

INTISARI

Latar Belakang: Data BPJS Kesehatan tahun 2021 menunjukkan angka kolektibilitas iuran terendah terdapat pada segmen peserta PBPU. 54% peserta PBPU tidak aktif kepesertaanya karena menunggak iuran. Kolektibilitas iuran peserta segmen PBPU dan BP di BPJS Kesehatan KC Muara Bungo adalah 67,44% yang merupakan kolektibilitas terendah dibanding segmen lain. Upaya penagihan untuk meningkatkan kolektibilitas iuran segmen PBPU dimulai dengan penerapan *outodebet* perbankan, pemanfaatan *financial technology (fintech)* untuk *outodebet* non perbankan dengan akun uang elektronik (*e-wallet*), pengiriman informasi tagihan melalui SMS/WA/Email/Surat, Telekolekting, dan kader JKN. Telekolekting memberikan informasi tagihan iuran kepada peserta PBPU menunggak via telepon.

Tujuan: Penelitian ini bertujuan untuk mengeksplorasi pelaksanaan program Telekolekting sebagai upaya peningkatan kolektibilitas iuran peserta PBPU di BPJS Kesehatan KC Muara Bungo

Metode: Penelitian ini merupakan penelitian deskriptif kualitatif. Peneliti menggunakan *purposive sampling* dengan subjek penelitian berjumlah 12 orang. Pengumpulan data dilakukan dengan wawancara mendalam dan telaah dokumen.

Hasil: Program Telekolekting dilakukan dengan prosedur yang dimulai dari tahap persiapan, aktivitas Telekolekting, monitoring dan evaluasi. Monitoring masih belum optimal dilaksanakan. Kendala pelaksanaan Telekolekting terdiri dari kendala SDM, kendala sarana prasarana, kendala aplikasi, kendala data dan kendala peserta. Beberapa PTT Telekolekting belum mendapatkan pelatihan dasar Telekolekting, penempatan ruangan yang masih belum sesuai memerlukan perhatian dari KC Muara Bungo. Kolektibilitas Iuran KC Muara Bungo mengalami peningkatan setelah dilaksanakan Telekolekting oleh PTT Telekolekting.

Kesimpulan: Terdapat peningkatan kolektibilitas iuran sejak dilakukan Telekolekting oleh PTT Telekolekting BPJS Kesehatan KC Muara Bungo namun perlu dilakukan monitoring secara konsisten dan peningkatan kompetensi PTT Telekolekting agar program Telekolekting lebih optimal.

Kata Kunci: JKN; Kolektibilitas iuran; PBPU; *Revenue collection*; Telekolekting

ABSTRACT

Background: Data BPJS Kesehatan in 2021 shows the lowest contribution collectibility figure found in the PBPU participant segment. The collectibility of contributions from PBPU and BP segment participants at BPJS Kesehatan KC Muara Bungo is 67.44%, which is the lowest collectibility compared to other segments. Collection efforts to increase the collectibility of PBPU segment dues began with the application of banking *outodebet*, the use of *financial technology (fintech)* for non-banking *outodebets* with electronic money accounts (*e-wallets*), shipping billing information via SMS / WA / Email / Mail, telecollecting, and kader JKN. Telecollecting provides information on contribution bills to PBPU participants in arrears via telephone.

Objective: This study aims to explore the implementation of the telecollecting program as an effort to increase the collectibility of PBPU participants' contributions at BPJS Kesehatan KC Muara Bungo

Methods: This study is a qualitative descriptive study. Researchers used *purposive sampling* with 12 study subjects. Data collection was carried out by in-depth interviews and document reviews.

Results: The telecollecting program is carried out with procedures starting from the preparation stage, telecollecting activities, monitoring and evaluation. Monitoring is still not optimally implemented. The obstacles to the implementation of telecollecting consist of HR constraints, infrastructure constraints, application constraints, data constraints and participant constraints. Some telecollecting PTTs have not received basic telecollectic training, the placement of rooms that are still not suitable requires attention from KC Muara Bungo. The collectibility of Muara Bungo KC dues has increased after being carried out telecollecting by PTT telecollecting.

Conclusion: There has been an increase in the collectibility of contributions since telecollecting was carried out by PTT telecollecting BPJS Kesehatan KC Muara Bungo but it is necessary to monitor consistently and improve the competence of telecollecting PTT so that the telecollectic program is more optimal.

Keywords: JKN; Collectibility of dues; PBPU; *Revenue collection*; Telecollecting