

## INTISARI

### **Model Pengembangan Fasilitas Pelayanan Kesehatan (Kasus Jaminan Kesehatan Nasional (BPJS) di Perkotaan Yogyakarta)**

Perkembangan sistem pelayanan dan fasilitas kesehatan di Indonesia menunjukkan dinamika yang semakin kompleks dengan variasi ketersediaan fasilitas kesehatan, kebutuhan masyarakat akan layanan kesehatan, penyelenggaraan Jaminan Kesehatan Nasional (JKN), serta variasi ketersediaan sumber daya kesehatan. Perkotaan Yogyakarta memiliki keragaman jenis dan tipe fasilitas kesehatan serta kemajemukan masyarakat, sehingga dapat memberikan keragaman preferensi dalam memilih fasilitas kesehatan. Tujuan dari penelitian ini adalah untuk menganalisis distribusi spasial dan cakupan area pelayanan fasilitas kesehatan tingkat pertama, menganalisis preferensi pengguna dalam memilih fasilitas pelayanan kesehatan, dan membuat pemodelan pengembangan fasilitas kesehatan di Perkotaan Yogyakarta.

Penelitian dilaksanakan di Perkotaan Yogyakarta dengan menggunakan sampel sejumlah 239 responden. Analisis distribusi spasial dilakukan dengan *kernel density*, *spatial autocorrelation*, dan *covering model*. Preferensi pengguna dianalisis dengan regresi logistik multinomial untuk mengetahui faktor internal, eksternal, dan pendukung yang mendasari pengguna memilih fasilitas kesehatan. Sedangkan analisis strategi pengembangan fasilitas kesehatan menggunakan A'WOT (AHP+SWOT).

Berdasarkan hasil analisis spasial diperoleh hasil bahwa fasilitas kesehatan di Perkotaan Yogyakarta memiliki kecenderungan mengelompok (terklaster) dengan nilai autokorelasi spasial positif (Indeks Moran's: 0,240 dan Z-score tinggi: 2,20 dari 2,58). Hasil analisis *covering model* menemukan bahwa masih terdapat area yang belum terjangkau oleh fasilitas kesehatan sebesar 14,05% (3.608 Ha) dan menghasilkan rekomendasi pengembangan berdasarkan tipologi kepadatan fasilitas kesehatan dan kepadatan permukiman. Analisis preferensi pengguna menghasilkan temuan bahwa tingkat pendidikan (faktor internal); keterjangkauan biaya, profesionalisme, kualitas pelayanan, kenyamanan, dan keramahan (faktor eksternal); jarak-waktu tempuh, moda transportasi, dan intervensi politik (kebijakan) (faktor pendukung) merupakan faktor-faktor determinan pengambilan keputusan. Strategi pengembangan fasilitas kesehatan dimodelkan dengan kerangka A'WOT yang menghasilkan 8 (delapan) strategi prioritas dengan fokus pada peningkatan kualitas, pengetahuan masyarakat, jangkauan layanan, kerjasama dan daya saing.

Kata kunci: analisis spasial, daya layan, fasilitas kesehatan, strategi pengembangan

## ABSTRACT

### **Healthcare Facility Development Modeling, The Case of the National Health Insurance Scheme (BPJS) in Urban Area of Yogyakarta**

Health service systems and healthcare facilities in Indonesia exhibit increasing complexity, driven by variations in facility availability, population healthcare needs, the implementation of the National Health Insurance scheme, and disparities in health resource distribution. The urban area of Yogyakarta is characterized by a diverse range of healthcare facility types and a socially heterogeneous population, resulting in varied preferences in healthcare facility utilization. This study aims to analyze the spatial distribution and service coverage of primary healthcare facilities, examine user preferences in healthcare facility selection, and develop a model for healthcare facility development in the urban area of Yogyakarta.

The study was conducted in the urban area of Yogyakarta and involved 239 respondents. Spatial analytical techniques, including kernel density estimation, spatial autocorrelation analysis, and a coverage modeling approach, were employed to examine the spatial distribution and service coverage of healthcare facilities. User preferences in healthcare facility selection were analyzed using multinomial logistic regression, allowing for the identification of internal, external, and enabling factors influencing healthcare utilization decisions. Furthermore, strategies for healthcare facility development were formulated using the A'WOT framework, which integrates the Analytical Hierarchy Process (AHP) and SWOT analysis to support evidence-based planning and policy recommendations.

Based on the spatial analysis, healthcare facilities in the urban area of Yogyakarta exhibit a clustering tendency, as indicated by a positive spatial autocorrelation (Moran's Index = 0,240) and a high Z-score (2,20 out of 2,58). The coverage model analysis reveals that 14.05% of the study area (3.608 Ha) remains underserved by healthcare facilities, leading to development recommendations based on typologies of healthcare facility density and residential density. The analysis of user preferences indicates that educational attainment (internal factor); affordability, professionalism, service quality, comfort, and friendliness (external factors); as well as travel distance and time, transportation modes, and political or policy interventions (enabling factors) are key determinants of healthcare facility selection. Furthermore, healthcare facility development strategies were formulated using the A'WOT framework, resulting in eight priority strategies that emphasize improvements in service quality, public awareness, service coverage, collaboration, and competitiveness.

**Keywords:** spatial analysis, service coverage, healthcare facilities, development strategy