Evaluation of Universal Health Coverage (UHC) Policy on Bawean Island, Gresik Regency



Evaluasi Kebijakan Universal Health Coverage (UHC) di Pulau Bawean, Kabupaten Gresik

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ARTICLE INFORMATION ABSTRACT Keywords Health is a basic need for every individual that must be fulfilled. UHC is a Universal Health; National Health Insurance; condition where all individuals and groups receive health services without Evaluation: being hindered by costs. Law Number 32 of 2004 on Regional Government states that health affairs are mandatory matters under the authority of local governments, including Gresik Regency. The seriousness of Gresik Regency in promoting the realization of UHC can be proven by the implementation of UHC (PBID) based on Gresik Regent Regulation Number 60 of 2022 concerning the Implementation of UHC in the National Health Insurance Program in Gresik Regency. The Gresik Regency Government has launched free health insurance, only requiring the presentation of an ID card and/or family card. Since its implementation, UHC in Gresik Regency has continuously increased, earning a UHC award in 2023. Gresik Regency has a remote area called Bawean Island. The geographical condition of Bawean Island, as an outermost area of Gresik Regency, which is far from the regency center, certainly affects access to health services. The main focus of this research is to conduct an evaluation using Michael Scriven's formative evaluation model, which consists of measuring the periodic implementation results, measuring whether clients or participants are moving towards the desired goals, and measuring whether resources have been used according to plan. This research uses descriptive research with a qualitative approach, collecting data through observation, interviews, and documentation. The research results show that UHC PBID has achieved the UHC objectives stated in Regent Regulation Number 60 of 2022, clients or participants have moved towards the desired goals, but resources have not been used according to plan. ABSTRAK Kata Kunci Kesehatan merupakan kebutuhan dasar setiap individu yang harus Kesehatan Universal; terpenuhi. UHC merupakan kondisi dimana semua individu dan kelompok Asuransi Kesehatan; memperoleh pelayanan kesehatan tanpa terhalang biaya. Undang-Undang Evaluasi; Nomor 32 Tahun 2004 tentang Pemerintahan Daerah menyebutkan bahwa urusan kesehatan merupakan urusan wajib yang menjadi kewenangan pemerintah daerah, termasuk Kabupaten Gresik. Keseriusan Kabupaten Gresik dalam mendorong terwujudnya UHC dapat dibuktikan dengan penyelenggaraan UHC (PBID) yang berdasarkan Peraturan Bupati Gresik Nomor 60 Tahun 2022 tentang Penyelenggaraan UHC dalam Program Jaminan Kesehatan Nasional di Kabupaten Gresik. Pemerintah Kabupaten Gresik telah mencanangkan jaminan kesehatan gratis, hanya dengan syarat menunjukkan KTP dan/atau Kartu Keluarga. Sejak penyelenggaraannya, UHC di Kabupaten Gresik terus mengalami peningkatan, hingga memperoleh penghargaan UHC pada tahun 2023. Kabupaten Gresik memiliki daerah terpencil yang bernama Pulau Bawean. Kondisi geografis Pulau Bawean sebagai daerah terluar Kabupaten Gresik yang jauh dari pusat kabupaten, tentu saja mempengaruhi akses terhadap pelayanan kesehatan. Fokus utama penelitian ini adalah melakukan evaluasi dengan menggunakan model evaluasi formatif Michael Scriven yang terdiri dari

pengukuran hasil pelaksanaan secara periodik, pengukuran apakah klien

	atau peserta bergerak ke arah tujuan yang diinginkan, dan pengukuran apakah sumber daya telah digunakan sesuai rencana. Penelitian ini menggunakan penelitian deskriptif dengan pendekatan kualitatif, pengumpulan data melalui observasi, wawancara, dan dokumentasi. Hasil penelitian menunjukkan bahwa UHC PBID telah mencapai tujuan UHC yang tercantum dalam Peraturan Bupati Nomor 60 Tahun 2022, klien atau peserta telah bergerak ke arah tujuan yang diinginkan, namun sumber daya belum digunakan sesuai rencana.
Article History Send 3th July2024 Review 3 th August 2024 Accepted 16 th November 2024	Copyright ©2025 Jurnal Aristo (Social, Politic, Humaniora) This is an open access article under the CC-BY-NC-SA license. Akses artikel terbuka dengan model CC-BY-NC-SA sebagai lisensinya. (cc) BY-NC-SA

Introduction

Social protection is a system implemented through public policy with the aim of reducing the effects of socio-economic pressures due to reduced or even lost income due to illness, work accidents, unemployment, pregnancy, old age, disability or death (Supriyanto; et al., 2014). The World Bank in its Social Protection and Labor Strategy document revealed that one of the scopes of social protection is the Social Safety Net (JPS) Supriyanto; et al., (2014). Walker (2023) explained that JPS is a program designed to help individuals with low income levels meet their food, housing, and health needs. Sumodiningrat in Widiastuti et al., (2021) revealed that one of the focuses of JPS is social protection to maintain public access to health services. Law of the Republic of Indonesia, Number 17 of 2023 concerning Health explains that health is a healthy state of a person, both physically, mentally, and socially and not just being free from disease to enable a productive life.

Universal Health Coverage (UHC) is based on the constitution of the World Health Organization (WHO) in 1948 which declared that "Health is a fundamental human right" or that health is the most basic human right (United Nations, 2020). UHC is a condition where all individuals and groups receive health services easily without any difficulty in terms of costs. Several developing countries are working together to achieve UHC (United Nations, 2020). Indonesia's efforts to provide health services in order to initiate UHC is by launching the National Health Insurance (JKN) program. The JKN program is mandated in the Republic of Indonesia Law Number 40 of 2004 concerning the National Social Security System (SJSN). JKN is part of the SJSN which is implemented through a mandatory health insurance mechanism, in order to meet the health needs of the community, both those who have paid contributions or whose contributions are paid by the government.

Law of the Republic of Indonesia Number 23 of 2014 concerning Regional Government states that health is one of the health affairs which is a mandatory affair that is the authority of the regional government. This means that the regional government, both provincial and district or city, is responsible for health affairs including the achievement of UHC through national health insurance (JKN) as carried out by Gresik Regency. The form of seriousness of Gresik Regency in encouraging the realization of UHC in Gresik Regency can be proven by the inauguration of UHC Gresik Regency which was carried out on October 4, 2022. The implementation of UHC Gresik Regency is based on the Regulation of the Regent of Gresik Number 60 of 2022 concerning the Implementation of UHC in the National Health Insurance Program in Gresik Regency.

In order to fulfill the minimum UHC of 98% of the total population of the region, as well as the accountability of the regional government to the community in terms of health services as stated in Article 10 of the Gresik Regent Regulation Number 60 of 2022, the Gresik Regency government has launched free health insurance, which can be accessed only by showing an ID card and/or Family Card (KK) or UHC PBID. From the beginning of its implementation until now, the achievement of UHC PBID in Gresik Regency has continued to increase. For this achievement, Gresik Regency has succeeded in winning the UHC award from the central government because it has succeeded in achieving a high level of UHC participation.

The implementation of UHC PBID is carried out evenly throughout Gresik Regency, including on Bawean Island. Bawean Island itself is the outermost area of Gresik Regency which is in the form of an archipelago with a distance of approximately 150 KM north of the Regency center. Bawean Island can only be reached by sea and air transportation, with a travel time of 4-9 hours. As the outermost area, Bawean Island is certainly different from other areas of Gresik Regency, which of course also affects the implementation of health services. As research by Yulianti et al., (2022) revealed that Indonesia's diverse geographical conditions ranging from land, sea, mountains and many islands, make it difficult to access health services in certain areas, one of which is the archipelago. This is what makes researchers interested in reviewing further regarding the implementation of UHC PBID on Bawean Island, Gresik Regency.

In addition to the coverage of participants, an important point in UHC is related to the health services provided (Machdum, 2020). Bawean Island itself has 3 facilities that have collaborated with BPJS Kesehatan, namely the Sangkapura Health Center, Tambak Health Center, and Ummar Mas'ud Hospital. There is also a health center safety net, namely 7 assistant health centers. The existing facilities can be said to be minimal for the population of Bawean Island, which is approximately 84,000 people divided into two sub-districts and 30 villages. Despite having assistant health centers, the assistant health centers are considered still lacking in terms of the Minister of Health Regulation Number 43 of 2019 concerning Community Health Centers, which states that assistant health centers are established with a ratio of one assistant health center providing services for two to three villages or sub-districts. This condition is compounded by the less than proper road conditions and the damage to part of the Bawean ring road, which greatly affects the ease of access to health services, especially when faced with an emergency. This is contrary to the principles of public service provision in Law Number 25 of 2009 concerning Public Services, which states that public services must pay attention to the principles of speed, convenience and affordability.

Law Number 17 of 2023 concerning Health Workers Article 202 explains that the government and regional governments are required to meet the need for health workers, both in terms of quantity, type, and competence evenly in ensuring the continuity of development in the health sector. However, in reality, there is still a shortage of health workers in health facilities on Bawean Island. In addition, Bawean Island also experiences a shortage of specialist doctors in hospitals and of course this will affect the provision of UHC services at the referral level on Bawean Island. Referral facilities to mainland Gresik certainly take a lot of time, starting from traveling to the port or airport, not to mention crossings or flights, which are very unlikely if in an emergency that requires rapid handling.

Edward in Pramono (2020) revealed that kcommunication of target group policies must inform about the goals and objectives of the policy, in other words, they must know the meaning of the policy. However, in reality, in the implementation of UHC, many people still do not understand how to implement health services. In terms of communication through socialization, not all people attend the UHC socialization carried out in the Village Community Deliberation (MMD) activities. Many participants in the socialization come from village officials and several community leaders and several community leaders and for the wider community the results of the socialization are distributed through WA groups. Meanwhile, on Bawean Island there are still problems related to the uneven distribution of the internet network. Therefore, an evaluation is needed to see how the policy is implemented with the aim of improving implementation. In conducting the evaluation, the researcher used Michael Scriven's formative evaluation model in 1967 which was quoted from the book by Muh. Firyal Akbar & Mohi (2018). During the implementation of the policy, the program can be evaluated formatively according to needs, including being used to measure the results of program implementation periodically, measuring whether clients or participants are moving towards the planned goals and measuring whether resources have been used according to plan.

Method

This study uses a descriptive research type with a qualitative approach. Descriptive research, namely research that explains in depth what is targeted in the study (Anggara, 2015). Therefore, this study was conducted by collecting both written and oral data to produce an indepth description related to the research phenomenon discussed, namely the evaluation of universal health coverage (UHC) in the national health insurance program on Bawean Island, Gresik Regency. Bogdan and Taylor in Moleong (2021) state that qualitative research methods are a research approach that produces descriptive data, both written and oral, originating from

individuals and observed behavior. Data collection in this study through observation, interviews, documentation. The technique for determining informants uses purposive sampling. Purposive sampling is a technique for determining informants, with certain characteristics. The specific characteristics in question are parties or people who are considered to know the most about the research phenomenon, as stated by Anggara (2015) the purposive sampling technique for selecting research subjects is based on certain characteristics that are considered to have a close relationship with the research topic. By using the purposive sampling technique, it is hoped that data can be obtained that is truly in accordance with the research topic. The informants in this study consisted of health analysts from the Health Office, PIPP officers and supporting officers from the Sangkapura Health Center and Tambak Health Center, the director of the Ummar Mas'ud Hospital, the head of the population administration information division of the Population and Civil Registration Office of Gresik Regency, and the UHC PBID beneficiary community on Bawean Island, Gresik Regency. Primary data sources were obtained through direct interviews with informants, both key informants and supporting informants. The data analysis technique used was in accordance with that developed by Miles and Huberman, which included data collection, data condensation, data presentation, drawing conclusions and verification. The data validity technique used a credibility test, namely by triangulation, examination through discussion and member checking.

Result and Discussion

This study focuses on the Evaluation of Universal Health Coverage (UHC) in the National Health Insurance Program on Bawean Island, Gresik Regency. The policy evaluation analysis was carried out using Michael Scriven's formative evaluation model theory in 1967 which was quoted from the book by Muh. Firyal Akbar & Mohi (2018). The program evaluation standards define formative evaluation as an evaluation carried out to improve an object, especially when the object is being developed. Throughout the implementation of policies, programs or projects, a number of formative evaluations can be carried out according to the needs or evaluation work contract, which are carried out to 3 focuses which include (1) Measuring the results of implementation periodically, which is seen based on the objectives of UHC in the Regent's Regulation Number 60 of 2022 concerning the implementation of UHC in the implementation of national health insurance in Gresik Regency, and also seeing changes in the skills of the UHC beneficiary community (2) measuring whether clients or participants are moving towards the planned goals, seen from two aspects, namely the quantity of UHC participants for free health insurance using KTP and KK or UHC PBID and the quality seen

based on the services provided by the three facilities on Baawean Island in collaboration with BPJS Health, and (3) whether the sources have been used according to plan, here based on the theory the sources in question consist of budget sources used in financing this UHC PBID, sources of manpower, namely health workers providing services, and sources of equipment including infrastructure, health equipment, and medicines in the implementation of UHC PBID services. The three focuses will be described further, this aims toto know the implementation of UHC in the national health insurance program on Bawean Island, Gresik Regency in an effort to improve the implementation of UHC on Bawean Island, Gresik Regency.

Measuring Implementation Results Periodically

Muh. Firyal Akbar & Mohi (2018) say that this focus is related towhether the implementation of the program achieves the stated objectives or not, the evaluation measures whether the target is achieved or not. The objectives of the UHC program are stated in the Gresik Regent Regulation Number 60 of 2022on the Implementation of Universal Health Coverage in the National Health Insurance Program in Gresik Regency, which are as follows:



Pelaksanaan UHC pada Program Jaminan Kesehatan Nasional di Daerah bertujuan untuk:

- a. meningkatkan derajat kesehatan bagi Penduduk Gresik secara paripurna dalam penyelenggaraan satu sistem Jaminan Kesehatan Nasional;
- b. meningkatkan pelayanan Jaminan Kesehatan Nasional bagi seluruh Penduduk Daerah dengan pelayanan kesehatan yang berkualitas dan komprehensif meliputi pelayanan promotif, preventif, kuratif dan rehabilitatif; dan
- c. meningkatkan aksesibilitas pelayanan kesehatan di Daerah.



PENYELENGGARAAN UNIVERSAL HEALTH COVERAGE DALAM PROGRAM JAMINAN KESEHATAN NASIONAL DI KABUPATEN GRESIK

Figure 1. UHC objectives

In the first goal, there is an increase in health levels. Until now, there are still people who come to register, and based on information from PIPP officers, only a small portion of the community has not been registered.

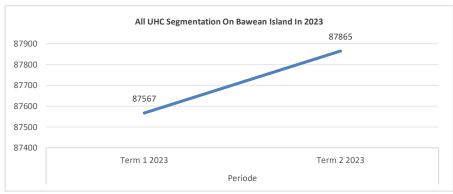


Figure 2. Total UHC for all segments of Bawean Island 2023

It can be seen in the graph that there is an increase in the overall UHC on Bawean Island along with the increase in the PBID UHC, which in the period of semester 1 2023, namely January 2023 - June 2023, had a total of 87,567 people registered for national health insurance. The increase also occurred in the period of semester 2 2023, namely July 2023 - December 2023, with a total of 87,865 people registered for national health insurance.

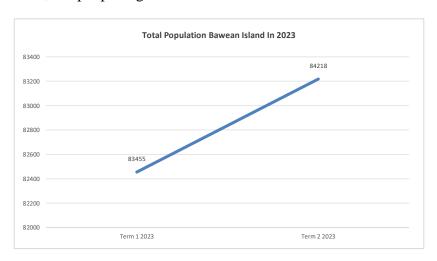


Figure 3. Population of Bawean Island 2023

The increase in overall UHC participation was accompanied by an increase in the population of Bawean Island both in semester 1 2023 and in semester 2 2023. In semester 1 2023 the population of Bawean Island was 82,455 with details of 41,925 men and 41,530 women. In semester 2 2023 the population of Bawean Island was 84,218 with details of 42,276 men and 41,942 women. There is indeed an increase in health levels on Bawean Island. However, there is a discrepancy between the number of UHC participants and the population. The larger number of participants indicates that the Bawean Island community in the two subdistricts as a whole has been registered for national health insurance, including the community registered with UHC PBID. Meanwhile, according to information from PIPP officers in the

field, until now there are still residents who come to register and there are still some people who have not registered. This discrepancy is suspected to be due to flag data that must be cleared.

Related to the quality of public services, one of the indicators in measuring the quality of service according to Parasuraman et al. in Mulyawan (2016) is reliability. Reliability which is explained that, in public services, expertise is needed in providing services immediately, accurately, and satisfactorily. Based on this theory, it can be seen that the accuracy of data in public services will affect the quality of service. Thus, due to the lack of synchronization and inaccuracy of the data, data synchronization is needed between population data and national health insurance participation data.

In the second objective, the health facilities on Bawean Island always provide responsive, fast, maximum services, and in accordance with the standards applied, both promotive, preventive, curative, and rehabilitative services. It is appropriate for health service facilities to bridge health service efforts ranging from promotive, preventive, curative, and rehabilitative in accordance with existing provisions, as stated in Article 1 of the Regulation of the Minister of Health Number 71 of 2013 concerning Health Services in National Health Insurance.

In the third objective, it is easier for the community to access the health facilities and services they need, both in terms of requirements, costs, and geography. This is in line with the principles of public service delivery in Law Number 25 of 2009 concerning Public Services, where public services must pay attention to the principles of speed, convenience and affordability. Regarding the efforts made to provide information and public understanding regarding the implementation of UHC, it has been implemented through socialization. However, the community tends to know about UHC from the village WhatsApp Group, health center officers, and individuals. Edward inPramono (2020)explains that kIt is important to communicate policies to target groups to increase their understanding of policy implementation.

Based on the description above, it can be concluded that the implementation of UHC PBID on Bawean Island has achieved the objectives stated in Gresik Regent Regulation Number 60 of 2022. However, for the first objective, it is not certain what percentage of the population of Bawean Island is registered for national health insurance due to the asynchrony that has been explained.

Measuring Whether Clients or Participants Are Moving Toward Desired Goals

The implementation of UHC PBID in Gresik Regency, including on Bawean Island, is guided by the Regulation of the Regent of Gresik Number 60 of 2022 concerning the Implementation of Universal Health Coverage in the National Health Insurance Program in Gresik Regency. In addition, there are also SOPs for supervision and control and flows as service support. This is as stated in Article 10 of Law Number 25 of 2009 concerning Public Services which states that one of the several components of service standards is the system, mechanism, and procedure. Based on quantity, there is a continuous increase in community participation in UHC PBID. Existing data shows that UHC PBID participation in the two subdistricts has details, for Sangkapura Sub-district as of October 2022 it was 10,528 and in March 2024 it was 11,704. While for Tambak Sub-district as of October 2022 it was 6,320 and in March 2024 7635. This increase is a form of accountability of the Regional Government to the Regional Population to become PBID participants, as per Article 10 of Gresik Regent Regulation Number 60 of 2022.

Based on quality, the existence of UHC PBID is very beneficial for the Bawean Island Community because they can access services for free. Regarding the UHC PBID service itself, it has provided satisfaction for the Community, both in terms of the comfort of health facilities, and the attitude of officers who are fast, friendly, responsive, and informative. This is in accordance with the indicators in measuring public services according to Parasuraman Parasuraman et al. in Mulyawan (2016), which consist of tangible, reliability, responsiveness, assurance, and empathy. From the explanation above, it can be concluded that, in the implementation of UHC on Bawean Island, clients or participants have moved towards the desired goals. In terms of quantity, community participation in UHC PBID has increased. In terms of service quality, some people are satisfied with the services provided, both in terms of the comfort of the facilities and the attitude of the employees.

Measuring Whether Resources Have Been Used According to Plan

In this focus, it will be explored whether the budget, health workers, and equipment that support the provision of UHC services on Bawean Island have been used according to plan or not. These three components are very important for the sustainability of UHC. The budget in the UHC PBID comes from the APBD, and until now there has been no shortage in terms of the budget. As mandated in the Presidential Instruction of the Republic of Indonesia Number 1 of 2022 concerning Optimization of the Implementation of the National Health Insurance Program, it mandates the Governor and Regent or Mayor to prepare and determine regulations

and then distribute the budget as a form of maximizing the implementation of the national health insurance program. Health workers both in the Health Center and in the Bawean Island Hospital are still lacking. This has an impact on the implementation of health services. The condition of Bawean as a remote area with minimal health workers is exacerbated by the transfer of health workers without any replacement health workers. This must be a concern for the government. Law Number 17 of 2023 concerning Health Workers Article 202, which explains that the government and regional governments are required to meet the need for health workers, both in terms of quantity, type, and competence evenly in ensuring the continuity of development in the health sector. Facilities and infrastructure, medical devices, and medicines in two health centers and one hospital that collaborate with BPJS Most said that there was no shortage of facilities, medical devices, or medicines. It's just that the Tambak Health Center still needs to fulfill most of the medical devices. Law Number 17 of 2023 concerning Health in the health supplies section explains that the Government, both the Central Government and the Regional Government, are responsible for the availability, distribution, and affordability of health supplies needed in order to implement health efforts. The health supplies referred to include the availability, distribution, and affordability of medicines and medical devices. From the explanation above, it can be concluded that in the implementation of UHC on Bawean Island, resources have not been fully utilized according to plan, namely in terms of manpower, the manpower in question is health workers.

Conclusion

This study concludes that the implementation of UHC on Bawean Island has achieved the objectives of UHC in the first focus, clients or participants have moved towards the desired goals, but resources have not been fully utilized according to plan. In conducting the evaluation, corrections or suggestions were made, including the need for data synchronization between national health insurance participation data and population data, so that the actual achievement of UHC on Bawean Island can be known, so that the implementation of UHC can be more comprehensive, the need to pay attention again to existing health facilities related to the availability and provisions for providing drugs. The need for massive fulfillment of health workers. The transfer of health workers on Bawean Island must be accompanied by the refulfillment of health workers. Further researchers are expected to be able to review the implementation of UHC PBID on Bawean Island in more depth, especially regarding the difficulty of health workers to serve on Bawean Island which is known to be a remote area.

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