

## Ten Year Evaluation of JKN: Strengthening Primary Health Care for National Resilience

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### ABSTRACT

This study evaluates the achievements of the National Health Insurance (JKN) over the past ten years, focusing on strengthening primary healthcare for national health system resilience. Launched on January 1, 2014, JKN aims for equitable healthcare access for all Indonesians, with participants reaching over 220 million by 2023. JKN has increased basic health service coverage, including immunization, maternal and child care, and treatment of diseases. Primary healthcare's role is vital in disease prevention, early diagnosis, treatment, and chronic disease management. Case studies highlight successful outreach programs. Challenges include funding deficits, uneven service quality, and lack of medical personnel in remote areas. Recommendations include increased budget allocations, incentive policies, continuous training, integration of services, effective health information systems, and community participation

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## **INTRODUCTION**

### **A. Background**

Jaminan Kesehatan Nasional (JKN) is an Indonesian government program launched to ensure all Indonesians have equitable access to quality healthcare. In Indonesia, JKN has a strong legal basis. The legal basis for JKN is Law No. 40/2004 on the National Social Security System. In addition, Presidential Regulation No. 19/2016 on the Implementation of the National Health Insurance Program provides an outline for running the program. This demonstrates the government's commitment to ensuring that all people have equal access to healthcare (Oktavianto & Triadi, 2023). JKN plays an important role in improving people's welfare by providing financial protection against unexpected health risks. Since its launch ten years ago, JKN has become the backbone of the national health system, enabling wider and more equitable access to a range of health services, including primary, secondary, and tertiary care (Margareth, 2022). Primary health care is the first line in the health system that serves as the main entry point for the community to obtain health services. Focus strengthening primary health care is critical as it plays a role in the prevention, early diagnosis, treatment, and management of chronic diseases. Strong primary healthcare can reduce the burden on secondary and tertiary healthcare, ensure more efficient use of health resources, and improve people's quality of life. In the context of JKN, strengthening primary healthcare is key to ensuring the program is sustainable and effective in the long term (Betan et al., 2023).

Healthcare resilience reflects the ability of a health system to respond and adapt to challenges and pressures, both from within and outside the system. Primary healthcare resilience has a direct impact on the overall resilience of the national health system. A strong and resilient primary healthcare system can more effectively respond to challenges such as epidemics, natural disasters and other health crises. This will ensure that people continue to receive the health services they need without experiencing a decline in the quality of care. As a result, strengthening primary healthcare through JKN not only improves individual health but also strengthens the resilience and stability of the national health system as a whole.

### **B. Problem Formulation**

1. What are the achievements of JKN in the last ten years?

This study will identify and evaluate the achievements of the National Health Insurance (JKN) over the past decade. These achievements include improved accessibility of health services, reduced health disparities between regions, improved quality of care, and financial impact on beneficiaries. This evaluation will provide a comprehensive picture of the extent to which JKN has succeeded in achieving the goals it has set since its launch.

2. How does primary healthcare play a role in JKN resilience?

This study will analyze the critical role of primary healthcare in supporting JKN resilience. The focus will be on how primary healthcare assists in disease prevention, chronic disease management, and reducing the burden on secondary and tertiary healthcare services. In addition, this research will explore how primary healthcare can improve the responsiveness and

adaptability of health systems to various challenges, including health crises and epidemiological changes.

3. What factors influence the strengthening of primary health care?

This study will identify and analyze various factors that influence the strengthening of primary health care in the context of JKN. These factors include health policy, funding and financing, infrastructure, human resources, and community participation and satisfaction. This analysis will help understand the key barriers and drivers to primary healthcare strengthening and provide policy recommendations to support these efforts.

By answering these questions, this study is expected to provide in-depth insights into JKN achievements, the role of primary healthcare in JKN resilience, and key factors needed for primary healthcare strengthening

### **C. Research Objectives**

1. Measure and assess the extent to which the National Health Insurance (JKN) has achieved its objectives over the past decade. This evaluation will cover various aspects, including accessibility of health services, quality of services, satisfaction, and quality of care. Participants, and the financial and social impact of the JKN program. The results of this evaluation are expected to provide a clear picture of the successes and challenges faced by JKN since its launch.
2. Understand and assess the crucial role that primary healthcare plays in strengthening the resilience of the JKN system. This includes primary healthcare's contribution to disease prevention, chronic disease management, secondary and tertiary care burden reduction, and adaptability to health challenges. A deeper understanding of these roles will help in formulating more effective strategies to strengthen JKN resilience.
3. Identify and analyze factors that influence the strengthening of primary health care in the context of JKN. These factors include health policy, funding, infrastructure, human resources, and community participation and satisfaction. Identifying these factors will provide insights into the key barriers and drivers of primary healthcare strengthening, which can be used as a basis for formulating more effective policy recommendations.

By achieving these objectives, this research is expected to make a significant contribution to the development and strengthening of JKN, particularly in the context of primary healthcare, to ensure the resilience and sustainability of the national health insurance program in Indonesia.

### **D. Research Benefits**

1. Theoretical Benefits : provides an important contribution to the academic and scientific literature related to the evaluation of national health programs, especially the National Health Insurance (JKN). By identifying the achievements, roles, and factors that influence primary health care strengthening, this study will add insight and understanding of the dynamics and effectiveness of national health programs. The results of this study can also be used as a reference for future research related to health program evaluation and primary health care strengthening in various national and international contexts.

2. Practical Benefits : provide applicable and evidence-based recommendations to policy makers, health practitioners, and other stakeholders in efforts to strengthen primary health care in Indonesia. The recommendations will be based on empirical findings on JKN achievements, the role of primary health care, and factors that influence primary health care strengthening. Implementation of these recommendations is expected to help improve the quality, accessibility, and resilience of primary healthcare services, thereby supporting the long-term sustainability and effectiveness of JKN.

This research is expected to provide significant benefits both theoretically and practically, and contribute to the improvement of the national health system in Indonesia.

## **LITERATURE REVIEW**

### **A. Basic Theory and Concepts**

#### **1. Definition and Concept of JKN**

Jaminan Kesehatan Nasional (JKN) is a health insurance program managed by the Social Security Administration for Health (BPJS) in Indonesia. Launched on January 1, 2014, JKN aims to provide fair and equitable access to health for all Indonesians (BPJS Kesehatan, 2014). This program is one of the implementation of Law No. 40/2004 on the National Social Security System (SJSN).

JKN operates based on the principle of social insurance with a mutual cooperation mechanism, where economically well-off participants help less well-off participants. Every Indonesian citizen must be a JKN participant, and contributions are paid monthly by the participants themselves, employers, or the government for the poor and disadvantaged groups (Hidayat & Bachtiar, 2024). JKN covers various types of health services, ranging from promotive, preventive, curative, to rehabilitative, to ensure all levels of society can access quality health services.

In its ten years of implementation, JKN has become the backbone of the national health system, enabling wider and more equitable access to a wide range of health services. These achievements include improved quality of care, reduced health disparities across regions, and positive financial impacts for beneficiaries. An evaluation of the program shows that despite its many challenges, JKN has succeeded in providing better health protection for Indonesians, making health a basic right that can be enjoyed by all.

#### **2. Definition and Role of Primary Health Care**

##### **Primary Health Care**

Primary healthcare is the basic health service that serves as an individual's first point of contact with the health system. It covers many important aspects of health, such as prevention, diagnosis, treatment, chronic disease management, and health education. According to the World Health Organization's (WHO) definition, primary healthcare is an approach to health that focuses on providing comprehensive, integrated, and continuous services that are available and accessible to individuals and families in the community. It aims to provide holistic care, which not only treats disease but also addresses the physical, mental and social well-being of individuals (World Health, 2008).

One of the main roles of primary health care is in health prevention and promotion. Through various education programs, primary health care seeks to increase public awareness about the importance of maintaining health and preventing disease. Health education involves counseling on healthy lifestyles, such as the importance of a balanced diet, physical activity, and hygiene habits. In addition, primary healthcare also provides vaccination and immunization programs to prevent the spread of infectious diseases. This health promotion aims to create a healthier society and reduce the overall burden of disease (Starfield, 1994).

Primary health care also plays a role in disease treatment and management. Primary healthcare facilities such as health centers or clinics provide early diagnosis and treatment of acute illnesses. Early diagnosis is essential to identify diseases at an early stage, so that treatment can be carried out more effectively and efficiently. In addition, primary healthcare also focuses on the management of chronic diseases such as diabetes, hypertension and heart disease. Good management involves regular monitoring, appropriate treatment, and educating patients to manage their conditions well (Starfield et al., 2005).

Another important role of primary health care is in the coordination of health services. When patients need more specific or complex care, primary healthcare acts as a link that directs patients to secondary and tertiary healthcare services, such as hospitals or specialists. This coordination ensures that patients receive timely and appropriate care according to their needs. Primary healthcare services also assist in the referral process, including providing medical information needed to ensure continuity of care (Kringos et al., 2015).

Primary health care seeks to provide comprehensive care, encompassing the physical, mental and social aspects of an individual's health (Zandroto et al., 2004). This approach ensures that all aspects of health are addressed and integrated in the care process. For example, in addition to medical treatment, primary healthcare services also offer counseling and psychological support for individuals experiencing stress or mental problems. This is important for addressing health issues in a comprehensive and non-fragmented manner.

Accessibility and affordability are key principles in primary health care. These services should be easily accessible to all levels of society regardless of social or economic status. This includes the location of health facilities close to where people live, affordable fees, and flexible operating hours (Dadang et al., 2024). By ensuring accessibility, primary healthcare services can reach a wider population and provide necessary care to those who may not have access to other healthcare services.

### **Role in the National Health System**

Primary healthcare services play a vital role in national health systems. They act as a base that supports the sustainability of the health system as a whole. By addressing most health problems at the primary level, they reduce the burden on secondary and tertiary health services, thus allowing hospitals and specialists to focus on more serious and complex cases (Astuti et al., 2023). This makes the health system more efficient and effective in delivering health care.

While primary healthcare services have many important roles, they also face various challenges. These challenges include a shortage of medical personnel, limited resources, and inadequate infrastructure. However, there are also many opportunities for the development and strengthening of these services. Innovations in health technology, improved training and education for medical personnel, and supportive policies can help overcome these challenges and increase the effectiveness of primary healthcare services. Through the concerted efforts of the government, communities, and other stakeholders, primary healthcare can continue to thrive and make a significant contribution to public health.

### **3. Health Resilience Theory**

Health resilience is the ability of a health system to continue to deliver quality health services amidst various challenges and crises, such as natural disasters, disease outbreaks, climate change, and economic instability. This resilience includes the system's ability to adapt, survive, and recover from disruptions without experiencing a significant decline in the functioning or quality of health services provided to the community. WHO (2015) emphasizes the importance of health resilience as a critical component in achieving global health security and sustainable development (Kieny et al., 2014).

#### **Components of health resilience**

Health resilience consists of several key components that must be considered and developed to ensure the sustainability of health services:

1. **System capacity:** the ability of the health system to provide the necessary services, including infrastructure, human resources, medicines, and medical technology. This capacity includes the readiness of health facilities to respond to increased demand for services during a crisis.
2. **Adjustment capacity:** the ability of the system to adapt to changes and new challenges through improved policies, strategies and operations. This involves flexibility in resource management and response to emergencies.
3. **Recovery capacity:** the ability of a system to recover quickly after a disruption. This includes the process of rehabilitating and reconstructing facilities and restoring health services quickly and efficiently (Rahmawati, 2020).

#### **Implementation of Health Resilience**

To improve health resilience, various strategies can be implemented, including:

1. **Strengthening the health information system:** a reliable and integrated information system enables quick and appropriate decision-making during a crisis.
2. **Improved collaboration between sectors:** good collaboration between the health sector and other sectors, such as education, transportation, and security, can strengthen crisis response.
3. **Resilient infrastructure development:** building health infrastructure that is resilient to disasters and ensuring backup systems are in place that can be activated in the event of a disruption (Zahrawi et al., 2022).

## **B. Previous Research**

### **Previous Research Results Related to JKN and Primary Health Care**

Previous research on the National Health Insurance (JKN) and primary healthcare in Indonesia has shown significant results. For example, a study by Pisani, Kok, and Nugroho (2017) highlights the success of JKN in improving healthcare accessibility across Indonesia. The study showed that since the launch of JKN, there has been a significant increase in the number of visits to primary healthcare facilities, as well as an increase in the use of preventive services such as immunizations and health screenings. The study also uncovered challenges faced in JKN implementation, such as funding issues and uneven quality of care across regions (Pisani et al., 2017).

Another study by Sihotang, M and Simangunsong H (2022) examined the implementation of the National Health Insurance Program (JKN) in Medan City has significantly improved access to and use of health services, especially among previously marginalized populations. The program has successfully reduced financial barriers, allowing more people to access previously unaffordable health services. Nonetheless, challenges remain, including service quality mismatches between health facilities, geographical barriers, and administrative complexities that hinder seamless service delivery. To improve program effectiveness, policy improvements, technological innovations, community engagement, and optimal resource management are needed. Targeted interventions on vulnerable groups and simplification of administrative processes are essential to ensure equitable access and consistent quality of health services for all residents of Medan City (Sihotang & Simangunsong, 2022).

## **C. Theoretical Framework**

### **Health Program Evaluation Model**

Health program evaluation is a systematic process of assessing the effectiveness, efficiency, and impact of a particular health program. Evaluation models often used in health research include several approaches, such as the Program Logic model, the Donabedian model, and the RE-AIM model.

#### **1. Program Logic Model**

The Program Logic Model is a conceptual framework that describes the relationship between inputs, activities, outputs, outcomes, and impacts of a health program. It helps in identifying program objectives, resources needed, activities to be undertaken, expected outcomes, and how those outcomes will be measured. The model is useful in planning, implementing, and evaluating health programs, as it provides clear guidance on what to achieve and how to achieve it (W.K. Kellogg, 2004)

#### **2. Donabedian Model**

This model classifies healthcare quality into three components: structure, process, and outcome. Structure includes the facilities and resources used to deliver the service, process includes the activities performed to deliver the service, and outcome is the final impact of the service on the patient's health. Donabedian's model is often used to evaluate the quality of primary healthcare services in the JKN context (Donabedian, 1988).

### **3. RE-AIM Model**

The RE-AIM (Reach, Effectiveness, Adoption, Implementation, and Maintenance) model is an evaluation framework designed to increase the adoption and implementation of effective health interventions. It assesses five dimensions: reach, effectiveness, adoption, implementation, and maintenance of a health program. RE-AIM assists in identifying critical aspects that determine program success and ensures that successful interventions can be widely implemented (Glasgow et al., 1999).

#### **Concept of Strengthening Primary Health Care in the Context of JKN**

Strengthening primary healthcare in the context of JKN encompasses various aspects, ranging from improving accessibility, quality of care, to health system sustainability. Some key concepts relevant to primary healthcare strengthening include capacity building, service integration, and community empowerment.

##### **1. Capacity Building**

Improving the capacity of primary health care involves increasing the number and quality of health workers, providing adequate medical facilities and equipment, and developing effective health information systems. These efforts aim to ensure that primary health facilities can provide quality services and are responsive to community needs. Capacity building also includes continuous training for health workers to hone their clinical and managerial skills (Betan et al., 2023).

##### **2. Service Integration**

Integration of primary health care with secondary and tertiary care is key to ensuring continuity of care and reducing fragmentation of the health system. This includes efficient referrals and good communication between different levels of health services. Integration also means combining promotive, preventive, curative, and rehabilitative health services in one coordinated system. In the context of JKN, this is important to ensure that all levels of society have access to comprehensive and sustainable health services (Starfield et al., 2005).

##### **3. Community Empowerment**

Community empowerment is a process that enables individuals and groups within a community to gain more control over the factors that affect their health. It includes increased community participation in the planning, implementation, and evaluation of health programs. Community empowerment is also involves health education to increase community awareness and knowledge about health and disease prevention. In the context of JKN, community empowerment can improve program effectiveness by ensuring that health interventions are appropriate to local needs and preferences (Laverack & Labonte, 2000).

Using this theoretical framework, research on JKN and primary healthcare can be more structured and comprehensive. The health program evaluation model provides tools to assess the effectiveness and efficiency of JKN, while the concept of strengthening primary healthcare in the context of JKN helps identify strategies that can improve the quality and accessibility of healthcare for all Indonesians.



## **METHODOLOGY**

### **1. Research Design**

This research design is a qualitative literature study, which aims to review and analyze existing literature related to the National Health Insurance (JKN) and primary health care. Qualitative desk research allows researchers to explore and understand previously published concepts, theories, and research findings to build a comprehensive understanding of the topic under study (Nadria, 2023).

### **2. Data Source**

The main data sources in this study consisted of secondary literature including books, scientific journals, research reports, and official documents relevant to JKN and primary healthcare (Creswell, 2013). Books and scientific journals provided theoretical and empirical foundations, while research reports and official documents such as government policies and BPJS Health reports provided practical and up-to-date information on JKN implementation.

### **3. Data Collection Technique**

The data collection technique in this research is secondary data collection through literature studies. Secondary data is obtained by reviewing and analyzing relevant literature, including journal articles, books, research reports, and official documents (Ibrahim, Muhammad Buchori, 2023). The researcher will use related keywords such as "National Health Insurance", "primary health care", "health program evaluation", and "health system resilience" to search for relevant literature in academic databases and digital libraries.

### **4. Data Analysis Technique**

The data analysis technique used in this research is content analysis. Content analysis involves the process of identifying, categorizing, and analyzing the main themes that emerge from the literature reviewed. The researcher will coding the text to identify patterns, themes, and relationships between concepts relevant to the research topic. This process allows the researcher to develop a more structured and systematic understanding of the topic under study (Elo & Kyngäs, 2008).

### **5. Data Triangulation to Ensure the Validity of Findings**

To ensure the validity of the findings, this research will use data triangulation techniques. Triangulation involves using multiple data sources or analysis methods to verify and confirm research findings. In this context, the researcher will compare and contrast information obtained from various literatures to ensure consistency and accuracy of findings. Triangulation helps to reduce bias and increase the credibility of research results (Patton, 2000).

With this methodological approach, the research is expected to provide in-depth and comprehensive insights into JKN and primary healthcare, as well as identify strategies and best practices that can be adopted to strengthen the health system in Indonesia.

## RESULTS AND DISCUSSION

### 1. Evaluation of JKN Achievement

#### Ten-Year Analysis of JKN Program Achievements

The National Health Insurance (JKN) has been running for ten years since its launch on January 1, 2014. An evaluation of the program's achievements shows significant improvements in the accessibility of health services across Indonesia. Data from the Social Security Administration (BPJS) for Health shows that the number of JKN participants continues to increase every year, reaching more than 271.2 million by May 2024. This figure reflects the widespread acceptance of the program by the public, as well as the government's success in reaching various levels of society, including those in remote and hard-to-reach areas.

Number of JKN Participants:

- 2014 : In its first year, JKN enrolled around 92.3 million participants, covering a wide range of groups including civil servants, formal workers, and the government-covered poor.
- 2018 : Five years later, the number of participants increased to around 196 million, showing consistent growth every year.
- 2023 : By 2023, the number of participants will reach more than 262 million, covering more than 90% of Indonesia's population.
- As of May 2024, the number of participants reached 271.2 million (Trisyuliono, 2024).

#### Immunization Coverage

In addition to increasing the number of participants, the JKN program has also succeeded in significantly increasing the coverage of basic health services. One indicator of success is increased immunization coverage, which helps reduce the incidence of communicable diseases that can be prevented through vaccination.

- Measles and Rubella Immunization: In 2014, measles and rubella immunization coverage in Indonesia was around 80%. With the JKN program, this coverage increases to more than 95% by 2023.
- Polio Vaccination: Polio vaccination coverage is also increasing from around 85% in 2014 to over 97% by 2023, thanks to the national immunization program supported by JKN (UNICEF INDONESIA, 2023).

#### Maternal and Child Care

In addition, the maternal and child care program under JKN has shown positive results. The number of antenatal and postnatal visits has increased, and maternal and infant mortality rates have decreased.

- Antenatal visits: In 2014, about 75% of pregnant women had at least four antenatal visits. By 2023, this figure increases to more than 90%.
- Postnatal visits: Postnatal visits within 48 hours of delivery increased from about 70% in 2014 to 85% by 2023.
- Maternal and Infant Mortality Rates: The maternal mortality rate per 100,000 live births decreased from 305 in 2014 to around 230 in 2023. Meanwhile, the rate of infant deaths per 1,000 live births decreased from 32 in 2014 to 22 in 2023 (Hardianto et al., 2023).

### **Chronic Disease Management**

On the other hand, the JKN program has also shown success in the treatment of communicable and non-communicable diseases. The provision of essential medicines and affordable medical services through JKN has helped in the management of chronic diseases such as diabetes, hypertension, and heart disease.

- Diabetes: The number of diabetes patients receiving care through JKN increased from around 3 million in 2014 to more than 5 million in 2021.
- Hypertension: Hypertensive patients receiving treatment increased from about 7 million in 2014 to more than 12 million in 2021.
- Heart Disease: The number of patients with heart disease receiving care increased from about 2 million in 2014 to more than 4 million in 2021 ((DJSN) & Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan, 2023).

### **Treatment of Infectious Diseases**

In addition, initiatives to improve screening and treatment of infectious diseases such as tuberculosis and HIV/AIDS have shown encouraging results.

- Tuberculosis: The number of tuberculosis cases identified and treated increased from approximately 300,000 cases in 2014 to more than 500,000 cases in 2023 (World Health Organization, 2023).
- HIV/AIDS: The number of HIV/AIDS patients receiving antiretroviral therapy increases from about 50,000 in 2014 to more than 150,000 in 2023 (UNAIDS, 2023).

However, challenges remain, such as ensuring funding sustainability, improving the quality of care across regions, and increasing the number and distribution of medical personnel to ensure that all citizens can receive quality healthcare. Continuous evaluation and policy adaptation are needed to address these challenges and ensure that JKN can continue to meet the health needs of Indonesians.

## **2. Success Indicators and Challenges Facing the JKN Program**

### **A. Indicators of Success**

#### **1. Improved Accessibility of Health Services**

- The number of JKN participants continues to increase every year, reaching more than 220 million by 2023. This covers more than 80% of Indonesia's population, demonstrating widespread acceptance of the program.
- Increased immunization coverage for preventable diseases, such as measles, rubella and polio. Measles and rubella immunization coverage increased from around 80% in 2014 to more than 95% by 2023.
- The number of antenatal and postnatal visits increased, and maternal and infant mortality rates decreased. Antenatal visits increased from 75% to 90%, and maternal mortality decreased from 305 per 100,000 live births in 2014 to around 230 in 2023.

#### **2. Improved Quality of Health Services**

- The number of patients receiving treatment for chronic diseases such as diabetes, hypertension, and heart disease is increasing significantly. For example, the number of diabetes patients receiving treatment increased from about 3 million in 2014 to more than 5 million in 2023.

- Increased number of infectious disease cases identified and treated. Treated tuberculosis cases increased from about 300,000 in 2014 to more than 500,000 in 2023. The number of HIV/AIDS patients receiving antiretroviral therapy increased from about 50,000 in 2014 to more than 150,000 in 2023.

### **3. Improved Health System Efficiency**

- Integration of primary healthcare with secondary and tertiary care helps reduce the burden on hospitals and ensure continuity of care for patients.
- The implementation of information technology in the healthcare system helps in managing patient data and improving service efficiency.

## **B. Challenges Faced**

### **1. Funding Issues**

- One of the biggest challenges is the budget deficit issue that threatens the sustainability of JKN. While the number of participants continues to increase, available funding is often insufficient to cover the growing healthcare costs.
- Delays in payment of claims to healthcare providers cause disruptions in the operations of hospitals and other healthcare facilities.

### **2. Inequality in Quality of Health Services**

- Quality of Service: The quality of health services varies across regions. In some areas, health facilities and medical personnel are still very limited, leading to uneven quality of services provided.
- Access to Remote Areas: Difficulty of access to health services in remote and less developed areas remains a major challenge. Many areas lack adequate health facilities and trained medical personnel.

### **3. Lack of Medical Personnel**

- Lack of medical personnel, especially in remote areas. The uneven distribution of medical personnel has caused some areas to experience a shortage of doctors, nurses, and other health personnel.
- The need for ongoing training programs for medical personnel to keep up with the latest developments in medical practice and health technology.

By addressing these challenges, JKN can continue to strengthen the national health system and ensure that all Indonesians have access to quality healthcare. Continued efforts in policy evaluation and adaptation will be critical to the sustainability and success of JKN in the future.

## **3. Role of Primary Health Care**

### **The Role and Contribution of Primary Health Care in JKN Resilience**

Primary health care is a key component of the health system that plays an important role in maintaining and improving the health of the community. It serves as the frontline of the health system and provides comprehensive and continuous basic health care. In the context of the National Health Insurance (JKN), primary healthcare plays a vital role in the following aspects:

#### **A. Prevention and Health Promotion**

- Primary health care is responsible for implementing preventive programs such as immunization, health screening, and community health education. These efforts aim to prevent diseases before they develop, which in turn reduces the burden of disease on the overall health system.

- Health education campaigns conducted at primary healthcare centers help raise public awareness about the importance of healthy lifestyles and disease prevention.

#### **B. Early Diagnosis and Treatment**

- Primary healthcare facilities provide early diagnosis services to detect diseases at an early stage. Early diagnosis allows for more effective interventions and increases the chances of recovery.
- Treatment and management of acute and chronic diseases is done at the primary healthcare level, reducing the need for referrals to secondary and tertiary healthcare services.

#### **C. Chronic Disease Management**

- Primary healthcare has an important role in the management of chronic diseases such as diabetes, hypertension, and heart disease. Good management at the primary level helps in disease control and preventing more serious complications.
- Chronic disease management programs involve regular monitoring, appropriate medication, and educating patients on how to manage their own conditions.

#### **D. Service Coordination and Integration**

- Primary healthcare services serve as a link between different levels of healthcare. They coordinate referrals to secondary and tertiary health services and ensure that patients receive a continuum of care.
- Integration of primary healthcare with other healthcare services ensures that patients receive holistic and coordinated care.

#### **Case Studies and Concrete Examples of Implementation in the Field**

To understand how primary healthcare contributes to JKN resilience, it is important to look at some case studies and concrete examples of implementation on the ground :

##### *1. Ngemplak Health Center, Yogyakarta*

- Outreach program and home visits : Puskesmas Ngemplak has successfully increased immunization coverage and maternal and child health services through outreach programs and home visits. This program is designed to reach out to people living in remote areas or who have limited access to health facilities.
- Results : Immunization coverage in the region increased significantly, and antenatal and postnatal visits showed a similar increase. This helped in reducing maternal and infant mortality in the region.

##### *2. Puskesmas in Bojonegoro District, East Java*

- Chronic disease management : Puskesmas in Bojonegoro District run a chronic disease management program that focuses on patients with diabetes and hypertension. The program involves regular monitoring, regular medication administration, and education on healthy lifestyles.
- Results : Patients enrolled in the program showed significant improvement in their disease control, with decreased rates of complications and hospitalization.

3. *Health centers in East Nusa Tenggara Province (NTT)*

- Health prevention and promotion program : Puskesmas in NTT focus on prevention and health promotion, especially in the areas of maternal and child health and nutrition. Program this includes providing nutritional supplementation, regular health check-ups, and educational campaigns on the importance of exclusive breastfeeding.
- Results : This program succeeded in reducing the stunting rate in the area, as well as increasing community awareness about the importance of maternal and child health.

By looking at these examples, it is clear that primary healthcare plays a crucial role in ensuring the success and resilience of JKN. Through various initiatives and programs run at the local level, primary healthcare can make a real contribution to improving community health and strengthening the national health system. Continued efforts to support and strengthen primary healthcare will be critical to ensure that JKN can continue to meet the health needs of Indonesians.

#### **4. Factors for Strengthening Primary Health Care**

##### **Identification of Key Factors Supporting Strengthening Primary Health Care**

Strengthening primary health care is a crucial element in ensuring an effective and sustainable health system. Some of the key factors that support primary healthcare strengthening include supportive policies, adequate funding, competent human resources, and good infrastructure. A more detailed identification of these factors follows:

*a. Policies that support*

- Proactive and responsive government policies are essential to support the strengthening of primary health care. These policies should include clear regulations, sufficient budget allocations, and support for health worker training and capacity building programs.
- Consistent and comprehensive implementation of national health policies, such as the National Health Strategic Plan, can help guide efforts to strengthen primary health care.

*b. Adequate funding*

- Stable and adequate funding is essential to ensure the sustainability of primary healthcare services. This includes allocation of funds for health facility operations, purchase of essential medicines, and repair and maintenance of health infrastructure.
- Fair and transparent health financing schemes, such as JKN, should continue to be supported to ensure that all levels of society gain access to necessary health services.

*c. Competent human resources*

- The availability of trained and competent health workers is essential for the strengthening of primary health care. This includes general practitioners, nurses, midwives, as well as other health workers who play a role in providing basic health services.
- Continuous training and capacity building programs for health workers should be held regularly to ensure that they have up-to-date knowledge and skills in medical practice and public health.

*d. Good Infrastructure*

- Adequate infrastructure includes proper health facilities, adequate medical equipment, and effective health information systems. Primary health facilities should be equipped with basic equipment for diagnosis and treatment, as well as information technology for health data management.
- The development and improvement of health infrastructure in remote and less developed areas is critical to ensure that all communities have equal access to primary healthcare services.

**Discussion on Policies, Resources, and Infrastructure**

*a. Policy*

Policies that support the strengthening of primary health care should cover various aspects, ranging from regulations, funding, to incentives for health workers. The government should ensure that policies support broad and equitable access to primary healthcare. These policies should also encourage innovation in health services, such as telemedicine and the use of information technology to improve efficiency and quality of care.

*b. Resources*

The availability of adequate and competent human resources is one of the main pillars in strengthening primary health care. Training and capacity building programs should be conducted on an ongoing basis to ensure that health workers can provide quality services. In addition, incentives for health workers who work in remote areas need to be improved to ensure equitable distribution.

*c. Infrastructure*

Good infrastructure is essential to support primary healthcare operations. This includes proper health facilities, adequate medical equipment, and effective health information systems. The government should continue to invest in the development and improvement of health infrastructure, especially in remote and less developed areas, to ensure that all communities have equal access to primary healthcare services.

By identifying and addressing these key factors, primary healthcare can be strengthened to provide better and more affordable services to all Indonesians. Continued efforts in policy development, resource enhancement, and infrastructure improvement will be critical to ensure that JKN can continue to meet the health needs of Indonesians.

## CONCLUSIONS AND RECOMMENDATIONS

### 1. Conclusion

#### *Summary of Key Research Findings*

This study evaluates ten years of achievements of the National Health Insurance (JKN), identifies the role of primary healthcare in supporting JKN resilience, and identifies factors that influence primary healthcare strengthening. Key findings show that JKN has successfully improved healthcare accessibility and coverage of primary healthcare services across Indonesia. However, there are several challenges that need to be addressed, including funding issues, inequities in service quality between regions, and a lack of medical personnel in remote areas.

#### *Conclusion on the Achievement and Role of Primary Health Care in JKN*

Primary healthcare services play a critical role in the success of JKN. They serve as the frontline in disease prevention, early diagnosis, and chronic disease management, all of which help reduce the burden on secondary and tertiary healthcare services. Primary healthcare also plays a role in public health education and promotion of healthy lifestyles, which are important for maintaining overall population health. However, to further strengthen this role, greater support is needed in terms of policy, funding and infrastructure.

### 2. Recommendation

#### *Suggestions for Health Policy Development*

- a. The government needs to increase budget allocations for primary healthcare services to ensure the availability of adequate resources, including medicines, medical equipment, and proper health facilities.
- b. Incentive policies for health workers working in remote areas should be strengthened to ensure a more equitable distribution of medical personnel.
- c. The development of ongoing training programs for medical personnel should be prioritized to improve their competence and capacity to deliver primary health services.

#### *Practical Recommendations for Strengthening Primary Health Care*

- a. Improve the integration of primary health care with secondary and tertiary care to ensure continuity of care and reduce fragmentation of the health system.
- b. Develop effective health information systems to facilitate the collection, analysis and use of accurate and timely health data.
- c. Increase community participation in the planning, implementation, and evaluation of health programs to ensure that health interventions are appropriate to local needs.

#### *Implications for Further Research*

- a. Further research is needed to evaluate the impact of newly implemented health policies on the quality and accessibility of primary healthcare services.
- b. Longitudinal studies can be conducted to observe changes in the quality of primary healthcare services and their impact on population health over the long term.
- c. Comparative research between different regions in Indonesia may provide further insights into the factors contributing to the success or failure of JKN implementation and primary healthcare services.



By following these recommendations, it is hoped that the national health system in Indonesia, particularly primary health care, can be further strengthened to provide better, more affordable and more equitable services for the entire population. This study also emphasizes the importance of a holistic and integrative approach in health policy development to achieve long-term sustainable health goals.

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