

ANALYSIS OF FINANCIAL PERFORMANCE OF ANUTAPURA PALU HOSPITAL BEFORE AND DURING COVID 19

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ABSTRAK

This type of research is quantitative descriptive research with trend analysis/time series analysis methods which focus on knowing and analyzing the financial performance of the Regional Public Service Agency, Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic from the liquidity aspect, activity aspect, profitability aspect , and aspects of PNBP income towards operational costs. The descriptive research method is a research method carried out to focus on the main goal of making an objective depiction and description of the situation. This research explains how to calculate financial ratios and use analysis of liquidity ratios, activity ratios, profitability ratios and PNBP income ratios at Anutapura Hospital, Palu for the 2017-2022 period. The financial reporting period from 2017 to 2019 was chosen because this year the condition of the Anutapura Palu Regional Hospital has not been affected by the Covid 19 pandemic. The financial reports from 2020 to 2022 were chosen because this year the Anutapura Palu Regional Hospital has been affected by the Covid 19 pandemic. Financial ratio analysis shows that during the Covid 19 pandemic, management performance to generate surpluses for hospitals decreased compared to before the Covid 19 pandemic. Continuous performance evaluation is very important to ensure the continuity and improvement of the quality of hospital services.

Keywords: Financial Ratios, BLUD, Covid 19

INTRODUCTION

Reform in Indonesia has given rise to a number of innovations in every element of hospital management. The establishment of regional autonomy which gave birth to the decentralization of hospitals, UNDP's suggestion to implement *good governance* for all public agencies, the establishment of performance-based budgets for government agencies, the transformation of hospital structures into Public Service

Bodies (BLU) and so on, will definitely have significant managerial implications. significant to the old paradigm, especially for hospitals owned by the government. Financial Management in this case is considered only a support that is not very important in returning policies in hospitals. With the existence of this management paradigm, thinking about the financial dimension becomes a vital issue, because it is part of the organizational function framework . Implicitly, hospitals are used to be managed in business

elements that must be professional, but do not forget their social function (Armen et al., 2013).

Hospitals are one of the health service facilities which are part of health resources and are very necessary to support the implementation of public health services. The implementation of health services in hospitals has very complex characteristics and organization. There are several classifications of health workers with their respective types of knowledge communicating with each other. Medical science and technology are developing very rapidly and must be followed by health workers to provide compatible services, making problems in hospitals increasingly complex. In terms of financial costs, hospitals require quite large operational costs and investment to carry out their activities, so it is very necessary to be supported by the availability of sufficient and sustainable funds . BLUD Financial Management Pattern (PPK-BLUD) is a performance-based financial management pattern which aims to improve the performance of government agencies. BLUD is implemented by government agencies to directly provide services to the community, where so far government agencies that directly deal with the community have been assessed as not performing very well. One example is a government hospital. Government hospitals are widely known to the public for their poor service quality, slow service, very poor cleanliness, etc. compared to private hospitals. Even though government hospitals have spent a certain amount of funds for operations and investment in government hospital buildings/equipment. Whether performance is good or not is very relative,

depending on where we look at it, but financial performance is usually able to reflect almost all of the organization's performance.

Instructions for regional governments in managing the finances of Regional Public Service Bodies have been issued Regulation of the Minister of Home Affairs of the Republic of Indonesia Number 79 of 2018 where the regulation states that Regional Public Service Bodies aim to provide public services effectively, efficiently, economically, transparently and responsibly in paying attention to the principles of justice, compliance and benefits, in line with sound business practices in helping to achieve regional government goals where management begins based on the authority mandated by the Regional Head. The mandate of the Regulation of the Minister of Home Affairs of the Republic of Indonesia Number 79 of 2018 concerning Regional Public Service Agencies, requires the implementation of performance evaluations every year in terms of covering financial and non-financial aspects. The Supervisory Board was formed to carry out financial and non-financial performance assessments, and the Hospital Director is willing to improve financial performance and non-financial performance. assessing the results of financial work can be assessed at least on how to obtain business results or performance results from services that have been provided (*profitability*), fulfill short-term performance obligations (*liquidity*), fulfill all obligations (*solvency*) and the capability of receiving services in terms of financing. expenditure . Assessing financial work performance at hospitals that have used the Financial

Management Pattern for Regional Public Service Bodies (PPK BLUD) has been regulated in the Director General of Treasury Regulation Number PER-36/PB/2016 concerning Guidelines for Performance Assessment of Public Service Bodies in the Health Sector, as amended in Regulation of the Director General of the Treasury Number PER-24/PB/2018 concerning Amendments to the Regulation of the Director General of the Treasury Number PER-36/PB/2016 concerning Guidelines for Performance Assessment of Public Service Bodies in the Health Sector.

Anutapura Palu Hospital, based on the type of service it provides, is categorized as a General Hospital in providing health services in all fields and types of disease, and based on its management, it is a Public Hospital managed by the Regional Government. In order to improve the quality of service, the Anutapura Palu Regional General Hospital has implemented the Regional Public Service Agency Financial Management (PPK BLUD) method, which is a system implemented in providing services to the community that has flexibility in financial management patterns as an exception to regional financial management provisions in general. . Anutapura Palu Regional General Hospital has been implementing the Regional Public Service Agency Financial Management Pattern (PPK BLUD) in stages since 2009 as stipulated in the Decree of the Mayor of Palu Number 445/906/SETDA/2008 dated 31 December 2008, and has had full BLUD status since 2012 in accordance with the Decree of the Mayor of Palu Number 900/186/RSU/2012 dated 27 February 2012, and has prepared financial reports

consisting of a Balance Sheet, Cash Flow Report, Budget Realization Report, Operational Report and recording of Financial Reports. These financial reports are prepared to provide periodic reports on the progress achieved by management as well as a means of accountability for investment and spending decisions, as well as the results obtained from these policies during a certain period.

The structure of the Revenue and Expenditure Budget for Anutapura Hospital, Palu, is in accordance with Minister of Home Affairs Regulation Number 13 of 2006 concerning Guidelines for Regional Financial Management, consisting of Revenue, Expenditure and Financing. Income includes Regional Original Income (PAD), balancing funds, and other legitimate income. Shopping includes direct and indirect spending. Direct expenditure is expenditure that can be budgeted and includes the implementation of programs and activities, consisting of personnel expenditure, expenditure on goods and services and capital expenditure. Indirect Expenditures are budgeted expenditures that are not directly related to activity programs, consisting of personnel expenditures, interest, subsidies, grants, social assistance, profit sharing expenditures, financial assistance and unexpected expenditures. Financing includes receipt of financing and expenditure of costs. The difference between financing receipts and financing expenditure is net financing to cover the deficit and to utilize the surplus. The increase in income is expected to reflect an increase in overall financial performance. Comparison of the Realized Revenue of the Regional Public Service Agency,

Anutapura Palu Regional General Hospital from 2017 to 2021, can be seen in the following table.

Table 1. Realization of Revenue at Anutapura Hospital, Palu, 2017-2021

N o.	Year	Income Realization	Change (Up/Down)	Percent age Change
1	2017	Rp. 126,857,283,84 0.00		
2	2018	Rp. 118,474,190,89 8.00	- Rp. 8,383,092,942. 00	-6.61%
3	2019	Rp. 81,213,230,098. 00	- Rp.37,260,960 ,800.00	-31.45%
4	2020	Rp.96,578,865, 381.00	Rp. 15,365,635,283. 00	18.92%
5	2021	Rp. 160,697,555,91 2.00	Rp.64,118,690,5 31.00	66.39%

Source: Anutapura Palu Regional General Hospital Financial Report 2017-2021

Horizontal financial statement analysis compares the percentage change in total revenue. Realization of BLUD income at Anutapura Hospital, Palu before the *Covid 19* pandemic, for 2018 there was a decrease of -6.61% and for 2019 there was a decrease in income of -31.45%. This incident was caused by several facilities and infrastructure at the Anutapura Palu Regional General Hospital being destroyed due to the earthquake and liquefaction disaster in Palu City and its surroundings on September 28 2018. Then in March 2020 Palu City experienced the Covid 19 pandemic. Due to the impact of

the Covid 19 pandemic in almost all sectors of hospital management, from financial management, service management to HR management. RSUD Anutapura Palu was designated as a referral hospital for *Covid 19* patients in Central Sulawesi Province based on the Decree of the Minister of Health of the Republic of Indonesia Number HK.01.07/MENKES/169/2020 which reads as the Designation of a Referral Hospital for Handling Certain *Emerging Infectious Diseases* , so that the BLUD of RSUD Anutapura Palu experienced the increase in income for 2020 was 18.92% and for 2021 there was an increase in income of 66.39%. The financial condition of hospitals in this case is always dynamic, can decline and increase rapidly. This can be used as a warning to further improve worker performance. However, hospitals can make various analyzes to maintain the stability and progress of services. One method of vertical financial report analysis is to compare two aspects of hospital finances using financial ratios.

Research carried out by Nurliah et al., (2021) states that financial performance should be improved by making the use of cash more effective, as well as current assets, and collecting receivables quickly so that financial work performance can improve in the future . It is very necessary to increase profits by increasing revenue and reducing operational costs so that company performance can improve and be better than before. This statement agrees with Tria's research (2021), namely that it is necessary to make efforts to increase hospital profits by increasing income and reducing operational costs so that hospital financial work performance can be strengthened in the future. According to

Candrasari et al., (2018) the results on financial work performance show that there is a strong and significant link to *the cost recovery rate* and the level of hospital independence. Based on the description of the background above, the problem formulation for this research is: "How was the financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic in terms of liquidity aspects?", "What was the financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic in terms of activity aspect? Covid 19 viewed from the aspect of PNBP income against operational costs? "Referring to this problem, researchers in conducting this research were to analyze and understand the financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic in terms of liquidity aspects , The financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic was reviewed from the activity aspect, the financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic was reviewed from the profitability aspect, the financial performance of the Anutapura Palu Regional General Hospital before and during the Covid 19 pandemic , it was viewed from the aspect of PNBP income against operational costs

Mutasowifin, (2014:5) financial work performance is part of the analysis to be carried out to see the extent to which a company has carried out and used financial implementation regulations properly and correctly. Hayat et al., (2017:24) financial reports are the final

result or product of an accounting process consisting of recording, grouping, reporting and interpreting processes whose contents are historical and current data sourced from the company in terms of monetary units to be addressed to internal and external parts of the company to make decisions. Kasmir, (2017:104) financial ratio analysis is the activity of comparing the numbers in financial reports by dividing one number by another number in one period or for several periods. The PNBP income ratio for operational financing is the ratio used to measure the increase in users of non-tax income compared to costs incurred in operational activities (Winarso, 2018). Based on the explanation above, the rationale for this research can be seen in the following picture.

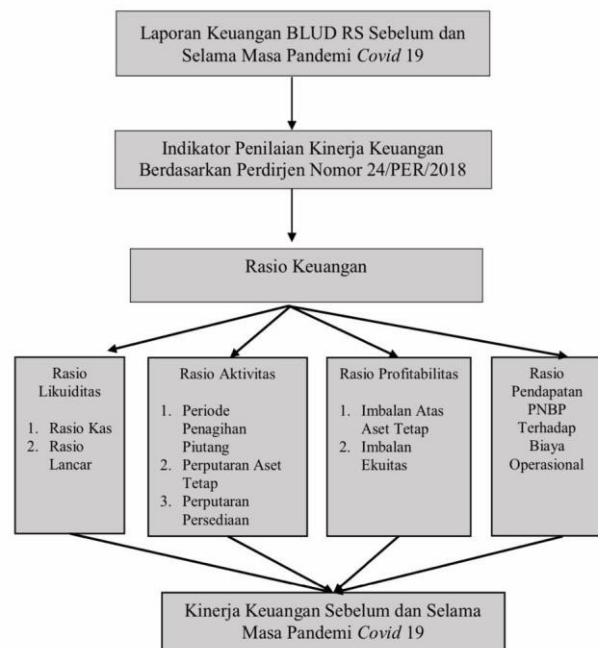


Figure 1. Framework of Thought

RESEARCH METHODS

This research is a type of quantitative descriptive research where the aim is to describe the financial performance of the Regional Public Service Agency, Anutapura Palu Regional General Hospital by processing and analyzing financial reports. Research location at Anutapura Palu Regional General Hospital, Jalan Kangkung Number 1 Palu City, Central Sulawesi Province. The research period was carried out for 2 (two) months, starting from June to July 2023.

This type of research data is quantitative data by its nature. According to its value, it is a type of continuous data or measurement result, and according to its measurement scale, it is a ratio whose measurement results can be differentiated, ordered, have a certain distance, and can be compared. The distance or interval between levels is clear, and has an absolute value of 0 (zero). An absolute zero value means that it truly does not exist (Sugiyono, 2022:28) . The data source for this research is secondary data obtained from the financial reports of the Regional Public Services Agency, Anutapura Palu Regional General Hospital from 2017 to 2022.

The data collection technique for this research is through documentation studies using the financial reports of the Regional Public Services Agency, Anutapura Palu Regional General Hospital for 2017-2022, literature studies by collecting relevant data that is in accordance with the topic of this research, namely the financial performance of the Regional Public Services Agency, General Hospitals. Regions, as well as direct interviews with relevant sources, the information obtained from the interview results will be parsed and reprocessed in research.

The analytical method is the analysis of data collected over time to provide a description of the development of activity performance and *time series* analysis / *trend analysis* , by using financial ratio analysis in accordance with the Director General of the Treasury Regulation Number PER-24/PB/2018 concerning Amendments to the Regulation of the Director General of the Treasury Number PER-36/PB/2016 which reads Guidelines for Performance Assessment of Public Service Bodies in the Health Sector, as follows:

a. Liquidity Ratio

1. Cash Ratio (*Cash Ratio*)

Formula:

$$\text{Cash Ratio} = \frac{\text{Cash and Cash Equivalents}}{\text{Short Term Liabilities}} \times 100\% \quad (1)$$

Explanation:

1. Cash is cash and bank balances and can be used at any time to finance BLU activities, and does not include bank balances for management fund accounts (Jamkesda/BPJS) which are not yet entitled to BLU.
2. Cash *equivalents* are a body of highly liquid current assets that can be converted into cash for a period of 1 month to 3 months without experiencing the risk of significant changes in value, excluding receivables and inventories. Examples are the same as cash, namely deposits in less than 3 months and checks due in less than 3 months.
3. Short-term liabilities are obligations that can be expected

to be paid and completed or mature within 12 months after the specified time.

2. Current Ratio (*Current Ratio*)

Formula:

$$\text{Current Ratio} = \frac{\text{Current Assets}}{\text{Short Term Liabilities}} \times 100\% \quad (2)$$

Explanation:

- 1.Assets are grouped into current assets and non-current assets. An asset is classified as a current asset if the asset:
 - a. is estimated to be able to be operated or held for sale or use within a period of 12 months after the balance sheet date;
 - b. owned and traded or can be short term and can be expected to be run for a period of 12 months from the balance sheet; or
 - c. in the form of cash or cash equivalents whose use is not restricted.
- 2.Current assets include cash and cash equivalents, short-term investments, trade receivables, other receivables, inventories, advances and prepaid expenses, do not include bank balances or managed fund accounts (Jamkesda/BPJS) and cannot be vested BLU.
- 3.Short-term liabilities are liabilities that can be expected to be paid/settled or mature within 12 months after the balance sheet date.

b. Activity Ratio

1. Receivables Collection Period (*Collection Period*)

Formula:

$$\text{Receivables Collection Period} = \frac{\text{Accounts Receivable}}{\text{Business Income}} \times 100\% \quad (3)$$

Explanation:

- 1.Trade receivables are rights that arise from the delivery of goods and services in the context of BLU operational activities.
- 2.Business income, namely PNBP BLU, can be obtained in return for goods/services provided to the community.

2. Fixed Asset Turnover (*Fixed Asset Turnover*)

Formula:

$$\text{Fixed Asset Turnover} = \frac{\text{Operating Income}}{\text{Fixed Assets}} \times 100\% \quad (4)$$

Explanation:

- 1.Operational income, namely BLU PNBP, can be obtained from compensation for goods/services provided to the community, results of collaboration with other parties, rent, financial institution services, and other income that is not directly related to BLU services, excluding income originating from APBN and grants.
- 2.Fixed assets are calculated based on the acquisition value of fixed assets minus construction work.

3. Inventory Turnover

Formula:

$$\text{Inventory Turnover} = \frac{\text{Total Inventory} \times 365}{\text{BLU Revenue} \times 1 \text{ Day}} \quad (5)$$

Explanation:

- 1.Total inventory is all inventory items owned by the hospital as regulated in PSAP No.05 Paragraph 05.
- 2.BLU income is BLU income which consists of income obtained in return for goods/services, handed over to the community, including income originating from grants, results of cooperation with other parties, rent, financial institution services, and other income that is not directly related. on BLU services, including income originating from the APBN.

c. Profitability Ratio

1. Return on Fixed Assets (*Return on Fixed Assets*)

Formula:

$$\text{Return on Fixed Assets} = \frac{\text{Surplus or Deficit}}{\text{Fixed Assets}} \times 100\% \quad (6)$$

Explanation:

- 1.The surplus/deficit at the beginning of the profit/loss post is the surplus/deficit before the profit/loss post, without taking into account investment income sourced from the APBN and depreciation costs.

2.Fixed assets represent the acquisition value of fixed assets without taking into account construction for work.

2. Equity Returns (*Return on Equity*)
Formula:

$$\text{Equity Return} = \frac{\text{Surplus or Deficit}}{\text{Equity} - \text{Surplus or Deficit}} \times 100\% \quad (7)$$

Explanation:

- 1.Surplus/deficit before profit/loss posts is the surplus/deficit before profit/loss posts, without taking into account investment income sourced from the APBN and depreciation costs.
- 2.*Equity* is the difference between BLU's *residual rights* to assets and all liabilities owned.

- d. Ratio of PNBPN Revenue to Operational Costs

Formula:

$$\text{PNBPN Income Ratio} = \frac{\text{PNBPN Income}}{\text{Operational Costs}} \times 100\% \quad (8)$$

Explanation:

1. PNBPN income, namely income obtained as compensation for goods/services delivered to the community, including income originating from grants, results of collaboration with other parties, rent, financial institution services, and other income not directly related to BLU services, does not include income which comes from the APBN.

2. Operational costs are all costs required to provide services to the community, which consist of personnel expenditures and goods expenditures, and the source of funds comes from APBN budget revenues and BLU PNPB revenues, and does not include depreciation costs.

The results of the Regional Public Service Agency Performance Assessment are determined based on the total score (TS) obtained by the Regional Public Service Agency. The results of the financial work performance assessment of the Regional Public Service Agency are obtained using the following formula:

$$\text{Financial Performance} = \frac{\text{TS Financial Performance}}{\text{TS Maximum Ratio}} \times 100\% \quad (9)$$

The results of the Regional Public Service Agency Financial Performance Assessment are divided into good, medium and poor criteria, as follows:

- (1) Good criteria consist of:
 - a. AAA, if $TS > 95$;
 - b. AA, apabila $80 < TS \leq 95$;
dan
 - c. A, apabila $68 < TS \leq 80$.
- (2) Medium criteria, consisting of:
 - a. BBB, apabila $56 < TS \leq 67$;
 - b. BB, apabila $45 < TS \leq 56$;
dan
 - c. B, apabila $35 < TS \leq 45$.
- (3) Bad criteria consist of:

- a. CC, apabila $15 \leq TS \leq 35$;
dan
- b. C, if the TS in the results of the financial performance aspect assessment achieved by the Regional Public Service Agency (BLUD) is less than 15% (fifteen percent).

RESULTS AND DISCUSSION

Analysis of the Financial Performance of the Regional Public Service Agency, Anutapura Palu Regional General Hospital before and during the *Covid 19* pandemic in this research is a process of assessing the financial performance of the Regional Public Service Agency, Anutapura Palu Regional General Hospital with a sample period of 2017-2022 which is measured through financial ratios, namely cash ratio, current ratio, debt *collection period*, fixed asset turnover, inventory *turnover*, *return on fixed assets*, *assets*), return on equity and the ratio of PNPB income to operational financing, which refers to the Regulation of the Director General of the Treasury Number PER-24/PB/2018 concerning Amendments to the Regulation of the Director General of the Treasury Number PER-36/PB/2016 concerning Guidelines Performance Assessment of Public Service Agencies in the Health Sector.

Financial reporting can be used to calculate this ratio through the Budget Realization Report, Balance Sheet and operational reports for 2017-2022. The 2017-2019 financial reporting period shows the condition of the Anutapura Palu Regional Hospital before the *Covid 19*

pandemic, as well as in the 2020-2022 financial reporting period during the *Covid 19* pandemic. The results of reviewing the financial performance that was carried out on the 2017-2022 Anutapura Palu Regional Hospital, previously and during the *Covid 19* pandemic, each financial ratio criterion to be evaluated will be described as follows:

Financial Performance from the Liquidity Ratio Aspect

The liquidity ratio is used to look at the ability of Anutapura Hospital, Palu, to meet its short-term obligations, including the cash ratio (*Cash Ratio*) and current ratio (*Current Ratio*).

Cash Ratio (*Cash Ratio*)

The results of calculating the Cash Ratio at Anutapura Hospital, Palu before the *Covid 19* pandemic tended to increase to close to the maximum score, however during *Covid 19* the cash ratio fluctuated, as seen in Table 2.

Table 2. Cash Ratio

Year	Cash and cash equivalents	Short Term Liabilities	Ratio (RK)	Score	Max Score	Achievements
2017	Rp. 10,333,735,797.51	Rp. 9,263,571,488.00	111.5 %	0.75	2.25	33.3 %
2018	Rp. 15,516,066,848.91	Rp. 8,972,849,322.53	172.9 %	1.25	2.25	55.5 %
2019	Rp. 8,857,308,943.91	Rp. 4,230,454,275.08	209.3 %	1.75	2.25	77.7 %
2020	Rp. 22,114,963,181.91	Rp. 1,903,801,613.80	1161.62 %	0.50	2.25	22.2 %

2020	Rp. 280.8	Rp. 2.2	100.00%
2021	Rp. 72,515,200,628.91	Rp. 25,823,622,867.00	1% 25 25
2020	Rp. 478.8	Rp. 0.2	33.3
2022	Rp. 44,533,091,742.91	Rp. 9,299,880,027.00	6% 75 25 3%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

Current Ratio (*Current Ratio*)

The Current Ratio is used to determine the comparison between current assets and current liabilities. This ratio is used to see the BLUD's ability to pay its short-term obligations and use its current assets. The greater the current ratio value, the better the score, namely > 600 with a maximum score of 2.75. The results of the previous calculation of the Current Ratio at Anutapura Palu Regional Hospital during the *Covid 19* pandemic are in Table 3.

Table 3. Current Ratio

Year	Current assets	Short Term Liabilities	Ratio (RL)	Score	Max Score	Achievements
2017	Rp. 34,917,232,480.00	Rp. 9,263,571,488.00	376.93 %	1.75	2.5	63.64 %
2018	Rp. 38,641,283,757.53	Rp. 8,972,849,322.53	430.65 %	1.7	2.5	64 %
2019	Rp. 37,538,515,302.12	Rp. 4,230,454,275.08	887.34 %	2.7	2.5	100 %
2020	Rp. 38,018,893,388.07	Rp. 1,903,801,613.80	199.7 %	2.7	2.5	100 %

Year	Current assets	Short Term Liabilities	Ratio (RL)	Score	Max	Achievement
2020	Rp. 83,644,323,206.95	Rp. 25,823,622,867.00	323.91%	1.25	2.45	45%
2021	Rp. 60,522,030,706.46	Rp. 9,299,880,027.00	650.78%	2.7	2.10	100%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

Financial Performance from the Activity Ratio Aspect

1. Receivables Collection Period

The receivables collection period is used to measure how long the average receivables collection takes during one period and the number of times the funds embedded in these receivables rotate for one period. The smaller the PPP ratio value (<30 days) the better the score with a maximum score of 2.25. The results of calculating the previous receivables collection period at Anutapura Palu Regional Hospital during the Covid 19 pandemic can be seen in Table 4.

Table 4. Receivables Collection Period

Year	Accounts Receivable x 360	Operating revenues	Ratio (PPP)	Score	Max	Achievement
2017	Rp. 142,935,380,389.34	Rp. 150,740,791,164.28	94.8%	2.25	2.25	100%
2018	Rp. 120,963,508,668.34	Rp. 80,126,440,952.16	150.97%	2.25	2.25	100%
2019	Rp. 99,904,787,716.36	Rp. 88,182,156,961.25	113.29%	2.25	2.25	100%

2. Fixed Asset Turnover

The fixed asset turnover ratio is used to identify the BLUD fixed asset model used to generate income. The greater the value of the fixed asset turnover ratio, the more optimal the BLUD will use its assets. Results of previous fixed asset turnover calculations at Anutapura Palu Regional Hospital and during the Covid 19 pandemic Table 5.

Table 5. Fixed Asset Turnover Ratio

Year	Operating Income	Fixed assets	Ratio (PAT)	Score	Max	Achievement
2017	Rp. 142,935,380,389.34	Rp. 150,740,791,164.28	94.8%	2.25	2.25	100%
2018	Rp. 120,963,508,668.34	Rp. 80,126,440,952.16	150.97%	2.25	2.25	100%
2019	Rp. 99,904,787,716.36	Rp. 88,182,156,961.25	113.29%	2.25	2.25	100%

Year	Operating Income	Fixed assets	Ratio (PAT)	Score	Max Score	Achievements
2020	Rp. 85,544,917,373.71	Rp. 93,413,737,378.11	91.58%	2.25	2.25	100.00%
2021	Rp. 158,705,088,200.61	Rp. 93,867,020,871.91	169.07%	2.25	2.25	100.00%
2022	Rp. 93,977,291,782.34	Rp. 87,696,368,136.95	107.16%	2.25	2.25	100.00%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

3. Inventory Turnover

The Inventory Turnover Ratio is used to see how long it takes to sell inventory. Calculation results of the Inventory Turnover Ratio at Anutapura Hospital, Palu before and after the Covid 19 pandemic. Table 6.

Table 6. Inventory Turnover Ratio

Year	Total Inventory x 365	BLU Revenue	Ratio (PP)	Score	Max Score	Achievements
2017	IDR 2,157,788,562,025.00	Rp. 183,683,055,615.34	12 days	0.75	2.25	33.33%
2018	Rp. 1,429,074,478,585.55	IDR 159,087,410,028.33	9 days	0.75	2.25	33.33%
2019	Rp. 1,913,309,747,610.00	Rp. 163,501,108,598.36	12 days	0.75	2.25	33.33%
2020	Rp. 1,974,672,789,505.00	Rp. 148,578,288,637.72	13 days	0.75	2.25	33.33%
2021	IDR 2,234,346,497,316.53	IDR 210,984,107,591.61	11 days	0.75	2.25	33.03%
2022	IDR 2,662,024,816,010.00	Rp. 136,713,715,355.34	19 days	1.25	2.25	55.56%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

Financial Performance from the Profitability Ratio Aspect

1. Return on Fixed Assets

The return on fixed assets ratio shows the results of the number of assets used for the company. Return on Fixed Assets shows the hospital's ability to use fixed assets in operational activities to generate income. Results of calculating compensation for fixed assets at Anutapura Hospital, Palu before and during the Covid 19 pandemic. Table 7

Table 7. Return on Fixed Assets Ratio

Year	Surplus/Deficit before profit/loss post	Fixed assets	Ratio (ROFA)	Score	Max Score	Achievements
2017	IDR 17,984,191,404.2	Rp. 150,740,791,164.28	26.53%	2.25	2.25	100.00%
2018	Rp. 11,830,265,552.18	Rp. 80,126,440,952.16	14.76%	2.25	2.25	100.00%
2019	IDR 34,078,000,163.29	Rp. 93,413,737,378.11	36.44%	2.25	2.25	100.00%
2020	Rp. - 365,929,455.9	Rp. 87,696,368,136.95	-0.42%	0	2.25	0.00%
2021	IDR 2,234,346,497,316.53	IDR 210,984,107,591.61	11.03%	2.25	2.25	100.00%
2022	IDR 2,662,024,816,010.00	Rp. 136,713,715,355.34	19.47%	2.25	2.25	100.00%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

2. Equity Rewards

The Equity Return Ratio is used to show the efficiency of the BLUD's use of its own capital. The higher this ratio, the better, which means that BLUD's capital position cannot be shaken. The surplus/deficit at the time of the profit/loss post is the surplus/deficit before the profit/loss post, not taking into account investment income that will come from the APBN and depreciation costs. Equity is the difference between residual rights to assets for all liabilities held. Results of calculating equity rewards at Anutapura Hospital, Palu before and during *Covid times* , table 8

Table 8. Equity Return Ratio

Year	Surplus/Deficit before profit/loss post	Equity - Surplus/Deficit before profit/loss items	Ratio (ROE)	Score	Max Score	Achievement %	2017	2018	2019	2020	2021	2022	2023
2017	Rp. 142,935,380	Rp. 169,222,855	84.47%	2	2	100.00%	17	18	20	20	20	20	20
2018	Rp. 120,963,508	Rp. 164,272,649	73.64%	2	2	100.00%	18	19	20	20	20	20	20
2019	Rp. 99,904,787	Rp. 194,148,102	51.46%	2	2	100.00%	19	20	20	20	20	20	20
2020	Rp. 716.36	Rp. 807.34	91.1%	2	2	100.00%	20	20	20	20	20	20	20
2021	Rp. 85,544,917	Rp. 144,727,229	59.11%	2	2	100.00%	20	20	20	20	20	20	20
2022	Rp. 373.71	Rp. 874.54	84.0%	2	2	100.00%	20	20	20	20	20	20	20
2023	Rp. 158,705,088	Rp. 187,337,656	84.72%	2	2	100.00%	20	20	20	20	20	20	20
2024	Rp. 93,977,291	Rp. 166,286,162	56.52%	2	2	100.00%	20	20	20	20	20	20	20
2025	Rp. 782.34	Rp. 317.09	5.0%	2	2	100.00%	20	20	20	20	20	20	20
2026	Rp. 365,929,455	Rp. 160,873,873	0.2%	0	2	0.00%	20	20	20	20	20	20	20
2027	Rp. 90	Rp. 405.88	3%	0	2	0.00%	20	20	20	20	20	20	20

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

Financial Performance from the Aspect of the Ratio of PNBP Revenue to Operational Costs

The ratio of PNBP income to operational costs is used to see the ability of PNBP income to cover operational costs. Results of calculating the ratio of PNBP income to operational costs at Anutapura Palu Regional Hospital until the time of Covid 19, table 9.

Table 9. Ratio of PNBP Revenue to Operational Costs

Year	PNBP income	Operating costs	Ratio (P/B)	Score	Max Score	Achievement %
2017	Rp. 142,935,380	Rp. 169,222,855	84.47%	2	2	100.00%
2018	Rp. 120,963,508	Rp. 164,272,649	73.64%	2	2	100.00%
2019	Rp. 99,904,787	Rp. 194,148,102	51.46%	2	2	100.00%
2020	Rp. 716.36	Rp. 807.34	91.1%	2	2	100.00%
2021	Rp. 85,544,917	Rp. 144,727,229	59.11%	2	2	100.00%
2022	Rp. 373.71	Rp. 874.54	84.0%	2	2	100.00%
2023	Rp. 158,705,088	Rp. 187,337,656	84.72%	2	2	100.00%
2024	Rp. 93,977,291	Rp. 166,286,162	56.52%	2	2	100.00%
2025	Rp. 782.34	Rp. 317.09	5.0%	2	2	100.00%
2026	Rp. 365,929,455	Rp. 160,873,873	0.2%	0	2	0.00%
2027	Rp. 90	Rp. 405.88	3%	0	2	0.00%

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

Financial Performance Before and During the Covid 19 Pandemic

The assessment of the financial performance of the Regional Public Service Agency, Anutapura Palu Regional General Hospital, is carried out by giving a score to each output ratio produced for each ratio analysis so that its performance criteria can be classified in accordance with the Director General of Treasury Regulation Number PER-24/PB/2018. "Amendments to the "Regulation of the Director General of the Treasury" Number PER-36/PB/2016 "Guidelines for Performance Assessment of Public Service Agencies in the Health Sector" Table 10 below shows the results of the financial performance assessment according to the previous Per-24/PB/2018

up to the time of Covid 19 at RSUD
Anutapura Palu.

**Table 10. Financial Performance
Before and During the Covid 19
Pandemic**

No.	Financial Ratios	Maximum Score	Score Before the Covid-19 Pandemic			Scores During the Covid-19 Pandemic		
			2017	2018	2019	2020	2021	2022
1	Cash Ratio	2.25	0.75	1.25	1.25	0.75	2.25	0.75
2	Current Ratio	2.75	1.75	1.75	2.75	2.75	1.25	2.75
3	Receivables Collection Period	2.25	1.25	0.75	0.75	1.25	2.25	1.25
4	Fixed Asset Turnover	2.25	2.25	2.25	2.25	2.25	2.25	2.25
5	Inventory Turnover	2.25	0.75	0.75	0.75	0.75	0.75	1.25
6	Return on Fixed Assets	2.25	2.25	2.25	2.25	2.25	2.25	0.00
7	Equity Rewards	2.25	2.25	2.05	2.25	2.25	2.25	0.00
8	PNBP Revenue Against Operational Costs.	2.75	2.75	2.75	2.25	2.50	2.75	2.25
Total Score		19.00	14.00	13.00	14.05	14.00	16.00	10.50
Performance			73.6%	72.6%	75.0%	76.3%	84.2%	55.26%
Category			A	A	A	A	A	BB
Performance Criteria			G	G	G	G	G	CU
			O	O	O	O	O	RR
			O	O	O	O	O	EN
			D	D	D	D	D	TL
								Y

Source: Data processed from the Anutapura Palu Regional General Hospital Financial Report, 2023

CONCLUSION

The financial work performance of the Anutapura Palu Regional General Hospital before the time of Covid -19 was seen through the liquidity aspect, namely the Cash Ratio and Current Ratio , the Anutapura Palu Regional Hospital was able to complete its short-term financial obligations. The results of calculating the Cash Ratio and Current Ratio before the Covid 19 pandemic tended to increase to close to the maximum score. However, during the Covid 19 pandemic, the cash ratio and current ratio experienced significant fluctuations. The pandemic caused a drastic increase in short-term liabilities, especially in 2021 which caused the cash ratio to reach a maximum score of 2.25 or 100% of the highest score, and a very drastic decrease in the current ratio with a score of 1.25 or 45.45%. from the highest score. On the other hand, in 2022, the cash ratio will increase with a low score of 0.75 or 33.33% of the highest score, while the current ratio will increase with a maximum score of 2.75 or 100% of the highest score. However, it is important to remember that a high or low cash ratio and current ratio do not always indicate a good or bad financial condition overall, because these ratios only provide an overview of the company's ability to meet short-term obligations using cash and cash equivalents, as well as assets. fluent; The financial performance of the Anutapura Palu Regional General Hospital before and during the Covid -19 pandemic was reviewed from the activity aspect, namely the Receivables Collection Period , Fixed Asset Turnover and Inventory Turnover , Anutapura Regional Hospital Palu, in

carrying out daily activities, has not been able to effectively use the assets it has. The results of calculating the ratio of the receivable collection period before and during the *Covid 19* pandemic show that the average number of days needed to collect receivables is >30 days, so that the hospital's financial cash flow is not smooth and hospital debt payments cannot be paid before they are due. Meanwhile, the results of calculating the fixed asset turnover ratio before and during the *Covid 19* pandemic show that Anutapura Hospital, Palu, was able to use its assets to generate income, achieving a maximum score of 2.25 (PAT > 20) or 100% of the highest score. Furthermore, the results of calculating the inventory turnover ratio before and during the *Covid 19* pandemic show that the Anutapura Hospital, Palu, in managing inventory turnover to obtain income has not been realized optimally. membutuhkan waktu rata-rata <30 hari untuk menjual persediaan yang dimiliki, dengan capaian skor 0,75 atau 33,33% dari skor tertinggi 2,25 ($30 < PP \leq 35$ hari). The low score is due to low supplies in one year compared to BLUD income (including APBD/N and grants). This happens because of the presence of distributors in the city and easy ordering; The financial performance of the Anutapura Palu Regional General Hospital before and during the *Covid 19* pandemic in terms of profitability values is *Return on Fixed Assets* and *Return on Equity*. Anutapura Palu Regional Hospital has not been able to use assets and house capital. pain to gain profit. The results of calculating the return ratio for fixed assets before and during the *Covid 19* pandemic

show the hospital's ability to use fixed assets in operational activities to generate income. Except that the results of data analysis in 2022 show that RSUD Anutapura Palu has not been able to manage fixed assets in its operational activities. Then, looking at the results of the equity return ratio calculation, it shows that the Anutapura Palu Regional General Hospital is able to generate additional equity for its shareholders with a score of 2.25 or 100% of the highest score. Except that in 2022 there will be a decrease in the score value. This is because operational costs are greater than hospital income, there is an operational deficit without depreciation and amortization, and there is a write-off of other assets, thereby increasing operational expenses from the other expenses account; The previous financial performance of the Anutapura Palu Regional General Hospital up to the time of the *Covid 19* pandemic was reviewed from the aspect of PNBPN income against operational costs, the Anutapura Palu Regional General Hospital was able to manage PNBPN and obtain significant income from sources other than taxes to cover operational costs. With a maximum PB score (Non-Tax Income) of 65 with a maximum total score of 2.75. Anutapura Palu Regional General Hospital in this category has achieved a maximum score of 2.75, indicating good ability in managing PNBPN towards operational costs. Continuous performance evaluation is very important to ensure the continuity and improvement of the quality of hospital services.

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