

Urgency of BPJS Policy Specifically for Farmers in Improving Farmer Welfare in Indonesia

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ABSTRACT

This research is qualitative with a descriptive approach. The data used in this study are secondary data obtained by the researcher from indirect sources such as books, scientific articles, magazines, and so on. The data obtained were analyzed through the stages of data collection, data reduction, data selection, and conclusion drawing. The conclusion in this article show that the implementation of BPJS or health insurance for farmers has a very urgent meaning for the welfare explained in several previous paragraphs, namely related to economic sovereignty, peace, and happiness. With BPJS or health insurance for farmers, it can anticipate unexpected expenses related to farmers' health. Farmers can feel safer and happier, and can focus more on business development, increasing income, and improving product creativity. Thus, the researcher concludes, the implementation of BPJS specifically for farmers has a very close urgency in creating farmer welfare.

Keywords: BPJS, farmer, welfare, Indonesia

INTRODUCTION

To organize the Social Security program in Indonesia based on Law Number 40 of 2004 and Law No. 24 of 2011, the Social Security Administering Body (BPJS) was established which is also a non-profit legal entity. In accordance with Law Number 24 of 2011, BPJS is a transformation institution for the Social Security system in Indonesia, which replaces the health insurance institution PT Askes Indonesia to become BPJS Kesehatan and the employment social security institution PT Jamsostek to become BPJS Ketenagakerjaan. This institution is responsible to the President. BPJS is headquartered in Jakarta, and can have representative offices at the provincial level and branch offices at the district/city level. The Social Security Administering Body (BPJS) is a public legal entity that is responsible to the president and functions to organize a health insurance program for all Indonesian residents including foreigners who work for at least 6 months in Indonesia (Undang – Undang Nomor 24 Tahun 2001 Tentang Badan Penyelenggara Jaminan Sosial, 2001).

The National Health Insurance (JKN) is a mandatory social health insurance program for Indonesian citizens, aimed at fulfilling the basic health needs of every citizen through mutual contribution payments or cross-subsidies. BPJS, as the implementer of the National Social Security System (SJSN), has a crucial mission to fulfill the right of every citizen to social security by organizing a program that aims to

provide certainty of protection and social welfare for all Indonesians. In implementing the social security program, Law Number 24 of 2011 clearly defines the boundaries of BPJS's functions, duties, and authorities. This is done to serve as a means to measure BPJS's performance in a transparent and accountable manner (Febrian Pramadia, 2021).

In the implementation of the BPJS program, there are binding legal regulations regarding this program, including (AMELYA, 2019): 1) Laws: a) Law No. 40 of 2004 concerning SJSN b) Law No. 24 of 2011 concerning BPJS 2) Government Regulations (Noorhidayah, 2019) & (Rumiyanti, 2018): a) PP No. 90 of 2013 concerning the revocation of PP 28/2003 concerning subsidies and government contributions in the implementation of health insurance for civil servants and pension recipients. b) PP No. 85 of 2013 concerning the relationship between each Social Security Administering Body. c) PP No. 86 of 2013 concerning the procedures for imposing administrative sanctions on employers other than state administrators and any person, other than employers, workers and recipients of contribution assistance in the implementation of social security. d) PP No. 87 of 2013 concerning procedures for managing social health security assets e) Presidential Regulation No. 111 of 2013 concerning amendments to Presidential Regulation No. 12 of 2013 concerning health insurance. F) Presidential Decree No. 109 of 2013 concerning the stages of participation in social security programs. g) Presidential Decree No. 108 of 2013 concerning the form and content of social security program management reports. h) Presidential Decree No. 107 of 2013 concerning certain health services related to the operational activities of the Ministry of Defense, the Indonesian National Armed Forces, and the Indonesian National Police. i) Presidential Decree No. 12 of 2013 concerning Health Insurance.

In Article 9 paragraph (1) and paragraph (2) of Law No. 24 of 2011, the functions of BPJS are (Wiratama, 2019): 1) BPJS Health as referred to in Article 5 paragraph (2) letter a functions to organize a health insurance program. 2) BPJS Employment as referred to in Article 5 paragraph (2) letter b functions to organize a work accident insurance program, death insurance program, pension insurance program, and old age insurance. In Article 10 of Law No. 24 of 2011, the duties of BPJS are (Wahyuni & Sulistyanto, 2023) & : 1) carrying out and/or accepting Participant registration. 2) collecting and collecting Contributions from Participants and Employers. 3) receiving Contribution Assistance from the Government. 4) managing Social Security Funds for the benefit of Participants. 5) collecting and managing data on Social Security program Participants. 6) paying Benefits and/or financing health services in accordance with the provisions of the Social Security program. and 7) providing information regarding the implementation of the Social Security program to Participants and the public.

Based on the explanation above, the researcher believes that the implementation of BPJS for farmers is an urgent matter in anticipating financial stability if farmers are affected by disease, can increase the life expectancy of farmers, and can guarantee the stability of the businesses owned by farmers.

METHODS

The explanation in the introduction above provides a complete, but not comprehensive, overview of the researcher's objectives in this article (Lexy J. Moleong, 2014). The intended objective is to analyze the urgency of implementing the BPJJS policy specifically for farmers in improving farmer welfare, including life expectancy, financial stability, and business and income stability (Manzilati, 2017). Based on this, it can be concluded that this research is qualitative with a descriptive approach (Imam Gunawan, 2014). The data used in this study are secondary data obtained by the researcher from indirect sources such as books, scientific articles, magazines, and so on (Abdurahman, 2016). The data obtained were analyzed through the stages of data collection, data reduction, data selection, and conclusion drawing (Jonathan Sarwono, 2016).

RESULT AND DISCUSSION

BPJS

To organize the Social Security program in Indonesia based on Law Number 40 of 2004 and Law No. 24 of 2011, the Social Security Administering Body (BPJS) was established which is also a non-profit legal entity. In accordance with Law Number 24 of 2011, BPJS is a transformation institution for the Social Security system in Indonesia, which replaces the health insurance institution PT Askes Indonesia to become BPJS Kesehatan and the employment social security institution PT Jamsostek to become BPJS Ketenagakerjaan. This institution is responsible to the President. BPJS is headquartered in Jakarta, and can have representative offices at the provincial level and branch offices at the district/city level. The Social Security Administering Body (BPJS) is a public legal entity that is responsible to the president and functions to organize a health insurance program for all Indonesian residents including foreigners who work for at least 6 months in Indonesia (Undang – Undang Nomor 24 Tahun 2001 Tentang Badan Penyelenggara Jaminan Sosial, 2001).

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Urgency Of BPJS Policy Specifically for Farmers in Improving Farmer Welfare in Indonesia

According to the Big Indonesian Dictionary (KBBI), the word "welfare" comes from the word "sejahtera," which means safe, secure, prosperous, and secure (free from all kinds of disturbances, difficulties, and so on). "Wealth" comes from the word "sejahtera," which comes from the Sanskrit word "catera," meaning umbrella. In the context of well-being, "catera" refers to a person who is prosperous, meaning free from poverty, ignorance, fear, or worry, so that their life is peaceful and secure, both physically and mentally (W.J.S Poerwadarminto, 1999).

According to Law Number 11 of 2009 concerning social welfare, social welfare is a condition where citizens' material, spiritual, and social needs are met so they can live decently and develop themselves, thus enabling them to carry out their social functions. From the above law, it can be seen that the level of welfare can be assessed by the ability of an individual or group to fulfill their material and spiritual needs. Material needs can be linked to income, which in turn will fulfill the needs for food, clothing, shelter, and health. Then there are spiritual needs. Spiritual needs are linked to education, then security and peace of life (Fahrudin, 2012).

The modern world concept of welfare is defined as a condition where a person can meet basic needs, be it the need for food, clothing, shelter, clean drinking water as well as the opportunity to continue education and have adequate work that can support the quality of life so as to have a social status that leads to the same social status as other citizens. Community welfare consists of two words, namely welfare and society. Welfare comes from the root word prosper. Prosperous means safe, peaceful, and prosperous, safe (free from all kinds of disturbances, gratitude, and so on). Welfare is a state of well-being, security, safety, and tranquility (pleasure in life and so on), prosperity (Suradi, 2017).

The basic characteristic of society is that people live together. They mix for a long time. They form a system of shared life that gives rise to culture, therefore each member of the group feels connected to one another (LISNAWATI, 2024). Prosperity, as the primary goal of development, can be achieved if aspects of economic sovereignty and governance are addressed. Therefore, building economic sovereignty and good economic governance can be realized in real terms. Therefore, building economic sovereignty and good economic governance are the main requirements for achieving prosperity and the nation (Bahri, 2015).

Based on the explanation above, the researcher sees that the implementation of BPJS or health insurance for farmers has a very urgent meaning for the welfare explained in several previous paragraphs, namely related to economic sovereignty, peace, and happiness. With BPJS or health insurance for farmers, it can anticipate unexpected expenses related to farmers' health. Farmers can feel safer and happier, and can focus more on business development, increasing income, and improving product creativity. Thus, the researcher concludes, the implementation of BPJS specifically for farmers has a very close urgency in creating farmer welfare.

CONCLUSION

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REFERENCES

- Abdurahman, S. (2016). *Metodologi Penelitian*. Sinar Grafika.
- Amelya, A. (2019). *Pengelolaan Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan Pekanbaru dari Prespektif Fiqh Muamalah*. Universitas Islam Negeri Sultan Syarif Kasim Riau-Pekanbaru.
- Bahri, I. Abidin. (2015). *Ekonomi Mikro Islam*. Gramedia Pustaka Utama.
- Fahrudin, A. (2012). *Pengantar Kesejahteraan Sosial*. Rineka Cipta.
- Febrian Pramadia. (2021). *Kualitas Pelayanan Kesehatan dan Kepuasan Pasien Peserta Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan di Puskesmas Mojolangu, Kota Malang*. Fakultas Ilmu Administrasi Univeristas Brawijaya Malang.
- Imam Gunawan. (2014). *Metode Penelitian Kualitatif*. Bumi Aksara.
- Jonathan Sarwono. (2016). *Meode Penelitian Kualitatif dan Kuantitatif*. Graha Ilmu.
- Lexy J. Moleong. (2014). *Metode Penelitian Kualitatif*. Remaja Rosdakarya.
- Lisnawati. (2024). *Analisis Faktor yang Memengaruhi Tingkat Kesejahteraan Masyarakat dalam Perspektif Ekonomi Islam pada Dusun Padakkalawa Kab. Pinrang*. Institut Agama Islam Negeri Parepare.
- Manzilati, A. (2017). *Metodologi Penelitian Kualitatif Paradigma, Metode, dan Aplikasi*. Ub Press.
- Noorhidayah. (2019). *Pengaruh Kualitas Pelayanan terhadap Tingkat Kepuasan Pasien Bpjs di Pelayanan Rawat Jalan Rsud Ratu Zalecha Martapura Tahun*

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2019. *Dinamika Kesehatan Jurnal Kebidanan Dan Keperawatan*, 10(2), 15.
- Undang – Undang Nomor 24 Tahun 2001 tentang Badan Penyelenggara Jaminan Sosial, 1 (2001).
- Rumiyanti. (2018). Pengaruh Kualitas Pelayanan terhadap Kepuasan Konsumen Ditinjau dari Perspektif Ekonomi Islam (Studi pada Kantor Badan Penyelenggara Jaminan Sosial (BPJS) Kesehatan Kabupaten Pesawaran). Universitas Islam Negeri Raden Intan Lampung.
- Suradi. (2017). Pembangun Manusia, Kemiskinan, dan Kesejahteraan Sosial. *Jurnal Penelitian Dan Pengembangan Kesejahteraan Sosial*, 12(3), 1–11. https://Scholar.Google.Com/Citations?View_Op=View_Citation&HL=Id&User=Wrk0cogaaaaj&Citation_For_View=Wrk0cogaaaaj:Aqlvkmm33-Oc
- W.J.S Poerwadarminto. (1999). Kamus Besar Bahasa Indonesia. Kamus Besar Bahasa Indonesia.
- Wahyuni, S., & Sulistyanto, T. H. (2023). Pengaruh Komunikasi Interpersonal dan Kualitas Kehidupan Kerja terhadap Kinerja. *Portofolio: Jurnal Ekonomi, Bisnis, Manajemen, Dan Akuntansi*, 20(1), 16–27. <https://Doi.Org/10.26874/Portofolio.V20i1.269>
- Wiratama. (2019). Pengaruh Kualitas Pelayanan terhadap Kepuasan Konsumen Peserta BPJS Studi Kasus di Rumah Sakit Umum Pusat H.Adam Malik. Universitas Islam Negeri Sumatera Utara.