

Legal Protection of *BPJS* Participants in Ngudi Waluyo Wlingi Hospital-Blitar District

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Abstract

This study aims to explain the legal protection of patients participating in *BPJS Kesehatan* in health services at *Ngudi Waluyo Wlingi* Hospital and the role of the government and the accountability of the hospital in fulfilling the rights of patients registered as *BPJS Kesehatan* participants. The empirical juridical research method is also called research examining law as a pattern of behavior shown in the application of legal regulations. The empirical juridical approach is carried out by collecting primary data information obtained directly in the field which is aimed at applying the law relating to the use of the family witness. Whereas in legally protecting *BPJS Kesehatan* participant patients in obtaining health services, there are two types of legal protection for *BPJS Kesehatan* participants in health services, namely preventive and repressive legal protection. There are two roles of the government and the responsibility of the hospital in fulfilling the rights of patients who are registered as *BPJS Kesehatan* participants. The first is to provide convenience for *BPJS Kesehatan* patients with the collaboration of *BPJS Kesehatan* and the “*Ngudi Waluyo*” *Wlingi* Hospital in educating patients/customers of *BPJS Kesehatan* participants by improving the quality of health services in hospitals. Second, pay attention to facilities and infrastructure for patient rights and follow up quickly on complaints/complaints from patients/customers participating in *BPJS Kesehatan* that there is no distinction between *BPJS Kesehatan* patients and/or incapacitated patients or general patients..

Keywords: Legal Protection, *BPJS* Patients, Health Services.

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Introduction

The development of the service industry is currently increasing rapidly. The current competition is very competitive. The services provided between one service provider and another service provider are very varied according to the needs and desires of consumers. One of the service industries that is developing very rapidly in Indonesia is the hospital service industry, both government-owned and privately owned and even foreign-owned hospitals. In line with the mandate of Article 28 H paragraph (1) of the 1945 Constitution of the Republic of Indonesia, it has been emphasized that everyone has the right to obtain health services, then in Article 34 paragraph (3) it is stated that the State is responsible for the provision of health service facilities and public service facilities. worthy. Every activity carried out in the context of improving public health welfare needs to be carried out professionally without discrimination. In life it always describes a different social level, starting from work and income which is the source of poverty and discrimination in life

which is then characterized by differences in social stratification between people from the upper, middle and lower classes.

Health is one of the elements of general welfare that must be realized by the Government in accordance with the ideals of the Indonesian nation as referred to in Pancasila and the 1945 Constitution of the Republic of Indonesia (Asyhadie, 2017). Article 3 of Law Number 24 of 2011 Concerning the Social Security Organizing Agency (*BPJS*), says that "It has the aim of providing social welfare insurance to fulfill the basic needs of a decent life for each participant and their family members". Based on Article 35 of Presidential Regulation Number 28 of 2016 concerning Health Insurance, it is stated that: "The government is responsible for providing health protection guarantees related to services and facilities for the community. *BPJS* in this article means *BPJS Kesehatan*, because in Indonesia *BPJS* divided into *BPJS Kesehatan* and *Ketenagakerjaan*."

So health is the basic right of every individual and all citizens have the right to get health services, including the poor, which in its implementation is carried out in stages according to the financial capacity of the government and local governments. So the government must be responsible for providing life, especially in the health sector to the community.

Article 10 paragraph (2) of Law Number 40 of 2004 concerning the National Social Security System also states that "Health insurance is organized with the aim of ensuring that participants receive health care benefits and protection in meeting basic health needs". So it can be concluded that public health is really protected by the government by paying for health costs through budget money from the government which is given to each hospital designated by the provincial government in their respective areas with Article 20 paragraph (1) of the Law Number 49 of 2004 concerning the National Social Security System which reads that: "Health insurance participants are everyone who has paid contributions or whose contributions have been paid by the government".

BPJS services have been used in several government hospitals, but the implementation of the program still causes problems related to health services provided by hospitals to patients who use *BPJS*. Service is the most common problem that participants and health service providers complain about and is treated soberly. From the patient side, complaints are often heard that they receive unpleasant service when compared to non-*BPJS* patients, complaints like this are rare. The inspection was carried out in a hurry.

Both upper and lower class people, all of them have the right to proper health. Regardless of intensive care or expensive medicines, every individual (*BPJS* participant) who seeks treatment at a hospital, clinic or other health facility has the right to get medical treatment in the form of good health services according to their respective provisions, *BPJS* in implementing the guarantee program. Health needs to pay attention to several things in order to achieve the success of these health efforts. One of these health efforts is the availability of adequate quality personnel, facilities and infrastructure. The hospital is a health facility organized by both the government and the community.

In order to provide health services, *BPJS* makes cooperation agreements with hospitals throughout Indonesia, both government hospitals and private hospitals, which regulate the rights and obligations of *BPJS* and hospitals. So that the rights of patients who are *BPJS* participant patients can be used.

The Ngudi Waluyo Wlingi Regional General Hospital, Blitar Regency, is also a health service provider who is responsible for implementing legal protection related to the rights of patients participating in *BPJS* in obtaining health services. So the hospital as a place to work for health workers who deal directly with patients in health care efforts. Therefore,

the hospital can be held liable for the errors and or negligence of the health workers working in it.

Based on the description in the research background above, the problem can be formulated as follows: What is the legal protection for BPJS Kesehatan participant patients in health services at Ngudi Waluyo Wlingi Hospital? and What is the role of the government and the responsibility of the hospital in fulfilling the rights of patients who are registered as BPJS Health participants?

From the above problems, the purpose of this study are: to know about legal protection for BPJS Kesehatan participant patients in health services at Ngudi Waluyo Wlingi Hospital and to find out the government's role and the responsibility of the hospital in fulfilling the rights of patients who are registered as BPJS Health participants.

Materials and Methods

Research is a process consisting of a series of steps that are carried out in a planned and systematic way to obtain a solution to a problem or to obtain answers to certain questions. In this study, the empirical juridical approach method was used, namely that in analyzing the problem it was carried out by combining legal materials (which are secondary data) with primary data obtained in the field, namely legal protection for BPJS Health patients. So this method, aside from a juridical perspective, is in accordance with the laws and regulations that apply, it also examines what is happening in the community, especially patients participating in BPJS Kesehatan.

Primary data is a source of data obtained directly by researchers using data collection methods, research instruments with field observations, namely at "Ngudi Waluyo" Wlingi Hospital. Interview with the "Ngudi Waluyo" Wlingi Hospital and distribute questionnaires to patients who are BPJS Health participants who are pleased with the legal protection of BPJS Health participants. In health services at the "Ngudi Waluyo" Wlingi Hospital and the role of the government and the responsibility of the hospital in fulfilling the rights of patients participating in BPJS Kesehatan

Secondary data is data obtained by researchers from various literature studies and laws and regulations, books, literature and expert opinions related to this research problem. The data source is in the form of secondary data which is usually used in research, including:

This primary legal material is binding material, namely Law Number 36 of 2009 concerning Health, Law Number 8 of 1999 concerning Consumer Protection, in this case patients are also included, Law Number 44 of 2009 concerning Hospitals, Law Number 24 of 2011 concerning the Social Security Administration Agency and laws and regulations related to this research Secondary legal materials; books related to legal issues to be examined.

Tertiary legal materials; legal materials that provide instructions and explanations of primary and secondary primary legal materials. Tertiary legal materials such as the large Indonesian language dictionary, legal dictionaries, encyclopedias and materials from internet media that are relevant to this research.

To account for the data obtained by researchers, by collecting existing data, in the form of:

1. Observation; collecting data by direct observation and systematically recording the phenomena studied, namely about the "Ngudi Waluyo" Wlingi Hospital in serving patients participating in BPJS Health and BPJS Health patients themselves.
2. Interview; questions and answers conducted by researchers for related hospitals and patients who are BPJS Health participants and who have not registered as BPJS Health participants by purposive sampling (random).

3. Literature study; by studying written materials both journals, books, scientific magazines related to the title of this research as complementary material in research

Materials or data obtained in this study were analyzed descriptively qualitatively by providing explanations by describing the results of the research obtained, then comparing the results of the research with the theories and opinions of legal experts and based on applicable legal provisions and statutory regulations.

Qualitative data analysis, namely systematically describing and explaining the analysis of research problems, in accordance with the actual facts. Then conclusions are drawn with deductive techniques, namely drawing conclusions from things that are general to things that are specific, and from things that are specific to things that are general in nature (inductive).

Results and Discussion

A. Legal protection for BPJS Health Participating Patients in Health Services at the “Ngudi Waluyo” Wlingi Hospital.

RSUD "Ngudi Waluyo" Wlingi as a Regional Public Hospital Owned by the Blitar Regency Government has an important role in providing health services in Blitar Regency, the existence of the *JKN-KIS* program from *BPJS Kesehatan* has increasingly increased public awareness of the importance of health. as a government-owned hospital, *RSUD "Ngudi Waluyo" Wlingi* automatically becomes a partner of *BPJS Kesehatan*.

The implementation of legal protection for patients participating in *BPJS Kesehatan* can be seen from the fulfillment of patient rights in obtaining health services in hospitals which must be in accordance with applicable laws and regulations. *RSUD "Ngudi Waluyo" Wlingi* enforces the protection of patient rights listed in Article 32 of Law Number 44 of 2009 concerning Hospitals.

Health services in hospitals will largely be determined by the availability of available facilities, such as the type of service and specialist doctor service staff. Everyone has the right and obligation to obtain optimal health. That is why improving the degree of health must be continuously pursued to fulfill a healthy life. Article 28H of the 1945 Constitution of the Republic of Indonesia the second amendment states that "Every person has the right to live in physical and spiritual prosperity,.... and the right to obtain health services.

Public services are full of various problems, especially since the coverage area itself is very wide, including the profit and non-profit sectors. The coverage is so broad that it is not easy to describe people's perceptions of public services. The existence of differences in perceptions is indeed normal as a consequence of different viewpoints, but they are not irreconcilable. Perception itself is actually nothing but someone's understanding or understanding of something (Shofie, 2009).

As the largest health service unit, the hospital has two functions, namely curative and preventive. The curative function is more focused on healing sick patients. The preventive function has the consequence that the mission of health services is to increase human resistance to disease threats, for example, through the National Immunization Program (*PIN*).

Article 28H paragraph (3) of the 1945 Constitution states that everyone has the right to social security which allows for his full self-development as a dignified human being. For this reason, in order to provide social security to every citizen, the government considers it necessary to develop a social security system for all people in accordance with the mandate of Article 34 paragraph (2) of the 1945 Constitution.

Article 34 paragraph (2) of the 1945 Constitution states that the state develops a social security system for all people and empowers people who are weak and incapable according to

human dignity. This is done as an effort to achieve the highest degree of public health, as the goal of health development. So that for legal protection related to *BPJS Kesehatan* participants in obtaining health services, the government issued Law of the Republic of Indonesia Number 24 of 2011 which stipulated that two *BUMNs* (Stated Owned Company), namely *PT Askes (persero)* and *PT Jamsostek (Persero)* were changed to form Public Service Agencies to implement 5 programs. which is mandated by Law Number 40 of 2004, namely the Health Insurance program for *BPJS Kesehatan* and other programs handed over to *BPJS Ketenagakerjaan*.

Medical services are the object of care and treatment agreements. Improving the quality of life both physically and non-physically in the health sector is a comprehensive and very broad endeavor (Nasution, 2005). Law was created as a means or instrument to regulate the rights and obligations of legal subjects (Mertokusumo, 1993).

In any irregularities or criminal acts committed by the medical team or by a doctor resulting in consequences in the form of legal sanctions both in criminal, civil and administrative sanctions as an effort to provide legal protection for patients who have been harmed.

The government through the Minister of Health has stipulated several regulations governing the implementation of the *BPJS Kesehatan* program, both regarding tariffs and procedures for obtaining health services. In these regulations so that participants are not charged if they take advantage of their rights to get services.

While *BPJS Kesehatan* has prepared officers in each hospital to be able to escort and accompany and provide services to participants in utilizing their right to seek treatment at designated health facilities. This is in accordance with the interview with Mrs. A (initials) as an employee of *BPJS Kesehatan*, that "at the hospital, especially *RSUD "Ngudi Waluyo" Wlingi*, we also place *BPJS Kesehatan* personnel as guides, recipients of complaint resolution, and companions if patients participating in *BPJS Kesehatan* experience problems when using health services at the hospital."

With the implementation of this *JKN*, it is hoped that there will be no more Indonesian people, especially the poor who do not go to health care facilities when they are sick because they do not have funds. The implementation of *JKN* is basically the mandate of the National Social Security Law and Law Number 24 of 2011 concerning the Social Security Administering Body (*BPJS Law*), where health insurance is a guarantee in the form of health protection so that participants receive health care benefits and protection in meeting the basic health needs provided to everyone. who have paid contributions or whose contributions are paid by the government. In simple terms, the *JKN* developed by the government is part of the *SJSN* which is organized using a mandatory social health insurance mechanism based on the *SJSN Law*.

Therefore, all Indonesian residents are required to become participants in health insurance managed by *BPJS Kesehatan*, including foreigners who have worked for a minimum of six months in Indonesia and have paid premiums.

Basically legal protection must be given to every consumer or user of health services, namely patients. Legal protection is given to protect the rights owned by consumers as users of goods and/or services of a product produced by business actors.

But in the provision of health services whose results cannot be ascertained, there will be many complaints or losses suffered by patients as users of health services. Patients using *BPJS Kesehatan* for health are delayed in providing medical services provided by hospitals, patients have rights that must be protected by law against patients using *BPJS Kesehatan*. in accordance with the Explanation of Article 3 letter (b) of Law Number 44 of 2009 concerning Hospitals, states that: "Provides protection for the safety of patients, the public, the hospital environment and human resources in hospitals.

It is known that in carrying out service management duties, it refers to service *SOPs*. This is considered to be quite effective because with the existence of a standard procedure reference, there is less possibility for officers to make mistakes in patient care. efforts to realize the performance of public services within government work units that are measurable and can be evaluated.

To succeed, local governments need to have and implement standard work procedures. Therefore, by ratifying and establishing standard operating procedures (SOP) as a reference for officers in providing handling of the health service process. This shows that hospitals and health centers play a role in realizing quality and optimal public service performance and making *SOPs* a tool to improve the performance of government administration effectively and efficiently. There are 3 (three) health service standards in the BPJS program, namely, First Level Health Facilities (*FKTP*), Advanced Level Health Facilities, and Emergency Services.

The process of getting treatment using a *BPJS* card is generally very easy, when a patient is sick and wants to take treatment using *BPJS Kesehatan*, the first step that must be taken is to go to the place or location of the health facility according to the First Level Health Facilities, which is listed on the Participant's *BPJS* card.

At the location of a level one health facility, patients will get an examination, as well as treatment for free, if the patient must be referred for hospitalization, they will be asked to determine which hospital is cooperating with *BPJS Kesehatan* which will be referred to the Advanced Health Facility, and the patient will receive a referral letter from the doctor concerned, the doctor will provide a *BPJS* referral and the patient can go to the referred hospital or polyclinic.

If the patient is in an emergency, he can go directly to a health facility that cooperates or does not cooperate with *BPJS Kesehatan* by following the specified procedure. Through this process, the patient will still be treated as a *BPJS* patient at the polyclinic or referral hospital, so that the patient's medical expenses will still be paid. borne by *BPJS Kesehatan*.

The government guarantees the implementation of the use of the *BPJS* Health card. For hospitals where health services are addressed by *BPJS Kesehatan* patients, they sometimes experience problems, namely when the *BPJS Kesehatan* participant card cannot be used because *BPJS Kesehatan* participant patients sometimes pay independently and/or PBI.

Even if *BPJS Kesehatan* is independent, membership will be blocked and fines will be imposed according to the number of days in arrears and this can be accessed by hospital staff or *BPJS Kesehatan* personnel.

For patients who experience these problems, they must first complete the arrears. This is in accordance with the statement of Saroh's mother, whose husband was being treated at the "Ngudi Waluyo" Wlingi Hospital, "Initially he entered the emergency room and was still served by a doctor's examination. Even though his membership as a *BPJS Kesehatan* participant cannot be used because of late payments so that the *BPJS* Health participant card is dead. It can be used even if payment is made in advance or as a general patient."

This is what has become a polemic in the community, because it is considered a burden to the community, especially for the poor who cannot afford to pay premiums on a regular basis. Even if it is late to pay the premium, participants will not be provided with proper services and may be subject to an administrative fine of 2% per month of the total dues in arrears in accordance with the provisions of Article 17 paragraph (4) Health Insurance Government Regulation. This polemic is getting stronger when faced with the mandate of the 1945 Constitution that social security such as health insurance is a state responsibility without discrimination so as to enable self-development as a human being with dignity.

The impact is for patients who want to get health services at the *Wlingi "Ngudi Waluyo"* Hospital because of this. So the alternative is that services for patients are still carried out using general membership. The hospital is in accordance with the Government's mandate that patients are given leeway for managing their membership for 3 x 24 hours, providing leeway for patients/families for managing *BPJS Kesehatan* membership.

Basically legal protection must be given to every user of health services, namely patients. Legal protection is provided to protect the rights of consumers as users of goods and/or services. In the provision of health services whose results cannot be ascertained, there will be many complaints or accepted by patients as users of health services.

RSUD "Ngudi Waluyo" Wlingi by responding to the problem of complaints and/or dissatisfaction with patients/patient families for those whose membership of *BPJS Kesehatan* has problems, the hospital provides a solution for them when they are unable to resolve their arrears, namely to continue to serve the examination as much as possible in accordance with the applicable *SPO*.

That way the legal protection for *BPJS Kesehatan* participants is still considered both in terms of health services by not distinguishing between general patients and *BPJS Kesehatan* patients.

This is as explained by dr. Arief as manager. Medical Services, that "there is no difference in health services, whether *BPJS Kesehatan* participants or general patients, and also some patients are considered incapacitated."

The statement from the *"Ngudi Waluyo" Wlingi* Hospital is also in accordance with the explanation regarding the legal protection of *BPJS Kesehatan* participants as patients in law is guaranteed as stated in Law Number 36 of 2009 concerning Health and Law Number 44 of 2009 concerning Hospitals.

In this case there is a legal relationship between the *BPJS Kesehatan* patient and the hospital. Therefore, rights and obligations arise that must be fulfilled and carried out by each party.

BPJS Kesehatan guarantees the legal protection of participants who experience problems in terms of health services at health facilities or health facilities, both at the first level and at the advanced level. This repressive protection gives the right for participants to take steps to submit complaints to *BPJS Kesehatan* for follow-up.

There are two legal steps that can be taken by *BPJS* Health participants to claim losses for their health services:

1. Mediation (non-litigation) this legal step is regulated in Article 29 of Law Number 36 of 2009 concerning health which states that in violations of health workers in providing health services to patients, the first step that must be taken is mediation between the two parties to achieve a solution or agreement.
2. Litigation that is the last step if after mediation no agreement is found, and the patient wants to exercise his right to
3. Sue health facilities because they have committed violations that harm patients both civilly and criminally.

If the health facility is proven to be negligent in its responsibility in providing health services to the detriment of patients or acting inconsistent with the provisions of the law and the cooperation agreement, the first stage is the imposition of light sanctions in the form of a warning letter, the limit for a warning letter is three times. If the action proves to be fatal, for example, it takes the patient's life due to long handling or malpractice, severe sanctions will be in the form of termination of cooperation, reporting to the Health Office, *PERSI*, and reporting to the police. (Interview with Information Recipient officer and Participant Complaint *PIPP BPJS Kesehatan* Kediri Branch Office).

B. The Government's Role and Hospital Accountability in Fulfilling the Rights of Patients Who Are Not Registered as *BPJS Kesehatan* Participants.

The government is an organ that has the authority to process public services and the obligation to obtain civil service for everyone who has government relations, so that every member of the community concerned receives it when needed according to the demands that have been ordered.

Various efforts have been made by the government in fulfilling the right of every citizen to obtain proper health services, the monetary crisis that occurred around 1997 has contributed to increasing health costs manifold, thus suppressing access of the population, especially the poor to health services.

The main obstacle to health services for the poor is the problem of health financing and transportation. Many factors lead to inequality in health services which drive up health costs, including changes in disease patterns, developments in health and medical technology, patterns of health financing based on out-of-pocket payments, and government subsidies for all lines of services, in addition to inflation in the health sector which exceeds other sectors.

The enactment of Law Number 40 of 2004 concerning the National Social Security System is a fundamental change for insurance in Indonesia, especially Social Insurance where one of the social security programs is health insurance.

In Article 19 paragraph (2) of Law Number 40 of 2004 it is stated that health insurance is held with the aim that participants obtain health care benefits and protection in meeting basic health needs, this is a form or way so that people can easily access to a health facility or obtain health services.

However, the law has not yet been implemented considering that implementing regulations in the form of Government Regulations, Presidential Regulations and Presidential Decrees have not yet been promulgated except for the Presidential Decree on the Appointment of the National Social Security Board.

The inability to implement Law Number 40 of 2004 concerning the National Social Security System has made it increasingly difficult for certain groups of people, namely the poor and the underprivileged, to obtain services. That is reaffirmed in Article 28 H paragraph (1), which reads "Every person has the right to live in physical and spiritual prosperity, to have a home and to get a good and healthy environment and has the right to obtain health services".

The article explains that health is a human right or basic right of every person guaranteed by the state. Health development is part of national development, in health development the goal to be achieved is to increase the optimal degree of public health. The Indonesian government stipulates Law Number 40 of 2004 concerning the National Social Security System as proof that the government has a great commitment to realizing social welfare for all of its people. The hospital is an institution in the chain of the National Health System that develops health service tasks for the whole community. Therefore, everyone has the right to get health services and the highest degree of health (Hendrik, 2013).

Hospital administration in accordance with existing laws and regulations, can be carried out either by the government or the private sector/community. Law Number 44 of 2009 states that a hospital is a health service institution that provides comprehensive individual health services that provide inpatient, outpatient and emergency care services. The hospital is organized based on Pancasila and is based on human values, ethics and professionalism, benefits.

This is in accordance with the results of interviews with several patients from "*Ngudi Waluyo*" Wlingi Hospital who stated that the services of "*Ngudi Waluyo*" Wlingi Hospital in providing *BPJS Kesehatan* services are still not optimal where the facilities provided are still

inadequate, limited information about requirements when using *BPJS Kesehatan* during an examination at the polyclinic, the treatment room was hot because of the fan and even then it was small that the waitstaff was hot/hot. (Interview with patient Mr. Samsul, September 30, 2022)

Meanwhile, according to Mustiko as the Coordinator of Public Relations and Law (2/10/2022), said that "the efforts made by the Wlingi "Ngudi Waluyo" Hospital to fulfill the rights of BPJS participants include:

1. Provide services according to applicable standards;
2. Provide educational information and patient education as needed;
3. Prepare facilities and infrastructure in accordance with the availability of existing funds;
4. Providing a patient complaint unit; And
5. Provide human resources according to the needs of the hospital."

In addition, according to him, both inpatient and outpatient care at the *Wlingi "Ngudi Waluyo" Hospital* for patients participating in *BPJS Kesehatan* and non-participating *BPJS Kesehatan* are not the same. What differentiates inpatients is the *BPJS Kesehatan* membership class, from class I, class II, and class III. The difference is only in the facilities, not in the inspection.

This was also expressed by dr. Fajar Hadi W, Sp.PD, that "the efforts that should be made by the hospital are accelerating *BPJS* patient services and the *BPJS* information center."

Meanwhile, according to the *BPJS Kesehatan* Kediri Branch (4/10/2022, do not want to be named), that the efforts made by *BPJS Kesehatan* to fulfill the rights of *BPJS Kesehatan* participants:

- a. The most important thing is to improve the quality of service to participants by instilling in all *BPJS Ketenagakerjaan* that *BPJS* officers are servants of BPJS participants both at the office and in health facilities or hospitals;
- b. Placing *BPJS* officers in hospitals, in addition to providing administration and information services to *BPJS* participants, *BPJS* officers are required to accompany BPJS participants who experience problems with the hospital to be resolved by hospital management;
- c. Prepare leaflets, brochures and information media about the rights and obligations that *BPJS* participants must know; And
- d. Setting up a hotline service ready to serve participants who need information about *BPJS* Health.

This is in accordance with Law Number 24 of 2011 concerning the Social Security Administrative Body in terms of the duties of the *BPJS Kesehatan*.

The government urges and is responsible to all people for people who have not registered as *BPJS Kesehatan* participants to immediately register as soon as their family data matches the number of family cards as a form of health insurance if they need health services.

And for people who can't afford and need health services, the hospital on the advice of the local government can provide services free of charge by completing several requirements according to the regulations that apply to the hospital and in a plenary manner providing inpatient, outpatient and emergency care services. The hospital is organized based on Pancasila and is based on human values, ethics and professionalism, benefits.

This is in accordance with the results of interviews with several patients from "Ngudi Waluyo" Wlingi Hospital who stated that the services of "Ngudi Waluyo" Wlingi Hospital in providing *BPJS Kesehatan* services are still not optimal where the facilities provided are still inadequate, limited information about requirements when using *BPJS Kesehatan* during an examination at the polyclinic, the treatment room was hot because of the fan and even then it

was small that the waitstaff was hot/hot. (Interview with patient Mr. Samsul, September 30, 2022)

Conclusion

Based on the problems and discussion of the data obtained from the research, it can be concluded that Legal protection for *BPJS Kesehatan* participant patients in health services at "Ngudi Waluyo" Wlingi Hospital Whereas in legally protecting *BPJS Kesehatan* participant patients in obtaining health services, the government issued Law Number 24 of 2011 concerning the Health Insurance Organizing Agency which stipulated that two BUMNs namely *PT Askes (persero)* and *PT Jamsostek (Persero)* were changed to form Public Service to carry out 5 programs mandated by Law Number 40 of 2004, namely the Health Insurance program for *BPJS Kesehatan*. *BPJS Kesehatan* Kediri Branch has prepared officers in each hospital to be able to escort and accompany and provide services to participants in utilizing their right to seek treatment at designated health facilities. There are two types of legal protection for *BPJS Kesehatan* participants in health services, namely preventive and repressive legal protection. The role of the government and the responsibility of the hospital in fulfilling the rights of patients who are registered as *BPJS Kesehatan* participants, namely: Providing convenience for *BPJS Kesehatan* patients with the collaboration of *BPJS Kesehatan* and RSUD "Ngudi Waluyo" Wlingi in educating patients/customers of *BPJS Kesehatan* participants by improving the quality of health services in hospitals. Pay attention to facilities and infrastructure for patient rights and follow up quickly on complaints/complaints from patients/customers participating in *BPJS Kesehatan* that there is no distinction between *BPJS Kesehatan* patients and/or incapacitated patients or general patients.

The advices are *BPJS Kesehatan* as the organizer of the *JKN-KIS* program should be able to socialize and improve the services of the health program so that people are protected and feel the benefits of *JKN-KIS*. Patients receiving health services should be able to support the *JKN-KIS* program and carry out their obligations to pay contributions because it is mutual cooperation, that is, those who are healthy help those who are sick so that government programs can run properly according to procedures so that legal protection for *BPJS Kesehatan* participants can be protected .

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