

The Connection Between Perceived Value and Healthcare Service Quality on Revisit Intention at Siloam Hospitals with Patient Satisfaction as a Mediating Factor

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Keywords	Abstract
Perceived Value; Healthcare Service Quality Patient Satisfaction; Revisit Intention	This study examines how Healthcare Service Quality and Perceived Value affect Revisit Intention through Patient Satisfaction at Siloam Hospitals. As Indonesia's largest network yet ranking below competitors, Siloam's patient satisfaction gaps impact its market position. Understanding these relationships is crucial for improving service quality and patient retention in competitive healthcare markets. The research aims to assess the direct and indirect effects of Healthcare Service Quality and Perceived Value on Revisit Intention, focusing on the mediating role of Patient Satisfaction. The study offers insights into improving patient loyalty and service quality in hospitals like Siloam. A quantitative cross-sectional design was employed, collecting data via an online questionnaire from 313 patients at three Siloam hospitals in Jakarta. Simple random sampling was used, and data was analyzed with Partial Least Square - Structural Equation Modelling (PLS-SEM) to evaluate the relationships between Healthcare Service Quality, Perceived Value, Revisit Intention, and Patient Satisfaction. Both Healthcare Service Quality and Perceived Value positively influence Patient Satisfaction. Perceived Value directly impacts Revisit Intention, while Healthcare Service Quality affects it indirectly through Patient Satisfaction. Healthcare Service Quality alone does not directly influence Revisit Intention. The study emphasizes the importance of Healthcare Service Quality and Perceived Value in boosting Patient Satisfaction, which leads to higher Revisit Intention. For Siloam Group to strengthen patient loyalty and improve its ranking, efforts should focus on providing high-quality services and ensuring patients perceive value commensurate with costs. Enhancing communication and transparency regarding service value may further improve patient experiences and encourage repeat visits.

INTRODUCTION

Indonesia, with a population of around 278 million people, is one of the countries with the largest population in the world (Worldometer, 2024). This population is one of the factors that causes many health facilities, both government and privately managed, to spread throughout Indonesia. Starting from hospitals, emergency departments (*IGD*), to health centers and clinics, they are available in various regions. Based on data from the Central Statistics Agency (*BPS*), Indonesia's economic growth in 2023 will reach 5.05%, higher than the average economic growth of other developing countries of 4.00% (IMF, 2023). This economic increase

is driving an increase in demand for health services, which is one of the basic needs besides housing and education (Yunike et al., 2023).

In Indonesia, there are various types of health services including public hospitals, special hospitals, health centers, and clinics. *BPS* data in 2020 recorded that there were 2,423 public hospitals, 536 special hospitals, 4,119 inpatient health centers, and 6,086 non-inpatient health centers. In Jakarta alone, there are 141 general hospitals, 51 special hospitals, 6 inpatient health centers, and 309 outpatient health centers (*BPS* data, 2020).

According to Law of the Republic of Indonesia Number 44 of 2019, a hospital is a place of health services with certain characteristics. Hospital services are influenced by advances in health science, technology, as well as social and economic conditions of the community. Therefore, hospitals must continue to strive to improve the quality of services and accessibility for all levels of society to improve overall public health.

Although the quality of health services in Indonesia has been internationally recognized according to the Indonesian Ministry of Health (*Kemenkes*, 2019), its implementation has not been evenly distributed in all health facilities. One of the reasons is the difference in services received by patients who pay personally, use insurance, or are members of *BPJS* (Aisyah, 2016).

Siloam Group manages 41 hospitals in various regions of Indonesia, making it one of the largest hospital networks in the country. With a national reach and a greater number of health facilities than its competitors, Siloam has won various international awards, including the Frost & Sullivan Indonesia Excellence Awards, and is ranked second in the Webometrics ranking of the best hospitals in Indonesia according to Webometrics (2024).

Even so, there are indications that Siloam has not managed to maintain its position as the best hospital in Indonesia. For example, since 2019, Siloam's position as the best hospital has been replaced by the Global Health Asia Pacific version of Premier Jatinegara Hospital. Siloam patient satisfaction has not met the target standards of Siloam itself.

The researcher in this case intends to find the reason why Siloam cannot maintain their position as the best private hospital owned by Indonesia, by assessing several variable factors that may influence each other, such as Healthcare Service Quality affecting patient satisfaction which can later affect Revisit Intention, and also Perceived Value which can affect Revisit Intention. There are other factors that may also affect the research for the best hospital at that time.

Based on research in 2022 conducted by Franziska Olivia et al. at Siloam Hospital for *Lippo Village* and *Kebon Jeruk*, the following results were obtained: patients who visited Siloam Hospital within 1 year were divided into 5 groups—80 patients (48.5%) only visited 1 time, 63 patients (39.4%) visited Siloam Hospital 2-3 times, 5 patients (3%) visited 4 to 5 times a year, and 15 patients (9.1%) had visited the hospital more than 5 times a year.

Siloam Hospitals, as Indonesia's largest private hospital network, has struggled to maintain its position as the country's top hospital since 2019, with patient satisfaction falling below expectations. This study aims to identify the reasons behind this decline by examining how Healthcare Service Quality and Perceived Value influence Revisit Intention, with Patient Satisfaction as a mediating factor. The findings will provide theoretical insights into patient loyalty dynamics in emerging markets and practical recommendations for Siloam to improve service delivery, such as enhancing staff training and cost transparency. By addressing these gaps, the research contributes to both academic literature and real-world healthcare management strategies, ultimately helping hospitals strengthen patient retention and competitive advantage.

RESEARCH METHOD

This research uses a quantitative survey design with a cross-sectional approach to evaluate the quality of healthcare services (*Healthcare Service Quality*) and perceived value (*Perceived Value*) on the intention of revisiting patients (*Revisit Intention*). Patient satisfaction was used as a mediating variable in this study. The research location involved three Siloam hospitals in Jakarta and its surroundings, with data collection carried out from May to June 2024. The study population consisted of patients who had received treatment at Siloam Hospital, while samples were randomly taken using a simple random sampling technique, with the criteria of patients who were willing to participate.

The number of samples was determined using Power Analysis with the Partial Least Squares – Structural Equation Modelling (*PLS-SEM*) model to ensure the accuracy and validity of the results. Data were collected through a closed-ended questionnaire based on the Likert scale from 1 to 5, which measures various aspects of *Healthcare Service Quality*, *Perceived Value*, patient satisfaction, and *Revisit Intention*. Primary data came from patient questionnaires, while secondary data consisted of hospital-related documents.

The validity of the instrument was tested using convergent and discriminant validity, while reliability was evaluated through composite reliability, with a value of > 0.7 considered reliable. Data analysis was carried out using *PLS-SEM*, which allowed estimation of latent variables and testing of relationships between variables in the research model. The measurement model (outer model) and structural model (inner model) were evaluated to ensure goodness of fit, with the R-square value as an indicator of the strength of the model. The results of this study will provide in-depth information about the influence of healthcare service quality and perceived value on patient satisfaction and *Revisit Intention*.

RESULT AND DISCUSSION

Respondent Demographic Profile

The study involved 313 respondents, who were selected based on various demographic criteria. Most of the respondents were women (54.63%) compared to men (45.37%). The age range of respondents ranged from 13 to 73 years, with the majority of respondents in the age group of 41-73 years (52.72%), while the rest (47.28%) were aged 13-40 years.

Table 1. Respondent Demographics

Profile		Sum	Percentage
Kind Sex	Man	142	45.37%
	Woman	171	54.63%
Age	13-40 years	148	47.28%
	41-73 years old	165	52.72%
Domicile	Jakarta	135	43.13%
	Bogor	11	3.51%
	Depok	16	5.11%
	Tangerang	85	27.16%
	Bekasi	66	21.09%
Work	Civil servants	26	8.31%
	Private employees	114	36.42%
	Student / Student	40	12.78%
	Housewives	65	20.77%

Profile	Sum	Percentage
Self employed	38	12.14%
Other	30	9.58%

Source: Primary Data 2024

Descriptive Analysis

Measurements of the sample were carried out using a Likert scale of 1-5, with a scale of 1 meaning "Strongly Disagree" and a scale of 5 meaning "Strongly Agree". Based on the interval calculation, the respondent categories were divided into five groups, from "Strongly Disagree" to "Strongly Agree."

1. Healthcare Service Quality

In the independent variable of *Healthcare Service Quality*, there were 17 indicators measured. The majority of respondents strongly agreed with most of the indicators proposed. The highest average score was obtained on indicator A2 with a mean of 4.492 and a standard deviation of 0.543, while the lowest value was found on indicator A8 with a mean of 4.176 and a standard deviation of 0.748. From the results of this descriptive analysis, it can be concluded that these indicators reflect the quality of health services which are considered very good by the respondents. Varying standard deviations showed different perceptions between respondents, with significant variation in answers on several indicators.

Table 2. Healthcare Service Quality

Name	Min	Max	Mean	SD
A1	2	5	4.297	0.672
A2	3	5	4.492	0.543
A3	3	5	4.422	0.561
A4	3	5	4.383	0.565
A5	3	5	4.409	0.581
A6	3	5	04.38	0.553
A7	2	5	4.355	0.639
A8	2	5	4.176	0.748
A9	2	5	04.31	0.601
A10	2	5	4.249	0.61
A11	3	5	4.463	0.576
A12	2	5	4.425	0.626
A13	1	5	4.444	0.563
A14	2	5	4.431	0.556
A15	3	5	04.46	0.523
A16	3	5	4.444	0.534
A17	3	5	4.291	0.66

Source: Primary Data 2024

2. Perceived Value

For the independent variable *Perceived Value*, there are 9 indicators measured. The majority of respondents gave an answer of "Strongly Agree" to almost all indicators. The highest average value was found in the B1 indicator with a mean of 4.358 and a standard deviation of 0.619, while the lowest value was in the B8 indicator with a mean of 4.083 and a standard deviation of 0.864. Indicator B8 also had the highest variation in answers, indicating a more significant difference in views among respondents regarding the perception of service value. However, overall, the majority of respondents consider the value they receive from healthcare to be in line with their expectations.

Table 3. Perceived Value

Name	Min	Max	Mean	SD
B1	3	5	4.358	0.619
B2	3	5	4.339	0.65
B3	3	5	4.38	0.629
B4	3	5	4.332	0.597
B5	3	5	4.351	0.633
B6	1	5	4.214	0.747
B7	2	5	4.281	0.643
B8	1	5	4.083	0.864
B9	2	5	4.201	0.733

Source: Primary Data 2024

3. Patient Satisfaction

In the dependent variable of Patient Satisfaction, there were 13 indicators measured. The results of the descriptive analysis showed that the majority of respondents were very satisfied with the services they received. The highest average value was recorded on the C1 indicator with a mean of 4.422 and a standard deviation of 0.610, while the lowest value was recorded on the C13 indicator with a mean of 4.01 and a standard deviation of 0.825. From the data, although the majority of respondents were satisfied, there were several indicators with more varied perceptions, as seen from the higher standard deviations in some indicators. This shows that there are still service areas that can be improved to improve overall satisfaction.

Table 4. Patient Satisfaction

Name	Min	Max	Mean	SD
C1	3	5	4.422	0.61
C2	2	5	4.227	0.68
C3	1	5	4.24	0.685
C4	2	5	4.278	0.651
C5	2	5	4.246	0.664
C6	3	5	4.332	0.618
C7	3	5	4.265	0.601
C8	3	5	4.22	0.624
C9	3	5	4.275	0.583

Name	Min	Max	Mean	SD
C10	2	5	4.182	0.661
C11	2	5	4.224	0.65
C12	2	5	4.16	0.659
C13	1	5	4.01	0.825

Source: Primary Data 2024

4. Revisit Intention

For the *Revisit Intention* dependent variable, there are 9 indicators measured. The results of the analysis showed that none of the respondents gave a "Strongly Agree" answer to these indicators. All indicators are in the "Agree" category with the highest average found in indicator D1 with a mean of 4.188 and a standard deviation of 0.664, and the lowest average found in indicator D4 with a mean of 4.019 and a standard deviation of 0.715. These results suggest that although patients as a whole tend to intend to return to using services, none of the respondents were unequivocally strongly confident of doing so.

Table 5. Patient Satisfaction

Name	Min	Max	Mean	SD
D1	2	5	4.188	0.664
D2	2	5	4.128	0.68
D3	2	5	4.07	0.725
D4	2	5	4.019	0.715
D5	2	5	4.032	0.719
D6	2	5	4.112	0.671
D7	2	5	4.054	0.706
D8	2	5	4.058	0.681
D9	2	5	4.086	0.738

Source: Primary Data 2024

3. Interferential Analysis

In this study, the multivariate statistical method *Partial Least Square - Structural Equation Model* (PLS-SEM) was used to analyze the relationships between variables. This process is carried out in two stages: *the Outer Model* to test the reliability and validity of the indicator, and *the Inner Model* to evaluate the predictive ability between variables.

a. Measurement Model (Outer Model)

In *the Outer Model*, reliability testing is carried out using *Indicator Reliability* and *Construct Reliability*. All indicators in the model meet reliability requirements, with an *outer loading* value of more than 0.727 and *Cronbach's alpha* and *Composite Reliability* values of more than 0.7. This shows that this research model has good reliability. The *Average Variance Extracted* (AVE) value for all variables is also more than 0.5, which means that this model has good validity.

Table 6. test results of the reliability and validity of the Outer Model using Partial Least Square-Structural Equation Modeling

Name	α	rho_a	rho_c	Result
HealthCare ServQual	0.962	0.963	0.966	Reliable
Patient Satisfaction	0.956	0.957	0.961	Reliable
Perceived Value	0.927	0.928	0.939	Reliable
Revisit Intention	0.960	0.960	0.965	Reliable

Source: Primary Data 2024

b. Structural Model (Inner Model)

For *the Inner Model*, the assessment using the determination coefficient (R^2) showed that the Patient Satisfaction variable had an R^2 value of 0.741, which means that 74.1% of the patient satisfaction variability could be explained by independent variables in the model. Meanwhile, *the Revisit Intention* variable had an R^2 value of 0.698, which means that 69.8% of the patient's intention to return can be explained by the variables in this model.

c. Hypothesis Testing

The results of the hypothesis test showed that of the 7 hypotheses proposed, 6 of them were supported by data. Supported hypotheses include a positive relationship between *Healthcare Service Quality* and Patient Satisfaction (T -Statistic = 6.073; $p = 0.000$), *Perceived Value* and Patient Satisfaction (T -Statistic = 10.331; $p = 0.000$), and Patient Satisfaction and *Revisit Intention* (T -Statistic = 8.088; $p = 0.000$). However, one hypothesis is not supported, namely the relationship between *Healthcare Service Quality* and *Revisit Intention* (T -Statistic = 0.238; $p = 0.406$), which suggests that the quality of healthcare services does not directly affect patients' intention to return.

Table 7. Hypothesis Test

Hypothesis	T Statistics	P values	Result
Direct influence			
H1	4.317	0.000	Hypotheses Supported
H2	8.088	0.000	Hypotheses Supported
H3	6.073	0.000	Hypotheses Supported
H4	10.331	0.000	Hypotheses Supported
H5	0.238	0.406	Hypotheses Not Supported
Indirect influence			
H6	4.987	0	Hypotheses Supported
H7	5.922	0	Hypotheses Supported

Source: Primary Data 2024

In addition, there was a significant indirect influence between *Healthcare Service Quality* and *Revisit Intention* mediated by Patient Satisfaction (T -Statistic = 4.987; $p = 0.000$), as well as between *Perceived Value* and *Revisit Intention* which were also mediated by Patient Satisfaction (T -Statistic = 5,922; $p = 0.000$). This suggests that patient satisfaction is a strong mediator in the relationship between service quality and return intent.

Discussion

This study aims to analyze the influence of *Healthcare Service Quality* and *Perceived Value* on *Revisit Intention*, with Patient Satisfaction as a mediating variable. The study respondents included inpatients and outpatients at three different Siloam Hospitals in Jakarta. Based on the results of the research conducted, it can be concluded that there is a positive relationship between the quality of health services and *the perceived value* of patients and their level of satisfaction and intention to return to using hospital services.

The Effect of Healthcare Service Quality on Patient Satisfaction

Based on the results of the analysis, it was found that *Healthcare Service Quality* has a positive and significant influence on Patient Satisfaction. The *T-statistic* value of 6.073 shows that the better the quality of service provided by the hospital, the higher the level of patient satisfaction. This shows that the quality of healthcare services in hospitals is an important factor in shaping patients' perception of their overall experience.

The quality of this service includes various aspects such as medical skills, personal attention from the staff, speed in providing services, and the comfort of the facilities. Patients who feel that the hospital pays attention to these aspects will tend to be more satisfied with their experience while receiving treatment. Siloam Hospital, with a reputation for high-quality services, is considered to have succeeded in meeting patient expectations in this regard.

The Effect of Perceived Value on Patient Satisfaction

In addition to service quality, *Perceived Value* has also been proven to have a significant influence on Patient Satisfaction. A *T-statistical* value of 10.331 indicates that the patient's perception of the value they receive according to the costs incurred is an important factor that determines their level of satisfaction. Patients who feel that they are getting the service that is worth the cost they are paying will feel more satisfied.

Siloam Hospital is known for its reputation as a provider of high-quality healthcare services. However, there are some aspects where patients feel that the costs they incur are not always worth the services they receive. This shows that hospitals need to improve communication and transparency regarding service fees to ensure that patients understand the value they receive.

The Effect of Patient Satisfaction on Revisit Intention

The results of the study also showed that Patient Satisfaction had a significant influence on *Revisit Intention*, with a *T-statistic* value of 8.088. Patients who are satisfied with the services they receive will be more likely to return to using the hospital's services in the future. Patient satisfaction proves to be an important element that drives patient loyalty and increases their chances of returning.

Patient satisfaction is not only affected by medical outcomes, but also by various other aspects such as emotional experience, comfort, and interaction with medical staff. Therefore, it is important for hospitals to continuously monitor and improve various aspects of services to ensure that patients are satisfied with their overall experience during their stay in the hospital.

The Effect of Healthcare Service Quality on Revisit Intention

Interestingly, the results showed that *Healthcare Service Quality* did not have a significant direct influence on Revisit Intention, with a *T-statistic* value of 0.238. This suggests that although good quality medical services can improve patient satisfaction, it does not directly affect patients' intention to return. Possibly, other factors such as price, hospital location, or a more emotional personal experience become more influential in determining whether or not the patient will return.

These results suggest that the quality of health care should be seen as a factor influencing satisfaction, which in turn will affect the intention to return. Therefore, while the quality of service is important, patient satisfaction is a key factor that more directly influences their decision to return to the hospital. This is supported by research conducted by Erna (2022) which states that *Service Quality* does not have a positive effect on *Revisit Intention*.

The Influence of Perceived Value on Revisit Intention

On the other hand, *Perceived Value* has a significant direct influence on *Revisit Intent*, with a *T-statistic* value of 4.317. This suggests that patients who feel that the value of the services they receive is worth the cost they incur are more likely to return to the hospital in the future. In the context of healthcare, the perception of value is important because it is directly related to patients' expectations and expectations of the cost and quality of services they receive.

This positive perceived value can be influenced by several factors, such as openness in costs, service quality, and ease of access to health facilities. Siloam Hospital seems to be successful in maintaining positive *perceived value* in the eyes of patients, but improvements are still needed to ensure that all patients feel value that is commensurate with their costs.

The Role of Patient Satisfaction Mediation between Healthcare Service Quality and Revisit Intention

The study also found that Patient Satisfaction mediated the relationship between *Healthcare Service Quality* and *Revisit Intention* significantly, with a *T-statistic* value of 4.987. This suggests that although the quality of healthcare does not affect the intention to return in person, it does affect patient satisfaction, which in turn affects the *Revisit Intention*. Patient satisfaction is an important factor that mediates this relationship, so hospitals need to focus on improving patient satisfaction to increase their loyalty.

The Role of Patient Satisfaction Mediation between Perceived Value and Revisit Intention

In addition, Patient Satisfaction also mediated the relationship between *Perceived Value* and *Revisit Intention*, with a *T-statistic* value of 5.922. This means that when patients feel that they are getting the value they deserve, it increases their satisfaction, which ultimately encourages them to return to using the hospital's services.

These results suggest that the perception of value and patient satisfaction are two interrelated factors in influencing the patient's intention to return. Hospitals must ensure that a good perception of value is always accompanied by a high level of satisfaction to build long-term loyalty.

CONCLUSION

The results of the study show that *Healthcare Service Quality* and *Perceived Value* have a positive influence on Patient Satisfaction, where the higher the quality of service and perceived value, the higher the level of patient satisfaction. However, only *Perceived Value* has a direct effect on *Revisit Intention*, while *Healthcare Service Quality* has no direct effect on the patient's intention to return. This study also found that Patient Satisfaction plays a significant role as a mediator between the two independent variables on *Revisit Intention*. The implications of these results for the management of Siloam Hospital highlight the importance of improving the quality of service and the value felt by patients to increase patient satisfaction and loyalty. Some aspects that need to be considered are proactive service from staff, cleanliness of the hospital environment, and the availability of complete and affordable medicines. Some of the

limitations of this study include sampling that relies on different patient experiences and data collection methods carried out online, which can lead to subjectivity and bias. For further research, it is recommended that the questionnaire be distributed directly (offline) to obtain more accurate responses. In addition, further research may also consider other variables that may affect *Revisit Intention*, such as trust and waiting time during treatment. Research at other hospitals or in different branches of the Siloam Group can also provide more comprehensive results.

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