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**Research Paper** 



### Analysis Of The Influence Of Health Service Quality, Facilities And Infrastructure, And Administrative Convenience On The **Loyalty Of BPJS Kesehatan Patients In Inpatient Care With** Patient Satisfaction As An Intervening Variable: A Case Study At Yadika Pondok Bambu Hospital

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ABSTRACT: This research aims to determine direct and indirect effects health service quality, facilities and infrastructure, and administrative convenience to loyalty through patient satisfaction at Yadika Pondok Bambu Hospital. The research design uses Explanatory Quantitative method. Primary data was collected via a questionnaire. Population and sample in this study, all 224 inpatient BPJS Kesehatan patients were a saturated or census sample. Data analysis method uses path analysis with calculation using Smart PLS 4 software. The research result show that there is a significant direct influence of health service quality and administrative convenience on patient satisfaction, there is significant direct influence of health service quality and patient satisfaction on loyalty. There is also an indirect effect of health service quality and administrative convenience to loyalty through patient satisfaction at Yadika Pondok Bambu Hospital.

**KEYWORDS:** Health Service Quality, Facilities And Infrastructure, Administrative Convenience, Loyalty, BPJS Kesehatan, Patient Satisfaction

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#### INTRODUCTION T.

The achievement of Universal Health Coverage (UHC) in Jakarta has significantly improved public access to healthcare facilities, leading many people to switch to BPJS Kesehatan as their primary health insurance. However, hospitals face financial challenges due to the INA CBGs payment system, which operates on a package-based reimbursement with thin profit margins. As a result, hospitals must attract and retain a high volume of patients to remain financially sustainable. In an increasingly competitive healthcare environment, patient satisfaction plays a crucial role in ensuring patient loyalty to a hospital.

Patient satisfaction is defined as the comparison between a patient's expectations and the perceived performance of healthcare services. If the service meets or exceeds expectations, patients are satisfied and more likely to return. Yadika Pondok Bambu Hospital, a Type C general hospital, has implemented several strategies to enhance patient satisfaction.

A preliminary patient satisfaction survey conducted in October 2024 among 30 inpatients identified key dissatisfaction areas: Healthcare Service Quality: 16.6% dissatisfaction, Facilities and Infrastructure: 23.3% dissatisfaction, Administrative Convenience: 13.3% dissatisfaction. To improve patient retention, Yadika Pondok Bambu Hospital aligns its services with hospital accreditation and Standard Operating Procedures (SOPs) to maintain service quality.

While some quality indicators remain below target, Yadika Pondok Bambu Hospital continues efforts to improve staff competency, introduce new services, adjust pricing, and optimize digital health service promotion. Located in East Jakarta, Yadika Pondok Bambu Hospital was founded in 1976 and last renovated in 2000. BPJS Kesehatan administrative procedures have been a challenge for patients, impacting overall satisfaction.

Given the rising demands for quality healthcare services, increasing competition, and financial constraints from BPJS Kesehatan's payment system, Yadika Pondok Bambu Hospital must focus on

DOI: 10.35629/076X-12023141 www.questjournals.org 31 | Page maintaining patient satisfaction to ensure loyalty. The empathy of healthcare professionals also plays a critical role in patient experience. Past studies have explored patient satisfaction, but research gaps exist, such as: Lack of studies on BPJS Kesehatan inpatients, Limited focus on private hospitals, Varying results in previous research. This study aims to identify the key factors influencing BPJS Kesehatan inpatient satisfaction at Yadika Pondok Bambu Hospital and develop strategies to enhance patient retention.

#### II. LITERATURE REVIEW

According to Choi et al. (2023), patient satisfaction is a subjective assessment of the quality of healthcare services received, including medical care, interactions with healthcare providers, and hospital facilities. Tan et al. (2022) emphasize that patient satisfaction is based on their experience with healthcare services, influenced by physical comfort, communication with medical staff, and understanding of treatment processes. Ehsani et al. (2021) highlight that patient satisfaction encompasses technical care quality, facility comfort, and clear communication. Rana et al. (2020) note that patient satisfaction is linked to expectations, effective communication, and successful treatment outcomes. Javadpour et al. (2020) define patient satisfaction as the alignment between expectations and actual healthcare experiences. Overall, patient satisfaction is a subjective evaluation based on service quality, communication, and treatment outcomes.

According to Nguyen & Lam (2023), patient loyalty refers to a patient's commitment or decision to return to the same hospital for future healthcare services. Loyalty is built through positive experiences, including the quality of medical care, hospital facilities, and interactions with medical and non-medical staff. Liu & Zhang (2021) state that patient loyalty is closely related to patient satisfaction. Patients satisfied with both medical and non-medical services are more likely to remain loyal, seek future treatment at the same hospital, and provide positive recommendations. Adams & Jackson (2023) emphasize that patient loyalty is a long-term relationship between patients and healthcare providers. This loyalty strengthens when hospitals maintain consistent service quality and sustain good relationships with patients beyond their treatment period.

Donabedian (2023) defines healthcare service quality as comprising three main components: structure, process, and outcome. Structure includes hospital facilities, medical staff, and resources. Process refers to the interaction between healthcare providers and patients, while outcome measures the improvement in patient health and satisfaction. Farsi & Khodadadi (2023) emphasize that healthcare quality should be assessed based on safety, effectiveness, efficiency, and adequacy from the patient's perspective. Meanwhile, WHO (2023) defines quality healthcare as care that enhances patient health outcomes while ensuring safety and minimizing medical errors.

According to Ferdinan & Sulistyo (2023), hospital facilities and infrastructure encompass all resources supporting effective medical services. Facilities include medical equipment and technology, while infrastructure refers to physical elements such as hospital buildings, patient rooms, and network systems. Adequate facilities and infrastructure are crucial in maintaining healthcare quality. Sudarmaji (2022) highlights that these elements support comprehensive healthcare services. Facilities include medical tools, medicines, and healthcare technology, while infrastructure comprises hospital buildings, supply distribution routes, and drainage systems. Together, they create a conducive environment for efficient services. Taufik & Dewi (2021) emphasize the impact of facilities and infrastructure on patient satisfaction. Well-equipped medical facilities and comfortable hospital buildings significantly enhance service quality, leading to improved patient experience and loyalty.

According to Sadeghi et al. (2022), administrative convenience refers to the process of simplifying patient access to healthcare services quickly and without significant obstacles. This includes ease in registration, insurance claims, and medical data management. Efficient administrative systems enhance patient experience, reduce waiting times, and ensure more accurate healthcare services. Liu and Zhang (2021) define administrative convenience in hospitals as encompassing all administrative procedures that facilitate patient access to services, including efficient patient registration, transparency of medical procedures, and simplified payment and insurance claim processes. A well-organized administrative system improves patient satisfaction and speeds up service delivery. Farsi & Khodadadi (2023) highlight administrative convenience as efforts to minimize complex bureaucracy, accelerate patient registration, and efficiently manage patient information. In hospitals, a simple administrative system ensures that patients do not face difficulties in understanding or following procedures, allowing them to focus on treatment.

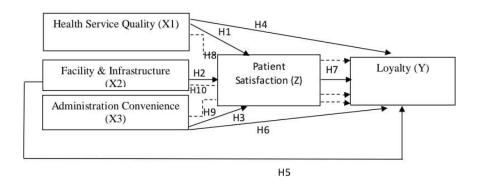


Figure 2.1 The Conceptual Framework of Research Variables

#### III. RESEARCH METHODS

The research design used was explanatory quantitative to prove the direct and indirect influence of health service quality, facilities and infrastructure, and administrative convenience to loyalty through patient satisfaction at Yadika Pondok Bambu Hospital. The population and research were all inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital totaling 224 samples, while the sample used the questionnaire method, while the data analysis method used path analysis with calculation using Smart PLS 4 software.

#### RESULTS AND DISCUSSION

#### **RESULTS**

Based on the respondent data above, it can be observed that 162 respondents, or 72.32%, are female, and 62 respondents, or 27.68%, are male. Overall, the inpatient patients at BPJS Health Yadika Pondok Bambu Hospital are predominantly female. Generally, women tend to be more proactive in utilizing healthcare services compared to men, who may be more likely to delay treatment until their condition worsens. This may also contribute to a higher number of female patients being hospitalized.

Gender	Number	Percentage
Female	162	72,32 %
Male	62	27,68 %
Total	224	100 %

Table 3.1 Respondents Based on Gender

Based on age, the researcher divided the respondents into three categories: 18-35 years (young adults), 36-60 years (adults), and over 60 years (elderly). According to the data below, 141 respondents, or 62.94%, are aged 18-35 years, 71 respondents, or 31.70%, are aged 36-60 years, and 12 respondents, or 5.36%, are over 60 years old. It can be concluded that the majority of respondents fall within the productive age group, namely 18-35 years, with a significantly larger number compared to the other age groups. The group over 60 years old represents a minority in this study. This illustrates the dominance of the younger age group in the respondent population.

Age	Number	Percentage
18-35 y.o.	141	62,94 %
36-60 y.o.	71	31,70 %
>60 y.o.	12	5,36 %
Total	224	100 %

Table 3.2 Respondents Based on Age

The researcher categorized the respondents' education into seven levels. Based on the data above, 5 respondents, or 2.23%, reported having no formal education, 22 respondents, or 9.82%, completed elementary school (SD), 14 respondents, or 6.25%, completed junior high school (SLTP), 68 respondents, or 30.36%, completed senior high school (SLTA), 69 respondents, or 30.80%, completed a diploma (D3/D4), 45

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respondents, or 20.09%, completed a bachelor's degree (S1), and 1 respondent, or 0.45%, completed a master's degree (S2). The majority of respondents had completed senior high school (SLTA) or a diploma (D3/D4), indicating that most respondents had received education up to the senior high school and diploma levels. Meanwhile, those with no formal education or a master's degree (S2) were in the minority in this study.

Education	Number	Percentage
No Formal Education	5	2,23 %
SD	22	9,82 %
SLTP	14	6,25 %
SLTA	68	30,36 %
D3/D4	69	30,80 %
S1	45	20,09 %
S2	1	0,45 %
Total	224	100 %

Table 3.3 Respondents Based on Education

The researcher categorized the respondents' occupations into four categories. Based on the data below, 26 respondents, or 11.61%, reported being unemployed, 26 respondents, or 11.61%, were housewives (IRT), 171 respondents, or 76.34%, worked in the private sector, and 1 respondent, or 0.45%, was a civil servant (PNS). The majority of respondents were employed in the private sector, reflecting the dominance of this sector in the study population. This may indicate the local economic conditions, where more job opportunities are available in the private sector compared to other sectors.

Occupation	Number	Percentage
Tidak Bekerja	26	11,61 %
Ibu RumahTangga	26	11,61 %
Swasta	171	76,34 %
PNS	1	0,45 %
Total	224	100 %

Table 3.4 Respondents Based on Occupation

The researcher categorized marital status into two categories. Based on the data below, 90 respondents, or 40.18%, were single or unmarried, while 134 respondents, or 59.82%, were married. The majority of respondents were married, reflecting that marriage is a common condition in the study population. However, the proportion of respondents who are single or unmarried is also relatively large, which may be related to the age distribution, as most respondents belong to the younger age group.

Marital Status	Number	Percentage
Menikah	134	59,82 %
Tidak / Belum Menikah	90	40,18 %
Total	224	100 %

Table 3.5 Respondents Based on Marital Status

The researcher categorized the inpatient class into four categories. Based on the data above, 43 respondents, or 19.20%, were in Class 3; 8 respondents, or 3.57%, were in Class 2; 161 respondents, or 71.88%, were in Class 1; and 12 respondents, or 5.36%, were in the VIP class. The majority of respondents were in Class 1, indicating that this class is the most common category in the study population and that patients in this class enjoy relatively good inpatient facilities at Yadika Pondok Bambu Hospital.

Inpatient Class	Number	Percentage
Class 3	43	19,20 %
Class 2	8	3,57 %
Class 1	161	71,88 %
Class VIP	12	5,36 %
Total	224	100 %

Table 3.6 Respondents Based on Inpatient Class

#### **Direct Influence**

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics ( O/STDEV )	P values
Health Service Quality -> Patient Satisfaction	0.581	0.576	0.078	7.405	0.000
Facilities & Infrastructure -> Patient Satisfaction	-0.104	-0.100	0.091	1.144	0.253
Administrative Convenience -> Patient Satisfaction	0.437	0.439	0.111	3.920	0.000
Patient Satisfaction -> Loyalty	0.532	0.527	0.100	5.303	0.000
Health Service Quality -> Loyalty	0.410	0.413	0.089	4.626	0.000
Facilities & Infrastructure -> Loyalty	-0.032	-0.032	0.079	0.408	0.683
Administrative Convenience -> Loyalty	-0.010	-0.009	0.098	0.106	0.915

The influence of health service quality on patient satisfaction shows a path coefficient value of < 0.001, P Values <0.05 with a T statistic value of 7.405. This value is greater than T Table (1.69), which means that the relationship between healthcare service quality and patient satisfaction is statistically significant.

The influence of facilities & infrastructure on Patient Satisfaction shows a path coefficient value of 0.253, P Values >=0.05 with a T statistic value of 1.144. This value is smaller than T Table (1.69), which means there is no statistically significant effect between facilities & infrastructure and patient satisfaction.

The influence of administrative convenience on patient satisfaction shows a path coefficient value of < 0.001, P Values <0.05 with a T statistic value of 3.920. This value is greater than T Table (1.69), which means that the relationship between administrative convenience and patient satisfaction is statistically significant.

The influence of patient satisfaction on loyalty shows a path coefficient value of < 0.001, P Values <0.05 with a T statistic value of 5.303. This value is greater than T Table (1.69), which means that the relationship between patient satisfaction and loyalty is statistically significant.

The influence of health service quality on loyalty shows a path coefficient value of < 0.001, P Values < 0.05 with a T statistic value of 4.626. This value is greater than T Table (1.69), which means that the relationship between health service quality and loyalty is statistically significant.

The influence of facilities & infrastructure on loyalty shows a path coefficient value of 0.683, P Values >=0.05 with a T statistic value of 0.408. This value is smaller than T Table (1.69), which means there is no statistically significant effect between facilities & infrastructure and loyalty.

The influence of administrative convenience on loyalty shows a path coefficient value of 0.915, P Values >=0.05 with a T statistic value of 0.106. This value is smaller than T Table (1.69), which means there is no statistically significant effect between administrative convenience and loyalty.

#### **Indirect Influence**

	Original	Sample	Standard deviation	T statistics	P
	sample (O)	mean (M)	(STDEV)	( O/STDEV )	values
Health Service Quality ->	0.309	0.304	0.074	4.185	0.000
Loyalty	0.309	0.304	0.074	4.103	0.000
Facilities & Infrastructure	-0.056	-0.055	0.052	1.074	0.283
-> Loyalty	-0.030	-0.033	0.032	1.074	0.203
Administrative	0.222	0.222	0.070	2.040	0.02
Convenience -> Loyalty	0.232	0.233	0.079	2.949	0.03

The results of the analysis show that the indirect effect of health service quality on loyalty through patient satisfaction is positive and significant with a path coefficient value of <0.001, P Values <0.05 and T Statistics of 4.185, greater than T table 1.69, so the effect is positive and significant.

The results of the analysis show that the indirect effect of facilities & infrastructure on loyalty through patient satisfaction is no statistically significant with a path coefficient value of 0.283, P Values >=0.05 and T Statistics of 1.074, smaller than T table 1.69, so the effect is not significant.

The results of the analysis show that the indirect effect of administrative convenience on loyalty through patient satisfaction is positive and significant with a path coefficient value of 0.03, P Values <0.05 and T Statistics of 2.949, greater than T table 1.69, so the effect is positive and significant.

#### DISCUSSION

#### Healthcare Service Quality $\rightarrow$ Patient Satisfaction (p-value = 0.000)

The very small p-value indicates that the relationship between healthcare service quality and patient satisfaction is statistically significant. Since the p-value is less than 0.05, we reject the null hypothesis and accept the alternative hypothesis, which states that healthcare service quality significantly affects patient satisfaction.

Healthcare Service Quality refers to how well a hospital or healthcare provider meets the expected service standards by patients, such as the quality of medical staff, service speed, diagnostic accuracy, and quality of care. Patient Satisfaction is the perception or evaluation of the patient's experience while receiving medical care at the hospital or healthcare facility. This satisfaction is influenced by various factors, including the quality of the services they receive.

The results of this hypothesis test show that the higher the quality of healthcare services provided by the hospital, the more likely patients are to feel satisfied. When patients perceive that the services they received are of high quality, in terms of the medical staff's skills, treatment process, or adequate facilities, they tend to be more satisfied with their experience. Hospitals and healthcare providers should focus on improving service quality. This effort can include regular medical staff training, enhancing medical facilities, implementing the latest technologies, and developing more efficient and effective standard operating procedures.

The results of this hypothesis test show that healthcare service quality plays a crucial role in influencing patient satisfaction. Therefore, Yadika Pondok Bambu Hospital, with its focus on service quality, can enhance patient satisfaction, which in turn can improve the hospital's loyalty and reputation. To address the issues and improve service quality, the following steps can be taken:

- Internal Evaluation: Conduct regular patient satisfaction surveys to identify service areas that need improvement. Use patient feedback to address weaknesses.
- Enhance Medical Staff Competence: Provide continuous training to improve the skills of both medical and non-medical staff, and reward staff who show good performance to enhance motivation.
- Optimize SOPs: Improve coordination between departments to ensure that patients receive services without delays.
- Effective Communication: Train staff to communicate with empathy and clarity to patients, and provide informational media such as brochures or apps to help patients better understand the services available.

#### Healthcare Infrastructure $\rightarrow$ Patient Satisfaction (p-value = 0.253)

The p-value is greater than 0.05, which means we fail to reject the null hypothesis. In other words, there is no statistically significant effect between healthcare infrastructure and patient satisfaction. Healthcare infrastructure refers to the physical facilities provided by hospitals or healthcare providers, such as inpatient rooms, waiting areas, medical equipment, cleanliness of the facilities, and environmental comfort. Patient satisfaction is the subjective assessment of the service they received, influenced by many factors, including medical service quality, staff interaction, and of course, physical facilities.

The test results show that, although healthcare infrastructure (such as hospital facilities) is important, its impact on patient satisfaction is not statistically significant in this model. A p-value greater than 0.05 indicates that other factors, such as service quality or Administrative Convenience, may play a more significant role in determining patient satisfaction. In this study, although healthcare infrastructure remains important for physical comfort, other factors like medical service quality or ease of access have a stronger influence on patient perceptions of the hospital. Therefore, hospitals may need to pay more attention to aspects of medical service rather than just focusing on improving infrastructure.

This hypothesis test result shows that healthcare infrastructure does not significantly affect patient satisfaction. This suggests that, while physical hospital facilities are important for comfort, factors like the quality of medical service and ease of administration are more dominant in influencing patient satisfaction. Therefore, improvements in physical facilities should be complemented by enhanced service quality to create a better patient experience.

#### **Administrative Convenience** → **Patient Satisfaction (p-value = 0.000)**

The very small p-value indicates that the relationship between Administrative Convenience and patient satisfaction is statistically significant. Since the p-value is smaller than 0.05, we reject the null hypothesis and accept the alternative hypothesis, which states that Administrative Convenience significantly influences patient satisfaction.

Administrative Convenience refers to how the administrative processes in a hospital or healthcare facility are organized and executed. This includes aspects such as patient registration, waiting times, payment systems, appointment scheduling, and insurance claim processing. Efficient and easily understandable

administration reduces the burden on patients, provides comfort, and accelerates service delivery. Patient satisfaction is the perception or evaluation of patients regarding their experience in receiving medical and non-medical services. This satisfaction is influenced by various factors, including the quality of medical services, ease of access to services, and of course, the ease of the administrative process.

The test results show that the easier and more efficient the administrative processes at the hospital, the higher the likelihood that patients will be satisfied with the service they receive. This may include the use of online registration systems, reducing waiting times, and transparent, easily understood administrative procedures. Hospitals should ensure that the administrative process is as simple and efficient as possible. The use of technology to automate processes, such as online registration, quick claim processing, and appointment scheduling management, can provide a better experience for patients and increase their satisfaction.

This hypothesis test result indicates that Administrative Convenience has a significant influence on patient satisfaction. Therefore, hospitals and healthcare providers must focus on improving their administrative processes to reduce confusion or delays that could cause discomfort to patients. Improving Administrative Convenience can directly enhance patient satisfaction and, in the long term, support patient loyalty.

#### Patient Satisfaction $\rightarrow$ Patient Loyalty (p-value = 0.000)

The very small p-value indicates that the relationship between patient satisfaction and patient loyalty is statistically significant. Since the p-value is smaller than 0.05, we reject the null hypothesis and accept the alternative hypothesis, which states that patient satisfaction significantly influences patient loyalty.

The results of this hypothesis test show that the more satisfied patients are with the services they receive, the more likely they are to return and use the hospital's services again in the future. Patient satisfaction encourages them to stay loyal to the healthcare provider and even recommend the services to others. Hospitals and healthcare providers need to pay more attention to the factors influencing patient satisfaction, such as improving the quality of medical services, the comfort of the facilities, and administrative efficiency. When patients feel satisfied with their experience, they are more likely to become loyal patients and help improve the hospital's reputation.

The results indicate that patient satisfaction has a very significant impact on patient loyalty. Therefore, hospitals must continue to strive to improve patient satisfaction through better service quality. High satisfaction will build patient loyalty, which in turn can increase patient retention and strengthen the hospital's image and long-term sustainability.

#### Quality of Health Services $\rightarrow$ Patient Loyalty (p-value = 0.000)

The very small p-value indicates that the relationship between the quality of health services and patient loyalty is statistically significant. Since the p-value is smaller than 0.05, we reject the null hypothesis and accept the alternative hypothesis, which states that the quality of health services significantly influences patient loyalty.

The results of this hypothesis test show that the higher the quality of health services, the more likely patients are to remain loyal and use the same healthcare services in the future. High-quality services build patient trust in the hospital and strengthen the long-term relationship between the patient and healthcare provider. Hospitals need to focus on improving the quality of both medical and non-medical services, such as paying greater attention to patient needs, maintaining medical professionalism, and improving treatment processes and available facilities. When the quality of services provided is excellent, patients feel more valued and are more likely to stay loyal to the hospital.

The results of this test indicate that the quality of health services significantly influences patient loyalty. Therefore, hospitals should focus on improving service quality to retain patients and build their loyalty. By providing high-quality services that meet or even exceed patient expectations, hospitals can ensure high loyalty levels and improve their long-term sustainability and reputation.

### $Healthcare\ Infrastructure \rightarrow Patient\ Loyalty\ (p\text{-value} = 0.683)$

The p-value, which is greater than 0.05, indicates that the relationship between healthcare infrastructure and patient loyalty is not statistically significant. Since the p-value is greater than the significance level (0.05), we fail to reject the null hypothesis. This means that healthcare infrastructure does not have a significant effect on patient loyalty.

Healthcare Infrastructure encompasses various physical facilities and infrastructure available at hospitals or healthcare facilities, such as treatment rooms, medical equipment, information systems, comfort of facilities, cleanliness, and accessibility. Patient Loyalty refers to the tendency of patients to continue using the same hospital's services in the future and to recommend these services to others. Loyalty can be influenced by many factors, including the quality of medical services, patient satisfaction, and overall experience during treatment

The results of this hypothesis test show that although adequate healthcare infrastructure may improve patient comfort, it does not have a significant impact on patient loyalty in this study. This might suggest that

while good physical facilities are important, other factors such as the quality of medical services or Administrative Convenience may play a more dominant role in shaping patient loyalty. Given that healthcare infrastructure did not significantly impact patient loyalty in this study, hospitals may need to focus more on other factors that have a greater impact on loyalty, such as the quality of healthcare services and ease of administration, which were shown to have a more significant effect in this hypothesis test.

The results of this test suggest that healthcare infrastructure does not have a significant effect on patient loyalty. While good facilities are important for patient comfort, factors like the quality of medical services and Administrative Convenience have a greater influence on patient loyalty. Therefore, hospitals and healthcare providers should focus on improving these more relevant factors, although healthcare infrastructure should still be well-maintained.

#### Administrative Convenience $\rightarrow$ Patient Loyalty (p-value = 0.915)

The p-value, which is much greater than 0.05, indicates that the relationship between Administrative Convenience and patient loyalty is not statistically significant. Since the p-value exceeds the significance level (0.05), we fail to reject the null hypothesis, meaning that Administrative Convenience does not have a significant impact on patient loyalty.

Administrative Convenience encompasses various administrative aspects that affect the patient's experience during their treatment process, such as registration, appointment scheduling, form filling, payment, and interaction with administrative staff. This ease helps reduce any barriers or confusion for patients during their care process. Patient Loyalty refers to the tendency of patients to continue using the same hospital or healthcare facility's services in the future and to recommend those services to others. Patient loyalty is influenced by several factors, including the quality of medical services, patient experience, and comfort during treatment.

The results of this hypothesis test show that although Administrative Convenience might contribute to patient comfort during the care process, it does not significantly impact patient loyalty in this study. This suggests that, while patients value a quick and easy administrative process, other factors like the quality of healthcare services and patient satisfaction may play a more decisive role in determining their loyalty. Given that Administrative Convenience does not significantly affect patient loyalty in this study, hospitals may need to focus more on other factors that have a stronger impact on loyalty, such as improving the quality of healthcare services and overall patient satisfaction.

The results indicate that while Administrative Convenience can improve comfort during treatment, other factors like the quality of healthcare services and patient satisfaction have a greater influence on enhancing patient loyalty. Therefore, hospitals and healthcare providers should focus on the aspects that have a more substantial impact on patient loyalty.

### Health Service Quality $\rightarrow$ Patient Loyalty through Patient Satisfaction as an Intervening Variable (p-value = 0.000)

The very small p-value indicates that the relationship between health service quality and patient loyalty through patient satisfaction as an intervening variable is statistically significant. Since the p-value is smaller than the significance level (0.05), we reject the null hypothesis and accept the alternative hypothesis, meaning that health service quality has a significant impact on patient loyalty through patient satisfaction.

Loyalty is influenced by the overall experience of the patient.

In this hypothesis, patient satisfaction acts as an intervening variable that connects health service quality with patient loyalty. This means that health service quality can enhance patient satisfaction, and this satisfaction then influences the patient's loyalty to the hospital. When patients feel satisfied with the quality of services (both medical and non-medical), they are more likely to remain loyal to the healthcare provider. Conversely, dissatisfaction can reduce patient loyalty.

The results show that health service quality significantly affects patient loyalty, but this effect occurs through patient satisfaction. This means that hospitals that provide high-quality services will not only make patients feel satisfied but also enhance their loyalty.

Importance of Focusing on Service Quality and Patient Satisfaction: Hospitals should focus on improving both medical and non-medical service quality to enhance patient satisfaction. High patient satisfaction will strengthen their loyalty and ensure they continue using the hospital's services in the future.

This hypothesis test result shows that health service quality significantly impacts patient loyalty, and this effect occurs through patient satisfaction as an intervening variable. Therefore, hospitals should not only focus on improving healthcare service quality but also on efforts to increase patient satisfaction, as both factors combined can strengthen patient loyalty in the long term.

## Health Infrastructure → Patient Loyalty through Patient Satisfaction as an Intervening Variable (p-value = 0.283)

The p-value greater than 0.05 indicates that the relationship between health infrastructure and patient loyalty through patient satisfaction as an intervening variable is not statistically significant. Since the p-value is greater than the significance level (0.05), we fail to reject the null hypothesis, meaning that health infrastructure does not significantly affect patient loyalty through patient satisfaction.

In this hypothesis, patient satisfaction acts as an intervening variable that connects health infrastructure to patient loyalty. This means that although hospital facilities are important for patient comfort, the satisfaction gained from these facilities alone is not enough to influence loyalty through the satisfaction intermediary.

The results indicate that while health infrastructure may enhance patient comfort, its impact on patient loyalty through patient satisfaction is not significant. This suggests that while good infrastructure can improve comfort, other factors (such as the quality of medical services or patient interaction experiences) may be more dominant in influencing patient loyalty.

Hospitals and healthcare providers should consider that while health infrastructure is important, the quality of medical services and patient satisfaction have a greater influence on patient loyalty. Focusing on improving the quality of healthcare services and patient experiences can have a more significant impact on patient loyalty.

These findings show that health infrastructure does not have a significant impact on patient loyalty through patient satisfaction. While good infrastructure can improve patient comfort, it is not enough to significantly influence patient loyalty through satisfaction. Therefore, hospitals should focus more on healthcare quality and patient experience as stronger factors in enhancing patient loyalty.

# Administrative Convenience $\rightarrow$ Patient Loyalty through Patient Satisfaction as an Intervening Variable (p-value = 0.003)

The p-value less than 0.05 indicates that the relationship between Administrative Convenience and patient loyalty through patient satisfaction as an intervening variable is statistically significant. Since the p-value is smaller than the significance level (0.05), we reject the null hypothesis and accept the alternative hypothesis, meaning that Administrative Convenience has a significant effect on patient loyalty through patient satisfaction.

In this hypothesis, patient satisfaction serves as an intervening variable connecting Administrative Convenience to patient loyalty. This means that the ease of administrative processes perceived by the patient can improve their satisfaction, which then influences their loyalty to the hospital. When patients experience ease in administrative processes, they feel more valued and respected. The satisfaction generated from a smooth administrative process can increase their desire to remain loyal and continue using the services in the future.

The results show that Administrative Convenience has a significant impact on patient loyalty through patient satisfaction. Healthcare providers that can make administrative processes more efficient and accessible will improve patient satisfaction, which in turn strengthens patient loyalty. Hospitals need to focus on simplifying and improving Administrative Convenience to speed up service delivery and reduce patient frustration. This can enhance the overall patient experience and encourage long-term loyalty.

These results suggest that Administrative Convenience has a significant effect on patient loyalty through patient satisfaction. Therefore, hospitals should pay more attention to managing efficient and accessible administrative processes to increase patient satisfaction. This increased satisfaction will ultimately enhance patient loyalty and encourage them to continue using the hospital's services in the future.

#### IV. CONCLUSION

- 1. The health service quality has a direct positive and significant effect on patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 2. The facilities and infrastructure has no direct positive and no significant effect on patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 3. The administration convenience has a direct positive and significant effect on patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 4. The patient satisfaction has a direct positive and significant effect on loyalty of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 5. The health service quality has a direct positive and significant effect on loyalty of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 6. The facilities and infrastructure has no direct positive and no significant effect on loyalty of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 7. The administration convenience has no direct positive and no significant effect on loyalty of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 8. The health service quality has an indirect positive and significant effect on loyalty through patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.
- 9. The facilities and infrastructure has no indirect positive and no significant effect on loyalty through patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.

10. The administration convenience has an indirect positive and significant effect on loyalty through patient satisfaction of inpatient BPJS Kesehatan patients at Yadika Pondok Bambu Hospital.

#### REFERENCES

- [1]. Agra Nabilfavian Evandinnartha, Muhammad Syamsu Hidayat, & Rosyidah. (2023). Pengaruh Kualitas Pelayanan dan Kepuasan Pasien BPJS terhadap Loyalitas Pasien: Literature Review. Media Publikasi Promosi Kesehatan Indonesia (MPPKI), 6(6), 1025–1032. https://doi.org/10.56338/mppki.v6i6.3256
- [2]. Aladwan, M. A., Salleh, H. S., Anuar, M. M., & Almomani, I. (2021). The Relationship among Service Quality, Patient Satisfaction and Patient Loyalty: Case Study in Jordan Mafraq Hospital. 5(June), 27–40.
- [3]. Ali, B. J., Anwer, R. N. A., & Anwar, G. (2021). Private Hospitals 'Service Quality Dimensions: The impact of Service Quality Private Hospitals 'Service Quality Dimensions: The impact of Service Quality Dimensions on patients 'satisfaction. June. https://doi.org/10.22161/ijmpd.5.3.2
- [4]. Asiva Noor Rachmayani. (2015). ADMINISTRASI RUMAH SAKIT. 6.
- [5]. Astari, D. W., Noviantani, A., & Simanjuntak, R. (2021). Kepuasan Pasien terhadap Mutu Pelayanan Keperawatan di Era Pandemi Covid-19 di Rumah Sakit Mata Cicendo. Journal of Hospital Accreditation, 03(1), 34–38. http://jha.mutupelayanankesehatan.net/index.php/JHA/article/view/79
- [6]. Bram, S., Wongso, M., Ramadhan, Y., & Jusát, I. (2024). Persepsi Hak Pasien Peserta JKN, Empati Penyedia Layanan Kesehatan, dan Lingkungan Fisik Rumah Sakit terhadap Loyalitas Pasien Peserta JKN. 10, 128–140.
- [7]. Buenita S, Perry Boy Chandra Siahaan, N. S. (2023). Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Peserta Badan Penyelenggara Jaminan Sosial. JurnalKesmasAsclepius, 5, 196–208.
- [8]. Dewi, N. N. D. S. (2020). Hubungan Mutu Pelayanan Kesehatan dengan Kepuasan Pasien Tanggungan BPJS di Klinik Bhayangkara Polda Bali. Jurnal Medika: Karya Ilmiah Kesehatan, 5(2). https://doi.org/10.35728/jmkik.v5i2.104
- [9]. Fernandes, N. V., & Nurvita, S. (2022). Hubungan Mutu Pelayanan Kesehatan Dengan Tingkat Kepuasan Pasien Di Rumah Sakit Kota Lospalos Tahun 2022. Jurnal Rekam Medis & Manajemen Infomasi Kesehatan, 2(2), 17–28. https://doi.org/10.53416/jurmik.v2i2.104
- [10]. H. Bagus Al F, H Trisandi, N. Mauritania, N. A. Dhabithah, S. N. (2024). Comit: Communication, Information and Technology Journal. Comit: Communication, Information and Technology Journal, 2, 419–424. https://doi.org/10.47467/comit.v2i2.3345
- [11]. Hasibuan, R. R., Hasanah, Y. N., Dewi, R., & Purwatiningsih, P. (2023). Analisis Faktor yang Memengaruhi Loyalitas Pasien di Rumah Sakit Umum Daerah. Jurnal Manajemen Bisnis Dan Keuangan, 4(1), 1–9. https://doi.org/10.51805/jmbk.v4i1.89
- [12]. Issumi Maharani Tanjung, Thomson Nadapdap, & Iman Muhammad. (2023). Evaluasi Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien Di Instalasi Rawat Inap RS Imelda Pekerja Indonesia Medan. Detector: Jurnal Inovasi Riset Ilmu Kesehatan, 1(4), 121–134. https://doi.org/10.55606/detector.v1i4.2531
- [13]. Kartika, R. C., Triana, D., Puspita, S. D., Jannah, M., & Ayu, D. P. (2023). Upaya Peningkatan Loyalitas Pasien melalui Peningkatan Kepuasan Pasien di Rumah Sakit. Jurnal Ilmiah Permas: Jurnal Ilmiah STIKES Kendal, 13(3), 701–708. https://doi.org/10.32583/pskm.v13i3.959
- [14]. Karunia, M., Azizah, N., Rahayu, O., Melati, P. S., & Santoso, A. P. A. (2022). Mutu dan kepuasan terhadap pasien. Journal of Complementary in Health, 2(1), 63–66. https://doi.org/10.36086/jch.v2i1.1494
- [15]. Kemenkes Nomor 30 Tahun. (2022). Peraturan Menteri Kesehatan Republik Indonesia Nomor 30 Tahun 2022 Tentang Indikator Nasional Mutu Pelayanan Kesehatan Tempat Praktik Mandiri Dokter Dan Dokter Gigi, Klinik, Pusat Kesehatan Masyarakat, Rumah Sakit, Laboratorium Kesehatan, Dan Unit Transfu. Menteri Kesehatan Republik Indonesia Peraturan Menteri Kesehatan Republik Indonesia, 879, 2004–2006.
- [16]. Kemenkes RI. (2022). Peraturan Menteri Kesehatan No. 40 Tahun 2022 tentang Persyaratan Teknis Bangunan, Prasarana, dan Peralatan Kesehatan Rumah Sakit. Menteri Kesehatan Republik Indonesia, 1309, 1–290. www.peraturan.go.id
- [17]. Kurniawan, Y., Winoto Tj, H., & Fushen. (2022). Pengaruh Kualitas Layanan Dan Penanganan Keluhan Terhadap Loyalitas. Jurnal Manajemen Dan Administrasi Rumah Sakit Indonesia (MARSI), Vol. 6 No(1), 74–85. http://ejournal.urindo.ac.id/index.php/MARSI
- [18]. Lubis, R. A., Putri, A. D., Ginting, T., & . D. (2020). Hubungan Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Jalan Di Puskesmas Sei Mencirim Medan Tahun 2020. Jurnal Keperawatan Dan Fisioterapi (Jkf), 3(1), 13–20. https://doi.org/10.35451/jkf.v3i1.467
- [19]. Manorek, L., Tucunan, A. A. T., & Ratag, B. T. (2020). Hubungan Antara Persepsi Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Peserta Bpjs Di Puskesmas Pingkan Tenga Kabupaten Minahasa Selatan. Jurnal KESMAS, 9(2), 1–6.
- [20]. Melliniawati, T., Syari, W., & Chotimah, I. (2023). Pengaruh Mutu Pelayanan Kesehatan terhadap Kepuasan Pasien Rawat Jalan di RSUD Bantargebang Tahun 2022. Promotor, 6(4), 431–439. https://doi.org/10.32832/pro.v6i4.276
- [21]. Miftahurrizky Siregar, Zulham Andi Ritonga, V. (2023). Hubungan Mutu Pelayanan BPJS Kesehatan Dengan Kepuasan Pasien BPJS di Instalasi Rawat Inap Kelas III di RSU Imelda Pekerja Indonesia Medan Tahun 2023. Jurnal Manajemen Informasi Kesehatan Indonesia, 12, 145–154. https://doi.org/10.33560/jmiki.v12i2.643
- [22]. Molenaar, E. R., Karamoy, H., Wagey, F., Surya, W. S., Studi, P., Kesehatan, I., Universitas, P., Ratulangi, S., Kedokteran, F., Sam, U., Studi, P., Medis, I., Trinita, T. E., & Selatan, M. (2023). Studi Korelasional antara Minat Pasien dan Sarana Prasarana Terkait Kepuasan Pasien Rawat Inap di Rumah Sakit TNI AU Sam Ratulangi Manado. 11(1), 117–123.
- [23]. Mukharrim, M. S., Rahmatilla, R., & Abidin, U. W. (2022). Pengaruh Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien Rawat Inap Masa Pandemi Covid-19 Di Rsud Polewali. Journal Peqguruang: Conference Series, 4(1), 37. https://doi.org/10.35329/jp.v4i1.2519
- [24]. Mutmainnah, U., Aril Ahri, R., & Arman. (2021). Analisis Faktor Yang Berhubungan Dengan Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien Rawat Inap Di RSUP. Dr. Wahidin Sudirohusodo Makassar 2020. Journal of Muslim Community Health, 2(1), 52-74
- [25]. No, V., Yusran, S., & Saimin, J. (2021). Hubungan Mutu Pelayanan Terhadap Kepuasan Pasien: Studi Kasus Pasien Rawat Inap Rumah Sakit Umum Kabupaten Bombana 2021. 5(2), 221–230.
- [26]. Nur'aeni, R., Simanjorang, A., & . J. (2020). Pengaruh Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Inap Di Rumah Sakit Izza Karawang. Journal of Healthcare Technology and Medicine, 6(2), 1097. https://doi.org/10.33143/jhtm.v6i2.1152
- [27]. Nurmawati, I., & Pramesti, B. A. (2022). Literature Review: Kepuasan Pasien BPJS Rawat Inap Ditinjau dari Dimensi Mutu Pelayanan Kesehatan. Jurnal Kesehatan Vokasional, 7(4), 213. https://doi.org/10.22146/jkesvo.72737
- [28]. Oktavia, S. N., & Prayoga, D. (2023). Kualitas Pelayanan Terhadap Loyalitas Pasien Pada Rumah Sakit Ibu Dan Anak : Literature Review. Jurnal Kesehatan Tambusai, 4(3), 2199–2205. https://doi.org/10.31004/jkt.v4i3.16876

- [29]. Parinduri, A. I., & Khallid, R. (2022). Kepuasan Pasien Peserta BPJS The Relationship between Quality of Health Care with BPJS Patient Satisfaction. 4(2). https://doi.org/10.35451/jkk.v4i2.1075
- [30]. Pasalli', A., & Patattan, A. A. (2021). Hubungan Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Di Rumah Sakit Fatima Makale Di Era New Normal. Jurnal Keperawatan Florence Nightingale, 4(1), 14–19. https://doi.org/10.52774/jkfn.v4i1.57
- [31]. Perkasa, F. S., Indrawati, L., & Nuraini, A. (2023). Persepsi Manfaat dan Persepsi Kemudian Terhadap Penggunaan Sistem Informasi Manajemen Rumah Sakit (SIMRS) di RSAU dr. Hoediyono Tahun 2022. Jurnal Manajemen Dan Administrasi Rumah Sakit Indonesia (MARSI), 7(1), 58–64. https://doi.org/10.52643/marsi.v7i1.2930
- [32]. Purwaningrum, R. (2020). Analisis Mutu Pelayanan Terhadap Kepuasan Pasien Di Rumah Sakit Pertamina Bintang Amin Bandar Lampung Tahun 2018. Jurnal Ilmu Kedokteran Dan Kesehatan, 7(1), 357–367. https://doi.org/10.33024/jikk.v7i1.2418
- [33]. Rabiul Marzuki Siregar, Owildan Wisudawan B, Haslinah Ahmad, Anto J. Hadi, & Abdul Majid. (2023). Analisis Mutu Pelayanan Kesehatan terhadap Kepuasan Pasien di Rumah Sakit Umum Daerah Sipirok Kabupaten Tapanuli Selatan. Media Publikasi Promosi Kesehatan Indonesia (MPPKI), 6(6), 1193–1199. https://doi.org/10.56338/mppki.v6i6.3526
- [34]. Rahayuningsih, A. S., & Cahyaningrum, N. (2023). Pengaruh Sikap Empati Tenaga Kesehatan Terhadap Kepuasan Pasien: Meta Analisis. 13(2), 122–127.
- [35]. Rombon, L. A. Y., Podung, B. J., & Mamuaja, P. P. (2021). Kepuasan Pasien Di Puskesmas Papakelan. Jurnal Kesehatan Masyarakat UNIMA, 02(02), 2–7.
- [36]. Saputra, J., & Pohan, T. (2024). Analisis Tingkat Kepuasan Pasien Bpjs Dan Non BPJS Terhadap Mutu Pelayanan Di Ruang Rawat Inap Rsud Gunung Tua. 9(I), 124–133.
- [37]. Sitepu, M. (2024). Analisis Loyalitas Pasien dan Kepuasan Pasien : Pendekatan Kajian Literatur dengan Kualitas Pelayanan Rumah Sakit sebagai Variabel Intervening. 4(4), 2047–2058.
- [38]. Tonis, M., & Wiranata, R. (2020). Hubungan Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Inap Peserta Bpjs Kesehatan Di Rsud Selasih Pangkalan Kerinci Kabupaten Pelalawan Tahun 2015. Journal of Hospital Administration and Management, 1(1), 44–53. https://doi.org/10.54973/jham.v1i1.49
- [39]. Utomo, A. Y. S., Bagoes Widjanarko, & Zahroh Shaluhiyah. (2023). Mutu Pelayanan dengan K. Media Publikasi Promosi Kesehatan Indonesia (MPPKI), 6(9), 1708–1714.
- [40]. Wartiningsih, M., & Setyawan, F. E. B. (2023). Analisis Kepuasan dan Loyalitas Pasien di Rumah Sakit Kristen Mojowarno. Jurnal Manajemen Kesehatan Yayasan RS.Dr. Soetomo, 9(1), 196. https://doi.org/10.29241/jmk.v9i1.1440
- [41]. Woo, Selin, M. C. (2021). Medical service quality, patient satisfaction and intent to revisit: Case study of public hub hospitals in the Republic of Korea. 1–14. https://doi.org/10.1371/journal.pone.0252241
- [42]. Zaid, A. A., Arqawi, S., & Mwais, R. A. (2020). The Impact of Total Quality Management and Perceived Service Quality on Patient Satisfaction and Behavior Intention in Palestinian Healthcare The Impact of Total Quality Management and Perceived Service Quality on Patient Satisfaction and Behavior Intenti. April.