Building Patient Loyalty in Healthcare Services

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Abstract

The purpose of this study is to examine and analyze the effect of patient satisfaction to the patient's trust and patient's loyalty. The research design used survey method with data collection in cross-section through a questionnaire. Sample of 112 patients was drawn by simple random sampling. Data analysis method used in testing the hypothesis is Structural Equation Modeling (SEM). The results of the study provide evidence that high patient satisfaction has not been able to increase patient loyalty; higher patient satisfaction has an impact on the high of patient trust. High trust of patients provides a significant effect on patient's loyalty to healthcare services. Finally the results of the indirect test on patient satisfaction can increase patient loyalty if supported by high patient trust.

Key Words: Satisfaction, Trust, Loyalty, Patient, Healthcare.

Introduction

Satisfaction is the impact of customer assessment on quality and value service served by the company (Zeithaml & Bitner, 2004). The healthcare service which is failed to understand the customer satisfaction may result a bankruptcy. The success of the company to maintain customer loyalty is influenced by many factors, among others is: the trust and customer satisfaction. The high level of service performance is believed to be an effective way to increase trust and customer loyalty (Huang & Liu, 2010; Kim et al., 2007). Empirical evidence shows that customer satisfaction has a positive and significant effect on customer trust (Jani & Han, 2011; Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Chung & Shin, 2010). Customer satisfaction is positively and significant affect the customer loyalty (Dagger & O’Brien, 2010; Sheng & Liu, 2010; Norizan & Asiah, 2010). There has been a debate in explaining the effect of satisfaction on loyalty. Providing evidence that satisfaction has a negative effect and insignificant on customer loyalty (Komunda & Osarenkhoe, 2012). Functionally, the dimensions of satisfaction has no significant influence on customer loyalty (Abu-ELSamen et al., 2011).

Other causality shows that customer trust has direct positive and significant influence on customer loyalty (Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Chung & Shin, 2010; Mohd Kassim & Ismail, 2009). The debate stating that customers trust has no significant effect on customer loyalty (Jani & Han, 2011; Dagger & O’Brien, 2010; Gil-Saura et al., 2009). Gaps occur due to the findings of the trust should be built on the basis of long-term relations with customers so that the customers trust that just happened did not have a significant effect on customer loyalty (Dagger & O’Brien, 2010). The findings of previous studies generally show that satisfied customers have the trust and loyalty in using the services, but still there is a contradiction of the findings and needs clarity so that the necessary empirical studies that analyze the causality between these variables.
The Influence of Satisfaction with Patient Trust

Satisfaction has significant meaning in marketing concept and is usually associated with a motto of satisfying customer needs. The uses of the term satisfaction in today’s modern era tends to expand and related to the words satisfactory (suitability) and satisfy (made into fun). Term customer satisfaction in marketing management itself has a very specific meaning. Customer satisfaction is the customer feedback on the requirement. Several theories have been proposed to explain customer satisfaction. Based on the expectancy disconfirmation theory explained that customers buy goods and services with expectations at the time of the pre-purchase through the assessment of performance that could be anticipated. This means that once the product or service has been purchased and used, the results can be compared with expectations. If the outcome is as expected means that the confirmation occurs. Disconfirmation occurs when there is a difference between expectations and outcomes. Satisfaction caused by confirmation or positive disconfirmation of expectations and dissatisfaction caused by negative disconfirmation of consumer expectations (Oliver, 1980).

Another theory, the theory of personal control (personal control theory), explained that the satisfaction is based on a person's life or work experience related to perception through psychological comparisons between actions and desired outcomes (Rotter, 1966). In healthcare services, patients considered themselves should have a lot of personal control over the process of healing. Acting as the cause of the behavior itself makes patients more satisfied with treatment than others (Li et al., 2011). Referring to the results of the measurement of patient satisfaction has been done by previous researchers, the measurement of patient satisfaction variables in this study consists of five indicators which adopted from the theory of personal control theory and models of cumulative satisfaction in healthcare services from the perspective of patients, namely: (1) feeling satisfied with healthcare services which better than expected; (2) satisfied with the services (examination results) of the doctor / nurse; (3) sense of satisfaction on the clinical treatment is received; (4) satisfied with the services and prescription drugs; (5) feeling satisfied with the information provided by officer / doctor about the patient's condition (Padma et al., 2010; Li et al., 2011).

Previous research provides evidence that customer satisfaction has positive and significant influence on customer trust (Gustaffson & Johnson, 2004; Kantsperger & Kunz, 2010; Chung & Shin, 2010; Shao Yeh & Li, 2009; Sahadev & Purani, 2008; Jani & Han, 2011; Norizan & Asiah, 2010). The findings of the debate provides evidence that the satisfaction does not significantly influence customer trust (Mold Kassim & Ismail, 2009). The difference in the results of empirical study on the effect of service quality on customer satisfaction may occur. One of the reasons is that diversity and differences in measurements on indicators. This study therefore very important to do because it can clarify the cause of the contradiction.

H1: Patient satisfaction significantly influence their trust

The Effect of Patient Satisfaction to Loyalty

Customer satisfaction in management marketing itself has a very specific meaning. Satisfaction is the customer feedback on the fulfillment of their needs. This means that that there is a form of privilege of the service itself, which provide a level of comfort associated with the fulfillment of requirements. It might be below expectations or exceeding customer expectations (Oliver, 1997). Another view explained that customer satisfaction serves as an after-purchase evaluation of the selected alternative (Engel et al, 1995). Some of previous studies prove that satisfaction has positive and significant impact on customer loyalty (Dagger & O'Brien, 2010; Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Hsin-Chang & Hsin-Wei, 2011). Then the dimension of overall customer satisfaction and technical satisfaction has positive and significant influence on customer loyalty (Abu-Elsamen et al., 2011).

Inconsistencies in the findings were due to the increasing satisfaction and when a failure occurs then it successfully to be repaired again. The sample is the customers who have a problem with the operator, so
that the functional dimension of satisfaction is not found by the service provider (Komunda & Osarenkhoe, 2012). Similar debates prove that the dimension of satisfaction is functionally does not significantly influence customers loyalty. This fact is due to the failure of the service that is not treated quickly, it can also as a result in decreasing of customer’s satisfaction and the lack of efficient handling of complaints (Abu-ELSamen et al., 2011).

H2: Patient satisfaction significantly influence the loyalty

The Effect of Trust in the Loyalty

Customer trust in general is regarded as an essential element for the success of relationships. Without Customers trust, a relationship will not survive in the long term. Trust is defined as "the perception of trust in the exchange partner's reliability and integrity (Morgan & Hunt, 1994). Another view mentioned that customer trust is the belief that a person will find what they want in their exchange partners. Customer trust involves a person's willingness to behave in particular due to the belief that their partners will deliver what they are expected (Barnes, 2003).

Trust is the foundation of the business. A business transaction between two or more parties would happen if each has mutual trust. This trust is not simply be recognized by other parties / business partners, but must be built from scratch and can be proven. Trust has to be considered as a catalyst in various transactions between sellers and buyers in order to achieve customer satisfaction (Mohd Kassim & Ismail, 2009). Trust can be stated as a certain trust to the other party in the transaction intercourse based on a belief that the person who we are believe will meet all of the obligations as well as expected. Trust indicators in this study include: (1) honesty, (2) confidence, and (3) benevolence (Mohd Kassim & Ismail, 2009; Dagger & O'Brien, 2010; Jani & Han, 2011). Empirical studies have shown direct customer trust and a significant positive effect on customer loyalty (Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Mohd Kassim & Ismail, 2009). Inconsistency of findings provide the evidence that the trust does not have a significant effect on customer loyalty (Jani & Han, 2011; Gil-Saura et al., 2009; Dagger & O'Brien, 2010). Gaps in the findings resulting from the trust should be built on the basis of long-term relations with customers (Dagger & O'Brien, 2010).

Referring to the theoretical and empirical study of the conceptual framework of this research, will further examine the relationship of five variables, namely the variable patient satisfaction, Patient’s trust and patient loyalty variable. This study assumes the variable patient satisfaction indirectly affect the loyalty of patients, which is mediated by the patient's trust. This study examined the findings of research on the role of customer trust in the relationship of customer satisfaction on customer loyalty. The results of another study show that customer satisfaction has no direct effect on customer loyalty, but mediated by the trust of customers (Jani & Han, 2011; Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Mohd Kassim & Ismail, 2009).

H3: Patient trust significantly influence the loyalty

Methods

The design of this research uses explanatory research approach by collecting data conducted in a single stage (one-shot study) or in cross-section through a questionnaire. The reasons underlying the use of research explanation is in order to prove and explain empirically the effect of satisfaction, trust, loyalty of patients on healthcare services in the city of Makassar. Which then draw conclusions to accept or reject the theory or the results of previous research.

The location of research is healthcare services in Makassar. The unit of analysis in this study were patients in the period of June to December 2014 totaling 1,174 patients. The sampling technique used simple
random sampling, the total sample in this study was determined by using the Slovin formula (Sekaran, 2006), so that the sample is as much as 298 people with the condition: (a) hospitalized patients in healthcare services, the maximum hospitalization is for two days; (2) samples in this study were patients who can provide information or be able to communicate well in order to fill out a questionnaire; (3) samples are adult patients who can provide data representative data and understand charging kusieoner once described by researchers.

Data Collection

The number of questionnaires distributed in this study as many as 398 pieces, the rate of return as many as 259 or by 65.08%, but there are questionnaires that are considered defective and therefore cannot continue to be analyzed by 147 or by 36.93%. So that questionnaires can be analyzed only by 112 or 28.14%. Characteristics of respondents consist of: gender and occupation are presented in the following table:

<table>
<thead>
<tr>
<th>Participants Profile</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>48</td>
<td>42.86</td>
</tr>
<tr>
<td>Female</td>
<td>64</td>
<td>57.14</td>
</tr>
<tr>
<td><strong>Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil Servant</td>
<td>21</td>
<td>18.75</td>
</tr>
<tr>
<td>Private employees</td>
<td>40</td>
<td>35.71</td>
</tr>
<tr>
<td>Military/police</td>
<td>23</td>
<td>20.54</td>
</tr>
<tr>
<td>Entrepreneur</td>
<td>19</td>
<td>16.96</td>
</tr>
<tr>
<td>Other</td>
<td>9</td>
<td>8.04</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>112</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 1. shows that the majority of respondents were female by 57.14% and majority of them worked as Private employees as much as 35.71%.

Validity and Reliability test

Good research instrument must meet three main requirements, they are: (1) is valid or invalid; (2) unreliable or reliable; and (3) practical (Cooper & Sehindler, 2003). When a measuring instrument used is invalid or can not be trusted and are not reliable, then the results will not reflect the real condition. In details, the validity of the instrument can be seen in the following table:

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient Correlation (r)</th>
<th>Sig.</th>
<th>Result</th>
<th>Cronbach's Alpha</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfaction (X)</td>
<td>0.923</td>
<td>0.000</td>
<td>Valid</td>
<td>0.961</td>
<td>Reliable</td>
</tr>
<tr>
<td></td>
<td>0.933</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.943</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.927</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.930</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust (Y₁)</td>
<td>0.877</td>
<td>0.000</td>
<td>Valid</td>
<td>0.885</td>
<td>Reliable</td>
</tr>
<tr>
<td></td>
<td>0.913</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0.918</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loyalty (Y₂)</td>
<td>0.880</td>
<td>0.000</td>
<td>Valid</td>
<td>0.828</td>
<td>Reliable</td>
</tr>
<tr>
<td></td>
<td>0.893</td>
<td>0.000</td>
<td>Valid</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Based on the recapitulation of the validity and reliability of the instrument in Table 2, it can be concluded that the five variables of the study are valid. All kofisien correlation indicator is greater than 0.30 and Cronbach alpha greater than 0.60, meaning all items statements serve as a reliable instrument. Questionnaire used are valid and can be trusted as an instrument for measuring each indicator variables and subsequent data analysis (Sekaran, 2006).

**Variable Description and Standardized Confirmatory Factor Analysis (CFA)**

Measurement model of indicators that reflect latent variables in this study include: patient satisfaction ($X_1$), patients trust ($Y_1$), and patients loyalty ($Y_2$). It must be understood in the measurement models through confirmatory factor analysis, there are two basic tests, namely: (1) Suitability test of the measurement model and (2) Test of significance weighting factors ($factor loadings/lamda (\lambda)$) (Ferdinand, 2005). Prior notice, the model in this study is built on the theoretical and empirical studies using full structural equation modeling techniques (full model) ($loading factor /lamda (\lambda)$).Terms measurements confirmatory factor analysis using significance test weighting factor ($loading factor/lamda (\lambda)$) with testing grounds latent variables that are used to confirm that the variables that can form together with indicators of other variables explain a latent variable is assessed using criteria lambda value ($\lambda$) or factor loading required (cut-off point) must reach $\geq 0.60$ atau $60\%$ (Malhotra, 2010).

Measurement of patient satisfaction in this study consists of five indicators, namely: feeling satisfied with healthcare services ($X_{11} = (\bar{X})$ 3.08 and standardized loadings factor = 0.90); satisfied with the services of the doctor / nurse ($X_{12} = (\bar{X})$ 3.18 and standardized loadings factor = 0.90); feeling satisfied for clinical treatment services ($X_{13} = (\bar{X})$ 3.25 and standardized loadings factor = 0.90); satisfied with the prescription drug services ($X_{14} = (\bar{X})$ 3.23 and standardized loadings factor = 0.93); and feeling satisfied with the information provided by officer / doctor about the condition of the patient ($X_{15} = (\bar{X})$ 3.16 and standardized loadings factor = 0.92).

The results of this descriptive study indicate that the patient had obtained the services that are likely to increase their satisfaction, but is not yet optimal. Descriptive analysis showed indicators of satisfaction with the treatment had the highest average score, followed by satisfaction with drugs prescription, satisfaction with the diagnosis results, satisfaction with the information provided by officer / doctor about the condition of the patient and satisfaction with healthcare services which better than expected and need to give serious attention by the management of the health care services.

The trust of hospitalized patients in this study was measured by three indicators, namely: honesty ($Y_{11} = (\bar{X})$ 3.54 and standardized loadings factor = 0.75), confidence ($Y_{12} = (\bar{X})$ 3.79 and standardized loadings factor = 0.92) and benevolence ($Y_{13} = (\bar{X})$ 3.71 and standardized loadings factor = 0.88). The mean value for patient trust variable is 3.68 or it can be said that the majority of respondents are agreed. The results of this study are good, from the actual empirical facts of honesty, confidence and benevolence. Then the results of the descriptive analysis showed that the indicator confidence has the highest average score, followed by benevolence and honesty.

Loyalty indicator patients in this study, include: word-of-mouth ($Y_{21} = (\bar{X})$ 3.32 and standardized loadings factor = 0.80) and complaint given patient dissatisfaction over the service ($Y_{22} = (\bar{X})$ 3.48 and standardized loadings factor = 0.81). Descriptive analysis of data for each indicator variable patient loyalty shows that most respondents expressed less agree (neutral) to the patient loyalty variable with a mean of 3.40. If viewed from the actual conditions, patient loyalty variables that reflected through word-of-mouth and the complaints still need more in-depth study. Descriptive analysis showed indicators of complaints has the highest average score, followed by word-of-mouth.
Explanation of Structural Equation Modeling (SEM)

In addition to using descriptive statistics analysis, this study also using Analysis of Moment Structures 16 version in order to refine the findings.

Normality Test

Normality test was conducted to determine the distribution of the data to be analyzed in order to spread normally. The results show the value of the output data normality critical ratio (cr) skewness and critical ratio (cr) kurtosis is smaller than the cut of point provided herein, namely ± 2.58 with a significant level of 95%. However, in multivariate showed 4.710 value of the critical ratio (cr) kurtosis is greater than cut of point which provided herein, namely ± 2.58 (Hair et al., 2006).

Outliers Test

The number of indicator variables in this study are 10 indicators with the value of degree of freedom (DF) of 29 so that the value of \( \chi^2 \) (29; \( \alpha = 0.005 \) or 99%) = 42.557. All data that has a value greater than the Mahalanobis distance \( \chi^2 = 42.557 \) means that there was a multivariate Outliers. Outliers test with AMOS software showed there was no Mahalanobis Distance value greater than \( \chi^2 = 42.557 \) at the probability level \( \alpha = 0.005 \) or 99%. Mahalanobis Distance maximum value is 26.508 and the probability value of as much as 0.010 which is greater \( \alpha = 0.005 \) or 99% on the 93rd observation and the value of the minimum mahalanobis distance was 3.211 on the 5th observation. Thus the data used in this study does not contain outliers in multivariate so that data meets the requirements of the structural model (Hair et al., 2006).

The Feasibility Testing Results of Structural Models

Testing the feasibility of a structural model aims to determine the suitability of the data with the results of observations which was built and estimated using a standardized regression weights value. Structural models were constructed and estimated comprises a direct relationship and the indirect relationship referring to the formulation of the problem and research objectives.

![Path Diagram of Structural Model Testing](image-url)
Structural model is said to correspond to observational data if the Chi-square is small and non-significant at \( \alpha = 0.05 \) (29) or 40,831 \( \leq \) 42,557; the probability value 0.07 \( \geq \) 0.05; CMIN/DF 1,408 \( \leq \) 2.00; GFI 0.93 \( \geq \) 0.90, AGFI 0.87 \( \geq \) 0.90; TLI 0.98 \( \geq \) 0.95 and CFI 0.98 \( \geq \) 0.95; and RMSEA 0.06 \( \leq \) 0.80. Criteria for the model fit tests performed by comparing the cut-off value of goodness of fit index obtained from the estimation of the existing models that meet the criteria.

The results of testing the model shows that there are already eligible criteria minimum threshold (cut-off point) which required that the value of Chi-square; probability; RMSEA; CMIN / DF; GFI; CFI and TLI and while the other criteria namely: AGFI has not been good (marginal). Referring to the principle of parsimony (Arbuckle & Wothke, 1999) that if there are one or two criteria of goodness of fit that has met the expected value, then the model can already be said to be good or the development of conceptual models and theoretical hypothesis can be said to be supported by empirical data. Thereby can be concluded that the structural model developed in this study are in accordance with the results of observation allowing for an analysis of structural relationships and testing hypotheses. Based on the findings of fact, the hypothesis testing aims to answer whether the proposed hypothesis can be accepted or rejected. Level of significance in the parameter estimation hypothesis testing was set at 95% or \( \alpha = 0.05 \) as follows:

### The Influence of Satisfaction toward Patient Trust

The influence of patient satisfaction with the trust can be proved by the value of the standardized regression weight estimate of 0.787, which is in positive category. The coefficient is positive influence means that the high quality of service tends to increase patient satisfaction. Then it can be proved by the value of the critical ratio (cr) = 7.788 > 2.00 (\( t_{\text{critical}} \)) and a probability value of 0.000 < \( \alpha = 0.05 \). Hypothesis testing results prove that satisfaction significantly influence the patient's trust. It can be concluded that an increase in patient satisfaction is positive, so the proposed hypothesis can be accepted or supported by empirical facts.

Patient trust arising because the patient feels satisfied and comfortable on the fulfillment of the responsibility for healthcare services providers. Based on the measurement scale used, the range scale starting from one to five, which means the range starting from a very bored to very well. The mean value obtained for indicators of credibility indicators / faith based on the results of questionnaires at 3.68. When viewed from the actual empirical facts, patient trust that the services provided by doctors and paramedics can cure the illness has been good when used as a measure or indicator of patient trust variables that must be maintained. Trust described through three indicator variables, based on the standardized value estimate derived factor loading of each indicator, trust indicator has the highest factor loading than other indicators. The test results prove that the patient satisfaction has positive and significant impact on patients' trust. The satisfaction felt by the patient can build a sense of trust of patients to healthcare services in primary healthcare services, so it can be argued that the higher patient satisfaction, the more increase the patients trust.

The results of this study reinforce a statement explaining that the benefits of service attributes form the main antecedents to satisfaction (Gustaffson & Johnson, 2004). Then support the findings that prove that customer satisfaction is directly has positive and significant impact on customer trust (Jani & Han, 2011; Kantsperger & Kunz, 2010; Norizan & Asiah, 2010). Indicators of patient satisfaction supports theory that the satisfaction of personal control is based on a person's life experiences related to perception through psychological comparisons between actions and desired results because of lack of mutual trust (Rotter, 1966). Then reject the findings that prove that customer satisfaction does not significantly influence customer trust (Mohd Kassim & Ismail, 2009). Based on theoretical and empirical support for this research, if the management of healthcare services in the Makassar city aims to improve patient satisfaction, then it needs to be done from the standpoint of the patient is improving patient trust. The strategy used to increase the trust of patients is focused on improving honesty, credibility/confidence, and benevolence in providing services to patients.
The Effect of Satisfaction toward Patient Loyalty

Effect of satisfaction toward their patient loyalty can be proved by the value of the standardized regression weight estimation of 0.120 which is in a positive direction. Then can also be proven by the value of the critical ratio (cr) = 0.922 < 2.00 (t_critical) and a probability value 0.357> α = 0.05. The results prove the hypothesis testing has positive influence to patient satisfaction, but not significant to the patient loyalty. It can be concluded that an increase in patient satisfaction is has positive but not significant to increase patient loyalty thus the proposed hypothesis significantly influence patient loyalty can’t be accepted or not supported by empirical facts.

Hospitalized patients in using healthcare services always expect the creation of satisfaction with the services received. The level of satisfaction felt by the patient can’t be separated from the expected value of the services received. With the increasing levels of satisfaction felt by patients on healthcare services received, certainly affect the demand for healthcare services back on services, which in turn is able then to create patient loyalty. The results test prove positive influence patient satisfaction, but no significant effect on patient loyalty. The findings of this study describe patient satisfaction with healthcare services are high and do not have a significant impact on the improvement of high patient loyalty. Increased patient satisfaction tends to be higher when the treatment of hospitalized patients are recovered and managed to come back if there are any complaints. Patient satisfaction does not have a significant impact on patient loyalty, this condition is caused by a healthcare services that do not provide the freedom and openness to receive complaints from patients.

Empirically, the current healthcare services dire need of prescription drug services quickly and accurately. It is already well when used as a measure or indicator of patient satisfaction variables that must be maintained. However, the management of healthcare services is not currently giving top priority to improving patient satisfaction. The results of the factor analysis mention the most important factor in reflecting on patient satisfaction is patient satisfaction with the services of prescribing drugs. Furthermore, based on the perceptions of patients, found that patient satisfaction with services is still not optimal. Circumstances will impact on the patient loyalty. The findings of this study support previous research that customer satisfaction does not have a significant effect on customer loyalty (Komunda & Osarenkhoe, 2012; Abu-EL.Samen et al., 2011). Then the results of this study rejects the findings that prove that satisfaction affect the customer loyalty significantly and positively (Hsin-Chang & Hsin-Wei, 2011; Sheng & Liu, 2010; Norizan & Asiah, 2010). The results of this study confirm that the patient satisfaction as measured by five indicators can describe satisfaction.

The Effect of Trust toward Patients Loyalty

Trust influence on patient loyalty can be evidenced by the standardized regression weight estimation value of 0.755 with a positive direction. A positive sign means a high trust that patients can increase their loyalty. Then can also be proven by the value of the critical ratio (cr) = 4.601 > 2.00 (t_critical) and a probability value of 0.000 <α = 0.05. The test results prove that the trust has positive and significant effect on loyalty. Patients loyalty in the theory of relationship marketing, is the main indicator of the success of the company maintain long-term relationships between customers services with services offered (Zeithaml & Bitner, 2004). Long-term relationship is one that is becoming a key factor in increasing customer loyalty. The test results showed that the patients loyalty can be proven by the value of the standardized regression weight estimation of 0.755 with a positive direction. Loyalty has an important role in the management of healthcare services. Customer loyalty is a reflection of the quality of relationships (satisfaction and customer trust) which is the ratio of hope cognitive function before consumption and actual experience (Oliver, 1980).

Facts on the ground indicate that the healthcare services in the Makassar city need to maintain the by loyalty of the patients, fostering good relationships with patients, and retain the trust. This study supports
the relationship marketing theories that seek to build long-term relationships (relational exchanges). Trust has become "a key variable or essential elements ". Trust contributes to success in business relationships (Morgan & Hunt, 1994). The results of this study reinforce the findings that prove that trust affect the loyalty significantly and positively (Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Mohd Kassim & Ismail, 2009). Furthermore, the results of this study is different from the findings that prove that the trust does not have a significant effect on customer loyalty (Jani & Han, 2011; Gil-Saura et al., 2009; Dagger & O'Brien, 2010; Sahadev & Purani, 2008). Trust should be built on the basis of long-term relations with customers so that new customers trust no significant effect on customer loyalty (Dagger & O'Brien, 2010).

The Mediating Effect of Patient Trust

Standarized testing indirect effects between latent variables explain that there is no direct influence between variable of satisfaction with patients loyalty. Thus obtained indirectly influence coefficient at 0.594 (0.787 x 0.755 = 0.594). Because the value of the patient satisfaction with patient loyalty is not significant, it can be concluded that no high patient satisfaction can significantly increase patient loyalty, but with high trust, the loyalty of patients in the implementation can be improved towards high. Intervening variable in this study is the trust of patients. Increased satisfaction, trust, and loyalty both directly and indirectly, led to various debates (Mohd. Kassim & Ismail, 2009; Jani & Han, 2011). The contradiction and lack of an agreed concept in the literature to measure the dimensions of trust are often incorporated into the measurement in terms of relationship quality (Jani & Han, 2011). These results indicate the effect of indirect variable patient satisfaction with patient loyalty mediated by patient trust that the value of the coefficient of 0.594. Because the value of the variable coefficient satisfaction with trust and trust in the loyalty of patients is significant, it can be concluded that an increase in patient satisfaction can increase patient loyalty through higher trust. The findings of this study refute the findings of previous research that customer satisfaction has no direct effect on customer loyalty, but mediated customer trust (Jani & Han, 2011; Kantsperger & Kunz, 2010; Norizan & Asiah, 2010; Mohd Kassim & Ismail, 2009).

Limitations and Conclusions

Researchers can’t be separated from the limitations that this study was still limited to patients' perceptions of causality between variables were analyzed. So that subsequent researchers are advised to use the patient, paramedics and doctors in analyzing patient loyalty. This study was conducted based on cross-sectional data, so it is advisable to future researchers in order to do it longitudinally in order to analyze the perception (the attitude and behavior).

Influence of satisfaction on loyalty is not proven. Satisfaction can only improve trust, but cannot increase patient loyalty. The test results prove the high trust can increase patient loyalty. This means that the higher the trust of patients, the more increasing of loyalty will be. Based on test results, satisfaction variables may increase loyalty of the patient if the patient is supported with high trust.

References


