



THE EFFECT OF COMMUNICATION ON THE IMPLEMENTATION OF THE POLICY FOR THE UTILIZATION OF JKN CAPITATION FUND AT THE BARANA HEALTH CENTER JENEPONTO REGENCY

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ABSTRACT

Background: Capitation is a payment method for health services in the context of providing and improving quality and measurable health services including health services, primary health care operational costs and procurement of health infrastructure

Objective: This study aims to determine the effect of communication on the implementation of the JKN Capitation Fund Utilization Policy at the Barana Health Center, Jeneponto Regency

Method: This research method was descriptive with a qualitative approach. Data were obtained by means of In-depth Interview, documentation, and Observation to all informants selected by Purposive Sampling.

Result: The results of the study showed that communication in disseminating information regarding policies for the use of JKN capitation funds at the Barana Health Center has been going well, clearly and consistently. The obstacles that are sometimes encountered in the implementation of these policies when replacing JKN managers.

Conclusion: Communication Mechanism for the use of JKN capitation funds at the Barana Health Center, Jeneponto Regency has been running according to the procedure but has not run optimally. Therefore, the Jeneponto District Health Office is expected to continue to monitor the management of policies on the use of JKN capitation funds.

INTRODUCTION

Capitation is a Payment Method for Health Services which aims to provide and improve quality and measurable health services including health services, primary

health care operational costs and the provision of health infrastructure. The amount of capitation given is based on the number of registered participants without taking into

account the type and number of health services provided (Dewanto et al., 2014).

Since January 1, 2014 the Government has implemented the National Health Insurance System which is organized by the Social Health Insurance (BPJS). Health services to JKN participants are provided by primary health care (Anggraeni et al., 2016). According to the Minister of Health Regulation No. 21 of 2016, it is explained that the management and utilization of capitation funds is at least 60% for service payments and 40% for primary health care operational services (Yulianto, 2018).

The management of the use of capitation funds must be conveyed through a good communication process and in stages, from the Ministry of Health to the public health center as policy implementers. Communication is very important in influencing the successful implementation of a policy. In general, there are three important things in the communication process of a policy, namely transmission, consistency, and clarity (Edwards III, 1980).

However, in practice there are still often obstacles in the process of disseminating information related to the management of the utilization of this capitation fund. As in the research conducted by Ontoraël et al (2018) it was found that the lack of optimal delivery of information from the head of the public health center to the health workers who were the technical implementers of this policy caused the technical implementers to be less aware of

the governance of the utilization of the capitation funds. This is in line with the research of Mokodompit et al (2017) which states that the lack of communication causes the implementation of the use of capitation funds to be inefficient due to the ineffectiveness of a communication.

Communication according to Edwards III (1980) states that policy must reach the group that is the target of the policy. This is in line with Kartika (2014) which states that the policy on the use of capitation funds should be conveyed not only to policy implementers but also to the policy target group, in this case the group that benefits from this capitation fund and other interested parties either directly or indirectly.

Based on this background, it is important to conduct research on the effect of communication (Transmission, Clarity dan Consistency) on the implementation of the policy on the use of JKN capitation funds at the Barana Public Health Center, Jeneponto Regency.

METHODS

This research was conducted at the Barana Public Health Center, Jeneponto Regency. This research uses qualitative research with descriptive analysis approach. Data was collected through observation, documentation, and in-depth interview with informants. Informants in this study included the Technical Implementation Officer, the Head of the Barana Health Center, the

Treasurer, medical personnel, and non-medical personnel.

RESULT

The results show that the communication dimension in terms of transmission has been running according to the procedure where the process of disseminating policy information with the up to down method, starting from the Ministry of Health holding a coordination meeting with the Provincial Health Office, then submitted to the Regional Health Office, and finally coordinated to the network under the district/city health office, namely the public health center. Furthermore, the internal transmission process of the public health center is carried out through the monthly mini-workshop of the health center.

To ensure that the policy is conveyed and implemented according to the rules, the District Health Office. Jenepono appointed a technical person in charge, namely Technical Implementation Officer as the coordinator of the public health center capitation fund management, then made technical guidelines, and carried out socialization to the head of the public health center assisted by BPJS Jenepono Branch. The delivery of this information is not only done through direct socialization, but the process of disseminating information is also carried out through social media such as telegram and whatsapp by following the current developments. Policy socialization is very important to support so

that implementation can run well (Mulyani, 2019).

In utilizing capitation funds as regulated in the 2016 regent regulation, public health center as technical implementers are always involved in various series of BPJS service delivery and management of capitation funds starting when the new policy is in effect until the evaluation stage which is carried out every two months or three months and at the end of the year. Related to performance, the contact number inputted by the Pcare Application manager at the Public health center is one of the basics for determining the amount of capitation funds per Public health center, as well as services and cases that occur related to BPJS at the public health center.

The Dimension of Clarity in Communication regarding the use of capitation funds has been going well, as evidenced by the existence of technical guidelines that serve as guidelines for implementing the use of capitation funds. So, if there are obstacles in implementing the policy on the use of capitation funds, the public health center as technical implementers can again refer to the technical guidelines for the use of JKN capitation funds which are the result of the embodiment of PMK No. 21 of 2016. Not only that, a series of coordination is still being carried out between the implemementor and the provider of the capitation fund, namely BPJS Health, to the use of social media as a forum for exchanging information on public health center and district health offices. In line with

research conducted by Yovinus (2018) which states that the communication process in policy implementation is not only done through traditional methods, but can also be done through communication practices through social media to facilitate the policy implementation process.

Information received from the health office regarding the use of capitation funds will then be forwarded to the internal health center through the monthly routine meeting of the public health center. The information is conveyed by the head of the public health center and accompanied by the treasurer of the JKN, so that information can be clearly disseminated to all public health center officers.

The policy communication process, especially the use of capitation funds from the consistency aspect, is considered to have gone well, because all processes in implementing the policy are determined jointly from the Health Office to the policy implementer, namely the public health center. The obstacles that often occur when there is a change of manager before the end of the year period. So there is a tendency to miss information by new managers who carry out their duties in the middle of the current period. Resulting in misunderstandings in the management of the Public health center, both in terms of operationalizing activities, and calculating services based on PMK No. 21 of 2016.

Communication in policy implementation must be done consistently to

avoid confusion or different interpretations for policy implementers. Consistency in communication is key in policy implementation (Guest et al., 2020).

DISCUSSION

Transmission

In implementing the policy in terms of the communication mechanism in terms of transmitting information related to the implementation of the use of the JKN capitation funds, it is carried out by the Jeneponto District Health Office which is held continuously and gradually with an Up to Down system, namely from the Ministry then the Provincial Health Service then the Jeneponto District Health Office followed by socialization carried out to all Public health center in Jeneponto Regency through face-to-face meetings or through social media. In terms of consistency in the use of JKN funds, it is appropriate because the Health Service always refers to technical instructions and regent's regulations. The obstacle that occurs when there is a change of manager is misinformation obtained by the newly appointed manager, whether it is the treasurer, the head of the health center, and officials at the health office, so that the information obtained is often different between health centers.

Communication is the process of delivering information from the communicator to the communicant. Meanwhile, policy communication means the process of delivering policy information from policy

makers to policy implementers. Communication really determines the success of achieving the goals of implementing public policy. There are three important things in the policy communication process, namely: transmission, consistency and clarity which will affect policy implementation (Roeslie & Bachtiar, 2018).

This dimension requires that information be conveyed properly to the target group, namely the public health center as the implementer of the policy. Aryani (2018) in his research states that good and targeted communication can realize the intended message to be conveyed from the communicator to the communicant.

The communication process in implementing policies is not only done through traditional methods, but can also be done through communication practices through social media to facilitate the policy implementation process (Yovinus, 2018). Then policy implementation will be effective if those who carry out the decisions know what they have to do (Niko & Chalidyanto, 2014).

According to Edward III in Amir & Anto (2018) policy implementation is influenced by four variables that greatly determine the success of implementation, namely communication, resources, disposition, and bureaucratic structure. Communication is a very important factor because communication is related to the delivery of information, ideas, skills,

regulations, and others using certain means to those who are entitled to receive it.

Clarity

Clarity in communication requires that the information conveyed is easy to understand and to avoid errors in interpretation by policy implementers (Roeslie & Bachtiar, 2018). It is also stated in Aryani (2018) that the communication received by policy implementers must be clear and not confusing or ambiguous.

The clarity referred to in this study is a detailed understanding of the information submitted to the policy implementers of the use of capitation funds, in this case the Public health center. Based on the results of in-depth interviews with all informants, it was stated that the clarity of information provided by stakeholders in the regions was clear enough because the process of delivering information was carried out repeatedly, both through official coordination, namely meetings, monthly workshops, through social media and telephone.

According to Tubbs & Moss in Ganiem (2018) communication can be called effective if the communicant succeeds in conveying what he means clearly. Effective communication is determined by five things, namely understanding, feeling comfortable, influencing attitudes, beliefs, and actions (Roeslie & Bachtiar, 2018).

Consistency

Consistency is important in the delivery of information so that there is no

change in content even though it is conveyed to other parties and does not cause confusion for the implementers of the policy on the use of capitation funds, in this case the Barana Health Center. According to Edwards III (1980) consistency in communication is intended so that the information conveyed does not cause confusion for policy implementers, target groups and parties involved. Consistency in communication is key in policy implementation (Guest et al., 2020).

Based on the results of interviews with informants, it can be seen that the consistency of the use of JKN funds is appropriate because the Health Service always refers to technical instructions and Regent's Regulation No. 11 of 2016 concerning Guidelines for Implementing Capitation and Non Capitation Fund Management in Government-Owned First Level Health Facilities. The obstacle that occurs when there is a change of manager is misinformation obtained by the newly appointed manager, whether it is the treasurer, the head of the health center, and officials at the health office, so that the information obtained is often different between health centers.

Aspects of consistency in communication related to the delivery of content and policy objectives that do not change. This research is in line with Cahyani et al (2020) which states that the implementation of the Healthy Living Community Movement (GERMAS) policy in Semarang City is good because it is carried out

consistently and based on indicators and is integrated with previous programs/activities. Communication in policy implementation must be done consistently to avoid confusion or different interpretations for policy implementers.

CONCLUSION

Based on the results of research and discussion of the implementation of the policy on the use of capitation funds at the Barana Health Center, Jenepono Regency. So, it can be concluded that the Communication Mechanism in the Utilization of JKN capitation funds at the Barana Health Center, Jenepono Regency has been running according to the procedure but has not run optimally. The communication process for dissemination or transmission, clarity, and consistency of policies to implementers, namely public health center, has been going well. However, the obstacle that is sometimes encountered is when the manager changes both at the Health Service and at the Public health center. So, it is hoped that the Jenepono District Health Office will continue to monitor the implementation of the policy on the use of JKN capitation funds.

RECOMENDATION

In order for the optimal implementation of the utilization of JKN capitation funds at the Barana Health Center, Jenepono Regency, it is recommended that (1) the District Health Office. Jenepono to continue to monitor the implementation of the policy on the use of JKN capitation funds on a regular basis; (2) Barana

Health Center continues to provide assistance to new managers so that there is no misinformation in the management of policies on the use of JKN capitation funds; (3) the next researcher conducts research using Edward

III's theory with variables of resources, disposition, and bureaucratic structure to complete information related to the implementation of the policy on the use of JKN capitation funds.

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