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THE EFFECT OF HEALTH INSURANCE ON INTERNAL SERVICES MEDIATED BY JOB SATISFACTION AND MANAGEMENT TRUST IN HEALTH WORKERS AT PUSKESMAS IN SINTANG DISTRICT OF WEST KALIMANTAN

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ABSTRACT

This study aims to: 1. Know and analyze the effect of the National Health Insurance System (JK) on job satisfaction (KK) and Trust in Management (KM) and internal service quality (LI), 2. Know and analyze the effect of job satisfaction (KK) on Trust in Management (KM) and internal service quality (LI), 3. Know and analyze the effect of Trust in Management (KM) on internal service quality (LI). The population and sample in this study were 364 respondents who were nurses and midwives at 20 health centres in Sintang Regency, West Kalimantan. The research data were analyzed using WarpPLS. The results of this study are: 1. The National Health Insurance System (JK) has a positive and significant effect on job satisfaction, Trust in Management (KM) and internal service quality (LI), 2. Job satisfaction (KK) has a positive effect on Trust in Management ((KM) & has a negative effect on internal service quality (LI), 3. Job Satisfaction (KK) is able to significantly mediate between the National Health Insurance System (JK) and Trust in Management (KM), 4. Trust in Management (KM) is able to significantly mediate between the National Health Insurance System (JK) and Internal Services (LI), 4. Job Satisfaction (KK) is able to significantly mediate between the National Health Insurance System (JK) and Internal Services (LI).

KEY WORDS

National health insurance system, job satisfaction, management, internal service quality.

The Community Health Centre (Puskesmas) is the main and important health service centre for the community. Puskesmas functions to improve health status and is responsible for improving public health in its working area; the Puskesmas work area includes one sub-district or part of the sub-district area. Puskesmas also seeks to involve and cooperate with cross-sectors, including the community and the business world in its working area, in order to pay attention to health aspects, namely development that affects health (Permen kes No 43 of 2019).

According to the study Strengthening Basic Services at Puskesmas by Bappenas (2018), the quality of health services at puskesmas is not optimal. One of the reasons for this is that health care employees at puskesmas have a poor level of job satisfaction due, in part, to the insufficiency of the type and amount of human resources available at puskesmas in accordance to their primary responsibilities and tasks. The degree of job satisfaction of puskesmas personnel in Indonesia was still dominated by moderate and poor job satisfaction, as indicated by study conducted in 2017 on health worker satisfaction. According to the findings of the study, the work happiness of health center personnel is not yet at its optimum level since moderate job satisfaction accounts for 52% of respondents, followed by low job satisfaction accounting for 24.7% and high job satisfaction accounting for 23.2%. Strong ties exist between job satisfaction, management trust, and the quality of internal services provided to employees.

Puskesmas also organizes a community health service through the National Health Insurance program. Through this program, Puskesmas helps people who are enrolled in the national health insurance program, also known as BPJS members. Participants in the National Health Insurance system who are in need of medical treatment can go to a Puskesmas to receive primary medical care. Puskesmas in Sintang District have worked together with the BPJS (Social Security Administration) to implement the National Health

Insurance system in Sintang District. In terms of the implementation of the National Health Insurance system, Puskesmas are able to claim services for inpatient care and receive Capitation for outpatient services after providing care to patients. In addition, Puskesmas are able to receive Capitation for inpatient services after providing care to patients. Indicators, contact information, non-specialist outpatient referrals, and the deployment of Prolanis are all examples of service pledges that can be used as compensation for capitation fees. (bpjs-kemenkes 2017).

The phenomenon that occurs in the Puskesmas district of Sintang is the impetus for this study, which seeks to determine if the national health insurance system influences internal services by means of work satisfaction and management trust. This study was motivated by the phenomenon that occurs in the Puskesmas district of Sintang. The research context has been described, and the purpose of this study is to determine whether the existence of the Health Insurance System has an effect on Job Satisfaction and public Trust in Puskesmas management in regard to internal health services provided by health workers at the Puskesmas of Sintang Regency, West Kalimantan Province. The question that will be investigated is whether or not the existence of the Health Insurance System has an effect on Job Satisfaction and public Trust in Puskesmas management.

LITERATURE REVIEW

According to Stauss (1995), the quality of the service provided by an organizational unit to other workers inside the same firm or department is referred to as "internal service quality." Internal customers are people who work for an organization in one of its units. Prakash et al. (2019) contend that the fact that internal customers are employees enables Internal Service Quality to potentially play a key role in creating care and enjoyment for internal customers.

According to Skarpeta et al. (2020), the primary purpose of the research being conducted on the subject of internal service quality in public organizations is to ascertain the primary criteria that define the concept of internal service quality. This research was conducted with the intention of determining the fundamental aspects that constitute the principle of high quality internal service. The term "internal service quality" refers to the level of service that is provided across different departments or among different individuals inside an organization. When designing the framework of internal service quality factors, it is helpful to include interdepartmental quality aspects as well as human qualities. Doing so may contribute to the sustainability of the public sector as well as the structure of internal service quality elements. The following are some instances of internal elements that affect the quality of the service: According to (1995), the interactions that take place between departments are what determine the quality of the internal services provided by a business. This suggests that interactions between different units or departments can be beneficial to one another, and that workers can acquire services from other units or departments. However, these employees still provide services to the clients of the company; as a result, the quality of service provided to the company's internal customers has a significant impact on the services delivered by employees to the company.

Prakash *et al.* (2019) claimed that a diverse environment, effective organizational coordination, and management improve internal customer satisfaction. According to the findings of Pantouvakis et al. (2013), the physical aspects of an organization's internal service quality have little effect on clinical leaders' opinions of the quality of hospital care services. The suggested model provides support for the favorable benefits that organizational dimensions such as empowerment, continuous learning, and internal service quality attributes might have on clinical leaders' levels of work satisfaction. When developing and adopting practices and policies to enhance hospital care services, as well as strengthening internal service quality in the implementation of organizational procedures, it is essential for health policymakers and hospital managers to take this into consideration. This is because job satisfaction is a key factor in the decisions that need to be made.

Kreitner & Kinicki (2001: 271) Describe your level of job satisfaction as an effective or emotional response to numerous facets of your career. Work satisfaction may be defined as a collection of employee feelings regarding whether or not their employment is joyful, according to Davis and Newstrom (1985: 105). According to the findings of Hao et al. (2016), an employee's level of job satisfaction is also influenced by the quality of the management of the organization, as well as by whether or not the organization treats its employees fairly, respects employee rights and even helps employees obtain their rights in a non-discriminatory manner, ensures that employees work well and have a comfortable working environment, and works to ensure that employees' levels of performance are at their highest possible level. The issue of work satisfaction in health also studies the degree to which nurses are satisfied with their jobs. According to Hsu et al. (2015), the level of job satisfaction that nurses experience may be investigated from the viewpoints of psychology, sociology, and organizational behavior.

According to Luthan et al. (2008), job satisfaction is an emotional state that employees are in when there is or is not a meeting point between the boundaries of employee services and the degree of value of incentives, which can be both financial and non-financial in nature. This indicates that workers are pleased not just with their pay but also with their working conditions, communication, amenities, and other aspects of their jobs. According to research conducted by et al. (2018), a potent motivator is the degree to which organizational citizens, such as workers, report feeling satisfied in their job. Employers that prioritize their workers help experienced employees to comprehend the meaning and purpose of functioning efficiently at work and to perform well inside the firm. This enables workers to carry out the vision and objective of the business and recognize the contributions, activities, and efforts of employees. Spirituality also has a significant impact on job happiness; individuals who have a positive spiritual experience at work will not only be satisfied with the organization's monetary benefits, but also with their own inner peace.

Mayer *et al.* (1995) state that trust is the willingness to believe in the behaviors of the other party in the belief that the other party would conduct in line with the person who has placed his faith in him, regardless of the other party's ability to be monitored or controlled. Trust has been extensively examined as a relatively flexible trait; Burke et al. (2007) and Wang (2009) say that interpersonal trust is the form of trust that develops between connected individuals. Agrawal (2017) states that Trust at all levels must be increased since Trust has many positive implications on the firm, its environment, and its culture, and because failing to respect the cultural environment of the business might undermine the Management's Trust. According to Tseng et al. (2017), constant maintenance of trust is required since trust has logical repercussions. In addition, the data indicate that new employees' Trust in the organization is impacted by managerial responsibility. Trust is increased through establishing management responsibility.

According to Law No. 40/2004 on the National Social Security System (SJSN), a social security organizational body is required to implement a mandatory social security program for the whole population, including the Health Insurance program. The Social Security Organising Body Law No. 24/2011 regulates the social security organizing body (BPJS).

The goal of implementing the National Health Insurance Program (JKN) is to provide health protection in the form of health care benefits in order to meet everyone's basic health needs who has paid contributions or whose contributions are paid by the government, and the Target Implementation of the National Health Insurance. This is stated in Minister of Health Regulation No. 28 of 2014 concerning guidelines for the implementation of the National Health Insurance (BPJS). Organizing Principles

In administering the National Health Insurance System (JKN), the Health Social Security Organisation refers to the requirements stipulated by Law No. 40 of 2004 pertaining to the National Social Security System (SJSN), specifically:

- Mutual Aid. The principle of gotong royong is that those who are capable assist those who are less capable, and that those who are healthy assist those who are ill. Participation is mandatory for all inhabitants of Indonesia, hence this is possible;

- Non-profit. The funds maintained by the Health Social Security Organisation are non-profit trust funds gathered from participants;
- Openness, accountability, efficiency, and effectiveness. All fund management actions resulting from participant contributions are governed by the principles of openness and prudence;
- Portability. The principle of social security portability aims to offer individuals with long-term security;
- Participation is compulsory. The purpose of mandatory membership is to guarantee that all individuals participate in order to be protected. Despite the fact that participation is necessary for everyone, its execution is still based on the economic capability of the people and the government, as well as the program's implementability;
- Dana Amanah. Monies obtained from participant contributions are committed to the organizing body for effective management in order to maximize these funds for the participants' benefit.

First-level health facilities owned by local governments are allowed to use national health insurance capitation funds for health services and operational cost support. This is stated in Regulation of the Minister of Health of the Republic of Indonesia number 21 of 2016, which states that "Capitation" refers to the number of monthly payments made in advance to FKTP (first-level Health Facilities) like Puskesmas based on the number of registered participants without taking into account

According to the Regulation of the Minister of Health of the Republic of Indonesia In Indonesia's national healthcare system, a kind of capitation referred to as service commitment-based Capitation is used.

METHODS OF RESEARCH

This type of research is survey research with a research design based on a conceptual framework built consisting of health insurance system variables, job satisfaction, management trust and internal service quality to study at Puskesmas-Puskesmas in Sintang Regency, West Kalimantan Province. This study was conducted to explore perceptions about the effect of the health insurance system on job satisfaction, Trust in Management and internal service quality.

This study aimed to assess the effect of the national health insurance system on the quality of internal services provided by health workers in community health clinics. The conceptual research framework validates the theoretical models and empirical investigations used to construct a conceptual research framework on the basis of pertinent theories in order to explain the strategic conditions at community health clinics (Puskesmas). The outcomes of this study are expected to contribute, both conceptually and practically, to human resource management policies at community health care centres (Puskesmas) in general.

This study is population consisted of health workers employed at 20 health clinics in Sintang district, West Kalimantan province, including nurses and midwives. Twenty health centers in Sintang Regency are staffed by 375 nurses and midwives, for a total of 375 health care professionals. This study employed a non-probability sampling strategy with the census method. After screening and confirming the data, however, there were 11 incomplete records owing to missing data and data corruption. The data were not included in the data analysis, hence 364 respondents were sampled.

The variables of this study consist of the following:

- 1) Exogenous variables: Health insurance system (X_1);
- 2) Mediating variables: Job Satisfaction (Y_1), Trust in Management (Y_2);
- 3) Endogenous variable: Internal Service (Y_3).

The independent (exogenous), mediating, and endogenous (dependent) variables are defined as follows.

The National Health Insurance System is the perception of District Puskesmas Health Workers about the implementation of the National Health Insurance System in Sintang

District related to stakeholder feedback and availability of workload drugs, as for the National Health Insurance System according to Alhassan *et al.* (2016) as follows:

1) Feedback and Stakeholders ($X_{1.1}$). Feedback and Stakeholders are responses or follow-ups to inputs, suggestions, or complaints from health workers' policymakers related to the implementation of JKN implementation at Puskesmas and their networks.

2) JKN drug availability and quality ($X_{1.2}$). JKN drug availability and quality is the availability of drugs and good quality drugs when health workers provide health services at Puskesmas.

3) Workload ($X_{1.3}$). The workload is the work performed by health workers at Puskesmas after the JKN programme was implemented.

4) Puskesmas Capitation Fund ($X_{1.4}$). Services received by health workers at health centres.

Job satisfaction of health workers is the perception of health workers at the Sintang Regency health centre about satisfaction in their work environment, whether it relates to service schedules, work environment, career, colleagues, salary and others. Satisfaction refers to the concept of Charles & C Joanne, (1990) *Satisfaction Scale* (MMSS) expressed his opinion about the factors that can lead to job satisfaction are:

1) Service schedule ($Y_{1.1}$). Service schedule means satisfaction with working hours;

2) Interaction in the work environment ($Y_{1.2}$). Interaction in the work environment, namely satisfaction with the work environment, such as work colleagues and work situations;

3) Opportunities to develop professionalism ($Y_{1.3}$). Professional development opportunities are the professional development opportunities provided and career advancement;

4) Control and responsibility ($Y_{1.4}$). Control and responsibility, namely satisfaction with job responsibilities, autonomy and responsibility and being involved in responsibilities;

5) Balance between family and work ($Y_{1.5}$). The balance between family and work is a balance between work and family where when you need permission and leave is allowed;

6) External Rewards ($Y_{1.6}$). External Reward means that the Satisfier comes from outside the person, and the Reward is in the form of salary and additional income.

Trust in Management is the perception of health workers at the Puskesmas in Sintang Regency of the ability, benevolence, integrity, and communication of Puskesmas Management (Puskesmas leaders and their parts) Trust in Management is adopted from the Mayer *et al.* model of *Trust*, (1995) which consists of:

- Ability ($Y_{2.1}$). Capabilities are skills, competencies, aptitudes, talents and characteristics that enable a party to have influence in a given circumstance;
- Benevolence ($Y_{2.2}$). Benevolence refers to the amount to which Management is perceived to wish to do good, give security, and support employees' needs in addition to the profit motive;
- Integrity ($Y_{2.3}$). Integrity is consistency in action, having a strong character and being trustworthy;
- Communication ($Y_{2.4}$). Communication is the reciprocal relationship between health centre management and health centre staff in either communication or information.

Internal service quality is a form of PHC management service to health workers provided to support health workers in working at the PHC. In this dissertation, the internal service quality variable uses Moores' Theory (1995) which consists of the dimensions:

- Reliability ($Y_{3.1}$). Reliability is providing internal services on time according to patient needs and providing services according to employee needs in supporting the employee's work;
- Responsiveness ($Y_{3.2}$). Responsiveness is an internal service that is provided quickly and is willing to help patients well, and is flexible with working hours;
- Competence ($Y_{3.3}$). Competence is Management having the necessary knowledge, resources, and infrastructure to perform internal services to patients;
- Tangible ($Y_{3.4}$). Tangible is real in providing services such as accessible information systems or parts of Management that can be accessed.

Validity shows the extent to which the questionnaire can measure according to the actual situation in the field, the validation of the instrument measures the data, where the data used must be valid and reliable (Solimun et al., (2017)).

The reliability test is carried out with the aim of knowing the consistency of the data obtained; such a measuring instrument can be said to be a reliable and reliable measuring instrument, Solimun et al., (2017: 39). The reliability test used in this study is Composite reliability, which functions to measure a variable has good composite reliability if it has a composite reliability of 0.7, although it is not an absolute standard Solimun et al., (2017: 40).

METHODS OF RESEARCH

This analysis is used to test the structured relationship between variables in accordance with the problem formulation and conceptual framework. The data analysis technique used is WarpPLS analysis using the help of the WarpPLS computer program.

RESULTS AND DISCUSSION

After the validity and reliability tests, then form a measurement model (inner model). In evaluating the structural model, the criteria that will be carried out in evaluating the structural model in this study will be explained, namely R-Square or Adjusted R-Square, to see the predictive power of the structural model. In addition, seven new model fit measures are also used to complement the previous model fit measures, which aim to find a model that fits the original data and measure model quality, namely average R-squared (ARS) average path coefficient (APC), average adjusted R-squared (AARS), average full collinearity VIF (AFVIF), average block variance inflation factor (AVIF) Goodness Tenenhaus (GoF), Sympson's paradox ratio (SPR).

Table 1 – Research Model Quality

Criteria	Rule of Thumb	Analysis
Average path coefficient (APC)=0.304, P<0.001	P-Value ≤ 0.05	Significant
Average adjusted R-squared (AARS)=0.312, P<0.001	P-Value ≤ 0.05	Significant
Average R-squared (ARS)=0.361, P<0.001	P-Value ≤ 0.05	Significant
Average block VIF (AVIF)=1.303	acceptable if ≤ 5, ideally ≤ 3.3	Accept

Table 2 – Direct Effect, Path coefficients and P values

n/n	JK	KK	KM
(X) JK			
(Y1) KK	0.239 (<0.001)		
(Y2) KM	0.448 (<0.001)	0.296 (<0.001)	
(Y3) LI	0.234 (<0.001)	-0.047 (0.273)	0.560 (<0.001)

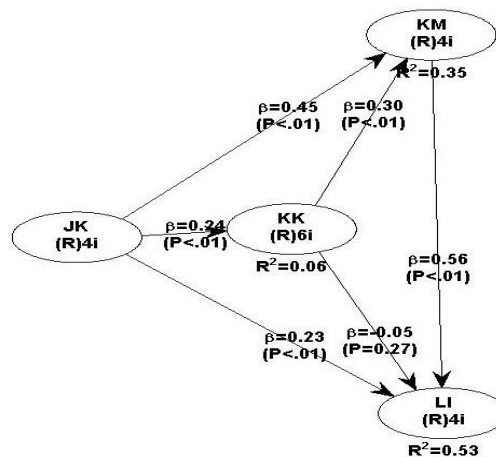


Figure 1 – Warp PLS Output

Direct Effect:

- The effect of the National Health Insurance System (JK) on Job Satisfaction (KK). The results of this analysis obtained a coefficient value of 0.239 with a significance value of $p < 0.001$, so it can be concluded that there is a very significant direct effect of the National Health Insurance System (JK) variable on Job Satisfaction (KK). This means that the National Health Insurance System has an impact on the level of satisfaction of health workers in Sintang Regency;
- The effect of the National Health Insurance System (JK) on Trust in Management (KM). The analysis results show a coefficient value of 0.448 with a significance value of $p < 0.001$, so it can be concluded that there is a very significant direct effect of the National Health Insurance System (JK) on Trust in Management (KM);
- The effect of the National Health Insurance System (JK) on Internal Services (LI). The analysis results show a coefficient value of 0.234 with a significance value of $p < 0.001$, so it can be concluded that there is a very significant direct effect of the National Health Insurance System (JK) on Internal Services (LI);
- The effect of Job Satisfaction (KK) on Trust in Management (KM). The analysis results show a coefficient value of 0.296 with a significance value of $p < 0.001$, so it can be concluded that there is a very significant direct effect of Job Satisfaction (KK) on Trust in Management (KM);
- The analysis results show a coefficient value of -0.047 with a significance value of $p = 0.273$, so it can be concluded that Job Satisfaction (KK) has no significant effect on Internal Services (LI);
- The effect of Trust in Management (KM) on Internal Services (LI). The analysis results show that the coefficient value is 0.560 with a significance value of $p < 0.001$, so it can be concluded that Trust has a direct effect on Internal Services (LI).

Indirect Effect:

- The effect of National Health Insurance (JK) on KM as measured by KK. The coefficient of JK's influence on KM via KK is 0.071 with a significance level of 0.001, indicating that Job Satisfaction (KK) may effectively mediate the relationship between the National Health Insurance System (JK) and Trust in Management (KM) (KM). In terms of the coefficient value, however, the direct influence of JK on KM is more significant than its indirect effect via KK;
- The effect of JK assurances on LI as mediated by KM. The coefficient of the influence of JK on LI via KM is 0.240 with a significance level of 0.001, indicating that Trust in Management (KM) can considerably mediate the relationship between the National Health Insurance System (JK) and Internal Services (LI) (LI). In terms of coefficient value, the impact is stronger via KM (0.240) than directly (0.23), which has a coefficient of 0;
- The effect of Health Insurance (JK) on Internal Services (LI) through Job Satisfaction (KK). The coefficient of the effect of Health Insurance (JK) on Internal Services (LI) through Job Satisfaction (KK) is 0.166 with a significance level of < 0.001 , meaning that Job Satisfaction (KK) is able to significantly mediate between the National Health Insurance System (JK) and Internal Services (LI). However, based on the coefficient value, the direct effect of JK on KM (coefficient value 0.234) is more dominant than through KK (coefficient value 0.166). This means that Health Insurance will be able to improve the Internal Service of health workers in the Puskesmas of Sintang Regency required Management Trust.

CONCLUSION

Based on the results of the analysis previously described, the results of this study can be concluded as follows:

- The National Health Insurance System that has been implemented can increase the Job Satisfaction of health workers at Puskesmas in Sintang Regency. This means

that the health insurance provided by the government can improve services to the community, especially the availability of medicines;

- The National Health Insurance System has a significant effect on Trust in Management, both directly and through job satisfaction of health workers at Puskesmas in Sintang District. This means that the Health Insurance System implemented by the government through the Ministry of Health is directly higher than job satisfaction;
- The National Health Insurance System has a direct effect on internal services, meaning that health insurance will improve the services provided by health workers at the Puskesmas in Sintang District. This condition is driven by indicators of good quality medicine and response to patients;
- Job satisfaction of health workers towards management trust will increase the Trust of Puskesmas Management in Sintang district. This means that a higher level of satisfaction among health workers in Puskesmas will increase public Trust in Puskesmas Management;
- Job Satisfaction of health workers in Internal Services does not affect the internal services of the health centre; this is in accordance with the promise of health workers that serve patients is not influenced by being satisfied or dissatisfied, either individually or in groups; they still provide services to patients in a responsive manner, so satisfaction does not affect the services provided to the community;
- Management's credibility has a big impact on Internal Services. This indicates that strengthening management trust positively affects the internal services of Puskesmas Management in the Sintang district;
- Indirectly, the health insurance system has an impact on internal services through job satisfaction and management trust. This means that health insurance can improve internal services; although health insurance through job satisfaction on internal services is still low because health workers feel satisfied or not, they still carry out their duties properly in accordance with the duties and functions of the Puskesmas in Sintang district, West Kalimantan.

The results of this study are expected to be a consideration for Sintang district government policy and the central government, especially in planning for health programmes in the future so that the health insurance programme can be improved so that health workers can further improve service performance to their patients.

Researchers hope that empirically it can be used as a reference for future researchers who further develop their research variables that are more relevant to better post-pandemic covid conditions.

The researcher hopes that the results of this study can be a reference to be used as a consideration in formulating a policy for the Sintang District Health Office when formulating health planning for better health programs in Sintang District, especially in developing strategies for developing health workers at Puskesmas.

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