
**ANALYSIS OF THE INFLUENCE OF INCOME, FINANCIAL LITERACY,
AND PAYMENT ABILITY ON COMPLIANCE OF BPJS KESEHATAN NON-
WAGE RECIPIENT (PBPU) CONTRIBUTION PAYMENTS IN INDONESIA**

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Abstract

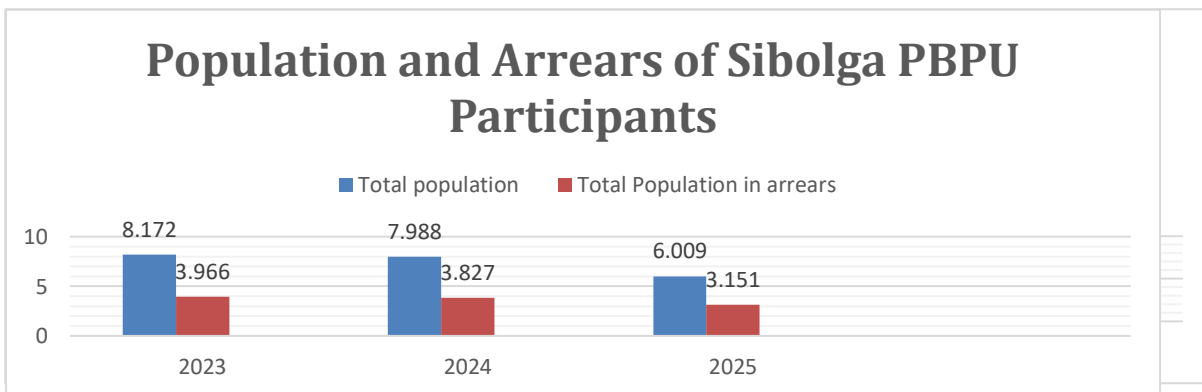
This study investigates the effects of income, financial literacy, and payment capacity on the compliance of Non-Wage Recipient (PBPU) members in paying their BPJS Kesehatan contributions. An associative quantitative research design was employed to examine the relationships among the proposed variables. The study involved 98 PBPU participants registered under the BPJS Kesehatan Sibolga Branch Office, who were selected using a simple random sampling technique. The analysis was based on both primary data collected directly from respondents and secondary data obtained from supporting documents. Data were gathered through a structured Likert-scale questionnaire and documentation, then processed using multiple linear regression analysis with SPSS. Before testing the hypotheses, the research instrument was assessed for validity and reliability, while the regression model was evaluated through classical assumption tests, including normality, multicollinearity, and heteroscedasticity. The empirical findings indicate that income, financial literacy, and payment capacity collectively have a significant influence on contribution payment compliance. When examined individually, income and financial literacy demonstrate positive and statistically significant effects on compliance, whereas payment capacity does not show a significant relationship. In addition, the coefficient of determination (R^2) of 0.875 suggests that 87.5% of the variation in payment compliance can be explained by the variables incorporated in the research model, while the remaining 12.5% is attributable to other factors beyond the scope of this study. These results highlight the importance of economic conditions and financial literacy as key determinants of contribution payment compliance among PBPU members and provide valuable evidence for designing policies aimed at strengthening the long-term sustainability of Indonesia's National Health Insurance program.

Keywords: Income, Financial Literacy, Ability to Pay, Payment Compliance, BPJS Health

INTRODUCTION

The National Health Insurance (Jaminan Kesehatan Nasional/JKN) program constitutes an integral component of Indonesia's National Social Security System (Sistem Jaminan Sosial Nasional/SJSN), which is implemented through a mandatory social health insurance scheme. The program has been administered by BPJS Kesehatan since 1 January 2014, following the institutional transformation of PT Askes (Persero), as mandated by Law No. 40 of 2004 concerning the National Social Security System and Law No. 24 of 2011 concerning the Social Security Administering Body. Through this scheme, all Indonesian citizens are required to enroll as JKN participants to obtain comprehensive health insurance coverage, including preventive, curative, and rehabilitative healthcare services.

Within its implementation framework, JKN participants are classified into several membership categories, one of which is the Non-Wage Recipient (PBPU) segment, commonly referred to as independent participants. Unlike salaried employees whose contributions are deducted directly from their wages, PBPU members are fully responsible for paying their monthly premiums independently. Consequently, the continuity of their membership largely depends on their willingness to comply with premium payment obligations as well as their financial capability. For this reason, payment compliance among PBPU participants represents a critical issue, as it directly affects not only the sustainability of individual membership but also the financial stability of the National Health Insurance program. This concern is reflected in membership data from the BPJS Kesehatan Sibolga Branch Office, which indicate a persistent imbalance between the number of registered independent participants and the proportion of members with overdue premium payments over recent years.



In 2023, the number of independent PBPU participants reached 8,172 individuals, of whom 3,966 had outstanding premium payments. This figure suggests that a considerable proportion of PBPU members had not consistently fulfilled their contribution payment obligations. A similar pattern was observed in 2024, when the total number of registered independent participants declined slightly to 7,988, while the number of members with overdue contributions decreased marginally to 3,827. The downward trend continued in 2025, with PBPU membership falling to 6,009 participants and the number of delinquent

contributors decreasing to 3,151. Although the absolute number of participants in arrears has gradually declined over the three-year period, the proportion of delinquent members relative to the total PBPU population remains substantial. This persistent level of non-compliance continues to pose a significant challenge to premium payment adherence and may adversely affect the financial sustainability of the National Health Insurance program, as highlighted in the internal performance evaluations of the BPJS Kesehatan Sibolga Branch Office (BPJS Kesehatan Sibolga Branch Office, 2026).

In addition, the number of PBPU (Non-Wage Recipient) participants has shown a consistent downward trend over recent years. This pattern reflects the evolving dynamics of National Health Insurance (JKN) membership among workers in the informal sector, which are influenced not only by administrative factors but also by broader socioeconomic conditions. One of the primary contributors to this decline is the accumulation of unpaid insurance premiums. As PBPU members are individually responsible for paying their monthly contributions, delayed or missed payments may result in the suspension of their membership status, ultimately reducing the number of active participants. Furthermore, the unstable and unpredictable income commonly experienced by informal sector workers undermines their ability to maintain continuous enrollment in the program. During periods of economic hardship or rising household expenditures, health insurance contributions are often given lower priority than essential living expenses. Consequently, many participants discontinue their premium payments, causing their membership to become inactive and contributing to the overall decline in active PBPU enrollment.

The decline in the number of PBPU participants may also be explained by changes in membership classification. Some participants are reclassified as Contribution Assistance Recipients (PBI) after meeting the government's eligibility criteria for low-income households, while others move to the Wage Recipient (PPU) category upon obtaining formal employment. Although these individuals remain enrolled in the National Health Insurance (JKN) program, such transitions reduce the number of participants recorded under the PBPU segment. Overall, fluctuations in PBPU membership are shaped by a combination of economic circumstances, changes in membership status, and administrative data adjustments. These conditions suggest that the sustainability of PBPU enrollment is closely associated with household income levels as well as the effectiveness of JKN membership administration.

This phenomenon is consistent with the Deterrence Theory proposed by Becker (1968), which argues that individuals make rational decisions by weighing the expected benefits against the potential costs of their actions. Compliance is more likely to occur when the perceived consequences of non-compliance outweigh the potential advantages of failing to meet one's obligations. In the context of the National Health Insurance program administered by BPJS Kesehatan, income is widely regarded as one of the most influential determinants of participants' ability and willingness to pay their monthly premiums. According to the Head of the BPJS Kesehatan Sibolga Branch Office, individuals with higher and more stable incomes generally demonstrate a greater likelihood of fulfilling their premium payment obligations on time, whereas limited financial resources often become a major barrier to maintaining regular contribution payments (Parinduri, 2026).

Table 1.
Sibolga's Annual Revenue Growth (2022-2024)

Year	Income Value/capita (Million Rp)	Income growth/capita (%)
2022	59,70	+8,84%
2023	63,74	+7,02%
2024	67,49	+5,01%

Source: BPJS Health Sibolga Branch

Statistical data indicate that the per capita income of Sibolga City's population has increased consistently over the past several years. In 2022, per capita income was recorded at IDR 59.70 million, representing an annual growth rate of 8.84%. This upward trend continued in 2023, when per capita income rose to IDR 74.74 million with a growth rate of 7.02%, before reaching IDR 78.49 million in 2024. Based on the 2024 figure, the average monthly income was approximately IDR 6.54 million per person. Despite the continuous increase in nominal income, the pace of income growth has gradually slowed, declining from 8.84% in 2022 to 5.01% in 2024 (Statistics Indonesia of Sibolga City, 2026).

Although household income has continued to rise, the deceleration in its growth rate suggests that improvements in purchasing power and economic resilience have become increasingly limited. Previous empirical studies have demonstrated that increases in income do not necessarily translate into proportional increases in household consumption, as consumer spending is also shaped by other determinants, including inflation, consumption preferences, and saving behavior (Romdon & Saidah, 2021). Furthermore, the relationship between economic growth, income, and consumption is not inherently linear. Consequently, higher income levels do not automatically lead to improved welfare or stronger purchasing power (Maharani & Boedirochminarni, 2024). Under conditions of inflationary pressure and economic uncertainty, households may experience a decline in their real purchasing power even when nominal income continues to increase.

However, these findings differ from those reported by Latifah et al. (2020), who found no statistically significant relationship between respondents' income levels and their compliance with BPJS Kesehatan premium payments ($p = 0.519$). This result suggests that payment compliance cannot be explained solely by participants' financial capacity. Instead, it may also be shaped by other factors, including perceived benefits of the insurance program, institutional trust, and awareness of potential health risks. This perspective is consistent with the theory advanced by Tom R. Tyler (1990; 2006), which emphasizes that compliance is largely driven by institutional legitimacy and perceptions of procedural fairness rather than by economic considerations alone. Individuals are more likely to comply with their obligations when they perceive the system as fair, transparent, and capable of delivering tangible benefits. Consequently, even participants with sufficient financial resources may fail to comply with premium payment requirements if their understanding of the program's value and long-term benefits remains limited.

Conversely, several empirical studies have reported that income exerts a significant influence on premium payment compliance. These conflicting findings indicate the existence

of empirical inconsistency regarding the role of income as a determinant of compliance among PBPU participants. Moreover, relatively few studies have simultaneously examined the combined effects of income, financial literacy, and payment capacity within a single analytical framework, particularly at the regional level, such as in Sibolga City. This limitation highlights an important research gap that warrants further investigation. Specifically, it remains unclear whether income serves as the primary determinant of contribution payment compliance or whether behavioral and financial factors, including financial literacy and household financial management capacity, play a more substantial role. Accordingly, the present study seeks to provide more comprehensive empirical evidence regarding the factors influencing premium payment compliance among PBPU participants. The findings are expected to contribute to the formulation of evidence-based policies aimed at strengthening the sustainability of Indonesia's National Health Insurance (JKN) program at both regional and national levels.

The inconsistent findings reported in previous studies regarding the relationship between income and premium payment compliance reveal an important research gap that warrants further investigation. Despite numerous studies examining factors associated with contribution payment behavior, compliance among Non-Wage Recipient (PBPU) participants of BPJS Kesehatan remains a persistent concern. A substantial proportion of PBPU members continue to experience overdue premium payments, indicating that non-compliance remains a significant challenge within the National Health Insurance (JKN) program. This situation suggests that participant behavior is influenced by a complex interaction of socioeconomic and financial factors that extends beyond income alone.

From a financial perspective, income should not be viewed merely as the amount of earnings received by an individual. Rather, it also encompasses income stability, growth, purchasing power, and expenditure allocation, all of which influence financial well-being and household financial decision-making (Hidayat & Rohmawati, 2023). Although statistical data indicate that community income in Sibolga has increased steadily over recent years, this improvement has not been accompanied by a comparable increase in BPJS Kesehatan premium payment compliance. The continued existence of participants with overdue contributions suggests that higher income alone does not necessarily translate into greater compliance with premium payment obligations.

Another factor that may explain participants' compliance behavior is financial literacy. According to Lusardi and Mitchell (2014), financial literacy refers to an individual's ability to understand financial concepts, manage personal finances effectively, and make informed financial decisions. Nevertheless, the National Survey of Financial Literacy and Financial Inclusion conducted by the Indonesian Financial Services Authority (OJK, 2022) indicates that the level of financial literacy among the Indonesian population remains relatively limited. This condition may contribute to the persistence of overdue premium payments among PBPU participants, implying that inadequate financial knowledge can weaken individuals' ability to prioritize and consistently fulfill their health insurance contribution obligations.

Payment capacity (*ability to pay*) reflects an individual's financial capability after essential living expenses have been met. From the perspective of Islamic economics, this concept is consistent with the view of Muhammad Yasir Nasution, who argues that economic activities should be directed toward fulfilling human needs and promoting equitable and

sustainable welfare. Accordingly, the fulfillment of financial obligations should not compromise an individual's basic standard of living (Dayu, Yasir, & Sugianto, 2024). Nevertheless, empirical evidence indicates that a number of PBPU participants continue to accumulate overdue BPJS Kesehatan premium payments despite possessing adequate financial resources. This phenomenon suggests that payment capacity alone is insufficient to ensure compliance, as participants' payment behavior is also shaped by non-economic factors, including financial literacy, personal awareness, and individual attitudes toward health insurance obligations.

Based on these considerations, income, financial literacy, and payment capacity are expected to be closely associated with premium payment compliance among PBPU participants. However, the magnitude and direction of their respective influences have yet to be established conclusively through empirical investigation. Therefore, this study aims to examine the effects of income, financial literacy, and payment capacity on the premium payment compliance of PBPU participants enrolled in BPJS Kesehatan. Specifically, the study evaluates the contribution of each independent variable to participants' compliance behavior and assesses their effects both individually and collectively within a comprehensive analytical framework. This approach is expected to provide a more robust understanding of the determinants of premium payment compliance and to generate empirical evidence that can support the development of more effective policies for improving the sustainability of Indonesia's National Health Insurance (JKN) program.

RESEARCH METHOD

This study employed a quantitative research approach using an associative research design to examine the relationships and effects of income, financial literacy, and payment capacity on premium payment compliance among Non-Wage Recipient (PBPU) participants of BPJS Kesehatan (Yulian, 2015). A cross-sectional survey design was adopted, whereby data were collected from respondents at a single point in time to capture their current conditions and perceptions.

The target population comprised all PBPU participants registered within the jurisdiction of the BPJS Kesehatan Sibolga Branch Office, totaling 6,009 individuals (BPJS Kesehatan Sibolga Branch Office, 2026). The sample was selected using a simple random sampling technique, ensuring that each member of the population had an equal probability of being included in the study (Ghozali, 2011). Based on the Slovin formula with a 10% margin of error, a final sample of 98 respondents was obtained.

The study utilized both primary and secondary data sources. Primary data were collected directly from PBPU participants through a structured questionnaire, while secondary data were obtained from official BPJS Kesehatan documents, including membership records, data on overdue premium payments, and regulations related to the implementation of the National Health Insurance (JKN) program. Data collection was conducted using a structured questionnaire with a five-point Likert scale and supported by documentary evidence. The questionnaire served as the principal research instrument and consisted of closed-ended statements designed to measure respondents' perceptions of each research variable. Documentary data were incorporated to complement and validate the

quantitative findings. Prior to data collection, the questionnaire underwent validity and reliability testing to ensure that all measurement items met the required psychometric standards.

RESULTS AND DISCUSSION

This study was conducted to examine the effects of income, financial literacy, and payment capacity on the premium payment compliance of Non-Wage Recipient (PBPU) participants enrolled in BPJS Kesehatan. The analysis was based on primary data collected through a structured questionnaire administered to 98 PBPU participants selected as research respondents. Data processing and statistical analyses were performed using the Statistical Package for the Social Sciences (SPSS). The analytical procedure began with descriptive statistical analysis to provide an overview of the characteristics of the research data. Descriptive statistics were used to summarize the distribution of each variable by presenting the minimum and maximum values, mean scores, and standard deviations. These measures provide an initial understanding of respondents' characteristics and the overall distribution of the variables prior to conducting inferential statistical analyses.

Table 2
Demographic Profile

Demografis	Kategori	Frekuensi	Persentase
Jenis Kelamin	Laki-laki	48	49.0%
	Perempuan	50	51.0%
Usia	< 25 Tahun	76	77.6%
	25 - 35 Tahun	19	19.4%
	36 - 45 Tahun	2	2.0%
	> 45 Tahun	1	1.0%
Pekerjaan Utama	Wiraswasta	21	21.4%
	Petani/Nelayan	21	21.4%
	Pedagang	38	38.8%
	Ojek/Driver	9	9.2%
	Desain Grafis	3	3.1%
	Akuntan	2	2.0%
	Konten Kreator	2	2.0%
	Volunteer	1	1.0%
	Pengacara	1	1.0%
Lama Menjadi Peserta PBPU	< 1 Tahun	54	55.1%
	1 - 3 Tahun	29	29.6%
	3 - 6 Tahun	10	10.2%
	> 6 Tahun	5	5.1%

Source: BPJS Health Sibolga Branch

As presented in Table 2, the study involved a total of 98 respondents, with female participants accounting for a slightly larger proportion (51.0%) than male participants (49.0%). In terms of age distribution, the sample was predominantly composed of individuals younger than 25 years (77.6%), indicating that most respondents belonged to the early productive age group, which is generally characterized by greater economic mobility and

adaptability. Regarding occupational background, the majority of respondents were employed in the informal sector, primarily as traders (38.8%), followed by self-employed workers and farmers or fishermen (21.4% each). This occupational profile reflects the prevalence of irregular and unstable income sources, which may influence participants' capacity to fulfill their premium payment obligations. Furthermore, more than half of the respondents (55.1%) had been enrolled as PBPU participants for less than one year, suggesting that many were still in the initial stage of adapting to the National Health Insurance (JKN) system. Overall, these demographic characteristics indicate that the sample was dominated by young individuals working in the informal sector with relatively short membership duration, factors that may theoretically influence financial literacy, payment capacity, and premium payment compliance.

Following the descriptive analysis, the quality of the research instrument was evaluated through validity and reliability testing to ensure that each questionnaire item accurately and consistently measured the intended constructs. Once the instrument met the required psychometric standards, the analysis proceeded with a series of classical assumption tests, including normality, multicollinearity, and heteroscedasticity tests, to verify the suitability of the regression model for statistical analysis. After confirming that all underlying assumptions had been satisfied, multiple linear regression analysis was performed to assess the effects of the independent variables on the dependent variable. The hypotheses were evaluated using the *t*-test to examine the partial effects of each independent variable and the *F*-test to determine their simultaneous influence. Through this analytical procedure, the study seeks to provide comprehensive empirical evidence regarding the determinants of premium payment compliance among PBPU participants enrolled in BPJS Kesehatan.

Validity Test

Table 3
Validity Test

Variables	Item	R Count	R Table	Information
Income	X 1.1	0.774	0.1986	Valid
	X 1.2	0.738	0.1986	Valid
	X 1.3	0.802	0.1986	Valid
	X 1.4	0.750	0.1986	Valid
	X 1.5	0.817	0.1986	Valid
Financial Literacy	X 2.1	0.766	0.1986	Valid
	X 2.2	0.821	0.1986	Valid
	X 2.3	0.751	0.1986	Valid
	X 2.4	0.824	0.1986	Valid
	X 2.5	0.809	0.1986	Valid
Ability to Pay	X 3.1	0.832	0.1986	Valid
	X 3.1	0.799	0.1986	Valid
	X 3.1	0.787	0.1986	Valid
	X 3.1	0.793	0.1986	Valid
	X 3.1	0.744	0.1986	Valid
	Y 1	0.839	0.1986	Valid

Payment Compliance	Y2	0.806	0.1986	Valid
	Y3	0.878	0.1986	Valid
	Y4	0.879	0.1986	Valid
	Y5	0.878	0.1986	Valid

Source: BPJS Health Sibolga Branch

The results of the validity test indicate that all measurement items representing the variables of income, financial literacy, payment capacity, and premium payment compliance satisfied the established validity criteria. Accordingly, the research instrument was considered valid and appropriate for data collection, as each item demonstrated an adequate ability to measure the intended constructs accurately and effectively.

Rehabilitas Test

Tabel 4
Reabilitas Test

Variables	Cronbach Alpha	R Table	Information
X1	0.834	0.60	Reliabel
X2	0.854	0.60	Reliable
X3	0.850	0.60	Reliable
Y	0.909	0.60	Reliable

Source: BPJS Health Sibolga Branch

The reliability analysis demonstrated that all research variables, namely income, financial literacy, payment capacity, and premium payment compliance, achieved Cronbach's Alpha coefficients exceeding the minimum acceptable threshold of 0.60. These findings indicate that the measurement instrument possesses satisfactory internal consistency and can therefore be considered reliable for subsequent statistical analyses.

Normality Test

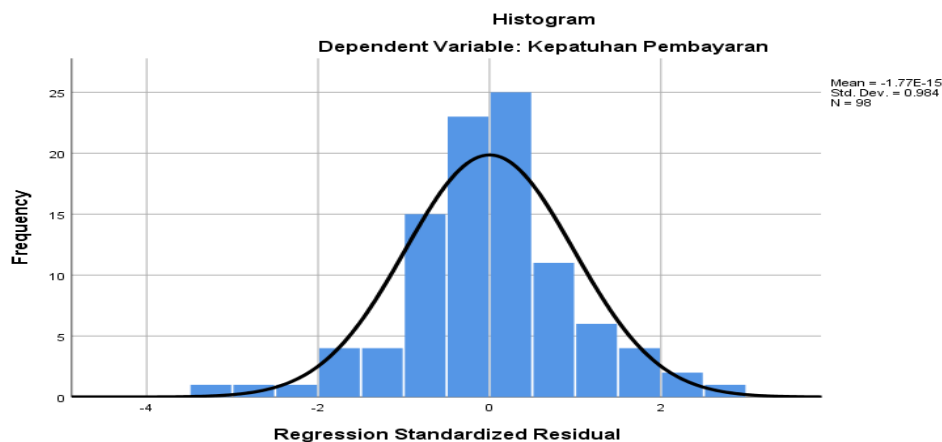


Figure 2.
Histogram of Standardized Residual Normality Test
Source: BPJS Health Sibolga Branch

The histogram shows a residual distribution in the form of a bell curve with a mean close to zero and a standard deviation close to one, so the data is stated to meet the assumption of normality.

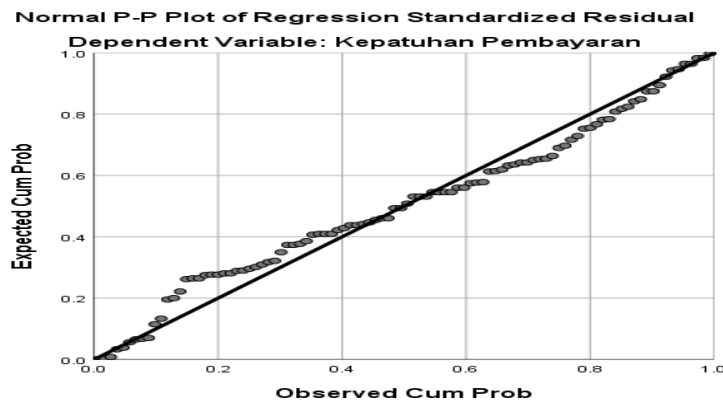


Figure 3.

Normal P–P Plot of Standardized Residuals in the Payment Compliance Regression Model

Source: SPSS Data Processing 2026

The results of the normality test using a Normal P–P Plot graph show that the residuals are distributed around the diagonal line and consistently follow the direction of the line. The deviations are relatively small and do not form a specific pattern that deviates systematically. Therefore, the residuals of the regression model can be declared normally distributed, thus meeting the assumption of normality in this study.

Heteroscedasticity Test

Table. 5
Heteroscedasticity Test
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
	B	Std. Error			
(Constant)	2.338	.423		5.533	.000
Pendapatan	-.049	.048	-.235	-1.017	.312
Literasi Keuangan	-.008	.044	-.039	-.180	.858
Kemampuan Membayar	-.020	.044	-.099	-.464	.644

a. Dependent Variable: Aallbs_Res

Source: BPJS Health Sibolga Branch

Based on the results of the heteroscedasticity test using the Glejser method, it was found that all independent variables had a significance value greater than 0.05. Thus, it can be concluded that there are no symptoms of heteroscedasticity in the research model, so the regression model meets the assumption of homoscedasticity.

Multicollinearity Test

Table 6
Multicollinearity Test
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	5.610	.662		8.478	.000		
Pendapatan	.337	.075	.392	4.486	.000	.174	5.757
Literasi Keuangan	.440	.069	.529	6.415	.000	.195	5.128
Kemampuan Membayar	.040	.069	.047	.583	.562	.202	4.954

a. Dependent Variable: Kepatuhan Pembayaran Peserta BPJS Kesehatan
Source: BPJS Health Sibolga Branch

The multicollinearity assessment demonstrated that all independent variables met the established diagnostic criteria, with tolerance values exceeding 0.10 and Variance Inflation Factor (VIF) values remaining below the critical threshold of 10. These results confirm the absence of multicollinearity among the explanatory variables, indicating that each predictor contributes distinct information to the regression model. Therefore, the independent variables are considered statistically suitable for subsequent multiple linear regression analysis.

Linear Regression Test

Ghozali (2011) defines multiple linear regression analysis as a statistical approach designed to evaluate the relationships between a dependent variable and multiple independent variables. This analytical method enables researchers to assess both the direction and magnitude of the effects of the explanatory variables on the outcome variable, while simultaneously testing the statistical significance of these relationships.

$$Y = a + b_1X_1 + b_2X_2 + b_3X_3 + E$$

Keterangan :

Y : Payment Compliance of BPJS Health BPJS Participants
a : Constant (Fixed value)
b₁b₂b₃ : Regression coefficient (Estimated value)
X₁ : Income
X₂ : Financial Literacy
X₃ : Ability to Pay
E : Error (Interference Variable)

Table.7
Linear Regression Test
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	5.610	.662		8.478	.000
Pendapatan	.337	.075	.392	4.486	.000
Literasi Keuangan	.440	.069	.529	6.415	.000
Kemampuan Membayar	.040	.069	.047	.583	.562

a. Dependent Variable: Payment Compliance of BPJS Health PBPU Participants

Source: BPJS Health Sibolga Branch

$$Y = 5.610 + 0.337 X_1 + 0.440 X_2 + 0.040 X_3 + E$$

1. The regression constant of **5.610** indicates that, when the independent variables income, financial literacy, and payment capacity are assumed to remain constant or equal to zero, the predicted level of premium payment compliance among PBPU participants is **5.610**. This value represents the baseline level of the dependent variable in the absence of the explanatory variables included in the model.
2. The income variable (X_1) produced a regression coefficient of 0.337 with a significance value of 0.000 ($p < 0.05$). This result demonstrates that income has a positive and statistically significant effect on premium payment compliance. In other words, participants with higher income levels tend to exhibit greater compliance in fulfilling their BPJS Kesehatan premium payment obligations.
3. The financial literacy variable (X_2) yielded a regression coefficient of 0.440 with a significance value of 0.000 ($p < 0.05$). These findings indicate that financial literacy has a positive and statistically significant influence on premium payment compliance. This suggests that individuals with a better understanding of financial management are more likely to fulfill their contribution payment responsibilities consistently.
4. The payment capacity variable (X_3) generated a regression coefficient of 0.040 with a significance value of 0.562 ($p > 0.05$). Therefore, payment capacity does not have a statistically significant effect on premium payment compliance in this study. This finding implies that financial capacity alone is insufficient to explain participants' compliance behavior, indicating that other factors may play a more prominent role in influencing compliance with BPJS Kesehatan premium payment obligations.

Simultaneous Test

Table 8
Simultaneous Test (F Test)
ANOVA^a

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	793.491	3	264.497	219.946	.000 ^b

Residual	113.040	94	1.203		
Total	906.531	97			

a. Dependent Variable: Payment Compliance of BPJS Health PBPB Participants

b. Predictors: (Constant), Ability to Pay, Financial Literacy, Income

Source: BPJS Health Sibolga Branch

The results of the simultaneous significance test indicate that the calculated F value was 219.946, whereas the critical F value at a significance level of $\alpha = 0.05$, with $df_1 = 3$ and $df_2 = 94$, was approximately 2.70. Since the calculated F statistic substantially exceeded the critical value ($219.946 > 2.70$), the null hypothesis (H_0) was rejected, while the alternative hypothesis (H_3) was accepted. These findings demonstrate that income, financial literacy, and payment capacity jointly exert a statistically significant influence on the premium payment compliance of PBPB participants enrolled in BPJS Kesehatan.

Partial Test

Table.9
Partial Test (t-Test)
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	5.610	.662		8.478	.000
Pendapatan	.337	.075	.392	4.486	.000
Literasi Keuangan	.440	.069	.529	6.415	.000
Kemampuan Membayar	.040	.069	.047	.583	.562

a. Dependent Variable: Payment Compliance of BPJS Health PBPB Participants

Source: BPJS Health Sibolga Branch

H1 : The Influence of Income on Payment Compliance

The results of the *t*-test indicate that the calculated *t* value for the income variable was 4.486, which exceeded the critical *t* value of 1.98498 ($p < 0.05$). Therefore, the null hypothesis (H_0) was rejected, and the research hypothesis (H_1) was accepted. These findings confirm that income has a positive and statistically significant effect on premium payment compliance among BPJS Kesehatan participants. This suggests that individuals with higher income levels are more likely to fulfill their premium payment obligations consistently.

H2 : The Influence of Financial Literacy on Payment Compliance

The financial literacy variable produced a calculated *t* value of 6.415, which was greater than the critical *t* value of 1.98498. Accordingly, H_2 was accepted, while H_0 was rejected. This result indicates that financial literacy has a positive and statistically significant influence on premium payment compliance. Participants with a better understanding of financial concepts and personal financial management are more capable of planning their expenditures and prioritizing the timely payment of health insurance contributions.

H3 : Effect of Payment Capacity on Premium Payment Compliance

For the payment capacity variable, the calculated t value was 0.583, which was lower than the critical t value of 1.98498. Consequently, H_3 was rejected, and H_0 was accepted. This finding demonstrates that payment capacity does not have a statistically significant effect on premium payment compliance in the context of this study. The results imply that participants' compliance behavior is influenced more strongly by objective economic conditions and financial knowledge, particularly income and financial literacy, than by their perceived ability to pay.

R Square Test

Table.10
R Square Test (R2)

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.936 ^a	.875	.871	1.097

a. Predictors: (Constant), Ability to Pay, Financial Literacy, Income

Source: BPJS Health Sibolga Branch

According to the Model Summary results, the correlation coefficient (R) was 0.936, indicating a very strong relationship between the independent variables—income, financial literacy, and payment capacity—and the dependent variable, namely premium payment compliance. Furthermore, the coefficient of determination (R^2) was 0.875, demonstrating that 87.5% of the variation in premium payment compliance can be jointly explained by the three independent variables included in the regression model. The remaining 12.5% of the variance is attributable to other factors that were not incorporated into the present study.

Discussion

Variabel X1 to Variable Y

The findings of this study indicate that income (X_1) has a positive and statistically significant effect on the premium payment compliance of PBPU participants enrolled in BPJS Kesehatan. The regression coefficient for the income variable was 0.337, with a significance level of 0.000 ($p < 0.05$), confirming that higher income levels are associated with greater compliance in fulfilling premium payment obligations. This result suggests that participants with stronger financial resources are more capable of maintaining regular contribution payments and are therefore more likely to remain compliant with the National Health Insurance (JKN) program. From a theoretical perspective, these findings are consistent with Deterrence Theory proposed by Becker (1968), which argues that individuals make rational decisions by evaluating the expected benefits and potential consequences of their actions. In the context of this study, participants with higher income are more likely to recognize the economic advantages of maintaining active health insurance coverage while avoiding the potential risks associated with non-compliance. The present findings are also supported by the work of Nurbaiti (2023), who emphasizes that individual financial behavior is strongly influenced by the ability to manage available income effectively. Likewise, Nasution, Atika, and Daulay (2022) argue that economic decision-making is guided by rational considerations of costs and benefits. Accordingly, individuals with higher income are generally better

positioned to allocate financial resources efficiently and to prioritize the timely payment of health insurance premiums.

Empirically, the results demonstrate that income represents more than a measure of economic capacity. It also influences how individuals prioritize household expenditures, including expenditures related to health protection. Participants with higher income levels typically enjoy greater financial flexibility, enabling them to regard BPJS Kesehatan premium payments as an essential and sustainable financial commitment rather than a discretionary expense. Nevertheless, the findings also indicate that income alone does not fully explain payment compliance. Some participants with adequate financial resources still failed to make regular premium payments, suggesting that additional behavioral and cognitive factors may also shape compliance decisions. Therefore, income should be viewed as an important determinant of premium payment compliance, while recognizing that its influence operates alongside other factors, such as financial literacy, personal awareness, and financial management behavior. This evidence highlights the multidimensional nature of compliance behavior and underscores the importance of integrating both economic and behavioral perspectives when developing strategies to improve premium payment compliance among PBPU participants.

Variabel X2 to Variabel Y

The findings of this study demonstrate that financial literacy (X_2) has a positive and statistically significant effect on premium payment compliance among PBPU participants enrolled in BPJS Kesehatan. The regression analysis produced a coefficient of 0.440, with a significance value of 0.000 ($p < 0.05$), indicating that financial literacy is one of the strongest predictors of participants' compliance behavior. This result suggests that individuals who possess a higher level of financial knowledge and financial management skills are more likely to fulfill their premium payment obligations consistently and on time. These findings are consistent with the theoretical perspective proposed by Tyler (1990, 2006), which emphasizes that compliance is influenced not only by economic capacity but also by individuals' understanding of and commitment to their obligations. Participants with higher levels of financial literacy are generally better equipped to evaluate financial choices, anticipate future financial needs, and allocate resources more effectively. Consequently, they are more likely to recognize the importance of maintaining active health insurance coverage through regular premium payments. The present findings are also in line with the work of Lusardi and Mitchell (2014), who argue that financial literacy enhances individuals' ability to make informed financial decisions and improve long-term financial planning. Similarly, Nurbaiti (2023) reported that financial literacy contributes significantly to the development of responsible financial management behavior. Taken together, these studies suggest that financial literacy extends beyond financial knowledge alone and plays an essential role in shaping compliance with financial obligations, including the payment of BPJS Kesehatan premiums.

From a conceptual perspective, financial literacy enables individuals to prioritize expenditures based on their long-term financial interests and to appreciate the value of health insurance as a form of financial protection. Individuals with adequate financial literacy are generally more capable of budgeting their income efficiently, balancing current consumption with future financial commitments, and maintaining regular premium payments despite

changing economic conditions. Therefore, financial literacy should be viewed not merely as a cognitive competency but also as a behavioral foundation that promotes responsible financial decision-making and strengthens premium payment compliance among PBPU participants. These findings highlight the importance of financial education initiatives as a strategic approach to improving compliance and supporting the long-term sustainability of Indonesia's National Health Insurance (JKN) program.

Variabel X3 to Variabel Y

The results of this study indicate that **payment capacity (X_3)** does not have a statistically significant effect on premium payment compliance among PBPU participants enrolled in BPJS Kesehatan. This conclusion is supported by a significance value of 0.562 ($p > 0.05$) and a regression coefficient of 0.040, suggesting that financial capacity alone is insufficient to explain participants' compliance behavior. Although individuals may possess adequate financial resources, this does not necessarily translate into consistent fulfillment of their premium payment obligations. Accordingly, payment capacity cannot be regarded as the primary determinant of premium payment compliance within the context of this study. From a theoretical perspective, these findings are consistent with the framework proposed by Tyler (1990, 2006), which argues that compliance is shaped not only by economic considerations but also by non-economic factors, including individual awareness, perceived legitimacy, and attitudes toward institutional obligations. In the context of the National Health Insurance (JKN) program, participants' willingness to pay premiums is influenced by how they perceive the importance of maintaining health insurance coverage and the benefits generated by the program. Consequently, even when participants have sufficient financial resources, they may still fail to comply if they lack an adequate understanding of the program or do not perceive substantial value in maintaining active membership. The present findings are also supported by the study of Juliana Nasution et al. (2022), which demonstrated that financial literacy significantly enhances financial inclusion by improving individuals' ability to understand and utilize financial services effectively. These findings reinforce the view that financial literacy plays a more influential role than financial capacity alone in shaping responsible financial behavior. Within the context of BPJS Kesehatan, participants who possess stronger financial knowledge are generally more capable of planning their expenditures, recognizing the long-term benefits of health insurance, and consistently meeting their premium payment obligations.

Overall, this study confirms that payment capacity should be regarded as a supporting factor rather than a direct predictor of premium payment compliance. Participants' decisions to pay their premiums regularly are influenced by a broader combination of economic, cognitive, and behavioral factors. Therefore, efforts to improve compliance among PBPU participants should not focus exclusively on increasing economic capacity. Greater attention should also be directed toward strengthening financial literacy, enhancing public awareness of the importance of health insurance, and improving participants' understanding of the long-term benefits provided by the BPJS Kesehatan program. Such integrated strategies are expected to promote more sustainable compliance behavior and contribute to the long-term sustainability of Indonesia's National Health Insurance (JKN) system.

Variabel X1, X2, X3 to Variabel Y

The findings of this study reveal that income, financial literacy, and payment capacity collectively exert a statistically significant influence on premium payment compliance among PBPU participants enrolled in BPJS Kesehatan. This conclusion is supported by the results of the simultaneous significance test, in which the calculated F value exceeded the critical F value and the significance level was below 0.05. In addition, the coefficient of determination (R^2) of 0.875 indicates that 87.5% of the variation in premium payment compliance can be explained jointly by these three independent variables, while the remaining variation is attributable to other factors not included in the regression model. These results demonstrate that the proposed model possesses strong explanatory power and is effective in explaining participants' compliance behavior. From a theoretical perspective, the findings are consistent with Deterrence Theory proposed by Becker (1968), which argues that individuals make rational decisions by weighing expected benefits against potential costs and consequences. Within the context of this study, income reflects participants' economic capacity, whereas financial literacy enhances their ability to manage financial resources efficiently and to make informed financial decisions. Consequently, individuals with adequate financial resources and stronger financial knowledge are more likely to fulfill their premium payment obligations in a consistent manner.

The findings are also supported by Tyler's Compliance Theory (Tyler, 1990; 2006), which emphasizes that compliance behavior is influenced not only by economic considerations but also by individuals' awareness, understanding, and perceptions of the legitimacy and importance of institutional obligations. Accordingly, premium payment compliance among PBPU participants should be understood as the outcome of an interaction between financial capability and behavioral factors rather than being determined solely by income. This interpretation is consistent with the work of Lusardi and Mitchell (2014), who highlight the critical role of financial literacy in improving financial decision-making, and is further reinforced by empirical evidence reported by Nurbaiti (2023) and Juliana Nasution et al. (2022). Collectively, these studies suggest that income, financial literacy, and payment capacity contribute simultaneously to shaping responsible financial behavior and strengthening compliance with BPJS Kesehatan premium payment obligations.

The findings of this study demonstrate that compliance with BPJS Kesehatan premium payments among Non-Wage Recipient Participants (PBPU) is shaped by the combined influence of income, financial literacy, and payment capacity. Income reflects an individual's economic resources, while payment capacity indicates the financial readiness to fulfill premium obligations. Financial literacy, meanwhile, enables participants to manage their finances effectively and prioritize expenditures based on rational decision-making. The interaction of these three factors plays a crucial role in fostering consistent and sustainable compliance with BPJS Kesehatan premium payments.

CONCLUSION

This study concludes that income, financial literacy, and payment capacity collectively exert a significant influence on premium payment compliance among Non-Wage Recipient Participants (PBPU) of BPJS Kesehatan. The proposed research model demonstrates strong explanatory power, as reflected by a coefficient of determination (R^2) of 0.875, indicating that

the independent variables account for a substantial proportion of the variance in compliance behavior. The partial analysis reveals that both income and financial literacy have positive and statistically significant effects on participants' compliance with premium payments. These findings suggest that stronger economic conditions and higher levels of financial knowledge encourage individuals to fulfill their payment obligations more consistently. In contrast, payment capacity does not exhibit a statistically significant effect, indicating that it is not a primary determinant of compliance within the context of this study. Overall, compliance with BPJS Kesehatan premium payments appears to be driven more by economic and cognitive factors particularly income and financial literacy than by individuals' perceived ability to pay. These findings highlight the importance of strengthening financial literacy as a strategic approach to improving premium payment compliance among PBPU participants

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