Implementation Of Lanny Jaya Sehat Program In Tiom Regional General Hospital Lanny Jaya Regency

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Abstract: The implementation of public health insurance is one part that plays an important role in improving the health status of the community. Lanny Jaya Sehat is a regional health insurance program provided by the Regional Government of Lanny Jaya Regency to provide health financing guarantees for the people of Lanny Jaya Regency. This study aims to obtain an overview of the implementation of the Lanny Jaya Sehat program at the Tiom Regional General Hospital, Lanny Jaya Regency. The research method uses a qualitative approach, data collection is carried out by indepth interview techniques. The results showed that the implementation of the Lanny Jaya Sehat program at Tiom Hospital had been carried out well without any significant obstacles seen from several aspects, namely; communication, resources, disposition and bureaucratic structure in its implementation. It is recommended to add staff implementing the program and add supporting facilities to improve the quality of service for the Lanny Jaya Sehat program to the community.

Keywords: Regional health insurance, Lanny Jaya Sehat

I. INTRODUCTION

Article 28H paragraph (1) of the 1945 Constitution of the Republic of Indonesia stipulates that "everyone has the right to live in physical and spiritual prosperity, to have a place to live, and to have a good and healthy environment and the right to obtain health services". Article 28H paragraph (3) of the 1945 Constitution affirms, "Everyone has the right to social security that allows his/her full development as a dignified human being". Then Article 34 paragraph (3) of the 1945 Constitution further emphasizes that "The state is responsible for the provision of health care facilities and proper public service facilities." The mandate The 1945 Constitution has been responded to by the Lanny Jaya Regency Government together with the Lanny Jaya Regency Regional People's Representative Council which has stipulated Lanny Jaya Regency Regional Regulation Number 6 of 2018 concerning

Improving Public Health Services of Lanny Jaya Regency (Regional Gazette of 2018 No. 6) to provide access to quality health services for the people of Lanny Jaya district.⁴

Indonesia initially targeted 99% or around 254 million Indonesians in 2019 to be registered as participants in the National Health Insurance program but the target for Universal Health Coverage has not been achieved. BPJS Kesehatan data shows that until the end of March 2021, the number of participants in the Health Insurance program National - The Healthy Indonesia Card (JKN-KIS) has reached 82.3% with the target of Universal Health Coverage to be achieved in 2024 set by the National Long-Term Development Plan (RPJMN) which is 98% of the Indonesian population. 6

In addition to the Universal Health Coverage target that has not been achieved, the implementation of the JKN program so far has found a number of problems, some of

which are deficits in the implementation of the JKN program, unfair claims of participants in certain groups, unequal distribution of facilities and health workers at the Public health center because there are areas that have poor health status. the number is quite large and there are isolated areas whose numbers are very small. BPJS Kesehatan targets participant satisfaction to reach 95%, but until 2017 participant satisfaction reaches 85%. Previous studies have stated that the quality of health services for JKN participants is still at level 65-80%. Disparities in access to quality JKN health services are still found and there are still many areas that have not been able to utilize JKN due to limited health facilities. Definition of participants is still at level 45 and 45 are still many areas that have not been able to utilize JKN due to limited health facilities.

The implementation of the JKN Program in Lanny Jaya Regency has been running since the issuance of the JKN Program by the Central Government in 2014, but just like in other areas, the implementation of the JKN Program has not been able to answer the needs of the Lanny Jaya community for access to quality health services because not all people have access to quality health services. JKN-KIS card and there are still many people whose names have not been registered as participants of the JKN-KIS program. This also makes it difficult for the community to access referral health services outside Lanny Jaya because of course for referrals outside Lanny Jaya the community must provide a large fee, if they do not have guaranteed financing from JKN-KIS then they have to pay for the treatment themselves and the costs of transportation and accommodation is very large.

Starting from these problems, the Regent of Lanny Jaya, Befa Yigibalom, SE., M.Si in 2018 initiated the Lanny Jaya Mandiri, Cerdas dan Sejahtera (MCS) Program which includes the Lanny Jaya Sehat Program with the enthusiasm and longing that "There should be no not one Lanny Jaya people died because they did not have money for treatment, for them Lanny Jaya Sehat was present", this was conveyed by the Regent of Lanny Jaya at the Launching of the Lanny Jaya Mandiri, Cerdas dan Sejahtera (MCS) Program in the Sasana Krida Hall, Provincial Governor's Office Papua, April 10 2018, also attended at that time the Minister of Home Affairs of the Republic of Indonesia, Tjahyo Kumolo and the Governor of Papua Province, Lukas Enembe along with other Regents/Mayors in Papua Province. Since then, the people of Lanny Jaya no longer have to worry about getting treatment, because through the Lanny Jaya Sehat program, all people can come for treatment at public health center throughout Lanny Jaya Regency and the Tiom Regional General Hospital at absolutely free of charge, even if they need to get treatment for referrals outside the region, the Lanny Jaya community will still get free health services because all costs will be borne by the Lanny Java Sehat Program. For example, if there is a seriously ill patient in a village far from the district capital, the family can simply contact the nearest public health center, then they will pick up the patient using an ambulance, but if the public health center does not have an ambulance, their officer can simply contact the regional hospital, namely Tiom Hospital to send an ambulance and then the patient will be picked up for treatment at the hospital. After being treated at the Tiom Hospital but it turned out that based on the doctor's assessment, the patient had to be referred to another hospital, there were a choice of referral hospitals that had collaborated with the Lanny Jaya Sehat Program, including; Wamena

Hospital in Jayawijaya district, Dian Harapan Hospital in Jayapura, Provita Hospital in Jayapura, Siloam Hospital in Makassar, Siloam Hospital in Jakarta and the Presidential Hospital of the Republic of Indonesia namely Gatot Subroto Army Hospital in Jakarta.

All costs of evacuating and transporting patients from home to the health center or to Tiom Hospital, even if referred by car, helicopter or chartered plane, are free of charge to the patient because it will be borne by the Lanny Jaya Sehat Program until the patient is declared cured by the doctor including the cost of returning control until the patient is completely declared cured. If the patient after being treated at a referral hospital but the patient dies, then the cost of returning the patient from the hospital to the place where the family wants the patient to be buried will be borne by the Lanny Jaya Sehat Program.

II. RESEARCH METHODS

The design of this research is descriptive with a qualitative approach using in-depth interview techniques to 14 informants selected by purposive sampling, these informants who are directly involved, who understand and can provide accurate and valid information about the Implementation of the Lanny Jaya Sehat Program at Tiom Hospital, Lanny Jaya Regency.

Qualitative descriptive research aims to describe, describe, explain, explain and answer in more detail the problems to be studied by studying as much as possible an individual, a group or an event.¹¹

The study was conducted at Tiom Hospital, from November to December 2021. The data collected included primary and secondary data. Primary data were collected through in-depth interviews and observation. Secondary data is collected through literature study, document observation and so on. ¹²

III. RESULTS AND DISCUSSION

Public policy implementation is the government's effort to carry out one of its main tasks, namely providing public services to the community.¹³ Policy implementation is the embodiment of decisions regarding basic policies, usually contained in a law, but can also be in the form of important executive instructions or statutory decisions.¹⁴

George Edward III (1980) asserted that the main problem of public administration is the lack of attention to implementation. He said, without effective implementation, the decision of policymakers will not be carried out successfully. Edward suggested paying attention to four main issues so that policy implementation would be effective, namely communication (communication), resources (resources), disposition or behavior (disposition or attitudes), and bureaucratic structures.¹⁵

COMMUNICATION

Referring to the research data, both interviews and participatory observations, the results showed that the transmission, clarity and consistency in communication from the Lanny Jaya Sehat Working Group, the Lanny Jaya Sehat representative at Tiom Hospital to the beneficiaries of the Lanny Jaya Sehat program had been running quite well and there are no significant obstacles in its implementation, so that the implementation of the Lanny Jaya Sehat program at Tiom Hospital can be ensured to be carried out in accordance with the expectations of the policy makers.

RESOURCE

The findings in this study related to the dimensions of resources, among others:

HUMAN RESOURCES (STAFF)

The number of human resources available for the implementation of the Lanny Jaya Sehat program at Tiom Hospital is sufficient, however, there is a suggestion for additional staff in the administration section. Then in terms of the competence of human resources or staff involved in the implementation of the Lanny Jaya Sehat program at Tiom Hospital, it has been quite good and there is input for training for staff to improve service quality in the Lanny Jaya Sehat program.

The main resource in policy implementation is staff or employees (street-level beaucratics). Failures that often occur in policy implementation, one of which is caused by inadequate, sufficient, or incompetent staff in their fields. Increasing the number of staff and implementation alone is not enough to solve the problem of policy implementation, but there is a need for a sufficient number of staff with the necessary skills and abilities to implement policies.

AUTHORITY

The results of this study indicate that all implementers of the Lanny Jaya Sehat program at Tiom Hospital have formal authority as evidenced by the existence of a Decree from the Leadership in the Government so that as the policy implementer of the Lanny Jaya Sehat program will gain legitimacy for the successful implementation of this excellent public policy.

In general, authority must be formal so that the government can implement it effectively. Authority is the authority or legitimacy for implementers in carrying out politically determined policies. When the authority does not exist, then the power of the implementers in the eyes of the public is not legitimized, so that it can thwart the implementation of public policies. But in other contexts, when formal authority is available, mistakes often occur in seeing the effectiveness of authority. On the one hand, the effectiveness of the authority is required in the implementation of policies; but on the other hand the effectiveness will decrease when the authority is misused by the implementers for their own or group interests.

FACILITIES (FACILITIES AND INFRASTRUCTURE)

The results of this study showed that the facilities in the form of facilities and infrastructure to implement the Lanny Jaya Sehat program at Tiom Hospital were adequate but there were some inputs that still wanted the addition of other facilities and infrastructure with the aim of reducing the number of referrals and improving service quality. The addition of the facilities referred to is the addition of an Ambulance fleet for referrals for Lanny Jaya Sehat patients which will later be used to pick up patients from home, from the public health center to Tiom Hospital and to deliver referral patients from Tiom Hospital to the referral hospital in the city of Wamena, namely Wamena Hospital.

Physical facilities are an important factor in policy implementation. Implementors may have sufficient and competent staff, but without supporting facilities (facilities and infrastructure) the implementation of the policy will not succeed.

DISPOSITION

The results showed that all policy implementers of the Lanny Jaya Sehat program at Tiom Hospital starting from the program manager, treasurer, specialist doctor in charge of referrals, implementing nurses to nurses in charge of referrals all could accept and implement this public policy well and in this study it was also found that In terms of providing incentives for policy implementers of the Lanny Jaya Sehat program at Tiom Hospital, almost all of them answered that the incentives they had received so far were sufficient, however, there was still one informant who said that the number of incentives needed to be increased.

Good results on the two factors that influence this aspect of disposition indicate that the implementation of the Lanny Jaya Sehat program policy at Tiom Hospital can run and be carried out well.

BUREAUCRATIC STRUCTURE

According to Edward III, there are two main characteristics of bureaucracy, namely: "Standard Operational Procedure (SOP) and fragmentation.

STANDARD OPERATIONAL PROCEDURE (SOP)

The results showed that the implementation of the Lanny Jaya Sehat program at Tiom Hospital had used an easy-to-implement SOP so that it would optimize the time available for services and also serve to uniform actions in an effort to make the implementation of the Lanny Jaya Sehat program successful at Tiom Hospital.

FRAGMENTATION

The results showed that the fragmentation factor in the implementation of the Lanny Jaya Sehat program was very small because coordination was only carried out with a few people and in a small scope so as to allow the success rate of

ISSN: 2394-4404

implementing the Lanny Jaya Sehat program in Tiom Hospital to be even greater.

Fragmentation is the distribution of responsibility for a policy to several different agencies that require coordination. In general, the greater the coordination required to implement a policy, the less likely the program or policy will be successful.

IV. CONCLUSION

Based on the results of research and discussion, it can be concluded as follows:

POLICY FOR THE LANNY JAYA SEHAT PROGRAM AT TIOM HOSPITAL

The policy of the Lanny Jaya Sehat program is very good and very helpful in overcoming health problems faced by the community in Lanny Jaya district. Lanny Jaya Sehat brings a positive impact to the people of Lanny Jaya district because all health services for all diseases are covered by the Lanny Jaya Sehat Program. Lanny Jaya Sehat program is present as a complement to the National Health Insurance Program which has so far provided enormous benefits to the Lanny Jaya community.

INDICATORS FOR THE IMPLEMENTATION

COMMUNICATION

All factors in the communication aspect, namely clarity, consistency and information have all gone quite well and then there are no significant obstacles in the implementation of the Lanny Jaya Sehat program policy at Tiom Hospital, Lanny Jaya district.

RESOURCE

Human Resources (STAFF)

The number of human resources and the competence of human resources or staff in the implementation of the Lanny Jaya Sehat program at Tiom Hospital is quite good

Authority

All implementers of the Lanny Jaya Sehat program at Tiom Hospital have formal authority as evidenced by the existence of a Decree from the Leadership in the Government.

Facilities (Facilities And Infrastructure)

The facilities and infrastructure to implement the Lanny Jaya Sehat program at Tiom Hospital are adequate.

DISPOSITION

Appointment Of Bureaucracy

All policy implementers of the Lanny Jaya Sehat program at Tiom Hospital can accept and implement this policy well.

Incentives

Almost all or most of the implementers of the Lanny Jaya Sehat program policy at Tiom Hospital said that the incentives they had received so far were sufficient.

BUREAUCRATIC STRUCTURE

Standard Operational Procedure (SOP)

The implementation of the Lanny Jaya Sehat program at Tiom Hospital has used Standard Operating Procedures so that it will optimize the time available for services and also serves to uniform actions in an effort to make the implementation of the Lanny Jaya Sehat program successful at Tiom Hospital.

Fragmentation

The fragmentation factor in the implementation of the Lanny Jaya Sehat program is very small because the coordination is only carried out with a few people in a small scope so as to allow the success rate of implementing the Lanny Jaya Sehat program in Tiom Hospital to be even greater.

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