

ABSTRAK

Latar Belakang. Luka kaki diabetik (LKD) merupakan komplikasi kronis berisiko tinggi pada diabetes mellitus menyebabkan kecacatan bahkan amputasi. Penanganan LKD membutuhkan perawatan intensif yang berdampak pada meningkatnya biaya pengobatan, terutama biaya langsung medis. Di Indonesia, termasuk di RSUD Raden Mattaher Kota Jambi, data tentang pembiayaan langsung medis pada pasien LKD masih terbatas.

Metode. Penelitian ini menggunakan desain deskriptif kuantitatif dengan pendekatan retrospektif. Data diperoleh dari rekam medis dan data keuangan rumah sakit periode Januari 2023 hingga Desember 2024. Data dianalisis secara univariat mencakup biaya kamar, biaya obat dan BMHP, biaya intervensi, biaya konsultasi, biaya penunjang dna biaya administrasi.

Hasil. Mayoritas pasien LKD adalah perempuan (60,9%), usia dewasa (>18-59 tahun)(65,2%), berpendidikan (90,2%), tidak bekerja (69,6%) dan menggunakan JKN (95,7%). Sebagian besar mengalami ulkus tinggi ($\geq$ kela 3), dengan HbA1c tidak terkontrol (87%) dan lama rawat inap rata-rata 10,49 hari. Komponen biaya terbesar pada intervensi medis dan obat-obatan. Pasien JKN memiliki rata-rata biaya medis lebih tinggi (Rp24.830.656) dibandingkan non-JKN (Rp5.478.881).

Kesimpulan. Pasien LKD di RSUD Raden Mattaher memiliki karakteristik sosiodemografi dan klinis yang beragam, dengan beban biaya langsung medis yang cukup besar. Jenis penjamin berpengaruh signifikan terhadap total biaya pengobatan.

Kata kunci: Luka kaki diabetik, biaya langsung medis, rawat inap

ABSTRACT

Background. Diabetic foot ulcers (DFU) are a high-risk chronic complication of diabetes mellitus that can lead to disability and even amputation. The management of diabetic foot ulcers (DFUs) requires intensive care, which impacts the increase in treatment costs, especially direct medical costs. In Indonesia, including at RSUD Raden Mattaher Kota Jambi, data on direct medical costs for LKD patients is still limited.

Method. This study uses a quantitative descriptive design with a retrospective approach. Data were obtained from medical records and hospital financial data for the period from January 2023 to December 2024. Data were analyzed univariately, including room costs, medication and BMHP costs, intervention costs, consultation costs, supporting costs, and administrative costs.

Results. The majority of LKD patients are women (60.9%), of adult age (>18-59 years) (65.2%), educated (90.2%), unemployed (69.6%), and using JKN (95.7%). Most of them experienced high ulcers ($\geq$ grade 3), with uncontrolled HbA1c (87%) and an average length of stay of 10.49 days. The largest cost component is on medical interventions and medications. JKN patients have an average medical cost of Rp24,830,656, higher than non-JKN patients (Rp5,478,881). **Conclusion.** Patients with LKD at RSUD Raden Mattaher have diverse sociodemographic and clinical characteristics, with a significant burden of direct medical costs. The type of insurer significantly affects the total treatment costs.

Keywords: Diabetic foot ulcers, direct medical costs, hospitalization