



Legal Analysis of Government Regulation Number 28 of 2024 Concerning Foreign Doctors' Workforce in Indonesia

Tri Pamungkas Ippilianingrum Irawan¹, Fajar Rachmad Bi Miarsa², Dhofirul Yahya , Ahmad Heru Romadhon⁴.

¹Faculty of Law, Maarif Hasyim Latif University, Indonesia, tripamungkasirawan@yahoo.com

²Faculty of Law, Maarif Hasyim Latif University, Indonesia, fajar_rachmad@dosen.umaha.ac.id

³Faculty of Law, Maarif Hasyim Latif University, Indonesia, dhofirul_yahya@dosen.umaha.ac.id

⁴Faculty of Law, Maarif Hasyim Latif University, Indonesia, heru-romadhon@dosen.umaha.ac.id

Corresponding Author: tripamungkasirawan@yahoo.com¹

Abstract: Research purposes This focus on procedures in bring in doctor foreigners in Indonesia, and regulations doctor foreign For area remote areas in Indonesia. Research use type study legal normative with approach legislation . Research results This show that Procedure in bring in doctor foreigners in Indonesia based on Constitution immigration that is must have a valid visa the goal is to get sign sign in , and permission stay . As for the procedure Submission Permission Employing Foreign Workers including : submission of RPTKA , submission of Permission Employing Foreign Workers (IMTA), Compensation Fund Payment , IMTA Approval Process , ITAS Management , and Reporting and Monitoring . As for permission practice doctor the must equipped with a number of condition administration includes : SIP, SIK, STR, and IMTA. Regulations The Indonesian government in bring in doctor foreign Still Not yet it is said ready , where Not yet There is regulation special that regulates placement doctor foreign in the regions left behind . PP Health only arrange that power health foreign Can practicing in Indonesia based on request facility service health . With thus mechanism distribution doctor foreign the No proactive .

Keyword: Policy Government , Foreign Doctors, Remote Areas

INTRODUCTION

The idea of foreign doctors practicing in Indonesia is actually not new, because it is already stated in Law Number 17 of 2023 concerning Health. In this regulation, only doctors with specialist and subspecialist expertise are allowed to practice in Indonesia (Alinea.id 2024). The presence of foreign doctors needs to be critically evaluated. One concern is the potential for local doctors to be displaced in vertical hospitals or other health facilities. The entry of foreign medical personnel has the potential to cause inequality if the regulations are not implemented properly. Without strict supervision, job opportunities that should be a priority for

domestic doctors could be displaced. This condition could have a negative impact on the enthusiasm and work ethic of local doctors (Dicky Budiman 2024).

The policy of bringing in medical personnel from abroad must consider various aspects comprehensively. "There has been no study on the impact of bringing in foreign doctors on meeting the shortage of specialist doctors in Indonesia. In terms of technical regulations, there are also no regulations that explain in detail the evaluation of the competence of foreign doctors. Previously, the evaluation of the competence of foreign doctors was regulated through the Regulation of the Minister of Health (Permenkes) Number 35 of 2022 concerning the Implementation of the Evaluation of the Competence of Indonesian Health Workers Who Graduated from Abroad and Foreign Health Workers. However, with the enactment of the Health Law since 2023, more up-to-date technical implementing regulations are needed. The regulation on the procurement of Foreign Doctors in Indonesia contained in Government Regulation Number 28 of 2024 concerning Health (PP Kesehatan) is still too general and simple. The PP Kesehatan has several shortcomings that have the potential to cause legal problems in the future. There are several shortcomings in the procurement of Foreign Doctors regulated in Government Regulation Number 28 of 2024 concerning Health. First, Article 658 paragraph 2, this Article states that the utilization of foreign health workers must prioritize Indonesian health workers. This regulation is still unclear about how to prioritize Indonesian health workers.

Second, Article 662 paragraph (3) letter a also causes controversy. This point emphasizes that foreign health workers can practice in Indonesia based on requests from health service facilities. So this regulation has not resolved the problem of the doctor crisis in remote areas. The problem is not resolved because this is based on requests, not based on the Ministry of Health wanting to put them there. This policy also does not explain what happens when there are cases of foreign doctors who receive two requests from health service facilities. For example, a foreign doctor who receives offers from health service facilities in Jakarta and in the interior, of course the doctor will choose the offer in Jakarta. Especially if offered a higher salary. So the need to fill the required health workers is not met because this depends on demand, and foreign health workers seem to be allowed to choose.

METHOD

The types of legal materials in this study as the main legal materials are primary legal materials and secondary legal materials. Primary legal materials use laws and regulations that are relevant to this study, while secondary legal materials are in the form of books, doctrines, and legal journals (Peter Mahmud Marzuki 2024). The method of collecting legal materials in this study was carried out through a literature study using normative analysis techniques.

RESULTS AND DISCUSSION

Procedures for Bringing Foreign Doctors to Indonesia

Procedures and Requirements For Carry out Activity Professions for Foreign Workers

Immigration has the authority to regulate the entry of foreign workers into Indonesia. Immigration law stipulates that every foreign worker who comes to Indonesia must have a visa according to their purpose, an entry mark, and a residence permit. In this regard, the initial process for foreign workers to be able to work in Indonesia is issued by Government Regulation of the Republic of Indonesia Number 34 of 2021 concerning the Use of Foreign Workers. The requirements for employing foreign workers based on Government Regulation of the Republic of Indonesia Number 34 of 2021 concerning the Use of Foreign Workers include:

- 1) company must compile Plan Use of Foreign Workers (RPTKA). this RPTKA must covers reason use of foreign workers, the positions to be filled filled in , the number of foreign workers needed , and plan transfer technology or skill to power Work local.
- 2) The foreign workers must fulfil a number of condition documents , including :
 - a. Passport still valid applies .

- b. Curriculum Vitae (CV), includes experience relevant and appropriate work .
 - c. Official Health Certificate by the authorities health in the country of origin or in Indonesia.
 - d. Color photo in accordance with applicable provision .
- 3) Letter of Appointment , The Company must provide letter a designation that explains position and responsibilities answer TKA inside company . This letter must also to list duration contract work and other relevant details .
- 4) Temporary Residence Permit (ITAS). For can living and working in Indonesia, foreign workers must own Temporary Residence Permit (ITAS) from Immigration take out this ITAS important For ensure legality the existence of foreign workers during they working in Indonesia.

As for the Procedure Submission Permission Employing Foreign Workers including:

- 1) Submission , First Step in this process is submission of RPTKA to the Ministry of Manpower .
- 2) Submission Permission Employing foreign workers (IMTA), After authority related approve RPTKA, the company can continue with submission Permission Employing Foreign Workers (IMTA).
- 3) Compensation Fund Payment , After IMTA is approved , the company required pay Compensation Fund Use of Foreign Workers (DKPTKA).
- 4) IMTA Approval Process , After all condition fulfilled and payment carried out , Ministry of Manpower will issuing IMTA. Permit This applicable For term time certain and can extend it If necessary , appropriate with need company .
- 5) Management , With IMTA which has been published , steps next is take care of ITAS for foreign workers through office Immigration . This ITAS important For legality the existence of foreign workers in Indonesia and must update it in accordance with the validity period of IMTA.
- 6) Reporting and Monitoring , After the TKA starts work , company must report the existence of foreign workers periodic to agency related . In addition , the company must also ensure that For carry out the transfer process technology and knowledge to power Work local must in accordance with the plan that RPTKA approved .

Regulation Legislation Foreign Doctors' Practice in Indonesia

Basically, bringing in Foreign Doctors is not legally an *illegal act* . Positive law has actually regulated the procurement of Foreign Doctors by the Government who will practice medicine in Indonesia, namely Law Number 17 of 2023 concerning Health. Article 248 of Law Number 17 of 2023 concerning Health explains that Medical Personnel and Health Personnel who are foreign graduates who can practice in Indonesia only apply to specialist and subspecialist Medical Personnel and Health Personnel with a certain level of competence after undergoing a competency evaluation (Syaputra, 2024).

The granting of permits for foreign doctors to practice is also mentioned in Government Regulation Number 28 of 2024 concerning Health. Government Regulation (PP) Number 28 of 2024 concerning the Implementing Regulations of Law (UU) Number 17 of 2023 concerning Health regulates in more detail the utilization of foreign medical personnel and health workers in Indonesia. Article 658 stipulates that health workers and medical personnel who are foreign nationals who can work in Indonesia are graduates from within the country or abroad. However, their utilization must consider the national medical and health personnel needs plan. And, must prioritize Indonesian citizens (WNI) medical and health personnel (Novianti Setuningsih, 2025).

Based on article 662, it is stated that: Medical Personnel and Health Personnel of Foreign Citizens Graduated from Abroad must have at least 3 (three) years of professional practice experience in accordance with the competence in their professional field. In addition, there must

also be a request from the Health Service Facility that uses specialist and subspecialist Medical Personnel and Health Personnel of a certain level of competence of foreign citizens graduated from abroad according to the needs, for the transfer of technology and knowledge; and for a maximum period of 2 (two) years and can be extended 1 (one) time only for the next 2 (two) years.

Then, Article 659 mentions the ownership of a practice permit (SIP) and a registration certificate (STR) as a requirement for foreign medical personnel and health workers who are domestic graduates. Ownership of the STR is valid for a maximum of two years and can be extended once for a period of the following year. The regulation is stated in Article 677 Paragraph (5). Meanwhile, Paragraph (6) states that the provisions of the time period are exempted for STRs of foreign medical personnel and health workers in special economic zones.

Likewise, the regulation regarding SIP for medical personnel and health workers who are foreign citizens is valid for a maximum of two years and can be extended once for the next two years as regulated in Article 682 Paragraph (5). Paragraph (6) states that the provisions for this period are exempted for STR for medical personnel and health workers who are foreign citizens in special economic zones.

Based on Article 660 Paragraph (2) of the Health PP, it states that foreign medical personnel and health workers who can practice in Indonesia are those who have specializations and subspecializations. Not stopping at specializations, foreign medical personnel and workers who are domestic graduates must have qualifications equivalent to level eight of the Indonesian national qualification framework. However, Article 660 Paragraph (4) states that foreign medical and health workers who are domestic graduates may not open independent practices. Meanwhile, foreign medical and health workers who are foreign graduates who practice in Indonesia are only those who have specializations and subspecializations.

Foreign doctors can practice after a competency evaluation and must have qualifications equivalent to level eight of the Indonesian national qualification framework. Meanwhile, Article 662 paragraph (2) stipulates that foreign medical personnel and health workers who graduated abroad must have at least three years of professional practice experience. However, the Health PP also stipulates that foreign medical personnel and health workers who graduated abroad can practice in health services in Indonesia if there is a request from a health facility, transfer of technology and knowledge, and a maximum of two years and can be extended once for the next two years.

This is stated in Article 660 paragraph (1) of Government Regulation Number 28 of 2024 concerning Health, which reads: "Medical Personnel and Health Personnel who are Foreign Citizens and Domestic Graduates may only practice at the request of the user Health Service Facility with certain time limits."

Then, Article 663 explicitly stipulates that medical personnel and health workers who are foreign graduates from abroad are prohibited from practicing independently. In addition, Articles 664 to 668 regulate the competency evaluation for medical personnel and health workers who are foreign graduates. If they do not pass, they must return to their home country.

Foreign Doctor Regulations for Remote Areas in Indonesia

Rule Legislation Placement of Foreign Doctors in Remote Areas in Indonesia

According to the *World Health Organization* (WHO), the shortage of health workers is often felt most acutely in rural, remote and hard-to-reach areas. Data shows that although about half of the global population lives in rural areas, only 36% of the global health workforce is in rural areas. For example, in the United States, there are 2 doctors per 1,000 people in urban areas, compared to 0.82 doctors per 1,000 people in rural areas. Brazil has an average of 1.9 doctors per 1,000 people, with some rural and remote areas in Amazonas state having as few as

0.28 doctors per 1,000 people. Bangladesh has 1.8 doctors per 1,000 people in urban areas compared to 0.1 doctors per 1,000 in rural areas. India, on the other hand, has 11.4 times more doctors in urban areas than in rural areas (Putri, RF, & Ilyas 2024).

Indonesia is one of the countries that still experiences the problem of uneven distribution of doctors between urban and rural areas. This is because Indonesia has several characteristics that cause uneven distribution of doctors. Geographically, Indonesia has various areas that are difficult to reach, where these areas do not attract doctors to work for a long period of time.

In Indonesia, there is no clear regulation regarding the maintenance of health workers, both specialists and other health workers until now. However, now there is a "work contractbased approach that can be used as one strategy to encourage health workers to be willing to be placed in hard-to-reach areas. In addition, this scheme also allows them to play an active role in strengthening the quality of health services in less developed areas. One of the guidelines as a reference is the Decree of the Minister of Health of the Republic of Indonesia Number 1235/MENKES/SK/XII/2007 concerning the Provision of Incentives for Health Human Resources Carrying Out Special Tasks and the Decree of the Minister of Health of the Republic of Indonesia NUMBER 156/Menkes/SK/I/2010 concerning the Provision of Incentives for Health Workers in the Framework of Special Assignments in Health Centers in Remote Areas (Maria Tri Diani 2023)

Government Regulation (PP) Number 28 of 2024 concerning the Implementing Regulations of Law (UU) Number 17 of 2023 concerning Health opens up opportunities for the fulfillment of medical personnel (foreign doctors) to be able to practice in remote areas of Indonesia with certain provisions and requirements. Where in Article 660 paragraph (1) Medical Personnel and Health Personnel of Foreign Citizens Who Graduated from the Country can only practice upon request from the user Health Service Facility with certain time limits. Thus, areas that lack specialist medical personnel apply to the government to bring in foreign doctors to their areas including remote areas.

The main priority in special assignments includes certain types of medical and health personnel, as well as health service facilities selected based on needs, including the areas that are the focus of placement. This assignment can be carried out by the Minister, Governor, or Regent/Mayor, especially in areas that are less in demand but require health services, including in situations of Extraordinary Events (KLB) or health emergencies. The central and regional governments have the responsibility to provide medical devices, medicines, supporting infrastructure, as well as incentives and additional facilities adjusted to budget capacity. In addition, medical and health personnel are entitled to receive a fixed income and protection in the form of health insurance, work accident insurance, and death benefits.

For overcome lack of interest doctor local For placed in the area isolated , then government make breakthrough latest For allow practice doctor foreigners in Indonesia. Where is the presence doctor foreign expected can overcome problem lack doctor specialist in the area remote areas . However , the government's plan to bring in foreign medical personnel to address the shortage of doctors in various regions of Indonesia raises doubts about its effectiveness and targeting accuracy. This doubt arises because there is no clear guarantee that the foreign medical personnel will be directly assigned to remote areas that are experiencing a shortage or limited number of specialist doctors.

Even until moment This Not yet There is regulation special that regulates placement doctor foreign in the regions left behind , in Regulation Government Regulation (PP) Number 28 of 2024 concerning Regulation Implementation Law Number 17 of 2023 concerning Health only arrange that power health foreign Can practicing in Indonesia based on request facility service health . With thus mechanism distribution doctor foreign the No proactive , where only based on request only , no disseminated on intervention or placement direct from government center , so that matter This Of course Not yet overcome lack power health in the area isolated. The problems in Indonesia's health sector are still very complex. One of the main challenges is

the unequal distribution of medical personnel, where most doctors are concentrated in the JavaBali region and big cities. In addition, there is still a gap in the quality of health services, because facilities with superior services are not evenly distributed. Regulations related to the placement of foreign doctors in remote areas have not been clearly regulated, resulting in ambiguity, such as the type of doctor who will be brought in and the location of their assignment. If foreign doctors are only placed in urban areas, this policy will not address the problem of unequal distribution of health workers (Fitri Novia Heriani 2024).

Several countries such as the United States, England, Canada, New Zealand, and the Middle East have implemented policies to utilize doctors from abroad. This step was taken because they are experiencing a shortage of medical personnel, especially in rural areas. The placement of foreign doctors in these countries is based on the level of workload and the risk of burnout. To attract foreign doctors, they offer various forms of competitive welfare, such as high net income, free or low-cost education facilities for children, and opportunities to continue their studies. However, the recruitment process is carried out selectively with strict requirements, including educational standards, language and competency tests, and further training. In contrast, Indonesia still faces a number of challenges in adopting a similar system, especially because there are no clear regulations as a basis for implementing the policy (Ibid 2024).

Implementation Challenges and Solutions Policy Bringing Foreign Doctors to Remote Areas in Indonesia

Several countries have used foreign doctor programs such as America, England, Canada, New Zealand, and the Middle East. The reason for using foreign doctors is due to the shortage of doctors, especially in rural areas. Meanwhile, in Indonesia, the use of foreign doctors still encounters various obstacles or challenges as the author describes below:

1) Uncertainty Inhibiting regulations distribution doctor foreign to area isolated .

Uncertainty regulation is one of factor inhibitor distribution doctor foreign in various area remote parts of Indonesia. Legality doctor foreign based on law positive in Indonesia has set up in Regulation Government Regulation (PP) Number 28 of 2024 concerning Regulation Implementation Law Number 17 of 2023 concerning Health, in fact Still experience emptiness norm namely Not yet to explain law law the arrange distribution doctor foreign in the area isolated .

In the Regulations Government Regulation (PP) Number 28 of 2024 concerning Regulation Implementation Law Number 17 of 2023 concerning Health regulates in article 660 paragraph (1), where in chapter the Still cause polemic . Points This confirm power health foreign Can practicing in Indonesia based on request facility service health . Then the rules This Not yet finish problem crisis doctor in the area isolated . Not finished the problem Because This based on request , not based on ministry health Want to put it there . Policy this also does not explain How when There is case doctor foreigners who get two request from facility service health .

2) Priority for Indonesian Health Workers who are not own mechanism clear and potential slow down fulfillment need power health in the area remote

Lack of distribution power health that is not evenly caused by various factor including :

- a. Low salaries and benefits for power health in the area isolated . This is make profession This not enough pull and push power health For look for opportunities in cities big . Remote area not enough interested by power health Because its remoteness . Its smallness . income received Because No existence incentive in the form of an honorarium as addition income outside wages is reason important For move .
- b. Facilities and infrastructure minimal health in the villages .
- c. Lack of opportunity development self for power health in the area remote
- d. And Lack support and supervision from government center and also area .

- 3) System Based on Requests that place facility health in the area remote in position not enough profitable compared to with facility health in the city big . Where if can choose , doctor as power health Certain will choose area more urban worthy and liked as place stay with easy access to transportation and communication obtained .

As for the solution Implementation Policy Bringing in Foreign Doctors to Remote Areas in Indonesia including :

- 1) Repair Regulation with to clarify provision related priority power health of Indonesian citizens and ensure allocation power health foreign to areas that are truly need .

Need existence policy or regulation from government central and regional governments that regulate in a way explicit and clear related not quite enough answer in matter equal distribution of health human resources. that moment This No There is clear rules in matter equalization power health Good That power specialist and manpower health other until moment This so that need There is policy or clear rules made by the government center and also the area that regulates about not quite enough answer equalization power health For ensure community in the area left behind get service good and fair health . Need existence the rules that govern in a way clear related sanctions for government center or areas that are not operate mandate shrimp law related fulfillment right health public .

As for in a number of chapter in Regulation Government Number 28 of 2024 concerning Health or PP Health is still Not yet clear arrange about power health foreign . Where is the spread doctor foreign poured out in Article 662 paragraph (3) letter a confirms power health foreign Can practicing in Indonesia based on request facility service health . Rules This Not yet finish problem crisis doctor in the area remote Because This based on request , not based on placement direct from ministry health .

- 2) Mechanism Greater Distribution of Foreign Doctors Proactive , no only based on request , but also with intervention direct from government center For overcome lack power health in the area isolated .

Utilization doctor foreign must in accordance with needs and demands from agency service health certain . The regulations has set up strict in Regulation Government Regulation (PP) Number 28 of 2024 concerning Regulation Implementation Law Number 17 of 2023 concerning Health, Article 660 paragraph (1) states that " doctors foreign can practicing in Indonesia on request facility service health for the transfer of technology and knowledge , with term time maximum two years and can extended one time for two year Again .

Based on chapter the clear that distribution doctor foreign only on base request facility health , then system This will limit distribution doctor foreign For Can practicing in Indonesia. Where it should be government central and regional Can contribute together For give placement in areas that are considered not enough power health or area isolated and left behind , things This more efficient For help distribution evenly in placement power health in the area isolated.

- 3) Incentive Special for Foreign Doctors Working in Remote Areas , so that area interior can compete in interesting power health foreign

Many doctors want to working in remote areas provided government notice level career , incentives as well as support security . Policy must ensure distribution doctor foreign to areas that are truly need , not only in the city big . Government Can give incentive special for doctor foreigners who are willing work in the area remote . Incentives big salary million per month given to doctor specialist foreign nationals expected can interesting interest more Lots doctor local For on duty in the area remote and underdeveloped . In addition , incentives this is also a form appreciation from government to devotion doctors who are willing working in a remote area from center city and facilities complete .

The presence of specialist doctors in remote areas is very important to ensure that people in the area have access to quality health services. The government's efforts to provide significant salary incentives are a positive step that is expected to improve the condition of health services in remote areas.

CONCLUSION

Procedure in bring in doctor foreigners in Indonesia based on Constitution immigration that is must have a valid visa the goal is to get sign sign in , and permission stay . As for the procedure Submission Permission Employing Foreign Workers including : submission of RPTKA , submission of Permission Employing Foreign Workers (IMTA), Compensation Fund Payment , IMTA Approval Process , ITAS Management , and Reporting and Monitoring . Foreign Doctors can own permission stay remain , as Article 54 (1) of Perppu No. 20 of 2022 concerning Job Creation . Based on Minister of Health Regulation Number 67 of 2013, Foreign Health Workers are Foreign citizens who have knowledge and/ or skills through education in the field of health that is recognized by the Government and has permission written permission given by the Minister. As for the permission practice doctor the must equipped with a number of condition administration includes : SIP, SIK, STR, and IMTA.

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