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Integrating Islamic Strategic Management in the Governance of BPJS Kesehatan: Between Ethical Values and Institutional Effectiveness

Luthfi Dwi Risyanda **, Muhardi *, Tasya Aspiranti *

^a Doctor of Management Program, Faculty of Economics and Business, Universitas Islam Bandung, Indonesia

ABSTRACT

This study explores the integration of Islamic strategic management principles into the governance of BPJS Kesehatan, Indonesia's national health insurance institution. Amid challenges such as financial deficits, transparency issues, and service disparities, the research proposes a value-driven alternative to conventional strategic models. By incorporating Islamic concepts such as maslahah (public interest), amanah (trust), 'adl (justice), and syura (consultation), the study offers a framework that aligns ethical governance with institutional effectiveness. Using a conceptual-normative approach, it conducts a SWOT analysis through an Islamic lens and proposes strategic recommendations, including ethical training, digital transparency, and hybrid funding with Islamic social finance instruments. The research highlights how embedding maqashid sharia, especially hifz al-nafs (protection of life), in health governance can enhance legitimacy, trust, and long-term sustainability. The findings contribute to reimagining public sector reform in Muslim-majority countries, positioning BPJS as a model for ethically grounded and socially responsible healthcare administration.

Keywords: Islamic Strategic Management. BPJS Kesehatan, Maqashid Sharia, Ethical Governance.

Introduction

BPJS Kesehatan, or the Health Social Security Administration Agency, is a pivotal organ of the Indonesian government tasked with administering the National Health Insurance program (*Jaminan Kesehatan Nasional*—JKN), which was launched in 2014 to realize the national vision of universal health coverage. Since its inception, the institution has experienced exponential growth, emerging as one of the world's largest single-payer health systems. With membership exceeding 200 million people, BPJS Kesehatan operates on a solidarity-based, cross-subsidy financing model where wealthier participants contribute to the care of the less fortunate, embodying a socially inclusive mechanism aimed at reducing inequality in healthcare access (Perdana et al., 2022). This financial model, while praiseworthy in intent and scope, is not without its challenges. The agency has faced recurring deficits due to mismatches between premiums and healthcare costs, inefficiencies in claim management, and issues of delayed provider payments. Furthermore, the decentralized nature of Indonesia's healthcare system has produced regional disparities in service quality and availability, which undermine the promise of equitable healthcare delivery. Compounding these operational issues is the persistent concern about limited institutional transparency and public accountability, which weakens citizen trust in the system (Jabeen et al., 2021).

Given these multilayered challenges, it is evident that BPJS Kesehatan requires a robust strategic management approach to navigate complexity, maintain financial sustainability, and improve institutional credibility. However, conventional strategic management frameworks, commonly derived from corporate or industrial sectors, are often prioritize efficiency, measurable outputs, and market competitiveness (Anwar & Deliana, 2024). While such priorities are necessary for performance, they frequently neglect or marginalize values that are essential in public health contexts, such as ethics, social equity, and moral responsibility. This reductionist orientation risks transforming healthcare governance into a purely technical exercise, detached from the societal and spiritual values that shape public expectations in a culturally rich and religiously observant nation like Indonesia (Pio & Lengkong, 2020; M. K. Rahman et al., 2018). Therefore, there is a pressing need for an alternative paradigm, one that harmonizes strategic planning with ethical vision and long-term communal well-being.

Islamic strategic management offers such a paradigm, positioning itself not merely as a religiously inspired variant of conventional strategy but as a fundamentally different worldview. It asserts that organizational decisions must be accountable not only to shareholders or stakeholders but ultimately to God (tauhid), thereby embedding transcendental responsibility into governance. This approach integrates multiple ethical dimensions including the pursuit of maslahah (public benefit), 'adl (justice), amanah (trust and responsibility), and syura (consultative deliberation) (Atan et al., 2024; M. K. Rahman et al., 2018). These principles are not only normative ideals but actionable components that can be translated into institutional policies and governance structures (Stephenson, 2014). Within BPJS Kesehatan, this would mean redefining success beyond budgetary targets or service volumes to include equitable access, transparent decision-making, and trustworthiness in the management of public funds. Islamic strategic management emphasizes that the means are as important as the ends, thereby fostering a process-oriented culture that prizes ethical implementation as much as strategic outcomes.

Furthermore, the integration of Islamic values into BPJS Kesehatan's strategic framework can be justified through the objectives of Islamic law, or maqashid sharia. This framework identifies five fundamental goals: the protection of religion (hifz al-din), life (hifz al-nafs), intellect (hifz al-'aql), lineage (hifz al-nasl), and wealth (hifz al-mal) (Amin, 2024; Maulida & Ali, 2023; Muhammad Nooraiman Zailani et al., 2022; Sofyan et al., 2023). Within the context of public health governance, hifz al-nafs becomes central, as safeguarding life is a divine mandate. Health insurance, therefore, is not merely a public good but a religiously sanctioned duty when administered justly, free from unethical elements such as riba (usury), gharar (uncertainty), and maysir (speculation/gambling). BPJS's funding model, which is based on collective risk-sharing and mutual assistance, resonates with the Islamic principles of takaful and ta'awun, institutional models grounded in solidarity and cooperation rather than profit maximization (Al-Daihani et al., 2025). This intrinsic compatibility offers not only a theological endorsement for BPJS but also opens opportunities to integrate Islamic social finance mechanisms such as zakat, waqf, and sadaqah to complement the agency's funding base, particularly for vulnerable populations.

Accordingly, this paper explores the operationalization of Islamic strategic management principles within BPJS Kesehatan through a conceptual-normative approach. This includes the redefinition of institutional vision and mission statements to reflect Islamic ethical commitments, the introduction of value-based performance indicators rooted in *maqashid sharia*, and the establishment of governance mechanisms that encourage transparency, accountability, and public participation (Wardhana, 2021). Educational programs in Islamic public service ethics, stakeholder engagement platforms, and the establishment of ethical oversight boards could serve as practical steps toward this transformation. Ultimately, the proposed framework does not seek to replace the existing governance model but to enrich and reform it by infusing ethical depth, spiritual consciousness, and moral clarity, as elements that are urgently needed in the contemporary landscape of public sector reform. By doing so, BPJS Kesehatan can evolve into a pioneering model of healthcare governance that is not only efficient and universal in its reach but also morally grounded, socially just, and spiritually fulfilling.

Islamic Strategic Management and Social Health Insurance

Islamic strategic management is a developing field within Islamic management sciences that seeks to synthesize the technical rigor of conventional strategic frameworks with the comprehensive ethical worldview of Islam. It goes beyond merely adapting business tools to a religious context; rather, it proposes a paradigm shift that redefines the foundations of strategy itself. According to Fontaine & Nuhu (2022), strategic management in the Muslim worldview must be grounded in *tauhid*, or the principle of divine unity, which posits that all human actions, including institutional governance and decision-making, are ultimately accountable to Allah. This metaphysical perspective reconfigures traditional notions of strategic success, urging institutions not only to measure outcomes in terms of efficiency or growth, but to embed moral accountability, justice, and communal responsibility into their planning, execution, and evaluation processes.

Islamic strategic management represents a dynamic and evolving field that offers a comprehensive approach to institutional governance by embedding Islamic ethical values into modern strategic thinking (Nugraha et al., 2023). Rather than positioning itself merely as a religious adaptation of Western management theories, it introduces a unique epistemological foundation rooted in the Islamic worldview. This approach recognizes that organizations do not operate in value-neutral environments; instead, they function within cultural, moral, and spiritual ecosystems that shape their responsibilities and legitimacy. As such, Islamic strategic management redefines the purpose of strategy, not only as a pathway to competitive success or operational efficiency, but as a vehicle for fulfilling ethical obligations and delivering collective well-being in accordance with divine guidance (Amiruddin, 2024).

At its core, Islamic strategic management incorporates a teleological dimension that is largely absent in secular models. It acknowledges that actions must be guided by clear moral purposes, with outcomes evaluated not solely by material results but by their alignment with ethical intentions (*niyyah*) and long-term societal benefit (Luthfiana, 2023; Nordin et al., 2022; Omar & Desa, 2023). This adds an essential layer of depth to decision-making, particularly in public sector organizations where the impact of policy extends far beyond institutional boundaries. For instance, in the healthcare domain, strategies formulated under an Islamic framework must consider not only cost-effectiveness but also how decisions affect the dignity, accessibility, and equity of care delivered to the population. Institutions such as BPJS Kesehatan are thereby encouraged to pursue strategies that uplift social justice and solidarity, even when these may not yield immediate quantifiable gains.

Additionally, Islamic strategic management expands the conventional understanding of stakeholder responsibility. In standard strategic models, stakeholders are typically defined in terms of their legal, financial, or contractual relations to the organization. In contrast, the Islamic approach adopts a wider lens, recognizing that all members of society, particularly the vulnerable, hold moral claims upon institutions that manage public trust (Salman, 2022). This inclusive notion of accountability widens the ethical horizon of strategic planning, urging leaders to consider how policies impact not only shareholders or service recipients, but also future generations, the environment, and the moral health of the community.

Another distinctive feature is the spiritualization of leadership within the strategic process. Leaders are not merely planners or executors of goals, but are seen as *khalifah*, vicegerents of God on earth, entrusted with the responsibility to govern with justice, humility, and compassion (Sirojuddin & Al-Adawiyah, 2023). This spiritual mandate instills a sense of sacred duty in strategic roles, promoting ethical restraint, transparency, and empathy. Leaders operating under this model are compelled to listen actively, deliberate fairly, and prioritize communal harmony. In practical terms, this implies more participatory decision-making processes, ethical oversight committees, and value-based performance evaluations within organizations.

The role of knowledge in Islamic strategic management is also fundamentally redefined. Knowledge ('ilm) is not only instrumental but sacred. It's acquired and applied for the betterment of humanity and the pursuit of divine pleasure. Strategic decisions, therefore, must be informed by both empirical data and ethical reasoning grounded in Sharia (M. Rahman et al., 2021). This epistemic integration supports a balanced approach where rational planning and moral discernment coexist. It also reinforces the need for continuous reflection (*muhasabah*) and adaptive learning within institutions to ensure that strategies remain aligned with both changing realities and unchanging values.

In an era marked by technocratic governance and increasing institutional detachment from moral frameworks, Islamic strategic management offers a compelling reorientation (Hidayah et al., 2024). It challenges organizations to transcend narrow performance metrics and cultivate a purpose-driven ethos that serves both worldly success and spiritual accountability. For institutions like BPJS Kesehatan, this approach holds transformative potential, not only in addressing systemic inefficiencies, but in restoring trust, fostering social cohesion, and fulfilling the higher objectives of governance. Through this model, strategy becomes not only a managerial function, but a moral practice, which is anchored in faith, directed by ethics, and committed to justice.

SWOT Analysis of BPJS Kesehatan through an Islamic Lens

A Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis serves as a diagnostic tool in strategic planning. When applied through an Islamic lens, the analysis considers both material and spiritual dimensions of institutional capacity and societal expectations. This Islamic SWOT framework allows BPJS Kesehatan to reformulate its strategic goals not only to optimize performance but also to rebuild trust and fulfill its ethical obligations to society.

Table 1 - SWOT Analysis of BPJS Kesehatan through an Islamic Lens

Strengths	Weaknesses
Government-backed universal mandate	Transparency deficits violating amanah
• Cross-subsidy financing consistent with <i>ta'awun</i> (mutual assistance)	Disparities in access contradicting 'adl
• Expanding digital infrastructure aligning with <i>ihsan</i> (excellence)	Low awareness and education among participants
Opportunities	Threats
Public receptivity to Islamic ethical governance	Political interference and potential mismanagement
• Collaboration with Islamic institutions and scholars for legitimacy	Risk of over-commercialization in healthcare provision
$ \bullet \ \text{Integration of} \ \textit{maqashid-} \text{based key performance indicators (KPIs)} \\$	Public cynicism toward public sector institutions

A SWOT analysis, which consists of assessing an organization's Strengths, Weaknesses, Opportunities, and Threats, is a foundational tool in strategic planning, enabling institutions to evaluate their internal capabilities and external environment in a structured manner. When applied within an Islamic framework, as in the case of BPJS Kesehatan, the analysis extends beyond material and operational considerations to incorporate spiritual, ethical, and societal dimensions. This holistic diagnostic model acknowledges that institutional performance must be measured not only by efficiency and outcomes but also by alignment with moral values and public trust.

Strengths in the case of BPJS Kesehatan are not only administrative assets but also ethical enablers. The government-backed universal mandate reflects a national commitment to health equity and fulfills the Islamic imperative of *maslahah 'ammah* (public welfare). Likewise, the cross-subsidy financing mechanism, where higher-income participants subsidize the health coverage of the economically vulnerable, embodies the Islamic values of *ta'awum* (mutual assistance) and *takaful* (collective responsibility), reinforcing social solidarity. Additionally, the institution's investment in digital infrastructure can be interpreted as a manifestation of *ihsan* (excellence), aligning technological progress with the goal of improving service quality and accessibility.

Weaknesses, when assessed through an Islamic ethical lens, are more than operational inefficiencies, they represent moral shortfalls that can undermine institutional legitimacy. For example, transparency deficits are not only governance issues but violations of *amanah* (trust), a foundational principle in Islamic leadership. Similarly, disparities in healthcare access across regions challenge the Islamic value of 'adl (justice), highlighting the moral urgency of equitable service distribution. The low levels of awareness and health literacy among participants also point to a neglect of educational da'wah responsibilities, which are essential in empowering citizens to understand and claim their rights.

Opportunities in this context represent pathways to strategic and ethical enrichment. There is a growing receptivity within the Indonesian public toward governance models inspired by Islamic ethical values, offering BPJS Kesehatan the chance to strengthen its legitimacy through culturally resonant frameworks. Collaboration with Islamic scholars and institutions can also enhance policy alignment with Shariah principles, thereby deepening stakeholder trust. The adoption of *maqashid sharia*-based key performance indicators (KPIs) can transform institutional evaluation by embedding spiritual objectives, such as the preservation of life (*hifz al-nafs*) and wealth (*hifz al-mal*), into strategic outcomes, fostering a more meaningful definition of success.

Threats, when interpreted through this lens, emphasize risks to ethical integrity and public perception. Political interference and administrative mismanagement not only jeopardize operational continuity but erode moral credibility. The risk of over-commercialization in healthcare provision, driven by market-based reforms, may conflict with the Islamic ethos of compassion and justice in public service. Additionally, widespread public cynicism toward governmental institutions represents a significant external challenge, one that can only be countered by visible ethical reform and transparent accountability structures.

By framing the SWOT analysis within an Islamic paradigm, BPJS Kesehatan is not merely identifying areas for technical improvement but is engaging in a deeper process of ethical self-assessment. This approach enables the institution to align its strategic goals with both national policy and religious values, thereby fostering a governance model that is effective, equitable, and spiritually grounded. Such integration positions BPJS not only as a healthcare provider but also as a moral steward of public welfare in a majority-Muslim society.

Policy Analysis, Implications and Strategic Recommendations

Policy Analysis

Implementing Islamic strategic principles within BPJS Kesehatan necessitates a deep institutional shift that extends beyond structural redesign and into the domain of organizational resilience and ethical leadership development. At the core of this transformation lies the need to reconfigure the institutional mindset: moving from a purely bureaucratic ethos to one anchored in Islamic epistemology, where strategy is understood as a tool for achieving not only functional efficiency but also moral coherence and spiritual legitimacy. This implies cultivating an organizational culture that treats public service as an act of worship (*ibadah*), in which employees at all levels are encouraged to align their professional duties with ethical self-accountability and divine consciousness (*taqwa*) (Ahmad et al., 2023).

Beyond revising the institution's vision and mission, there must be system-wide transformation in performance orientation. Rather than relying exclusively on quantitative key performance indicators (KPIs), BPJS Kesehatan should begin to incorporate multi-dimensional, value-based metrics. These would evaluate institutional success not only by financial solvency or service delivery speed, but also by how well programs reflect justice ('adl), foster solidarity (ukhuwah), and uphold dignity (karamah insaniyyah) (Nurhadi, 2021). For instance, performance benchmarks might include indices of patient satisfaction among disadvantaged populations, equitable regional distribution of healthcare resources, or responsiveness to community-voiced ethical concerns. These composite indicators could serve as tools for continuous moral calibration, ensuring that operational success does not come at the expense of ethical consistency.

In addition to strategic planning, Islamic values must be internalized through institutional mechanisms of ethical self-regulation. One such mechanism is the establishment of an internal shariah governance unit tasked with conducting routine evaluations of institutional conduct, program delivery, and public communication strategies. Unlike traditional compliance departments, this unit would approach oversight from a value-based standpoint, issuing recommendations rooted in *maqashid* sharia and Islamic public ethics. To ensure credibility, it should operate independently from top management and report findings in a publicly accessible format, thereby institutionalizing transparency as a religious obligation, not merely an administrative expectation (Rastgar et al., 2023).

To embed long-term resilience and adaptive capacity, BPJS Kesehatan must also develop a cadre of ethical reformers and spiritually conscious leaders within its bureaucratic structure. This could be achieved through talent pipeline programs, mentorship schemes, and Islamic leadership development workshops designed to cultivate principled administrators who can bridge technical expertise with ethical discernment. Embedding these leaders in decision-making positions would facilitate a shift toward ethical foresight in crisis response, fiscal policy, and technological innovation.

An often-overlooked dimension is the harmonization of BPJS Kesehatan with other Islamic social institutions. Strategic alignment with Badan Amil Zakat Nasional (BAZNAS), *Lembaga Wakaf*, and shariah-compliant financial institutions can foster an ecosystem of inter-institutional collaboration grounded in shared ethical visions. This collaboration can extend beyond funding—into joint health education campaigns, ethical auditing partnerships, and data-sharing agreements that respect privacy while maximizing social benefit. By building horizontal synergies across Islamic social services, BPJS can function as part of a broader ummah-centered welfare infrastructure.

The global context also presents valuable learning opportunities. Countries such as Malaysia, Sudan, and Iran have implemented Islamic health financing frameworks with varying degrees of integration. BPJS Kesehatan can benefit from global benchmarking against Islamic models of health governance, particularly in areas such as shariah-compliant insurance (*takaful*), community waqf hospitals, and zakat-financed health subsidies (Abidin & Ekaningsih, 2024). This global comparison allows for policy transfer and strategic adaptation, making Indonesia a thought leader in Islamic health administration in the international arena (Arifin & Rohmah, 2019; Rachmawati, 2018).

Policy Implications

The deeper institutionalization of Islamic strategic principles into BPJS Kesehatan yields a number of long-term policy implications that transcend the operational sphere and reconfigure the ethical foundations of public service.

First, there is a need to redefine policy legitimacy. In the Islamic context, legitimacy is not solely derived from legal mandates or executive authority but from public trust (*thiqah al-nas*) and alignment with divine moral order. Therefore, all health-related laws, budget allocations, and policy directives must undergo a process of ethical validation in addition to legal review.

Second, policymakers must promote the decentralization of ethical authority. Rather than monopolizing decision-making in central offices, BPJS should adopt decentralized ethical councils at the provincial level, capable of integrating local cultural-religious values into national strategy. These councils can offer real-time input on policy implementation, monitor equity outcomes, and ensure culturally sensitive service delivery, particularly in diverse regions like Aceh or West Sumatra where Islamic norms are already institutionalized.

Third, Islamic strategic integration demands structural alignment between religious and public law. Policymakers must develop frameworks that harmonize fatwas and *fiqh*-based positions from Indonesian Ulama Councils with national healthcare policy, especially on contentious issues such as contraception, end-of-life care, or shariah compliance in insurance premiums. This alignment ensures that ethical coherence is preserved without triggering legal pluralism or operational paralysis.

Fourth, a shift toward Islamic strategic governance implies a long-term policy culture transformation—from reactionary and transactional approaches to anticipatory and principled policymaking. This includes embedding *maqashid sharia*-based objectives into national development planning (e.g., RPJMN), institutionalizing value-based budgeting (VBB), and mandating ethical impact assessments alongside environmental and social impact assessments in health infrastructure projects.

Finally, these changes require capacity building within legislative and executive bodies. Parliamentarians, health ministry officials, and regional governors must be exposed to training modules on Islamic public administration, ethics in policy deliberation, and spiritual dimensions of law-making. By investing in ethical literacy among policy elites, the state can cultivate a generation of Muslim public leaders committed not only to national progress but to moral accountability before the Creator.

Strategic Recommendations

To effectively implement Islamic strategic principles and ensure that institutional reforms in BPJS Kesehatan are sustainable, ethical, and inclusive, the following strategic recommendations are proposed:

• Develop an Integrated Magashid-Based Strategic Framework (IMSF)

BPJS Kesehatan should create a formal strategic framework grounded in *maqashid sharia*, which links each policy objective with one or more of the five primary *maqashid* dimensions (life, wealth, intellect, lineage, and faith). This framework should guide annual planning, budget allocation, and outcome evaluation, ensuring that every major institutional decision serves a clear ethical purpose beyond administrative goals.

• Establish Regional Shariah-Advisory Units

To strengthen localized implementation of Islamic governance, BPJS should institutionalize shariah advisory units at the provincial level, particularly in regions with high Islamic institutional presence. These units will provide contextual guidance, review ethical implications of service delivery, and offer advisory input during regional policy formulation, ensuring alignment between national goals and local religious expectations.

Launch an Ethical Risk Management System

Incorporate an Ethical Risk Assessment (ERA) process into all strategic initiatives and procurement plans. This system would evaluate potential moral risks associated with vendor relationships, health financing mechanisms, digital data handling, and clinical decision-making. It complements conventional risk management while fulfilling Islamic obligations for moral foresight and harm prevention (dar' al-mafasid).

Create a Value-Based Employee Incentive Structure

BPJS should move beyond performance incentives based solely on efficiency and volume by incorporating value-based criteria into staff evaluations. Metrics may include transparency in communication, responsiveness to public feedback, participation in ethical training, and demonstrable commitment to *amanah*. These incentives can reinforce a spiritually grounded work ethic and elevate internal morale.

• Integrate Islamic Digital Literacy into Public Engagement Platforms

In line with the principle of *ta'lim* (education), digital platforms should be used to educate users not only on their healthcare rights but also on the ethical underpinnings of BPJS services from an Islamic perspective. This could involve interactive features such as Shariah-compliance indicators, educational videos, and chatbots answering questions about Islamic ethics in health insurance.

• Pilot Zakat-Waqf Hybrid Subsidy Programs

BPJS Kesehatan, in collaboration with national zakat agencies and *nazhir* waqf institutions, should initiate pilot programs where zakat and waqf funds are directed to specific segments of the population (e.g., the poor, the elderly, or persons with disabilities) for premium coverage or chronic illness treatment. These pilots should include monitoring and impact assessment tools to demonstrate the effectiveness of Islamic social finance in achieving healthcare justice.

• Institutionalize an Annual Islamic Governance Audit

Conduct an independent, annual Islamic governance audit that reviews the institution's performance from a shariah and *maqashid*-oriented lens. The audit should be publicly reported and include recommendations for aligning the institution's policies with ethical imperatives. This mechanism ensures accountability, fosters trust, and continuously reinforces value-based governance.

• Create a Cross-Sector Islamic Public Service Fellowship

To nurture future leaders capable of sustaining ethical transformation, BPJS should sponsor a fellowship program that allows young professionals to rotate between BPJS, Islamic finance institutions, philanthropic organizations, and religious councils. This program can build a new generation of public servants fluent in both technical policy and Islamic governance.

• Build Global Partnerships with Islamic Health Models

BPJS Kesehatan should pursue memoranda of understanding (MoUs) and knowledge exchanges with Islamic health institutions in countries such as Malaysia, Qatar, or Turkey. These partnerships can facilitate best-practice learning, joint research, and shared innovation in areas such as takaful models, ethical AI in health, and digital waqf infrastructure.

• Implement a Strategic Communications Plan Based on Islamic Ethic

Finally, to support legitimacy and public understanding, BPJS should adopt a communication strategy that reflects Islamic values—emphasizing sincerity (*ikhlas*), clarity (*bayan*), and accountability (*muhasabah*). Campaigns should be designed to engage Muslim communities with language, visuals, and messages that resonate with religious identity and communal responsibility.

Conclusion

The integration of Islamic strategic management into the governance of BPJS Kesehatan offers a transformative pathway for creating a healthcare system that is not only efficient and sustainable but also ethically grounded and socially just. Rooted in core Islamic values such as *maslahah* (public benefit), *amanah* (trust), 'adl (justice), and syura (consultative governance), this approach redefines institutional success beyond conventional metrics by aligning organizational objectives with moral obligations and divine accountability. By incorporating the higher objectives of Islamic law (maqashid sharia), particularly the protection of life (hifz al-nafs) and wealth (hifz al-mal), into performance indicators and policy evaluation frameworks, BPJS Kesehatan can pursue a balanced model that harmonizes material outcomes with spiritual integrity.

The application of an Islamic lens to strategic planning, including tools such as SWOT analysis, reveals both the ethical potential and institutional gaps in the current structure. Addressing these requires multi-level reforms: from recalibrating the institution's vision to reflect religious values, to embedding shariah-informed ethical governance mechanisms and fostering a culture of integrity through education, leadership development, and digital transformation. Furthermore, the policy implications of this integration point toward a paradigm shift from technocratic administration to value-driven public governance—one that empowers stakeholders, prioritizes marginalized groups, and enhances trust in state institutions.

The strategic recommendations outlined—ranging from ethical risk assessment systems and shariah-compliant funding models to localized advisory units and international partnerships—serve as practical interventions for operationalizing Islamic strategic principles in measurable, actionable ways. These initiatives not only respond to the pressing challenges faced by BPJS Kesehatan, such as funding deficits, service disparities, and legitimacy crises, but also position the institution as a pioneering model in aligning Islamic ethics with contemporary public service.

As Indonesia moves toward the realization of universal health coverage, embedding Islamic strategic principles in the governance of BPJS Kesehatan ensures that national health progress is not merely technical, but also morally resonant and spiritually enriching. This study provides both a conceptual foundation and a policy-oriented roadmap for scholars, reformers, and decision-makers committed to building a healthcare system that upholds the dignity, welfare, and ethical aspirations of the Indonesian people. In doing so, it affirms that faith-based values and modern governance need not be oppositional, but can together generate a public administration model that is both competent and compassionate.

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