



REPUBLIC OF INDONESIA

List of Medium-Term  
Planned External Loans  
(DRPLN-JM) 2011-2014  
~2014 Revision~

**Ministry of National Development Planning/  
National Development Planning Agency**



## **Foreword**

As stated in Government Regulation Number 10 of 2011 on Procedure for Procurement of External Loans and for Receiving Grants, the List of Medium-Term Planned External Loans (DRPLN-JM) can be revised and adjusted to the needs and/or developments of the national economy. The Revised DRPLN-JM 2011-2014 comprises activities that are consists of new proposals and proposed by Local Government and State Owned Enterprise (BUMN) as of USD 1.040,6 million.

The Revised DRPLN-JM of 2011-2014 that has been stipulated by Decree of the Minister of National Development Planning/Head of the National Development Planning Agency, Number KEP.79/M.PPN/HK/08/2014 and KEP.86/M.PPN/HK/09/2014. With the issuance of the Revised DRPLN-JM 2011-2014, it is expected that the implementation of external loans will be more effective and efficient and can accelerate the achievement of development goals.

Minister for National Development Planning/  
Head of the National Development Planning Agency

Armida S. Alisjahbana

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# List of Projects

## Usulan Kegiatan Baru/ *New Proposals*

PT. PLN/ *State Electricity Company*<sup>3</sup>

1. Java-Sumatera Interconnection Transmission Line (HVDC) 500 kV..... 5

Pemerintah Provinsi Aceh/ *Local Government of Aceh Province*<sup>7</sup>

2. Reengineering and Improving the Hospitals and Referral System in Selected Aceh..... 9



**Usulan Kegiatan Baru/**  
*New Proposals*





**PT. PLN/**  
*State Electricity Company*



1. **Project Title** : Java-Sumatera Interconnection Transmission Line (HVDC) 500 kV
  2. **Duration** : 42 months
  3. **Location** : Sumatra and Java Province
  4. **Executing Agency** : PT. PLN (Persero)
  5. **Implementing Agency** : PT. PLN (Persero)
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**6. Background and Justification**

South Sumatera is considered as the main source for national energy, with the abundance of low rank coal, which can be most efficiently utilized in mine mouth power plants. Growth of electricity demand in Java-Bali area is very high, around 9.3% per year, in which furtherly requires 3.500 MW power generations every year. Nevertheless, there are limited locations for building new power plants in Java. PLN (State Electricity Company) has a plan to engage Independent Power Producer (IPP) developers to build mine mouth power plants with capacity of 4x600 MW located in Muara Enim and 2x600 MW in Musi Rawas of South Sumatera. The operation date of the project planned to be started in 2016. Transferring the output from the mine mouth power plants to Java will require very long distances and large capacities-transmission facilities, which only can be channeled by 500 kV HVDC line.

**7. Scope of Work**

Construction of:

- a. AC/DC converter and switching stations (Sumatera side dan Java side);
- b. DC Submarine Cable (Sumatera-Java, Sunda Strait);
- c. DC Overhead Transmission Lines (Sumatera side and Java side);
- d. AC Overhead Transmission Lines (Sumatera side and Java side).

**8. Priority**

Infrastructure

**9. Output and Outcome**

a. Output

- 1) Supply of electricity in Java and Sumatera Island, increased;
- 2) Production cost, reduced.

b. Outcome

The ability to :

- 1) Utilizing untraceable low rank coal in South Sumatera;
- 2) Evacuating power from mine mouth power plants to load centers in Java;
- 3) Increasing the reliability of Java-Bali system and Sumatera system;
- 4) Sharing reserve capacity between Java-Bali and Sumatera.

**10. Project Cost**

<b>• Foreign Funding</b>		<b>• Counterpart Funding</b>	
- Loan	: US\$ 933,800,000	- Central Government	: US\$ 0
- Grant	: US\$ 0	- Regional Government	: US\$ 0
Sub Total	: US\$ 933,800,000	- State-Owned Enterprise	: US\$ 168,000,000
		- Others	: US\$ 0
		Sub Total	: US\$ 168,000,000
<b>TOTAL : US\$ 1,101,800,000</b>			

**Pemerintah Provinsi Aceh/**  
*Local Government of Aceh*  
*Province*



1. **Project Title** : Reengineering and Improving the Hospital and Referral System in Selected Aceh
  2. **Duration** : 60 months
  3. **Location** : Aceh Province
  4. **Executing Agency** : Local Government of Aceh Province
  5. **Implementing Agency** : Ministry of Health
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## 6. Background and Justification

Health sector (hospital and its referral system) is a national and regional priorities. It is necessary to improve access and quality of health services in order to support the achievement of the MDGs and also to implement the National Health Insurance programme. Level of health quality of the People in Aceh are not satisfying enough due to the unavailability of sufficient facilities and infrastructures. Hospital that exists in each district of the City does not provide the good referral system yet, due to the condition where the districts are lack of small hospital. Even if there are some of them, they do not have enough doctors and staff as well as adequate building facilities. In addition to that existing matters, bearing in mind that most of Aceh regions are mainly located in mountainous terrain, this factor also disabling or complicate access for the people to get into the referral hospital. Even if the regional hospital increasing the number of referral hospitals and provide better service, these will be blocked up by the unsolved problems above.

The Health Insurance program from Aceh Government provide the convenience for the people in Aceh to get free health care treatment, so the number of hospital visits were increased, while at the same time existing hospitals are not able to accommodate the burgeoning number of patients. The low quantity and quality of human resources in the district and/or city hospitals, particularly specialist doctors who are concentrated in several large cities in Aceh province, affecting the lack of specialist services in the District. So in a concluding manner, the high rates of maternal and child mortalities in Aceh province caused by the delay in the handling at the Hospital.

All of the aforementioned problems need to be solved by the improvement of the hospital and referral system across the province.

## 7. Scope of Work

- a. Infrastructure Development (construction of new hospitals, renovation of old hospitals, DHO offices);
- b. Procurement of clinical and non-clinical equipment;
- c. Operational procurementPurchase of operation;
- d. Medical and associated medical education and training;
- e. Strengthening hospital management, and human resource development;
- f. Research and Development in tropical diseases, trauma, oncology, reproductive health, preventive, cardiology, etiology, preventive care and MCH Care;
- g. Health system strengthening and development.

## 8. Priority

Economy

## 9. Output and Outcome

### a. Output

- 1) High quality sustainable health services on various treatments including but not limited to trauma, emergency response, tropical disease, cardio-neuro vascular, and general treatment;
- 2) Improvement of teaching opportunities for medical students, young doctors, postgraduate, residents in medicine/nursing/midwifery in Zainal Abidin hospital Meulaboh, Bireun, Langsa, Southern Aceh, and Takengon;
- 3) Medical and biomedical research conducted in Zainal Abidin Hospital;
- 4) Improvement of both clinical and non-clinical management systems with special emphasis on quality control and finance area;
- 5) Improvement of referral system;
- 6) Improvement of multi layers human resources' quality at the hospital;
- 7) Quality Improvement of the hospital infrastructure across the Aceh Province.

### b. Outcome

- 1) Availability of access to health treatment for Aceh residents due to the hospital regionalisation mechanism pointed towards the poor and severe communities in slum areas;
- 2) The availability of better health treatment at the Zainal Abidin hospital (as the appointed provincial hospital), along with other regional hospitals and districts hospitals;
- 3) Mortality rates for mother and infants, decreased;
- 4) Integrated immunization rates, improved;
- 5) Number of births conducted by trained birth attendants, improved;
- 6) The improvement of referral system used for reporting high-risk pregnancy;
- 7) Enabling Aceh residents to implement daily healthy lifestyle;
- 8) Special treatment provided across the provincial and districts' hospitals.

## 10. Project Cost

<ul style="list-style-type: none"> <li>• <i>Foreign Funding</i></li> </ul>		<ul style="list-style-type: none"> <li>• <i>Counterpart Funding</i></li> </ul>	
- Loan	: US\$ 106,800,000	- Central Government	: US\$ 0
- Grant	: US\$ 0	- Regional Government	: US\$ 54,800,000
Sub Total	: US\$ 106,800,000	- State-Owned Enterprise	: US\$ 0
		- Others	: US\$ 0
		Sub Total	: US\$ 54,800,000
<b>TOTAL : US\$ 161,600,000</b>			