

**AN OVERVIEW OF THE IMPLEMENTATION OF INDONESIAN
DIAGNOSIS RELATED GROUPS (IDRG) USING THE TECHNOLOGY
READINESS INDEX (TRI) METHOD AT YOGYAKARTA CITY REGIONAL
GENERAL HOSPITAL**

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ABSTRACT

Background: *The transition of the JKN claims system from INA-CBG to iDRG has brought significant changes to the diagnosis coding process in hospitals. Medical record coders are required to adapt to a more complex system while simultaneously operating two coding features (iDRG and INA-CBG) during the transition period. This potentially leads to increased workload, coding uncertainty, and the risk of claim errors that may affect hospital revenue. Therefore, a description of iDRG implementation from the user's perspective at Yogyakarta City Hospital is needed.*

Objective: *To describe iDRG implementation based on the dimensions of optimism, innovativeness, insecurity, and discomfort among medical record coders.*

Method: *A qualitative case study design using interviews and observation with 4 informants and 1 triangulation source at the Claims Management Unit of Yogyakarta City Hospital.*

Results: *In the optimism dimension, coders held a positive attitude as iDRG improved claim specificity, supported by the One Click Claim feature and SMARTA and e-Claim integration, despite inefficiencies from dual coding features. In innovativeness, coders actively learned through seminars, the ICS guideline, and coder forums, though initially waiting for direction. In insecurity, the system was considered sufficiently secure; however, coders expressed uncertainty in coding decisions, concerns over data submission failures, and the need for manual verification. In discomfort, coders felt burdened by ICS complexity, additional IM codes, longer workflows, reduced confidence, and system disruptions.*

Conclusion: *Coders remained positive during the transition (optimism), actively pursued learning despite initial passivity (innovativeness), experienced coding uncertainty and system concerns (insecurity), and felt burdened by system complexity and dual coding features (iDRG and INA-CBG) (discomfort).*

Keywords: *BPJS, iDRG, Yogyakarta City Hospital, Technology Readiness Index.*

GAMBARAN PENERAPAN *INDONESIAN DIAGNOSIS RELATED GROUPS (IDRG)* DENGAN METODE *TECHNOLOGY READINESS INDEX (TRI)* DI RSUD KOTA YOGYAKARTA

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ABSTRAK

Latar Belakang: Peralihan sistem klaim JKN dari INA-CBG ke iDRG membawa perubahan besar pada proses pengkodean diagnosis di rumah sakit. PMIK bagian koder dituntut beradaptasi dengan sistem yang lebih kompleks, sementara selama masa transisi harus mengoperasikan dua fitur koding (iDRG dan INA-CBG) sekaligus. Kondisi ini berpotensi menimbulkan beban kerja, keraguan pengkodean, hingga risiko kesalahan klaim yang berdampak pada pendapatan rumah sakit. Oleh karena itu, perlu adanya gambaran penerapan iDRG terhadap pengguna di RSUD Kota Yogyakarta.

Tujuan: Mengetahui gambaran penerapan iDRG berdasarkan aspek *optimism*, *innovativeness*, *insecurity*, dan *discomfort* pada PMIK bagian koder.

Metode: Penelitian kualitatif dengan desain studi kasus melalui wawancara dan observasi terhadap 4 informan dan 1 triangulasi di Instalasi Penjaminan RSUD Kota Yogyakarta.

Hasil: Pada aspek *optimism*, koder bersikap positif karena iDRG meningkatkan spesifisitas klaim dan terbantu fitur *One Click Claim* serta integrasi SMARTA dan *e-Claim*, meski belum efisien akibat dua fitur koding (iDRG dan INA-CBG). Pada aspek *innovativeness*, koder aktif belajar melalui seminar, pedoman iDRG, yaitu ICS, dan forum koder meski awalnya menunggu arahan. Pada aspek *insecurity*, sistem dinilai cukup aman namun terdapat keraguan pengkodean, kekhawatiran gagal kirim data, dan perlunya verifikasi manual. Pada aspek *discomfort*, koder merasa terbebani kompleksitas pedoman ICS, penambahan kode IM, alur kerja yang lebih panjang, kurang percaya diri, dan gangguan sistem.

Kesimpulan: Koder bersikap positif meski dalam masa transisi (*optimism*), aktif belajar meski awalnya pasif (*innovativeness*), mengalami keraguan dan kekhawatiran gangguan sistem (*insecurity*), serta merasa terbebani kompleksitas sistem dan dua fitur koding (iDRG dan INA-CBG) (*discomfort*).

Kata Kunci: BPJS, iDRG, RSUD Kota Yogyakarta, *Technology Readiness Index*.