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ORIGINAL ARTICLE

Factors Affecting Compliance Paying Health Social Security Administering Agency in Road Care Patients in Hospitals

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Abstract

Obedience in paying dues means the behavior of someone to pay dues appropriately based on a predetermined time. In Kota Solok, 5,758 (61%) did not have compliance in paying contributions. The irregularity of JKN participants in paying dues will have an impact on the guarantee of health services in available health facilities. This type of research is a quantitative study using a cross sectional study design. The population in this study were patients participating in the BPJS Mandiri who visited the Outpatient Installation of Level IV Hospital in Solok City with an average of 77 visitors each month. The samples in this study were 64 samples taken using the convenience sampling method. Data analysis performed was univariate and bivariate analysis with chi square test. Based on the results of the study note that of 64 respondents there are 64.1% who are compliant in paying BPJS Health contributions independently. Variables related to compliance paying dues in outpatients at Level IV Hospital in Solok City were education (p=0.002), employment (p=0.002), income (p=0.004), knowledge (p=0.002), perception (p=0.019) and motivation (p=0.039). Suggestions to BPJS Health to provide socialization or information to BPJS Health participants about the BPJS Health Program from the time of payment, method of payment, and sanctions for delinquent payments.

Keywords: BPJS, Compliance, Contribution, Participant

Introduction

The government has pursued various policies to realize an increase in the degree of public health which is implemented based on non-discriminatory, participatory and sustainable principles. Policies that regulate the right to social security to be able to meet the basic needs of a decent and comprehensive life are listed in Law Number 40 of 2004 concerning the National Social Security System (SJSN). (RI, 2004) The SJSN implementation is carried out by a legal entity that manages social security, hereinafter referred to as the Social Security Administering Body (BPJS). This is regulated in Law Number 24 of 2011 concerning Social Security Administering Bodies. In

its implementation, the BPJS is divided into two, namely BPJS Ketenagakerjaan and BPJS Kesehatan. BPJS Ketenagakerjaan has 4 (four) insurance programs, namely work accident insurance, death insurance, old age security and pension benefits, while BPJS Health only has 1 (one) insurance program, namely health insurance called National Health Insurance (Law Number 24 of 2011: 6).

The National Health Insurance Program (JKN) through BPJS Kesehatan is a good initiative to equalize the quality of health services for all levels of society, with affordable contributions and a broad coverage of health services. One of the tasks of BPJS Kesehatan in carrying out its function of organizing JKN is to collectand manage contributions from participants, employers and the government. In carrying out these tasks, BPJS Kesehatan has the authority to collect contribution payments and carry out supervision and inspection, on the compliance of participants and employers in fulfilling their obligations in accordance with the provisions of the National Social Security legislation (Law Number 24 of 2011: 7).

The amount of contributions is the key to sustainability, the quality of Health Insurance, the impact on new impoverishment, and an increase in population productivity. If the contributions are determined without careful calculation, or only by agreement, then there is a threat that the BPJS is unable to pay for health facilities, guarantees are not available, and the people will no longer trust the state. The amount of contributions must be: (1) sufficient to pay for good quality health services, (2) sufficient to fund BPJS operations of good quality at affordable economic prices, (3) available technical reserve funds in case of high claims, (4) funds available for program development, operational research, or new treatments (DJSN, 2012).

Compliance in paying JKN contributions for independent participants is the most important component in facilitating the use of health services. Providing health services for independent participant patients is very much determined by the compliance in paying dues every monthIf an independent participant patient has not paid a fee, then an independent participant patient is required to pay the unpaid contribution, and if the independent participant does not pay the debt, the independent participant patient cannot use JKN as a guarantor for medical expenses at a health facility (BPJS Kesehatan, 2016).

Based on reports from BPJS Kesehatan as of December 2019, nationally the number of Indonesians who have participated in the JKN Program is 224,149,019 people. Participants in West Sumatra Province in 2019 is 4,338,550 people. (BPJS Kesehatan, 2019).

Furthermore, in Solok City, JKN participants in 2019 totaled 67,030 people. Independent participants were the third largest participant with 14% after the PBI APBN participants 20% and Civil Servant Wage Recipient Workers Participants (PPU PN) with 20%. Other participants, namely Regional Health Insurance Participants (Jamkesda) totaling 35%, Participants Receiving Business Entity Wages (PPU BU) as many as 6%, Non-Worker Participants (BP) as many as 4% and many 61% Independent participants in Kota Solok are in arrears in dues. Of the six working areas of the Solok Branch of BPJS Kesehatan, Kota Solok is the working area with the highest number of Independent Participants in Arrears with the following figures s(BPJS Kesehatan, 2019).

Materials and Methods

This study aims to determine the factors associated with compliance paying independent BPJS contributions to outpatients at Level IV Hospital in Solok City. This type of research is a quantitative study using a cross sectional study design. The population in this study were patients participating in the BPJS Mandiri who visited the Outpatient Installation of Level IV Hospital in Solok City with an average of 77 visitors each month.

The sample size was taken using the Stanley Lameshow formula (1997) in Widyanti (2018: 46) Besar sampel yang diambil dengan menggunakan rumus Stanley Lameshow(1997)

dalam Widyanti (2018:46) dengan menggunakan nilai Z = 1,96, populasi 77 orang, perkiraan proporsi sampel (P) = 0.5 dan derajad kesalahan 5% diperoleh jumlah sampel sebesar 64 orang. The samples in this study were 64 samples taken using the convenience sampling method.

The criteria for the inclusion of the target sample were made by researchers, namely being able to communicate well, independent participants of the JKN program, at least 17 years old and domiciled in Solok City. The exclusion criteria were samples who were not respondents. The ethical principles in this research are self-determination, anonymity and confidentialy, benefit and non-malaficence and justice. which has been registered in the ethical clearence No. 01702 / KEPK-FKUA / EC / 2020. Data analysis performed was univariate and bivariate analysis with chi square test.

Results and Discussion

Education

Based on the table above, it shows that out of 64 respondents there were 7 people (19.4%) who were highly educated but were less obedient in paying the BPJS independent dues. Meanwhile, 12 respondents with low education and obedience in paying BPJS contributions (42.9%). The results of statistical tests using the chi square value obtained p = 0.004. This shows that there is a relationship between the respondent's education and compliance with paying dues to outpatients at the Level IV Hospital in Solok City.

Table 1: Distribution of Education Frequency with Contribution Payment Compliance BPJS for Independent Health in Outpatients at the Level IV Hospital in Solok City in 2020

Education	**n**	**%**
Higher Education	36	56,3
Low Education	28	43,8
Total	64	100,0

Based on the table above, it shows that of the 64 respondents, there are 36 respondents (56.3%) who are highly educated. Meanwhile, 28 respondents (43.8%) had low education.

Table 2: The Relationship between Education and Compliance in Paying the BPJS for Independent Health in Outpatients at the Hospital Level IV City of Solok in 2020

Education	**Contribution Payment Compliance**				**Total**		***p value***
	Comply		**Does Not Comply**				
	F	**%**	**f**	**%**	**F**	**%**	
Higher	29	80,6	7	19,4	36	100	
Lowers	12	42,9	16	57,1	28	100	
Total	**41**	**64,1**	**23**	**35,9**	**64**	**100**	p=0.004

Occupation

Based on the table above, it shows that out of 64 respondents, the number of respondents who worked was 36 respondents (56.3%) while 28 respondents (43.8%) did not work.

Table 3. Frequency Distribution of Contribution-Compliant Work BPJS for Independent Health in Outpatients at the Level IV Hospital in Solok City in 2020

Occupation	N	%
Work	36	56,3
Does Not Work	28	43,8
Total	64	100,0

Table 4. Relationship between Work and Compliance Paying BPJS Mandiri Health Fees for Outpatients at the Hospital Level IV City of Solok in 2020

Occupation	Contribution Payment Compliance				Total		*p value*
	Comply		Comply				
	N	%	n	%	n	%	
Work	29	80,6	7	19,4	36	100	
Does Not Work	12	42,9	16	57,1	28	100	*p*=0.004
Total	**41**	**64,1**	**23**	**35,9**	**64**	**100**	

Based on the table above, it shows that the respondents who work but are not obedient in paying the BPJS independent dues are as many as 7 people (19.4%). While respondents who did not work and obeyed to pay BPJS independent contributions were 12 people (42.9%). The results of statistical tests using the chi square value obtained p = 0.004. This shows that there is a relationship between the respondent's occupation and compliance with paying the independent BPJS dues for outpatients at the Level IV Hospital in Solok City.

Income

Based on the table above, it shows that out of 64 respondents, there were 35 respondents (54.7%) who had sufficient income. Meanwhile, 29 respondents (45.3%) had less income.

Table 5. Frequency Distribution of Income with Contribution Payment Compliance BPJS for Independent Health in Outpatients at the Level IV Hospital in Solok City in 2020

Income	n	%
Enaugh	35	54,7
Less	29	45,3
Total	64	100,0

Table 6. The Relationship between Income and Compliance in Paying the BPJS for Independent Health in Outpatients at the Hospital Level IV City of Solok in 2020

Income	Contribution Payment Compliance				Total		*p value*
	Comply		Comply				
	N	%	n	%	N	%	
Enough	28	80,0	7	20,0	35	100	
Less	13	44,8	16	55,2	29	100	p=0.008
Total	**41**	**64,1**	**23**	**35,9**	**64**	**100**	

Based on the table above, it shows that the respondents who had sufficient income but were not obedient in paying the BPJS Mandiri dues were as many as 7 people (20.0%). Meanwhile, 13 respondents (44.8%) had less income and were obedient to pay BPJS Mandiri contributions. The

results of statistical tests using the chi square value obtained p = 0.008. This shows that there is a relationship between the respondent's income and compliance with paying the independent BPJS dues for outpatients at the Level IV Hospital in Solok City.

Motivation

Based on the table above, it shows that of the 64 respondents, there are 36 respondents (56.3%) who have high motivation. Meanwhile, 28 respondents (43.8%) had low motivation.

Table 7. Frequency Distribution Motivation With Contribution Paying Compliance BPJS for Independent Health in Outpatients at the Level IV Hospital in Solok City in 2020

Motivation	n	%
High	36	56,3
Low	28	43,8
Total	64	100,0

Table 8. Relationship between Motivation and Compliance in Paying BPJS for Independent Health in Outpatients at the Hospital Level IV City of Solok in 2020

Motivation	Contribution Payment Compliance						*p value*
	Comply		Comply				
	N	%	n	%	n	%	
High	27	75,0	9	25,0	36	100	
Low	14	50,0	14	50.0	28	100	p=0.071
Total	**41**	**64,1**	**23**	**35,9**	**64**	**100**	

Based on the table above, it shows that respondents with high motivation but less obedient in paying BPJS Mandiri dues were as many as 9 people (25.0%). While respondents with low motivation and obedience in paying independent BPJS contributions were 14 people (50.0%). The results of statistical tests using the chi square value obtained p = 0.071. This shows that there is no relationship between respondent motivation and compliance to pay the independent BPJS dues for outpatients at Rumkit Level IV Kota Solok.

Based on the results of the study, it is known that respondents who obey in paying BPJS independent contributions are people with high education, namely 29 people (80.6%). The results of chi square statistical test with p = 0.002 (p <0.05) so that Ho is rejected, which means that the level of education has a relationship with compliance with BPJS Kesehatan Mandiri dues paying outpatients at the Level IV Hospital in Solok City. This research is in line with research conducted by Usniza Mila (2015) which states that there is a relationship between education and compliance with paying BPJS independent dues. However, the results of this study are not in line with research conducted by Sihaloho (2015) which states that the characteristics of education are not related to compliance with BPJS independent payments because the role of education is not as large as other factors that affect willingness to pay.

Education is a factor that indirectly affects the socio-economic conditions of the family so that it will also affect the family in the use of health services. Education is needed to obtain information that will be used in improving the quality of life. The higher a person's education, the easier it is to receive information so that the more knowledge one has. On the other hand, a lack of education will hinder the development of one's attitudes towards the values introduced (Priyoto, 2014: 80).

Based on the results of the study, respondents who have higher education and are obedient in paying BPJS Mandiri dues are 29 respondents (80.6%). Researchers assume that this is because they have obtained sufficient knowledge and information about BPJS Mandiri Health from the printed media and electronic, so they think that BPJS Kesehatan is one of the supports for life, both now and in the future, especially in facing the risk of illness which is costly. (19.4%)

according to the researchers this was because respondents with higher education considered that they could get more maximum service, without being differentiated in service if they were general patients compared to participants in BPJS Kesehatan Mandiri. In this case, the researcher's advice to BPJS Kesehatan and other collaborating health facilities to be more optimal in disseminating and educating the public or patients so that people get the same information.

Based on the research results it is known that respondents who obey in paying the BPJS independent dues are the people who work, namely 29 people (80.6%). The results of the chi square statistical test with p = 0.002 (p <0.05) so that Ho is rejected, which means that the level of work has a relationship with the compliance of paying BPJS Kesehatan Mandiri dues for outpatients at the Level IV Hospital in Solok City.

The results of this study are in line with research conducted by Pratiwi (2015) which states that work has a relationship with regularity in paying dues to independent JKN participants at Soebandi Hospital, Jember Regency. However, this research contradicts the research conducted by Dhilla (2016) which states that based on the results of statistical tests with p = 0.061 (p> 0.05) it means that work does not affect compliance with BPJS Kesehatan Mandiri dues.

Work is an activity or activity carried out by a person in order to earn income. Every family in fulfilling their needs is always linked to their livelihood, besides the skills and results obtained. Types of work for a person are divided into: traders, laborers / farmers, civil servants, military / police, retirees, self-employed and housewives (Notoatmodjo, 2010: 207)

Based on the results of the study, respondents who have jobs and are obedient to paying BPJS Mandiri dues are 29 respondents (80.6%). giveur every month they also feel that they have been protected from all risks of illness, especially those with high costs so that they are more comfortable in carrying out their work activities. Meanwhile, respondents who have jobs but are less obedient to paying the BPJS Kesehatan independent dues are as many as 7 respondents (19.4%) according to the researcher. This is because respondents in this category generally work as traders / entrepreneurs, laborers, public transport drivers, and pedicab / bentor drivers so they tend to be busier and do not have the opportunity to make independent BPJS contributions. In addition, the amount they receive from their work is uncertain, so they sometimes choose to prioritize primary needs rather than pay BPJS contributions independently.

Based on the results of the study, it is known that respondents who obey in paying the BPJS independent dues are people with sufficient income, namely 28 people (80.0%). The results of the chi square statistical test with p = 0.004 (p <0.05) so that Ho is rejected, which means that the level of income has a relationship with compliance with BPJS Kesehatan Mandiri dues paying outpatients at the Level IV Hospital in Solok City.

The results of this study are in line with research conducted by Usniza Mila (2015) which states that there is a relationship between income and compliance with BPJS Kesehatan Mandiri dues. Where based on the results of the chi square test conducted, the value of p = 0.018 (p <0.05) was obtained. This means that there is a relationship between income and paying compliance.

According to Sakinah, et al (2014) that there is a significant relationship between the level of people's income and public awareness of insurance. The higher a person's income, the higher the public's awareness in insurance and paying contributions. Likewise, the effect of income on community compliance in paying the National Health Insurance (JKN) contribution.

Based on the results of the study, respondents who had sufficient income and were obedient to paying BPJS Mandiri dues were 28 respondents (80.0%). Researchers assume that someone has sufficient income will increase their interest and awareness to obey in paying BPJS Kesehatan independent dues because in addition to 7 respondents (20.0%) who have sufficient income, feel that they are protected from all risks of illness, especially sickness, while respondents who have sufficient income but are less obedient to pay the BPJS Kesehatan Mandiri dues are as many as 7 respondents (20.0%) This is because respondents think that to get quality health services is to pay as a general patient to a health facility. Respondents considered that the health

service using BPJS Kesehatan was still not good enough that it had an impact on the quality of service, such as if the queues were long, differentiated services even had additional costs so that respondents who had sufficient income preferred to be general patients rather than using BPJS. Independent health. Researchers suggest in this case to BPJS Kesehatan and other health facilities that work together to be more optimal in disseminating and educating participants or patients so that participants get the same information and provide services according to standards, namely excellent service so that participants feel satisfied with the quality of service they receive.

Based on the results of the study, it is known that respondents who obey in paying the BPJS independent dues are people with high knowledge, namely 39 people (72.2%). The results of the chi square statistical test with p = 0.002 (p <0.05) so that Ho is rejected, which means that the level of knowledge has a relationship with the compliance of paying BPJS Kesehatan Mandiri dues for outpatients at the Level IV Hospital in Solok City.

This research is in line with research conducted by Chaerunnisa (2017) which states that there is a relationship between the level of knowledge and compliance with paying, the higher the knowledge, the greater the compliance in paying dues. However, the results of this study are not in line with research conducted by Pratiwi (2015) which states that respondents have a sufficient level of knowledge but are not compliant with paying independent BPJS dues due to factors such as many respondents who do not understand BPJS Kesehatan, lack of support from family, and in getting the socialization about BPJS Health has not been effective.

Knowledge is the result of knowing and this occurs after people sense a certain object. Sensing occurs through the human senses, namely the senses of sight, hearing, smell, taste and touch. Knowledge or cognitive is a very important domain for the formation of one's actions (overt behavior) (Notoatmodjo, 2010). Based on the results of the study, respondents who had high knowledge and were obedient in paying BPJS Mandiri dues were 39 respondents (72.2%), the researchers' assumption was because respondents had understood the principles of mutual cooperation adopted by BPJS Kesehatan. In addition, respondents were also aware The benefits received are not only for outpatient services but also inpatient care and expensive illnesses. While respondents who have high knowledge but are less obedient to pay the BPJS Kesehatan Mandiri dues are as many as 15 respondents (27.8%).

Those who are highly knowledgeable think that being an independent BPJS Kesehatan participant are too many conditions that must be fulfilled when in a health service place and they know that using BPJS does not provide maximum service when in a health service place. And they know that payments can be made to a bank that is in collaboration with BPJS Keseh However, when payments are made, the bank's network is often offline, making them forget to pay dues. Researchers suggest BPJS Kesehatan to be more optimal in conducting socialization and education to participants and provide services according to excellent service standards so that participants are satisfied with the quality of service they receive, including in terms of information systems.

Based on the results of the study, it is known that respondents who obey in paying BPJS independent contributions are people who have a positive perception, namely 30 people (75.0%). The results of the chi square statistical test with p = 0.019 (p <0.05) so that Ho is rejected, which means that the perception has a relationship with the compliance with BPJS Kesehatan Mandiri dues paying outpatients at the Level IV Hospital in Solok City

The results of this study are in line with research conducted by Rismawati (2017) which shows that perceptions have a significant relationship with compliance with paying BPJS independent dues in the work area of the Batalaiworu Health Center. However, it is not in line with the research conducted by Pratiwi (2015) which is seen from the results of the chi square test showing that there is no significant relationship between perceptions and compliance with paying BPJS independent dues.

According to Sugihartono, et al (2007) perception is the ability of the natural brain to interpret stimuli or processes to translate the thymulus into the human senses. Human perception

there are different points of view in sensing. The formation of perceptions is very much influenced by the information or stimuli it first gets.

Based on the results of the study, respondents who had positive perceptions and were obedient in paying BPJS Mandiri dues were 30 respondents (75.0%). Researchers assume that respondents are aware that health is very important and supports life so it must be maintained. In addition, respondents thought that by paying relatively small dues, they could receive protection from the risk of illness, especially those requiring high-cost medical treatment or action, while respondents who had a positive perception but did not comply with the BPJS Kesehatan Mandiri dues were 10 respondents. (25.0%), the researchers assumed this was because respondents felt that they would stay healthy and rarely get sick, so they thought that they did not need to regularly pay dues. Instead, they paid dues when they were about to get health services. Suggestions for BPJS Kesehatan to be more optimal in collecting dues for BPJS Kesehatan participants independently either by telephone or in-person visits by emphasizing the principle of mutual cooperation adopted in BPJS Kesehatan.

Based on the results of the study it is known that respondents who obey in paying the BPJS independent dues are people who have high motivation, namely 27 people (75.0%). The results of the chi square statistical test with p = 0.077 (p> 0.05) so that Ho is accepted, which means that there is no relationship between motivation and compliance with BPJS Kesehatan Mandiri dues paying outpatients at the Level IV Hospital in Solok City. This research is in line with research conducted by Novia Widyanti (2018) regarding factors related to compliance with BPJS Mandiri dues paying in patients at Labuang Baji Hospital, Makassar City. From the results of his research found that the results of statistical tests using the chi square value obtained p = 0.979. This shows that there is no relationship between respondents' motivation and compliance with paying the BPJS independent dues at the inpatient installation of Labuang Baji Hospital.

Motivation can be defined as the interaction between behavior and the environment so that it can increase, decrease or maintain behavior. Motivation means the urge from within humans to act or behave (Notoatmodjo, 2014). Based on the results of the study, respondents who have high motivation and obedience in paying BPJS Mandiri dues are 27 respondents (75.0%), the researchers assume this is because respondents have an awareness that it is very important to maintain health in order to continue to work well. respondents who have high motivation but are not obedient to paying BPJS Kesehatan independent dues are as many as 9 respondents (25.0%), the researchers assume this is because the respondent feels burdened having to register all family members because registering family members will increase the total contribution paid.

Conclusion

The results of the study note that of 64 respondents there are 64.1% who are compliant in paying BPJS Health contributions independently. Variables related to compliance paying dues in outpatients at Level IV Hospital in Solok City were education, employment, income, knowledge, perception and motivation.

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