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JURIDICAL ANALYSIS OF DOCTORS ENGAGING IN COLLUSION WITH PHARMACEUTICAL COMPANIES IN PRESCRIPTION OF MEDICATIONS

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Abstract

In Indonesia, the legal rules that regulate the prohibition of doctors receiving gifts from pharmaceutical companies have not had a significant impact because the existing regulations only exist in the realm of ethics and administration. As a result, the collaboration between doctors and pharmaceutical companies in prescribing drugs continues and has a negative impact on patients. This research analyses the actions of doctors and pharmaceutical companies colluding in prescribing drugs to patients. The purpose of this research is to understand the legal responsibility of doctors and pharmaceutical companies colluding in prescribing drugs to patients, and also to understand the comparison of prevention of collusion between doctors and pharmaceutical companies in drug marketing in Indonesia and the United States. This study uses normative legal research because this research is only intended for written regulations, so this research is closely related to literature because it requires secondary data. The findings of this study indicate that collusion between doctors and pharmaceutical companies, which involves unethical or illegal agreements, can result in civil legal liability. However, if we review the law in the United States, the United States has stronger regulations, better transparency, and stricter legal sanctions in preventing collusion between doctors and pharmaceutical companies in drug marketing compared to Indonesia.

1. INTRODUCTION

Health is a crucial aspect of human life and a top priority in the efforts of sustainable national development to achieve societal well-being. Health holds significant importance as it is a human right enshrined in the Constitution of the Republic of Indonesia of 1945. Article 28 H of the Indonesian Constitution¹ states that "every person has the right to a prosperous life, both physically and spiritually, to live in a good and healthy environment, and to obtain healthcare services" while Article 34 paragraph (3) asserts that "the state is responsible for providing adequate healthcare facilities and public services". As a country founded on the rule of law, Indonesia requires all actions to comply with the law. This principle applies to

¹ Article 28 H The 1945 Constitution of the Republic of Indonesia.

the medical profession as well, which follows a code of ethics. Article 23(3) of Law Number 36 of 2009 on Health (Health Law) states that patient safety must take precedence over all other interests. The general obligations section of Indonesian Medical Code of Ethics of 2012 specifically emphasizes that doctors must not be influenced by factors that threaten the independence of their profession, including receiving remuneration from pharmaceutical companies or engaging in product promotion for personal or group gain. Doctors are also obligated to reject requests from healthcare industries aimed at influencing the prescription of specific drugs or products for the benefit of pharmaceutical companies.

The aim of medical practice is to achieve equitable, compassionate healthcare while keeping up with advancements in medical science and technology. Medical practice involves a series of activities conducted by physicians and dentists in the pursuit of patient health.² The implementation of regulations regarding medical practice is intended to provide protection to patients, maintain and improve the quality of medical services provided by physicians and dentists, and offer legal certainty to the public, doctors, and dentists.3 In other words, Law Number 29 of 2004 on Medical Practice (Medical Practice Law) provides legal assurance for both patients and doctors in carrying out their professions. The Indonesian Code of Medical **Ethics** (Kode Etik Indonesia/KODEKI) serves as a collection of norms that guide doctors in their practice within the community. This ethical code includes general principles and functional norms to uphold the doctor-patient trust relationship. Substantively, KODEKI is comprehensive in promoting doctor professionalism. Its entirety comprises obligations, not only external duties concerning the doctor's interactions with others, but also internal duties concerning the doctor's relationship with oneself. The substance of KODEKI encompasses General Obligations, Doctor's Obligations towards Patients, Doctor's Obligations towards Peers, and Doctor's Obligations towards Themselves.

Thus, doctors should provide the necessary protection to patients, which involves prescribing appropriate and effective medications. However, the healthcare system in Indonesia is still perceived to be inadequate. Within healthcare services, especially when doctors prescribe medications to patients, there are ethical gaps that some doctors may exploit. These ethical violations stem from healthcare professionals' failure to uphold professionalism and adhere to their ethical guidelines. This issue is illustrated by data from the Ministry of Health and regulations on Circular Letter of Minister of Health Number KF/MENKES/167/III/2014 regarding Drug Procurement Based on the Electronic Catalogue (E-Catalogue), which indicates instances of healthcare services potentially breaching the law. One such violation is the collaboration between doctors and large pharmaceutical wholesalers (*Pedagang Besar Farmasi*/PBF). Furthermore, an investigation conducted by Tempo magazine at the end of 2015 revealed a case of alleged gratification involving 2,125 doctors who were civil servants with Interbat Pharmaceutical Company. It was estimated that around 131 billion Indonesian rupiahs were paid by PT Interbat to these doctors between 2013 and 2015 to promote the prescription of Interbat-produced

² Article 1 number 1 *Law Number 29 of 2004 on Medical Practice*. The doctors referred to in this law also include dentists.

³ Article 3 number 1 Law Number 29 of 2004 on Medical Practice.

⁴ Mitra Tarigan, "Gratifikasi Dokter, Menteri Nila Akan Temui Farmasi dan IDI," *Tempo*, accessed June 26, 2023, https://nasional.tempo.co/read/717860/gratifikasi-dokter-menteri-nila-akan-temui-farmasi-dan-idi.

medications.⁵ From these incidents, it is evident that both doctors and PBF are bound by ethical codes, and their relationship with patients should be solely focused on providing healthcare without seeking personal gains. Patients visit doctors with the hope of recovery and place their full trust in them for diagnosis and appropriate prescriptions for their healing. Therefore, it is crucial for healthcare professionals to always prioritize the welfare and care of patients above all else.

In the world of healthcare in Indonesia, there is an issue concerning norm conflicts that have an impact on patients' financial difficulties. Some doctors have been found to prescribe medications at prices far above the standard due to collusions with pharmaceutical companies promising business gains.⁶ This situation poses a threat to patient safety as the purchased medications may not always adhere to the proper healthcare procedures and could endanger patients' well-being. There are regulations that provide legal protection for patients in healthcare services, including the Consumer Protection Law (Law Number 8 of 1999 on Consumer Protection). However, there is a debate regarding the application of this law to resolve disputes between patients and doctors. The Indonesian Medical Association rejects this approach, fearing broader consequences for the medical profession.⁷

According to an expert in pharmacology, Iwan Dwiprahasto, collusion between doctors and pharmaceutical companies occurs due to the promising business value of certain medications. Pharmaceutical companies provide incentives and commissions to doctors who prescribe specific drugs.⁸ As a result, patients have to pay high prices for these drugs even though there are cheaper alternatives with the same quality. Although this collusion contradicts the medical code of ethics, no doctors have been criminally punished for such actions. Hence, this research is conducted to prevent patient losses due to collusion practices. The research will focus on understanding the appropriate legal regulations for imposing criminal sanctions on private and government-employed doctors involved in collusion with pharmaceutical companies.

Despite the difficulty in proving this issue, it is essential to address it to maintain the quality of healthcare services and safeguard patients' well-being. The prescription of medications should adhere to established healthcare procedures, and doctors must act in accordance with medical ethics without considering incentives from pharmaceutical companies. Concerns exist that the enforcement of laws against doctors may differ between private and government-employed doctors, thus, this research will shed light on the applicable legal regulations for both groups. Despite instances of collusion, many doctors still uphold the principles of medical ethics and strive to provide the best healthcare services to patients.

To address the problem of collusion between doctors and pharmaceutical companies in prescribing medications, decisive actions from authorities are necessary. Referring to Law Number 11 of 1980 on Bribery and Law Number 31 of 1999 *juncto* Law Number 20 of 2001

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Fitri Syarifah, "Kemenkes Gandeng KPK Cegah Gratifikasi dan Korupsi," *Liputan 6*, April 2, 2014, https://www.liputan6.com/health/read/2031172/kemenkes-gandeng-kpk-cegah-gratifikasi-dan-korupsi.

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⁷ Regulation of Minister of Health Number 11 of 2017 on Patient's Safety.

Eri Komar Sinaga, "Menteri Kesehatan Gandeng KPK Atur Gratifikasi Dokter," *Tribun News*, November 6, 2015, https://www.tribunnews.com/nasional/2015/11/06/menteri-kesehatan-gandeng-kpk-atur-gratifikasi-dokter.

on the Eradication of Corruption, doctors and pharmaceutical companies involved in collusion can face criminal sanctions. However, the application of these punishments must be done justly and based on strong evidence to avoid unrest within the medical profession. The government must also enhance supervision and monitoring of the prescription practices by doctors. Enforcement of rules and medical code of ethics should be consistent and transparent, regardless of whether the doctor is private or government-employed. Additionally, there should be a system for patients to report and lodge complaints if they feel victimized by collusion practices in healthcare services. This would facilitate the detection and more effective handling of cases involving medical ethics violations.

In conclusion, the issue of collusion between doctors and pharmaceutical companies in prescribing medications is a serious matter that requires prompt attention. Upholding legal protection for patients in healthcare services, including the enforcement of criminal sanctions against colluding parties, is crucial. Improving education and supervision regarding medical ethics are also necessary to ensure that medical practices remain ethical and prioritize patients' interests. Collaboration between the government, medical professionals, and pharmaceutical companies will be key in establishing a fair, safe, and high-quality healthcare system for the public. The main issues raised in this research are: what is the legal accountability of doctors and pharmaceutical companies colluding in prescribing medications for patients; and how does the prevention of collusion between doctors and pharmaceutical companies in drug marketing in Indonesia compare to the United States.

2. METHOD

This study uses normative legal research because this research is only aimed at written regulations so this research is very closely related to literature because it will require secondary data. This study uses secondary data. Secondary data in legal research can be classified into 3 (three) levels, namely Primary Legal Materials, Secondary Legal Materials, and Tertiary Legal Materials. The data collection method uses library research (library research), namely conducting a series of documentation studies by collecting, reading, studying, making notes, and citations and reviewing library materials from books, accredited journals, websites, laws and regulations, and other documents related to the research topic. The types of approaches used are statutory approaches and case approaches. The type of data analysis used by the author in this study is qualitative data.

3. RESULTS AND DISCUSSION

3.1 Legal Liability Against Doctors and Pharmaceutical Companies Who Collude in Prescribing Drugs Patients

In the case of patient treatment of course there is someone who prescribes the medicine, namely a doctor, and a place to purchase the medicine, namely a pharmaceutical company, are required. Patients receive treatment from doctors and pharmaceutical companies, which can be classified as health services. Health services are one of the public services provided by doctors and pharmacies to patients, and the general type of facility can be a hospital, health center, or pharmacy. Good quality is required in the delivery of health services in the

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⁹ Article 1 Number 2 Law Number 8 of 1999 on Consumer Protection.

form of satisfying customers through good health services in accordance with health service standards, such as doctors who carefully diagnose and recommend medicine and pharmacies that dispense medicine correctly in accordance with doctor's recommendations. Then there are procedures that must be carried out in accordance with existing health-care principles, such as saving patients through safe procedures and actions that do not endanger patients or health-care providers. An effort is required to realize patient safety, namely monitoring. Monitoring aims to ensure that patient safety efforts are implemented in accordance with agreed standards and criteria. However, it is unfortunate that this principle does not work as well as it should because many doctors continue to collude with pharmaceutical companies for personal gain without regard for patient safety. This collusion is a false act that can be justified under both criminal and civil law.¹⁰

Legal responsibility for doctors and pharmaceutical companies who conspire to prescribe medicines to patients can be viewed from two perspectives: criminal law and civil law. Civil liability is legal responsibility based on civil relations between legal subjects. Some of these civil law liabilities can be seen in the accountability for unlawful acts. Unlawful acts are made up of several components. An act is considered unlawful if it satisfies the elements listed in Article 1365 Indonesian Civil Code, 11 namely an unlawful act, an error, a loss, and a causal relationship between the loss and the act.¹² Criminal law liability is legal responsibility based on an act that is committed deliberately (dolus) or accidentally (culpa). In terms of the doctor's relationship with the patient at the time of establishing a legal relationship, the doctor can offer treatment options as well as medicine options for the patient to redeem. According to Article 1 number 10 of the Regulation of the Minister of Health of the Republic of Indonesia Number 9 of 2017 on Pharmacies, a prescription is defined as a written request from a doctor, dentist, or veterinarian to a pharmacist, in paper or electronic format, for the supply and dispensing of pharmaceutical preparations and/or medical devices for patients. It is clear from this that there is a collaboration between doctors and pharmacists when it comes to medicine prescriptions. Then there is another thing that connects doctors and pharmacies, which is the production of medicine by pharmaceutical companies. 13 Costs are required for the process of checking medicines to see whether the medicines are suitable for consumption and distribution or not, and in this case it is often assumed that pharmacies cooperate with doctors to sell drugs which have been produced so that the pharmacy can cover the production costs of the medicine and get more profit while the pharmacy in cooperation provides rewards to doctors so that doctors want to prescribe drugs that have been produced by the pharmaceutical company. Doctors who collude with pharmaceutical companies have

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Rizka Fadhila and Tuti Afriani, "Penerapan Telenursing Dalam Pelayanan Kesehatan: Literature Review [Application of Telenursing in Health Services: Literature Review]," *Jurnal Keperawatan Abdurrab* 3, no. 2 (2020): 77–84, http://dx.doi.org/10.36341/jka.v3i2.837.

¹¹ Article 1365 Indonesian Civil Code.

¹² Indah Sari, "Perbuatan Melawan Hukum (PMH) Dalam Hukum Pidana dan Hukum Perdata [Torts in Criminal Law and Civil Law]," *Jurnal Ilmiah Hukum Dirgantara* 11, no. 1 (2020): 53–70, https://journal.universitassuryadarma.ac.id/index.php/jihd/article/view/651.

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violated Article 3 of KODEKI, which states that all professions must have a code of ethics that serves as a guide for carrying out the profession.¹⁴

Article 3 of KODEKI states "In carrying out medical work, a doctor must not be influenced by anything that results in loss of freedom and independence of the profession". 15 This article explains that doctors are obligated to work in accordance with their profession, namely helping people with conscience and not being influenced by anything, whereas in their actions, doctors who collude or have been influenced by pharmaceuticals to trade drugs are an intentional mistake and can be criminally responsible because this has entered into an act of gratification. Doctors themselves are divided into two, namely public doctors and private doctors, so their criminal liability can be applied differently. State doctors can be subjected to Article 12B of Law Number 31 of 1999 juncto Law Number 20 of 2001 which regulate the eradication of acts of corruption, in that every gratuity given to civil servants or state administrators is considered bribery, and if such gratuity is related to their position and contrary to their obligations or duties, they can face life imprisonment or imprisonment for a minimum of 4 (four) years and a maximum of 20 (twenty) years, as well as a fine of at least Rp200,000,000.00 (two hundred million rupiah) and a maximum of Rp1,000,000,000.00 (one billion rupiah). This gratification activity is included in the criminal act of corruption, which itself has two directions, namely passive and active. The criminal act of passive or negative corruption includes gratification.

Doctors and pharmacies can be said to be carrying out gratification because one of the elements, namely a doctor accepting bribes such as money with the status of a civil servant receiving from a pharmacy, clearly violates the provisions in Article 12B of the Corruption Law. On the other hands, private doctors cannot be charged as such because he is not a civil servant. Another sentence must be imposed, namely under the Anti-Bribery Law, which looks at it from the perspective of Private Bribery¹⁷ bribes with imprisonment for a maximum of three years. 18 Private doctors can be subject to criminal sanctions under this regulation, but there should be precautions in place before sanctions are imposed, and these precautions have actually been regulated in Regulation of Minister of Health Number 14 of 2014¹⁹ which regulates what the prohibitions on acceptance or gratification are, and what kinds of things are considered gratification. Even though there are regulations that regulate it, there is still collusion between doctors and pharmacies which might result in an impact such as high drug prices because pharmaceutical companies charge doctors fees for these drugs. This gratuity is also contrary to the duties and obligations of doctors which explain that doctors must provide services competently with full technical and moral freedom, accompanied by compassion and respect for human dignity.

Anis Afkar Adilah et al., "Kerjasama Dokter dan Industri Farmasi Terkait Obat Pada Pasien [Cooperation between Doctors and Pharmaceutical Traders Related to the Provision of Drugs to Patients]," *Proceeding Book Call for Papers Fakultas Kedokteran Universitas Muhammadiyah Surakarta* (Thalamus), 2021, 115–122.

¹⁵ Article 3 *The Indonesian Medical Code of Ethics of 2012*.

Law Number 31 of 1999 on Eradication of the Criminal Act of Corruption jo. Law Number 20 of 2001 on Amendment of Law Number 31 of 1999 on Eradication of the Criminal Act of Corruption.

¹⁷ Indriyanto Seno Adji, Korupsi Kebijakan Aparatur Negara dan Hukum Pidana [Corruption in State Apparatus Policy and Criminal Law] (Jakarta: CV Diadit Media, 2009), 306

Article 3 Law Number 11 of 1980 on on the Criminal Act of Bribery of Financial/Administrative Rights of Leaders and Members of Highest/High State Institutions and Former Members of High State Institutions as well as Former Leaders of Highest/Higher State Institutions and Former Members of High State Institutions.

¹⁹ Regulation of Minister of Health Number 14 of 2014 on Controlling Gratification in the Scope of Ministry of Health.

The compassion in question is based on conscience, not from personal interests, namely enriching oneself by receiving gratuities. Then doctors are also required to be honest with patients, where doctors should be honest in terms of treatment, not prescribing drugs from pharmacies that have been bribed. In this case, there have actually been many preventive measures to prevent gratuities from occurring, but with civil and criminal sanctions it may be possible for doctors to be more careful in carrying out their obligations and create a more deterrent effect for doctors who receive gratuities. In this act, the doctor and also the hospital have committed acts against the law, where there are elements that must be met, namely;

- 1. Error on the part of the perpetrator;
- 2. There is a loss from the victim;
- 3. There is a causal relationship between the act and the loss.

Because these three elements have been fulfilled. then the actions carried out by the doctor and also the hospital are unlawful acts.

3.2 Overcome Collusion Between Doctors and Pharmaceutical Companies in Drug Marketing

What is health and why health is a human right? Health is a state of well-being of the physical, mental, social and spiritual that enables a person to live productively socially and economically. Health is a human right guaranteed by the constitution. Article 28H paragraph (1) of the 1945 Constitution states that everyone has the right to live in physical and spiritual prosperity, to have a place to live, to have a good and healthy environment and to receive health services. In addition, Article 34 paragraph (3) of the 1945 Constitution states that the state is responsible for adequate health services and public facilities for all people. Thus, health is not only an individual condition, but also a collective responsibility between the government and society. However, national health, which is a constitutional promise, is threatened by the behavior of rogue doctors who market drugs by cooperating with pharmaceutical companies. ²⁰

Doctors have the authority to prescribe drugs according to patient needs and professional standards. This authority is based on the knowledge, skills and responsibilities of doctors as health service providers. In prescribing drugs, doctors must consider the benefits, risks, and costs of drugs for patients. However, some doctors cooperate with pharmaceutical companies. This form of cooperation is a violation of the doctor's authority. This act was carried out because of an incentive from the Company whose medicine is used by doctors in their practice.

The real impact of this collaboration (collusion) is the emergence of abuse of authority and tarnishing the doctor's code of ethics and the patient's right to receive the best treatment, not to be taken for granted. Law Number 29 of 2004 on Medical Practice stipulates that doctors must practice medicine in a professional, independent and responsible manner. Doctors must also respect patient rights, including the right to obtain clear and complete information about the drug prescribed.

Collusion is an unethical practice carried out by a group of people or organizations to benefit themselves in a way that harms other parties. In the health sector, collusion can

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Yenny Fitri Z., "Tinjauan Hukum Dokter Yang Berkolusi Dengan Perusahaan Farmasi Dalam Meresepkan Obat [Juridical Analysis of Doctors Colluding with Pharmaceutical Companies in Prescribing Medications]," *Jurnal Cendekia Hukum* 3, no. 2 (2018): 273, https://doi.org/10.33760/jch.v3i2.31.

occur between doctors, hospitals, pharmaceutical companies, insurers and other parties involved in providing and administering health services. Collusion can have a negative impact on national health, including: The decline in the quality of health services. Collusion can cause doctors to prescribe drugs that are not in accordance with the patient's needs, perform unnecessary or excessive medical procedures, or refer patients to certain hospitals or health facilities that provide commissions or incentives to doctors. This can pose a risk of side effects, complications, infection, or even death for the patient. Increasing burden of health costs. Collusion can increase the price of drugs, medical devices, and healthcare services that are unreasonable or non-transparent. This can be burdensome for patients and their families who have to pay more to get quality health services. In addition, collusion can also eat up the state budget allocated for public health programs, such as Social Security Administrator for Health (*Badan Penyelenggara Jaminan Sosial Kesehatan* or *BPJS Kesehatan*), thereby reducing the efficiency and effectiveness of managing health funds.

Collusion can damage the reputation and integrity of doctors and other health workers who should uphold the code of ethics and professional standards in providing quality and dignified health services to patients. Collusion can also reduce public trust in the health system, which should protect the rights and interests of patients as consumers of health services.

A doctor with civil servant status can be subject to gratuities when having a cooperative relationship with a pharmaceutical company. Gratification here is a gift in the form of money, goods or services given to officials or civil servants with the intention of influencing decisions or actions related to the position or authority they hold. Gratification can regulate doctors with civil servant status because they fall within the scope of officials or civil servants regulated by Law Number 20 of 2001 concerning the Eradication of Corruption Crimes (Corruption Law). However, a new problem arose because private doctors are not included in the elements of officials or civil servants, so they cannot be subject to the Corruption Law if they receive gratuities. The solution is, for private doctors who receive gifts from pharmaceutical companies with the intention of influencing them to prescribe drugs to patients, Article 3 of Law Number 11 of 1980 on the Crime of Bribery (Anti-Bribery Law) can be imposed.²¹

Comparative Analysis with Other Countries Comparison Aspect:

1. Scope

- Physician Payments Sunshine Act: Regulates the financial relationship between doctors/teaching hospitals and manufacturers of medical products
- Indonesian Health Law: Regulates various aspects related to health.

2. Reporting Mechanism

- Physician Payments Sunshine Act: Through periodic electronic reporting by manufacturers of medical products to CMS
- Indonesian Health Law: Has no regulation in line with the Physician Payments Sunshine Act, ethical rules are voluntary.

3. Transparency

- Physician Payments Sunshine Act: Focus on transparency and prevention
- Indonesian Health Law: Focus on prohibition and enforcement.

²¹ Anis Afkar Adilah et al., "Kerjasama Dokter dan Industri Farmasi Terkait Obat Pada Pasien [Cooperation between Doctors and Pharmaceutical Traders Related to the Provision of Drugs to Patients]," *Proceeding Book Call for Papers Fakultas Kedokteran Universitas Muhammadiyah Surakarta* (Thalamus), 2021, 119.

4. Sanctions

- Physician Payments Sunshine Act: Administrative sanctions in the form of fines
- Indonesian Health Law: Administrative, criminal and civil sanctions.

5. Reporting

- Physician Payments Sunshine Act: A centralized and open reporting mechanism
- Indonesian Health Law: Distributed and closed reporting mechanism
- 6. Disadvantages of the Physician Payments
 - Sunshine Act:
 - a. Does not cover all types of payments or benefits that can influence the doctor's decision
 - b. Insufficient information to distinguish between valid and unauthorized payments
 - c. Inappropriate sanctions for violators
 - d. Potential misunderstanding or stigma for legitimate payee doctors

The Physician Payments Sunshine Act and the Indonesian Health Law differ in scope, reporting mechanisms, sanctions, transparency and reporting. There are no perfect rules because humans are not perfect so it is important to adopt an effective mechanism in preventing collusion between doctors and the medical industry to maintain the integrity of the health system.

4. CONCLUSION

In the context of criminal liability, doctors and pharmaceutical companies can be held accountable if they are involved in collusion when prescribing medication to patients. Collusion between doctors and pharmaceutical companies, involving unethical or illegal agreements, can result in civil legal responsibility. In such situations, doctors engaged in collusion violate their professional responsibility towards patients. They may neglect the health interests of the patients for personal gain or benefits obtained from the pharmaceutical company. Such actions can harm patients and breach medical ethical codes. On the other hand, pharmaceutical companies involved in collusion may also bear civil responsibility. They might provide incentives or benefits to doctors to encourage them to prescribe specific drugs without objectively considering the patients' health interests. Such actions could be deemed as a breach or unlawful conduct within the context of civil liability. In this case, patients who suffer losses due to collusion between doctors and pharmaceutical companies can pursue their civil accountability. They can file a civil lawsuit against the involved doctors and pharmaceutical companies, providing evidence that they have suffered damages as a result of such collusion.

The comparison of preventing collusion between doctors and pharmaceutical companies in drug marketing in Indonesia and the United States can be seen through several aspects: Firstly, regulation. In the United States, there are several federal laws that govern drug marketing practices and the relationship between doctors and pharmaceutical companies, such as the Physician Payment Sunshine Act. This law requires pharmaceutical companies to report payments and other benefits given to doctors. In Indonesia, there are also regulations governing collusion between doctors and pharmaceutical companies, such as the Indonesian Medical Association's (*Ikatan Dokter Indonesia*/IDI) Code of Ethics. Secondly, transparency. In the United States, pharmaceutical companies are mandated to

report all payments and benefits given to doctors, and this information is made available to the public through an accessible online database. In Indonesia, efforts to improve transparency are also being made, but the availability of data on payments and benefits given to doctors may not be as comprehensive as in the United States. Thirdly, sanctions and law enforcement. In the United States, violations of drug marketing laws can result in significant penalties, such as substantial fines for pharmaceutical companies and disciplinary actions for doctors who violate the regulations. In Indonesia, there are also sanctions against collusion between doctors and pharmaceutical companies, but law enforcement may pose challenges, depending on factors such as supervision, compliance, and the capacity of law enforcement agencies.

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