

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

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ARTICLE INFO

Keywords: Legal Protection, ODGJ, BPJS Kesehatan, Mental Hospital

Received : 30, October

Revised : 19, November

Accepted: 27, November

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ABSTRACT

Patients with mental disorders (ODGJ) who use the Health Social Security Administration Agency (BPJS) often receive unequal treatment in mental hospital services, even though Article 28H paragraph (1) of the 1945 Constitution and Law No. 17 of 2023 on Health guarantee equal access to proper health services for all. This study aims to analyze the legal protection for ODGJ patients using BPJS Kesehatan at Prof. HB Saanin Psychiatric Hospital Padang, identify obstacles in service delivery, and examine the hospital's efforts to ensure fair and humane treatment. Using a sociological juridical method, data were collected through interviews and documentation. The findings indicate that legal protection is implemented through preventive, repressive, promotive, curative, and rehabilitative measures. Obstacles include differing perceptions between hospitals and BPJS, claim delays, and low public understanding of BPJS participant rights. The hospital responds by improving service standards through internal policies and SOPs specifically for ODGJ patient care.

INTRODUCTION

Mental health is an essential component of human well-being, encompassing psychological, social, and emotional dimensions that fundamentally shape a person's quality of life. As society continues to develop, mental disorders have become increasingly visible and require serious attention from both the health sector and the broader community. Various factors such as life stress, traumatic experiences, environmental conditions, and even genetic influences—can contribute to the emergence of mental health problems. Consequently, the fulfillment of the right to health, as guaranteed by the 1945 Constitution of the Republic of Indonesia, becomes increasingly important, especially for vulnerable groups such as Persons with Mental Disorders (ODGJ).

In an individual's life having good mental health is one of the important aspects that includes psychological, social, and emotional well-being. Mental health is also an integral part of overall health. The development of the times and society has also developed into a modern society, so mental disorders or mental disorders and people with mental disorders have become a serious concern for the world of health and also increasingly common for society as a whole. The causes of mental disorders usually come from several factors such as: life stress, traumatic experiences, environment, and can even be caused by genetic factors. Nowadays, health is a primary need. For humans, everyone wants to be healthy, so that whatever human activities can run according to plan, health is one of the basic social rights (the right to health care) and the right of individuals (the right of self-determination) of humans as well as one of the elements of welfare that must be realized in accordance with the ideals of the Indonesian nation (Basuki, 2020), as referred to in Pancasila and the Law of the Republic of Indonesia of 1945.

Based on Article 1 Number (57) of Government Regulation of the Republic of Indonesia Number 28 of 2024 concerning Implementing Regulations of the Law of the Republic of Indonesia Number. 17 of 2023 concerning Health, that people with mental disorders, hereinafter referred to as ODGJ, refer to people who have disorders in thought, behavior and emotions (Harefa, 2024). Humans, which manifest themselves as a collection of symptoms and/or significant behavioral changes and can cause distress and disturbances in the performance of human functions, are diagnosed as a psychiatric disorder according to its established diagnostic criteria. Therefore, at this time it is very important for every individual and also the entire community to maintain mental health because good mental health creates, good social relationships, life productivity and a better quality of life.

The urgency of legal protection for ODGJ arises from the reality that they are among the groups most prone to stigma, discrimination, and unequal access to health services. Government Regulation No. 28 of 2024 defines ODGJ as individuals who experience disturbances in thought, behavior, and emotion that significantly affect their daily functioning, thereby requiring proper medical attention. With the establishment of BPJS Kesehatan as part of the National Social Security System, the state seeks to ensure that all citizens—including those with mental disorders—receive equal access to healthcare services regardless of their social or economic background.

However, a gap continues to exist between regulations and actual practice. Although the law guarantees equal treatment for all patients, many BPJS users – including ODGJ – still report discriminatory experiences in healthcare facilities. Common issues include rushed examinations, insufficient attention, and inconsistent service standards compared to non-BPJS patients. Stigma surrounding mental disorders further exacerbates these disparities, causing ODGJ patients to be marginalized and denied the level of care and legal protection they are entitled to. This indicates that the implementation of legal safeguards for ODGJ has not yet been fully realized in practice.

The Social Security Administration Agency is regulated in Article 1 of the Law of the Republic of Indonesia Number 24 of 2011 concerning the Social Security Administration Agency which is hereinafter abbreviated as the BPJS Law states that BPJS is a legal entity established to administer social security programs (Afifah & Paruntu, 2015). The regulation states that there are two types of BPJS, namely, BPJS Kesehatan and BPJS Employment. At this time, BPJS Kesehatan is very important and has a central role in realizing the national social security system in the health sector. Basically, BPJS Kesehatan has made improvements to the health financing system which is currently still dominated by out of pocket payments, leading to a more organized financing system based on social health insurance. The form of the State's efforts in providing health services is by launching the National Health Insurance Program, abbreviated as JKN, which was formed based on the BPJS Law. The formation of JKN is intended for the government's efforts to protect small communities that have been struggling to get health services. This aims to ensure that all Indonesian people without exception get services and equal distribution of health insurance. Health services are carried out at health facilities that have been appointed or in collaboration with BPJS Kesehatan, as well as advanced health facilities such as public and special hospitals owned by the private or state.

Service quality issues are the most frequently complained about by patients, especially BPJS Kesehatan patients. BPJS Kesehatan patients expressed their dissatisfaction with the level of service they received compared to non-BPJS Kesehatan patients. Complaints that often arise are hasty inspections and careless handling, so they are not in accordance with the expected service standards. Everyone has the right to adequate health services, both in the form of intensive care and expensive treatment, regardless of socioeconomic status. Therefore, every BPJS Kesehatan participant who receives treatment at all health facilities receives quality and decent health services in accordance with the provisions of applicable laws.

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).

There are many regulations on the rights of patients with mental disorders who use BPJS Kesehatan insurance services issued by the Indonesian government, but at a time when field practice is still often there are many differences and are not in line with the theories regulated in these regulations, all patients should be entitled to the same treatment between patients who use BPJS Kesehatan insurance services and general patients who are not BPJS Kesehatan. These patients are also entitled to legal protection, including in the context of health insurance. There are many obstacles in implementing these rights, especially for patients with mental disorders who are often stigmatized and viewed differently by society. They are marginalized and under-cared for which can prevent them from getting the good health care and legal protections they deserve.

In light of these conditions, this study aims to examine the forms of legal protection provided to ODGJ patients using BPJS Kesehatan at Prof. HB Saanin Psychiatric Hospital Padang, identify the challenges encountered in service delivery, and analyze the efforts undertaken by the hospital to ensure fair, proper, and humane care. This research is significant because developing a deeper understanding of patient rights – particularly for individuals with mental disorders – can contribute to improving service quality, reducing discrimination, and promoting the fulfillment of the right to health for all citizens without exception.

A deeper understanding of patient rights is needed, especially legal protection for patients with mental disorders who use BPJS Kesehatan insurance services. This is related to efforts to improve the quality of life of patients. All participants, including those who suffer from mental disorders, are the responsibility of BPJS Kesehatan to get decent, adequate and quality health services. This includes treatment and rehabilitation for patients with mental disorders without discrimination or discrimination. It is important for patients as well as healthcare providers to better understand this legal awareness.

THEORETICAL REVIEW

Legal Protection

According to Satjipto Rahardjo, legal protection is a form of protection of human rights that are harmed by others, so that people can enjoy their rights fairly. Legal protection can be Preventive (prevention) and Repressive (settlement in the event of a violation) (Rahardjo, 2006). In the context of health services, legal protection aims to ensure the fulfillment of patients' rights as consumers of health services. Law Number 8 of 1999 concerning Consumer Protection (UUPK) provides a legal basis for patients to obtain legal certainty, security, and comfort in receiving health services. Patients have the right to receive quality services according to professional standards of medical personnel and free from 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

disturbances in thought, behavior, and emotions contained in a group of significant symptoms and/or behavioral changes that can cause distress and impairment of human function performance and is diagnosed as a mental disorder based on the established diagnostic criteria (Harefa, 2024).

Rights of ODGJ

The rights of ODGJ are also explained in Article 148 of Government Regulation of the Republic of Indonesia Number 28 of 2024 (Padilah et al., 2024), which is as follows:

- a) Getting mental health services at health care institutions that have comfortable transportation and meet mental health service standards;
- b) Obtaining a guarantee of the availability of drugs according to medical indications, including psychotropic drugs;
- c) Consent to treatment, except for those suffering from severe mental disorders, is considered incapable of decision-making, unaccompanied and in an emergency situation;
- d) Obtain honest and complete information about mental health data, including actions and treatments that have been or will be carried out by competent medical personnel and health workers in the field of mental health;
- e) Obtain protection from all forms of neglect, violence, exploitation, discrimination, social stigma and engage in meaningful activities;
- f) Getting social needs according to the degree of mental disorders; and
- g) Taking care of the property owned and/or transferred to him and can only be cancelled by court order.

Causes of Mental Disorders

According to a psychiatrist named Santrock (Santrock, 2011), the causes of mental disorders can be distinguished by:

- a. Biological/Physical Factors
 - 1) Descendents
 - 2) Physical
 - 3) Temperament
 - 4) Diseases and injuries of the body
- b. Psychological Factors

Various experiences of frustration, failure and success experienced will color their attitudes, habits and nature. The affection of a cold, indifferent, rigid and harsh parent will cause anxiety and pressure and have a personality that is rejecting and opposing to the 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 apply in that culture.

Social Security Administration Agency (BPJS) Kesehatan

BPJS Kesehatan is a public legal entity that organizes the national health insurance program based on Law Number 24 of 2011 (Yuditia et al., 2021). The goal is to provide health protection for all Indonesian people in a fair, equitable, and sustainable manner. BPJS participants are entitled to receive health services according to standards, ranging from first-level health facilities to referral hospitals.

METHODOLOGY

This research uses a **sociological juridical approach**, which is an approach that examines the application of positive law in society and relates it to the social reality that occurs in the field. This approach was chosen because the study not only highlighted the applicable legal norms related to the protection of ODGJ patients using BPJS Kesehatan, but also analyzed how these norms were implemented at Prof. HB Psychiatric Hospital. Saanin Padang.

Types and Characteristics of Research

This type of research is empirical research (sociological juridical) with an analytical descriptive nature (Nurhayati et al., 2021), which aims to describe factually and systematically the form of legal protection for ODGJ patients who use BPJS Kesehatan. This study also analyzes the obstacles and efforts of hospitals in providing fair and equitable health services.

Research Location

The research was conducted at the Prof. HB. Saanin Padang, which is the main referral hospital in West Sumatra Province in handling ODGJ patients. The selection of this location was based on the consideration that the hospital is a partner of BPJS Kesehatan and has long experience in serving patients with mental disorders.

Types and Data Sources

The research data consists of two types:

1. Primary data was obtained directly through interviews with resource persons, namely hospital management, medical personnel, BPJS administrative officers, and families of ODGJ patients.
2. Secondary data includes primary legal materials (laws and regulations such as the 1945 Constitution, Law No. 17 of 2023 concerning Health, Law No. 24 of 2011 concerning BPJS, and Government Regulation No. 28 of 2024 concerning the Implementation of the Health Law), secondary legal materials (books, scientific journals, and previous research results), and tertiary legal materials (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 with predetermined resource persons to obtain empirical data on the implementation of legal protection for ODGJ patients using BPJS.
2. The documentation study is to examine internal hospital documents such as SOPs for ODGJ patient services, internal policies, Hospital By Laws, and cooperation reports with BPJS Kesehatan.
3. Non-participatory observation, which is direct observation of the service system in the hospital without being directly involved in operational activities.

Data Analysis Techniques

The data obtained from the field and documents are analyzed qualitatively descriptively, namely by processing and interpreting the data to describe the relationship between legal norms and implementation practices in the field. The analysis is carried out in three stages:

1. Data reduction, which is sorting and grouping relevant data according to the focus of the research.
2. Data presentation, in the form of narratives and tables to facilitate understanding the relationship between variables.
3. The conclusion was drawn from the analysis into research findings on the form, obstacles, and legal protection efforts for ODGJ patients using BPJS at Prof. HB Psychiatric Hospital. Saanin Padang.

Data Validity

To ensure the validity of the data, sources and methods are triangulated, namely comparing the results of interviews, observations, and documents to obtain accurate and consistent data. Validity is also strengthened by confirming the results of the interview to the hospital and BPJS Kesehatan.

Legal Writing and Analysis Techniques

The analysis was carried out based on the principles of health law and consumer protection, with reference to Satjipto Rahardjo's legal protection theory and Aristotle's distributive justice theory to see the extent to which legal justice was applied to ODGJ patients who use BPJS.

RESULTS

The results of the study show that the legal protection for patients with Persons with Mental Disorders (ODGJ) who use BPJS Kesehatan at the Prof. HB. Saanin Padang is carried out through several policy approaches and field implementation. The approach includes preventive, repressive, promotive, curative, and rehabilitative aspects that are carried out in an integrated manner between the hospital and related 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 shows the trend of increasing the number of ODGJ patients using BPJS Kesehatan from year to year. The percentage of BPJS patients increased from 68.2% in 2022 to 77.6% in mid-2024. This indicates that people are increasingly relying on health social security to access mental health services. However, the increase in the number of patients also has implications for the burden of hospital administration, especially in the aspects of claims, document verification, and service efficiency.

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	in Pending claims, late payments	Regular coordination and document clarification meetings
Delay in patient administration	in patient Delay in outpatient medical services	Digitization of patient administration systems
Social stigma against ODGJ	in Discrimination against 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 shows the four main obstacles faced by hospitals in providing legal protection to ODGJ patients using BPJS Kesehatan. The most dominant factor is the difference in perception with BPJS in terms of financing and claim process. Meanwhile, non-legal factors such as social stigma and low legal literacy of patients also exacerbate the situation. The efforts made by hospitals through legal training and socialization show progressive steps in overcoming these obstacles.

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 results of the study show that the legal protection for patients with Persons with Mental Disorders (ODGJ) who use BPJS Kesehatan at the Prof. HB. Saanin Padang has been implemented comprehensively through preventive, repressive, promotive, curative, and rehabilitative approaches. This pattern of protection is in line with the theory of legal protection put forward by (Rahardjo, 2009), that the law not only functions as a tool for sanctions enforcement, but also as a means of protecting human rights. In this context, hospitals play a role as law enforcement agencies that ensure the fulfillment of patients' rights to humane and non-discriminatory health services.

Preventive legal protection at Prof. HB. Saanin Padang is carried out through education, socialization of patient rights, and the implementation of *Standard Operating Procedure* (SOP) based on health regulations. This shows alignment with the principles *due process of law*, where the patient is entitled to protection before the breach occurs. Instead, repressive protection is carried out through a patient complaint mechanism and coordination with BPJS to resolve claims disputes, as suggested by (Rahmat & Lie, 2024) which found that the effectiveness of legal protection in hospitals was greatly influenced by the clarity of administrative dispute resolution procedures between hospitals and social security agencies.

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

The increase in the number of ODGJ patients using BPJS from 68.2% (2022) to 77.6% (2024) shows high public trust in mental health insurance services. However, the increase has implications for the hospital's financing and administrative systems. These results are in line with research (Banu, 2022) which emphasizes that increasing the participation of BPJS participants without being balanced by administrative reform can cause service inequality and legal uncertainty in the claim mechanism.

This phenomenon also shows the need for synergy between hospitals and BPJS Kesehatan in interpreting financing standards and the validity of claim documents. Based on theory *Law in Action* from Roscoe Pound, good law is not only written in regulations, but must also be effectively implemented in social practice (Diva et al., 2025). In the context of this study, the effectiveness of legal protection depends on cross-institutional cooperation and increased legal literacy for medical officers 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 reinforce the results of the study (Sukardi et al., 2024) which states that obstacles in the implementation of legal protection for BPJS Kesehatan patients are often caused by complicated bureaucracy and lack of public legal awareness. On the other hand, (Dewi et al., 2025) also emphasized that BPJS patients often feel treated unequally due to the convoluted administrative process and lack of information about their legal rights.

Thus, the obstacles that arise at the Prof. HB. Saanin Padang is not only an administrative issue, but also a representation of the gap between normative law and empirical practice in the field. This condition confirms the relevance of the view (Kansil, 1979) that the law must be present to provide a sense of security, both physically and psychologically, especially for vulnerable groups such as patients with mental disorders.

Hospital Strategy in Strengthening Legal Protection Aspects

Strategy of Psychiatric Hospital Prof. HB. Saanin Padang in improving legal protection can be categorized into three main pillars: strengthening internal regulations, improving the competence of medical personnel, and strengthening cross-sector coordination. Preparation *Hospital By Laws* and ODGJ SOPs are important internal legal instruments to ensure uniformity of services and reduce the potential for discrimination against patients. These efforts are consistent with the findings (Mustofa & Aran, 2025) that emphasizes the role *Hospital By Laws* as a form of preventive legal protection against potential ethical violations and malpractices in health services.

In addition, the training of medical personnel regarding ODGJ-friendly services shows the application of the principles *Therapeutic Jurisprudence*, i.e. the use of the law to improve the psychological well-being of individuals (Naurah & Simarmata, 2024). This principle is important in the context of ODGJ patients, because legal protection is not only about administrative rights, but also recognition of human dignity and the right to recover without stigma.

Legal Enforcement, Distributive Justice, and Implications for National Policy

The implementation of legal protection for ODGJ patients using BPJS Kesehatan at Prof. HB Saanin Hospital also reflects the broader principle of distributive justice, namely the fair and proportional distribution of rights, resources, and responsibilities within the health system. According to John Rawls' theory of distributive justice, fairness must prioritize vulnerable groups through equitable—not merely equal—treatment. In this context, the hospital's commitment to developing specific SOPs for ODGJ, providing specialized medical personnel training, and ensuring access to complaint mechanisms demonstrates an effort to allocate additional support to patients 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.

Furthermore, the pattern of legal protection implemented—preventive, promotive, curative, and rehabilitative—indicates that the hospital has attempted to balance equality of access with equity of treatment. This includes ensuring that

ODGJ patients are not only treated the same as other BPJS patients but are also provided with targeted interventions to address their unique risks. Such practices illustrate a distributive justice framework in action: resources and attention are distributed proportionally based on the level of vulnerability and need, rather than applied uniformly. Consistent with the findings of (Saragih, 2023), distributive justice in health institutions emerges when policies are sensitive to the socioeconomic and psychological constraints faced by patient groups.

In addition to reflecting the concept of distributive justice, the results of this study have strategic significance as a reference for national-level policy development, particularly for improving BPJS Kesehatan services for ODGJ patients. First, the identification of discrepancies between hospitals and BPJS in claim verification can inform the need for national standardization of mental health claim procedures, which are currently fragmented and open to subjective interpretation. This aligns with recommendations by (Putri & Alamsyah, 2024), who emphasize the urgency of harmonized mental health insurance regulations.

Second, the documentation of stigma and discrimination in service delivery highlights the necessity for the Ministry of Health to formulate a National Guideline on Non-Discriminatory Mental Health Services. Such guidelines could integrate Therapeutic Jurisprudence principles and require mandatory training for all health workers, not only those in psychiatric hospitals. The relevance of this is supported by research (Naurah & Simarmata, 2024) which asserts that stigma-reduction protocols significantly improve clinical outcomes and patient satisfaction.

Third, the strategies demonstrated by Prof. HB Saanin Hospital—such as strengthening Hospital By Laws, developing ODGJ-focused SOPs, and creating structured complaint mechanisms—can serve as best practices for national replication. These practices may be adopted by the Ministry of Health and BPJS Kesehatan as models for policy harmonization across regions. The study therefore contributes empirical evidence supporting the development of a national legal protection framework for mental health patients, ensuring that vulnerable populations benefit from standardized service quality regardless of location.

Finally, the findings provide a valuable reference for designing inter-sectoral policy cooperation between BPJS Kesehatan, the Ministry of Health, regional governments, and psychiatric hospitals. Such collaboration is crucial for strengthening health financing, reducing administrative disputes, and enhancing legal literacy among medical personnel and BPJS participants. By integrating these research insights, policymakers can create a more just, 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 research is still limited to the context of legal protection for ODGJ patients who use BPJS in one psychiatric hospital, namely Prof. HB Psychiatric Hospital. Saanin Padang. The next research is expected to expand the study to psychiatric hospitals in other regions so that a comparison of policy implementation and the effectiveness of legal protection in various regions can be carried out. In addition, follow-up studies are also recommended to explore the perspectives of patients, families, and medical personnel in more depth to enrich empirical analysis of the relationship between legal rights and mental health service experiences.

ACKNOWLEDGMENT

The author expressed his gratitude to the Prof. HB. Saanin Padang who has provided permission, time, and very valuable information during the research process. Gratitude was also conveyed to the Law Study Program, Faculty of Law, Hatta University, for academic support and direction in the preparation of this research. Support from all parties has been an important part in the successful completion of this research.

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