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- 1. Bukti konfirmasi submit artikel dan artikel yang
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(4 Februari 2020)**

The Relationship between Paying Ability and Compliance Behavior Paying Contribution to the Independent Participants of the Health Social Security Organizing Agency

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Abstract. Paying compliance for JKN participants is the most important component to facilitate JKN participants in utilizing health services. This study discusses the relationship between payment and participant payment of BPJS Health participant contributions. This study used a cross sectional study design. The study was conducted at Prof. Dr. Aloei Saboe Hospital in Gorontalo City which became the sample of the study was an independent BPJS participant. The results showed that the distribution of the independent BPJS fee level was still 64.2%. Distribution of payment capability levels of 85%. There is a significant relationship between Willingness To Pay (WTP) with the agreement to pay contributions with a p value = 0.013 ($p > 0.05$). There is a relationship between the ability to pay (Willingness To Pay) with the agreement to pay independent BPJS participant contributions in the inpatient installation at Porf Hospital. H. Aloei Saboe Gorontalo City.

Keywords : Keywords: BPJS, Ability, Mandiri, WTP

Abstrak. Kepatuhan membayar iuran bagi peserta JKN merupakan komponen yang paling penting untuk mempermudah peserta JKN dalam memanfaatkan pelayanan kesehatan. Penelitian ini bertujuan untuk menilai hubungan kemampuan membayar dengan perilaku kepatuhan membayar iuran peserta mandiri BPJS Kesehatan. Penelitian ini menggunakan rancangan *Cross Sectional Study*. Penelitian dilaksanakan di RSUD Prof Dr Aloei Saboe Kota Gorontalo yang menjadi sampel penelitian adalah peserta BPJS mandiri. Hasil Penelitian menunjukkan bahwa distribusi tingkat kepatuhan membayar iuran BPJS mandiri masih sebesar 64,2%. Distribusi tingkat kemampuan membayar sebesar 85%. Terdapat hubungan yang signifikan antara *Willingness To Pay* (WTP) dengan kepatuhan membayar iuran dengan p value = 0,013 ($p > 0,05$). Ada hubungan kemampuan membayar (*Willingness To Pay*) dengan kepatuhan membayar iuran peserta mandiri BPJS Kesehatan di instalasi rawat inap RSUD Porf. Dr. H. Aloei Saboe Kota Gorontalo.

Kata Kunci : BPJS, Kemampuan, Mandiri, WTP

INTRODUCTION

JKN participants who are not recipients of contribution assistance or non-PBI participants are self-employed (not wage earners) who earn income from their own businesses and are not classified as poor or disadvantaged so they have to pay contributions every month. In Indonesia up to March 2019 there had been 31,424,849 participants (BPJS, 2019). While in Gorontalo Province, based on secondary data from the Gorontalo branch BPJS Health office, JKN BPJS Health participants as of March 2019 have reached 1,169,645 participants. With the number of independent BPJS Health participants in Gorontalo Province being 60,643 participants (BPJS, 2019).

Increasingly independent membership is not in line with compliance in paying JKN contributions. According to Marzuki et al. (2019) compliance in paying contributions means the behavior of someone who has the willingness to pay contributions in a timely manner. Based on secondary data from the Gorontalo Branch Health BPJS, as of December 2018 there were 30,482 Participants or 50.3% of the total irregular independent participants paying monthly contributions.

Based on secondary data from the Health BPJS obtained by researchers. The number of JKN participants in Gorontalo City per March 2019 reached 192,286 inhabitants. The number of independent participants in Gorontalo City per March 2019 is 18,375 people, which continues to increase every month. Of all the independent participants in Gorontalo City, as many as 7,030 were not compliant in paying JKN contributions (BPJS, 2019).

According to some opinions there are several factors that influence compliance in paying health insurance contributions. Based on the results of Rosmanely's research (2018), there is a relationship between the number of family members, perception and risk of illness to compliance paying dues in Parang Tambung Village, Kec. Tamalate The results of research from Mardika (2018) states there is a relationship between travel time and motivation with compliance paying dues in Kab. Pacitan The results of the study from Widyanti (2018) states that there is a relationship between education, employment, knowledge and perceptions of compliance with paying contributions to patients in Labuan Baji District Hospital.

Compliance paying dues for JKN participants is the most important component to facilitate JKN participants in utilizing health services. Paying compliance is influenced by the ability to pay from participants. There are 74.5% workers do not have excess household budget to pay BPJS from families who have an average family income of Rp. 1,500,000 each month with an average family of 6 (Nurbaeti and Batara, 2019).

The hospital is one of the advanced level referral health service facilities. Prof. Regional General Hospital Dr. H. Aloei Saboe Gorontalo Province is one of the public hospitals owned by the Gorontalo City Government. Currently Prof. Hospital H. Aloei Saboe became the largest hospital in Gorontalo Province and became a referral center for health services in Gorontalo Province. RSUD Prof. H. Aloei Saboe is one of the hospitals with quite a lot of patient visits.

METHODS

This type of research is a quantitative study with a cross sectional study plan. The subjects of this study were patients of Prof. Dr. Aloei Saboe Gorontalo City Hospital who were independent BPJS participants. Sampling of research using accidental sampling method in Prof. Dr. Aloei Saboe Hospital Gorontalo City with inclusion criteria: 1) BPJS Mandiri patients, 2) Head of the family or family member responsible for paying premiums / contributions, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed.

RESULTS AND DISCUSSIONS

Distribution of Respondents Frequency Based on Ability to Pay (ATP)

The ability of respondents to pay contributions is divided into two categories, namely Able and Able. The results are presented in the following table:

Table 1. Distribution of Number of Respondents Based on ATP in Inpatient Installation of Prof. Hospital Dr. H. Aloei Saboe Gorontalo City

No	ATP	n	%
1	Able	102	85,0%
2	Unable	18	15,0%
	Total	120	100%

Based on Table 1 above, it shows that of the 120 respondents, there were 102 people (85.0%) who claimed to be able to pay contributions. While 18 people (15.0%) stated that they were unable to pay dues.

Compliance Paying JKN Dues

Indicators of compliance of respondents pay taken from the results of interviews, namely compliance every month to pay BPJS contributions. Respondents who pay a monthly

fee are considered compliant. Non-compliant respondents are respondents who sometimes fail to pay BPJS contributions every month.

Table 2. Distribution of Number of Respondents Based on Compliance Paying JKN Dues in Inpatient Installation of Prof. Hospital Dr. H. Aloei Saboe Gorontalo City

No	Compliance paying	n	%
1	Obedient	77	64,2%
2	Not Obedient	43	35,8%
	Total	120	100%

Based on Table 2 above, it shows that of the 120 respondents, there were 77 people (64.2%) who complied to pay the independent BPJS contributions, while 43 people (35.8%) were less compliant in paying the independent BPJS contributions. The compliance rate is still too small. Premiums are contributions paid by the insured to the guarantor on a regular basis up to the time specified as a substitute for the policy to guarantee protection against a person's risk that may occur in the future (Andika, 2018). Premiums are needed for the insurer (insurance) to meet the needs of payment of health service claims every month (Intiasari, Trisnantoro and Hendartini, 2017). The National Health Insurance System (NHI) developed in Indonesia is a social insurance scheme that allows anyone to access health services without financial difficulties (Ramadhan, Rahmadi and Djuhaeni, 2015).

Compliance with paying premiums needs to be approached by looking at the characteristics of the participants (Lestari, 2014). The main characteristic that needs to be considered is the ability to pay because the ability and willingness to pay social health insurance premiums is an important tool for developing health insurance policies (Lunenburg, 2012). The results of this study found that 82.5 percent of respondents were able to pay the BPJS premium set by the government. That is because most respondents' income is greater than the UMP in Gorontalo Province.

Relationship of ATP with Compliance Paying BPJS Mandiri Contribution

ATP is associated with compliance paying independent BPJS contributions with the chi square statistical test. The test results are presented in the following table.

Table 3. Relationship between ATP and Compliance Paying JKN Dues in the Inpatient Installation of Porf Hospital. Dr. H. Aloei Saboe Gorontalo City

ATP	Compliance Paying				Total		Statistic test
	Obedient		Not Obedient		n	%	
	n	%	n	%			
Able	70	58,3%	32	26,7%	102	85,0%	$p = 0,031$
Unable	7	5,8%	11	9,2%	18	15,0%	
Total	77	64,2%	43	35,8%	120	100%	

Of the 120 respondents there were 32 people (26.7%) who had the ability to pay dues but were less compliant in paying dues. Whereas respondents who were unable to pay dues and were obedient in paying dues were 11 people (9.2%). Based on the Chi-square statistical test p-value was obtained = 0.031 ($p > 0.05$) with significance level $\alpha = 0.05$. This shows that there is a relationship between Ability To Pay (ATP) and compliance with paying BPJS Health participants' independent contributions at the inpatient installation at Porf Hospital. Dr. H. Aloei Saboe Gorontalo City.

Statistical test results show that there is a significant relationship ($p < 0.05$) between the ability to pay (ATP) to compliance paying BPJS Mandiri contributions every month. Respondents who have the ability to pay most of them obediently pay BPJS contributions independently. Some studies indicate that respondents who have the ability to pay will be obedient to pay health insurance contributions (Chaerunnisa, 2017).

Respondents who are unable to pay the majority are not compliant with the payment of independent BPJS contributions. Ability to Pay is a consideration in spending income / expenses to buy goods or other services, due to limited acceptance so that economically in choosing maximum satisfaction (Thabrany, 2014). This understanding can be used to understand respondents who are less able to pay will choose more important expenses so as to rule out paying BPJS contributions independently (Lubis, 2018).

Respondents who are unable to pay premiums are 'forced' to use independent BPJS possibly because they are not included in PBI, but they need health services due to acute illness (Izza, 2019). This community group needs more attention from the government so that their health is guaranteed.

Respondents of this study 20 percent of them entered the age of the elderly (more than 45 years). stated that the need for health insurance is influenced by age because the need for

health services in people who have entered old age is increasing (Ranti, 2017). In old age there is no longer any certainty of the ability to pay health insurance premiums on an ongoing basis. This allows respondents who are not obedient and cannot pay because they are no longer productive (Handayani, Gondodiputro and Saefullah, 2013). Arrears in premium payments have an impact on the insurer for the payment of health service claims (Hanna and Olken, 2019).

CONCLUSION

Ability to pay is related to compliance with pay. Respondents who have the ability to pay are more obedient to pay premiums than respondents who have no ability to pay.

ACKNOWLEDGMENTS

We would like to thank the patients of Prof. Dr. Aloe Saboe Gorontalo City Hospital who were independent BPJS participants who funded my research.

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**2. Bukti konfirmasi review dan hasil review pertama
(19 Februari 2020)**

The Relationship between Paying Ability and Compliance Behavior Paying Contribution to the Independent Participants of the Health Social Security Organizing Agency

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Abstract. Paying compliance for JKN participants is the most important component to facilitate JKN participants in utilizing health services. This study discusses the relationship between payment and participant payment of BPJS Health participant contributions. This study used a cross sectional study design. The study was conducted at Prof. Dr. Aloi Saboe Hospital in Gorontalo City which became the sample of the study was an independent BPJS participant. The results showed that the distribution of the independent BPJS fee level was still 64.2%. Distribution of payment capability levels of 85%. There is a significant relationship between Willingness To Pay (WTP) with the agreement to pay contributions with a $p\text{ value} = 0.013$ ($p > 0.05$). There is a relationship between the ability to pay (Willingness To Pay) with the agreement to pay independent BPJS participant contributions in the inpatient installation at Prof Hospital. H. Aloi Saboe Gorontalo City.

Keywords : Keywords: BPJS, Ability, Mandiri, WTP

Abstrak. Kepatuhan membayar iuran bagi peserta JKN merupakan komponen yang paling penting untuk mempermudah peserta JKN dalam memanfaatkan pelayanan kesehatan. Penelitian ini bertujuan untuk menilai hubungan kemampuan membayar dengan perilaku kepatuhan membayar iuran peserta mandiri BPJS Kesehatan. Penelitian ini menggunakan rancangan Cross Sectional Study. Penelitian dilaksanakan di RSUD Prof Dr Aloi Saboe Kota Gorontalo yang menjadi sampel penelitian adalah peserta BPJS mandiri. Hasil Penelitian menunjukkan bahwa distribusi tingkat kepatuhan membayar iuran BPJS mandiri masih sebesar 64,2%. Distribusi tingkat kemampuan membayar sebesar 85%. Terdapat hubungan yang signifikan antara Willingness To Pay (WTP) dengan kepatuhan membayar iuran dengan $p\text{ value} = 0,013$ ($p > 0,05$). Ada hubungan kemampuan membayar (Willingness To Pay) dengan kepatuhan membayar iuran peserta mandiri BPJS Kesehatan di instalasi rawat inap RSUD Prof Dr. H. Aloi Saboe Kota Gorontalo.

Kata Kunci : BPJS, Kemampuan, Mandiri, WTP

METHODS

This type of research is a quantitative study with a cross sectional study plan. The subjects of this study were patients of Prof. Dr. Aloi Saboe Gorontalo City Hospital who were independent BPJS participants. Sampling of research using accidental sampling method in Prof. Dr. Aloi Saboe Hospital Gorontalo City with inclusion criteria: 1) BPJS Mandiri patients, 2) Head of the family or family member responsible for paying premiums / contributions, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed.

RESULTS AND DISCUSSIONS

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2	Unable	18	15,0%
	Total	120	100%

ASUS
Harus ada bagian yang paling menarik dan yang akan ditonjolkan, yang kemudian dibahas secara lebih mendalam

ASUS
Munculkan data permasalahan yang ada dilapangan. Metode harus lebih detail (populasi, sampel, analisis yg digunakan. Perhatikan juga jumlah kata yang dipersyaratkan.

ASUS
Metode perlu dilengkapi

ASUS
Harus dicari bagian mana yang menarik dan merupakan kebaruan

ASUS
Table yang berisi hanya 2 variabel sebaiknya di parafkan saja

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A

ASUS

Masih banyak referensi dari luar jurnal, minimal jumlah referensi 20 bh (80% berasal dari jurnal)
Penulisan referensi gunakan manajemen references.

- 3. Bukti konfirmasi submit revisi pertama, respon
kepada reviewer, dan artikel yang diresubmit
(30 Juni 2020)**

Behavior Paying Contribution to the Independent Participants in Healthcare Social Insurance Administration Office

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Abstract. Non-compliance with contributions leads to the Healthcare Social Insurance Administration Office (henceforth will be referred to as BPJS Kesehatan) budget deficit, resulting in an accumulation of debt claims in various health facilities and an impact on the quality and quantity of health services in health facilities. As of March 2019 it was noted that 38% of independent National Health Insurance (henceforth will be called as JKN) participants in Gorontalo City were not compliant to pay dues. This study aims to assess the relationship between ability to pay with compliance behavior to pay independent BPJS participant health contributions. This study uses a cross sectional study design. The population was 8,594 people who were independent BPJS Health participants with a sample of 95 people using accidental sampling techniques. Data analysis using Chi-Square test. The results showed that the distribution of the level of compliance paying BPJS contributions independently was still 64.2%. Distribution of the ability to pay by 85%. There is a significant relationship between Willingness To Pay (WTP) with compliance paying dues with $p = 0.013$. There is a relationship between the ability to pay (Willingness To Pay) with compliance to pay the contributions of BPJS Kesehatan independent participants in the inpatient installation at RSUD Prof. Dr. H. Aloi Saboe Hospital in Gorontalo City.

Keywords : BPJS, Ability, Mandiri, WTP

Abstrak. Ketidakpatuhan membayar iuran menyebabkan defisit anggaran BPJS Kesehatan, sehingga berdampak pada menumpuknya utang klaim di berbagai fasilitas kesehatan dan berdampak pada kualitas dan kuantitas pelayanan kesehatan di fasilitas kesehatan. Per Bulan Maret 2019 tercatat 38% peserta JKN mandiri di Kota Gorontalo tidak patuh membayar iuran. Penelitian ini bertujuan untuk menilai hubungan kemampuan membayar dengan perilaku kepatuhan membayar iuran peserta mandiri BPJS Kesehatan. Penelitian ini menggunakan rancangan *Cross Sectional Study*. Populasi adalah pasien peserta mandiri BPJS Kesehatan sejumlah 8.594 orang dengan sampel 95 orang menggunakan teknik *accidental sampling*. Analisis data menggunakan uji Chi-Square. Hasil Penelitian menunjukkan bahwa distribusi tingkat kepatuhan membayar iuran BPJS mandiri masih sebesar 64,2%. Distribusi tingkat kemampuan membayar sebesar 85%. Terdapat hubungan yang signifikan antara *Willingness To Pay* (WTP) dengan kepatuhan membayar iuran dengan $p=0,013$. Ada hubungan kemampuan membayar (*Willingness To Pay*) dengan kepatuhan membayar iuran peserta mandiri BPJS Kesehatan di instalasi rawat inap RSUD Prof. Dr. H. Aloi Saboe Kota Gorontalo.

Kata Kunci : BPJS, Kemampuan, Mandiri, WTP

METHODS

This type of research is a quantitative study with a cross sectional study. The population was 8,594 people who were independent BPJS Health participants with a sample of 95 people. Sampling of research using accidental sampling method with inclusion criteria: 1) BPJS BPJS independent patients, 2) Head of the family or family member responsible for paying contributions, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed. Data analysis using Chi-Square test.

RESULTS AND DISCUSSIONS

Distribution of Respondents Frequency Based on Ability to Pay (ATP)

The ability of respondents to pay contributions is divided into two categories, namely Able and Unable. The results shows that of the 120 respondents, there were 102 people (85.0%) who claimed to be able to pay contributions. While 18 people (15.0%) stated that they were unable to pay dues.

Compliance Paying JKN Dues

Indicators of compliance of respondents pay taken from the results of interviews, namely compliance every month to pay BPJS contributions. Respondents who pay a monthly fee are considered compliant. Non-compliant respondents are respondents who sometimes fail to pay BPJS contributions every month. The results shows that of the 120 respondents, there were 77 people (64.2%) who complied to pay the independent BPJS contributions, while 43 people (35.8%) were less compliant in paying the independent BPJS contributions. The compliance rate is still too small. Premiums are contributions paid by the insured to the guarantor on a regular basis up to the time specified as a substitute for the policy to guarantee protection against a person's risk that may occur in the future (Andika, 2018). Premiums are needed for the insurer (insurance) to meet the needs of payment of health service claims every month (Intiasari, Trisnantoro and Hendartini, 2017). The National Health Insurance System (NHI) developed in Indonesia is a social insurance scheme that allows anyone to access health services without financial difficulties (Ramadhan, Rahmadi and Djuhaeni, 2015).

Compliance with paying premiums needs to be approached by looking at the characteristics of the participants (Lestari, 2014). The main characteristic that needs to be considered is the ability to pay because the ability and willingness to pay social health insurance premiums is an important tool for developing health insurance policies (Lunenburg, 2012). The results of this study found that 82.5 percent of respondents were able to pay the BPJS premium set by the government. That is because most respondents' income is greater than the UMP in Gorontalo Province.

Relationship of ATP with Compliance Paying BPJS Mandiri Contribution

ATP is associated with compliance paying independent BPJS contributions with the chi square statistical test. The test results are presented in the following table.

Table 3. Relationship between ATP and Compliance Paying JKN Dues in the Inpatient Installation of RSUD Prof. Dr. H. Aloei Saboe

Installation of RSCD 1001. DI. 11. 6.000.000.000							
ATP	Compliance Paying				Total		Statistic test
	Obedient		Not Obedient				
	n	%	n	%	n	%	
Able	70	58,3%	32	26,7%	102	85,0%	$p = 0,031$
Unable	7	5,8%	11	9,2%	18	15,0%	
Total	77	64,2%	43	35,8%	120	100%	

Of the 120 respondents there were 32 people (26.7%) who had the ability to pay dues but were less compliant in paying dues. Whereas respondents who were unable to pay dues and were obedient in paying dues were 11 people (9.2%). Based on the Chi-square statistical test p-value was obtained = 0.031 ($p > 0.05$) with significance level $\alpha = 0.05$. This shows that there is a relationship between Ability To Pay (ATP) and compliance with paying BPJS Health participants' independent contributions at the inpatient installation at Porf Hospital. Dr. H. AloeiSaboeGorontalo City.

Statistical test results show that there is a significant relationship ($p < 0.05$) between the ability to pay (ATP) to compliance paying BPJS Mandiri contributions every month. Respondents who have the ability to pay most of them obediently pay BPJS contributions independently. Some studies indicate that respondents who have the ability to pay will be obedient to pay health insurance contributions (Chaerunnisa, 2017).

Respondents who are unable to pay the majority are not compliant with the payment of independent BPJS contributions. Ability to Pay is a consideration in spending income / expenses to buy goods or other services, due to limited acceptance so that economically in choosing maximum satisfaction (Thabrany, 2014). This understanding can be used to understand respondents who are less able to pay will choose more important expenses so as to rule out paying BPJS contributions independently (Lubis, 2018).

Respondents who are unable to pay premiums are 'forced' to use independent BPJS possibly because they are not included in PBI, but they need health services due to acute illness (Izza, 2019). This community group needs more attention from the government so that their health is guaranteed.

Respondents of this study 20 percent of them entered the age of the elderly (more than 45 years). stated that the need for health insurance is influenced by age because the need for health services in people who have entered old age is increasing (Ranti, 2017). In old age there is no longer any certainty of the ability to pay health insurance premiums on an ongoing basis. This allows respondents who are not obedient and cannot pay because they are no longer productive (Handayani, Gondodiputro and Saefullah, 2013). Arrears in premium payments have an impact on the insurer for the payment of health service claims (Hanna and Olken, 2019).

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**4. Bukti konfirmasi review dan hasil review kedua
(1 Juli 2020)**

METHODS

This type of research is a quantitative study with a cross sectional study. The population was 8,594 people who were independent BPJS Health participants with a sample of 95 people. Sampling of research using accidental sampling method with inclusion criteria: 1) BPJS BPJS independent patients, 2) Head of the family or family member responsible for paying contributions, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed. Data analysis using Chi-Square test.

RESULTS AND DISCUSSIONS

Distribution of Respondents Frequency Based on Ability to Pay (ATP)

The ability of respondents to pay contributions is divided into two categories, namely Able and Unable. The results shows that of the 120 respondents, there were 102 people (85.0%) who claimed to be able to pay contributions. While 18 people (15.0%) stated that they were unable to pay dues.



ASUS

Jelaskan tentang instrument yang digunakan dan gambarnya berisi apa saja.



ASUS

Masih perlu menambahkan minimal 1 halaman. Saran menambahkan pada pembahasan dengan citasi dari jurnal internasional.

- 5. Bukti konfirmasi submit revisi kedua, respon kepada reviewer, dan artikel yang diresubmit
(23 Agustus 2020)**

METHODS

This type of research is a quantitative study with a cross sectional study. The population was 8,594 people who were independent BPJS Kesehatan participants with a sample of 95 people. Sampling of research using accidental sampling method with inclusion criteria: 1) BPJS independent patients, 2) Head of the family or family member responsible for paying premiums, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed. The instrument used in this study was a questionnaire in the form of questions that refer to the guidelines and filled out by the patient or patient's family in the inpatient installation of Prof. Dr. H. Aloei Saboe. The data collection technique was done by distributing questionnaires to them, and then collecting them after they finished filling out. Then, the data were analyzed using χ^2 chi-square.

RESULTS AND DISCUSSIONS

Distribution of Respondents Frequency Based on Willingness to Pay (WTP)

The willing of respondents to pay premiums is divided into two categories, namely willing and not willing. The results shows that of the 120 respondents, there were 102 people (85.0%) who claimed to be willing to pay premiums. While 18 people (15.0%) stated that they were not willing to pay dues.

One of the health problems in Indonesia is difficult access to health services due to limited resources. The out-of-pocket payment method requires people who are sick to have cash when going to a health care facility. This condition includes about 100 million people worldwide in Indonesia. As a solution to this problem, the Indonesian government has developed a National Health Insurance system, which is a social security scheme that allows people to access health

services without financial difficulties. BPJS requires the public to pay a premium of IDR 22,000.00 per person per month to a third party insurer. However, there are still people who do not pay premiums for many reasons, for example because they are unable to pay or do not want to pay premiums (Kutzin, 2001).

Willingness to pay for health care costs is beyond a person's financial means and has a multifactorial effect. The willingness to pay (WTP) can be effected by several factors, such as age, perception, income, education, household size dependency ratio, rural / urban locality, quality of health services, and ability to pay. However, there are also other factors that affect the PAP, namely the marginal cost (increase in prices and utility levels) of certain services or goods and access to available health services. The price level does not affect the WTP for health care (Aizuddin, Sulong and Aljunid, 2012).

Compliance Paying JKN Dues

Indicators of compliance of respondents pay taken from the results of interviews, namely compliance every month to pay BPJS premiums. Respondents who pay a monthly fee are considered compliant. Non-compliant respondents are respondents who sometimes fail to pay BPJS premiums every month. The results shows that of the 120 respondents, there were 77 people (64.2%) who complied to pay the independent BPJS premiums, while 43 people (35.8%) were less compliant in paying the independent BPJS premiums. The compliance rate is still too small. Premiums are contributions paid by the insured to the guarantor on a regular basis up to the time specified as a substitute for the policy to guarantee protection against a person's risk that may occur in the future (Andika, 2018). Premiums are needed for the insurer (insurance) to meet the needs of payment of health service claims every month (Intiasari, Trisnantoro and Hendrartini, 2017). The National Health Insurance System (JKN) developed in Indonesia is a social insurance scheme that allows anyone to access health services without financial difficulties (Ramadhan, Rahmadi and Djuhaeni, 2015).

Compliance with paying premiums needs to be approached by looking at the characteristics of the participants (Lestari, 2014). The main characteristic that needs to be considered is the ability to pay because the ability and willingness to pay social health insurance premiums is an important tool for developing health insurance policies (Lunenborg, 2012). The results of this study found that 82.5 percent of respondents were willing to pay the BPJS premium set by the government. That is because most respondents' income is greater than the UMP in Gorontalo Province.

Relationship of WTP with Compliance Paying Premium for Independent BPJS

WTP is associated with compliance paying premiums for independent BPJS with the chi-square statistical test. The test results are presented in the following table.

Table 1. Relationship between WTP and Compliance Paying JKN Dues in the Inpatient Installation of RSUD Prof. Dr. H. Aloei Saboe

WTP	Compliance Paying						Sig.
	Obedient		Not obedient		Total		
	n	%	n	%	n	%	
Willing	70	58.3%	32	26.7%	102	85.0%	0.031
Not willing	7	5.8%	11	9.2%	18	15.0%	
Total	77	64.2%	43	35.8%	120	100.0%	

Of the 120 respondents there were 32 people (26.7%) who had the willing to pay dues but were less compliant in paying dues. Whereas respondents who were not willing to pay dues and were obedient in paying dues were 11 people (9.2%). Based on the Chi-square statistical test p-value was obtained = 0.031 ($p > 0.05$) with significance level $\alpha = 0.05$. This shows that there is a relationship between Willingness To Pay (WTP) and compliance with paying premiums for BPJS Kesehatan independent participants at the inpatient installation at RSUD Prof. Dr. H. Aloei Saboe in Gorontalo City.

Statistical test results show that there is a significant relationship ($p < 0.05$) between the willingness to pay (WTP) to compliance paying premium for independent BPJS every month. Respondents who have the willing to pay most of them obediently pay BPJS premiums independently. Some studies indicate that respondents who have the ability and willing to pay will be obedient to pay health insurance premiums (Chaerunnisa, 2017).

Respondents who are not willing to pay the majority are not compliant with the payment of independent BPJS premiums. Willingness to Pay is a consideration in spending income / expenses to buy goods or other services, due to limited acceptance so that economically in choosing maximum satisfaction (Thabrany, 2014). This understanding can be used to understand respondents who are less willing to pay will choose more important expenses so as to rule out paying BPJS premiums independently (Lubis, 2018).

High costs can prevent patients from getting the care they need. These findings has two distinct policy implications. First, raise awareness among service providers of high allowance burdens and financial barriers to care, so doctors need to discuss health care coverage and costs to their patients. As long as the patient's perception is not correct about the ability to pay, the doctor can help the patient overcome the treatment barrier. Second, a health plan can reduce the sharing of patient costs for medicines. By overcoming financial barriers to care, it is hoped that treatment adherence will increase among patients (Bernard, Johansson and Fang, 2014).

Respondents who are not willing to pay premiums are 'forced' to use independent BPJS possibly because they are not included in PBI, but they need health services due to acute illness (Izza, 2019). This community group needs more attention from the government so that their health is guaranteed.

Respondents of this study 20 percent of them entered the age of the elderly (more than 45 years). stated that the need for health insurance is influenced by age because the need for health services in people who have entered old age is increasing (Ranti, 2017). In old age there is no longer any certainty of the willingness to pay health insurance premiums on an ongoing basis. This allows respondents who are not obedient and cannot pay because they are no longer productive (Handayani, Gondodiputro and Saefullah, 2013). Arrears in premium payments have an impact on the insurer for the payment of health service claims (Hanna and Olken, 2019).

The financing of the health system in Bangladesh has been slowing down as a result of increasing inequality of health care payments. Financing is more concentrated among the poor. Income inequality increases due to high direct payments from pocket. The increase in income inequality due to out-of-pocket payments was 89%. These findings prove the impact of health system financing on the unfair financial burden of health care and income. Dependence on direct payments greatly affects the standard of living of households. Therefore, it is necessary to reform the health system financing scheme (Molla and Chi, 2017).

**6. Bukti konfirmasi review dan hasil review ketiga
(24 Agustus 2020)**

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Sumber referensi 80% dari jurnal dan diutamakan dari jurnal internasional bereputasi...
Saran di tambahkan pada pembahasan

- 7. Bukti konfirmasi submit revisi ketiga, respon kepada reviewer, dan artikel yang diresubmit
(12 Oktober 2020)**

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**8. Bukti konfirmasi review dan hasil review keempat
(15 Oktober 2020)**

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**9. Bukti konfirmasi submit revisi keempat,
respon kepada reviewer, dan artikel yang diresubmit
(16 Oktober 2020)**

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**10. Bukti konfirmasi artikel accepted
(18 Oktober 2020)**

Behavior Paying Premium to the Independent Participants in Healthcare Social Insurance Administration Office

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Abstract. Non-compliance with premiums leads to the Healthcare Social Insurance Administration Office (henceforth will be referred to as BPJS Kesehatan) budget deficit, resulting in an accumulation of debt claims in various health facilities and an impact on the quality and quantity of health services in health facilities. As of March 2019 it was noted that 38% of independent National Health Insurance (henceforth will be called as JKN) participants in Gorontalo City were not compliant to pay dues. This study aims to assess the relationship between willingness to pay with compliance behavior to pay premiums for BPJS Kesehatan independent participant. This study uses a cross sectional study design. The population was 8,594 people who were independent BPJS Kesehatan participants with a sample of 95 people using accidental sampling techniques. Data were collected through interviews using a questionnaire. Data analysis using Chi-Square test. The results showed that the distribution of the level of compliance paying BPJS premiums independently was still 64.2%. Distribution of the willingness to pay by 85%. There is a significant relationship between Willingness To Pay (WTP) with compliance paying dues with $p = 0.031$. There is a relationship between WTP with compliance to pay the premiums of BPJS Kesehatan independent participants in the inpatient installation at RSUD Prof. Dr. H. Aloei Saboe in Gorontalo City.

Keywords : BPJS Kesehatan, Independent, WTP, Compliance

Abstrak. Ketidakpatuhan membayar iuran menyebabkan deficit anggaran BPJS Kesehatan, sehingga berdampak pada menumpuknya utang klaim di berbagai fasilitas kesehatan dan berdampak pada kualitas dan kuantitas pelayanan kesehatan di fasilitas kesehatan. Per Bulan Maret 2019 tercatat 38% peserta JKN mandiri di Kota Gorontalo tidak patuh membayar iuran. Penelitian ini bertujuan untuk menilai hubungan kemampuan membayar dengan perilaku kepatuhan membayar iuran peserta mandiri BPJS Kesehatan. Penelitian ini menggunakan rancangan *Cross Sectional Study*. Populasi adalah pasien peserta mandiri BPJS Kesehatan sejumlah 8.594 orang dengan sampel 95 orang menggunakan teknik *accidental sampling*. Data dikumpulkan melalui wawancara menggunakan kuesioner. Analisis data menggunakan uji Chi-Square. Hasil penelitian menunjukkan bahwa distribusi tingkat kepatuhan membayar iuran BPJS mandiri masih sebesar 64,2%. Distribusi tingkat kemampuan membayar sebesar 85%. Terdapat hubungan yang signifikan antara kesediaan membayar (WTP) dengan kepatuhan membayar iuran dengan $p=0,031$. Ada hubungan WTP dengan kepatuhan membayar iuran peserta mandiri BPJS Kesehatan di instalasi rawat inap RSUD Prof. Dr. H. Aloei Saboe Kota Gorontalo.

INTRODUCTION

JKN participants who are not recipients of premium assistance or non-PBI participants are self-employed (not wage earners) who earn income from their own businesses and are not classified as poor or disadvantaged so they have to pay premiums every month. In Indonesia up to March 2019 there had been 31,424,849 participants (BPJS, 2019). While in Gorontalo Province, based on secondary data from the BPJS Kesehatan in Gorontalo, BPJS Kesehatan participants as of March 2019 have reached 1,169,645 participants. With the number of independent BPJS Kesehatan participants in Gorontalo Province being 60,643 participants (BPJS, 2019).

Increasingly independent membership is not in line with compliance in paying JKN premiums. According to Marzuki *et al* (2019) compliance in paying premiums means the behavior of someone who has the willing to pay premiums in a timely manner. Based on secondary data from the BPJS Kesehatan in Gorontalo, as of December 2018 there were 30,482 Participants or 50.3% of the total irregular independent participants paying monthly premiums.

Based on secondary data from the BPJS Kesehatan obtained by researchers. The number of JKN participants in Gorontalo City per March 2019 reached 192,286 inhabitants. The number of independent participants in Gorontalo City per March 2019 is 18,375 people, which continues to increase every month. Of all the independent participants in Gorontalo City, as many as 7,030 were not compliant in paying JKN premiums (BPJS, 2019).

According to some opinions there are several factors that influence compliance in paying health insurance premiums. Based on the results of Rosmanely's research (2018), there is a relationship between the number of family members, perception and risk of illness to compliance paying dues in ParangTambung Village, Kec. Tamalate. There is also a relationship between travel time and motivation with compliance paying dues.

Compliance paying dues for JKN participants is the most important component to facilitate JKN participants in utilizing health services. Paying compliance is influenced by the willingness to pay from participants. There are 74.5% workers do not have excess household budget to pay BPJS from families who have an average family income of Rp. 1,500,000 each month with an average family of 6 (Nurbaeti and Batara, 2019).

The hospital is one of the advanced level referral health service facilities. RSUD Prof. Dr. H. Aloei Saboe is one of the public hospitals owned by the Gorontalo City Government. Currently RSUD Prof. Dr. H. Aloei Saboe in Gorontalo City became the largest hospital in

Gorontalo Province and became a referral center for health services in Gorontalo Province. RSUD Prof. Dr. H. Aloei Saboe is one of the hospitals with quite a lot of patient visits.

METHODS

This type of research is a quantitative study with a cross sectional study. The population was 8,594 people who were independent BPJS Kesehatan participants with a sample of 95 people. Sampling of research using accidental sampling method with inclusion criteria: 1) BPJS independent patients, 2) Head of the family or family member responsible for paying premiums, and 3) Patients or families of patients willing to become patients respondent and ready to be interviewed. The instrument used in this study was a questionnaire in the form of questions that refer to the guidelines and filled out by the patient or patient's family in the inpatient installation of Prof. Dr. H. Aloei Saboe. The data collection technique was done by distributing questionnaires to them, and then collecting them after they finished filling out. Then, the data were analyzed using *iji* chi-square.

RESULTS AND DISCUSSIONS

Distribution of Respondents Frequency Based on Willingness to Pay (WTP)

The willing of respondents to pay premiums is divided into two categories, namely willing and not willing. The results shows that of the 120 respondents, there were 102 people (85.0%) who claimed to be willing to pay premiums. While 18 people (15.0%) stated that they were not willing to pay dues.

One of the health problems in Indonesia is difficult access to health services due to limited resources. The out-of-pocket payment method requires people who are sick to have cash when going to a health care facility. This condition includes about 100 million people worldwide in Indonesia. As a solution to this problem, the Indonesian government has developed a National Health Insurance system, which is a social security scheme that allows people to access health services without financial difficulties. BPJS requires the public to pay a premium of IDR 22,000.00 per person per month to a third party insurer. However, there are still people who do not pay premiums for many reasons, for example because they are unable to pay or do not want to pay premiums (Kutzin, 2001).

Willingness to pay for health care costs is beyond a person's financial means and has a multifactorial effect. The willingness to pay (WTP) can be effected by several factors, such as age, perception, income, education, household size dependency ratio, rural / urban locality,

quality of health services, and ability to pay. However, there are also other factors that affect the PAP, namely the marginal cost (increase in prices and utility levels) of certain services or goods and access to available health services. The price level does not affect the WTP for health care (Aizuddin, Sulong and Aljunid, 2012; Darmawan, Satibi, and Kristina, 2019).

People who have health insurance contracts tend to be willing to contribute to paying high premiums. The level of education is associated with the willingness and ability to pay for health care expenses (Borges, Reis, and Anjos, 2017). People with tertiary education are willing to pay as much as 2 to 3 times as much as those without education in all health domains (Lew *et al*, 2020).

Compliance Paying JKN Dues

Indicators of compliance of respondents pay taken from the results of interviews, namely compliance every month to pay BPJS premiums. Respondents who pay a monthly fee are considered compliant. Non-compliant respondents are respondents who sometimes fail to pay BPJS premiums every month. The results shows that of the 120 respondents, there were 77 people (64.2%) who complied to pay the independent BPJS premiums, while 43 people (35.8%) were less compliant in paying the independent BPJS premiums. The compliance rate is still too small. Premiums are contributions paid by the insured to the guarantor on a regular basis up to the time specified as a substitute for the policy to guarantee protection against a person's risk that may occur in the future. Premiums are needed for the insurer (insurance) to meet the needs of payment of health service claims every month. The National Health Insurance System (JKN) developed in Indonesia is a social insurance scheme that allows anyone to access health services without financial difficulties (Ramadhan, Rahmadi and Djuhaeni, 2015).

Compliance with paying premiums needs to be approached by looking at the characteristics of the participants. The main characteristic that needs to be considered is the ability to pay because the ability and willingness to pay social health insurance premiums is an important tool for developing health insurance policies (Lunenburg, 2012). The results of this study found that 82.5 percent of respondents were willing to pay the BPJS premium set by the government. That is because most respondents' income is greater than the UMP in Gorontalo Province.

The majority of households support the national health financing scheme and some have suggested that a government agency manage the scheme, whereby their salary is deducted

every month as a form of contribution. Willingness to pay for this national health financing scheme is significantly higher for younger people, women, those in rural areas, those on higher incomes and those who are sick (Noor, Saperi, and Aljunid, 2019). People will seek treatment only when a complaint to their health has become evident. Some people view health insurance as a necessity, and they are willing to pay an annual premium from the insurance provider (Jain *et al*, 2014).

Relationship of WTP with Compliance Paying Premium for Independent BPJS

WTP is associated with compliance paying premiums for independent BPJS with the chi-square statistical test. The test results are presented in the following table.

Table 1. Relationship between WTP and Compliance Paying JKN Dues in the Inpatient Installation of RSUD Prof. Dr. H. Aloei Saboe

WTP	Compliance Paying				Total		Sig.
	Obedient		Not obedient				
	n	%	n	%	n	%	
Willing	70	58.3%	32	26.7%	102	85.0%	0.031
Not willing	7	5.8%	11	9.2%	18	15.0%	
Total	77	64.2%	43	35.8%	120	100.0%	

Of the 120 respondents there were 32 people (26.7%) who had the willing to pay dues but were less compliant in paying dues. Whereas respondents who were not willing to pay dues and were obedient in paying dues were 11 people (9.2%). Based on the Chi-square statistical test p-value was obtained = 0.031 ($p > 0.05$) with significance level $\alpha = 0.05$. This shows that there is a relationship between Willingness To Pay (WTP) and compliance with paying premiums for BPJS Kesehatan independent participants at the inpatient installation at RSUD Prof. Dr. H. Aloei Saboe in Gorontalo City. Statistical test results show that there is a significant relationship ($p < 0.05$) between the willingness to pay (WTP) to compliance paying premium for independent BPJS every month. Respondents who have the willing to pay most of them obediently pay BPJS premiums independently. Some studies indicate that respondents who have the ability and willing to pay will be obedient to pay health insurance premiums.

Respondents who are not willing to pay the majority are not compliant with the payment of independent BPJS premiums. Willingness to Pay is a consideration in spending income / expenses to buy goods or other services, due to limited acceptance so that economically in choosing maximum satisfaction. This understanding can be used to understand respondents who are less willing to pay will choose more important expenses so as to rule out paying BPJS

premiums independently. High costs can prevent patients from getting the care they need. These findings has two distinct policy implications. First, raise awareness among service providers of high allowance burdens and financial barriers to care, so doctors need to discuss health care coverage and costs to their patients. As long as the patient's perception is not correct about the ability to pay, the doctor can help the patient overcome the treatment barrier. Second, a health plan can reduce the sharing of patient costs for medicines. By overcoming financial barriers to care, it is hoped that treatment adherence will increase among patients (Bernard, Johansson and Fang, 2014).

This community group needs more attention from the government so that their health is guaranteed. Respondents of this study 20 percent of them entered the age of the elderly (more than 45 years). Several factors influence WTP, namely age, family status, occupation. This can be information about how these findings can be used to help find more fully the value of health insurance and its implications for policy decisions (Al-Hanawi *et al*, 2019; Mon *et al*, 2018).

The financing of the health system in Bangladesh has been slowing down as a result of increasing inequality of health care payments. Financing is more concentrated among the poor. Income inequality increases due to high direct payments from pocket. The increase in income inequality due to out-of-pocket payments was 89%. These findings prove the impact of health system financing on the unfair financial burden of health care and income. Dependence on direct payments greatly affects the standard of living of households. Therefore, it is necessary to reform the health system financing scheme (Molla and Chi, 2017).

The average person will be less willing to pay for prevention costs than treatment, but they are still willing to pay for prevention costs that have a higher WTP than treatment. The average total WTP for prevention is about 85% higher than for treatment (Wolff, Larsson, and Svensson, 2020). they will be willing to pay for the intervention, provide reimbursement (eg reduced hospitalization) and improve efficiency in staff utilization is demonstrable. These factors will support the price premium if it is cost effective (Cope *et al*, 2018).

Social trust is an important factor in determining the willingness of the population to provide the financial resources needed to support public health care. Increased social trust is associated with a greater willingness to pay contributions to improve public health services. (Habibov, Cheung, and Auchynnikava, 2017). Patients' willingness to pay for prevention and health care services depends on the patient's ability to pay. Those with higher monthly incomes tend to pay for local services (Meng *et al*, 2020).

CONCLUSION

Willingness to pay is related to compliance with pay. Respondents who have the willing to pay are more obedient to pay premiums than respondents who have no willing to pay. Thus, the government needs to reorganize the health system financing scheme in Indonesia.

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Behavior Paying Premium to the Independent Participants in Healthcare Social Insurance Administration Office

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