

REGULATION OF THE GOVERNMENT OF THE REPUBLIC OF
INDONESIA
NO. 101 YEAR 2012
CONCERNING
RECIPIENT OF PREMIUM AID FOR HEALTH CARE BENEFITS
PREMIUM (PBI)

WITH THE BLESSING OF GOD THE ALMIGHTY,
PRESIDENT OF THE REPUBLIC OF INDONESIA

Considering:

that, to implement Article 14 clause (3) and Article 17 clause (6) of Law No. 40/2004 on National Social Security System (SJSN), it is required to stipulate Government Regulation on Recipient of Aid for Health Care Benefits premium (PBI).

In view of:

1. Article 5 clause (2) of 1945 Constitution of Republic of Indonesia;
2. Law No. 40/2004 on National Social Security System (SJSN) (State Gazette of Republic of Indonesia no. 150/2004, Additional State Gazette of Republic of Indonesia no. 4456);

HEREBY RESOLVES

To stipulate: THE REPUBLIC OF INDONESIA GOVERNMENT
REGULATION CONCERNING RECIPIENT OF
AIDS FOR HEALTH CARE BENEFITS PREMIUM
(PBI)

CHAPTER 1 GENERAL PROVISIONS

Article 1

The terms in this regulation shall have the following meanings :

1. Health Care Benefit is a benefit in a form of healthcare protection so that participants receive benefits in healthcare and protection of basic health needs which is given to every individual who has paid a premium or have the premium covered by the government.
2. Premium is an amount of fee paid regularly by individual, employer and/or government.
3. Aid for Health Care Benefits Premium, hereinafter referred as Premium Support is a Premium for the poor and low income people which is covered by the Government.
4. Recipients of Aid for Health Care Benefits Premium, hereinafter referred as PBI Jaminan Kesehatan are poor and low income people as participants of health care benefits program.
5. Poor people are people who have no income at all and/or who has income but can not cover decent basic needs of his/her-self and/or his/her family.
6. Low income people are people who have income, wages or salary but can only cover the basic needs and can not pay health care benefits premium for his/her self and his/her family.
7. National Social Security Council, hereinafter referred as DJSN is a council that assists the President to formulate a General Policy and synchronization on the implementation of the National Social Security System.
8. Social Security Provider, hereinafter referred as BPJS is a legal entity formed to implement social security program.
9. Central Government, hereinafter referred as Government is The President of Republic of Indonesia as stipulated by 1945 Constitution of the Republic of Indonesia.
10. Minister is Government Minister on social affair.

CHAPTER 2
CRITERIA STIPULATION AND DATA COLLECTION OF POOR
AND LOW INCOME PEOPLE

Article 2

- (1) Minister stipulates the criteria for poor and low income people after coordinating with related ministers and/or chairman of state institutions.
- (2) The criteria stated on clause (1) above shall become a reference for the state statistics agency in collecting data

Article 3

The result of data collection of Poor and Low Income People by a statistics agency shall be verified and validated by Minister to become an integrated data.

CHAPTER 3
STIPULATION OF RECIPIENTS OF AID FOR HEALTH CARE
BENEFITS PREMIUM (PBI)

Article 4

The data of poor and low income people that has been verified and validated as referred in Article 3, will be stipulated as integrated data by Minister after coordinating with Finance Ministry and/or chairman of related state institutions

Article 5

- (1) The integrated data stipulated by Minister shall be detailed on province and regency/city level.
- (2) The data stated in clause (1) will become reference to calculate the national amount of PBI Health Care Benefits.

Article 6

Minister shall deliver the integrated data stated in article 5 to Health Minister and DJSN.

CHAPTER IV

REGISTRATION OF RECIPIENT OF AID FOR HEALTH CARE BENEFITS PREMIUM(PBI)

Article 7

Health Minister shall register the national amount of PBI Health care Benefits as stipulated in Article 5 clause (2) as participants of Health care Benefits to BPJS Kesehatan.

Article 8

BPJS kesehatan is obliged to issue a universal identity number to participants of Health Benefits who have been registered by Health Minister.

CHAPTER 5 PREMIUM FUNDING

Article 9

The source for the implementation for Health Care Benefits program for PBI Health Care Benefits is the State Budget (APBN).

Article 10

- (1) DJSN propose Health Care Benefits budget plan for PBI Healthcare Benefits to Health Minister.
- (2) Health Minister propose Health Care Benefits budget plan for PBI Health Care Benefits to Finance Minister based on DJSN recommendation.
- (3) Budget proposal stated in clause (2) shall be implemented in accordance to law.

CHAPTER 6 REVISION TO DATA OF PBI HEALTH CARE BENEFITS

Article 11

- (1) Revision to data of PBI Health Care Benefits can be done as follow:
 - a. Deletion of poor and low income people listed as PBI Health Care Benefits who are no longer meeting the criteria anymore, and
 - b. Addition of poor and low income people to be included as PBI Health Care Benefits as they have

met the criteria.

- (2) Data revision stated in clause (1) shall be verified and validated by Minister.
- (3) After a coordination with Finance Minister and minister and/or chairman of related State Institutions, the data revision shall be stipulated by Minister.
- (4) The period for verification and validation of data revision state in clause (3) is every 6 (six) months on going fiscal year.

Article 12

Residents who are no longer eligible as poor people and can afford the premium are obliged to become participant of Health Care Benefits and pay the premium

CHAPTER VII PUBLIC PARTICIPATION

Article 13

General public can participate by providing accurate and correct data on PBI Health Care Benefits, requested or voluntary.

Article 14

Public participation as stated in article 13 is submitted to the Public Complaint unit in regional level appointed by governor or regency/mayor based on their authority.

CHAPTER 8 CLOSING PROVISIONS

Article 15

On the date this Government Regulation comes into effect :

- a. The determination of the amount of PBI Health Care Benefits for year 2014 shall refer to the year 2011 Data Collection on Social Security Program based on the criteria stipulated by Minister;
- b. Minister will coordinate with Finance Minister and minister and/or chairman of related state institution to determine the amount of PBI Healthcare Benefit for

year 2014.

Article 16

This Regulation comes into force on the date of enactment. In order that everyone shall take cognizance, this Regulation shall be enacted by placing it in the State Gazette of the Republic of Indonesia.

Stipulated in Jakarta
December 3, 2012
PRESIDENT
OF THE REPUBLIC OF INDONESIA
signed and sealed
DR.H. SUSILO BAMBANG YUDHOYONO

Enacted in Jakarta
December 3, 2012
MINISTER OF JUSTICE
AND HUMAN RIGHTS
OF THE REPUBLIC
OF INDONESIA
signed
AMIR SYAMSUDIN

STATE GAZETTE OF THE REPUBLIC OF INDONESIA OF 2012 NO. 264

Copy in accordance with the original
STATE SECRETARY OF REPUBLIC OF INDONESIA
Deputy Assistant of State Law
Political and Social Welfare

WISNU SETIAWAN

EXPLANATION ON THE
REGULATION OF GOVERNMENT OF THE REPUBLIC OF
INDONESIA
NO. 101 YEAR 2012
CONCERNING
RECIPIENT AID FOR HEALTHCARE BENEFITS PREMIUM

1. GENERAL

Law no. 40/2004 concerning National Social Security System was formulated to provide social security for the whole population. The law specify 5 (five) forms of social security program : Health Benefits, employment accident benefits, old age insurance, pension plan and life insurance for all citizen. Currently, only a small fraction of population participate in these programs and most of the people do not have sufficient social security.

Law no. 40/2004 on National Social Security System mandated that social security program implemented by several providers will cover more participants and provide greater benefits for all participants. Under broader social security program, it is expected that the whole population can meet their basic needs, including those who are poor and low income people.

Article 14 clause (1) of Law no. 40/2004 on National Social Security System determines that "Government, will gradually register recipients of aid to pay memberships premium to Social Security Provider"

Further in Article 17 clause(4), it is mandated that "Social Security Program Premium for poor and low income shall be paid by Government". On clause (5), it is described that "in the first phase, Government shall pay premium as referred in clause (4) for Healthcare Benefit". Also, in clause (6) it is stipulated that "Regulation as referred in clause (4) and clause (5) shall be subsequently regulated under Government Regulation"

Based on the content of Article 17 clause (5) and Article 21 clause (1), Government shall pay Health care benefits Premium for Poor and Low Income people.

With regards to the above considerations, it is necessary to stipulate a Government Regulation on Recipient Of Premium for Health Care Benefits. The scope of this Government Regulation only covers a Health Care Benefits that regulates:

1. General Provision
2. Criteria Stipulation And Data Collection Of Poor And Low Income People
3. Stipulation of Recipients of Aid for Healthcare Benefits Premium (PBI)
4. Registration Of Recipients of Aid for Healthcare Benefits Premium (PBI)
5. Aid Funding
6. Revision To Data Of PBI Healthcare Benefits
7. Public Participation

2. ARTICLE BY ARTICLE

Article 1
Clear

Article 2
Clear

Article 3
The format for verification and validation is data matching and ratification.

Article 4
“Ministers and/or chairman of related state institution” refer to Health Minister, Transmigration and Labor Minister, Interior Minister and Chairman of a State Statiscic Office who conduct data collection.

Article 5
Clear

Article 6
Clear

Article 7
Clear

Article 8
Clear

Article 9
Clear

Article 10
clause (1)
Clear

clause (2)

Clear

clause (3)

“State Law” refers to Law on State Finance.

Article 11

clause(1)

Letter a

Reasons for data deletion from PBI Health Care Benefits list :

- a. Participants of PBI Health Care Benefits pass away; and
- b. Participants of PBI Health Care Benefits are employed.

Letter b

Reasons for data addition to PBI Health Care Benefits list :

- a. Employees who are laid off (PHK) and have yet to be employed after 6 (six) months;
- b. Victims of disaster;
- c. Employees reach pension age;
- d. Family members of deceased employees;
- e. Children of parents registered in PBI Health Care Benefit list.

clause (2)

Clear

clause (3)

Clear

clause (4)

Clear

Article 12

Clear

Article 13

Clear

Article 14

“Public Complaint Unit” refer to a unit that provides services to community at province and regency/city. One of its functions is to receive public complaints on data collection, registration and aid for Health Care benefits premium.

Article 15

Clear

Article 16
Clear

ADDITIONAL STATE GAZETTE OF REPUBLIC OF INDONESIA No. 5372