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The Legal Standing of The Use of Electronic Medical Records in Respect to Hospital Accreditation and Its Implications for Health Social Security Agency

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ABSTRACT: Health and Social fields have been Government in the constitution of the Indonesian state in the 1945 Constitution of Article 28 H paragraph (1) and paragraph (3). The government is a policy stakeholder that produces the rules of implementing health development so that Hospitals as health facilities are obliged to implement the accreditation provisions relating to electronic medical records that can have administrative and reporting implications to the Indonesian Health isurance. Knowing and understanding then analyzed the legal position of hospital electronic medical record law based on the accreditation standards set by the Government, in order to meet the provisions of the Indonesian Health isurance, With a normative juridical research approach examining various relevant laws, regulations and libraries according to research purposes, so as obtained from consideration of government laws and regulations, hospital electronic medical records into accreditation assessments are also a condition of cooperation with the Indonesian Health isurance. Of course, the administrative requirements from the beginning of health care in hospital to reporting to the Indonesian Health isurance must be implemented for the fulfillment of human rights in the health field by the Government.

KEYWORDS: Electronic Medical Record, Hospital Accreditation, Indonesian Health isurance.

INTRODUCTION

The social aspects of society, especially the need for health services, have of course been regulated by the Government as the policy maker which produces rules or regulations for the implementation of development in the health sector so that it is hoped that all stakeholders or stakeholders in the community can carry out preventative, curative, rehabilitative and promotional health efforts, starting from Advanced Referral Health Facilities (FKTP), independent doctor's practices, clinics and PUSKESMAS to Advanced Referral Health Facilities (FKRTL), namely hospitals, all efforts to improve the level of public health that have been mentioned. Previously, of course the Government had to know about its implementation because as a regulatory body, the Government also played a role as a supervisory body regarding the implementation of development and health services in the wider community in general, which applies to every health facility.

Explanation by the Minister's Expert Staff for Health Technology who said that after the issuance of Minister of Health Regulation Number 24 of 2022 concerning Medical Records, health service facilities were obliged to implement Electronic Medical Records (RME) with a deadline of 31 December 2023. This regulation also required that electronic medical records be integrated with the Ministry of Health's SATUSEHAT which would later be connected to the PeduliLindungi program, then what was of further concern was the issue of data security as in previous research which stated that: "Data security issues are becoming increasingly serious because the trend of data theft is increasing. In Indonesia, cases of health data theft are nothing new. In 2020, data on 230 thousand COVID-19 patients in Indonesia was suspected to have been stolen and sold. This causes not only material but also psychological losses to the victims, where they may receive discriminatory treatment in society. In January 2022, there were also allegations of leakage of patient medical record data at a number of hospitals in Indonesia. "720 GB of data is being sold on the online forum Raidforums." Therefore, there is a need to standardize the application of electronic medical records, especially in hospitals, through hospital accreditation that has been determined by the Government.

Implementation of policies and supervision of the mechanism for implementing electronic medical records, which in addition to Health Law Number 17 of 2023 concerning Health and Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records was then followed up with the issuance of Circular Letter from the Minister of Health Number HK.02.01/MENKES/1030/2023 concerning the Implementation of Electronic Medical Records in Health Service Facilities and the

¹ Siti dkk (2022), Analisis Aspek Keamanan Informasi Pasien Pada Penerapan RME di Fasilitas Kesehatan, Jurnal Rekam Medik dan Manajemen Informasi Kesehatan, (eISSN: 2829-4777)

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Implementation of Administrative Sanctions in the Context of Guidance and Supervision, Therefore, it is very necessary to have regulations or laws that can provide support for the implementation of electronic medical records, which of course will have an impact or be related to supporting factors such as the implementation of Hospital Accreditation Standards (Regulation of the Minister of Health Number 12 of 2020 concerning Hospital Accreditation and Decree of the Minister of Health Number HK.01.07/MENKES/1128/2022 concerning Hospital Accreditation Standards).

The impact of implementing standardization of electronic medical records is of course very influential on reporting data on patients who have received treatment and received services from the implementation of Health Social Security Administering Body (BPJS) membership in health service facilities (Minister of Health Regulation Number 28 of 2014 concerning Guidelines for Implementing the National Health Insurance Program), including the role of regional governments (Presidential Regulation Number 64 of 2020 concerning the Second Amendment to Presidential Regulation Number 82 of 2018 concerning Health Insurance and Presidential Instruction Number 1 of 2018). 2022 concerning Optimizing the Implementation of the National Health Insurance Program), as well as regulations supporting the implementation of electronic medical records (Minister of Health Regulation Number 18 of 2022 concerning the Implementation of One Data in the Health Sector Through a Health Information System).

RESEARCH METHODS

This research uses normative methods through conceptual and statutory approaches². The conceptual approach departs from the views and doctrines that have developed in legal science, to seek answers to legal issues regarding electronic medical records in hospital accreditation standards. Meanwhile, the statutory approach is by examining statutory regulations related to this research.

RESULTS AND DISCUSSION

Regulations on the Fulfillment of Human Rights in the Health Services Sector

Guarantees and protection of human rights provided by the state to its citizens regarding social and health security have been regulated in Law Number 39 of 1999 concerning Human Rights. Article 41 Paragraph:

- (1) Every citizen has the right to social security necessary for a decent life and for complete personal development;
- (2) Every person with disabilities, elderly people, pregnant women and children have the right to receive special facilities and treatment.

In paragraph (1), what is meant by "entitled on social security" is that every citizen receives appropriate social security with the provisions of laws and regulations and state capabilities. Whereas paragraph (2), what is meant by "facilities and special treatment" is the provision of services, services, or provision of facilities and means for smooth running, security, health and safety.

Therapeutic Transactions.

The legal basis for Law No. 17 of 2023 concerning Health Article 1 in this law is referred to in paragraph:

- (2) Health efforts are all forms of activities and/or a series of activities carried out in an integrated and sustainable manner to maintain and improve the level of public health in the form of promotive, preventive, curative, rehabilitative, and/or palliative by the Central Government, Regional Government, and/or the community.
- (3) Health services are all forms of activities and/or a series of service activities provided directly to individuals or the community to maintain and improve the level of public health in the form of promotive, preventive, curative, rehabilitative and/or palliative.

Electronic Contracts

Various provisions are contained in Law Number 19 of 2016 concerning Law Number 11 of 2008 concerning Electronic Information and Transactions. An electronic contract is "an agreement between the parties made through an electronic system". The parties are the subjects who execute the contract with an electronic system. The way the contract occurs is an electronic system. The essence of electronic systems is as follows:

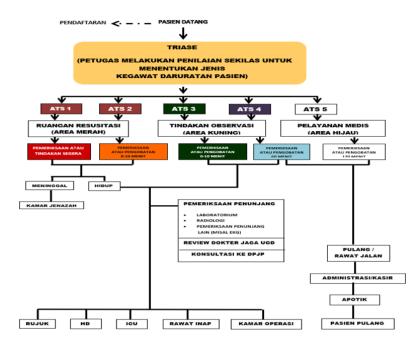
- (1) The presence of electronic devices used;
- (2) System Operational Procedures (SOP);
- (3) Information via electronic media.

Hospital

The government stipulates Presidential Regulation no. 47 of 2021 concerning the Administration of the Hospital Sector. It is clearly stated in chapter I General Provisions Article 1 in this Government Regulation which is meant by, paragraph: A hospital is a health service institution that provides complete individual health services, providing inpatient, outpatient and emergency services.

- (1) Hospital Accreditation, hereinafter referred to as Accreditation, is recognition of the quality of Hospital services, after an assessment has been carried out that the Hospital has met Accreditation standards.
- (2) Hospital Classification is a grouping of Hospital classes based on service capabilities, health facilities, supporting facilities, and human resources.

(3) A patient is any person who consults about their health problems to obtain necessary health services, either directly or indirectly at the hospital.

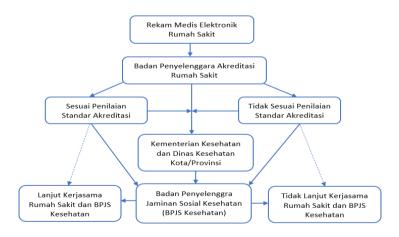


Gambar 3: Alur registrasi penerimaan pasien hingga pelayanan pada instalasi gawat darurat (IGD) rumah sakit.



Gambar 4 : Alur registrasi penerimaan pasien hingga pelayanan pada rawat jalan polikliik rumah sakit.

Application of Electronic Medical Records as Evidence of Accreditation Standards for Health Services in Hospitals.



Gambar 5 : Hubungan Rekam Medis Elektronik Dengan Akreditasi Rumah Sakit Serta Badan Penyelenggara Jaminan Sosial Kesehatan.

Health professionals, both medical and non-medical, in hospitals collaborate to fulfill healing or care for residents who come for treatment at the hospital, starting from the initial arrival of patients who are accepted through the hospital's polyclinic or emergency

room (IGD), after that of course in addition to medical actions, there also needs to be administrative evidence which is a common interest for both parties between patients and health care facilities. Administrative interests such as some of them are patient identity, information facilities for care services based on medical indications, types of financing whether included in the health social security agency (BPJS Kesehatan) insurance or independent patient costs, as administrative evidence of introduction or receiving referrals between health facilities, data collection and then reporting of morbidity, mortality and birth rates for the benefit of statistical and epidemiological information to the Government to determine the direction of health policies to be taken. Of course, all of this can only be implemented if there is an information recording system that has been integrated online or through electronic media that can guarantee the procedure for its use in accordance with the assessment of hospital accreditation standards that have been set in government regulations, so that the operational permit for hospital services will receive administrative recognition through a permit that has been issued by the government to the hospital based on the accreditation that has been obtained. The Impact of the Implementation of Electronic Medical Records on Hospital Accreditation and Its Implications for Cooperation with the Health Social Security Agency.

After administrative recognition from the Government through an operational permit that has been given to the hospital, of course it is a guarantee by the hospital to the health social security agency (BPJS Kesehatan), to accept and serve the community based on the type of disease, examination or action and membership class for registered health social security participants. The health social security agency (BPJS Kesehatan) will then receive a report from the hospital every month in the form of information on data from residents or patients who come for treatment to get the services they need, the services are divided into outpatient and inpatient care, then followed up by carrying out verification stages for the type of diagnosis and treatment and care actions based on the membership class rights that have been given while in the hospital, if it is in accordance with the results of the verification that has been carried out, the health social security agency (BPJS Kesehatan), is required to provide the amount of service costs to the hospital as an advanced referral health facility (FKRTL) that has been determined by the Government.

CONCLUSION

- 1. Electronic medical records have a position as evidence that a therapeutic contract has occurred and is being implemented between the service provider, namely medical or other health personnel at the hospital and the patient as the service recipient.
- 2. Electronic medical records as a basis for reporting electronic records of medical care for the purposes of submitting claims for the amount of costs that must be paid to the hospital by the health social security administering body (BPJS Health)

SUGGESTION

So that the hospital makes regulations regarding the use of electronic medical records and carries out outreach to all staff at the hospital

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