and

distributing them to other health room units, such as treatment rooms.

5. Drug distribution is adjusted to the National Formulary and applicable hospital policies. Distribution of medicines in treatment rooms is via SPO (Drug Request Letter) from nurses, while for patients it is adjusted to the identity registered in the hospital data system.
6. Policy Hospitals have an important role in drug management Which carried out by pharmacy staff. In meeting patient therapy needs, the hospital makes it easy to obtain drugs that are not covered by BPJS. with coordination between nursing personnel, pharmacist, and doctor. Approved with the condition that the required drug is not listed in the National Formulary. This is in accordance with the Decree of the Minister of Health of the Republic of Indonesia Number HK.01.07/MENKES/659/2017 concerning the National Formulary. If the required medicine is not listed in the National Formulary, other medicines can be used on a limited basis based on the approval of the local Hospital Director.

Suggestion

Based on the conclusions above, suggestions that can be given by researchers are as follows.

1. For RSU Royal Prima, hopefully there will be additional staff in the Hospital Pharmacy Installation to improve performance and effectiveness, including reducing the number of queues in the distribution

- of medicines to both outpatients and other health room units.
2. For hospital installations, it is hoped that there will be provision of information regarding drug management, especially in the hospital policy regarding BPJS, to each related staff to avoid misunderstanding of communication in carrying out tasks.
 3. Future researchers should increase the number of informants to more than 5 people, because the greater the number of informants, the research results tend to be relatively close to the reality of what happens in the field, as well as adding other variables to be analyzed so that the research results have more results.

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