



Analysis of Indonesian Social Security Administrator Policy Implementation in Improving Service Quality

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Abstract

This study analyzes the implementation of the National Health Insurance (JKN) policy administered by the Badan Penyelenggara Jaminan Sosial in enhancing service quality at Royal Prima Marelán General Hospital. The primary issues identified include insufficient dissemination of policy guidelines to medical personnel and patients, complex administrative procedures, and limited service facilities available to JKN participants. Using a descriptive-analytic approach, the research applies the SERVQUAL (Service Quality) model and the Expectancy–Disconfirmation Theory (EDT) to evaluate the gap between patient expectations and perceived service quality. Data were obtained through observations, interviews, and questionnaires involving medical staff, administrative officers, and JKN patient participants. The findings reveal that the Tangibles and Reliability dimensions are relatively satisfactory; however, Responsiveness and Empathy remain low due to limited human resources and heavy workloads. The implementation of JKN policies by the Badan Penyelenggara Jaminan Sosial has not been fully optimized, primarily due to inadequate training, the absence of integrated digital information systems, and limited managerial support for systematic service quality monitoring and evaluation. Based on the EDT assessment, a notable mismatch exists between patient expectations and actual service experiences, resulting in dissatisfaction. Integrating the JKN policy framework with SERVQUAL and EDT highlights the need to strengthen policy dissemination, enhance human resource capacity, and reform management systems through digitalization and a human-centered approach to ensure equitable, efficient, and sustainable health services at Royal Prima Marelán General Hospital.

Introduction

The implementation of the National Health Insurance (JKN) program by BPJS (Social Security Administrator) Patients is a state effort to guarantee the rights of all citizens to adequate health services. This program has been formally implemented since 2014 and has become one of the state's strategic instruments for ensuring social protection in the health sector. Although it aims to be universal, its implementation in various partner hospitals, including private hospitals such as RSU Royal Prima Marelán, has faced challenges. One of the important issues that has emerged in the implementation of the BPJS policy is the lack of policy dissemination to medical personnel and patients (Ginting et al., 2024) noted that of the 75 medical personnel surveyed at RSU Royal Prima Marelán, only 41% fully understood the INA-CBGs claim procedures and the BPJS referral process. The lack of training and updates on regulatory information was the main cause of this lack of understanding. This situation is exacerbated by

the limited information media in the hospital environment (), so that the service process often does not run according to the standards set by BPJS (Apriliani et al., 2024; wahyu Nugroho, 2024; Meiliani et al., 2024; Pitoyo et al., 2017).

The lack of information not only occurs within hospitals but also directly impacts patients. (Chenyang, 2023) reported that 63% of BPJS patients at Royal Prima Marelan General Hospital were unsure of their rights and obligations when using BPJS services. This lack of knowledge causes patients to often follow the wrong procedures when accessing services, such as failing to bring a referral letter or not understanding the online registration process. The unavailability of brochures, visual information boards, or integrated counseling for patients results in low BPJS policy literacy (Raharja et al., 2022; Santoso et al., 2025).

Administrative procedural issues also pose a major obstacle to BPJS services (Susilo et al., 2025; Zahira & Lestari, 2025; Hamzah et al., 2020). Zevanya et al. (2025) shows that the average waiting time for BPJS outpatients at Royal Prima General Hospital reaches 147 minutes, far above the national average of 90 minutes. Document validation procedures, data entry into the VClaim system, and manual verification queues slow down the service process. (Grasiah et al., 2024) found that 58% of patients expressed dissatisfaction with the administrative processes at the hospital, particularly during registration and the printing of the SEP (Participant Eligibility Letter). The limited ability of administrative staff to understand digital technology further exacerbates procedural issues (Indah Indra Putri et al., 2023). Revealed that administrative staff have not received adequate training on BPJS information systems such as VClaim or PCare, resulting in many data entry errors and claim rejections (Winarsih et al., 2024; Situmorang et al., 2025; Arifin & Rosalia, 2025). This not only harms patients but also hospitals that experience payment delays.

In addition to complex administrative procedures, the availability of services and facilities for BPJS patients at Royal Prima General Hospital is also a concern. Ginting et al. (2024) noted that only 68% of BPJS patients received their prescribed medication on their first visit. The rest had to return the next day or pay out of pocket due to stock limitations. This fact shows that the hospital has not been able to meet the standards for drug formulary availability as stipulated in BPJS regulations.

Similar problems also occur in accessing specialist services. BPJS patients often have to wait longer than general patients to get a consultation schedule with a specialist. The average waiting time reaches 3–5 days, as revealed by (Santika et al., 2025), and this creates a perception of inequality in service. The availability of beds for BPJS patients is also limited, only about 30% of the total inpatient capacity as recorded in the 2023 hospital management report. The quality of hospital services reflects all elements of the system, from management, human resources, infrastructure, to service policies. Rizki et al. (2025) found that the level of satisfaction among BPJS patients at RSU Royal Prima only reached a score of 3.2 on a scale of 5, lower than that of general patients, who scored 4.1. Patient complaints mostly focused on the length of service, poor communication from medical personnel, and different treatment of non-BPJS patients.

Timeliness of service is a serious issue in emergency rooms and outpatient clinics. Friandi et al. (2024) states that BPJS patients often have to wait two to three times longer than general patients due to limitations in the triage system and disproportionate distribution of doctors. Hospital data shows that the workload of medical personnel for BPJS patients has increased by 18% in the past year, but this has not been offset by additional staff. The competence and empathy of medical personnel also influence patients' perceptions of service quality (Pakpahan et al., 2022; Chang et al., 2013; De Man et al., 2002). Emphasizes that interpersonal communication has a high correlation with patient satisfaction. At Royal Prima General Hospital, some BPJS patients feel that the services provided are rushed and lack interaction.

Patient satisfaction is the final outcome of the entire service process. When patients do not receive their full rights, the level of trust in the JKN program will decrease. In a study (Rizki et al., 2025), 27% of BPJS patients at Royal Prima General Hospital stated that they would not return to use the hospital's services if they had other facility alternatives. This is a serious warning for hospital managers to immediately improve the existing service system. Management support is a determining factor that moderates the relationship between policy and service quality. Ginting et al. (2024) assessed that Royal Prima General Hospital does not yet have a special unit for managing and monitoring BPJS services. The absence of integrated SOPs and a weak reward-punishment system makes services reactive rather than strategic. In many cases, management only responds to issues after significant complaints from patients or the media (Ministry of Health, 2024; Goolesorkhi, 2012; Jumara, 2005).

The limited internal budget for improving facilities and training for BPJS services also poses a challenge. An internal report in 2023 stated that only 12% of the hospital's total operational budget was allocated to BPJS services. As a result, the procurement of medical equipment and the recruitment of additional personnel are often delayed, while the burden on BPJS patients continues to increase every year. This creates an imbalance between regulatory demands and actual service capacity.

The absence of a systematic patient complaint monitoring and follow-up system exacerbates this condition. Ginting et al. (2024) reports that 46% of total BPJS patient complaints do not receive an administrative response within seven working days. When complaints are not followed up, the hospital's image declines and trust in public services is undermined. In fact, hospitals should be institutions that are adaptive to public input, especially in the context of social security programs such as BPJS.

Based on the above facts and data, it is clear that the implementation of the BPJS policy at Royal Prima Marelan General Hospital has not been fully optimized. Weaknesses in policy socialization, complex administrative procedures, limited facilities, and low managerial support contribute to the low quality of services for BPJS participants. This research is important to provide an in-depth evaluation and data-based recommendations to improve the implementation of BPJS policies and enhance the quality of health services at Royal Prima Marelan General Hospital in a sustainable manner.

Methods

This study uses a qualitative approach with an intrinsic case study type to explore the implementation process of the National Health Insurance (JKN) policy at Royal Prima Marelan General Hospital. This study aims to gain an in-depth understanding of how the BPJS policy is implemented and how administrative procedures, service availability, and hospital management support shape service quality. This approach is considered appropriate because it is able to capture complex and contextual social realities through the perspectives of subjects directly involved in the health care system. The focus of the research is directed at understanding the experiences and interpretations of key informants such as hospital directors, heads of service units, medical personnel, and patients. This study assumes that service quality is not only shaped by formal procedures, but also by social interactions, coordination between units, and managerial support in responding to national policies (Sugiyono, 2018).

Data collection was conducted through semi-structured in-depth interviews, direct observation, and document analysis. Data obtained from the field will be analyzed using thematic analysis based on the Braun and Clarke (2006) approach, which includes the processes of *coding*, theme searching, theme review, and interpretation of findings. The analysis was conducted inductively. In this study, the population of focus was all BPJS patients who received health services at the Royal Prima Marelan Hospital. This population included outpatients and inpatients who used health facilities through the National Health Insurance (JKN) scheme with

BPJS as the administrator. The sampling technique used in this study was purposive sampling, which is a sampling technique based on certain considerations or criteria set by the researcher.

Result and Discussion

National Health Insurance Policy Implementation Strategy

The implementation of health services through the National Health Insurance (JKN) program at Royal Prima Marelan General Hospital is an important part of the hospital's efforts to meet the health needs of the community in the North Medan area. As a hospital located in an area with a high population density and diverse socioeconomic characteristics, Royal Prima Marelan General Hospital has a responsibility to ensure that JKN services are not only administered administratively but also provide a humane and high-quality service experience. The implementation of JKN services at this hospital is closely tied to how service quality is applied at every point of contact between patients and healthcare staff, from the registration process, doctor consultations, to the handling of further medical procedures (Afifah et al., 2022); Hartono et al., 2023; Njoto et al., 2025; Mustainah et al., 2025).

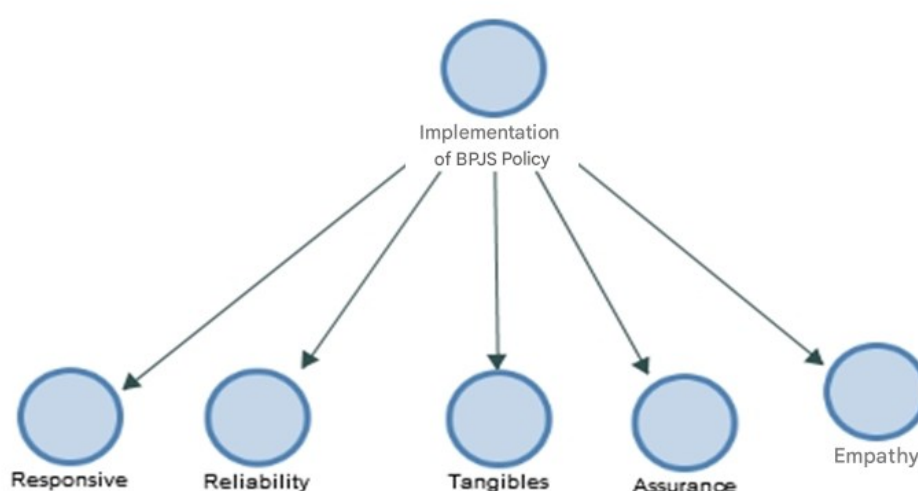


Figure 1. Implementation of BPJS Policy

The quality of service in terms of *tangibles* (physical evidence) can be seen from the condition of the outpatient rooms, clinic waiting rooms, laboratory facilities, radiology, and the comfort of the inpatient rooms. The availability of clean, well-organized, and patient-friendly physical facilities is important because many JKN patients come from different social backgrounds with varying comfort needs. The first impression formed through these physical evidence can influence patients' perceptions of the quality of subsequent services. Royal Prima Marelan General Hospital continues to strive to improve the quality of these physical evidence to ensure that patients' experiences while in the care environment remain at a good standard (BPJS Health, 2024; Patriana et al., 2025).

Reliability is both a challenge and an important indicator in JKN services at this hospital. The reliability of services is not only determined by the competence of doctors and medical personnel, but also by the clarity of administrative procedures, the speed of BPJS document verification, and the accuracy of services in accordance with procedures. JKN patients who arrive in urgent conditions require assurance that they will be treated professionally, without any difference in treatment compared to general patients. Therefore, clarity in the registration process and coordination between units are strategic elements in ensuring consistent and reliable service. Strengthened *responsiveness* is evident in how the health workers and administrative staff at Royal Prima Marelan General Hospital respond to the needs of patients and their families. Good responsiveness means that officers provide clear, straightforward

information and are able to help patients understand the service steps that must be followed. This is important because some JKN patients often arrive without sufficient knowledge of the tiered procedures in the referral system, so a communicative and responsive approach determines the smooth running of services.

The aspects of assurance and empathy are manifested through the attitude of health workers in providing a sense of security, comfort, and respect to patients. Medical personnel who are competent and able to show emotional concern for patients can build strong relationships of trust. In the context of the heterogeneous Marelan community, respect for differences in character, social background, and psychological conditions of patients is very important. Royal Prima Marelan General Hospital must continue to ensure that the relationship between healthcare workers and patients is not only technical-medical in nature, but also humane, friendly, and caring (Harsono et al., 2023).

Tangibles (Physical Evidence)

Patient assessments of service facilities at Royal Prima Marelan General Hospital show a consistent trend in terms of the comfort and cleanliness of service rooms. Neat, clean, and organized waiting rooms are one of the factors that create a positive impression from the moment of arrival. The orderly atmosphere of the waiting room helps patients feel more relaxed while waiting for their turn to consult with a doctor. This view was repeatedly expressed in the statements of various patient respondents who rated the physical condition of the hospital as good. The hospital management's awareness of maintaining cleanliness is evident in the high frequency of cleaning public areas and service rooms. Cleanliness is one of the indicators of service quality that influences patients' perceptions of the hospital's professionalism. A clean and fragrant environment suggests a sense of security, especially for patients with vulnerable physical conditions. The hygiene standards applied demonstrate a commitment to creating a conducive healing environment (Ningsih et al., 2025).

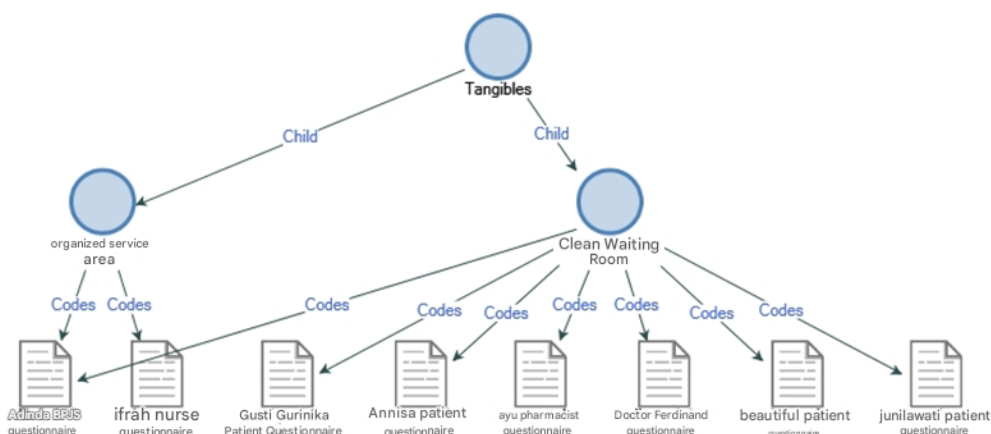


Figure 2. Tangibles

Overall findings indicate that the facilities at Royal Prima Marelan General Hospital are in good condition but have room for improvement. Developing waiting room capacity, optimizing equipment usage schedules, and improving the queue management system are priority steps to enhance the comfort of BPJS patient services. The implementation of periodic quality improvement strategies will strengthen the hospital's position as a responsive, patient-friendly, and competitive healthcare center.

Reliability (Reliability)

Data coding results show that *Reliability* (service reliability) is a dominant theme that influences the experience of BPJS patients at RSU Royal Prima Marelan. Service reliability reflects the hospital's ability to provide services that are procedural, timely, and consistent at every stage of service. The findings show that service reliability does not only depend on health

Responsiveness describes the hospital's ability to provide services quickly and accurately, as well as respond directly to patient needs. Field findings at Royal Prima Marelán General Hospital show that responsiveness is not only measured by the speed of staff in providing services, but also by their ability to ensure that the service flow is easily understood by BPJS patients. Service situations involving multi-level administrative processes and high visit volumes require staff to work in a structured and communicative manner.

Coordination between nurses, the administration department, and doctors ensures that patients receive focused service and do not become confused. This coordination creates continuity of information, which is very important in maintaining service quality and patient trust. Hospital responsiveness does not only depend on health workers, but also on the organizational system that regulates the pace of work. Standardized systems help staff work efficiently even when patient numbers increase. Organizational support is an important foundation for maintaining consistent responsiveness at all times. The *Responsiveness* dimension at Royal Prima Marelán General Hospital is considered good, although it still faces challenges when patient numbers peak.

Assurance (Guarantee)

Assurance or service guarantee reflects the level of patient trust in the competence of medical personnel, the safety of procedures, and the certainty of receiving services in accordance with applicable standards. The code map shows that service assurance at Royal Prima Marelán General Hospital is largely related to the attitude of healthcare personnel during interactions, the use of easy-to-understand language, and the ability to provide explanations appropriate to the patient's condition and needs. The assessment of this assurance aspect is greatly influenced by the patient's direct experience while receiving services.

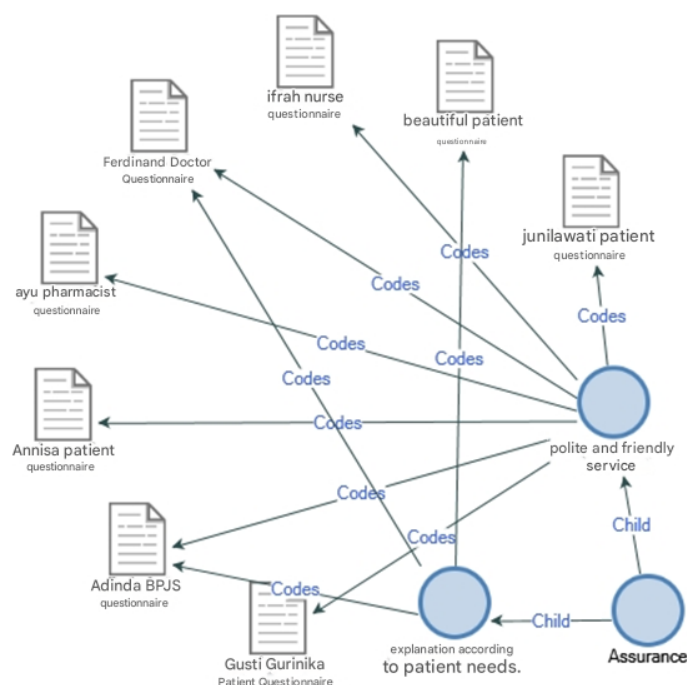


Figure 5. Assurance

All data shows that service assurance relies heavily on the quality of interpersonal relationships between healthcare workers and patients. Trust is built through communication, a sense of security is built through clear explanations, and a sense of being valued is built through polite and friendly attitudes. This aspect is at the core of effective and humane healthcare services. The Assurance dimension at Royal Prima Marelán General Hospital shows positive results and contributes significantly to the satisfaction of BPJS patients. Although there are still challenges in terms of service capacity and waiting times, assurance in the form of professional attitudes

and good communication is able to maintain patient trust. Sustained improvement in service quality can be achieved through empathetic communication training and strengthening a humanistic service culture.

Empathy (Empathy)

Empathy in healthcare reflects the ability of healthcare workers to understand the emotional condition, personal needs, and social situation of patients. Findings from Royal Prima Marelan General Hospital show that empathy is not only manifested in the form of attention and patience, but also in upholding a sense of fairness in service. Patients feel empathy when the treatment they receive is not differentiated based on payment status, social background, or gender. This perception of fairness is an important foundation for building trust between patients and healthcare workers.

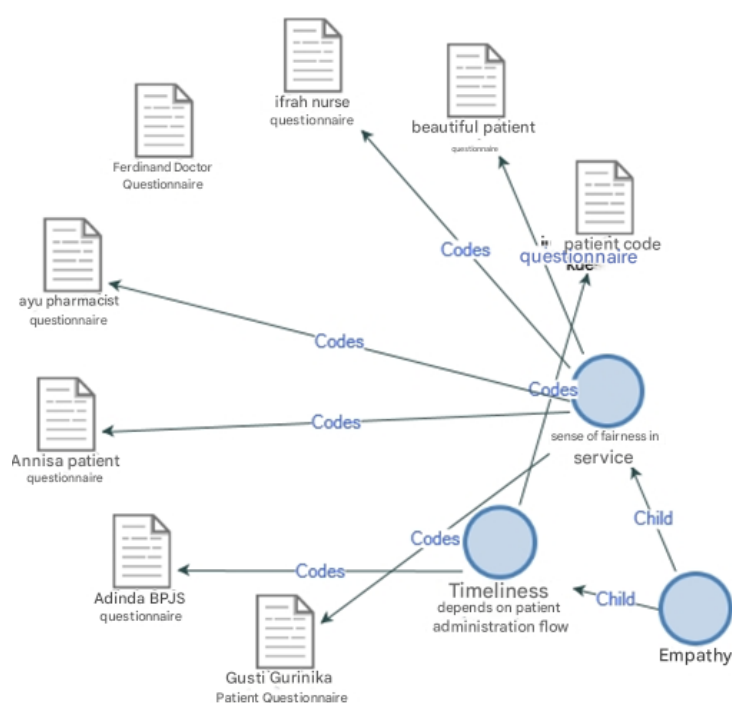


Figure 6. Empathy

The overall findings indicate that empathy is not merely an emotional attitude but an integral part of the hospital's service delivery system. The communication patterns of healthcare workers, consistency of service, and sense of fairness create a friendly care environment. Empathy is a force that maintains positive relationships between hospitals and BPJS patients. The empathy dimension at Royal Prima Marelan General Hospital is in the good category and contributes significantly to BPJS patient satisfaction. Empathy can be further strengthened through therapeutic communication training, performance reflection, and reinforcing humanistic values in the healthcare organizational culture. An empathy-based service approach ensures that the hospital is not only a center for physical healing but also a space for emotional and psychological recovery.

Quality of BPJS Patient Service at Royal Prima Marelan General Hospital

The quality of BPJS patient service at Royal Prima Marelan General Hospital is a very important issue because it is directly related to public satisfaction with health services. Service quality assessment is the result of a comparison between patients' initial *expectations* and *their perceived service performance*. When the service received runs smoothly, clearly, orderly, and provides a sense of security, patients will assess that the service is of good quality. Conversely,

if during the service process patients encounter obstacles such as long queues, unclear communication, or complicated administrative procedures, their assessment tends to be lower. This assessment is highly subjective, but it has a strong impact on patient satisfaction (Putriyana Hutabarat et al., 2025).

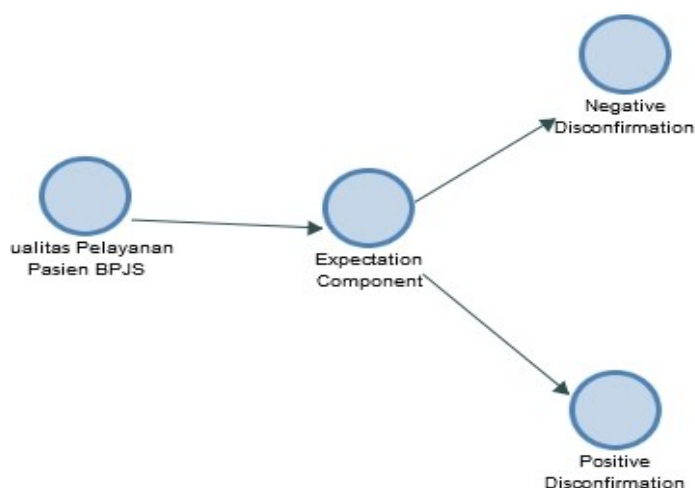


Figure 7. BPJS Service Quality

Positive disconfirmation occurs when the service received exceeds patient expectations. This situation creates satisfaction, trust, and comfort in receiving health services. *Negative disconfirmation* arises when service performance is perceived to be lower than patient expectations. This condition leads to disappointment, dissatisfaction, and potential complaints about health services. Royal Prima Marelán General Hospital needs to maintain a balance between service capacity and the patient experience resulting from the service process. Strengthening communication between healthcare workers and patients, organizing efficient service flows, and increasing sensitivity to patients' emotional conditions are important strategies for improving satisfaction. Good service quality is not only measured by how quickly medical actions are performed, but also by the hospital's ability to make patients feel valued, cared for, and treated humanely.

Expectation Component

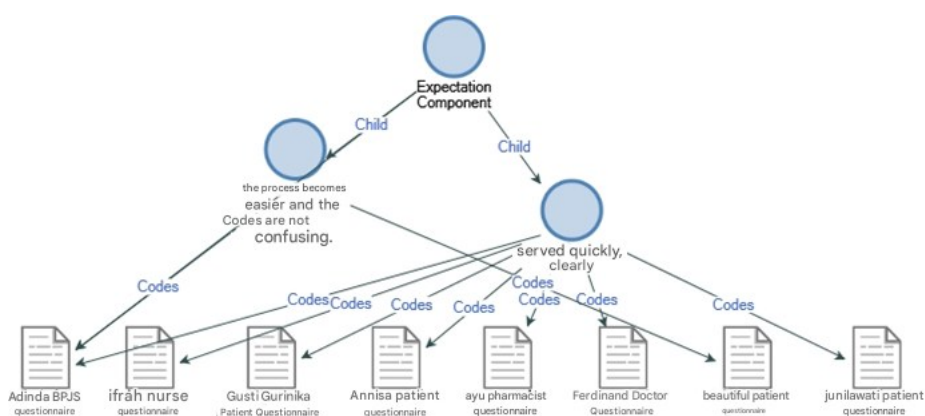


Figure 8. Expectation Component

Perceived Performance in BPJS patient services at RSU Royal Prima Marelán is evident through the real experiences of patients as they go through all stages of service. These experiences begin when patients enter the registration area, interact with staff, undergo examinations with doctors, and receive medication at the pharmacy. Each stage of service contributes to the patient's final perception of the quality of service provided.

The registration process is the starting point for shaping patients' perceptions of hospital services. Registration is considered fairly easy when patients have prepared the necessary administrative documents, such as their BPJS card, referral, and identification. Nurses play a very important role in bridging communication between patients and doctors. Nurses provide guidance on the examination stages that patients will undergo and ensure that patients understand the instructions given. In addition, the availability of medical equipment supports the smooth running of examinations so that patients do not need to be referred to other facilities for basic procedures. Examinations such as blood pressure, vital sign measurements, and simple supporting examinations can be carried out on site.

Disconfirmation

Negative Disconfirmation occurs when the performance of the services received by patients does not fully meet their initial expectations. Patients' expectations of receiving fast service sometimes clash with the reality of long waiting times. This condition occurs especially when the volume of visits increases. Patients feel that although the service flow is clear, the speed of the process does not fully meet their expectations (Meila, 2020).

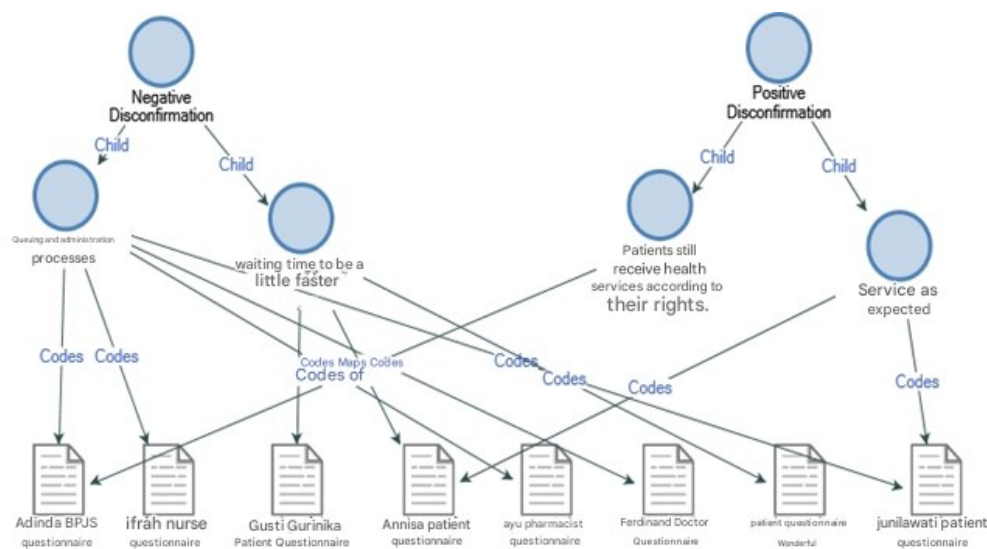


Figure 9. Disconfirmation

The queuing and administration processes are the points most often complained about by patients. File management, data verification, and queue number calling take a long time when there are many patients. Consistency of service between units is also a factor that supports *Positive Disconfirmation*. Patients feel a continuity of service from registration, examination, to medication pickup. This continuity gives the impression that the hospital service system is well-coordinated. This professional impression supports increased patient trust. Furthermore, the willingness of healthcare workers to re-explain information demonstrates empathy. Patients do not always understand medical terms and need additional explanations. This attitude indicates that the service is not only procedure-oriented but also focused on the emotional needs of patients. Both *positive* and *negative disconfirmation* show that service quality is greatly influenced by the balance between expectations and actual experiences. Positive experiences are formed through a humanistic attitude, clear communication, and fairness in service. Negative experiences arise primarily when waiting times and administrative processes do not meet patients' expectations.

SERVQUAL Theory Analysis

Analysis of the quality of BPJS services at Royal Prima Marelán General Hospital shows that the Tangibles dimension is quite strong. The service area appears well-organized, the waiting room is clean, and the physical environment of the hospital reflects efforts to create basic comfort for patients.

Table 1. SERVQUAL Theory Analysis

SERVQUAL Dimensions	Patient Expectations (Expectations)	Perceived Performance	Gap	Interpretation
Tangibles	Patients expect hospitals to be clean, well-organized, have clearly defined service areas, and comfortable waiting rooms.	Waiting rooms and service areas are considered clean and well-organized; physical facilities are adequate and well-maintained.	Small Gap (Positive)	Physical conditions and environmental comfort meet patient expectations, creating a positive impression from the outset.
Reliability	Patients expect a smooth service process without obstacles, reasonable waiting times, and availability of medication.	Service is sometimes hindered by long queues, BPJS system disruptions, and delays in medication distribution.	Moderate Gap – Tending to be Negative	Service reliability is not yet consistent. Patients still experience delays and uncertainty regarding service times.
Responsiveness	Patients expect clear information, unambiguous instructions, and quick responses from staff during administrative processes and consultations.	Staff are considered responsive, providing clear explanations and instructions, and guiding patients through the service process.	Small Gap (Positive)	Staff responsiveness is a key strength because interpersonal communication is effective.
Assurance (Guarantee & Sense of Security)	Patients expect polite treatment, convincing explanations, and a sense of security during examinations and treatment.	Doctors, nurses, and pharmacists provide friendly, courteous service and explanations tailored to patients' needs.	Positive Gap (Performance Exceeding Expectations)	Humanistic interactions enhance patient trust, thereby creating strong satisfaction.

Empathy (Care & Concern)	Patients expect non-discriminatory service, attention appropriate to their condition, and fair treatment for all BPJS patients.	Staff demonstrate fairness and care, but punctuality still depends on queues and crowded conditions.	Small Gap – Tending to be Stable	Staff empathy is perceived as good, but long waiting times still affect patients' emotional comfort.
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The implementation of service quality improvement strategies based on the SERVQUAL dimensions emphasizes the importance of targeted improvements in line with the characteristics of BPJS patients' needs. The Tangibles dimension shows that physical comfort has a significant impact on the perception of service quality. Facility maintenance and routine cleaning ensure a hygienic service environment, while rearranging service areas helps make patient movement clearer and less confusing. These efforts reduce patient anxiety when entering the service process and strengthen the hospital's professional image (Sarah et al., 2022; AlOmari, 2022; Zhang et al., 2023).

Expectancy Disconfirmation Theory Analysis

Expectancy Disconfirmation Theory analysis explains that patient satisfaction is formed through a comparison between initial expectations before receiving service and perceived service performance after receiving service. BPJS patients at Royal Prima Marelán General Hospital enter with the expectation that the service process will be easier, less confusing, and that they will be served quickly and clearly. These expectations are shaped by previous experiences, information from others, and the service standards promised by the National Health Insurance (JKN) system.

The condition of being served quickly and clearly emerged as a positive fulfillment of expectations for many patients. The explanations provided by doctors and nurses regarding health conditions and treatment were perceived as transparent and did not cause confusion. The clarity of medical information is one of the aspects most appreciated by patients and creates *positive disconfirmation*. *Positive disconfirmation* occurs when service performance exceeds or meets patient expectations. BPJS patients who experience friendly and informative service feel that health services are still acceptable even though they are not privately funded patients. This condition reinforces their sense of justice and appreciation for their right to health.

The long administrative queues show that service capacity is not yet fully balanced with the number of patients. This limitation creates the perception that BPJS services are slow when many patients come. *Negative disconfirmation* occurs because expectations of service speed are not met when there is a high volume of visits. Delays in drug distribution also contribute to *negative disconfirmation*. Patients expect to receive their medication immediately after consultation, but in some cases there are delays due to stock limitations or queues at the pharmacy. This creates a double wait, at the clinic and at the pharmacy.

Theory Integration Analysis

An integrated analysis of SERVQUAL and *Expectancy Disconfirmation* provides a comprehensive understanding of the formation of BPJS patient satisfaction at Royal Prima Marelán General Hospital. SERVQUAL serves to identify service quality based on five main dimensions, while *Expectancy Disconfirmation* explains the process of comparing patient expectations and perceived service performance. The synergy of these two theories enables a more accurate assessment of patient experience and the factors that shape satisfaction or dissatisfaction.

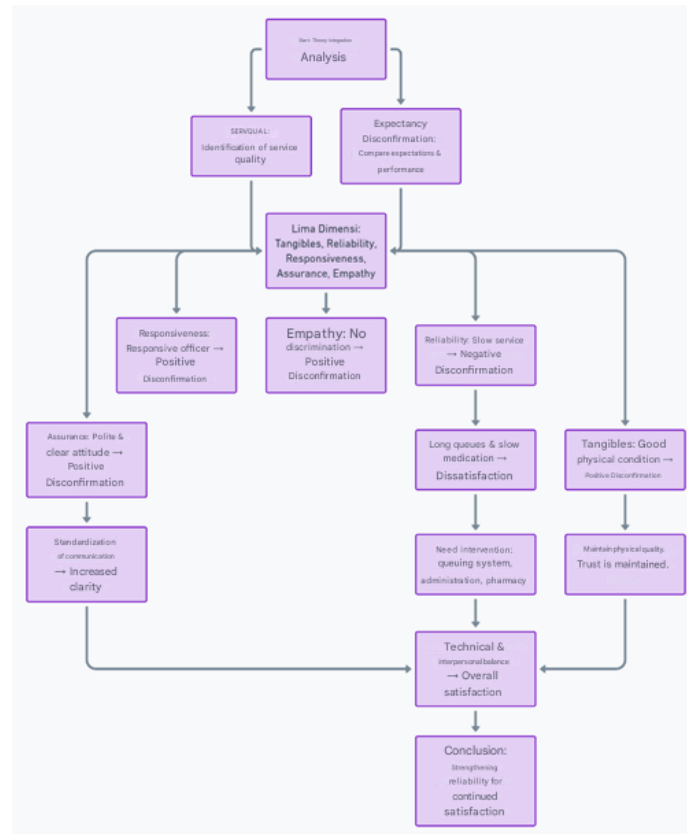


Figure 10. Theory Integration

The initial expectations of BPJS patients are generally formed from the understanding that hospital services must be easily accessible, have a clear process, and not discriminate against patients based on their method of payment. Previous service experiences, recommendations from relatives, and BPJS socialization are factors that shape these expectations. These expectations then become the benchmark when patients receive direct services at the hospital.

Conclusion

The overall results of the study on the quality of BPJS patient services at Royal Prima Marelan General Hospital show a mutually influential relationship between the implementation of the National Health Insurance (JKN) policy, service performance based on the SERVQUAL dimensions, and the formation of patient satisfaction through the mechanism of comparing expectations and service experiences as described in *the Expectancy–Disconfirmation Theory*. This integrated analysis shows that service quality does not only depend on procedural implementation and system efficiency, but also on the quality of interaction between healthcare workers and patients, which influences perceptions, feelings of safety, and acceptance of the services received.

The implementation strategy for the JKN policy at Royal Prima Marelan General Hospital has been proven to have a direct impact on service quality based on the SERVQUAL model. The dimensions of *Tangibles*, *Responsiveness*, *Assurance*, and *Empathy* show positive performance that reflects friendly service, a clean physical environment, and clear and helpful interactions with staff. However, the *Reliability* dimension still requires strengthening, especially in relation to waiting time management, administrative system smoothness, and consistency in drug distribution. Thus, the implementation of the JKN policy has been carried out, but it still

requires strengthening in operational aspects so that services can run more stably and efficiently.

The quality of BPJS patient services compared to patient expectations shows a combination of *positive*, *negative*, and *zero disconfirmation*. *Positive disconfirmation* arises in the aspects of staff communication, the humanistic attitude of health workers, and a sense of fairness in the treatment of BPJS patients. *Zero disconfirmation* occurs in the comfort of physical facilities that meet patients' initial expectations. Meanwhile, *negative disconfirmation* arises mainly in long waiting times and delays in drug distribution, which indicate that some of patients' expectations regarding service speed have not been fully met.

The integration of JKN policy implementation, service quality assessment (SERVQUAL), and patient satisfaction formation (EDT) provides a strong strategic basis for service quality improvement. Strengthening the queuing system, increasing medication logistics coordination capacity, and improving administrative system stability are top priorities for improving *Reliability*. On the other hand, the dimensions of *Responsiveness*, *Assurance*, and *Empathy* need to be maintained through empathetic communication training and patient assistance. By maintaining the strength of interpersonal services and improving structural operational aspects, Royal Prima Marelan General Hospital can achieve more comprehensive, sustainable, and patient satisfaction-oriented service quality improvement.

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