

Dampak Jaminan Kesehatan Sosial Bagi Masyarakat Miskin terhadap Utilisasi Layanan Kesehatan (Data Indonesia Family Life Survey 2000, 2007, dan 2014) = The Impact of Social Health Insurance for The Poor on Health Services Utilization (Indonesia Family Life Survey Data 2000, 2007, and 2014)

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Abstrak

Dalam upaya memberikan perlindungan sosial terhadap masyarakat miskin dari risiko kesehatan, pemerintah Indonesia mengimplementasikan program jaminan kesehatan sosial bersubsidi bagi masyarakat miskin Askeskin. Program ini kemudian diperluas target dan manfaatnya menjadi Jamkesmas. Penelitian ini meneliti dampak jaminan kesehatan bagi masyarakat miskin terhadap utilisasi layanan kesehatan berupa jumlah kunjungan rawat jalan dan rawat inap, proporsi belanja kesehatan terhadap pengeluaran rumah tangga, serta self-assessed health. Analisis dilakukan pada semua populasi dan subpopulasi termiskin kuintil pertama dalam populasi . Peneliti menggunakan metode propensity score matching dan difference-in-difference untuk analisis data Indonesia Family Life Survey IFLS tahun 2000, 2007 dan 2014. Hasil penelitian menunjukkan program jaminan kesehatan bagi masyarakat miskin memiliki dampak positif signifikan terhadap jumlah kunjungan rawat jalan dan rawat inap; di sisi lain program tidak memiliki dampak signifikan terhadap proporsi belanja kesehatan rumah tangga dan self-assessed health. Program jaminan kesehatan bagi masyarakat miskin secara signifikan telah meningkatkan akses masyarakat miskin terhadap layanan kesehatan, namun tidak signifikan melindungi masyarakat miskin dari risiko belanja kesehatan dan tidak signifikan meningkatkan kualitas kesehatan masyarakat miskin.

.....To improve the poor's access to healthcare services, the Indonesian government introduced Askeskin, a subsidized social health insurance for the poor. Later, Askeskin had policy expansion and became Jamkesmas. We examine the effects of this social health insurance for the poor on health services utilization-outpatient visits, inpatient admissions, household budget share of health spending, and self assessed health. We analyze all samples and the poorest 1st quartile of the sample. Using propensity score matching and difference in difference matching strategies on Indonesia Family Life Survey IFLS datasets 2000, 2007 and 2014, we find the insurance have positive significant impact on outpatient visits and inpatient admissions it does not seem to have significant impact on household budget share of health spending and self assessed health, however. This finding suggests that social health insurance for the poor increases health services utilization outpatient visits and inpatient admissions, on the other hand it does not significantly protect the poor from health spending and not significantly improve health outcome of the poor.