



Out-of-Pocket Expenditure at the Health Care Facilities in Three Districts in Indonesia

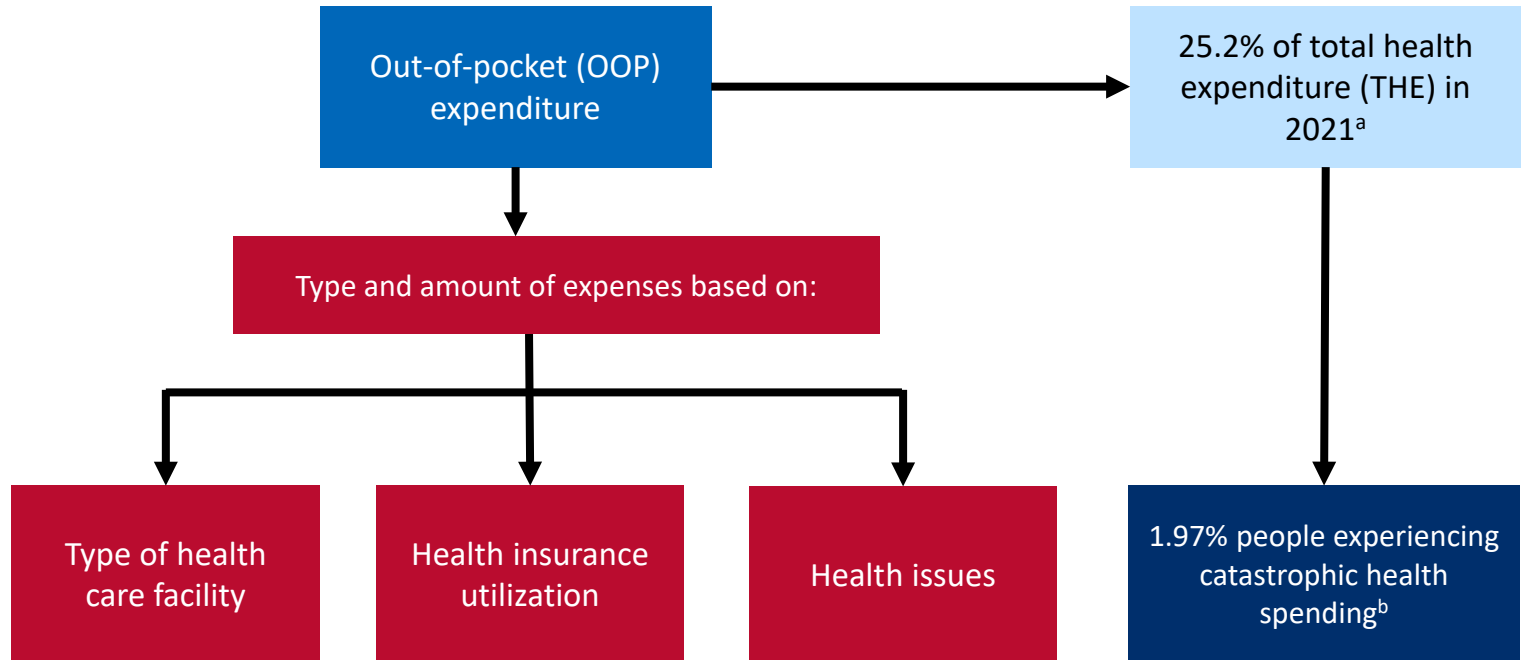
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Introduction



^a Results of National Health Account in 2021

^b Badan Pusat Statistik. (2022). *Tujuan pembangunan berkelanjutan Indonesia 2022*. Jakarta. Retrieved from <https://www.bps.go.id/publication/2022/12/22/500ea80678477e59232910a8/indikator-tujuan-pembangunan-berkelanjutan-indonesia-2022.html>

Methods



Data Collection

Exit survey* in Puskesmas, Private Clinics, Public Hospitals, and Private Hospitals

*Face-to-face interview, data entered to a digital platform



Patient Eligibility

Outpatients and Inpatients* (90:10)

*Discharged from the facility on the day of data collection



Location

Brebes, Wonosobo, and Malang Districts



Sampling Strategy

A minimum of 1,040 patients* were involved in this study using convenience sampling.

*The age range of the participants was 21-64 years old. If a participant did not fall within this age range, they were represented by a household member who was at least 21 years old.



Research Questions

“How much did the patient pay OOP in this facility for the current visit for the following items...”

(a) registration, **(b)** laboratory/radiology examination, **(c)** medical procedures and consultation, **(d)** medicines, **(e)** preventive services [ANC/PNC, immunization, family planning, and medical check-up (for outpatients)], and **(f)** bed (for inpatients)



Analysis

- Descriptive analysis of demographic profiles
- Descriptive analysis of OOP expenditure and percentage of catastrophic health spending (using the 10% cut-off, based on SDG indicator 3.8.2)
- Multivariable analysis of catastrophic health spending → adjusted odds ratio (AOR)

Results

PATIENT CHARACTERISTICS (N=1,040)

Malang

- 61% **women**
- 97% from **rural area**
- All patients **resided in the district**
- Average age : **39 years**
- Average monthly household expenditures : **IDR 2,142,572**
- 84.8% **JKN members**, 14.5% uninsured, 0.6% private insurance members
- 55.6% **PBI members**
- 80.6% belonged to **class 3 membership**
- 93.7% **used their insurance**

Brebes

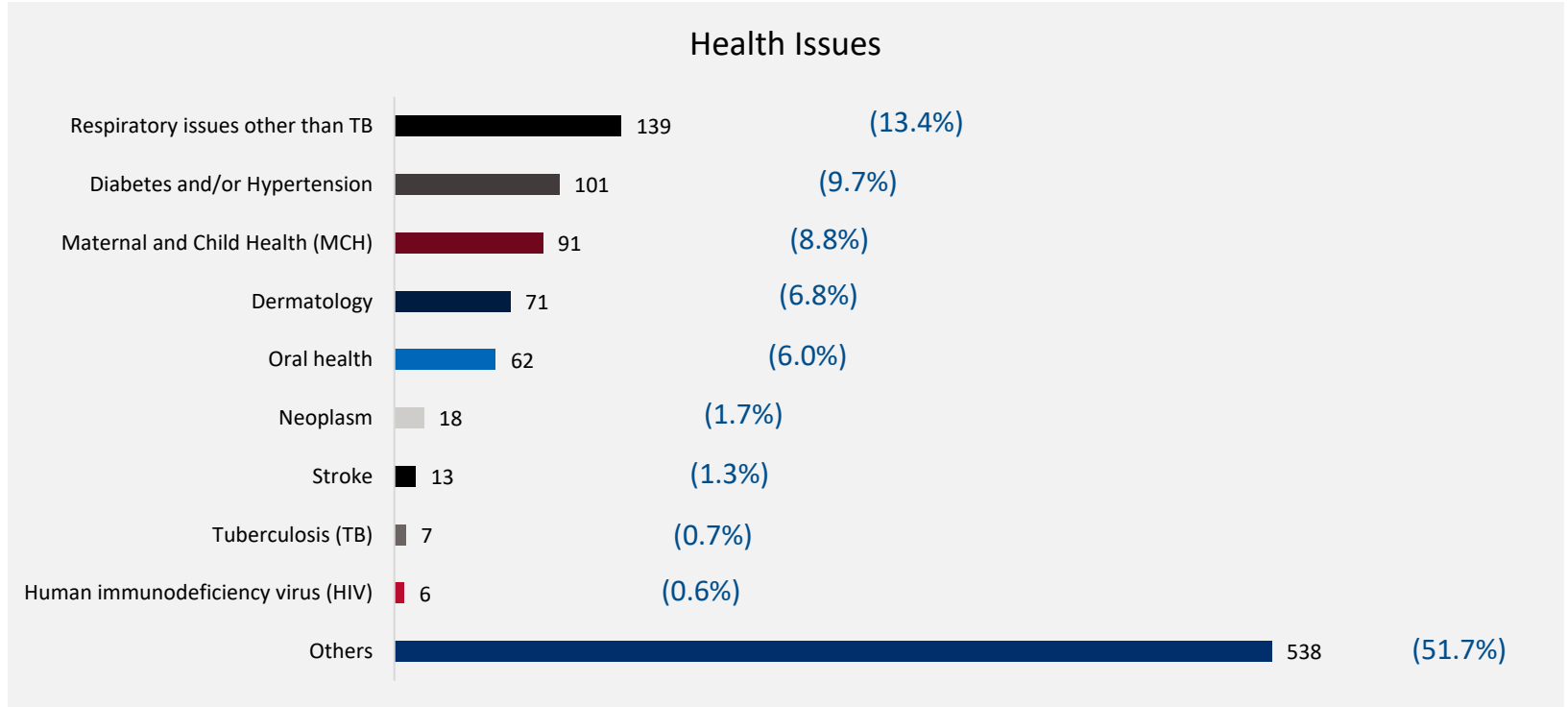
- 70% **women**
- 94% from **rural area**
- 97% **resided in the district**
- Average age: **38 years**
- Average monthly household expenditures : **IDR 2,905,941**
- 89.6% **JKN members**, 10.2% uninsured, 0.2% private insurance members
- 63.9% **PBI members**
- 79.6% belonged to **class 3 membership**
- 88.9% **used their insurance**

Wonosobo

- 62% **women**
- 84% from **rural area**
- 96% **resided in the district**
- Average age: **36 years**
- Average monthly household expenditures : **IDR 3,289,954**
- 70.2% **JKN members**, 28.5% uninsured, 1% private insurance members, 0.3% JKN and private insurance members
- 63% **PBI members**
- 79.8% belonged to **class 3 membership**
- 80.6% **used their insurance**

Results

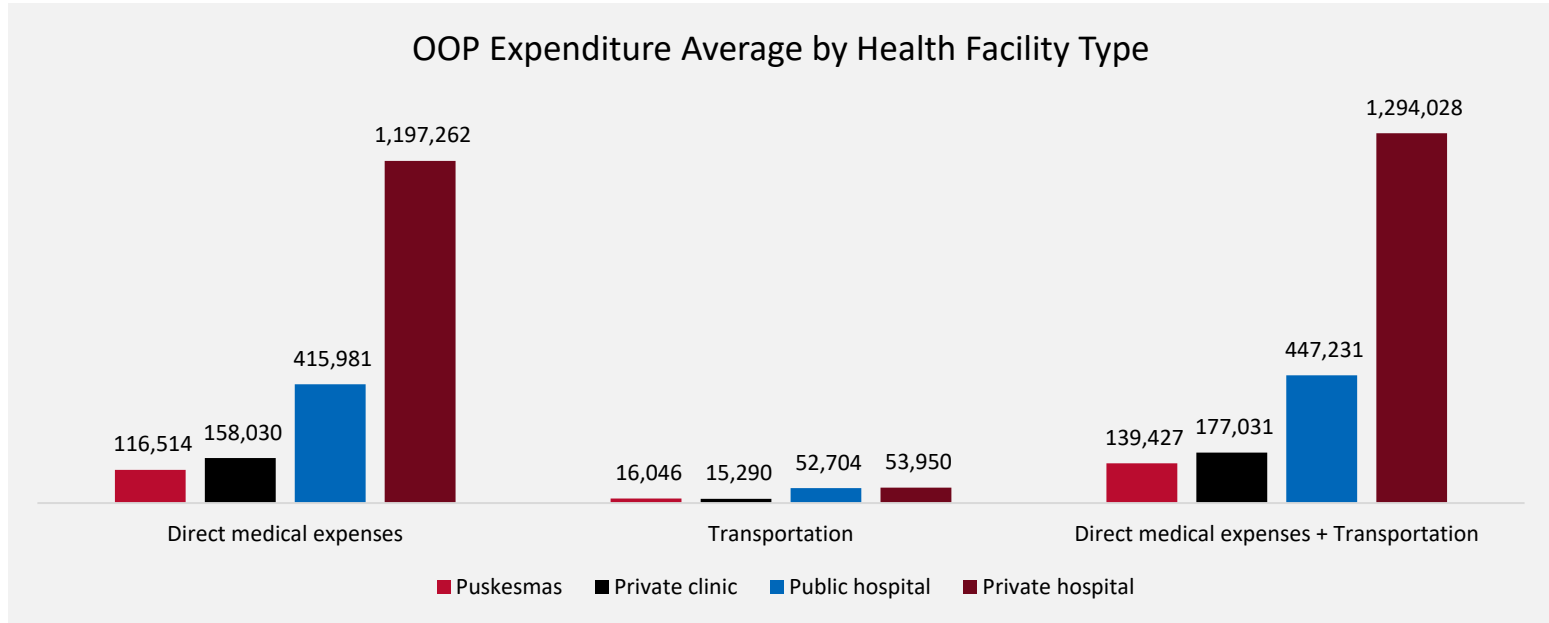
HEALTH SERVICE UTILIZATION



* "Others" included digestive issues, unspecified cardiovascular diseases, metabolic syndrome, ophthalmic issues, neurology and psychiatric issues, unspecified infection, surgical and post-surgical visits, orthopedic issues, ear issues, urology-nephrology issues, and unspecified symptoms

Results

AVERAGE OOP EXPENDITURE BY HEALTH FACILITY TYPE (IN IDR)



Highest average of OOP expenditure was identified in private hospitals

Results

AVERAGE OOP EXPENDITURE (DIRECT MEDICAL EXPENSES) BY HEALTH INSURANCE USE AND FACILITY TYPE (IN IDR)

Health Insurance Utilization		Puskesmas	Private Clinic	Public Hospital	Private Hospital
No Insurance	n	166	61	17	23
	Average	117,099	158,171	459,977	1,348,685
	Minimum	5,000	10,000	28,000	65,000
	Maximum	2,130,000	3,350,000	6,182,130	11,700,000
Using JKN	n	16	3	3	6
	Average	110,438	155,167	166,667	812,182
	Minimum	7,000	50,500	50,000	71,000
	Maximum	755,000	350,000	400,000	3,317,091
Using Private Insurance	n				1
	Average				25,000
	Minimum				25,000
	Maximum				25,000

Key Finding:

A higher average of out-of-pocket expenditure was particularly observed among uninsured patients in private hospitals

Results

CATASTROPHIC HEALTH SPENDING* (CHS) BY DISTRICT

Expenses	Category	Malang		Brebes		Wonosobo		All Districts	
		n	%	n	%	n	%	n	%
Direct medical expenses	Catastrophic	8	2.56	11	2.55	18	6.14	37	3.57
	Non-catastrophic	304	97.44	421	97.45	275	93.86	1,000	96.43
Transportation	Catastrophic	11	3.53	11	2.55	2	0.68	24	2.31
	Non-catastrophic	301	96.47	421	97.45	291	99.32	1,013	97.69
Combined direct medical expenses and transportation costs	Catastrophic	21	6.73	22	5.09	22	7.51	65	6.27
	Non-catastrophic	291	93.27	410	94.91	271	92.49	972	93.73

Key Finding:

- Around 2-6% experienced CHS from direct medical expenses
- When accounting for transportation, the CHS figure increases to 5-7.5%.

*Considered catastrophic if current OOP expenditure accounts for more than 10% of monthly household expenditure

Results

CHS BY HEALTH ISSUES

Group	Condition	Non-Catastrophic		Catastrophic	
		n	%	n	%
Respiratory Issues Other Than TB	Direct medical expenses	137	98.6	2	1.4
	Direct medical expenses and transportation	133	95.7	6	4.3
Diabetes and/or Hypertension	Direct medical expenses	99	99.0	1	1.0
	Direct medical expenses and transportation	96	96.0	4	4.0
MCH	Direct medical expenses	87	96.7	3	3.3
	Direct medical expenses and transportation	86	95.6	4	4.4

Key Finding:

Higher percentages of CHS were observed among maternal and child health (MCH) patients, with 3.3% without accounting for transportation costs and 4.4% including transportation costs.

Results

MULTIVARIATE ANALYSIS OF CHS (DIRECT MEDICAL EXPENSES)

Variable		Adjusted OR	P-value	95% CI	
District	Malang	Reference			
	Brebes	1.595	0.482	0.434	5.868
	Wonosobo	1.804	0.357	0.514	6.333
Type of facility	Primary	Reference			
	Referral	5.334	0.006	1.632	17.43
Facility ownership	Public	Reference			
	Private	3.727	0.018	1.256	11.05
Area of residence	Rural	Reference			
	Urban	0.691	0.713	0.096	4.973
Gender	Men	Reference			
	Women	1.083	0.878	0.392	2.993
Type of service	Outpatient	Reference			
	Inpatient	333.335	0	70.59	1574
Household expenditure quintile	1	Reference			
	2	0.883	0.867	0.206	3.789
	3	0.837	0.817	0.186	3.77
	4	0.503	0.39	0.105	2.41
	5	0.241	0.113	0.042	1.401
Insurance utilization	Uninsured	Reference			
	Using JKN	0.004	0	0.001	0.025
	Using private insurance*	1			

Key Finding:

A higher likelihood of experiencing CHS was found among patients treated at: (1) referral facilities, (2) private institutions, (3) as inpatients, and (4) those without insurance.

*No private insurance patients experienced CHS

Conclusions and Recommendations

CONCLUSIONS

- Higher OOP expenditures and an increased likelihood of CHS were identified among patients who: (1) visited private facilities, (2) attended referral facilities, (3) received inpatient treatment, and (4) were uninsured.
- Percentage of CHS:
 - All patients: 2-6% (direct medical expenses); 5-7.5% (including transportation costs)
 - MCH patients: 3.3% (direct medical expenses); 4.4% (including transportation costs)

RECOMMENDATIONS

- Enhance the coverage of JKN and reassess membership types
- Expand JKN connections with private healthcare facilities
- Further research:
 - Conduct qualitative studies involving patients, healthcare providers, and district governments
 - Triangulate findings using multiple data sources

LIMITATIONS

Samples are Java-based, but results are still in line with national estimates

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