

20 Million of Impoverished People Will Have Health Insurance Guarantee

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At least 20 million of disadvantaged people across Indonesia that do not have health insurance will breath a fresh air by 2014. This is because the government will guarantee health insurance following the endorsement of Law on Social Guarantee Provider (UU BPJS).

Chairman of Association of Regional Social Guarantee of Yogyakarta, Sugeng Irianto, said that the new regulation would cover civil servants, members of the military and police, and the impoverished. In 2014, the government will increase the quota for the unfortunate by 20 million from 76.4 to 96.4 million people. "As such, this would allow chance for underpaid formal and informal workers to have health insurance guarantee when ill. So are those whose health insurance has not been covered," he said on Tuesday (4/12) in a discussion on Regional Health Guarantee run by the Centre for Funding Policy and Health Insurance Management of Faculty of Medicine UGM.

Sugeng highlighted the criteria of health insurance recipients that should have changed. This is because many degenerative health cases have also impoverished people. For instance, cancer, renal failure or cardiac failure that are suffered by members of middle class family may impoverish that family due to the long and expensive treatment. "So, it is good if poverty in terms of health is interpreted differently," he explained.

Sugeng mentioned that currently there are around 942,000 residents in Yogyakarta or 29% have health insurance gurantee through Jamkesos while 320,000 through Jamkesda. Even so, there are still some people who are uncovered. "So, as long as there is no amendment to the Law No 32 Year 2004 that also requires regions to develop social guarantee, we feel that local governments should also guarantee health insurance for those uncovered by Jamkesos, despite the implementation of BPJS," he said.

Dyah Ayu Puspandari, Executive Secretary of the Centre assessed that implementation of Jaminan Kesehatan Sosial (Jamkesos) has not fully guaranteed the poor people in Indonesia. System integration is, therefore, much needed between central and local governments.

In her opinion, the Jamkesos system in Indonesia is already good, but its implementation should be correct and fair. Active role of the community is also needed by monitoring the true fact of insurance

recipients.

In terms of quota, Diah saw that this is government's fixed figure while it should be an estimate only, so, re-allocation can be done from over-quota regions to under-quota regions. "This is certainly more fair rather than annulling the poor people from the Jamkesmas data due to over-quota or acknowledging the haves as the have-nots due to over-quota," she said.

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