

Factors Affecting Participation in the Regional Government-Subsidized National Health Insurance on Sumba Island

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Abstract: The community's preference for registering in the Regional Government-Subsidized Sumba segment rather than the informal workers segment may be influenced by several factors, such as income, family size, occupation, education, and the premium amount. This quantitative study uses a cross-sectional approach with a questionnaire and a minimum sample size of 415 participants selected through convenient sampling. The data were analyzed using binary logistic regression analysis. The results indicate that factors affecting participation in the Regional Government-Subsidized Sumba segment include education (OR = 0.53; p -value < 0.05), occupation (OR = 0.75; p -value < 0.05), family size (OR = 4.85; p -value < 0.05), and income (OR = 0.99; p -value < 0.05). However, the perception of premiums did not have a statistically significant effect (OR = 1.54; p -value > 0.05). This study's binary logistic regression model has a pseudo R^2 of 0.57, meaning that participation in the Regional Government-Subsidized Sumba segment is influenced by the independent variables by 57%. In comparison, 43% is influenced by other variables not examined in this study. Local governments must continue allocating health insurance funding each year. BPJS Kesehatan should also adopt a comprehensive approach and establish strong relationships with local governments to sustain Universal Health Coverage (UHC) in Sumba Regency.

Keywords: Regional Government-Subsidized Segment; Family Size; Occupation; Income; Premium Perception

INTRODUCTION

The National Health Insurance – Indonesia Health Card (JKN-KIS) is implemented to ensure that every participant receives healthcare benefits and protection in meeting basic health needs, or, in other words, to achieve Universal Health Coverage (UHC). The National Health Insurance (NHI) in Indonesia aims to ensure that all Indonesians can access health services, especially the underprivileged, by adopting a mutual insurance or cross-subsidy concept. According to Indonesian Law No. 40 of 2004 on the National Social Security System, NHI is organized by the Health Social Security Agency or BPJS Kesehatan. BPJS Kesehatan's goal is to provide health insurance services, ensuring a decent standard of living for each participant and their family members.

According to Indonesian Presidential Regulation No. 82 of 2018 on Health Insurance, Indonesia's NHI participants are divided into Subsidized Participants (Premium et al.) and Non-Subsidized Participants (Non et al.). Subsidized Participants are part of a health insurance program for the poor and vulnerable, with premiums paid by the central government through the State Budget (APBN) segment. Non-subsidized Participants are categorized into four segments: 1) Salary Earners and Formal Workers; 2) Informal Workers; 3) Regional Government-Subsidized, where local governments pay premiums; and 4) Non-salaried Workers. Salary Earners and Formal Workers are individuals employed and receiving wages from an employer, working in both the public and private sectors. Informal Workers are individuals working or self-employed at their own risk, outside of employer-employee relations. The Regional Government-Subsidized segment refers to participants who are not employed or receiving wages from an employer, with premiums paid by local governments, providing benefits in Class III hospital rooms. Non-salaried Workers are individuals not part of the registered population whose premiums are paid by the central or local government, such as salary earners and formal or informal workers.

According to the National Social Security Board's Annual Report 2023, the number of NHI participants in Indonesia as of December 2023 reached 267,311,566. The highest segment was Subsidized Participants (36%), followed by Informal Workers (26%), Salary Earners and Formal Workers (20%), Regional Government-Subsidized (16%), and Non-Salaried Workers (2%). The East Nusa Tenggara (NTT) Province has one of the highest active participation rates, at 89%.

Sumba Island, part of NTT Province, has achieved Universal Health Coverage (UHC) in its four districts. Based on data from the National Social Security Board's official website, the coverage rate for the four districts of Sumba as of December 2023 reached more than 95% of the UHC target, with East Sumba at 112.81%, Central Sumba at 106.73%, West Sumba at 101.56%, and Southwest Sumba at 120.42%. The participation rate by segment in East Sumba is as follows: Subsidized Participants 66.2%, Regional Government-Subsidized 11.9%, Salary Earners and Formal Workers 11.5%, Informal Workers 8.9%, and Non-Salaried Workers 1.5%. In Central Sumba, participation includes Subsidized Participants 63.0%, Regional Government-Subsidized 15.6%, Salary Earners and Formal Workers 13.0%, Informal Workers 7.2%, and Non-Salaried Workers 1.2%. In West Sumba, the breakdown is as follows: Subsidized Participants 71.5%, Salary Earners and Formal Workers 12.7%, Regional Government-Subsidized 9.1%, Informal Workers 5.1%, and Non-Salaried Workers 1.6%. In Southwest Sumba, the figures are as follows: Subsidized Participants 77.7%, Regional Government-Subsidized 9.5%, Salary Earners and Formal Workers 6.3%, Informal Workers 5.9%, and Non-Salaried Workers 0.7%. The participation data from these four districts show that most participants are enrolled in the Subsidized Participants and Regional Government-Subsidized segments, with the fewest in the Informal Workers segment.

The Subsidized Participants segment is designated for the poor and vulnerable, with premiums paid by the central government through the State Budget. In contrast to the Subsidized Participants segment, the Regional Government-Subsidized and Informal Workers segments are voluntary and can be chosen by participants based on their financial capabilities. The Regional Government-Subsidized segment in the four Sumba districts is, in practice, intended for the underprivileged and all residents not covered by the NHI program. As such, financially capable individuals may register for the Regional Government-Subsidized segment, even though they could opt for the Informal Workers segment if they are economically able. The decision to register for the Regional Government-Subsidized segment may be influenced by income, family size, occupation, education, and perceptions of the premium amount.

According to Harahap et al. (2022), income can affect participation in Indonesia's NHI program, as higher income increases the likelihood of enrollment. Education also plays a role in the decision to join NHI, as individuals with higher levels of education tend to have greater awareness of the importance of health insurance. Employment status is another influencing factor. According to Green's Theory (1980) in Giena et al. (2019), employment status is a predisposition factor affecting individuals' healthcare utilization behavior, including registration for health insurance. Family size also impacts participation in the NHI program. According to Werdani et al. (2017), the number of family members influences decisions to participate in NHI. A smaller family size (≤ 4 members) with a stable income may not find the NHI premiums burdensome. However, the increased premium cost can discourage participation for families with more than four members. Furthermore, premium amounts may also affect enrollment decisions. According to Kur'aini et al. (2020), higher premiums discourage individuals from enrolling in health insurance.

Given these considerations, research on the factors influencing participants' decisions to register for the Regional Government-Subsidized segment in Sumba Island is essential.

METHOD

This quantitative study employs a cross-sectional approach and uses questionnaires for data collection. The target population of this study includes all NHI participants. In contrast, the accessible population comprises all NHI participants in East Sumba, Central Sumba, West Sumba, and Southwest Sumba. The sample for this study includes participants who registered for the Regional Government-Subsidized segment in East Sumba, Central Sumba, West Sumba, or Southwest Sumba or the Informal Workers segment at the Waingapu Branch Office or the District Office of BPJS Kesehatan Waingapu. The inclusion criteria for this study are participants who personally processed their registration for the Regional Government-Subsidized or Informal Workers segment and are aged ≥ 18 years. The exclusion criteria include individuals other than

immediate family members who represented participants during registration for the Regional Government-Subsidized or Informal Workers segment at the Waingapu Branch Office or the District Office of BPJS Kesehatan Waingapu. Sampling was conducted between February and March 2024.

The minimum sample size for this study is 415 participants, selected through convenient sampling. Convenient sampling was used without a specific systematic sampling method, and samples were selected based on the researcher's judgment according to the predetermined inclusion and exclusion criteria. The independent variables in this study include education, occupation, family size, income, and perception of premiums. In contrast, the dependent variable is the participation of NHI participants in the Regional Government-Subsidized segment in Sumba Island.

The perception variable regarding premiums consists of four statements with Likert-scale response options: Strongly Disagree, Disagree, Agree, and Strongly Agree. The validity and reliability of the perception questionnaire regarding premiums were tested. The validity test employed correlation analysis, while the reliability test used Cronbach's Alpha. The validity test results showed that statements 1, 2, and 3 were categorized as valid, with a correlation coefficient $(r) > 0.7$, while statement 4 was considered sufficiently valid with a correlation coefficient $(r) > 0.5$. The reliability test results indicated that all four statements were reliable, with Cronbach's Alpha > 0.5 . After conducting the validity and reliability tests, the respondents' answers will be analyzed using binary logistic regression analysis to assess the simultaneous influence of education, occupation, family size, income, and perceptions of premiums on participation in the Regional Government-Subsidized segment of NHI in Sumba Island. Binary logistic regression analysis will help identify the factors likely influencing participants' decisions to register for the Regional Government-Subsidized segment. The data will be analyzed using STATA software.

RESULTS

Respondent Characteristics Overview

Table 1. Respondent Characteristics

Characteristics	Frequency (n = 440)	Percentage (100%)	Mean (Std. Deviasi)
NHI Participant Segment			
Regional Government-Subsidized	333	75,62	
Informal Workers	107	24,32	
Gender			
Male	200	45,45	
Female	240	54,55	
Age			
Adolescents (18 – 25 years)	91	20,68	
Adults (26 – 45 years)	282	64,09	
Elderly (> 45 years)	67	15,23	
Education			
No Schooling	10	2,27	
Elementary School	43	9,77	
Junior High School	25	5,68	
Senior High School	230	52,27	
Diploma	8	1,82	
Bachelor's Degree	124	28,18	
Occupation			
Not/Yet Employed	103	23,41	
Farmer/Gardener	200	45,45	
Fisherman	3	0,68	
Private Employee	52	11,82	
Civil Servant	18	4,09	
Other	64	14,55	
Number of Family Members			
≤ 4 people	248	56,36	
5 – 7 people	169	38,41	
> 7 people	23	5,23	
Total Monthly Income	440		Rp.1.759.857 (Rp.2.181.262)
Perception of Contribution			
Very Good	148	33,64	
Good	267	60,68	
Not Good	25	5,68	
Very Poor	0	0	

Table 1 shows that most respondents are registered under the Regional Government-Subsidized segment in Sumba Island, with 333 participants (75.62%). In comparison, 107 participants (24.32%) are registered under the Informal Workers segment. Most respondents are female, totaling 240 participants (54.55%), while 200 participants (45.45%) are male. The majority of respondents belong to the adult age group, with 282 participants (64.09%). The highest education level of most respondents is high school, with 230 participants (52.27%), while the fewest

respondents hold a diploma, with only eight participants (1.82%). Most respondents work as farmers/gardeners, totaling 200 participants (45.45%). Additionally, most respondents have a family size of ≤ 4 members, totaling 248 participants (56.36%). The average monthly income of respondents is approximately IDR 1,759,857. Most respondents positively perceive NHI's premiums, with 267 participants (60.68%).

Factors Influencing Participation in the NHI Program in the Regional Government-Subsidized Segment on Sumba Island

**Table 2. Factors Influencing NHI Participation
in the Regional Government-Subsidized Segment on Sumba Island**

Factors	Coef	OR	CI 95%	p-Value	Pseudo R ²
Education	-0,64	0,53	0,38 – 0,73	<0,001*	
Employment	-0,28	0,75	0,62 – 0,91	0,004*	
Family Size	1,58	4,83	2,26 – 10,3	<0,001*	0,57
Income	-1,54	0,99	0,99 – 0,99	<0,001*	
Perception of Contributions	0,43	1,54	0,78 – 3,06	0,216	

* p-value < 0.05 indicates statistical significance

The analysis results in Table 2 above show that education, occupation, family size, income, and perception of premiums significantly affect participants' decision to register for the Regional Government-Subsidized segment in Sumba Island (p-value < 0.05). Education has an Odds Ratio of 0.53 (OR < 1) with a negative coefficient. To facilitate interpretation, the OR is expressed as 1: 0.53 = 1.89, meaning that participants with higher education are 1.89 times less likely to register for the Regional Government-Subsidized segment in Sumba than those with lower education levels. The analysis indicates that education significantly affects participation in the NHI program for the Regional Government-Subsidized segment in Sumba Island.

Occupation has an Odds Ratio of 0.75 (OR < 1) with a negative coefficient. To facilitate interpretation, the OR is expressed as 1: 0.75 = 1.33, meaning that unemployed participants are 1.33 times more likely to register for the Regional Government-Subsidized segment in Sumba than those employed. Occupation significantly affects the decision to register for the Regional Government-Subsidized segment in Sumba.

Family size significantly influences participation in the Regional Government-Subsidized segment in Sumba, with an Odds Ratio of 4.83 (OR > 1) and a positive coefficient. This means that participants with more family members are 4.83 times more likely to register for the Regional Government-Subsidized segment than those with fewer family members.

Income significantly affects participation in the Regional Government-Subsidized segment in Sumba, with an Odds Ratio of 0.99 (OR < 1) and a negative coefficient. To facilitate interpretation,

the OR is expressed as $1: 0.99 = 1.01$, meaning that as income increases, the likelihood of registering for the Regional Government-Subsidized segment in Sumba decreases by 1.01%.

The perception of premiums does not significantly affect participation in the Regional Government-Subsidized segment in Sumba, with an Odds Ratio of 1.54 ($OR > 1$) and a positive coefficient. This means that the more negative the participants' perception of the premiums, the more likely they are to register for the Regional Government-Subsidized segment in Sumba, increasing their likelihood by 1.54 times.

The analysis shows that the binary logistic regression model has a Pseudo R^2 of 0.57, meaning that participation in the Regional Government-Subsidized segment in Sumba is 57% influenced by education, occupation, family size, income, and perception of premiums. In comparison, the remaining 43% is influenced by other factors not examined in this study.

DISCUSSION

Factors Influencing Participation in the NHI Program Among Regional Government-Subsidized Participants in Sumba**

Education

The study results indicate that education statistically impacts participation in the Regional Government-Subsidized segment in Sumba Island. Education is an effort to provide information, develop skills, and realize individual desires, needs, and abilities in achieving personal and social life satisfaction (Rahman BP et al., 2022). Education plays a crucial role in the knowledge and understanding of health insurance. People with higher education levels are more likely to understand the concept, benefits, and advantages of health insurance for their families, influencing their decision to enroll in health insurance to protect themselves and their families from high medical costs (Sukartini et al., 2021).

This study's findings align with research by Kusumaningrum and Azinar (2018), which showed that education level affects community participation in the NHI program in West Ungaran District. People with higher education levels are 2.16 times more likely to join the Informal Workers segment than those with lower education levels. In Sumba, individuals with lower education tend to register for the Regional Government-Subsidized segment. Most participants in the Regional Government-Subsidized segment in Sumba are high school graduates or have an equivalent education, accounting for 52.27%. Education level affects literacy, influencing understanding of health insurance types and coverage. Participants with lower education levels often struggle to find information about the differences in healthcare services between Informal Workers and government-supported plans, especially regarding differences in hospital rooms across classes. Conversely, higher-education

participants are better equipped to decide what level of health insurance they need, considering factors such as the scope of coverage, premiums, and healthcare quality.

Low education levels are also often associated with difficulty securing employment and earning a sufficient income. Individuals in low-wage jobs frequently struggle to find work with adequate pay, which affects their ability to select a treatment class that meets their needs. Table 1 shows that most respondents work as farmers or planters (45.45%), while 23.41% are unemployed.

Occupation

The type of occupation significantly affects participation in the Regional Government-Subsidized segment in Sumba, with statistical significance. The results of this study align with research by Niha et al. (2018), which found that a Chi-Square test ($\alpha = 0.05$) yielded a p-value of 0.048, indicating a relationship between occupation and community participation in the NHI program.

Based on the analysis in Table 1, 45.45% of respondents work as farmers or planters, while 23.41% are unemployed. The uncertain income from working as farm laborers or gardeners typically only covers basic daily needs. Consequently, when faced with the choice between registering for the Regional Government-Subsidized or Informal Workers segments, people tend to prefer the Regional Government-Subsidized option over the self-paying Informal Workers segment. According to Presidential Regulation No. 82/2018, Article 15, Paragraph 1, those registering for the Informal Workers segment must enroll themselves and all family members, paying a monthly premium for each person. Farming or gardening is not salaried; it depends on seasonal or weather conditions. For example, participants who opt to register for the Informal Workers segment in Class III, paying a premium of IDR 35,000 per person per month, will likely find this disproportionate to their seasonal income. Research by Siswoyo et al. (2015) also found a correlation between occupation and informal workers' awareness of the NHI program. The higher premiums compared to what informal sector workers can afford to discourage them from becoming participants in the Informal Workers segment.

Number of Family Members

The analysis shows that the number of family members statistically affects participation in the Regional Government-Subsidized segment in Sumba. The study indicates that the likelihood of enrolling in the Regional Government-Subsidized segment increases as the number of family members increases. This is likely because most participants are farmers or planters (45.45%) and unemployed (23.41%), making it difficult to afford monthly premiums if they register for the Informal Workers segment, which requires enrolling all family members with the same treatment class. These results are consistent with research by Apriani et al. (2021), which found a relationship

between the number of family members and the ability to pay NHI premiums for farmers in Banyuasin District, with a p-value of 0.046. Their study stated that the larger the family size, the greater the healthcare needs, necessitating an increased family budget. As family size increases, the likelihood of registering and paying for NHI premiums decreases (Nafan & Muhlis, 2022). Larger families tend to prioritize daily living expenses, making it more difficult to allocate funds for health insurance.

Income

Income has a statistically significant effect on participation in the Regional Government-Subsidized segment in Sumba. This study's findings align with research by Ernawati and Uswatul (2019), which showed a significant relationship between income and NHI participation in Mandau Village, Mandau District. This study revealed that respondents with lower income levels are 20 times more likely to not participate in the Informal Workers segment (PR = 20.63). Respondents in this study mentioned that their irregular monthly income made it difficult to participate in the Informal Workers segment, as they must make regular monthly payments. At the same time, NHI was not seen as an immediate need.

Based on the findings in Table 1, the average monthly income of participants is IDR 1,759,857, which is lower than the East Sumba district's minimum wage of IDR 2,186,826. This lower income could influence participants to choose the Regional Government-Subsidized segment over the Informal Workers segment. These findings align with Maslow's Hierarchy of Needs, as cited in El Kamila & Roehmah (2023), which states that basic physiological needs must be met before a person can address higher-level needs, such as safety. Health insurance is considered part of the safety needs category. Low income makes participants prioritize meeting basic physiological needs, such as health insurance, before addressing safety needs.

Perception of Premiums

The analysis shows no significant effect of the perception of premiums on participation in the Regional Government-Subsidized segment in Sumba. According to the Theory of Smith & Kisney in Ramadani (2021), the price or premium paid for a service should align with the benefits perceived by the consumer. If participants have a favorable perception of premiums, they are more likely to enroll in the Informal Workers segment than the Regional Government-Subsidized segment. However, the study presented in Table 1 shows that although most participants positively perceive NHI premiums, they still prefer to enroll in the Regional Government-Subsidized segment. This may be because many participants are satisfied with the healthcare services provided in class III of the Regional Government-Subsidized segment.

Moreover, participants know that registration for the Informal Workers segment requires enrolling the entire family. As the number of family members increases, the total premium also increases, discouraging them from choosing this option. The lack of tangible benefits or non-financial advantages may also be why people avoid paying for private health insurance (Mathur et al., 2015). Another possible consideration is that participants choose the Regional Government-Subsidized segment because the higher premiums for Informal Workers are unjustified by the limited healthcare facilities available in Sumba.

This study's results differ from research by Kur'aini et al. (2020), which found a significant effect of perceptions on community interest in the NHI program in Duampanua District, Pinang Regency. Similarly, Ramadani (2021) found a link between perceptions of premiums and compliance with premium payments in the Informal Workers segment in Bontomatene, Selayar Islands, with a Chi-Square test ($\alpha = 0.05$) yielding a p-value of 0.000.

CONCLUSION

Factors affecting participation in the Regional Government-Subsidized National Health Insurance on Sumba Island include education, occupation, number of family members, and income, all of which have a statistically significant impact. However, the perception of premiums does not influence participation in this segment. This study demonstrates the significant enthusiasm of the local community to register for the Regional Government-Subsidized segment, which is influenced by the socio-economic and demographic conditions of the community. Local governments need to continue allocating funds for health insurance annually. BPJS Health should also adopt a comprehensive approach and foster strong relationships with local governments to ensure the sustainability of Universal Health Coverage (UHC) in the four districts of Sumba Island.

Local governments can allocate health insurance funds through an alternative contribution-sharing model with third parties, known as the SRIKANDI Program, to ensure the long-term funding of health insurance programs. The SRIKANDI Program is an innovation by BPJS Kesehatan that offers local governments an alternative method for remitting the Regional Government-Subsidized segment contributions. The cooperation model of the SRIKANDI Program consists of two types: a collaboration between the regional government and the private. At the same time, the second is cooperation between the regional government and village governments or other third parties for contribution payments. In addition, the local and regional governments can verify and validate the data of participants enrolled in the Regional Government-Subsidized segment. Suppose a participant is found to have a stable economic situation and falls into the well-off category. In that case, they can be advised to transition to other segments, such as Informal Workers or Salary Earners/Formal Workers.

It is also hoped that the local health services can improve the quality and quantity of infrastructure and the quality of healthcare workers at health facilities to encourage more participants to register for the Informal Workers segment rather than the Regional Government-Subsidized segment. According to the participant's treatment class, this shift would be based on the healthcare services they receive. Registration for the Informal Workers segment has been made easier, with online access available through the Mobile JKN Application, PANDAWA, and BPJS Kesehatan Online. The Mobile JKN Application can be downloaded from the Playstore or Appstore on participants' devices, while PANDAWA offers administrative services via WhatsApp. BPJS Kesehatan Online, on the other hand, provides virtual participant services, planning, and implementation in collaboration with local agencies or villages. Additionally, participants can register for the Informal Workers segment without the 14-day administrative waiting period by paying contributions from when the participant becomes inactive.

The community should receive ongoing education about their rights and responsibilities in each segment of the NHI program and the healthcare services available regularly to help individuals make informed decisions when choosing between Regional Government-Subsidized or Informal Workers enrollment.

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