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The Impact of BPJS Contribution Increases on Health Services

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ABSTRAK

Peraturan Presiden Nomor 19 Tahun 2016 tentang Jaminan Kesehatan tertuang pada tanggal 1 April 2016 iuran BPJS akan mengalami kenaikan. Kenaikan iuran BPJS ini, membuat banyak masyarakat yang mengeluh keberatan khususnya pasien peserta BPJS mandiri dan hal ini dapat mempengaruhi kepuasan peserta BPJS. Penelitian ini bersifat kualitatif dengan menggunakan teknik pendekatan sistematik review. Artikel yang digunakan dalam penelitian ini merupakan teks full artikel dengan desain studi observasional (cross-sectional, cohort, dan case control) yang dipublikasikan dari tahun 2014 hingga tahun 2024. Variabel independen meliputi tingkat Status kenaikan iuran BPJS, dan variabel dependen yaitu kualitas pelayanan kesehatan. Pengumpulan data artikel dilakukan dengan mencari artikel pada search database database Google Scholar, Pubmed, dan Science Direct. Penelitian ini menunjukkan bahwa kenaikan iuran BPJS Kesehatan memiliki peran penting dalam menentukan perilaku penggunaan layanan kesehatan dan memiliki implikasi pada aspek ekonomi dan sosial. Iuran yang dibayarkan oleh peserta mempengaruhi kelas iuran yang dipilih. Sehingga, dapat disimpulkan bahwa kenaikan iuran BPJS berpengaruh terhadap Kepuasan Pasien Peserta BPJS.

Kata Kunci: Iuran, BPJS, Pelayanan Kesehatan

ABSTRACT

Presidential Regulation Number 19 of 2016 concerning Health Insurance stated on April 1, 2016, that BPJS contributions will increase. This increase in BPJS contributions has caused many people to complain, especially independent BPJS patients, and this can affect the satisfaction of BPJS participants. This research is qualitative, using a systematic review approach technique. The articles used in this study are full-text articles with an observational study design (cross-sectional, cohort, and case control) published from 2014 to 2024. The independent variables include the level of BPJS contribution increase status, and the dependent variable is the quality of health services. Article data collection was carried out by searching for articles in the Google Scholar, PubMed, and Science Direct database search databases. This study shows that the increase in BPJS Health contributions has an important role in determining the behaviour of using health services and has implications for economic and social aspects. The contributions paid by participants affect their decision to use health services, as well as affect the class of contributions chosen. Thus, it can be concluded that the increase in BPJS contributions affects BPJS participant patient satisfaction.

Keywords: Contributions, BPJS, Health Services



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BACKGROUND

Health problems are a shared responsibility of both the government and the community. Health problems that occur in the community will affect the development of a country and will cause losses in the economic sector. The government is required to be able to create a quality and high-quality health service system. Health plays an important role in people's lives, because health is an asset of physical, mental, and social welfare for each individual. The government always strives to improve the quality of public health by using social security. This social security is a form of social protection organized by the government, which is useful for guaranteeing citizens or their community to meet basic living needs. This social security program starts from Jamkesmas, Jamkesda, and ASKES, and a new government program has emerged called the Social Security Administering Agency (BPJS) (Ministry of Health of the Republic of Indonesia, 2016).

Based on Law Number 24 of 2011 concerning BPJS established two social security organizing bodies, namely BPJS Health and BPJS Employment. January 1, 2014, the government in the Social Security Administering Body (BPJS) Health implemented the National Health Insurance (JKN) policy. JKN is a government health service program managed by BPJS (Social Security Administering Body). BPJS Health is a state-owned enterprise that has changed into a public legal entity specifically assigned by the government to organize health insurance for all Indonesian people. (Ministry of Health of the Republic of Indonesia, 2017). This program serves various levels of society. BPJS Health is intended to provide protection so that all levels of society have equal access to health.

The health insurance program is run nationally with the principle of social insurance, the principle of equity, and its system in the form of a mutual cooperation system where capable and healthy participants will help poor and sick participants, but among the community there is a perception that it is still not good with the JKN program, such as the increase in BPJS contributions. The increase in BPJS Health contributions is actually a natural thing, in line with inflation and other conditions in society. There is even a provision stating that BPJS Health contributions are reviewed at least once every 2 years. This BPJS Health contribution feels very burdensome because it is carried out in the midst of the ongoing Covid-19 pandemic, where the pandemic that has occurred since a year ago has had a very large impact on various aspects of people's lives. As a result of the pandemic, the national economy has been in chaos, and many people have lost their jobs or experienced a drastic decrease in income.

Based on existing data, during 2020, BPJS Health contributions have increased twice. In January-March 2020 there was an increase that was later canceled by the Supreme Court, namely

BPJS Health contributions based on Presidential Regulation No. 75 of 2019 concerning Health Insurance, amounting to IDR 160,000.00 for Class I, IDR 110,000.00 for Class II, and IDR 42,000.00 for Class III. Then from April to June, BPJS Health received contributions based on Presidential Regulation No. 75 of 2019 concerning Health Insurance, which had decreased, namely IDR 80,000.00 for Class I, IDR 51,000.00 for Class II, and IDR 25,500.00 for Class III. Then from July to December, BPJS Kesehatan received contributions based on Presidential Regulation No. 64 of 2020 concerning the Second Amendment to Presidential Regulation No. 82 of 2018 concerning Health Insurance, amounting to IDR 150,000.00 for Class I, IDR 100,000.00 for Class II, and IDR 35,000.00 for Class III. Based on these data, it can be seen how the problem of contributions is a serious problem for the community, especially Class III Mandiri (Ministry of Health of the Republic of Indonesia, 2019).

METHOD

This study uses a systematic review study design. The articles used in this study are articles that have been published from 2014-2024 and obtained from the Google Scholar, PubMed, and Science Direct databases. The keywords used in searching for articles are "BPJS contributions, BPJS, health services." The research time is April-May 2024. The articles used in this study are article texts with observational study designs (cross-sectional, cohort, and case control) published from 2014 to 2024. The selected articles are articles that use Indonesian and English that discuss the effect of BPJS contributions on health services. The research sample is in hospitals or health centers. The dependent variable in this study is the increase in BPJS contributions, and the independent variable in this study is health services.

RESULT

Searching for articles related to the effect of BPJS contribution increases on the use of health services using the keywords: "BPJS contribution and BPJS and health services, BPJS contribution or BPJS or health services, "BPJS contribution" and "BPJS" and "health services", "BPJS contribution" or "BPJS" or "health services" brought up to 7130 articles in the PubMed, Google Scholar, and Science Direct databases. The articles were then selected according to the inclusion criteria, namely: increase in BPJS contributions, using an observational study design (Cohort, Cross-Sectional, Case Control), having, discussing the increase in BPJS contributions on health service users. 15 articles were found that met these criteria.

Table 1. Selected Articles for Systematic Review

Author (year)	Country	Research Method	Research Results
Harahap &	Indonesia	This study uses a	There is a relationship between the
Muhammad Riza		Quantitative method	increase in BPJS contributions and
Mahendra		through, validity test,	health services. There is a
(2023)		reliability test,	discrepancy in health services
		statistical test and	because many people do not pay
		hypothesis test	BPJS contributions

Ajeng Yuliane,	Indonesia	This study uses a	There is no relationship between
Dita (2020)		qualitative method	the increase in BPJS contributions
		that is descriptive	and health services. because the
		through in-depth	increase in BPJS has more impact
		interviews.	on BPJS finances.
Effendy, et al	Indonesia	This study uses an	There is a relationship between the
(2021)		explanatory	increase in BPJS contributions and
		quantitative method.	health services. Because it creates
			arrears in payments, which is
			detrimental to the hospital that
Daniela	т. Л	This are 1	provides BPJS.
Rapotan Hasibuan et	Indonesia	This study uses an observational method	There is a relationship between the increase in BPJS contributions and
		with a cross-sectional	health services. because if this
al.(2020)		study design	
		study design	policy is met, it will improve the
Sopiyana et al	Indonesia	This study uses a	quality of health services. There is a relationship between the
(2020)	muonesia	quantitative method	increase in BPJS contributions and
(2020)		using primary data.	health services. because it will
		using primary data.	affect patient satisfaction.
Yani et al	Indonesia	This study uses a	There is no relationship between
(2023)	maonesia	qualitative method	the increase in BPJS contributions
(2023)		that is descriptive.	and health services. Because it is
		that is descriptive.	more specific to BPJS
Fatmawati et	Indonesia	This study uses an	There is a relationship between the
al.(2020)	21140116014	observational method.	
			health services. Because it will
			have a positive and significant
			effect on the financial performance
			of the RSUD public service agency
Arief Budiono et	Indonesia	This study uses a	There is no relationship between
al.(2021)		qualitative method	BPJS contributions and health
		that is descriptive.	services. Because it has more
			impact on legal welfare in a region.
Andra Pratama	Indonesia	This study uses a	There is a relationship between the
Putra et al.(2022)		quantitative method	increase in contributions and
		with a cross-sectional	health services. Because BPJS
		approach.	contributions affect the
			completeness of health equipment
TT		ml · · · l	which affects service satisfaction.
Hetty ismainar et al.	Indonesia	This study uses a	There is a relationship between the
(2022)		quantitative method	increase in contributions and
		with a cross-sectional	health services. The policy of
		approach.	increasing BPJS contributions causes an increase in health
			causes an increase in health services
Putri et al. (2021)	Indonesia	This study uses a	There is a relationship between the
1 ati 1 ot ai. (2021)	madnesia	qualitative method	increase in BPJS contributions and
		that is descriptive	health services. Because if this
		diat is descriptive	policy is met, it will improve the
			quality of health services.
Helma Vira Yani	Indonesia	This study uses a	There is a relationship between the
(2023)		quantitative method	increase in BPJS contributions and
		using spss software	health services. Because it will
			affect administrative services in
		•	

			hospitals
Herniaty (2020)	Indonesia	This study uses a qualitative method that is descriptive.	There is a relationship between the increase in BPJS and health services. The increase in BPJS can encourage increased utilization of health services, because the cost of care becomes more affordable for BPJS participants. This can result in an increase in the number of patients using health facilities, both government and private facilities.
Majid et al. (2023)	Indonesia	This study uses a qualitative method that is descriptive.	There is a relationship between the increase in BPJS and health services. If the increase in contributions is not accompanied by an increase in the quality of service, participants may feel dissatisfied with the services they receive. This can lead to dissatisfaction and decreased trust in BPJS
Kodriyah et al (2020)	Indonesia	This study uses a quantitative method with a phenomenological approach.	There is a relationship between the increase in BPJS and health services. The increase in contributions can make health services provided by BPJS more expensive for participants, which in turn can reduce their accessibility to these services. Participants may think twice before using health facilities if the costs are higher.

DISCUSSION

This study found that the increase in BPJS Kesehatan contributions has a significant impact on users' decisions to use health services. BPJS Kesehatan participants who pay contributions are more likely to use health services more actively and more often than those who do not pay contributions. This increase in contributions also affects the contribution class chosen by participants, with those who choose higher contribution classes (classes 1 and 2) tending to use health services more intensively than those who choose lower contribution classes (class 3). In synthesis, this study shows that the increase in BPJS Kesehatan contributions plays an important role in determining health service use behavior. The contributions paid by participants influence their decisions to use health services, as well as influencing the contribution class chosen.

The results of this study can be used as consideration in improving the quality of health services received by BPJS Kesehatan participants, as well as in optimizing the use of resources available for this health insurance program. This study also found that the increase in BPJS Kesehatan contributions is based on the principle of mutual cooperation, which in Islamic economics is included in the scheme permitted by sharia, namely the latest contract. The BPJS Health program that collects

contributions from participants is intended to jointly (mutual cooperation) bear the risk. Thus, this study shows that the increase in BPJS Health contributions not only has an impact on the behavior of using health services but also has implications for economic and social aspects. In synthesis, this study shows that the increase in BPJS Health contributions has an important role in determining the behavior of using health services and has implications for economic and social aspects. The contributions paid by participants influence their decision to use health services, as well as influence the class of contributions chosen. The results of this study can be used as a consideration in improving the quality of health services received by BPJS Health participants, as well as in optimizing the use of resources available for this health insurance program. This study also found that the increase in BPJS Health contributions had an impact on health services in Malang City (Ministry of Health of the Republic of Indonesia, 2017).

This study shows that the high need for national health experiences problems when it is not accompanied by an increase in health services and is faced with the establishment of policies that are not pro-people. This study shows that the provision of health services should be given to every community to get access and services for health needs. In the synthesis, this study shows that the increase in BPJS Health contributions has an important role in determining the behavior of using health services and has implications for economic and social aspects. The contributions paid by participants influence their decision to use health services, as well as influencing the class of contributions chosen. The results of this study can be used as a consideration in improving the quality of health services received by BPJS Health participants, as well as in optimizing the use of resources available for this health insurance program.

BPJS Service Quality has a positive effect on BPJS Patient Satisfaction; the test results show a positive effect of 0.654164, while the T-Statistic value is 7.315626 and significant at α = 5%. The T-statistic value is above the critical value (1.96). The magnitude of the influence of BPJS Health Service Quality on BPJS Patient Satisfaction is 55.26%. The results of this study are in line with research conducted by Demiyati C (2019) that service quality affects patient satisfaction at the Pasar Minggu District Health Center, South Jakarta, in 2014 with a T-statistic value of 4.261. The results of this study are in line with previous research conducted by Baby Silvia Putri and Lindawati Kartika in the Journal of Management and Business Research Vol. 2, No. 1, February 2017: 1-12 with the title The Effect of BPJS Health Tariff Increase on User Satisfaction from the Doctor's Perspective and Nutritional Status of BPJS Participants at Hermina Bogor Hospital; it was found that there was an influence between the BPJS tariff increase on user satisfaction from the doctor's perspective with a T-statistic value of 3.897 and a large influence of 74.6%.

AUTHOR CONTRIBUTIONS

Kowel Gonjales Sinaga is the main researcher who plays a role in collecting research data, formulating research articles, and processing data. Karlinda and Tiara Nurcihikita plays a role in the procedures for writing journals and discussing research.

CONFLICT OF INTEREST

There is no conflict of interest in this study.

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REFERENCES

- Effendy, G. V. (2021). Pengaruh pemberitaan online kenaikan tarif iuran BPJS Kesehatan terhadap opini peserta mandiri BPJS Kesehatan Surabaya mengenai BPJS Kesehatan (Doctoral dissertation, Widya Mandala Surabaya Catholic University).
- Putra, A. P., Samsualam, S., & Rusydi, A. R. (2023). Pengaruh Tarif Iuran BPJS Rumah Sakit dan Willingness to Pay Terhadap Kelengkapan Peralatan dengan Kepuasan Pelayanan di Rumah Sakit Umum Daerah Kendari. *Jurnal Mirai Management*, 8(1), 326-341.
- Fatmawati, F., Mus, A. R., & Dani, I. (2020). Pengaruh tarif pelayanan terhadap kinerja keuangan pada badan layanan umum RSUP Dr. Wahidin Sudirohusodo Makassar. *Tata Kelola*, 7(2), 115-126.
- Yani, H. V. (2023). Faktor-faktor yang Berhubungan dengan Kepatuhan Membayar Iuran Bulanan BPJS Kesehatan Peserta Mandiri pada Sektor Informal di Kota Jambi (Doctoral dissertation, UNIVERSITAS JAMBI).
- Sopiyana, M. (2020). The Effect Payment Methods and Services on The Satisfaction BPJS Health Members South Tangerang. *EAJ (Economics and Accounting Journal)*, *3*(3), 154-162.
- Intiasari, A. D., Trisnantoro, L., & Hendrartini, J. (2019). FACTORS AFFECTING DELAYINGPAYMENT OF NATIONAL HEALTH INSURANCE (BPJS KESEHATAN) PREMIUM AMONG PARTICIPANTS OF THE INFORMAL SECTOR IN BANYUMAS REGENCY. *Public Health*, 2, 1.
- Kodriyah, L., Fikriana, R., Nurbadriyah, W. D., Agustiningsih, N., Ningrum, L. R., Aditya, R. S., & Mayasari, E. (2020). Community Experience on the Issue of BPJS (The Indonesian National Health Insurance System). *Indian Journal of Public Health*, 11(03), 23-53.
- Ajeng Yulianie, D. (2020). Analisa Dampak Kebijakan Atas Kenaikan Iuran BPJS Kesehatan Terhadap Manfaat Kesejahteraan Hukum Nasional (Studi Kasus Di Kecamatan Bulukerto) (Doctoral dissertation, Universitas Muhammadiyah Ponorogo).
- Harahap, M. R. M. (2023). Pengaruh kualitas pelayanan dan kenaikan iuran terhadap tingkat kepuasan pasien kartu (BPJS) Kesehatan (studi kasus pada pasien mandiri di Puskesmas Padangmatinggi Kecamatan Padangsidimpuan Selatan) (Doctoral dissertation, UIN Syekh Ali Hasan Ahmad Addary Padangsidimpuan).
- Putri, N. (2021). Analisis Penyebab Defisit Anggaran Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan (Doctoral dissertation, Universitas Islam Negeri Sumatera Utara).
- Ismainar, H., Hartono, B., & Jepisah, D. (2022). Factors Affecting Inpatient Patient Satisfaction of Social Security Agency of Health (BPJS) Participants at Bangkinang Hospital. *Science Midwifery*, 10(5), 4456-4464.
- Erniaty, E., & Harun, H. (2020). Understanding the impacts of NPM and proposed solutions to the healthcare system reforms in Indonesia: the case of BPJS. *Health Policy and Planning*, *35*(3), 346-353.
- Majid, J., & Saputra, R. E. (2020). Social Accounting; Tendensi Kemaslahatan Publik dibalik Kenaikan Tarif BPJS Kesehatan di Indonesia. *Jurnal Sosial Ekonomi Dan Humaniora*, 6(1), 44-53.
- Hasibuan, R., Purnama, T. B., & Susanti, N. (2020). Respon Kenaikan Iuran Jaminan Kesehatan Nasional dan Utilitas Puskesmas Oleh Peserta JKN di Medan. *Jurnal Kebijakan Kesehatan Indonesia*. https://doi.org/10.22146/jkki, 59237.
- Budiono, A., Yulianie, D. A., Febriansyah, F. I., Sari, R. M., Iriani, D., & Nuryani, N. (2021). Analisa Dampak Kebijakan Atas Kenaikan Iuran Jaminan Kesehatan Nasional (Studi di Kecamatan Bulukerto). *Media Keadilan: Jurnal Ilmu Hukum*, 12(1), 115-141.
- Undang-Undang Republik Indonesia Nomor 24 Tahun 2011, Pub. L. No. 24 (2011).

- Peraturan Presiden Nomor 82 Tahun 2018 tentang Jaminan Kesehatan.
- Kemenkes RI. Profil Kesehatan Indonesia Tahun 2016. Jakarta: Kementerian Kesehatan Republik Indonesia; 2017. http://www.pusdatin.kemkes.go.id/folder/view/01/structure-publikasi-data-pusat-data-dan-informasi.html (diakses tanggal 14 April 2024 jam 15.00 WIB).
- Peraturan Presiden Nomor 75 Tahun 2019 Tentang Perubahan Atas Peraturan Presiden Nomor 82 Tahun 2018 Tentang Jaminan Kesehatan.
- Peraturan Presiden Nomor 64 Tahun 2020 Tentang Perubahan Kedua Atas Peraturan Presiden Nomor 82 Tahun 2018 Tentang Jaminan Kesehatan.
- Kemenkes RI. Kementrian Kesehatan RI. (2017). Profil Kesehatan Indonesia Tahun2016. Jakarta: Kementrian Kesehatan RI. J Med dan Rehabil. 2016.