

# **Forum Mutu**

**International Health Quality Network**

**Bali, 26 – 30 September 2011**

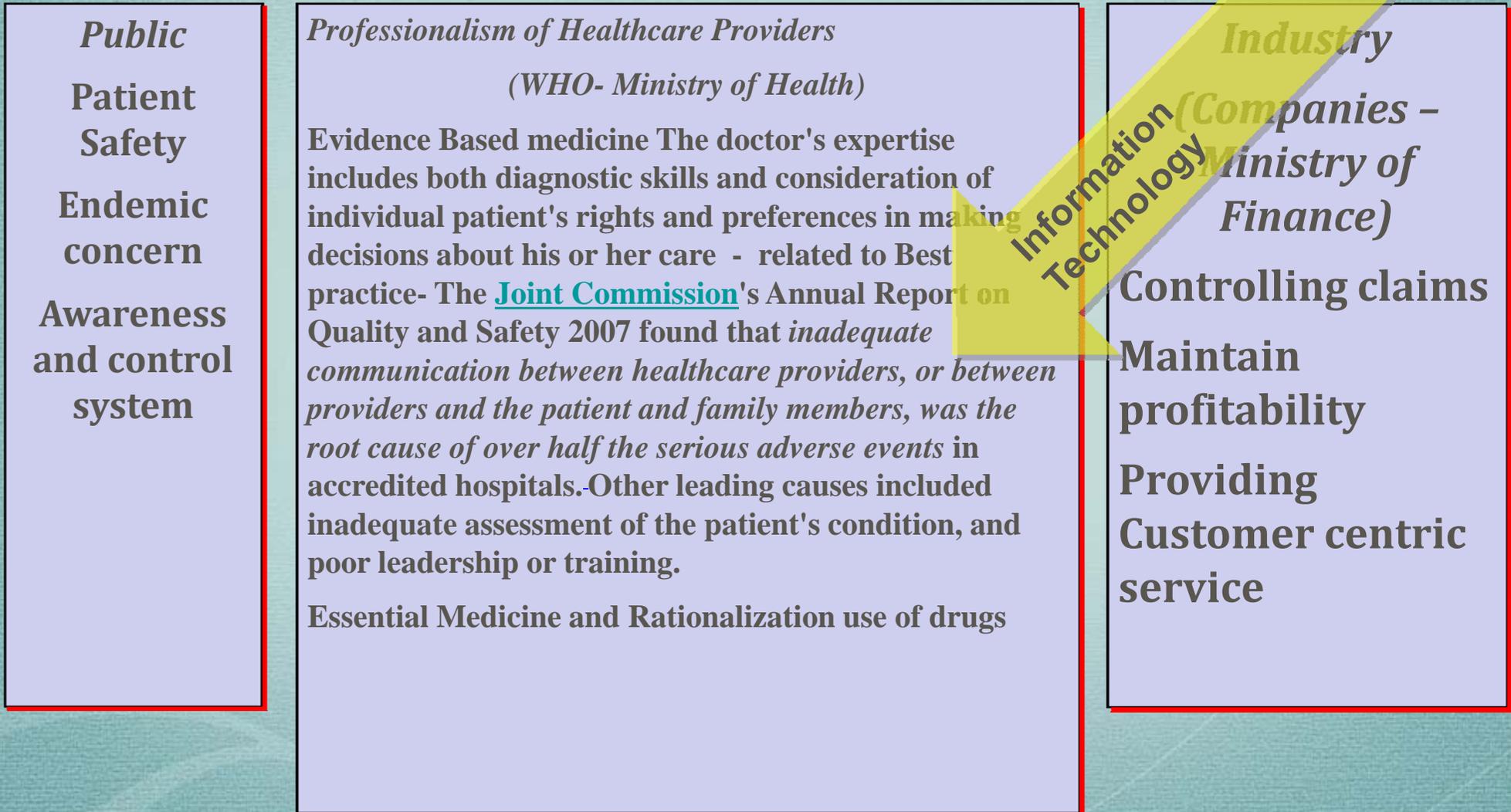
**Peran e-health, Teknologi Kesehatan, Pendidikan dan Penelitian Dalam Peningkatan Mutu dan Keselamatan Pasien di Indonesia**

# **The IT Interaction .of Providers & Health Insurance to improve quality & manage risks**

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**Presented at IHQN**  
**Bali, September 28, 2011**

**“Medical Care –is a human interaction between patient and doctor within a context and in a social system. As such it is not a commodity” (LOMA Workshop Platform)**

## **The Three Elements of Interactions**

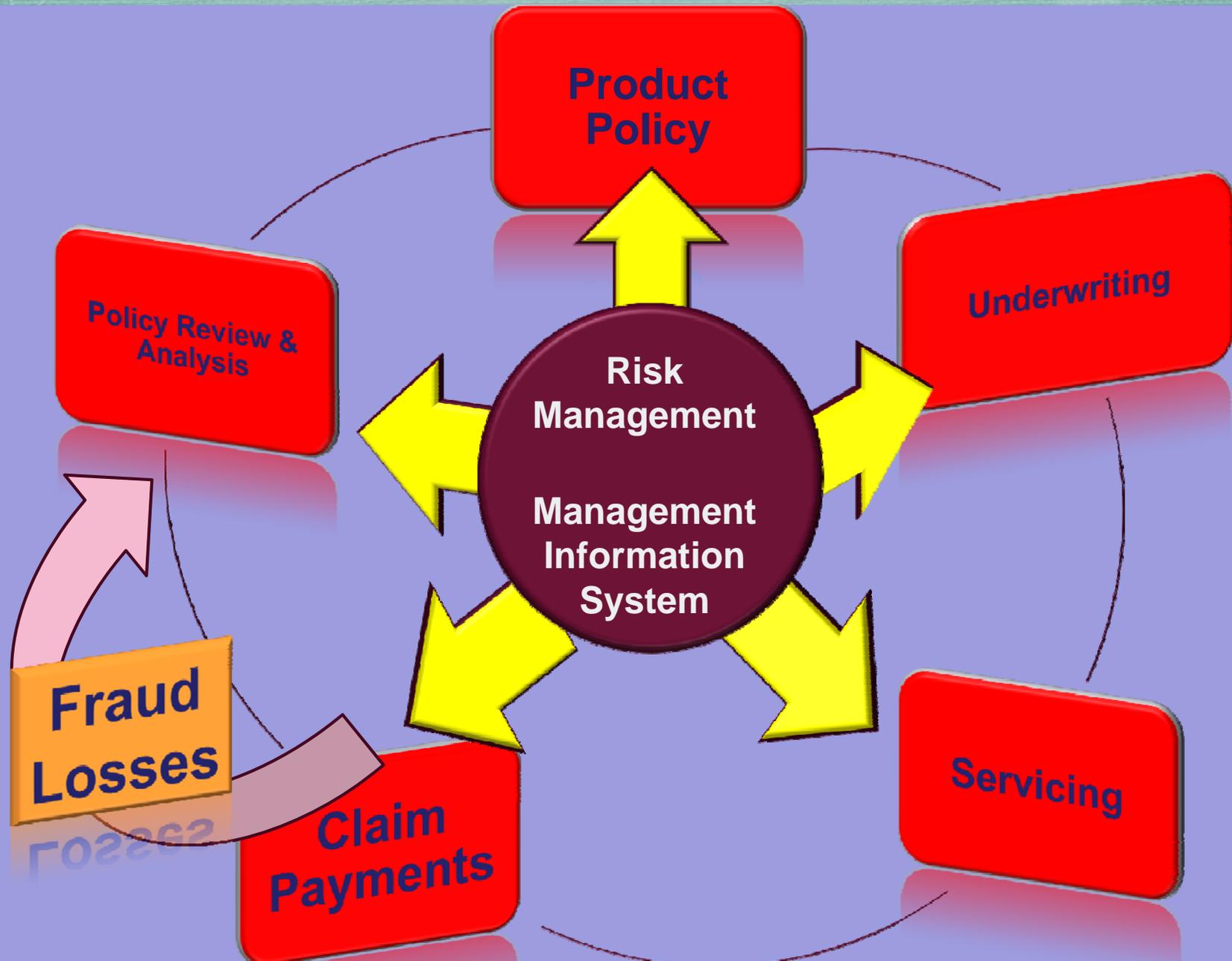


# **Information Technology - Part Of Pillars ASSURANCE**

- **The dimension of ‘ASSURANCE ‘**
- **The Role of IT in both functions (Service & Risk)**
- **IT strategy to balance Service, Risk & Profitability**
- **“Bridging Platform “ as one of the solutions**

# Askes

## Dynamic Risk Management Cycle



# Insurance – Providers

## Balancing the Different Objectives

### Insurance requirements to Providers



1. Excellent Quality of Service
2. Accurate Claims
3. Responsive IT System
4. Efficient Operation
5. Risk Management

### Providers Issues



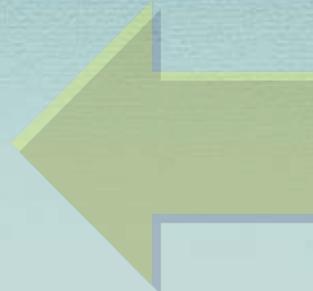
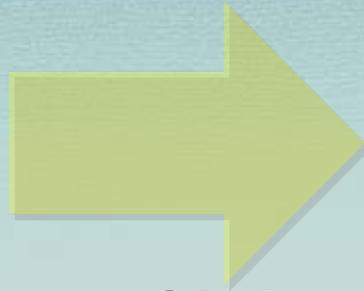
1. Database Management
2. Claim Sorting & Settlement
3. IT Infrastructures
4. Workflow System
5. On time Claim Payments

# BALANCING SERVICE vs RISKS

## Insurance Perspective

### The Service Contract

- Providing Advance Claim Payments to Providers
- ID Card with no Photo
- Automatic Mass Card Issuance
- Easy Account Maintenance
- Change of Status, Family Doctors, Address etc



### The Risk Exposure

- Fictitious Claims (Medicines, Treatments, Induce Demand for Treatment, Excessive Usage, Up coding)
- Fraudulence Cases
- Unauthorized Use of Card
- Data Forgery

# BALANCING SERVICE vs RISKS

## The Solution Matrix

**Service Objectives**

**Risk Mgt & Quality Control**

**Information Technology**

**Speed, Accuracy & Efficiency**

- Business Process Reengineering
- Risk Identification & Mitigation (ERM)
- Manuals, SOP, Documentations

- Automation
- Integrated Work Flow
- Data Warehousing
- Data Mining
- Digital Reporting
- System Interfacing with providers



# ASKES Service Strategy

## BALANCING SERVICE vs RISKS

Service Statement	I.T & System	Reducing Risk
<p><b>To : Members</b> “I serve you everywhere you go in Indonesia”</p>	<ul style="list-style-type: none"><li>•Centralised Data Base</li><li>•Real Time On Line</li></ul>	<p><b>Unauthorized Use of Cards</b></p>
<p><b>To : Providers</b> “I give you Claim Payment Interface System (Bridging) at your own hospital”</p>	<ul style="list-style-type: none"><li>•Interfacing System.</li><li>•Built In Control System</li><li>•Web Based System</li></ul>	<p><b>Early detection of any irregularities</b> “I help you (providers) to detect frauds”</p>

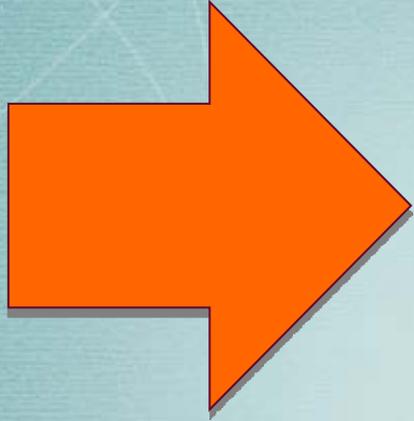
# The Solutions

# Bridging System

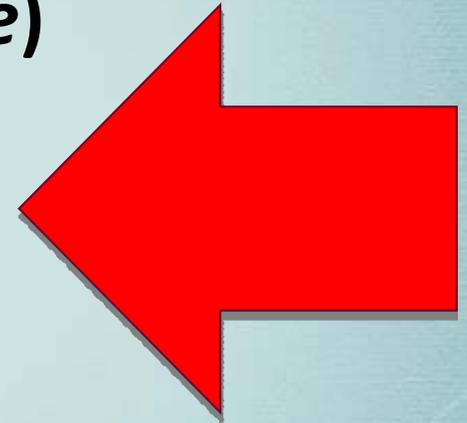
**The Technical**

**The Network**

# The Technical - Bridging Modules

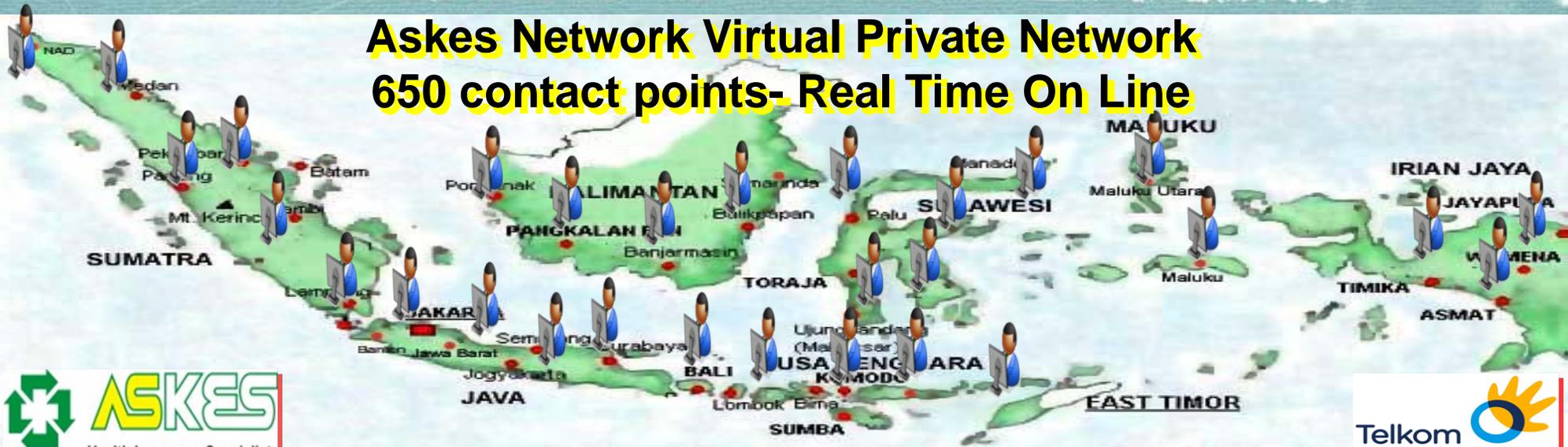


- Customers Queing System Real Time On Line (*at Providers side*)
- Centralised Master File – Validation & Authentication (*At Askes side*)



- Billing System Real Time On line
- Centralized Mapping of Medical Services & Treatments (*Provider &Askes*)
- Master File –Validation & Authentication – Payment (*Askes*)

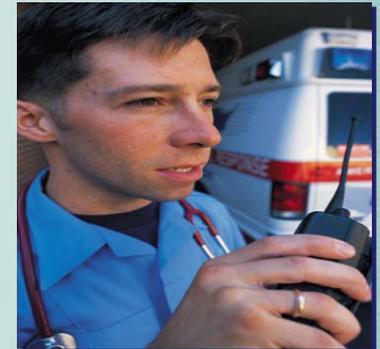
# Askes Network Virtual Private Network 650 contact points- Real Time On Line



3,000 Dokter Keluarga



2.616 Karyawan , 450 Kantor



871 Rumah Sakit



PUSKEMAS  
8.340



719 Optik



Apotik 1.056

# Benefits of “Bridging System”

- **Cut customer waiting time at Major Hospitals by 30%**
- **Improving Claim Accuracy**
- **Improving quality of Risk Management**
- **Improving Members & Providers Satisfaction**
- **Improving & Enrich Employee Capabilities**

# Progress Pengembangan “Bridging System s/d 2011

NO	NAMA RUMAH SAKIT	PROGRES PENGEMBANGAN				
		Work In Progress	Sistem Antrian-Counter Askes Center saja	Sistem Antrian – Surat Jaminan Pelayanan (SJP)Terpadu	Sistem Antrian – SJP Terpadu hingga Poliklinik	Sistem Antrian Komprehensif – Transaksi Pembayaran Klaim
1.	Hasan Sadikin, Bandung					
2.	Kariadi ,Semarang					
3	Sarjito ,Jogjakarta					
4	Haji ,Surabaya					
5	RSAL Ramelan ,Surabaya					
6	Sidoarjo					
7	Fatmawati					
8	Islam ,Jakarta					
9	Zaenoel Abidin, Banda Aceh					
10	Ulin ,Banjarmasin					
11	Kandow ,Menado					
12	Arifin Ahmad ,Pekanbaru					
13	Gunung Jati ,Cirebon					
14	M. Hoesin ,Palembang					
15	M. Djamil ,Padang					
16	Dustira,Cimahi					
17	Muwardi ,Surakarta					
18	Margono ,Banyumas					

# What Could IT / e Health do to get better balance (Risk, Service, Quality, Safety)?

Service Objectives	Design & Discuss Business Process	Propose to Business Process Owner
	<ul style="list-style-type: none"><li>• <b>Faster</b></li><li>• <b>Cheaper</b></li><li>• <b>Better</b></li></ul>	

# **What Should IT do to Promote E-health ?**

- 1. Identify Service Improvement Opportunities \_ What would be the “real” benefits for our customers ?**
- 2. Review Current Business Process – Why we keep doing the same thing over and over again? We should get it done Faster, Cheaper & Better**
- 3. Design the Business Process – “KISS” Keep It Simple Senor !!!**
- 4. Sell the KISS Idea to the Business Process Owners – Fight for it !**
- 5. Implementation**
- 6. Close Monitoring**

**Thank You**