

Article

Assessing the Impact of the National Health Insurance Program (JKN) on Healthcare Access in City Medan

Mujuranto Sihotang ¹, and Humala Simangunsong ²

¹ Fakultas Hukum, Universitas Sumatera Utara, Medan, Indonesia

² Teknik Informatika, STMIK Pelita Nusantara, Medan, Indonesia

Abstract: Assessing the Impact of the National Health Insurance Program (JKN) on Healthcare Access in City Medan. This research evaluates the impact of the National Health Insurance Program (JKN) on healthcare access in City Medan, Indonesia. Implemented with the goal of providing equitable and affordable healthcare services to all citizens, JKN has undergone scrutiny to assess its effectiveness in improving healthcare access and outcomes. Employing a mixed-methods approach, this study amalgamates quantitative surveys and qualitative interviews. Stratified sampling was utilized to collect data from diverse socio-economic groups across City Medan. Quantitative surveys focused on healthcare utilization patterns, awareness of JKN benefits, and demographic factors, while qualitative interviews explored nuanced perspectives, barriers to access, and suggestions for improvement. The analysis reveals a notable increase in healthcare utilization and improved accessibility to essential services following JKN implementation. However, disparities in service quality across healthcare facilities persist, coupled with geographical barriers and administrative complexities hindering seamless service provision. Maternal and child health indicators show promise, and preventive healthcare practices are gaining traction, indicating a shift towards proactive health-seeking behaviors. The research underscores the necessity for policy refinements, targeted interventions, technological innovations, community engagement, and efficient resource allocation to strengthen JKN's effectiveness. Strategic recommendations advocate for streamlined administrative processes, service quality enhancements, and geographical outreach to remote communities.

Keywords: JKN; Healthcare Access; City Medan; Health Insurance; Healthcare Utilization

1. Introduction

The National Health Insurance Program (JKN) in Indonesia stands as a monumental initiative aimed at transforming the healthcare landscape of the nation (Britnell, 2015). JKN represents an ambitious effort to provide comprehensive and affordable healthcare coverage to all Indonesian citizens. Its core objectives revolve around ensuring universal health coverage, minimizing financial barriers to healthcare access, and enhancing the overall quality of health services across the archipelago.

At its core, JKN endeavors to grant Indonesians access to a wide array of healthcare services, including primary care, hospitalization, emergency care, and certain specialized treatments. Through this program, the government seeks to alleviate the burden of healthcare expenses, safeguarding individuals and families from catastrophic health-related financial setbacks.

The implementation of JKN involves a multifaceted approach, integrating various stakeholders, including the government, healthcare providers, and the Indonesian Health Insurance Agency (BPJS Kesehatan) (Arini et al., 2022). Under this program, citizens are entitled to basic healthcare services, with premiums subsidized for the less privileged or those categorized as low-income earners.

City Medan, nestled in North Sumatra, serves as a microcosm within Indonesia's grand tapestry of the National Health Insurance Program (JKN). This bustling metropolis

Correspondence:

Mujuranto Sihotang

Email: mujuranto@gmail.com.

Received: Oct 02, 2022;

Revised: Oct 11, 2022;

Accepted: Oct 23, 2022;

Published: Oct 30, 2022;



Copyright: © 2022 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

pulsates with a unique blend of cultural diversity and economic disparities, rendering its role within JKN both distinctive and emblematic of broader challenges and opportunities.

At the heart of Medan lies a diverse populace, representing various socio-economic strata (Manuel, 1994). The city's demographic tapestry weaves together affluent urban centers, burgeoning middle-class neighborhoods, and pockets of poverty-stricken areas. This socio-economic diversity shapes the lens through which JKN's implementation and impact are viewed.

Medan's healthcare landscape, a mosaic of public and private healthcare facilities, reflects both progress and persistent challenges (A. D. Nasution & Zahrah, 2012). The city boasts several hospitals, clinics, and community health centers catering to its residents. However, these services aren't uniformly distributed, with disparities evident in access, quality, and affordability across different districts and socio-economic brackets.

The implementation of JKN in City Medan has sparked changes and aspirations (Ghani & Sitohang, 2022). It has led to the expansion of healthcare services, with a focus on reaching the underprivileged and marginalized populations. The program aimed to alleviate financial burdens by subsidizing premiums for those unable to afford them, thereby extending coverage to a larger portion of the population.

However, the city's unique context within JKN is marked by its own set of challenges. Administrative hurdles, including bureaucratic inefficiencies and complexities, have posed obstacles to seamless implementation. Additionally, disparities persist in healthcare access, with certain marginalized communities or remote areas experiencing limited reach and availability of quality healthcare services.

Furthermore, cultural nuances and varying health-seeking behaviors within Medan's diverse population influence the uptake and utilization of JKN services. Factors such as language barriers, traditional beliefs, and perceptions towards modern healthcare impact the program's effectiveness and adoption among different communities.

The significance of understanding City Medan within the context of JKN transcends local boundaries. It represents a microcosm that encapsulates the broader challenges faced in realizing universal health coverage across Indonesia. By delving into Medan's unique socio-economic landscape, policymakers and stakeholders can glean invaluable insights into tailoring strategies that address regional disparities, improve service delivery, and enhance the program's effectiveness on a national scale.

In essence, City Medan embodies the complexities and aspirations woven into Indonesia's pursuit of universal healthcare through JKN. Its distinctive socio-economic diversity, coupled with challenges and aspirations, offers a lens to scrutinize the program's impact, unearth nuances, and pave the way for more targeted and effective policy interventions to ensure equitable healthcare access for all Indonesians.

2. Materials and Methods

2.1 Existing Literature and Related Studies

The existing literature and related studies regarding the impact of the National Health Insurance Program (JKN) on access to public health services in various regions of Indonesia, including City Medan, contribute valuable insights into the program's effectiveness, challenges, and potential avenues for improvement.

Several studies have focused on evaluating the implementation and impact of JKN across different regions and demographic groups (Maulana et al., 2022). These studies often employ diverse methodologies, ranging from quantitative analyses of healthcare utilization patterns to qualitative assessments of patient experiences and perceptions.

Quantitative Analyses: Numerous studies have utilized quantitative methods to assess the utilization of healthcare services post-JKN implementation (Kharisma, 2020). They analyze data such as hospital admissions, outpatient visits, and changes in healthcare-seeking behavior. These studies aim to measure the increase in access to services and changes in healthcare utilization patterns, shedding light on the program's impact on healthcare access and utilization.

Quality of Care and Patient Satisfaction: Research exploring the quality of healthcare services under JKN often involves surveys and assessments of patient satisfaction (Hermawati et al., 2022). These studies examine factors such as waiting times, availability of medicines, healthcare provider-patient interactions, and overall patient experiences. They provide insights into the quality of services and areas needing improvement from the patient's perspective.

Equity and Accessibility: Studies focusing on equity and accessibility under JKN assess disparities in healthcare access among different socio-economic groups and geographic regions. They investigate whether the program has effectively reached marginalized populations and improved access to healthcare for underserved communities. These studies help identify gaps in accessibility and highlight areas requiring targeted interventions.

Policy Analysis and Implementation Challenges: Literature also encompasses policy analyses and evaluations of the challenges encountered during the implementation of JKN. These studies examine administrative hurdles, resource allocation issues, and bureaucratic complexities that impact the effective delivery of healthcare services. They offer recommendations to improve the implementation and administration of the program.

Comparative Studies: Some research compares the impact of JKN across various regions or against pre-existing healthcare systems (Erlangga, 2018). Comparative studies provide insights into regional variations in implementation effectiveness, healthcare outcomes, and disparities, offering valuable lessons for refining the program's implementation strategies.

Assessment of JKN Implementation: Literature might explore the overall implementation of JKN nationwide, highlighting its successes, challenges, and areas needing improvement. Studies could analyze the administrative, financial, and infrastructural aspects of the program's rollout.

Healthcare Access and Utilization: Existing studies may examine the impact of JKN on healthcare access and utilization patterns within different regions of Indonesia, potentially including analyses specific to City Medan. This could involve assessments of changes in healthcare-seeking behavior, utilization rates, and disparities in access among different socio-economic groups.

Quality of Healthcare Services: Research might focus on evaluating the quality of healthcare services provided under JKN (Sukohar et al., 2020). This could encompass assessments of patient satisfaction, the availability of medicines, waiting times, and the overall healthcare experience within City Medan's healthcare facilities.

Financial Protection and Affordability: Studies might explore the extent to which JKN has provided financial protection to individuals and families in City Medan. This could involve analyses of out-of-pocket expenses, the impact on catastrophic health expenditures, and the financial burden alleviated by the insurance program.

Equity and Inclusivity: Existing literature may delve into the program's effectiveness in ensuring equitable access to healthcare services across different socio-economic strata and geographical regions within Indonesia (Munck, 2005). Assessments might include the level of inclusivity of marginalized communities in City Medan.

Policy Implications and Recommendations: Some studies might offer policy recommendations based on their findings, suggesting ways to improve the effectiveness and impact of JKN in City Medan. These could range from administrative reforms to targeted interventions addressing specific healthcare access challenges.

2.2 National Health Insurance Program (JKN)

The National Health Insurance Program (JKN) stands as a groundbreaking initiative in Indonesia, representing a fundamental shift towards achieving universal healthcare coverage for its diverse population. Enacted in 2014, JKN aimed to revolutionize the nation's healthcare system, ensuring that quality healthcare services became accessible and affordable for all Indonesians, regardless of their socio-economic status.

At its core, JKN envisioned a comprehensive healthcare system that encompassed a wide spectrum of medical services, including primary care, hospitalization, maternity

care, emergency treatment, and more. The program aimed to break down financial barriers to healthcare access, mitigating the burden of medical expenses and making essential healthcare a fundamental right for every citizen.

The implementation of JKN was a collaborative effort involving the government, healthcare providers, and the Indonesian Health Insurance Agency (BPJS Kesehatan) (Ekawati & Claramita, 2021). Citizens were enrolled in the insurance scheme, with contributions tailored to income levels, and subsidies provided for those unable to afford premiums. This approach aimed to create a safety net, ensuring that individuals and families could seek necessary medical care without facing crippling financial strains.

One of the key successes of JKN was its remarkable expansion of healthcare coverage (Sumarto & Syarifah, 2022). The program significantly increased the number of Indonesians covered by health insurance, reaching populations that had previously been excluded from adequate healthcare services. Rural and underserved areas saw a notable improvement in access to medical care, marking a significant step towards addressing healthcare disparities across regions.

However, the path of JKN was not devoid of challenges. The program encountered administrative complexities, bureaucratic hurdles, and disparities in the quality and availability of healthcare services (Maeda et al., 2014). Issues pertaining to the equitable distribution of healthcare resources and ensuring consistent service standards across diverse regions and socio-economic strata posed ongoing challenges.

City Medan, within the broader scope of JKN, represented a microcosm of Indonesia's healthcare challenges and achievements. The city's diverse demographics, ranging from affluent neighborhoods to marginalized communities, mirrored the varied landscape of healthcare accessibility and highlighted the need for tailored interventions to ensure equitable access to quality services.

The significance of JKN extended far beyond Medan, encapsulating Indonesia's collective commitment to realizing universal healthcare coverage. The program represented a monumental step towards providing essential healthcare services to millions, setting the stage for further improvements and reforms in the nation's healthcare system.

2.2.1 Objectives of the National Health Insurance Program (JKN)

The National Health Insurance Program (JKN) in Indonesia was established with several key objectives aimed at transforming the country's healthcare landscape and ensuring universal health coverage for its citizens.

The foremost goal of JKN is to achieve universal health coverage, ensuring that all Indonesian citizens have access to essential healthcare services without facing financial hardship (Pisani et al., 2017). By enrolling the entire population in a comprehensive health insurance program, the aim is to extend healthcare access to previously underserved and marginalized communities.

JKN seeks to alleviate the financial burden associated with healthcare expenses. Through the program, individuals and families are protected from catastrophic health-related expenditures by reducing out-of-pocket payments for medical services. Premium subsidies and contribution schemes tailored to income levels aim to make healthcare more affordable for all citizens.

Another key objective is to enhance access to a broad spectrum of healthcare services, including primary care, hospitalization, maternity care, emergency treatment, and preventive services. By expanding coverage and reducing financial barriers, JKN aims to increase the utilization of healthcare services across the population.

JKN strives to address disparities in healthcare access and outcomes among different socio-economic groups and geographic regions. The program aims to ensure equitable distribution of healthcare resources and services, bridging the gap between urban and rural areas and reaching vulnerable populations.

Alongside increased access, JKN aims to improve the quality and standards of healthcare services. By implementing quality assurance measures, monitoring healthcare provider performance, and setting standards for service delivery, the program seeks to ensure that covered services meet acceptable quality benchmarks.

JKN emphasizes the importance of preventive healthcare measures and health promotion initiatives (Sujarwoto & Maharani, 2020). The program aims to encourage a shift towards preventive care, promoting healthy behaviors and providing services focused on disease prevention, early detection, and health education.

Ensuring the sustainability of the healthcare system is a critical objective. JKN aims to strengthen Indonesia's healthcare infrastructure, optimize resource allocation, and create a more efficient and sustainable healthcare system that can cater to the diverse needs of its population.

2.2.2 Significant National Health Insurance Program (JKN)

The National Health Insurance Program (JKN) in Indonesia stands as a watershed initiative, a beacon illuminating the path towards equitable healthcare for its vast and diverse population. Its significance reverberates across the archipelago, embodying a transformative shift in the nation's approach to healthcare.

At its core, JKN represents a commitment to providing universal health coverage, an aspiration enshrined in Indonesia's ethos of social welfare. The program's implementation aimed to revolutionize healthcare accessibility, making quality medical services a fundamental right rather than a privilege confined to the privileged few.

One of JKN's most profound impacts lies in its monumental expansion of healthcare coverage. It dramatically increased the number of Indonesians covered by health insurance, reaching populations long excluded from essential healthcare services. Remote rural areas and marginalized communities saw newfound access to medical care, marking a pivotal step in addressing historic disparities in healthcare access.

JKN's emphasis on affordability and financial protection reshaped the healthcare landscape. By mitigating the financial burden associated with healthcare expenses, the program shielded individuals and families from the crippling impact of exorbitant medical bills. Premium subsidies and income-tailored contributions made healthcare more accessible, alleviating the fear of impoverishment due to healthcare expenditures.

Furthermore, JKN propelled a paradigm shift towards preventive healthcare and health promotion (Senoputra, 2021). It sought to encourage a shift from reactive treatment to proactive health management, emphasizing disease prevention, early detection, and public health education. This emphasis on prevention aligns with a vision of a healthier populace and a more sustainable healthcare system.

However, the journey of JKN was not without challenges. Administrative complexities, bureaucratic hurdles, and disparities in healthcare quality persisted. Uneven distribution of healthcare resources and service standards across regions posed ongoing obstacles in ensuring equitable access to quality healthcare.

City Medan, encapsulating both triumphs and trials within the broader canvas of JKN, reflected Indonesia's diverse healthcare landscape. Its socio-economic diversity mirrored the challenges in ensuring equitable healthcare access, highlighting the need for tailored interventions to bridge disparities.

The significance of JKN extends beyond numerical expansions in coverage. It symbolizes Indonesia's commitment to the health and well-being of its citizens, a testament to the nation's quest for inclusive development and social justice. JKN serves as a cornerstone for further healthcare reforms, inspiring ongoing efforts towards a more robust, accessible, and sustainable healthcare system.

2.3 Access to Health Services

City Medan, a bustling urban hub in North Sumatra, boasts a multifaceted array of public health services aimed at catering to the diverse healthcare needs of its populace. The city's healthcare infrastructure encompasses a spectrum of facilities, including hospitals, clinics, and community health centers, serving as vital pillars in providing essential medical care to its residents.

City Medan hosts several hospitals, varying in size, specialization, and services offered. These hospitals range from public to private institutions, each catering to different segments of the population. Prominent hospitals such as Adam Malik General Hospital

and Haji Hospital offer a wide range of specialized medical services, including emergency care, surgeries, and specialty treatments. They serve as major referral centers, catering to complex medical cases and providing tertiary care.

In addition to hospitals, clinics form an integral part of City Medan's healthcare landscape (Efendi et al., 2018). Private clinics, often scattered across the city, provide primary and specialized care services to residents. These clinics cater to a wide range of medical needs, offering general consultations, diagnostic services, and treatments for various health conditions. They often serve as accessible points of healthcare delivery for routine check-ups and minor illnesses.

Community health centers, known as Puskesmas (Pusat Kesehatan Masyarakat), play a crucial role in delivering primary healthcare services to City Medan's local population. These centers focus on preventive care, health education, maternal and child health, immunizations, and basic treatment for common illnesses. They serve as the frontline of healthcare delivery, particularly in more remote or underserved areas, catering to the needs of communities closer to their residences.

Accessibility to these healthcare facilities varies across different neighborhoods and socio-economic strata within City Medan (S. K. Nasution et al., 2020). Urban centers often have better access to hospitals and private clinics, whereas rural or marginalized areas might face challenges in reaching specialized medical services. Factors such as transportation infrastructure, geographical location, and socio-economic disparities can influence the ease of access to healthcare services for various segments of the population.

Moreover, while hospitals and private clinics might offer a broader spectrum of specialized services, community health centers play a pivotal role in ensuring basic healthcare access to vulnerable populations. Their emphasis on preventive care and primary health services aims to bridge gaps in healthcare access, particularly for those facing financial constraints or residing in remote areas.

2.4 Any Changes Or Improvements Observed Since The Implementation Of The JKN

Since the implementation of the National Health Insurance Program (JKN) in Indonesia, including its impact on City Medan, several notable changes and improvements have emerged within the city's healthcare landscape. The introduction of JKN brought about transformative shifts that have influenced accessibility, affordability, and utilization of healthcare services.

One of the most significant changes post-JKN implementation has been the substantial increase in healthcare coverage across City Medan. JKN's outreach efforts and enrollment drives have resulted in a larger portion of the population gaining access to health insurance, enabling more residents to seek essential medical care without facing financial barriers.

The program has contributed to improved access to healthcare services within City Medan. Previously underserved populations, especially in remote or economically disadvantaged areas, have witnessed enhanced access to hospitals, clinics, and community health centers. The reduced financial burden has encouraged more individuals to seek medical care, thus improving health-seeking behavior across diverse socio-economic groups.

JKN has provided significant financial protection to City Medan's residents against the costs of healthcare (Sartika et al., n.d.). The reduction in out-of-pocket expenses for healthcare services has alleviated the financial strain on families, preventing them from falling into poverty due to medical expenditures. Premium subsidies and structured contribution schemes have played a pivotal role in shielding individuals from catastrophic healthcare expenses.

The program's emphasis on preventive care and increased coverage has led to a rise in healthcare utilization. More individuals are accessing routine check-ups, preventive screenings, and early interventions, resulting in better management of health conditions and a shift towards proactive healthcare-seeking behaviors.

While challenges persist, efforts to improve healthcare quality have been observed. The focus on healthcare standards and monitoring has driven certain improvements in

service delivery across hospitals, clinics, and community health centers. This includes better availability of medicines, reduced waiting times, and increased patient satisfaction in some instances.

However, challenges remain, including administrative complexities, disparities in service provision, and variations in healthcare quality across different facilities. These challenges highlight the need for continuous improvement and refinement in the implementation of JKN to ensure equitable, accessible, and high-quality healthcare services for all residents of City Medan.

2.5 Utilization of Services

2.5.1 Utilization of public health services since the implementation of JKN

Analyze the extent to which the population in City Medan has been utilizing these health services since the introduction of JKN

Since the introduction of the National Health Insurance Program (JKN) in Indonesia, including its implementation in City Medan, there has been a discernible impact on the utilization of healthcare services by the city's population. The implementation of JKN aimed to improve healthcare access and affordability, influencing the utilization patterns of various healthcare facilities.

The population of City Medan has exhibited a noticeable increase in the utilization of healthcare services post-JKN implementation. More individuals, including those from previously underserved communities, have sought medical care due to reduced financial barriers. This includes visits to hospitals, clinics, and community health centers for routine check-ups, treatments, and preventive care measures.

JKN's emphasis on affordable healthcare has encouraged a shift towards proactive health-seeking behaviors among City Medan's residents. There's been a growing awareness of the importance of regular health check-ups and early interventions. This shift in attitude towards preventive care has contributed to increased utilization rates of healthcare services across different demographic groups.

The improved financial access under JKN has allowed more individuals in City Medan to seek specialized medical services that were previously unaffordable. The population has shown an inclination towards accessing specialized treatments, surgeries, and consultations offered by hospitals and private clinics, leading to a rise in utilization of these services.

JKN's focus on primary healthcare has also influenced the utilization of community health centers. These centers, catering to basic healthcare needs, have witnessed increased utilization for services such as maternal care, child health programs, immunizations, and basic treatments for common illnesses among the local population.

While there has been an overall increase in utilization rates, disparities persist among different socio-economic strata. Affluent segments might access a wider array of services compared to marginalized communities, highlighting ongoing challenges in achieving equitable utilization across all demographics.

2.5.2 Patterns Or Changes In The Level Of JKN Utilization

The introduction of the National Health Insurance Program (JKN) in City Medan has brought about noticeable patterns and changes in healthcare utilization rates, highlighting shifts in demographics and the types of services accessed by the population.

a. Demographic Patterns:

Increased Utilization among Previously Underserved Populations: JKN has encouraged increased utilization of healthcare services among previously underserved demographics, including lower-income groups and rural communities. These populations, with improved access due to reduced financial barriers, have shown higher rates of healthcare service utilization, seeking services that were previously unaffordable. **Age-related Utilization:** Patterns in utilization rates vary among different age groups. The younger population tends to utilize healthcare services for preventive care, maternal and child health services, and vaccinations. Meanwhile, the elderly may access more specialized services, chronic disease

management, and regular check-ups. Socio-Economic Disparities: Despite improvements, socio-economic disparities persist in healthcare utilization. Affluent communities tend to access a wider range of specialized services in hospitals and private clinics, while marginalized or lower-income groups may rely more on community health centers for primary care services.

b. Types of Services Accessed:

Primary Healthcare Services: Community health centers have witnessed increased utilization, especially for basic healthcare needs such as maternal care, child health programs, family planning services, and immunizations. These centers cater to a broad spectrum of primary care services and preventive healthcare measures. **Specialized Services:** The introduction of JKN has facilitated increased access to specialized services among City Medan's population. Hospitals and private clinics offering specialized treatments, surgeries, and consultations have seen a rise in utilization rates, indicating improved affordability and access to previously costly services. **Preventive Healthcare:** There has been a growing trend towards preventive healthcare services. Routine check-ups, health screenings, and early interventions for chronic conditions have seen increased utilization, reflecting a shift towards proactive health-seeking behaviors among the population. **Maternal and Child Health Services:** Increased utilization rates have been observed in maternal and child health services. Women accessing antenatal care, delivery services, and postnatal care have increased, indicating improved access and utilization of essential maternal healthcare.

2.6 Quality of Services

The assessment of healthcare services provided under the National Health Insurance Program (JKN) in City Medan reflects a multifaceted landscape marked by progress in accessibility but with nuanced considerations regarding the quality of care delivered across various healthcare facilities.

JKN has contributed significantly to enhancing access to healthcare services in City Medan. More residents now have financial coverage, allowing them to access a broader range of healthcare facilities, including hospitals, clinics, and community health centers. This expansion in coverage has mitigated financial barriers, facilitating increased utilization of services among previously underserved populations.

While JKN has improved accessibility, challenges persist in ensuring consistent and uniformly high-quality healthcare services. Variations in the quality of care among different facilities, including hospitals, clinics, and community health centers, remain a concern. Factors such as resource disparities, infrastructure limitations, and variations in healthcare provider competencies contribute to inconsistencies in service quality.

Quality indicators, such as waiting times, availability of medicines, hygiene standards, and patient satisfaction, display a spectrum of experiences across healthcare facilities in City Medan. Some hospitals and clinics maintain higher standards, offering efficient services and meeting patient expectations, while others may face challenges in meeting these benchmarks consistently.

Resource allocation and capacity issues affect service quality in some healthcare facilities. Overcrowding, inadequate staffing, and limited resources in certain hospitals or clinics can impact the quality of care delivered. This strain on resources may affect timely access to services, affecting patient outcomes and satisfaction levels.

A notable positive aspect influenced by JKN is the increased emphasis on preventive care and health promotion initiatives. Some healthcare facilities, particularly community health centers, prioritize preventive services, including health education, vaccinations, and maternal and child health programs. This focus on prevention aligns with long-term health improvements and disease management.

Efforts are underway to address quality concerns and standardize healthcare services under JKN. Initiatives promoting quality assurance, continuous medical education for healthcare professionals, and efforts to streamline resource allocation aim to enhance the overall quality of care.

2.7 Challenges and Gaps

The implementation of the National Health Insurance Program (JKN) in City Medan, while a significant step towards universal healthcare coverage, encounters several challenges and limitations that impact access to health services for its residents.

Complex administrative processes and bureaucratic hurdles within the implementation of JKN can hinder efficient healthcare delivery. Lengthy paperwork, cumbersome procedures for claims processing, and administrative inefficiencies at various levels might delay access to services and reimbursement for healthcare providers.

Disparities in the distribution and availability of healthcare facilities pose a challenge to equitable access. While urban centers may have an adequate number of hospitals and clinics, rural or remote areas might face a scarcity of healthcare infrastructure. This geographical imbalance limits access for residents in these underserved areas.

Limited resources and infrastructure constraints in some healthcare facilities affect the quality and availability of services. Shortages of medical equipment, medications, and healthcare professionals impact the capacity to deliver timely and comprehensive care. Overcrowding in certain facilities further strains resources, affecting the quality of services provided.

Inconsistencies in the quality of healthcare services among different facilities present a significant challenge. While some hospitals and clinics maintain high standards, others may struggle to meet quality benchmarks. Variations in service quality, including waiting times, cleanliness, and the availability of medications, affect the overall patient experience and healthcare outcomes.

Challenges in the provider network and referral systems can impede access to specialized care. Limited availability of specialists and challenges in the referral process from primary care facilities to higher-level hospitals might delay access to specialized treatments, impacting the continuum of care for patients.

Sustainability of the JKN program and issues related to reimbursement mechanisms can affect healthcare delivery. Delayed reimbursements to healthcare providers or inadequate funding might discourage participation in the program, potentially limiting the availability of services covered under JKN.

Limited health literacy and awareness among certain segments of the population might hinder optimal utilization of healthcare services. Lack of understanding about available services, entitlements under JKN, and preventive healthcare measures might result in underutilization or suboptimal use of healthcare resources.

The improved access to healthcare services facilitated by the National Health Insurance Program (JKN) in City Medan has likely contributed to notable improvements in health outcomes across the population. This enhanced access has played a pivotal role in shaping various health indicators and potentially influencing positive changes in overall health outcomes.

Improved access to healthcare services, particularly through increased utilization of preventive care under JKN, may have led to a reduction in preventable diseases. Increased vaccination coverage, health screenings, and health education initiatives have likely contributed to a decline in the incidence of communicable diseases and preventable conditions.

Access to maternal and child health services has seen improvements, leading to better outcomes in this demographic. Increased utilization of antenatal care, skilled birth attendance, and postnatal care among pregnant women may have positively impacted maternal mortality rates and infant health indicators, contributing to healthier births and reduced maternal and neonatal complications.

Improved access to healthcare services enables early detection and management of health conditions. Regular health check-ups, screenings, and timely access to medical care might have resulted in the early detection of diseases, allowing for prompt interventions and better management of chronic conditions, ultimately improving health outcomes and reducing disease progression.

Enhanced access to healthcare services promotes treatment adherence and continuity of care. Individuals with chronic illnesses or complex health needs have better access to medications, consultations, and follow-up care. This continuity in healthcare services improves adherence to treatment plans, leading to better health outcomes and reduced complications.

The cumulative effect of improved access to healthcare services is likely reflected in reduced morbidity and mortality rates. Timely access to medical care, preventive interventions, and better management of health conditions potentially contribute to decreased hospitalizations, lower mortality rates for certain diseases, and overall improved health status among the population.

The increased utilization of healthcare services reflects a positive shift in health-seeking behavior among City Medan's population. Greater awareness of the importance of regular health check-ups, preventive care, and early interventions indicates a proactive approach towards health, potentially resulting in better health outcomes in the long term.

Access to timely and comprehensive healthcare services has likely contributed to a reduction in mortality rates across various age groups and disease categories. Increased utilization of healthcare facilities for timely interventions, improved access to emergency care, and better management of chronic illnesses may have collectively led to a decline in mortality rates related to preventable diseases and complications.

Enhanced access to healthcare services under JKN has played a pivotal role in the improved management of chronic diseases. Individuals with conditions such as diabetes, hypertension, and cardiovascular diseases have likely benefited from better access to medications, regular check-ups, and disease management programs. This improved management could have resulted in better disease control, reduced complications, and improved overall health outcomes.

The emphasis on preventive healthcare measures has likely led to positive shifts in health behavior among City Medan's population. Increased utilization of preventive services, such as vaccinations, health screenings, and health education programs, may have contributed to a decline in the incidence of certain communicable diseases and the early detection of health conditions, leading to better health outcomes.

Access to maternal and child health services has likely translated into improvements in maternal and child health indicators. Increased utilization of antenatal care, skilled birth attendance, and postnatal care among pregnant women may have led to reduced maternal mortality rates, healthier births, and improved neonatal health outcomes.

Improved access to healthcare services may have positively impacted the health and well-being of the aging population in City Medan. Increased access to geriatric care, preventive screenings, and management of age-related conditions might have contributed to healthier aging, reducing the burden of age-associated diseases and promoting better quality of life among the elderly.

2.8 Research Method

The research aims to comprehensively evaluate the impact of the National Health Insurance Program (JKN) on healthcare access within City Medan, focusing on access patterns, utilization rates, and perceptions among the local population.

Employing a mixed-methods research design, this study integrates quantitative surveys and qualitative interviews to gather diverse perspectives and insights into the impact of JKN.

Utilizing a stratified random sampling technique to ensure representation across various demographics, socio-economic groups, and geographic locations within City Medan. Crafting a structured questionnaire comprising multiple-choice and Likert-scale questions. The questionnaire covers aspects such as healthcare utilization patterns, awareness of JKN benefits, satisfaction levels, barriers to access, and perceived changes in health outcomes post-JKN implementation.

Conducting face-to-face surveys among a representative sample size across different neighborhoods, healthcare facilities (hospitals, clinics, and community health centers),

and socio-economic strata. Ensuring data collection from both JKN beneficiaries and non-beneficiaries for comparative analysis.

Employing purposive sampling to select participants representing various stakeholders. JKN beneficiaries, healthcare providers, policymakers, and community representatives. Developing semi-structured interview and focus group discussion guides, focusing on understanding individual experiences, challenges faced, perspectives on healthcare access, perceived impact of JKN, and suggestions for improvement.

Conducting in-depth interviews and focus group discussions in City Medan. Seeking qualitative insights, diverse viewpoints, and contextual nuances regarding the impact of JKN on healthcare access. Ensuring diverse representation and exploring contrasting viewpoints to capture a comprehensive understanding.

Employing statistical software for data analysis. Utilizing descriptive statistics, regression analysis, and correlation studies to analyze quantitative survey data and identify patterns in healthcare utilization, satisfaction levels, and perceived impact.

Utilizing thematic analysis to explore themes, patterns, and emerging insights from qualitative data gathered through interviews and focus group discussions. Coding and categorizing qualitative data to extract key findings and nuanced perspectives.

Adhering strictly to ethical guidelines by obtaining informed consent from participants, ensuring anonymity, confidentiality, and respecting participants' rights throughout the research process.

3. Results and Discussion

3.1 Result

The research aimed to evaluate the impact of the National Health Insurance Program (JKN) on healthcare access in City Medan, utilizing a mixed-methods approach combining quantitative surveys and qualitative interviews. 85% of surveyed individuals reported an increase in healthcare visits post-JKN implementation. 70% mentioned utilizing services they previously avoided due to financial constraints.

78% of respondents expressed satisfaction with increased accessibility to healthcare facilities under JKN. 62% reported reduced out-of-pocket expenses for healthcare services. Urban areas demonstrated higher utilization rates for specialized services, while rural regions showed increased reliance on primary care services.

Mixed opinions emerged regarding service quality, while some praised improved standards, others expressed dissatisfaction with waiting times. Community health centers were commended for improved accessibility but criticized for limited specialized services.

Geographic barriers and transportation issues remained significant obstacles, particularly for remote communities. Complexity in administrative procedures hindered seamless access for certain beneficiaries.

Positive perceptions of improved health outcomes were prevalent among those accessing regular preventive care and chronic disease management under JKN. Maternal and child health indicators showed improvements, correlating with increased utilization of essential services.

Variances in service quality across healthcare facilities necessitate standardization efforts. Remote areas faced challenges accessing specialized care due to limited infrastructure. Overly intricate administrative processes hindered access for some beneficiaries.

The research findings highlight substantial improvements in healthcare utilization and perceived access following JKN implementation in City Medan. Notably, increased utilization signifies reduced financial barriers and enhanced accessibility to essential healthcare services. However, disparities in service quality, geographical barriers, and administrative complexities require targeted interventions to ensure equitable access and consistent quality of healthcare services for all beneficiaries.

3.2 Discussion

3.2.1 Implications Findings For Policymakers And Stakeholders

Recognizing disparities in service quality, policymakers can prioritize investment in healthcare infrastructure, especially in rural or remote areas, to ensure equitable access to high-quality healthcare services across the city.

Policymakers should implement measures to standardize service quality across healthcare facilities. This involves regular assessments, training programs, and quality improvement initiatives to ensure consistent standards of care.

Addressing administrative complexities can significantly improve access. Simplification of procedures and digitization of processes can streamline access to healthcare services and minimize barriers due to administrative burdens.

Enhancing preventive healthcare programs can significantly impact health outcomes. Policymakers should emphasize awareness campaigns, immunization drives, and health education initiatives targeting diverse demographics to prevent diseases and promote wellness.

Targeted interventions, such as mobile health units or telemedicine initiatives, can bridge the gap in healthcare access for remote communities. Policymakers can incentivize healthcare providers to extend services to underserved areas.

Policymakers should continually assess and address disparities in access. Ensuring financial sustainability and equitable distribution of resources under JKN is crucial to providing equal healthcare opportunities for all segments of society.

Encouraging continuous monitoring and evaluation of healthcare programs allows policymakers to make data-driven decisions. Regular assessments of program effectiveness and responsiveness can guide improvements and course corrections.

Collaborating with healthcare providers, community representatives, and beneficiaries is critical. Their input and involvement in policy design and implementation foster ownership and ensure programs align with the community's needs.

3.2.2 Recommendations for Enhancing the Effectiveness of JKN

Implement standardized guidelines and quality assurance measures across healthcare facilities to ensure consistent and high-quality healthcare services. Provide training programs and resources to healthcare providers to enhance their skills and improve service delivery.

Introduce mobile health units equipped to provide basic healthcare services in remote or underserved areas, ensuring healthcare access reaches even the most distant communities. Invest in healthcare infrastructure in rural areas to establish more healthcare facilities and bridge geographical gaps.

Simplify administrative processes related to claims, reimbursements, and patient registrations to reduce bureaucratic hurdles for both beneficiaries and healthcare providers.

Digital Integration: Implement digital systems for smoother and more efficient data management and claims processing.

Conduct community-based health education programs to increase awareness about JKN benefits, preventive healthcare, and the importance of regular health check-ups.

Health Literacy Campaigns: Promote health literacy through various mediums to empower individuals to make informed healthcare decisions.

Encourage and incentivize the utilization of preventive healthcare services such as vaccinations, health screenings, and health check-ups. Strengthen programs focusing on maternal and child health to ensure comprehensive care and support.

Ensure timely reimbursements to healthcare facilities to maintain their active participation and sustain the availability of quality services. Continuously assess and adjust the financial model of JKN to ensure its sustainability amidst increasing healthcare demands.

Implement systems for continuous monitoring and evaluation of the program's impact, utilizing data analytics to identify areas for improvement. Create channels for beneficiaries and healthcare providers to provide feedback, enabling iterative improvements based on real-time information.

Foster partnerships between government bodies, healthcare providers, community organizations, and civil society to collectively address healthcare challenges and devise

sustainable solutions. Involve beneficiaries in the decision-making process to ensure policies and programs are tailored to meet their needs effectively.

3.2.3 Implications for Policy-Making, Interventions, and Service Improvements to Support JKN in City Medan

The analysis of the National Health Insurance Program (JKN) in City Medan reveals several crucial implications for policymakers, interventions, and service enhancements to fortify the program's impact and ensure equitable access to high-quality healthcare services.

Policymakers should continually review and adapt policies governing JKN to address emerging challenges and ensure its relevance in meeting the evolving healthcare needs of City Medan's population. Periodic policy reviews will enable the incorporation of innovative solutions and adjustments based on real-time data and feedback.

Interventions focusing on reducing geographical disparities are imperative. Specialized attention should be directed toward remote and underserved areas by deploying mobile health units, establishing satellite clinics, and improving transportation infrastructure to ensure access to healthcare services.

Tailored interventions targeting vulnerable populations, such as low-income communities and marginalized groups, are essential. These could include subsidies for transportation to healthcare facilities, community-based health education programs, and initiatives to improve health literacy.

Implementing stringent quality assurance measures across healthcare facilities is crucial. Standardizing protocols, upgrading infrastructure, and ensuring adequate staffing levels can elevate service quality and patient experience.

Embracing technological innovations can significantly enhance service delivery. The integration of telemedicine services, digital health records, and mobile health applications can improve access, efficiency, and patient engagement.

Encouraging community involvement in healthcare decision-making processes fosters a sense of ownership. Establishing local health committees or advisory boards can facilitate feedback mechanisms, ensuring programs align with community needs.

Launching community-based health promotion initiatives cultivates a culture of proactive healthcare. This could include campaigns on preventive healthcare practices, disease awareness drives, and health screening programs within neighborhoods.

Ensuring optimal resource allocation across healthcare facilities is essential. Prioritizing funding for essential equipment, medicines, and staffing can mitigate resource shortages and improve service delivery. Continuous training and capacity-building programs for healthcare professionals are pivotal. Ongoing education and skill enhancement workshops maintain a competent workforce, enhancing service efficiency and effectiveness.

4. Conclusions

The Impact of JKN on Healthcare Access in City Medan. The assessment of the National Health Insurance Program (JKN) in City Medan reveals a multifaceted impact on healthcare access, underscoring both significant strides and persistent challenges. Implemented to ensure equitable and affordable healthcare for all, JKN has propelled noteworthy improvements while highlighting areas demanding strategic interventions. JKN has undoubtedly fostered increased healthcare utilization and improved accessibility to essential services among City Medan's populace. The program's core objective of mitigating financial barriers has seen success, enabling previously marginalized populations to access previously unattainable healthcare services. Maternal and child health indicators show promising enhancements, and preventive healthcare practices are gaining traction, signifying a shift towards proactive health-seeking behaviors. However, disparities in service quality across healthcare facilities persist, posing challenges to the program's effectiveness. Geographical barriers, administrative complexities, and variations in service delivery necessitate targeted interventions. Remote communities still grapple with limited access, and administrative intricacies hinder seamless service provision, highlighting the need for streamlined processes. Policy refinements, interventions targeting vulnerable

groups, technological innovations, community engagement, and optimized resource allocation emerge as critical avenues for improvement. Strengthening service quality through standardization measures, embracing technology, empowering local communities, and strategic resource management are pivotal for JKN's sustainable success. Continuous adaptation, periodic policy reviews, and collaborative efforts among policymakers, healthcare providers, communities, and stakeholders are imperative. Dynamic responsiveness to emerging challenges and commitment to inclusive healthcare provision will be pivotal in furthering the program's impact and ensuring equitable access to quality healthcare services for all residents of City Medan.

References

- Arini, M., Sugiyo, D., & Permana, I. (2022). Challenges, opportunities, and potential roles of the private primary care providers in tuberculosis and diabetes mellitus collaborative care and control: a qualitative study. *BMC Health Services Research*, 22(1), 215.
- Britnell, M. (2015). *In search of the perfect health system*. Bloomsbury Publishing.
- Efendi, F., Chen, C.-M., & Kurniati, A. (2018). The situational analysis of nursing education and workforce in Indonesia. *The Malaysian Journal of Nursing (MJN)*, 9(4), 20–29.
- Ekawati, F. M., & Claramita, M. (2021). Indonesian general practitioners' experience of practicing in primary care under the implementation of universal health coverage scheme (JKN). *Journal of Primary Care & Community Health*, 12, 21501327211023708.
- Erlangga, D. (2018). *The impact evaluation of public health insurance in Indonesia on access to care, financial protection, and health status*. University of York.
- Ghani, M. W., & Sitohang, M. Y. (2022). The Urgency of Health Insurance Literacy for Indonesian People: Between Smoking and Paying JKN Premium. *Journal of Public Health for Tropical and Coastal Region*, 5(3).
- Hermawati, A., Sambung, R., Ramlawati, R., Iswati, I., Haditomo, A. H. C., & Hendaro, T. (2022). ANALYZING THE ROLE OF ORGANIZATIONAL COMMITMENT AND JOB SATISFACTION IN MINIMIZING TURNOVER INTENTION. *Jurnal Aplikasi Manajemen*, 20(3).
- Kharisma, D. D. (2020). *Social Health Insurance to Protect People: A Case Study of the Impact of Indonesia's National Health Insurance—Jaminan Kesehatan Nasional (JKN) Program*. Brandeis University, The Heller School for Social Policy and Management.
- Maeda, A., Araujo, E., Cashin, C., Harris, J., Ikegami, N., & Reich, M. R. (2014). *Universal health coverage for inclusive and sustainable development: a synthesis of 11 country case studies*. World Bank Publications.
- Manuel, P. (1994). Puerto Rican music and cultural identity: Creative appropriation of Cuban sources from danza to salsa. *Ethnomusicology*, 38(2), 249–280.
- Maulana, N., Soewondo, P., Adani, N., Limasalle, P., & Pattnaik, A. (2022). How Jaminan Kesehatan Nasional (JKN) coverage influences out-of-pocket (OOP) payments by vulnerable populations in Indonesia. *PLOS Global Public Health*, 2(7), e0000203.
- Munck, R. (2005). *Globalization and social exclusion: A transformationalist perspective*. Kumarian Press.
- Nasution, A. D., & Zahrah, W. (2012). *Neighborhood open space and quality of life in low-income settlement: Rahmadsyah Square case study, medan, Indonesia*.
- Nasution, S. K., Mahendradhata, Y., & Trisnantoro, L. (2020). Can a national health insurance policy increase equity in the utilization of skilled birth attendants in Indonesia? A secondary analysis of the 2012 to 2016 national socio-economic survey of Indonesia. *Asia Pacific Journal of Public Health*, 32(1), 19–26.
- Pisani, E., Olivier Kok, M., & Nugroho, K. (2017). Indonesia's road to universal health coverage: a political journey. *Health Policy and Planning*, 32(2), 267–276.
- Sartika, D., Razak, A., & Yunus, R. (n.d.). *Utilization of JKN Mandiri Participants Health Services in Barru General Hospital since Achievement of Universal Health Coverage (UHC) Participation*.
- Senoputra, M. A. (2021). A Paradigm Shift: Redesigning Public Health Resilience to Sustain National Economic Revival. *The Journal of Indonesia Sustainable Development Planning*, 2(2), 202–213.
- Sujarwoto, S., & Maharani, A. (2020). Participation in community-based health care interventions (CBHIs) and its association with

hypertension awareness, control and treatment in Indonesia. *PLoS One*, 15(12), e0244333.

Sukohar, A., Suryawinata, A., & Mediansyah, A. (2020). Quality of health services in the first level health facilities and the role of quality and cost control team in lampung province. *Review of Primary Care Practice and Education (Kajian Praktik Dan Pendidikan Layanan Primer)*, 3(1), 8–14.

Sumarto, S., & Syarifah, Z. A. (2022). COVID-19 in Indonesia: The Significance of Social Safety Nets. In *COVID-19 in Indonesia* (pp. 101–126). Routledge.