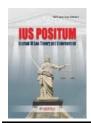
ISSN 2809-672X (Online)



IUS POSITUM: Journal of Law Theory and Law Enforcement

https://journal.jfpublisher.com/index.php/jlte Vol. 4 Issue 2, April 2025 doi.org/10.56943/jlte.v4i2.799

The Urgency of the Principle of Fairness of BPJS Kesehatan Contributions for Wage Earners (PPU)

Zainal Abidin¹*, Dr. Imam Suroso²

¹zainal2400@gmail.com, ²imam@ubhara.ac.id

Universitas Bhayangkara Surabaya

*Corresponding Author: Zainal Abidin Email: <u>zainal2400@gmail.com</u>

ABSTRACT

This article discusses the urgency of applying justice principles within the contribution system of BPJS Kesehatan (Indonesia's National Health Insurance) for wage-earning workers. The study aims to examine how the principle of justice can be effectively implemented, given the discrepancies between the contribution provisions regulated under Presidential Regulation No. 64 of 2020 and the stipulations in Law No. 6 of 2023 concerning the Ratification of the Government Regulation in Lieu of Law (Perppu) on Job Creation into Law, specifically Article 81 point 31 and Article 90B paragraph (1). This research adopts a normative legal method, employing positive law analysis combined with the theory of justice as the analytical framework. The data were collected through literature review, focusing on statutory regulations and relevant academic studies. The findings reveal that the principle of justice in the BPJS Health contribution system for wage-earning workers can be realized through two main mechanisms. First, by applying the principle of equity, which entails adjusting contribution rates based on the business scale of the company, in accordance with the mandate of the Job Creation Law. Second, by adopting the principle of social justice, through the provision of subsidies or contribution assistance for workers employed in micro and small enterprises. This scheme aims to ensure that all workers have fair and equitable access to health insurance, without being disproportionately burdened by contribution obligations.

Keywords: BPJS Kesehatan Contributions, Principles of Justice, Wage Workers

INTRODUCTION

Indonesia recognizes Pancasila as the foundational source of all national legal systems.¹ Consequently, every statutory regulation must align with the values embedded in the principles of Pancasila. Among these principles, social justice, as enshrined in the fifth precept, serves as a fundamental tenet that emphasizes justice across all dimensions of life, both material and spiritual. It also functions as a binding force for social solidarity within society.²

In this context, social security operates as a state protection instrument designed to ensure the fulfillment of basic living needs for all citizens. The National Social Security System (SJSN) is established as a structured mechanism for administering social security programs through dedicated implementing bodies. Its primary objective is to guarantee certainty of protection and welfare for the entire Indonesian population.³ The Social Security Fund, managed by BPJS (Badan Penyelenggara Jaminan Sosial), constitutes an inviolable fund owned by the participants, comprising accumulated contributions and the proceeds from its management. This fund is allocated for benefit payments and operational costs of the social security programs.

Nevertheless, in practice, the obligation to pay BPJS Health contributions often presents a dilemma for micro and small enterprises.⁴ On one hand, the government mandates that employers provide social security protection for their workers. On the other hand, many micro and small businesses face financial constraints, especially when confronted with economic crises.⁵ This situation raises a fundamental question of whether a uniform contribution system truly embodies the principle of social justice as mandated by Pancasila.

To determine the amount of contribution payments and maintain the quality and sustainability of the Health Insurance program, the government needs to align its Health Insurance funding policies, including contribution policies, with state financial policies proportionately and equitably. This will ensure that all

² Novi Fuji Astuti, "Makna Sila Ke-5 Yang Wajib Diketahui, Berikut Penjelasannya," last modified 2023, accessed July 18, 2025, https://www.merdeka.com/jabar/makna-sila-ke-5-yang-wajib-diketahui-berikut-penjelasannya-kln.html.

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¹ Jhon Tyson Pelawi, "Pancasila Sebagai Sumber Dari Segala Sumber Hukum," *Jurnal LPPM* 10, no. 3 (2020).

³"UU No. 24 Tahun 2011," 2011, accessed July 18, 2025, https://peraturan.bpk.go.id/Details/39268.

⁴ Teuku Ahmad Yani et al., "Legal Transformation of Trading Businesses into Individual Limited Companies for Indonesian Micro and Small Enterprises," *Jurnal Ilmiah Peuradeun* 12, no. 3 (September 30, 2024): 1237, https://journal.scadindependent.org/index.php/jipeuradeun/article/view/1477.

⁵ Nde Ngo Solange and Fonyoh Richard Nembu, "The Provision of Social Security Protection to Workers in Cameroon: What Is the Legal Vacuum," *International Journal of Law, Justice and Jurisprudence* 1, no. 1 (January 1, 2021): 46–56, https://www.lawjournal.info/archives/2021.v1.i1.A.7.

beneficiaries receive fair and adequate coverage by applicable laws and regulations in Indonesia.⁶

Presidential Regulation No. 64 of 2020 concerning the Second Amendment to Presidential Regulation No. 82 of 2018 on Health Insurance, specifically Article 32 paragraph (2), stipulates that the minimum monthly wage or salary used as the basis for calculating contributions for Wage-Earning Worker Participants (Peserta Pekerja Penerima Upah/PPU) is the district/city minimum wage. This provision obliges all employers to calculate their workers' BPJS Health contributions by referring to the regional minimum wage standard.

However, this regulation is incongruent with the provisions of Law No. 11 of 2020 on Job Creation, as amended by Law No. 6 of 2023, particularly Article 81 point 31 of the Attachment, which contains Article 90B. The latter explicitly states that the minimum wage provisions as regulated in Article 88C paragraphs (1) and (2) do not apply to micro and small enterprises. In this sector, wages are determined through direct agreements between employers and workers, without mandatory reference to the regional minimum wage.

This regulatory divergence creates a disharmony in the legal framework, especially regarding the calculation base for BPJS Health contributions for workers in micro and small enterprises. On one hand, the Presidential Regulation mandates the use of the regional minimum wage as the benchmark. On the other hand, the Job Creation Law allows negotiated wages that may fall below the minimum wage standard, specifically for micro and small business sectors.

This inconsistency generates practical and normative challenges in the implementation of health insurance protection for workers, while simultaneously raising concerns regarding the policy coherence needed to realize the principle of social justice. The lack of regulatory synchronization may undermine the intended function of social security programs as tools for economic equity and worker protection, particularly in the most vulnerable employment sectors.

This dualism in policy creates a gap between normative legal expectations and actual conditions on the ground.⁷ Micro and small business employers may agree on wages with their workers below the regional minimum wage due to mutual consent and economic necessity, yet they are still bound to pay BPJS contributions based on the higher minimum wage standard. This results in a policy inconsistency that needs to be addressed to prevent potential injustice, both for employers and workers.⁸

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⁶"PERPRES No. 64 Tahun 2020," 2020, accessed July 18, 2025, https://peraturan.bpk.go.id/Details/136650/perpres-no-64-tahun-2020.

⁷ Ade Irma Suryani and Dodi Jaya Wardana, "Legal Aspects of Women's Political Participation in a Gender Perspective," JURNAL USM LAW REVIEW 7, no. 3 (December 28, 2024): 1967–1981, https://journals.usm.ac.id/index.php/julr/article/view/10634.

⁸ Arif Jetha et al., "Fragmentation in the Future of Work: A Horizon Scan Examining the Impact of the Changing Nature of Work on Workers Experiencing Vulnerability," American Journal of

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One of the key objectives of the Job Creation Law, now replaced by Law Number 6 of 2023 concerning the Stipulation of Government Regulation, is to absorb the widest possible workforce in various business sectors. This includes not only the medium and large business sectors but also the small and micro business sectors, which are highlighted explicitly due to their specific needs for attention and protection from the state.

If Law No. 13/2003 prohibits employers from paying wages below the minimum wage, regardless of the scale of their business, then the appendix to Law No. 6/2003 on the Stipulation of Government Regulation in Lieu of Law No. 2/2002 on Job Creation into Law is more rational because not all employers are able to pay a minimum wage in accordance with the minimum wage.

Moreover, the current contribution scheme may unintentionally discourage small business owners from formally registering their businesses or from registering their workers in the BPJS system. The fear of financial burden may lead to non-compliance, resulting in workers being left without social security protection. This outcome contradicts the state's goal of ensuring comprehensive social protection for all citizens, regardless of the scale of their employment sector.

If viewed from the nominal amount of BPJS Kesehatan contributions in a Regency / City, then of course there is nothing wrong because all wage earners pay contributions with the same minimum amount for all workers in all companies in the City / Regency, because the benefits received are no different if PPU (a term referring to a specific category of workers) is registered in the same class. Still, from the employer's side, However, from the employer's side, of course entrepreneurs with micro and small scale businesses will bear the payment of BPJS Kesehatan contributions for their workers which is greater than it should be when compared to companies with medium and large scale businesses which in terms of assets and turnover are much larger, including on the side of workers in businesses with micro and small scale businesses whose wages are based on agreements but must pay BPJS Kesehatan contributions based on wages according to the local District / City Minimum Wage.⁹

This study aims to critically examine the urgency of applying the principle of justice in the BPJS Health contribution scheme for wage-earning workers, with particular emphasis on those employed in the micro and small enterprise sector. Given the regulatory inconsistency between the mandatory use of regional minimum wages as the contribution base and the allowance for negotiated wages in micro and small businesses, there is a pressing need to reassess the fairness of the current system. This research seeks to develop a more equitable and proportionate

Industrial Medicine 64, no. 8 (August 14, 2021): 649–666, https://onlinelibrary.wiley.com/doi/10.1002/ajim.23262.

⁹ Awan Setya Dewanta and Sahabudin Sidiq, "Intensity of the Creative Economy Agency and Partnership in Empowering Micro and Small Enterprises," *Economic Journal of Emerging Markets* (April 11, 2023): 56–71, https://journal.uii.ac.id/JEP/article/view/21683.

contribution model that considers the specific economic realities faced by workers in micro and small enterprises. The ultimate goal is to ensure that social security obligations do not become a disproportionate burden on vulnerable workers while maintaining their fundamental right to access health protection under the national social security system.

RESEARCH METHODOLOGY

The research conducted is normative legal research that focuses on the analysis and interpretation of applicable laws and regulations. Central to this research is the principle of justice in the BPJS Kesehatan contribution system, particularly for PPU and Micro and Small-scale entrepreneurs. ¹⁰¹¹ This research aims to evaluate the BPJS Kesehatan contribution system and consider the policy implications for these Vulnerable groups, highlighting the ethical considerations involved in health law and social security systems. ¹²

This paper will be based on Aristotle's theory of justice¹³, Soerjono Soekanto's theory of legal protection¹⁴, Hans Kelsen's ladder theory of legal norms¹⁵, and Gustav Radbruch's theory of legal certainty¹⁶. Researchers have a wealth of resources at their disposal for legal research. Primary legal materials are all statutory laws that apply and/or have been in force, including jurisprudence and international agreements or treaties. Secondary legal materials, a diverse array that includes literature, works, legal science, journals, reports on results, research, and library sources, as well as other information sources such as print and electronic media, enrich the research process with their variety and depth.

Legal research involves a series of procedures, including identifying legal sources, collecting and analysing legal documents, and most importantly,

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¹⁰ Syazarah Soraya et al., "Impact of the National Health Insurance Program (JKN) on Access to Public Health Services: A Comprehensive Analysis," *Jurnal Ilmu Pendidikan dan Humaniora* 12, no. 3 (September 28, 2023): 133–151, https://journals.ristek.or.id/index.php/jiph/article/view/7.

¹¹ Witati Witati and Phany Ineke Putri, "Determinant of Willingness to Pay Health Insurance Contribution to Informal Workers," *Economics Development Analysis Journal* 9, no. 2 (July 26, 2020): 144–158, https://journal.unnes.ac.id/sju/index.php/edaj/article/view/38440.

¹² Ali Dumbela et al., "Holistic Evaluation of the National Health Insurance Program in the Local Context of Indonesia," *KnE Social Sciences* (March 19, 2024), https://knepublishing.com/index.php/KnE-Social/article/view/15463.

Riky Sembiring, "Keadilan Pancasila Dalam Persepektif Teori Keadilan Aristoteles," *Jurnal Aktual Justice* no. 2 (December 15, 2018): 139–155, http://ojs.unr.ac.id/index.php/aktualjustice/article/view/539.

¹⁴ Kadek Widiantari, "Perlindungan Hukum Terhadap Anak Yang Berkonflik Dengan Hukum Yang Dijatuhi Pidana Pelatihan Kerja," *Masalah-Masalah Hukum* 46, no. 4 (February 24, 2018): 299, https://ejournal.undip.ac.id/index.php/mmh/article/view/16228.

¹⁵ Muhtadi Muhtadi, "Penerapan Teori Hans Kelsen Dalam Tertib Hukum Indonesia," *FIAT JUSTISIA:Jurnal Ilmu Hukum* 5, no. 3 (March 26, 2014), https://jurnal.fh.unila.ac.id/index.php/fiat/article/view/75.

¹⁶ M Muslih, "Negara Hukum Indonesia Dalam Perspektif Teori Hukum Gustav Radbruch (Tiga Nilai Dasar Hukum)," *Legalitas: Jurnal Hukum* 4, no. 1 (May 12, 2017): 130–152, accessed July 18, 2025, https://legalitas.unbari.ac.id/index.php/Legalitas/article/view/117.

identifying relevant legal cases.¹⁷ This step is crucial as it forms the backbone of our research, providing a comprehensive record of our work and supporting the arguments and findings in our research.

RESULT AND DISCUSSION

Analysis of BPJS Kesehatan Fee Procedures Based on Applicable Provisions

Law No. 40/2004 on the National Social Security System stipulates that health insurance is organised nationally according to the principles of social security and equality, to enable participants to obtain health maintenance and protection benefits while accessing basic health services.

BPJS Kesehatan membership is mandatory for all Indonesian citizens and foreigners who have worked in Indonesia for a minimum of 6 (six) months and have made contributions. The types of participation in BPJS Kesehatan are broadly divided into 2 two types: Participants Receiving Contribution Assistance (PBI) and Participants Not Receiving Contribution Assistance.

The BPJS Kesehatan contribution system is based on the principle of social insurance, where participants are required to make regular contributions to gain access to health services. The following are some important points about the BPJS Kesehatan contribution system in Indonesia:

- 1. Contribution Obligation: Every Indonesian citizen, whether employed or unemployed, is required to become a participant in BPJS Kesehatan and make contributions. This contribution is a periodic payment required to obtain health protection.
- 2. Contribution Rate: The amount of BPJS Kesehatan dues for PBI and Non-PBI is determined by Presidential Regulation and reviewed every 2 (two) years.
- Contribution Payment: BPJS Kesehatan contributions can be paid through several methods, including salary deductions for participants who work as PPUs, direct payments by non-PPU participants, or through government programs that subsidise contributions for lowincome individuals.
- 4. Health Insurance: After paying dues, BPJS Kesehatan participants are entitled to health insurance, which includes basic health services, inpatient care, outpatient care, medical treatments, medicines, and other related services at health facilities in collaboration with BPJS Kesehatan.
- 5. Beneficiaries: The BPJS Kesehatan Program provides benefits to the entire population of Indonesia, including both formal and informal

¹⁷ Emily Tiry et al., "Beyond Forensic Evidence: Examining Sexual Assault Medical Forensic Exam Mechanisms That Influence Sexual Assault Case Outcomes," *Journal of Interpersonal Violence* 37, no. 7–8 (April 29, 2022): NP5693–NP5727,

https://journals.sagepub.com/doi/10.1177/0886260520961870.

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workers, self-employed individuals, participants in previous government health insurance programs, and families of participants covered under the family insurance scheme.

The amount of BPJS Health contributions is determined through a Presidential Regulation and is regularly evaluated every two years to adjust for economic dynamics and evolving healthcare service needs. For participants enrolled in the Contribution Assistance Program (Penerima Bantuan Iuran/PBI), the government assumes full responsibility for the contributions, thereby providing social protection guarantees for underprivileged communities. Meanwhile, for wage-earning workers employed in government institutions, such as civil servants, members of the military (TNI), police officers, state officials, and non-civil servant government employees, the contribution rate is set at 5% of their monthly salary or wage. The payment scheme is shared between the employer and the employee, with 4% covered by the government as the employer and 1% paid directly by the participant. This arrangement is intended to ensure the sustainability of the national health insurance program while fostering a fair and equitable financing system.¹⁸

The highest wage limit, as the basis for calculating BPJS Kesehatan contributions for wage recipient workers, is Rp. 12,000,000 (twelve million rupiah), while the lowest limit of monthly wages as the basis for calculating BPJS Kesehatan contributions for wage recipient workers is the District/City Minimum Wage. 19

Therefore, according to the author, this is not by the second part of article 82 of Chapter IV on Manpower Number 31 of article 90B paragraph 1 of the attachment to Law Number 6 of 2023 concerning the Stipulation of Government Regulations instead of Law Number 2 of 2022 concerning Job Creation into Law which states "The provisions of the Minimum Wage as referred to in Article 88C paragraph (1) and paragraph (2) are exempted for micro and small businesses."²⁰

Moreover, affirmed in Government Regulation Number 36 of 2021 concerning Wages, which is the implementing regulation of Law Number 6 of 2023, the system ensures that workers' rights are protected. Wages in micro and small businesses are determined based on an agreement between employers and workers, with provisions of at least 50% (fifty per cent) of the average community consumption at the provincial level and at least 25% (twenty-five per cent) above the provincial poverty line. This system applies to micro and small businesses

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¹⁸ Dumbela et al., "Holistic Evaluation of the National Health Insurance Program in the Local Context of Indonesia."

^{19 &}quot;PERPRES No. 64 Tahun 2020."

²⁰"UU No. 6 Tahun 2023," 2023, accessed July 18, 2025, https://peraturan.bpk.go.id/Details/246523/uu-no-6-tahun-2023.

that rely on traditional resources and are not engaged in high-tech or non-capital-intensive businesses.²¹

Moreover, affirmed in Government Regulation Number 36 of 2021 concerning Wages, which is the implementing regulation of Law Number 6 of 2023, the system ensures that workers' rights are protected. Wages in micro and small businesses are determined based on an agreement between employers and workers, with provisions of at least 50% (fifty per cent) of the average community consumption at the provincial level and at least 25% (twenty-five per cent) above the provincial poverty line. This system applies to micro and small businesses that rely on traditional resources and are not engaged in high-tech or non-capital-intensive businesses:

- 1. The provisions of the Minimum Wage as referred to in Article 88C paragraph (1) and paragraph (2) shall be exempted for micro and small enterprises and;
- 2. Wages in micro and small enterprises are typically set through agreements between employers and workers. These agreements regulate the payment of wages for workers in micro and small enterprises, rather than relying on the Minimum Wage.

Wages in micro and small enterprises are determined through agreements between employers and workers. These agreements regulate the payment of wages for workers in micro and small enterprises, rather than relying on the Minimum Wage.

Hans Kelsen's Theory of Legal Norms argues that legal norms are tiered and layered in a hierarchy (order) in the sense that a higher norm applies, is sourced and based on a higher norm, and so on until a norm that cannot be traced further and is hypothetical and fictitious, namely the Basic Norm (Grundnorm).²³ Based on this legal ladder theory, Presidential Regulations should be based on the Law, and the Law should not contradict the Constitution, which is the highest rule. If a lower regulation is enacted before a higher regulation, then the lower regulation should be evaluated and harmonized.

The determination of the lowest limit of wages or salaries per month for the basis of calculating the amount of BPJS Kesehatan Participant contributions for wage-earning workers of business entities at the MSE and the highest wage limit of Rp. 12,000. 000 (twelve million rupiah) in Presidential Regulation Number 64 of 2020 provides legal certainty both for BPJS Kesehatan as an organiser and also

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²¹"PP No. 36 Tahun 2021," last modified 2021, accessed July 18, 2025, https://peraturan.bpk.go.id/Details/161909/pp-no-36-tahun-2021.

²² Bryant Christoper and Kadek Agus Sudiarawan, "LEGAL IMPLICATIONS ON THE ISSUANCE OF GOVERNMENT REGULATION NO. 36 OF 2021 ON THE WORKER WAGE SYSTEM IN INDONESIA," *POLICY, LAW, NOTARY AND REGULATORY ISSUES (POLRI)* 2, no. 1 (January 17, 2023): 44–51, https://ojs.transpublika.com/index.php/POLRI/article/view/525.

²³ Dani Pinasang, "Falsafah Pancasila Sebagai Norma Dasar (Grundnorm) Dalam Rangka Pengembanan Sistem Hukum Nasional," *Jurnal Hukum Unsrat* 20, no. 3 (2012).

for participants. However, it also creates a financial strain, especially for participants in micro and small-scale businesses, both employers and workers.²⁴ The wages or salaries paid/received at micro and small-scale business entities are agreed based on the company's ability, leading to a situation where both employers and workers must pay a higher percentage of contributions than the actual wages received.

The provisions of laws and regulations relating to social security programs offer great hope to the community, and in their preparation, the government has considered all related matters, especially in terms of budget preparation.²⁵ Therefore, the determination of the amount of BPJS contributions that have been made in Presidential Regulation 64 of 2020 is generally considered less than the principles of social justice. The government, as the party with authority, is fully committed to realising the expectations given to the community in reality. This commitment should make all levels of society feel secure in the fairness of the system.

Implementation of the Fairness Principle of BPJS Kesehatan Contributions for Wage Earners (PPU) in the Future

1. Consideration in Determining BPJS Kesehatan's Fee

In implementing BPJS Kesehatan contributions for wage-earning workers in micro and small enterprises, it is essential to consider the principles of justice espoused by philosophical theories. A balanced approach, considering proportionality, community benefit, equality, and utility, will help achieve justice in the health contribution system for workers in MSMEs:

a. Proportionality of Contributions: It is important to ensure that the amount of contribution paid by PPUs in MSMEs is proportional to their economic capabilities. For instance, a smaller MSME with lower revenue might contribute a smaller amount compared to a larger MSME with higher revenue. MSMEs often have limited resources and lower income compared to large companies. Therefore, BPJS Kesehatan contributions should be affordable and not burdensome for wage earners in MSMEs.

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²⁴ Andi Yusniar Mendo et al., "ECONOMIC POTENTIAL BY MSMES AT COASTAL AREA: EVIDENCE OF BONE BALANGO REGENCY IN INDONESIA," *Dinasti International Journal of Education Management And Social Science* 3, no. 1 (October 27, 2021): 23–34, https://dinastipub.org/DIJEMSS/article/view/1013.

²⁵ Xizi Xue, "Statistical Analysis of Data Based on the Endogenous Growth Model to Study the Adequacy of Fiscal Social Security Expenditure and the Improvement of Social Security System," in *Proceedings of the 4th International Conference on Economic Management and Model Engineering, ICEMME* 2022, *November* 18-20, 2022, *Nanjing, China* (EAI, 2023), http://eudl.eu/doi/10.4108/eai.18-11-2022.2327113.

- b. Tariff Stratification: The government may consider implementing a differentiated tariff system based on the scale of the business. This system is designed to provide MSMEs with the flexibility to pay contributions according to their size and economic capacity. Lower tariffs or subsidy schemes can be implemented to help MSMEs fulfil their BPJS Kesehatan contribution obligations for their wage-earning workers.
- c. Education and Mentoring: It is important to educate and mentor MSME owners on their BPJS Kesehatan contribution obligations and the benefits of the program. Many MSME owners may not fully understand the importance of health protection and related legal aspects. By providing a good understanding, they will be more motivated to fulfil their contribution obligations and access necessary health services, thereby feeling prioritised and cared for.
- d. Stimulus and Incentives: The government can provide stimulus or incentives to MSMEs that fulfil their BPJS Kesehatan contribution obligations for their wage-earning workers. This recognition of their role in public health and economic stability, coupled with certain tax breaks or subsidies, can help ease the financial burden of MSMEs and encourage compliance with the BPJS Kesehatan program.
- e. Improved Service Quality: The BPJS Kesehatan system urgently needs to ensure that the health services provided to wage earners in MSMEs are of high quality. In this case, monitoring and supervision are necessary to ensure that MSMEs have adequate access to health facilities and receive quality services in return for their contributions.

By taking a proactive stance on the fairness of BPJS Kesehatan contributions for PPUs in micro and small-scale businesses, the government can instil confidence in the public and ensure compliance with this program. This will lead to broader health protection for workers in the MSME sector. The principle of fairness in BPJS Kesehatan contributions for wage earners is not just important, but a top priority. BPJS Kesehatan, as a national health insurance program in Indonesia, is dedicated to providing health protection to all Indonesians, including wage earners.

2. The Application of the Principle of Justice

Here are some of the urgent issues regarding the fairness of BPJS Healthcare contributions for wage earners:

²⁶ Awalludin Fajar Brata Wijaya, Surachman Surachman, and Mugiono Mugiono, "THE EFFECT OF SERVICE QUALITY, PERCEIVED VALUE AND MEDIATING EFFECT OF BRAND IMAGE ON BRAND TRUST," *Jurnal Manajemen dan Kewirausahaan* 22, no. 1 (March 31, 2020): 45–56, https://jurnalmanajemen.petra.ac.id/index.php/man/article/view/22675.

- a. Equitable Access to Healthcare: The principle of fairness in BPJS Healthcare contributions ensures that all wage earners have equal access to healthcare services. By making reasonable and proportional contributions, wage earners can obtain the necessary healthcare protection without worrying about high costs.
- b. Social Protection: BPJS Kesehatan protects wage earners from unexpected health risks. By making contributions, they are guaranteed access to a range of health services, including check-ups, treatment, medication, and other necessary medical procedures. This provides financial protection for wage earners and their families in the event of illness or accident.
- c. Social Solidarity: The principle of fairness in BPJS Kesehatan contributions is also based on the principle of social solidarity. Healthy wage earners who can pay their contributions on time provide support to those who need more intensive health services. This system is designed to ensure that everyone, regardless of their financial situation, has access to the health services they need. Thus, this system embodies the principles of mutual assistance and, significantly, reduces disparities in access to health services between individuals and groups.
- d. Worker Welfare: The principle of fairness in BPJS Kesehatan contributions aims to improve the welfare of wage earners. By having access to affordable and quality health services, wage earners can maintain their health preventively, treat illnesses, and receive the necessary care. This comprehensive approach to health not only has a positive impact on their productivity but also ensures a healthy and secure workforce.

The importance of the principle of fairness in BPJS Kesehatan contributions for wage earners is a beacon of hope, demonstrating the government's commitment to protecting the health of all Indonesians, including those who work as wage earners. By embracing this principle of fairness, we strive to significantly reduce disparities in access to health services, paving the way for every individual to have an equal opportunity to obtain the necessary health protection.

3. Determination of Current BPJS Kesehatan Contributions

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BPJS Healthcare contributions are determined based on Presidential Regulations and reviewed every two years. For participants receiving contribution assistance (PBI) for healthcare, the government covers the contributions, providing a sense of security and support.²⁷ Contributions for

²⁷ Sonica Rautela, Nehajoan Panackal, and Adya Sharma, "Integrated Healthcare System in India: A Conceptual Framework," *Journal of Integrated Care* 32, no. 3 (August 8, 2024): 285–302, https://www.emerald.com/insight/content/doi/10.1108/JICA-01-2024-0002/full/html.

participants who are salaried employees working in government institutions, including civil servants, members of the Indonesian National Armed Forces, members of the Indonesian National Police, state officials, and non-civil servant government employees, amounting to 5% (five percent) of monthly salary or wages, with the following provisions: 4% (four percent) paid by the employer and 1% (one percent) paid by the participant. In determining the contribution amount for BPJS Kesehatan participants, the government also considers and coordinates national financial policies in a proportional and equitable manner. This is done to maintain the quality and sustainability of the Health Insurance program, including funding policies for Health Insurance, such as contribution policies.

4. Determination of BPJS Kesehatan Contributions in the Future

The implementation of the principle of fairness in BPJS Healthcare contributions for workers receiving wages from micro and small businesses in the future may involve several steps and strategies. The following are some examples of implementations that can be considered:

- a. Adjustment of Contribution Rates: The government may review the BPJS Kesehatan contribution rates for wage earners in micro and small enterprises. This review aims to strike a balance between the financial sustainability of the BPJS Kesehatan program and the economic capacity of MSMEs. The goal is to ensure that any adjustments to the contribution rates are proportional and affordable, thereby avoiding excessive healthcare costs that would burden MSMEs and their workers
- b. Subsidy Scheme: The government may consider providing subsidies to MSMEs to pay BPJS Healthcare contributions for their salaried employees. These subsidies may be provided in the form of contribution relief, exemption from administrative fees, or direct subsidies to help MSMEs meet their BPJS Healthcare contribution obligations. It's important to note that these subsidies may be funded through the government budget or other available funding sources, ensuring that the audience is well-informed and aware of the potential financial backing for the proposal.
- c. Awareness and Education: It is important to conduct intensive educational campaigns for MSME owners about the benefits and obligations of BPJS Kesehatan contributions. These campaigns should emphasise the importance of health protection for workers, fostering a sense of responsibility and care among MSME owners towards their employees. MSME owners also need to be provided with clear

- information about the registration process, contribution payments, and access to health services provided by BPJS Kesehatan.
- d. Assistance and Guidance: MSMEs can receive assistance and guidance throughout the process of administering and paying BPJS Kesehatan contributions. The government can appoint or involve assistants who provide guidance and assistance to MSMEs in fulfilling their contribution obligations, managing membership data, and accessing health services provided by BPJS Kesehatan.
- e. Collaboration with MSME Associations: The government can collaborate with MSME associations or organisations to ensure the principle of fairness in BPJS Kesehatan contributions is upheld. Through this collaboration, a more effective approach can be taken in conveying information, obtaining input from MSME owners, and identifying solutions that suit the needs of MSMEs.
- f. Evaluation and Monitoring: It is important to conduct periodic evaluations of the implementation of the principle of fairness in BPJS Kesehatan contributions for PPUs in MSMEs. These evaluations involve analysing the impact of the policy, monitoring MSME compliance with payment of contributions, and assessing the quality of health services received by workers. The active participation of MSMEs in these evaluations is crucial, as the results serve as a basis for making necessary improvements and policy adjustments.

With the proper implementation of the principle of fairness in BPJS Healthcare contributions for wage earners in micro and small businesses, it is hoped that there will be more equitable access to healthcare protection and improved welfare for workers in the MSME sector.

CONCLUSION

The determination of the minimum monthly contribution for BPJS Health participants, particularly wage-earning workers in the business sector, as stipulated in Article 32 paragraph (2) of Presidential Regulation No. 64 of 2020, which amends Presidential Regulation No. 82 of 2018 on Health Insurance, raises significant legal concerns. This provision mandates the use of the Regency/Municipal Minimum Wage (UMK) as the basis for calculating health insurance contributions, regardless of the enterprise scale or sector. However, Article 90B paragraph (1) of the Appendix to Law No. 6 of 2023, which ratifies Government Regulation in Lieu of Law No. 2 of 2022, explicitly states that the minimum wage provisions do not apply to micro and small enterprises. In this sector, wages are determined through mutual agreements between employers and employees, rather than being based on the UMK. This regulatory inconsistency creates a potential conflict of norms, undermining the principle of legal certainty.

Furthermore, the uniform application of BPJS Health contributions to all wage-earning workers, without regard to enterprise scale, contradicts the principle of social justice as mandated by Article 2 of Law No. 40 of 2004 on the National Social Security System (SJSN) and Law No. 24 of 2011 on BPJS (Social Security Administrative Body). This principle emphasizes the need for proportional policies to ensure that all segments of society can benefit from social protection in a fair and equitable manner.

Legal certainty serves as a fundamental pillar of justice enforcement. It requires regulations to be clear, consistent, and predictable in their consequences, allowing individuals and entities to understand and comply with legal obligations effectively. In this context, the government must ensure regulatory harmonization in the determination of social security contributions to prevent confusion and injustice in practical implementation.

From a sociological perspective, the government bears both a moral and juridical responsibility to lead by example in complying with existing regulations. Policy evaluation and adjustments must be carried out proactively, without waiting for legal challenges or public pressure. This approach reflects the government's commitment to the fundamental objective of legislation: to promote public welfare and protect basic rights, including the right to health insurance.

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