ABSTRAK

Tujuan utama penelitian ini adalah: (1) mengidentifikasi struktur biaya operasi amandel (*Tonsilektomi*) pada sistem pembiayaan pelayanan medis FFS (*Fee-For-Service*) dan INA-CBG's (*Indonesia Case Base Groups*), (2) menganalisis faktor-faktor yang menyebabkan perbedaan besaran tarif operasi amandel (*Tonsilektomi*) pada pelayanan medis FFS (*Fee-For-Service*) terhadap INA-CBG's (*Indonesia Case Base Groups*), (3) mengidentifikasi upaya yang harus dilakukan bagi Rumah Sakit Dustira untuk mengatasi selisih tarif operasi amandel (*Tonsilektomi*) pada sistem pembiayaan pelayanan medis FFS (*Fee-For-Service*) terhadap tarif BPJS.

Metode penelitian yang dilakukan adalah metode analisis deskriptif yaitu menggambarkan atau mendeskripsikan bagaimana perbandingan sistem pembiayaan pelayanan medis FFS (*Fee-For-Service*) dengan sistem pembiayaan pelayanan INA-CBG's (*Indonesia Case Base Groups*) pada studi kasus operasi amandel di Rumah Sakit Dustira Cimahi.

Hasil penelitian menunjukan bahwa: (1) struktur biaya operasi amandel (*tonsilektomi*) untuk sistem pembiayaan FFS dan sistem pembiayaan INA-CBG's terdiri atas tarif rawat inap, tarif tindakan operasi, tarif pemeriksaan penunjang, dan tarif farmasi, matkes bedah dan obat-obatan, (2) faktor-faktor yang menyebabkan perbedaan besaran tarif operasi amandel (*Tonsilektomi*) pada pelayanan medis FFS (*Fee-For-Service*) terhadap INA-CBG's (*Indonesia Case Base Groups*) adalah tarif tindakan operasi (tarif dr.bedah dan dr.anastesi) dan adanya perbedaan kategori tindakan operasi amandel di Rumah Sakit Dustira terhadap kode INA-CBG's, (3) upaya yang seharusnya dilakukan oleh pihak THT Rumah Sakit Dustira Cimahi yaitu: efisiensi, *cost sharing* dan subsidi silang.

Kata kunci : Sistem pembiayaan FFS (*Fee-For-Service*), Sistem Pembiayaan INA-CBG's (*Indonesian Case Base Groups*)

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ABSTRACT

The main objective of this research are: (1) identify the structure of the operating costs of the tonsils (tonsillectomy) on the system of financing medical services FFS (Fee-For-Service) and INA-CBG's (Indonesia Case Base Groups), (2) analyze the factors which cause differences in tariff tonsillectomy (tonsillectomy) on medical services FFS (Fee-for-service) of the INA-CBG's (Indonesia Case Base Groups), (3) identify efforts should be made to the Hospital Dustira to overcome the difference in rates tonsillectomy (tonsillectomy) on medical care financing system FFS (Fee-For-service) against BPJS rates.

The research method is descriptive analysis method which depict or describe how it compares to the system of financing medical services FFS (Fee-For-Service) system with care financing INA-CBG's (Indonesia Case Base Groups) in the case study tonsillectomy Hospital Dustira Cimahi.

The results showed that: (1) the structure of the operating costs of the tonsils (tonsillectomy) for financing system FFS and financing system INA-CBG is comprised of hospitalization rates, rates of surgery, tariffs investigation, and tariffs pharmacy, matkes surgery and medicine, (2) the factors that lead to differences in the tariffs of the operation of the tonsils (tonsillectomy) on medical services FFS (Fee-For-service) of the INA-CBG's (Indonesia Case Base Groups) are the rates of surgery (dr.bedah rates and dr.anastesi) and differences in the action category tonsillectomy Hospital Dustira against INA-CBG's code, (3) efforts should be made by the ENT Hospital Cimahi Dustira namely: efficiency, cost-sharing and cross-subsidies.

Keywords: Financing System FFS (Fee-For-Service), Financing System INA-CBG's (Indonesian Case Base Groups)

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