

Implementation of Legal Protection for People with Mental Disorders at B. Saanin Mental Hospital Padang City

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ABSTRACT

Patients with mental disorders (ODGJ) who are registered under the Health Social Security Administration Agency (BPJS) frequently experience disparities in the services provided by psychiatric hospitals. This occurs despite the guarantees set forth in Article 28H paragraph (1) of the 1945 Constitution and Law No. 17 of 2023 on Health, which ensure every individual's right to obtain adequate and equal healthcare services. This research is intended to examine the legal protection afforded to ODGJ patients who utilize BPJS Kesehatan at Prof. HB Saanin Psychiatric Hospital Padang, to identify the challenges encountered in service delivery, and to analyze the hospital's efforts in promoting fair and humane treatment. The study applies a sociological juridical approach, with data gathered through interviews and documentation. The results show that legal protection has been carried out through preventive, repressive, promotive, curative, and rehabilitative efforts. However, several obstacles remain, including differences in interpretation between the hospital and BPJS, delays in claim processing, and limited public awareness regarding the rights of BPJS participants.

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INTRODUCTION

Mental health is a vital aspect of human well-being that includes psychological, social, and emotional dimensions, all of which significantly influence a person's quality of life. As society evolves, mental health issues have become more visible and demand greater attention from both healthcare systems and the wider community. A range of factors—such as stress, traumatic experiences, environmental influences, and genetic predispositions—can trigger mental health conditions. Therefore, ensuring the right to health, as enshrined in the 1945 Constitution of the Republic of Indonesia, is increasingly crucial, particularly for vulnerable groups like individuals with mental disorders (ODGJ). In everyday life, maintaining good mental health is essential, as it supports overall well-being and enables individuals to function effectively in their daily activities. Mental health is inseparable from general health and must be viewed as an integral component of it. With the advancement of modern society, mental disorders have become a growing concern within the healthcare sector and are more widely recognized by the public. These conditions often arise from a combination of factors, including life pressures, traumatic events, environmental conditions, and genetic influences. Today, health is considered a fundamental necessity. Every individual aspires to live in good health so they can carry out their activities as planned. Health is not only a basic social right—commonly referred to as the right to health care—but also an individual right related to self-determination. Moreover, it represents a key element of societal welfare that must be realized in line with the ideals of the Indonesian nation, as reflected in Pancasila and the 1945 Constitution (Basuki, 2020)..

According to Article 1 point (57) of Government Regulation of the Republic of Indonesia Number 28 of 2024, which serves as the implementing regulation of Law Number 17 of 2023 on Health, individuals with mental disorders (ODGJ) are defined as those experiencing disturbances in thinking, behavior, and emotional regulation (Harefa, 2024). These conditions are reflected through a range of symptoms and/or notable behavioral changes that may lead to distress and impair a person's ability to function effectively. Such conditions are classified as mental disorders when they meet established diagnostic criteria. In light of this, it is essential for both individuals and society as a whole to prioritize the maintenance of mental health, as good mental well-being supports healthy social interactions, enhances productivity, and contributes to an overall improved quality of life.

The need for legal protection for ODGJ is increasingly evident, considering that they are among the most vulnerable groups to stigma, discrimination, and limited access to healthcare services. Government Regulation No. 28 of 2024 characterizes ODGJ as individuals experiencing disruptions in their thinking, behavior, and emotional stability, which substantially interfere with their ability to function in daily life and therefore require appropriate medical care. Through the implementation of BPJS Kesehatan as part of the National Social Security System, the government aims to guarantee that every citizen—including those with mental health conditions—has equal access to healthcare services, regardless of their social or economic status.

Despite the existence of clear regulations, a disconnect between legal provisions and their implementation in practice still persists. Although the law formally ensures equal treatment for every patient, many BPJS participants—including individuals with mental disorders (ODGJ)—continue to experience forms of discrimination within healthcare services. These often manifest in brief or less

thorough medical examinations, limited attention from healthcare providers, and inconsistencies in service quality when compared to non-BPJS patients. Additionally, the stigma attached to mental illness further deepens this inequality, leading to the marginalization of ODGJ patients and restricting their access to proper care and legal protection. This situation reflects that the enforcement of legal protections for ODGJ has yet to be fully effective in real-world practice.

The Social Security Administration Agency is defined in Article 1 of Law of the Republic of Indonesia Number 24 of 2011, commonly referred to as the BPJS Law. According to this provision, BPJS is a legal entity established to manage social security programs (Afifah & Paruntu, 2015). The law distinguishes two forms of BPJS, namely BPJS Kesehatan and BPJS Employment. Currently, BPJS Kesehatan plays a crucial and strategic role in implementing the national social security system, particularly in the health sector. It has contributed to reforming the health financing system, which was previously dominated by out-of-pocket payments, into a more structured system based on social health insurance principles. As part of the government's commitment to improving public health services, the National Health Insurance Program (JKN) was introduced under the BPJS Law. This program is designed to provide protection, especially for lower-income communities that often face difficulties in accessing healthcare. Its main objective is to ensure that all citizens, without exception, can obtain equal access to health services and insurance coverage. Healthcare services under this system are delivered through facilities that are officially appointed or partnered with BPJS Kesehatan, including both primary healthcare providers and advanced facilities such as public and specialized hospitals, whether operated by the government or private sector.

Problems related to service quality are among the most common complaints raised by patients, particularly those enrolled in BPJS Kesehatan. Many of these patients feel dissatisfied, as they perceive the level of care they receive to be inferior to that provided to non-BPJS patients. Common concerns include rushed examinations and inattentive treatment, which fall short of the expected standards of care. In principle, every individual is entitled to proper healthcare services, whether it involves intensive treatment or high-cost procedures, without regard to their socioeconomic background. Accordingly, all BPJS Kesehatan participants seeking treatment at healthcare facilities should be guaranteed access to quality and appropriate medical services in line with existing legal regulations.

According to Satjipto Rahardjo, legal protection is providing protection for human rights that are harmed by others and that protection is given to the community so that they can enjoy all the rights granted by the law (Rahardjo, 2009). Meanwhile, according to C.S.T. Kansil, legal protection is a variety of legal remedies that must be provided by law enforcement officials to provide a sense of security, both mentally and physically from disturbances and various threats from any party (Lusia & Kansil, 2021).

Although the Indonesian government has issued numerous regulations governing the rights of patients with mental disorders who utilize BPJS Kesehatan services, discrepancies between these legal provisions and their implementation in practice are still frequently found. In principle, all patients should receive equal treatment, regardless of whether they are BPJS Kesehatan participants or non-BPJS patients. In addition, they are entitled to legal protection, including within the framework of health insurance. However, various challenges persist in realizing these rights, particularly for individuals with mental disorders who often face stigma and unequal treatment in society. As a result, they tend to be marginalized and inadequately cared for, which hinders their access to proper healthcare services and legal safeguards.

Against this backdrop, this study seeks to analyze the forms of legal protection afforded to patients with mental disorders who use BPJS Kesehatan at Prof. HB Saanin Psychiatric Hospital in Padang. It also aims to identify the obstacles encountered in the provision of services and to examine the efforts made by the hospital to ensure care that is fair, appropriate, and humane. This research is important because a deeper understanding of patient rights—especially for individuals with mental disorders—can help enhance service quality, reduce discriminatory practices, and support the realization of the right to health for all citizens without exception.

Furthermore, strengthening awareness of patient rights is essential, particularly in relation to legal protection for patients with mental disorders who rely on BPJS Kesehatan. This is closely linked to efforts to improve their overall quality of life. All participants, including those with mental disorders, fall under the responsibility of BPJS Kesehatan to receive proper, adequate, and high-quality healthcare services. This encompasses both treatment and rehabilitation, delivered without discrimination. Therefore, increasing legal awareness among both patients and healthcare providers is crucial to ensure that these rights are effectively upheld.

THEORETICAL REVIEW

Legal Protection

According to Satjipto Rahardjo, legal protection refers to the safeguarding of human rights when they are infringed upon by others, ensuring that individuals are able to exercise their rights in a fair and just manner. This protection can take two forms: preventive measures, which aim to avoid violations, and repressive measures, which address violations after they occur (Rahardjo, 2006). In the realm of healthcare services, legal protection is intended to guarantee that patients' rights, as consumers of medical services, are properly fulfilled. Law Number 8 of 1999 on Consumer Protection (UUPK) establishes the legal framework that ensures patients obtain certainty, safety, and comfort when accessing healthcare. Furthermore, patients are entitled to receive high-quality services that meet professional medical standards and are delivered without any form of discrimination (Salami et al., 2013).

Definition and Legal Basis of ODGJ

Article 1 Number (57) of Government Regulation of the Republic of Indonesia Number 1 of 2024 concerning the Implementation of Law Number 17 of 2023 concerning Health states that ODGJ is a person who experiences severe

Disruptions in thinking, behavior, and emotional regulation are reflected in a set of notable symptoms and/or behavioral changes that may lead to distress and reduced functional ability. When these conditions meet established diagnostic standards, they are identified as a mental disorder (Harefa, 2024).

Rights of ODGJ

The rights of people with mental disorders (ODGJ) are further regulated in Article 148 of Government Regulation of the Republic of Indonesia Number 28 of 2024 (Padilah et al., 2024), as outlined below :

- a) Receiving mental health services at healthcare facilities that are accessible, provide safe and comfortable transportation, and comply with established mental health service standards;
- b) Being assured of the availability of medications in accordance with medical needs, including psychotropic drugs when indicated;
- c) Giving consent to medical treatment, except in cases involving individuals with severe mental disorders who are deemed incapable of making decisions, are unaccompanied, or are in emergency conditions;
- d) Receiving clear, honest, and comprehensive information regarding their mental health condition, including any examinations, procedures, or treatments that have been or will be carried out by qualified medical and mental health professionals;
- e) Being protected from all forms of neglect, abuse, exploitation, discrimination, and social stigma, as well as having the opportunity to participate in meaningful activities;
- f) Accessing social support services appropriate to the severity of their mental health condition; and
- g) Having their property managed or safeguarded, whether owned or entrusted to them, which may only be revoked through a court decision..

Causes of Mental Disorders

According to Santrock (2011), a psychiatrist, the factors contributing to mental disorders can be categorized into several types :

- a. Biological/Physical Factors
 - 1) Heredity (descendants)
 - 2) Physical condition
 - 3) Temperament
 - 4) Physical illnesses and injuries
- b. Psychological Factors

A person's attitudes, habits, and character are shaped by various experiences of frustration, failure, and success they go through. In addition, growing up with parents who are cold, indifferent, rigid, or harsh can create feelings of anxiety and pressure, which may lead to a personality that tends to reject and oppose its surrounding environment..

- c. Socio-Cultural Factors

Culture is technically an idea or behavior that can be seen or that is not seen. Cultural factors are not the direct cause that can cause mental disorders, usually limited to determining the "color" of the symptoms. In addition to influencing the growth and development of a person's personality, for example through the rules of habits that

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apply in that culture.

Social Security Administration Agency (BPJS) Kesehatan

BPJS Kesehatan is a public legal institution responsible for administering Indonesia's national health insurance program in accordance with Law No. 24 of 2011 (Yuditia et al., 2021). Its primary objective is to ensure health protection for the entire Indonesian population in a fair, equitable, and sustainable way. As participants, members of BPJS are entitled to obtain healthcare services that meet established standards, starting from primary healthcare facilities up to referral hospitals.

METHODOLOGY

This study adopts a sociological-juridical approach, which focuses on examining how positive law is applied within society and how it corresponds with real conditions in the field. This approach was selected because the research does not merely emphasize the legal norms governing the protection of ODGJ patients under BPJS Kesehatan, but also investigates the practical implementation of these norms at Prof. HB Psychiatric Hospital Saanin Padang.

Types and Characteristics of Research

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Research Location

This study was carried out at Prof. HB Saanin Padang Hospital, the primary referral facility in West Sumatra Province for the treatment of patients with mental disorders (ODGJ). The site was chosen because the hospital is affiliated with BPJS Kesehatan and has extensive experience in providing care for individuals with mental health conditions.

Types and Data Sources

The research data in this study are divided into two categories:

First, primary data were collected directly through interviews with informants, including hospital management, medical staff, BPJS administrative officers, and family members of patients with ODGJ. Second, secondary data consist of primary legal sources such as statutory regulations, including the 1945 Constitution of the Republic of Indonesia, Law No. 17 of 2023 on Health, Law No. 24 of 2011 on the Social Security Administering Body (BPJS), and Government Regulation No. 28 of 2024 concerning the Implementation of the Health Law. In addition, secondary legal materials include relevant books, scholarly journals, and previous research studies, while tertiary legal materials comprise legal dictionaries and legal encyclopedias.

Data Collection Techniques

The data collection technique is carried out through several stages (Jogiyanto Hartono, 2018):

1. Semi-structured interviews were conducted with selected informants to gather empirical data concerning the implementation of legal protection for ODGJ patients under BPJS Kesehatan.
2. The documentation study involved reviewing internal hospital records, including SOPs for ODGJ patient services, internal regulations, Hospital By-Laws, and reports on cooperation with BPJS Kesehatan.
3. Non-participant observation was carried out through direct observation of the hospital service system without any involvement in its operational activities..

Data Analysis Techniques

Data obtained from fieldwork and documentary sources are analyzed using a descriptive qualitative approach, which involves processing and interpreting the data to explain the relationship between applicable legal norms and their practical implementation in the field. The analysis is conducted through three main stages :

First, data reduction, which involves selecting and organizing relevant information in accordance with the research focus. Second, data presentation, where the data are arranged in narrative form and tables to make the relationships between variables easier to understand. Third, drawing conclusions, which synthesize the results of the analysis into research findings concerning the forms, constraints, and legal protection measures for ODGJ patients using BPJS at Prof. HB Psychiatric Hospital. Saanin Padang.

Data Validity

To ensure data validity, triangulation of sources and methods is applied by comparing findings from interviews, observations, and document analysis to produce accurate and consistent information. The validity is further reinforced through confirmation of interview results with the hospital and BPJS Kesehatan.

Legal Writing and Analysis Techniques

The analysis was conducted within the framework of health law and consumer protection, drawing on Satjipto Rahardjo's theory of legal protection and Aristotle's concept of distributive justice to assess how far legal fairness has been implemented for ODGJ patients covered by BPJS.

RESULTS

The study findings indicate that legal protection for patients with Persons with Mental Disorders (ODGJ) who are covered by BPJS Kesehatan at Prof. HB. Saanin Hospital in Padang is implemented through a range of policy strategies and practical actions in the field. These efforts encompass preventive, repressive, promotive, curative, and rehabilitative measures, which are carried out in an integrated manner involving collaboration between the hospital and relevant government agencies.

Form of Legal Protection for ODGJ Patients Using BPJS

Table 1. Forms of Legal Protection at Prof. HB. São Paulo São Paulo

Yes	Types of Protection	Form of Implementation	of Legal Basis	Executive
1	Preventive	Patient and family education, socialization of BPJS patient rights, preparation of SOPs for ODGJ services	Law No. 17 of 2023 concerning Health; Law No. 8 of 1999 concerning Consumer Protection	Hospital Services and Law Field
2	Repressive	Handling patient complaints and coordination with BPJS in the event of a claim dispute	BPJS Kesehatan Regulation No. 1 of 2021	Hospital Legal and Complaints Committee
3	Promotive & Curative	Psychiatric consultation, occupational therapy, inpatient and road treatment services without discrimination	Ministry of Health Hospital Accreditation Standards 2022	Psychiatrist & Medical Team
4	Rehabilitative	Psychosocial recovery and work skills programs for ODGJ patients	Government Regulation No. 28 of 2024 concerning Mental Health Services	Hospital Social Rehabilitation Unit

Source: Data from interviews with the legal and service department of Prof. HB. Saanin Padang, 2024.

Table 1 shows that the Prof. HB. Saanin Padang has implemented four types of legal protection comprehensively. Preventive and repressive protection indicate the existence of an internal legal system that functions to prevent and take action against violations of patients' rights, while promotive, curative, and rehabilitative protection emphasizes the restoration of patients' rights as equal legal subjects. The implementation of SOPs based on laws and regulations is proof of the hospital's commitment to the principle of equality in mental health services.

Data of ODGJ Patients Using BPJS Kesehatan

Table 2. The Number of ODGJ Patients Using BPJS at Prof. HB. Saanin Padang Year 2022–2024

Year	Number of ODGJ Patients	BPJS Patients	Non-BPJS Patients	Percentage BPJS (%)
2022	4.512	3.080	1.432	68,2%
2023	5.276	3.984	1.292	75,5%
2024*	4,139 (as of June)	3.210	929	77,6%

Source: Internal data of Prof. HB. Saanin Padang, 2024.

Table 2 illustrates a year-by-year upward trend in the number of ODGJ patients utilizing BPJS Kesehatan. The proportion of BPJS-covered patients rose from 68.2% in 2022 to 77.6% by mid-2024. This pattern reflects a growing dependence on the national health insurance system for accessing mental health services. Nevertheless, the rising patient numbers also place greater administrative demands on hospitals, particularly in relation to claims processing, document verification, and the overall efficiency of service delivery.

Obstacles Faced by Hospitals

Table 3. Obstacles in the Implementation of Legal Protection for ODGJ Patients Using BPJS

Types of Constraints	Impact	Countermeasures
Differences in perception between hospitals and BPJS	Pending claims, late payments	Regular coordination and document clarification meetings
Delay in patient administration	Delay in outpatient medical services	Digitization of patient administration systems
Social stigma against ODGJ	Discrimination in service	Professional empathy and ethics training for medical personnel

Low understanding of BPJS patients' rights	Patients do not dare to raise objections	Socialization of health law through educational media and leaflets
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Source: Interview with the Head of the Service and Legal Section of the Psychiatric Hospital, Prof. HB. Saanin Padang, 2024.

Table 3 identifies four primary challenges encountered by hospitals in delivering legal protection for ODGJ patients under BPJS Kesehatan. The most significant issue arises from differing interpretations between hospitals and BPJS regarding financing arrangements and the claims process. In addition, non-legal factors such as societal stigma and patients' limited legal awareness further intensify these difficulties. Nevertheless, hospitals' initiatives through legal training and outreach activities reflect progressive efforts to address and reduce these barriers.

Hospitals' Efforts in Realizing Fair and Humane Services

Table 4. Strategy and Program of Psychiatric Hospital Prof. HB. Saanin Padang in Improving Legal Protection

Yes	Program/Strategy	Purpose	Form of Implementation
1	Hospital By Laws and ODGJ SOP	Ensuring equality of service	Affirmation of administrative and medical procedures without discrimination
2	Cross-sector coordination	Solving financing constraints	Cooperation between BPJS, the Health Office, and the Social Service
3	Medical personnel training	Improving service ethics competence	Empathy workshops and training on ODGJ
4	Social rehabilitation programs	Restoring the patient's social function	Skills training and community activities

Source: Policy document of Prof. HB. Saanin Padang, 2024.

Table 4 illustrates the systematic strategy of Prof. HB. Saanin Padang in strengthening the legal protection of ODGJ patients using BPJS. The effort is not only medically oriented, but also includes a social and legal approach. The existence of cross-sector coordination and capacity building of medical personnel proves that hospitals are committed to implementing equitable services and focusing on restoring human dignity.

DISCUSSION

Implementation of Legal Protection for ODGJ Patients Using BPJS

The study findings indicate that the legal protection provided for patients with Persons with Mental Disorders (ODGJ) who are covered by BPJS Kesehatan at Prof. HB. Saanin Hospital in Padang has been implemented in a comprehensive manner, encompassing preventive, promotive, curative, rehabilitative, and repressive measures. This approach reflects Rahardjo's (2009) theory of legal protection, which emphasizes that law is not merely an instrument for imposing sanctions, but also serves as a mechanism for safeguarding human rights. In this regard, hospitals function as institutions that help enforce the law by ensuring patients receive humane and non-discriminatory healthcare services.

Preventive legal protection at Prof. HB. Saanin Padang is realized through patient rights education, dissemination of information, and the application of Standard Operating Procedures (SOPs) grounded in health regulations. This reflects the principle of due process of law, in which individuals are entitled to legal safeguards even before any violation occurs. Meanwhile, repressive protection is implemented through complaint-handling mechanisms and coordination with BPJS to address claim disputes. This is consistent with the findings of Rahmat & Lie (2024), which highlight that the effectiveness of legal protection in hospitals is strongly influenced by the clarity of administrative dispute resolution procedures between healthcare institutions and social security agencies.

The Relationship between the Increase in the Number of BPJS Patients and the Need to Strengthen Legal Aspects

The rise in the proportion of ODGJ patients covered by BPJS, from 68.2% in 2022 to 77.6% in 2024, indicates a strong level of public confidence in mental health insurance services. Nevertheless, this growth also brings consequences for hospital financing structures and administrative management. These findings are consistent with Banu (2022), who argues that an increase in BPJS membership without corresponding administrative reforms may lead to unequal service delivery and legal ambiguity in the claims process.

This situation further highlights the importance of coordination between hospitals and BPJS Kesehatan in clearly interpreting financing standards and ensuring the validity of claim documentation. Drawing on Roscoe Pound's Law in Action theory, law is not merely what is written in statutes, but must also function effectively within real social practice (Diva et al., 2025). In this study's context, the effectiveness of legal protection is determined by inter-institutional collaboration as well as improved legal understanding among healthcare workers and BPJS participants.

Obstacles to the Implementation of Legal Protection: Between Administrative and Social Aspects

The main obstacles found were differences in perception between hospitals and BPJS regarding financing, delays in claim verification, and low understanding of patients' rights. In addition, social factors such as stigma against ODGJ patients are also a major obstacle in the implementation of legal protection. Social stigma makes patients often perceived as "different" and not fully respected for their rights as legal subjects.

These findings support the study conducted by Sukardi et al. (2024), which highlights that challenges in implementing legal protection for BPJS Kesehatan patients are frequently linked to complex bureaucratic procedures and limited public awareness of legal rights. Similarly, Dewi et al. (2025) pointed out that BPJS patients often perceive unequal treatment as a result of complicated administrative requirements and insufficient access to information regarding their legal entitlements.

Accordingly, the obstacles identified at Prof. HB. Saanin Padang are not merely administrative in nature, but also reflect a broader gap between legal norms and their practical application in the field. This situation strengthens Kansil's (1979) perspective that law should function to ensure a sense of security, both physically and psychologically, particularly for vulnerable groups such as individuals with mental disorders.

Hospital Strategy in Strengthening Legal Protection Aspects

The strategy of Psychiatric Hospital Prof. HB. Saanin Padang in enhancing legal protection can be grouped into three key pillars: the strengthening of internal regulatory frameworks, the improvement of healthcare personnel competencies, and the reinforcement of intersectoral coordination. The development of Hospital By Laws along with standard operating procedures for ODGJ patients serves as essential internal legal instruments to ensure consistency in service delivery and to minimize the risk of discrimination against patients. These initiatives align with the findings of Mustofa & Aran (2025), which highlight the function of Hospital By Laws as a preventive legal safeguard against potential ethical breaches and malpractice in healthcare services.

Furthermore, providing training for medical staff on ODGJ-responsive services reflects the implementation of the Therapeutic Jurisprudence approach, which emphasizes the use of law as a tool to enhance individuals' psychological well-being (Naurah & Simarmata, 2024). This approach is particularly significant in the context of ODGJ patients, as legal protection extends beyond administrative entitlements to include the recognition of human dignity and the assurance of recovery free from stigma.

Legal Enforcement, Distributive Justice, and Implications for National Policy

The implementation of legal protection for ODGJ patients under BPJS Kesehatan at Prof. HB Saanin Hospital also embodies the broader concept of distributive justice, which concerns the fair and proportional allocation of rights, resources, and responsibilities within the healthcare system. In line with John Rawls' theory of distributive justice, fairness should give priority to vulnerable groups through equitable treatment rather than simply equal treatment. In this regard, the hospital's efforts—such as formulating specific SOPs for ODGJ patients, enhancing the training of specialized healthcare staff, and providing accessible complaint mechanisms—reflect a commitment to delivering additional support to individuals who are socially and psychologically vulnerable. This aligns with the principle that justice must consider the needs and limitations of each individual, especially those who experience structural disadvantages such as stigma, discrimination, and limited legal awareness.

Moreover, the implementation of legal protection mechanisms covering preventive, promotive, curative, and rehabilitative aspects demonstrates that the hospital has sought to strike a balance between equal access and equitable care. In practice, this means that ODGJ patients are not merely treated on the same basis as other BPJS participants, but are also given tailored interventions that respond to their specific

vulnerabilities. These approaches reflect the application of distributive justice in a practical setting, where resources and services are allocated according to levels of need and vulnerability rather than distributed uniformly. As also noted by (Saragih, 2023), distributive justice within healthcare institutions becomes evident when policies are designed with sensitivity to the socioeconomic and psychological limitations experienced by patient groups.

Beyond illustrating distributive justice, the findings of this study carry important strategic implications for the development of national policy, particularly in relation to the enhancement of BPJS Kesehatan services for ODGJ patients. First, the observed inconsistencies between hospitals and BPJS in claim verification processes indicate the need for a standardized national framework for mental health claims, as current procedures remain fragmented and subject to varying interpretations. This is in line with the recommendations of (Putri & Alamsyah, 2024), who highlight the importance of harmonizing mental health insurance regulations at the national level. Second, the presence of stigma and discriminatory practices in service delivery underscores the urgency for the Ministry of Health to establish a National Guideline for Non-Discriminatory Mental Health Services. Such a guideline could incorporate principles of Therapeutic Jurisprudence and require compulsory training for all healthcare workers, not only those in psychiatric facilities. This is further supported by (Naurah & Simarmata, 2024), whose research shows that stigma-reduction interventions significantly enhance clinical outcomes and patient satisfaction.

Third, the initiatives implemented by Prof. HB Saanin Hospital such as reinforcing Hospital By Laws, formulating ODGJ-specific SOPs, and establishing structured complaint handling systems may serve as exemplary models for nationwide adoption. These practices could be utilized by the Ministry of Health and BPJS Kesehatan as references for policy alignment across different regions. Accordingly, this study provides empirical support for the development of a comprehensive national legal protection framework for mental health patients, ensuring that vulnerable groups receive consistent service standards regardless of geographic location. Lastly, the findings offer a useful foundation for developing inter-sectoral policy collaboration involving BPJS Kesehatan, the Ministry of Health, local governments, and psychiatric hospitals. Such coordination is essential for strengthening health financing systems, minimizing administrative disputes, and improving legal awareness among healthcare providers and BPJS participants. By integrating these insights, policymakers can move toward a more equitable, transparent, and inclusive mental health insurance system.

CONCLUSIONS AND RECOMMENDATIONS

Legal protection for ODGJ patients using BPJS Kesehatan at Prof. HB. Saanin Padang is carried out through preventive, repressive, promotive, curative, and rehabilitative protection, guided by laws and regulations in the field of health and consumer protection. The obstacles faced include differences in perception between hospitals and BPJS Kesehatan, late claims, and low public awareness of the rights and obligations of BPJS participants. The hospital has made various

efforts such as internal policy formulation, service improvement, and cross-sector cooperation to provide equal and dignified services for ODGJ patients.

FURTHER STUDY

This study is still confined to examining legal protection for ODGJ patients who are BPJS beneficiaries at a single psychiatric facility, namely Prof. HB Saanin Psychiatric Hospital in Padang. Future research is expected to broaden the scope by including psychiatric hospitals in other regions, enabling comparative analysis of policy implementation as well as the effectiveness of legal protection across different areas. Furthermore, subsequent studies are encouraged to delve more deeply into the perspectives of patients, their families, and healthcare professionals in order to enrich the empirical understanding of the relationship between legal rights and the lived experiences of mental health services.

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