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**| RESEARCH ARTICLE**

# ASSESSING THE ASSOCIATION BETWEEN HEALTHCARE SERVICE QUALITY AND PATIENT SATISFACTION AMONG PRIVATE HEALTH INSURANCE USERS AT "X" HOSPITAL

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**| ABSTRACT**

Despite continuous improvements in the healthcare sector, deficiencies in healthcare service delivery are still frequently encountered, which may negatively affect public perception and patient trust in healthcare institutions. Given the diversity and complexity of healthcare services, standardized service guidelines are essential to ensure the delivery of effective, efficient, and patient-centred care. Health insurance plays an important role in supporting access to healthcare services by covering part or all medical expenses resulting from illness or other health-related risks.

**| KEYWORDS**

*Healthcare Service Quality, Patient Satisfaction, Private Health Insurance, Hospital Services, Healthcare Management*

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## 1. Introduction:-

This study aimed to examine the relationship between the quality of healthcare services and patient satisfaction among users of private health insurance at "X" Hospital. The research employed a descriptive analytical design using a cross-sectional approach. The study population consisted of 150 patients, from which 60 respondents were selected through a non-probability accidental sampling technique. Data were analyzed using the Chi-square statistical test.

The findings revealed that the overall quality of healthcare services provided to private insurance patients was generally perceived as good; however, it had not fully met patients' expectations. The level of patient satisfaction among insurance users was categorized as moderate, with an average satisfaction score of 3.5, indicating that patients were reasonably satisfied with the services received. Furthermore, the study
identified a significant relationship between healthcare service quality and patient satisfaction among private insurance users. The study concludes that hospitals should continuously maintain and enhance the quality of healthcare services in order to improve patient satisfaction and ensure that healthcare delivery aligns with patient expectations and needs.

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Every individual requires access to high-quality healthcare services. Hospitals, community health centers, and clinics provide a variety of services, including medical examinations, treatment, pharmaceutical care, and laboratory services. Therefore, healthcare institutions are expected to deliver services that meet patients' expectations and needs. Hospitals, in particular, offer inpatient, outpatient, and emergency care services. Inpatient care refers to healthcare services in which patients are required to stay in the hospital for at least one day for observation and treatment (Siswati, 2017).

Patient satisfaction is widely recognized as an important indicator of healthcare service quality. The quality of healthcare services can be measured by the extent to which services fulfill patients' expectations and needs. High-quality healthcare services are generally characterized by reliability, responsiveness, assurance, empathy, and tangible aspects of care and facilities. All patients, including new patients, returning patients, and those covered by BPJS or private insurance, are entitled to receive equal and fair healthcare services (Supartiningsih, 2017).

Private health insurance providers and non-BPJS healthcare organizers are expected to provide accurate health information and reliable healthcare services. However, shortcomings in the implementation of healthcare services are still frequently encountered, which may negatively affect the quality of healthcare delivery and public trust in healthcare institutions. If these issues are not properly addressed, the image and credibility of healthcare services may deteriorate. Consequently, healthcare institutions require clear operational guidelines to ensure the delivery of standardized and effective healthcare services. Health insurance serves as a financial protection mechanism that covers health-related risks and medical expenses resulting from illness. With increasing public awareness of healthcare needs, the use of health insurance services has continued to grow significantly.

According to a survey conducted by the Danareksa Research Institute in 2019, approximately 91% of respondents and their family members were covered by health insurance. Among them, 98.66% were enrolled in government-sponsored health insurance or BPJS Kesehatan, while some respondents also possessed private health insurance coverage. Private health insurance has become an alternative and complementary option to BPJS because it offers additional benefits, lower service limitations, and broader hospital networks. Inpatient healthcare services are one of the important components supported by health insurance schemes. Both government and private sectors are responsible for ensuring healthcare access as a fundamental human right. Therefore, collaboration and continuous improvement efforts are necessary to achieve healthcare service standards that align with public expectations (Yanuart et al., 2021).

BPJS Kesehatan routinely conducts patient satisfaction surveys among hospital service users in Indonesia. In 2020, approximately 89.13% of respondents expressed satisfaction with hospital outpatient services, an increase from 86.48% in 2019. However, the number of respondents declined by 64.18% compared to the previous year, with 13,617 respondents participating in 2020 compared to 36,672 in 2019. Similarly, satisfaction with inpatient services reached 89.84% in 2020, exceeding the 2019 figure of 86.64%. Nevertheless, the number of respondents for inpatient service surveys also decreased significantly, from 20,981 respondents in 2019 to 8,586 respondents in 2020. Outpatient accessibility satisfaction declined from 87.74% in 2019 to 83.93% in 2020. This decrease was largely associated with the COVID-19 pandemic, which disrupted healthcare service accessibility as healthcare institutions prioritized the treatment of COVID-19 patients, while many participants experienced concerns regarding direct access to healthcare services.

Previous studies have highlighted the relationship between healthcare service quality and patient satisfaction. Research conducted by Ulfa and Zulkarnain (2016) regarding inpatient satisfaction among users of the National Health Insurance program found that patients expressed dissatisfaction with aspects related to reliability, responsiveness, assurance, and empathy, although overall satisfaction remained relatively positive. Similarly, Yuniarti (2015) reported that higher-quality healthcare services were associated with greater patient satisfaction. Another study by Yanuart et al. (2021) demonstrated that demographic factors such as age, gender, education level, and occupation influenced hospital patient satisfaction levels. Furthermore, research in the field of Health Services Research conducted by Henke et al. (2018) revealed that hospital systems often provide superior healthcare services to private insurance users compared to other patients due to higher reimbursement and service fees associated with private insurance schemes. In addition, findings reported by Ginting (2019) showed that the Patient Satisfaction Survey conducted at Dr. Wahidin Sudirohusodo Hospital in Makassar did not fully meet the Minimum Service Standards established under Regulation No. 129 of 2008, although the Community Satisfaction Index exceeded the "Good Service" standard based on the Decree of the Minister of Administrative Reform No. 25 of 2004.

According to data published by the Indonesian Central Bureau of Statistics (BPS), approximately 68% of the Indonesian population had health insurance coverage in 2021, slightly increasing from 68.36% in the previous year. Most insured individuals were covered under the BPJS Kesehatan Contribution Assistance Program (PBI). Meanwhile, approximately 2.93% of Indonesians employed in formal sectors had employment-based health insurance, while only 0.76% possessed private health insurance coverage. The report also indicated that 72.80% of insured individuals resided in urban areas, whereas 62.52% of rural residents had health insurance coverage.

Approximately 794 out of every 1,000 Indonesians had health or public health insurance coverage in 2021, according to data from the Central Bureau of Statistics (BPS). In the same year, 3,433,938 out of 275,361,267 residents in DKI Jakarta were covered by private health insurance.

This study examines the relationship between healthcare service quality and patient satisfaction among private insurance users by applying the five dimensions of service quality. The research focuses on evaluating the quality of healthcare services and the level of patient satisfaction among patients using private health insurance. In addition, this study is expected to complement previous related studies and contribute to institutional evaluations regarding patient satisfaction.

## I. RESEARCH METHODS :-

This study employed a descriptive cross-sectional research design. The research was conducted from January 16, 2023, to April 16, 2023, at "X" Hospital. The study population consisted of patients using private health insurance who received treatment at "X" Hospital between August and December 2022, totaling 150 patients.

The inclusion criteria included patients who used private health insurance, were willing to participate as respondents, were able to read and write, and had undergone hospitalization for more than 2 × 24 hours. Meanwhile, the exclusion criteria included patients who refused to participate, patients who died during treatment after being hospitalized for more than 2 × 24 hours, patients who discharged themselves against medical advice after hospitalization exceeding 2 × 24 hours, and patients who were not fully conscious.

The sample consisted of 60 respondents selected after the required calculations were performed using the Slovin formula. Data were collected using a structured questionnaire. Prior to conducting the analysis, the researcher ensured that the research instrument met validity and reliability standards. After establishing the validity of the instrument, data analysis techniques, including univariate and bivariate analyses using the Chi-Square test, were applied.

RESULTS AND DISCUSSION

A. Univariate Results

1) Table 1. Univariate Results

| Respondent Characteristics | n | % |
|---|---|---|
| 1. Gender | | |
| Male | 18 | 30.0 |
| Female | 42 | 70.0 |
| 2. Age | | |
| ≤ 30 years | 37 | 61.7 |
| 31–40 years | 8 | 13.3 |
| 41–50 years | 11 | 18.3 |
| > 50 years | 4 | 6.7 |
| 3. Occupation | | |
| Housewife | 7 | 11.7 |
| Private Employee | 38 | 63.3 |
| Student | 2 | 3.3 |
| Book Writer | 1 | 1.7 |
| Civil Servant / Military / Police | 8 | 13.3 |
| Entrepreneur | 4 | 6.7 |
| 4. Education | | |
| Diploma I / II / III | 17 | 28.3 |
| Doctoral Degree (S3) | 1 | 1.7 |
| Bachelor's Degree (S1 / D4) | 32 | 53.3 |
| Master's Degree (S2) | 1 | 1.7 |
| Senior High School / | 9 | 15.0 |

| | | |
|---|---|---|
| Vocational School | | |
| 5. Hospitalization Experience | | |
| Never Hospitalized | 19 | 31.7 |
| Hospitalized Twice | 25 | 41.7 |
| More than Twice | 16 | 26.6 |
| 6. Insurance Providers | | |
| ACA | 2 | 3.3 |
| Admedika | 17 | 28.3 |
| AIA | 3 | 5.0 |
| Allianz | 6 | 10.0 |
| BLPM | 1 | 1.7 |
| CAR | 2 | 3.3 |
| FWD | 2 | 3.3 |
| Mandiri Inhealth | 2 | 3.3 |
| Manulife | 8 | 13.3 |
| Owlexa | 1 | 1.7 |
| Prudential | 14 | 23.3 |
| Sequis Life | 1 | 1.7 |
| Spicaputra Sarana, PT | 1 | 1.7 |

| Respondent Characteristics | n | % |
|---|---|---|

Based on the information presented in Table 1, the majority of respondents were female, accounting for 42 respondents (70%), while male respondents totaled 18 individuals (30%). Most respondents were aged 30 years or younger, representing 61.7% of the sample, indicating that the respondents were predominantly within the younger age group.

Based on occupation, the majority of respondents were private employees, totaling 38 respondents (63.3%), whereas the smallest occupational category consisted of book writers, represented by only 1 respondent (1.7%). Furthermore, the educational background of respondents showed that most participants held a bachelor's degree (S1/D4), accounting for 53.3% of the total respondents.

The highest educational level attained by respondents was a Bachelor's Degree (S1/D4), represented by 32 respondents (53.3%), while the lowest educational categories were Doctoral Degree (S3) and Master's Degree (S2), each represented by 1 respondent (1.7%). Regarding hospitalization experience, most respondents had been hospitalized twice, accounting for 41.7% of the sample. In terms of insurance providers, Prudential was the most frequently used provider, with 14 respondents (23.3%), while the least represented providers were BLPM, Owlexa, Sequis Life, and Spicaputra Sarana, PT, each represented by 1

respondent (1.7%).

A. Table 2. Descriptive Statistical Results of Service Performance Levels

| Category | Tangibles f (%) | Reliability f (%) | Responsiveness f (%) | Empathy f (%) | Assurance f (%) |
|---|---|---|---|---|---|
| Very Dissatisfied | – | 1 (1.7%) | – | – | – |
| Dissatisfied | 1 (1.7%) | 1 (1.7%) | 2 (3.3%) | 3 (5.0%) | 1 (1.7%) |
| Fairly Satisfied | 3 (5.0%) | 15 (25.0%) | 6 (10.0%) | 7 (11.7%) | – |
| Satisfied | 41 (68.3%) | 34 (56.7%) | 42 (70.0%) | 39 (65.0%) | 45 (75.0%) |
| Very Satisfied | 15 (25.0%) | 9 (15.0%) | 10 (16.7%) | 11 (18.3%) | 14 (23.3%) |

The descriptive analysis of service performance levels across all service quality dimensions was predominantly categorized as "satisfied." The tangible dimension showed 68.3% satisfaction, reliability 56.7%, responsiveness 70.0%, empathy 65.0%, and

assurance 75.0%. These findings indicate that, overall, respondents or insurance participants perceived the quality of healthcare services provided by the

hospital as good and satisfactory.

B. Table 3. Descriptive Statistical Results of Service Expectation Levels Category

| Tangibles f (%) | Reliability f (%) | Responsiveness f (%) | Empathy f (%) | Assurance f (%) |
|---|---|---|---|---|
| Very Dissatisfied | – | – | 1 (1.7%) | 1 (1.7%) | – |
| Dissatisfied | – | 3 (5.0%) | 1 (1.7%) | 2 (3.3%) | – |
| Fairly Satisfied | 28 (46.7%) | 26 (43.3%) | 28 (46.7%) | 27 (45.0%) | 28 (46.7%) |
| Satisfied | 32 (53.3%) | 31 (51.7%) | 30 (50.0%) | 30 (50.0%) | 32 (53.3%) |
| Very Satisfied | – | – | 1 (1.7%) | 1 (1.7%) | – |

findings, it can be concluded that insurance participants had strong expectations regarding the delivery of

high-quality healthcare services at the hospital.

C. Table 4. Descriptive Statistical Results of Service Gap Analysis Category

| Tangibles f (%) | Reliability f (%) | Responsiveness f (%) | Empathy f (%) | Assurance f (%) |
|---|---|---|---|---|
| No Gap | 38 (63.3%) | 32 (53.3%) | 37 (61.7%) | 38 (63.3%) | 38 (63.3%) |
| Very Low Gap | 17 (28.3%) | 19 (31.7%) | 15 (25.0%) | 15 (25.0%) | 16 (26.7%) |
| Low Gap | 4 (6.7%) | 7 (11.7%) | 6 (10.0%) | 5 (8.3%) | 5 (8.3%) |
| Moderate Gap | 1 (1.7%) | 1 (1.7%) | 2 (3.3%) | 2 (3.3%) | 1 (1.7%) |
| High Gap | – | | 1 (1.7%) | – | |

The descriptive analysis of service gaps, defined as the difference between service expectations and actual service performance, showed that the majority of respondents experienced no significant gap across all service dimensions. The percentage of respondents reporting no gap was 63.3% for the tangible dimension, 53.3% for reliability, 61.7% for responsiveness, 63.3% for empathy, and 63.3% for assurance. These findings indicate that, in general, respondents or insurance participants were satisfied with the

healthcare services provided by the hospital.

A. Table 5. Descriptive Statistical Results of Insurance User Satisfaction Descriptive Statistics

| Tangibles | Reliability | Responsiveness | Empathy | Assurance |
|---|---|---|---|---|
| Minimum | 2 | 2 | 2 | 2 | 2 |
| Maximum | 5 | 5 | 5 | 5 | 5 |
| Standard Deviation | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 |
| Mean | 3.5 | 3.4 | 3.5 | 3.6 | 3.5 |

A. Table 5. Descriptive Statistical Results of Insurance User Satisfaction Descriptive Statistics

| Tangibles | Reliability | Responsiveness |
|---|---|---|

The descriptive analysis of patient satisfaction levels showed that the minimum score across all dimensions was 2, while the maximum score was 5. The standard deviation ranged around 0.8, with mean scores varying between 3.4 and 3.6. Based on the average values, the empathy dimension recorded the highest satisfaction score (3.6), whereas the reliability dimension had the lowest average score (3.4). Overall, the total satisfaction level had a mean score of 3.5 with a standard deviation of 0.7 and a score range between 2 and 5. On a scale of 1 to 5, an average score of 3.5 indicates that insurance users were generally fairly satisfied with the healthcare services they received.

Bivariate Results

B. Table 6. Relationship Between Healthcare Service Quality and Patient Satisfaction Among Insurance Users

| Service Quality | Dissatisfied n (%) | Satisfied n (%) | Total n (%) | p-value |
|---|---|---|---|---|
| Low | 17 (51.5%) | 16 (48.5%) | 33 (100%) | 0.000 |

Based on the bivariate analysis using the Chi-Square test, the research hypothesis was accepted, indicating a significant relationship between healthcare service quality and patient satisfaction. This result was supported by the significance value (p-value) of 0.000, which was lower than the significance threshold of 0.05. Therefore, it can be concluded that better healthcare service quality is associated with higher levels of satisfaction among insurance users

C. Table 7. Relationship Between Patient Satisfaction Among Insurance Users and the Tangibles Dimension Service Quality

| | Dissatisfied n (%) | Satisfied n (%) | Total n (%) | p-value |
|---|---|---|---|---|
| Low | 17 (68.0%) | 8 (32.0%) | 25 (100%) | 0.000 |
| High | 8 (22.9%) | 27 (77.1%) | 35 (100%) | |
| Total | 25 (41.7%) | 35 (58.3%) | 60 (100%) | |

The results of the bivariate analysis using the Chi-Square test demonstrated that the hypothesis concerning the tangibles dimension was accepted, confirming a significant relationship between healthcare service quality and patient satisfaction in terms of tangible aspects. This finding was supported by the significance value (p-value) of 0.000, which is less than 0.05. These results indicate that patient satisfaction among insurance users is strongly associated with the quality of tangible healthcare facilities and physical evidence. Therefore, improvements in physical facilities, equipment, and healthcare infrastructure are likely to increase patient satisfaction levels.

**DISCUSSION :-**

The findings of this study demonstrate that healthcare service quality has a significant relationship with patient satisfaction among private health insurance users at “X” Hospital. Overall, respondents perceived the healthcare services provided by the hospital as satisfactory, particularly in the dimensions of assurance, responsiveness, empathy, tangibles, and reliability. These findings support the concept that patient satisfaction is strongly influenced by the quality of healthcare services received.

The univariate analysis showed that most respondents were female, aged 30 years or younger, employed as private-sector employees, and held a bachelor's degree. These demographic characteristics may influence patients' perceptions and expectations regarding healthcare services. Younger and more educated patients generally tend to have higher expectations concerning healthcare quality, service responsiveness, and healthcare facilities.
The descriptive analysis of service performance revealed that the majority of respondents expressed satisfaction across all service quality dimensions. The assurance dimension obtained the highest satisfaction percentage, indicating that patients valued healthcare providers' professionalism, competence, and ability to establish trust and confidence. Meanwhile, the reliability dimension received the lowest average satisfaction score, suggesting that consistency and accuracy in healthcare service delivery still require improvement.

The analysis of service expectations demonstrated that respondents had high expectations regarding healthcare quality in all dimensions. This finding indicates that insurance users expect hospitals not only to provide adequate treatment but also to deliver healthcare services that are responsive, empathetic, reliable, and supported by appropriate facilities. The relatively small service gaps identified in this study indicate that the hospital was generally successful in meeting patient expectations, although several areas still require continuous improvement.

The bivariate analysis confirmed a statistically significant relationship between healthcare service quality
and patient satisfaction. All five service quality dimensions—tangibles, reliability, responsiveness, empathy, and assurance—were significantly associated with patient satisfaction levels. These findings are consistent with previous studies conducted by Ulfa and Zulkarnain (2016), Yuniarti (2015), and Yanuart et al. (2021), which emphasized that higher healthcare service quality contributes directly to increased patient satisfaction.

The tangibles dimension was significantly related to patient satisfaction, suggesting that the physical condition of hospital facilities, medical equipment, cleanliness, and the appearance of healthcare staff influence patient perceptions positively. Patients generally feel more comfortable and confident when healthcare facilities are modern, clean, and well-maintained.
The reliability dimension also showed a significant association with patient satisfaction. Reliability reflects the hospital's ability to deliver healthcare services accurately, consistently, and according to promised standards. Patients expect healthcare personnel to provide dependable services, accurate diagnoses, and timely treatment. Therefore, hospitals must continuously improve operational efficiency and service consistency to strengthen patient trust and satisfaction.
Similarly, responsiveness was found to significantly affect patient satisfaction. Prompt responses, timely assistance, and healthcare providers' willingness to help patients are essential aspects influencing patient experiences. Patients value healthcare personnel who respond quickly to their needs and provide clear information regarding treatment procedures.
The empathy dimension achieved the highest average satisfaction score among all dimensions. This indicates that personal attention, effective communication, emotional support, and understanding of patient concerns are highly appreciated by patients. Empathetic healthcare services contribute substantially to creating positive patient experiences and improving overall satisfaction levels.
The assurance dimension also demonstrated a strong relationship with patient satisfaction. Patients tend to feel more satisfied when healthcare providers exhibit professionalism, courtesy, competence, and the ability to provide a sense of security during treatment. Assurance is particularly important for insurance users, who expect efficient administrative procedures and confidence in healthcare quality.
Overall, the findings of this study indicate that improving healthcare service quality across all dimensions can significantly enhance patient satisfaction among private health insurance users. Hospitals should continue evaluating and improving healthcare service delivery, particularly in areas where service gaps and lower satisfaction levels are identified.

**CONCLUSION :-**

This study concludes that healthcare service quality has a significant relationship with patient satisfaction among private health insurance users at "X" Hospital. All dimensions of healthcare service quality, including tangibles, reliability, responsiveness, empathy, and assurance, were significantly associated with patient satisfaction.
The results showed that respondents generally perceived the quality of healthcare services provided by the hospital as satisfactory. The empathy dimension recorded the highest average satisfaction score, while the reliability dimension showed the lowest score among all dimensions. Overall, patient satisfaction among insurance users was categorized as fairly satisfied, with an average score of 3.5 on a five-point scale.

The study also found that most respondents had high expectations regarding healthcare services, indicating that patients expect hospitals to provide professional, responsive, reliable, empathetic, and high-quality healthcare services. Although most respondents reported no significant service gaps, continuous quality improvement remains necessary to meet increasing patient expectations.
Based on these findings, hospitals are encouraged to maintain and improve healthcare service quality, particularly in aspects related to reliability and responsiveness, in order to enhance patient satisfaction and strengthen public trust in healthcare services.
Recommendations
1. Hospitals should continuously improve healthcare service quality across all service dimensions, particularly reliability and responsiveness.

2. Healthcare providers should enhance communication skills, empathy, and patient-centered care approaches to improve patient experiences.
3. Hospital management should regularly evaluate patient satisfaction and service quality through periodic surveys and feedback mechanisms.
4. Improvements in healthcare facilities, administrative efficiency, and service accessibility should be prioritized to meet patient expectations

influence patient satisfaction, such as healthcare costs, waiting times, and insurance claim procedures.

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