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Good Practices in Social Security

Good practice in operation since: 2016

Ease of registration for National Health Social Security through Fast Track

**Social Security Administering Body for the Health Sector
Indonesia**

Summary

From the establishment of the Social Security Administering Body for the Health Sector (BPJS Kesehatan) on 1 January 2014 up to 1 May 2018, the coverage of participants was at 197 million, leading to a high number of visits to the branch offices. For the participant registration process, the national daily average of visits to all branch offices in Indonesia is 70,000 to 100,000 or a daily average of 700 to 1,000 visits per branch office. This means there is no certainty regarding the service times for the participants, with very long queues in the branch offices because the number of visitors outnumber the available facilities and service rooms. Given these conditions, the management has innovated and put a lot of several effort to speed up the registration service process. Through a Fast Track, No Waiting policy, we are able to provide participants with short service times of three minutes (no queues). Service is more efficient because the turnover in the waiting rooms is much faster and participants are now more comfortable and better served.

The issue or challenge

What was the issue or challenge addressed by your good practice? Please provide a short description.

One of the service conditions that can still be improved is the service for informal sector participants. This is due to the fact that the online registration system PBPU is not yet optimized, resulting to large numbers of participants opting to go to branch offices instead. The long queues in branch offices are also caused by an administrative service that is deemed slow by the public and which could be caused by an inefficient registration process described as follows:

1. During the registration of new informal sector participants, they must wait for the registration documents to be inspected by a checker. In addition, they must also wait for the officer to input the data and print the virtual account (VA), which makes waiting time longer.
2. Next, after paying the premium, the participants must go to a branch office once more to print their Indonesian health cards (KIS). Participants must queue and wait again for the verification of the premium payment documents and for printing the KIS.

Addressing the challenge

What were the main objectives of the plan or strategy to resolve the issue or challenge? List and briefly describe the main elements of the plan or strategy, focusing especially on their innovative feature(s) and expected or intended effects.

The conceptualization of Fast Track began on 16 November 2016 when the management discussed the simplification of the registration service flow. Based on the results of the meeting, a pilot Fast Track system was implemented:

1. The Fast Track system is applied only to the registration process of informal sector participants.

2. The indicator used to measure the time involved in providing the administrative service for the informal sector registration process takes into consideration the following:
- Waiting time is counted from the time a participant receives the queue number until he/she meets with the frontliner (7 minutes)
 - Contact time is counted from the time a participant meets with the frontliner until the service is completed (3 minutes)
 - Service time is the total of the waiting time and contact time
 - Card distribution time has a maximum of 7 working days and reports from third parties to the branch office has a maximum of 3 working days
 - The calculation for the above is under the assumption that:
 - It excludes the 14 day waiting time for the registration of new informal sector participants.
 - The cards are printed after the participants have paid the premium, and are handed to a third party on the next day.

The main goal of this innovation is to shorten the registration business process. The bottleneck occurs when the participants wait for document verification and the printing of the VA and the KIS. Given this, service and waiting time for participants is long.

Fast Track simplified two processes. First, for the VA printing, the VA number is sent through SMS and/or email to the participant. Second, after the participant makes the first premium payment, the electronic BPJS Kesehatan ID is automatically emailed to the participant and the KIS is sent directly to the participant's address.

Targets to be achieved

What were the quantitative and/or qualitative targets or key performance indicators that were set for the plan or strategy? Please describe briefly.

The goal of Fast Track is to accelerate service time and to have certainty in service waiting time. With the implementation of Fast Track on the new PBPU registration process, the service flow becomes much faster such that the turnover of arriving and leaving participants also increases. This greatly impacts on the participants' queue time in that it is now faster and more organized. This can be measured by the indicator on the number of visits to the branch offices, the waiting time and the service time of BPJS Kesehatan.

With the acceleration of the service and waiting time for registration, participants are now more comfortable. This may help improve participant satisfaction with branch offices to reach 81 per cent, which is the 2018 target. The indicator for this is the participant satisfaction survey results.

Evaluating the results

Has there been an evaluation of the good practice? Please provide data on the impact and outcomes of the good practice by

comparing targets vs actual performance, before-and-after indicators, and/or other types of statistics or measurements.

1. Waiting time and service time become much faster through the simplification of the business process. Before Fast Track was implemented, the average waiting time to register was more than 60 minutes. Now, the average waiting time is 25 minutes or 50 per cent more efficient with Fast Track. Before Fast Track, the average administration service time was 15 minutes. With Fast Track, the average service time takes 3 minutes only.

The stark difference that this innovation has made is the significant reduction in waiting time and service time due to the simplification of the business process. This also resulted in the reduction of queues in branch offices. Now, participants only need to go to the office once and the flow of participants who arrive and leave is much more organized. A summary of the differences before and after the implementation of Fast Track can be seen on the table below:

No.	Before	After
1	Participants spend an average of more than 1 hour for the service	Participants spend an average of 3 minutes for the service
2	Service times are longer, ending at 17:00	Service times are as they should be, ending at 15:00
3	The participants crowd around and stand because they do not get seats	There are no longer participants who stand around, they sit down and wait in an organized manner
4	An average of 700 visitors who come to the Office each day	An average of 400 visitors who come to the Office each day
5	The participants are unsatisfied due to uncomfortable rooms	The participants are satisfied with the uncomfortable rooms
6	The participants have no certainty regarding service times	The participants have certainty regarding service times
7	Management cannot control service times	Management can control service times
8	Participants are still filling out forms during service	Forms have been completed when the participants are on the fast track counter

2. There has been an increase in participant satisfaction. In 2016, participant satisfaction was 78.6 per cent and in 2017 it improved to 79.5 per cent.

Lessons learned

Based on the organization's experience, name up to three factors which you consider as indispensable to replicate this good practice. Name up to three risks that arose/could arise in implementing this good practice. Please explain these factors and/or risks briefly.

Fast track could be a good practice for other public service organizations. In line with the high expectations of participants and developments of the era, the registration flow system for public service must continuously be improved in terms of ease, speed and certainty. A good quality

registration process is not possible without the support of people, process and tools. BPJS Kesehatan has created policies and information systems regarding the continuity of the Fast Track registration and the officers such as the security guards and the frontliners comply with the policies and information system. The Fast Track innovation by BPJS Kesehatan can be replicated by other public service bodies by paying attention to the following:

1. Understand the sense of urgency to simplify business processes so that the setting of targets does not put aside participant satisfaction.
2. Make sure that the officers (security guards and frontliners) have adequate knowledge of the policies and the organized system.
3. Ensure the compliance of the officers (security guards and frontliners) with the policies and systems.

Besides paying attention to the matters listed above, there are also several risks that may occur in the implementation of Fast Track, namely:

1. Completeness/Non-compliance of the registration documents, so that the officer must explain or re-confirm once the service time is over.
2. Lack of information regarding the Fast Track counter function, such that participants do not understand the function of the counter (wrong counter) which affects waiting time.
3. Officers (security guards and frontliners) do not comply with the Fast Track policy such that the queue time and waiting time are longer.