

in the analysis unit, but instead focuses on the internal dynamics and perceptions within the work unit.

The research objects and subjects will be determined purposively, covering Primary Health Facilities (FKTP) in Surabaya, East Java. Informants include clinic heads, capitation fund treasurers, branch managers, and central managers of health clinics in Surabaya, East Java.

The pre-research phase was conducted through literature review and previous studies to identify research gaps related to the effectiveness of the management of capitation funds under the National Health Insurance (JKN), particularly in private health facilities. This study included a review of scientific journals, government regulations, BPK audit reports, and organizational theories from Etzioni (1975), Robbins (1990), and Steers (1977). This stage aimed to strengthen theoretical understanding, develop research instruments such as interview guidelines, and map relevant locations and actors for data collection. To ensure data validity, this study employed various qualitative validation strategies recognized in social research methodology. The primary technique used was source and method triangulation, which involves comparing data from various sources (clinic leadership, medical staff, and non-medical staff) and through various methods (interviews, observation, and documentation). This strategy aligns with Patton's (1990, pp. 260-267) perspective, which emphasizes that triangulation enhances data credibility by demonstrating consistency across perspectives. Furthermore, the researcher employed member checking, which involved reconfirming the data interpretation with the informants to ensure that the interpretations and findings truly reflect their reality. This technique supports the approach of Lincoln & Guba (1985, p. 250), who state that credibility in qualitative research should be built through direct involvement and openness with participants.

RESULT AND DISCUSSION

This study aims to analyze the effectiveness of capitation fund management within the National Health Insurance (JKN) Program at health clinics in Surabaya. Using a descriptive qualitative approach, data were obtained from in-depth interviews, observations, and documentation studies. The results revealed several key findings, including:

Non-Needs-Based Planning: Many clinics do not conduct an in-depth needs analysis before planning fund use. For example, allocating funds to services that are less popular with patients indicates a lack of understanding of community needs.

Weak Internal Oversight: Interviews with staff indicated that internal oversight at clinics is often inadequate. This leads to non-compliance with established procedures, which impacts the effectiveness of fund management.

Low Managerial Capacity: Many clinic staff lack adequate training in fund management. Observations indicate that this lack of managerial competency contributes to difficulties in planning and implementing efficient fund use.

Efficiency and Accountability: Despite the capitation payment system, efficient fund use is not achieved. Some clinics remain trapped in an administrative approach that does not prioritize results or outcome-based planning.

Staff Coordination: Poor communication among staff involved in fund management is also a hindering factor. Unclear communication leads to misunderstandings regarding the intended use of funds, leading to ineffective management.

Non-Needs-Based Planning. One of the key findings of this study is that planning that is not based on community needs hinders the effective management of capitation funds. Many clinics do not conduct in-depth surveys or needs analyses before planning fund allocations. Previous research



by Arovian Yuliardi (2018) showed that community perceptions of service quality heavily influence the utilization of capitation-funded health services. If clinics do not understand patient needs, the allocated funds will be ineffective.

For example, at a health clinic in Surabaya, there was evidence of activities allocating larger funds to less popular specialist services, while more essential basic services received less attention. This creates disparities in healthcare access and reduces patient satisfaction.

Weak Internal Oversight. Weak internal oversight at clinics is another significant factor in fund management. Interviews indicate that many clinics lack adequate oversight systems to ensure that funds are used according to plan. Research by M. Faozi Kurniawan et al. (2016) also showed that delays in budget realization and a lack of thorough understanding of regulations are common problems.

This lack of oversight has the potential to lead to misuse of funds or inefficient use. For example, funds intended for basic healthcare services may be used for irrelevant purposes. Therefore, it is important to establish a stricter and more accountable oversight system.

Low Managerial Capacity. Low managerial capacity in clinics also hinders the management of capitation funds. Many staff members lack adequate training in budget management. Research by Abdul Gani Hasan and Wiku B.B. Adisasmito (2017) shows that inequities in the remuneration system and a lack of understanding of regulations can lead to inefficiencies in fund management.

Clinics without trained managers will struggle to manage funds effectively. This suggests that training and managerial capacity development should be a priority in efforts to improve the effectiveness of fund management.

Efficiency and Accountability. Although the capitation payment system is designed to increase efficiency in fund use, this study shows that many clinics are still trapped in an administrative approach that ignores results. The results showed that despite an increase in capitation fund receipts, increased patient utilization actually decreased actual capitation.

This suggests that efficient fund management depends not only on the amount of funds received, but also on how those funds are used. Research by Imanuel Christian Indap et al. (2017) shows that centralized budgeting and fund management can hinder efficiency.

Coordination Between Staff. Coordination between staff involved in fund management is also a critical factor in the effectiveness of capitation fund management. This study shows that poor communication between staff can lead to misunderstandings regarding the purpose of fund use. If staff do not have a shared understanding of the purpose of fund management, management effectiveness will decline.

This aligns with the findings of Aurelia Editha Lesmana et al. (2024), which show that effective financial management is a key pillar in the successful implementation of the National Health Insurance (JKN). Therefore, it is important to improve communication and collaboration between staff in fund management.

CONCLUSION

Overall, this study shows that the effectiveness of capitation fund management within the National Health Insurance (JKN) Program at health clinics in Surabaya still needs improvement. Findings of non-needs-based planning, weak internal oversight, and low managerial capacity indicate that many challenges remain. To achieve the JKN's goal of providing quality health insurance for all, it is crucial to implement the recommendations generated by this study.

With a better understanding of capitation fund management, it is hoped that clinics can improve their management effectiveness and provide better health services to the community. This



study not only provides insight into existing challenges but also offers practical solutions that stakeholders can implement to improve the overall effectiveness of the JKN Program.

The results of this study are expected to significantly contribute to the development of a region-based health financing governance model and enhance the effectiveness of JKN implementation in Indonesia. Thus, JKN's noble goal of providing quality and equitable health insurance for all Indonesians can be optimally achieved.

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