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INSTITUTE OF ISLAMIC BANKING AND FINANCE
IIUM - MALAYSIA

PROCEEDING

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The Role of Zakah and Islamic Financial Institution into Poverty Alleviation and Economics Security

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FOREWORD

Assalamualaykum.Wr.Wb

As a steering committe of 3rd ASEAN INTERNATIONAL CONFERENCE ON ISLAMIC FINANCE (AICIF-2015), firstly I would like to say "Thank You Very Much" to all parties for their enermous effort toward the detailed arrangement for hosting this conference.

The 3rd AICIF is organized by Faculty of Economics - Sultan Agung Islamic Unisversity (UNISSULA), Faculty of Islamic Economics and Busisness - State Islamic University Sunan Kalijaga Yogyakarta (UIN Yogyakarta), and Institute of Islamic Banking and Finance – International Islamic University Malaysia.

The conference is aimed to discuss "Role of Zakah and Islamic Financial Institution into Poverty Alleviation and Economoics Security". Islamic financial institution, such as Islamic banking, Islamic unit trust, Islamic insurance, etc.. has growth very fast for last decade. They become important part relating to the efforts improving the quality of life of the society as well as relieving the society from the riba trap. In the context of recent economy, the Islamic financial institutions as economy pillar continues to chalange effort of poverty alleviation.

Conference aims to bring together researchers, scientists, and practitioners to share their experiences, new ideas and research results in all aspects of the main conference topics.

Furthermore, I would like to extend my gratitude to authors who submitted their papers to AICIF 2015 conference and also reviewers for their contribution and effort to excellent conference proceeding.

Finally, for all of you, welcome to AICIF 2015. I hope you will enjoy the conference and have a nice time during your stay in Semarang Indonesia.

Wassalamualaykum.Wr.Wb

Regards,
Olivia Fachrunnisa, PhD
3rd AICIF 2015 Steering Committe ,
Dean
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ORGANIZING OPTIMIZATION OF SOCIAL INSURANCE AGENCY (BPJS) BASED ON PUBLIC SATISFACTION IN CENTRAL JAVA

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Abstract

Starting on January 1, 2014, PT Askes Indonesia changed the name to BPJS Health. BPJS Health is a State Owned Enterprises which is specifically commissioned by the government to organize health care insurance for all Indonesian's society . BPJS is a social insurance that is not for profit and its more focusing on providing protection to the public, thus, there is health coverage insurance for ndonesian's society.

The problem is that the quality of service has not been as expected BPJS'users, therefore, the purpose of this study is to evaluate the implementation of BPJS is viewed from the public's satisfaction side. the respondents in this study is 250 participants BPJS that is from five towns in Central Java . The researchers use Importance-performance analysis, paired sample t test and Cartesian diagram to analyze the result.

From twenty-eight samples that are examined in this study, all of indicating a significant difference between BPJS user expectations and performing on BPJS services that are actually perceived by the user. The highest satisfaction BPJS user is on the dimensions of empathy by two indicators: the staff and the medical staff do not distinguish social status and indicators friendliness of the staff and medical personnel. Dimension of the lowest level of satisfaction is the System of Insurance. Almost all show that indicators of the dimensions of the insurance system is bad satisfaction.

Keywords: Health BPJS, satisfaction, expectations, performance

INTRODUCTION

Indonesia is a country which has the fourth largest population in the world. A large number of people that is have contributed in some various issues, including of population problems'health. According to WHO (2012), Indonesia has 90 ranked of the healthiest state in the world. It means that the quality of healthcare of the Indonesian's population is still relatively low. From some Indicators which notice the quality of health is mortality and life expectancy. A high mortality rate showed that a low level of population health, while higher life expectancy shows the level of good health.

Quality of service becomes a necessity for BPJS in order to survive and still gained of users' trust. The success of BPJS in providing a quality of service can be determined by approaching Service Quality which has developed by Parasuraman in Lupiyoadi, 2006: 181.

Service Quality is how far the difference between expectations and reality of the services that is received by customers. It can be determined by comparing the services that is really received by the service expected. If accepted as expected by the customers then the customer will be satisfied otherwise if it is not as expected, the quality of services is considered poor. Quality of care should start from the needs of customers and end on the perception of the customer (Kotler, 2013). This means that is good quality is not based on the perception of the service provider, but based on customer perceptions. Based on this, the patient satisfaction BPJS must be considered when BPJS want to have a good quality. The problem is the quality of service has not been as expected BPJS users, thus this study aims to evaluate the implementation of BPJS terms of the satisfaction of the community and determine the order of priority in improving the Quality of Services BPJS. (belum sempurna)

REVIEW OF REFERENCES

BPJS (ORGANIZER OF SOCIAL SECURITY AGENCY)

Starting on January 1, 2014, PT Askes Indonesia (Persero) changed its name to BPJS accordance to Constitution no. 24 of 2011 about BPJS' health law . BPJS' health (Social Security Organizing Body Health) is a State-Owned Enterprises that is specifically commissioned by the government to administer health-care guarantee for all Indonesian's society, especially for Civil Servants, Pension of Recipients civil servants and TNI / police, Veterans, Independence Pioneers and their families and other business entities or common society.

BPJS is a social insurance that is not for getting profit and more focusing on providing protection to the public's satisfaction, thus there is insurance's guarantee for Indonesian people's health.

Satisfaction.

Satisfaction is the level of someone's feeling after he compares the performance / results who he feels with his expectation. therefore, the level of satisfaction is a function of the difference between the performance's percieved with desired expectations. If the performance is not as the expectations, then the consumer will be disappointed, if its performance as their expectation, the consumer will be satisfied. Meanwhile, when its performance exceeds their expectations, consumers will be very satisfied. Consumer expectations can be formed with their past experience, the relatives'comments as well as appointments and information will be affect marketers and rival. Consumers that is satisfied will be stay longer and they wiil give affect to the company.

In order to satisfy all of parties, BPJS is required to be able to provide a quality service to the users BPJS' society. According to Kotler (2013) Service quality can be measured from:
1. Reliability is the ability to execute services's promised which are accurately and reliably.
2. Responsive is willingness to help customers and providing services quickly
   The conviction is a knowledge and employees' courtesy and their ability to give rise to trust and confidence.
3. Empathy: the company's' understanding of the customer's problem and act for interests of customers' interest, and provide personal attention to the customers.
4. Physical evidence, the appearance of physical facilities, equipment, personnel, and media of communication.

Preface of study

Bennington (2010) suggested that the management and effectiveness of the health sector is very important because it will have an impact to human welfare and economic sectors. In discussing health of management, there are many scope and scale that influences that cultural, economic, political and other factors will need to be considered. This research inspiring the authors to examine how to optimize BPJS in order to provide people's in Central Java.

Zhi Jian Li (2011) conducted a study with the title On residents' satisfaction with community health services after health care system reform in Shanghai, China, 2011. The study measures the satisfaction of the population to public health services in Shanghai China as a result of the reform of the health care system. The objective to evaluate the effect of changes in the health care system revormasi. Analysis used to evaluate the satisfaction of the population, which is measured using four dimensions: the health insurance system, provision of treatment, primary health care clinics and public health services. All dimensions show progress and improvement of the level of satisfaction of the population since the reform carried out but it is found differences in the satisfaction level in all dimensions and groups. The population was very satisfied with the clinical services and public health services, and were less satisfied with the health insurance system and treatment. Loss groups (the elderly, unemployed, completed primary school, the poor) almost completely dissatisfied to a fourth aspect of the dimensions studied due to the increased financial burden and drugs become more expensive. This research is the main reference authors in choosing the dimensions of quality of service, in addition to the dimensions of the quality of the services proposed Kotler (2013)

Atinga (2011) in the journal which titled Managing health-care quality in Ghana: a necessity of patient satisfaction tests how communication variables, courtesy service providers, support / care, environmental facilities and the waiting time significantly affect patient satisfaction with quality of healthcare in two hospitals which located in northern Ghana. This research is an exploration study

which has purpose to provide relevant information to policy makers and health managers on how to serve patients effectively. The results showed that the three independent variable is the support / care, environmental facilities and waiting times affect patient satisfaction with health care quality. While kumunikasi and courtesy service providers do not affect patient satisfaction with health care quality. The coefficient of determination by 51 percent. the result oh the study becomes a reference for researchers to take the variables which is used for further development.

Noor Kholis (2008) investigates student satisfaction on receiving services in some State University in Semarang. To measure satisfaction by comparing the performance assessment score assessment score interests (expectations) of the services which received. In order to assess the student services the researchers used 17 indicators which are descripted of the five dimensions of service quality, they are : (1) reliability (2) responsiveness, (3) faith, (4) empathy, (5) tangible. this result can be concluded that the services which is received by students has not been as their expected. Results of this study is became serve as a reference for authors to take the dimensions of service quality that is used in this study, in addition to the dimensions proposed by Zhijian Li (2011) (

RESEARCH METHODS

The variables used in this study were 1). Insurance system with 11 indicators, 2). Tangible with 5 indicators, 3). Reliability with 3 indicators, 4) Responsiveness to the 4 indicators, 5) Assurance by three indicator 6) and also emphaty with two indicators.

To analyze the data the researcher used Importance-performance analysis or analysis of the level of interest and performance, paired sample t test and Cartesian diagram for focussing on average value expectation score and the average value of the performance scores to determine which order of priority of improving the quality of services which is need to be done in BPJS

RESEARCH RESULT

Description of Respondents

Respondents in this study is amounted 250 people, consisting of 108 men and 142 women. There is 43.6% includes 26-40 years ages, above 40 years old as much as 43.2%. As many as 26% of respondents work of civil servants, 55.2% of private employees. More than 60% of respondents use the health BPJS more than 2X. In the case never used before using BPJS Askes, approximately 40% of respondents said that they had used health insurance and about 60% have never used the health insurance belum sempurna ☺

User Satisfaction level toward BPJS program

levels of user satisfaction on BPJS card for all indicators presented in this study, it shows that there is diffrerence satisfaction levels . The level of user satisfaction of the program BPJS is ranged from 67.17% to 96.26%. The higher of the percentage, the greater good. Of all the attributes whish is examined no one has reached a 100% value, this means there are still differences between BPJS user expectations with services that is actually received. Overall, all indicators that is tested showed that the average level of satisfaction BPJS users card amounted 78.86%.

the Lowest satisfaction levels of users'BPJS card are in the process of making indicator speed cards, freedom of choice and ease hospital's bureaucracy for treatment. Three indicators shows that the of satisfaction's level is less than 70%.

The highest of the users satisfaction level on BPJS card lies is in the indicator of employee hospitals performance neatness , doctor's reputation, a reputation Hospital treatment, friendliness of the staff and medical officers and staff and the medical staff does not distinguish social status. The fifth indicator has a satisfaction above 90% rate .

The difference between expectations and Performance

In order to test differences in consumer expectations when using BPJS with services that is absolutely right felt when they are using the facilities BPJS used sample t test paired. The result is in

all of r attributes inconsumer expectations shows that a value is higher than the performance, with a significant difference value test of 0.00 to 0.027. therefore,there is a significant difference between consumers' expectations when they are using BPJS services facilities. It means that all of attributes which is observed did not have reached satisfaction.

The difference between expectation with significant performance, this implies contain of consumer expectations is higher than BPJS performance. This is due to of the information is provided by BPJS, either through advertising or other information at the socialization time its could be too excessive. Too much information that it will be establish users BPJS will be have high expectations , meanwhile the performance is not directly assigned by BPJS itself, but through the partner family doctors, health's center, hospitals, pharmacies, this impact will cause the performance is not optimal because it is not handled by the agency of BPJS itself directly.

Priority order of Quality Improvement Services

To determine the order of priority of improving the quality of services that need to be done BPJS, by way memetakkan average value score of expectation and the average value of the performance scores of all attributes in the Cartesian diagram. Results of mapping the attributes shown in the following kartesius diagram

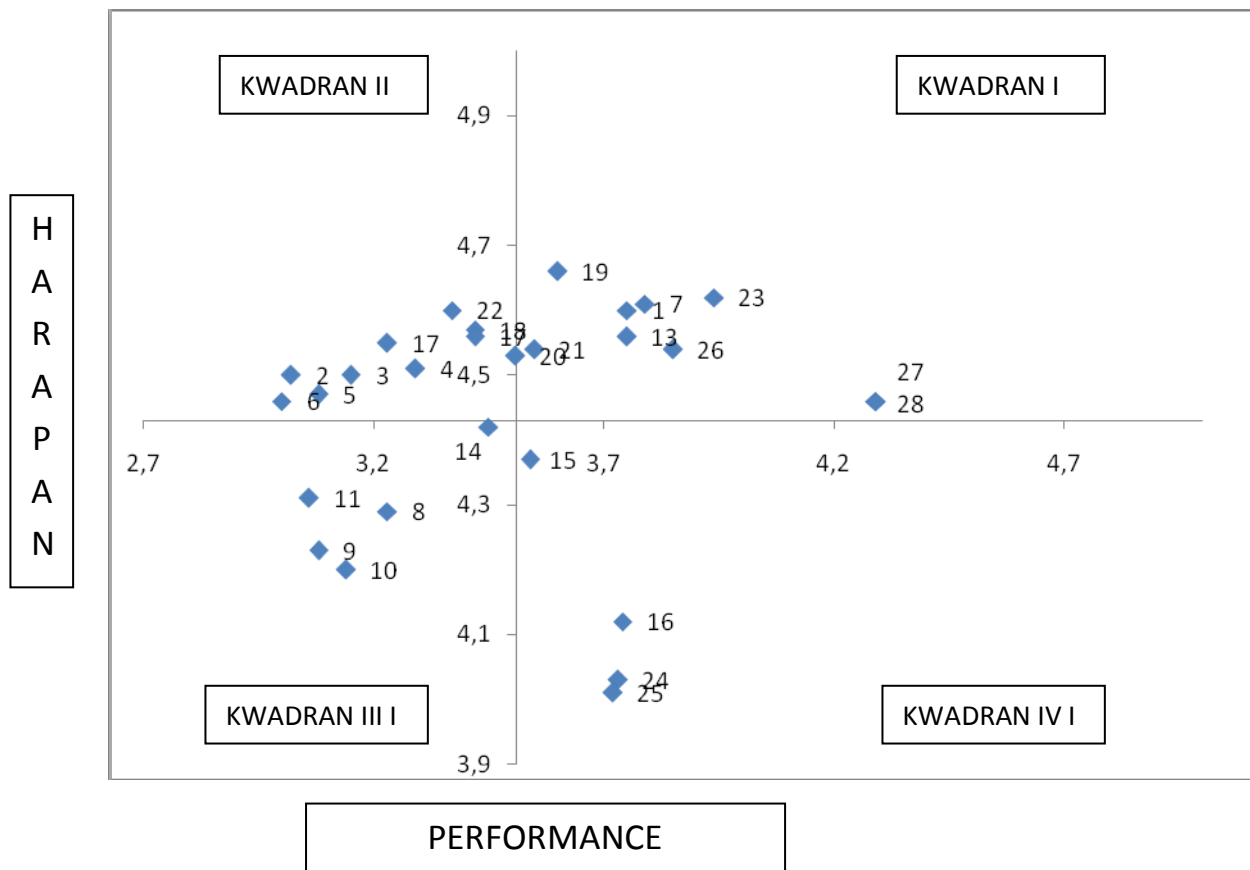Figure 1: Diagram Cartesian Between Expectations and Performance

From the mapping of these attributes can be explained as follows:

Quadrant I:
The first quadrant is, where is the position in patient's expectations on BPJS is High above the average (4.44), meanwhile according to BPJS patients performance is also high, that is above average (3.50). This position is occupied by the following attributes:

NO OF ATRIBUT	NAME of INDICATORS / ATTRIBUTES	VARIABLE
1	Convenience registration process of BPJS 'member	Insurance system
7	Kinds of medicine covered by BPJS	Insurance system
13	The hygiene of hospital	Tangible
19	The accuracy /doctor'precision check (diagnosing of diseases)	Reliability
21	Responsiveness on handling patient complaints	Responsiveness
23	The clarity of the information that provided by the physician on the patient's illness	Responsiveness
26	Doctor's capability to provide service provide services	Assurance
27	careful of staff and medical personnel	Emphaty
28	Staff and medical officers did not distinguish social status	Emphaty

The first quadrant is a position where the patient's expectation is high; meanwhile according to the patient's BPJS performance is also high. This suggests that these attributes are minimally maintained because it was a good performance)

Quadrant II
The second quadrant is the position where the patient's expectations is on BPJS is high above the average that is (4.44), meanwhile according to patients BPJS performance is low, that is below the average (3.50). This position is occupied by the following attributes:

NO ATRIBUT	NAME of INDICATORS / ATTRIBUTES	VARIABLE
2	Speed process of creating BPJS card	Insurance system
3	Ease of rules to get a room	Insurance system
4	Clarity of information about the rights and obligations of BPJS participants	Insurance system
5	The ease of bureaucracy / procedures / sequences for treatment	Insurance system
6	Freedom of choosing Hospital	Insurance system
12	medical devices Sophistication equipment facilities in the Hospital	Tangible
17	Doctors in checking the accuracy Schedule	Reliability
18	Speed on providing services officer	Responsivness
20	The ease of service procedures at the Hospital	Reliability
22	handling patient complaints quickly	Responsivness

The second quadrant is where the position BPJS is the higher than patient's expectations while according to the patient's performance is low. This is indicated that the attributes become prior scale in order to develop their performance.

Quadrant III

The third quadrant is where the position of patient's expectations BPJS is low that is below of the average (4.44), while according to patients BPJS performance is also low, which is below of the average (3.50). This position is occupied by the following attributes:

NO ATRIBUT	NAME of INDICATORS / ATTRIBUTES	VARIABLE
8	The amount of dues per month	Insurance system
9	The magnitude patient costs	Insurance system
10	The magnitude a purchase medicine's cost	Insurance system
11	The magnitude of hospitalization's cost	Insurance system
14	the loung comfort area in the hospital	Tangible

The third quadrant is where the position of the patient's expectation is low, while according to the patient's BPJS's performance is also low. This suggests these attributes become a priority II for enhanced performance.

Quadrant IV
The fourth quadrant is where a position of BPJS patient's expectations is in under average (4.44), while according to patients is that the BPJS' performance is high, which is in above average (3.50). This position is occupied by the following attributes:

NO OF ATTRIBUTES	INDICATORS NAME / ATTRIBUTES	VARIABLE
15	The clarity of information signs in hospital	Tangible
16	the neatness of employee's performance at the hospital	Tangible
24	Doctors' reputation	Assurance
25	Reputation of hospital where is treatment	Assurance

The fourth quadrant is a position where the patient's expectations BPJS is in average below while according to the patient BPJS performance is in above average This indicated that these attributes can be conclude that it is not a priority for performance improve but its minimum sustained performance.

From the above explanation can be concluded that improvements in the performance attributes in Quadrant II and III will be able to increase the level of BPJS patient satisfaction. BPJS system for patients seeking treatment is a tiered system which starts from the family doctor, it can be to the hospital only (BPJS partners) thus, after all the services provided by partners of BPJS direct effect on patient satisfaction. For that performance BPJS partners for attributes in quadrants II and III becomes a top of priority and the second to be improved.

Twenty-eight attributes were examined in this study, all showed a significant difference between user expectations with BPJS service performance, BPJS which really perceived of BPJS users card health. The highest satisfaction BPJS user is on the dimensions of empathy by two indicators: the staff and the medical staff do not distinguish social status indicators and friendliness of the staff and medical personnel. These results are difference which conducted by Atinga (2011) which suggests that communication and courtesy service providers do not affect patient satisfaction with quality of service. This is understandable considering the study was conducted in Central Java with a population who still keep culture and has a sense of empathy, whereas a study which conducted by Atinga in Ghana.

Dimensions of the lowest satisfaction level is the Insurance dimension System. Almost all of indicators of the dimensions of the insurance system showed that low satisfaction levels. These results

are consistent with previous studies which conducted by Zhijian Li (2011), which examined the population satisfaction level, to public services health in Shanghai China. The research which conducted by Li Zhijian showed that people feel less satisfied with the health insurance system and the provision of treatment.

In order to make BPJS is more high, thus the main performance priorities to be improved to be:
- Dimensions of the insurance system, its performance attributes that should be improved is the process of making cards BPJS Speed, Ease rules to get a room, Clarity of information rights and obligations of participants BPJS, Ease of bureaucracy / procedures / sequences for treatment as well as the users' freedom to choose the Hospital
- Tangible Dimensions, attributes which needs to be improved is the sophistication of the facilities instrument performance medical instrument in Hospital
- Dimensions Reliability, attributes which needs to be improved is the performance schedule accuracy physicians in examining and Ease of service procedures at the Hospital
- Dimensions responsiveness, attributes which needs to be improved is the speed of officer performance in delivering services and fast enough to handle patient complaints.

CONCLUSION

The level of user satisfaction BPJS card on all the indicators which is proposed in this study showed that no one which has reached a 100% value, It means that there are still differences between user expectations BPJS with services that is really received. The lowest satisfaction of levels BPJS card users are in the process of making cards indicator speed, freedom of choice and Ease bureaucracy Hospital for treatment. The highest satisfaction level of the users BPJS card lies in the neatness indicator employee performance Hospitals, doctor's reputation, a hospital treatment's reputation friendliness of the staff and medical officers and staff and the medical staff does not distinguish social status.

There was a significant difference between the expectations of consumers when they used BPJS with services that was felt when they used the facilities on BPJS. This result implied that the overall of attributes of the studied showed that BPJS' users had not been achieved satisfaction

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