

THE EFFECTIVENESS OF UNIVERSAL HEALTH PROGRAM SOCIALIZATION BY BPJS KESEHATAN TO THE COMMUNITY OF MATARAM CITY

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Abstract

Factors that cause the lack of interest of the public to use BPJS services are assumptions that it is useless to use BPJS if it is not used, let alone having to register a family. The case is that the underprivileged community becomes twice-minded and burdensome to them. This research uses qualitative research. The data collection method used is an interview, observation, and documentation, while the analysis method used is interactive model analysis. The results showed that the socialization of BPJS Kesehatan is very important for the community. However, BPJS Kesehatan in Mataram city its programs in several sub-districts and the lack of socialization makes people not know about the importance of BPJS Kesehatan. The conclusion of the study shows that BPJS Kesehatan has not been optimal in conducting socialization which makes some people say that BPJS socialization is less effective.

Keywords: *Effectiveness, Socialization, BPJS Kesehatan, Mataram City.*

Abstrak

Faktor utama penyebab kurangnya minat masyarakat menggunakan layanan BPJS adalah asumsi percuma menggunakan BPJS bila tidak digunakan, apalagi harus mendaftarkan satu keluarga. Sebagai kasus adalah masyarakat kurang mampu menjadi berfikir dua kali dan memberatkan mereka. Penelitian ini menggunakan penelitian kualitatif. Metode pengumpulan data yang digunakan adalah wawancara, observasi dan dokumentasi, sedangkan metode analisis yang digunakan adalah analisa model interaktif. Hasil penelitian bahwa sosialisasi BPJS Kesehatan sesungguhnya penting bagi masyarakat. BPJS Kesehatan kota Mataram hanya mensosialisasikan programnya di beberapa kecamatan, kurangnya sosialisasi membuat masyarakat tidak mengetahui tentang pentingnya BPJS Kesehatan. Kesimpulannya masyarakat berpendapat bahwa sosialisasi BPJS tergolong pada sosialisasi yang kurang efektif.

Kata Kunci : *Efektivitas, Sosialisasi, BPJS Kesehatan, Kota Mataram.*



Lisensi

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A. INTRODUCTION

Public health is the science and art of maintaining, protecting, and improving public health through community organizing efforts. Public health is defined as an integrated application and activity between sanitation and treatment in preventing diseases that affect the population or society. Public health is a combination of theory (science) and practice (art) that aims to prevent disease, prolong life, and improve the health of the population (society) as an application of the integration between medical sciences, sanitation, and social sciences in preventing diseases that occur in society.¹

Health services are a concept used in providing health services to the community. Its main objectives are the prevention of disease and the improvement of health for the public, supported by medicine and public health.

The BPJS program, namely *Universal Health Coverage*, can help reduce the cost of treatment in hospitals or at practicing doctors who use BPJS services, and also indirectly healthy BPJS participants can help other participants in a seriously ill state. The government also bears contributions for underprivileged people, namely Peserta Bantuan Iuran (PBI) so that they do not have to pay contributions every month.

BPJS (Badan Penyelenggara Jaminan Sosial) or Social Security Organizing Agency is a Public Legal Entity that is directly responsible to the President and has the task of providing national health insurance for all Indonesians. Previously BPJS Kesehatan was called Askes (Health Insurance), which was managed by PT. Askes Indonesia, but in accordance with Law No. 24 of 2011 Askes changed to BPJS Kesehatan since January 1, 2014.²

In its operations, BPJS Kesehatan is tasked with facilitating patients with good and complete services, such as registration procedures with easier conditions, more concise claim procedures, and completing medicines for BPJS users.

However, the discrepancy in the administration of drugs for patients makes the pharmacy installation officer have to confirm with the BPJS doctor, this causes the

¹ Sri Surniati and Eliana, *Kesehatan Masyarakat* (Jakarta: Pusdik SDM Kesehatan, 2016).

² "Badan Penyelenggara Jaminan Kesehatan," <https://www.bpjs-Kesehatan.go.id/bpjs/>.

administration of drugs for BPJS patients to be long. Drugs for BPJS patients are often empty, this is overcome by replacing patent drugs.³

Several factors cause the lack of public interest in using BPJS services. One of them is that residents think that before their BPJS card becomes they get sick or even die, they think it's useless to use a BPJS card.

Another reason is the bureaucracy in registering to be a participant of BPJS Kesehatan, a new rule that requires the registration of all members in one family card (KK) because one example of a poor citizen who in one family card there are five or six family members when they register, it is required that all family members use BPJS, of course, this burdens them. Most of them can only afford to sign up for two people. But with the new regulations that have been in the past two years, requiring one family to register, is what makes them reluctant to register for BPJS.

The government hopes that BPJS can carry out socialization optimally, but there are still many people who say that they have not received official socialization from BPJS Kesehatan, only socializing through village apparatus such as RT but this has become less than optimal.

The government's socialization of the BPJS program is supported by research conducted by Abu Khoiri in the study stating that 52.5% of the information received by respondents comes from other people around them. This means that the spread of mouths is the most widely used mechanism for respondents in obtaining information.⁴

The important socialization of the BPJS program is proven to be able to provide awareness to the public about the importance of the BPJS program. This statement is supported by several previous research results regarding the socialization of BPJS. This study stated that all participants (100%) stated that after participating in the

³ Devina Eirene Mendrofa and Suryawati Chriswardani, "Analisis Pengelolaan Obat Pasien BPJS di Instalasi Farmasi Rumah Sakit Panti Wilasa Citarum Semarang," *Manajemen Kesehatan* 4 (2016): 220.

⁴ Abu Khoiri, "Efektivitas Sosialisasi Program Jaminan Kesehatan Terhadap Pengetahuan Dan Sikap Rumah Tangga Usaha Pertanian Non PBI Di Kabupaten Jember," *Ikesma* 11 (2015): 109.

counseling, their knowledge of the BPJS program increased, even more than 50% of the counseling participants were interested in registering as BPJS participants.⁵

B. LITERATURE REVIEW

The number of journals related to socialization that makes researchers use the journal as a literature review:

The first Journal with a title "Penyuluhan Dan Sosialisasi Program BPJS Kesehatan Bagi Masyarakat Di Kelurahan Gadang Kota Banjarmasin". This journal discusses the socialization of BPJS which is very important for the community and the research that researchers conducted discusses the effectiveness of socialization of the BPJS program for patients who use BPJS. In the research that the researchers conducted, there are similarities in how BPJS socializes with the local community. The difference that researchers do with this journal is the place to research the BPJS Kesehatan program.⁶

The next journal is with the title "Peran Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan dan Implikasinya Terhadap Ketahanan Masyarakat (Studi di RSUD Hasanuddin Damrah Manna, Kabupaten Bengkulu Selatan, Provinsi Bengkulu)". Discusses the role of the National Social Security System in health services and the importance of BPJS for the people of South Bengkulu Regency. In the research conducted, researchers have similarities about the importance of BPJS for the community. The difference that researchers do with this journal is that researchers do not discuss the important role of the National Insurance System in health services while this previous study discussed this.⁷

C. RESEARCH METHOD

The research conducted at the BPJS Kesehatan office in Mataram City uses a qualitative research method with a phenomenological approach, meaning that the

⁵ Normajatun, Makawi, and Haliq, "Penyuluhan Dan Sosialisasi Program BPJS Kesehatan Bagi Masyarakat," *Al-Ikhlās* 2 (2016): 28.

⁶ Normajatun dkk, "Penyuluhan dan Sosialisasi Program BPJS Kesehatan bagi Masyarakat", *Al-Ikhlās*, Vol. 2, Nomor 1, Oktober 2016, 185.

⁷Trisna Widada, "Peran Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan dan Implikasinya Terhadap Ketahanan Masyarakat", *Ketahanan Nasional*, Vol. 23, Nomor. 2, Agustus 2017, 203.

data collected is not in the form of numbers but the data comes from interview manuscripts, field notes, personal documents, memo notes, and other official documents. So that, the purpose of this qualitative research is to describe the empirical reality behind the phenomenon in-depth in detail and completely. The use of a qualitative approach in this study is to match the empirical reality with the prevailing theory using the scriptive de method.

And then, related to the subject of research. The subject of the study is the main source of research data, which has data on the variables studied. The subject of the study is basically the one who will be subjected to the conclusion of the research results.⁸ The subject of the study is also an individual, object, or organism that is used as a source of information needed in the collection of research data.⁹ The subjects in this study are people who have not used BPJS and BPJS employees who have responsibility for socialization.

Data collection techniques in this study were carried out through tig events. First, using guided interviews with twelve speakers, namely nine women and three men, researchers chose more women than men because there were more women in BPJS Kesehatan participants. The researcher conducted an interview with the resource person consisting of two BPJS Kesehatan employees and ten community members, the researcher gave an interview where the interviewer already had a complete and detailed list of questions to ask the resource person.

Researchers selected several speakers from various villages because this already represents all sub-districts in Mataram city to find out how effective the level of socialization of BPJS Kesehatan, namely from various villages, including Pejeruk, Pejarakan Karya, Karang Pule, Pagutan Barat, Sapta Marga, Selagalas, Karang Baru, and Monjok.

The second technique is observation with the aim of completing data that may not be obtained from the interview process. In this study, researchers made observations three times with participation settings in two ways, namely, (1) observing socialization in the community carried out by BPJS officers both verbally

⁸Azwar, *Metode Penelitian*, (Yogyakarta : Pustaka Pelajar Offset, 2011), 34.

⁹Idrus Muhammad, *Metode Penelitian Ilmu-ilmu Sosial*, (Yogyakarta : UII Press, 2007), 91.

and nonverbally, and (2) observing services carried out by officers to the BPJS user community.

Last but not least is the documentation technique. In this study, the researcher documented several notes of the meeting results that will be disseminated by BPJS officers and captured several photos and other documents related to BPJS, such as reports and hospital cooperation contracts with BPJS.

The data analysis process carried out is the raw data that will be collected by researchers in the field will be useful after analysis, data analysis is very important in research, because after analysis of the data that will appear to be beneficial, especially in solving research problems and achieving the final research objectives.

In this study, researchers conducted interactive analysis by conducting interviews, audio recordings, and data from books and journals then researchers analyzed by means of data reduction. Considering that researchers use qualitative data, it is used by inductive data analysis, namely data analysis that departs from special cases or events and then generalizes by drawing conclusions. And finally, researchers use triangulation steps. Triangulation in credibility testing is defined as checking data from various sources in various ways and at various times. Thus there is source triangulation, data collection technique triangulation, and time.¹⁰ This stage is carried out to gain the credibility of research data.

D. RESULT AND DISCUSSION

Implementation of BPJS Kesehatan Socialization

Socialization is a process that continues to occur throughout our lives.¹¹ Socialization can be interpreted as any activity aimed at informing persuading or influencing the community to continue using the products and services produced. And then, the socialization activities in question is a process of notifying and influencing the community to always take advantage of the services offered.

Socialization activities not only convey information about what will be delivered but also seek support from various community groups to suit the needs of

¹⁰Sugiyono, *Metode Penelitian Pendidikan Pendekatan Kuantitatif, Kualitatif dan R&D*, (Bandung: Alfabet, 2008), 273.

¹¹ Joko Suyanto, *Gender Dan Sosialisasi* (Jakarta: Nobel Edumedia, 2010).

the community. As was the case with MacBride and Joseph R. Dominick considered socialization was a function of mass communication. For Dominick, socialization is the transmission of values that refer to how a person adopts the behaviors and values of a group. The mass media also presents a depiction of society, by reading, listening, and watching then a person learns how the audience behaves and what values are important.¹² Dialogue about the needs and interests of the community that can be served by BPJS. So the process of socialization is the process of arranging the same standing pedestal.

Like the theory of socialization according to MacBride and Joseph R. Dominick who consider socialization as a function of mass communication, mass communication can be interpreted as a process of communication that takes place in which messages are sent from institutionalized sources to a mass audience through mechanical tools such as radio, television, newspapers, and movies.¹³

The mass communication theory discussed here is nuanced *in the theory of media effects (theories of media effects)*. According to experts who study the effects of media on humans, researchers also prove how the role of media on humans psychically.¹⁴

This socialization is an important activity for the survival of a company and government, where marketing is one of the main activities carried out by entrepreneurs in their efforts to maintain survival, develop and generate benefits. Whether or not he succeeds in achieving his goals depends on his expertise.

Socialization or marketing activities carried out by a company have several goals to be achieved, both long-term goals and short-term goals. Short-term goals for example are to seize consumers, especially for newly launched products. Meanwhile, in the long run, it is carried out to maintain existing products to continue to exist.¹⁵

The condition for the occurrence of socialization, basically socialization provides two fundamental contributions to our lives. First, providing a basis or foundation to individuals for the creation of effective participation in society to an individual the creation of effective participation in society, and secondly allowing the

¹² Onong Uchjana Effendy, *Ilmu Komunikasi Teori Dan Praktek* (Bandung: PT Remaja Rosdakarya, 1984).

¹³ Hafied Cangara, *Pengantar Ilmu Komunikasi* (Jakarta: Raja Grafindo Persada, 2007).

¹⁴ Elvinaro Ardianto, *Komunikasi Massa Suatu Pengantar* (Bandung: Simbiosis Rekatama Media, n.d.).

¹⁵ A Amalana, *Sosialisasi BMT* (Purworejo: Walisongo Press, 2016).

sustainability of society because without socialization there will be only one generation so the sustainability of society will be greatly disturbed.¹⁶

The Effectiveness of BPJS Kesehatan Program Socialization

1. The Development of Socialization

Trisna Widada recorded that approximately residents in the Bengkulu area already have a BPJS card. Although there are still many barriers and shortcomings in socialization, BPJS Kesehatan every year always experiences an increase in the number of residents who register as BPJS Kesehatan participants. Trisna Widada said that BPJS provides a mechanism that can increase public affordability to health facilities.

The reach of health facilities is expanded to be able to serve the lower middle class to the upper-middle class, as well as the perception of the public who consider health facilities unaffordable due to economic difficulties. Thus, BPJS Kesehatan can meet the principle of equitable distribution of health services for the community.¹⁷

Some of the explanations above have similarities with research conducted at BPJS Kesehatan of Mataram city because there is still a lack of socialization among BPJS officers in the community. so that this makes the public less aware of information about BPJS health.

2. The Effectiveness of Socialization

Effectiveness is how an organization manages to obtain and utilize resources to realize its operational goals. Effectiveness is related to the implementation of all main tasks, the achievement of goals, punctuality, and the participation of members.¹⁸

Measuring the effectiveness of a program of activities is not a very simple thing, because effectiveness can be studied from different points of view and depends on who assesses and implements it. When viewed from the point of view of productivity, a production manager gives an understanding that effectiveness means the quality and quantity (*output*) of goods and services. The level of effectiveness can also be

¹⁶ Suyanto, *Gender Dan Sosialisasi*.

¹⁷ Trisna Widada, "Peran Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan Dan Implikasinya Terhadap Ketahanan Masyarakat," *Ketahanan Nasional* 23 (2017): 79.

¹⁸ Mulyasa, *Management Berbasis Sekolah Konsep Strategi Dan Implementasi* (Bandung: PT Remaja Rosdakarya, 2017).

measured by comparing a predetermined plan and the tangible results that have been realized. However, if the effort or the result of the work and the actions carried out are not appropriate to cause the goal not to be achieved or the expected goal, then it is said to be ineffective.¹⁹

Some people in Mataram city said that the socialization of BPJS Kesehatan has not been effective because BPJS officers only socialize to the village apparatus, and do not even socialize to several villages, this makes as many as forty-seven thousand Mataram residents have not registered as participants, and have been recorded by BPJS Kesehatan. However, from the way BPJS Kesehatan socializes through the village apparatus and through the media, there is one community who says that the BPJS socialization method is effective because it can directly ask the village apparatus intensively.

Socialization through the village apparatus is not enough, as one of the goals of socialization, namely: maintaining the existence of the organization by increasing the results achieved due to increasing users who take advantage of the goods and services offered by the organization, so that to achieve this goal requires a large number of people or communicants.

In today's sophisticated era, of course, people are more often looking for information through the media, namely: print media, electronic media, internet media, and so on. Although it uses more internet media because it is easier to access information, including about BPJS Kesehatan. However, BPJS also needs to understand some conditions of people who stutter technology. So direct socialization by holding seminars or deliberations with the people of Mataram city needs to be maximized again.

There are some people who say that the way of socialization of BPJS officers is only by meeting village officials is more effective than meeting the community directly, but BPJS officers should no longer socialize with the village apparatus alone, BPJS officers need to socialize thoroughly with the community so that one of the BPJS

¹⁹ Iga Rosalina, "Efektivitas Program Nasional Pemberdayaan Masyarakat Mandiri Perkotaan Pada Kelompok Pinjaman Bergulir Di Desa Mantren Kec.Kangrejo Kabupaten Madetaan," *Efektivitas Pemberdayaan* 1 (2012): 3.

regulations, namely requiring all family members or one Family Card (KK) to register can be achieved.

Based on the results of the research conducted by researchers in three ways, namely interviews, observations, and documentation, which have been differences, including during the interview, BPJS Kesehatan said that it had carried out socialization in various villages in the Mataram city.

But, when researchers conducted interviews and observations in several villages in all sub-districts of Mataram city, they said that BPJS Kesehatan never conducted direct socialization with the community, only socialization through village officials. This is far compared between the statement of BPJS Kesehatan and the statement of the community.

3. The Media of Socialization

The media of socialization is a place where socialization occurs or it can also be called an *agent of socialization* or a means of socialization. Socialization agents are those that help an individual accept values or a place where an individual accepts values or a place where an individual learns about everything that then makes him an adult.²⁰ In socializing, there must be barriers that are barriers that hinder the achievement of goals. Before socializing, one must first know the factors inhibiting communication, namely:

a. Socio-Anthro-Psychological Barriers

A German sociologist is Ferdinand Tonnies in the book *Strategic Communication: In Business and The Professions* written by Dan O'Hair and friends classified human life in society into two types of associations which he named *Gemeinschaft* and *Gesellschaft*. *Gemeinschaft* is a life association that is personal, static, and irrational, as in domestic life. While *the Gesellschaft* is a life association that is impersonal, dynamic, and rational, such as association in the office or in an organization.

²⁰ Suyanto, *Gender Dan Sosialisasi*.

Society is made up of different groups and layers, which give rise to differences in social status, religion, ideology, level of education, level of wealth, and so on, all of which can be barriers to smooth communication.

In carrying out his communication a communicator will not succeed if he does not know who the communicant is targeted by. What is meant by "who" here is not the name it bears but what race, what nation, or what tribe?. By getting to know him, he will also get to know his culture, lifestyle and life norms, habits, and language.

Communication will run smoothly if a message conveyed by the communicator is received by the communicant completely, that is, received in the *sense of being received* or sensorily, and in the sense of *being accepted* or spiritually.

Psychological factors are often an obstacle to communication. This is generally because the communicator before launching his communication does not review the communicant. Communication is difficult to succeed if the communicant is sad, confused, angry, feeling disappointed, feeling envious, and other psychological conditions, as well as if communication *puts prejudice* on the communicator.

b. Semantic Barriers

If the sociological-anthropological-psychological barrier is on the part of the communicant, then the semantic barrier lies with the communicator. The semantic factor concerns the language that the communicator uses as a "tool" to channel his thoughts and feelings to the communicant. For the sake of smooth communication, a communicator must really pay attention to this asylum disorder, because mispronunciation or miswriting can lead to *misunderstanding* or *misinterpretation*, which in turn can lead to *miscommunication*.

c. Mechanical Barriers

Mechanical barriers are encountered in the media used in smoothing communication. There are many examples that we experience in everyday life; the sound of a phone that is cropped, the blurry letter type on the mail, the missing voice that appears on the radio plane, newspaper news that is difficult to find in the column, the picture that twists and turns on the television set, and so on.

d. Ecological Barriers

Ecological barriers occur to environmental disturbances to the process of taking place of communication, it comes from the environment. Examples of ecological barriers are the boisterous sound of people or the noise of traffic, the sound of rain or lightning, the sound of airplanes passing by, and others at the time when the communicator is in speech.²¹

The obstacle or obstacle for BPJS Kesehatan in socializing is when gathering the community in the same forum, thus causing a lack of community attendance when BPJS Kesehatan officers conduct socialization.

This is what makes some Indonesians not understand the uses and benefits and effectiveness of BPJS Kesehatan. In addition, many people cannot use existing technology or what is known as *gaptek* (stuttering of technology).

According to the observations made, on the BPJS web, there is a lot of information but it is not made with an easy search, it makes it difficult for people to find the desired information and also people in the interior do not have adequate signals so that they cannot learn to use the internet, especially people who are illiterate or elderly.

Of course, it causes various kinds of programs that have been implemented and socialized by the government through websites or other social media, which cannot be understood by audiences who are still not tech-savvy such as people in inland villages.

From the explanation above, BPJS barriers in socializing are included in sociological barriers, anthropological barriers, semantic barriers, and ecological barriers due to BPJS's difficulty in gathering the community so there is a lack of community attendance when BPJS officers conduct socialization. An example is sociological barriers, namely: differences in social status, religion, ideology, level of education, level of wealth, and so on, all of which can be barriers to smooth communication, and also communicators mispronounce or miswrites to cause

²¹ Dan O'Hair, *Strategic Communication: In Business and The Professions*, trans. Tri Wibowo (Jakarta: Prenada Media, 2009).

misinterpretations that make communicants unable to receive messages sensorily and spiritually, in addition to barriers coming from environmental disturbances, such as the sound of rain, lightning, car or motorcycle horns and so on.

Communication Barriers		
No.	Inhibiting factors	Understanding
1	Sociological Barriers	Various groups give rise to differences in social status, religion, ideology, level of education, level of wealth, and so on which cause obstacles to smooth communication.
2	Anthropological Barriers	a message is conveyed thoroughly to the communicant with sensory and spiritual acceptance.
3	Psychological Barriers	Communication is difficult to convey when the communicant's mood is in a bad state
4	Semantic Barriers	The communicator mispronounces or miswriting can lead to misinterpretation.
5	Mechanical Barriers	Obstacles that occur within the media.
6	Ecological Barriers	Obstacles that come from environmental disturbances.

Based on the results of the study in three ways, namely interviews, observations, and documentation, there are differences between the answers from BPJS and answers from the community, namely: during the interview, BPJS Kesehatan said that it had carried out socialization to various sub-districts in Mataram city.

However, when conducting interviews and observations of several sub-districts in Mataram city, they said that BPJS Kesehatan never conducted direct socialization with the community, only socialization through village officials. This is far compared between the statement of BPJS Kesehatan and the statement of the community.

E. CONCLUSION

This study concluded that the socialization of BPJS Kesehatan in Mataram city can be said to be less effective because the results of the study regarding the difference between the answers from BPJS and answers from the community, namely: during the interview, BPJS Kesehatan said that it had carried out socialization to various sub-districts in Mataram city.

However, when conducting interviews and observations of several sub-districts in Mataram city, they said that BPJS Kesehatan never conducted direct socialization with the community, only socialization through village officials. This is far compared between the statement of BPJS Kesehatan and the statement of the community.

So it can be said, the activity of BPJS Kesehatan socialization in the Mataram city is relatively low. Although BPJS has carried out direct or indirect socialization (media), namely through radio, television, newspapers, banners, web, and brochures, this still makes people say that BPJS socialization is not effective because BPJS has not carried out socialization in several villages in an optimal way.

The obstacles faced by BPJS Kesehatan in socializing are the difficulty to gather the public, thus causing a lack of public presence when BPJS officers socialize and there are also several other obstacles in socializing, namely: some people stutter technology makes them not aware of BPJS information through the internet media.

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