

# COVID-19 Summary Update for Indonesia

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STRATEGIC PURCHASING FOR PRIMARY  
HEALTH CARE (SP4PHC) – INDONESIA TEAM

DECEMBER 2020

 SP4PHC  
Strategic Purchasing for  
Primary Health Care

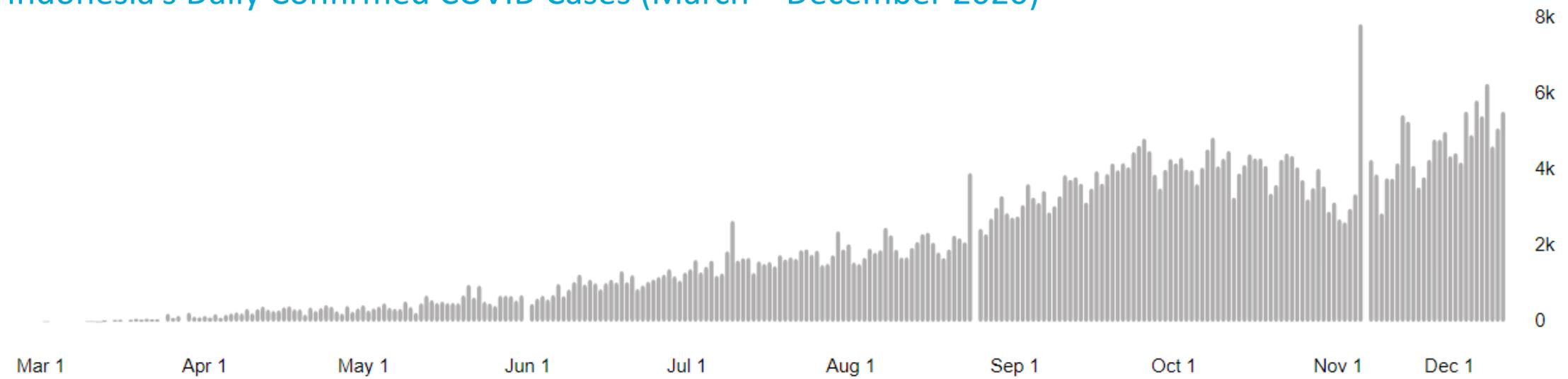


# COVID-19 SITUATION AS OF 3 DECEMBER 2020



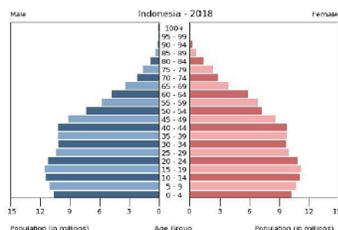
Source: MOH 2020

## Indonesia's Daily Confirmed COVID Cases (March – December 2020)



Source: WHO 2020

# HEALTH SYSTEM CONTEXT



- Indonesia has a total population of 267.7 million people.
  - 67.6% between the ages of 15-64
  - 45% live in urban settings
  - 5.7% live below the poverty line of USD 1.90 per day
- Prior to the pandemic, the country’s national health insurance scheme (JKN) had a **deficit of Rp. 15.5 trillion.**
- There are **4.3 medical doctors per 10,000 people**, while there are 24.1 nursing and midwifery personnel per 10,000 people.
- There are around **1.2 hospital beds per 1,000 people**. The number of critical care beds is smaller at 2.7 per 100,000 people.
- At the end of July 2020, there were 269 laboratories that could perform polymerase chain reaction (PCR) tests
  - All 34 provinces have labs that can run PCR tests, but there is still **unequal distribution of testing capacity** with 50% of the labs located on the island of Java



# THE GOVERNMENT'S INITIAL RESPONSE

## South Tangerang's PSBB Guidelines and Timeline

**PSBB**  
KOTA TANGERANG SELATAN

*Apa sih PSBB itu?*  
PSBB (Pembatasan Sosial Bersekala Besar) adalah upaya untuk membatasi beberapa kegiatan sosial untuk memutuskan rantai penyebaran Virus COVID-19

**MULAI BERLAKU 18 APRIL 2020**

**KOMISI PEMILIHAN UMUM**  
Kota Tangerang Selatan

**Aturan & Pembatasan**

- Keluar rumah wajib menggunakan masker dalam kondisi apapun berkendara maupun jalan kaki
- Bekerja dirumah bila memungkinkan
- Penutupan Area Publik
  - Fasilitas Umum
  - Tempat Hiburan
  - Rumah Ibadah
  - Balai Pertemuan
  - Gedung Olahraga
  - dan area-area yang sering dikunjungi masyarakat
- Kegiatan sosial budaya dibatasi
- Kegiatan diluar ruangan hanya boleh dilakukan max. 5 orang

**Sektor Yang Tetap Beroperasi**

**Sektor Pemerintahan**

- Pusat Pemerintahan
- Kecamatan, Kelurahan Dsb
- Faktor Keamanan Polisi Dll

**Sektor Usaha**

- Kesehatan
- Kebutuhan Pokok
- Kebutuhan Energi, Listrik, Gas, Pom
- Jasa Komunikasi dan Media
- Perbankan / Keuangan
- Kegiatan Logistik dan Dstribusi Barang
- Warung Kecil Toko Kelontong
- Industri Strategis

**Aturan Berkendara**

- Kendaraan roda dua tidak boleh mengangkut penumpang (wajib bermasker)
- Kendaraan roda 4 berkapasitas 4 orang maksimal berisi 3 orang dan kendaraan berkapasitas 6-7 max. berisi 4 orang

kpu\_kotatansel 
 <https://kota-tangerangselatan.kpu.go.id/>
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Source: General Elections Commission for South Tangerang 2020

- Indonesia has opted for a “large-scale social distancing (PSBB)” approach instead of imposing strict lockdown or quarantine measures.
- The guidelines and duration of PSBB vary across regions.
- In Jakarta, PSBB guidelines include limiting gatherings to a maximum of five people, reducing public transportation services, and mandating a work-from-home policy.
- Jakarta’s PSBB started on April 10 and was extended until August 27, 2020.
- The infographic on the left shows how local governments are implementing PSBB and communicating guidelines to citizens.

Source: Bloomberg 2020; Jakarta Post 2020

## THE GOVERNMENT'S INITIAL RESPONSE (CONTINUED)

On April 3, 2020, President Jokowi announced revisions to the 2020 state budget, which reflects a Rp. 405.1 trillion increase in spending to respond to the pandemic.

Breakdown of Indonesia's Revised 2020 Budget		
Category	Budget	Allocation
Healthcare sector	Rp 75 trillion	<ul style="list-style-type: none"> <li>* The purchase of medical equipment such as test kits and ventilators will be prioritized.</li> <li>* Funds will also be used to provide incentives for medical workers including doctors and nurses.</li> </ul>
Social protection	Rp 110 trillion	<ul style="list-style-type: none"> <li>* The budget will prioritize the 10 million families in the family hope program as well as the 15.2 million families in the staple food program.</li> <li>* The budget for the preemployment card program will be raised to Rp 20 trillion from the initial Rp 10 trillion, which will be sufficient to cover 5.6 million laid-off workers, informal workers and micro and small business owners.</li> <li>* Social protection funds will also include free electricity for 24 million customers using 450 KVa and 7 million customers using 900 KVa.</li> </ul>
Tax incentives and credit for businesses	Rp 70.1 trillion	<ul style="list-style-type: none"> <li>* Workers in the manufacturing sector with incomes below Rp 200 million per year will be exempt from income taxes for six months.</li> <li>* Import tax payments will be deferred for six months in 19 manufacturing sectors.</li> <li>* Overpaid taxes will be repaid without an initial audit.</li> <li>* The corporate income tax will be reduced from 25 percent to 22 percent.</li> <li>* Debt payments will be delayed by six months for micro loan credit for businesses affected by COVID-19.</li> </ul>
Economic recovery program	Rp 150 trillion	<ul style="list-style-type: none"> <li>* Credit restructuring and financing for small and medium businesses, among other businesses.</li> </ul>

# THINKWELL AND SP4PHC'S COVID-19 SUPPORT STRATEGY IN INDONESIA

ThinkWell is providing support

- in response to requests from the government (e.g. Office of the Vice President) and other key partners (e.g. USAID Health Financing Activity – HFA)
- based on our core technical capacities, and
- in line with our ongoing work to improve the strategic purchase of primary health care services.

This includes

- **Analytics:** Support costing analyses for expansion of COVID-19 services (partnering with USAID HFA)
- **Policy Support:** Provide recommendations from rapid assessment of how routine family planning (FP) and maternal, newborn, and child health (MNCH) services have been impacted by the COVID-19 response and how the government can mitigate negative consequences
- **Learning:** Document how health financing systems have been impacted by the pandemic response

## ACTIVITY 1: DEVELOPING POLICIES TO MITIGATE IMPACT OF COVID-19 ON ROUTINE SERVICES (FP, MNCH, NUTRITION, AND IMMUNIZATION)

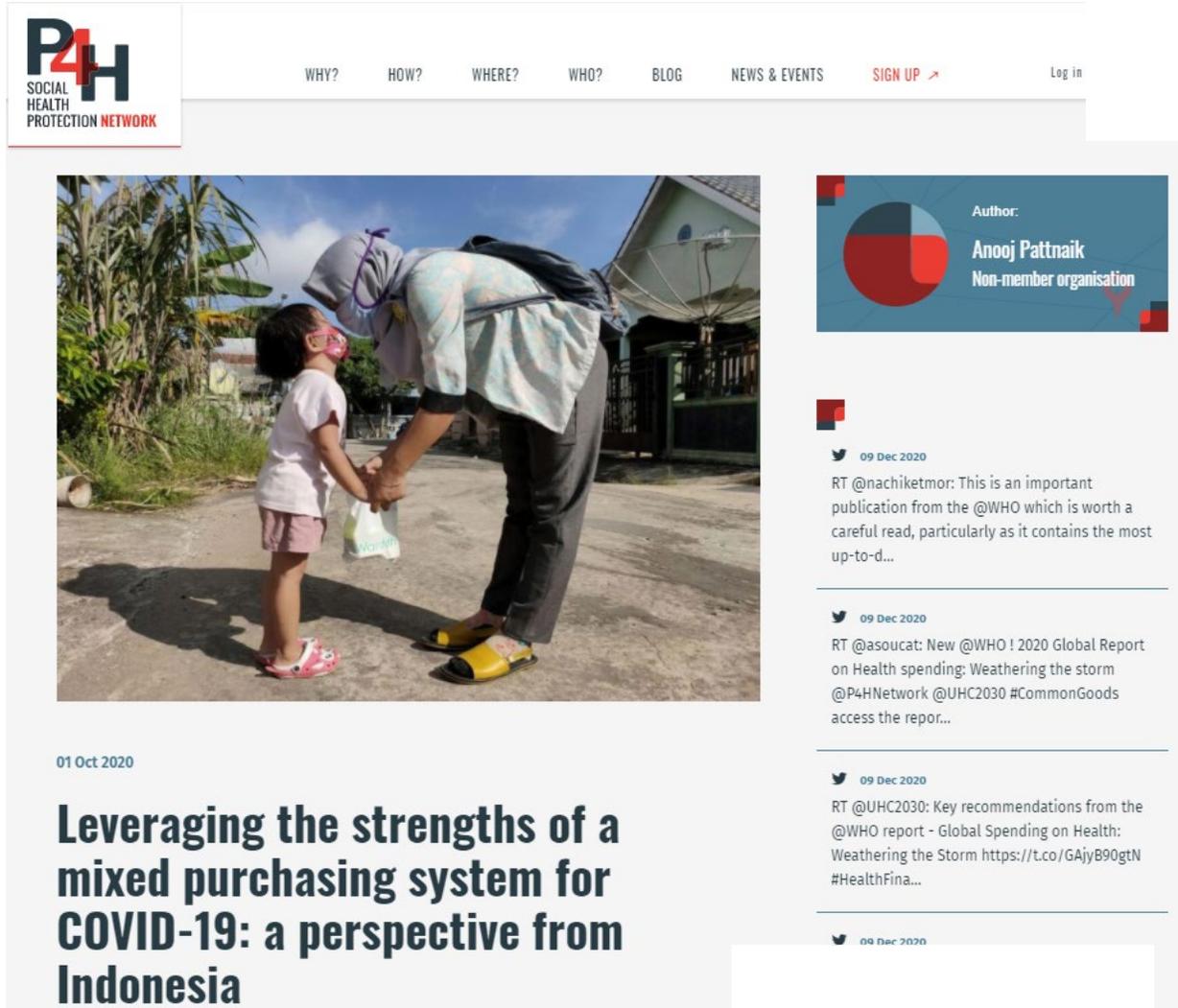
- **Outputs:** Qualitative analysis resulting in set of recommended actions and immediate policy support for various government officials
- **Why it is needed:**
  - Direct request from the Ministry of Health's (MOH) Department of Family Health
  - The entire health system is reorienting towards responding to COVID-19 and there is a risk that essential services will not be provided as needed
  - Officials need to know how the COVID-19 response is impacting funding for essential services in order to mitigate negative consequences as quickly as possible
- **Collaborators:** Office of the Vice President and MOH's Department of Family Health
- **Anticipated end date:** January 2021
- **Significant achievements:**
  - In partnership with the Office of the Vice President, ThinkWell submitted the final report to the MOH and other key government stakeholders in November 2020.
  - ThinkWell gave three presentations at the Indonesian Public Health Association's National Conference on Reproductive Health based on findings from our study in November 2020. Two of our presentation abstracts were recognized as among the ten best conference submissions.

## ACTIVITY 2: COSTING OF COVID-19 TREATMENT SERVICES FROM THE PRIMARY HEALTH CARE LEVEL TO THE HOSPITAL LEVEL

- **Outputs:** Technical support to inform USAID HFA's study
- **Why it is needed:**
  - Government officials need to understand the costs of providing COVID-19 treatment for their citizens to better respond to the crisis
  - In collaboration with the MOH's Center for Health Financing and Insurance (PPJK), USAID HFA is conducting a costing study that focuses on providing treatment for moderate and severe cases of COVID-19
  - Additional expertise from SP4PHC and our local partners is needed to ensure the analysis is robust
- **Collaborators:** Office of the Vice President, MOH PPJK, and USAID HFA
- **Anticipated end date:** January 2021
- **Significant achievements:** From August to November 2020, Prastuti Soewondo (ThinkWell's Country Director in Indonesia) advised USAID HFA on how to improve methods for collecting data and training enumerators. She continues to support USAID HFA by providing technical expertise on the study's analysis, especially on how to use the findings to inform actionable policy recommendations.

# ACTIVITY 3: DOCUMENTING LESSONS FROM THE COVID-19 RESPONSE

- **Outputs:** Blogs submitted to various global health outlets, various resources uploaded to our website, and abstract submissions to future international conferences
- **Why it is needed:**
  - As the COVID-19 pandemic continues to shape the health sector in Indonesia, various lessons have emerged that need to be documented and analyzed to strengthen the country's response to future epidemics
  - Additionally, our team is in a unique position to compare analyses across our 5 project countries. This will enrich the global literature surrounding health systems and health financing by giving specific, in-country experiences to broad observations
- **Collaborators:** SP4PHC teams across all 5 countries and other ThinkWell project teams
- **Anticipated end date:** January 2021
- **Significant achievements:** ThinkWell published a blog on the health financing response to COVID-19 from the MOH and the Social Insurance Administering Body for Health (BPJS-K). The piece is titled "[Leveraging the Strengths of a Mixed Purchasing System for COVID-19: A Perspective from Indonesia](#)" and it was published on October 1, 2020, through the Social Health Protection Network.



**P4H**  
SOCIAL  
HEALTH  
PROTECTION NETWORK

WHY? HOW? WHERE? WHO? BLOG NEWS & EVENTS SIGN UP Log in



01 Oct 2020

## Leveraging the strengths of a mixed purchasing system for COVID-19: a perspective from Indonesia

Author:  
**Anooj Pattnaik**  
Non-member organisation

09 Dec 2020  
RT @nachiketmor: This is an important publication from the @WHO which is worth a careful read, particularly as it contains the most up-to-d...

09 Dec 2020  
RT @asoucat: New @WHO ! 2020 Global Report on Health spending: Weathering the storm @P4HNetwork @UHC2030 #CommonGoods access the repor...

09 Dec 2020  
RT @UHC2030: Key recommendations from the @WHO report - Global Spending on Health: Weathering the Storm <https://t.co/GAjyB90gtN> #HealthFina...

09 Dec 2020

## ACTIVITY 4: ASSESSING MEDICAL SUPPLIES FOR DISTRIBUTION

- **Outputs:** Analytics and participation in discussions between government officials and private medical suppliers
- **Why it is needed:**
  - Direct request from the Office of the Vice President
  - In formulating a response to the pandemic, government officials need to assess hospitals' medical supplies in high-risk areas
  - The government needs help liaising with private medical suppliers to ensure supplies are being distributed to these high-risk areas
- **Collaborators:** Office of the Vice President
- **Anticipated end date:** Completed as of April 2020
- **Significant achievements:** Prastuti Soewondo supported the government during the first few weeks of the pandemic when many hospitals around Jakarta lacked personal protective equipment.

## ACTIVITY 5: DOCUMENTING HOW THE COVID-19 RESPONSE CHANGED PURCHASING AND FUNDING FLOWS IN THE SHORT- AND MEDIUM-TERM

- **Outputs:** Qualitative and quantitative data analyses resulting in actionable policy recommendations on how to improve the current regulations surrounding COVID-19 claims reimbursement at hospitals
- **Why it is needed:**
  - Despite several funding streams from the government to cover COVID-19 patients, there is still low absorption of claim reimbursements in hospitals
  - Analyses of claims data and interviews with key stakeholders are needed to understand what is impacting the low absorption of funds, so the MOH and BPJS-K can improve the regulations and mechanisms for COVID-19 claims reimbursement and better respond to the pandemic
- **Collaborator(s):** District-level experts in Indonesia, Office of the Vice President, and MOH-PPJK
- **Anticipated end date:** March 2021
- **Significant achievements:** This study was undertaken by SP4PHC in October 2020 due to the MOH and other line ministries expressing interest in the topic. In November 2020, the study obtained ethical clearance and was approved to proceed.

## ACTIVITY 6: ASSESSING THE IMPACT THE COVID-19 BUDGET REFORMS HAD ON PUBLIC FINANCIAL MANAGEMENT (PFM) AT THE DISTRICT LEVEL

- **Outputs:** Analytics in PFM practices resulting in actionable policy recommendations for national- and district-level government officials on how to improve budget flexibilities and PFM efficiencies to better respond to crises
- **Why it is needed:**
  - The MOH expressed a need for this study
  - An assessment on how the national government's budget reformulation has impacted public health financing is needed, especially since it affects how subnational governments can continue responding to the pandemic
- **Collaborators:** Indonesian research organization (to be determined), district-level government stakeholders, and MOH-PPJK
- **Anticipated end date:** June 2021
- **Significant achievements:** This study was undertaken by SP4PHC in October 2020 due to the MOH and other line ministries expressing interest in the topic. As of November 2020, ThinkWell is identifying a local research organization to partner with and has finalized the scope of work.

**Recommended Citation:** ThinkWell Strategic Purchasing for Primary Health Care. 2020. "COVID-19 Summary Update for Indonesia." Washington, DC: ThinkWell.

Strategic Purchasing for Primary Health Care (SP4PHC) is a project that ThinkWell is implementing in partnership with government agencies and local research institutions in five countries, with support from a grant from the Bill & Melinda Gates Foundation. For more information, please visit our website at <https://thinkwell.global/projects/sp4phc/>. For questions, please write to us at [sp4phc@thinkwell.global](mailto:sp4phc@thinkwell.global).

