



Analysis Of The Quality Of Services and Physical Facilities Of The Hospital On Word Of Mouth With Patient Experience As An Intervening Variable At Mekar Sari Hospital

Dani Sagitha

Esa Unggul University Hospital Administration Masters Program, Jakarta

Natsir Nugroho

Esa Unggul University Hospital Administration Masters Program, Jakarta

Lily Widjaja

Esa Unggul University Hospital Administration Masters Program, Jakarta

Korespondensi penulis: danisagitha80@student.esaunggul.ac.id*

Abstract. *This research is aimed at analyzing the influence of service quality and physical facilities on WoM (Word of Mouth) with Patient Experience as an intervening variable at Mekar Sari Hospital. The research method used in this research is a correlational quantitative research type with a cross-sectional research design approach by looking at the influence of service quality and physical facilities on WoM with satisfaction as an intervening variable. The sampling technique used purposive sampling, namely a sampling technique using the criteria of internal medicine inpatients at Mekar Sari Hospital. The research sample involved 110 respondents. Path analysis is used as a WoM model analysis tool with patient experience as an intervening variable. The results of this study found a joint positive influence of service quality and physical facilities on WoM with patient experience as an intervening variable. The quality of service and physical facilities have a positive influence on both patient experience and WoM.*

Keywords: *service quality, physical facilities, patient experience, WoM*

INTRODUCTION

The function of a hospital is as a place to provide medical and healing services that already have hospital service standards, which consist of medical services, pharmaceutical services, nursing services and laboratory services. A hospital is a health service institution that provides complete individual health services consisting of inpatient, outpatient, emergency laboratory, radiology, pharmacy and other services. Hospitals are expected to be able to carry out management innovations, including innovations in the field of medical services. With the assistance of health workers who carry out their respective duties and professions such as doctors, nurses, midwives, pharmacists, nutritionists and other health workers. Apart from health workers, hospitals also have other staff who also have an important role in the hospital in providing health services. The services provided are an integrated part of health services, having a very large contribution in determining patient satisfaction felt at the hospital (Law No. 44 of 2009).

Word-of-mouth is very important for businesses to gain new customers. Word-of-mouth can have even more influence than formal advertising and marketing. Sernovitz et al., (2006) stated that word-of-mouth is a conversation that naturally occurs between people so that there is a flow of information about a product from individual to other individual. Word of mouth is defined as positive or negative statements made by customers' experiences about a product or service by a company (Hennig-Thurau et al., 2004). Word of mouth information is one of the most influential ways to persuade people to review and ultimately use a product or service (Maisam & Mahsa, 2016). Katz & Lazarsfeld, (1995) found positive word of mouth was seven times more effective than newspaper and magazine advertising, four times more effective than personal selling and twice as effective as radio advertising in influencing consumers to switch brands.

Satisfied customers are customers who are happier choosing the same service provider compared to other similar service providers, use the service of their choice more often, spread positive WoM (word of mouth) and are less sensitive to the number of sacrifices required to get service from the provider. services of their choice (But if the hospital is unable to satisfy its services then it will face problems. Because patients who are dissatisfied will convey WoM (word of mouth) the unpleasant experience they have had to other people so that it can be imagined that it really affects the situation of a hospital if there is a loss resulting from a patient's dissatisfaction (Chang, 2014).

In this case, the role of WoM (word of mouth) is very important for providers of health-related services so that patients are interested in using services at the hospital. First, before using the services of the hospital, the patient will seek information from other people who have experience using services at the hospital. WoM (word of mouth) can occur if patient satisfaction is met. The satisfaction felt by patients will enable WoM (word of mouth) to occur which will have an impact on hospital profits in the long term so that more people will want to use the services at the hospital (Novianti & Artanti, 2015).

Quality can be interpreted as something that can satisfy customer needs. So this becomes something very important, because in reality, customers are the ones who make decisions about quality. With good quality service from the hospital and health workers, it is possible to create good health services for all patients in the hospital. What we know is that good service quality will influence patient satisfaction so that patients will convey WoM (word of mouth) to other people. Patient satisfaction itself is a patient's subjective value of the services provided after comparing the results of the services provided with their expectations. To achieve patient satisfaction, hospitals are required to be able to provide good quality health

services and satisfy patients, in this case including physical facilities. Physical facilities are something that can be observed and felt by patients, consisting of physical facilities, equipment, employee appearance and communication facilities (Parasuraman, 2007).

In health services, such as hospitals, there are three dimensions that determine service quality, technical, results and intrapersonal (Upadhyai et al., 2019). As explained further by Upadhyai et al., (2019), there are non-medical dimensions in health services which include the service environment (servicescape), access and responsiveness. This service environment or servicescape includes facilities and the physical environment.

Moghaddam et al., (2019) in their research identified the quality of service from the patient's perspective, including consultations with doctors, treatment costs and the registration process. Mahmoud et al., (2019) found that the quality of service from the patient's perspective that makes patients want to visit again is the sensitivity and reliability of service. Mrabet et al., (2022) found that patients assess service quality based on credible, reliable, tangible and responsive aspects.

Patient experience is seen as an independent dimension of the quality of health services (Oben, 2022). Findings from Park et al., (2022) patient experience is a critical factor that health care systems need to consider to increase patient-centeredness, patient satisfaction, and ultimately create a willingness to recommend a hospital. Karimbux et al., (2022) explained that to build patient-centered services, measuring patient experience in health services is needed.

The Influence of Service Quality and Physical Facilities on WoM with Patient Experience as an Intervening Variable

Service quality is the spearhead for marketing of a service business, in this case related to hospitals. If it is not supported by good hospital service and providing satisfaction to patients, then marketing will be difficult to carry out, especially WoM, because patients do not feel a good experience from the quality of service and physical facilities available at the hospital. The quality of service and physical facilities are able to arouse patient interest in returning for treatment and recommending hospital services to other people (WOM) through the patient experience they have received and felt. This is in accordance with research conducted by Rifki et al (2015), Didik et al (2014), Olgun et al (2014), Suhail et al (2021), Diego et al (2022), Nazir (2019), and Kamra et al (2016). Therefore, the following hypothesis is obtained:

H1: Service quality and physical facilities influence WOM with patient experience as an intervening variable.

The influence of service quality on WoM

The rapidly increasing number of hospitals today is certainly capable of creating intense competition, therefore hospitals are required to optimize the quality of their services so that they can create word of mouth as effective marketing at relatively low costs. Word of mouth is one part of a company's strategy, in this case a hospital. Amalia, et al., (2019) stated that service quality can have a significant effect on word of mouth promotion. Similar research conducted by Rifki et al., (2015) found that there is a significant influence of service quality on word of mouth. Likewise, research conducted by Didik et all (2014) shows that service quality also has a significant effect on word of mouth. Therefore, the quality of hospital services is able to create word of mouth. So the following hypothesis is obtained:

H2: Service quality has a positive and significant effect on WoM

The influence of physical facilities on WoM

The physical facilities owned by a hospital are an illustration of the quality displayed by the hospital in showing its existence to external parties. The appearance and capability of the company's physical facilities and infrastructure and the condition of the surrounding environment are clear evidence of the services provided by the service provider (the hospital) so that this is able to create increasingly positive word of mouth in the eyes of service users and services at the hospital. The results of research conducted by Amalia et all (2019) explain that tangible (service quality) has a significant effect on WoM promotion, as is the case with research conducted by Didik et all (2014), and Chang eu Kim (2014). Because physical facilities are the most concrete evidence, they take the form of all physical facilities that can actually be seen. Therefore, physical facilities are able to influence word of mouth. So the following hypothesis is obtained:

H3: Physical facilities have a positive and significant effect on WoM

The Influence Of Service Quality On Patient Experience

The quality of health services is the degree of perfection felt by patients in health services that can satisfy every user of health services. The better the quality of services provided, the higher the satisfaction felt by patients in receiving services from the hospital. Research conducted by Mahatma (2015), Khanchitpol et all (2014), Chang Eu Kim et all (2014), Ernest et all (2014) and Nazir (2019) explains that there is a strong influence between service quality and patient experience. Therefore, the following hypothesis is obtained:

H4: Service quality has a positive and significant effect on patient experience.

The Influence Of Physical Facilities On Patient Experience

The physical facilities in the hospital must always pay attention to things that will be felt by the patient, because the existing physical facilities will become material for the patient's consideration and assessment after seeing and feeling the use of these physical facilities. So it will affect the patient's satisfaction after seeing and feeling it. The better the existing physical facilities, the more perfect the satisfaction felt by the patient. According to research conducted by Khanchitpol et al (2014), Chang Eu Kim et al (2014), Siti et al (2017) shows that tangible (physical facilities) have a strong influence on patient experience. Therefore, the following hypothesis is obtained:

H5: Physical facilities have a positive and significant effect on patient experience.

The influence of patient experience on WoM

An easy way to find out information about a hospital's services is to ask someone who has received previous services at that hospital. This can be passed on to other people and through this process the information can be spread to all audiences. So if a patient is satisfied with what the hospital has provided, they will tend to make recommendations through word of mouth (WoM) about positive things about the hospital. Olgun et al (2014) show that customer satisfaction has a significant influence on WoM. Therefore, the following hypothesis is obtained:

H6: Patient experience has a positive and significant effect on WoM.

The aim of this research is to analyze the influence of service quality and physical facilities on WoM (Word of Mouth) with Patient Experience as an intervening variable at Mekar Sari Hospital.

RESEARCH METHODS

The research method used in this research is a correlational quantitative research type with a cross-sectional research design approach by looking at the influence of service quality and physical facilities on WoM with satisfaction as an intervening variable. Data collection was carried out by distributing questionnaires. The collected data is processed using descriptive and quantitative analysis tools. The results of the analysis are then interpreted and the final step is concluded and suggestions are given.

The population in this study were all patients who were inpatients in the Internal Medicine Ward in 2022. The inclusion criteria for the research sample were internal medicine inpatients at Mekar Sari Hospital with the exclusion criteria being outpatients.

The sample calculation method in this study uses the formula from Hair et al (2014), namely that if the sample size is too large it will be difficult to obtain a suitable model and it is recommended that an appropriate sample size be between 100-200 respondents. Determining the minimum sample size in this study is adjusted to the number of statement indicators used in the questionnaire, with the assumption of $n \times 5-10$ observed variables (indicators). In this study, the number of questionnaires was set at 22 multiplied by 5 = 110 respondents, up to 22 multiplied by 10 = 220 respondents. So this research required 110 respondents.

RESULTS AND DISCUSSION

Respondent Description

Table 1 shows the demographic description of the 110 visitors to RSMS who were respondents in this study. The most common age category is the 30.1 – 40 year age category with 37 (33.6%). Then the age category 40.1 – 50 years was 35 (31.8%). There were 18 age categories < 20 years (16.4%). There are 16 (14.5%) age categories 20 – 30 years old. And the least is the age category > 50 years as many as 4 (3.6%).

The highest level of education was in the Postgraduate Masters category at 44 (40%). Then the Undergraduate Education level category was 32 (29.1%). There were 26 (23.6%) diploma education level categories and the least were high school with 8 (7.3%).

The most common job category is the civil servant job category with 29 (26.4%). The self-employed job category was 26 (23.6%). There are 25 private employee job categories (22.7%). There are 17 housewife job categories (15.5%). The student work category has the smallest number, namely 13 (11.8%).

Table 1. Demographic Description of Visitors at Mekar Sari Hospital

Variable	Category	Total	Percentage (%)
Age	< 20 Years	18	16.4
	20 - 30 Years	16	14.5
	30,1 - 40 Years	37	33.6
	40,1 - 50 Years	35	31.8
	> 50 Years	4	3.6
Education	Senior High School	8	7.3
	Diploma	26	23.6
	Bachelor	32	29.1
	Master	44	40
Occupation	Student	13	11.8
	House Wife	17	15.5
	Entrepreneur	26	23.6
	Public Sector	29	26.4
	Private Sector	25	22.7
Income per month	< 5 Million	30	27.3
	5,1 - 10 Million	44	40
	10,1 - 15 Million	27	24.5
	> 15 Million	9	8.2
Insurance	Own Cost	15	13.6
	BPJS	87	79.1
	Other insurance	8	7.3

Most respondents' monthly income was in the 5.1 – 10 million category with 44 (40%). The category of monthly income < 5 million has the second highest number with 30 (27.3%). The monthly income category of 10.1-15 million has a total of 27 (24.5%). There were only 9 respondents (8.2%) with monthly income in the > 15 million category.

The insurance used as a payment model for health service costs at RSMS showed that 87 respondents (79.1%) used BPJS. There were 15 respondents who answered using their own costs without insurance coverage (13.6%). And there were 8 respondents (7.3%) who used other insurance.

The results of the demographic description of respondents show a picture of visitors to RSMS. Based on age groups, it can be seen that most visitors are aged between 30 years and 50 years, this age is the age where people need health services. The educational level of visitors is dominated by bachelor's and master's degrees, which shows that the knowledge of visitors at RSMS is high. The distribution work groups can be said to be balanced, whether visitors with active working status (entrepreneurs, civil servants and private employees) or those with passive working status (students and housewives) do not have significant differences. The monthly income group is dominated by the income group of 5.1 million to 10 million per month, which includes the average income of the middle economic group. Financial coverage is dominated by BPJS users, only a few use their own costs and use insurance other than BPJS.

Path Analysis

The statistical t test can use the t table value and p value. The t table is determined by the t table value at degrees of freedom (df) $110 - 4 = 106$; where 110 is the number of analytical data observations and 4 is the number of variables in the model; The t table significance level is at 0.05. The t table value at $df = 106$ and a significance level of 0.05 is 1.98. For the standard p value, the standard p value < 0.05 is used.

The results of the influence of physical facilities on patient experience obtained an influence coefficient value of 0.389 with a t statistic of 2.509. The statistical t value is $2.509 >$ from the t table 1.98 and also p value = $0.012 < 0.05$; Thus, the influence of physical facilities on patient experience is significant. A positive influence coefficient value indicates that the influence of physical facilities on patient experience is positive. This means that the better the existing physical facilities, the better the patient experience for visitors.

The results of the influence of physical facilities on patient experience obtained an influence coefficient value of 0.389 with a t statistic of 2.509. The statistical t value is $2.509 >$ from the t table 1.98 and also p value = $0.012 < 0.05$; Thus, the influence of physical facilities on patient experience is significant. A positive influence coefficient value indicates that the

influence of physical facilities on patient experience is positive. This means that the better the existing physical facilities, the better the patient experience felt by visitors.

The results of the influence of service quality on patient experience obtained an influence coefficient value of 0.440 with a t statistic of 3.097. The statistical t value is $3.097 >$ from the t table 1.98 and also p value = $0.002 < 0.05$; Thus, the influence of service quality on patient experience is significant. A positive influence coefficient value indicates that the influence of service quality on patient experience is positive. This means that the better the quality of service provided, the better the patient experience felt by visitors.

The results of the influence of physical facilities on WoM obtained an influence coefficient value of 0.428 with a t statistic of 2.829. The statistical t value is $2.829 >$ from the t table 1.98 and also p value = $0.005 < 0.05$; Thus the influence of physical facilities on WoM is significant. A positive influence coefficient value indicates that the influence of physical facilities on WoM is positive. This means that the better the existing physical facilities, the higher the visitor recommendations via WoM.

The results of the influence of service quality on WoM obtained an influence coefficient value of 0.233 with a t statistic of 2.004. The statistical t value is $2.004 >$ from the t table 1.98 and also p value = $0.046 < 0.05$; Thus, the influence of service quality on WoM is significant. A positive influence coefficient value indicates that the influence of service quality on WoM is positive. This means that the better the quality of service provided to visitors, the higher the visitor recommendations via WoM.

The results of the influence of patient experience on WoM obtained an influence coefficient value of 0.299 with a t statistic of 2.173. The statistical t value is $2.173 >$ from the t table 1.98 and also p value = $0.030 < 0.05$; Thus, the influence of patient experience on WoM is significant. A positive influence coefficient value indicates that the influence of patient experience on WoM is positive. This means that the better the patient experience felt by visitors, the higher the visitor's recommendation via WoM.

Table 2. Direct Effect and T Statistics Word of Mouth Model

Direct Effect	Coefficient	t statistics	p value	Description
Physical facilities -> Patient Experience	0.389	2.509	0.012	Significant
Service quality -> <i>Patient Experience</i>	0.440	3.097	0.002	Significant
Physical facilities -> WoM	0.428	2.829	0.005	Significant
Service quality -> WoM	0.233	2.004	0.046	Significant
<i>Patient Experience</i> -> WoM	0.299	2.173	0.030	Significant

Table 3 shows the magnitude of the indirect influence of service quality and physical facilities on WoM. Physical facilities have an indirect influence on WoM through patient

experience with an influence coefficient of 0.116 with a t statistic of 1.831 and $p = 0.068$. Service quality has an indirect influence on WoM through patient experience with an influence coefficient of 0.131 with a t statistic of 1.1556 and $p = 0.120$.

Based on the t statistical value and p value of physical facilities and service quality, it does not show a significant influence, where the t statistic < t table and p value > 0.05. These results indicate that the indirect influence of physical facilities and service quality is not significant. This shows that the indirect influence of physical facilities and service quality on WoM through patient experience is weak.

Table 3. Indirect Effect Physical Facilities and Service Quality

Indirect effect	Coefficient	T Statistics	P Values	Description
Physical facilities -> Patient Experience -> WoM	0.116	1.831	0.068	Not significant
Service quality -> Patient Experience -> WoM	0.131	1.556	0.120	Not significant

The AVE value for each analysis model variable is > 0.5 with a p value < 0.05. The highest AVE values are in WoM (0.727) and Patient Experience (0.723). The lowest AVE value is in service quality with a value of 0.597. For physical facilities, the AVE value is 0.660. The AVE values for all significant variables indicate that the convergence of the variables and the model is good.

Patient experience has an R2 value of 0.655. This shows that the contribution of influence provided by service quality and physical facilities on patient experience is 65.5%. The R2 value of 0.655 for patient experience is quite high and can be interpreted that the quality of service and physical facilities are two determining factors for hospital visitors regarding the experience of receiving service.

WoM has an R2 value of 0.819. This shows that the contribution of service quality, physical facilities and patient experience to WoM is 81.9%. The R2 value of 0.819 is very high, which shows the role of service quality, the existence of physical facilities and the patient experience of visitors greatly determines whether visitors want to recommend and promote hospital services through WoM.

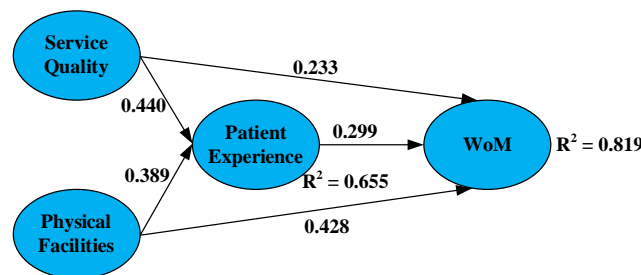


Table 4. AVE Value of the Model
Figure 4. Path Analysis Model WoM at Mekar Sari Hospital

DISCUSSION

The Influence of Service Quality on Patient Experience

Service quality is a main issue in the field of services, this is also inseparable from health services. Patient experience is another aspect in determining the assessment of the quality of services provided by the hospital. Good service quality provides a positive patient experience which causes patients/visitors to feel happy and satisfied with the services provided.

The results of this research found that service quality has a positive effect on patient experience. In fact, the influence of service quality is the dominant influence on patient experience. These results are supported by several previous studies (Mahatma, 2015, Khanchitpol et al., 2014, Chang Eu Kim et al., 2014, Ernest et al., 2014 and Nazir, 2019) where the quality of service determines whether the patient experience is good or bad.

Expectations from the experience include cleanliness, service information, comfort and timeliness of service appointments, timely examinations, helpful choice of doctors and staff, clear and easy to understand doctor's explanations, involvement in treatment decisions, respectful doctors, accepting advice about health or conditions health, information about the causes, management of the condition and information about the benefits or effects of treatment, as well as receiving opportunities or discussing problems. These things are part of health services which are very much paid attention to by patients/visitors at health provider facilities (Bowling et al., 2012). Better experiences, stronger collaboration with customers, and patient- and family-based care have been associated with improved health, clinical, financial, service, and satisfaction outcomes (Health Quality and Safety Commission New Zealand, 2016).

The Influence of Physical Facilities on Patient Experience

Physical facilities in a hospital are important things that must exist and be available. Physical facilities are not only buildings, structures or wards but also include equipment supporting health services. The physical facilities of a good health service unit provide a sense of satisfaction as well as a positive experience for patients and visitors.

The results of this research found that physical facilities have a positive effect on patient experience. Where the better the physical facilities the health service has, the more positive the patient experience felt by patients and visitors. These results are also in line with other research findings, including Khanchitpol et al., (2014), Chang Eu Kim et al., (2014) and Siti et al., (2017) which show the importance of physical facilities related to patient experience.

Physical facilities are very important for service delivery and are a significant factor in consumers wanting to visit and use services (Mudie & Pirrie, 2006). Where complete and good

physical facilities will make it easier for consumers to receive services. Apart from that, physical facilities can also be an attraction for consumers to visit service providers (Jim, 2009).

The Influence of Service Quality on WoM

Word of mouth or recommendations or promotions delivered by people who have experienced services to other people are a form of indirect promotion (Kotler, 2013). WoM that occurs is always related to the good and bad of the product or service received by consumers, therefore service quality has a positive influence on the occurrence of WoM.

The results of this research found that service quality has a positive effect on WoM, where the better the quality of service received by patients and visitors, the higher the willingness of patients and visitors to recommend health services through WoM. Other research similar to this research states that service quality can have a significant influence on word of mouth promotion (Amalia et al., 2019; Rifki et al., 2015; Didik et al., 2014).

WoM is a form of praise, recommendations and comments from patients and hospital visitors regarding the experience of receiving services that are consciously or unconsciously conveyed to other people (Sernovitz, 2014). WoM is even used by service providers as a promotional strategy related to consumers' affective responses (Peter & Olson, 2010).

The Influence of Physical Facilities on WoM

Patients and visitors to a hospital not only receive health services, but also interact with health personnel and the physical facilities available and owned by the hospital. Physical facilities are an integral part of service providers provided as an effort to provide services (Lovelock & Wright, 2001). Therefore, patients and visitors who are impressed with the complete physical facilities of a hospital will tell other people as a form of information for those who need the best health services. This process is part of post-use services in the form of communication between consumers (Peter & Olson, 2010).

The results of this research show that physical facilities have a positive effect on WoM. Good and complete physical facilities cause patients and hospital visitors to be increasingly motivated to recommend WoM to others. Even in this research, physical facilities are the dominant factor in the occurrence of WoM. These results are supported by previous studies which stated the same results as this research (Amalia et al., 2019; Didik et al., 2014; Park et al., 2022; Octivanny & Berlianto, 2022).

The WoM aspect is part of consumers' affective behavior in the promotion process, where this affective behavior is determined by consumers' cognitive aspects of service providers (Peter & Olson, 2010). Service providers always provide an attractive appearance of

physical facilities, even in their promotions service providers show the superiority of existing physical facilities.

The Influence of Patient Experience on WoM

Health services, like services in other fields, are a form of intangible or invisible product. Good or bad quality of service received by visitors is the feeling they receive when receiving service. This research finds that patient experience has a positive effect on WoM. The better and more positive the patient experience experienced by patients and visitors, the higher the number of visitors and patients recommending services to others through WoM.

WoM communication refers to the exchange of comments, thoughts, or ideas between two or more consumers, where they are not official marketers of the company. The information obtained from WoM is clearer and easier for consumers to understand because the messages in the information come directly from people who have experience (Kotler & Armstrong, 2014).

The results of this study are in line with other research where patient experience has a positive influence on WoM (Park et al., 2022; Karimbux et al., 2022; Olgun et al., 2014). Therefore, it is important for health service providers to provide patients and hospital visitors with an impressive form of service. This is important because health services that have a positive impression on patients and visitors will cause WoM.

CONCLUSIONS, IMPLICATIONS AND RECOMMENDATIONS

Conclusion

Based on the results of the research that has been carried out, the following conclusions are obtained, there is a positive influence of service quality on WoM; there is a positive influence of physical facilities on WoM; there is a positive influence of service quality on patient experience; there is a positive influence of physical facilities on patient experience; there is a positive influence of patient experience on WoM; there is a joint positive influence on service quality and physical facilities on WOM with patient experience as an intervening variable.

Theoretical Implications

From the research results, it was found that the influence of service quality on patient experience was greater than the partial influence of physical facilities variables on patient experience. This shows that to give a good impression, a positive perspective to patients regarding MS Hospital must improve the quality of service to patients who visit the hospital. Physical facilities are the dominant variable that partially influences WoM. Regarding these

results, health services need to consider both the appearance and completeness of the physical facilities in the hospital.

Managerial Implications

The research results show that the quality of service and the existence of physical facilities are equally important for hospitals. Service quality is a key factor in providing a positive patient experience, while physical facilities are a key factor in the occurrence of WoM. Therefore, RSMS management should pay attention to and improve the quality of service that focuses on patient experience. RSMS must also improve the appearance and completeness of its physical facilities because it is important for the promotion process through WoM.

Suggestion

It is hoped that Mekar Sari Hospital can be even better in providing health services, both from doctor and medical services as well as from the completeness of existing physical facilities.

It is hoped that future researchers can conduct further similar research and examine more sources and references related to service quality, physical facilities, patient experience and WoM or other variables, by taking a wider research area, larger samples and using a research design. better results so that more optimal results can be found and can be generalized to a wider area.

REFERENCES

- A.Parasuraman. (2007). The Behaviorial Consequenses of Service Quality. Journal of Marketing
- Departement Kesehatan Republik Indonesia. (2009). Peraturan Pemerintah Republik Indonesia Nomor 44 Tahun 2010. Jakarta
- Ghozali, I. (2016). Aplikasi Analisis Multivariate dengan Program IBM SPSS 23 (8th ed.). Semarang: Badan Penerbit Universitas Diponegoro
- Hasan, Ali. (2010). Marketing dari Mulut ke Mulut. Yogyakarta: Medpres
- Hasan, Ali. (2013). Marketing dan Kasus-Kasus Pilihan. Yogyakarta: Center for Academic Publishing Service
- Kementrian Kesehatan. (2019). Jumlah Rumah Sakit Menurut Kepemilikan (2018). <https://databoks.katadata.co.id/datapublish/2019/10/11/63-persen-rumah-sakit-di-indonesia-dimiliki-swasta>
- Kementrian Kesehatan. (2021). Profil Kesehatan Indonesia Tahun 2020. Jakarta: Kementerian Kesehatan RI.

- Kitapci, Olgun., Ceylan Akdogan & Ibrahim Taylan. (2014). The Impact of Service Quality dimensions on Patient Satisfaction, Repurchase Intentions and Word of Mouth Communication In The Public Healthcare Industry. *Procedia-Social and Behavioral Sciences* 148 (2014) 161-169. <https://doi.org/10.1016/j.sbspro.2014.07.030>
- Kotler, P, & Keller, K. . (2012). *Manajemen Pemasaran* (12th ed.). Jakarta: Erlangga
- Lupiyoadi. (2016). *Manajemen Pemasaran Jasa Berbasis Kompetensi*. Jakarta: Salemba Empat
- Mahatma Y. B, I Gede., Rakhmawati., & Yarmen (2020). Public Transport users WOM: AN Integration Model Of The Theory of Planned Behaviou, Customer Satisfaction Theory and Personal Norma Theory. *Transportation Research Procedia* 48 (2020) 3365-3379. <https://doi.org/10.1016/j.trpro.2020.08.117>
- Nitisusastro, M. (2012). *Perilaku Konsumen dalam Perspektif Kewirausahaan*. Bandung: Alfabeta
- Novianti, R., & Artanti, Y. (2015). Pengaruh Kualitas Layanan Terhadap Word of Mouth (Wom) Melalui Kepuasan Sebagai Variabel Intervening. *Jurnal Ilmu Manajemen*, 1(1). Retrieved from <https://jurnalmahasiswa.unesa.ac.id/index.php/jim/article/view/13554>
- Permenkes. (2016). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 24 Tahun 2016 Tentang Teknis Bangunan dan Prasarana Rumah Sakit*. Indonesia
- Perhimpunan Rumah Sakit Seluruh Indonesia (PERSI). (2018). *Jumlah RS di Indonesia Pertumbuhan RS Publik*. <https://persi.or.id/jumlah-rs-di-indonesia-pertumbuhan-rs-publik/>
- Qudratullah, M. F. (2013). *Analisis Regresi Terapan : Teori, Contoh Kasus, dan Aplikasi dengan SPSS*. (ANDI, Ed.). Yogyakarta
- Riduwan. (2015). *Dasar-Dasar Statistika*. Bandung: Alfabeta
- Sedarmayanti. (2017). *Sumber Daya Manusia dan Produktivitas Kerja*. Bandung: Mandar Maju.
- Sernovitz, A., (2014), *Word of Mouth Marketing: How Smart Companies get People Talking*, Kaplan Inc: New York.
- Sunyoto, D. (2013). *Perilaku Konsumen (Panduan Riset Sederhana Untuk Mengenali Konsumen)*. Yogyakarta: Center of Academic Publishing Service (CAPS)
- Solichati, A., Wahyu, Y., & Putra. (2019). Pengaruh Kualitas Pelayanan Terhadap Peningkatan Word of Mouth Di Klinik Pratama Aisyiyah Medical Center. *Journal of the Mining Institute of Japan*, 81(922), 235–236. https://doi.org/10.2473/shigentosozai1953.81.922_235
- Umam, C., Muchlisoh, L., & Maryati, H. (2019). Analisis Kepuasan Pasien Terhadap Mutu Pelayanan Kesehatan Rawat Jalan Dengan Metode Ipa (Importance Perfomance Analysis) Di Puskesmas Bogor Tengah Kota Bogor Tahun 2018. *Promotor Jurnal Mahasiswa Kesehatan Masyarakat*, 2(1), 7–19