



Vol. 5, No. 3, March 2025

e-ISSN: 2807-8691 | *p*-ISSN: 2807-839X

COMPARATIVE COMPETITION LAW IN HEALTHCARE: A REVIEW OF U.S. AND INDONESIAN REGULATORY APPROACHES

Raymond R. Tjandrawinata

Universitas Katolik Atma Jaya, Indonesia *e-mail: raytjan@yahoo.com

Keywords

ABSTRACT

competition law; healthcare antitrust; Indonesia regulation; pharmaceutical pricing; U.S. enforcement

The rapid expansion of digital health services and telemedicine introduces new dimensions to competition law enforcement in healthcare. This paper explores strategic recommendations to enhance Indonesia's competition law in healthcare by focusing on strengthening regulatory institutions, improving judicial consistency, fostering private enforcement mechanisms, and developing targeted policies for emerging digital health markets. This study employs a comparative legal analysis approach, integrating qualitative and normative research methods, to examine the effectiveness of existing competition law frameworks governing healthcare in the United States and Indonesia, identifying best practices, challenges, opportunities for improvement. The findings reveal stark contrasts in competition law enforced between the two countries, particularly in market concentration, regulatory oversight, judicial intervention, and private litigation mechanisms. By adopting a framework that fosters industry sustainability while preventing anti-competitive behavior, Indonesia can create a more competitive, innovative, and accessible healthcare system that benefits both pharmaceutical companies and consumers alike.

INTRODUCTION

Healthcare is a fundamental pillar of societal well-being, necessitating a balanced competitive environment to promote accessibility, affordability, and continuous innovation (CSDH, 2008). However, the healthcare sector is particularly vulnerable to monopolistic behavior and anti-competitive practices due to the high financial stakes, market concentration, and complex regulatory landscape (Gaynor & Ginsburg, 2017). In response, competition law functions as a critical regulatory mechanism to curb market abuses, protect consumer welfare, and stimulate industry growth. While the United States has developed a comprehensive antitrust framework with active enforcement mechanisms, Indonesia faces structural and institutional challenges that hinder effective competition law implementation (Baker, 2019).

A comparative analysis of competition law enforcement in these jurisdictions reveals key strengths and weaknesses. The U.S. model illustrates the effectiveness of a multi-tiered enforcement approach, including federal and state regulatory agencies, judicial oversight, and private litigation in deterring anti-competitive conduct (Sawyer, 2019). High-profile cases such as the Theranos fraud (Carreyrou, 2018), pharmaceutical price-fixing scandals, and the anti-competitive consequences of vertical integration by major healthcare providers underscore the pivotal role of antitrust law in



preserving market integrity (Cambaza, 2024). The Federal Trade Commission (FTC) and the Department of Justice (DOJ) actively investigate and challenge mergers, acquisitions, and monopolistic practices, ensuring that healthcare markets remain competitive and consumer interests are safeguarded.

In contrast, Indonesia's competition law enforcement in the healthcare sector faces notable obstacles, including regulatory inefficacy, judicial inconsistencies, and a lack of specialized competition policies tailored to the complexities of healthcare markets (Pasaribu, 2016). The *Komisi Pengawas Persaingan Usaha* (KPPU), Indonesia's competition authority, struggles with enforcement limitations, political influences, and procedural delays, weakening its ability to tackle monopolistic behaviors effectively (Dewi et al., 2024). Moreover, Indonesia lacks the strong precedent-setting litigation culture in the U.S., further reducing deterrence against anti-competitive conduct.

The rapid expansion of digital health services and telemedicine introduces new dimensions to healthcare competition law enforcement. Digital platforms, data-driven healthcare models, and cross-border telemedicine services create novel challenges that traditional competition laws may not sufficiently address (Tewari, 2024). The dominance of certain telehealth providers, potential data monopolies, and exclusionary practices within digital healthcare ecosystems necessitate adaptive regulatory strategies to prevent anti-competitive market distortions.

This paper explores strategic recommendations to enhance Indonesia's competition law enforcement in healthcare by focusing on strengthening regulatory institutions, improving judicial consistency, fostering private enforcement mechanisms, and developing targeted policies for emerging digital health markets. By leveraging insights from the U.S. experience, the study aims to refine Indonesia's competition law framework to mitigate market abuse while promoting innovation and equitable access to healthcare services. It analyzes and compares the competition law frameworks governing healthcare in the United States and Indonesia, identifying best practices, challenges, and opportunities for improvement. This research addresses a notable gap in the literature by specifically examining competition law in healthcare markets of emerging economies, contrasting it with broader themes like health systems (Paluttri, 2023) and AI regulations (Alfiani & Santiago, 2024). By providing empirical research on market concentration and regulatory responses, the study offers valuable insights and policy recommendations to inform regulators and stakeholders, ultimately fostering a more balanced and accessible healthcare system in Indonesia (Alfiani & Santiago, 2024; Paluttri, 2023).

METHODS

This study employs a comparative legal analysis approach, integrating qualitative and normative research methods to examine competition law enforcement in healthcare markets. By analyzing both statutory provisions and judicial precedents, the research aims to evaluate the effectiveness of existing legal frameworks in regulating anti-competitive behavior. Additionally, regulatory reports and scholarly literature are primary sources for contextualizing enforcement mechanisms and their practical implications (Hovenkamp, 2020). A theoretical foundation is established by exploring competition law theories, particularly the Chicago School and Post-Chicago perspectives, which offer contrasting views on market regulation. The Chicago School emphasizes efficiency and minimal government intervention, advocating for market self-regulation, while Post-Chicago theories highlight the complexities of market power, strategic behavior, and the need for proactive regulatory oversight (Glick & Bush, 2023). By incorporating these theoretical lenses, the study critically examines how different legal philosophies shape antitrust enforcement in healthcare. A comparative case study methodology is applied, focusing on landmark antitrust cases in the United

States and their potential implications for Indonesia. Cases such as United States v. Anthem, Inc. (2017), which involved a blocked healthcare merger due to concerns over reduced competition, and FTC v. Actavis, Inc. (2013), which addressed "pay-for-delay" agreements in the pharmaceutical sector, are analyzed to assess enforcement strategies and regulatory responses (Congressional Research Service, 2024). These case studies provide valuable insights into how competition authorities, courts, and private litigants shape antitrust enforcement in healthcare.

To supplement legal analysis, this study incorporates empirical research on market dynamics. Market concentration indices such as the Herfindahl-Hirschman Index (HHI) are used to assess the level of competition within healthcare markets, while pricing trends in pharmaceuticals, insurance, and hospital services offer insights into the impact of regulatory interventions (Djolov, 2013). Additionally, a review of regulatory effectiveness metrics—including enforcement actions, merger reviews, and compliance rates—provides an empirical basis for evaluating competition law outcomes in different jurisdictions (Chakraborty, 2024). Given the rise of digital health services and pharmaceutical patent policies, this study extends its scope to emerging competition law challenges in Indonesia. Digital health market regulations are scrutinized to understand how antitrust authorities are addressing concerns related to platform monopolies, data control, and telemedicine competition (Tewari, 2024). Similarly, an analysis of pharmaceutical patent regulations and judicial interpretations sheds light on how Indonesia's legal framework navigates the tension between intellectual property rights and market competition. By integrating comparative legal, theoretical, and empirical perspectives, this study aims to provide a comprehensive evaluation of competition law enforcement in healthcare, offering policy recommendations to enhance regulatory effectiveness in Indonesia.

RESULTS

Findings reveal stark contrasts in competition law enforcement between the United States and Indonesia, particularly in market concentration, regulatory oversight, judicial intervention, and private litigation mechanisms. The Herfindahl-Hirschman Index (HHI) for the U.S. pharmaceutical and insurance markets indicates high levels of concentration, necessitating frequent merger scrutiny by the Federal Trade Commission (FTC) (Feldman et al., 2022). The dominance of a few major players in pharmaceutical distribution, hospital ownership, and insurance markets has led to ongoing antitrust investigations and regulatory interventions to maintain competitive balance. High-profile cases, such as FTC v. Amgen-Horizon, demonstrate the FTC's active role in preventing monopolistic practices in pharmaceutical acquisitions (Federal Trade Commission, 2023). Additionally, vertical integration strategies by major U.S. healthcare providers, including hospital chains acquiring insurance companies or pharmacy networks, further raise concerns about potential anti-competitive market consolidation (Murphy, 2024).

In Indonesia's hospital industry, a study utilizing data from the Ministry of Health's Online Hospital Information System (SIRS) as of October 2020 found that government hospitals held a 51.4% market share. The study reported that the Concentration Ratio of the top four companies (CR4) was below 40, indicating relatively open competition among private hospitals at the national level. However, the study did not provide specific HHI values for the hospital sector (Rachmawati et al., 2024).

In contrast, Indonesia lacks a systematic approach to market concentration analysis, leaving the extent of monopolization and oligopolistic behavior difficult to quantify (Santoso et al., 2023). While key players dominate pharmaceutical procurement and hospital networks, there is limited official data on how market concentration affects pricing, consumer access, and overall competitiveness. The

Komisi Pengawas Persaingan Usaha (KPPU), Indonesia's competition authority, has few investigations into healthcare market abuses, largely due to regulatory challenges, institutional limitations, and political challenges (U.S. Department of State, 2024).

Digital Health and Telemedicine: Emerging Antitrust Concerns

The emergence of digital health services has introduced new complexities in competition law enforcement. The rise of telemedicine, digital health platforms, and AI-driven healthcare solutions has reshaped competitive dynamics, necessitating updated regulatory strategies.

In the United States, the FTC actively scrutinizes mergers and acquisitions in the digital health sector, particularly those involving big data consolidation and monopolistic control over telehealth services. A significant case is the UnitedHealth-Change Healthcare merger, which raised concerns over data monopolization and potential exclusionary practices (U.S. Department of Justice, 2022). Regulators argued that combining the largest health data analytics firm with a dominant health insurer could give UnitedHealth unfair competitive advantages by controlling access to critical patient and claims data, potentially undermining smaller competitors (Gu, 2022).

Conversely, Indonesia's regulatory framework for digital health remains underdeveloped, with little oversight on platform consolidation. The Indonesian telemedicine market, dominated by platforms such as Halodoc and Alodokter, lacks a clear competition law framework, leading to concerns over market entry barriers, data privacy risks, and anti-competitive pricing strategies (Dewayanti & Firdaus, 2023). Unlike in the U.S., where data ownership and competitive fairness in digital health are key regulatory priorities, Indonesia has yet to establish comprehensive telemedicine market control policies (Drury & Lazuardi, 2021). The potential for exclusive contracts between dominant telehealth platforms and pharmaceutical companies raises questions about whether smaller telehealth providers can compete fairly.

Additionally, integrating AI-driven diagnostic tools and electronic health records (EHRs) presents another competition law challenge. In the U.S., the dominance of large EHR providers has led to litigation over data interoperability and restrictive contracting practices (Javaid et al., 2024). Indonesia, however, has not yet addressed how digital health monopolization affects competition, leaving gaps in enforcement mechanisms that could allow anti-competitive behaviors to thrive.

The enforcement of competition law in the pharmaceutical sector varies significantly between the United States and Indonesia, particularly in antitrust interventions, regulatory oversight, and the ability to balance innovation incentives with market competition. The pharmaceutical industry plays a crucial role in advancing medical science, developing life-saving treatments, and ensuring the availability of high-quality medicines. However, regulatory frameworks differ in how they address pricing mechanisms, patent protection, and market dynamics, shaping the industry's competitive landscape.

Pharmaceutical Competition and Antitrust Enforcement in the United States

The United States has developed a sophisticated competition law framework to oversee pharmaceutical markets, ensuring companies can invest in research and development while maintaining market-driven pricing structures. A critical piece of legislation is the Hatch-Waxman Act, which balances innovation incentives with generic drug competition. This law allows brandname manufacturers to recoup their investments through exclusivity periods while providing a regulatory pathway for generic drug approval (Grabowski et al., 2021). However, regulatory scrutiny has led to legal challenges against certain patent settlement agreements, such as pay-for-delay cases, where brand-name and generic drug manufacturers negotiate settlements to avoid prolonged litigation

(Noonan, 2015). In FTC v. Actavis, the Supreme Court ruled that such agreements could be subject to antitrust review, though the decision also recognized that pharmaceutical settlements are often complex and require case-by-case evaluation (U.S. Supreme Court, 2013). These rulings have influenced how pharmaceutical companies structure their intellectual property strategies, ensuring a balance between competitive pricing and the sustainability of drug innovation. The U.S. pharmaceutical industry has also faced regulatory scrutiny over pricing strategies, particularly in cases involving generic drug pricing trends. While government authorities, including the FTC and the Department of Justice (DOJ), monitor the market for unfair trade practices, pharmaceutical companies emphasize that pricing reflects the cost of research, clinical trials, regulatory compliance, and manufacturing advancements (Prasad & Mailankody, 2017). Lawsuits related to alleged price coordination among generic manufacturers have led to investigations and settlements, highlighting the complex nature of pharmaceutical pricing structures. Mergers and acquisitions in the pharmaceutical sector have also been closely monitored to ensure a balanced competitive landscape. Recent cases, such as the FTC's review of Amgen's acquisition of Horizon Therapeutics, demonstrate how regulatory agencies assess market impact while considering the need for continued investment in drug development (Federal Trade Commission, 2023). The pharmaceutical industry maintains that consolidation efforts often enhance efficiency, improve supply chain resilience, and drive therapeutic advancements, benefiting both the healthcare system and patients.

Regulatory Challenges and Market Dynamics in Indonesia

In contrast, Indonesia's pharmaceutical sector operates under a different regulatory and competitive landscape, with the emphasis on ensuring drug availability and affordability. The industry is highly regulated, with price control mechanisms and procurement systems designed to manage costs. While competition law fosters market fairness, certain regulatory constraints have challenged industry growth and innovation. One of the key mechanisms in Indonesia's pharmaceutical pricing framework is the e-catalog procurement system, which centralizes government purchases of essential medicines (Satibi et al., 2022). While intended to standardize pricing and improve accessibility, the system has also been criticized for creating inefficiencies in procurement and limiting flexibility for pharmaceutical companies. The strict regulatory environment can sometimes reduce the incentive for new drug investments, as price caps may not reflect the full cost of production, research, and global market dynamics. Indonesia's compulsory licensing framework, which allows the government to permit the production of generic versions of patented drugs in certain cases, has been another area of debate. While intended to increase access to essential medicines, pharmaceutical companies argue that weak enforcement of intellectual property protections may discourage foreign investment and innovation in Indonesia's healthcare sector (Gaynor & Ginsburg, 2017). Global pharmaceutical firms emphasize that strong intellectual property rights encourage investment in high-quality drug manufacturing and ensure the development of novel therapies. Another challenge in Indonesia's pharmaceutical sector is the lack of robust legal mechanisms for private competition law enforcement. Unlike in the United States, where private litigation and class-action lawsuits play a significant role in competition regulation, Indonesia's legal system has fewer avenues for market participants to challenge regulatory decisions or competitionrelated disputes (Pasaribu, 2016). This limits the ability of pharmaceutical companies to engage in legal proceedings to clarify market rules and ensure fair regulatory practices.

Discussion

The findings highlight the necessity of a sector-specific approach to competition law enforcement in the healthcare industry, recognizing the unique market dynamics, regulatory challenges, and economic structures that shape competition within the sector. Unlike general competition law frameworks that govern a wide range of industries, healthcare markets require tailored regulatory measures to balance competition with public health objectives, ensuring affordable access to medicines, sustainable industry growth, and continued innovation.

Judicial and Private Litigation Mechanisms

A key distinction in enforcing competition law between the United States and Indonesia lies in the role of judicial intervention and private litigation mechanisms. In the U.S. legal system, private antitrust litigation is crucial in shaping market dynamics and ensuring compliance with competition laws. By contrast, Indonesia lacks a strong framework for private litigation, resulting in a regulatory environment that is less predictable for pharmaceutical companies and other healthcare market participants.

Private Litigation and Competition Law Enforcement in the United States

In the United States, private parties have significant legal standing to initiate competition law cases, which has led to a well-developed system of class-action lawsuits and private antitrust litigation. These legal avenues provide an additional enforcement layer, complementing governmental oversight by agencies such as the Federal Trade Commission (FTC) and the Department of Justice (DOJ). Pharmaceutical companies frequently face litigation over pricing strategies, intellectual property practices, and market competition issues, often resulting in highprofile settlements. For example, class-action lawsuits related to alleged price-fixing in the generic drug market have led to substantial financial settlements (Miller, 2022). However, while these lawsuits are positioned as consumer protection measures, they also introduce legal and financial uncertainties for pharmaceutical companies, creating a challenging landscape for long-term investment in drug innovation and supply chain stability (Galasso & Luo, 2024). Moreover, pharmaceutical firms often defend their patent rights and pricing models against allegations of monopolistic practices. In intellectual property disputes cases, brand-name manufacturers have been required to justify their pricing structures and patent strategies. While litigation helps establish legal precedents, it also creates an environment of increased regulatory scrutiny, which may discourage companies from investing in high-risk, high-cost drug development projects. Despite this active litigation landscape, it is important to recognize that pharmaceutical pricing is driven by multiple complex factors—including research and development (R&D) expenditures, clinical trial costs, regulatory compliance, and global supply chain dynamics (Prasad & Mailankody, 2017). The U.S. legal framework allows companies to challenge unfair litigation claims, ensuring that intellectual property protections remain intact while maintaining a competitive marketplace.

Judicial Challenges and Weaknesses in Indonesia's Private Litigation System

In contrast, Indonesia's competition law enforcement through private litigation remains underdeveloped, creating a regulatory gap that affects both pharmaceutical companies and the broader healthcare industry. Unlike in the U.S., where private litigation serves as a deterrent against anti-competitive behavior, Indonesia lacks strong mechanisms for market participants to challenge legal disputes related to pharmaceutical pricing, market competition, and patent protection (Hovenkamp, 2020). One of the primary weaknesses in Indonesia's legal system is the absence of an effective class-

action lawsuit framework in the pharmaceutical sector. Without well-defined legal channels for private parties to contest anti-competitive conduct, the pharmaceutical industry faces an unpredictable legal environment where regulatory decisions lack judicial oversight and clear precedent-setting rulings. The uncertainty surrounding competition law enforcement in Indonesia makes it difficult for pharmaceutical companies to navigate market regulations, particularly in areas such as drug pricing policies, market exclusivity rights, and procurement processes. Another key issue in Indonesia's judicial system is inconsistency in competition law rulings. Unlike in the U.S., where landmark rulings help shape future enforcement, Indonesia's Supreme Court has issued only a handful of competition law decisions in the healthcare sector, limiting the predictability of legal outcomes (Pasaribu, 2016). This lack of legal clarity affects pharmaceutical companies, as the absence of clear precedents makes it challenging to assess the legal risks associated with pricing strategies, intellectual property protections, and market entry restrictions. Furthermore, Indonesia's lack of strong private litigation mechanisms limits the ability of pharmaceutical companies to challenge unfair market practices. In the U.S., pharmaceutical firms can pursue legal recourse against competitors engaging in anti-competitive behavior, such as unlawful market exclusion tactics or abusive pricing practices by dominant players. In Indonesia, however, legal constraints prevent companies from effectively using litigation to protect their market interests, leading to uncertainties in competitive market dynamics.

Legal and Economic Implications for the Pharmaceutical Industry

The differences in judicial enforcement and private litigation mechanisms between the United States and Indonesia have direct implications for pharmaceutical companies operating in these markets. In the United States, while competition law enforcement is aggressive, the legal system also provides pharmaceutical firms with opportunities to defend their intellectual property, pricing strategies, and market positioning. The ability to challenge regulatory decisions through private litigation ensures that pharmaceutical companies are not unfairly penalized for standard industry practices, such as patent settlements, tiered pricing models, or strategic mergers and acquisitions. In contrast, Indonesia's weaker litigation framework introduces additional risks for pharmaceutical firms, particularly those involved in long-term investment projects in drug development, manufacturing, and distribution. Pharmaceutical companies face greater uncertainty in market access and competition law enforcement without a strong legal environment to protect industry players from arbitrary regulatory decisions.

Another critical issue is the impact of weak private litigation mechanisms on innovation incentives. In the U.S., pharmaceutical companies have legal avenues to protect their R&D investments, ensuring that intellectual property protections remain a central part of competition law considerations. By contrast, Indonesia's lack of judicial consistency in pharmaceutical competition cases may discourage investment in cutting-edge drug research, as companies may not have adequate legal protection against sudden regulatory shifts. Moreover, Indonesia's absence of a strong private litigation culture affects market stability, as pharmaceutical companies have limited recourse when facing potential anti-competitive actions from other market participants. This contrasts with the U.S. system, where private legal action safeguards against unfair market practices, allowing pharmaceutical firms to pursue litigation when their market interests are threatened.

The Need for a Balanced Legal Framework Supporting Pharmaceutical Growth

The comparative analysis of judicial and private litigation mechanisms in the United States and Indonesia underscores the importance of a balanced competition law framework that supports

pharmaceutical industry growth while maintaining fair market dynamics. In the U.S., private litigation plays a crucial role in shaping legal precedents, allowing pharmaceutical companies to defend their pricing strategies, patent rights, and business models. While regulatory scrutiny remains high, the legal system ensures that companies can challenge unfair claims, fostering an environment of innovation and market predictability.

In Indonesia, however, weak judicial mechanisms and limited private litigation opportunities create significant legal uncertainties for pharmaceutical firms. The lack of class-action lawsuit provisions, judicial inconsistency, and inadequate legal recourse for market participants hinder the ability of companies to operate within a predictable regulatory environment. These challenges limit incentives for long-term investment in the Indonesian pharmaceutical sector, potentially restricting market expansion and innovation in drug development.

For Indonesia to create a more competitive and investment-friendly pharmaceutical industry, it is essential to strengthen its judicial system by introducing clearer legal precedents, expanding private litigation mechanisms, and ensuring greater judicial consistency in competition law rulings. By establishing a legal framework that balances regulatory oversight with industry growth, Indonesia can foster a pharmaceutical market that encourages innovation, attracts investment, and enhances healthcare accessibility.

Pharmaceutical companies thrive in environments where legal frameworks provide both strong intellectual property protections and clear competition law enforcement. A well-structured judicial system that allows for fair private litigation ensures that pharmaceutical firms can operate with confidence, invest in groundbreaking research, and contribute to advancements in global healthcare. To promote fair competition while ensuring continued pharmaceutical innovation and healthcare industry growth, Indonesia must develop a sector-specific approach to competition law enforcement. Instead of adopting a broad, one-size-fits-all competition framework, the country should implement tailored regulations that address the unique challenges of the healthcare sector, balancing market competition with industry sustainability.

One potential solution is the introduction of healthcare-specific antitrust provisions, similar to those in the U.S. and European Union, that provide clear guidelines on pharmaceutical pricing, vertical integration, and market concentration. Such a framework should support competition while allowing pharmaceutical companies to maintain profitability, ensuring that investment in drug development remains attractive. Additionally, Indonesia must strengthen its regulatory institutions, providing them with the necessary authority and resources to monitor market behavior effectively. The Komisi Pengawas Persaingan Usaha (KPPU) must have greater legal power to investigate anticompetitive conduct in healthcare markets, including price-fixing, collusion, and exclusionary business practices. Enhanced merger review procedures and strict oversight of procurement contracts could help prevent monopolistic market consolidation, ensuring fair competition while allowing companies to operate in a predictable legal environment. Furthermore, pharmaceutical pricing regulations should be structured in a way that does not undermine industry growth. While competition law aims to prevent excessive pricing, policymakers must recognize that pricing models reflect not only production costs but also research expenditures, clinical trials, and regulatory compliance costs. Implementing overly strict price controls could discourage investment, reducing availability of innovative treatments in Indonesia. Instead, a dynamic pricing model—which considers market demand, research investments, and fair profit margins—would allow competition to thrive while ensuring affordability.

The differences in competition law enforcement between the United States and Indonesia underscore the importance of a sector-specific approach in regulating healthcare markets. The U.S.

has developed an aggressive and well-structured competition law framework, allowing regulators to intervene in anti-competitive behavior while supporting industry innovation. Challenges remain, particularly in pharmaceutical pricing, but judicial oversight and private litigation mechanisms ensure that competition laws remain adaptable to market needs. In contrast, Indonesia's broad competition law framework fails to address the specific challenges of the healthcare sector, leading to regulatory gaps in pharmaceutical pricing, market concentration, and vertical integration. Weak enforcement mechanisms allow monopolistic practices to persist, reducing market competition and limiting investment incentives. Moving forward, Indonesia must refine its competition law policies to provide greater legal clarity, enhance regulatory enforcement, and ensure a balanced approach to market competition. By adopting a framework that fosters industry sustainability while preventing anticompetitive behavior, Indonesia can create a more competitive, innovative, and accessible healthcare system that benefits both pharmaceutical companies and consumers alike.

CONCLUSION

The dominance of large firms in healthcare markets underscores the critical need for robust competition law enforcement to ensure a balanced industry that fosters both innovation and accessibility. Unique challenges in healthcare, such as high entry barriers and complex regulations, raise concerns about market consolidation's impact on consumer choice, pricing, and service availability. In the U.S., a comprehensive competition law framework, supported by proactive regulatory agencies like the Federal Trade Commission and the Department of Justice, effectively monitors and challenges anti-competitive practices. However, challenges persist, particularly in pharmaceutical pricing. In contrast, Indonesia's competition law enforcement is limited and lacks specificity, allowing dominant firms to consolidate power without adequate oversight. The absence of clear regulations on vertical integration further complicates the landscape. To improve, Indonesia should adopt lessons from the U.S. and other countries, such as India and Brazil, by enhancing regulatory oversight, establishing a dedicated healthcare competition unit, and developing clearer legal pathways for challenging market abuses. A collaborative effort among policymakers, industry stakeholders, and civil society is essential to create a balanced competition law framework that promotes market efficiency, sustainable growth, and equitable healthcare access. Future research should focus on specific regulatory frameworks for Indonesia's healthcare sector, examining the roles of consumer advocacy and the impact of institutional improvements on market fairness and innovation.

REFERENCES

- Alfiani, F. R. N., & Santiago, F. (2024). A Comparative Analysis of Artificial Intelligence Regulatory Law in Asia, Europe, and America. *SHS Web of Conferences*, 204, 07006. https://doi.org/10.1051/shsconf/202420407006
- Baker, J. B. (2019). *The antitrust paradigm: Restoring a competitive economy*. Harvard University Press.
- Cambaza, E. M. (2024). Theranos: the Ethics of Innovation and Deception in Healthcare Technology. *REVES - Revista Relações Sociais*, 7(2), 19792. https://doi.org/10.18540/revesvl7iss2pp19792
- Carreyrou, J. (2018). Bad blood: Secrets and lies in a Silicon Valley startup. Knopf.
- Chakraborty, D. (2024). Merger Control and Competition Policy. SSRN Electronic Journal. https://doi.org/10.2139/ssrn.4865812
- Congressional Research Service. (2024). The role of patents and regulatory exclusivities in drug pricing.

- CSDH. (2008). Closing the gap in a generation: Health equity through action on the social determinants of health. Final report of the Commission on Social Determinants of Health. WHO.
- Dewayanti, I., & Firdaus, S. U. (2023). Telemedicine in Indonesia: Perspective of Ethic, Discipline and Law. *Proceedings of the International Conference for Democracy and National Resilience* 2022 (ICDNR 2022). https://doi.org/10.2991/978-2-494069-75-6_2
- Dewi, R., Timori, H. P., S, Moh. K. A., Zakariya, A., Putri, A. A., Taena, M., & Ramadhanty, A. E. (2024). PERAN KOMISI PENGAWAS PERSAINGAN USAHA SEBAGAI WASIT SEKALIGUS HAKIM DALAM EKONOMI. *Collegium Studiosum Journal*, 7(2), 481–496. https://doi.org/10.56301/csj.v7i2.1417
- Djolov, G. (2013). The herfindahl-hirschman index as a decision guide to business concentration: A statistical exploration. *Journal of Economic and Social Measurement*, 38(3). https://doi.org/10.3233/JEM-130379
- Drury, P., & Lazuardi, L. (2021). *Telehealth and digital inclusion in Indonesia: Full report*. HEART Resources.
- Federal Trade Commission. (2023). *Biopharmaceutical giant Amgen to settle FTC, state challenges to its Horizon Therapeutics acquisition*. Federal Trade Commission.
- Feldman, R., Fulton, B. D., Godwin, J. R., & Scheffler, R. M. (2022). Challenges with Defining Pharmaceutical Markets and Potential Remedies to Screen for Industry Consolidation. *Journal of Health Politics, Policy and Law*, 47(5). https://doi.org/10.1215/03616878-9978131
- Galasso, A., & Luo, H. (2024). Product Liability Litigation and Innovation: Evidence from Medical Devices. *SSRN Electronic Journal*. https://doi.org/10.2139/ssrn.4758138
- Gaynor, M., & Ginsburg, P. B. (2017). Making Health Care Markets Work: Competition Policy for Health Care. *SSRN Electronic Journal*. https://doi.org/10.2139/ssrn.2964912
- Glick, M. A., & Bush, D. (2023). The Chicago School, the Post Chicago School, and the New Brandeisian Schools of Antitrust: Who Is Right in Light of Modern Economics? *SSRN Electronic Journal*. https://doi.org/10.2139/ssrn.4417509
- Grabowski, H., Long, G., Mortimer, R., & Bilginsoy, M. (2021). Continuing trends in U.S. brandname and generic drug competition. *Journal of Medical Economics*, 24(1). https://doi.org/10.1080/13696998.2021.1952795
- Gu, A. Y. (2022). DOJ's challenge of the UnitedHealth and Change Healthcare merger: What went wrong and what does it mean? The Source on Healthcare Price & Competition.
- Hovenkamp, H. (2020). Federal antitrust policy: The law of competition and its practice. West Academic.
- Javaid, M., Haleem, A., & Singh, R. P. (2024). Health informatics to enhance the healthcare industry's culture: An extensive analysis of its features, contributions, applications and limitations. *Informatics and Health*, *I*(2), 123–148. https://doi.org/10.1016/j.infoh.2024.05.001
- Miller, E. J. (2022). Amended declaration of Eric J. Miller in support of direct purchaser plaintiffs' motion for preliminary approval of settlements with Sun and Taro defendants.
- Murphy, N. (2024). *Trends and consequences in health insurer consolidation*. Center for American Progress.
- Noonan, K. E. (2015). The role of regulatory agencies and intellectual property: Part I. *Cold Spring Harbor Perspectives in Medicine*, *5*(7). https://doi.org/10.1101/cshperspect.a020800
- Paluttri, S. (2023). Comparative approach in public health social security: a legal case study of the Indonesian, France, and Singapore health systems. *International Journal of Human Rights in Healthcare*. https://doi.org/10.1108/IJHRH-03-2023-0020

- Pasaribu, M. S. M. (2016). *Challenges of Indonesian competition law and some suggestions for improvement* (2016–04; ERIA Discussion Paper Series).
- Prasad, V., & Mailankody, S. (2017). Research and development spending to bring a single cancer drug to market and revenues after approval. *JAMA Internal Medicine*, 177(11). https://doi.org/10.1001/jamainternmed.2017.3601
- Rachmawati, E., Umniyatun, Y., Kurniawan, D. W., Nurmansyah, M. I., Pakkanna, M., Nurjuman, H., Budiarto, S., & Gohardi, V. S. (2024). ANALYSIS OF THE MARKET STRUCTURE OF HOSPITAL INDUSTRY IN INDONESIA. *Jurnal Administrasi Kesehatan Indonesia*, *12*(1), 37–48. https://doi.org/10.20473/jaki.v12i1.2024.37-48
- Santoso, D. B., Suprapto, E., Zakaria, R. A., Kusumaningrum, H. A., & Jamil, H. (2023). Analysis of banking competition in Indonesia and its impact on profitability: Structure conduct performance (SCP) approach. *Journal of Innovation in Business and Economics*, 7(01). https://doi.org/10.22219/jibe.v7i01.27156
- Satibi, S., Kirana, P. L. K., Aziza, P. M., Hutasoit, M., & Pribadi, P. (2022). Analysis of e-catalogue drug prices in the era of Universal Health Coverage in the Indonesian pharmaceutical industry. *Pharmacia*, 69(2). https://doi.org/10.3897/pharmacia.69.e83068
- Sawyer, L. P. (2019). U.S. antitrust law and policy in historical perspective (19–110).
- Tewari, A. (2024). A Critical Evaluation of India's Proposed Digital Competition Act. *Competition Commission of India Journal on Competition Law and Policy*, 79–104. https://doi.org/10.54425/ccijoclp.v5.197
- U.S. Department of Justice. (2022). Justice Department sues to block United Health Group's acquisition of Change Healthcare. U.S. Department of Justice.
- U.S. Department of State. (2024). 2024 investment climate statements: Indonesia. U.S. Department of State.
- U.S. Supreme Court. (2013). Federal Trade Commission v. Actavis, Inc., et al., 570 U.S. 136.