



**DEWAN JAMINAN SOSIAL NASIONAL**

# **RESTRUCTURISATION OF JKN**

**Mid Term Program  
(2019-2024)**

Jakarta, 2 November 2018

# Achievement of JKN

**MEMBERSHIP: 200+ MILLION PEOPLE**

Health Services  
Structurisation &  
Standardisation

Functional integration of  
government and private  
health services

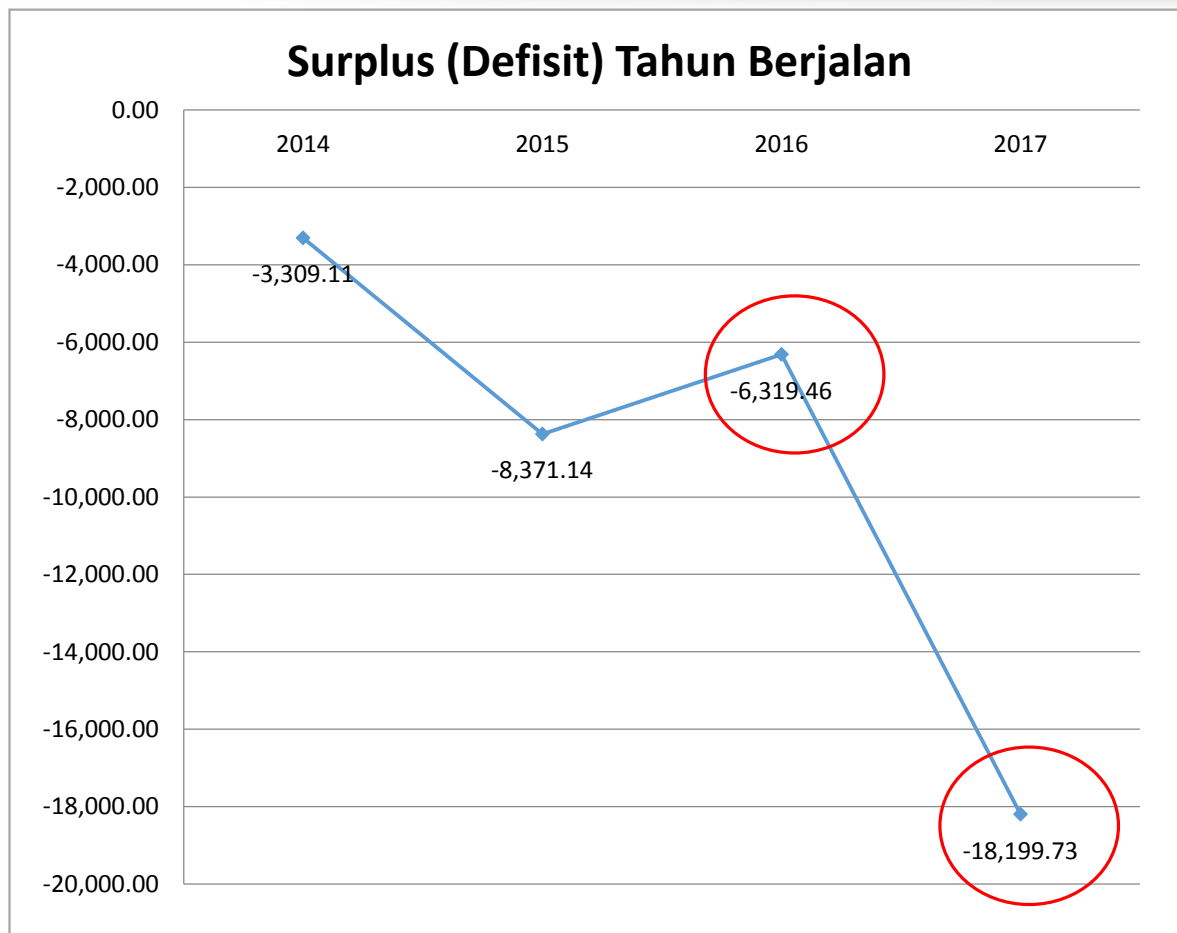
People with chronic, degenerative,  
and catastrophic diseases

Cost Control & Quality Control of  
Health Services

## INDIRECT IMPACT:

- Structuring and Strengthening the Domestic Health Market
- Population administration via the single identity number

# Structural Deficit



- Compared to 2015, the 2016 deficit declined due to an increase in contributions;
- In **2017** there is an increase in **DEFISIT ALMOST 3X FOLD** from 2016;
- A very significant and prolonged deficit indicates that **STRUCTURAL DEFISIT** has occurred;
- Structural deficits can not overcome by efficiency, but a comprehensive **RESTRUCTURISATION** is needed, both INA CBG rates, premium, service systems, etc



# JKN PROBLEMS

## LACK OF FUNDS → STRUCTURAL DEFICIT

- IMPRUDENT POLICY:
- PROBLEM IN HEALTH SERVICES TARIFF:
- IMPACT OF SYSTEMIC DISORDERS:

## GOVERNANCE AND CONFLICT OF INTEREST

- SUPERVISION BY MANY INSTITUTIONS BUT FRAGMENTATIVE AND INEFFECTIVE
- BPJS HAS NOT YET ACTED AS AN ACTIVE PURCHASER
- DJSN HAS NOT FUNCTIONED PROPERLY

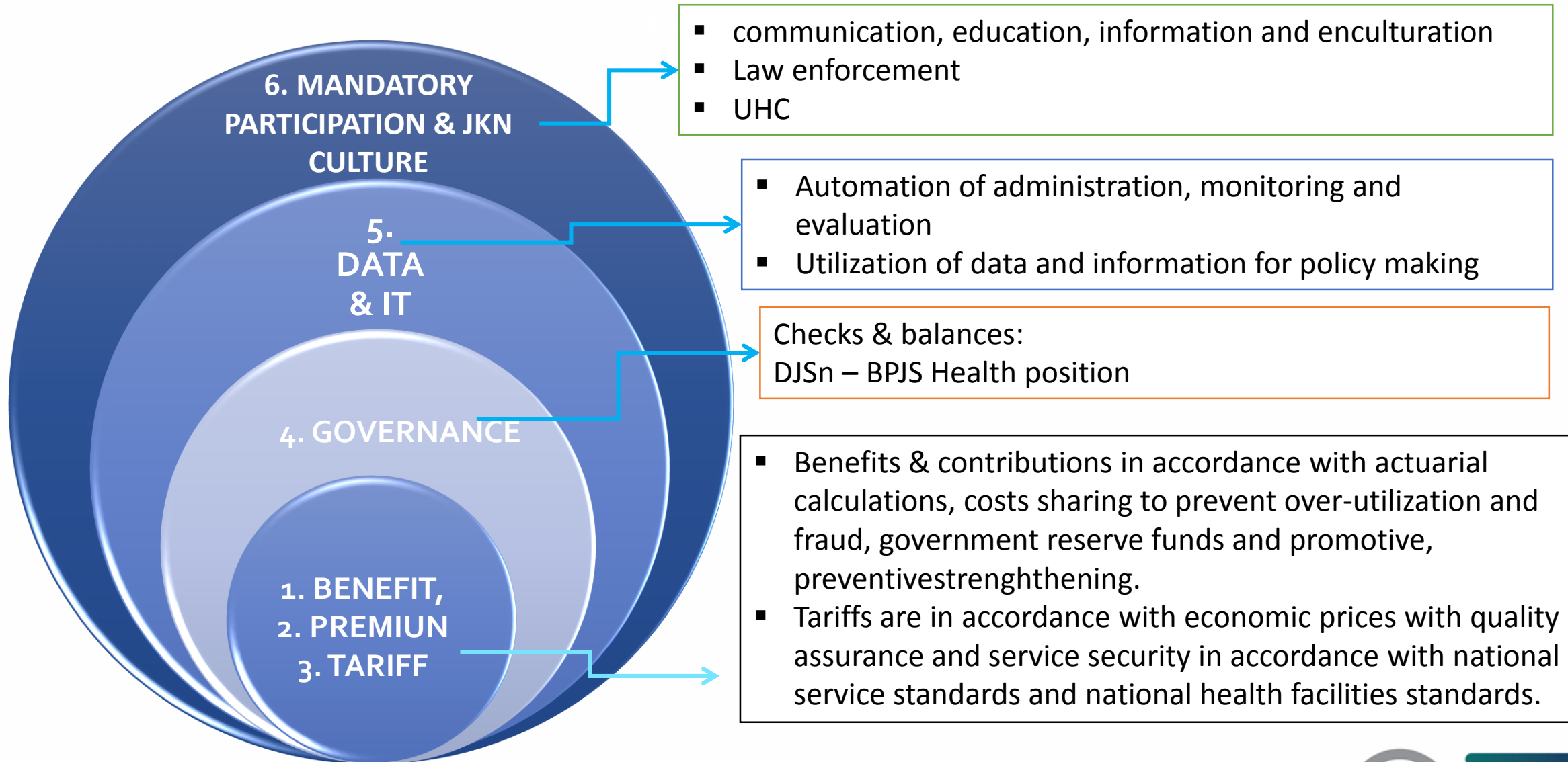
## LOW PUBLIC PARTICIPATION & EGOSENTRIC

- ADVERSE SELECTION
- EXPECTATIONS ARE UNLIMITED
- LOW PREMIUM PAYMENT DISCIPLINE
- WEAK COMPLIANCE MONITORING
- INEFFECTIVE IN PREVENTING ADVERSE SELECTION

## USE OF DATA & LIMITED INFORMATION TECHNOLOGY

- PBPU CONTRIBUTION COLLECTION HAS NOT YET AUTODEBIT
- MANUAL DRUG PLANNING WITH RKO, HAS NOT USED CLAIM DATA (BIG DATA)
- THE DETAILED CLAIMS AND CAPITATION DATA ARE NOT UTILIZED IN CALCULATING CONTRIBUTIONS, BENEFITS, AND POLICIES.

# BASIC COMPREHENSIVE SOLUTION: Restructuring of JKN Regulation



# 6 AREAS OF JKN RESTRUCTURING

**1 SET THE BENEFITS OF JKN**

**2 INCREASE JKN PREMIUM**

**3 LIST THE HIGHEST HEALTH SERVICES TARIFF BASED ON ECONOMIC VALUE**

**4 IMPROVING DJSN-BPJS KES GOVERNANCE**

**5 USE OF DATA & INFORMATION TECHNOLOGY**

**6 MANDATORY PARTICIPATION AND LAW ENFORCEMENT**

*Thank you*

