



Analysis of Service Quality on the Satisfaction of the Health Social Security Administration's Inpatients

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Abstract

When it comes to patient care, hospitals often fall short because they are unable to meet patients' true expectations. As a result, unsatisfied patients often voice their opinions throughout the healthcare delivery process. The goal of this research was to assess the impact of Bethesda General Hospital Gunungsitoli Nias's service quality on the satisfaction of BPJS inpatients. Quantitative, cross-sectional research methods were used for this study. Patients admitted to Bethesda Gunungsitoli Hospital with BPJS made up the study population, and a random sample of $n = 165$ was taken for analysis. A questionnaire was employed in this analysis. Univariate, bivariate, and multivariate methods of analysis were employed in this investigation. Chi-square and logistic regression analyses were performed. Tangible health service quality ($p=0.000$), reliability ($p=0.000$), responsiveness ($p=0.000$), assurance ($p=0.000$), attention ($p=0.000$), and focus ($p=0.000$) all had statistically significant positive effects on the satisfaction of BPJS inpatients at Bethesda Gunungsitoli General Hospital, as measured by the chi-square test. The odds ratio (OR) for dependability is 25.234 (10.213-62.314), making it the single most important factor in determining customer happiness. These findings led researchers to infer that BPJS inpatients at Bethesda Gunungsitoli General Hospital experienced higher levels of care quality and satisfaction as a consequence.

Introduction

The Health Insurance Program is managed by the Social Security Administering Body, often known as BPJS. This public legal organization reports directly to the President. Even after more than eight years of operation, the BPJS National Health Insurance Program (JKN) continues to face a number of challenges. Patient rejection is common even in hospitals with modern amenities. The denial was made because there is no longer room on the platform for people with BPJS. Service to BPJS participants should be of high quality. However, in reality, many individuals still go without the care they need (Putri, 2016a).

Everyone has the right to access social security in order to meet their essential daily requirements, as stated in Law no. 40 of 2004 governing the National Social Security System. Health care is recognized as a fundamental human right by Law no. 36 of 2009 concerning Health, and all residents are guaranteed equal access to medical care free from discrimination and financial hardship. Therefore, providing health insurance to all residents is a government commitment and responsibility that helps fulfill every person's right to a healthy life (Putri, 2016b).

When it comes to patient care, one of the biggest challenges hospitals confront is falling short of patients' expectations. As a result, unsatisfied patients often voice their opinions throughout the healthcare delivery process. Nationally, it has been stated that 90% of patients who utilize hospital services must be pleased with health care (Ministry of Health, 2014). Patient complaints of unhappiness will have an impact on the attainment of these basic criteria.

Patients with BPJS have a wide range of complaints while in the hospital. One of the most important things hospitals do to provide excellent care is respond to patient concerns. Communicating with patients about their thoughts, ideas, and concerns about the hospital's services and environment is one approach of resolving patient complaints. When patients file formal complaints, hospitals must respond in writing and make personal contact with those affected. This is done to avoid any awkwardness that may arise as a result of miscommunication (Nipa, 2015).

The same study, titled *The Relationship between Service Quality and Patient Satisfaction of BPJS Participants at the Yogyakarta Regional General Hospital*, was undertaken by Hastuti (2017). Tangibility findings were poor, according to the study (Hastuti & Siti Kurnia, 2017). Adjustments are made to general patients' access to healthcare in accordance with basic service requirements for outpatients and claim guarantees from BPJS for inpatients. Medical services such as checkups, diagnosis, consultation, and medication dispensing are offered to the public on an outpatient basis. Some disorders, including diabetes, need laboratory testing before further evaluation and conversation with the patient. In-patient care is tailored to each individual based on their selected class. Class III patients are seen once daily, either in the morning or the evening, whereas VIP patients are seen once daily. Only medical professionals, such as physicians, nurses, and midwives, are permitted to provide medications to patients (Nepe, 2017).

Thirdly, assurance (assurance) covers the ability, courtesy, and trustworthiness of the staff, free from danger, risk, or doubt, and reliability (Reliability) measures the reliability with which a company provides its services to its customers. Other quality of health service dimensions include responsiveness (Quick response) and customer expectations for the speed of service, which are likely to rise over time.

Nias Regency has 19,747 registered JKN-KIS participants, North Nias has more than 4,000, West Nias has more than 7,000, and Gunungsitoli City has 12,000, according to data from BPJS Kesehatan. Of the five Regencies/Cities on the Nias Islands, four have integrated the poor as JKN-KIS participants. To wit: (Rudhy Suksmawan, 2017).

The Social Security Administration Agency (BPJS), which administers Indonesia's National Health Insurance (JKN), collaborates with a number of different medical facilities around the country. Located on the island of Nias, RSU Bethesda Gunungsitoli Nias is a public hospital in the Unitary State of the Republic of Indonesia with the RS code 1278002 and, as of March 25, 2013, a class D hospital under the leadership of director dr. Yorien S. A. Lase; on September 3, 2018, a new director was appointed in the form of Director dr. Idaman Zega, MM. Patients with BPJS Civil Servant status made 1,502 trips, Mandiri made 842 visits, and PBI made 2,738 visits to RSU Bethesda Gunungsitoli Nias in a single year (Dinkes, 2018).

The foregoing information suggests that an increase in the number of patients registered does not always indicate a rise in patient satisfaction. Community evaluation of hospital nursing care for JKN patients is one of the current topics of discussion in Indonesia's health care sector. Numerous cases attest to the inequity of hospitals' treatment of JKN patients, who appear to insult participants by giving subpar care and failing to adhere to laws.

Most respondents to the author's first study, which was performed via interviews at RSU Bethesda Gunungsitoli Nias in 2020 and included in- and out-patients, general patients but with

JKN cards, and a few nursing and management personnel, had poor impressions of JKN services. Patients who used JKN services and were questioned by researchers said that the care they got was different from that given to general/non-JKN patients. That hospital patients will be disappointed with the care they get there.

The author is interested in doing study with the title "Analysis of service quality on satisfaction of BPJS health inpatients at Bethesda General Hospital Gunungsitoli Nias" because of the context provided by the aforementioned issue.

Methods

The present study employs a cross-sectional research design, wherein data pertaining to both independent and dependent variables will be gathered simultaneously. The primary objective of this investigation is to discern the correlation between service quality and patient satisfaction among inpatients of BPJS health at RSU Bethesda Gunungsitoli.

Research Population and Sample

Population

The population is all research subjects (Suharsimi Arikunto, 2010a), the population in this study is inpatients at Bethesda General Hospital Gunungsitoli Nias, totaling 280 people.

Sample

The sample is part of the number and characteristics possessed by the population (Suharsimi Arikunto, 2010b). The samples taken in this study were patients who visited the hospital and had received inpatient services. The technique of taking the number of samples in this study used Accidental Sampling of 165 patients.

Operational Definition and Measurement Aspects

Table 1. Operational Definition

Variable	Operational Definition	How to Measure and Measure Results	Scale
Physical evidence	Facilities, facilities and infrastructure as well as forms of medical personnel services in hospitals felt by BPJS patients	Questionnaire, 0 = Not good (score 1-10) 1 = Good (Score 11-25) (Sastrasmoro, 2013)	Ordinal
Reliability	The ability of medical personnel to provide services to BPJS patients	Questionnaire, 0 = Not good (score 1-10) 1 = Good (Score 11-25) (Sastrasmoro, 2013)	Ordinal
Responsiveness	Willingness of medical personnel to help provide services to BPJS patients	Questionnaire, 0 = Not good (score 1-10) 1 = Good (Score 11-25) (Sastrasmoro, 2013)	Ordinal
Guarantee	Certainty of the services provided by medical personnel in providing services to BPJS patients	Questionnaire, 0 = Not good (score 1-10) 1 = Good (Score 11-25) (Sastrasmoro, 2013)	Ordinal
Attention	Attention or understanding given by medical personnel in	Questionnaire, 0 = Not good (score 1-10)	Ordinal

	providing services to BPJS patients	1 = Good (Score 11-25) (Sastrasmoro, 2013)	
Patient satisfaction	Patient satisfaction with the quality of service by the Hospital.	Questionnaire Satisfied : 51-100 Not satisfied : 25-50	Ordinal

Table 2. Measurement Aspect

Variable Name	Number of Questions	Ways and measuring instruments	Measurement Scale	Value	Types of Measuring Scales
Independent					
Tangibles (Physical Evidence)	5	Questionnaire	Score 11-25 Score 1-10	Good Bad	Ordinal
Reliability	5	Questionnaire	Score 11-25 Score 1-10	Good Bad	Ordinal
Responsiveness	5	Questionnaire	Score 11-25 Score 1-10	Good Bad	Ordinal
Assurance	5	Questionnaire	Score 11-25 Score 1-10	Good Bad	Ordinal
Empathy	5	Questionnaire	Score 11-25 Score 1-10	Good Bad	Ordinal
Dependent					
BPJS patient satisfaction	25	Questionnaire	Score 51-100 Score 25-50	Good Bad	Ordinal

Data Collection Techniques

The information for the study came from responses to a questionnaire the researcher developed. collecting information about subjects' demographics and other relevant quantitative features and factors

Before beginning data collection, we informed our participants of the study's goals, anticipated benefits, potential drawbacks, and strategies for mitigating those risks. All participants will be asked to sign an informed consent form indicating their agreement to take part in the study.

Primary data

Primary data is information that has been collected without relying on any secondary sources, such as the Internet or previously collected data.

Secondary Data

Data collection in this study also used secondary data, namely where researchers obtained data in the form of the number of Primipara postpartum mothers at Pidie Jaya Hospital in 2021.

Data Processing Techniques

The collected data is processed by computerization with the following steps; (1) Editing (Checking Data), activities for checking and correcting forms or questionnaires. The purpose of editing is to reduce errors or deficiencies in the list of questions that have been completed as far as possible; (2) Coding (Providing Code), namely changing data in the form of sentences or letters into numeric or numeric data; (3) Scoring (Giving Value), assessing the respondents' answers to the questions in the questionnaire; (4) Tabulation (Clarification), Answers that have been given categories are grouped and then included in tables (Notoatmodjo, 2010).

Validity and Reliability Test

Validity and reliability testing of the questionnaire instrument is necessary to provide good quality data for analysis (Prasetyo, 2012). A validity and reliability test is conducted before the questionnaire is given to actual respondents.

Validity Test

According to Azwar (1987), validity refers to the degree to which a test or other measuring device may be relied upon to provide reliable and exact results. High validity in a test is indicated when the measuring device faithfully performs its measuring function or produces measuring findings that are consistent with the intended use of the measurement. That is, the outcome of the measurement is a number that faithfully represents the true state of affairs or facts about the thing being measured (Matondang, 2009). In this research, 165 BPJS inpatients were tested for validity at Bethesda Gunungsitoli Public Hospital. Validity testing will include 25 questionnaire questions. The questionnaire's reliability was determined by calculating the Pearson Product Moment correlation between each question's score (value) and the overall score. The formula may be found in SPSS version 17.0, the Statistical Package for the Social Sciences.

Reliability Test

Finding out how trustworthy measurement findings are requires measuring instrument dependability. How well a measuring device provides consistent readings of the quantity being measured is an indication of its reliability. Cronbach's Alpha (α) is a widely-used reliability assessment approach, chosen because it can be applied to a wide variety of tests and surveys in which respondents are given a set of options from which to choose an appropriate response. Computing dependability utilizing the Cronbach Alpha formula in software. If a variable's Cronbach Alpha score is more than 0.60, it may be considered credible (Hidayat, 2009). The internal consistency approach was utilized to determine the test's reliability in this research by administering it just once to a sample of participants and calculating the test's reliability using the alpha coefficient calculation in SPSS.

Data analysis

The following phase, once the data has been processed as indicated above, is data analysis. The following categories apply to this study's data analysis:

The purpose of a univariate analysis is to provide an explanation for or characterization of each independent variable in a study. The quality of care provided and the level of contentment felt by patients were the focus of this descriptive study's analysis. The frequency distributions of the two variables, service quality and service satisfaction, were examined for descriptive analysis.

A computer software was used to analyze the data and determine whether there was a statistically significant relationship between the independent and dependent variables. 90% or 10% level of significance (0.1) is utilized for the confidence interval. Analysis by use of SPSS's basic linear regression technique.

A multivariate analysis was performed to determine which of the many potential factors most affected the outcome of interest. The dependent variable, which is analyzed using multivariate analysis, is affected by the independent variable. In order to determine what factors in 2021 are most important in determining whether or not BPJS health inpatients at Bethesda Gunungsitoli General Hospital Nias are satisfied with their care, a multiple logistic regression analysis was conducted for this research.

Results and Discussion

Respondent Characteristics

Age, sex, level of education, and profession are only few of the features of the study's samples. Trustworthiness, availability, certainty, empathy, and tangible proof all stand on their own as independent factors. Service quality, patient satisfaction, and the dependent variable BPJS patient satisfaction were all examined using univariate analysis to determine the frequency distribution of respondent attributes.

Table 3. Characteristics of Respondents Based on Age at RSU Bethesda Gunungsitoli

No.	Age	f	Percentage
1	25-35 years	50	30.3
2	36-45 years	28	17.0
3	46-55 years old	54	32.7
4	56-65 years	22	13.3
5	66-75 years old	11	6.7
Total		165	100.0

Table 3 shows that of the total respondents, 54 (or 32.7% of the sample) were between the ages of 46 and 55, while 11 (or 6.7%) were between the ages of 66 and 75.

Table 4. Characteristics of Respondents Based on Education at Bethesda Hospital Gunungsitoli

No.	Education	f	Percentage
1	Elementary School	38	23.0
2	Junior School	28	17.0
3	High School	10	6.1
4	Diploma	35	21.2
5	Bachelor	38	23.0
6	Other	16	9.7
Total		165	100.0

Table 4 shows that of the total responses, 38 (or 23%) were from the elementary/S1 level, while just 10 (or 6.1%) were from the high school level.

Table 5. Characteristics of Respondents Based on Employment at Bethesda Hospital Gunungsitoli

No.	Work	f	Percentage
1	Farmer	48	29.1
2	Self employed	44	26.7
3	Civil Servant	63	38.2
4	Other	10	6.1
Total		165	100.0

Table 5 shows that of the total respondents, 63 (or 38.2%) worked for the government, while 10 (or 6.1%) were self-employed.

Table 6. Characteristics of Respondents Based on Employment at Bethesda Hospital Gunungsitoli

No.	Work	f	Percentage
1	Man	38	23.0
2	Woman	127	77.0
Total		165	100.0

Table 6 shows that of the total responders, 127 (or 77%) are women, while 38 (or 23.8%) are men.

Multivariate Analysis

Logistic regression is a method for developing prediction models, similar to linear regression or what is more often known as Ordinary Least Squares (OLS) regression, as defined by Ardiana et al., (2021). In logistic regression, on the other hand, the dependent variable is predicted using a binary scale. In this context, "yes" and "no," "good" and "bad," and "high" and "low" all belong to the same dichotomous scale for nominal data. Using the proper procedure, such as that for logistic regression, an adjusted Odds ratio value may be calculated.

Logistic Regression Test

Table 7. The Effect of Physical Evidence, Reliability, Responsiveness, Assurance and Attention to the Quality of BPJS Services at Bethesda Hospital Gunungsitoli

Variable	B	Itself.	Exp(B)
Physical Evidence	.085	.896	1.088
Reliability	1.89	.031	6.623
Responsiveness	-.949	.408	.387
Guarantee	1.082	.143	2.952
Attention	1.884	.039	6.578

Table 7 from the aforementioned logistic regression study reveals that the variable having the greatest effect on customer satisfaction is reliability, at $p = 0.031$ $\text{Exp}(B = 6.623)$, with an OR of 25.234 (10.213-62.314). The reliability variable has the greatest exp value of B compared to the other four variables in the findings of the logistic analysis test.

The Relationship of Physical Evidence with Inpatient Patient Satisfaction

Drawing upon the findings of conducted research, the outcomes of the statistical analysis employing the Chi Square test indicate a discernible correlation between tangible evidence and the contentment levels experienced by inpatients of BPJS.

A number of individuals voiced their discontent regarding the subpar conditions of the patient rooms at BPJS, as highlighted by various respondents. These concerns encompassed cramped spaces, inadequate access to clean water sources, frequent interruptions in television service, and other discomforting facilities that compromised the overall experience for healthcare recipients at RSU Bethesda Gunungsitoli. Furthermore, it is worth noting that the overall cleanliness of the inpatient room and accompanying bathroom leaves much to be desired.

The participants expressed their dissatisfaction with the service provided in relation to the physical evidence factor, leading to a decrease in patient satisfaction regarding the overall aesthetics of the room. The perceptible impact of service quality on users is manifested through the provision of appropriate physical infrastructure and equipment, as well as the intangible nature of the product or service that eludes tangible perception. Similar to a lavatory that exhibits a conspicuous deficiency in terms of hygiene.

The findings of this study align with the research conducted by Djeinne (2018) at the internal medicine polyclinic of RSU GMIM Pancaran Kasih Manado. Djeinne's study revealed a noteworthy correlation between physical evidence and patient satisfaction, as evidenced by a significant P-value of 0.001 (Pangerapan Djeinne Thresye et al., 2018a). In a study conducted by Cyntia (2018), an investigation was undertaken at RSUD Dr. Abdul Moeloek to explore the association between various factors and patient satisfaction in the Internal Medicine Outpatient Room. The findings of this research revealed significant relationships between tangible aspects

(p-value 0.013), reliability (p-value 0.027), responsiveness (p-value 0.002), assurance (p-value 0.000), and empathy (p-value 0.003) with patient satisfaction. This study provides valuable insights into the factors that contribute to patient satisfaction within the healthcare setting at RSUD Dr. H. Abdul Moeloek in Lampung Province (Chyntia, 2018a).

Typically, an individual's initial impression of a hospital's capabilities is shaped by its physical state. The hospital's ability to fulfill its duties effectively is contingent upon maintaining an environment characterized by cleanliness, tidiness, and organization. The correlation between physical evidence and patient satisfaction is one that bears noteworthy significance. It has been observed that physical evidence exerts a positive and substantial impact on the overall satisfaction experienced by patients. The correlation between the customer's perception of physical evidence and patient satisfaction is significant. A positive perception of physical evidence tends to elevate patient satisfaction, while a negative assessment of physical evidence tends to diminish it. Upon embarking on the therapeutic journey, individuals undergoing medical intervention instinctively direct their attention towards the visual aspects of the examination space. The desire for a well-appointed examination room is a prevailing sentiment among patients availing themselves of healthcare services. Consequently, hospitals diligently endeavor to maintain the pristine condition of each room throughout the patient's course of treatment.

The Relationship of Reliability with Inpatient BPJS Patient Satisfaction

Drawing upon the findings derived from extensive research endeavors, the outcomes of the statistical examination employing the Chi Square test unveil a discernible correlation between the dependability factor and the contentment levels exhibited by individuals receiving healthcare services under the auspices of BPJS.

The findings of this investigation revealed that a subset of participants held a negative perception of the service, expressing their dissatisfaction with the quality of service rendered. The underlying cause for this phenomenon can be attributed to the respondents' discontentment with the performance of healthcare professionals, who exhibited prolonged delays and demonstrated inadequate competence. Consequently, patients experienced a profound sense of dissatisfaction with the quality of service provided.

In terms of the reliability variable, respondents hold the perception that commendable service is characterized by its dependability and precision. The attainment of patient satisfaction hinges upon the seamless alignment between performance and the expectations harbored by individuals seeking medical services. This delicate equilibrium necessitates the absence of errors, ensuring that the provision of services is executed promptly and devoid of any complications. Furthermore, the punctuality of healthcare professionals, particularly doctors, assumes paramount significance in fostering patient contentment. The paramount desire of patients lies in the attainment of consistent service, characterized by unwavering reliability. A consistent service can be deemed reliable when it encompasses several essential elements. Firstly, it entails fulfilling the commitments made to patients, ensuring that what has been promised is delivered. Secondly, it involves maintaining a high level of professionalism when interacting with patients, ensuring that their needs are met with competence and expertise. Lastly, it necessitates the provision of accurate and reliable information to patients, ensuring that they are well-informed and empowered to make informed decisions regarding their healthcare.

According to the respondents' evaluations, the reliability of the service was deemed unsatisfactory, leading to consumer dissatisfaction with the provided services. This discontent stemmed from the delayed and untimely visits of several specialist doctors, as they were constrained by their afternoon commitments at Bethesda General Hospital and the subsequent provision of poly/clinic services during late hours. The implementation of early outpatient care

entails scheduling doctor visits during the evening hours subsequent to the completion of service at the Poly. As a consequence of extended waiting periods, patients often find themselves compelled to sacrifice significant amounts of time or disrupt their nocturnal rest in order to accommodate the doctor's schedule. An optimal standard of hospital service encompasses the ability to deliver prompt, precise, and satisfactory services, thereby exemplifying traits of consistency and dependability. In the event that the service fails to meet the patient's expectations, it is likely to result in diminished levels of overall satisfaction.

The findings of this investigation align with the outcomes of a prior study conducted by Cyntia (2018) at Dr. Abdul Moeloek. The study conducted by Chyntia (2018b) revealed compelling evidence of a significant association between various factors and patient satisfaction within the Internal Medicine Outpatient Hospital Dr. H. Abdul Moeloek in Lampung Province. The researcher's findings indicated a tangible relationship (p-value 0.013), reliability (p-value 0.027), responsiveness (p-value 0.002), assurance (p-value 0.000), and empathy (p-value 0.003) as key determinants of patient satisfaction. In a similar vein to the study conducted by Andriani (2017), an investigation was undertaken to explore the correlation between the quality of health services and patient satisfaction within the confines of the General Polyclinic Room at the Bukit Tinggi Health Center. The findings of this study were derived from a sample of respondents who experienced a commendable level of service quality. Notably, a significant majority of participants, accounting for 58.5% of the total, reported a positive experience. More than half of the respondents (specifically, 36.9%) expressed a sense of satisfaction and acknowledged the presence of superior quality. According to the scholarly work of Andriani (2017), it has been established that...

Similarly, the empirical findings of the study conducted by Walewangko et al. (2015) substantiate the notion that expeditiousness in the administrative procedures exerts a favorable influence on individuals' perceptions of the dependability of healthcare institutions. Similarly, a study conducted by Yusuf (2012) examined the experiences of inpatients at Anutapura Hospital in Palu City. The findings of this research revealed a noteworthy correlation between the level of reliability and the degree of patient satisfaction with the services provided by the hospital.

According to Parasuraman et al. (2006), the construct of service quality, specifically the variable of reliability, pertains to the capacity of a service provider to consistently deliver dependable and precise services. The attainment of optimal performance in healthcare necessitates the alignment of patient expectations with the delivery of error-free services. This entails the expeditious and accurate reception of patients, swift and meticulous examination procedures, the administration of correct and suitable treatments, prompt and precise execution of treatment services, and the accurate adherence to hospital service schedules, including doctor's visits. Moreover, the proper execution of hospital service schedules, such as maintenance and rest periods, is imperative. Additionally, service procedures should be streamlined and uncomplicated, and when assistance is required, nurses should consistently adhere to established protocols in providing their services.

The Relationship of Responsiveness with Inpatient BPJS Patient Satisfaction

Based on the findings of the study, the analysis using the Chi Square test reveals a significant association between the responsiveness and satisfaction levels of inpatients under the BPJS healthcare system.

The quality of service in the responsiveness dimension is subpar, leading to patient dissatisfaction with the rendered services. This may be attributed to the staff's lack of promptness in addressing patient requests. This responsiveness encompasses the willingness of healthcare professionals to promptly and efficiently assist and attend to patients.

This study aligns with the research done by Cyntia (2018) at Dr. Abdul Moeloek. The study conducted by Chyntia (2018b) identified a significant association between patient satisfaction in the Internal Medicine Outpatient Hospital Dr. H. Abdul Moeloek Lampung Province and several factors, including reliability (p-value 0.027), responsiveness (p-value 0.002), assurance (p-value 0.000), empathy (p-value 0.003), and a tangible relationship (p-value 0.013). Similarly, a study conducted by Djeinne (2018) was undertaken at the internal medicine polyclinic of RSU GMIM Pancaran Kasih Manado. The findings of this research demonstrated a statistically significant association between responsiveness (P-value 0.004) and patient satisfaction (Pangerapan Djeinne Thresye et al., 2018b).

Based on the researchers' conjectures, the presence of responsive personnel, particularly nurses, is of utmost significance for a hospital, since nurses constitute the primary point of contact for patients and therefore play a crucial role in customer service provision. The level of responsiveness shown by officers in attending to patients/clients is significantly correlated with the degree of patient satisfaction.

The correlation between responsiveness and patient satisfaction is such that responsiveness has a favorable and noteworthy impact on patient satisfaction. There exists a positive correlation between the customer's impression of responsiveness and patient satisfaction, wherein a greater level of perceived responsiveness leads to increased patient satisfaction. Conversely, a negative relationship is seen when the patient's perception of responsiveness is low, resulting in decreased levels of patient satisfaction. According to Leboeuf's (2012) perspective, the concept of responsiveness, which pertains to the willingness of personnel to serve patients promptly when their assistance is required, has a strong correlation with customer satisfaction.

Ardani and Supartiningsih (2017) discovered a similar finding in their study on the impact of service quality on satisfaction and word-of-mouth (WOM) at Wangaya Hospital Denpasar. They determined that responsiveness emerged as the primary factor influencing patient satisfaction at Wangaya Hospital Denpasar. According to Tjiptono (2014), customer satisfaction plays a crucial role in fostering repeat purchases, cultivating customer loyalty, and generating valuable word-of-mouth recommendations (Tjiptono, 2014a).

The Relationship between Guarantee and Inpatient BPJS Patient Satisfaction

Analysis utilizing the Chi-Square test shows a strong association with the happiness of BPJS inpatients, supporting the findings of the aforementioned study. Some respondents were less happy with the guarantee variable, the research found, since they believed health care professionals could not promise a positive outcome for their patients. Patients believe they are being treated without hope because nurses are not providing them with information.

This study's findings are consistent with those of a similar study by Ariyani (2009) that looked at patients' experiences at Jombang Regional Hospital. Where studies have shown that patients are more likely to put their faith in a hospital's care when they are given assurances that their needs will be met, it's clear that hospitals can do more to earn their patients' happiness. Good guarantees are linked to increased patient satisfaction and patient loyalty, as found in research by Winardi, et al. (2014) titled *The Effect of Service Quality on Consumer Satisfaction of Inpatients at SMC Telogorejo Hospital*. The findings of this study corroborate those of studies by Haryati (2004) at Langsa Regional Hospital and Tarigan (2009) at Dr. H. The Tebing Tinggi Pane Group, both of which found that patient satisfaction was higher after receiving reassurance (Winardi et al., 2014).

This study agrees with that of Cyntia (2018) from RSUD Dr. Abdul Moeloek. Where it was discovered that there was a correlation between patient satisfaction and the presence of tangibles (p=0.013), reliability (p=0.027), responsiveness (p=0.002), assurance (p=0.000), and

empathy ($p=0.003$). Clinic for Internal Medicine at Dr. H. Abdul Moeloek's Hospital in Lampung, Indonesia (Chyntia, 2018b).

According to Tjiptono (2014), a patient's level of satisfaction with their healthcare cannot be divorced from the quality of the care they have received. Satisfaction with healthcare is linked to positive outcomes like healing from illness, feeling healthier or more rejuvenated, appreciating the care setting, and expressing gratitude to the staff. You can rest assured that we will do everything in our power to meet and exceed your expectations, whether they be related to our product knowledge, the quality of our customer service, the accuracy of the information we provide, the safety of our services, or any other aspect of our business dealings with you. Customer satisfaction with a hospital's services is heavily influenced by guarantee elements such as the nurses' friendliness, comfort, and politeness (Tjiptono, 2014b).

Everyone seeking medical care at a hospital just wants to be treated decently. Patients may be certain that they will be cared for properly by the hospital's administration, giving them a feeling of safety and stability. Their faith in the hospital will grow as a result. It has been shown that providing promises to patients significantly increases their level of satisfaction with their care. Patients are more satisfied with care when they have a positive impression of the guarantee, and they are less satisfied when they have a negative impression of the guarantee.

Syafriza et al. (2010) found that good guarantees will increase patient satisfaction with hospital services, leading patients to be more likely to trust and believe in all services provided by the hospital (D. et al., 2009). Similarly, Indiraswari and Damayanti (2012) found that good guarantees significantly in addition to increasing patient satisfaction with services, will also affect the patient's assessment of the quality of care provided by the hospital.

Relationship of Attention with Patient Satisfaction BPJS Hospitalization

The study utilizing the Chi Square test reveals a connection between empathy and patient satisfaction in BPJS inpatient treatment, corroborated by the findings of the aforementioned research.

Some survey takers felt the service lacked in the empathy department, leading to complaints about how cops talk to people and how they handle anxious patients. The hospital's ability to increase the empathy component of service is crucial to ensuring that patients feel cared for.

The findings of this study are consistent with those of Sulianti (2010) and Moniung (2014), who also found that the empathy variable is directly associated to the development of high-quality services. Customers who have a positive interaction with a business are more likely to become repeat buyers if the service they get is of high quality.

According to Tjiptono's (2014) assessment, paying close attention is a crucial part of delivering high-quality service. To a large extent, this accords with the findings of study by Puspitasari and Edris (2011) on patient satisfaction at the Healthy Family Inpatient Installation at Pati Hospital. The attention variable is strongly linked to the production of high-quality services, as discovered by Berlianty et al. (2013) in their study on patient loyalty at Bhayangkara Mappa Oudang Hospital in Makassar City. Customers that get quality service have a better overall experience, are more likely to return, and are more likely to become loyal customers (Tjiptono, 2014).

The most influential variable of Reliability on Patient Satisfaction of BPJS Hospitalization

It has been shown, via analysis utilizing logistic analysis tests, that the reliability variable significantly affects BPJS inpatients' levels of satisfaction. The reliability variable has the greatest exp B value, and this may be compared to the results of the logistic analysis test on the other four variables. The respondents' perception of the quality of service offered by all health

personnel at RSU Bethesda Gunungsitoli had a significant impact on the respondents' confidence in the dependability of services.

When asked about the importance of accuracy, respondents overwhelmingly rated dependability as higher. When services are delivered quickly, without difficulties, and the doctor shows up on time, patients are more likely to be happy with the service provider. Patients like reliability and consistency most in a service provider. Maintaining a high level of professionalism while interacting with patients, as well as giving accurate information to patients, are all hallmarks of consistent service.

The capacity to consistently provide high-quality services represents quality in terms of the dependability variable. Accurate hospital service schedules, including doctor's appointments, rest periods, and service procedures, are essential to meeting patients' needs and avoiding complaints. Other areas where accuracy is crucial include patient reception, examination, treatment, and scheduling.

Conclusion

Based on the research that has been done, the following conclusions are obtained; (1) There is a relationship between physical evidence and the satisfaction of BPJS health inpatients at Bethesda Hospital Gunungsitoli; (2) There is a relationship between reliability and satisfaction of BPJS health inpatients at Bethesda Hospital Gunungsitoli; (3) There is a relationship between responsiveness to the satisfaction of BPJS health inpatients at Bethesda Hospital Gunungsitoli; (4) There is a guarantee relationship with the satisfaction of BPJS health inpatients at Bethesda Gunungsitoli Hospital; (5) There is a relationship between attention to the satisfaction of BPJS health inpatients at Bethesda Gunungsitoli Hospital; (6) The most dominant variable affecting BPJS Health inpatient satisfaction is reliability with $p = 0.031$ Exp (B 6,623) which means that reliability (*reability*) 6,623 times greater affects patient satisfaction at Bethesda Gunungsitoli General Hospital.

Suggestion; (1) Health care providers are expected to continue to be committed to providing the facilities needed by patients while served at the hospital; (2) Medical personnel, nursing staff / midwives and other health workers are expected to always upgrade their knowledge by attending seminars, workshops or training that can improve reliability in providing care to patients who are being treated at the hospital; (3) Hospital management is expected to be able to motivate every caregiver or through giving awards to every health worker who provides better responsiveness to patients as seen from the satisfaction questionnaire received from patients; (4) It is expected that health workers in hospitals, especially doctors and nurses, show more optimism in providing health services so that patients feel their health is guaranteed when hospitalized; (5) Every officer who provides services at the hospital, starting from the patient coming who is served at the registration department until the patient goes home must show attention to the patient or show empathy and not sympathy so that the patient's confidence increases; (6) Training activities outside the hospital and inside the hospital that are carried out regularly greatly affect the reliability of caregivers in carrying out professional actions to patients, for that it is expected that the hospital will compile a training plan every year for all staff; (7) It is expected to improve services in the hospital so as to increase patient satisfaction with the quality of service in the hospital. For hospitals, it is expected to be able to make the results of this research as input and as a basis for consideration in hospital improvement efforts. And also expected to provide input to the Director of the hospital in order to further improve the role of health workers in serving BPJS patients.

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