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Article

Analysis of Factors Causing Pending BPJS Inpatient Claims at dr. H. Koesnadi General Hospital, Bondowoso

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Abstract: Dr. H. Koesnadi Bondowoso General Hospital recorded 25 out of 4,918 inpatient BPJS claim files (1.5%) in pending status from February to April 2024. This delay impacted the timely disbursement of BPJS claim funds and disrupted the hospital's cash flow. The aim of this study was to analyze the factors contributing to pending BPJS inpatient claims. This research employed a qualitative approach, with data collected through in-depth interviews, observations, and documentation. The research subjects consisted of one Head of Control Installation, two DPJPs (attending physicians), one Internal Verifier, two Coders, two Entry Officers, and one Administrative Officer. The study found that motivational factors did not contribute to pending claims, as responsibilities had already been assigned to the DPJPs, coders, and entry officers. However, opportunity-related factors caused pending claims due to uneven training and the absence of job descriptions specifying the tasks of claim officers. Ability-related factors also contributed to pending claims, including insufficient staff knowledge, differences in perception between DPJPs and BPJS regarding the claims process, and the presence of new, inexperienced staff. The main problem identified was a lack of staff knowledge about the BPJS claim submission process. Proposed solutions include providing regular socialization and education on claim procedures as well as sending staff to relevant training programs.

Keywords: BPJS, Brainstorming, Claims, Pending, Performance, USG

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1. Introduction

A hospital is an institution that provides comprehensive healthcare services, including inpatient, outpatient, and emergency care [1]. In line with government efforts, the Indonesian Ministry of Health has assigned responsibility for the National Health Insurance (JKN) program to BPJS Kesehatan, which has been in effect since January 1, 2014. To process claims within the JKN program, claims are grouped based on clinical features: each resource used is considered equivalent or identical. Claims management is conducted using grouping software and based on the INA-CBGs approach [2].

Before claims are submitted to BPJS Kesehatan, hospital claims payment using INA-CBGs must go through a document verification stage. BPJS verifiers ensure that the administrative accountability of the service and the accuracy of the supporting documents from healthcare facilities are verified. The aim is to maintain the quality of healthcare services and the management of service costs for BPJS Kesehatan participants. BPJS has collaborated with RSU Dr. H. Koesnadi Bondowoso since 2015 and has implemented Digital Claim Verification (Vedika) since August 2019.

Based on preliminary studies, it was found that in the first quarter of 2024, RSU Dr. H. Koesnadi Bondowoso had BPJS claims pending confirmation by BPJS verifiers in the

period of February–March 2024. These findings indicate that inpatient pending claims were more prevalent than outpatient pending claims, as shown in the following table:

Table 1. Recapitulation of Pending BPJS Claims at RSU Dr. H. Koesnadi Bondowoso (February – March 2024)

Month	BPJS Claim Documents					
	Outpatient			Inpatient		
	Total Files	Pending Files	%	Total Files	Pending Files	%
February	8099	2	0,02%	1468	5	0,34%
March	9792	3	0,03%	1553	9	0,58%
April	9824	6	0,06%	1897	11	0,58%
Total	**27715**	**11**	**0,116%**	**4918**	**25**	**1,50%**

Source: RSU Dr. H. Koesnadi Bondowoso Internal Control Unit, 2024

Table 1 shows the number of BPJS claim files submitted from February to April 2024. Out of 27,715 outpatient claim files submitted, 11 files (0.116%) were pending verification, while of the 4,918 inpatient claim files submitted, 25 files (1.5%) were still pending. This indicates that inpatient claims are more prone to delays in verification. The highest number of pending inpatient BPJS claim files occurred in April, with 11 pending files (0.58%), followed by March with 9 files (0.58%), and February with 5 files (0.34%). This situation suggests that RSU Dr. H. Koesnadi Bondowoso has a greater issue with delayed inpatient claim files, which may impact claim realization performance.

The occurrence of pending BPJS inpatient claim files at RSU Dr. H. Koesnadi Bondowoso is associated with staff performance, which is influenced by several field-related factors, including motivation, opportunity, and ability. Both extrinsic and intrinsic factors can affect motivation [4]. Intrinsic factors include responsibility, while extrinsic factors involve compensation. Based on a preliminary study conducted on December 20, 2023, with one of the control officers at RSU Dr. H. Koesnadi Bondowoso, it was stated that room administrative staff lacked responsibility in completing the JKN claim documents. Another contributing factor is opportunity, which potentially plays a significant role in the occurrence of pending claims. At RSU Dr. H. Koesnadi Bondowoso, there is no clear job description in the claim control unit. A job description is a systematic approach to defining and evaluating the qualifications required for a specific job to ensure that existing human resources can perform their duties effectively [5]. Ability is also identified as a potential contributing factor. This refers to the staff's knowledge in completing medical record documentation. Accurate coding depends heavily on the completeness of medical records. Inaccurate codes in BPJS health claims are highly likely to occur due to a lack of understanding of disease progression [6].

The impact of pending BPJS inpatient claims submitted by RSU Dr. H. Koesnadi Bondowoso to BPJS includes delays in reimbursement for medical services, which in turn affect the disbursement of BPJS claim funds and disrupt the hospital's cash flow, as payments that should be reimbursed are not processed accordingly. The purpose of this study is to analyze the factors causing the occurrence of pending BPJS inpatient claims at RSU Dr. H. Koesnadi Bondowoso.

2. Materials and Methods

2.1 Type/Research Design

This study employed a qualitative research method to analyze the factors contributing to the occurrence of pending BPJS inpatient claims at RSU Dr. H. Koesnadi Bondowoso, viewed from the motivation factor (intrinsic and extrinsic), opportunity factor (SOP, job description, and training), and ability factor (education, skills, and experience).

2.2 Research Subjects

The subjects of this study included 1 Head of the Claims Control Unit, 2 DPJP (attending physicians), 1 Internal Verifier Officer, 2 Inpatient Coding Officers, 2 Entry Officers, and 1 Administrative Staff at RSU Dr. H. Koesnadi Bondowoso.

2.3 Data Collection Methods

Data were collected to explore the issues causing pending BPJS inpatient claims using in-depth interviews, observation, and documentation.

2.4 Data Analysis Methods

The data analysis process in this study involved data reduction, data presentation, and drawing conclusions from the research results. The analysis was conducted to identify the factors related to the causes of pending BPJS inpatient claims at RSU Dr. H. Koesnadi Bondowoso. Data validity was tested through source triangulation to cross-check data obtained from multiple informants, including the Head of the Claims Control Unit, DPJP, Verifier Officer, Inpatient Coding Officers, Entry Officers, and Administrative Staff. Triangulation techniques used included checking the same information from different sources through interviews, observations, and documentation.

2.5 Research Ethics

In this study, the researcher obtained prior approval from the hospital and adhered to ethical standards, ensuring that no ethical issues would arise in the future.

3. Results

3.1 Analyzing the Causal Factors of Pending BPJS Inpatient Claims at RSU Dr. H. Koesnadi Bondowoso Based on the Motivation Factor

Motivation is the desire and drive from within or outside a person, expressed through interest and enthusiasm, encouragement and need, hopes and dreams, as well as appreciation and respect, all of which are related to claim officers' motivation during claim processing (Pranayuda et al., 2023). In this study, the motivation factor includes both intrinsic and extrinsic motivation, which are suspected to contribute to the occurrence of pending BPJS inpatient claims at RSU Dr. H. Koesnadi Bondowoso.

a. Intrinsic Factor

Intrinsic motivation is an element that, when applied in the workplace, can significantly enhance personal performance, leading to optimal outcomes [4]. This motivation arises from within oneself in the form of responsibility to meet specific goals. In this study, the intrinsic factor is defined as the responsibility arising from both doctors and claims control staff in overcoming the causes of pending BPJS inpatient claims at RSU Dr. H. Koesnadi.

> *"We take full responsibility for carrying out this claim process so that the claim is approved by BPJS." (Informant 3)*

In-depth interview results showed that staff involved in BPJS claim processing such as attending physicians (DPJP), coding officers, and entry officers felt a strong sense of responsibility to carry out their duties properly during the BPJS claims process at RSU Dr. H. Koesnadi Bondowoso. However, in practice, incomplete documents such as medical resumes or supporting files often lead to processing delays. Errors during the claim process may cause claim files to become pending [8]. The sense of responsibility, which reflects strong intrinsic motivation, is crucial because such motivation arises from within those handling the claims and helps foster a spirit of dedication. If staff have the personal desire or willingness to complete their tasks accurately, their intrinsic motivation drives optimal performance. In this study, intrinsic motivation is seen as stemming from

responsibility, and when this is lacking, it can become a contributing factor to the pending status of inpatient BPJS claims at RSU Dr. H. Koesnadi Bondowoso.

b. Extrinsic Factor

The extrinsic factor represents the physiological needs of an individual that are expected to be fulfilled [4]. Compensation is one of the methods used by companies to improve performance, motivation, and employee satisfaction. In this study, the extrinsic factor refers to the compensation received by doctors and claims control officers in addressing the issue of pending claims.

Based on in-depth interviews conducted, it was found that staff involved in BPJS claim processing at RSU Dr. H. Koesnadi Bondowoso expressed dissatisfaction with the compensation they received for their work performance. Compensation, as an extrinsic motivational factor, is crucial for every staff member and must be provided fairly by the hospital to increase performance and morale in carrying out their duties. When staff members do not receive adequate compensation that reflects their efforts and dedication, they tend to experience low enthusiasm, which may lead to poor behavior, reduced motivation, and a lack of work satisfaction. This, in turn, may result in staff exhibiting attitudes of disinterest and laziness at work, which ultimately leads to a lack of commitment and insufficient job satisfaction—factors that may contribute to pending claim issues.

> *"The compensation is in the form of salary/wages from the hospital, service fees from BPJS and the hospital" (Informant 1)*

Compensation includes everything received by staff as a reward for their hard work [10]. Fair and transparent compensation tends to foster a positive and motivating work environment, encouraging staff to be enthusiastic about their jobs. Hospitals that can accommodate, retain, and appropriately compensate their employees are more likely to achieve satisfactory job performance. Therefore, in this study, extrinsic motivation, particularly in the form of inadequate compensation, is identified as one of the contributing factors to pending BPJS inpatient claims at RSU Dr. H. Koesnadi Bondowoso.

3.2 Analyzing the Factors Causing Pending BPJS Claims for Inpatients at Dr. H. Koesnadi Bondowoso Regional Hospital Based on Opportunity Factors

Opportunity or opportunity refers to the chances that officers obtain in carrying out work in accordance with their field. Opportunity in work can be seen from the suitability of job descriptions, the availability of guidelines or procedures, availability and suitability of training related to the job [11]. The opportunity factor in this study refers to the availability of SOPs, job descriptions, and training suspected of causing pending BPJS claims for inpatients at Dr. H. Koesnadi Bondowoso Regional Hospital.

a. Availability of SOPs

Standard Operating Procedures (SOPs) are procedures for completing tasks in accordance with the responsibilities of a company or organization based on administrative, technical, and procedural indicators that follow the rules and system of the related work unit [12]. The SOP in this study is a guideline explaining the actions taken by officers in completing the BPJS claims process. Based on the research results, it was found that the Claims Unit of Dr. H. Koesnadi Bondowoso Regional Hospital had implemented SOPs ranging from document completeness to the claims submission process. The benefits of SOP use as a group guide include functioning as a reference for operational and administrative activities, as a policy underpinning organizational activities, and as a guide for verifying steps in organizational activities, which continue to develop into integrated organizational guidelines that enable goal achievement [13].

> *"Yes, there is an SOP for completing medical records, sending documents to the control unit, sending documents from the BPJS coordinator, coding, and drug, treatment, and verification claims." (Informant 1)*

In addition, there is an SOP that regulates the claim revision process when officers are asked to revise unclear information provided by BPJS. A strategy that can be implemented to improve understanding of the SOP contents is the continuous socialization of the SOP to the relevant officers and related work units. Socialization plays an important role as an effort to increase understanding of the SOP and support the successful implementation of JKN claim activities for outpatient and inpatient services according to the SOPs applied at the hospital [14]. Thus, the unavailability of SOPs becomes a factor causing pending BPJS claims at Dr. H. Koesnadi Bondowoso Regional Hospital.

b. Job Description

Job descriptions are a collection of information regarding positions, responsibilities, and authorities held and carried out by employees [15]. From the interviews conducted, it was found that at Dr. H. Koesnadi Bondowoso Regional Hospital, there were no job descriptions for officers managing inpatient claims. This causes officers to be unaware of their respective duties, and several tasks are carried out by multiple people at once, which can result in work problems and delays in claim completion. Therefore, the absence of job descriptions is also suspected to be a factor contributing to pending BPJS claims at Dr. H. Koesnadi Bondowoso Regional Hospital.

> *"Hmm, I think there's no job description document that contains the duties of the staff." (Informant 1, DPJP) "When I first joined, the tasks were briefly explained, and after that we just asked the more senior staff who had been working here." (Informant 3)*

The preparation of a job description should be carried out so that officers are aware of their duties and responsibilities related to the tasks they perform in detail, in order to minimize pending claims. The competence of each job position can be assured with a clear job description, thereby enabling someone to carry out their job responsibilities well. It will also be easier to list the tasks carried out by each officer in a clear job description, which can then be used to build a well-organized team [14]. Thus, the lack of a job description is considered a contributing factor to pending BPJS claims at Dr. H. Koesnadi Bondowoso Hospital.

c. Training

Training is a structured process to change employee behavior, with the aim of achieving organizational goals [17]. The training referred to in this study includes activities aimed at improving the knowledge or skills of doctors and staff in handling BPJS claims. Based on in-depth interviews conducted, it was revealed that training at Dr. H. Koesnadi Bondowoso Hospital had not yet covered all staff involved in handling BPJS claims such as DPJP, coders, and entry officers. It was found that only the entry officers had participated in training. Meanwhile, the DPJP, coders, and entry officers admitted that they had never attended any training related to the BPJS claims process.

> *"I did attend once, but only that one time. Previously there was training, but I was busy so I couldn't join. Others had the chance to attend last year." (Informant 3)*

> *"I've never participated in external training." (Informant 1)*

Training is a crucial activity that must be carried out regularly because it is used to maintain, preserve, and simultaneously enhance the skills of staff in order to improve their performance [18]. Increasing knowledge about health insurance through continuous training, especially at the early stages, is important for those working in health service facilities. Training also functions as a method to obtain information, understand, and improve skills, particularly for officers who are responsible for preparing inpatient BPJS claim documents. Thus, the lack of training is considered a contributing factor to pending BPJS claims at Dr. H. Koesnadi Bondowoso Hospital.

3.3 Analyzing the Factors Causing Pending BPJS Claims for Inpatients at Dr. H. Koesnadi Bondowoso Regional Hospital Based on Ability Factors

Ability is the individual's capacity to perform various tasks in a satisfactory manner. This capability is formed from skills, intellect, and physical capacity [19]. The ability factor in this study refers to the ability of staff in performing their tasks properly. The ability factor is analyzed through three aspects suspected to contribute to the occurrence of pending BPJS claims at Dr. H. Koesnadi Bondowoso Hospital, namely education, knowledge, and experience.

a. Education

Education is a form of effort to develop individual personality and abilities that continues throughout life, both formal and informal, inside and outside of school [3]. In this study, education refers to the latest educational background completed by staff involved in the BPJS claim process at Dr. H. Koesnadi Bondowoso Hospital. Based on in-depth interviews, it was found that education is a contributing factor to pending claims due to the educational background of staff managing BPJS claims such as DPJP, coders, and entry staff not being appropriate. The JKN policy demands that staff related to BPJS claims at Dr. H. Koesnadi Bondowoso Hospital understand and apply the BPJS Health claim submission process correctly and appropriately.

Table 2. Education levels of informants at Dr. H. Koesnadi Bondowoso Hospital

Name	Position	Latest Education
Informan 1	DPJP	Medical Specialist
Informan 2	DPJP	Medical Specialist
Informan 3	Coding Officer	D4 Medical Records
Informan 4	Coding Officer	D4 Medical Records
Informan 5	Entry Officer	Bachelor of Computer Tech.
Informan 6	Entry Officer	Bachelor of Management

However, to fulfill the needs of obtaining and improving staff knowledge in support of job performance, it does not always require formal education. Knowledge enhancement can be done through both formal and non-formal education [20]. The findings also show that although entry staff do not have an educational background that meets the health worker educational criteria, they are still responsible for tasks within their job scope. Professional organizations or accredited institutions in line with applicable regulations are needed to provide continuous education and training to support increased knowledge and skills [21].

b. Knowledge

Knowledge is a result of learning obtained from experience or education, and is essential in increasing task performance in line with growing experience [22]. Lack of knowledge regarding BPJS claim processing can hinder the BPJS claim verification process. Incomplete understanding of claim regulations, claim classification, diagnosis coding knowledge, and lack of clarity in filling out claim resumes by DPJP related to the claim resume contents are among the contributing factors to pending BPJS inpatient claims at Dr. H. Koesnadi Bondowoso Hospital.

Based on the results of in-depth interviews that have been conducted, it shows the lack of knowledge of coding officers regarding the latest coding rules from BPJS, as well as entry officers regarding document completeness, and the PJPK regarding determining diagnoses and actions between BPJS verifiers and PJPK. The limited knowledge of officers during claim submission can lead to errors in the claim process. Although the officers' knowledge is already good, in order to support the BPJS claim submission process, officers need to undergo training [23].

"Sometimes hospital coding is perceived differently from BPJS coding because BPJS has its own rules." (Informant 3) "Sometimes the real cost nominal is not aligned with the room, so the nominal value must be entered manually." (Informant 5) "Differences in perception sometimes occur because BPJS has specific diagnostic criteria, resulting in pending claims." (Informant 2)

This is related to the training variable that shows RSU dr. H. Koesnadi Bondowoso has not provided equal training to all officers handling BPJS claims such as PJPK, coding officers, and entry officers. Employee training is the process of providing knowledge, skills, and certain attitudes so that employees are more competent and able to carry out their tasks as best as possible [24]. The more training given to officers, the more it contributes to the improvement of their performance. Therefore, the knowledge variable is one of the contributing factors to the pending status of BPJS inpatient claims at RSU dr. H. Koesnadi Bondowoso.

c. Experience

Work experience influences the level of knowledge and skills a person has in their job, which can be measured by the length of time spent in the workplace or from the knowledge and skills one possesses to improve their performance [25]. Work experience in this study refers to work experience prior to working at RSU dr. H. Koesnadi Bondowoso and the relationship between years of work and experience in the BPJS claim process.

Based on the results of the study conducted at RSU dr. H. Koesnadi Bondowoso, there are still officers who have not met the minimum working period requirement of 3 years for claim officers, especially entry officers. Officers with less than 3 years of work experience are considered to have limited knowledge and skills in processing BPJS inpatient claims, which results in more errors and potential delays or pending status in claim submission [26].

Table 3. Observation Results of Informants' Work Experience

Name	Position	Work Experience
Informan 1	Specialist Doctor	5 Years
Informan 2	Specialist Doctor	3 Years
Informan 3	Inpatient Coder	7 Years
Informan 4	Inpatient Coder	1 Year
Informan 5	Claim Entry Officer	5 Years
Informan 6	Claim Entry Officer	2 Years

Work experience is associated with the length of employment and is directly related to the knowledge acquired in the workplace. Medical record officers with more years of experience are considered better at completing tasks. Since they have more experience and skills in handling tasks assigned to them, officers with longer tenure are considered more experienced and productive [27]. Therefore, the work experience possessed by officers is also considered a contributing factor to the occurrence of pending BPJS claims at RSU dr. H. Koesnadi Bondowoso.

3.4 Determining Priority Causes of Issues Related to Pending BPJS Inpatient Claims at RSU dr. H. Koesnadi Bondowoso Using the Urgency, Seriousness, and Growth (USG)

Assessment The USG technique involves assigning scores to each problem using a weight scale from 1 to 5. The issue with the highest total score represents the top priority cause of pending claim problems at RSU dr. H. Koesnadi Bondowoso. The first step in determining priority problems in this study is to explain the contributing factors that have been identified in the previous stages of the research. After identifying the issues, each will be scored using the USG method. The scores are then summed to determine the priority order of contributing issues.

Table 4. Scores of Urgency, Seriousness, and Growth (USG)

Problem	1			2			3			4			5			6			7			8			9			Total
	U	S	G	U	S	G	U	S	G	U	S	G	U	S	G	U	S	G	U	S	G	U	S	G	U	S	G	
Job Description	4	2	3	4	2	1	3	3	5	3	3	2	3	2	4	2	3	4	3	4	4	3	3	4	3	2	3	82
Pelatihan	4	3	3	4	4	4	2	5	4	5	4	5	3	3	5	3	5	4	3	4	4	4	4	5	3	4	2	103
Pengetahuan	4	3	4	5	4	4	3	4	3	4	5	5	4	3	3	4	4	4	5	4	3	5	4	4	5	5	4	109
Pengalaman	3	2	4	2	2	3	3	4	2	1	2	1	4	2	2	5	4	4	4	2	5	2	2	4	2	2	3	76

Based on the recapitulation of scoring, four problem priorities were obtained from the assessment, as follows: First priority is the lack of knowledge among coding officers regarding proper coding in accordance with BPJS regulations, and entry officers regarding document completeness, as well as discrepancies in perception between diagnosis enforcement and actions among BPJS and DPJP verifiers, with a total score of 109. Second priority is the lack of equal distribution of training opportunities on BPJS inpatient claims coding for officers, with a total score of 103. Third priority is the absence of a clear job description outlining the duties of claim officers for BPJS, with a total score of 82. Fourth priority is the presence of new officers with limited work experience (less than 3 years), who have never received training or socialization regarding the BPJS claim process, with a total score of 76.

3.5 Formulating Improvement Efforts for the Occurrence of Pending BPJS Inpatient Claims at RSU dr. H. Koesnadi Bondowoso Using Brainstorming

The formulation of improvement efforts for the occurrence of pending BPJS inpatient claims at RSU dr. H. Koesnadi Bondowoso was carried out using brainstorming techniques. The improvement efforts are based on the top 4 problems ranked according to the USG method, as follows:

Table 5. Results of Recommended Problem-Solving Efforts

No	Cause of Problem	Recommended Problem-Solving Efforts
1.	Lack of knowledge among coding officers regarding BPJS coding rules, and entry officers regarding document completeness, as well as differing perceptions in diagnosis enforcement and actions between BPJS and DPJP verifiers.	1. Conduct socialization sessions specifically on regulations and procedures for claim submission to improve officers' knowledge. 2. Involve claim officers in training or seminars to increase understanding of BPJS claim processes.
2.	Unequal opportunities for officers to attend training on BPJS claim processes.	Send claim officers to external training programs on BPJS claims. Additionally, officers who have already attended external training can facilitate internal training or socialization sessions for those who have not yet participated in any training related to BPJS claims.
3.	Absence of a job description outlining the roles and responsibilities of BPJS claim officers.	1. Develop a job description that clearly outlines the roles of BPJS claim officers. 2. Socialize the job description to ensure that claim officers understand their duties clearly. 3. Provide a job description at each BPJS claim unit.
4.	Officers with less than 3 years of experience are still adjusting and may be confused about the BPJS claim process, and have never received training or socialization.	1. Send new or junior claim officers to training or seminars regarding BPJS claim processes. 2. Conduct regular internal socialization or mentoring for new officers.

Based on the results of the brainstorming conducted in relation to the recommended corrective actions presented in the previous table and discussion, a plan of action was formulated that may serve as an alternative solution to address the main issues causing pending claims at RSU dr. H. Koesnadi Bondowoso, as follows:

a. The first issue is the lack of knowledge among coding officers regarding appropriate BPJS coding rules, and entry officers regarding document completeness, as well as differing perceptions in enforcing the main diagnosis and actions between BPJS and DPJP verifiers. The proposed corrective action includes conducting structured socialization on claim submission regulations and guidelines to improve claim officers' knowledge. Additionally, claim officers should be involved in training or seminars to enhance their understanding of BPJS claim processes.

b. The second issue is the unequal distribution of opportunities for officers to participate in training on BPJS claim processes. The proposed improvement includes sending claim officers to external training on BPJS claims. Officers who have already attended external training can facilitate internal training or socialization sessions for those who have not yet received such opportunities.

c. The third issue is the absence of a job description outlining the duties and responsibilities of BPJS claim officers. The proposed solution includes drafting a detailed job description for BPJS claim officers, conducting socialization on these job descriptions to ensure clarity regarding their tasks, and providing these job descriptions within every BPJS claim unit.

d. The fourth issue concerns officers with relatively short work experience who are still in the adjustment phase and may still be confused regarding the BPJS claim process. These officers may not have previously received training or socialization on the process. The proposed corrective action includes sending new or junior officers to attend seminars or training sessions and conducting monthly internal socialization sessions to review the BPJS claim procedures.

4. Conclusions

Based on the results and discussion of the factors causing the occurrence of pending BPJS inpatient claims at RSU dr. H. Koesnadi Bondowoso, it can be concluded that the opportunity factor, which includes the lack of training regarding BPJS claim processes and the absence of a clear job description outlining the responsibilities of claim officers, significantly contributes to pending claims. The ability factor is also a contributor, referring to officers with educational backgrounds that do not match the requirements, lack of knowledge regarding BPJS coding regulations, incomplete documents, and differing perceptions in enforcing diagnoses and actions between BPJS and DPJP verifiers, along with the presence of newly recruited claim officers. After identifying these contributing factors, the main causes of pending claims were determined using the USG method. These include lack of knowledge among coding officers regarding BPJS coding regulations, and among entry officers regarding document completeness, as well as differences in perceptions between BPJS and DPJP verifiers concerning the main diagnosis and actions. Other causes include limited training opportunities on BPJS claim processes, the absence of job descriptions for claim officers, and the presence of new officers still in the adjustment phase. Solutions to these problems were determined using brainstorming, resulting in several recommendations: conducting regular socialization on claim submission regulations and procedures, involving claim officers in training or seminars to enhance their understanding of BPJS claim processes, sending officers to BPJS claim-related training sessions, developing job descriptions outlining the roles of claim officers, and conducting regular socialization sessions related to claim processes.

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