



## Analysis of Participants Waiting Payment of JKN Mandiri Premium in the Working Area of the Helvetia Community Health Center

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### Abstract

The Mandiri National Health Insurance (JKN) is a national social security system where the premium is paid by participants. In 2018, data on premium arrears for Mandiri participants in Indonesia reached Rp. 5.7 Trillion, in Medan City, the highest premium arrears are in Medan Helvetia Subdistrict, amounting to IDR 4,215,379,613. The results of the initial survey indicate the cause of arrears is due to insufficient income. Green's theory explains that people's behavior in the health sector is formed due to a combination of predisposing, supporting and driving factors. This study aims to determine and analyze the influence of economic factors, knowledge, age, occupation and attitudes towards regulations in arrears of JKN Mandiri premium payments in the working area of Puskesmas Helvetia, Medan City. The research design used a quantitative analytic survey with a cross sectional approach. The study population was all JKN Mandiri participants in the work area of the Helvetia Health Center, Medan City who were in arrears, namely 8260 participants with a sample of 98 people. This research was conducted in the area of Helvetia Health Center, Medan City. Data were analyzed by univariate, bivariate and multivariate with multiple linear regression. The results showed that economic factors, knowledge and work have an influence in arrears of JKN Mandiri premium payments. Multivariate analysis shows that economic factors, knowledge, age, occupation and attitudes towards regulation only contribute to premium arrears of 19.7%. There is an influence of economic factors, knowledge and work in arrears to pay the JKN Mandiri premium, while the age factor, attitudes towards regulation have no effect. It is recommended for Puskesmas to always socialize JKN regulations and together with the local government to find solutions so that the community's economy will be better so that they can pay the JKN Mandiri premium.

## Introduction

Health is a basic right of everyone, and all citizens have the right to health services. The 1945 Constitution (UUD) mandates that health insurance for the community, especially the poor and underprivileged, is the responsibility of the central and regional governments. In Law (UU)

No. 36/2009 on Health, it is also stated that everyone has the same rights in gaining access to resources in the health sector and obtaining safe, quality and affordable health services.

In the Amendment of the 1945 Constitution, Article 34 paragraph 2 states that the state develops a Social Security System for all Indonesian people. This shows that the health sector is also covered by the state in the social security system.

Social security is a form of social protection to ensure that all people can fulfill their basic needs for a decent life. Social security is a right of all people guaranteed in the constitution. The social security desired by the constitution is social security that allows everyone to develop himself as a useful human being (Galasso & Profeta, 2002; Pieters, 2006; Cichon & Hagemeyer, 2006; Fraser, 2015).

The National Social Security System (SJSN) is basically a state program that has the aim of meeting the basic needs of a decent life and obtaining security in case of an accident and providing assurance of social protection and welfare for all Indonesian people. Law Number 40 of 2004 concerning the Social Security System (hereinafter referred to as Law No. 40 of 2004 concerning SJSN) is a real effort, seriousness and commitment of the government to provide guarantees to all its people.

One type of social security program is Health Insurance. Health insurance is provided nationally based on the principles of social insurance and equity principles. Health insurance is held with the aim of ensuring that participants receive health care benefits and protection in meeting basic health needs (Dewi & Ramadhan, 2016; Erlangga et al., 2019).

Health insurance in question is the National Health Insurance (JKN) developed in Indonesia which is managed by the Social Security Administering Body (BPJS) to accelerate the implementation of the National Social Security System for all Indonesians, based on the principles of mutual cooperation, non-profit, openness, prudence, accountability, portability, mandatory participation, trust funds, and the results of the management of the social security funds are entirely for program development and for the greatest interest of participants.

A JKN participant is any person who pays contributions or whose contributions are paid by the government. Broadly speaking, it can be divided into PBI (Contribution Aid Recipients) for Health Insurance and non-PBI (non-PBI) Health Insurance participants. PBI Health Insurance participants include people who are classified as needy and poor people. Participants who are not PBI Health Insurance are Participants who are not classified as poor and underprivileged, consisting of: (a) Salaried Workers (Civil Servants (PNS), members of the Indonesian National Army (TNI), Police of the Republic of Indonesia (POLRI), officials state, leaders and members of the Regional People's Representative Council (DPRD), etc. who receive wages) and their family members; (b) Non-Salary Workers (Workers outside of work relations or independent workers) and their family members; and (c) Non-Employees (such as investors, veterans, pension recipients, etc.) and their family members. One of the obligations of being a BPJS Kesehatan participant is to pay a monthly fee. For PBI Participants, fees are paid by the government, for health insurance contributions for residents registered by the Regional Government are paid by the Regional Government. For Participating Workers who Receive Wages (PPU), the contributions are paid by the Employer and the Worker. Participants who do not receive wages (PBPU) and participants who are not workers (BP), the contributions are paid by the Participants concerned or other parties on behalf of participants.

The amount of the contribution is determined by the class of service taken, generally class 1 is the largest, followed by class 2 and class 3. The BPJS monthly fee must be paid at least until the 10th of each month, if it is too late for 1 month then the BPJS card will be deactivated and will be get in arrears.

The arrears of contributions from Mandiri participants in Indonesia have reached Rp. 5.7 Trillion in 2018, an increase of 67.64% from the previous year (2017, 3,4T) (Adisasmito, 2008). The participant segment that has the most outstanding membership fees is Participants who do not receive wages (PBPU). This segment also tends to have low levels of compliance. There are two reasons why the compliance rate for this participant segment is low. First is because there are those who are unable to pay and second, willingness or willingness to pay low (Gustafsson-Wright et al., 2009). This is also in line with Adisasmito's opinion which states that paying health insurance contributions is very dependent on the ability to pay (ATP) and willingness to pay (WTP) (Entele & Emodi, 2016).

Based on data from the Department of Population and Civil Registration (Disdukcapil) semester I of 2018, North Sumatra Province is the 4th largest province with the largest population in Indonesia in 2018 reaching 14,838,678 people (5.98% of Indonesia's total population) where the number of independent participants in North Sumatra totaling 2,178,952 participants with 1,146,933 delinquent participants. Medan City is the city that has the highest number of independent participants in North Sumatra, with 811,250 participants, 35.98% of the total JKN participants in Medan (2,274,385 people). Arrears in dues in Medan City as of December 2018 reached IDR 120 billion out of 198,853 people, the most compared to other cities in North Sumatra Province (Adisasmito, 2008).

Medan City has 21 sub-districts, Medan Helvetia Subdistrict with the highest amount of IDR 4,215,379,613, - Medan Denai District is in second place of IDR 2,471,439,056 followed by Medan Deli Subdistrict in third place with IDR 1,976,681,540 in arrears, - as of December 2018. In 2017, Medan Helvetia Subdistrict was in third place in the premium arrears of independent participants with the amount of arrears of Rp. 3,429,880,515, Medan Sunggal Subdistrict ranks first as much as Rp. 8,592,476,420, - and Medan Tembung District is in second place with outstanding dues of Rp. 6,739,414,262.

Based on the description above, the researcher wants to analyze the factors that affect JKN Mandiri participants in arrears in their health insurance premium payments. The factors that will be examined in this study are economic status, knowledge of JKN, age of participants, occupation and attitudes of participants towards government regulations related to JKN. For this reason, this study wants to find out whether economic factors, knowledge, age, occupation and attitudes towards regulations affect participants in arrears in paying JKN Mandiri premiums in the Work Area of the Medan City Helvetia Health Center in 2019.

## Methods

The research design that will be used is quantitative analytic survey research where analysis of the relationship between risk factors (independent) and effect factors (dependent) is carried out using a cross sectional approach. Where in this study an analysis of the influence of the factors that influence participants in arrears to pay JKN Mandiri premiums will be carried out in the Helvetia Public Health Center, Medan City. This study emphasizes what factors cause JKN Mandiri participants to not pay the premiums of participants.

The population in this study were all people who were participants of BPJS Mandiri who resided in the Medan Helvetia area. People who become this population are people who are in arrears to pay JKN Mandiri premiums in the working area of the Helvetia Health Center, Medan City. The number of people in arrears is 8260 participants. The sample used is all heads of families who have the responsibility of paying the premiums. As for determining the number of samples from a population, other methods can be used, for example, the Slovin formula. So it can be concluded that the number of samples in the study was 98 people.

The types of data used in this study are primary data and secondary data. The primary data is in the form of a questionnaire about the factors that influence JKN Mandiri participants to be in arrears to pay JKN Mandiri premiums in the working area of the Helvetia Health Center, Medan City. Secondary data is in the form of data on JKN Mandiri participants who are in arrears to pay JKN Mandiri premiums. The measurement method used in research uses several measurement aspects so that it will help in obtaining the expected results. The data analysis technique used in this study used univariate, bivariate and multivariate analysis with the help of computers using the SPSS program.

## **Result and Discussion**

The economic factors of the respondents who are relatively poor are still willing to pay the JKN Mandiri premium. When compared with respondents who are economically well off, they also do not guarantee that they will be willing to pay the JKN Mandiri premium. Although the numbers and percentages are relatively small, this data also proves that there is a possibility that economically capable people may not be willing to pay the JKN Mandiri premium.

The factor of good knowledge regarding JKN does not guarantee an unwillingness (in arrears) to pay the JKN Mandiri premium. In fact, the percentage is close to 50% of the total respondents. When compared with respondents with the status of “less”, their knowledge of JKN will certainly have a big influence on their willingness to pay the premiums of Mandiri JKN. This contrasts sharply with the fact that people with good knowledge should have an impact on willingness and compliance in paying JKN premiums.

The age factor also affects the unwillingness to pay the JKN Mandiri premium. The older a person is, the greater the risk of chronic degenerative disease, so that it will influence someone to seek protection through insurance services. In this study, it shows that the age factor has no influence on the unwillingness (in arrears) of the community in paying the JKN Mandiri premium in the Work Area of the Medan Helvetia Puskesmas, Medan Helvetia District in 2019.

The job factor does not affect the unwillingness (in arrears) to pay the JKN Mandiri premium. A job that earns a steady income should support the willingness to pay the JKN Mandiri premium, but on the other hand, if the job does not have a steady income, it will be difficult to ensure that you will be willing to pay the JKN Mandiri premium. This study shows evidence of this statement, where respondents who have employees do not guarantee their willingness to pay the JKN Mandiri premium.

The attitude factor towards regulation does not affect the unwillingness (arrears) to pay the JKN Mandiri premium. Clear regulations, being disseminated in various media sources are important so that the public knows many things about JKN Mandiri. However, this proves that the attitude factor towards regulation does not affect the unwillingness (arrears) to pay the JKN Mandiri premium.

Based on the results of the chi-square test, it shows that the significant value of the probability of economic factors affecting the unwillingness (arrears) to pay JKN Mandiri is  $\text{sig-p} = 0.012$  or  $\text{value } \alpha = 0.05$ , which means that economic factors have a relationship with arrears (unwillingness) of the community to pay. Premium JKN Mandiri in the Work Area of the Medan City Helvetia Health Center in 2019.

Based on the results of the chi-square test, it shows that the significant value of the probability of the knowledge factor affecting the unwillingness (in arrears) to pay JKN Mandiri is  $\text{sig-p} = 0.046$  or  $\text{value } \alpha = 0.05$ , which means that the knowledge factor has an influence on the people's unwillingness to pay the JKN Mandiri premium in the Work Area of the Medan City Helvetia Health Center in 2019.

Based on the results of the chi-square test, it shows that the significant probability of being in arrears to pay based on age is  $\text{sig-p} = 0.625$  or  $\text{value } \alpha = 0.05$ . This proves that age has no relationship to the community's unwillingness (in arrears) to pay the JKN Mandiri premium in the Work Area of the Medan Helvetia Puskesmas, Medan Helvetia District in 2019.

Based on the results of the chi-square test, it shows that the significant probability of being in arrears to pay based on work is  $\text{sig-p} = 0.044$  or  $\text{value } \alpha = 0.05$ . This proves that work has a relationship to unwillingness (in arrears) to pay the JKN Mandiri premium in the Work Area of the Medan Helvetia Puskesmas, Medan Helvetia District in 2019.

Based on the results of the chi-square test, it shows that the significant value of the probability of arrears in paying JKN Mandiri based on the attitude factor towards regulation is  $\text{sig-p} = 0.451$  or  $\text{value } \alpha = 0.05$ . This proves that there is no relationship between attitude factors and participant regulations in arrears of JKN Mandiri premium payments in the Helvetia Health Center, Medan City.

## Conclusion

Based on the results of the research regarding the analysis of the participants' factor in arrears in the JKN Mandiri premium payment in the work area of the Medan City Helvetia puskesmas in 2019, it can be concluded that there is an economic effect of the participants in arrears of JKN Mandiri premium payments in the Helvetia Health Center Medan City. There is an influence of participant knowledge in arrears of JKN Mandiri premium payments in the Helvetia Health Center Medan City. There is no effect of participant age in arrears of JKN Mandiri premium payments in the Helvetia Health Center, Medan City. There is an effect of the participant's work in arrears of JKN Mandiri premium payments in the Helvetia Health Center Medan City. There is no influence of attitudes on participant regulations in arrears in the payment of JKN Mandiri premiums in the Helvetia Health Center Medan City.

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