COMMUNITY PARTICIPATION IN INSURANCE OWNERSHIP SOCIAL HEALTH TO UNIVERSAL HEALTH COVERAGE (UHC) IN JAMBI CITY

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ABSTRACT

Introduction: Universal Health Coverage (UHC) is a health financing system that ensures every individual has equitable access, quality and financially affordable health services. BPJS as the organizing body has made efforts to encourage the achievement of UHC but in it’s implementation there are many obstacles. Method: This research is an analytical qualitative research. Result: Public knowledge about health insurance is still low, the availability of health facilities and coverage of health services are in accordance with standards. Discussion: There are still many people who do not know the importance of being a participant in health insurance.

Keywords: Health Insurance, BPJS, UHC

Introduction

In modern times, every individual has the right to live a healthy and prosperous life and get the right to food, clothing, health services and health insurance (Oldistra & Machdum, 2020). But unfortunately, not everyone realizes how important health is even though no one knows when calamities and illnesses will come that require large costs (Ashari, 2015), plus we never know whether our finances will always be available when we need them. Therefore, there is a solution called "Health Insurance" which based on its membership is divided into two, namely compulsory health insurance and voluntary health insurance and aims to ensure comprehensive health financing.

The government's focus on development efforts in the health sector is one of the implementation of the SDG's goal of Universal Health Coverage (UHC) which includes health services and access that can touch all levels of society (Meli Deranti, Sri Hartini, 2019). UHC or universal coverage is a combination of the adequacy of health facilities and the coverage of JKN membership which aims to ensure access to health services.

As a concrete step in implementing the JKN program, the government issued Law No.24 of 2011 concerning the establishment of BPJS, which is one of the characteristics of health insurance, namely budget and financing certainty that is able to cover costs arising from various patient complaints. Basically, JKN participants no longer pay cash for direct medical expenses but are paid prospectively by BPJS Health (Ananta, 2017).

As of August 2020, JKN participants in Indonesia touched 222.435.719 people or around 49% of the total population of Indonesia (Styawan, 2017). As for Jambi Province itself, there are 2.7 million people from the total population and specifically Jambi City recorded 60.28% of the number of health insurance participants, which when classified into 60.14% BPJS participants and 0.14% who participated in voluntary health insurance. This number is of course still far below the target achievement that has been determined to achieve UHC, which is 95%.
The type of research used is analytic qualitative research. The informants in this study totaled 13 people consisting of 4 people who did not have compulsory and voluntary health insurance as key informants and 1 person from BPJS Kesehatan Jambi Branch as a supporting informant. The sampling technique used was the Snowball Sampling Technique. After the respondent is obtained, the key informant is coded A and the supporting informant is coded B. The technique used for data collection is through in-depth interviews, with the research location in Jambi City. Data analysis and processing techniques using MDAP and source triangulation.

Results and Discussion

Matters that are closely related to community participation in health insurance are community interest. Where interest will arise when there is knowledge. If the level of participation is low, the level of public knowledge of the importance of health insurance is also low. This lack of understanding causes a lack of public awareness to participate in health insurance.

The availability of health facilities is in the form of the availability of proper health facilities to serve patients and the general public around the working areas of puskesmas and hospitals. And equipped with health services that are in accordance with the standards set by the health facility.

Health service coverage is the coverage of services provided by health facilities. The scope of services provided refers to the applicable government regulations.

Table 1. Informant Characteristics

<table>
<thead>
<tr>
<th>Informant Code</th>
<th>Initials</th>
<th>Gender</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1</td>
<td>S</td>
<td>Female</td>
<td>56 years old</td>
</tr>
<tr>
<td>A2</td>
<td>TH</td>
<td>Female</td>
<td>36 years old</td>
</tr>
<tr>
<td>A3</td>
<td>A</td>
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<tr>
<td>A4</td>
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<td>40 years old</td>
</tr>
<tr>
<td>A5</td>
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<td>Female</td>
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<td>Female</td>
<td>38 years old</td>
</tr>
<tr>
<td>A12</td>
<td>TT</td>
<td>Male</td>
<td>40 years old</td>
</tr>
<tr>
<td>B1</td>
<td>SW</td>
<td>Female</td>
<td>50 years old</td>
</tr>
</tbody>
</table>

In this study there were 13 informants who were divided into 1 key informant and 12 people as supporting informants.

Discussion

National Health Insurance (JKN) is an effort made by the government to guarantee the health of all Indonesian people in a comprehensive, affordable and quality manner. BPJS as the organizing body of the JKN program continues to make improvement efforts in order to achieve the UHC target, namely the percentage of membership reaching 95%. But in fact, these efforts still experience obstacles in their implementation. One of them is the percentage of participation that has not yet reached the UHC target.
Knowledge

Based on the results of research conducted by researchers, the low health insurance participation is influenced by low public knowledge of the importance of health insurance. There are still people who underestimate the importance of becoming a health insurance participant because they feel that they rarely get sick and if they get sick they only need stall medicine. This stigma is certainly not true because calamity and illness will come unexpectedly. This low level of public knowledge was also stated by the BPJS. In addition, it is also due to the lack of socialization from the BPJS such as how registration procedures to what are the benefits of health insurance. This low knowledge is also related to the community's understanding of health facilities that cooperate with BPJS to the lack of understanding of what benefits will be obtained when becoming a health insurance participant.

BPJS membership in Jambi City is still relatively low and has not yet reached the UHC target. Based on the results of the research, the community still does not understand how the BPJS participant registration procedure is due to the lack of information exposure regarding this matter. However, the BPJS stated that now there is a new innovation at the registration procedure stage so that prospective participants who will register do not need to come to the BPJS office and only through the Mobile-JKN application and via Whatsapp.

Availability of Health Facilities

Health facilities are facilities in health services that are used to organize individual health service efforts, both promotive, preventive, curative and rehabilitative carried out by the government, local governments and the community.

Based on the results of research conducted by researchers, to establish a cooperative relationship between BPJS and health facilities, first conduct a needs analysis. Judging from whether the facilities and infrastructure available at the health facility have met service standards, the availability of sufficient doctors, sufficient medicines to adequate supporting health facilities. In addition, to maintain the quality of health services from health facilities that are bound by cooperation, the BPJS conducts Work To Audit to assess whether the health facility serves patients well or not. BPJS will conduct interviews with several patients at the health facility to ask several questions such as whether the doctor is on-time to how the service is provided. The results will then be given to the hospital for consideration and evaluation.

Health Service Coverage

Health service coverage is a form of service coverage provided by health facilities to the community. The services provided are in accordance with the needs of the patient. Based on the results of the study that to carry out health services in health facilities in collaboration with BPJS, it runs in accordance with the regulations set by the Government, including what diseases will be guaranteed by BPJS and which ones are not included in the diseases covered by BPJS.

Conclusions

1. In the aspect of knowledge level, there are still people who do not understand the importance of becoming health insurance participants.
2. In the aspect of the availability of health facilities, BPJS will conduct a needs analysis before establishing a cooperative relationship with health facilities by ensuring the availability of facilities and infrastructure to the availability of essential medicines that meet the needs of patients.
3. In the aspect of health service coverage, health facilities that cooperate with BPJS in providing health services adhere to the guidelines determined by the Government regarding what diseases are guaranteed and not guaranteed health financing by BPJS.
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References


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