

Analysis of Kenali Promotive Preventive Implementation to Achieve the Effectiveness of Prolanis Visits in Bulukumba, 2023

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Received October 23, 2025

Revised February 13, 2025

Accepted February 26, 2025

Available online February 27, 2025

Abstract

Aims: This research aims to analyze the effectiveness of Kenali Promprev's implementation in achieving the effectiveness level of Prolanis visits at FKTP in Bulukumba Regency in 2023. Kenali Promprev is an educational program delivered through direct meetings, Focus Group Discussions, and feedback via WhatsApp groups focusing on promotive and preventive actions such as Health History Screening.

Methods: The method used is a descriptive quantitative and Mann-Whitney test, utilizing secondary data from Prolanis participant visits to FKTP in 2023. The data is then compared to evaluate the improvement in the effectiveness of Prolanis visits before and after the implementation of Kenali Promprev in Bulukumba Regency in 2023.

Results: The findings indicate that the implementation of Kenali Promprev starting July 2023 has resulted in increased registration of Prolanis participants by 1,005 (70%), 1,123 (127%) participants conducting visits, and 570 (679%) controlled Prolanis participants.

Conclusion: Consequently, the effectiveness level of Prolanis visits at FKTP has improved, with potential implications for enhancing the Controlled Prolanis Participant Ratio, a key Capitation indicator (KBK) influencing FKTP monthly income.

Keywords: adolescence FKTP, Preventive Promotive, Prolanis, Strategic Purchasing.

Introduction

The National Health Insurance (JKN), part of the National Social Security System managed by BPJS Kesehatan (UU RI Nomor 40, 2004), provides healthcare financing based on the Social Security Guarantee Program (UU RI Nomor 24, 2011). To ensure JKN's sustainability, BPJS Kesehatan has set five priorities for 2023, including safeguarding its financial health through stakeholder engagement and enhanced preventive efforts (Kresnowati, 2022; Mukti, 2023). One key preventive measure is the Chronic Disease Management Program (Prolanis), implemented in all Primary Health Care Facilities (FKTP). Polaris aims to improve the quality of life for chronic disease patients through efficient, cost-effective healthcare (BPJS Kesehatan, 2019).

The Prolanis program plays a crucial role for individuals with hypertension (HT) and type 2 diabetes mellitus (DM). Through a proactive approach involving education, support, and regular monitoring, Prolanis assists in managing chronic diseases, promotes health, and ensures proper medication administration for HT and type 2 DM patients (Betan et al., 2023). Participants benefit by better understanding their health conditions, adopting healthier lifestyles, and managing symptoms and potential complications.

Data from BPJS Kesehatan in 2021 reveals that Diabetes Mellitus was one of the ten most frequent diagnoses in both Primary Health Facilities (FKTP) and Secondary Health Facilities (FKRTL) (BPJS Kesehatan, 2022). By 2023, the prevalence of non-communicable diseases such as DM and HT had increased, underscoring the importance of preventive measures and health education to reduce the burden of chronic disease (Badan Pusat Statistik, 2023).

The growing burden of DM and HT poses a significant challenge for BPJS Kesehatan. Therefore, these chronic diseases must be managed at primary health services by implementing the Prolanis program (Manullang et al., 2021). One of the main benefits of the Prolanis program is that every participant receives health consultation services and check-ups at a Primary Health Facility (FKTP) at least once a month (BPJS Kesehatan, 2014). Prolanis has two process indicators: the Participant Visit Indicator and the Participant Checked Indicator. The Participant Visit Indicator measures the ratio of Prolanis participants visiting for DM Type-2 and HT-related activities at FKTP (BPJS Kesehatan, 2019). This challenge is a focus for FKTP and BPJS Kesehatan, with registered participants expected to undergo health history screenings and specific health screenings to increase the effectiveness of Prolanis visits. BPJS Kesehatan collaborates with primary-level health facilities to support these activities (Parinussa et al., 2022).

Based on the Deputy Region IX Director's Decision Number 53 of 2023 concerning the Target Level of Effectiveness for Prolanis Visits in 2023, a target was set on April 12, 2023, for the Bulukumba Branch Office at 77% (Keputusan DEPDIRWIL IX BPJS Kesehatan, 2023). However, in April 2023, achieving the Effectiveness Level of Prolanis at the Bulukumba Branch Office, particularly for Prolanis DM, did not meet the target. Only 1,101 DM participants visited out of 1,529 registered DM participants, resulting in an effectiveness indicator of 72% against the target of 77%. Bulukumba, which has the highest number of registered DM and HT patients among the four regencies in the Bulukumba Branch Region (Bulukumba, Bantaeng, Jeneponto, and Selayar Island), recorded the lowest effectiveness in Prolanis.

Despite various efforts such as socialization and education on Non-Communicable Diseases (NCDs) and the Prolanis Program through direct means and various media channels like KIE (Communication, Information, and Education) and PIL (Providing Direct Information), the achievement of the Effectiveness Level of Prolanis Visits in FKTP in Bulukumba Regency remained stagnant. Consequently, during the Monitoring Evaluation Capitation Performance Based (KBK) conducted collaboratively with the Health Service and FKTP Leadership, it was decided to undertake integrated massive socialization, education, and monitoring efforts. This initiative is encapsulated as optimized mini-class sessions focusing on promotive and preventive measures, known as Kenali Promprev.

Kenali Promprev is a program that promotes preventive education through mini-classes involving 5-10 FKTP per session. It includes regular monitoring and evaluation through direct meetings, Focus Group Discussions (FGD), and feedback via WhatsApp groups. This program aims to monitor achievements such as Health History Screening, Specific Health Screening, the effectiveness of Prolanis visits, and the control of Prolanis participants. Collaboration among the Health Service, FKTP, and BPJS Kesehatan is integral to monitoring these activities effectively. There is no previous research on Kenali Promprev. The novelty of this research lies in the implementation of Kenali Promprev, which has resulted in remarkable achievements: a 70% increase in the registration of Prolanis participants, a 120% increase in participants conducting visits, and a 679% increase in controlled Prolanis participants.

To streamline monitoring and feedback processes for BPJS Kesehatan, data is consolidated into an integrated Kenali Promprev Dashboard within the Self-Service Business Intelligence (SSBI) Application, implemented since July 2023. This dashboard enables efficient tracking and evaluation of the program's effectiveness, ensuring continuous improvement in promotive and preventive healthcare activities. This research aims to analyze the effectiveness of Kenali Promprev's implementation in achieving the effectiveness level of Prolanis visits at FKTP in Bulukumba Regency in 2023.

Methods

We used a quantitative descriptive study. This method begins with data collection, followed by interpreting and processing the data to produce an overview or description of a situation using numbers (Kurniawan & Puspitaningtyas, 2016). The data presented will provide a detailed description of the effectiveness of the implementation, which will be monitored intensively and objectively (Wahidah et al., 2023). Descriptive research is conducted to provide a more detailed picture of a phenomenon or issue (Purwanza et al., 2022). The population is all JKN members registered as Prolanis participants for DM and HT, who visited and were recorded in the Primary Care Application at all FKTPs collaborating with BPJS Kesehatan in Bulukumba Regency in 2023.

This research uses secondary data from the Kenali Promprev Dashboard in the Self-Service Business Intelligence (SSBI) Application, collected in 2023. The data presented in this study is aggregate, representing the number of participants and ensuring the confidentiality of individual participant's personal information to prevent misuse that could potentially harm Prolanis participants. The Prolanis visit data used in this study is aligned with the data entered by FKTP, as all data from the Primary Care Application at FKTPs is captured in the BPJS Kesehatan SSBI dashboard. This data is then fed back to the FKTP to ensure that the information in the SSBI dashboard matches the data in the Primary Care Application at the FKTP, maintaining data consistency and accuracy. The current study compares the increased Level of Effectiveness of Prolanis Visits before (Quarter 2 of 2023) and after (Quarter 4 of 2023) the implementation of Kenali Promprev. The Level of Effectiveness of Prolanis is measured by comparing the number of Type 2 Diabetes Mellitus (DM) and Hypertension (HT) participants visiting Primary Health Facilities with the number of DM and HT participants registered at each FKTP in Bulukumba Regency. We use the Mann-Whitney U Test to compare two unrelated (independent) groups and determine whether there is a significant difference between them (Madhuri, 2022). After that, it will be analyzed using a quantitative descriptive approach to describe our finding data (Alfatih, 2022).

Results

Based on the study method above, the following explanations can be provided:

1. Achievement of Prolanis DM Effectiveness Level in Bulukumba Regency in 2023
a. Before Implementation of Kenali Promprev in Bulukumba Regency

Table 1. Top 10 FKTP Prolanis DM Registered Participants and Achieved DM Effectiveness Levels up to Q2 2023 in Bulukumba Regency

No	Name of FKTP	up to. Q2 2023						
		1. Diagnosed with DM	2. Registered with Prolanis DM	3. Prolanis DM Visit	4. Prolanis DM Checked	5. Prolanis Stable DM	% DM Visit Rate	% Stable DM Rate
a	b	c	d	e	f	g	h=e/d	i=g/c
1	DPP dr. H. Abd Radjab	273	76	49	29	20	64,47%	7,33%
2	PONRE	483	43	35	-	-	81,40%	0,00%
3	HERLANG	232	9	9	-	-	100,00%	0,00%
4	CAILE	599	39	25	12	2	64,10%	0,33%
5	BONTOTIRO	109	58	52	17	6	89,66%	5,50%
6	BONTOBANG UN	544	45	43	-	-	95,56%	0,00%
7	DPP dr. Abd. Jalil	200	51	45	-	-	88,24%	0,00%
8	UJUNG LOE	114	47	33	33	4	70,21%	3,51%
9	KLINIK 35	236	2	0	0	0	0,00%	0,00%
10	BONTOBAHA RI	265	7	4	0	0	57,14%	0,00%
KAB. BULUKUMBA		5.163	669	476	113	46	71,15%	0,89%

The number of registered Prolanis Diabetes Mellitus (DM) participants was 669, with only 476 of them having visited before the implementation of Kenali Promprev (Table 1).

b. After Implementation of Kenali Promprev in Bulukumba Regency

The impact of implementing Kenali Promprev at FKTP showed a significant increase in registered Prolanis Diabetes Mellitus (DM) participants by 1,146. Furthermore, there was a rise in Prolanis DM participants visiting FKTP by 964 individuals and an increase in Controlled Prolanis DM participants by 252. As a result, the effectiveness of Prolanis DM rose from 71.15% in Q2 2023 to 84.12% in Q4 2023, meeting the 77% target. Kenali Promprev's implementation also elevated the 2023 Controlled Prolanis DM Participant Ratio (RPPT DM) in Bulukumba Regency to 3.37%. However, it did not reach the ≥ 5% RPPT target, one of the Performance Based Capitation (KBK) indicators at FKTP. Performance-based capitation is a payment system based on performance indicators at Primary Health Care Facilities (FKTP), including the contact rate, the ratio of non-specialist referrals, and the ratio of controlled Prolanis participants (Table 2).

Table 2. Top 10 FKTP Prolanis DM Registered Participants and Achieved DM Effectiveness Levels up to Q4 2023 in Bulukumba Regency

up to. Q4 2023								
No	Name of FKTP	1. Diagnosed with DM	2. Registered with Prolanis DM	3. Prolanis DM Visit	4. Prolanis DM Checked	5. Prolanis Stable DM	% DM Effectiveness Visit Rate	% Stable DM Rate
<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>	<i>g</i>	$h=e/d$	$i=g/c$
1	DPP dr. H. Abd Radjab	422	142	99	54	49	69,72%	11,61%
2	PONRE	689	91	86	15	5	94,51%	0,73%
3	HERLANG	324	86	73	1	-	84,88%	0,00%
4	CAILE	962	74	52	29	15	70,27%	1,56%
5	BONTOTIRO	129	70	67	38	19	95,71%	14,73%
6	BONTOBAN GUN	885	67	56	46	44	83,58%	4,97%
7	DPP dr. Abd. Jalil	302	63	54	2	-	85,71%	0,00%
8	UJUNG LOE	175	56	43	42	17	76,79%	9,71%
9	KLINIK 35	321	51	44	8	2	86,27%	0,62%
10	BONTOBAH ARI	407	45	39	-	-	86,67%	0,00%
KAB. BULUKUMBA		7.488	1.146	964	364	252	84,12%	3,37%

2. Achievement of Prolanis HT Effectiveness Level in Bulukumba Regency in 2023

a. Before Implementation of Kenali Promprev in Bulukumba Regency

Before the implementation of Kenali Promprev, the number of registered Prolanis participants was 764, and only 405 participants for the Top 10 FKTP Participants Registered in Prolanis HT (Table 3).

b. After Implementation of Kenali Promprev in Bulukumba Regency

There is an increase from the implementation of Kenali Promprev at FKTP; following the implementation of Kenali Promprev at FKTP, there was a notable increase of 1,292 registered Prolanis Hypertension (HT) participants. Moreover, there was a rise in the number of Prolanis HT participants visiting FKTP by 1,040 individuals and an increase in Controlled Prolanis HT participants by 402. As a result, the effectiveness of Prolanis HT surged from 53.01% in Q2 2023 to 80.50% in Q4 2023, achieving the 77% target. Additionally, Kenali Promprev's implementation boosted the 2023 Controlled Prolanis HT Participant Ratio (RPPT HT) in Bulukumba Regency to 1.55%. However, this figure fell short of the $\geq 5\%$ RPPT target, which is one of the Performance Based Capitation (KBK) indicators at FKTP (Table 4).

Table 3. Top 10 FKTP Participants Registered in Prolanis HT and Achievement of HT Effectiveness Levels up to Q2 2023 in Bulukumba Regency

		Q2 2023						
No	Name of FKTP	1. Diagnosed with HT	2. Registered with Prolanis HT	3. Prolanis HT Visit	4. Prolanis HT Checked	5. Prolanis Stable HT	% HT Effective ness Visit Rate	% Stable HT Rate
<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>	<i>g</i>	$h=e/d$	$i=g/c$
1	HERLANG	1.289	12	8	8	-	66,67%	0,00%
2	KLINIK NAUFAL	404	-	-	-	-	0,00%	0,00%
3	DPP DR. ASRAWATI	262	68	57	56	-	83,82%	0,00%
4	BONTOTIRO	1.065	52	40	40	15	76,92%	1,41%
5	DPP dr. H. Abd Radjab	803	51	20	20	1	39,22%	0,12%
6	BONTOBAHARI	1.125	19	9	7	-	47,37%	0,00%
7	PALANGISANG	634	35	8	6	-	22,86%	0,00%
8	SALASSAE	871	37	17	17	-	45,95%	0,00%
9	PONRE	991	32	14	14	1	43,75%	0,10%
10	DPP DR. ISNAWATI ALIEF	79	13	3	3	1	23,08%	1,27%
KAB. BULUKUMBA		22.250	764	405	373	38	53,01%	0,17%

Table 4. Top 10 FKTP Participants Registered in Prolanis HT and Achievement of HT Effectiveness Levels up to Q4 2023 in Bulukumba Regency

		Q4 2023						
No	Name of FKTP	1. Diagnosed with HT	2. Registered with Prolanis HT	3. Prolanis HT Visit	4. Prolanis HT Checked	5. Prolanis Stable HT	% HT Effective ness Visit Rate	% Stable HT Rate
<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>e</i>	<i>f</i>	<i>g</i>	$h=e/d$	$i=g/c$
1	HERLANG	1.506	96	59	53	5	61,46%	0,33%
2	KLINIK NAUFAL	520	89	72	63	59	80,90%	11,35%
3	DPP DR. ASRAWATI	316	81	73	71	34	90,12%	10,76%
4	BONTOTIRO	1.213	80	70	68	63	87,50%	5,19%
5	DPP dr. H. Abd Radjab	933	74	54	52	23	72,97%	2,47%
6	BONTOBAHARI	1.318	73	55	40	-	75,34%	0,00%
7	PALANGISANG	783	52	40	36	-	76,92%	0,00%
8	SALASSAE	1.021	51	42	41	3	82,35%	0,29%
9	PONRE	1.149	49	39	35	25	79,59%	2,18%
10	DPP DR. ISNAWATI ALIEF	100	48	39	28	2	81,25%	2,00%
KAB. BULUKUMBA		25.949	1.292	1.040	922	402	80,50%	1,55%

3. Achievement of Prolanis Effectiveness Levels (DM and HT) in Bulukumba Regency in 2023

a. Before the implementation of Kenali Promprev in Bulukumba Regency.

Table 5. Participants Registered in Prolanis DM - HT and Achievements of DM - HT Effectiveness Levels up to Q2 2023 in Bulukumba Regency

		Q2 2023						
No	Prolanis Type	1. Diagnosed with Prolanis	2. Registered with Prolanis	3. Prolanis Visits	4. Prolanis Checked	5. Prolanis Stable	% Effectiveness Visit Rate of Prolanis	% Stable Rate Prolanis
1	DM	5.163	669	476	113	46	71%	0,9%
2	HT	22.250	764	405	373	38	53%	0,2%
KAB. BULUKUMBA		27.413	1.433	881	486	84	61%	0,3%

b. After Implementation of Kenali Promprev in Bulukumba Regency.

Table 6. Participant Table: Registered Prolanis DM - HT and Achievements of DM - HT Effectiveness Levels up to Q4 2023 in Bulukumba Regency

		Q4 2023						
No	Prolanis Type	1. Diagnosed with Prolanis	2. Registered with Prolanis	3. Prolanis Visits	4. Prolanis Checked	5. Prolanis Stable	% Effectiveness Visit Rate of Prolanis	% Stable Rate Prolanis
1	DM	7.488	1.146	964	364	252	84%	3,4%
2	HT	25.949	1.292	1.040	922	402	80%	1,5%
KAB. BULUKUMBA		33.437	2.438	2.004	1.286	654	82%	2,0%

Effectiveness Levels up to Q4 2023 in Bulukumba Regency

There is a significant increase with an addition of 2,438 registered Prolanis participants following the implementation of Kenali Promprev at FKTP Bulukumba. Additionally, there was a rise in Prolanis participants visiting FKTP by 2,004 individuals and an increase in the number of controlled Prolanis participants by 654 people. Consequently, the effectiveness of Prolanis increased from 61% in Q2 2023 (Table 5) to 82% in Q4 2023 (Table 6), meeting the 77% target. The implementation of Kenali Promprev also increased the 2023 Controlled Prolanis Participant Ratio (RPPT) in Bulukumba Regency to 2.0%. Despite not reaching the $\geq 5\%$ RPPT target, this RPPT indicates Performance Based Capitation (KBK) at FKTP.

The Mann-Whitney test confirmed significant Registered and Visiting Prolanis Participants in Q2 and Q4 of 2023 (p: 0.025). This indicates a significant difference in the data between these two quarters. Similarly, the Mann-Whitney test results for the Prolanis Effectiveness Visit Rate in Q2 and Q4 of 2023 were also significant (p: 0.040). This increase reflects the positive impact of Kenali Promprev in enhancing participation, effectiveness, and control of Prolanis in managing chronic diseases such as Diabetes Mellitus and Hypertension at the primary healthcare level.

Discussion

The effectiveness level of visiting Prolanis is a critical indicator of the success process of the Chronic Disease Management Program (Prolanis). The Visiting Participant indicator measures the ratio of Prolanis participants who visit related to Prolanis activities compared to Prolanis registered participants (DM and HT) at FKTP. This shows that the higher the level of effectiveness of Visiting Prolanis, the more Visiting Prolanis participants go to FKTP related to Prolanis Activities, the more participants diagnosed with DM and HT are registered with Prolanis who carry out health consultation services, examinations, and health monitoring at FKTP every month so that the goal from this program can be achieved. With regular monitoring and timely intervention, Prolanis helps prevent severe complications and improves the quality of life for people with HT and type-2 DM (February 2023; Imade Rosdiana et al., 2017),

Kenali Promprev is an educational program focused on promotive and preventive health measures, conducted through mini-class sessions typically attended by 5–10 FKTP per session. Weekly evaluations are carried out through direct meetings, Focus Group Discussions (FGD), and feedback via WhatsApp groups, emphasizing disease prevention and health promotion achievements. These evaluations cover health history screening, specific health screening, and the effectiveness level of visited prolanis and controlled prolanis. The monitoring process involves collaboration between the Health Service, FKTP, and BPJS Kesehatan. The Kenali Promprev Dashboard has been integrated into the Self-Service Business Intelligence (SSBI) Application to facilitate monitoring and data retrieval. The primary objective of these mini-class sessions is to enhance the knowledge and understanding of healthcare workers at FKTP, as better knowledge contributes to improved performance-based capitation achievements (Hardy, 2021). Conversely, inadequate knowledge and comprehension can lower performance-based capitation results (Syam et al., 2023). Additionally, effective communication plays a crucial role in improving performance-based capitation outcomes (Juwita & Santoso, 2023).

The implementation of Kenali Promprev has significantly increased the effectiveness level of Visiting Prolanis at the Bulukumba Branch Office, exceeding the target set by the Deputy for Region IX and reaching 82%. This achievement highlights the success of Kenali Promprev in enhancing FKTP and participant engagement in the Chronic Disease Management Program. It is expected that this impact will contribute to meeting targets and motivate FKTP and BPJS Kesehatan to continue innovating in the prevention and management of chronic diseases such as diabetes and hypertension. Furthermore, the successful execution of Kenali Promprev can strengthen the active role of FKTP in providing comprehensive and integrated services, fostering greater awareness among Prolanis Participants to take independent responsibility for their health. This can be achieved through effective planning by FKTP, as well as improved organization, implementation, and supervision within FKTP, ensuring that management fully supports policy implementation to maximize performance-based capitation outcomes (Dwi Lestari et al., 2022; Fahmi et al., 2021).

In addition to improving the effectiveness of Prolanis visits, Kenali Promprev also increases the ratio of controlled Prolanis participants (RPPT) at FKTP. However, it has not yet reached the target of 5%. "Controlled" criteria refer to standards set by Professional Organizations. DM controlled values refer to the 2015 Consensus for Management and Prevention of Type 2 Diabetes Mellitus in Indonesia by PERKENI, which measures Fasting Blood Sugar levels with controlled values between 80-130

mg/dL. Meanwhile, the HT controlled value refers to the 2019 Hypertension Management Consensus by PERHI, which measures Blood Pressure with a controlled value in Systole between 120-130 mmHg (for ages 18-65 years) and 130-139 mmHg (for ages over 65 years), as well as Diastole between 70-79 mmHg. RPPT is a performance indicator that influences the capitation value received by FKTP by the 2019 Social Security Administering Body Regulations (PerBPJS) (Peraturan BPJS Kesehatan Nomor 7, 2019).

From the perspective of FKTP leaders who actively participated in the Kenali Promprev program in Bulukumba Regency 2023, the implementation is deemed satisfactory for FKTP and BPJS Kesehatan. This underscores the importance of collaboration and communication among all stakeholders in implementing the JKN Program. Strong cooperation between FKTP and BPJS Kesehatan fosters mutual needs, respect, and support, contributing to a conducive JKN ecosystem (Julianda & Holiqurrahman, 2023). Support for Performance-Based Capitation (KBK) is also crucial; achieving 100% in KBK ensures maximum capitation funding, enhancing the engagement and quality of JKN services (Juwita & Santoso, 2023). However, despite these achievements, the research has several limitations. The Kenali Promprev activities should have been implemented earlier for more comprehensive planning and evaluation. Additionally, expanding the program to more districts would help with broader outreach, and customizing implementation strategies based on FKTP types would address specific challenges more effectively.

Conclusion

This study aims to analyze the effectiveness of Kenali Promprev in achieving Prolanis targets. Implemented in July 2023, the initiative led to a significant increase in registered participants by 2,438 and visits to Prolanis at FKTPs reaching 2,004 individuals, with 654 participants successfully managed under Prolanis care. As a result, Prolanis effectiveness improved from 61% in Q2 2023 to 82% in Q4 2023, exceeding the 77% target. However, the Ratio of Controlled Prolanis Participants (RPPT) in Bulukumba Regency only increased to 2.0%, still below the $\geq 5\%$ target. To further enhance Kenali Promprev's impact, initiating activities earlier for better planning and evaluation is recommended, as expanding coverage to more districts to maximize outreach and customizing implementation strategies based on FKTP types to address specific challenges. An earlier start ensures more thorough preparation and obstacle identification, while grouping by FKTP type optimizes monitoring, enhances performance evaluation, and boosts overall program effectiveness.

Author Contribution

Muhayyina Wahidah led the study design and methodology formulation, ensuring the research adhered to ethical standards. She also supervised the data analysis, contributed significantly to the interpretation of the findings, and contributed to the initial draft of the research paper.

Rezki Selpiaty was primarily responsible for data collection and coordination with the healthcare facilities. She facilitated the implementation of the Kenali Promprev program.

Muhammad Ali assisted in the literature review and provided valuable insights into previous studies on Prolanis and chronic disease management.

Andi Rifka Yuliana Sari contributed to the statistical analysis of the data from the Kenali Promprev Dashboard at SSBI, providing expertise in the Mann-Whitney test used

in this study. She also assisted in drafting the discussion and conclusion sections of the paper.

Sahrullah coordinated with the healthcare facilities and organized the Kenali Promprev meetings.

Sitti Musdalifah Ahmad helped review and edit the manuscript and clarify the paper. She also supported the overall coordination of the study and contributed to the final revisions.

Conflict of interest

The author states no conflict of interest.

Acknowledgment

We extend our heartfelt gratitude to the Health Service in Bulukumba Regency, FKTP Leaders in Bulukumba Regency, the Head of the Bulukumba Branch Office, the Administration Claims Staff, Claims Verification, the Head of the Participant Services Division, the Head of Health Facilities Services Division, and all BPJS Kesehatan representatives at the Bulukumba Branch Office for their invaluable cooperation. We have collaborated to enhance the effectiveness of Prolanis visits in Bulukumba Regency throughout 2023.

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