p-ISSN: 2829-842X (print); e-ISSN: 2830-1056 (online) Vol.4 No.1 Mei 2022 Page.7-12

Analysis Of Perceived Benefit And Perceived Barrier With The Use Of Jkn Kis On Bpjs Participants In The Working Area Of Grabagan Health Center, Grabagan District, Tuban Regency

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ABSTRACT

The UHC program has been implemented in all parts of Indonesia, including in Tuban Regency. Since November 1, 2017 the Regional Government of Tuban Regency. The achievement of Universal Healthy Couverage (UHC) in Tuban Regency until October 2021 still has not met the target of 64.73% with a population of 1,219,609 people and a total membership of 789,440 people. To determine the relationship between perceived benefits and perceived barriers with the use of JKN KIS for BPJS participants in the Grabagan Health Center area, Grabagan District, Tuban Regency. This study uses quantitative methods consisting of survey methods and experimental methods. The analysis used using the Pearson Correlation test with a value of = 0.05.Perceived benefits to the use of JKN KIS BPJS participants in the Grabagan Health Center area, Tuban Regency, the most respondents experienced benefits, namely 354 respondents (90,3%), Perceived barrier to the use of JKN KIS BPJS participants in the Grabagan Health Center area, Tuban Regency, the most respondents experienced a barrier as much as 366 respondents (93,4%), Utilization of JKN KIS on BPJS participants in the Grabagan Health Center area of Tuban Regency, most respondents used JKN KIS, as many as 297 respondents (75.8%) and there is a relationship and mutual influence between perceived benefits and perceived benefits. barrier to the use of JKN KIS for BPJS participants in the Grabagan Health Center area, Grabagan District, Tuban Regency.

Keywords: JKN KIS, Peceived Benefit, Perceived Barier.

INTRODUCTION

Badan Penyelenggara Jaminan Sosial (BPJS) is a legal entity established to carry out Social Security programs. BPJS aims to realize the implementation of the provision of guarantees for the fulfillment of the basic needs of a decent life for each participant and/or family member. The presence of BPJS brings the principle of humanity in organizing health insurance guarantees for social life, especially the poor and underprivileged can receive benefits for the implementation of government systems and policies in guaranteeing basic rights to public health.

This shows that JKN participants have not made maximum use of JKN KIS in first-level health care facilities. This can be caused by the behavior in the community related to health where the behavior is based on the perception. In accordance with the results of research on the theory of HBM (Health Belief Model) that the determination of a person's perception of Health and his tendency to act in determining attitudes. The structure of the Health Belief Model includes perceived susceptibility which is a perception of the risk of disease, perceived seriousness is a perception of the severity of the disease, perceived benefits and perceived barriers are perceived benefits and obstacles in adopting preventive behavior and cues to action is their cue to act in the form of motivating factors inside and Received Maret 1, 2022; Revised April 2, 2022; Accepted Mei 20, 2022



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outside the family such as : friends, doctors, health care providers, media and educational resources (Burke. 2013).

Based on this, researchers want to know about the problems that exist in the community by analyzing the perceived benefits and perceived barriers to the use of JKN KIS in BPJS participants.

METHODS

Quantitative research can be defined as a process of finding knowledge by using data in the form of numbers as a tool to analyze information about what you want to know. This research method translates the data into numbers to analyze the findings this study uses quantitative methods used to examine the population or sample by using measuring instruments or research instruments, quantitative or statistical data analysis with the aim of testing hypotheses that have been made. Sampling using the solvin method. Bivariate analysis is used to determine the relationship between two variables, the independent variable and the dependent variable. In this study will analyze the perceived benefit and perceived barrier to the use of JKN KIS in BPJS participants in the Grabagan Health Center District Grabagan Tuban using chisqueir test with a degree of confidence of 95% or (3) = 0.05

RESULTS Characteristics Of Subjects

Tabel. Characteristics of respondents in this study by age.

| No | Age | Number of Respondents | Percentage % | |
|----|--------------|--------------------------|--------------|--|
| 1 | 5 - 12 years | 0 | 0 | |
| 2 | 13-25 years | 59 | 15,1 % | |
| 3 | 26-45 years | 184 | 46,9 % | |
| 4 | >45 years | 149 | 38,0 % | |
| | Total | 392 | 100 % | |

Tabel 2. Comparison of utilization of JKN KIS and not using JKN KIS.

| No | Work | Utilization of JKN-KIS | No Utilization of JKN- KIS | Total |
|-------|-----------------------|---------------------------|----------------------------------|-------|
| 1 | Student | 16 | 2 | 18 |
| | | 4,1% | 0,5% | 4,6% |
| 2 | Private Workers | 92 | 18 | 110 |
| - | | 23,5% | 4,6% | 28,1% |
| 3 | Self-employed | 36 | 12 | 48 |
| 3 | | 9,2% | 3,1% | 12,2% |
| 4 | Teacher / Lecturer | 7 | 6 | 13 |
| • | | 1,8% | 1,5% | 3,3% |
| 5 | Nurse / Midwife/Other | 3 | 4 | 7 |
| 5 | Medical Personnel | 0,8% | 1,0% | 1,8% |
| 6 | Farmer | 43 | 15 | 58 |
| U | | 11,0% | 3,8% | 14,8% |
| 7 | D N (W 1 | 74 | 24 | 98 |
| , | Does Not Work | 18,9% | 6,1% | 25% |
| 8 | Other | 26 | 14 | 40 |
| O | | 6,6% | 3,6% | 10,2% |
| m . 1 | | · | 392 | |
| | Total | | 100% | |

Data Analysis Tabel 3. Statistical test results

| Chi-Square Tests | | | | | | | | | |
|------------------------------------|-------------|----|-----------------------|----------------------|----------------------|--|--|--|--|
| | Value | Df | Asymp. Sig. (2-sided) | Exact Sig. (2-sided) | Exact Sig. (1-sided) | | | | |
| Pearson Chi-Square | 5.322^{a} | 1 | .021 | | | | | | |
| Continuity Correction ^b | 4.443 | 1 | .035 | | | | | | |
| Likelihood Ratio | 4.830 | 1 | .028 | | | | | | |
| Fisher's Exact Test | | | | .028 | .021 | | | | |
| Linear-by-Linear Association | 5.308 | 1 | .021 | | | | | | |
| N of Valid Cases ^b | 392 | | | | | | | | |

The results of statistical tests of correlation with chi squer Test between percieved benefit with the use of JKN KIS obtained the value of ρ value = 0.000 and α = 0.05. This shows that the ρ < α and chi squer value of 0.021 and a positive value.

DISCUSSION

Percevied benefit to the utilization of JKN KIS on BPJS participants in the working area of Grabagan Health Center, Grabagan District, Tuban Regency

Characteristics of variable perceived benefit most of the respondents felt the benefits of as many as 354 respondents (90.3%). And a small percentage of respondents feel less benefit as many as 38 respondents (9.7%). Society began to realize the benefits of JKN KIS this is evidenced by the results of the survey dominated by respondents feel the benefits of as many as 354 respondents (90.3%). Respondents feel the most dominant percieved benefit in questionnaire point 4 which states that by becoming a JKN membership, they can get access to first-level health care facilities (puskesmas, clinics, individual practicing doctors) easily.

The results of this study are in line with research conducted by Sharon Anjelica, Elfie Mingkid and Sintje A. Rondonuwu (2017) that people understand the benefits of using National Health Insurance. Even though they already understand the benefits of JKN, the community still needs to be socialized regarding the ease of using National Health Insurance.

This identifies the authors 'assumption that it is important to consider access to health services because it will affect the number of JKN Kis patient visits. If you know that Grabagan Sub-District is a highland area, then the community needs to open Health Service posts in areas that are difficult to reach to make it easier for people to access first-level health services.

Perceived Barrier To The Use Of JKN KIS

Characteristics of the perceived barrier variable, most of the respondents felt a barrier as many as 366 respondents (93.4%). And a small number of respondents did not feel a barrier, namely as many as 26 respondents (6.6%). Based on the perceived barrier research questionnaire, JKN KIS users experience several obstacles, namely the queue of JKN participants is very large.

Percieved this barrier can actually be overcome with JKN mobile online registration to minimize long registration queues and respondents can attend according to the hours listed on the JKN mobile application. But the Grabagan Health Center has not implemented this.

This is according to the president director of BPJS Kesehatan, Ali Ghufron Mukti during his visit to PKU General Hospital (RSU) Muhammadiyah Yogyakarta, Friday (04/02). "The existence of an online queue system that has been integrated into the JKN Mobile application can make it easier for participants to access services at the hospital. This makes participants no longer need to wait long in the hospital. They can take the queue number from home so that participants can already know the service time and can reduce the queue at the hospital,".

This identifies the assumption of the authors that the need for improvement of facilities, infrastructure and tools in the first level of health care, to improve the quality of health care. Digitization of queuing services is the most relevant solution, so that patients can easily register for health services. Can be done anywhere and anytime, with a smartphone can easily get a queue number and at what time the patient came to the health service without the need to queue long.

Utilization Of JKN KIS On BPJS Participants

Characteristics of variable utilization JKN KIS most of the respondents did the use of JKN KIS is as many as 297 respondents (75.8%). And there are 95 respondents (24.2%) who do not use JKN KIS. Respondents who did not use JKN KIS were dominated by the distance of health care facilities and difficult to reach medan health facilities.

This is in accordance with the problems experienced by some communities in other regions reported in liputan 6 (2018) that the use of JKN is still low because some communities say the difficulties with the rules, the distance of health facilities and health facilities are incomplete.

This identifies the author's assumption that facilities, infrastructure, tools and access to health services are very important for the community in making visits to get health services in health care facilities. The importance of monitoring and evaluation, as well as socialization of health services provided.

Perceived Benefit And Perceived Barrier Relationship With JKN Kis Benefits

The results of the correlation statistical test with the chi square test between perceived benefits and the utilization of JKN-KIS obtained ρ value = 0.021 and α = 0.05. This shows that $\rho < \alpha$ and the chi square value is positive. So it can be concluded that there is a relationship between perceived benefits and the utilization of JKN KIS. The degree of relationship in the chi square statistical test shows the number 0.021 which means a strong correlation. The chi square value is positive, which means that the perceived benefits associated with the utilization of JKN-KIS are positively related. This shows that if there is an increase in perceived benefits, it will automatically increase the utilization of JKN KIS.

The results of the correlation statistical test with the chi square test between perceived barriers and the utilization of JKN-KIS obtained ρ value = 0.887 and α = 0.05. This shows that ρ < α and the chi square value is negative. So it can be concluded that there is no relationship between the perceived barrier and the utilization of JKN KIS. The value of the chi square does not mean that the perceived benefit with the utilization of JKN-KIS is positively related. This shows that if there is a low perceived barrier with a high prevalence it will automatically increase the utilization of JKN KIS.

From the results of this study the authors assume that the use of JKN KIS can be influenced by several interrelated factors. Both in the factor of obstacles and advantages influence each other in the use of JKN KIS. Reducing one of the problems in the barriers can improve the quality of health care provided.

In this study the researchers wanted to know each of the risk factors about the use of JKN, so there is no conclusion for testing three variables at once.

CONCLUSION

- 1. Perceived benefit of using JKN KIS for BPJS participants in the Grabagan Health Center area of Tuban Regency, out of 392 respondents, there were 354 respondents who felt benefits when utilizing JKN KIS or around 90.30%.
- 2. Perceived barier on the utilization of JKN KIS BPJS participants in the Grabagan Health Center Tuban of 392 respondents, there are 366 respondents who feel obstacles when utilizing JKN KIS or about 93.36%.
- 3. Utilization of JKN KIS on BPJS participants in the Grabagan Health Center Tuban of 392 respondents, there are 297 respondents who use JKN KIS or about 75.8%.
- 4. The relationship between percevied benefit and percevied barrier with the utilization of JKN KIS on BPJS participants in the working area of Grabagan Health Center, Grabagan District, Tuban Regency
- a. There is a relationship between perceived benefits and the use of JKN KIS in BPJS participants in the working area of Grabagan Health Center, Grabagan District, Tuban Regency
- b. There is no relationship between percevied barrier and the use of JKN KIS in BPJS participants in the working area of Grabagan Health Center, Grabagan District, Tuban Regency

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