



Original Article

Application of Rule of Law Principles: National Health Guarantee in Health Services as an Embodiment of Good Governance

Gavinela Clarissa^{✉1}, Anna Erliyana²

^{1,2}Faculty of Law, University of Indonesia, Central Jakarta, Indonesia

Corresponding Author: gavinelaclarissa@gmail.com[✉]

Abstract:

Increasing access and quality of health services to meet community needs is important to build good governance. Applying the rule of law principles in health services is used as a guideline for health service delivery organs to carry out their duties and functions. This article discusses the application of the rule of law principles in the National Health Insurance (JKN) program in health services as an embodiment of good governance and the role of the Mobile JKN application in increasing effectiveness and efficiency in the implementation of the National Health Insurance (JKN) program by using descriptive doctrinal research methods to reveal the weaknesses and strengths of the subject matter to be studied.

Keywords: National Health Insurance Program (JKN), health services, mobile JKN

Introduction

A state of complete physical, mental, and social, well-being and not merely the absence of disease or infirmity", means that health is not limited to being free from disease or disability because health has a broad scope. This coverage concerns the government as a facilitator tasked with providing health facilities for everyone. Health services are a part of public services, including a series of activities to fulfill public services in the health aspect following statutory regulations ([Koeswadiji, 1984](#)).

It is important to remember that health is the most important part of achieving prosperity because by obtaining health we can carry out our daily activities as we should. The right to health is on par with other fundamental rights because it is one of the basic rights and has the same international legal status as the right to freedom of religion and the right to justice. The International Covenant on Economic, Social, and Cultural Rights (ICESCR) defines the right to health as a standard for achieving physical and mental health ([Irza Fari Syahdilla Nasution et al, 2021](#)).

The focus on adequate quality of health services must be implemented optimally while still paying attention to the needs and expectations of the community. This is following Law Number 17 of 2023 concerning Health, that one of



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the objectives of health administration is to improve access and quality of health services and health resources, meeting the community's needs for health services. It can be seen that currently there are quite a lot of health service facilities in sub-district and village areas. This realization is not yet optimal because sometimes health service facilities in small areas cannot meet all health needs, in the sense that these facilities are not adequate ([Prasetyo Eko et al, 2022](#)).

The issue of health services is of concern to many parties. According to some groups, relatively "high" health costs are an obstacle. As stated in the Universal Declaration of Human Rights (UDHR), every person as a member of society has the right to social security and every person has the right to a life adequate for the health and welfare of himself and his family including the right to food, clothing, housing and health care as well as social services that are needed and entitled to security when unemployed, suffering from illness, disability, becoming a widow/widower, reaching old age or other circumstances that result in a lack of sustenance, which are beyond their control. Therefore, the government established the National Health Insurance Program through the Badan Penyelenggara Jaminan Sosial (BPJS) which started running in 2014 until now to provide national health insurance.

The rule of law principle is a fundamental principle in national and state life and for realizing good governance. The rule of law in health services is very important to guarantee the duties of service providers and to develop the services provided to the community. In making rules regarding services, there must be standards set in accordance with the needs of the service recipients (in other words the community). According to Sunaryati Hartono, "in order to create a legal state that is just for all people, the enforcement of the rule of law must be interpreted in a material sense." This means that: 1) the law must be clear; 2). everyone is subject to the same laws; 3). there is no control from the authorities due to restrictions by law; 4). there is protection of human rights; 5). fair law enforcement; And 6). there is openness and accountability ([Hunt Paul, 2003](#)).

BPJS as a social security administration body in its implementation is based on the 1945 Constitution of the Republic of Indonesia (UUD 1945), Law Number 40 of 2004 concerning the National Social Security System (UU SJSN), and Law Number 24 of 2011 concerning Social Security Administering Body (BPJS Law). In order to achieve sustainability of the National Health Insurance (JKN) program, the government issued Minister of Health Regulation Number 36 of 2015 which was updated to become Minister of Health Regulation Number 16 of 2019 concerning Prevention and Handling of Fraud and the Imposition of Administrative Sanctions Against Fraud in the Implementation of the JKN Program. This is done so that fraudulent acts will have an impact on health services, especially the budget, which can lead to unfavorable conditions for economic growth ([Azhar Mochamad, 2024](#)).

With increasingly advanced advances and technological developments in this era, the government is trying to provide innovative services to meet people's needs. For example, the realization of digital governance in the world of government. The aim of its implementation is of course to ensure that governance and the principles of good governance can work efficiently and effectively, especially in current conditions when the internet network is accessed every day and can be said to be inseparable from the life of modern society. The digitalization of public services aims to facilitate accessibility and be a solution to save government budgets. Transformation in the health sector with digitalization helps simplify and provide easy access to health services without reducing quality and efficiency and can even increase the efficiency of these health services ([Kementrian Kesehatan, 2016](#)).

Based on the background that has been described, the formulation of the problem that will be discussed is: (1) How is the rule of law principle applied in the National Health Insurance program in health services as an embodiment of good governance?; (2) How can the Mobile JKN application increase operational effectiveness and efficiency in administering the National Health Insurance program?

Methods

The type of research in this legal research is doctrinal legal research by providing explanations related to the rules or regulations related to the national health insurance program and which relate to the main problem to be studied. In doctrinal research, data collection will be carried out by studying literature, documents, statutory regulations and other related legal materials. Doctrinal research involves a systematically researched, analyzed, and critically evaluated exposition of legal rules, principles or doctrines, and their inter-relationships. The data that will be used in this research is secondary data consisting of primary legal materials, secondary legal materials and tertiary legal materials. Primary legal materials focus on positive regulations relating to the national health insurance program in health services. Secondary legal materials will include books, papers, journals and other written documents either found in physical form or through online websites. As well as tertiary legal materials in the form of legal dictionaries. The nature of this research is descriptive by revealing weaknesses and shortcomings related to the main problem to be studied. The facts will also be explained as a reflection of the implementation of laws and regulations and related legal principles ([Retaningsih Hartini, 2024](#)).

Results

Application Of Rule Of Law Principles In The National Health Insurance Program In Health Services As An Embodiment Of Good Governance

Development of good governance in Indonesia and in other countries. The government needs to provide public services in various fields that cover the lives of its citizens. Regarding health, which is very important for everyone's life, which is useful for supporting anyone to carry out activities as they should, needs to be supported by the existence of community health services which are intended for all citizens and all groups. Such as health facilities that have been established in each region for easy access ([Dewan Jaminan Sosial Nasional, 2024](#)).

The manifestation of good governance is the administration of government that is solid and responsible, efficient and effective in maintaining synergy between the state, private sector and society.

The principles of good governance include the principles of transparency, participation, rule of law, consensus oriented, responsiveness, fairness, effectiveness and efficiency, accountability and strategic vision. Reflecting the principles of good governance in the implementation of government activities is an absolute necessity for the realization of a good government system or governance. In good governance, the principle of rule of law is important because regulations must be implemented as they should. Apart from the right to health, the principle of the rule of law is also fundamental in life and is related to the realization of good governance with the aim of creating an orderly and law-abiding situation. By implementing the rule of law, everyone's health rights can be guaranteed because there are clear and comprehensive regulations ([Agus Dede, 2014](#)).

The legal basis for implementing the social security system is Law no. 40 of 2004 concerning the Social Security System (hereinafter referred to as the SJSN Law), which mandates that the implementation of the social security system be carried out by an organizing body, namely the Social Security Administering Body (BPJS). At the same time as the formulation and ratification of Law no. 24 of 2011 concerning the Social Security Administering Body (UU BPJS). The National Health Insurance Program (JKN Program) is part of the SJSN Law program, the principle of JKN is that all citizens (residents) in Indonesia must become JKN participants, which

means the nature of this program is that it is mandatory for all citizens in Indonesia by paying contributions every month. This obligation is also contained in Article 5 letter f, Law no. 17 of 2023 concerning Health ([BPJS Kesehatan, 2020](#)).

JKN is an abbreviation for the national health insurance program, and KIS (Healthy Indonesia Card) is the identity of JKN program participants. KIS participants are divided into 2 (two), namely participants who receive assistance in paying contributions (also called KIS PBI) and participants who pay contributions personally (also called KIS Non-PBI). Or it can also be called BPJS PBI and BPJS Non-PBI. Non-PBI KIS participants must pay contributions according to their respective classes in order to be able to use them (class 1, class 2 and class 3 contributions). National health insurance is a health protection guarantee that is used so that participants receive benefits from health care and protection which includes promotive, preventive, curative and rehabilitation services. Regarding the health insurance provided, it is contained in Article 47 of Presidential Regulation (Perpres) no. 82 of 2018 concerning Health Insurance, namely: (1) first level health services; (2) advanced level referral health services ([BPJS Kesehatan, 2020](#)).

The health services covered by BPJS Health as participants in the National Health Insurance- Healthy Indonesia Card (JKN-KIS), namely ambulance facilities for referral patients from one health facility to another. And childbirth coverage extends to the third child as stated in General Provisions Chapter III number 3, Attachment to Minister of Health Regulation (Permenkes) No. 28 of 2014 concerning Guidelines for the Implementation of the National Health Insurance Program, namely that the first to third children are automatically guaranteed from birth by BPJS Health. Then for participants who are included in the Wage Earning Workers (PPU), the 4th child and so on can be registered as additional family members with a contribution payment of 1% of their monthly salary.

By providing services to the community in the health sector, it is one way to realize good governance by continuing to provide information regarding health services as contained in the SJSN Law and Presidential Decree no. 64 of 2020 concerning the Second Amendment to Presidential Regulation no. 82 of 2018 concerning Health Insurance. The implementation of the National Health Insurance (JKN) program must also refer to the principles of the National Social Security System, namely: 1). The principle of mutual cooperation; With this principle, the provision of the JKN program can help underprivileged participants to obtain health services. 2). Non-profit principles; The main objective of the JKN program is to meet participants' health needs, so that the contribution funds paid are not for profit but are used for the benefit of participants. 3). Principle of portability; The provision of health insurance is carried out continuously even if participants change their place of residence and main health facility. 4). The principle of mandatory participation; Participation in the JKN program is mandatory with the aim of ensuring that all Indonesian citizens are protected regarding health services whose implementation is adjusted to the economic capabilities of the people and the government as well as the feasibility of implementing the program ([Fadhilah Annisa, 2024](#)).

The laws and regulations that are the basis for providing national health insurance that are already in effect should undergo changes, bearing in mind that the nature of laws and regulations are dynamic and follow developments in life in society. If we examine it, the SJSN Law has been in effect for 20 years and the BPJS Law has been in effect for 10 years. These laws and regulations appear to be no longer in accordance with current developments and must undergo substantive renewal by looking at the realities and needs of society today ([Rika Rinjani & Nurhaslita Sari, 2022](#)).

It is known that since 2021, the National Social Security Council (DJSN) has prepared a draft law (RUU) for SJSN and a draft law (RUU) for BPJS with revised policy points, namely: (1) strengthening the functions, duties, and the authority of the National Social Security Council (DJSN) and the Secretariat of the National Social

Security Council (DJSN) to support its implementation; (2) improving BPJS governance based on the principles of SJSN implementation; (3) clarifying the functions, duties and authority of BPJS external supervisors as well as coordination between BPJS external supervisors; (4) harmonize the formulation of norms in the SJSN Law and the BPJS Law vertically and horizontally; and (5) increase the effectiveness of social security laws ([Doni Putro Cahyono & Endang Indartuti, 2022](#)).

Revision of statutory regulations is needed to improve regulations in accordance with current dynamics. Considering that the time period for which the SJSN Law and the BPJS Law have been in effect has been too long, it is necessary for the government to accommodate the community to enjoy improved and better health services. In connection with the revision of the Health Law, namely Law no. 17 of 2023 concerning Health which was ratified on November 11 2023, BPJS Health and National Health Insurance (JKN) are not regulated therein. One of the reasons for this is that there are many conflicts regarding BPJS's responsibilities as organizer of social security, including national health insurance, whose responsibility is placed with the Minister, while BPJS carries out its duties as mandated in the constitution and its responsibility is directly to the President ([Sedarmayanti, 2004](#)).

Realization or implementation in health services requires good management in accordance with existing and applicable rules/regulations. However, it is known that fraud cannot be avoided. In terms of financing the JKN program, this fraud has the impact of burdening health service costs. In response to this act of fraud, the government reacted and issued Minister of Health Regulation Number 36 of 2015 which was updated to become Minister of Health Regulation Number 16 of 2019 concerning Prevention and Handling of Fraud and Imposition of Administrative Sanctions Against Fraud in the Implementation of the JKN Program. As stated in Article 2, fraud can be committed by participants; BPJS Health; medical facility; providers of medicines and medical devices; and other stakeholders. So it can be said that all parties involved in the JKN program are considered to be capable of committing fraud ([Purwati Ani, 2020](#)).

Therefore, to support the implementation of Minister of Health Regulation Number 16 of 2019 concerning Prevention and Handling of Fraud and the Imposition of Administrative Sanctions for Fraud in the Implementation of the JKN Program, a prevention system and guidelines have been established to prevent fraud and develop health services and a culture of fraud prevention. in the National Health Insurance program, as well as the formation of a fraud prevention team. Even though fraud prevention teams have been formed, it is known that knowledge and skills in controlling fraud are still minimal and low. So it is necessary to hold further socialization regarding the rules and procedures for controlling fraud for all parties who are members of these teams ([Prasetyo Teguh, 2010](#)).

Then recently the President ratified Presidential Regulation of the Republic of Indonesia Number 59 of 2024 concerning the Third Amendment to Presidential Regulation Number 82 of 2019 concerning Health Insurance. Then problems arose related to the elimination of the class system in BPJS Health. This class system will be replaced with the Standard Inpatient Class system or also known as KRIS, with the hope that all BPJS Health users can enjoy the same inpatient treatment and services, both medical and non-medical services ([Baginda et al, 2020](#)).

With the existence of KRIS, the realization of the mandate in the SJSN Law, which has only been realized after 20 years, has certainly gone through lengthy consideration by the government. through Presidential Regulation of the Republic of Indonesia Number 59 of 2024 concerning the Third Amendment to Presidential Regulation Number 82 of 2019 concerning Health Insurance, the period for the implementation of the KRIS system is also limited to June 2025. This is different from the determination of rates, benefits and contributions which are set at most no later than July 2025. However, it seems that this policy is not expected to be implemented according to the target because the system implementation concept,

including the design of the KRIS implementation budget, has not been well designed (BPJS Kesehatan, 2020).

Health services can be provided well, with one of the conditions being that they are based on the principle of the rule of law. This explains that every action or implementation of an activity requires legal rules which can be the basis. This basis is important because one of human rights is to obtain legal certainty.

JKN Mobile Application In Increasing Operational Effectiveness And Efficiency In The Implementation Of The National Health Insurance Program

The JKN program provides certainty regarding the provision of health insurance for all people in Indonesia, which is implemented by BPJS in accordance with the rights, obligations and responsibilities contained in the BPJS Law. An activity can be said to be effective if it influences the provision of services in accordance with the specified targets. Apart from that, services run effectively if there is ease in service procedures. The dominance of Indonesian society, which increasingly follows technological developments, should be a guideline for the government to utilize technological developments to provide service facilities that are easily accessible to the public ([Setiyanto Andri, 2024](#)).

Digital applications are applied to almost all government agencies and also public services which nowadays have become a necessity in providing and providing the best services for the community. This is an impact caused by technological advances that occur and is supported by situations and conditions that occur in daily life as we know that occurred some time ago, namely during the Covid-19 pandemic. Society and the government are "forced" to change their work system, starting from a face to face system or meeting face to face to online.

The government created the Mobile JKN application as a concrete form of technological system in Indonesia which is increasingly advanced and following current developments used by the government to provide optimal health services. This application was launched from November 15 2017 until now. Simply put, the Mobile JKN application can be understood as a card transformation from conventional to digital card that can be easily accessed by participants via smartphone.

The JKN Mobile Application is a means of innovation by providing convenience and improving services by BPJS which can be used by BPJS participants to obtain health services that can be accessed via smartphone in the form of an application. The benefits you get from using the Mobile JKN application are ease of access, time efficiency, and getting real-time information. The conveniences provided through the Mobile JKN application are: (1) registering; (2) changing participant data; (3) find participant data; (4) get first level health services; (5) obtain advanced referral facilities; and (6) provide criticism and suggestions. Ghufon Mukti (Main Director of BPJS Health) revealed that the number of JKN participants as of March 1 2024 was 268.74 million people ([Ady, 2024](#)).

BPJS Health's innovation by creating a JKN mobile application also makes it easier for participants with the i-Care JKN feature and the JKN service promise which includes access to participants' medical records as well as telemedicine access services in 3T (Disadvantaged, Frontier, Outermost) areas. Based on trials conducted at 51 health facilities (faskes) in 2022, 71 percent of JKN participants felt satisfied and 87 percent felt that telemedicine services made it easier to obtain health services.

The Mobile JKN application is widely known by the public, but there are still obstacles in using the application by BPJS Health participants, namely: (1) elderly participants have difficulty accessing the Mobile JKN application via smartphone; (2) the Mobile JKN application has an error; and (3) there are problems when creating an account to log in. This needs to be a concern for BPJS to improve the system in the Mobile JKN application ([Nugraha Agus, 2020](#)).

In using technology, especially mobile applications, namely mobile

applications or better known as applications on smartphones. Several things need to be considered, namely regarding the ease of use of the application, efficiency as a result of the emergence of the application, the ease of users understanding and remembering the application, as well as errors and application security related to bugs or errors.

Conclusion

The application of the rule of law principle in the National Health Insurance (JKN) program in providing health services as an embodiment of good governance is realized by establishing appropriate regulations that also contain information and provisions that must be complied with by all parties with the aim of maintaining synergy between the state, private sector and society so that good governance can be created. The regulations passed to support the running of the JKN program are Law no. 24 of 2011 concerning the Social Security Administering Body (UU BPJS) and Law no. 40 of 2004 concerning the Social Security System. Followed by Presidential Decree No. 64 of 2020 concerning the Second Amendment to Presidential Regulation No. 82 of 2018 concerning Health Insurance; and Minister of Health Regulation Number 36 of 2015 which was updated to become Minister of Health Regulation Number 16 of 2019 concerning Prevention and Handling of Fraud and Imposition of Administrative Sanctions Against Fraud in the Implementation of the JKN Program. Because the SJSN Law and BPJS Law have been in effect for quite a long time, the government has drafted a revised law that proves its commitment to maintaining relevance, providing justice and legal effectiveness in supporting the progress of legislation. Then the new policy ratified by the President regarding KRIS aims to create equal distribution of rights so that every citizen who uses BPJS can receive the same benefits without class distinction.

The attention of the JKN Program cannot be separated from the participation of the community in providing criticism and suggestions to the government and so that the regulations of the JKN program are responsive. It is also necessary to accelerate discussions and strengthen coordination so that the preparation of the revision of the SJSN Law and BPJS Law becomes more effective with the involvement of experts to ensure the quality of legal relevance.

JKN Mobile Application is the best means of supporting the efficiency and effectiveness of health services and making it easier for participants to obtain health services even though there are still a few obstacles for elderly people who have difficulty using smartphones, and there are still bugs or errors in the application. New innovations in adding features and system improvements in the application can continue to be carried out in order to support the effectiveness and efficiency of health services using the Mobile JKN application.

Suggestion

The researcher's great hope is that there will be similar studies that develop this article. The researcher also does not hesitate to accept all kinds of criticisms that will be raised from various sides by readers of this research. Hopefully this research can be useful for parties who need research with this theme.

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