LAMPIRAN

Lampiran 1. Daftar Riwayat Hidup

BIODATA PENELITI

A. **Data Pribadi**

Nama : Serly Dea Mandasari

Tempat, Tanggal Lahir : Samarinda, 20 Juni 2001

Alamat : JL.P.Suryanata Perum Bukit Pinang Blok A3/A4 RT. 14 Kelurahan Bukit Pinang Kecamatan Samarinda Ulu Kota Samarinda Provinsi Kalimantan Timur

B. **Riwayat Pendidikan Formal**

- Tamat TK : 2007 Aisyiyah Bustanul Athfal Samarinda Ulu
- Tamat SD : 2013 SD Negeri 018 Samarinda Ulu
- Tamat SMP : 2016 SMP Negeri 24 Samarinda Ulu
- Tamat SLTA : 2019 SMK Kesehatan Samarinda Utara

Tanggal Ujian : 27 Juni 2023

Judul Penelitian :

HUBUNGAN TINGKAT PENDAPATAN DENGAN PEMANFAATAN PENGGUNAAN BPJS KESEHATAN DI PUSKESMAS LEMPAKE KOTA SAMARINDA

Pembimbing : Drs. Suprayitno, M.Kes

Demikian permohonan pengajuan penguji ini saya sampaikan atas perhatiannya

Saya ucapkan terima kasih.

Wassalamu'alaikum Wr.Wb

Samarinda, 15 Juni 2023

Hormat Saya,

Mahasiswa

Serly Dea Mandasari
NIM. 1911102413152

Lampiran 2. Surat Telah Melaksanakan Penelitian

PEMERINTAH KOTA SAMARINDA
DINAS KESEHATAN KOTA SAMARINDA
UPTD PUSKESMAS LEMPAKE
Jalan. DI. Panjaitan Kebun Agung Kelurahan Lempake Kecamatan
Samarinda Utara Telp. (0514) 280620

Nomor   : 800 / 177 /100.02.24.007
Lampiran   : -
Perihal   : Surat Keterangan Telah
              Selesai Penelitan

Kepada Yth,

Ketua Program Studi Kesehatan Masyarakat

Fakultas Kesehatan Masyarakat

Universitas Muhammadiyah Kalimantan Timur

di-

     Tempat

Dengan Hormat,

Sehubungan dengan adanya surat Pengantar dengan Nomor : 219/FIK.3/C.2/B/2023 Permohonan Rekomendasi Izin Penelitian dari Fakultas Kesehatan Masyarakat Universitas Muhammadiyah Kalimantan Timur Samarinda atas nama:

Nama   : Serly Dea Mandasari

NIM   : 1911102413152

Jurusan/Peminatan : S - 1 Kesehatan Masyarakat

Data Ajuan   : "Hubungan Tingkat Pendapatan Dengan Pemanfaatan Pengunaan
                      BPJS Kesehatan Di Puskesmas Lempake Kota Samarinda"

Dengan ini kami menyampaikan bahwa mahasiswa/i tersebut diatas telah menyelesaikan Penelitian/Pengambilan data di Puskesmas Lempake untuk keperluan menyelesaikan tugas Penelitian.

Demikian surat keterangan ini kami sampaikan. Atas perhatiannya dan kerja samanya kami ucapkan terima kasih.

Samarinda, 13 April 2023
Kepala UPTD Puskesmas Lempake

dr. Misbahuddin Hasan
NIP. 197104102010011012

Lampiran 3. Surat Persetujuan Penelitian

Kepada Yth. Responden

Di Tempat.

Dengan Hormat,

Saya Mahasiswa S1 Program Studi S1 Kesehatan Masyarakat Universitas Muhammadiyah Kalimantan Timur.

      Nama : Serly Dea Mandasari

      Nim   : 1911102413152

        Bermaksud akan melakukan penelitian mengenai "Hubungan Tingkat Pendapatan Dengan Pemanfaatan Penggunaan BPJS Kesehatan Di Puskesmas Lempake Kota Samarinda "segala informasi yang anda berikan akan dijamin kerahasiaannya dan saya bertanggung jawab apabila informasi yang diberikan akan merugikan Saudara/i. sehubung dengan hal tersebut, apabila Saudara/I setuju untuk ikut serta dalam penelitian ini mohon untuk menandatangani kolom yang telah disediakan.

        Atas kesediaannya saya mengucapkan terima kasih.

Samarinda, …, April, 2023

Responden

(……………….)

HUBUNGAN TINGKAT PENDAPATAN DENGAN PEMANFAATAN PENGGUNAAN BPJS KESEHATAN DI PUSKESMAS LEMPAKE KOTA SAMARINDA

Petunjuk Pengisian

1. Isilah Identitas Secara Lengkap Dan Benar.
2. Isilah Dengan Cara Memberikan Tanda Check (√) Pada Kolom Jawaban Yang Tersedia,
3. Dalam Memilih Jawaban, Anda Cukup Memilih Satu Jawaban Setiap Pertanyaan.
4. Waktu pengisian kuesioner diberikan estimasi waktu yaitu 7 menit

Identitas Responden

1. Insial Responden :
2. Jenis Kelamin : L / P
3. Nomor Telephone :
4. Pekerjaan :
   - Ibu Rumah Tangga
   - Karyawan Swasta
   - Wiraswasta
   - Buruh Harian
   - Pegawai Negri
   - Guru
   - Lainnya….
5. Pendidikan Terakhir :
   - Tidak Sekolah
   - Sekolah Dasar
   - SMP
   - SMA / SLTA
   - DIII/ DIV

- S1/S2/S3

6. Peserta BPJS Kesehatan:

☐ Iya ☐ Tidak

TINGKAT PENDAPATAN						
NO	**PERTANYAAN**	**KATEGORI**				
		SS	**S**	**N**	**TS**	**STS**
1	Pendapatan yang saya dapatkan sudah sesuai dengan jenis pekerjaan					
2	Saya mendapatkan pendapatan yang lebih tinggi dari pekerjaan sampingan					
3	Pendapatan yang diterima dari anggota keluarga yang bekerja					
4	Pendapatan yang saya dapatkan lebih dari Rp 3.201.396 per bulannya					
5	Pendapatan yang saya dapatkan sudah pasti					
6	Pendapatan sudah mencukupi untuk memenuhi kebutuhan					
7	Kesesuaian jenis pekerjaan yang dilakukan dengan pendapatan yang diterima					
8	Kesesuaian pendapatan yang diterima dengan keahlian pada bidang pekerjaan tertentu.					

NO	PERTANYAAN	KATEGORI	
		IYA	**TIDAK**
1	Apabila ada anggota keluarga saudara/i yang sakit, apakah menggunakan BPJS kesehatan		
2	Apakah menurut saudara/i dengan adanya BPJS kesehatan sangat membantu dalam menangani gangguan kesehatan		
3	Apakah menurut saudara/i prosedur pelayanan BPJS kesehatan di Puskesmas sudah tertib dan teratur		
4	Apakah saudara/I setiap membutuhkan pelayanan kesehatan berkunjung ke puskesmas		
5	Apakah saudara/I menggunakan BPJS Kesehatan saat berobat ke puskesmas		

PEMANFAATAN PENGGUNAAN BPJS KESEHATAN

Lampiran 5. Lembar Konsultasi

LEMBAR KONSULTASI BIMBINGAN SKRIPSI

Nama   : Serly Dea Mandasari

Judul Proposal : Hubungan Tingkat Pendapatan Dengan Pemanfaatan Penggunaan BPJS Kesehatan Di Puskesmas Lempake Kota Samarinda.

Nama Pembimbing : Drs. Suprayitno, M.Kes

	Tanggal	Konsultasi	Hasil Konsultasi	Paraf
1	14 November 2022	Menentukan Tema Dan Judul	ACC	
2	13 Desember 2022	Pergantian Judul Dan Tema	ACC	
3	29 Desember 2022	Konsultasi Bab 1 (Latar Belakang Dan Tujuan)	Revisi Dan Masukan Saran	
4	03 Januari 2023	Konsultasi Bab 1 (Kerangka Konsep Dan Hipotesis)	Revisi Dan Masukan Saran	
5	12 Januari 2023	Konsultasi Bab 2 (Populasi Dan Sampel)	Revisi Dan Masukan Saran	
6	18 Januari 2023	Konsultasi Bab 2 (Definisi Operasional Dan Kuesioner)	Revisi Dan Masukan Saran	
7	26 Januari 2023	Konsultasi Bab 2 (Instrumen Penelitian)	Revisi Dan Masukan Saran	
8	01 Februari 2023	Konsultasi Bab 2 Prosedur Penelitian	Revisi Dan Masukan Saran	
9	21 Februari 2023	Konsultasi Bab 1 & 2	ACC	

10	10 Mei 2023	Konsultasi hasil penelitian	ACC	
11	24 Mei 2023	Konsultasi Bab 3	Revisi dan masukan saran	
12	6 Juni 2023	Konsultasi Bab 4	Revisi dan masukan saran	
13	14 Juni 2023	Konsultasi Keseluruhan	ACC	

Lampiran 6. Lembar Jurnal

Research Article

Willingness to Pay Community Based Health Insurance and its Associated Factors in North Mecha District, Northwest Ethiopia

Getaneh Bizuayehu Demeke*

Department of Population Studies, College of Social Sciences and Humanities, University of Gondar, Ethiopia

Abstract

Background: The low-income countries and the government of low-income countries faced the challenge to reducing regressive burden of out of pocket expenditure by increasing pre-payment systems that spread financial risk and reduce catastrophic healthcare expenditure.

Methods: Community based cross-sectional study design was employed. The data were collected by trained data collectors and pre-tested structured questionnaire was used. Binary logistic regression model was used to identify the significant association between the dependent and independent variables at p-value <0.05 and AOR values with 95% CI.

Results: The study discovered that 285 households participated and filled the questionnaires with the response rate of 96.3%. Of those, 89.8% respondents were willing to pay and 86.1% them willing to join voluntary. Factors were associated with willingness to pay in CBHI : households join CBHI voluntary, (AOR=0.160; 95% CI, (0.062-0.412)), enrolling CBHI have advantage (AOR=0.89; 95% CI, (0.019-0.410)), distance home to HF took <60 minutes (AOR=7.504; 95% CI, (2.566-21.941)), CBHI offering premium affordable (AOR=0.251; 95% CI, (0.103-0.610)) and urban residence (AOR=0.299; 95% CI, (0.065-0.370)).

Conclusions: The study indicated that, high percentage of willing to pay. But health facilities provide low offerings in CBHI system and now not fulfill the desires of family treatment. For instance, the study revealed that, absence of available medicinal drug, lack of sufficient laboratory equipment, shortage of ambulance offerings, poor services delivery and health professionals behavior have been the principle challenges to use CBHI services in government health organization. Therefore, Mecha district community based health insurance coordinator office should be scale up health services in the scheme.

Keywords: CBHI; Willingness to pay; Households; Mecha; Northwest Ethiopia

Abbreviations

CBHI: Community Based Health Insurance; AOR: Adjusted Odds Ratio; CI: Confidence Interval; HH: House Hold; COR: Crude Odds Ratio; HF: Health Facility; WTP: Willingness To Pay; OOP: Out Of Pocket; SPSS: Statistical Package of Social Sciences

Introduction

Globally, greater than 800 million human beings spend at the least 10% of their family finances to pay for health services, and approximately a hundred million come to be indigent each and every year due to the fact of excessive OOP health payments [1]. Every year, over 150 million individuals in 44 million households face financial disaster as direct outcomes of having to pay for health care. This coverage brief outlines the occasions during which this happens, and what policymakers want to reflect on consideration on in searching for to protect populations [2].

Community Health Insurance (CBHI) is a non-profit health insurance plan used through the poor human beings protect themselves from the financial risks of disease. In CBHI schemes, members pay small premiums into a collective fund, which they later use to pay for health costs if they require services. Based on the standards of mutual aid and social solidarity, many CBHI schemes are designed for people that live and work in the rural and informal sectors who are unable to get enough public, private, or employer-sponsored health insurance [3].

The health structures of Ethiopia organized into 3 stage of delivery system: degree one is district health buildings made from a wide variety one clinic it covers from 60,000-100,000 population, health centers from 15,000-25,000 population and their satellite health posts from 3,000-5000 population linked each one of a kind by means of a referral system. Level is a general clinic covers 1 million to 1.5 million human beings and stage 3 is a specialised clinic covers from 3 million to 3.5 million human beings [4]. For instance, in Ethiopia, the 2011/12, whole and per capita OOP health spending have been about birr 10.4 billion (US$590 million) and birr 132 (US$7.493), respectively [5].

According to the World Bank, the out-of-pocket health expenditure in Ethiopia (i.e., the proportion of whole health expenditure that is paid privately by men and women and households) used to be measured at 79.87% in 2011 (http://data.worldbank.org). This figure is higher than the 62.2 % in Sub Saharan Africa for the duration of the same period (http://data.worldbank.org) [6].

Health-care financing in Ethiopia, low government spending, strong dependent on out-of-pocket expenditure, inefficient and inequitable utilization of resources, poorly harmonized and

INTERNATIONAL JOURNAL OF HEALTH SCIENCE

The Relationship between Family Socio-economic Status and Health Financing Practices at Abdul Manap Hospital, Jambi City

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[1,2,3]Public Health Study Program, Faculty of Medicine and Health Sciences, Jambi University.
E-mail of Corresponding Author: dwi_noerjoedianto@unja.ac.id

ABSTRACT

The provision of health services is one way to meet the needs and demands of the community for health, in the process including health financing. There are six financing patterns applied, one of which is out of pocket financing and Social Health Insurance Administration Body. The ability to buy health services depends on the readiness of the family to finance the household, so socioeconomic status influences the use of health financing patterns. This study uses quantitative methods with a cross-sectional research design. The population is the head of the family who seeks treatment at Abdul Manap Hospital, with as many as 89 respondents. Data collection using a questionnaire and data analysis using chi-square. Based on the analysis, the variables that have a relationship with the pattern of Social Health Insurance Administration Body financing are income (p-value 0.000), occupation (p-value 0.003), number of family members (0.028), and asset ownership (0.000). Meanwhile, the one that does not have a relationship is education (0.276). The conclusion of this study is that income, occupation, the number of family members, and asset ownership have a relationship with the use of financing patterns, while education has no effect.
Keywords: family socio-economic, health practices, hospitality management, health finance.

Introduction

Health is one of the fundamental needs of humanity. A healthy lifestyle is an objective need of life (health need) that enables each individual to enhance his health state. On the other hand, health contains needs (health demand) that are of a subjective character, such that whether or not the health demands of each individual, home, and community can be met from every endeavor to enhance the level of good health (Puluhulawa, 2013) cannot be determined with certainty. According to the 2020 Sustainable Development Goals (SDG) Report, one billion individuals would spend at least 10 percent of their household budget on health care (UN, 2020). According to the 22019 National Socio-Economic Survey), public private costs accounted for 62.67 % health costs (Statistics, 22019).

The provision of health services is one strategy to address the community's health requirements and desires. In Indonesia, a social Social Health Insurance Administration Body mechanism has been developed, specifically through the mandatory National Social Health Insurance Administration Body, with the intention of providing financial protection against health costs, particularly catastrophic costs, in the hope that personal health expenditures will be reduced (Djamhari, et al., 2020). It is indicated by statistics on changes in the funding of the National Social Health Insurance Administration Body program from 2014 to 2018, during which time the community's independent expenditures decreased by 10 % (Statistics, 22019).

Indicators in achieving health status are through the Human Development Index (IPM) (Statistics, 22019). HDI explains how the community can access the results of development to obtain income, education, health, and so on3. In 2020, the HDI of Jambi Province has reached 71.29 and Jambi City has reached 78.373. Noerjoedianto's 2016 study which looked at the influence of the socioeconomic status of the family on the selection of patterns and methods of health financing stated that household expenditures in Jambi Province in the form of the ability to purchase health services ranged from Rp. 25,235 to Rp. 110,044 (16). The premium for BPJS class 3 as of January 1, 2021, is IDR 35,000. While the category of small family amounted to 4 people. This proves that each family costs as much as IDR 140,000 per month to pay Health Insurance contributions. However, the highest range of ability to buy health services is only around Rp. 110,044. This shows that there is a limited ability of the community to buy health services (Ratriani, 2021).

In theory, the factors that influence socioeconomic status are education, income, occupation, number of family members, asset ownership, and type of residence (Supriyanto, Ernawati, & Budi, 2018). To improve the

Pemanfaatan Kartu Jaminan Kesehatan Nasional (JKN) Di Puskesmas

Cindy Putri Amadea, Bambang Budi Raharjo
Universitas Negeri Semarang, Indonesia

Article Info

Abstrak

Latar Belakang: Pada tahun 2020, jumlah kunjungan pasien BPJS Kesehatan di Puskesmas Perumnas Utara mengalami penurunan dari tahun sebelumnya yaitu 14.212 pasien (65,5%) dari 21.692 kunjungan. Masih terdapat pasien yang belum memanfaatkan pelayanan kesehatan menggunakan JKN. Penelitian ini bertujuan untuk menganalisis faktor yang mempengaruhi pemanfaatan JKN oleh masyarakat di Puskesmas Perumnas Utara Kota Cirebon.
Metode: Jenis penelitian yang dilakukan adalah penelitian analitik observasional dengan rancangan Cross Sectional. Populasi pada penelitian ini adalah peserta JKN di Puskesmas Perumnas Utara sebanyak 6618 orang dengan jumlah sampel sebesar 101 responden dengan teknik purposive sampling. Kuesioner sebagai instrument terstruktur dan dianalisis menggunakan uji Chi-Square dan uji regresi logistik berganda.
Hasil: Hasil analisis uji regresi berganda diperoleh bahwa terdapat pengaruh variabel tingkat pendidikan (p=0,016), tingkat pengetahuan (p=0,012) dan persepsi sakit individu (p=0,000) terhadap pemanfaatan JKN. Sementara tingkat pendidikan (Exp (B)=5,002) merupakan faktor yang paling berpengaruh terhadap pemanfaatan JKN di Puskesmas Perumnas Utara.
Kesimpulan: Pemanfaatan JKN di Puskesmas Perumnas Utara dipengaruhi oleh tingkat pendidikan.

Abstract

Background: In 2020, the number of BPJS Health patient visits at the North Perumnas Public Health Center decreased from the previous year, which was 14,212 patients (65.5%) from 21,692 visits. This study aims to analyze the factors that influence the use of JKN by the community at the North Perumnas Public Health Center.
Method: This type of research is an observational analytic study with a cross sectional design. The population in this study were JKN participants at the North Perumnas Public Health Center as many as 6618 people with a total sample of 101 respondents using purposive sampling technique. The questionnaire as a structured instrument and analyzed using Chi-Square test and multiple logistic regression test.
Result: The results of the multiple regression analysis showed that there was an influence of the variable level of education level (p=0.016), knowledge level (p=0.012), and individual perception of illness (p=0.000) on the use of JKN. Meanwhile the level of education (Exp (B)=5,002) was the most influential factor on the utilization of JKN at the North Perumnas Public Health Center.
Conclusion: The utilization of JKN in the North Perumnas Public Health Center is influenced by the level of education.

Correspondence Address:
Universitas Negeri Semarang, Indonesia.
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Jurnal Ilmiah Kesehatan

ARTIKEL PENELITIAN

Hubungan Antara Tingkat Pendapatan dengan Pemanfaatan Pelayanan Kesehatan oleh Pasien Jaminan Kesehatan Nasional

[1]Della Azzah Fadhilah, [2]Fitri Fajar Riyanti, [3]Nurul Aini Fauziah, [4]Amirudin, [5]Yusuf Suripto, [6]Like Wattimena

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Sekolah Tinggi Ilmu Kesehatan Indonesia Maju

ABSTRAK

Pemanfaatan pelayanan kesehatan di Puskesmas Kecamatan Sukmajaya mengalami kenaikan. Faktor tingkat pendapatan mempengaruhi pemanfaatan pelayanan kesehatan. Tujuan penelitian ini yaitu untuk mengetahui hubungan antara tingkat pendapatan dengan pemanfaatan pelayanan kesehatan oleh pasien BPJS di Wilayah Kerja UPT Puskesmas Kecamatan Sukmajaya. Penelitian ini merupakan penelitian survei analitik dengan rancangan cross sectional yang dilaksanakan pada bulan Juli 2019. Instrumen penelitian menggunakan kuesioner. Populasi dalam penelitian ini merupakan pasien BPJS kesehatan yang berobat dalam satu hari di Puskesmas Kecamatan Sukmajaya yaitu 50 pasien. Sampel dalam penelitian ini sebanyak sebanyak 30 responden dan diambil menggunakan teknik quota sampling. Uji chi square digunakan untuk menganalisis hubungan antar variabel dengan CI= 95% dan nilai α=0,05. Hasil dari penelitian ini adalah terdapat hubungan antara tingkat pendapatan (p= 0,000), dengan pemanfaatan pelayanan kesehatan oleh pasien BPJS di Wilayah Kerja UPT Puskesmas Kecamatan Sukmajaya. Kesimpulan dari penelitian ini, pendapatan merupakan salah satu faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan Di Wilayah Kerja UPT Puskesmas Kecamatan Sukmajaya.

Kata Kunci

Pendapatan, Pasien BPJS, Pemanfaatan Pelayanan Kesehatan

ABSTRACT

Utilization of health services in the District Health Center Sukmajaya has increased. The income level factor influences the utilization of health services. The purpose of this study was to determine the relationship between income levels and utilization of health services by BPJS patients in the Work Area of the UPT Puskesmas, Sukmajaya District. This research is an analytical survey research with a Cross Sectional Study design which was conducted in July 2019. The research instrument used a questionnaire. The population in this study were BPJS patients who were treated in one day at the Puskesmas Sukmajaya Subdistrict, which were 50 patients. The samples in this study were 30 respondents and were taken using quota sampling technique. Chi square test was used to analyze the relationship between variables with $CI = 95\%$ and $\alpha = 0.05$. The results of this study are there is a relationship between the level of income ($p = 0.000$), with the utilization of health services by BPJS patients in the Work Area of the UPT Puskesmas Sukmajaya District. The conclusion of this study, income is one of the factors related to the utilization of health services in the Work Area of the UPT Puskesmas Sukmajaya District.

Key Words

Income, BPJS Patients, Utilization of Health Services.

HUBUNGAN ANTARA PENDIDIKAN DAN PENDAPATAN DENGAN PEMANFAATAN PELAYANAN KESEHATAN OLEH PASIEN BPJS DI WILAYAH KERJA PUSKESMAS SARIO KOTA MANADO

Abdul Syarifain*, Adisti A. Rumayar*, Chreisye K.F Mandagi*

*Fakultas Kesehatan Masyarakat Universitas Sam Ratulangi

ABSTRAK

Pemanfaatan pelayanan kesehatan di Puskesmas Sario Kota Manado oleh pasien BPJS mengalami penurunan. Faktor-faktor yang mempengaruhi pemanfaatan pelayanan kesehatan antara lain pandidikan dan pendapatan pasien. Tujuan penelitian ini yaitu untuk mengetahui hubungan antara pendidikan dan pendapatan dengan pemanfaatan pelayanan kesehatan oleh pasien BPJS di Wilayah Kerja Puskesmas Sario. Penelitian ini merupakan penelitian survei analitik dengan rancangan Cross Sectional Study yang dilaksanakan pada bulan Oktober-Desember 2017. Populasi dalam penelitian ini adalah seluruh pasien peserta BPJS di Wilayah Kerja Puskesmas Sario Kota Manado. Sampel diambil secara Quota Sampling dengan jumlah sampel 74 responden. Pengumpulan data dalam penelitian ini menggunakan metode wawancara, dengan kuesioner sebagai instrumen pengumpulan data. Uji chi square digunakan untuk menganalisis hubungan antar variabel dengan CI= 95% dan nilai α=0,05. Hasil dari penelitian ini adalah terdapat hubungan antara tingkat pendidikan (p= 0,000), tingkat pendapatan (p= 0,000), dengan pemanfaatan pelayanan kesehatan oleh pasien BPJS Di Puskesmas Sario Kota Manado. Kesimpulan dari penilitian ini, Pendidikan dan pendapatan merupakan faktor-faktor yang berhubungan dengan pemanfaatan pelayanan kesehatan Di Wilayah Kerja Puskesmas Sario Kota Manado.

Kata Kunci: Pendidikan, Pendapatan, Pemanfaatan Pelayanan Kesehatan

ABSTRACT

Utilization of health services at Sario Primary Health Care Center by the patients member of BPJS has decreased. Factors affecting the utilization of health services include educational and patient earnings. The aim of this study was to determine the relationship between education and income with the utilization of health services by the patients member of BPJS at Sario Primary Health Care Center. This study is an analytical survey research with Cross Sectional Study concept which conducted from October to December 2017. All of the patients from BPJS participant at Sario Primary Health Care Center working area were taken as the population, and 74 respondents were selected as sample by Quota Sampling technique. Data collection in this study used interview method, with questionnaire as an instrument of data collection. Chi square test was done to analyze the relationship between variables with CI = 95% and α = 0.05. The result of this study found relationship between education (p = 0.000); income (p = 0.000), with health service utilization by patients from BPJS participant at Sario Primary Health Care Center Manado City. From this finding it can be conclude that education and income are factors related to the utilization of health services by the patients member of BPJS at Sario Primary Health Care Center working area. Suggestions for health service provider to provide socialization for community regarding the process of health services utilization, especially by BPJS patients.

Keywords: Education, Income, Health Services Utilization

Lampiran 7. Dokumentasi Penelitian

Lampiran 8. Hasil Perhitungan SPSS

Frequencies

Statistics

		Jenis Kelamin	Pekerjaan	Pendidikan Terakhir	Tingkat Pendapatan	Pemanfaatan Penggunaan BPJS Kesehatan
N	Valid	96	96	96	96	96
	Missing	0	0	0	0	0

Frequency Table

Jenis Kelamin

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Perempuan	67	69.8	69.8	69.8
	Laki Laki	29	30.2	30.2	100.0
	Total	96	100.0	100.0	

Pekerjaan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ibu Rumah Tangga	39	40.6	40.6	40.6
	Karyawan Swasta	27	28.1	28.1	68.8
	Wiraswasta	7	7.3	7.3	76.0
	Buruh Harian	4	4.2	4.2	80.2
	Pegawai Negeri	6	6.3	6.3	86.5
	Guru	4	4.2	4.2	90.6
	Lainnya	9	9.4	9.4	100.0
	Total	96	100.0	100.0	

Pendidikan Terakhir

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak Sekolah	2	2.1	2.1	2.1
	Sekolah Dasar	10	10.4	10.4	12.5
	SMP	14	14.6	14.6	27.1
	sma/slta	48	50.0	50.0	77.1
	DIII/DIV	3	3.1	3.1	80.2
	S1/S2/S3	19	19.8	19.8	100.0
	Total	96	100.0	100.0	

Tingkat Pendapatan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Rendah	39	40.6	40.6	40.6
	Sedang	21	21.9	21.9	62.5
	Tinggi	36	37.5	37.5	100.0
	Total	96	100.0	100.0	

Pemanfaatan Penggunaan BPJS Kesehatan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak Memanfaatkan	23	24.0	24.0	24.0
	Memanfaatkan	73	76.0	76.0	100.0
	Total	96	100.0	100.0	

Crosstabs

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Tingkat Pendapatan * Pemanfaatan Penggunaan BPJS Kesehatan	96	100.0%	0	0.0%	96	100.0%

Tingkat Pendapatan * Pemanfaatan Penggunaan BPJS Kesehatan

			Pemanfaatan Penggunaan BPJS Kesehatan		Total
			Tidak Memanfaatkan	Memanfaatkan	
Tingkat Pendapatan	Rendah	Count	10	29	39
		Expected Count	9.3	29.7	39.0
		% within Tingkat Pendapatan	25.6%	74.4%	100.0%
		% within Pemanfaatan Penggunaan BPJS Kesehatan	43.5%	39.7%	40.6%
		% of Total	10.4%	30.2%	40.6%
	Sedang	Count	10	11	21
		Expected Count	5.0	16.0	21.0

				47.6%	52.4%	100.0%
		% within Tingkat Pendapatan		47.6%	52.4%	100.0%
		% within Pemanfaatan Penggunaan BPJS Kesehatan		43.5%	15.1%	21.9%
		% of Total		10.4%	11.5%	21.9%
	Tinggi	Count		3	33	36
		Expected Count		8.6	27.4	36.0
		% within Tingkat Pendapatan		8.3%	91.7%	100.0%
		% within Pemanfaatan Penggunaan BPJS Kesehatan		13.0%	45.2%	37.5%
		% of Total		3.1%	34.4%	37.5%
Total		Count		23	73	96
		Expected Count		23.0	73.0	96.0
		% within Tingkat Pendapatan		24.0%	76.0%	100.0%
		% within Pemanfaatan Penggunaan BPJS Kesehatan		100.0%	100.0%	100.0%
		% of Total		24.0%	76.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	11.338a	2	.003
Likelihood Ratio	11.595	2	.003
Linear-by-Linear Association	2.861	1	.091
N of Valid Cases	96		

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 5.03.

		Tingkat Pendapatan		
		Rendah Count	Sedang Count	Tinggi Count
Jenis Kelamin	Perempuan	23	18	26
	Laki Laki	16	3	10

		Tingkat Pendapatan		
		Rendah Count	Sedang Count	Tinggi Count
Pekerjaan	Ibu Rumah Tangga	14	10	15
	Karyawan Swasta	15	3	9
	Wiraswasta	3	1	3
	Buruh Harian	2	2	0
	Pegawai Negeri	2	0	4
	Guru	1	1	2
	Lainnya	2	4	3

		Tingkat Pendapatan		
		Rendah Count	Sedang Count	Tinggi Count
Pendidikan Terakhir	Tidak Sekolah	2	0	0
	Sekolah Dasar	3	2	5
	SMP	5	4	5
	sma/slta	21	9	18
	DIII/DIV	2	1	0

		Pemanfaatan Penggunaan BPJS Kesehatan	
		Tidak Memanfaatkan Count	Memanfaatkan Count
Jenis Kelamin	Perempuan	16	51
	Laki Laki	7	22

		Pemanfaatan Penggunaan BPJS Kesehatan	
		Tidak Memanfaatkan Count	Memanfaatkan Count
Pekerjaan	Ibu Rumah Tangga	11	28
	Karyawan Swasta	5	22
	Wiraswasta	1	6
	Buruh Harian	2	2
	Pegawai Negeri	0	6
	Guru	1	3
	Lainnya	3	6

Pemanfaatan Penggunaan BPJS Kesehatan

		Tidak Memanfaatkan Count	Memanfaatkan Count
Pendidikan Terakhir	Tidak Sekolah	1	1
	Sekolah Dasar	3	7
	SMP	4	10
	sma/slta	13	35
	DIII/DIV	0	3
	S1/S2/S3	2	17

Lampiran 9. Hasil Uji Turnitin

Hubungan Tingkat Pendapatan Dengan Pemanfaatan Penggunaan Bpjs Kesehatan Di Puskesmas Lempake Kota Samarinda.

by Serly Dea Mandasari

Hubungan Tingkat Pendapatan Dengan Pemanfaatan Penggunaan Bpjs Kesehatan Di Puskesmas Lempake Kota Samarinda.