

IMPROVING THE PERFORMANCE OF HEALTH PERSONNEL (NAKES) POST COVID-19 THROUGH TELEMEDICINE HEALTH SERVICES

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A B S T R A C T

Health workers are people who have expertise through formal education and training in certain scientific disciplines so that they professionally have expertise and abilities in the field of health services. After Covid-19, as health service technology develops, it becomes more advanced and develops rapidly, one of which is the professional skills possessed by health workers, which are carried out through telemedicine to meet the needs of the community quickly and precisely, especially for those who are sick. The development of telemedicine health services is growing rapidly and starting with Covid-19, people need health services during Covid-19 because of limited steps and restrictions on limited consultations to health workers, so telemedicine is the first step for electronic consultations. Telemedicine is a major revolution in the health sector which continues to develop until after Covid-19. Telemedicine continues to be carried out by the community to meet health needs so that they do not meet directly with medical personnel, just technology that makes it possible for users.

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RESEARCH BACKGROUND

Recent technological developments have become increasingly sophisticated, communication tools have begun to develop which can not only transmit sound, but can also send photos, videos or other digital files, as well as filling in medical records is currently developing and requires every health service facility to document them digitally. Electronic Medical Records (RME) is the use of information technology devices for collecting, storing, processing and accessing data stored in patients' Medical Records (RM) in hospitals in a database management system that collects various sources of medical data.¹

The 1945 Constitution mandates that health is a human right. Article 28H states that every person has the right to live in physical and spiritual prosperity, to have a place to live and to have a good and healthy living environment and has the right to receive health services. Furthermore, Article 34 paragraph (3) states that the state is responsible for providing adequate health service facilities and public service facilities. This shows that the government is obliged to make the sick healthy and try to keep the healthy healthy.²

According to Article 1 paragraph (1) of the Republic of Indonesia Minister of Health Regulation Number 20 of 2019, Telemedicine is the provision of long-distance health services by health professionals using information and communication technology including the exchange of information on diagnosis, treatment, disease and injury prevention, research and evaluation, and continuing education of providers. Health services for the benefit of improving individual and community health.

¹ Sudjana, Sudjana. *Aspek Hukum Rekam Medis atau Rekam Medis Elektronik sebagai Alat Bukti Dalam Transaksi Teurapetik*. Veritas et Justitia 3.2 2017: Hlm. 11.

² Suhartini, Endeh dkk, *Hukum Kesehatan bagi Tahanan dan Warga Binaan Masyarakat di Indonesia*, Jakarta, Rajawali, 2019. Hlm.41.

Article 172 paragraph (2) of Law No. 17 of 2023 concerning health explains that Health Service Facilities can independently provide Telemedicine services or collaborate with registered electronic system providers in accordance with the provisions of statutory regulations, and in paragraph (3) Services Telemedicine provided by Health Service Facilities as intended includes services between Health Service Facilities and between Health Service Facilities and the community.

The practice of telemedicine provides medical facilities like a regular doctor's practice, so it needs to be controlled in concrete regulations, also regarding SIP, telemedicine doctors need a SIP and a permit for their services. The argument that telemedicine doctors do not need regulation because they do not provide medication is not entirely correct, because non-medical management including the medical advice given is still within the domain of medicine, in fact medical practice has started since taking anamnesis where the patient discloses information about himself and his condition. his medical to the doctor.³

One of the data and information about health that is in line with globalization is the Electronic Medical Record (RME). The Ministry of Health has issued Minister of Health Regulation Number 749a/MENKES/Per/XII/1989 concerning Medical Records. With the issuance of this Minister of Health Regulation, the provision of medical records has become a necessity or has become a law that must be obeyed for every health service facility. Furthermore, Minister of Health Regulation No. 269 of 2008 concerning Medical Records, which explains that medical records must be made in writing, complete and clear or electronically.⁴

The benefits of medical records or electronic medical records that are clear and complete for medical personnel are as a basis or guide for planning and analyzing diseases as well as planning treatment, care and medical actions that must be given to patients, as well as improving the quality of services to protect medical personnel in achieving public health. the optimal one. Meanwhile, the use for patients includes, among other things, as a basis for calculating the cost of paying for medical services, which requires knowing whether they have been incurred and the development of disease, treatment and medical procedures.⁵

The current use of information technology has resulted in developing health services that no longer require face-to-face contact between doctors and patients, but can be carried out remotely as long as it complies with statutory provisions. In Article 1 paragraph (2) of the Republic of Indonesia Minister of Health Regulation No. 20 of 2019 concerning long-distance health services or telemedicine between health service facilities, it can take the form of consultations to confirm diagnosis, therapy and/or disease prevention. A Health Service Facility (Fasyankes) itself is a tool and/or place used to provide promotive, preventive, curative and rehabilitative health service efforts carried out by the central government, regional government and/or the community.

Article 1 number 29 of Law No. 17 of 2023 concerning Health states that a Practice Permit, hereinafter abbreviated as SIP, is written evidence given to medical personnel and health workers as a grant of authority to carry out practice, which means requiring every medical personnel who works in a service facility. Health care must have a practice permit in that location, this aims to ensure that every service provided to the community has legal certainty and can be accounted for. So, every professional medical personnel, apart from having the expertise and ability to treat, must also be orderly in administration, this applies to medical personnel who practice independently as individuals or who join a health service facility.

³ Ibid, Hlm. 11.

⁴ Soekidjo Notoatmodjo, *Etika & Hukum Kesehatan* (Jakarta: Rineka Cipta, 2010).

⁵ Ibid, hlm.3

Health services via telemedicine must be the center of the Government's attention, both in the form of regulations and maximum supervision, considering that health is one of the Government's responsibilities. In telemedicine services, a patient does not need to meet face to face with the doctor but through online consultation technology, so that legal certainty and legal protection for doctors and patients must be protected so that future problems do not arise.

In connection with this, the practice of telemedicine which is developing rapidly, starting with the development of the Covid-19 virus in China and post-Covid-19, currently requires legal certainty in the regulations that are implemented to be implemented well by medical personnel and understood by patients when receiving health services via telemedicine.

The health consultation process between doctors and patients via telemedicine is of course carried out online to ensure that the patient's condition matches the symptoms given. The online treatment process is carried out through indirect examination so that the possibility of misdiagnosis is very likely to occur and this will be very detrimental to the patient. If there is an error in medical practice, of course there must be sanctions that accompany it, so that every implementation of regulations, whether in health or other fields, will be carried out in accordance with what is mandated by law.

The success of telemedicine services is influenced by the government as a stakeholder in issuing regulations, connectivity and accessibility to reach services throughout the region and reliable and competent human resources.⁶ Telemedicine is an important strategic step in providing health services during the Covid-19 pandemic. Telemedicine plays an important role in providing assistance and support to the community in the era of social and physical limitations imposed in Indonesia. The main advantage of telemedicine services is the availability of technology that minimizes distance, geographical limitations and related costs, especially due to the lack of medical services and staff in remote areas, this is very natural and certain considering that Indonesia still has a very large territory of thousands of islands with limited transportation infrastructure. inadequate and the number of doctors is very limited. In addition, the internet network can support every corner of the archipelago via satellite, outside or through geographical boundaries such as hills, mountains, seas and forests.

RESEARCH METHOD

This research uses a type of normative legal research. In this research, library materials are basic research data which is classified as secondary data. The nature of this research is descriptive analysis, namely describing the applicable laws and regulations linked to legal theories and the practice of implementing positive law regarding problems.⁷

In this research, the approach method used is a normative juridical approach, namely by using a literature study or a legal approach, a comparative legal method.⁸ In normative legal research, data collection is carried out by reviewing data obtained in statutory regulations, books, journals, research results, with the aim of searching for and finding legal materials regarding Improving the Performance of Post-Covid-19 Health Workers (Nakes) Through Telemedicine Health Services which is then analyzed.

DISCUSSION

1. Development of Telemedicine

⁶ Sitorus, R. J., & Syakurah, R. A. . *Penggunaan Telemedicine Sebagai Teknologi Informasi Dalam Rangka Solusi Alternatif Pencegahan Penyebaran COVID-19*. The Indonesian Journal of Health Promotion, (2021). Hlm. 8.

⁷ Ronny Hanitijo Soemitro, *Metode Penelitian Hukum dan Jurimetri*, Ghalia Indonesia, Jakarta, 1988, Hlm. 35.

⁸ *Op. Cit.* Hlm. 42.

The Covid-19 virus which hit the world rapidly in 2020, to be precise, entered Indonesia in March 2020, greatly influenced the ideological, political, economic, socio-cultural and legal developments that occurred in Indonesian society.

Prevention and response to Covid-19, which hit the world quickly and seemingly suddenly, has greatly influenced human interaction regionally, nationally and internationally. The spread of Covid-19 in 2020 was very long and required a recovery time which was not easy. Year after year was passed to restore public health conditions and economic recovery which was the most crucial thing felt by all people in the world, not just Indonesia. The occurrence of Covid-19 has had an impact on several Central and Regional Government policies with struggles and stages that must be passed with great care and attention.

In the current developments that are still felt by the public, technological developments play a very important role during Covid-19 and post-Covid 19, including health services via telemedicine which are currently developing very rapidly and require proper attention and supervision as well as appropriate regulations so that does not cause problems in the future.

2. Legal provisions for telemedicine services in Indonesia

In Indonesia, law plays an important role in various aspects of social and state life. One of them is in the health sector, health is a human right and an element of welfare that must be realized in accordance with the ideals of the Indonesian nation as intended in Pancasila and the 1945 Constitution of the Republic of Indonesia.⁹

Article 1 paragraph (3) of the 1945 Constitution stipulates that: The Indonesian state is a legal state. Based on this article, it has a very clear meaning that all actions and actions of humans, especially the Government of the Republic of Indonesia and Indonesian citizens, in all their activities must be carried out in accordance with applicable legal regulations. In connection with the existence and recognition that the Unitary State of the Republic of Indonesia is based on law where in practice everyone has the same position in law and government (equality before the law) and in practice must implement the noble values of Pancasila for all Indonesian citizens, both civilian and military and citizens, so that everyone has the same rights and obligations in upholding the law and government to implement justice and legal certainty in all actions and deeds to achieve certainty and justice as a form of a state of law (rechtsstaat) not a state of power (machstaat).¹⁰

In the opinion of Sri Soemantri Martosoewignyo, that a country that is categorized as a rule of law country must have the following elements:¹¹

- a. The government in carrying out its duties and obligations must be based on laws or statutory regulations;
- b. There are guarantees for human (citizen) rights;
- c. There is a division of power within the state; And
- d. There is supervision from judicial bodies (rechtterlijke controle).

⁹ Hidayat, Rif'atul. "Hak Atas derajat pelayanan kesehatan yang optimal." *Syariah: Jurnal Hukum dan Pemikiran* 16.2 (2017): 127-134.Hlm 1.

¹⁰ Suhartini, Endeh, Ani Yumarni, and Siti Maryam. "Pelaksanaan Program Merdeka Belajar Kampus Merdeka dalam Upaya Peningkatan Kinerja Perguruan Tinggi." *DIDAKTIKA TAUHID: Jurnal Pendidikan Guru Sekolah Dasar* 2022: Hlm. 69.

¹¹ R. Sri Soemantri Martosoewignyo, *Bunga Rampai Hukum Tata Negara Indonesia*, Bandung: Alumni, 1992, hlm. 29

John Locke put forward the idea that all individuals are endowed by nature with inherent rights to life, liberty and property, which are their own and cannot be taken away by the State. Human rights are rights that humans have solely because they are human. Human beings have them not because they are given to them by society or based on positive law, but solely based on their dignity as human beings, so even though each person is born with different skin color, gender, language, culture and nationality, they still have these rights.¹² Apart from being universal, these rights are also inalienable. This means that no matter how bad the treatment someone has experienced or how cruel someone is treated, they will not stop being human and therefore still have these rights. In other words, these rights are inherent in him as a human being.¹³

Health is the main capital for the growth and life of the nation, and has an important role in realizing a just, prosperous and prosperous society like the ideals of the state stated in the Preamble to the 1945 Constitution. Health status is also very significant for the development and development of human resources which are basic capital. National development is essentially comprehensive human development.

To achieve a good level of public health, as part of human (citizen) rights, the state is obliged to fulfill the right to health services. Health services are human rights, namely rights whose protection, promotion, enforcement and fulfillment are the responsibility of the Government.¹⁴

Article 1 paragraph (1) of the Human Rights Law determines that,

Human rights are a set of rights that are inherent in the nature and existence of humans as creatures of God Almighty and are gifts that must be respected, upheld and protected by the state, law, government and everyone for the sake of honor and protection of human dignity.

The state, as the duty bearer, fulfills and protects human rights, including the right to health, is obliged to provide guarantees for the protection and fulfillment of the right to health for all citizens..¹⁵

According to Martin Roestamy, law is a set of rules and regulations that regulate the orderly life of society and the state, which originate from society and the state with the aim of achieving justice, order, peace and prosperity.¹⁶ So here it can be seen that one of the goals of a state based on law is to create prosperity for its citizens, one of which is through the right of access to health. Efforts to improve the quality of human life in the health sector are a very broad and comprehensive effort. These efforts include improving public health, both physical and non-physical. In the national health system, it is stated that health concerns all aspects of life whose scope and reach are very broad and complex.

The right to optimal health status will include the right to health services (right to health care) and the right to health protection (right to health protection); or refers to ideas, the right to access health services, and the right to a social order which requires the state to

¹² Universitas Islam Indonesia (Yogyakarta). Pusat Studi Hak Asasi Manusia (PUSHAM), et al. *Hukum hak asasi manusia*. Pusat Studi Hak Asasi Manusia, Universitas Islam Indonesia (PUSHAM UII), 2008. Hlm.1.

¹³ *ibid*

¹⁴ Basuki, Udiyo. "Merunut Konstitusionalisme Hak Atas Pelayanan Kesehatan Sebagai Hak Asasi Manusia." *Jurnal Hukum Caraka Justitia* 1.1 2020. Hlm .37

¹⁵ Yenti Rosdianti, "Perlindungan Hak atas Kesehatan melalui Kebijakan Pengendalian Tembakau", dalam *Jurnal HAM* Volume VIII, Hlm. 97.

¹⁶ Martin Roestamy, *Modul Mata Kuliah Pengantar Ilmu Hukum pada Fakultas Hukum Universitas Djuanda Bogor*, 2006, Universitas Djuanda, Bogor

take specific measures to protect public health (right to social order which includes obligations of the state to take specific measures for the purpose of safeguarding public health). which covers two sub-concepts; the right to health services, and the right to public health protection/safeguarding.¹⁷

The principle of legal certainty is a concept to ensure that the law has been implemented properly so that it does not cause any harm to anyone. The law must protect and protect society from various crimes against individuals or groups and must be used as a guide to life for everyone. Legal certainty is formed with the hope of providing understanding to the public to always act and think positively about the State laws that have been determined.

Roscoe Pound stated that legal certainty has two meanings, namely:

- a. As a general rule to make individuals understand what actions they can and cannot do.
- b. In the form of legal security for each person from government arbitrariness, with these general rules individuals can understand what the State is permitted to impose or do on each individual. Legal certainty means that there is consistency and certainty in the judge's decisions between one decision and another in the same case that has been decided. So legal certainty is not only in the form of articles in the law.¹⁸

Then Gustav Radbruch said that legal certainty is "Scherkeit des Rechts selbst". There are four things that are related to the meaning of legal certainty, including:

- a. That law is positive, which means that law is legislation (*gesetzliches Recht*).
- b. Law is based on facts (*tatsachen*), not based on a formulation of judgments that will later be made by judges, such as good will and politeness.
- c. That these facts must be formulated clearly to avoid errors in interpretation, besides that they are also easy to carry out.
- d. Positive law cannot be changed frequently.¹⁹

Medical practice is a series of activities carried out by medical professionals with patients who need help in an atmosphere of mutual trust and filled with all the emotions, hopes and worries of human beings. The essence of medical practice is a human effort to help others based on purity of intention, seriousness of work that is oriented towards needs. patients and prioritizing patient safety, so it is called a noble profession (*officium nobile*).²⁰

A doctor's competency is proven by the competency certificate he has, and his authority is proven by a registration certificate (STR).²¹ Based on the provisions, doctors who have STR are given the authority to practice medicine in accordance with their competencies. The authority obtained by a doctor who has an STR is an acknowledgment from the government that the doctor concerned is fit to practice medicine.

Viewed from a legal perspective, the relationship between doctor and patient is an agreement, namely a legal relationship in the field of property law between two parties in which one party (the creditor) has the right to fulfill an achievement and the other party (the

¹⁷ Endeh Suhartini, Martin Roestamy, and Ani Yumarni, "HUKUM KESEHATAN BAGI TAHANAN DAN WARGA BINAAN PEMASYARAKATAN DI INDONESIA" (Depok: Raja Grafindo Persada, 2019).

¹⁸ Peter Mahmud Marzuki, *Pengantar Ilmu Hukum*, Kencana Prenada Media Group, Jakarta, 2008, hlm 137.

¹⁹ Achmad Ali, "Menguak Teori Hukum (*Legal Theory*) & Teori Peradilan (*Judicialprudence*) Termasuk *Undang-Undang (Legisprudence)*" Volume I Pemahaman Awal, Kencana Prenada Media Group, Jakarta, 2010 , hlm 292-293.

²⁰ Veronica Komalawati, S. H. "Kompetensi Dan Kewenangan Praktik Kedokteran: Perspektif Hukum Di Indonesia." *Jurnal Ilmiah Hukum DE'JURE: Kajian Ilmiah Hukum* 3.1 (2018). Hlm. 3.

²¹ Pengertian kompetensi berdasarkan Pasal 1 Undang-undang Nomor36 Tahun 2014 tentang Tenaga Kesehatan

debtor) is obliged and responsible for the fulfillment of that achievement. Achievement as the object of this agreement can be in the form of giving something (goods or money), doing something, or not doing something (Article 1234 of the Civil Code). Engagements can also occur because of the law (not because of a contract between the parties), for example if there is an unlawful act or an act of managing another person's interests without prior approval or knowledge of the person concerned (Article 1233 of the Civil Code/Civil Code).²²

The Indonesian government's policy is oriented towards healing patients so that it is clear that the role of doctors, nurses and midwives as medical and paramedical personnel dominates. In fact, such efforts have long been abandoned because they are financially detrimental to the country. The APBN budget for health funding in Indonesia is increasing and most of it is used for medical efforts such as purchasing medicines, health facilities and building construction. In order to improve our health, we must pay great attention to the root of the problem and then make efforts to prevent it. For this reason, health efforts must focus on preventive (prevention) rather than curative (treatment) efforts..²³

Every implementation of medical practice must be in accordance with statutory regulations and the competencies it possesses, every violation of regulations must have sanctions, including in the health sector. The task of sanctions is to enforce norms so that everyone obeys them and as a legal consequence for violations of norms.²⁴

Therapeutic transaction is a communication process between a doctor and a patient whose object is a healing effort. The therapeutic transaction creates a bond between the doctor and the patient. The basic obligations that arise in therapeutic transactions are the doctor's obligation to carry out medical efforts and the patient's rights to these medical efforts; the patient's obligation to pay an honorarium to the doctor for the medical efforts he has carried out and the doctor's right to payment of the honorarium.²⁵

Article 2 of Minister of Health Regulation Number 2052 of 2011 regulates that:

- a. Every doctor and dentist who practices medicine is required to have a SIP.
- b. The SIP as intended in paragraph (1) is issued by the Head of the Regency/City Health Service.
- c. The Head of the District/City Health Service in providing SIP must consider the balance between the number of Doctors and Dentists and the need for health services.

The development of legal science aims to create, maintain and control security, order, justice and human welfare.²⁶ Therefore, every legal regulation is created by humans to regulate all human activities in society with the ultimate goal being human welfare itself.

Utility is always associated with Jeremy Bentham's theory of utilitarianism. The term The Greatest Happiness for The Greatest Number is always identified as happiness that is determined by the number of people, so that the majority's measure of happiness determines how the law is formed. However, this term is more suitable to be interpreted as a guarantee of individual happiness that the state must provide to its citizens and eliminate suffering for society through legal instruments, so that the benchmarks for these legal instruments are "happiness" and "suffering".²⁷ The philosophy of purpose is also called the utilitarian

²² *Op. Cit.* Hlm. 5.

²³ Endeh Suhartini dkk, *Hukum Kesehatan bagi Tahanan dan Warga Binaan Masyarakat di Indonesia*, (Jakarta: Rajawali Pers, 2019), Hlm.25.

²⁴ Ika Darmika, *Hukum Pidana*, (Jakarta: Rajawali Pers, 2021), Hlm.13.

²⁵ Veronica Komalawati, S. H. "*Kompetensi Dan Kewenangan Praktik Kedokteran: Perspektif Hukum Di Indonesia.*" *Jurnal Ilmiah Hukum DE'JURE: Kajian Ilmiah Hukum* 3.1 (2018). Hlm. 4.

²⁶ J.Jopie Gilalo." *Buku Ajar Mata Kuliah Filsafat Hukum*. Fakultas Hukum Universitas Djuanda.2023. Hlm. 13.

²⁷ Endang Pratiwi, et all. "*Teori Utilitarianisme Jeremy Bentham*": Tujuan Hukum atau Metode Pengujian Produk Hukum. Fakultas Hukum Universitas Pasundan Bandung.2022.Hlm.273.

philosophy promoted by Jeremy Bentham, what is sought is the greatest benefit for the greatest number of people.²⁸

Laws and regulations issued by the government are basically made based on the interests of the people in the field, therefore every regulation is dynamic and can change at any time, but as implementer of the law, the government must adhere to the principles of good governance.) or also known as civil society. Good governance can also be defined as an implementation of development management, empowerment and services that is in line with democracy (government of, by and for the people)..²⁹

Implementation of good governance in this case relates to public services where health is a public service that must be provided by the government for its people, how to provide good public services (Health) so that all levels of society can experience and easily access these health services, through Minister of Health Regulation No. . 20 of 2019, the government has simplified the flow and process of health services, especially to reduce obstacles due to long distances and lack of human resources and technology, so that through this health regulation every medical personnel can carry out telemedicine.

The World Health Organization (WHO) states that there are at least four main elements in telemedicine, namely telemedicine aims to provide clinical support, telemedicine is useful and plays a role in overcoming distance barriers between patients and doctors, telemedicine takes advantage of advances in information and communication technology devices, and telemedicine aims to improve quality and condition of public health. These four elements are the main foundation for the implementation of telemedicine in Indonesia in order to increase the efficiency of more practical patient treatment.³⁰

A Health Service Facility is a tool and/or place used to provide promotive, preventive, curative and rehabilitative health service efforts carried out by the central government, regional government and/or the community. According to Minister of Health Regulation No. 20 of 2019 Article 2, telemedicine services are carried out by health workers who have a practice permit at the health facility provider.

The aims and objectives of telemedicine services are as follows:

- a. Telemedicine services for the purpose of communication/consultation and supervision between medical staff.
In this type of telemedicine service, one medical staff carries out direct face-to-face interaction with the patient, but involves other medical staff who are contacted via telemedicine services. Generally, both medical staff are both doctors or a team of doctors, but it can also be between homecare nurses and doctors.
- b. Telemedicine services for the purpose of consultation between doctors and patients.
In this type of telemedicine service, long-distance interaction occurs between the doctor and the patient. One classic example is emergency services such as the 911 service in the United States, where anyone with access to a telephone can call 911 when there is an emergency, including in the medical field.
- c. Telemedicine services with expert intent
Telemedicine services can be used to obtain expertise on certain supporting examinations from related experts or specialists. One of the most frequently used is teleradiology, namely the use of technology to send radiological data

²⁸ Topo Santoso. "Hukum Pidana Suatu Pengantar" Rajawali Press. 2021. Hlm.172.

²⁹ Widanti, Ni Putu Tirka. "Konsep Good Governance dalam Perspektif Pelayanan Publik: Sebuah Tinjauan Literatur." *Jurnal Abdimas Peradaban* 3.1 (2022): 73-85. Hlm.80.

³⁰ Eman Sulaiman. 2021. *Juridical Study of Telemedicine Consulting Services in Indonesia*. Jurnal Hukum Kesehatan Vol. 7 No. 2

to another center for interpretation by a radiology specialist at that location. This technique is very helpful for medical services considering the limited number of radiology specialists.³¹

Telemedicine is not only used as an effort to provide patient and doctor consultation services, but is also used to send data from patients who are far from the hospital as material for study and diagnostic analysis by the doctor concerned quickly and accurately.³²

The main advantage of telemedicine services is the use of technology to eliminate distance and geographic limitations and associated costs, especially for medical services in remote areas that lack medical personnel. This is very relevant in Indonesia, which has a very large area, consisting of thousands of islands, with poor connecting transportation infrastructure, and a very limited number of doctors. Meanwhile, the internet network can be supported via satellite to all corners of the archipelago, across geographical obstacles such as sea, hills, mountains, forests, and so on.³³

Telemedicine services raise various topics that have the potential to become ethical issues, which are relevant to their implementation in Indonesia, including issues of patient privacy and confidentiality, as well as changes in face-to-face doctor-patient interactions. The risk of providing health services via telemedicine has greater risks compared to health services via face-to-face or in person, for example, in the case of a doctor's diagnosis, it will be better and more precise if it is done directly between the doctor and the patient.³⁴

Article 3 paragraph (4) of Medical Council Regulation Number 74 of 2020 concerning Clinical Authority and Medical Practice via Telemedicine during the Covid-19 Pandemic explains that "doctors who practice medicine via telemedicine are required to have a Registration Certificate and Practice Permit in Health Facilities in accordance with those stipulated by the applicable laws and regulations."

Article 9 of the Medical Council Regulation Number 74 of 2020 regulates things that are prohibited for doctors from practicing health services via telemedicine, namely if:

- a. Teleconsultations are carried out directly without health facility intermediaries.
- b. Doctors provide dishonest and inadequate explanations and clarity of information or diagnoses to patients and their families.
- c. Assigning a diagnosis to a patient is beyond their competence and qualifications
- d. Asking patients to participate in unnecessary and irrelevant investigations.
- e. Carrying out disgraceful acts, disgraceful acts, acts of intimidation or acts of violence against patients while carrying out medical practices in order to provide health services to patients.
- f. Carrying out invasive procedures on teleconsultation media during telemedicine with patients.
- g. Setting consultation or treatment fees that are too high or abnormal and outside the rates set by the Health Facilities.

Providing a health certificate without conducting a direct examination of the patient (falsifying the patient's health information).

Thus, several provisions to be implemented in Health Services via telemedicine are as follows:

³¹ Prawiroharjo, Pukovisa, Peter Pratama, danNurfanida Librianty. *Layanan telemedis di Indonesia: Keniscayaan, risiko, dan batasan etika*. Jurnal Etika Kedokteran Indonesia.2019. Hlm.5

³² Jannati, Anna Sylva Roudlotul. "Perlindungan Hukum Bagi Pasien Dalam Pelayanan Telemedicine di Indonesia." Jurnal Juristic 3.02 (2022). Hlm. 7.

³³ *Op. Cit.* Hlm. 2.

³⁴ *Op. Cit.* Hlm. 14.

- 1) The 1945 Constitution of the Republic of Indonesia;
- 2) Law Number 29 of 2004 concerning Medical Practice.
- 3) Law Number 36 of 2014 concerning Health Workers
- 4) Law Number 17 of 2023 concerning Health
- 5) Minister of Health Regulation Number 269 of 2008 concerning Medical Records.
- 6) Minister of Health Regulation Number 2052 of 2011 concerning Doctor's Practice Permits
- 7) Minister of Health Regulation Number 20 of 2019 concerning Telemedicine Services between Health Service Facilities
- 8) Minister of Health Regulation Number 20 of 2019 concerning the Implementation of Telemedicine Services Between Health Service Facilities.
- 9) Minister of Health Decree Number Hk.01.07/Menkes/4829/2021 concerning Guidelines for Health Services Via Telemedicine During the Corona Virus Disease 2019 (Covid-19) Pandemic
- 10) Medical Council Regulation Number 74 of 2020 concerning Clinical Authority and Medical Practice via Telemedicine during the Covid-19 Pandemic
- 11) Indonesian Medical Code of Ethics (KODEKI) 2012.

CONCLUSION AND RECOMMENDATION

The conclusions from this research are as follows:

1. The development of the implementation of telemedicine services is currently growing rapidly due to advances in technology and the public's need for easy health services only through an online system and it does not take a long time to receive health services based on trust and the need to obtain health service facilities. Limited human interaction as a result of Covid-19 affects the need for health services so that post-Covid-19 development regarding public health services via telemedicine for maintaining public health requires the need to treat pain simply through online technology systems.
2. Provisions governing telemedicine health services that have been stipulated by the Republic of Indonesia already have legal provisions related to the legal provisions for telemedicine health services in Indonesia to be carried out by medical personnel and fulfill administrative requirements for every person or institution that will open the practice of telemedicine health services in order to provide legal certainty for doctors and patients receiving health services.

The suggestions that can be given are as follows:

1. The development of telemedicine health services after Covid-19 is still growing very quickly, requiring legal protection and legal certainty for parties, including medical personnel and patients;
2. Legislative provisions must be implemented properly. It is recommended that supervision needs to be carried out continuously by the government and society so that the goals of justice and legal certainty can be achieved.

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