

FACTORS CAUSING PENDING BPJS HEALTH CLAIMS FOR INPATIENT CARE AT PKU MUHAMMADIYAH HOSPITAL KARANGANYAR

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ABSTRACT

Background: Hospitals have an important role in providing quality and affordable health services, one of which is through collaboration with BPJS Kesehatan in the National Health Insurance (JKN) program. However, in practice, pending BPJS Kesehatan claims often occur, namely delays in the payment disbursement process due to incomplete documents, coding errors, or differences in perception between hospitals and BPJS verifiers. **Objective:** This study aims to determine the percentage of causes of pending BPJS Kesehatan inpatient claims at PKU Muhammadiyah Karanganyar Hospital from medical, administrative, and coding aspects. **Method:** This study uses a quantitative method with a descriptive design. The sampling technique uses the Simple Random Sampling Technique with a sample size of 75 BPJS Kesehatan pending claim files for December 2024. Data collection was carried out through observation of pending claim files and processed using Microsoft Excel. **Research Results:** The results showed that the causes of pending BPJS Kesehatan claims in the medical aspect were 58 (77%) incomplete files, 17 (23%) incorrect files in the coding aspect, and 13 (17%) incorrect files in the administrative aspect. **Conclusion:** Based on the results of this study, it can be concluded that pending BPJS Kesehatan inpatient claims at PKU Muhammadiyah Karanganyar Hospital are mostly caused by medical issues, particularly incomplete supporting examination results. Furthermore, there are coding issues, including inaccurate diagnosis and treatment coding, as well as administrative issues related to the completeness of claim documents.

Keywords: BPJS Kesehatan, Pending claims, Hospital