

The Effect of Service Quality and Facilities on the Satisfaction of BPJS Class 1 Patients with Hospital Image as an Intervening Variable at the Non-class Inpatient Installation of Tangerang General Hospital

Rani Maryani¹, Bernard T. Widjaja², Eka Desy Purnama³

^{1,2,3}Krida Wacana Christian University, Jakarta, Indonesia

Email: rani.012021128@civitas.ukrida.ac.id

Abstract

The non-class service implemented in the inpatient installation of Tangerang General Hospital causes all BPJS insurance participants to receive class 3 services and facilities. This raises the question of whether BPJS class 1 participants are satisfied with the services they receive and what innovations need to be implemented by Tangerang General Hospital. This study uses a quantitative method that aims to determine the effect of service quality and facilities on hospital image so that it affects the satisfaction of class 1 patients in the non-class inpatient installation of Tangerang General Hospital. The research sample taken was class 1 BPJS patients who were admitted to the inpatient installation of Tangerang General Hospital in August - September 2023, with a total sample of 85 respondents. Data were obtained through questionnaires distributed according to the inclusion and exclusion criteria. The analysis technique used was SEM-PLS (Structural Equation Model-Partial Least Square). The results show that all hypotheses are supported by existing data, where it is proven that the quality of service and facilities each has a significant positive effect on patient satisfaction. The results also show that hospital image mediates the positive effect of service quality on patient satisfaction and mediates the positive effect of facilities on patient satisfaction

Keywords: Service Quality, Facilities, Hospital Image, Patient Satisfaction.

A. INTRODUCTION

Tangerang General Hospital is the only regional public hospital in Tangerang that provides non-class services and one tariff in accordance with the Tangerang Mayor Regulation. No. 16 of 2021 concerning Health Service Tariffs at the Regional General Service Agency of the Tangerang General Hospital. This means that participants of class 1 and class 2 of the BPJS will be downgraded to follow the BPJS class 3 service standards when they are treated at Tangerang General Hospital.

Data from the medical records section of Tangerang General Hospital showed that from January to April 2023, 553 patients (14.7%) out of a total of 3,743 patients were treated at RSUD Kota Tangerang, with the highest number in April 2023 (140 patients), and the lowest number in January (132 patients) (Medical Record, 2023).

Prior to choosing healthcare services at a hospital, patients and their families typically take into account various factors. These include assessing the quality of hospital services, evaluating the facilities provided, and considering the overall image of the hospital within the community. Ultimately, patient satisfaction serves as the primary measure of service quality. When the received service meets or exceeds

consumer expectations, satisfaction ensues. Conversely, if the service falls short of expectations, consumers are likely to experience diminished satisfaction.

Based on secondary data at the Tangerang General Hospital, it was recorded that in 2022 there were 20 complaints about the services provided in the inpatient room. Most of them complained about the facilities available, while the rest were complaints about the services provided. Patients and their families expressed their dissatisfaction by talking directly to the nurse in charge of the inpatient ward, making complaints to the Public Relations department and some wrote on social media.

Referring to the phenomenon of dissatisfaction of patients and families participating in BPJS class 1 insurance in services in non-class inpatient rooms, is there an indication that there has been a decline in the quality of services, facilities, and hospital image at the Tangerang General Hospital.

Service quality is according to Parasuraman, in Budiarti (2018) is a basic guideline for service marketing, because this is a product that is marketed is a performance (quality). Meanwhile, according to Tjiptono (2016) states that service quality is the fulfillment of customer needs and desires and the accuracy of their delivery to balance customer expectations. According to Kotler (2016) service quality is divided into several dimensions, including :

1. Tangibility, objects that can be physically touched and can be seen. This is tangible evidence of a service provided by the service provider, namely in the form of an interior (physical) building, employee appearance and technological facilities
2. Empathy, an attitude of paying attention and caring for consumers by listening to the problems individually what they complain about.
3. Responsiveness, which is the readiness of service providers in helping customers to provide fast service.
4. Assurance, a delivery and confidence from employees to provide respect and knowledge in providing services to consumers.
5. Reliability, which is a reliable ability to provide services as promised, accurate and reliable.

Kotler (2016) defines facilities as all physical equipment provided by the service provider to enhance consumer convenience. Tjiptono (2016) categorizes facilities as essential physical resources that need to be in place before a service can be delivered to consumers. Additionally, Nirwana (2014) highlights the significance of facilities as a marketing variable, emphasizing their crucial role in supporting the delivery of services to customers. In the context of health services, the facilities are diverse and often specialized, such as medical waste and equipment. Dealing with these aspects is frequently challenging, and managing them becomes an ongoing process. To continuously develop an experience that is relevant and acceptable, various facilities in the field of health services are identified (Mufrizal, 2021). These include:

1. Buildings, building facilities have a variety of complex functions and have a wide range of place and nature variables. Hospital building facilities are

utilities consisting of tools, networks and systems that enable a hospital building to function.

2. Equipment, equipment facilities in hospitals in the form of medical equipment, non-medical equipment and furniture.
3. Power, power or energy facilities are closely related to electricity, LPG gas for the kitchen, also related to generators as a backup power source. Many aspects depend on electricity, this power interruption will affect the life and death in the ICU surgical operating room.
4. Communication, in the global era communication is an important tool and often determines the backward progress of health services. Communication requirements in hospitals are intended as the provision of communication systems both for internal building purposes and for external relations.
5. Security, security guarantees provided to visitors include the presence of security guards, parking attendants, protection from loss, damage, and other disturbances.

As per Gronroos, as cited in Safitri et al. (2016), the company's image refers to the perception of an organization stored in the consumer's memory, acting as a filter that shapes perceptions of the company. It represents the collective view in society regarding the positive and negative aspects of the company, reflecting experiences and expectations. Consequently, it has the potential to influence how customers perceive a product or service. The components contributing to the formation of this image play a pivotal role in impacting customer loyalty. A favorable image can yield positive effects, whereas a negative image can be detrimental to the organization (Safitri et al., 2016).

An individual's trust in a specific image, brand, name, or symbol has the ability to enhance or diminish the value associated with a product or service. Both image and brand play a crucial role in adding value to a product or service, thereby influencing customer loyalty and making them less susceptible to changes in pricing (Widjaja, 2020). The company image indicator will affect the impression and perception of the target object towards the company. According to Kotler (2016) the company's image consists of four important associations as follows:

1. Attributes, benefits, and general behaviors of a product: The company name or brand has the potential to attract customers based on positive associations related to the characteristics of a product and the innovative marketing strategies implemented by the company.
2. Employee traits and customer interactions: The company's image can be assessed through the qualities exhibited by its employees, particularly in terms of the services provided to customers during interactions.
3. Values and programs: The company's image is reflected in the values and programs established by the company. These values and programs may not always be directly linked to the products offered by the company.
4. Credibility of the company: The company's image is manifested in opinions or statements about the company, as well as the level of trust in the company's

competence in selling products and providing services. Additionally, it includes the degree of customer preference and interest in the company.

Satisfaction refers to the evaluation by a consumer or patient that a product or service has met their expectations. In this context, if patients perceive that their expectations have not been fulfilled, they are likely to be dissatisfied. Conversely, satisfaction is achieved when the patient's perception matches or exceeds their initial expectations (Tjiptono, 2016). Patient satisfaction serves as an outcome or result of health services, making it a key objective in enhancing the quality of healthcare. It represents the level of contentment a patient experiences as a result of the healthcare services received, measured against their anticipated standards (Pohan, 2013). The indicators that contribute to the formation of satisfaction, as outlined by Tjiptono (2016), include:

1. Correspondence of Expectations: This involves the degree of agreement between the anticipated service performance as expected by consumers and how it is perceived by them.
2. Inclination for Repeat Usage: This pertains to the consumer's openness or eagerness to reuse or make subsequent purchases of related services.
3. Propensity for Endorsement: It signifies the readiness of consumers to recommend products they have experienced to their friends or family members.

B. LITERATURE REVIEW AND HYPOTHESIS DEVELOPMENT

Monim research (2022), titled "The Impact of Service Quality, Company Image, and Facilities on Patient Satisfaction at Prof. Dr. R. D Kandou Manado Hospital," emphasizes the significance of service quality in shaping customer satisfaction. The study underscores that the service provided by nurses to patients reflects the alignment between patient expectations and service delivery. When the service meets or exceeds patient expectations, satisfaction ensues. The first hypothesis posits that service quality positively influences the satisfaction of Class 1 BPJS patients.

Rusmiati study (2019), "The Impact of Service Quality, Facilities, and Image on Patient Satisfaction at the Solo Health Center, Wajo Regency," asserts that enhanced facilities contribute to increased customer satisfaction. The research reveals a positive correlation between facilities, represented by physical equipment, and patient satisfaction. These facilities support patient comfort and convenience, leading to heightened satisfaction. The second hypothesis suggests that facilities have a positive impact on the satisfaction of Class 1 BPJS patients.

Ardiyanto & Tabrani research (2018), "The Influence of Hospital Image and Service Quality on Patient Loyalty Through Patient Satisfaction (Study at Kardinah Tegal General Hospital)," underscores the role of a positive company image in fostering consumer loyalty and satisfaction. The study finds a positive influence of hospital image on patient satisfaction, wherein the hospital's image shapes patient decisions to avail healthcare services. The third hypothesis proposes that hospital image positively affects the satisfaction of Class 1 BPJS patients.

Sektiyaningsih study (2019), "The Impact of Service Quality on Patient Satisfaction, Image, and Loyalty (Study on the outpatient unit of Mampang Prapatan Hospital, South Jakarta)," contends that excellent service quality generates positive responses and contributes to a favorable hospital image. The research establishes a positive correlation between service quality and hospital image. The fourth hypothesis posits that service quality positively influences hospital image.

Abdulhaji research (2016), "The Influence of Attractions, Accessibility, and Facilities on the Image of the Great Tolire Lake Tourist Attraction in Ternate City," highlights the role of complete facilities in shaping a positive consumer image of a destination. The study establishes a positive influence of facilities on destination image, emphasizing that well-equipped facilities enhance the overall impression on consumers. The fifth hypothesis suggests that facilities positively impact hospital image.

Darajah study (2022), "The Impact of Price Perception and Service Quality on Customer Satisfaction with Brand Image as an Intervening Variable," advocates achieving customer satisfaction by enhancing brand image. Positive brand image leads to favorable word-of-mouth recommendations. The research finds a positive effect of service quality on customer satisfaction with brand image as an intervening variable. The sixth hypothesis proposes that service quality positively influences Class 1 BPJS patient satisfaction with hospital image as an intervening factor.

Mufidah research (2020), "The Impact of Electronic Word of Mouth, Facilities, and Accessibility on Satisfaction with Destination Image as an Intervening Variable," emphasizes the role of facilities in achieving quality outcomes. Enhanced facilities contribute to a positive destination image. The study establishes a positive effect of facilities on satisfaction with destination image as an intervening variable. The seventh hypothesis suggests that facilities positively influence Class 1 BPJS patient satisfaction with hospital image as an intervening factor.

C. METHODS

This research employs quantitative research methodologies to examine the impact of service quality and facilities on the satisfaction of Class 1 BPJS patients, considering hospital image as an intervening variable. The study is characterized by a descriptive analytical approach, which involves addressing issues based on data exploration derived from the research site, specifically the Tangerang Hospital Non-class Inpatient Installation.

The study incorporates two independent variables, namely Service Quality (X1) and Facilities (X2). The mediating variable in this investigation is Hospital Image (Z), while the dependent variable is the Satisfaction of BPJS Class 1 Patients (Y). The conceptual framework guiding this research is outlined as follows:

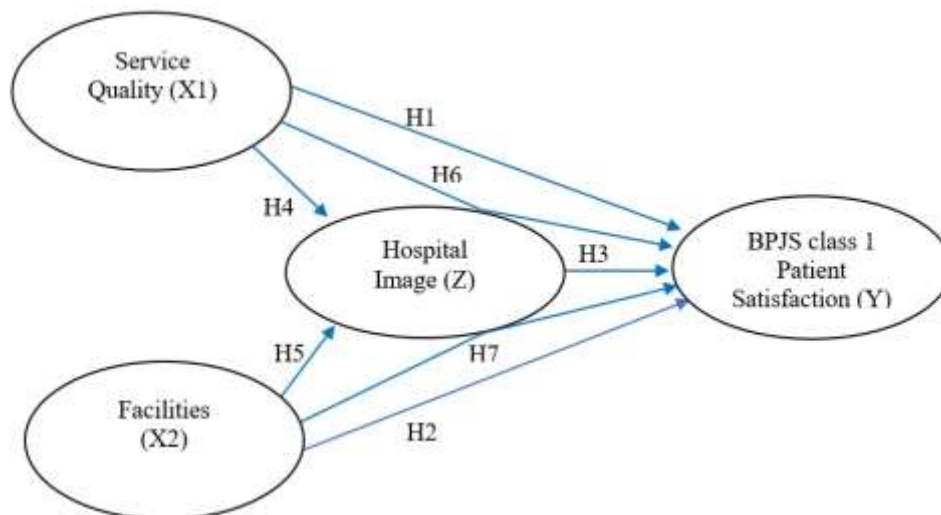


Figure 1. Thinking Framework

This research focuses on examining variables such as Service Quality (X1), Facility Variables (X2), 1st class BPJS Patient Satisfaction Variables (Y), and Hospital Image Variables (Z). The study encompasses the population of all Class 1 BPJS patients treated at the non-class inpatient installation of Tangerang Hospital. Based on the data collected, it was determined that 332 BPJS Class 1 patients received treatment between August and September 2023. The sample size for the study, calculated using the Slovin method and adjusted for a 10% dropout rate, resulted in a total of 85 BPJS Class 1 patients. Non-probability sampling with a purposive sampling approach was employed, where the sample selection was based on known population characteristics and specific considerations. The research instrument utilized a Likert scale questionnaire with five-value scales, addressing variables such as service quality, facilities, hospital image, and BPJS Class 1 patient satisfaction. This instrument aimed to streamline respondent answers, providing focus and ease in responding to each question. The data collection procedures adhered to administrative protocols and underwent ethical review. For data analysis, path analysis was employed, utilizing Structural Equation Modeling (SEM) as the analysis technique. The PLS-SEM analysis involved two sub-models: measurement (measurement or outer model) or structural (structural or inner model) (Ghozali, 2015).

D. RESULTS AND DISCUSSION

The analysis of the outer model is conducted to validate and ensure the reliability of the measurements employed in this study, specifically assessing the feasibility of using service quality and facilities as indicators in examining their impact on the satisfaction of Class 1 BPJS patients, with hospital image as an intervening variable.

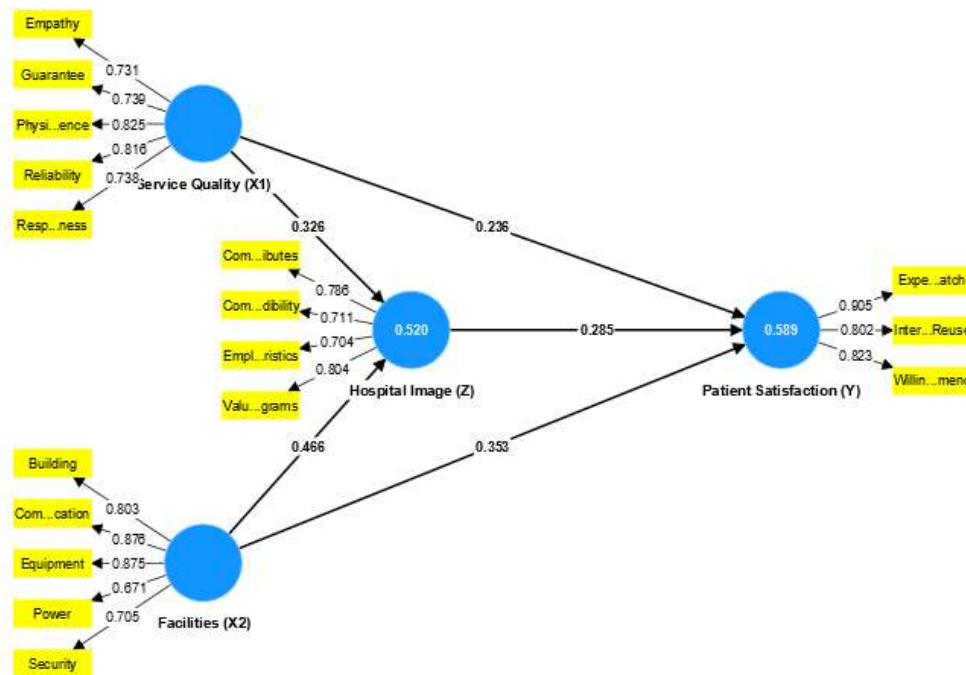


Figure 2. Construct-1 Model

The assessment of Service Quality comprises five indicators: Physical Evidence, Reliability, Responsiveness, Assurance, and Empathy. The Facility construct is gauged through five indicators, including Building, Equipment, Power, Communication, and Security. The measurement of Hospital Image involves four indicators: Company Attributes, Employee Characteristics, Values and Programs, and Company Credibility. Concurrently, the evaluation of Class 1 BPJS Patient Satisfaction utilizes three indicators: Expectation Conformity, Interest in Reusing, and Willingness to Recommend.

Table 1 Outer Loading Value Construct -1

Construct	Indicator	Loading Factor	Description
Service Quality	Physical Evidence	0.825	Valid
	Reliability	0.816	Valid
	Responsiveness	0.738	Valid
	Guarantee	0.739	Valid
	Empathy	0.731	Valid
Facilities	Building	0.803	Valid
	Equipment	0.875	Valid
	Power	0.671	Invalid
	Communication	0.875	Valid
	Security	0.705	Valid
Hospital Image	Company Attributes	0.786	Valid
	Employee Characteristics	0.704	Valid
	Values and Programs	0.804	Valid
	Company Credibility	0.711	Valid
	Expectation Match	0.905	Valid

Construct	Indicator	Loading Factor	Description
Patient Satisfaction	Interest in Reuse	0.802	Valid
	Willingness to Recommend	0.823	Valid

Source: SmartPLS Processed Data (2023)

Table 1 reveals that the Power indicator within the Facility construct exhibits a loading factor value of < 0.7, specifically 0.671, rendering it deemed invalid. Consequently, indicators with invalid status are eliminated as variables in the measurement.

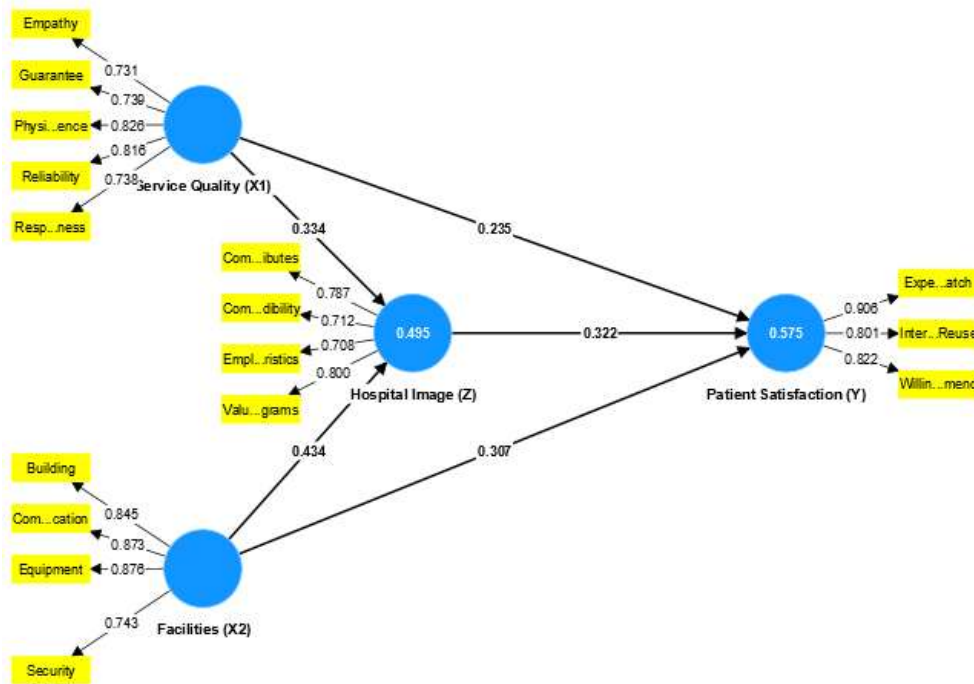


Figure 3. Construct-2 Model

Table 2. Outer Loading Value of Construct-2

Construct	Indicator	Loading Factor	Description
Service Quality	Physical Evidence	0.826	Valid
	Reliability	0.816	Valid
	Responsiveness	0.738	Valid
	Guarantee	0.739	Valid
	Empathy	0.731	Valid
Facilities	Building	0.845	Valid
	Equipment	0.876	Valid
	Communication	0.873	Valid
	Security	0.743	Valid
Hospital Image	Company Attributes	0.787	Valid
	Employee Characteristics	0.708	Valid
	Values and Programs	0.800	Valid
	Company Credibility	0.712	Valid
Patient Satisfaction	Expectation Match	0.906	Valid
	Interest in Reuse	0.801	Valid

Construct	Indicator	Loading Factor	Description
	Willingness to Recommend	0.822	Valid

Source: SmartPLS Processed Data (2023)

In Table 2, it is evident that all indicators considered in this research exhibit a substantial level of validity, meeting the criteria for convergent validity. Beyond the examination of loading factor values, convergent validity can also be assessed through the Average Variance Extracted (AVE) value. A higher AVE value indicates a stronger capacity to explain the variance among all indicators measuring latent constructs.

Table 3 Average Variance Extracted (AVE) Value

Construct	AVE	Description
Service Quality	0.594	Valid
Facilities	0.699	Valid
Hospital Image	0.567	Valid
Patient Satisfaction	0.713	Valid

Source: SmartPLS Processed Data (2023)

As depicted in the aforementioned Table 3, the AVE value for each construct surpasses 0.5. This leads to the conclusion that the model examined in this study does not encounter any issues related to convergent validity.

Table 4. Composite Reliability Value

Construct	Composite Reliability	Description
Service Quality	0.880	Reliable
Facilities	0.902	Reliable
Hospital Image	0.839	Reliable
Patient Satisfaction	0.881	Reliable

Source: SmartPLS Processed Data (2023)

Composite Reliability is a technique employed to assess the reliability of indicators within a construct. As presented in the above Table 4, the composite reliability values for all constructs exceed 0.7. This indicates that all constructs demonstrate commendable reliability, and there are no issues related to reliability or unidimensionality in the established model.

Table 5 Cronbach's Alpha Value

Construct	Cronbach's Alpha	Description
Service Quality	0.836	Reliable
Facilities	0.857	Reliable
Hospital Image	0.746	Reliable
Patient Satisfaction	0.799	Reliable

Source: SmartPLS Processed Data (2023)

The reliability assessment of an instrument can be enhanced by employing Cronbach's alpha value. As indicated in the provided Table 5, the Cronbach's alpha values for all constructs are highly satisfactory, exceeding 0.7. This signifies that all constructs exhibit commendable reliability, and there are no issues pertaining to reliability or unidimensionality in the established model. In conclusion, the outer

model analysis for this study affirms that all indicators adhere to the criteria of validity and reliability, enabling the progression to the inner model analysis.

Table 6. R-Square Value

Construct	R-Square	Description
Service Quality and Facilities on Hospital Image	0.495	Moderate
Service Quality, Facilities and Hospital Image on Patient Satisfaction	0.575	Moderate

Source: SmartPLS Processed Data (2023)

The R-Square value serves as a metric to gauge the extent of influence exerted by the independent latent variable on the dependent latent variable. A higher R-Square value indicates a model's enhanced capacity to predict the variability of the dependent construct. As presented in the provided Table 6, the joint impact of service quality and facilities on hospital image yields an R-Square value of 0.495. This implies that the combined influence of exogenous constructs, encompassing service quality and nurse therapeutic communication, collectively affects patient family satisfaction by 49.5%, leaving 50.5% influenced by external factors beyond the study. Similarly, the combined impact of service quality, facilities, and hospital image on patient satisfaction yields an R-Square value of 0.575. This indicates that the collective influence of exogenous constructs, including service quality, facilities, and hospital image, concurrently affects patient satisfaction by 57.5%, with the remaining 42.5% influenced by external factors outside the scope of the study.

In hypothesis testing, analysis is based on the t-statistic value and the probability or significance value (p-value), which can be derived from the bootstrapping results. Hypothesis testing involves examining both direct and indirect effects, including mediation effects.

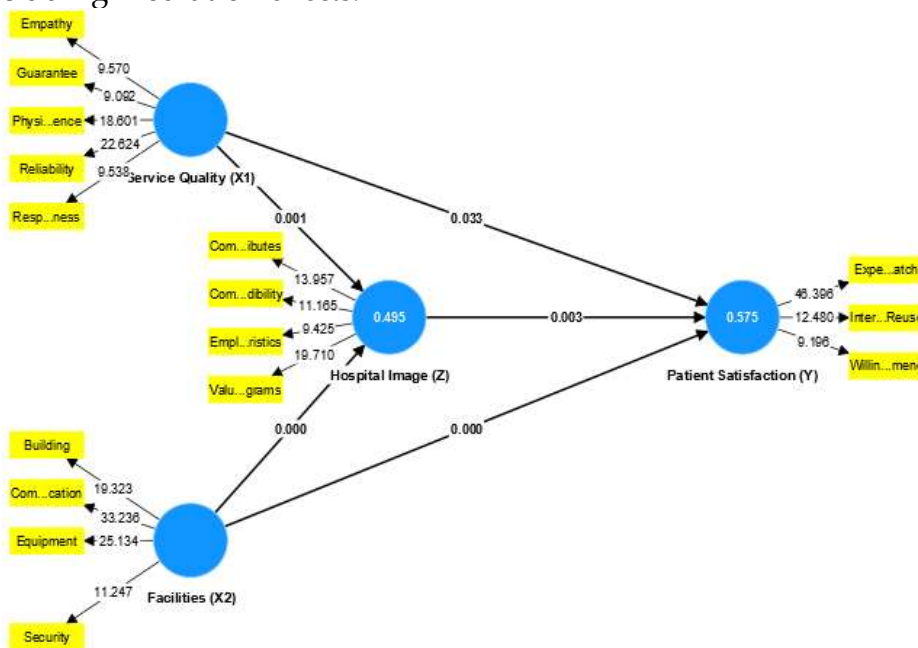


Figure 4. Bootstrapping Construct Model

Table 7. Direct Effect Value

Construct	Coefficient	t-statistic	p-value
Service Quality - Patient Satisfaction	0.235	2.138	0.033
Facility - Patient Satisfaction	0.307	3.688	0.000
Hospital image - Patient satisfaction	0.322	3.016	0.003
Service Quality - Hospital Image	0.334	3.274	0.001
Facilities - Hospital Image	0.434	3.956	0.000

Source: SmartPLS Processed Data (2023)

Hypothesis 1, asserting that Service Quality has a positive impact on Patient Satisfaction, is supported by a coefficient value of 0.235. This indicates a favorable influence of service quality on patient satisfaction. The t-statistic value of 2.138 surpasses 1.98, with a significant p-value of 0.033 (< 0.05), affirming the meaningful impact of service quality on patient satisfaction. This result aligns with Monim (2022) research, emphasizing the critical role of service quality in fostering customer satisfaction. Mufrizal (2021), underscores the importance of patient satisfaction for health service providers, as it reflects the alignment between service delivery and patient expectations, further asserting that good service quality serves as a pivotal factor in attracting consumer interest and ensuring customer satisfaction.

Hypothesis 2, positing that Facilities have a positive effect on Class 1 BPJS Patient Satisfaction, is substantiated by a coefficient value of 0.307. This signifies a positive association between facilities and patient satisfaction. The t-statistic value of 3.688 is greater than 1.98, and the p-value of 0.000 is less than 0.05, confirming the significance of the effect of facilities on patient satisfaction. This finding resonates with Rusmiati (2019) research, which emphasizes that improved facilities contribute to heightened customer satisfaction. Kotler (2016) underscores the role of facilities in enhancing consumer comfort and convenience, highlighting that sufficient facilities create a positive psychological impact on consumers, signaling satisfaction in their purchases.

Hypothesis 3, suggesting that Hospital Image positively affects Class 1 BPJS Patient Satisfaction, gains support with a coefficient value of 0.322. This points to a positive impact of hospital image on patient satisfaction. The t-statistic value of 3.016 exceeds 1.98, with a p-value of 0.003 below 0.05, signifying the significant effect of hospital image on patient satisfaction. This result aligns with Ardiyanto & Tabrani (2018) research, emphasizing the creation of consumer loyalty and satisfaction through a positive company image. Tjiptono (2016) asserts that consumer perceptions of a company play a crucial role in decision-making, emphasizing the importance of a positive image from the consumer's viewpoint.

Hypothesis 4, suggesting that Service Quality has a positive effect on Hospital Image, is supported by a coefficient value of 0.334. This indicates a positive influence of service quality on hospital image. The t-statistic value of 3.274 is above 1.98, with a p-value of 0.001 less than 0.05, highlighting the significant effect of service quality on hospital image. This result aligns with Hasibuan (2019) study, emphasizing service quality as a fundamental determinant of a hospital's image. Jatmiko (2018) reinforces

this by emphasizing that excellent service quality garners positive responses from the community, forming a positive hospital image.

Hypothesis 5, positing that Facilities have a positive effect on Hospital Image, is substantiated by a coefficient value of 0.434. This suggests a positive impact of facilities on hospital image. The t-statistic value of 3.956 exceeds 1.98, with a p-value of 0.000 less than 0.05, confirming the significant effect of facilities on hospital image. This result aligns with Abdulhaji (2016) research, emphasizing that comprehensive facilities contribute to a positive consumer image of a destination. In the hospital context, complete and convenient facilities create a positive patient perception towards the hospital. Factors such as clean buildings, easy access, ample parking, advanced medical equipment, air conditioning, lighting, and security are crucial considerations for hospital management. The interaction between patients and these facilities significantly influences the formation of a positive or negative image in the eyes of the patient.

Table 8. Indirect Effect Value

Construct	Coefficient	t-statistic	p-value
Service Quality [®] Hospital image [®] Patient Satisfaction	0.108	2.318	0.020
Facilities [®] Hospital image [®] Patient satisfaction	0.140	2.238	0.025

Source: SmartPLS Processed Data (2023)

Hypothesis 6, which posits that Service Quality has a positive effect on Patient Satisfaction with hospital image as an intervening variable, receives support with a coefficient value of 0.108. This suggests a positive indirect impact of service quality on patient satisfaction mediated through hospital image. The t-statistic value of 2.318 surpasses 1.98, with a p-value of 0.020 less than 0.05, indicating the significant indirect effect of service quality on patient satisfaction through hospital image. This finding is consistent with Darojah (2022) research, which emphasizes that achieving customer satisfaction involves ensuring satisfaction with the image. A positive brand image tends to result in positive word-of-mouth communication among consumers. Yunida (2016) underscores that service quality is a crucial factor for the success of a company and a competitive advantage against similar service providers. The hospital's ability to consistently meet patient expectations determines the quality of service.

Hypothesis 7, asserting that Facilities have a positive effect on Patient Satisfaction with Hospital Image as an intervening variable, garners support with a coefficient value of 0.140. This indicates a positive indirect influence of facilities on patient satisfaction through hospital image. The t-statistic value of 2.238 is greater than 1.98, with a p-value of 0.025 below 0.05, affirming the significant indirect effect of facilities on patient satisfaction through hospital image. This finding aligns with Mufidah (2020) study, emphasizing the pivotal role of facilities in achieving quality outcomes, wherein better facilities contribute to an enhanced destination image. Hospital facilities, whether medical or non-medical, play a crucial role in shaping the

patient's impression and satisfaction. The continuous improvement and modernization of facilities contribute to increased patient satisfaction by facilitating easier utilization of hospital services.

E. CONCLUSION

Based on the analysis and findings detailed earlier, it can be concluded that service quality significantly and positively impacts patient satisfaction. The quality of service plays a crucial role in hospital nursing care services, as it is aligned with patient expectations. If the delivered service quality falls short of meeting these expectations, it can lead to a decrease in satisfaction levels. Hospital facilities also exhibit a significant positive influence on patient satisfaction. These facilities encompass physical equipment provided by service providers to enhance patient comfort and convenience in meeting their needs. Facilities serve as supportive means utilized by hospitals to enhance overall patient satisfaction. Furthermore, hospital image significantly and positively influences patient satisfaction. Patient perceptions of a hospital influence their decisions in choosing the products or services offered. A positive hospital image fosters loyalty among patients, ultimately contributing to their satisfaction. Additionally, service quality has a significant positive impact on hospital image. Exceptional service quality elicits positive responses from the community, both prospective and existing consumers. Conversely, poor service quality may lead to a deteriorating image of the hospital, impacting the perceptions of both current and potential consumers. Facilities also play a crucial role in shaping hospital image, as they influence consumer perceptions through interactions with the provided facilities. Complete and convenient hospital facilities contribute to a positive image among consumers. Factors such as clean buildings, easy access, parking availability, advanced medical equipment, air conditioning, lighting, and security are essential considerations, forming a positive image in the eyes of consumers. Moreover, service quality has a positive and significant effect on patient satisfaction with hospital image as an intervening variable. The hospital's ability to consistently meet patient expectations is pivotal in determining service quality. Patient satisfaction is achieved by ensuring satisfaction with the overall image portrayed by the hospital. Positive patient experiences with the hospital's image often lead to positive word-of-mouth recommendations. Similarly, facilities exhibit a positive effect on patient satisfaction with hospital image as an intervening variable. Facilities play a facilitative role in business operations, and satisfaction is influenced by the expectations and performance of service providers. Both medical and non-medical facilities provided by the hospital contribute to the overall impression or image perceived by the patient, ultimately impacting patient satisfaction.

REFERENCES

1. Abdulhaji, S. (2016). The Effect of Attractions, Accessibility and Facilities on the Image of Lake Tolire Besar Tourism Object in Ternate City. *Journal of Humano Research*, 7(2).
2. Ardiyanto, M. A., & Tabrani. (2018). The Effect of Hospital Image and Service Quality on Patient Loyalty Through Patient Satisfaction (Study at Kardinah Tegal General Hospital). *Multiplier: Journal of Master of Management*, 3(1).
3. Budiarti, A. (2018). The Effect of Service Quality and Complaint Handling on Customer Satisfaction and Loyalty of Islamic Commercial Banks in Surabaya. *EKUITAS (Journal of Economics and Finance)*, 15(2), 210-231.
4. Darojah, R. (2022). The Effect of Price Perception and Service Quality on Customer Satisfaction with Brand Image as an Intervening Variable. *Sustainable Business Journal*, 1.
5. Ghozali, I. (2015). *Structural Equation Modeling, Alternative Methods with Partial Least Square (PLS)*. Semarang: Diponegoro University Publishing Agency.
6. Hasibuan, M. M. (2019). The Effect of Service Quality on the Image of Dr. Ferdinan Lumban Tobing General Hospital, Sibolga City. *Journal of Indonesian Hospital Management and Administration*, 4(2).
7. Jatmiko, M. I. (2018). The Effect of Service Quality and Promotion on Image and Trust of Aulia Hospital Inpatients. *Journal Procuratio*, 6(4).
8. Kotler, P. K. K. (2016). *Marketing Management*. Jakarta: Index.
9. Medical Record. (2023). *Number of patients in 2023*. Tangerang General Hospital.
10. Monim, C. J. (2022). The Effect of Service Quality, Company Image and Facilities on Patient Satisfaction at Prof. Dr. R. D. Kandou Manado Hospital. *EMBA Journal*, 10(4), 1156-1168.
11. Mufidah, F. M. (2020). The Effect of Electronic Word of Mouth, Facilities, and Accessibility on Satisfaction with Destination Image as an Intervening Variable. *College of Economics Putra Bangsa Kebumen*.
12. Mufrizal, M. (2021). *The Effect of Service Quality, Facilities and Image on Patient Satisfaction at Dr. Zubir Mahmud Regional General Hospital, East Aceh Regency*. Medan Area University.
13. Nirwana. (2014). *Service Marketing*. Alta.
14. Notoatmodjo, S. (2018). *Health Research Methods*. Jakarta: Rineka Cipta.
15. Pohan, I. S. (2013). *Quality Assurance of Health Services*. EGC.
16. Rusmiati. (2019). The Influence of Service Quality, Facilities and Image on Patient Satisfaction at Puskesmas Solo Wajo Regency. *Amkop College of Economics Makassar*.
17. Safitri, E., Rahayu, M., & Indrawati, N. K. (2016). The Effect of Service Quality and Company Image on Satisfaction. *Journal of Business Economics*, 1, 13-14.
18. Sektiyaningsih, I. S. (2019). The Effect of Service Quality on Patient Satisfaction, Image and Loyalty (Study on the outpatient unit of Mampang Prapatan Hospital, South Jakarta). *Journal of Business Studies*, 04.
19. Tjiptono, F. (2016). *Service, Quality and Satisfaction*. Yogyakarta: Andi.

20. Widjaja, B. T. (2020). How Brand Equity Changes Service Marketing: The Case of Indonesian Service Industry. *International Journal of Economics and Business Administration*, VIII(3), 534–542.
21. Yunida, M. E. (2016). *The Effect of Hospital Image and Service Quality on Customer Loyalty Through Customer Satisfaction (Study at Amal Sehat Wonogiri Hospital)*. State University of Yogyakarta.