

# Patient satisfaction analysis of BPJS at the balai makam community health center in bathin solapan subdistrict, bengkalis regency

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## ABSTRACT

Patient satisfaction at the Balai Makam Public Health Center in Bathin Solapan Sub-district can be influenced by several issues experienced in healthcare services. To address these issues, this study was conducted with the aim of analyzing the level of patient satisfaction with BPJS (Social Health Insurance) at the Balai Makam Public Health Center. The research utilized a mixed-method approach, involving primary informants who were BPJS patients at the Balai Makam Public Health Center, supportive informants consisting of healthcare providers at the health center, and key informants who were responsible for the BPJS Pcare program at the Balai Makam Public Health Center. Primary data were obtained through questionnaires, in-depth interviews, and observations, while secondary data were obtained from profiles, programs, and patient visit reports. Data analysis was conducted using both quantitative and qualitative methods, employing univariate, bivariate, and multivariate analysis techniques. The research findings indicate that the majority of patients (52.1%) were dissatisfied with the provided services. Several factors influenced patient satisfaction at the Balai Makam Public Health Center. Variables significantly associated with patient satisfaction with BPJS at the Balai Makam Public Health Center in Bathin Solapan Sub-district included reliability (p-value 0.002; OR= 7.581), responsiveness (p-value 0.000; OR= 14.069), assurance (p-value 0.000; OR= 20.160), tangibles (p-value 0.001; OR= 4.885), and empathy (p-value 0.000; OR= 18.462). The variable that had the most significant impact on patient satisfaction was responsiveness to services after controlling for the empathy variable. Insufficient responsiveness to service had a risk up to 21 times higher in causing dissatisfaction among BPJS patients at the Balai Makam Public Health Center in Bathin Solapan Sub-district. Interview results indicated that the main factor influencing BPJS patient satisfaction was tangible evidence.

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## INTRODUCTION

Patient satisfaction is a primary standard measure for assessing the quality of healthcare facilities, especially primary healthcare centers like Balai Makam Public Health Center, which serve as the primary healthcare service provider in the community. The level of patient satisfaction has an influence on the number of visits, and the attitude of the staff towards patients also affects patient satisfaction as patient needs and demands for quality service increase. Primary healthcare centers often face issues related to patient satisfaction and are urged to maintain patient trust by improving the quality of care (Permenkes No. 43 Tahun 2019). Primary healthcare centers are directly involved in community healthcare services, including promotive, preventive, curative, and rehabilitative efforts. They provide individual healthcare services (UKP) and community healthcare services (UKM). UKP includes outpatient services such as general examinations, dental care, care for the elderly, maternal and child health, nutritional consultations, laboratory examinations, pharmacy services, and emergency care. UKM is divided into essential and developmental community healthcare services, which encompass health promotion, environmental health, family health, nutrition, disease prevention, and control (Kementerian Kesehatan, 2020.).

Primary healthcare centers are technical units responsible for the implementation of health development in one or several sub-districts. They are also part of the implementation of the National Health Insurance Program (JKN) guaranteed by the Social Security Administrative Body (BPJS). The main objective of primary healthcare centers is to provide quality and affordable healthcare services accessible to the community, especially the lower middle class. Primary healthcare centers have a responsibility to build satisfaction and deliver quality services in accordance with the Minister of Health Regulation No. 43 of 2019 (Kemenkes, 2020.), (Issalillah, F. 2021). Service quality, from the patient's perspective, is considered good and effective if patients feel comfortable, satisfied, and treated with kindness. From the provider's perspective, service quality is considered good and efficient if it aligns with government standards. Some common complaints raised by primary healthcare center users include the attitude and actions of doctors, nurses, administrative staff, inadequate facilities, delays in service, medication availability, service fees, and medical equipment. The dimensions of service quality in customer satisfaction evaluation include physical evidence, service reliability, responsiveness of staff, assurance/confidence, and empathy (Rizal & Jalpi, 2022; Setiawan et al., 2022). Several studies have examined the satisfaction levels of BPJS patients at Public Health Centers (PHCs). A relationship between service quality and BPJS patient satisfaction at a Regional General Hospital in Yogyakarta (Rizal et al., 2018). This indicates that the quality of service provided by the hospital significantly influences BPJS patient satisfaction. A study conducted a review of BPJS patient satisfaction with the registration service for outpatient care at the North Thousand Islands Sub-district PHC in DKI Jakarta Province in 2022, illustrating the level of BPJS patient satisfaction with the services provided by the registration staff at the PHC (Umam et al., 2019). Balai Makam PHC, located in Desa Tambusai Batang Dui, Kecamatan Bathin Solapan, is one of the PHCs in the area. The implementation of BPJS at Balai Makam PHC began in January 2014. The number of BPJS patient visits at Balai Makam PHC was 3,252 in 2020 and increased to 6,036 in 2021 (Medical records of Balai Makam PHC). However, there are several factors that contribute to patient dissatisfaction, such as a lengthy registration process, excessive waiting time to be examined by a doctor, occasional unfriendly attitudes of medical and paramedical staff, incomplete laboratory examinations, uncomfortable waiting areas, limited parking space, inadequate facilities, and the absence of 24-hour medical services. Based on data from a satisfaction survey of BPJS patients at Balai Makam PHC with a sample size of 10 individuals, the healthcare service quality dimensions considered most important by the PHC as the healthcare service provider are the scientific knowledge possessed by the doctors in determining diagnoses, personal attention from doctors to patients, doctor's skills, and perceived service comfort by patients, with a satisfaction percentage of 70%. The survey also indicates that the friendliness and attitudes of employees and paramedics received positive and friendly

evaluations, with a satisfaction percentage of 100%. However, only 40% of patients, as service users, find the procedures for using BPJS insurance to be easy and straightforward, while the remaining 60% find the procedures somewhat unclear. Additionally, 70% of the respondents expressed dissatisfaction with the limited and cramped parking facilities at the PHC, as well as the hot waiting area and limited number of seats. Therefore, this study aims to analyze the satisfaction levels of BPJS patients at Balai Makam PHC in Bathin Solapan Sub-district.

While previous research has explored patient satisfaction and healthcare services in the context of national health insurance programs, the current research titled "Patient Satisfaction Analysis of BPJS at the Balai Makam Community Health Center in Bathin Solapan Subdistrict, Bengkalis Regency" distinguishes itself through its specific focus on the Balai Makam Community Health Center in a specific subdistrict of Bengkalis Regency. This localized approach allows for a deep dive into the unique dynamics and challenges faced by this particular healthcare facility and its patient population. The study not only examines general patient satisfaction but also delves into the specific experiences of patients receiving services under the BPJS program. This localized perspective provides a nuanced understanding of patient perceptions, expectations, and concerns in a specific healthcare setting, contributing valuable insights that can inform targeted improvements at the facility level. Additionally, the study's findings can potentially serve as a case study for other similar community health centers or regions facing similar challenges, providing actionable recommendations to enhance patient satisfaction and overall healthcare service quality.

## RESEARCH METHOD

This study utilizes a combination of qualitative and quantitative methods with an explanatory research design to analyze BPJS patient satisfaction. The research will be conducted at Balai Makam Public Health Center from July to August 2022. The sample size for this study is 96 individuals, with inclusion criteria of BPJS patients who have visited Balai Makam Public Health Center more than twice. Exclusion criteria include individuals who are unwilling to participate as respondents and patients who are employees of the PHC or their family members. Research informants are purposively selected based on relevance and sufficiency. They consist of BPJS patients, healthcare personnel, and holders of the BPJS Pcare program at Balai Makam Public Health Center. Informant criteria include willingness, clear understanding, trust, and the ability to express opinions effectively and accurately. The data in this study is divided into primary and secondary data. Primary data is obtained directly through observation, interviews, and questionnaires. Secondary data refers to data collected by others to support the research. In this study, secondary data includes the PHC's profile, information on supporting informants and experts, and data on BPJS patient visits. Data collection techniques involve gathering information through both primary and secondary data sources. Quantitative data is collected through online questionnaires (Google Forms) and direct administration to respondents. Qualitative data is collected through interviews, observations, and documentation. Instruments used include questionnaires, interview guidelines, observation sheets, and checklists. Media used include Google Forms, telephone, WhatsApp, Zoom, Google Meet, and cameras. Quantitative data processing includes editing, coding, data entry, and data cleaning. Qualitative data processing involves editing, categorizing, tabulating, and interpreting the data. The analysis of quantitative data involves descriptive statistical analysis (percentages, frequencies, means, standard deviations, medians, or modes) and inferential statistical analysis (univariate, bivariate using chi-square technique, and multivariate using multiple logistic regression). The analysis of qualitative data employs descriptive analysis, which involves data collection, organization, and descriptive interpretation.

## RESULTS AND DISCUSSION

### Univariate Analysis

#### Respondent Characteristics by Age

**Table 1.** Frequency distribution of respondent characteristics

No	Variable	Frequency	Percentage (%)
1	Age		
	20-29 Years	30	31.3
	30-39 Years	32	33.3
	≥ 40 Years	34	35.4
2	Education Level		
	No Education	0	0.0
	Elementary School	0	0.0
	Junior High School	0	0.0
	High School	43	44.8
	College/Equivalent	53	55.2
3	Gender		
	Male	31	32.3
	Female	65	67.7

Based on the table above, it is known that the majority of BPJS patients at Public Health Center Balai Makam are 40 years old or older, with a total of 34 individuals (35.4%). The majority of BPJS patients at Public Health Center Balai Makam have a college degree, with a total of 53 individuals (55.2%). The gender distribution of BPJS patients at Public Health Center Balai Makam shows that there are 65 female patients (67.7%) and only 31 male patients (32.3%).

#### Characteristics of Research Informants

**Table 2.** Characteristics of research informants

No	Informant	Age	Position	Note
1	Informant 2	38 years	Health worker at UPT Puskesmas Balai Makam	Supporting Informant
2	Informant 3	40 years	Health worker at UPT Puskesmas Balai Makam	
3	Informant 4	45 years	Health worker at UPT Puskesmas Balai Makam	
4	Informant 4	36 years	Program Holder of Pcare BPJS at UPT Puskesmas Balai Makam	Key Informant

The informants in this study consist of 4 individuals who serve as key informants and supporting informants with different expertise within Public Health Center Balai Makam. The selected informants hold different positions, educational backgrounds, and age groups. This was done by the researcher to obtain relevant information related to the research. The informants were selected through interviews and observations regarding the satisfaction and services provided to BPJS patients.

#### Frequency Distribution of Dependent and Independent Variables

The results of the univariate analysis of the dependent variable, which is the frequency distribution of BPJS patient satisfaction, and the independent variables, which are reliability, responsiveness, physical evidence, empathy, and assurance provided by the stakeholders in Public Health Center Balai Makam, can be seen in the following Table 3:

**Table 3.** Frequency distribution of dependent and independent variables at public health center balai makam

No	Variable	Frequency (n)	Percentage (%)
1	Reliability		

	Not reliable	78	81.3
	Reliable	18	18.8
2	Responsiveness		
	Not responsive	77	80.2
	Responsive	19	19.8
3	Insurance Coverage		
	Poor	73	76.0
	Good	23	24.0
4	Physical Evidence		
	Incomplete	54	56.3
	Complete	42	43.8
5	Empathy		
	Lack of empathy	74	77.1
	Empathetic	22	22.9
6	Satisfaction of BPJS Patients		
	Dissatisfied	50	52.1
	Satisfied	16	47.9
	Total	96	100

Table 3 shows that the majority of BPJS patients do not perceive the reliability of the services provided by Public Health Center Balai Makam, with a total of 78 individuals (81.3%) expressing dissatisfaction in this aspect. Additionally, the responsiveness of the healthcare providers in delivering services is also perceived as inadequate by 77 individuals (80.2%). Furthermore, the assurance provided by Public Health Center Balai Makam is also considered to be subpar. Interviews with the research informants revealed low ratings in terms of reliability, responsiveness, assurance, physical evidence, and empathy in the quality of services provided at Balai Makam Public Health Center. Both primary and supporting informants highlighted limitations in service reliability, such as staff negligence, understaffing, and long waiting times. Responsiveness of the services was also deemed unreliable, particularly in addressing patient complaints and medication limitations. The assurance of the services was perceived as lacking due to insufficient physical facilities, such as comfortable rooms and adequate equipment. The physical evidence of the services was also regarded as unreliable, especially regarding room cleanliness and waiting times. Additionally, the primary informants considered the services to lack empathy, particularly in responding to patient complaints. Improvements in these aspects are necessary to enhance the quality of services provided by Balai Makam Public Health Center.

**Bivariate Analysis**

The bivariate analysis of patient satisfaction with BPJS at the Public Health Center of Balai Makam in 2022 can be seen in the following Table 4:

**Table 4.** Bivariate analysis results of dependent and independent variables at the public health center of balai makam

No	Variabel	Patient Satisfaction with BPJS						P-Value	OR (95%CI)
		Dissatisfie		Satisfied		Total			
		n	%	n	%	n	%		
1.	Reliability:								
	a. Not reliable	47	60,3	31	39,7	78	100	0,002	7,581 (2,025-28,376)
	b. Reliable	3	16,7	15	83,3	18	100		
2.	Responsiveness:								
	a. Unresponsive	48	63,3	29	37,7	77	100	< 0,01	14,069 (3,028-65,362)
	b. Responsive	2	10,5	17	89,5	19	100		
3.	Guarantee/Insurance:								
	a. Poor	48	65,8	25	34,2	73	100	< 0,01	20,160 (4,370-92,994)
	b. Good	2	8,7	21	91,3	23	100		
4.	Physical evidence:								
	a. Incomplete	37	68,5	17	31,5	54	100	< 0,01	4,855 (2,033-11,595)
	b. Complete	13	31,0	29	69,0	42	100		

No	Variabel	Patient Satisfaction with BPJS						P-Value	OR (95%CI)
		Dissatisfie		Satisfied		Total			
		n	%	n	%	n	%		
5.	Empathy:								
	a. Lacking empathy	48	64,9	26	35,1	74	100	< 0,01	18,462 (3.998-85,250)
	b. Empathetic	2	9,1	20	90,9	22	100		
	Total	50	52,1	46	47,9	96	100		

Table 5 shows that out of 50 BPJS patients who are dissatisfied, 47 respondents (94.0%) stated that the service quality is unreliable, 48 patients (96.0%) mentioned that the service is unresponsive, 48 patients (96.0%) expressed dissatisfaction with the insurance coverage, and 37 patients (74.0%) reported that the physical evidence of the service is incomplete. Additionally, 48 patients (96.0%) felt that the service lacked empathy. On the other hand, among the 46 satisfied patients, 15 patients (32.6%) considered the service to be reliable, 17 patients (37.0%) found it responsive, 21 patients (45.7%) were satisfied with the insurance coverage, 29 patients (63.0%) perceived the physical evidence as complete, and 20 patients (43.5%) felt that the service showed empathy. Based on the bivariate analysis, all five independent variables (reliability, responsiveness, insurance coverage, physical evidence, and empathy) have a significant effect ( $p$ -value < 0.05) on patient satisfaction with BPJS at the UPT Puskesmas Balai Makam in 2022.

### Multivariate Analysis

The multivariate analysis used in this study is multiple logistic regression. The bivariate selection results are shown in the following Table 5:

**Table 5.** Bivariate selection results for multivariate candidates ( $p < 0.25$ ) of bpjs patient satisfaction at UPT Puskesmas Balai Makam."

Independent Variables	P value	Description
Reliability	0.003	Candidate
Responsiveness	0.001	Candidate
Guarantee/Insurance	0.000	Candidate
Physical Evidence	0.000	Candidate
Empathy	0.000	Candidate

Based on the bivariate selection results, it is found that there are no variables with a  $P$ -value > 0.25. Therefore, the next step is to include all of these variables in the multivariate analysis in the subsequent modeling.

### Multivariate Modeling 1

**Table 6.** Multivariate modeling 1

Variable	P Value	POR	95% CI	
			Lower	Upper
Reliability	0,013	11,040	1,666	73,140
Responsiveness	0,005	21,378	2,577	177,362
Guarantee/Insurance	0,006	16,111	2,245	115,596
Physical Evidence	0,000	12,787	3,123	52,351
Empathy	0,068	6,111	0,887	42,567

Based on the table above, it shows that there are variables with a  $P$ -value > 0.05. Therefore, those variables will be excluded from the model equation. The variable that is excluded is the empathy variable.

### Multivariate Modeling 2

The results of the second modeling, after excluding the empathy variable ( $p = 0.068$ ), can be seen in the table below:

**Table 7.** Multivariate modeling 2

Variable	P Value	POR	95% CI	
			Lower	Upper
Reliability	0,017	9,537	1,506	60,383
Responsiveness	0,005	19,193	2,475	148,833
Guarantee/Insurance	0,000	30,777	4,533	208,949
Physical Evidence	0,000	14,254	3,589	56,618

The results of the multivariate analysis indicate that all variables have been successfully selected as they have a p-value < 0.05. The next step in the modeling aims to determine whether the empathy variable is a confounding variable or not. This is done by examining the changes in OR (Odds Ratio) before and after excluding the empathy variable from the model. We assess whether there is a change in OR > 10% or not. The results of the change in OR are presented in the following table:

**Table 8.** Change in OR for empathy after exclusion

Variabel	POR with Empathy variable	OR without Empathy variable	Percentage Change in OR
Reliability	11,040	9,537	15,76
Responsiveness	21,378	19,193	11,38
Guarantee/Insurance	16,111	30,777	47,65
Physical Evidence	12,787	14,254	10,29
Empathy	6,111	-	-

Based on the table above, it shows that there is a change in POR (Percentage Change in Odds Ratio) exceeding 10%. Therefore, the empathy variable is considered a confounding variable and will be included back into the final model.

### Final Multivariate Modeling

**Table 9.** Final multivariate modeling

Variabel	P Value	POR	95% CI	
			Lower	Upper
Reliability	0,013	11,040	1,666	73,140
Responsiveness	0,005	21,378	2,577	177,362
Guarantee/Insurance	0,006	16,111	2,245	115,596
Physical Evidence	0,000	12,787	3,123	52,351
Empathy	0,068	6,111	0,887	42,567

Based on Table 9, the final multivariate modeling results can be explained as follows: confounding analysis revealed that empathy is a confounding variable in the relationship between reliability, responsiveness, assurance, and tangibles and the satisfaction of BPJS patients at the Balai Makam Community Health Center in 2022. Unreliable service quality poses an 11-fold risk of dissatisfaction (OR: 11.040; 95% CI: 1.666-73.140), unresponsive service quality poses a 21-fold risk (OR: 21.378; 95% CI: 2.577-177.362), poor assurance poses a 16-fold risk (OR: 16.111; 95% CI: 2.245-115.596), and incomplete physical evidence poses a 13-fold risk (OR: 12.787; 95% CI: 3.123-52.351), all after controlling for empathy. The Omnibus test yielded a p-value of 0.000, indicating the suitability of the multivariate model, while the Nagelkerke R Square value of 0.649 suggests that 64.9% of patient satisfaction is explained by reliability, responsiveness, assurance, and tangibles, after controlling for empathy, with the remaining 35.1% attributed to unexplored variables.

### Discussions

This study provides a clear overview of the level of satisfaction among BPJS patients at the Balai Makam Community Health Center. In this study, the majority of patients, accounting for 52.1%, expressed dissatisfaction with the services provided. This indicates that more than half of

the patients are not satisfied with the quality of care they receive at the health center. The dissatisfaction among patients may stem from a mismatch between their expectations and the services provided. BPJS patients have expectations of receiving adequate, effective, and tailored care. However, this study demonstrates that several factors influence patient satisfaction at the Balai Makam Community Health Center. Significant variables associated with BPJS patient satisfaction at the Balai Makam Community Health Center in Bathin Solapan District include reliability (p-value 0.002; OR= 7.581), responsiveness (p-value 0.000; OR= 14.069), assurance (p-value 0.000; OR= 20.160), tangibles (p-value 0.001; OR= 4.885), and empathy (p-value 0.000; OR= 18.462). This indicates that these factors have a significant impact on BPJS patient satisfaction, highlighting the need for attention and improvement in efforts to enhance the quality of services at the Balai Makam Community Health Center in Bathin Solapan District. Firstly, the reliability of service delivery has a significant influence on patient satisfaction. Patients expect reliable care that aligns with the agreed-upon standards, such as clear information about their condition, the treatments provided, and prescribed medications. However, in this study, service reliability at the health center was perceived as unsatisfactory. One of the main reasons is the lack of adequate explanations regarding medical procedures by healthcare providers. The presence of long queues also contributes to the perceived lack of reliability in service delivery. This research provides a clear picture of the level of satisfaction among BPJS patients at the Balai Makam Community Health Center. In this study, the majority of patients, accounting for 52.1%, expressed dissatisfaction with the services provided.

This indicates that more than half of the patients feel unsatisfied with the quality of care they receive at the health center. The dissatisfaction among patients may be due to a mismatch between their expectations and the services provided. BPJS patients have expectations of receiving adequate, effective, and tailored care. However, this study reveals that several factors influence patient satisfaction at the Balai Makam Community Health Center in Bathin Solapan District. Firstly, responsiveness, the factor related to service promptness and attentiveness, has a significant association with patient satisfaction. Patients expect responsive and attentive care that addresses their needs and requests. However, this study found that some patients desired longer consultations to provide more detailed explanations of their complaints. This can potentially decrease patient satisfaction. Additionally, the empathy of healthcare providers plays a crucial role in the relationship between service responsiveness and patient satisfaction. The presence of empathetic attitudes from healthcare providers can provide the necessary comfort and attention required by patients. Secondly, assurance, the factor related to the competence and credibility of healthcare providers, is closely associated with patient satisfaction. Patients desire doctors who possess knowledge and the ability to accurately diagnose diseases and provide reassuring explanations. However, in this study, some patients felt uncertain due to the lack of reassuring attitudes from doctors. In this regard, patient trust in the competence and credibility of healthcare providers significantly affects their satisfaction (Gunawan & Saragih, 2019, Pranata, 2019). The findings of this research are consistent with previous studies that highlight the contributions of reliability, responsiveness, and assurance to patient satisfaction. Therefore, this study strongly indicates the importance of improving the quality of services at the Balai Makam Community Health Center. Previous studies, such as Abidin demonstrated a positive influence of BPJS Health service quality on patient (Cendi et al., 2020, Cahyati, P. 2021).

Furthermore, research by Rizal & Jalpi, 2022; Setiawan et al., 2022) confirmed the relationship between healthcare service quality and patient satisfaction among BPJS Health users at the Segiri Health Center in Samarinda City. a relationship between healthcare service quality and BPJS participant satisfaction at the Inpatient Unit of the Cibungbulang Health Center in Bogor Regency (Umam et al., 2019, Aminingsih, 2023).. Amary and Suprayitno analyzed the relationship between facilities and patient satisfaction among BPJS users at the Segiri Health Center in Samarinda City, emphasizing the importance of adequate facilities in enhancing patient. play a

crucial role in influencing BPJS patient satisfaction at various health centers (Kosnan, 2020; Putri et al., 2018; Shabri et al., 2020). This research highlights that reliability, responsiveness, and assurance are important factors influencing patient satisfaction at the Balai Makam Community Health Center. In efforts to enhance patient satisfaction, several steps can be taken. Firstly, it is crucial to improve service reliability. Patients expect reliable care that aligns with agreed-upon standards. To achieve this, adequate explanations regarding medical procedures need to be provided. Additionally, addressing long queues is essential to ensure that patients feel they receive timely care. Secondly, service responsiveness needs to be enhanced. Healthcare providers should respond quickly and appropriately to patient needs and requests. Optimizing consultation time can help patients feel heard and have their needs met (Noprianty, 2019; Nugraheni, 2018). It is also important to develop mechanisms that allow for more in-depth consultations for patients who require them. Furthermore, assurance in service delivery should be improved. Healthcare providers need to have sufficient knowledge and competence to make accurate diagnoses and provide convincing explanations to patients (Dewi et al., 2021; Imran et al., 2021; Prihartini et al., 2020). Reassuring attitudes and empathy from doctors are also essential in building patient trust and comfort. Patient satisfaction not only has an impact on individuals but also on public trust in the government. Therefore, it is crucial for the government to pay attention to the findings of this research and take necessary actions to improve the quality of services at the Balai Makam Community Health Center. In conclusion, this study sheds light on the factors of reliability, responsiveness, assurance, and empathy that significantly influence the satisfaction of BPJS patients at the Balai Makam Community Health Center. By addressing these factors and taking steps to improve service quality, healthcare providers and policymakers can work towards enhancing patient satisfaction and ultimately improving the overall healthcare experience for BPJS patients in the community.

## CONCLUSION

The level of patient satisfaction at the Balai Makam Community Health Center in Bathin Solapan Subdistrict is mostly dissatisfactory, with 50 patients (52.1%) expressing dissatisfaction with the provided services. The variables of reliability, responsiveness, assurance, physical evidence, and empathy significantly influence the satisfaction of BPJS patients. After controlling for empathy, reliability has a significant impact of 7.581 times, responsiveness has an impact of 14.069 times, assurance has an impact of 20.160 times, physical evidence has an impact of 4.885 times, and empathy has an impact of 18.462 times on patient satisfaction. Responsiveness of the services emerges as the most dominant factor influencing patient satisfaction. Furthermore, findings from in-depth interviews with informants also reveal that the physical evidence factor significantly affects the satisfaction of BPJS patients. Improving this factor would result in increased patient satisfaction.

The research on "Patient Satisfaction Analysis of BPJS at the Balai Makam Community Health Center in Bathin Solapan Subdistrict, Bengkalis Regency" contributes to the understanding of healthcare service quality and patient experiences within the context of the Indonesian national health insurance program (BPJS). By assessing patient satisfaction, the study offers insights into the effectiveness of healthcare delivery, staff competence, communication, and facilities at the community health center. The findings have practical implications for improving service quality and patient-centered care, which are crucial for enhancing the overall healthcare experience and increasing trust in the BPJS system. This research is also relevant on a broader scale as it provides valuable lessons for healthcare providers and policymakers striving to optimize healthcare services and patient satisfaction in the context of national health insurance programs in Indonesia and potentially other similar settings.

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