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Factors Associated with JKN Premium Payment Compliance Among PBPU Participants in Jambi City

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Abstract
Introduction: *Compliance with National Health Insurance premium payments is essential for ensuring the sustainability of Indonesia's health insurance system. However, many independent participants fail to pay premiums on time.* ***Objective:*** *This study aimed to identify factors associated with premium payment compliance among Non-Wage Recipient Participants in Jambi City.* ***Method:*** *A quantitative cross-sectional study was conducted among 106 participants selected through random sampling. Data were collected using a structured questionnaire and analyzed using descriptive statistics and the Chi-square test with a significance level of 0.05.* ***Results and Discussion:*** *Employment, knowledge, income, payment method, history of catastrophic disease, perceptions of healthcare services, and family support were significantly associated with premium payment compliance. Participants with stable employment, better knowledge, higher income, convenient payment methods, positive healthcare service perceptions, a history of catastrophic disease, and stronger family support were more likely to comply with premium payments. These findings indicate that compliance is influenced by multiple socioeconomic, behavioral, and healthcare-related factors.* ***Conclusion:*** *Strengthening health education, improving healthcare service quality, expanding accessible payment channels, and increasing family support may enhance premium payment compliance and contribute to the sustainability of the National Health Insurance program.*

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Introduction

The Preamble to the 1945 Constitution of the Republic of Indonesia mandates that one of the primary objectives of the State is to improve the welfare of its people. This objective was further reinforced through the Fourth Amendment to the 1945 Constitution, which emphasizes the development of a social security system to ensure the welfare of all Indonesian citizens Law No. 40 of 2004 concerning the National Social Security System (Sistem Jaminan Sosial Nasional/SJSN) mandates that all Indonesian citizens are entitled to social security, including Health Insurance, Work Accident Insurance, Pension Insurance, Death Benefits, and Old-Age Security. These National Social Security programs are administered by several Social Security Administering Agencies ("Undang-Undang Republik Indonesia Nomor 40 Tahun 2004," 2004).

Health Insurance is administered by the Health Social Security Administering Agency (BPJS Kesehatan), a public legal entity. The National Health Insurance (JKN) program provides health protection to ensure that participants receive healthcare services and protection in meeting their basic health needs (Alayda, Aulia, Ritonga, & Purba, 2024); (Wardani, Qamar, & Rustan, 2024). These benefits are provided to individuals who have registered as participants and regularly pay their insurance premiums (Perpres RI No 82 Tahun 2018 Tentang Jaminan Kesehatan, 2018).

The National Health Insurance (JKN) program, administered by BPJS Kesehatan, was officially launched on January 1, 2014. It is expected that all Indonesian citizens will participate in the program so that everyone can benefit from comprehensive health protection. The government remains committed to expanding health insurance coverage throughout Indonesia, considering that health insurance has not yet reached the entire population (Elungan & Tjenreng, 2025). According to the report of the Social Security Administering Agency (BPJS), as of May 31, 2022, the total number of participants enrolled in the National Health Insurance (JKN) program had reached 240,315,474 people nationwide. Independent participants ranked as the third-largest membership category, totaling 30.4 million participants, after Contribution Assistance Recipients (PBI) funded by the State Budget (APBN) and Regional Budget (APBD), which totaled 144.6 million participants, and Wage Recipient Workers (PPU), totaling 41.7 million participants (Badan Penyelenggara Jaminan Sosial Kesehatan, 2022).

Table 1
Number of PBPU Participants as of May 31, 2022

Regency	Number of Participants
Batanghari	30.020
Muaro Jambi	77.294
Tanjung Jabung Barat	46.402
Tanjung Jabung Timur	31.322
Kota Jambi	179.219
Bungo	64.466
Tebo	51.262
Merangin	77.960
Sarolangun	49.050
Kerinci	31.790
Sungai Penuh	7.900
Total	**646.685**

Source: BI Data, Mei 31, 2022

One category of participants who do not receive contribution assistance consists of self-employed workers, also known as Non-Wage Recipient Participants, who earn income from their own businesses and are therefore responsible for paying their National Health Insurance premiums on a monthly basis. According to data obtained from the Business Intelligence application of the Health Social Security Administering Agency, there were 646,685 Non-Wage Recipient Participants in Jambi Province, with the largest number registered in Jambi City, totaling 179,219 participants.

Based on Presidential Regulation of the Republic of Indonesia No. 64 of 2020, health insurance premiums are defined as regular payments made by participants, employers, and/or the government to finance the National Health Insurance program. For independent participants, the monthly premium is determined according to the selected service class: IDR 150,000 per person for Class I, IDR 100,000 for Class II, and IDR 42,000 for Class III(Presiden Republik Indonesia, 2020).

Table 2

Number of PBPU Participants in Jambi City by District as of May 31, 2022

District	Number of Participants (Household Heads)
Alam Barajo	5523
Danau Sipin	1705
Danau Teluk	244
Jambi Selatan	3100
Jambi Timur	3152
Jelutung	3211
Kota Baru	4362
Paal Merah	6169
Pasar Jambi	643
Pelayangan	255
Telanai Pura	1842
Total	**30206**

Source: BI Data, Mei 31, 2022

The increasing number of independent JKN participants has not been accompanied by improved compliance in paying JKN premiums. According to data from the BPJS Kesehatan Business Intelligence (BI) application, as of December 2020, there were 1,287 participants in Jambi City who were in arrears, with total outstanding premiums amounting to IDR 1,637,645,000. Meanwhile, the premium collection target for 2020 was set at 61% of the total annual premium target of IDR 148,780,382,300, equivalent to IDR 90,756,033,203. Based on an interview conducted with the Head of Billing and Finance at the BPJS Kesehatan Jambi Branch Office on June 1, 2022, Jambi City recorded the highest amount of outstanding premium payments compared to other regencies and cities in Jambi Province

Premium payment compliance is influenced by three categories of factors: predisposing factors (occupation, knowledge, income, and expenditure), enabling factors (payment location, distance to payment facilities, travel time to payment locations, and catastrophic illness), and reinforcing factors (perception of healthcare facilities and motivation) (Hasan & Batara, 2020); (Latifah, Nabila, & Fajrini, 2020). This finding is supported by the study conducted by Efriyana et all, 2017, which found that more than half of the 105 respondents (59%) were non-compliant in paying National Health Insurance premiums. Similarly, (Mardika, 2018). reported that among Non-Wage Recipient Workers, 50 participants (52.6%) were compliant while 45 participants (47.4%)

were non-compliant in paying JKN premiums. Another study conducted by (A Latifah, Nabila, & Fajrini, 2020) examined factors associated with premium payment compliance and found that knowledge was the only factor significantly associated with compliance in paying JKN premiums.

However, existing studies on JKN premium payment compliance among Non-Wage Recipient Participants have largely been conducted in contexts outside Jambi Province, and their findings are inconsistent across different populations and settings. A study by Adani (2019) demonstrated a significant relationship between knowledge and compliance in Depok City, consistent with Widyanti (2018), who reported a similar association among inpatients at Labuang Baji Regional Hospital. Yet, Mokolomban et al. (2018) found a counterintuitive pattern in which participants with lower educational attainment were more compliant than those with higher educational levels, a finding supported by Dhilla (2016) in Padang City. This may reflect the perception among lower-educated respondents that health is a fundamental necessity, whereas higher-educated participants tended to express dissatisfaction with service quality, reducing their compliance motivation. Income has also been identified as a significant determinant by Ramadani et al. (2021), who found that higher income contributes to greater awareness of the importance of health insurance. These inconsistencies across studies indicate that the relative contribution of predisposing, enabling, and reinforcing factors to premium payment compliance is context-dependent and cannot be generalized without local evidence (Ramadani, Haeruddin, & Batara, 2021)

To date, no study has specifically examined the determinants of JKN premium payment compliance among Non-Wage Recipient Participants (PBPU) in Jambi City, despite this group constituting the largest source of premium arrears in Jambi Province. Understanding which factors most strongly influence compliance in this specific population and setting is therefore essential for designing targeted interventions to improve premium collection, sustain the financial viability of the JKN program, and ultimately protect the continuity of health coverage for self-employed workers in Jambi City. Based on the above background, it is necessary to conduct research on the factors influencing premium payment compliance among National Health Insurance (JKN) participants in the Non-Wage Recipient Participant (PBPU) category in Jambi City.

Method

This quantitative study employed a cross-sectional design to identify factors associated with compliance in paying National Health Insurance (JKN) premiums among Non-Wage Recipient Participants (PBPU) in Paal Merah District, Jambi City, Indonesia. The study was conducted between July and August 2022. The study population consisted of 29,585 household heads registered as PBPU participants. The minimum sample size was calculated using the Lemeshow formula, resulting in 96 respondents. To account for potential non-response, an additional 10% was added, yielding a final sample of 106 respondents. Participants were selected using a random sampling technique and were eligible if they were registered PBPU participants in Jambi City, had premium arrears for more than six months, and provided informed consent. Data were collected through face-to-face interviews using a structured questionnaire. The dependent variable was compliance with JKN premium payment, while the independent variables included employment status, knowledge, income, payment channel, history of catastrophic disease, perception of healthcare services, and family support. Prior to data collection, the questionnaire was tested for validity and reliability. Data were processed through editing, coding, entry, and cleaning procedures before analysis. Univariate analysis was performed to describe respondents' characteristics and study variables, while bivariate analysis using the Chi-square test was conducted to examine associations between independent variables and premium payment compliance, with a significance level of $p < 0.05$. Ethical principles were observed by obtaining informed consent from all participants and maintaining the confidentiality of respondents' information.

Result and Discussion

Association Between Employment and Compliance with National Health Insurance (JKN) Premium Payment Among Independent Participants in Jambi City

Employment is an important socioeconomic factor influencing compliance with National Health Insurance (JKN) premium payments among Non-Wage Recipient Participants (PBPU). Participants with stable employment generally have more regular income, enabling them to meet their financial obligations, including monthly JKN premiums. In contrast, unemployed or informally employed participants often experience financial instability, which may reduce their ability to pay premiums consistently. The findings of this study indicate that employment is associated with JKN premium payment compliance. This result is consistent with studies by (Safitri, Sunindya, & Setiawan, 2025) which found that participants with higher or more stable income were significantly more likely to comply with premium payments than those with lower income or unstable employment ($p < 0.05$). Likewise, Sabrina Luthfi Tsuroyya reported that employed participants were more compliant because regular income enabled them to allocate funds for health insurance while providing financial protection against unexpected healthcare costs (Tsuroyya & Maharani, 2023).

However, these findings differ from those reported by (Yani, Noerjoedianto, Amir, Solida, & Mekarisce, 2023) who found no significant relationship between employment and premium payment compliance ($p = 0.190$). Similarly, another study conducted in Makassar reported that employment was not associated with compliance; instead, income, motivation, and perceptions of healthcare services were the main determinants of regular premium payment (Haq, Fachrin, & Alwi, 2022). Overall, employment contributes to JKN premium payment compliance primarily through its influence on financial stability rather than as an independent determinant. Therefore, improving compliance among PBPU participants requires not only employment opportunities but also interventions addressing participants' economic capacity and other behavioral factors.

Association Between Knowledge and Compliance with National Health Insurance (JKN) Premium Payment

Knowledge plays a crucial role in shaping participants' understanding of the benefits, rights, obligations, and procedures of the National Health Insurance (JKN) program. Participants with adequate knowledge are more likely to recognize the importance of paying premiums regularly to maintain active membership and continuous access to healthcare services. Conversely, limited knowledge may reduce awareness of the consequences of delayed or unpaid premiums, resulting in lower payment compliance.

The findings of this study demonstrate a significant association between knowledge and JKN premium payment compliance. This result is consistent with the study by (Pangestu, Harahap, & Tamba, 2026) which found that knowledge was the only factor significantly associated with JKN premium payment compliance among the variables examined. Similarly, (Murniasih, Suparman, Mamlukah, & Febriani, 2022) reported a significant relationship between knowledge and compliance among independent JKN participants in Depok City. Participants with better knowledge of the JKN program were more likely to fulfill their payment obligations because they understood the importance of maintaining continuous health insurance coverage. Comparable findings were also reported by (Ramadani et al., 2021) who found that participants with good knowledge were significantly more compliant in paying BPJS Health premiums than those with limited knowledge. Adequate knowledge enhances participants' awareness of the benefits of health insurance and encourages responsible payment behavior, whereas poor understanding may lead participants to underestimate the importance of regular premium payments.

Overall, these findings suggest that improving participants' knowledge through continuous education and effective dissemination of information may increase compliance with JKN premium payments. Therefore, strengthening public awareness should become an essential strategy for improving the sustainability of the National Health Insurance program

Association Between Income and Compliance with National Health Insurance (JKN) Premium Payment

Income is a key determinant of an individual's ability to meet financial obligations, including the payment of National Health Insurance (JKN) premiums. Participants with higher and more stable income generally have greater financial capacity to pay premiums regularly, whereas those with limited income often prioritize essential household needs over health insurance contributions. The present study found a significant association between income and JKN premium payment compliance. This finding is supported by (Ramadani et al., 2021), who reported that income was significantly associated with compliance among independent BPJS Health participants in Bontomatene District. Individuals with higher income demonstrated greater awareness of the importance of health insurance and were more likely to pay premiums consistently (Keacya, Tucunan, & Mandagi, 2023). Similarly, (Safitri et al., 2025) found that participants with higher income had significantly better compliance than those with lower income, indicating that economic capacity plays a major role in maintaining active JKN membership.

Income affects not only the ability to pay premiums but also participants' financial priorities. Individuals with unstable or insufficient income may delay premium payments due to competing household expenses, whereas those with adequate income are better able to allocate funds for health insurance. Therefore, financial capacity remains an important factor influencing compliance with JKN premium payments

Association Between Payment Method and Compliance with National Health Insurance (JKN) Premium Payment

The availability and accessibility of payment channels may influence participants' compliance with JKN premium payments. Convenient payment methods, such as mobile banking, automatic debit, or digital payment platforms, can facilitate timely payments and reduce the likelihood of arrears. In contrast, limited access to payment facilities may discourage participants from paying premiums regularly. The findings of this study indicate a significant association between payment method and JKN premium payment compliance (M. F. Wulandari, Nurmawaty, Nabila, & Shorayasari, 2025). Participants who used more accessible and convenient payment channels were more likely to pay their premiums on time. This finding is consistent with previous studies showing that easy access to payment services contributes to higher compliance by reducing barriers to premium payment (Pangestu et al., 2026). Accessible payment systems also improve participants' satisfaction and encourage continuous enrollment in the JKN program.

These findings suggest that expanding digital and user-friendly payment channels may improve premium payment compliance among PBPU participants. Therefore, BPJS Kesehatan should continue strengthening collaboration with banking institutions and digital payment providers to ensure that participants can easily fulfill their payment obligations.

Association Between History of Catastrophic Disease and Compliance with National Health Insurance (JKN) Premium Payment

A history of catastrophic disease may influence participants' compliance with JKN premium payments because individuals with chronic or high-cost illnesses generally have greater healthcare needs. Participants who require continuous medical treatment are more likely to maintain active JKN membership by paying premiums regularly to avoid interruptions in healthcare services. The present study found a significant association between a history of catastrophic disease and JKN premium payment compliance (A. Wulandari, Syah, & Ernawati, 2020). This finding is consistent with previous studies reporting that participants with chronic or catastrophic illnesses tend to demonstrate higher compliance because they are more aware of the financial protection provided by JKN and the high costs of long-term medical treatment (M. F. Wulandari et al., 2025), Regular premium payment enables these participants to access healthcare services without bearing substantial out-of-pocket expenses.

In contrast, participants without a history of catastrophic disease may perceive less immediate benefit from maintaining active membership, leading to lower payment compliance. These findings suggest that personal health experiences influence participants' perceptions of the value of health insurance and their willingness to pay premiums regularly. Therefore, increasing public awareness of the preventive and financial benefits of JKN remains essential, regardless of an individual's current health status.

Association Between Perception of Healthcare Services and Compliance with National Health Insurance (JKN) Premium Payment

Participants' perceptions of healthcare services influence their willingness to maintain active JKN membership. Positive experiences regarding service quality, service timeliness, and the clarity of information provided by healthcare professionals can increase participants' trust in the JKN program and encourage regular premium payments. Conversely, dissatisfaction with healthcare services may reduce participants' motivation to remain compliant. The findings of this study indicate a significant association between perceptions of healthcare services and JKN premium payment compliance. This result is in line with previous studies reporting that participants who perceived healthcare services as satisfactory were more likely to pay premiums regularly because they recognized the benefits of maintaining active insurance coverage (M. F. Wulandari et al., 2025). Good service experiences strengthen participants' confidence in the healthcare system, whereas negative experiences may discourage them from continuing premium payments (Utami, Karyus, & Pramudho, 2024). These findings highlight the importance of improving healthcare service quality alongside efforts to increase payment compliance. Enhancing service efficiency, responsiveness, and communication between healthcare providers and participants may improve public trust and encourage sustained participation in the National Health Insurance program.

Association Between Family Support and Compliance with National Health Insurance (JKN) Premium Payment

Family support is an important reinforcing factor that influences individuals' health-related behaviors, including compliance with JKN premium payments. Emotional, informational, and financial support from family members can encourage participants to prioritize premium payments and maintain active health insurance coverage. In contrast, limited family support may reduce motivation to fulfill payment obligations. The present study found a significant association between family support and JKN premium payment compliance. This finding is consistent with previous studies demonstrating that participants who received strong family support were more likely to pay their premiums regularly than those with limited support (M. F. Wulandari et al., 2025). Family members play an essential role in reminding participants about payment schedules, providing financial assistance when needed, and emphasizing the importance of maintaining continuous health insurance coverage (Risdayanti & Batara, 2021).

These findings suggest that strategies to improve JKN premium payment compliance should not only target individual participants but also involve family members. Strengthening family awareness of the benefits of the JKN program may enhance participants' commitment to paying premiums regularly and contribute to the long-term sustainability of the National Health Insurance system

Conclusion

This study found that employment, knowledge, income, payment method, history of catastrophic disease, perceptions of healthcare services, and family support were significantly associated with compliance with National Health Insurance (JKN) premium payments among Non-Wage Recipient Participants (PBPU) in the Jambi Branch Office area. These findings indicate that compliance with JKN premium payments is influenced by a combination of socioeconomic, individual, healthcare service, and family-related factors. Therefore, comprehensive interventions focusing on improving public knowledge, strengthening economic capacity, expanding accessible payment channels, enhancing healthcare service quality, and increasing family involvement are needed to improve premium payment compliance and support the sustainability of the National Health Insurance program.

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