RELATIONSHIPS OF QUALITY OF HOSPITAL SERVICES, SERVICE POST-ENCOUNTER SATISFACTION, PATIENT TRUST, AND PATIENT LOYALTY IN PRIVATE HOSPITALS IN BEKASI

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Abstract

The role of hospitals as complements and enhancers is crucial for development of healthcare system in Indonesia. This research will be conducted empirically on individuals at outpatient care in Private Hospitals in Bekasi. The study uses two independent variables, NPS and Trust. Mediating variable is Satisfaction. The influence of these independent variables on Revisit Intention will be examined. This research as a reference for hospital service management, especially in its implementation to enhance performance of outpatient healthcare services. The type of research is cross-sectional surveys based on the time of data collection. Respondents in this study were obtained from offline questionnaire survey since December 2023. The survey was distributed directly by providing questionnaire links to eligible respondents. Satisfaction has a significant impact on Revisit Intention (coefficient 0.605), indicating its ability to mediate the influence of independent variables. This finding is consistent with previous research an increase of trust can positively contribute to Revisit Intention. The involvement of satisfaction variable becomes a primary concern to improve the Revisit Intention level of outpatient care at Private Hospitals in Bekasi. Healthcare service management needs to focus specifically on this mediating aspect to enhance and improve the reliability of outpatient healthcare service standards

Keywords: *Net Promoter Score, Trust, Satisfaction, Revisit Intention.*

INTRODUCTION

Hospitals are healthcare institutions that provide comprehensive individual healthcare services, including inpatient, outpatient, and emergency services. The role of hospitals as complements and enhancers is crucial to the development of the healthcare system in Indonesia. In 2022, hospital in Indonesia increased by 0.99% compared to the previous year. Total medical workforce in Indonesia 176,110 individuals, equivalent to 12.23% of the total healthcare workforce. In terms of delivering services at healthcare, most of them are doctors, approximately 60.6% of the total medical workforce. Therefore, rapid growth of the workforce and hospitals necessitates an enhancement in the quality of services, particularly hospital services, to ensure adequate quality and standards of care. (Badan Pusat Statistik (BPS), 2023; Kementerian Kesehatan Republik Indonesia, 2023)

This research will be conducted empirically on outpatient care at one of the private hospitals in Bekasi. This private hospital in Bekasi is classified as a type B hospital. In the preliminary survey involving ten patients who have undergone outpatient care in December 2023. This research employs two independent variables, namely NPS and Trust. Mediating variable is Satisfaction. The influence of these independent variable on Revisit Intention will be examined. As a result, satisfaction plays a notable role in Revisit Intention (coefficient 0.605), demonstrating its capacity to moderate the effects of independent variables. This research suggesting that enhancing trust levels can beneficially influence Revisit Intention.

METHOD

From the theoretical review and five hypotheses presented and there are four variables that will be used in eight marked streams to present the research proposal. The variables in this research framework are derived from theories of satisfaction and trust in hospital healthcare services, which impact revisit intention to the healthcare facility. The aim of this study is to examine the positive influence of the independent variables, namely NPS and trust, and dependent variable is the Revisit Intention of the hospital. The research object, which will be further analysed to address the research questions), is the primary focus in a study. (Sekaran and Bougie, 2016)

The unit of analysis "individual" is frequently utilized in research, where data is collected from each individual, and the results are aggregated into one data source. The participants in this research consist of individuals receiving outpatient treatment at private hospitals located in Bekasi. The decision to include regional public hospitals stems from the fierce competition regarding service quality observed in private hospitals in Bekasi. This factor is anticipated to influence the long-term performance of the hospitals under investigation. Considering these factors, the research focuses on this research subject.

The measurement of variables in the survey model is conducted using scales appropriate to its configuration. This measurement utilizes data from a single scale to distinguish one unit of analysis from another, where individuals are the research participants (Sekaran and Bougie, 2016). Although data obtained from respondents through questionnaires can be converted into numeric format or numeric values, this study opts for an ordinal scale to differentiate the differences between each component.

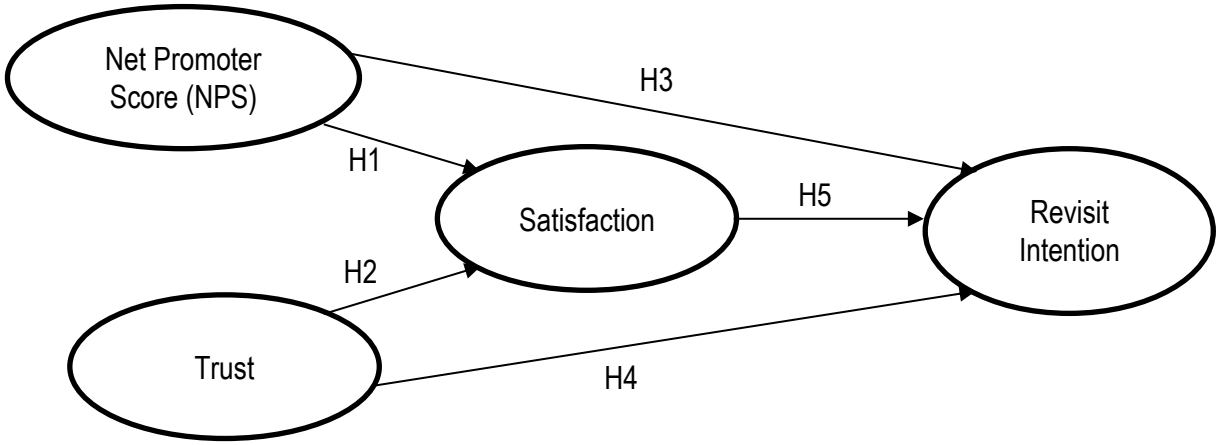


Figure 1. Research Model
Source : The results of PLS-SEM data processing in the study (2024)

The type of research conducted falls within the category of cross-sectional surveys based on the timing of data collection. Fundamentally, this study is quantitative research employing hypothesis testing and characterized by correlational research, rather than seeking causal relationships (cause and effect) between the investigational variables. Thus, the research solely analyses correlations between two or more variables within the research model based on variance data. This study is a type of non-intervention research, where no specific treatment or intervention is given to the subjects during the study. Survey data is collected through observation of the topic obtained through surveys that align with the designed research model (Sekaran & Bougie, 2016).

This study employs a 5-point Likert scale, consisting of one strongly disagree, two disagree, three neutral, four agree, and five strongly agree (Sekaran & Bougie, 2016). The

population in this study refers to the entire community undergoing outpatient care at the hospital. The Inclusion criteria are; aged 18 years or older during treatment, have undergone treatment at least twice at the same hospital and MS-DRG/non-psychiatric primary diagnosis. The sample in this study refers to patients undergoing outpatient treatment at Private Hospitals in Bekasi, and the sampling was conducted in January 2024. The sample size for the study is determined based on the minimal sample approach for the Partial Least Squares Structural Equation modeling (PLS-SEM) method, referring to the statements by Kock and Hadaya (2018). By employing the inverse square root method of calculation, the minimum required sample size is determined to be 160 respondents.

The sampling method employed follows the target sampling approach. (Sekaran and Bougie, 2013). If respondents meet these criteria and are willing to participate in the survey, they will receive a link to access the survey, which can be completed online or offline according to their preference. The primary data in this study is the data obtained directly from the respondents and collected directly from them using prepared questionnaire and respondents are asked to answer the statements using a Likert scale, which consists of five response options. In addition to questions related to the research variables, the questionnaire also includes questions about the demographic profile of the respondents, especially those related to outpatient services at Private Hospitals in Bekasi. Secondary data is information obtained from literature, books, reports, and other documents.

The data analysis in this study involves collecting data that will be statistically processed to test whether the hypotheses formulated beforehand can be supported by the research findings. The method of analysis used in this study is multivariate analysis and using the Partial Least Squares Structural Equation Modeling (PLS-SEM) method is used as the analytical tool asThe SmartPLS™ version 3.3 for the application. The explanatory function in this analysis can be measured using the coefficient of determination (R2), while the predictive function (Q2).

In the gradual computation process of PLS-SEM, two types of models are generated. Firstly, the outer model is used to measure the reliability and validity of each indicator of the measured variables. First, the indicators of the latent variables are tested, outer loading value must be greater than 0.708. The construct reliability stage involves calculating Cronbach's alpha and composite reliability. The results of both parameters must be above 0.7. Next, for validity testing, by examining the Average Variance Extracted (AVE) must be greater than 0.5 as an indicator of the level of construct validity. Reliability and validity testing involve discriminant validity testing, which is done by examining the heterotrait-monotrait ratio (HT/MT), should not exceed 0.9 to ensure discriminant validity among constructs.

Meanwhile, the second type of model is referred to as the Inner model or structural model. First, the Variance Expansion Factor (VIF) is examined to evaluate the possibility of multicollinearity issues. The next stage is the testing of the coefficient of determination (R2), a value approaching 1 indicates a better explanation. Hypothesis testing between variables using one-tail or two-tail methods. The final stage involves the calculation of IPMA (Importance-Performance Map Analysis) to evaluate factors considered important in the research variables and factors that can be improved can be identified. This process helps researchers focus on aspects that have a significant impact on the research model (Hair et al., 2018).

RESULT AND DISCUSSION

The demographic profile results from 160 respondents who met the research criteria (Table 1). In terms of gender, the majority of respondents were female (92.5%), while males accounted for 7.5%. In terms of age distribution, respondents were fairly evenly distributed, with the majority falling within the age range of 31-40 years (40%) and 41-50 years (27.5%). Regarding occupation, most respondents worked as private employees (80%), followed by professionals (7.5%), and entrepreneurs (3.5%). The highest level of education attained by most respondents was a bachelor's degree (68.8%), followed by postgraduate degrees (18.8%), and high school diplomas (10%). Based on household expenditures per month, respondents had expenditures between 5-10 million (57.5%), followed by expenditures below 5 million (33.8%). Overall, this data provides a comprehensive overview of the demographic and socio-economic characteristics of the research respondent sample.

Table 1. Demographic Profile

Description	Categories	Total	Percentage (%)
Sex	Men	12	7,5
	Woman	148	92,5
Total		160	100
Age (years)	< 17	0	0
	17-25	16	10
	26-30	24	15
	31-40	64	40
	41-50	44	27,5
	>51	12	7,5
Total		160	100
Occupation	Professional	12	7,5
	Professional athlete	0	0
	Employee	128	80
	Civil servant/Military/Police	0	0
	Entrepreneur	6	3,5
	Housewife	8	5,5
	Student	0	0
	Others	6	3,5
Total		160	100
Education Status	High School	16	10
	Bachelor’s degree	110	68,8
	Professional degree	30	18,8
	Others	4	2,4
Total		160	100
Household Expenses per months (million)	< 5	54	33,8
	5-10	92	57,5
	10-15	12	7,5
	> 15	2	1,2
Total		160	100

Source : The results of data processing in the study (2024)

Description analysis NPS variable, consists of four items of questions that are reliable and valid (Table 3). Patients expressed high satisfaction with the comprehensive facilities (NPS1) and prompt service (NPS3) with average scores of 4.36 and 4.213, respectively. Although hospital costs are affordable (NPS4) received a slightly lower average score of 3.562, most patients still agree with the affordable category. Communication from hospital staff (NPS5) also received positive ratings with an average of 4.275. Variations in patient perceptions are reflected in the varying standard deviations, with hospital costs showing higher levels of variation. Overall, these results indicate that while patients are generally satisfied with hospital services, the cost aspect may need special attention to ensure more uniform satisfaction among patients.

The indicators of Trust variables can reflect the effectiveness and efficiency of communication from healthcare providers to consumers in outpatient hospital services, consisting of five reliable and valid questions. The descriptive test results of the research (Table 3), the average scores above 4.00, as follows: the indicator T2 has an average score of 4.263, followed by T3; 4.287, and T4; 4.225. The relatively high standard deviation in these three indicators indicates variation in patient perceptions of Trust aspects, although the majority of patients still fall into the agree category. This data reflects a positive level of trust from patients towards nurses and doctors during the outpatient care process at the hospital.

Patient Satisfaction variable indicate that patients are generally satisfied with the services provided by the hospital. In detail, the indicator (PS1) has an average score of 4.3, followed by PS2 with an average score of 4.213. Other indicators, PS3 and PS4, also show high average scores, each at 4.388 and 4.188 respectively. The relatively low standard deviation in all indicators indicates a level of consistency in patient satisfaction perceptions. This data reflects the hospital's success in meeting patient expectations regarding the assessed aspects in the satisfaction category.

The variable Revisit Intention, assessed through several indicators, includes patients' intentions to recommend their chosen Hospital to family, friends, and colleagues, as well as through social media. The measurement results indicate that most patients have the intention to recommend their chosen Hospital. The indicator RI2 has an average score of 4.375, followed by RI3 with an average score of 4.312, and RI4 with an average score of 4.287. The relatively high standard deviation in all three indicators indicates variation in patients' intentions to recommend the hospital, although the majority remain in the agree category. This data reflects the positive tendency of patients to share their experiences with others, whether within their family, friends, or through social media.

Table 2. Descriptive Analysis each Variables

Variable	Code	Indicators	Min	Max	Mean	SD	Category
Net Promoter Score (NPS)	NPS1	Patients are happy because of the comprehensive facilities	3	5	4,36	0,617	Agree
	NPS3	Hospital services are fast and accurate	2	5	4.213	0,817	Agree
	NPS4	Hospital costs are affordable	1	5	3.562	0,973	Agree
	NPS5	Communication from hospital staff is good	2	5	4,275	0,689	Agree
Trust	T2	Healthcare nurses treat patients like a friend	3	5	4,263	1,13	Agree
	T3	Doctors show sufficient care during outpatient care	3	5	4,287	1,20	Agree
	T4	Nurses show sufficient care during outpatient care	3	5	4,225	1,26	Agree

Patient Satisfaction	PS1	I am satisfied with the explanation given by the doctor about my illness	2	5	4,3	0,66	Agree
	PS2	I am satisfied with the care provided by the nurse	2	5	4,213	0,665	Agree
	PS3	I am satisfied with the cleanliness of the hospital	3	5	4,388	0,642	Agree
	PS4	I am satisfied with the speed of service at the cashier	2	5	4,188	0,776	Agree
Revisit Intention	RI2	I will recommend my chosen Hospital to family as a choice for healthcare	3	5	4,375	1,53	Agree
	RI3	I will recommend my chosen Hospital to friends and colleagues as a choice for healthcare	3	5	4,312	1,42	Agree
	RI4	I will recommend my chosen Hospital through my social media platforms	3	5	4,287	1,54	Agree

Source : The results of data processing in the study (2024)

In this study, there are 21 indicators tested for their reliability and validity. The results of the outer model reveal that 14 indicators have values greater than 0.708. From the outer model diagram above, all 14 indicators are valid for measuring their constructs according to the required outer loading values (Hair, Howard, and Nitzl, 2020). The following will provide a more detailed explanation of the results of the outer model analysis.

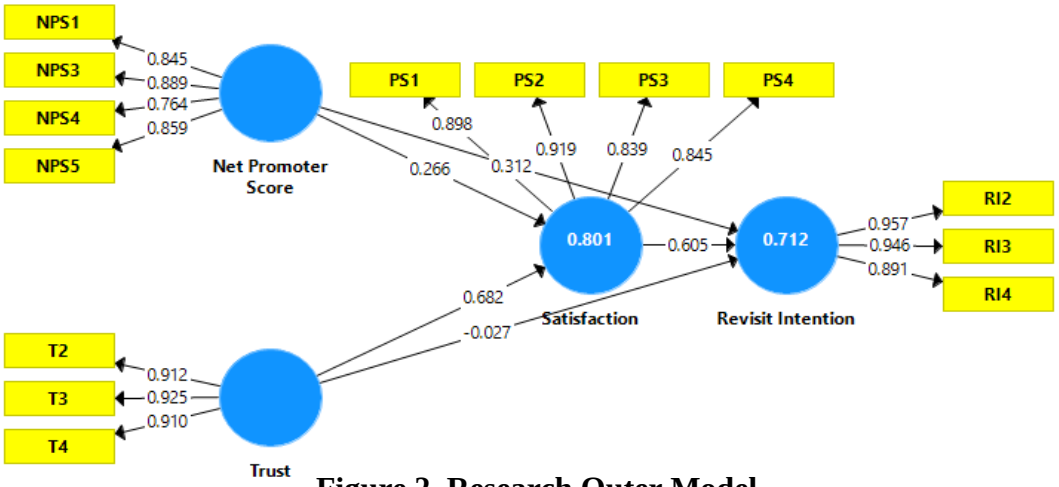


Figure 2. Research Outer Model

Source : The results of PLS-SEM data processing in the study (2024)

An indicator can be considered reliable if its outer loading value is greater than 0.708 (Hair, Howard, and Nitzl, 2020). In this study, 14 indicators from the variables in the research model have outer loading values above 0.708, (Table 4) which is the required threshold (Hair, Howard and Nitzl, 2020). Based on this, it can be concluded that all indicators in this study are reliable for measuring their constructs.

Table 3. Reliability Indicator

Variables	Indicators	Outer loading	Result
Net Promoter Score	NPS1	0,845	Valid
	NPS3	0,889	Valid
	NPS4	0,764	Valid
	NPS5	0,859	Valid
Trust	T2	0,912	Valid
	T3	0,925	Valid
	T4	0,910	Valid
Satisfaction	PS1	0,898	Valid
	PS2	0,919	Valid
	PS3	0,839	Valid
	PS4	0,845	Valid
Revisit Intention	RI2	0,957	Valid
	RI3	0,946	Valid
	RI4	0,891	Valid

Source : The results of data processing in the study (2024)

In the outer model analysis, reliability was tested using Cronbach's alpha and composite reliability values. Cronbach's alpha values greater than 0.7 (see Table 5) indicate good reliability levels. However, almost all composite reliability values are below 0.95, except for the Revisit Intention variable, which has a value above 0.95. Therefore, it can be concluded that almost all indicators used in this research model are reliable for measuring each construct. Table 5 also shows the AVE result, if the AVE value is greater than 0.50, then the variable is considered valid (Hair, Howard and Nitzl, 2020). In this analysis, AVE for the variables in this study is greater than 0.50. From these results, it can be concluded that the indicators in this research model are considered useful for measuring each component individually.

Table 4. Construct Reliability and Validity

Variables	Cronbach's Alpha	Composite Reliability	Average Variance Extracted (AVE)
Net Promoter Score	0,861	0,906	0,707
Revisit Intention	0,924	0,952	0,869
Satisfaction	0,898	0,929	0,767
Trust	0,904	0,940	0,838
Result	**Reliable**	**Reliable**	**Valid**

Source : The results of data processing in the study (2024)

Discriminant values are considered more precise when compared to the previously used Fornell Larcker values (Hair, Howard and Nitzl, 2020). A valid construct discriminant value is identified if the HT/MT ratio is found to be less than 0.9 (Henseler et al., 2015). All hypotheses in this study, except the Net Promoter Score have positive and significant relationships that impact Revisit Intention (see Table 6).

Table 5. Discriminant validity

	Net Promoter Score	Revisit Intention	Satisfaction	Trust
Net Promoter Score	0,841			
Revisit Intention	0,755	0,932		
Satisfaction	0,765	0,820	0,876	
Trust	0,733	0,732	0,876	0,916

Source : The results of data processing in the study (2024)

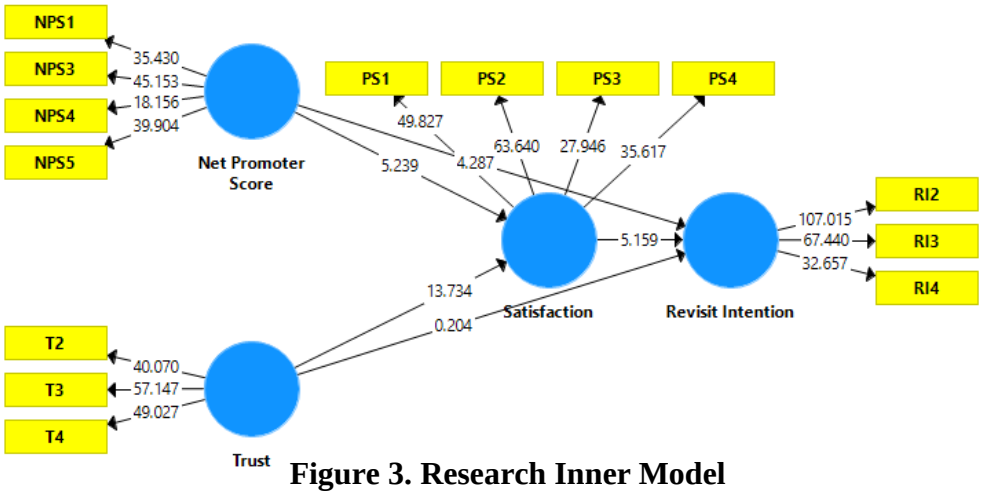


Figure 3. Research Inner Model

Source : The results of PLS-SEM data processing in the study (2024)

Outer loading value indicator is considered reliable if greater than 0.708 (Hair, Howard and Nitzl, 2020). All 14 indicators from the variables in the research model have had outer loading values above 0.708, it can be concluded that all indicators in this study are reliable for measuring their constructs.

Table 6. Reliability Indicator

Variables	Indicators	Outer loading	Result
Net Promoter Score	NPS1	0,845	Valid
	NPS3	0,889	Valid
	NPS4	0,764	Valid
	NPS5	0,859	Valid
Trust	T2	0,912	Valid
	T3	0,925	Valid
	T4	0,910	Valid
Satisfaction	PS1	0,898	Valid
	PS2	0,919	Valid
	PS3	0,839	Valid
	PS4	0,845	Valid
Revisit Intention	RI2	0,957	Valid
	RI3	0,946	Valid
	RI4	0,891	Valid

Source : The results of data processing in the study (2024)

The processing results conclude that the Cronbach's alpha values are greater than 0.7, and almost all composite reliability values are less than 0.95, except for the Revisit Intention variable, which is above 0.95. It can be said that almost all indicators used in this research model are reliable for measuring each construct. AVE value for the variables is greater than 0.50. From these results, it can be concluded that the indicators in this research model are considered useful for measuring each component individually.

Table 7. Construct Reliability and Validity

Variables	Cronbach's Alpha	Composite Reliability	AVE
Net Promoter Score	0,861	0,906	0,707
Revisit Intention	0,924	0,952	0,869
Satisfaction	0,898	0,929	0,767
Trust	0,904	0,940	0,838
Result	**Reliable**	**Reliable**	**Valid**

Source : The results of data processing in the study (2024)

The discriminant validity analysis shows that almost all constructs are valid, and the indicators in this research model have been well-discriminated, allowing for specific measurement of each respective construct. There are four hypotheses in this study, and it can be said that all except for the Net Promoter Score have positive and significant relationships impacting Revisit Intention.

Table 8. Discriminant Validity

	Net Promoter Score	Revisit Intention	Satisfaction	Trust
Net Promoter Score	0,841			
Revisit Intention	0,755	0,932		
Satisfaction	0,765	0,820	0,876	
Trust	0,733	0,732	0,876	0,916

Source : The results of data processing in the study (2024)

The analysis of R-square values indicates the predictive accuracy of the model. A value of less than 0.25 is interpreted as very weak predictive accuracy, 0.25 to 0.5 as weak predictive accuracy, 0.5 to 0.75 as moderate predictive accuracy, and above 0.75 as substantial. However, if the value exceeds 0.9, it will be considered excessive (Hair, Howard and Nitzl, 2020). The R-square value for the Revisit Intention variable is 0.272, categorizing it as weak. Thus, the Revisit Intention variable, as the dependent variable in this research model, can be explained by 27.2% by the independent variables, while the rest can be explained by other variables outside the research model. It is worth noting that there are two paths from Patient Satisfaction and trust to Revisit Intention, where the R-square value for Patient Satisfaction is 0.355 and for trust is 0.700. Therefore, this research model can be used or replicated in further studies with different population scopes.

The results of the VIF test on almost all variables in this research model are less than three (ideal). It can be said that there is no multicollinearity between variables except for the satisfaction construct towards Revisit Intention and Trust towards Revisit Intention.

Table 9. Multicollinearity

	Revisit Intention	Satisfaction
Net Promoter Score	2,515	2,161
Satisfaction	5,015	
Trust	4,490	2,161

Source : The results of data processing in the study (2024)

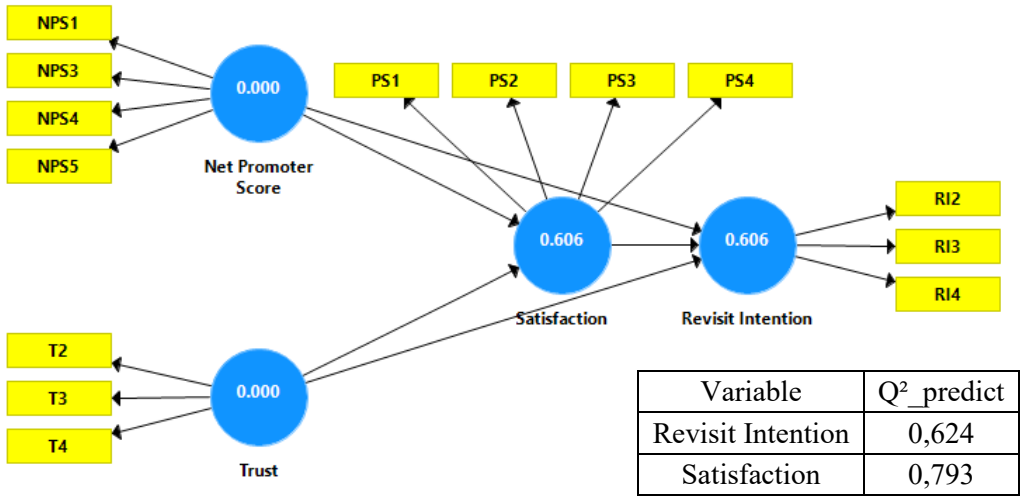
The f2 test provides the magnitude of the effect size, or the size of the effect used as an estimate of significance. The magnitude of the effect size according to Cohen (1988) is as follows: if it's 0.02, it's considered to have a small effect size of a latent variable; if it's 0.15, it's considered a moderate effect size of a latent variable, while 0.35 is a large effect size of a latent variable. The value of 0.15 itself is considered as the significant threshold of the effect that a latent variable can provide; if f2 is less than 0.15, it's said to have an insufficiently large size to have a significant beneficial effect.

Table 10. F-squared Value

	F^2	T Statistics
Net Promoter Score -> Revisit Intention	0,134	4,171
Net Promoter Score -> Satisfaction	0,164	4,803
Satisfaction -> Revisit Intention	0,253	5,320
Trust -> Revisit Intention	0,001	0,209
Trust -> Satisfaction	1,078	12,675

Source : The results of data processing in the study (2024)

The Q2 value is obtained through data calculation or processing using blindfolding in PLS-SEM. The variables Patient Satisfaction and Revisit Intention have small predictive relevance with Q2 values of 0.206 and 0.155, respectively. Meanwhile, the variable with the highest Q-squared value is the trust variable, which is 0.484. The Q2_Predict value indicates that all variables have Q2_Predict values greater than the Q2 value. The trust variable already has large predictive relevance. The Patient Satisfaction and Revisit Intention variables increase to medium predictive prevalence. This indicates that the model is capable of predicting the same output in the event of changes or variations in input data. Therefore, it can be concluded that this research model, using three independent variables and two mediation variables, is sufficient to be applied in further research on hospital mortuary services and their impact on Revisit Intention.



Variable	Q²_predict
Revisit Intention	0,624
Satisfaction	0,793

Figure 3. Q-Squared Value
Source : The results of PLS-SEM data processing in the study (2024)

The hypothesis testing is conducted by examining the T-Statistics values. In a one-tailed test, the T-Statistics value is considered supported if P-value > 1.645, and it is deemed significant if the P-value < 0.05. Out of the eight hypotheses tested in the research model, four hypotheses were found to be not significant. These include the relationship between Net Promoter Score and trust, Patient Satisfaction and Revisit Intention, as well as Patient Satisfaction and trust. Almost all variables align with the proposed hypotheses. The variable Patient Satisfaction towards trust has a negative hypothesis value, specifically -0.031. However, this variable is not statistically significant.

Table 11. Result of Hypothesis and Coefficient Test

	Standardized Coefficient	T-statistic	p-value	Significancy	Result
H1 NPS → Satisfaction	0,266	4,803	0,000	Significant	Hypothesis supported
H2 Trust → Satisfaction	0,682	12,675	0,000	Significant	Hypothesis supported
H3 NPS → Revisit Intention	0,312	4,171	0,000	Significant	Hypothesis supported
H4 Trust → Revisit Intention	-0,027	0,209	0,415	Not Significant	Hypothesis not supported
H5 Satisfaction → Revisit Intention	0,605	5,320	0,000	Significant	Hypothesis supported

Source : The results of data processing in the study (2024)

The increase in NPS has a significant positive impact on the hospital rating. Statistical analysis indicates that there is a weak but consistent positive relationship between NPS and hospital ratings, as demonstrated by a correlation coefficient of 0.266. Although this relationship is relatively weak, with a t-value of 4.803, it confirms that the correlation is statistically significant. The managerial implications of this finding suggest that hospital management needs to pay attention to and enhance the NPS score as one of the key predictors for improving public assessment and trust in hospital services. And There is strong and significant positive relationship between trust levels and patient satisfaction, as evidenced by a regression coefficient of 0.682 with a t-value of 12.675, indicating high statistical significance. This finding supports hypothesis H2, which states that high levels of patient trust directly contribute positively to patient satisfaction levels. Significant positive correlation also found between Net Promoter Score (NPS) and intention to revisit (Revisit Intention), as supported by a regression coefficient of 0.312 with a t-value of 4.171, indicating high statistical significance. These results indicate that positive patient evaluations of the hospital, as measured by NPS, contribute positively to patients' desire to return for hospital services. With strong support for hypothesis H3, hospital management can view NPS as an effective tool for measuring and improving patient loyalty.

There is no significant correlation between the level of trust and the intention to revisit (Revisit Intention), as supported by a regression coefficient of -0.027 with a t-value of 0.209, indicating statistical insignificance. These results suggest that patients' trust in the hospital does not have a significant influence on their desire to return for hospital services. Although hypothesis H4 is not supported by the analysis results, it does not imply that trust is not important in the hospital context. The possibility of other unmeasured factors in this study or the complexity of the relationship between trust and revisiting intention may provide a more comprehensive context. There is a significant correlation between the level of satisfaction (Patient Satisfaction) and the intention to revisit (Revisit Intention), as supported by a regression coefficient of 0.605 with a t-value of 5.320, indicating statistical significance. These results indicate that patients' satisfaction with hospital services has a significant influence on their desire to return for hospital services.

The relationship between satisfaction and revisit intention is determined by the extent to which a patient exhibits the behavior of returning visits to the same hospital and only considers dealing with this hospital, having a positive attitude disposition towards the hospital and its services when there is a need for medical treatment (Al-Refaie, 2011). Satisfaction also positively influences revisit intention ((Meesala and Paul, 2018)This is due to the fact that most patients will return to the hospital because they are satisfied with the services provided, doctors, staff, nurses (Sadeh, 2017).

A qualitative and quantitative study in Vietnam involving 405 data points concluded that the intention to revisit is directly influenced by satisfaction, attractiveness, accommodation services, cultural contact, and perceived risk. Secondly, satisfaction is directly influenced by attractiveness, accommodation services, cultural contact, and perceived risk. In this regard, satisfaction has the strongest impact on the intention to revisit tourist destinations in Vietnam (ß = 0.266) compared to attractiveness, accommodation, and services provided ((Nguyen Viet, Dang and Nguyen, 2020). According to a study by Wandebori conducted at BaliMed Hospital in Bali, Customer Satisfaction has a positive and significant effect on the Intention to Revisit with a Parameter Coefficient of 0.670 (Wandebori, 2017). This indicates that patients at BaliMed Hospital are motivated to revisit for further treatment when they have had a very good and

memorable service experience from their previous visits, which are considered satisfactory (Wandebori, 2017).

The mediating variable, satisfaction, has a significant impact on Revisit Intention with a coefficient of 0.605, indicating its ability to mediate the influence of the independent variable. This finding is consistent with previous research highlighting that an increase in the level of Trust can positively contribute to Revisit Intention. The involvement of the satisfaction variable is a primary concern in efforts to enhance the level of Revisit Intention among consumers receiving outpatient services at Private Hospitals in Bekasi. Healthcare service management needs to focus specifically on this mediating aspect to improve and enhance the standards of outpatient healthcare services that can be trusted.

The research model has been empirically tested on patients receiving outpatient services at a Private Hospital in Bekasi to answer the question of whether Net Promoter Score, Trust as an independent variable mediated by Patient Satisfaction, impacts Revisit Intention. From the data collected and analysed using PLS-SEM, a research model can be depicted as follows:

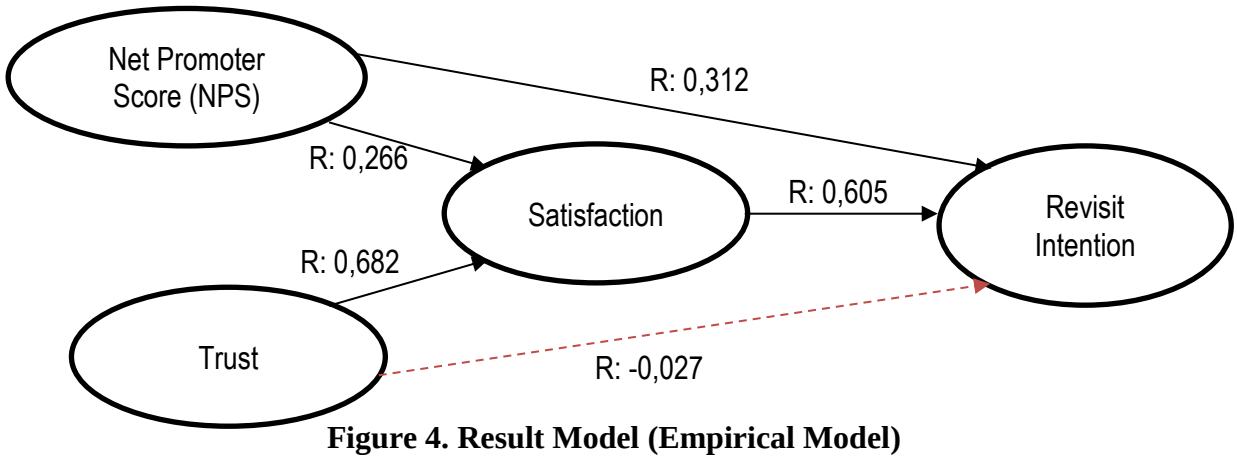


Figure 4. Result Model (Empirical Model)
Source : The results of PLS-SEM data processing in the study (2024)

CONCLUSIONS

This study adopts a research model adapted from previous studies, with Revisit Intention as the dependent variable. Several hypotheses were proposed in the context of outpatient services at Private Hospitals in Bekasi, and respondent data collection was conducted to address the research questions. Through structural model analysis, it was found that the hospital service research model has moderate predictive accuracy with medium predictive relevance regarding the dependent variable, revisit intention. Data analysis was performed using the PLS-SEM method. The empirical testing results yield the following conclusions:

- Net Promoter Score (NPS) has a positive and significant impact on Satisfaction.
- Trust has a positive and significant impact on Satisfaction.
- Net Promoter Score (NPS) significantly influences Revisit Intention positively.
- Trust does not have a positive and significant influence on Revisit Intention.
- Satisfaction significantly influences Revisit Intention positively.

Patient satisfaction is crucial for healthcare providers in three ways: (1) maintaining relationships with satisfied patients who become returning customers, (2) identifying strengths and weaknesses of a hospital, and (3) the relationship with financial benefits, making patient satisfaction another key indicator of healthcare provider success. Patient

trust in a hospital is also highly important as it serves as the primary asset in realizing the vision, mission, and goals of the hospital. Patients who have trust and confidence in a hospital will seek all medical care or disease prevention they need from it. Thus, indirectly, this will enhance transparency, open communication, and service quality to build customer trust in the hospital, particularly in this study of Private Hospitals in Bekasi.

The Revisit Intention indicates that enhancing customer satisfaction can be an effective strategy to encourage customers to return. Management can focus on improving services and customer experiences to ensure higher satisfaction and, consequently, increase the likelihood of repeat visits. Overall, these findings provide valuable insights for hospital management to direct their efforts in enhancing customer satisfaction, building trust, and designing effective strategies to promote customers' intention to revisit.

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