

Original Article

The Influence Of Marketing Mix And Service Quality On Outpatient Satisfaction And Loyalty

Pengaruh Marketing Mix dan Kualitas Layanan terhadap Kepuasan dan Loyalitas Pasien Rawat Jalan

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Abstract

Increasing competition in healthcare services requires health facilities to improve service quality and implement effective marketing strategies to sustain service utilization. Patient satisfaction and loyalty are essential indicators because they influence revisit intentions and the long-term sustainability of healthcare institutions. This study aimed to analyze the influence of the marketing mix and service quality on outpatient satisfaction and loyalty at Asinua Health Center, Konawe Regency, Southeast Sulawesi. This study employed a quantitative approach with a cross-sectional design. The research was conducted in December 2025 at the Asinua Health Center involving 128 respondents selected through purposive sampling. Data were collected using a structured questionnaire and analyzed using univariate analysis, bivariate analysis with the Chi-Square test, and multivariate analysis using Structural Equation Modeling-Partial Least Square (SEM-PLS) through SmartPLS software. The results showed that most respondents perceived the marketing mix and service quality variables as good. Bivariate analysis indicated that most independent variables were significantly associated with patient satisfaction and loyalty ($p < 0.05$), except for price and place variables which showed no significant association with patient satisfaction ($p > 0.05$). Multivariate analysis demonstrated that all independent variables, including product, price, promotion, place, process, tangibles, empathy, reliability, responsiveness, and assurance, had a significant influence on both patient satisfaction and patient loyalty ($p < 0.05$). The marketing mix and service quality significantly influence outpatient satisfaction and loyalty. Improving service quality and implementing effective marketing strategies are essential to enhance patient satisfaction and strengthen patient loyalty toward healthcare facilities.

Abstrak

Persaingan layanan kesehatan yang semakin kompetitif menuntut fasilitas kesehatan untuk meningkatkan kualitas pelayanan serta menerapkan strategi pemasaran yang efektif guna mempertahankan keberlanjutan layanan. Kepuasan dan loyalitas pasien merupakan indikator penting karena berpengaruh terhadap kunjungan ulang dan keberlangsungan pelayanan kesehatan. Penelitian ini bertujuan menganalisis pengaruh bauran pemasaran (marketing mix) dan kualitas pelayanan terhadap kepuasan serta loyalitas pasien rawat jalan di Puskesmas Asinua, Kabupaten Konawe, Sulawesi Tenggara. Penelitian ini menggunakan pendekatan kuantitatif dengan desain cross-sectional. Penelitian dilaksanakan pada bulan Desember 2025 di Puskesmas Asinua dengan jumlah sampel sebanyak 128 responden yang dipilih menggunakan teknik purposive sampling. Data dikumpulkan melalui kuesioner terstruktur dan dianalisis menggunakan analisis univariat, bivariat dengan uji Chi-Square, serta analisis multivariat menggunakan Structural Equation Modeling-Partial Least Square (SEM-PLS) melalui perangkat lunak SmartPLS. Hasil analisis menunjukkan bahwa sebagian besar responden menilai variabel bauran pemasaran dan kualitas pelayanan berada pada kategori baik. Analisis bivariat menunjukkan bahwa sebagian besar variabel independen memiliki hubungan signifikan dengan kepuasan dan loyalitas pasien ($p < 0,05$), kecuali variabel harga dan lokasi terhadap kepuasan pasien ($p > 0,05$). Analisis multivariat menunjukkan bahwa seluruh variabel independen, yaitu produk, harga, promosi, tempat, proses, bukti fisik (tangibles), empati, keandalan (reliability), daya tanggap (responsiveness), dan jaminan (assurance) berpengaruh signifikan terhadap kepuasan dan loyalitas pasien ($p < 0,05$). Bauran pemasaran dan kualitas pelayanan memiliki pengaruh signifikan terhadap kepuasan dan loyalitas pasien rawat jalan. Peningkatan kualitas layanan dan pengelolaan strategi pemasaran yang efektif diperlukan untuk meningkatkan kepuasan pasien serta memperkuat loyalitas pasien terhadap fasilitas pelayanan kesehatan.

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BACKGROUND

In an era of increasingly fierce competition in health services, supported by rapid advances in science and technology, the type of service and operational model of health facilities are easy to imitate by other institutions. Such competition demands that healthcare providers continue to improve quality and differentiation in order to maintain and expand their market share (1). The degree of public health of a country is greatly influenced by the existence of health facilities and infrastructure, both health service facilities and health education institutions that produce health workers. Health facilities consist of health centers, hospitals, and Community Sourced Health (UKBM) efforts (2).

Health facilities that are able to get repeat visits from patients get various benefits, both economically and non-economically (1). This is in line with the view that loyal patients are the most valuable asset if patients are satisfied with the services they receive, they will not only return, but can also recommend the facility to family, friends, or colleagues. In a competitive environment, the patient's intention to return (repurchase intention) is very important because it affects the sustainability of healthcare facilities (2). The long-term success of a healthcare institution depends not only on its ability to attract new patients, but on its ability to retain old patients because retaining existing customers is generally cheaper than the cost of acquiring new ones (3).

The quality of health services is one of the important factors in the use of health services (2). The assessment of the quality of good service is not limited to the physical healing of diseases, but also to the attitude, knowledge and skills of officers in providing services, communication, information, manners, punctuality, responsiveness and the availability of adequate physical facilities and environment (3). One of the

indicators is very important in health services (4).

Loyalty in the context of the patient refers to a positive attitude, buyback behavior, and a long-term commitment to a particular healthcare service. Furthermore, in the health literature, a long-term commitment to the treatment process and adherence to medical advice is often considered crucial for improving the quality of care and clinical outcomes of patients. Therefore, it is important for service providers to understand the factors that influence the intention of a patient's revisit the things that underlie the patient's loyalty (5).

One of the efforts of hospital management to increase the number of patient visits is to design a hospital marketing strategy. Marketing strategies use tools to get the desired response from the target market. These tools form a marketing mix (marketing mix). The marketing mix consists of five main components, namely product, price, place, promotion, dan process. Patient satisfaction as a consumer is very important in analyzing the marketing mix of services from a hospital (6).

Patient satisfaction itself arises when the service experience received meets or exceeds their expectations. Studies have shown that satisfaction is the main key that influences a patient's intention to return. Loyal patients will continue the purchase relationship. Patient loyalty is a patient who not only buys back a good and service, but also has a commitment and positive attitude towards the service company, for example by recommending others to buy it (7).

Forming patient loyalty and increasing patient satisfaction so that the fulfillment of needs that are a source of patient satisfaction must be further improved. The role of the current marketing mix is not only to convey products or services to consumers but also how the product or service provides satisfaction to customers by generating profits. The goal of the marketing mix is to attract customers by

promising superiority, setting attractive prices, distributing products easily, promoting effectively, and retaining existing customers while maintaining the principle of patient satisfaction ⁽⁸⁾.

The level of satisfaction with service is greatly influenced by the quality of a product (both in the form of goods and services) so that the measurement of the level of satisfaction or a product is measured. Very closely related to the quality of the product customers are satisfied, will buy more and more often, they will recommend to their relatives and friends. In addition, patients who feel satisfied will comply with the treatment and want to come for treatment again. The problem that is often faced by hospitals in general is that hospitals have not been able to provide something that service users really expect. The main factor is because the services provided are of low quality so that they have not been able to produce the services expected by patients ⁽⁹⁾.

To foster this loyalty, good service quality is needed, in addition to the optimal quality of service which will certainly provide a sense of satisfaction for patients undergoing treatment. Good service will cause satisfaction for patients and have an impact on the growth of patient loyalty as service users.

Based on a preliminary study conducted by researchers at the Asinua Health Center, in recent years there have been fluctuations in the number of patient visits at the polyclinic. In 2021 the number of outpatient visits reached 5,020 visits, decreasing to 3,650 visits in 2022. This decline was caused by several factors such as patient distance, availability of health workers, and public perception of service quality.

In addition to the secondary data of the visit, the researcher has conducted a preliminary survey in September 2025 at the Asinua Health Center. The preliminary survey involved 25 respondents of polyclinic patients who were waiting for services.

Some of the findings from this survey are that about 60% of patients stated that the facilities (waiting room, hygiene, medical equipment) were inadequate. Meanwhile, 40% of respondents revealed that the medical staff/nurses were quite friendly, while the rest felt less friendly or less responsive. In terms of promotions and service notifications, 40% of patients said that they knew about polyclinic services through word of mouth or recommendations from friends/family, and only 20% got information through print media or Puskesmas banners.

In terms of facilities, the Asinua Health Center still has limitations such as the number of health workers is only 70 people, this is not comparable to the number of people in the working area of the Asinua Health Center, which is 3,087 people. In addition, the availability of drugs is not always complete, as well as medical equipment that is relatively minimal. In addition, access to the location of the health center is quite difficult, and the condition of the road is not completely paved, which makes it difficult for patients, especially during the rainy season.

In terms of promotion and marketing mix, the Asinua Health Center has not fully optimized the 7P elements such as service promotion, ease of service process, and effective communication between officers and patients. This has an impact on patient loyalty rates, which is shown by the low rate of patient revisits in a given period of only 22% of patients who come back in the last 3 months.

These preliminary findings indicate that there is a gap between patient expectations and services received, especially in terms of physical facilities, speed of service, and information communication. Therefore, this study is very important to measure more systematically the influence of marketing mix and service quality on patient satisfaction and loyalty at the Asinua Health Center.

METHODS

The type of research used is a type of quantitative research that explains the causal relationship between variables that affect the hypothesis. The research design is a cross sectional study that explains how the influence of marketing mix and service quality on outpatient satisfaction and loyalty. This research was carried out at the polyclinic of the Asinua Health Center, Konawe Regency, Southeast Sulawesi. This research was carried out for one month, namely in December 2025.

The sampling technique uses purposive sampling. Data collection in this study was carried out using a questionnaire containing a number of written questions used to obtain information from respondents regarding the influence of marketing mix and service quality on patient satisfaction and loyalty at the Asinua Health Center polyclinic, Konawe Regency, Southeast Sulawesi. The data analysis technique uses quantitative data processing methods, namely: Editing, Coding, Entry, Cleaning, Tabulating.

Data analysis uses statistics to answer the objectives of the research, namely: Univariate analysis which functions to summarize the power set of measurement results so that the data set is transformed into information. Univariate analysis consists of descriptive analysis of respondent characteristics, descriptive

analysis of research variables, and crosstabulation analysis between respondent characteristics and research variables. Bivariate analysis was carried out to find out whether or not there was an influence of each independent variable with the bound variables together. The data analysis will use the Chi-Square test. In this study, we analyzed the influence patterns between variables with the aim of determining the extent of direct and indirect influence with a set of independent (exogenous) variables on bound variables (endogenous). The exogenous variable is the marketing mix and service quality, while the endogenous variable is patient satisfaction and patient loyalty. Through path analysis, it can be found which path is the most appropriate and short of an exogenous variable to the related endogenous variable. Therefore, the appropriate analysis model for this study is path analysis using smartpls software. Smart PLS (Structural Equation Modeling based on Variance) is a program or tool specifically designed to estimate structural equations with the basis of variance and when data is abnormal. The analysis used to see if the dimension we use correctly measures the variable being studied, namely using Path Analyse.

RESULTS AND DISCUSSION

The results of this study can be seen in the table and discussion below:

Table 1. Respondent Characteristics

Features	Quantity	
	n	%
Age		
17-25	20	15,63
26-35	47	36,72
36-45	32	25,00
46-55	19	14,84
> 55	10	7,81
Gender		
Male	54	42,19
Women	74	57,81
Education		
SD	12	9,38

SMP	34	26,56
SMA	69	53,91
S1	13	10,16
Employment Status		
Student/Student	18	14,06
CIVIL	26	20,31
SERVANT/TNI/POLRI		
Private	45	35,16
Entrepreneurship	21	16,41
Housewives	14	10,94
Not Working	4	3,13

Based on the Table 1 showed the results of the analysis, the age distribution of patients showed that most of the respondents were in the age group of 26–35 years as many as 47 patients (36.72%), while at least 10 patients were over 55 years old (7.81%). Based on gender, the majority of patients were female as many as 74 patients (57.81%), while male patients were 54 patients (42.19%). Judging from the level of

education, most patients have a high school education background as many as 69 patients (53.91%), and at least 12 patients have elementary education (9.38%). Meanwhile, based on employment, most of the patients worked in the private sector as many as 45 patients (35.16%), while the least patients were 4 patients who did not work (3.13%).

Table 2. Descriptive Analysis of Variables

Variabel	Quantity	
	n	%
Products		
Not Good	48	37,50
Good	80	62,50
Pricing		
Not Good	10	7,81
Good	118	92,19
Promotions		
Not Good	36	28,13
Good	92	71,88
Location		
Not Good	48	37,50
Good	80	62,50
Process		
Not Good	41	32,03
Good	87	67,97
Tangible		
Not Good	39	30,47
Good	89	69,53
Empathy		
Not Good	46	35,94
Good	82	64,06
Reliability		
Not Good	32	25,00
Good	96	75,00
Responsive		
Not Good	49	38,28
Good	79	61,72
Insurance		
Not Good	45	35,16

Good	83	64,84
Patient loyalty		
Not Good	53	41,41
Good	75	58,59
Patient satisfaction		
Not Good	38	29,69
Good	90	70,31

Based on the table 2 showed the results of the descriptive analysis, the majority of respondents assessed that all research variables were in the good category. In the product variable, most patients stated that the product was in the good category as many as 80 patients (62.50%), as well as in the price variable which was rated good by 118 patients (92.19%), promotion by 92 patients (71.88%), and place by 80 patients (62.50%). The process variables were also mostly in the good category as many as 87

patients (67.97%), as well as Tangibles as many as 89 patients (69.53%), empathy as many as 82 patients (64.06%), reliability as many as 96 patients (75.00%), responsiveness as many as 79 patients (61.72%), and assurance A total of 83 patients (64.84%). In addition, the patient satisfaction variable showed that most of the respondents were in the good category as many as 90 patients (70.31%), while patient loyalty was also dominated by the good category.

Table 3. Bivariate Analysis of Patient Loyalty

	Patient Loyalty				Total		P-value
	Not Good		Good		n	%	
	n	%	n	%			
Products							
Not Good	33	25,78%	15	11,72%	48	37,50%	0,000
Good	22	17,19%	58	45,31%	80	62,50%	
Pricing							
Not Good	6	4,69%	4	3,13%	10	7,81%	0,257
Good	49	38,28%	69	53,91%	118	92,19%	
Promotions							
Not Good	23	17,97%	13	10,16%	36	28,13%	0,003
Good	32	25,00%	60	46,88%	92	71,88%	
Location							
Not Good	27	21,09%	21	16,41%	48	37,50%	0,019
Good	28	21,88%	52	40,63%	80	62,50%	
Process							
Not Good	29	22,66%	12	9,38%	41	32,03%	0,000
Good	26	20,31%	61	47,66%	87	67,97%	
Tangible							
Not Good	24	18,75%	15	11,72%	39	30,47%	0,005
Good	31	24,22%	58	45,31%	89	69,53%	
Empathy							
Not Good	26	20,31%	20	15,63%	46	35,94%	0,020
Good	29	22,66%	53	41,41%	82	64,06%	
Reliability							
Not Good	22	17,19%	10	7,81%	32	25,00%	0,001
Good	33	25,78%	63	49,22%	96	75,00%	
Responsive							
Not Good	28	21,88%	21	16,41%	49	38,28%	0,011
Good	27	21,09%	52	40,63%	79	61,72%	
Insurance							
Not Good	26	20,31%	19	14,84%	45	35,16%	0,013

Good	29	22,66%	54	42,19%	83	64,84%
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Table 3 showed the results of the analysis showed that most variables had a significant relationship with patient loyalty. Products, promotions, places, processes, tangibles, empathy, reliability, responsiveness, and assurance each showed a p-value of < 0.05, which means that there was a significant relationship with patient loyalty, where in the good rating category, most patients also had good loyalty. In contrast, the price variable showed a p-value of 0.257 (p-value > 0.05), so there was no significant relationship between price and patient loyalty.

Table 4 showed the results of the analysis showed that most of the variables had a significant relationship with patient satisfaction. In the product variable, patients with good category product assessments mostly had good category satisfaction of 46.09%, while in the poor

product category, it was dominated by poor category satisfaction of 25.00%, with a p-value of 0.000. The variables of promotion, process, tangible, empathy, reliability, responsiveness, and assurance also showed a significant relationship with patient satisfaction (p-value < 0.05), where the assessment of the good category was followed by satisfaction of the good category of 50.00%, 46.09%, 48.44%, 44.53%, 49.22%, 42.97%, and 42.19%, respectively. In contrast, the price and place variables did not show a significant association with patient satisfaction, with p-values of 0.566 and 0.057 respectively (p-value > 0.05), although in the good assessment category most patients retained good category satisfaction. These findings show that patient satisfaction is more influenced by product aspects and service quality than price and venue factors

Table 4. Bivariate Analysis of Patient Satisfaction

	Patient Satisfaction				Total		P-value
	Not Good		Baik		n	%	
	n	%	n	%			
Products							
Not Good	32	25,00%	16	12,50%	48	37,50%	0,000
Good	21	16,41%	59	46,09%	80	62,50%	
Pricing							
Not Good	5	3,91%	5	3,91%	10	7,81%	0,566
Good	48	37,50%	70	54,69%	118	92,19%	
Promotions							
Not Good	25	19,53%	11	8,59%	36	28,13%	0,000
Good	28	21,88%	64	50,00%	92	71,88%	
Location							
Not Good	25	19,53%	23	17,97%	48	37,50%	0,057
Good	28	21,88%	52	40,63%	80	62,50%	
Process							
Not Good	25	19,53%	16	12,50%	41	32,03%	0,002
Good	28	21,88%	59	46,09%	87	67,97%	
Tangible							
Not Good	26	20,31%	13	10,16%	39	30,47%	0,000
Good	27	21,09%	62	48,44%	89	69,53%	
Empathy							
Not Good	28	21,88%	18	14,06%	46	35,94%	0,001
Good	25	19,53%	57	44,53%	82	64,06%	
Reliability							
Not Good	20	15,63%	12	9,38%	32	25,00%	0,005
Good	33	25,78%	63	49,22%	96	75,00%	
Responsive							
Not Good	29	22,66%	20	15,63%	49	38,28%	0,001
Good	24	18,75%	55	42,97%	79	61,72%	

<i>Insurance</i>							
Not Good	24	18,75%	21	16,41%	45	35,16%	0.013
Good	29	22,66%	54	42,19%	83	64,84%	

Table 5 Analysis of the Direct Influence of Variable X on Variable Y1

Hipotesis	Influence of intervariable X on Y1	Original Sample (O)	T Statistics (O/STDEV)	P values	Remarks
a	Patient Satisfaction > Products	0,264	6,312	0,000	Signifikan
b	Price -> Patient Satisfaction	0,121	2,937	0,003	Signifikan
c	Promotion -> Patient Satisfaction	0,196	4,009	0,000	Signifikan
d	Patient Satisfaction > Place	0,245	6,774	0,000	Signifikan
e	Process -> Patient Satisfaction	0,131	2,867	0,004	Signifikan
f	<i>Tangibles</i> -> Patient Satisfaction	0,190	4,680	0,000	Signifikan
g	Empathy -> Patient Satisfaction	0,234	5,789	0,000	Signifikan
h	<i>Reliability</i> -> Patient Satisfaction	0,217	5,418	0,000	Signifikan
i	Responsive -> Patient Satisfaction	0,262	6,932	0,000	Signifikan
j	<i>Assurance</i> -> Patient Satisfaction	0,243	5,396	0,000	Signifikan

Based on the Table 5, the results of the direct influence analysis show that all independent variables have a significant effect on patient satisfaction. The product variable had a path coefficient of 0.264 with a T-Statistics value of 6.312 and a p-value of 0.000, which showed a significant influence on patient satisfaction. The price variable also had a significant effect with a coefficient of 0.121, T-Statistics 2.937, and a p-value of 0.003. Furthermore, promotion

(O = 0.196; T = 4.009; p-value = 0.000), place (O = 0.245; T = 6,774; p-value = 0.000), process (O = 0.131; T = 2,867; p-value = 0.004), Tangibles (O = 0.190; T = 4,680; p-value = 0.000), empathy (O = 0.234; T = 5,789; p-value = 0.000), reliability (O = 0.217; T = 5,418; p-value = 0.000), responsive (O = 0.262; T = 6,932; p-value = 0.000), and insurance (O = 0.243; T = 5,396; p-value = 0.000) all have a p-value of less than 0.05.

Table 6 Analysis of the Direct Influence of Variable X on Variable Y2

Hipotesis	Influence of intervariable X on Y2	Original Sample (O)	T Statistics (O/STDEV)	P values	Remarks
a	Product -> Patient loyalty	0,284	6,459	0,000	Signifikan
b	Price -> Patient loyalty	0,168	4,243	0,000	Signifikan
c	Promotions -> Patient loyalty	0,234	5,792	0,000	Signifikan
d	Patient Loyalty > Place	0,203	5,860	0,000	Signifikan
and	Process -> Patient loyalty	0,115	2,624	0,009	Signifikan
f	<i>Tangibles</i> -> Patient loyalty	0,222	5,178	0,000	Signifikan
g	Empathy -> Patient loyalty	0,173	4,578	0,000	Signifikan
h	<i>Reliability</i> -> Patient loyalty	0,263	7,074	0,000	Signifikan
i	Responsive-> Patient Loyalty	0,244	5,975	0,000	Signifikan
j	<i>Patient Loyalty</i> > Assurance	0,174	4,409	0,000	Signifikan

Based on Table 6, the results of the direct influence analysis show that all independent variables have a significant influence on patient loyalty. The product variable had a significant effect on patient loyalty with a path coefficient value of 0.284, T-Statistics 6.459, and p-value of 0.000. The

price variable also showed a significant influence with a coefficient of 0.168, T-Statistics 4.243, and a p-value of 0.000. Furthermore, promotions (O = 0.234; T = 5,792; p-value = 0.000), place (O = 0.203; T = 5,860; p-value = 0.000), process (O = 0.115; T = 2,624; p-value = 0.009), tangibles

($O = 0.222$; $T = 5.178$; $p\text{-value} = 0.000$), empathy ($O = 0.173$; $T = 4.578$; $p\text{-value} = 0.000$), reliability ($O = 0.263$; $T = 7.074$; $p\text{-value} = 0.000$), responsive ($O = 0.244$; $T = 5.975$; $p\text{-value} = 0.000$), and assurance ($O = 0.174$; $T = 4.409$; $p\text{-value} = 0.000$) all have a $p\text{-value}$ of less than 0.05.

The findings of this study indicate that both the marketing mix and service quality play a pivotal role in shaping patient satisfaction and loyalty at the Asinua Health Center. The multivariate analysis demonstrated that all independent variables—including product, price, promotion, place, process, tangibles, empathy, reliability, responsiveness, and assurance—had a significant direct effect on patient satisfaction and patient loyalty ($p < 0.05$). These results confirm that patient satisfaction and loyalty are multidimensional outcomes influenced by managerial strategies and interpersonal service interactions. This reinforces the concept that healthcare service sustainability depends on the integration of effective marketing strategies and high-quality service delivery.

The product component of the marketing mix was found to significantly influence both patient satisfaction and loyalty. Patients who perceived healthcare products—such as medical services, availability of medications, specialist services, and supporting facilities—as high quality were more likely to report higher satisfaction and demonstrate loyalty. These findings align with previous studies showing that product quality within the marketing mix significantly affects patient satisfaction and loyalty in healthcare settings^(10,11). High-quality service products enhance patients' trust in healthcare providers and strengthen long-term relationships between patients and health facilities.

Price showed a significant direct effect on patient satisfaction and loyalty in multivariate analysis; however, bivariate analysis revealed no significant relationship

between price and either satisfaction or loyalty. This suggests that while price contributes to overall evaluations when considered alongside other variables, it is not a dominant determinant when examined independently. Similar findings have been reported in previous studies indicating that patients prioritize service quality, safety, and treatment outcomes over cost considerations, particularly in settings where health insurance coverage is widely used^(12,13,26,31). This highlights that price sensitivity in healthcare is context-dependent and often secondary to perceived service value.

Promotion emerged as a significant factor influencing both patient satisfaction and loyalty. Effective promotional activities improve patient awareness, strengthen the image of healthcare facilities, and foster trust, ultimately enhancing satisfaction and encouraging repeat utilization of services. These findings are consistent with earlier studies demonstrating that promotion significantly contributes to patient satisfaction and loyalty by shaping positive perceptions and expectations of healthcare services^(14,15,32,33). Well-designed promotional strategies therefore serve as an important communication bridge between health facilities and patients.

Place was also found to significantly affect patient loyalty and, in multivariate analysis, patient satisfaction. Accessibility, strategic location, and adequacy of service facilities contribute to positive patient perceptions and willingness to return for care. However, bivariate analysis indicated that place was not significantly associated with patient satisfaction, suggesting that convenience alone is insufficient to ensure satisfaction without accompanying service quality. These findings are consistent with previous research reporting that place significantly influences loyalty but may not independently determine satisfaction when service quality expectations are not fully met^(16,17,34,35,43).

The service process demonstrated a significant influence on both patient satisfaction and loyalty. Efficient, transparent, and well-coordinated service processes reduce waiting times, minimize confusion, and enhance patient comfort, leading to higher satisfaction and sustained loyalty. This finding aligns with previous studies emphasizing that the service process represents a critical point of direct interaction between patients and healthcare providers, making it a strong predictor of satisfaction and loyalty (18,19,36,44,45). A well-managed service process ensures consistency and reliability in healthcare delivery.

All dimensions of service quality—tangibles, empathy, reliability, and responsiveness—were significantly associated with patient satisfaction and loyalty. Adequate physical facilities, professional appearance of staff, and clean environments positively shape patient perceptions of service quality (20–22,37,46). Empathy from healthcare workers fosters emotional connections and reduces patient anxiety, thereby increasing satisfaction and loyalty (23,24,38,47). Reliability and responsiveness further strengthen patient trust through consistent, timely, and accurate service provision (25–28,36,39,48). These dimensions collectively reflect the core of patient-centered care.

Assurance was also identified as a significant determinant of patient satisfaction and loyalty. Patients who feel safe, confident, and assured of healthcare workers' competence are more likely to be satisfied and remain loyal to health services. Assurance builds trust and reduces uncertainty, which is particularly important in healthcare settings where patients often experience vulnerability. These findings are consistent with prior studies demonstrating that assurance significantly influences satisfaction and loyalty by enhancing patients' sense of security and confidence in healthcare providers (29,30,40,49). Overall, the results underscore the importance of

integrating marketing mix strategies with service quality improvements to enhance patient satisfaction and loyalty in primary healthcare services.

CONCLUSION

Based on the results of this study, it can be concluded that the overall service marketing mix and service quality at the Asinua Health Center are generally perceived positively by outpatients and have a significant influence on patient satisfaction and loyalty. Service products, pricing, promotion, place, and service processes were found to contribute meaningfully to how patients evaluate their service experiences and their willingness to continue utilizing healthcare services. These findings indicate that effective management of marketing mix elements plays an important role in strengthening patient satisfaction and sustaining loyalty.

RECOMMENDATION

Furthermore, all dimensions of service quality, including tangibles, empathy, reliability, responsiveness, and assurance, were shown to significantly influence both patient satisfaction and loyalty. Patients who perceived the physical environment as adequate, experienced empathetic and reliable care, received prompt responses, and felt assured by the competence of healthcare providers were more likely to report higher satisfaction and demonstrate loyalty to the health center. Overall, the results suggest that continuous improvement in service products, pricing strategies, promotional activities, service accessibility, service processes, and service quality is essential to enhance patient satisfaction and foster long-term outpatient loyalty at the Asinua Health Center.

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