

THE NEXUS BETWEEN JKN QUALITY, COMPETENCE, EMPLOYEE PERFORMANCE, AND PATIENT SATISFACTION

Rumi Enggarwati¹, Retno Endah Supeni², Toni Herlambang³

^{1,2,3} Faculty of Economics and Business, Universitas Muhammadiyah Jember, Jember,

E-mail: rumienggar@gmail.com ^{1*}

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Abstract

The National Health Insurance Program (JKN) is designed to improve the overall quality of public health while providing protection to individuals and families from the burden of high health care costs. The quality of National Health Insurance (JKN) services which are supported by human resource competencies such as speed, response to patient needs, and professionalism of medical personnel will improve employee performance and ultimately, this will have a positive impact on patient satisfaction. This study aims to examine how the quality of JKN services at Puskesmas plays a role in influencing patient satisfaction. This is important for understanding the connection between national health policies and patient experiences at the primary care level. Additionally, the study investigates the role of Puskesmas staff performance as a mediator between JKN quality and patient satisfaction, which could provide new insights into the importance of human resources in improving patient experiences. This research was conducted at the Rambipuji Jember Community Health Center with 100 BPJS patients as respondents. The research instrument used a questionnaire. The data analysis technique uses SEM PLS. The research results show that: JKN quality has a positive and significant effect on employee performance, Competence has a positive and significant effect on employee performance, JKN quality has a positive and significant effect on patient satisfaction, Employee performance has a positive and significant impact on patient satisfaction, Competence has a positive and significant effect on patient satisfaction. JKN quality has a positive and significant impact on patient satisfaction through employee performance. Competence has a positive and significant impact on patient satisfaction through employee performance.

Keywords: *JKN Quality, Competence, Employee Performance, Patient Satisfaction*

INTRODUCTION

In Indonesia, the National Health Insurance Program (JKN) is designed to improve the overall health of the population while providing protection to individuals and families from the financial burden of healthcare costs (Presidential Regulation on Health, 2018). This program includes various efforts to ensure that the healthcare services provided are safe, effective, and satisfying for patients. The quality of healthcare services is a key factor in the success of JKN. High-quality services not only contribute to increased patient satisfaction but also support the achievement of national health goals. Healthcare quality includes various elements, such as speed, responsiveness to patient needs, and professionalism of medical staff. However, the main challenge in implementing the JKN program lies in integrating various stakeholders, including healthcare facilities, medical staff competencies, and the patients themselves. JKN is a government program aimed at providing better health access to all Indonesian citizens. With JKN in place, Puskesmas, as a provider of primary healthcare services, must improve the quality of services to meet the established standards. The quality of services at Puskesmas directly affects patient satisfaction. If the quality of JKN services is good, it is expected that Puskesmas staff will work more efficiently and effectively, improving their performance in delivering services. The performance of Puskesmas staff is influenced by various factors, including training, motivation, and support from the JKN system. A well-functioning system and support from JKN can encourage employees to provide better services, innovate, and meet patient expectations. High JKN quality includes aspects such as speed, accuracy, and affordability of services. When JKN services are of good quality, Puskesmas employees feel more capable and motivated to provide optimal care. JKN provides the necessary resources and training for employees. When employees receive adequate support, their performance in delivering healthcare services improves. Good JKN quality often creates positive experiences for patients. Positive feedback from patients

can boost employees' confidence and motivate them to perform better. A quality JKN system includes clear guidelines and procedures. Employees who understand and adhere to these procedures tend to have better performance as they work within a structured framework. The JKN system often has clear performance indicators for employees. When employees know they are evaluated based on their quality of work, they are more likely to strive to meet the established standards. The quality of the JKN system can affect team dynamics at Puskesmas. Good collaboration among employees, driven by service quality, can enhance efficiency and effectiveness in service delivery. Sari et al. (2020) show that good service quality positively contributes to employee motivation, which in turn improves their performance. Study by Pratiwi and Rahardjo (2019) show that improvements in JKN quality enhance patient satisfaction, which in turn influences employee work morale. Research by Hidayati (2021) found that support from the JKN system and employee training play a crucial role in improving performance, especially in service delivery and time management. Santoso and Lestari (2022) show that employees who feel that JKN provides adequate support tend to have better performance. Amelia (2023) found that high-quality JKN services correlate with improved employee performance, particularly in communication and interaction with patients. Nugroho and Yulianti (2021) show that factors such as training and facilities provided by JKN have a significant impact on employee performance.

JKN quality includes speed, accuracy, and appropriateness of services. When services meet quality standards, patients are more likely to feel satisfied with their experience. JKN aims to improve access to healthcare services. When patients can easily access Puskesmas services, it contributes to their satisfaction. Puskesmas staff trained in providing empathetic and communicative services, in line with JKN quality, can enhance patient satisfaction. Patients feel valued and understood when staff show proper care and attention. Responsiveness to Complaints: JKN encourages Puskesmas to be responsive to patient complaints. When complaints are handled properly, it can significantly increase patient satisfaction. Study by Rahmawati et al. (2020) show that improvements in service quality, such as speed and communication, significantly contribute to patient satisfaction. Santoso and Widiastuti (2019) findings indicate that patients who are satisfied with JKN quality tend to have higher satisfaction with the services they receive. Hidayati and Sari (2021) suggest that factors such as facilities and interactions with healthcare staff play a crucial role in determining patient satisfaction. Nugroho et al. (2022) show that patient satisfaction increases as the quality of services provided improves. Amelia (2023) found that high-quality JKN services enhance patient satisfaction, particularly in terms of attention and responsiveness to patient needs. Pratiwi (2021) show that quality aspects such as responsibility and service transparency positively affect patient satisfaction levels.

The main theory used in this study is performance. Performance comes from the word "achievement", which is often understood as work results or professional accomplishments. However, performance actually has a broader meaning, which includes not only the results of work, but also the way in which the work process is carried out. An employee's performance is considered to be what the employee does and does not do. Employee performance includes the quality and quantity of work provided, attendance levels, accommodating and helpful nature, and punctuality in producing results (Rusdin and Sigit, 2022). Schermerhorn and Osborn (1991) stated that performance is the quality and quantity of work accomplishment by individuals, groups, or organizations. Performance reflects the organization's goal of employing someone to do their job well (Campbell et al., 1993). Thus, performance is not only determined by the action itself, but also by the process of evaluation and assessment. Furthermore, only actions that can be measured and quantified can be considered performance (Campbell et al. (1993). In measuring the performance of government organizations (public bureaucracy), it is adjusted according to the tasks and functions being carried out. Furthermore, it is stated that comprehensive performance indicators include the dimensions of: service quality, productivity, responsiveness, responsibility, and accountability (Sedarmayanti, 2016).

Quality considered a key factor in service differentiation and excellence, is a source of sustainable potential, therefore it is very important to measure and improve quality. The quality of health services in health centers and hospitals is affected by many factors, such as the condition of the physical facilities, the type of personnel available, the medicines and medical equipment, and the service delivery process (Lestari, et al, 2024). These factors can lead to true customer satisfaction. The public always expects that hospital services, whether from the government or the private sector, can provide quality and satisfactory services to every user (Nur'aeni, et al 2020). Quality refers to the level of compliance with established requirements. Quality means conformity to needs, while poor quality results from non-conformity (Herawati and Qomariah, 2015). Quality is not synonymous with luxury. A product or service that meets all its specifications is considered to be of quality, regardless of the form of the product. Quality must be achievable, measurable, bring benefits, and to achieve it, one must work hard (Sriyanti, 2016).

The quality of health services is a service that can meet expectations and satisfy each user of health services, in line with the average level of satisfaction of the community, and is carried out in accordance with professional standards and codes of ethics. Service quality and patient satisfaction are two main factors in hospital services (Nur'aeni, et al, 2020). Patient dissatisfaction with health care services in hospitals can be caused by many factors, such as a lack of attention by nurses and doctors to patient complaints. and family, hostile attitudes of doctors and nurses, and difficulties in interacting with health workers (Toruan, 2017). Customer satisfaction is the response that the consumer gives to the product he receives, in relation to his expectations. Therefore, customer satisfaction is achieved when the performance or results obtained by the customer meet or exceed his expectations (Maarif et al, 2023).

LITERATURE REVIEW

Grand Theory

Quality healthcare services are those that can satisfy every user of healthcare services according to the average satisfaction level of the population, and their delivery aligns with existing ethical codes and professional service standards. Gronroos, C. (1990) states that customer satisfaction or dissatisfaction is the customer's response to the evaluation of the discrepancy (disconfirmation) perceived between prior expectations and the performance of the product experienced after use. Howard & Sheth (1969) express that customer satisfaction is a cognitive situation for buyers regarding the congruence or incongruence between the outcomes obtained compared to the sacrifices made. Gronroos, C. (1990) states that consumer satisfaction can be defined as the consumer's attitude, specifically the degree of liking or disliking towards the service experienced. Therefore, consumer behavior can also serve as a model for buyer behavior, while patient satisfaction and loyalty as users of services are key elements among other satisfaction and loyalty factors. According to Kotler and Keller (2022), patient satisfaction is the level of congruence between patients' expectations of ideal care and their perceptions of the actual care received. Pohan, I. S. (2023) explains that patient satisfaction with a service is a comparison between their perception of the service received and their expectations prior to receiving that care.

JKN Mobile

Prabowo (2021) states that mobile applications are applications specifically designed for mobile platforms (iOS, Android, or Windows Mobile). These applications utilize web-based resources that provide access to a variety of relevant information. They can also be accessed through smartphones, wireless devices, pagers, and similar devices. Putra et al. (2023) explain that one of the exciting future technologies in the mobile application space is the development of mobile applications that run on Android devices. The Mobile JKN application is an innovation for the convenience of prospective participants or participants of JKN-KIS, utilizing information technology that can be downloaded through the Mobile JKN app on Google Playstore or the App Store. JKN KIS stands for Jaminan Kesehatan Nasional Kartu Indonesia Sehat. JKN is a social security program based on Law Number 40 of 2004. According to Suhadi et al. (2022), the Mobile JKN application facilitates the registration of new participants, provides information on membership, payment of contributions, healthcare facility locations, appointment registration, health screening, doctor consultations, and allows users to submit suggestions or complaints to the staff.

Competence

Luthans et al. (2021) state that every service and action performed by nurses requires competent service, meaning that each nurse is expected to have high levels of knowledge, skills, independence, mastery, and professionalism in providing care, resulting in satisfactory service delivery. This is in line with Robbins (2020), who conveys that the criteria for good quality healthcare services are largely influenced by the quality of service derived from the potential of human resources within the healthcare institution itself. According to Wirawan (2020), competence is the ability to perform a job or task based on skills and knowledge, supported by the work attitude required by that job. Therefore, superior human resource competence is needed. Competence, as defined by Sedarmayanti (2020), is the authority (power) to determine (decide something); the ability to use grammar both abstractly and intrinsically. Human resource competencies in terms of abilities and knowledge can be developed through education and training, while motivational competencies can be acquired during the selection process. Hasibuan (2020) states that competence is a deep part of a person's personality, characterized by predictable behavior in various jobs and tasks.

Employee Performance

According to Hasibuan (2020), performance is the result of work that can be achieved by an individual or a group of individuals within an organization, in accordance with their respective authority and responsibilities, in an effort to achieve the organization's goals legally, without violating the law, and in accordance with morals and ethics. Marnisah (2020) states that there are at least three concepts that can be used as indicators of government organizational performance: responsibility, responsiveness, and accountability. When measuring the performance of government organizations (public bureaucracy), it should align with the tasks and functions being carried out. Furthermore, Pohan (2023) states that comprehensive performance indicators encompass dimensions such as service quality, productivity, responsiveness, responsibility, and accountability. According to Afandi (2021), performance measurement can benefit the organization if conducted properly, as the information produced must be effective and efficient. The effectiveness of information depends on how it is communicated to leaders who receive the information and then process it into useful insights for evaluating performance (Nugroho, 2020). Performance assessment is conducted to emphasize undesirable behaviors, providing feedback on performance outcomes as well as rewards, both intrinsic and extrinsic. The main goal of performance assessment is to motivate employees to achieve organizational objectives and comply with the previously established behavioral standards, leading to desired actions and results (Sedarmayanti, 2020).

Customer Satisfaction

The quality of services provided by hospital elements will determine patient satisfaction (Apriani and Nurcahyo, 2021). In this case, patient satisfaction can only be realized if a hospital has successfully met all of the patients' needs for quality, fair, and equitable services (Nurhidayat and Arifki, 2020). However, in reality, many patients still do not receive services that meet their expectations, and patient satisfaction remains below the standards set by the government. Therefore, various sincere efforts need to be made to address this issue. Patient satisfaction is defined by Narmansyah et al. (2022) as the customer's response to the discrepancy between their prior importance level and the actual performance experienced after use. Patient/customer satisfaction is at the core of patient/customer-oriented marketing. Satisfactory and quality services will foster patient/customer loyalty (Nova et al., 2024). Tjiptono (2020) argues that patient satisfaction as service users is one of the indicators for assessing service quality in health centers (Puskesmas). High satisfaction indicates the success of the Puskesmas in providing quality health services (Handayany, 2020). To achieve patient satisfaction, it is necessary to enhance standards in maintaining the quality of maternity services, referring to service quality and health facilities to meet patient or community satisfaction. Patients will only feel satisfied if the health service performance they receive aligns with their expectations. Thus, it can be concluded that patient satisfaction is a level of feeling that arises from comparing the performance of the health services received with what is expected (Kotler and Keller, 2020). Patient satisfaction serves as a benchmark for improving service quality and is a primary reason for the Puskesmas to implement changes for the better. Consumer satisfaction can be interpreted according to Tjiptono (2020) as the consumer's attitude, specifically the degree of liking or disliking towards the service experienced. Therefore, consumer behavior can also serve as a model for buyer behavior, while patient satisfaction and loyalty as service users are key elements among other satisfaction and loyalty factors.

METHOD

If there is an image in the content of the paper, The type of quantitative research used in this study is explanatory research, which aims to explain the causal relationship between research variables through hypothesis testing. In order to obtain calculation results in accordance with the research model, the approach used uses numbers in the form of points as the basis for analysis. The result is obtained through a survey method that explores the opinions or perceptions of the research objects. Primary data is data obtained directly by researchers from primary sources. The main data collection technique used is a questionnaire, which is a data collection method using a list of questions given in writing to the research subject to obtain information. The data sources used in this study are primary data. The sampling technique applied in this study is the census technique, where the entire population or research object (Sugiyono, 2018). The number of respondents is 50 people. Hypothesis testing was carried out using variance-based SEM or partial least squares (SEM-PLS) via the Smart PLS 4.0 program. SEM-PLS is used in exploratory research, so the PLS approach is more suitable for forecasting purposes (Sholihin and Ratmono, 2016). The PLS approach was chosen because the variables used in this study have nominal and ordinal scales, which are not parameters.

Measurement model describes how each indicator is related to the corresponding latent variables. This model was evaluated by measuring the convergent and discriminant validity and the composite reliability of the block indicators. Meanwhile, the structural model (internal model) describes the relationship between the latent variables based on the substantive theory. Confidence levels used in the research is 5%. The hypothesis will be accepted if the $p\text{-value} < 0.05$. Path coefficients are used to determine the direction of the relationship between the constructs, where a positive correlation coefficient indicates a positive relationship between the constructs. The research model will also be tested by examining the value of the coefficient of determination (R^2), which explains the variation in the dependent variable. The R^2 value ranges from 0 to 1; If the value is 0, the model cannot explain the variation in the dependent variable, while a value of 1 indicates that the independent variable explains 100% of the variation in the dependent variable.

RESULTS AND DISCUSSION

Validity Test

Table 1. Validity Test

Variable	Indicators	Testing	Standar	Result
JKN	X11	0,519	0,500	Valid
	X12	0,690	0,500	Valid
	X13	0,586	0,500	Valid
	X14	0,604	0,500	Valid
	X15	0,732	0,500	Valid
	X16	0,593	0,500	Valid
Employee performance	Z1	0,622	0,500	Valid
	Z2	0,525	0,500	Valid
	Z3	0,675	0,500	Valid
	Z4	0,754	0,500	Valid
	Z5	0,621	0,500	Valid
Customer satisfaction	Y1	0,773	0,500	Valid
	Y2	0,579	0,500	Valid
	Y3	0,874	0,500	Valid
	Y4	0,760	0,500	Valid
	Y5	0,651	0,500	Valid
	Y6	0,564	0,500	Valid
	Y7	0,723	0,500	Valid

Source: Smart PLS Test

The results of the convergent validity test calculation show that the normalized pattern loading factor value is above 0.5, indicating that all indicators in the questionnaire statements meet the convergent validity criteria.

Reliability Test

The reliability test conducted using Warp PLS 5.0 software is indicated by the Composite Reliability and Cronbach's Alpha values. Here are the results of the latent variable coefficients that represent the reliability test:

Tabel 2. Uji Reliabilitas

Variable	Composite reliability coefficients	Cronbach's alpha coefficients
JKN	0.964	0,856
Employee performance	0.925	0,837
Customer Satisfaction	0.928	0,812

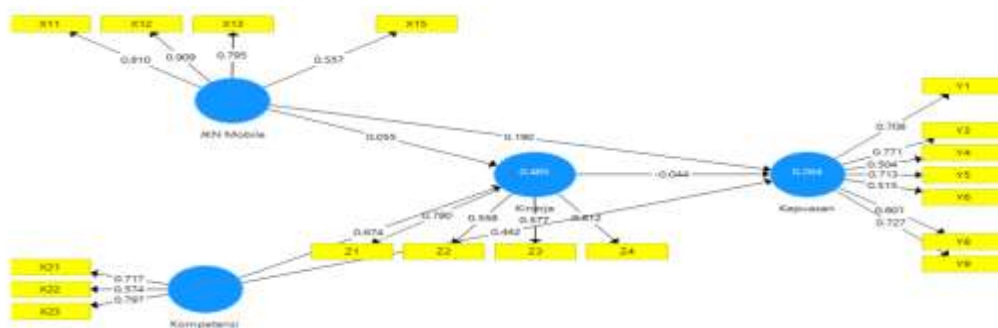
Source: Smart PLS Test

Model fit testing must be performed first before testing the significance of the path coefficient and R^2 . This test aims to determine whether a model fits the existing data.

Table 3. Model fit and quality indices

Model fit and quality indices	Testing	P Value	Result
Average path coefficient	APC = 0.510	P<0.001	Fit
Average R-squared	ARS = 0.534	P<0.001	Fit
Average adjusted R-squared	AARS =0.530	P<0.001	Fit
Average block VIF	AVIF= 1.822	acceptable if ≤ 5, ideally ≤ 3.3	Ideally
Average full collinearity VIF	AFVIF=2.194	acceptable if ≤ 5, ideally ≤ 3.3	Ideally
Tenenhaus GoF	GoF=0.562	small ≥ 0.1, medium ≥ 0.25, large ≥ 0.36	Large
Sympson's paradox ratio	SPR=1.000	acceptable if ≥ 0.7, ideally = 1	Ideally
R-squared contribution ratio	RSCR=1.000	acceptable if ≥ 0.9, ideally = 1	Ideally
Statistical suppression ratio	SSR=0.787	acceptable if ≥ 0.7, ideally = 1	Ideally
Nonlinear bivariate causality direction ratio	NLBCDR=1.000	acceptable if ≥ 0.7, ideally = 1	Ideally

Source: Smart PLS Test



Source: Test of Smart PLS 4.0

The Result Of Structural Equation Modelling Smart PLS 4.0

The R-square value for the employee performance variable is 0.485, which means that the variability of the employee performance construct that can be explained by the variability of the JKN mobile application and human resource competence is 48.5%, while the remainder is explained by other variables outside of this study. The R-square value for the patient satisfaction variable is 0.264, indicating that the variability of the patient satisfaction construct that can be explained by the variability of the JKN mobile application, human resource competence, and employee performance is 26.4%, while the remainder is explained by other variables outside of this study.

Indirect and Total Effect

The results of the indirect test and total effect are shown in the following path analysis:

Tabel 4. Path Analysis

Path Analysis	Coefisien	P Value	Result
JKN →Employee performance→Customer satisfaction	0.361	<0.000	Customer bonding plays a role in strengthening the impact of CRM on customer loyalty.
JKN →Employee performance	0.624	<0.000	
JKN →Customer satisfaction	0.688	<0.000	
Total effect	0.579	<0.000	

Source: Warp PLS Test

Discussion

The relationship between the quality of the National Health Insurance (JKN) and the performance of Puskesmas employees feel more motivated to provide good service. The quality of service received by patients encourages employees to work harder and more efficiently. Good JKN quality is often accompanied by the provision of adequate resources, such as training and proper facilities. This enables employees to perform their tasks more effectively and efficiently. JKN sets certain standards for healthcare services. When Puskesmas employees understand and follow these standards, they are more likely to achieve good performance. The research results show that the quality of JKN services has a positive and significant impact on employee performance, with a coefficient value of $B = 0.62$ and a $p\text{-value} < 0.01$. This means that good JKN service quality will improve hospital employee performance. This means that the quality of JKN services is able to improve the performance of Puskesmas employees. These findings support the study by Hasan and Amrianti (2022), which indicates that the improvement of JKN service quality positively contributes to employee performance, particularly in terms of efficiency and responsiveness. Dewi *et al* (2022) found that employees who feel supported by a good JKN system tend to demonstrate better performance. Research by Wijiati *et al* (2023) shows that employees in Puskesmas with high JKN quality perform better compared to employees in Puskesmas with lower quality.

The quality of JKN services includes elements such as speed, accuracy, and reliability in providing care. When services meet or exceed patient expectations, their satisfaction tends to increase. JKN is designed to improve patient access to healthcare services. Good accessibility, such as a strategically located Puskesmas and convenient service hours, contributes to patient satisfaction. The quality of facilities at Puskesmas, such as cleanliness, comfort, and the availability of medical equipment, influences patient satisfaction. Good facilities create a positive experience for patients. The ability of Puskesmas to respond quickly and effectively to patient needs and complaints is an important part of service quality. JKN encourages the collection of patient feedback to improve service quality. When patients feel that their opinions are valued, they are likely to be more satisfied with the services they receive. The research results show that the quality of JKN services has an effect of 0.33 on patient satisfaction with a $p\text{-value}$ of < 0.01 . This means that the quality of JKN services has a positive and significant impact on patient satisfaction. The better the JKN services, the higher the patient satisfaction will be. The results of this study support previous research, namely Sari and Yani (2020) show that good service quality, such as speed and the quality of interactions with healthcare personnel, contributes positively to patient satisfaction. Hidayat *et al.* (2021) show that patients who receive good access and adequate facilities tend to be more satisfied. Wibowo and Rahmawati (2022), show the results indicate that patient satisfaction increases as the quality of service improves. Study by Prasetyo (2023) and Maarif *et al.* (2023) findings show that patients are more satisfied when the services provided meet their expectations.

CONCLUSION

Fundamental Finding : The study examining the relationship between the quality of JKN to improve employee performance and achieve patient satisfaction was conducted at the Rambipuji Health Center in Jember. JKN is a form of healthcare service intended for the Indonesian public, especially for the poor, as the cost of JKN services is covered by the government. The research results show that (1) the quality of JKN has a significant positive effect on the performance of health center employees, (2) the quality of JKN has a significant positive effect on patient satisfaction, and (3) employee performance plays a role in strengthening the relationship between JKN quality and patient satisfaction. **Implication :** The implications of this research are aimed at the Rambipuji Health Center to improve the quality of JKN services, which in turn can enhance employee performance and patient satisfaction. The study shows that employees who receive feedback tend to improve their performance, contributing to patient satisfaction. This research also indicates that employees who feel involved and valued within the JKN system will perform better. The health center needs to conduct regular monitoring and evaluation of JKN service quality and employee performance. By understanding this relationship, management can take appropriate steps to improve both aspects. **Limitation :** This study only use samples from one or a few health centers, which may limit the generalization of results to a broader population. The use of limited data collection methods, such as questionnaires, may lead to bias if respondents do not provide honest or accurate answers and the statistical analysis techniques used may not capture all the complex relationships between variables, potentially overlooking important interactions. **Future Research :** (1) Sample Expansion: Conduct research with a larger sample, involving various health centers in different regions (urban and rural) to improve the generalization of results. (2) Use of Mixed Methods: Combine quantitative and qualitative methods to gain a deeper understanding of patient experiences and the factors influencing employee performance. (3) Longitudinal Analysis: Consider conducting a longitudinal study that could provide

insights into how the relationship between JKN quality, employee performance, and patient satisfaction changes over time.

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