

How to Cite:

Bangkara, B. M. A. S. A., Maruf, I. R., Sipayung, B., Rohayati, Y., & Indah, D. (2022). Understanding the efficiency of technological transformation in the public health service act: A technocultural health perspective. *International Journal of Health Sciences*, 6(S5), 12246–12261. <https://doi.org/10.53730/ijhs.v6nS5.11985>

Understanding the efficiency of technological transformation in the public health service act: A technocultural health perspective

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Abstract---This study examines several scientific pieces of evidence to understand the effectiveness of digital transformation in health services in Indonesia based on the law. For this reason, we have conducted a series of data searches, examining them to obtain relevant and valid answers. Our search is done electronically. This data is designed in descriptive qualitative under the phenomenological approach. Based on the study results, we understood that technological transformation had provided effectiveness in public services, especially the health sector, based on the institution's mandate. The government truth this technology as they believe it can innovate how medical work is effective and productive in service community health. Thus, these findings become valuable inputs for the development of mass studies.

Keywords---understanding, efficiency, transformation, public health, technology, health technoculture.

Introduction

One of the medical conditions in Indonesia today is the division of health information due to the many applications and administrative obstacles in the normalization and trading of information (Handayani et al., 2015). Because of the ongoing planning results, more than 400 health applications were made by the local and local legislatures. This condition makes the welfare approach not entirely based on extensive information and wasteful health administration. The COVID-19 pandemic and innovative improvements are prompting the Indonesian Ministry of Health to immediately complete computerized health change as a leap towards an advanced and balanced Indonesian health area (Ostherr et al., 2016). These various health applications or telemedicine applications help find online medical services so that users can get fast treatment. As introduced by the World Health Organization (WHO), which has defined digital health, or the use of digital technology for health, as a field of practice that doctors use more information and communication technology routinely and innovatively to meet health needs (Cherrez-Ojeda et al., 2020).

The vision is expressed in the Regulation of the Minister of Health of the Republic of Indonesia No. 21 of 2020, which has expected endeavors to change the administration of health improvement, incorporating the mix of data frameworks, exploration, and health advancement (Apriliani & Khoirunurrofik, 2020). Indonesia's computerized wellbeing change is designated to have the option to create HR (HR) with the ability to examine wellbeing information. It plans to foster knowledge-based strategies in every health organization. Concerning the abovementioned, the Indonesian Ministry of Health has prepared a Blueprint for the 2024 Digital Health Transformation Strategy, which depends on the soul of understanding a Healthy Indonesia cooperatively with the whole biological system of health industry players in an Indonesia Health Services Platform. The IHS stage is a computerized health environment stage that gives information networks, examinations, and administrations to help coordinate different wellbeing applications in Indonesia (Nugroho et al., 2022).

For this reason, the Government has a significant commitment to developing technology-based health services, including how technology can improve health services, then how the specialization of medical personnel continues to be developed to become a force that has standards in the form of human resources and health infrastructure (Phanareth et al., 2017). Furthermore, the Government also has a collaboration mechanism for the behavior of the health industry, which has a system that becomes a forum for all health actors, and the Government has a technology-based micro service mechanism. Likewise, in addition to having technology applications that can back up health services, the Government also has an integrated mechanism between all levels of compliance in providing data that maximizes services at all levels of health. Lastly, the Government also has an integrated service and information facility so that the Government has a mechanism for utilizing feedback that is easy to understand (Lim et al., 2017).

Technology-based health services are about the problems and challenges faced by the Government in improving health services as required by institutions and regulations. Judging from the development of digital technology, it is increasingly

evident that quality data integrity is the main thing in realizing digital-based health transformation (Ramsey et al., 2016). For this reason, the Government certainly conveys that data integrated into the service system will provide convenience, increasing the achievement of citizens' health status. However, the problem is that achieving the integration process of technology in health services is not an easy thing to achieve; the evidence is that the problems remain challenging, so experts must think about the health service applications that must be built to enable the Government, both from the center and the province as well as private health services, to overcome the problems. Health digitalization facilitates and improves public health services, so they do not cause new problems (Bircher & Kuruvilla, 2014).

Various applications should have provided health services, but after being studied, they also caused new problems, for example, the more widespread data in various applications and different standards, so it is challenging for health management to take advantage of several applications with several different data. This is based on a mapping study showing that more than 300 health technology applications built and developed both from the center and in the region will undoubtedly increase many particular applications utilized by health institutions in remote parts of the country. So it can be said that this health digitalization problem has a lot of manually documented data (Schröder-Bäck et al., 2014).

Understanding the impact of technology on health governance is essential so that understanding will be much more helpful in the future for both academics and practitioners. This is because migration and technology-based health governance are so important that now all sectors continue to be equipped with computer systems (Wang et al., 2018). The choice that can be taken to replace conventional administrative services is a medical framework based on data evidence by adjusting to the objectives of the health framework based on the constitution. For this reason, understanding a broad perspective on digital-based health services is undoubtedly carried out to improve quality and productivity and the values of health goals. This is also part of the Government's efforts in an era of digitalization that is planned to adapt to the changing times where all business managerial fields are based on technology today. By getting a comprehensive understanding, the Government and the parties will be able to consider what components of digital technology are believed to contribute to public health services significantly so that the Government can continue to improve the efficiency of the way of working in which the role of technology and human resources today. This is essential for providing medical services (Berkowitz, 2021).

Furthermore, the Government must also explore various breakthroughs that are concentrated on the use of technology applications in improving health services in big cities and regions so that the handling of health problems can provide an accurate picture of targeted innovative plans that are efficient and result-oriented (Al Nuaimi et al., 2015). The Government believes that choosing this digital application system can simplify the proposed government health administration work procedure following what is expected by the world body, which assesses that digital applications are feasible to be developed to strengthen health services based on laws and other urgent components. The pull of many parties to the use

of technology media certainly has a philosophy where all-computerized medical services have a proven strategy supported by data, which is part of improving the quality of Indonesian health human resources. The Government shows various essential points that they value that technology-innovated health can quickly improve strategies so that the results can become more dynamic, which changes all health sectors. Thus, the Government's goal of improving health services to the community based on the constitution can be done by adopting technology through colleges, schools, and health organizations that continue to implement health services by minimizing the impact (Bell et al., 2021).

The Government's health services to its people must be based on the principles of the constitution and legality. This is important because health is an aspect of safety and health, which is very valuable for every individual who must constantly get his rights protected to enjoy a healthy life as much as possible and avoid things that cause disease (Suryawati, 2020). This is a government obligation with a legal basis in carrying out services to the community. Therefore, the issue of important health becomes a basic need of citizens regardless of individual and other aspects so that health is so meaningful and must be included as one of the most basic tasks of the Government in serving its citizens equipped with laws. The underlying laws include article 28 h paragraph 1, which states that everyone has the right to obtain health funds; therefore, health services are essential considering the rules and laws number 32 of 2009 concerning protecting and managing a healthy environment. This is a basic need, so it requires the availability of human resources needed by the community to realize this health. Therefore, human needs such as health cannot be limited, even though the availability of resources is sometimes limited (Dewi & Israhadi, 2021). Therefore, we need ways to save resources, such as using technology in providing services.

Moreover, when seen from the connection between specialist organizations and patients as clients, this cannot be isolated from law—no—8 of 1999 concerning Consumer Protection. The legitimate connection between wellbeing laborers (drug specialists, nurture, and maternity specialists) became a subject of conversation after this regulation (Rudilosso et al., 2020). Exhaustively, the UU gives guidelines on freedoms and commitments for specialist co-ops and administration clients. Hence, it is essential to direct an evaluation of specialist organizations in the wellbeing area because the idea of administrations in the wellbeing area is exceptionally specialized and cannot be known by anybody. Even though there are proficient principles, every person (both specialist organizations and administration beneficiaries) has specificities that lead to particularity in the (lawful) connection between wellbeing specialist organizations and administration clients, remembering specialist co-ops for emergency clinics.

Albeit the reason for offering types of assistance is something similar, in particular attempting to make the ideal move to recuperate administration clients, it stays that each medical clinic-and different spots of administration - have different help guidelines. Nonetheless, the distinction in help principles cannot endlessly overlook the lawful relationship (freedoms and commitments) among suppliers and clients of wellbeing administrations or between the state/government and its kin. The subject constantly examined in the legitimate world is "freedoms and commitments." As to regulation in the wellbeing area, the

conversation (in addition to other things) spins around the freedoms and commitments of medical services suppliers from one perspective next to each other with the privileges and commitments of patients then again, covering both explicit and general matters (Doherty, 2020).

The premise of the presence of these privileges and commitments is contained in different worldwide and public guidelines. Notwithstanding, taking into account the execution of administrations in the wellbeing area, which in some cases creates some issues in the field, it is as yet essential to have clearness of legitimate principles (privileges and commitments) among suppliers and clients of wellbeing administrations, particularly for this situation the State/government and its residents/local area (McGuire et al., 2020).

Based on the explanation in the introductory section above, where through various literature reviews, the author believes that he will get an understanding, especially in the technology transformation section, of efficient regulation of public health services following the constitutional mandate. On that basis, the author wants to gain an understanding in the form of scientific evidence from various literature sources, which is to see how efficiently the transformation of technology and other digital applications in public health services is based on the law. So we see that this study will provide a deep understanding to writers, academics, and health practitioners in the field.

Method

The Government continuously reforms health services for its citizens to achieve optimal public health. Like many countries, solutions to improve government services have been carried out to provide health services to citizens (Ginter et al., 2018). To prove how efficient the transformation of the health services and laws of the Republic of Indonesia is, we have reviewed the information and data that we have collected from various sources. If what is meant is, among other things, we are coding data, testing data to gain understanding, and looking for relevance to the problem of this gadget so that we can conclude finding data (Bordbar et al., 2018). As for how we obtain data, among others, by doing an online search from various publication sources, then we will examine the below regarding phenomenology, which is an effort to get an understanding from a series of quite a lot of data in the online database. This study fully utilizes secondary data in the form of publications. Then we design it in a qualitative descriptive study to understand how efficient technology is in health services in Indonesia, which is a study of cultural technology from a health perspective. That is other data that we do to answer the problem of the study (Zhang et al., 2020).

One method for carrying out a qualitative study is to review much scientific evidence from various views and perspectives generated through previous research so that this makes a scientific method to understand the context of health, especially services, by relying on the sophistication of technology application facilities which are now not new where almost every the life service sector, the presence of technology has provided modern innovations and solutions. Therefore, reviewing literature sources is very supportive of efforts for

scientific development, especially in the field of public health services relying on information technology.

Discussion

In the results and discussion section, we will present the results of a review of many literature sources, especially the effectiveness of using technology in the world of health, especially laws or government regulations in carrying out health services to every citizen. Through the presentation of these results, we also complement it with a discussion supported by Budi's previous studies and, of course, comes from various application and academic contexts.

Technology Transformation in Health

Guideline of the Minister of Health of the Republic of Indonesia No. 21 of 2020 concerning the Strategic Plan of the Ministry of Health for 2020-2024 has expected endeavors to change the administration of wellbeing, which incorporates the coordination of data frameworks, examination, and wellbeing improvement (Panjaitan et al., 2022). The most common way of digitizing wellbeing at the public to provincial levels is tricky and requires arranging. Consequently, the method of digitizing wellbeing at the public and provincial levels should be painstakingly arranged. It is planned in the wellbeing innovation change guide. Wellbeing Technology Transformation Priority Activities will be separated into three fundamental exercises. The fundamental piece of Health Technology Transformation is Health Data Integration and Development. It is secluded in Health Data System Integration and Health Big Data Analytics System Development (Muhyiddin and Nugroho, 2021).

This action has the expected result, essentially managing the possibility of success strategies by thinking about positive, forefront, and complete information. The accompanying part is the Integration and Development of Health Service Applications. This improvement has three program exercises to be expressed Developing Integrated Health Applications, Increasing Health Human Resources with flourishing informatics limits, and Establishing a united Helpdesk at the Ministry of Health. This result is the ability of flourishing associations in successful working environments in each line (Islam et al., 2015). The third part is Health Technology Ecosystem Development. In this movement, the Ministry of Health has three boss activities: Telemedicine Technology Expansion, Development of Health Technology Innovation, Product Ecosystems, and Health Biotechnology Research Integration. Its result is worked with tries and an environment of the state of the art success enhancements between states, schools, industry, and the overall people (Subramaniaswamy et al., 2019).

The year 2021: Health Data System Integration and Development Activities rotate around an Architectural game plan of individual-based thriving information association (Zhao et al., 2020). The movement target depends on a compositional plan that goes all in to have worked with thriving information. Such information requires association solidified with clinical advantages application frameworks emphasizing stage planning course of action, success structure interoperability, security, and foundation. Then, at that point, the going with action is Health

Technology Ecosystem Development as an environment evaluation and administrative sandbox basic in success improvement progress. 2022: Development of a coordinated Big Data framework Development of a monstrous information structure solidifies an individual-based thriving framework covering pandemics, sound families, and dissatisfaction. This will zero in on how much successful information structures as of late are arranged with the middle. The Health Application System Integration and improvement will be formed into a coordinated flourishing office structure stage (Jinping, 2017).

Time Frame Health Technology

The year 2023: Implementation of Health Analysis System In 2023, there is supposed to be an extension in individual data factors from 2022, especially in facilitated data structures. This is recognized by utilizing a fake mental ability based prosperity examination structure (Vankova, 2016). This execution is set apart by extending permitting and executing biotechnology development innovation items at Health Facilities, expanding telemedicine administrations at FKTP as a meeting administration, and strategies on computerized wellbeing. The year 2024: Expanded Implementation of Indonesia's Health Digital Transformation The center done in earlier years is supposed to guarantee the execution of computerized wellbeing change in Indonesia and is aimed at extending coordinated wellbeing administration in Indonesia, growing joining of wellbeing administration applications, and extending Indonesia's wellbeing development biological system (Suwantika et al., 2019).

Exercises in 2024 are a continuation of exercises in 2023 done on needs in a few locales of Indonesia. The administration of information included in 2024 covers all locales in Indonesia with the goal of having coordinated individual-based wellbeing information management regularly (Wulandari et al., 2020). Like the existing area base, it is expected that 100 percent of medical care offices can have an incorporated framework. In 2024, the emphasis is more on extending what was at that point the objective in the earlier year, in particular, that Indonesia as of now has a decent computerized change framework, coordinated both from individual-based information, wellbeing application frameworks in wellbeing offices, good wellbeing HR regarding digital literacy, to the many biotechnology products (Khatiwada et al., 2021).

The phases of innovation improvement Development has a significant cycle, how to foster progress, tremendous or incredible. Wellbeing innovation improvement can be separated into 4 phases: (1) advancement; (2) improvement; (3) dispersion or spread; (4) assessment (Feeney, 1986). Advancement The word development utilized here alludes to the production of new apparatuses or procedures to join old instruments to design new ones or for new applications (Eden, 1986). Advancement brings freshness to clinical information, clinical practice, or association. Most developments result from little individual advances that do not make an impact. Innovation is seldom created in one stage. Innovation change and improvement are ongoing interactions (Huang et al., 2020).

As per Tracy (2019), without control, the seven phases in clinical advancement are as per the following: (1) starter report given eviction, development of a few

cases; (2) proficient or hierarchical use or reception of innovation; (3) public acknowledgment (outsider); (4) standard perception reports and methodology; (5) randomized control preliminary; (6) objections by experts; (7) innovation loses certainty and disintegration. The essential stage is stage 5, randomized control testing, here by assessing the viability of the advancement. Generally, preliminary clinical outcomes are more ideal for mechanical development than uncontrolled case reports. At stage 6, where there is negative proof in a randomized controlled clinical preliminary, an expert objection might be made (Moss, 2021).

Reports of proof supporting positive case reports are adequate to require the dispersion of an advancement. In the interim, randomized controlled preliminaries that help clinical practice appears to have more endorsement than adverse outcomes. *Health innovation advancement* is an interrelated interaction that seldom has innovation improvement that is a straight line (Shen et al., 2020). It usually begins with need acknowledgment, where clinical as the essential medical care supplier will probably realize what is required and express the issue in the right setting. The course of mechanical advancement, by and large, starts with a course of creating information through essential exploration. Improvement has the significance of a cycle, an approach to creating to be progressed, tremendous, or fantastic (Adekunle & Brin, 2021).

As per Manullang et al. (2021), there are as yet numerous colleges and foundations in Indonesia that do not yet have the mindfulness that exploration is the 'soul' of college schooling. Advanced education research capacities are still low because the labs are poorly designed, and the teachers need more chances concerning their area of specialization. There is no requirement for scientists to pass their examination obligations to meet the essential requirements for a fair life. Numerous issues should be addressed; however, lab hardware and negligible government assistance for exploration speakers are the primary issues in Indonesia (Scales et al., 2014).

Pieces of Evidence of Technology and Health Care Connection

Understanding of the efficiency of technological transformation in public health care law is supported by the study of Dinh-Le et al. (2019), which states that the application of health technology can integrate health knowledge electronically, which is an advancement in health services since the integration of technology in various sectors of life. Adopting health knowledge into the electronic realm, followed by laws on managing health services, has continued to develop lately. This strategy has been adopted since the emergence of technology, which now relies on the parties because of the ability of technology to innovate medical ways of working in patient registration and other medical evaluations (Klinger et al., 2014).

They believe that even though technological devices are now increasingly being tested for their potential and can change the medical mindset, especially in patient care, concerns about patient privacy must be maintained appropriately, so that patient data is a hope and challenge for the application of technology in health services. For data about patients to be appropriately maintained, the world of health requires regulations that bind the parties so that paramedics in

providing their health services also ensure that the patient's code of ethics and professional care can be maintained. The end of this study notes that efforts to provide health services and partnerships must be made so that the health care system can overcome the challenges of data disruption, and the health service industry, such as insurance, is increasingly becoming an impetus that requires technology-based health governance so that it can be implemented (Chen et al., 2019).

Gigantic data will be an essential piece of the prime time of mechanical developments—allowing us to get new encounters from the colossal measures of data made by present-day life. There is massive potential for utilizing Big Data in medical care. However, there are still a few obstacles to survival, like discontinuity, significant expenses, and inquiries around information proprietorship (Gupta et al., 2021). Imagining a future job for Big Data inside the automatic medical services setting implies adjusting the advantages of working on quiet results with the expected entanglements of expanding doctor burnout because of unfortunate execution prompting added intricacy (Lee & Lee, 2015). By drawing upon worldwide methodologies, we propose suggestions for rules and guidelines of information used in medical care, focusing on producing a unique worldwide patient ID that can coordinate information from various medical services suppliers. Likewise, we develop the point by examining possible traps to Big Data (Amanullah et al., 2020).

Stephenson et al. (2020) expressed that the improvement of the PC agreement has worked with the use of wellbeing innovation to help drug the board of Parkinson's illness through the arrangement of administrative science. Creative innovation is exceptionally famous for assessment endeavors of new medicines that can slow and turn around Parkinson's illness endlessly. Treatment that mediates from the get-go in the illness course is essential for some up-and-comers in the medication improvement pathway (Wang et al., 2021). There is a shortfall of fragile, objective, yet clinically interpretable measures that can get critical pieces of the sickness. This addresses a critical test to improve new therapies and is heightened by the broad heterogeneity in clinical signs across patients and the fluctuating thought of the many signs and results of PD. Automated prosperity headways (DHT, for instance, cell applications, wearable sensors, and high-level diaries) can address large numbers of these openings by engaging objective, remote, and routine assessment of PD signs and secondary effects in commonplace environments.

The continuous COVID-19 pandemic climate makes a significant need to get rolling to execute these methods effectively (Kluger et al., 2019). For this development to be embraced in drug progression studies, changed authoritative settlement on recommended systems in applying for fitting advances, including collection, dealing with, and comprehension of electronic sensor data is required. Many helpful drives are being shipped off to perceive practical approaches to DHT in PD clinical primers (Connor et al., 2020). The Critical Pathway for Parkinson's Consortium of the Critical Pathway Institute is highlighted as a representation of a case in which accomplices with everything taken into account attracted with regulatory associations on the fruitful use of DHT in PD clinical starters. Overall authoritative associations, including the US Food and Drug Administration and the European Medicines Agency, are driving the capability of data-driven

responsibility through multi-accomplice consortia. To this end, we review how DHT advances can be generally achieved by changing data, ability, and data participating in habits that expand capability (Chattu, 2021).

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Wibowo et al. (2020) express that E-wellbeing based public administrations in carrying out wellbeing administrations in Indonesia are a forward-moving step in the media world and their administrations. They say that wellbeing administrations are public administrations that the Government should carry out to make a prosperous society. Wellbeing administrations are fundamental to work on the nature of wellbeing administrations in Indonesia (Alshammari et al., 2021). The presence of e-Health makes wellbeing administrations more powerful and proficient in both time and cost. The people group's requirement for responsive well-being administrations is why E-wellbeing development has been carried out in several locales in Indonesia. In its execution, the execution of e-wellbeing has difficulties, for example, the lopsided circulation of data innovation networks in locales in Indonesia, awkward HR, and the shortfall of guidelines that keep up with the classification of e-wellbeing clients. This study intends to decide how E-Health gives wellbeing administrations to the local area. This study utilizes subjective examination with a writing concentrate on how to look at the current issues. Utilizing auxiliary information acquired through diaries, books, and confided in news entryways. There will be more examinations on e-Health in Indonesia (Afwani et al., 2018).

Adiyanta (2020) likewise said the criticalness of the all-inclusive medical coverage strategy for general wellbeing specialist co-ops during the Covid-19 pandemic. The review was led to decide the desperation and pertinence of Government strategies in working on the environment of general wellbeing organization by expanding JKN as a required social, medical coverage plot because of the hole among commitments and far-reaching benefits worldwide Covid-19 pandemic (Novela et al., 2021). The aftereffects of the review demonstrate that: 1) the approach of the Universal Health Insurance conspire in the SJSN-KIS has desperation as the satisfaction of the execution of medical coverage that is reasonable by all degrees of society and equitably appropriated by the established command; 2) The plan of the Universal Health Insurance framework. The UHC framework has been directed by the Government to be lined up with the circumstances and targets of expert, proficient, and viable public wellbeing organizations and arrives at all degrees of society; 3) The Universal Health Insurance Scheme, which is incorporated between the National Social Security System and the National Health System is highly significant for wellbeing organization. Society depends on collaboration, fortitude, and sympathy for all residents during the worldwide Covid-19 pandemic (Sutrisna et al., 2021).

Winarto et al. (2020) prove the innovation of electronic-based health services through the online national health information system and BPJS Primary services. Health services have been in the spotlight recently because they are related to the policy of an electronic-based National Health Information System, which is used as a center for health databases throughout Indonesia (Fahmi & Ayuningtyas, 2020, November). Besides that, there is also a P-Care policy as a child of SIKNAS, which is used as an alternative health service to create an effective and efficient atmosphere. For this reason, this research focuses on how health service innovations are implemented in Indonesia. This research uses descriptive qualitative research and data sources in the form of secondary data.

Moreover, Krisdayanti (2021) analyzed the utilization of the versatile public medical coverage application to expand the adequacy of BPJS Health administrations in Medan. The public health care coverage versatile application is a type of change of BPJS Health's computerized plan of action, which was at first as managerial exercises at branch workplaces or wellbeing offices, changed into an application that can be utilized by members anyplace whenever without time limitations. The national health insurance mobile application can provide convenience for BPJS users or the public (Soemartono, 2017). The convenience in question includes paying BPJS contributions, changing membership data, and knowing family participant data. This study aims to determine the use of the national health insurance application to increase the effectiveness of BPJS health services in the city of Medan.

The type of research taken is descriptive research with a qualitative approach. This study took as many as four speakers. At the same time, the data collection technique uses the technique of observation, interviews, and documentation. The results showed that the effectiveness of BPJS health services through the national health insurance mobile application in the city of Medan was said to be effective and efficient because this application immensely helped administrative activities at the BPJS health office in serving the community. Mobile health insurance is beneficial for accessing BPJS health services because of participants' many features. Using the mobile insurance application or participant care centers, they can immediately get BPJS health services (Fahlevi & Alharbi, 2021).

Based on the results of a review of many literature sources in the form of evidence from scientific studies in religious perspectives and the views of experts, we can conclude that the majority of experts believe that technological innovation in the form of applications is very effective in providing health services based on the mandate of the law in Indonesia. The parties in the context of health services believe that technology applications can provide effectiveness through the power of innovation and digital transformation so that health services to the community will follow the consumption mandate of the law in the Republic of Indonesia. Therefore, several epidermises that we have studied have met the scientific requirements, so we have carried out the evidence to support the hypothesis and answer the problem in this study, namely to gain an understanding of the efficiency of using technology applications in supporting the government to provide public health services following the mandate of the constitution of the Republic of Indonesia.

Conclusion

This study aims to understand digital transformation and the efficient use of the health public service sector about its legal status. Through a study of various sources of information, we were finally able to collect some evidence of the study, which we believe has answered the problem of this study. The findings we have obtained include the transformation of technology in health as part of the Government's service to the health of its citizens, which is regulated in the health law. The application of digital technology in the world of health is to answer the demands and priorities of everyday health activities based on data, and this has become a guideline for the international health body. In another part, we also find that the use of technology in medicine is a plan that the Indonesian Government has included; from 2021 to 2024, the Government has developed a health service framework.

On the other hand, we also found various scientific pieces of evidence related to services and technology, which led to the argument that technology is part of the innovation of health services by the Government to every Indonesian citizen following the law that requires the Government to run to get the desired health degree. The various scientific evidence presented here can generally be concluded that this data-based technology is a development of the community's demands for extensive data services, which are also part of projects implemented in other countries. Thus, there is no other reason for the Government not to implement or run digital-based public health services supported by health laws regarding health care services and health insurance coverage. Thus the findings hopefully get attention for the development of further studies.

Acknowledgments

We thank all parties for the help of this scientific work company, especially as a university colleague, and also for Arito's proposal for all the help. We say a thousand thanks.

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