



Effectiveness and Legal Protection in Health Services in Public Hospitals For BPJS Health Participants Sembiring Deli Tua Public Hospital Study

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ABSTRACT

As a form of appreciation for the aspirations of the Indonesian people in achieving social welfare, health services are very crucial. Pancasila and the 1945 Constitution, as the foundation of the state, set guidelines for state implementation, including in the health sector. To realize the National Social Security System (SJSN), especially National Health Insurance (JKN), BPJS was initiated. However, there are many obstacles encountered in the health services sector, especially those related to legal aspects for BPJS Health members who receive treatment in hospitals. This study aims to research and find a way out of this problem. First of all, this study will review the implementation of rights and responsibilities between hospitals and patients based on Law no. 44 of 2009. Next, an assessment of the effectiveness of the implementation of Law no. 36 of 2009 concerning Health and Law no. 24 of 2011 concerning BPJS, especially in providing excellent and equal health services for BPJS Health members in state hospitals. Finally, this study will find elements that hinder the optimization of health services for BPJS members and their impact on the implementation of BPJS at RSU Sembiring using a Normative Juridical research approach. The research results show that the rights and responsibilities between hospitals and patients, including BPJS Health members, have been clearly defined in various regulations and laws in Indonesia. Regular patients and BPJS members have equal rights in obtaining access to quality and safe health services. However, BPJS members are required to pay contributions and follow a predetermined referral system. RSU Sembiring Deli Tua functions in accordance with existing provisions, including the health service referral system. In July, Sembiring RSU successfully served 8318 BPJS patients, indicating its effective service. However, there are still obstacles on the ground that require attention from policymakers. Overall, RSU Sembiring has been successful in providing services to BPJS Health members in an efficient manner and in accordance with the law. RSU Sembiring is a model for how health institutions need to adapt and collaborate with BPJS and the government to face and find solutions to the obstacles they encounter, so that effective health services and legal protection for BPJS members are guaranteed.

Keywords : Effectiveness of Health Services, BPJS Legal Protection, Sembiring Deli Tua General Hospital.

Introduction

The main goal of Indonesia as a nation is to achieve prosperity for all its people, as written in the preface to the 1945 Constitution of the Republic of Indonesia (UUD 1945). By having this national goal, all aspects of government, including political, economic, social and cultural, are oriented towards achieving this goal. To achieve

this goal, the government must be based on Pancasila as the fundamental basis of the state. Pancasila is the philosophical foundation for Indonesia and the nation's legal order. Pancasila also reflects the values held by Indonesian society, so it is considered important by its population. This is because Pancasila is based on local culture and life perspectives. The main goal, in line with the fifth principle of Pancasila, is to realize "social justice for all Indonesians". Access to health services is a right guaranteed by law and needs to be improved to achieve optimal levels of public health. Hospitals, as health service centers, have special characteristics that change along with advances in science and technology as well as socio-economic conditions. The challenge is to improve the quality of services that can be reached by all levels of society to achieve maximum health prosperity. Community welfare policies in Indonesia, which are regulated in the 1945 Constitution and Pancasila, are the foundation for government implementation, including in the health sector. Based on Law no. 36 of 2009, every individual has the right to receive health services. This ensures that health is an essential part of efforts to achieve societal well-being. This is in line with the fifth principle of Pancasila regarding "social justice for all Indonesians". This commitment was strengthened by the government with the establishment of the National Social Security System (SJSN) through Law Number 40 of 2004 and updated through Law Number 24 of 2014 concerning BPJS. BPJS consists of BPJS Health and BPJS Employment, with BPJS Health being responsible for National Health Insurance (JKN). However, in practice, the implementation of JKN by BPJS Health often receives complaints from the public, starting from the BPJS card activation process, limited and inflexible referrals, to service flows that are considered complicated. Therefore, there needs to be efforts to periodically improve and evaluate health services to achieve the program's initial goal, namely providing comprehensive health insurance for all Indonesian people. Legal protection for BPJS Health participants who are hospitalized is an issue that also needs to be discussed further. Even though by law or regulation, BPJS Health participants are supposed to receive protection, in its implementation there are still shortcomings that give rise to conflicts between BPJS participants and hospitals. To realize this goal, the Social Security Administering Body (BPJS) was established and is tasked with managing the national social security system. However, the many problems that occur between BPJS Health participants and hospitals are an indication that the original goals of BPJS Health have not been achieved optimally. These conflicts are often related to BPJS card activation, limited referrals to health facilities, and service flows that some participants consider complicated.

This should not happen, considering that Article 34 of the 1945 Constitution clearly states that the state is responsible for the welfare of its people, including in terms of health services. However, we must understand that implementing the law in practice often encounters obstacles and challenges. Therefore, it is important for related parties to evaluate and revise existing systems and regulations to ensure effectiveness and legal protection in health services in public hospitals, especially for BPJS Health participants. In fact, based on Article 56 paragraph (2) of Law no. 36 of 2009, the government has the responsibility to provide equitable and quality health services for all levels of society. In this case, BPJS Health as a government institution must be able to ensure equitable and quality health services for all its participants, including in terms of card activation, health facility referrals, and service flow. For this reason, legal protection for BPJS Health participants needs to continue to be improved. The Ministry of Health as an institution that has regulatory authority must be proactive in carrying out supervision and law enforcement against hospitals that commit violations. Thus, it can be concluded that there is still room for improvement in health services in Indonesia, especially in the context of legal protection for BPJS Health participants. Strong commitment and cooperation is needed from all parties, including the government, hospitals and BPJS Health participants, to realize equitable and quality health services for all citizens. Based on the context and background mentioned above, the following is a formulation of the problem that needs to be solved in this study: what are the Rights and Obligations of Hospitals and Patients in Health Services: Remembering Law Number 44 of 2009 which confirms the rights and obligations of hospitals and patients, how are these rights and obligations realized in practice in the field, especially in the context of health services in hospitals? , How Effective is the Law on Health Services in General Hospitals for BPJS Health Participants: How effective is the implementation of Law Number 36 of 2009 concerning Health and Law Number 24 of 2011 concerning BPJS, especially in providing quality and equitable health services for BPJS Health participants in general Hospital? And what are the factors that inhibit the effectiveness of legal health services in public hospitals for BPJS Health participants: What are the factors that become obstacles in achieving the effectiveness of legal health services for BPJS Health participants? How do these factors influence the implementation and implementation of health care laws in public hospitals?.

Research Methodology

This study utilizes a Sociological Juridical approach, a combination of legal and social perspectives, to understand the relationship between legal norms and social phenomena related to medical services in hospitals for BPJS Health members. The process includes identifying legal issues, examining data from legal and social aspects, combining both types of data, and discussing the findings. Information is obtained from primary sources, such as regulations and legal standards, as well as additional sources, for example literature and previous studies. Some of the main regulations examined include Law no. 36 of 2009 concerning Health, Law no. 29 of 2004 concerning

Medical Practice, and Law no. 24 of 2014 concerning BPJS. Once obtained, the information is categorized, analyzed, and its validity reviewed. The results of the qualitative examination of the data are then presented in a thesis to answer the research questions.

Results and Discussion

Rights and Obligations of Hospitals and Patients in Health Services

The rights and obligations of hospitals and patients in health services are an important issue regulated in various regulations and laws in Indonesia. This issue becomes more important in the context of health services for Health Social Security Administering Body (BPJS) participants. According to Law Number 44 of 2009 concerning Hospitals, hospitals have the right to obtain legal protection and law enforcement from the government and authorized parties in carrying out their duties. This is stated in Article 14, which reads: "*Hospitals have the right to obtain legal protection and law enforcement from the Government and/or authorized parties.*" Meanwhile, hospitals also have an obligation to provide health services, including to BPJS Health participants. Article 29 Law no. 44 of 2009 states, "Hospitals are obliged to provide quality, safe, equitable and fair health services to everyone without distinction between socio-economic status and social security membership status. Article 29 Law No. 44 of 2009:

1. Every health institution is obliged to:
 - a) convey accurate information regarding the services they offer to the public;
 - b) provide safe, quality, non-discriminatory and efficient medical services by prioritizing patient needs in accordance with applicable service standards;
 - c) provide emergency services based on existing capabilities;
 - d) be actively involved in providing medical assistance during a disaster according to their capabilities;
 - e) provide facilities for underprivileged people or those in poverty;
 - f) carrying out social responsibilities such as providing facilities for underprivileged patients, emergency services without initial payment, ambulances without charge, services for disaster victims, and other social missions for humanity;
 - g) establish, implement and maintain medical service standards as a guide in providing services;
 - h) managing patient medical records;
 - i) provide adequate public facilities such as places of worship, parking areas, waiting rooms, facilities for the disabled, breastfeeding mothers, children and the elderly;
 - j) running a patient referral system;
 - k) refuse patient requests that violate applicable professional standards, ethics and regulations;
 - l) provide accurate and transparent information regarding patient rights and responsibilities;
 - m) respect and safeguard patient rights
 - n) implement the health institution's code of ethics;
 - o) have accident prevention and disaster response procedures
 - p) support and implement government health programs at both local and national levels;
 - q) record a list of medical practitioners and other health personnel;
 - r) establish and implement internal regulations of health institutions;
 - s) protect and provide legal support to all medical staff in carrying out their duties; And
 - t) declare all areas of health institutions as smoke-free zones.
2. Violations of the responsibilities as stated in paragraph (1) may be subject to sanctions in the form of:
 - a) verbal warning;
 - b) written warning; or
 - c) fines and cancellation of the health institution's operating license.
3. Further provisions regarding obligations Hospital as intended in paragraph (1) regulated by Ministerial Regulation.

The rights and obligations of patients in health services are an important part of the health system in Indonesia. The differences between the rights and obligations of patients who are participants in the Health Social Security Administering Agency (BPJS) and general patients are quite significant and are regulated in various regulations and laws. In Law Number 36 of 2009 concerning Health, article 5 states that everyone has the right to have access to resources in the health sector that are equitable and affordable. Everyone also has the right to obtain quality and safe health services. BPJS Health participant patients are included in 'every person' in question. This means that there is no difference in the right to obtain health services for both general patients and BPJS here. BPJS Health participating patients also have special rights, in accordance with Law no. 24 of 2011 concerning BPJS. Article 17 paragraph (1) of the Law stipulates that "*JKN participants have the right to receive Health Insurance program benefits in accordance with the membership package.*" Meanwhile, the obligation of BPJS Health patients is primarily to pay their contributions on time. This is regulated in Article 18 of Law no. 24/2011 which states "Participants must pay

dues". General patients have the same rights as BPJS Health patients to obtain access and quality and safe health services. However, in practice, general patients usually need to pay more for health services compared to BPJS Health patients, depending on the type of service received and other health insurance they may have. In contrast, general patients have greater freedom in choosing health services, including doctors and hospitals, compared to BPJS Health patients who may be limited by their membership package.

Effectiveness and Legal Protection in Health Services at General Hospitals for Participants in the BJS Health Study at the Sembiring Deli Tua General Hospital.

In carrying out its functions, the Sembiring Deli Tua General Hospital operates based on various statutory regulations. One of the most important is the Regulation of the Minister of Health of the Republic of Indonesia Number 001 of 2012 concerning the Individual Health Service Referral System. This regulation includes arrangements for tiered services, which are an important part of the Indonesian health system. In this system, patients are generally expected to seek care at the basic health service level (eg community health center or general practitioner) before being referred to advanced health facilities such as the Sembiring Deli Tua General Hospital. BPJS Health patients must comply with this referral system to ensure that they receive efficient and effective services. Based on the data we managed to obtain, Sembiring RSU served 8,318 BPJS patients in the July period alone. If we look at the number of BPJS patients treated, of course this proves that many patients are satisfied with the services provided by RSU Sembiring. Furthermore, apart from Minister of Health Regulation no. 001 of 2012, there are also other relevant laws and regulations, such as Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS). This law regulates the implementation of health insurance programs and legal protection for BPJS Health participants. Next, talk about legal protection for BPJS patients. Legal protection for BPJS patients is regulated in various regulations and laws in Indonesia. Here are some examples:

1. Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS): This law states that every BPJS participant has the right to receive benefits according to their contributions and that the government guarantees this participant's rights. This law also guarantees that BPJS participants are protected from discrimination and receive the same services in all health facilities that collaborate with BPJS.
2. Regulation of the Minister of Health of the Republic of Indonesia Number 001 of 2012 concerning the Individual Health Service Referral System: This regulation regulates a tiered service system, where patients must seek treatment at basic level health facilities before being referred to advanced level facilities. This helps maintain the efficiency and quality of health services.
3. Law Number 36 of 2009 concerning Health: This law guarantees the right of every citizen to have access to health services, including BPJS participants. Apart from that, this law also prohibits refusing or delaying medical services that could endanger patients.

Apart from that, other regulations and laws also provide legal protection for BPJS patients. For example, Law Number 44 of 2009 concerning Hospitals regulates the rights and obligations of patients, as well as the quality of services that must be provided by hospitals. And of course RSU Sembiring adheres to the legal rules that have been established. So, in general, BPJS patients receive fairly strong legal protection in Indonesia. However, it is important to emphasize that these protections must be enforced consistently and effectively to ensure that patients' rights and welfare are protected. However, of course it is good that the rules that have been set by the government regarding this matter do not have any records or obstacles faced in the field. There are many challenges and obstacles faced. And we hope that through this article we can contribute considerations for rule makers, in this case the Legislative and Executive Institutions, to further optimize BPJS services. Sembiring General Hospital is one of the health services at the front line serving BPJS patients. Like other health services in Indonesia, RSU Sembiring faces a number of challenges and obstacles. Some of these include:

1. Tiered Referral: Under the tiered referral system stipulated in the Republic of Indonesia Minister of Health Regulation No. 001 of 2012, patients should seek treatment at primary level health facilities before being referred to advanced hospitals such as RSU Sembiring. However, in practice, many patients come directly to the hospital without a referral, which can burden the hospital. For example, patients with mild conditions who could be treated at the community health center level instead come to the hospital, thereby affecting the efficiency and quality of service.
2. Finger Print for New Patients: BPJS Health introduces a fingerprint verification system to increase the accuracy of participant identification and prevent misuse. However, this system can be an obstacle for new patients who have not yet registered. In addition, this registration and verification process can take time and delay medical services.
3. Not all treatment costs are covered: Although BPJS is intended to guarantee access to health services, there are some treatment costs that are not covered by BPJS. For example, certain health procedures that are considered non-essential or cosmetic may not be covered. This can be a barrier for patients who need the procedure but cannot afford it.

4. Use of BPJS Outside the Area of Health Facilities: Although BPJS regulations allow the use of health insurance outside the area of participating health facilities (fasyankes), this is often a challenge. Patients who try to use BPJS outside their health facility area often face obstacles, such as refusal or delays in services. For example, a patient from outside the area who tries to get treatment at RSU Sembiring may encounter difficulties.
5. Availability of Medicines Covered by BPJS: BPJS Health has a list of essential medicines covered by the program, but the availability of these medicines can be a problem. For example, if Sembiring RSU is out of stock of a particular drug, patients must look for the drug elsewhere or buy it themselves.

In facing this challenge, RSU Sembiring and other health facilities must continue to strive to improve their services and work together with BPJS and the government to find solutions. Each of these challenges requires a different approach, and the solution may involve regulatory changes, increased efficiency, and/or increased access to resources.

Conclusion

The effectiveness of health services at RSU Sembiring can be seen from the implementation of a tiered referral system in accordance with the Republic of Indonesia Minister of Health Regulation No. 001 of 2012. Even though there are challenges such as patients who come without referrals from basic health facilities, RSU Sembiring is trying to streamline and improve the quality of their services. Legal protection for BPJS participants at RSU Sembiring is demonstrated through compliance with various regulations and laws, including Law Number 24 of 2011 concerning BPJS. However, there are also challenges in this regard, such as some costs of action that are not covered by BPJS, and barriers to using BPJS outside the health facility area. Apart from that, implementing a fingerprint verification system for new BPJS participants and the availability of drugs covered by BPJS is also a challenge that RSU Sembiring must face. However, amidst these challenges, RSU Sembiring continues to strive to provide effective and legally compliant health services to BPJS Health participants. This includes complying with the referral system as regulated in Minister of Health Regulation no. 001 of 2012, as well as providing quality and timely health services. So, despite facing challenges, RSU Sembiring is generally successful in serving BPJS Health participants effectively and complying with the law. RSU Sembiring is an example of how health facilities must continue to adapt and collaborate with BPJS and the government to find solutions to existing challenges, in order to ensure effective health services and adequate legal protection for BPJS participants.

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