

Factors Affecting Community Participation in the National Health Insurance (JKN) Program in Pasuruan District

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ABSTRACT

The objective of this research is to explore the elements influencing public engagement in the National Health Insurance (JKN) initiative within Pasuruan Regency. A quantitative methodology was employed, utilizing questionnaires for data collection. The target population included active BPJS Health participants in Pasuruan Regency who did not receive contribution assistance (PBI). A sample of 100 individuals was chosen using the Purposive Sampling technique. The analysis demonstrated that factors such as education, income, health services, and knowledge had a positive and statistically significant impact on community involvement in the JKN program. This was confirmed by the t-calculated value being greater than the t-table value, alongside a P (sig) value less than α (0.05). Furthermore, the collective influence of these four variables was deemed significant, with an f-calculated value of 26.818 surpassing the f-table value of 3.089. The multiple linear regression model yielded the equation $Y = 8.605 + 0.101X_1 + 0.133X_2 + 0.173X_3 + \dots$. The study concluded that 51.1% of the variability in community participation could be explained by these factors, as indicated by the adjusted R^2 value of 51.1%

INTRODUCTION

Development of the health sector is a factor in efforts to improve national development aimed at improving healthy lifestyles for all, in order to improve the highest level of public health. Since 2014, Indonesia has been making it easier to improve the level of public health through the implementation of the National Health Insurance System known as the Social Security System of Social Security. This was integrated into the National Health Insurance Program or JKN (Permanx 28 Tahun 2014). -plaw no. 24 Since 2011. By implementing principles of mutual cooperation and mandatory participation. The National Health Insurance Program aims to help increase life expectancy and average life expectancy for Indonesians, reduce mortality and promote national health insurance participants with other health problems (Prabhakaran, Dutta, Fagan & Ginivan, 2019).

The participation of local governments in national health insurance is a key factor in the success of health insurance programs to support communities in the community that influence the increase in Indonesia's economic development. All Indonesians can live healthy, productive and wealthy lives. Community participation in the JKN programme is from the total number of healthy participants in BPJ in Indonesia, which increased annually to 228.77 million on December 31, 2022. Compared to inactive participants in 2022, when the number of healthy participants with inactive BPJ reaches 52.3 million, there are still inactive BPJ healthy participants with inactive BPJ, with 52.3 million.

The Pasuruan Regency government through the UHC programme (Universal Health Coverage) has registered its population as national health insurance participants with 1,535.193 Pasuruan Regency residents (Pemerinah Kab. Pasuruan, 2023). The population of Pasuruan Regency is currently 210,596 or 13.12% of the total population of Pasuruan Regency who is not receiving medical services due to not being registered in BPJS health. Giena, VP, Sulastry, N. Research by (2019). Community participation is influenced by factors: education, employment, and community knowledge. Boysen & Hongoro (2018) showed that perceptions of the National Health Insurance (JKN) had an impact on public trust. This is divided into two groups that several government groups trust in implementing the National Health Insurance System, while others believe there is a gap in health services. Therefore, this study chose the title "Factors influencing community participation in Pasuruan Regency's BPJS Health National Health Insurance (JKN) Program.

Based on the background of this problem, the formulation of the problem in this research is What are the factors that influence community participation in the BPJS Health National Health Insurance Program (JKN) in Pasuruan Regency. Based on the problem formulation above, the aim of this research is to find out and analyze the factors that influence community participation in the BPJS Health National Health Insurance Program (JKN) in Pasuruan Regency.

LITERATURE REVIEW

Health Economics

Rexford E. Santerre and Stephen P. Neun (2010) discuss how health economics examines the supply and demand for healthcare resources and their effects on a population. They emphasize that health economics is intricately linked to the allocation and determination of these resources. Similarly, PPEKAI (1989) defines health economics as the application of economic principles to health initiatives and the factors influencing the attainment of optimal health status.

National Health Insurance (JKN)

According to Presidential Decree No. 12 of 2013, health insurance provides health protection, ensuring that participants receive healthcare benefits and basic health needs coverage. This protection is available to individuals who have paid contributions or whose contributions are covered by the government.

BPJS Health

Law Number 24 of 2011 pertains to the Social Security Administering Bodies. The Health Social Security Administrators (BPJS) are legal entities established to manage health insurance programs. This body is a merger of four state-owned enterprises into a single legal entity, namely PT TASPEN, PT JAMSOSTEK, PT ASABRI, and PT ASKES.

Society Participation

Midgley & Hall's theory (2004) clarifies this understanding of community participation by referring to the early 1970s, the achievement of opportunities that enable all members of society to actively contribute to the development process and influence it and enjoy the benefits of development equally.

Education

Education is important for every individual human being to have broad knowledge and insight, and is an area that shapes attitudes, behavior and actions, both individuals and groups to have a sense of will to progress. (Wardana & Suharto, 2017).

Earnings

According to Giena & Sulastry (2019) Income is the amount of money earned by a person within one month. Based on the Regency/City Minimum Wage (UMK) in each region is different. Ettner SL (1996) stated that income has a causal impact on health, so it is important to carry out more in-depth research into what underlies this relationship.

Health Services

Law Number 25 of 2009 concerning Public Services explains that service standards are benchmarks used as guidelines for service delivery and as a reference for assessing service quality as an obligation and promise of organizers to the public in the context of quality, fast, easy, affordable and measurable services.

Knowledge

Berkeley, as cited in Lubis, Atika, & Gurning (2022), posits that knowledge encompasses all that humans acquire through observation, and it is fundamentally rooted in human experience. Furthermore, knowledge expands in accordance with the experiential processes individuals undergo.

METHODOLOGY

This research employs a quantitative approach. The study population consists of individuals who are actively registered as BPJS Health participants, possess BPJS Health cards, and are not enrolled in the PBI and PBIN segments in Pasuruan Regency. This population totals 519,199 people, including those in the PPU (Wage Earning Workers segment), PBPU (non-wage earners or formal workers), and BP (non-workers or investors) categories. Using the Slovin formula, the sample size for this research was determined to be 100 respondents. The sampling technique applied was purposive sampling, targeting individuals aged 17-60 years residing in Pasuruan Regency who are BPJS Health participants but not part of the PBI (Contribution Assistance Recipients) or PBID (Regional Contribution Assistance Recipients) segments.

The operational definitions of the variables in this study include five variables: (1) Education, as defined by the National Education System Law (Republic of Indonesia Law Number 20 of 2003), with indicators being Educational Level and Age. (2) Income, based on Ettner SL (1996), with indicators such as income received, type of work, and family burden. (3) Health services, according to BPJS Health (2022), with indicators including satisfaction with services, accuracy of services, politeness and friendliness in service provision, ease of obtaining services, and comfort in services. (4) Knowledge, as per Spencer (1993), with indicators including Analytical Thinking (AT), Conceptual Thinking (CT), and Technical/professional/managerial expertise (EXP). (5) Community Participation, according to Cohne and Uphoff (1980), with stage indicators such as participation in decision-making, implementation, benefit-taking, and evaluation perceptions. Data collection was conducted using a questionnaire, and the analytical method employed was multiple linear regression analysis.

RESULT

Respondent Characteristics and Participation

Types of participation: Respondents who were active BPJS Health participants in Pasuruan Regency in this study had junior high school (5%), high school (38%), college graduates (57%) and were registered in various types of membership, namely PPU-PN (22%), PPU-BU (42%), PBPU or Independent Participants (31%), and BP/Pensionan (5%).

Validity Test

The Validity Test results indicate that all statement items are related to factors influencing community participation in the National Health Insurance (JKN) program. These factors include Education (X1), Income (X2), Health Services (X3), Knowledge (X4), and Community Participation (Y). The test shows that the 47 question items have a calculated r value greater than or equal to the r table value of 0.1966, confirming the validity of the statements.

Reliability Test

The reliability test results for all items on the independent variables – Education (X1), Income (X2), Health Services (X3), Knowledge (X4) – and the dependent variable, Community Participation (Y), show that all 47 items have Cronbach's Alpha values of 0.60 or higher. This indicates that all variables used in this research are reliable.

Classic Assumption Test

Normality Test

Normality test results Normal PP Plot of Regression Standardized Residual

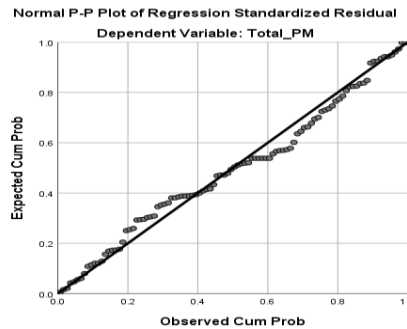


Figure 1. Result of Normal PP Plot of Regression Standardized Residual

The Normal PP Plot of Regression Standardized Residual normality test results indicate that the data points are distributed around the diagonal line and follow its direction. This suggests that the regression model satisfies the normality assumption.

Multicollinearity Test

The multicollinearity test results indicate that the VIF value for the Education variable (X1) is 1.542 (< 10) with a Tolerance Value of 0.649 (> 0.1). For the Income variable (X2), the VIF value is 1.785 (< 10) and the Tolerance Value is 0.560 (> 0.1). The Health Services variable (X3) has a VIF value of 2.073 (< 10) and a Tolerance Value of 0.482 (> 0.1). Lastly, the Knowledge variable (X4) shows a VIF value of 1.263 (< 10) and a Tolerance Value of 0.792 (> 0.1). These results indicate that there is no multicollinearity present in the data.

Heteroscedasticity Test

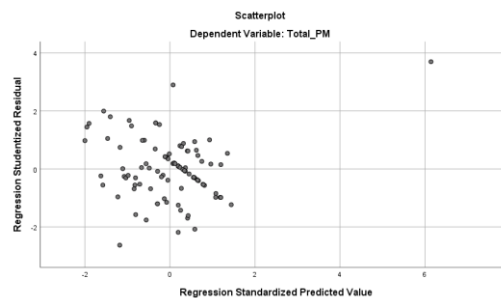


Figure 2. Result of Heteroscedasticity Test

The heteroscedasticity test results indicate that the plot points are irregularly distributed and spread well above and below zero on the Y-axis. This suggests that heteroscedasticity is not present.

T-Test

Table 1. Result of T-Test

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	8.605	2.120		4.059	.000
	Total_Pendidikan	.142	.047	.287	2.612	.000
	Total_Pendapatan	.135	.041	.216	2.239	.000
	Total_Pelayanan Kesehatan	.173	.053	.331	3.271	.001
	Total_pengetahuan	.396	.077	.409	5.172	.000

a. Dependent Variable: Total_PM

Source: Processed By Researcher, 2025

The T test results reveal that the calculated t values are greater than the t table values. Specifically, the calculated t value for the Education variable (X1) is 2.612, which is greater than the t table value of 1.661, and the P value (sig) is 0.000, which is less than α (0.05). For the Income variable (X2), the calculated t value is 2.239, exceeding the t table value of 1.661, with a P value (sig) of 0.000, also less than α (0.05). The Health Services variable (X3) has a calculated t value of 3.271, surpassing the t table value of 1.661, and a P value (sig) of 0.001, which is less than α (0.05). Lastly, the Knowledge variable (X4) shows a calculated t value of 5.172, higher than the t table value of 1.661, with a P value (sig) of 0.000, less than α (0.05). Therefore, since the calculated t values are greater than the t table values and the P values (sig) are less than or equal to α (0.05), the variables Education (X1), Income (X2), Health Services (X3), and Knowledge (X4) have a positive and significant effect on community participation (Y).

F-Test

Table 2. Result of T-Test

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	534.020	4	133.505	26.818	.000 ^b
	Residual	472.935	95	4.978		
	Total	1006.954	99			

a. Dependent Variable: Total_PM

b. Predictors: (Constant), Total_pengetahuan, Total_Pendidikan, Total_Pendapatan, Total_PK

The F test results indicate that the significance value for the impact of the variables Education (X1), Income (X2), Health Services (X3), and Knowledge (X4) on Community Participation (Y) is 0.000, which is less than 0.05. Additionally, the calculated F value is 26.818, which is greater than the F table value of 3.089. This demonstrates that the variables Education (X1), Income (X2), Health Services (X3), and Knowledge (X4) collectively have a significant influence on Community Participation (Y).

Multiple Linear Regression Analysis

The multiple linear regression analysis results yielded the equation:
$$Y=8.605+0.101X_1+0.133X_2+0.173X_3+0.396X_4+e$$
$$Y=8.605+0.101X_1+0.133X_2+0.173X_3+0.396X_4+e$$

This indicates that each unit increase in Education (X1), Income (X2), Health Services (X3), and Knowledge (X4) will affect Purchasing Decisions (Y) by 0.101, 0.133, 0.173, and 0.396, respectively. Specifically, the Education variable (X1) has an impact of 10.1%, the Income variable (X2) affects 13.3%, the Health Services variable (X3) influences 17.3%, and the Knowledge variable (X4) impacts 39.6%, assuming other variables were not examined in this study.

Determination Coefficient Test (R²)

The Coefficient of Determination test (R²) results reveal that the Adjusted R Square value in this study is 0.511, or 51.1%. This means that 51.1% of the variation in the Community Participation variable (Y) can be explained by the variables Education (X1), Income (X2), Health Services (X3), and Knowledge (X4). The R value is 0.728, indicating that the correlation between the variables X1, X2, X3, and X4 is 72.8%, while the remaining 27.2% is influenced by other variables not examined in this study.

DISCUSSION

The Relationship between Education and Community Participation in the JKN Program in Pasuruan Regency

The research results indicate that education has a positive and significant impact on community participation in the National Health Insurance (JKN) program in Pasuruan Regency. Education also simultaneously influences community participation. This finding aligns with the research by Prakoso & Sudasman (2020), which identified education as a key factor in an individual's participation in the JKN program. A person's level of education can affect their willingness and awareness to participate in the health insurance program. Similarly, Kofoworola et al. (2019) found that education level is related to the willingness and ability to pay for social health insurance in Nigeria. Mukhlis et al. (2020) also stated that a person's education level can influence a country's economic development. This demonstrates that education can shape people's behavior in utilizing the national health insurance program, thereby improving the economy and advancing community welfare in the health sector.

The Relationship between Income and Community Participation in the JKN Program in Pasuruan Regency

The research results indicate that income has a positive and significant impact on community participation in the National Health Insurance (JKN) program in Pasuruan Regency. Income also simultaneously influences community participation in the JKN program. This finding is consistent with the research by Bayked EM et al. (2020), which states that income positively affects the willingness to participate in the JKN program, as a person's financial capability can increase their interest in registering for health insurance membership. Similarly, Khristiana & Iskandar (2020) found that income support and economic conditions significantly impact participation in the JKN program and BPJS Health. Having

sufficient income can encourage individuals to consider becoming BPJS Health participants.

Relationship between Health Services and Community Participation in the JKN Program in Pasuruan Regency

The research results indicate that health services have a positive and significant impact on community participation in the National Health Insurance (JKN) program, with a *t* value of 3.271. This suggests that health services simultaneously influence community participation in the JKN program. This finding aligns with the research by Putri N. (2022), which states that the quality of health services has a simultaneous effect on the satisfaction of BPJS Health participants, thereby increasing public interest in the National Health Insurance program. Similarly, Muhlis (2022) explains that the accessibility and availability of health services play a crucial role in JKN ownership. However, some participants in this study disagreed with the statement that health workers in hospitals adequately received and listened to complaints from JKN patients. This is consistent with the findings of Nopiyani, Indrayathi, and Listyowati (2015), where participants felt that the health services provided by the JKN program were less satisfactory compared to independent services.

The Relationship between Knowledge and Community Participation in the JKN Program in Pasuruan Regency

The research results indicate that knowledge has a *t* value of 5.172, demonstrating that knowledge has a positive and significant impact on community participation in the National Health Insurance (JKN) program. Knowledge influences community participation both simultaneously and partially. This finding is consistent with the research by Alkhamis (2017) in Saudi Arabia, which showed that understanding the benefits of health insurance can increase public participation in using health insurance. Similarly, Haeruddin (2022) found that knowledge has a *p* value of less than 0.05, indicating that knowledge significantly influences community participation. Good knowledge can enhance the desire and awareness of individuals to become JKN participants, compared to those with poor knowledge, as it fosters higher awareness and participation in the National Health Insurance (JKN) program.

The Relationship between Education, Income, Health Services and Knowledge with Community Participation in the JKN Program in Pasuruan Regency

The research results indicate that education, income, health services, and knowledge have a significance value of 0.00, which is less than 0.05, with an *F* value of 26.818, exceeding the *F* table value. This suggests that education, income, health services, and knowledge simultaneously and partially influence community participation in the National Health Insurance (JKN) program. This finding aligns with the research by Zissimopoulou et al. (2020) on communities in the Thrace region of Greece, which showed that income and education levels, supported by sufficient knowledge, are associated with the choice of health facilities and community health services. Specifically, lower family income is linked to a lower probability of choosing private primary health services and a higher probability of opting for government primary health services.

CONCLUSION AND RECOMMENDATION

Conclusion

Based on the data analysis of factors influencing community participation in the National Health Insurance (JKN) program, the following conclusions can be drawn: Characteristics: The highest education level among respondents was 57%, indicating a high level of education. The most common type of BPJS Health membership was PPU-BU (Business Entity Wage Recipient Participants) at 42%. Influencing Factors: Education, income, health services, and knowledge have a positive and significant impact on community participation in the JKN program in Pasuruan Regency. These factors also simultaneously influence community participation in the JKN program. Among these, the health service factor has the greatest influence, accounting for 39.6% of community participation in the JKN program in Pasuruan Regency.

Recommendation

Based on the discussion obtained from the research results, here are several suggestions that might be used as material for consideration in decision making in the Health Insurance Program (JKN) in Pasuruan Regency. BPJS Health and the Government can provide more information and outreach regarding the benefits, funds and objectives of the JKN program so that the public knows and has more confidence so that they are encouraged to participate in the National Health Insurance (JKN) program to the people of Pasuruan Regency. BPJS Health can better monitor health services in hospitals that collaborate with BPJS Health in order to improve the quality of services for BPJS Health participants. In this research, it is known that education, income, health services, knowledge influence public participation in the National Health Insurance (JKN) program so that further research can develop this research by considering the variables that influence purchasing decisions.

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