

## **HOSPITAL**

**(RI Law No. 44 Year 2009, dated October 28, 2009)**

**WITH THE BLESSING OF THE ONE AND ONLY GOD  
PRESIDENT OF THE REPUBLIC OF INDONESIA,**

**Considering :**

- a. that medical service is the right of every people assured in the 1945 State Constitution of the Republic of Indonesia that must be materialized thru efforts on improvement for the highest degree of health of the public;
- b. that hospital is a medical service institution for the public with certain characteristics influenced by the development of health science, technological progress, and the socio-economy life of the public that shall be always capable of improving services for a better quality and within the

reach of the public in order to materialize the highest degree of public health;

- c. that in the context of improving the quality and reach of hospital services as well as the regulating of rights and obligations of the public to receive medical services, it is necessary to regulate hospitals by Law;
- d. that the regulating of hospitals are not yet sufficient to be used as legal basis in the performance of hospitals as medical service institution for the public;
- e. that based on the considerations meant in letters a, thru d as well as to provide a legal certainty for the public and hospitals, it is necessary to establish a Law on Hospital;

In view of:

Article 5 paragraph (1), Article 20, Article 28H paragraph (1), and Article 34 paragraph (3) of the 1945 State Constitution of the Republic of Indonesia (BN No. 7152 page 14A);

Thru a Joint Approval,  
THE PEOPLE REPRESENTATIVE COUNCIL OF THE  
REPUBLIC OF INDONESIA

and

PRESIDENT OF THE REPUBLIC OF INDONESIA

DECIDE:

To stipulate :

LAW ON HOSPITAL.

## CHAPTER I

### GENERAL PROVISIONS

#### Article 1

In this Law, what is meant by:

1. Hospital is a medical service institution providing complete medical services for individuals thru the provision of services on hospitalization, medical treatment, and emergencies.
2. Emergency is a clinical condition of a patient requiring immediate medical treatment to save life and to prevent further defects.
3. Complete medical service is a medical service covering the promotion of preventive, curative, and rehabilitative actions.
4. Patient is any person performing consultation on health problems to receive required medical service directly and indirectly in a hospital.
5. Central Government, hereinafter referred to as Government, is the President of the Republic of Indonesia holding authority of the government of the Republic of Indonesia as meant in the 1945 State Constitution of the Republic of Indonesia.

6. Regional Government is the governor, regent, or mayor and regional apparatus as performing elements of the regional government.
7. Minister is the minister exercising government affairs in the aspects of health.

## CHAPTER II

### PRINCIPLES AND PURPOSE

#### Article 2

Hospitals are operated based on Pancasila and based on the values of humanity, ethics and professionalism, benefit, justice, equality of right and anti-discrimination, even distribution, protection and safety of patients, and having social functions.

#### Article 3

The regulating of the operations of hospitals has the purpose to:

- a. simplify access for the public to receive medical services;
- b. to provide protection on the safety of patients, the public, environment of hospitals and human resources in a hospital;
- c. to improve the quality of and to maintain the standard of hospital services; and
- d. to provide a legal certainty to patients, the public, hospital human resources, and hospitals.

## CHAPTER III

### MISSION AND FUNCTIONS

#### Article 4

Hospitals have the mission to provide complete medical services for individuals.

#### Article 5

In order to perform the mission meant in Article 4, hospitals have the following functions:

- a. performance of services on medication and health recovery according to the standard of the hospital services;
- b. maintenance and improvement of health of individuals thru complete medical service at level two and three according to medical requirements;
- c. performance of education and training of human resources in the context of improving the capability in the provision of medical services; and
- d. performance of research and development as well as filtering technology in the aspect of health in the context of improving medical services by observing ethics of science in the aspect of health;

#### CHAPTER IV RESPONSIBILITY OF THE GOVERNMENT AND REGIONAL GOVERNMENTS

##### Article 6

- (1) The Government and regional governments have the responsibility to:
- a. provide hospitals based on requirements of the public;
  - b. guarantee expenses of medical services in a hospital for the poor, or incapable people in accordance with provisions of legislations;
  - c. manage and control the performance of hospitals;
  - d. provide protection to hospitals so as to be able to provide professional and accountable medical services;
  - e. provide protection to the public using hospital services according to provisions of legislations;
  - f. motivate participation of the public in the establishment of hospitals according to kind of service required by the public;

- g. provide medical information required by the public;
  - h. guarantee expenses of emergency services in a hospital due to disasters and extraordinary events;
  - i. provide required human resources; and
  - j. regulate the distribution and spread of health equipments of high technology and high value.
- (2) The responsibility meant in paragraph (1) shall be performed based on authority in accordance with provisions of legislations.

#### CHAPTER V REQUIREMENTS

##### Part One

##### General

##### Article 7

- (1) Hospital must meet requirements on location, buildings, infrastructures, human resources, pharmacy matters, and equipments.
- (2) Hospital can be established by the Government, Regional Government, or the private sector.
- (3) Hospitals established by the Government and Regional Government as meant in paragraph (2) shall be in the form of a technical performing unit of the agency having the duty in the aspect of health, certain agencies, or regional technical agencies with the management of public service body or regional public service body according to provisions of legislations.
- (4) Hospitals established by the private sector as meant in paragraph (2) shall be in the form of a legal entity whose business activity is solely in the field of hospital matters.

##### Part Two

##### Location

##### Article 8

- (1) Requirements on location as meant in Article 7 paragraph (1) must meet provisions on health,

environmental safety, and spatial layout, and shall be pursuant to the product of study on requirements and feasibility of the operations of a hospital.

- (2) Provisions on health and environmental safety as meant in paragraph (1) cover Environment Monitoring Effort, Environment Management Efforts and/or Analysis of Impact on the Environment shall be performed according to legislations.
- (3) The spatial layout provision referred to in paragraph (1) is performed according to the allotment of location regulated in the Spatial Layout Plan of Regency/city area, Spatial Layout Plan of urban zones and/or Building and Environment Order Plan.
- (4) Product of the study on requirement for the establishment of hospitals as meant in paragraph (1) must be based on a feasibility study by using the principles of even distribution of services, efficiency and effectiveness, as well as demography.

### Part Three Buildings Article 9

Requirements of buildings as meant in Article 7 paragraph (1) must meet:

- a. administrative requirements and technical requirements of buildings in general, according to provisions of legislations; and
- b. technical requirements of hospital buildings, according to its functions, comfort and ease in the provision of services and protection and safety to everybody including the handicapped, children, and senior citizens.

### Article 10

- (1) Hospital buildings referred to in Article 9 must be able to be used to meet requirements of

comprehensive medical services, education and training, as well as research and development of medical science and technology.

- (2) Hospital buildings meant in paragraph (1) shall consist of at least the following rooms:
  - a. medical treatment;
  - b. hospitalization rooms;
  - c. emergency room;
  - d. operation room;
  - e. room for medical workers;
  - f. radiology room;
  - g. laboratory;
  - h. sterilization room;
  - i. pharmacy rooms;
  - j. education and training places;
  - k. office and administration rooms;
  - l. place for religious services, waiting room;
  - m. public health information room;
  - n. mother nursing room;
  - o. mechanical room;
  - p. kitchen;
  - q. laundry;
  - r. morque;
  - s. gardens;
  - t. waste processing; and
  - u. sufficient parking lots.

- (3) Further provisions on technical requirements of hospital buildings as meant in paragraph (1) and paragraph (2) shall be regulated with a Regulation of the Minister.

### Part Four Infrastructures Article 11

- (1) Infrastructures of hospitals referred to in Article 7 paragraph (1) cover:
  - a. water installation;
  - b. mechanical and electrical installations;
  - c. medical gas installation;
  - d. vapor installation;

e. waste.....

- e. waste management installation;
- f. fire prevention and handling;
- g. guidelines, standard and means of evacuation in emergencies;
- h. air installation system;
- i. information and communication system; and
- j. ambulance.

- (2) The infrastructures referred to in paragraph (1) must meet the standard of services, security, as well as occupational safety and health on the performance of hospitals
- (3) The infrastructures referred to in paragraph (1) must be maintained and shall function properly.
- (4) Operations and maintenance of hospital infrastructures referred to in paragraph (1) must be performed by officers having the competence in his field.
- (5) Operations and maintenance of hospital infrastructures referred to in paragraph (1) must be documented and evaluated periodically and continuously.
- (6) Further provisions on hospital infrastructures referred to in paragraph (1) up to paragraph (5) shall be regulated with a Regulation of the Minister.

#### **Part Five**

#### **Human Resources**

#### **Article 12**

- (1) Requirements for human resources referred to in Article 7 paragraph (1) i.e. a hospital shall have full time workers covering medical workers and medical support, nursery, pharmacy matters workers, hospital management, and non-medical workers.
- (2) The number and types of human resources referred to in paragraph (1) shall be in accordance with the type and classification of the hospital.

- (3) A hospital shall have data on persons performing practice or work in the performance of the hospital.
- (4) Hospital can employ non-permanent workers and consultants according to requirements and capability pursuant to provisions of statutory regulations.

#### **Article 13**

- (1) Medical workers performing physician (medical) practice in a hospital must have a Practice Permit Letter according to provisions of legislations.
- (2) Certain health manpower working in a hospital must have a permit according to provisions of legislations.
- (3) Every health manpower working in a hospital must work in accordance with the standard of profession, standard of hospital service, applicable operational procedure standard, ethics of profession, respect the right of patients and prioritize the safety of patients.
- (4) Provisions on medical workers and health workers as meant in paragraph (1) and paragraph (2) shall be performed according to provisions of legislations.

#### **Article 14**

- (1) Hospitals are entitled to employ foreign health workers according to requirements of services.
- (2) The utilization of foreign health workers as meant in paragraph (1) shall be made by taking into consideration the interest of transfer of technology and science and the availability of local health workers.
- (3) The utilization of foreign health workers as meant in paragraph (1) shall be made only on foreign health workers who had possessed a Registration Proof Letter and Practice Permit Letter.

- (4) Further provisions on the utilization of foreign health workers referred to in paragraph (1) paragraph (2) and paragraph (3) shall be regulated with a Government Regulation.

#### **Part Six**

#### **Pharmacy Matters**

#### **Article 15**

- (1) Pharmacy requirements as meant in Article 7 paragraph (1) must guarantee the availability of pharmacy supplies and health equipments of high quality, beneficial, safe and within reach.
- (2) Services on pharmacy supplies in a hospital shall adhere to the standard of services of pharmacy matters.
- (3) Management of health equipments, pharmacy supplies, and consumables in a hospital must be performed using a one-door system of the pharmacy installation.
- (4) Price of pharmacy supply in a hospital pharmacy installation must be reasonable and referring to the standard price stipulated by the Government.
- (5) Further provisions on the standard of pharmacy service matters as meant in paragraph (2) shall be regulated with a Regulation of the Minister.

#### **Part Seven**

#### **Equipments**

#### **Article 16**

- (1) Requirements of the equipments meant in Article 7 paragraph (1) covering medical and non-medical equipments must meet the standard of services, requirements of quality, security, safety and feasibility.
- (2) Medical equipments as meant in paragraph (1) must be tested and calibrated periodically by a testing bureau of a medical facility and/or testing institution of an authorized medical facility.

- (3) Equipments using ionization ray must comply with provisions and must be controlled by the agency having the authority.
- (4) The use of medical and non-medical equipments in a hospital must be performed according to the medical indications of a patient.
- (5) Operations and maintenance of hospital equipments must be performed by officers having the competence in their field.
- (6) Maintenance of equipments must documented and evaluated periodically and continuously.
- (7) Provisions on the testing and/or calibration of medical equipments, standards related to security, quality, and benefit shall be performed according to provisions of legislations.

#### **Article 17**

Hospitals not meeting the requirements meant in Article 7, Article 8, Article 9, Article 10, Article 11, Article 12, Article 13, Article 14, Article 15, and Article 16 shall not be provided with a permit for its establishment, shall be revoked or shall not be extended as of its operational permit.

### **CHAPTER VI**

### **TYPES AND CLASSIFICATION**

#### **Part One**

#### **Types**

#### **Article 18**

Hospitals can be divided based on the types of services and its management.

#### **Article 19**

- (1) Based on the types of services provided, hospitals are categorized into Public Hospitals and Particular Hospitals.
- (2) Public Hospitals as meant in paragraph (1) provide medical services to all aspects and types of diseases.

- (3) Particular Hospitals as meant in paragraph (1) render main services on one aspect or one type of disease based on discipline of science, age category, organ, type of diseases, or other specifications.

#### Article 20

- (1) Based on its management, Hospitals can be divided into a public hospital and particular hospital.
- (2) Public hospital as meant in paragraph (1) can be managed by the Government, Regional Government, and legal entity that is non-profit in nature.
- (3) Public hospital managed by the Government and Regional Government are provided based on the management body of Public Service Agency or Regional Public Service Agency according to provisions of legislations.
- (4) A public hospital managed by the Government and Regional Government as meant in paragraph (2) cannot be changed into a particular hospital.

#### Article 21

Particular Hospital as meant in Article 20 paragraph (1) managed by a legal entity with the purpose of profit-making shall be in the form of Limited Liability Company or Liability Company.

#### Article 22

- (1) A hospital can be stipulated as an education hospital after meeting requirements and the standard of an education hospital.
- (2) The education hospital meant in paragraph (1) is stipulated by the Minister after coordination with the Minister in charge of education matters.

#### Article 23

- (1) Education hospital meant in Article 22 is a hospital performing education and research integrated with the field of medical profession education, advanced medical education, and other medical workers educations.
- (2) In the performance of education hospitals, an Education Hospital Net may be established.
- (3) Further provisions on education hospitals shall be regulated with a Government Regulation.

#### Part Two Classification Article 24

- (1) In the context of performing medical services in gradation and reference functions, public hospitals and particular hospitals are classified based on the hospital's facilities and capability of the services.
- (2) Classification of public hospitals as meant in paragraph (1) consist of :
- Public Hospital class A;
  - Public Hospital class B
  - Public Hospital class C;
  - Public Hospital class D.
- (3) Classification of particular hospitals as meant in paragraph (1) consist of :
- Particular Hospital class A;
  - Particular Hospital class B;
  - Particular Hospital class C.
- (4) Further provisions on classification as meant in paragraph (1) shall be regulated with a Regulation of the Minister.

#### CHAPTER VII

#### PERMITS

#### Article 25

- (1) Every performer of hospital must have a permit

(2) The.....

- (2) The permit meant in paragraph (1) consists of establishment permit and operational permit.
- (3) Establishment permit as meant in paragraph (2) is provided for a period of two (2) years and extendable for one (1) year.
- (4) Operational permit as meant in paragraph (2) is provided for a period of five (5) years and extendable as long as it meets requirements.
- (5) The permits meant in paragraph (2) shall be provided after meeting the requirements regulated in this Law.

#### Article 26

- (1) Permit for class A hospitals and foreign capital investment or domestic capital investment hospitals shall be issued by the Minister after receiving a recommendation from the official having the authority in the aspect of health at Province Regional Government.
- (2) Permit for foreign capital investment hospitals or domestic capital investment hospitals as meant in paragraph (1) shall be issued after receiving a recommendation from the agency performing foreign capital investment or domestic capital investment matters.
- (3) Permit for class B hospitals shall be issued by the Province Regional Government after receiving a recommendation from the official having the authority in the aspect of health at Regency/City Regional Government.
- (4) Permit for class C and class D hospitals shall be issued by the Regency/City Regional Government after receiving a recommendation from the official having the authority in the aspect of health at Regency/City Regional Government.

#### Article 27

A hospital permit may be revoked if:

- a. its validity period expired;

- b. did not meet requirements and standards any more;
- c. proved as having committed a violation of legislations; and/or
- d. on the order of court in the context of law enforcement.

#### Article 28

Further provisions on permits shall be regulated with a Regulation of the Minister.

### CHAPTER VIII

#### OBLIGATIONS AND RIGHTS

##### Part One

##### Obligations

#### Article 29

- (1) Every hospital has the following obligations:
  - a. provision of correct information on the service of the hospital to the public;
  - b. provision of beneficial, high quality, anti-discrimination, and effective medical services by prioritizing the sake of patients according to the service standard of the hospitals;
  - c. provision of services to patients encountering emergencies according to the capability of its services;
  - d. actively participating in the provision of medical services on disasters, according to the capability of its services;
  - e. provision of means and services for the incapable public or the poor;
  - f. perform social functions among others by providing facility services for incapable or poor patients, services on emergencies without advance payment, free ambulance, services for victims of disasters and extraordinary events, or social works for humanity mission;



- g. establish, perform, and maintain the standard of medical services quality in hospitals as reference to serve patients;
- h. maintain medical records;
- i. provide feasible general means and infrastructures among others means for religious matters, parking lots, waiting rooms, means for the invalid, nursing women, children, senior citizens;
- j. operate a reference system;
- k. reject desires of patients contradictory to the standard of profession and ethics as well as legislations;
- l. provide information that are correct, clear and honest on rights and obligations of patients;
- m. respect and protect the rights of patients;
- n. exercise hospital ethics;
- o. possess a system for the prevention of accidents and the tackling of disasters;
- p. execute government programs in the aspect of health both regionally and nationally;
- q. make a list of medical workers performing medical practices or dentistry and of other medical workers;
- r. compile and exercise hospital internal regulations (hospital by laws);
- s. protect and provide legal assistance for every hospital officers in the performance of duty; and
- t. treat all environment of the hospital as cigarette-free area.

(2) Any violation of the obligations meant in paragraph (1) shall be imposed to administrative sanctions in the form of:

- a. warning;
- b. written warning; or
- c. fine and revocation of hospital permit.

(3) Further provisions on obligations of hospitals as meant in paragraph (1) shall be regulated with a Regulation of the Minister.

## Part Two Rights of Hospitals Article 30

(1) Every hospital has the right to:

- a. determine the amount, type, and qualifications of human resources according to the classification of the hospital;
- b. receive compensation for the provision of services and to determine the remuneration, incentive, and appreciation in accordance with provisions of legislations;
- c. enter into cooperation with other parties for the purpose of developing services;
- d. receive aid from other parties in accordance with provisions of legislations;
- e. litigate parties inflicting losses;
- f. receive protection by law in the performance of medical services;
- g. promote medical services in a hospital in accordance with provisions of legislations; and
- h. receive tax incentive for public hospitals and hospitals stipulated as education hospitals.

(2) Further provisions on the promotion of medical services as meant in paragraph (1) letter g shall be regulated with a Regulation of the Minister.

(3) Further provisions on tax incentive as meant in paragraph (1) letter h shall be regulated with a Government Regulation.

## Part Three Obligations of Patients Article 31

(1) Every patient has obligations towards a hospital on services received.

- (2) Further provisions on obligations of patients shall be regulated with a Regulation of the Minister.

**Part Four**  
**Rights of Patients**  
**Article 32**

Every patient has the following rights:

- a. to receive information on discipline and regulations applicable in a hospital;
- b. to receive information on rights and obligations of a patient;
- c. to receive services that is human, just, fair, and without discrimination;
- d. to receive qualified medical services according to the standard of profession and the standard of operational procedures;
- e. to receive services that are effective and efficient so that the patient can be prevented from physical and material losses;
- f. to submit a claim on the quality of services received;
- g. choose a physician and class of treatment according to his desire and regulations applicable in a hospital;
- h. demand for consultation on the disease being suffered to other physicians already in possession of a Practice Permit Letter (SIP = Surat Ijin Praktik) either within or outside of the hospital;
- i. to receive privacy and confidentiality on the disease being suffered including its medical data;
- j. to receive information covering diagnosis and procedure of medical treatment, purpose of medical treatment, courses of actions, risks and complications likely to occur, and prognosis on actions carried out as well as estimate of medication expenses;
- k. provision of approval or rejection on the action to be undertaken by medical workers on the disease being suffered;
- l. to be accompanied by family in a critical condition;
- m. to perform adopted religious or belief obligations on condition it does not disturb other patients;
- n. to receive security and safety during treatment in the hospital;
- o. to submit suggestions, proposals, improvements on treatment of the hospital on himself;
- p. to reject guidance on religious services not according to the religion or belief he adopts;
- q. to claim and/or litigate the hospital if the hospital is suspected as providing services not in accordance with good standard either in civil cases or criminal cases; and
- r. to complain on the services of the hospital that is not in accordance with services standard thru printed and electronic media according to provisions of legislations.

**CHAPTER IX**  
**PERFORMANCE**  
**Part One**  
**Organization**  
**Article 33**

- (1) Every hospital must have an effective, efficient, and accountable organization.
- (2) Organization of a hospital shall at a minimum consist of Head of Hospital or Hospital Director, medical services elements, treatment elements, medical support elements, medical committee, internal inspection units, and general administration and finance.

**Article 34**

- (1) The Head of Hospital shall be a medical officer having the capability and expertise in the aspects of hospital matters.

- (2) Structural workers in the position as management officials must be Indonesian citizens.
- (3) A hospital owner is not entitled to double as Head of Hospital.

#### Article 35

Guidance for the organization of hospitals is stipulated with a Presidential Regulation.

#### Part Two

##### Management of Clinic

#### Article 36

Every hospital shall perform a proper management of the hospital and clinics.

#### Article 37

- (1) Every medical action carried out in a hospital must receive approval of the patient or his family.
- (2) Provisions on approval for medical actions as meant in paragraph (1) shall be performed according to provisions of legislations.

#### Article 38

- (1) Every hospital must maintain medical confidentiality.
- (2) Medical confidentiality as meant in paragraph (1) may only be opened for the sake of a patient's health, to fulfill demands of law enforcement apparatus in the context of law enforcement, on the approval of the patient himself, or based on provisions of legislations.
- (3) Further provisions on medical confidentiality shall be regulated with a Regulation of the Minister.

#### Article 39

- (1) Audit shall be exercised on the operations of hospitals.

- (2) The audit meant in paragraph (1) can be in the form of performance audit and medical audit.
- (3) Performance audit and medical audit as meant in paragraph (2) can be performed internally and externally.
- (4) An external performance audit as meant in paragraph (3) may be performed by control officers.
- (5) The performance of medical audit shall be guided by provisions stipulated by the Minister.

#### Part Three

##### Accreditation

#### Article 40

- (1) In the efforts to improve the quality of hospital services, it is obligatory to exercise periodic accreditation a minimum of once in three (3) years.
- (2) Hospital accreditation as meant in paragraph (1) shall be carried out by an independent agency either domestically or from overseas based on the standard of applicable accreditation.
- (3) The independent agency meant in paragraph (2) shall be stipulated by the Minister.
- (4) Further provisions on hospital accreditation as meant in paragraph (1) and paragraph (2) shall be regulated with a Regulation of the Minister.

#### Part Four

##### Reference Net and System

#### Article 41

- (1) The Government and hospital associations shall establish nets in the context of the improvement of medical services.
- (2) The nets meant in paragraph (1) cover information, means and infrastructures, services, references, provision of equipments, and manpower education

#### Article 42

- (1) Reference system constitutes the performance of health to regulate inter-delegation of duties and responsibility both vertically and horizontally, as well as structurally and functionally on cases of diseases or diseases problems or health problems.
- (2) Every hospital has the obligation to refer patients requiring services beyond the capability of the hospital's service.
- (3) Further provisions on reference system as meant in paragraph (1) shall be regulated with a Regulation of the Minister.

#### Part Five

#### Safety of Patients

#### Article 43

- (1) Hospitals have the obligations to implement standards of patient safety.
- (2) Standards of patient safety as meant in paragraph (1) is performed thru the reporting of incidents, analysis, and stipulation of problem solving in the context of reducing the number of unexpected events.
- (3) Hospitals shall report the activities meant in paragraph (2) to the committee in charge of patient safety stipulated by the Minister.
- (4) Reporting of a patient safety incident as meant in paragraph (2) shall be made in an anonymous way and has the purpose of correcting the system in the context of improving the safety of patients.
- (5) Further provisions on the standard of patient safety as meant in paragraph (1) and paragraph (2) shall be regulated with a Regulation of the Minister.

#### Part Six

#### Hospital Legal Protection

#### Article 44

- (1) A hospital may reject to disclose to the public all information related with medical confidentiality.

- (2) A patient and/or family litigating a hospital and informing it to the public thru the mass media shall be deemed to have released his right of medical confidentiality.
- (3) The information to the mass media as meant in paragraph (2) provides an authority to the hospital to disclose medical confidentiality of the patient as a right to answer of the hospital.

#### Article 45

- (1) A hospital is not responsible legally if a patient and/or his family rejects or stops a medication that can cause death to the patient after a comprehensive medical explanation.
- (2) A hospital cannot be sued for the performance of duty in the context of saving human life.

#### Part Seven

#### Legal Responsibility

#### Article 46

Hospitals have a legal responsibility on all losses due to negligence of medical workers of the hospital.

#### Part Eight

#### Form

#### Article 47

- (1) A hospital can be in the form of static hospital, moving hospital, and field hospital.
- (2) Further provisions on terms and procedure on the performance of moving hospitals and field hospitals as meant in paragraph (1) shall be regulated with a Regulation of the Minister.

#### CHAPTER X

#### EXPENSES

#### Article 48

- (1) Expenses of a hospital can come from the income of the hospital, Government budget,

subsidy from the Government, Regional Government budget, subsidy from the Regional Government or other unbinding sources according to provisions of legislations.

- (2) Further provisions on subsidy or aid from the Government and Regional Government as meant in paragraph (1) shall be regulated with a Government Regulation.

#### Article 49

- (1) The Minister stipulates the national tariff pattern.
- (2) The national tariff pattern as meant in paragraph (1) is stipulated based on components of expense units and by observing the condition of the region.
- (3) The governor stipulates the maximum tariff ceiling based on the national tariff pattern meant in paragraph (1) applicable for hospitals in the related province.
- (4) Stipulation of the amount of hospital tariff shall be based on the national tariff pattern as meant in paragraph (1) and the maximum tariff ceiling as meant in paragraph (3).

#### Article 50

- (1) Tariff of class III hospitals managed by the Government is stipulated by the Minister.
- (2) Tariff of class III hospitals managed by the Regional Government is stipulated with a Regional Regulation.
- (3) Tariff of class III hospitals other than the hospitals meant in paragraph (1) and paragraph (2) is stipulated by the Head of Hospital by observing the tariff referred to in paragraph (2).

#### Article 51

All income of a public hospital managed by the Government and Regional Government shall be

used directly for hospital operational costs and shall not be accounted for as revenue for the State or the Regional Government.

### CHAPTER XI

#### RECORDING AND REPORTING

##### Article 52

- (1) Every hospital has the obligation to make recording and reporting on all activities on the performance of the hospital in the form of Hospital Management Information System.
- (2) Recording and reporting of epidemic diseases or certain diseases which can cause an epidemic, and drug and/or psycho-tropica dependant patients shall be carried out according to provisions of legislations.

##### Article 53

- (1) Hospitals have the obligation to carry out the storage of records and reports carried out for a certain period in accordance with provisions of legislations.
- (2) Destruction or write-off of recording and reporting of the files meant in paragraph (1) shall be performed according to provisions of legislations.

### CHAPTER XII

#### MANAGEMENT AND CONTROL

##### Part One

##### General

##### Article 54

- (1) The Government and Regional Government shall perform management and control on hospitals by involving profession organizations, associations of hospital matters, and other social organizations according to its duties and functions respectively.

- (2) The management and control referred to in paragraph (1) is directed to:
- fulfill requirements for medical services within the reach of the public;
  - improve the quality of medical services;
  - safety of patients;
  - develop the reach of services; and
  - improve independency capability of hospitals.
- (3) In the performance of duty on control, the Government and Regional Government assign control officers in accordance with their competence and expertise.
- (4) The control officers referred to in paragraph (3) shall exercise control that are technically medical and on hospital technicalities.
- (5) In the context of the management and control referred to in paragraph (1) and paragraph (2) the Government and Regional Government has the authority to take administrative actions in the form of:
- warning;
  - written warning; and/or
  - fine and revocation of permit.
- (6) Further provisions on the management and control referred to in paragraph (1) thru paragraph (5) shall be regulated with a Regulation of the Minister.

#### Article 55

- Management and control on hospital non-technical matters involving elements of the public can be carried out internally and externally.
- Internal management and control as meant in paragraph (1) shall be performed by the Hospital Supervisory Board.
- External management and control as meant in paragraph (1) shall be performed by Indonesia Hospital Control Committee.

#### Part Two Hospital Supervisory Board Article 56

- The hospital owner can establish a Hospital Supervisory Board.
- The Hospital Supervisory Board meant in paragraph (1) is a non-structural unit having an independent nature and is responsible to the hospital owner.
- Membership of Hospital Supervisory Board consists of the following elements: hospital owner, profession organization, association of hospital matters, and public prominent figures.
- Membership of Hospital Supervisory Board is a maximum of five (5) persons consisting of one (1) Chairman doubling as member and four (4) persons as members.
- The Hospital Supervisory Board referred to in paragraph (1) has the following duties :
  - determine the direction of the hospital policy;
  - approve and control the performance of strategic plan;
  - evaluate and approve the performance of budget plan;
  - control the performance of quality control and funding control;
  - control and maintain the rights and obligations of patients;
  - control and maintain the rights and obligations of the hospital; and
  - control compliance on the implementation of hospital ethics, profession ethics, and legislations;
- Further provisions on Hospital Supervisory Board shall be regulated with a Regulation of the Minister

#### Part Three Indonesia Hospital Control Committee Article 57

- The management and control referred to in Article 54 paragraph (1) and paragraph (2) is

exercised by Indonesia Hospital Control Committee stipulated by the Minister.

- (2) Indonesia Hospital Control Committee is responsible to the Minister.
- (3) Indonesia Hospital Control Committee is a non-structural unit within the Ministry having the responsibility in the aspects of health and in the performance of duty is independent in nature.
- (4) Membership of Indonesia Hospital Control Committee is a maximum of five (5) persons consisting of one (1) Chairman doubling as member and four (4) persons as members.
- (5) Membership of Indonesia Hospital Control Committee consists of government elements, profession organization, association of hospital matters, and public prominent figures.
- (6) In the performance of its duties, Indonesia Hospital Control Committee is assisted by a secretariat lead by a secretary.
- (7) Funding for the performance of duties of Indonesia Hospital Control Committee is borne on the State Revenue and Expenditure Budget.

#### Article 58

Indonesia Hospital Control Committee has duties to:

- a. compile guidance on the control of hospital to be used by Province Hospital Control Committees;
- b. establish a reporting system and information system constituting a net of Indonesia Hospital Control Committee and Province Hospital Control Committees; and
- c. perform analysis on results of control, and to provide recommendation to the Government and Regional Governments to be used as management substances.

#### Article 59

- (1) A Hospital Control Committee can be established at province level by the governor and responsible to the governor.

- (2) Province Hospital Control Committee is a non-structural unit of the Province Health Service and in the performance of duty is independent in nature.

- (3) Membership of Province Hospital Control Committee consists of government elements, profession organizations, associations of hospital matters, and prominent figures of the public.

- (4) Membership of Province Hospital Control Committee is a maximum of five (5) persons consisting of one (1) Chairman doubling as member and four (4) persons as members.

- (5) Funding for the performance of duties of Province Hospital Control Committee is borne on the Region Revenue and Expenditure Budget.

#### Article 60

Province Hospital Control Committee as meant in Article 59 paragraph (1) has the following duties:

- a. control and maintain the rights and obligations of patients in its area;
- b. control and maintain the rights and obligations of hospitals in its area;
- c. control the implementation of hospital ethics, profession ethics, and legislations;
- d. perform reporting on results of control to Indonesia Hospital Control Committee;
- e. perform analysis on results of control and to provide recommendation to the regional Government to be used as management substance; and
- f. receive complaints and take efforts in the resolution of conflicts thru mediation.

#### Article 61

Further provisions on Indonesia Hospital Control Committee and Province Hospital Control Committee shall be regulated with a Government Regulation.

**CHAPTER XIII  
PROVISIONS OF SENTENCES**

**Article 62**

Any person who intentionally establish a hospital without having the permit meant in Article 25 paragraph (1) shall be sentenced with imprisonment for a maximum of two (2) years and fine as of a maximum of Rp 5,000,000,000.00- (five billion rupiah).

**Article 63**

- (1) In the event the criminal action referred to in Article 62 was committed by a corporation, besides the imprisonment and fine sentence imposed on its management, a sentence can be imposed on the corporation in the form of fine three (3) times the sentence on fine referred to in Article 62.
- (2) Other than the sentence on fine as meant in paragraph (1), the corporation can be imposed with additional sentence in the form of:
- a. revocation of business permit; and/or
  - b. revocation of the status of legal entity.

**CHAPTER XIV  
TRANSITIONAL PROVISIONS**

**Article 64**

- (1) When this Law comes to effect, all existing hospitals shall conform to provisions applicable in this Law within a maximum of two (2) years after the enactment of this Law.
- (2) When this Law comes to effect, existing permits for the operations of hospitals shall still be effective until its expiry date.

**CHAPTER XV  
CLOSING PROVISIONS**

**Article 65**

When this Law commences to come to effect, all legislations regulating hospitals shall still be

in effect on condition it is not contradictory to or not yet replaced based on this Law.

**Article 66**

This Law commences to come to effect from the date of enactment.

For public cognizance, this Law shall be announced in the State Gazette of the Republic of Indonesia.

Legalized in Jakarta

on October 28, 2009

PRESIDENT OF THE REPUBLIC OF INDONESIA,

sgd.

DR. H. SUSILO BAMBANG YUDHOYONO

Enacted in Jakarta

on October 28, 2009

MINISTER OF LAW AND HUMAN RIGHTS

OF THE REPUBLIC OF INDONESIA,

sgd.

PATRIALIS AKBAR

STATE GAZETTE OF THE REPUBLIC OF INDONESIA

YEAR 2009 NO. 153

ELUCIDATION OF

LAW OF THE REPUBLIC OF INDONESIA

NO. 44 YEAR 2009

ON HOSPITAL

**I. GENERAL**

The aspiration of the Indonesian nation set forth in the opening of the 1945 State Constitution of the Republic of Indonesia is to protect the whole Indonesian nation and the whole Indonesian country and to promote prosperity for the public, to develop the intellectual mentality of the life of the nation, and to participate in a



world order based on freedom, eternal peace, and social justice. As one of the elements of public prosperity, health shall be materialized through various health efforts in the context of an overall and integrated health building supported by a national health system.

In line with the message of Article 28 H paragraph (1) of the 1945 State Constitution of the Republic of Indonesia, it is expressed that all persons has the right to receive medical services, and in Article 34 paragraph (3) it is stated that the State is responsible for the provision of feasible medical facility services and public facility services.

As one of medical facility services, hospitals constitute a part of health resources much required to support the performance of health efforts. The performance of medical services in a hospital has a very complex characteristics and organization. Various types of medical workers with their respective know-how in medical aspects interact with each other. Science and technology in medical aspects developing very fast must be followed by medical workers in the context of rendering high quality services, making problems even more complex in hospitals.

Basically, a hospital functions as a place for recovery from diseases and health recovery, and such functions has a sense of responsibility which indeed shall be the responsibility of the government in the improvement of the level of public prosperity.

From the aspect of costs, hospitals require great operational and investment costs in the performance of its activities, hence it is required to be supported with the availability of sufficient continuous fund. In anticipation of the impacts of globalization, it is required to be supported by sufficient legislations.

Currently, legislations used as basis for the performance of hospitals are still at the level of Minister Regulations; not in accordance any more with requirements. In the context of providing legal certainty and protection to improve, orient and provide basis for the management of hospitals, a legal accessory is required to comprehensively regulate hospitals in the form of Law.

## II. ARTICLE BY ARTICLE

### Article 1

Self-explanatory.

### Article 2

What is meant by "humanity value" is that the performance of hospitals shall be carried out to provide a proper and human treatment without differentiating the tribe, nationality, religion, social status, and race.

What is meant by "ethics and professionalism value" is that the performance of hospitals shall be carried out by medical workers possessing profession ethics and professional attitudes, and in compliance with hospital ethics.

What is meant by "benefit value" is that the performance of hospitals shall provide benefit to the largest extent for humanity in the context of maintaining and improving health level of the public.

What is meant by "justice value" is that the performance of hospitals must be able to provide high quality services that are just and equal to everybody at costs within the reach of the public.

What is meant by "value of equality of right and anti-discrimination" is that the performance of hospitals shall not differentiate the public either individually or groups of all layers.

What is meant by "value of even distribution" is that the performance of hospitals must be able to reach all layers of the public.

What is meant by "patient protection and safety value" is that the performance of a hospital does not only provide medical services, but shall also be able to provide the improvement of health level by still paying due attention on the protection and safety of patients.

What is meant by "patient safety value" is that the performance of hospitals shall always strive for the enhancement of patient safety thru risk management efforts of clinics.

What is meant by "hospital social functions" is the portion of responsibility attached to every hospital, being a moral and ethical binding of hospitals to help patient particularly those who are incapable to meet medical service requirements.

#### Article 3

##### Letter a

Self-explanatory.

##### Letter b

What is meant by patient safety is a process in a hospital providing a safer service to patients. Included there-in are risk assessment, identification, and risk management on patients, reporting and analysis of incidents, capability to study and to follow-up an incident, and implementing a solution to reduce and minimize the occurrence of risks.

What is meant by human resources in a hospital is all people working in a hospital both medical workers and non-medical workers.

##### Letter c and Letter d

Self-explanatory.

#### Article 4

What is meant by individual medical service is all activities on medical services given by medical workers to maintain and to improve health, prevent and cure diseases, and recovery of health.

#### Article 5

##### Letter a

Self-explanatory.

##### Letter b

What is meant by level two comprehensive medical services is an advanced level effort for individual medical services through the utilization of specialist science and technology in the aspect of health.

What is meant by level three comprehensive medical services is an advance level effort for individual medical services through the utilization of sub-specialists science and technology in the aspect of health.

##### Letter c

Self-explanatory.

##### Letter d

Filtering of technology is purported in the context of protection of the security and safety of patients.

#### Article 6

##### Paragraph (1)

##### Letter a

The provision of a hospital is based on the calculation of the ratio of beds and the number of citizens.

##### Letter b thru Letter f

Self-explanatory.

**Letter g**

Information covers the amount and type of services, product of services, availability of beds, manpower, and tariff.

**Letter h**

What is meant by disaster is an event occurring suddenly / not planned or slowly but continuously inflicting impacts on the normal living pattern or damages to the ecosystem, hence requiring an emergency and extraordinary action to help and asve victims i.e. man and his environment.

What is meant by Extraordinary Event is the occurrence or increase of sickness/death which epidemiologically is significant in an area within a certain time, and constitutes a condition directing to a plague.

**Letter i**

Self-explanatory.

**Letter j**

What is meant by having a high technology and value is future technology and new technology having a large benefit aspect on medical services.

**Paragraph (2)**

Self-explanatory.

**Article 7****Paragraph (1) thru Paragraph (3)**

Self-explanatory.

**Paragraph (4)**

Business activities moving only in the aspect of hospital matters is meant to protect hospital business so as to be prevented from risks due to other business activities lain owned by the legal entity of the hospital owner.

**Article 8****Paragraph (1)**

Study on requirements for the establishment of hospitals covers study on requirements for hospital services, study on requirements for means, infrastructures, equipments, fund and manpower required for provided services, and study on funding capability.

A hospital feasibility study is a hospital planning activity physically and non-physically so that the hospital functions at an optimum within a certain period.

**Paragraph (2)**

Self-explanatory.

**Paragraph (3)**

What is meant by location and spatial layout is that if in an area there had been a hospital, then the establishment of a new hospital shall not be a priority, including in the event of the extension of an area.

**Paragraph (4)**

Self-explanatory.

**Article 9****Letter a**

Hospital buildings are physical forms that are products of construction works united with its position location, a part of or totally on and/or within the land functioning as a place to perform service activities.

**Letter b**

Technical requirements of buildings for the handicapped, children and senior citizens have its own characteristics.

**Article 10**

Self-explanatory.

**Article 11****Paragraph (1)****Letter a**

Self-explanatory.

**Letter b**

Including replacement power source or generator.

**Letter c and Letter d**

Self-explanatory.

**Letter e**

Management of waste in hospitals covers the management of solid, liquid, gaseous wastes that are infectious in nature, chemicals that are toxic and a part are radioactive in nature, processed separately.

**Letter f thru Letter j**

Self-explanatory.

**Paragraph (2) thru Paragraph (6)**

Self-explanatory.

**Article 12****Paragraph (1)**

What is meant by permanent workers are workers working full time

What is meant by non-medical workers are among others administrative workers, cleaning service workers, and security manpower.

**Paragraph (2) and Paragraph (3)**

Self-explanatory.

**Paragraph (4)**

What is meant by capability covers funding capability and the services of a hospital.

**Article 13****Paragraph (1)**

Self-explanatory.

**Paragraph (2)**

What is meant by certain medical workers are nurses, midwives, dentists, pharmacists, pharmacy assistants, physiotherapist, optician, verbal therapist, radiography, and occupation therapists.

What is meant by permit is work permit or practice permit for the medical worker.

**Paragraph (3)**

What is meant by standard of profession is capacity covering knowledge, skill, and professional attitude which at a minimum must be held by an individual so that he can be able to independently perform his profession compiled by the profession organization.

What is meant by hospital service standard is the guideline that must be followed in the operations of a hospital among others Operational Procedure Standard, standard of medical services, and standard of nursing treatment.

What is meant by the standard of operational procedure is a set of instructions/steps standardized to complete a certain routine work process. The standard of operational procedures to provide the correct and best steps is based on a joint consensus to perform various services activities and functions compiled by medical service means based on the standard of profession.

What is meant by profession ethics is the code of ethics compiled by the association or league of profession.

**Paragraph (4)**

Self-explanatory.

**Article 14.....**

( To be continued )

—==( D )==—

**HOSPITAL**

(RI Law No. 44 Year 2009, dated October 28, 2009)

[Continued from Business News No. 7997-7998 pages 13A-32A]

**Article 14****Self-explanatory.****Article 15****Paragraph (1)**

Pharmacy supplies are medicines, drug substances, traditional medicines, and cosmetics.

Health equipments are substances, instruments, apparatus, machines, and implants not containing drugs used to prevent, diagnose, cure diseases and relieve pain, treat sick persons and to recover the health of persons and/or to form the structure and repair body function.

**Paragraph (2)****Self-explanatory.****Paragraph (3)**

What is meant by "pharmacy installation" is a part of a hospital having the duty to perform, coordinate, to regulate and control all activities of pharmacy services as well as exercising the management of pharmacy technical matters in a hospital.

What is meant by one door system is that a hospital shall have only one pharmacy policy including the stipulation of procurement formula, distribution of health equipments, pharmacy supplies, and consumables with the purpose of prioritizing the sake of patients.

**Paragraph (4)****Information on price of medicines (pharmacy**

supply) must be transparent or set forth in a book on price list accessible by patients.

**Paragraph (5)****Self-explanatory.****Article 16****Paragraph (1)**

Medical equipments are equipments used for requirements of medical diagnosis, therapy, rehabilitation and research both directly and indirectly.

Non-medical equipments are equipments used to support medical treatment requirements.

Standard of medical equipments shall be conformed to the standard following the standard of medical equipment industries.

**Paragraph (2)**

What is meant by testing is the overall actions covering physical inspection and measurement to compare the measured equipment with standard, or to determine the dimension or the fault of measurement.

What is meant by calibration is a calibrating activity to determine the correctness of a value shown by a measuring device and/or measuring substance.

**Paragraph (3) thru Paragraph (7)****Self-explanatory.****Article 17 and Article 18****Self-explanatory.**

**Article 19****Paragraph (1) and Paragraph (2)**

Self-explanatory.

**Paragraph (3)**

What is meant by other specialties is the type of hospital service according to the development of science in medical aspects.

**Article 20****Paragraph (1)**

Self-explanatory.

**Paragraph (2)**

In this paragraph what is meant by non-profit legal entity is a legal entity where the remains of business proceeds are not divided to the owner, but used for the improvement of services, i.e. among others Foundation, Association and Public Company.

**Paragraph (3)**

What is meant by the Government is the Central Government including TNI and POLRI.

**Paragraph (4)**

Self-explanatory.

**Article 21 thru Article 23**

Self-explanatory.

**Article 24****Paragraph (1)**

Self-explanatory.

**Paragraph (2)**

Public Hospital Class A is a public hospital

having medical facilities and service capability in a minimum of four (4) basic specialists, five (5) medical support specialists, 12 (twelve) other specialists and 13 (thirteen) sub-specialists.

Public Hospital Class B is a public hospital having medical facilities and service capability in a minimum of four (4) basic specialists, four (4) medical support specialists, eight (8) other specialists and two (2) basic sub-specialists.

Public Hospital Class C is a public hospital having medical facilities and service capability in a minimum of four (4) basic specialists and four (4) medical support specialists.

Public Hospital Class D is a public hospital having medical facilities and service capability in a minimum of two (2) basic specialists.

**Paragraph (3)**

Particular Hospital class A is a particular hospital having facilities and capability to provide at least medical specialist services and medical sub-specialist services in accordance with a complete specialty.

Particular Hospital class B is a particular hospital having facilities and capability to provide at least medical specialist services and medical sub-specialist services in accordance with a limited specialty

Particular Hospital class C is a particular hospital having facilities and capability to provide at least medical specialist services and medical sub-specialist services in accordance with the minimum specialty.

**Paragraph (4)**

Self-explanatory.

**Article 25****Paragraph (1)**

Self-explanatory.

**Paragraph (2)**

What is meant by construction permit is a permit provided to erect a hospital after meeting requirements for the establishment

What is meant by operational permit is a permit provided for the performance of medical services after meeting the stipulated requirements and standard.

**Paragraph (3) thru Paragraph (5)**

Self-explanatory.

**Article 26 thru Article 28**

Self-explanatory.

**Article 29****Paragraph (1)****Letter a**

Self-explanatory.

**Letter b**

What is meant by standard of hospital services are all standard of services applicable in a hospital, among others Operational Procedure Standard, medical service standard, nursing treatment standard.

**Letter c and Letter d**

Self-explanatory.

**Letter e**

What is meant by "incapable or poor patient" is a patient meeting requirements regulated by provisions of legislations.

**Letter f and Letter g**

Self-explanatory.

**Letter h**

What is meant by the performance of medical records in this paragraph is performance carried out according to the standard where-in efforts shall be taken gradually to achieve an international standard.

**Letter i thru Letter n**

Self-explanatory.

**Letter o**

A hospital is constructed and equipped with means, infrastructures and equipments that can be functioned and maintained as such to achieve security, prevent fire / disasters through the assurance of security, health and safety of patients, officers/workers, visitors, and environment of the hospital.

**Letter p**

Self-explanatory

**Letter r**

What is meant by hospital internal regulation (Hospital by laws) is the regulations of the hospital organization (corporate by laws) and regulations of the hospital medical staff (medical staff by law) compiled in the context of exercising good corporate governance and good clinical governance. Regulations of hospital medical staff (medical staff by law) regulate among others clinical authority (Clinical Privilege).

**Letter s and Letter t**

Self-explanatory.

**Paragraph (2) and Paragraph (3)****Self-explanatory.****Article 30****Self-explanatory.****Article 31****Paragraph (1)**

Obligations of patients meant in this paragraph among others are to comply with provisions applicable in the hospital, to provide compensation for services received in the hospital according to prevailing provisions, to give complete and honest information on his health problem to medical officers in the hospital, and to comply with agreements with the hospital.

**Paragraph (2)****Self-explanatory.****Article 32****Letter a thru Letter j****Self-explanatory.****Letter k**

What is meant by provision of approval or rejection on a medical or dentist action can be on the whole action to be performed or on a certain approved action.

**Letter l thru Letter r****Self-explanatory.****Article 33****Paragraph (1)**

Organization of a hospital is arranged with the purpose of achieving the vision and mission of

the hospital by exercising Good Corporate Governance and Good Clinical Governance.

**Paragraph (2)****Self-explanatory.****Article 34****Paragraph (1)****Self-explanatory.****Paragraph (2)**

Management personnel that must be Indonesian citizens are the Chief Executive Officer, Medical and Nursery Director, and Human Resources Director.

**Paragraph (3)**

What is meant by hospital owners are among others corporate commissioners, establishing party, or the regional government.

What is meant by Head of Hospital is the top management with the title of Chief Executive Officer including the Medical Director.

**Article 35****Self-explanatory.****Article 36**

Good hospital governance is the implementation of the functions of hospital management based on the principles of transparency, accountability, independency and responsibility, equivalence and genuineness.

Good clinical governance is the implementation of the functions of clinic management covering clinical leadership, clinical audit, clinical data, clinical risks based on evidences, improvement of



performance, management of complaints, mechanism of monitoring products of services, development of professionalism, and hospital accreditation.

#### **Article 37**

##### **Paragraph (1)**

Every medical action must receive an approval from the patient except for a dumb patient or in an emergency. The approval shall be given orally or in writing. An approval in writing is given only for high risk medical actions.

##### **Paragraph (2)**

**Self-explanatory.**

#### **Article 38**

##### **Paragraph (1)**

What is meant by "medical confidentiality" is everything related with matters found by a physician and dentist in the context of medication, and recorded in medical records of a patient having a confidential nature.

##### **Paragraph (2) and Paragraph (3)**

**Self-explanatory.**

#### **Article 39**

##### **Paragraph (1)**

**Self-explanatory.**

##### **Paragraph (2)**

Audit on performance is a periodic measurement of performance covering services performance and financial performance.

Medical audit is an evaluation effort performed professionally on the quality of medical services provided to patients by using medical records managed by medical profession.

##### **Paragraph (3)**

Internal medical audit is performed by the Hospital Medical Committee; audit on internal performance is performed by the Internal Inspection Unit.

##### **Paragraph (4) and Paragraph (5)**

**Self-explanatory.**

#### **Article 40 thru Article 42**

**Self-explanatory.**

#### **Article 43**

##### **Paragraph (1)**

What is meant by patient safety is a process in a hospital to provide safer services to patients. Included there-in are the assessment, identification and management of risk on a patient, reporting and analysis of incidents, capability to study and to follow-up incidents, and to implement solutions to reduce and minimize the occurrence of risks.

**Paragraph (2)**

What is meant by patient safety incident is a medical error, adverse event, and near miss.

**Paragraph (3) thru Paragraph (5)**

Self-explanatory.

**Article 44**

Self-explanatory.

**Article 45****Paragraph (1)**

A patient has the right to reject or to stop a medication.

A patient who rejects medication for financial reasons must be provided with an explanation that the patient has the right to receive medical support from the Government.

**Paragraph (2)**

Self-explanatory.

**Article 46 thru Article 48**

Self-explanatory.

**Article 49****Paragraph (1)**

National Tariff Pattern is a basic guidance applicable nation wide in the regulating and calculation of the amount of hospital tariff based on unit cost components.

**Paragraph (2)**

What is meant by "unit cost" is the product of the calculation of total operational expenses of services provided by a hospital.

Regional condition includes the local price index.

**Paragraph (3) and Paragraph (4)**

Self-explanatory.

**Article 50 thru Article 53**

Self-explanatory.

**Article 54****Paragraph (1) thru Paragraph (3)**

Self-explanatory.

**Paragraph (4)**

Medical technical control is a medical audit.

Hospital technical control is audit on the performance of a hospital.

**Paragraph (5) and Paragraph (6)**

Self-explanatory.

**Article 55 thru Article 66**

Self-explanatory.

SUPPLEMENT TO STATE GAZETTE OF  
THE REPUBLIC OF INDONESIA NO. 5072

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