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ANALYSIS OF QRIS USE AS A PAYMENT METHOD AT THE "X" EYE CLINIC IN SURABAYA

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Abstract

Digital transformation in the healthcare sector has driven the adoption of a cashless payment system through the Quick Response Code Indonesian Standard (QRIS) to improve administrative efficiency and service quality. This study aims to analyze the effectiveness of QRIS implementation as a digital payment method at Eye Clinic X Surabaya and identify factors that support and hinder its implementation. The study used a qualitative approach with a case study design. Informants were purposively selected, consisting of one financial manager, four cashiers, and five QRIS patient users. Data were collected through in-depth interviews, observation, and documentation, then analyzed using thematic analysis assisted by NVivo 14 software. The results showed that QRIS implementation was able to improve the effectiveness of administrative services through faster, easier, more accurate, and more efficient transaction processes. The use of QRIS also helped reduce queues, simplify transaction recording, and increase patient convenience in making payments. However, implementation still faces several obstacles, including internet network instability, delays in transaction notifications, low digital literacy among some elderly patients, and suboptimal standard operating procedures (SOPs) and training for staff. Based on Campbell's effectiveness framework, QRIS implementation has met most of the organizational effectiveness indicators, although further strengthening of technological infrastructure, improving human resource competency, and organizational support are still needed for sustainable digital transformation. This research contributes to enriching the study of digital payment implementation in healthcare facilities, particularly at the clinic level, as a basis for developing policies and strategies for digital healthcare services in Indonesia.

Keywords: QRIS, digital payments, implementation effectiveness, health services, eye clinics, digital transformation, NVivo.

INTRODUCTION

The development of information and communication technology has driven the transformation of payment systems in various sectors, including the healthcare sector. Payment digitization has not only changed the way people conduct transactions but has also become a crucial part of improving organizational operational efficiency, financial transparency, and the quality of service to service users. This change has accelerated since the development of the cashless society concept, a condition where people prefer cashless transactions to payments using physical money. In Indonesia, this transformation is supported by Bank Indonesia's policy through the development of the Indonesian Payment System Blueprint 2025, which places payment system digitization as one of the main strategies in strengthening the national digital economy ecosystem. One important innovation in the transformation of the payment system in Indonesia is the Quick Response Code Indonesian Standard (QRIS). QRIS is a national QR code standard launched by Bank Indonesia in collaboration with the Indonesian Payment System Association (ASPI) in 2019 and implemented nationally since 2020. The presence of QRIS allows all payment service providers to use a single QR code standard, making transactions more practical, secure, efficient, and interoperable. QRIS implementation has grown rapidly in various sectors, including trade, transportation, education, tourism, micro, small and medium enterprises (MSMEs), and healthcare facilities.

In the healthcare sector, payment digitization plays a strategic role because the administrative process is an integral part of the patient experience during service delivery. A fast, easy, and accurate payment system can reduce administrative waiting times, improve staff efficiency, minimize transaction recording errors, and enhance patient satisfaction. Conversely, a payment system that does not function optimally can potentially lead to queues, delays in

service, and even lower patient perceptions of the overall quality of healthcare services. Therefore, implementing digital payments through QRIS is a form of service innovation relevant to the demands of digital transformation in healthcare facilities. Although QRIS implementation has developed widely, previous research shows that its effectiveness is still influenced by various factors, such as perceived ease of use, perceived benefits, technological infrastructure readiness, transaction security, user digital literacy, and organizational support. Most previous research uses quantitative approaches that focus on examining relationships between variables, such as the Technology Acceptance Model (TAM) or the Unified Theory of Acceptance and Use of Technology (UTAUT). These approaches are able to explain the level of technology acceptance, but do not fully describe the user experience during the QRIS implementation process in the healthcare context.

Furthermore, research on QRIS in the healthcare sector is still predominantly conducted in hospitals or large-scale service facilities, while studies on QRIS implementation in clinics are relatively limited. This is despite the fact that the operational characteristics of clinics differ from those of hospitals, both in terms of the number of human resources, service complexity, and administrative management. This situation indicates a research gap that needs to be addressed through research that explores the effectiveness of QRIS implementation in more depth based on the experiences of managers and patients. Eye Clinic X Surabaya has implemented QRIS as a payment method since 2025 as part of an effort to improve the quality of administrative services to patients. However, this implementation has never been comprehensively evaluated, particularly regarding its effectiveness, user experience, and various factors that support or hinder successful implementation. Several obstacles such as limited digital literacy among some elderly patients, internet network disruptions, and the lack of standardized operational procedures indicate that the effectiveness of QRIS implementation still requires further in-depth study.

The novelty of this research lies in the use of a qualitative case study approach to explore the effectiveness of QRIS implementation in the context of an eye specialist clinic using Campbell's effectiveness framework and NVivo-assisted thematic analysis. This approach allows for a more comprehensive understanding of how QRIS implementation effectiveness is shaped through the interaction between technology, human resources, organization, and user experience factors, which have not been widely explained in previous research. Based on this description, this study aims to analyze the effectiveness of QRIS implementation as a digital payment method at Eye Clinic X in Surabaya, describe its implementation practices, and identify factors that influence implementation effectiveness from the perspective of managers and patients.

METHOD

Study Design

This research uses a qualitative approach with a case study design. The qualitative approach was chosen because the research aims to gain an in-depth understanding of the effectiveness of the Quick Response Code Indonesian Standard (QRIS) implementation as a digital payment method in healthcare services, particularly based on the experiences, perceptions, and interpretations of users and service administrators. This approach allows researchers to holistically explore phenomena in a real-life context, thus generating a comprehensive understanding of the implementation of digital payment systems in healthcare facilities.

The case study design was chosen because the research focused on a single unit of analysis with a bounded system, namely the implementation of QRIS at Eye Clinic X Surabaya. The case study approach provides an opportunity to understand the relationship between technological, organizational, human resource, and user experience aspects in the implementation of digital payments. Through this design, the research does not aim to make statistical generalizations, but rather to produce analytical generalizations that can serve as a reference for healthcare facilities with similar characteristics.

Research Setting

The study was conducted at Eye Clinic X Surabaya, a specialist clinic that has implemented QRIS as a cashless payment method for patient administration services. This clinic was chosen because it routinely implements a digital payment system, allowing researchers to obtain rich information regarding the implementation process, user experience, and operational challenges encountered during QRIS use. The study was conducted from November 2025 to January 2026, covering the preparation phase, data collection, data analysis, and verification of research results.

Participants and Sampling Technique

Research informants were selected using purposive sampling, a technique for selecting informants based on their direct experience with the phenomenon being studied. This technique aligns with the characteristics of

qualitative research, which prioritizes depth of information over the number of respondents. The total number of informants was 10, consisting of:
1 Financial Manager, 4 Cashiers, 5 QRIS patient users
All informants were selected because they were directly involved in the payment process using QRIS and were therefore able to provide relevant information regarding the implementation of the digital payment system in the clinic.
Inclusion Criteria
The inclusion criteria in this study include:

1. Willing to be an informant and sign the research consent form (informed consent).
2. Have experience using or managing QRIS payments at Eye Clinic X.
3. Able to convey experiences communicatively.
4. Minimum age 18 years.

Exclusion Criteria
Exclusion criteria include:

1. Informants who withdrew during the research process.
2. Informants who did not complete the interview process.
3. Patients who use payment methods other than QRIS.

Data Collection

Data collection was carried out using three main techniques to obtain comprehensive data through a triangulation process.

In-depth Interview

Primary data was obtained through in-depth interviews using a semi-structured interview guide. This technique allowed researchers to explore informants' experiences, perceptions, and perspectives on the effectiveness of QRIS implementation without limiting answers to specific options.
Interviews lasted 30–60 minutes for each informant. All interviews were recorded using a digital recorder after obtaining the informant's consent and subsequently transcribed verbatim for analysis.

Observation

Non-participatory observations were conducted during the patient payment administration process. Researchers observed the QRIS transaction flow, interactions between staff and patients, transaction times, payment device availability, internet network stability, and various operational issues that arose during the payment process.

Field notes are used to document all observation results so that they can strengthen the interview results.
Documentation
Documentation is used as a source of supporting data which includes:

1. Standard Operating Procedure (SOP) for payments.
2. Proof of QRIS transaction.
3. QRIS implementation documentation.
4. Payment administration report.
5. Internal clinic policy document regarding digital payment systems.
6. The document was used to triangulate the results of interviews and observations.

Research Instrument
In qualitative research, the researcher is the primary instrument (human instrument). The researcher is responsible for determining the research focus, collecting data, building relationships with informants, interpreting data, and drawing conclusions.
Supporting instruments include:

1. Semi-structured interview guidelines.
2. Observation sheet.
3. Field notebook.
4. Sound recorder.
5. Documentation camera.
6. Laptop.

NVivo 14 software to assist the data analysis process.

Data Analysis

Data analysis was conducted using Thematic Analysis assisted by NVivo 14 software. The analysis was conducted simultaneously from the start of the data collection process so that researchers could continue to explore the developing themes.

The analysis stages include:

1. Data Familiarization
   All interview results were transcribed verbatim and then read repeatedly to understand the context and meaning contained in each informant's statement.
2. Open Coding
   Researchers identify important sentences and then code each piece of information that has a similar meaning.
3. Axial Coding
   Codes that have conceptual relationships are grouped into categories to form patterns of relationships between phenomena.
4. Selective Coding
   The categories that have been formed are then integrated into main themes that explain the effectiveness of QRIS implementation at Eye Clinic X.
5. Theme Development
   The main themes are compared with Campbell's effectiveness theory and previous research to produce a comprehensive interpretation of QRIS implementation in health services.

Table of Criteria for Data Validity and Research Ethics

No	ASPECT	Criteria/Principles	Implementation/Fulfillment Method
1.	Trustworthiness	Credibility	Triangulation (sources & techniques), member checking, repeated observations, and peer discussions.
		Transferability	Provide a detailed description of the research context so that the results can be applied in other contexts.
		Dependability	Documenting the entire research process (audit trail) from collection to analysis.
		Confirmability	Save all documents, field notes, and analysis processes so that results can be traced back.
2.	Ethics	Ethical Considerations	Applying the principles of respect for persons (respecting subjects), beneficence (providing benefits), and justice (justice).

All informants received an explanation of the research objectives, benefits, interview procedures, and the right to discontinue participation at any time without any consequences. The informants' identities were kept confidential through the use of codes during the analysis and reporting of the research results. Prior to data collection, the researcher obtained permission from the management of the X Eye Clinic Surabaya. All data obtained were used solely for academic purposes and published in aggregate form without disclosing the informants' personal identities.

RESULTS AND DISCUSSION

Characteristics of Participants

The study involved 10 informants purposively selected based on their direct involvement in QRIS implementation at Eye Clinic X Surabaya. The informants included four cashiers, one financial manager, and five QRIS patients. This combination allowed the study to gain perspectives from both managers and service users, providing a more comprehensive picture of the effectiveness of QRIS implementation.

All informants had direct experience in using QRIS and were therefore able to provide information regarding the benefits, obstacles, and effectiveness of implementing digital payment systems in clinics.

Qualitative Findings

Data analysis using NVivo resulted in four main themes of QRIS implementation, namely:
These themes were obtained through a coding process using NVivo and became the basis for analyzing the effectiveness of QRIS implementation based on Campbell's indicators.

Word Cloud Analysis

Word cloud visualization shows that the most dominant words in the interview results were "payment," "QRIS," "transaction," "easy," "fast," "efficient," "cashier," "wifi," "signal," and "notification." The dominance of these words indicates that informants' perceptions primarily relate to the benefits of QRIS in accelerating transactions, while also indicating technical obstacles in the form of internet network stability.

Theme 1. Ease of QRIS Use

Most informants stated that QRIS is a payment method that is easy to use for both staff and patients. The transaction process is considered simple because patients simply scan a QR code using a mobile banking app or digital wallet. Furthermore, staff no longer have to count cash or prepare change, making the administrative process more convenient. However, in some situations, the payment process is slower when the internet connection is unstable, resulting in delayed transaction notifications reaching the cashier.

Theme 2. Transaction Speed and Efficiency

Informants reported that implementing QRIS can speed up the payment process compared to cash payments. QRIS also reduces queues at the cashier, improves administrative efficiency, and expedites payment verification. From a management perspective, this system helps streamline transaction recording and reduces the risk of manual recording errors.

Theme 3. Technical Constraints

While the benefits of QRIS are significant, all informants also identified several technical challenges. The most common challenges were unstable internet connections, delayed payment notifications, and scan failures under certain conditions. These challenges impacted the smoothness of transactions, particularly during peak patient hours.

Theme 4. Management Support

QRIS implementation is supported by the provision of payment devices and basic facilities from management. However, most informants assessed that organizational support still needs to be improved, particularly through the development of standard operating procedures (SOPs), training for officers on QRIS use, improving internet network quality, and mechanisms for handling transaction disruptions.

Effectiveness Based on Campbell's Framework

Analysis based on Campbell's effectiveness theory shows that the implementation of QRIS at Eye Clinic X has met the five main indicators of effectiveness.

Overall, the implementation of QRIS is considered to have met the primary objectives of digital payments in clinics, namely simplifying transactions, increasing administrative efficiency, and accelerating service delivery. However, the study also highlights the need to strengthen the technology infrastructure and implementation governance to ensure optimal and sustainable benefits of QRIS.

Effectiveness of QRIS Implementation in Healthcare Payment Services

The study results show that the implementation of the Quick Response Code Indonesian Standard (QRIS) at Eye Clinic X Surabaya can improve the effectiveness of administrative services through faster, more accurate, and more efficient payment processes. In addition to accelerating transactions, the use of QRIS also reduces dependence on cash, simplifies financial recording, and increases patient convenience in making payments. These findings indicate that the digitalization of payment systems contributes to improving the quality of administrative services in healthcare facilities.

The findings of this study are in line with the results of Junaedi and Masrizal (2024) who stated that QRIS implementation increases transaction efficiency and is significantly influenced by perceived ease of use, perceived benefits, and user trust in the digital payment system.

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This research is also supported by Sulistyo et al. (2023), who found that perceived usefulness, perceived ease of use, social influence, and trust positively influence the effectiveness of QRIS use in daily transactions. The higher the perceived usefulness and ease of use, the higher the level of user acceptance of QRIS.
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In addition, a systematic review by Widiawati, Aman, and Jauhari (2026) showed that most studies on QRIS in Indonesia concluded that perceived usefulness and trust were the factors that most consistently influenced the success of digital payment implementation.

Ease of Use as a Determinant of QRIS Adoption

Most informants stated that QRIS is easy to use for both administrative staff and patients. The payment process simply requires scanning a QR code using a mobile banking app or digital wallet, making transactions simpler than cash payments.
This finding is consistent with the study "Identifying Factors Influencing the Use of QRIS Using TAM and UTAUT2 Methods," which concluded that perceived trust, habit, performance expectancy, and facilitating conditions influence QRIS usage behavior. The study confirmed that ease of use is a crucial factor in increasing the intention to use digital payments.

Research by Prawitasari et al. (2025) also shows that the success of QRIS implementation is influenced by digital literacy levels, technological readiness, regulatory support, and user ability to operate digital payment systems.
However, this study found that elderly patients still experienced difficulty using QRIS without assistance from staff. This indicates that digital literacy remains a challenge in implementing digital payments in the healthcare sector.

Technical Constraints in QRIS Implementation

Although QRIS implementation provides various benefits, this study found that internet network stability, transaction notification delays, and scanning process failures remain major obstacles in administrative services.

These findings are supported by Goel et al. (2024), who stated that the success of digital transformation in the healthcare sector is greatly influenced by the readiness of technological infrastructure, network quality, data security, and the organization's ability to manage technological change.

In addition, Joshi and Sawant (2024) in a comprehensive study on the use of QR technology in the health sector concluded that QR technology is able to improve workflow efficiency and patient experience, but its success still depends on the readiness of the technological infrastructure and user competence.

Thus, the results of this study indicate that the effectiveness of QRIS implementation is not only influenced by technological characteristics, but also by infrastructure readiness and the quality of technical support provided by the organization.

Organizational Support for Sustainable Digital Transformation

This research shows that organizational support is a critical factor in the success of QRIS implementation. Provision of payment devices, improved internet network quality, officer training, and the development of standard operating procedures (SOPs) are all factors that contribute to the sustainability of digital transformation.

This finding is in line with the results of a systematic literature review by Maghfur and Indrawati (2025) which showed that facilitating conditions, performance expectancy, trust, and organizational support are the main determinants of the success of QRIS adoption in Indonesia.

On the other hand, Goel et al. (2024) explain that digital transformation in the healthcare sector requires a combination of technological readiness, human resource competency, organizational commitment, and continuous evaluation so that digital innovation can provide optimal benefits for both institutions and patients.

CONCLUSION

This study aims to analyze the effectiveness of the implementation of the Quick Response Code Indonesian Standard (QRIS) as a digital payment method at the X Eye Clinic in Surabaya. Based on the results of qualitative analysis through in-depth interviews, observation, documentation, and thematic analysis using NVivo software, the

implementation of QRIS has been proven to have a positive contribution to increasing the effectiveness of administrative services. The use of QRIS can speed up the payment process, increase the efficiency of transaction recording, reduce the use of cash, and provide convenience and comfort for both patients and administrative staff.

Based on Campbell's organizational effectiveness indicators, QRIS implementation has met most of the effectiveness indicators, including successful goal achievement, increased operational efficiency, user satisfaction, and the organization's ability to adopt digital innovation. However, this study also identified several obstacles that continue to impact implementation effectiveness, including internet network instability, delayed transaction notifications, limited digital literacy among some patients, and suboptimal organizational support through standard operating procedures (SOPs) and staff training.

The findings of this study indicate that the success of QRIS implementation in healthcare facilities is influenced not only by technological characteristics but also by organizational readiness, the quality of information technology infrastructure, human resource competency, and user experience. Therefore, digital transformation of healthcare payment systems requires a comprehensive approach to ensure the sustainable benefits of QRIS implementation are felt by all stakeholders.

Practical Implications

The research results provide several practical implications for health care facility managers.

First, clinic management needs to improve the quality of its technological infrastructure, particularly internet network stability, so that digital payment processes can take place in real time without technical obstacles.

Second, the preparation and implementation of specific Standard Operating Procedures (SOPs) regarding the use of QRIS need to be carried out as a guideline for officers in verifying payments and handling transaction disruptions.

Third, implementing training and improving digital competency for administrative officers is a strategic step to improve the quality of digital payment implementation.

Fourth, patient education regarding QRIS use needs to be improved, particularly for the elderly and patients with low digital literacy, so that the benefits of digital payments can be felt more evenly.

Fifth, the results of this study can be used as consideration for clinic management, hospitals, Bank Indonesia, and payment system service providers in developing more effective digital transformation policies in the healthcare sector.

Theoretical Implications

This research contributes to the development of research on the implementation of digital payment systems in the healthcare sector. Unlike previous research, which was dominated by quantitative approaches based on the Technology Acceptance Model (TAM) and the Unified Theory of Acceptance and Use of Technology (UTAUT), this study utilizes a qualitative case study approach, allowing for a more in-depth explanation of user experiences.

In addition, this study integrates Campbell's organizational effectiveness theory with the concept of digital technology adoption to produce a more comprehensive understanding of the factors that influence the effectiveness of QRIS implementation in healthcare facilities.

Research Limitations

This study has several limitations that need to be considered in interpreting the research results.

First, the research was only conducted at one eye specialist clinic so the research results cannot be generalized to all health care facilities in Indonesia.

Second, the number of informants is relatively limited because it uses a qualitative research approach which emphasizes the depth of information rather than the number of respondents.

Third, the study only evaluated QRIS implementation based on the perspectives of managers and patients without measuring quantitative indicators such as transaction time, operational costs, or patient satisfaction levels using statistical instruments.

Fourth, research has not specifically compared QRIS implementation with other digital payment methods such as debit cards, credit cards, virtual accounts, or digital wallets.

Future Research

Further research is recommended to use a mixed methods approach so that the results of qualitative exploration can be strengthened through quantitative analysis.

In addition, research can be conducted at government hospitals, private hospitals, community health centers, and other health service facilities to obtain a more comprehensive picture of QRIS implementation.

Further research can also develop a conceptual model by integrating the variables of Technology Readiness, Digital Literacy, Service Quality, Patient Satisfaction, Technology Acceptance Model (TAM), and Unified Theory of Acceptance and Use of Technology (UTAUT) to explain the factors that influence the successful implementation of digital payments in the health sector.

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