

The Constitutionality of the Retired Minister's Health Insurance Policy Based on Social Justice and State Financial Accountability

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The Constitutionality of the Retired Minister's Health Insurance Policy Based on Social Justice and State Financial Accountability

Kebijakan jaminan kesehatan bagi purnatugas menteri sebagaimana diatur dalam Peraturan Presiden Nomor 121 Tahun 2024 menimbulkan polemik terkait keadilan dan implikasinya terhadap akuntabilitas keuangan negara. Penelitian ini bertujuan untuk menganalisis kesesuaian kebijakan tersebut dengan prinsip keadilan sosial dan akuntabilitas keuangan negara dalam pengelolaan anggaran publik. Metode yang digunakan adalah yuridis normatif melalui pendekatan peraturan perundang-undangan, konseptual, serta kasus berdasarkan pada asas-asas umum pemerintahan yang baik (AUPB), terutama asas keadilan, kepatutan, dan efisiensi anggaran publik. Hasil penelitian menunjukkan bahwa kebijakan ini berpotensi menciptakan ketidakadilan sosial karena memberikan fasilitas istimewa kepada elite politik tanpa mempertimbangkan kondisi ekonomi mereka secara objektif. Selain itu, kebijakan ini berisiko membebani APBN secara tidak proporsional dan mengganggu alokasi

anggaran sektor publik esensial. Disimpulkan bahwa kebijakan tersebut berpotensi diuji melalui *judicial review* karena bertentangan dengan prinsip tata kelola keuangan negara yang baik.

Keywords: *Judicial Review*; Jaminan Kesehatan; Keadilan Sosial; Akuntabilitas Keuangan Negara

INTRODUCTION

The preamble to the 1945 Constitution of the Republic of Indonesia contains the national goals to be achieved by the Indonesian people, one of which is in the area of health.¹ Health is a fundamental human right guaranteed by the Constitution,²³ as affirmed in Article 28H paragraph (1) of the 1945 Constitution of the Republic of Indonesia. Article 34 paragraph (2) of the 1945 Constitution of the Republic of Indonesia strengthens this by affirming the state's obligation to build a social security system for all people and empower the poor and vulnerable groups based on humanitarian principles.⁴ One of the manifestations is through the implementation of c program as a form of universal health protection.⁵

However, the issuance of Presidential Regulation Number 121 of 2024 concerning Health Maintenance Guarantee (Presidential Decree 121/2024) for Retired State Ministers has created new complexities in the fulfillment of health rights that have the potential to violate the principles of constitutional justice.

Research by Frita Ayu Pribadi identified that health financing in Indonesia is still not optimal due to the lack of budget allocation for promotive and preventive aspects and the weak development of JKN services.⁶ Meanwhile, the study by Retno Kus Setyowati strengthens these findings by highlighting access inequality due to technical barriers and the lack of equitable health facilities.⁷ The two

¹ A. Basuki Babussalam, "Health Service Maladministration's in the Covid-19 Pandemic Era," *Legality : Jurnal Ilmiah Hukum* 28, no. 2 (2020): 134, <http://dx.doi.org/10.22219/ljih.v28i2.12665>.

² Mikho Ardinata, "Tanggung Jawab Negara terhadap Jaminan Kesehatan dalam Perspektif Hak Asasi Manusia," *Jurnal HAM* 11, no. 2 (2020): 319–33, <http://dx.doi.org/10.30641/ham.2020.11.319-332>.

³ Nurika Falah Ilmania dkk., "Tanggung Jawab Yang Lahir Dari Kewajiban Atas Kesehatan Masyarakat Di Masa Pandemi Covid-19 Dalam Perspektif HAM (Hak Asasi Manusia)," *Yurispruden: Jurnal Fakultas Hukum Universitas Islam Malang* 5, no. 1 (2022): 90, 1, <https://doi.org/10.33474/yur.v5i1.14078>.

⁴ Asman Abnur, "Analysis on BPJS Kesehatan from Various Disciplines," *Global Review of Islamic Economics and Business* 2, no. 3 (2015): 159, <https://doi.org/10.14421/grieb.2015.023-01>.

⁵ Irfan Sazali Nasution dkk., "Kebijakan Kesehatan di Indonesia : Tinjauan , Tantangan , dan Rekomendasi Fakultas Kesehatan Masyarakat , Universitas Islam Negeri Sumatera Utara," *Vitamin: Jurnal Ilmu Kesehatan Umum* 2, no. 3 (2024): 195–206, <https://doi.org/10.61132/vitamin.v2i3.509>.

⁶ Frita Ayu Pribadi, "Analysis of Health Financing Principles in Supporting Universal Health Coverage in Indonesia: Literature Review," *JPH Recode* 8, no. 1 (2024): 78–86, <https://doi.org/10.20473/jphrecode.v8i1.41664>.

⁷ Retno Kus Setyowati, "Sistem Jaminan Kesehatan yang Memenuhi Hak-Hak Kepesertaan," *Justice Voice* 1, no. 1 (2022): 1–9, <https://doi.org/10.37893/jv.v1i1.27>.

studies focus on the technical and structural aspects of the implementation of JKN, but have not touched on the juridical-constitutional dimension in the context of policies that give health privileges to the political elite. This gap indicates that no study has comprehensively explored the legitimacy and fairness of the exclusive health insurance policy for retired ministers. Therefore, the novelty of this research lies in an in-depth analysis of Presidential Regulation 121/2024 from the perspective of social justice and state financial accountability that has not been adequately studied in previous research.

The BPJS Kesehatan deficit, which reached 7.14 trillion rupiah in 2024, after five years of recording a surplus, is a serious signal of the limited state fiscal capacity in ensuring the equitable fulfilment of basic health services for all citizens.⁸ In this limited fiscal condition, the policy of allocating public budgets to ensure the health of retired ministers, as stipulated in Presidential Regulation 121/2024, has caused significant and questionable fiscal priority inequality. This imbalance in budget allocation not only reflects policy deviations from the constitutional mandate but also has the potential to undermine the state's financial accountability and reinforce public perception of elitist and exclusive governance practices. If this policy remains uncorrected, the

principle of good governance and the continuity of public health programs, which are the constitutional right of every citizen, are at stake. Therefore, there is an urgent need to fill the void of a study that comprehensively examines the constitutionality of health insurance policies for retired ministers, especially in the context of deviations from the principles of social justice and state financial accountability that have not been touched much in the literature on constitutional law and public policy.

Presidential Decree 121/2024 indicates a substantial incompatibility with the hierarchy of legal norms as stipulated in Law Number 12 of 2011, as it does not align with the principles of social justice guaranteed by the constitution. This is reflected in the existence of policy alignment with certain groups and is contrary to the general principles of good governance (AUPB), especially the principle of justice and the prohibition of abuse of authority in the management of state finances. The granting of privileges in the form of health insurance to retired ministers without a basis for substantive justice creates a form of fiscal discrimination that is contrary to the principle *of equal treatment under the law*. In addition, this policy has implications for violations of the principles of transparency, accountability, efficiency, and effectiveness in the use of the

⁸ Anggara Pernando, "BPJS Kesehatan Defisit Rp7,14 Triliun, Kenaikan Iuran Disebut jadi Solusi Selamatkan JKN," *Bisnis.com*, Jakarta, 2025.

State Revenue and Expenditure Budget (APBN) as stipulated in Article 3 paragraph (1) of Law Number 17 of 2003 concerning State Finance (Law 17/2003), which is legally a fundamental issue and urgent to be tested through constitutionality testing.

This research uses a normative juridical method to examine the legality and opportunities for *judicial review* of Presidential Regulation 121/2024, focusing on the principles of social justice in the constitution and the principle of accountability in state financial management. The approaches used include a statute *approach* to examine the position of the Presidential Regulation in the national legal norm system, a *conceptual approach* to explore the meaning and implications of the concept of social justice, the legitimacy of public policy, and the principles of good governance in the context of state administrative law, as well as a *case approach* by highlighting the phenomenon of the general public's limitations in accessing BPJS Kesehatan services as a comparison to the provision of health insurance facilities for retired ministers. Legal materials are obtained through library *research*, which includes analysis of primary legal materials in the form of the 1945 Constitution of the Republic of Indonesia, Law 17/2003, and Presidential Regulation 121/2024, as well as secondary legal materials, including academic literature and relevant scientific journals. The analysis

was carried out in a descriptive-qualitative manner to systematically describe the legal and social implications of the policies being studied.

This study analyses the suitability of health insurance arrangements for retired ministers with the principles of social justice within the framework of the Indonesian constitution. The study is also directed at the aspect of state financial accountability in the implementation of the policy, based on the principles of fair and efficient public budget management. The results of the analysis are expected to provide a strong scientific basis for the preparation of more equitable and accountable policy recommendations in the distribution of national health resources. The findings of this study are also aimed at strengthening constitutional arguments in an effort to submit a *judicial review* of Presidential Regulation 121/2024 to ensure state financial governance that is in favor of the welfare of all Indonesian people.

RESULTS AND DISCUSSION

The Constitutionality of Retired Ministers' Health Insurance Based on the Principle of Social Justice

Presidential Decree 121/2024 has triggered a significant public debate regarding fairness in the distribution of state resources. This policy allocates state budget funds to provide health insurance to former ministers and cabinet secretaries and their spouses

(husbands/wives) without considering their actual financial condition. This problem becomes even more crucial when it is associated with the constitutional mandate on social justice mandated by the 1945 Constitution of the Republic of Indonesia. The Indonesian Constitution expressly emphasises that state resources must be used for the welfare of all people, not certain groups that are already relatively prosperous.⁹ Therefore, an in-depth evaluation is needed so that public policies do not conflict with the fundamental values of the state.

Articles 33 and 34 of the 1945 Constitution of the Republic of Indonesia explicitly mandate the state to prioritise the welfare of the people through a fair distribution of resources.¹⁰ In this framework, the principle of social justice requires alignment with the community groups that most need state assistance. The state has a constitutional obligation to ensure that any budget policy reflects the priorities of the interests of the people as a whole.¹¹ The implementation of social justice requires

proportionality in the allocation of resources based on the actual needs of the community. Policies that grant privileges to certain groups without considering their objective needs may be contrary to the Constitution's mandate. This principle also affirms that there should be no discrimination in the provision of public services based on social status or position. Thus, every public policy must be tested for conformity with the values of social justice contained in the Constitution.¹²

Retired ministers and high-ranking state officials generally have much better financial conditions than the majority of Indonesians. This group typically has access to a variety of sources of income, including retirement, savings, and investments that are adequate to meet their health needs. In contrast, poor and vulnerable groups often struggle to access quality basic health services.¹³ In this context, the provision of free health insurance to relatively established groups creates a paradox in the distributive justice system. The limited allocation of state resources should be prioritised to help those who really need it.¹⁴

⁹ Wentri Merdiani dkk., "Peran Hukum Dalam Peningkatan Kesejahteraan Melalui Ekonomi Berbasis Keadilan," *Res Nullius Law Journal* 7, no. 1 (2025): 64, <https://doi.org/10.34010/rnlj.v7i1.15524>.

¹⁰ Novi Eka Kusuma Putri dkk., "Urgensi Kebijakan Pendanaan Jaminan Kesehatan Masa Pandemi Covid-19 di Indonesia Menurut Undang-Undang Nomor 40 Tahun 2004 Tentang Sistem Jaminan Sosial Nasional (SJSN)," *Perspektif Hukum*, 13 April 2022, 34, <https://doi.org/10.30649/ph.v22i1.109>.

¹¹ Muhamad Habibullah Ar dkk., "Kewenangan Dan Tanggung Jawab Pemerintah Dalam Hukum Tatanegara," *Hutanasyah: Jurnal Hukum Tata Negara* 3, no. 2 (2025): 92, <https://doi.org/10.37092/hutanasyah.v3i2.1004>.

¹² Mawardi dkk., "Analisis Hukum Tentang Peran Mahkamah Konstitusi dalam Pengujian Perundang-Undangan," *Jurnal Kolaboratif Sains* 8, no. 2 (2025): 1258, <https://doi.org/10.56338/jks.v8i2.7141>.

¹³ Andi Atssam Mappanyukki dan Haeril, "Hambatan Akses Pelayanan Kesehatan bagi Kelompok Marginal: Literature Review," *Prosiding Seminar Nasional UNM* 2 (2024): 199.

¹⁴ Anissa Nur Silvia dan Rita Myrna, "Peran Masyarakat Dalam Proses Perencanaan Anggaran Publik Untuk Meningkatkan Akuntabilitas Dan Efektivitas Penggunaan Dana Publik," *Edunomika* 08, no. 01 (2023): 1, <https://doi.org/10.29040/jie.v8i1.11145>.

This inequality is even more striking when, in 2022, it was recorded that as many as 26.36 million Indonesians are still living in poverty, struggling to meet their basic needs, including access to decent health services.¹⁵ Therefore, policy priorities should reflect the state's commitment to equitable access to public services.

This treatment gap becomes even more apparent when compared to the National Health Insurance (JKN) system that serves the general public. People are required to pay BPJS Kesehatan contributions to access health services, whereas retired ministers receive similar facilities without contributing from their personal funds. This disparity in treatment creates a discriminatory system of access to health services. Ordinary citizens must bear the financial burden to obtain health insurance, while political elites enjoy facilities without any financial obligations. Such inequality can lead to widespread public dissatisfaction, as it is viewed as unfair. Systematic discrimination like this can erode public trust in justice within public policy. The principle of equality before the law should also be upheld in access to public

services, without granting special treatment based on political status or position.¹⁶

The Indonesian Constitution guarantees that all citizens have equal rights to health services without discrimination based on social or economic status.¹⁷ In the context of the Indonesia Health Development Program, it is essential to have such an integrative implementation by emphasising three priority aspects of national health development, which consist of the Application of a Healthy Paradigm, Strengthening Health Services, and National Health Insurance (NHI) as the objects and subjects of health development, the public stakeholders and the community participate synergistically in supporting the implementation.¹⁸ However, this policy actually creates a system of privileges that is contrary to the principle of constitutional equality. The granting of privileges based on political positions in the past without considering actual needs is a form of systematic discrimination. This creates a hierarchy in access to public services that cannot be justified in a just democratic system.

¹⁵ Aris Sarjito, "Dampak Kemiskinan terhadap Akses Pelayanan Kesehatan di Indonesia," *JISPAR: Jurnal Ilmu Sosial, Politik dan Pemerintahan* 13, no. 1 (2024): 398, <https://doi.org/10.37304/jispar.v13i1.10520>.

¹⁶ Endang Wahyati Yustina dan Yohanes Budisarwo, *Hukum Jaminan Kesehatan (Sebuah Telaah Konsep Negara Kesejahteraan Dalam Pelaksanaan Jaminan Kesehatan)* (Universitas Katolik Soegijapranata, 2020), 34.

¹⁷ Iwan Riswandie, "Perlindungan Hukum bagi Masyarakat Marginal dalam Perspektif Asas 'Equality Before The Law,'" *SULTAN ADAM: Jurnal Hukum dan Sosial* 1, no. 2 (2023): 299, <https://doi.org/10.71456/sultan.v1i2.545>.

¹⁸ Rr. Herini Siti Aisyah dkk., "The Community Empowerment Policy to Lead A Clean and Healthy Life in Indonesia," *Sriwijaya Law Review* 7, no. 1 (2023): 176, <https://doi.org/10.28946/slrev.Vol7.Iss1.1367.pp173-188>.

The state should play the role of a guarantor of equality, not a creator of inequality through policies that are biased towards certain groups. Violations of this principle of equality can reduce the legitimacy of public policy and public trust in the political system.¹⁹ The implementation of fair policies should reflect the state's commitment to mutually agreed democratic and constitutional values.

Furthermore, this policy risks creating the perception that the state pays more attention to the interests of the political elite than ordinary people, which can undermine the legitimacy of the government in the eyes of the public. When individuals struggling to pay health contributions amid challenging economic conditions feel they are mistreated by policies that privilege certain groups, it can trigger social instability. In the long term, policy inequality like this can harm social cohesion and political stability. A government that loses the trust of the people will find it difficult to implement other strategic policies.²⁰ Political legitimacy is highly dependent on the public's perception that the government acts fairly and prioritises the

common interest.²¹ Therefore, public policy must always consider its impact on public trust and support.

As a solution for realising social justice, the government can consider the implementation of a *means-testing* system to evaluate the actual financial condition of retirees before providing health insurance. The criteria for beneficiaries should be based on objective needs, not on past political status or position. Retirees who are financially unable to afford it can be given health assistance. At the same time, those who are financially able should bear their own health costs or pay contributions like the general public. Transparency in the determination of criteria and the beneficiary selection process is also critical to ensure policy accountability.²² The government can allocate the funds originally allocated for this policy to more inclusive and far-reaching health programs. A more equitable approach will increase the effectiveness of the use of state budgets and strengthen the legitimacy of public policy.

From a constitutional perspective, this policy also has the potential to be submitted

¹⁹ Muhammad Sawir dkk., "Evaluasi Penerapan Prinsip Good Governance dalam Pengelolaan Anggaran Daerah," *Journal of Public Policy* 1, no. 1 (2025): 12.

²⁰ Nedia Martha Resmadiktia dkk., "Pertanggungjawaban Pemerintah dalam Mewujudkan Good Governance sesuai Hukum Administrasi Negara," *Jurnal Ilmiah Wahana Pendidikan* 9, no. 11 (2023): 692, <https://doi.org/10.5281/zenodo.8097882>.

²¹ Sumardi, *Pengantar Ilmu Pemerintahan (Konsep, Teori, dan Aplikasinya)*, Cet. 1 (Tahta Media Group, 2025), 12.

²² Dyah Purbaningrum dan Hendri Hermawan Adinugraha, "Transformasi Kebijakan Publik: Menyiasati Ketidaktepatan Sasaran Bantuan Sosial Di Desa Pringsurat Untuk Kesejahteraan Masyarakat Yang Lebih Baik," *Jurnal Pembangunan Dan Kebijakan Publik* 15, no. 02 (2024): 40, <https://doi.org/10.36624/jpkp.v15i2.116>.

for judicial review to the Supreme Court. Alleged violations of the principles of social justice in Article 33 and Article 34 of the 1945 Constitution of the Republic of Indonesia can be the basis for a lawsuit to test its constitutionality.²³ The Supreme Court has the authority to test laws and regulations against the law, ensuring that policies like Presidential Regulation 121/2024 do not conflict with constitutional principles, particularly those related to social justice and state budget utilisation.²⁴ This constitutional test mechanism is very important as a check and balance in democracy. That way, policies that deviate from the principles of social justice and harm the public interest can be legally corrected. This step also shows that the Indonesian legal system provides corrective space for executive policies that are not in line with the constitution and the spirit of social justice.

State Financial Accountability in Retired Ministerial Health Insurance Based on Public Budget Management

Presidential Regulation 121/2024 reflects the complexity in state financial management in the era of bureaucratic reform, especially in balancing the fulfilment of the rights of retired

state officials with the principle of efficient use of the public budget. The regulation, signed on October 15, 2024, provides health insurance to ministers, cabinet secretaries, and their spouses (husbands/wives) who have completed their duties, with financing sourced from the state budget. In the context of good fiscal governance, this policy raises fundamental questions about the priority of state budget allocation amid limited public resources. The principle of good governance requires that every state expenditure must have a strong justification and be able to provide optimal economic and social benefits for the wider community.²⁵ Therefore, transparency in this policy decision-making process is crucial to maintain the legitimacy of state financial management.

To assess the state's financial accountability for this policy, a multidimensional approach is needed in public budget management. This study focuses on the three main dimensions of fiscal accountability, namely substantive, procedural and outcome accountability, each of which will be analysed to assess the suitability of policies with the principles of good state financial management.

²³ Afrizal Mukti Wibowo dkk., *Pengantar Hukum Indonesia: Teori, Praktik, dan Transformasi*, ed. oleh Fakhry Amin (PT. Sada Kurnia Pustaka, 2025), 85.

²⁴ Ratu Tasya Salsabila dkk., "Analisis Kewenangan Antara Mahkamah Agung dengan Komisi Yudisial dalam Pengawasan Hakim Berdasarkan Peraturan Perundang-Undangan," *Limbago: Journal of Constitutional Law* 4, no. 1 (2024): 71, <https://doi.org/10.22437/limbago.v4i1.18035>.

²⁵ Citranu, "Implementasi Prinsip Good Governance Dalam Pemerintahan Desa Untuk Mencegah Penyalahgunaan Dana Desa," *Belom Bahadat: Jurnal Hukum Agama Hindu* 11, no. 2 (2021): 36, <https://doi.org/10.33363/bb.v11i2.716>.

Responsibilities in the management of the public budget are not only legal-formal, but also include political, administrative, and social accountability to the community as the holder of budget sovereignty.²⁶

From the perspective of substantive accountability in public budget management, the application of the principle of efficiency in state financial management requires that every rupiah issued from the state budget has a maximum impact on the welfare of the community.²⁷ However, in terms of efficiency, this policy tends not to meet these criteria because its targets are limited to elite groups with relatively adequate financial capabilities. The budget allocation for this group can be considered a gap in public resources, as the funds could be redirected to health programs serving the poor or disadvantaged areas.²⁸ Given Indonesia's limited fiscal space, the use of the budget for a small group of retired ministers could reduce the government's capacity to finance more urgent and pro-people programs. Therefore, it is important to reassess the conformity of this policy with constitutional principles in the

management of state finances, especially related to the fulfilment of social justice and fiscal accountability, to ensure that the allocation of the public budget does not deviate from the mandate of the constitution.

Substantive accountability is also closely related to fiscal sustainability. Law 17/2023 requires consideration of fiscal sustainability as an indicator of long-term stability in state financial management.²⁹ However, this policy creates mandatory and difficult expenditures to reduce in the future, because its status is determined through presidential-level regulations and concerns the rights inherent in retired state officials. These characteristics of expenditure can threaten the government's fiscal flexibility in dealing with the dynamics of development needs or changes in economic conditions. Currently, the state budget has been burdened by various mandatory expenditures such as debt interest payments, energy subsidies, and employee spending.³⁰ The additional burden of this policy could narrow the remaining fiscal space. Thus, this policy poses serious problems for substantive accountability because it weakens fiscal

²⁶ Bambang Hermawan, "Penilaian Barang Milik Negara Sebagai Bentuk Transparansi Publik," *Iqtishaduna: Jurnal Ilmiah Mahasiswa Hukum Ekonomi Syariah* 6, no. 3 (2025): 800, <https://doi.org/10.24252/iqtishaduna.vi.55444>.

²⁷ Yanuar Rachmansyah Djoko Waluyo dan Himawan Arif Sutanto, *Manajemen Keuangan Sektor Publik*, Cet. 1 (CV. Nulis Hemat Indonesia, 2025), 189.

²⁸ Siti Ahyuni dan Hady Sutjipto, "Efektivitas Mandatory Spending Fungsi Kesehatan dan Dampaknya Terhadap Derajat Kesehatan Masyarakat di Provinsi Papua," *Social, Ecology, Economy for Sustainable Development Goals Journal* 1, no. 1 (2023): 25, <https://doi.org/10.61511/seesdgj.v1i1.2023.158>.

²⁹ Amanda Mutiara dkk., "Peran Kebijakan Fiskal Dalam Mendukung Stabilitas Ekonomi Makro," *Jurnal Ilmiah Ekonomi dan Manajemen* 2, no. 7 (2024): 224, <https://doi.org/10.61722/jiem.v2i7.1868>.

³⁰ Zakiyatul Miskiyah dkk., "Kebijakan Fiskal dalam Perspektif Ekonomi Makro Islam," *Istithmar: Jurnal Studi Ekonomi Syariah* 6, no. 1 (2022): 69, <https://doi.org/10.30762/istithmar.v6i1.33>.

flexibility and threatens long-term stability. Therefore, it is crucial to implement fiscal rules that can control the growth of mandatory expenditures to maintain fiscal sustainability in the long term.³¹

From the perspective of results accountability, the principle of distributive justice in public budget management demands a proportionate allocation of resources based on needs. It provides the most significant benefits to the communities most in need.³² The health insurance policy of retired ministers has the potential to violate the principle of distributive justice because it allocates public funds to groups that are economically relatively capable. In the context of health, there are still millions of Indonesians who do not have adequate access to basic health services, while the budget is allocated to the elite. Distributional impact analysis shows that these policies can widen the gap in access to quality health services between elites and the general public. For this reason, the application of proportional contributions from retired ministers who are still financially capable can be a mechanism to improve distributive justice. In addition, the

reallocation of the budget for this program should be diverted to strengthen Universal Health Coverage (UHC) to expand the benefits for the community as a whole.³³ Thus, this policy is not in line with the principle of accountability of results that emphasises proportionality and fairness in the use of the public budget.

This policy also has implications for the accountability of results related to macroeconomic stability and state debt. The addition of new spending posts in the midst of a narrow fiscal space will increase the pressure on the state budget deficit. If the deficit continues to be financed through the issuance of government bonds, the debt interest burden will be greater in the future and this will reduce national fiscal flexibility.³⁴ This risks creating a fiscal dependence on debt financing, which directly undermines the country's financial accountability. For this reason, this policy should be evaluated through the Medium-Term Expenditure Framework (MTEF) to

³¹ Bonaraja Purba dkk., *Ekonomi Publik: Teori dan Penerapan Kebijakan Fiskal*, Cet. 1 (Yayasan Kita Menulis, 2024), 16.

³² Ade Azharie, "Pemanfaatan Hukum sebagai Sarana untuk Mencapai Keadilan Sosial," *Lex Aeterna Law Journal* 1, no. 2 (2023): 74, <https://doi.org/10.69780/lexaeternalawjournal.v1i2.20>.

³³ Hapsari Inawati Susanto dan Suparna Wijaya, "Fasilitas Pajak Pertambahan Nilai Dibebaskan Atas Penyerahan Jasa Pelayanan Kesehatan Medis," *Journal of Law, Administration, and Social Science* 4, no. 5 (2024): 844, <https://doi.org/10.54957/jolas.v4i5.918>.

³⁴ Nesi Surdikina dkk., "Strategi Pengelolaan Utang Negara: Menjaga Stabilitas Ekonomi di Tengah Ketidakpastian Global," *AT-TAKLIM: Jurnal Pendidikan Multidisiplin* 2, no. 1 (2025): 165, <https://doi.org/10.71282/at-taklim.v2i1.41>.

help plan and control the fiscal impact of the policy gradually.³⁵

The dimension of procedural accountability in public budget management requires transparency, which is an essential pillar in building public trust in the government and ensuring accountability in the use of public funds.³⁶ However, this policy lacks public participation and data disclosure, both in the policy-setting mechanism and in cost projections and fiscal impacts. Article 2 paragraph (1) of Law Number 14 of 2008 concerning Public Information Disclosure (Law 14/2008) mandates that every information related to state financial management must be accessible to the public. Therefore, publishing real-time data on the program's budget realisation, including the cost per beneficiary for the type of health services provided, is necessary to ensure accountability. Public participation in this policy evaluation is also essential to strengthen legitimacy and minimise the risk of negative perceptions of the use of public funds. In addition, open audits and regular

performance reporting can improve the credibility of state financial management.

In addition to transparency, procedural accountability also requires strengthening governance through comprehensive institutional reforms. One of the strategic steps is to establish a *steering committee* involving various stakeholders, including civil society, to strengthen oversight and policy legitimacy. The use of an integrated digital system between agencies will prevent overlap and improve coordination of program implementation.³⁷ In addition, strengthening the capacity of the apparatus through training in the field of public financial management and health administration needs to be carried out as the foundation for the implementation of quality programs.³⁸ This policy also needs to be equipped with a periodic evaluation mechanism to remain adaptive to changes in fiscal conditions and national development priorities.

State financial accountability in this policy requires an effective internal supervision and control system.³⁹ Thus, the

³⁵ Suwarni dan Siti Nuraini, "Keterkaitan Implementasi Anggaran Berbasis Kinerja Dengan Akuntabilitas Program Prioritas Nasional Kementerian Agraria Dan Tata Ruang/ Badan Pertanahan Nasional," *Governance: Jurnal Ilmu Pemerintahan* 9, no. 2 (2021): 100, <https://doi.org/10.33558/governance.v9i2.3166>.

³⁶ Idah Rosidah dkk., "Transparasi Dan Akuntabilitas Dalam Pencegahan Fraud Diinstansi Pemerintah (Studi Kasus Kantor Kec. Ciwidey)," *Jurnal Ekonomi Manajemen Bisnis Dan Akuntansi : EMBA* 2, no. 1 (2023): 140, <https://doi.org/10.59820/emba.v2i1.110>.

³⁷ Siti Alifa Fentiani dkk., "Peran Kesejahteraan Sosial Dalam Meningkatkan Kualitas Hidup Masyarakat," *Jurnal Ilmu Kesejahteraan Sosial: HUMANITAS* 7, no. 1 (2025): 8, <https://doi.org/10.23969/humanitas.v7i1.21718>.

³⁸ Jinan Abdul Kadir Bajamal dkk., "Peran Sosialisasi Pengelolaan Dana Dalam Meningkatkan Realisasi Anggaran," *Journal of Human And Education* 5, no. 1 (2025): 502, <https://doi.org/10.31004/jh.v5i1.2218>.

³⁹ Helin Gusri Mulya dan Eka Fauzihardani, "Pengaruh Kejelasan Sasaran Anggaran, Pengendalian Akuntansi dan Sistem Pelaporan terhadap Akuntabilitas Kinerja Instansi Pemerintah dengan Kepatuhan Terhadap

involvement of independent supervisory institutions is needed to ensure the implementation of policies in accordance with the principles of transparency and accountability. The role of the Audit Board (BPK) as an external auditor must be enhanced through a special mandate to conduct performance audits on the effectiveness and efficiency of this program. The Inspectorate General in relevant ministries should also develop comprehensive internal audit protocols to monitor policy implementation in real-time. The implementation of a risk-based audit approach will allow for the focus of supervision on areas with a high risk of budget waste or abuse. Coordination between supervisory agencies is important so that there is no overlap and that all aspects of program management are optimally monitored. Without a strong supervisory mechanism, this policy is vulnerable to causing legitimacy problems and eroding public trust in the management of the state budget.

Based on the analysis of aspects of state financial accountability, there are several strategic recommendations to improve the quality of this policy management. First, it is necessary to implement a strict means-testing mechanism so that only retired ministers who really need it will benefit. Second, a *co-payment scheme* tailored to each beneficiary's

financial capabilities can help reduce the state budget's burden and encourage a sense of responsibility. Third, a monitoring and evaluation system based on digital technology needs to be developed to ensure transparency and accountability in *real-time*. Fourth, budget reallocations in public health service programs that have a broader impact on the community need to be considered to ensure fairer accountability for results.

Through a multidimensional approach to the principles of fiscal accountability, the substance of the policy is analysed not only in terms of administrative legality but also based on the fairness of resource allocation, efficiency in the use of the budget, and the fiscal sustainability of the state. The emphasis on transparency, supervision, and public evaluation highlights that this policy has not fully met the accountability standards for state financial management set by regulations and good governance principles. Therefore, the implementation of strategic recommendations is an essential part of ensuring that this policy is truly aligned with the principles of public accountability that are oriented towards the interests of the wider community.

CONCLUSION

The regulation of health insurance for retired ministers in Presidential Regulation 121/2024 does not reflect the principles of

Regulasi sebagai Variabel Pemoderasi,” *Jurnal Eksplorasi Akuntansi (JEA)* 4, no. 1 (2022): 193, <https://doi.org/10.24036/jea.v4i1.463>.

social justice as mandated by the 1945 Constitution of the Republic of Indonesia. This policy creates inequality because the state budget is allocated to an established elite group, while vulnerable communities are neglected. To ensure social justice, this policy should be revised taking into account the economic needs and capabilities of the beneficiaries. The use of the state budget should be prioritized on programs that have a wide impact on the poor and disadvantaged areas. Transparency and accountability in the planning and implementation of health policies need to be strengthened in accordance with the mandate of the constitution. Reform of the social security system is important to ensure a fair distribution of benefits in accordance with constitutional values.

The analysis in this policy also shows that the principles of substantive accountability, procedural, and results have not been optimally fulfilled. Limited public benefits, weak transparency of the process, and unfair distributional impacts prove that this policy deviates from the principle of state financial accountability in the management of the public budget. Therefore, policy reform is needed through feasibility tests, *co-payment* schemes, technology-based supervision systems, and more pro-people budget reallocation. This effort is important so that public policies truly reflect the principles of social justice, budget efficiency, and fiscal

sustainability in accordance with the mandate of the constitution.

SUGGESTION

Based on the findings and juridical analysis of Presidential Regulation Number 121 of 2024, it is recommended that the government immediately review the health insurance policy for retired ministers to ensure its conformity with the principles of social justice guaranteed by the constitution and the principle of accountability in the management of state finances. Policy revision must be carried out through a participatory and transparent legislation mechanism that takes into account the urgency of equitable distribution of health services for all people, not just for elite groups. The government and the House of Representatives need to set objective and proportionate parameters in the provision of state facilities for public positions that have ended, accompanied by policy audits by the BPK and strict supervision from independent institutions such as the KPK and the Ombudsman. In addition, the Supreme Court is expected to accept the testing of norms for this Presidential Regulation to ensure that there are no violations of the hierarchy of laws and regulations and the principle of non-discrimination in public services.

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