

PS 1.1



| BACKGROUND

Health financing is one of the building blocks of health systems and digital health technologies are changing the way it operates. The functions of health financing are typically are typically characterised as revenue raising (sources of funds, including government budgets, compulsory or voluntary prepaid insurance schemes, direct out-of-pocket payments by users, and external aid), pooling of funds (the accumulation of prepaid funds on behalf of some or all of the population), and purchasing of services (the payment or allocation of resources to health service providers).

Digital technologies can change the nature of business processes and interactions between actors. They offer efficiencies to streamline processes and reduce fraud, increase revenue collections through mobile wallet applications, for example and can potentially enhance equity by extending access to care through telehealth, for example, if covered by public insurance schemes. Strategic purchasing can utilise health technology assessment (HTA) and availability of data can enable evidence informed decisions. At the individual level, digital technologies for health allows households to better manage their money using technologies. However, there are also risks such as potentially increasing inequities, requirements for large up-front investments, and potential fragmentation. Further data security and interoperability of systems are key concerns. These challenges require innovative solutions that can pave the way for use of digital health technologies for health financing and ensure that financing for health can be sustainable, adequate, fair and efficient.

The key issues will revolve around application of digital health technologies across the functions of health financing (collection, pooling and purchasing). These are:

- Use of AI for audits or fraud, waste and abuse detection in health financing
- Health Technology Assessment (HTA) of innovative health technologies
- Smart payment solutions for health financing for payers and providers
- Efficiencies related to digitalisation of processes

| OBJECTIVES

The overarching objective is to identify how digital health technologies can enhance the effectiveness and sustainability of health financing.

- To demonstrate the potential of digital health technologies for health financing through case studies;
- To identify challenges and devise potential solutions to harness these technologies effectively to achieve Universal Health Coverage and the Sustainable Development Goals;
- To identify areas for collaboration across and outside the health sector.

Expected outcomes

- Increased understanding of key issues on the role of health technologies on financing
- Enhanced networks to collaborate on key issues





Panelist

Trisna Sari

Officer

BPJS Kesehatan Indonesia

BIOGRAPHICAL SKETCH

NAME: Trisnasari

eRA COMMONS USER NAME (credential, e.g., agency login): trisnasari

POSITION TITLE: Primary Benefit Assurance Policy Officer

EDUCATION/TRAINING/INSTITUTION AND LOCATION/ DEGREE (if applicable)/ Completion Date MM/YYYY/FIELD OF STUDY:

University of Sumatera Utara/MD/Dec-2009/Medicine Mahidol University/MPHM/Dec-2009/Primary Health Care

A. Personal Statement

I am a primary benefit assurance policy officer who works in the Social Security Administrator for Health in Indonesia (BPJS Kesehatan). Working in the social insurance industry at the policy-making level, I have a good understanding of the health service financing system, which is reinforced by specialized training in areas like advanced health finance and data-driven policymaking. I am accustomed to using data to analyze issues before offering suggestions for bettering health service programs. In addition, I and my team collaborate with various stakeholders to enhance the health service system through social insurance, including those at the ministry, institutional, and regional government levels and others. My responsibilities include managing referral systems and payment systems for primary healthcare facilities. In addition, I and my team are in charge of creating social insurance plans for the management of chronic diseases. In 2022, I have the opportunity to continue my education majoring in primary health care at Mahidol University and deepen my managerial knowledge. Currently, I and my team are developing a digital system to integrate primary care and referral services in order to preserve the continuity of medical care. In conclusion, I am motivated, knowledgeable, and equipped to fulfill my responsibilities in creating programs and enhancing the healthcare system.

B. Positions and Scientific Appointments

2023 - Present Primary Benefit Assurance Policy Officer, BPJS Kesehatan
2022 - 2023 Learning Implementation Officer, BPJS Kesehatan
2016 - 2022 Claims Verification Officer, BPJS Kesehatan
2014 - 2016 General Practitioner, Mampang Prapatan Regional Hospital
2011 - 2014 General Practitioner, Persahabatan Central Hospital
2009 - Present Member, Indonesian Medical Association

C. Contributions to Science

1. My article focused on the difficulties in implementing Social Health Insurance (SHI), particularly in low- and middle-income nations that lacked prepayment systems and risk-pooling tools and resources to ensure access to high-quality medical care. One of the most popular methods for raising money and combining resources to cover medical expenses is the implementation of social health insurance, which has assisted numerous nations in achieving universal health coverage. Despite its many benefits, the nation may face financial difficulties as a result of the imbalance between the high cost of health care and the low income from SHI participants' noncompliance with payment obligations. This publication gives policymakers insight into how to increase SHI participants' compliance in paying contributions by highlighting the fact that participants' non-compliance is not solely influenced by economic conditions, but also by motivating factors and opportunities.

Trisnasari, Laosee O, Rattanapan C, Janmaimool P. Assessing the determinants of compliance with contribution payments to the National Health Insurance Scheme among informal Workers in Indonesia. International Journal of Environmental Research and Public Health. 2023 Nov 30;20(23):7130.