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Analysis of Factors Related to BPJS Patient Satisfaction at Kabawo Community Health Center, Muna Regency, Southeast Sulawesi Province

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Abstract

Health is a fundamental human right as mandated by the 1945 Constitution and Law Number 17 of 2023, which affirms that the state is responsible for providing proper healthcare services. To achieve this, the government established BPJS Health as the implementing body of the National Health Insurance (JKN) system, aiming to ensure equitable and high-quality healthcare services for all Indonesian citizens. The success of a health insurance program is not only assessed by service accessibility but also by the level of patient satisfaction with the quality of care received. This study aims to identify the factors associated with the satisfaction of BPJS patients at Kabawo Community Health Center, Muna Regency, Southeast Sulawesi Province. The research employed a quantitative analytic design with a cross-sectional approach. The study population included all BPJS participants visiting the Kabawo Health Center, with a sample of 100 respondents selected using simple random sampling. The results showed a significant relationship between age (p = 0.031), sex (p = 0.043), occupation (p = 0.018), membership status (p = 0.003), and membership duration (p = 0.000) with BPJS patient satisfaction. Meanwhile, education (p = 0.156) was not significantly associated with patient satisfaction. These findings indicate that certain characteristics may influence patients' perceptions of service quality at primary healthcare facilities.

Keywords: *Patient Satisfaction, Patient Characteristics, BPJS*

1. Introduction

Health is a fundamental right of every citizen and is guaranteed in various national regulations, including the 1945 Constitution and Law Number 17 of 2023. The state has the responsibility to ensure that health services are accessible equitably, of good quality, and fair for all communities. To achieve this, the government established a national health insurance system through the Social Security Administration Agency (BPJS) Health as the administrator of the National Health Insurance (JKN) Program. This program consists of various membership schemes and is designed to expand health protection, reduce financial barriers, and promote equitable services, especially at primary healthcare facilities such as community health centers (puskesmas).

In recent years, the service burden on puskesmas has increased along with the growing number of BPJS participants and the high utilization of services. National data show that puskesmas serve as the main entry point for JKN utilization because of their close proximity to communities and their coverage of promotive, preventive, curative, and rehabilitative services [1]. However, increased access does not always align with improved service quality. Various findings indicate variations in service quality, regional disparities, and challenges regarding facilities, human resources, and service management, particularly in remote and island regions.

Service quality is a crucial aspect that determines the success of the health insurance system. In the context of public services, patient satisfaction is often used as an evaluative indicator of the quality of services received. Recent studies show that patient satisfaction is influenced by a combination of service-related factors and patient characteristics. Dimensions of service quality such as tangibles, reliability, responsiveness, assurance, and empathy have been shown to contribute significantly in various studies [2]–[8]. In addition, demographic characteristics such as age, education, gender, occupation, membership status, and duration of BPJS participation also shape patients' perceptions of the services they receive [9], [10].

Studies from the past five years show an increasing focus on the quality of BPJS services at puskesmas. Apriani et al. (2023) found that facilities, service speed, empathy, and complaint handling had significant relationships with the satisfaction of BPJS participants accessing WhatsApp-based digital services at RSUD 45 Kuningan [3]. Cokro et al. (2023) reported that service quality at Puskesmas Lubuk Durian influenced the level of satisfaction among BPJS patients, particularly regarding facility availability and interactions with health workers [4]. Another study by Sartiasih et al. (2022) during the COVID-19 pandemic showed that facilities, service schedules, the quality of personal interactions, and the attitudes of health workers were strongly related to the satisfaction of BPJS patients at puskesmas [5]. Similar findings were reinforced by Rufaidah et al. (2024), who emphasized the importance of service time, empathy, information delivery, and facility completeness in improving patient satisfaction in puskesmas located in remote areas [6]. The quality of BPJS Health services is one of the key factors in achieving patient satisfaction [7].

Nevertheless, several studies have also identified that non-service-related factors such as education, age, occupation, and length of BPJS membership can influence satisfaction perceptions. Isnaniah (2020) reported that patients with positive perceptions of service procedures and human resources tended to report higher satisfaction [8]. Research by Mutmainnah and Ahri (2021) in Makassar reinforced that patient characteristics and service quality are two inseparable components in understanding satisfaction [9]. Meanwhile, a study by Rata Mohan et al. (2025) described differences in healthcare-seeking behavior based on gender, which may indirectly influence patient experiences in accessing JKN services [10].

In general, most research on BPJS patient satisfaction has been conducted in urban areas or regions with more stable access to healthcare services. Research in island, remote, or geographically limited areas such as Muna Regency is relatively scarce. Yet, the geographical context can worsen service inequalities, both in terms of facility availability and human resource distribution. Puskesmas Kabawo, located in a rural area of Muna Regency, is one of the health facilities with a high number of visits but has never been specifically studied regarding BPJS patient satisfaction. Medical record data show that the number of visits has continued to increase over the past two years, but no systematic evaluation has been carried out to assess the extent to which the services provided meet community expectations and needs.

Field observations show that although formal access through BPJS is available, the community still reports complaints related to waiting time, clarity of information, availability of medicines, and the comfort of puskesmas facilities. Several administrative factors such as registration processes, queues, and interactions with health workers are also areas of concern. This aligns with the findings of Dien Noor Khofifah (2024), which show that managerial aspects, particularly drug management, often become service obstacles in puskesmas within Muna Regency [11]. Therefore, more contextual and comprehensive research is needed to map the factors related to BPJS patient satisfaction in this area.

From a theoretical standpoint, most previous studies used the SERVQUAL model as the basis for measuring service quality. This model includes five main dimensions—responsiveness, reliability, assurance, empathy, and tangibles—which have proven relevant for assessing healthcare service quality. However, research combining the SERVQUAL model with patient demographic factors in the context of rural puskesmas remains limited. Additionally, research gaps are evident in the limited number of studies that directly link BPJS membership duration with patient satisfaction, even though this variable has the potential to influence expectations and experiences in accessing healthcare services.

Given these research gaps, this study is important to fill the void in the literature concerning BPJS patient satisfaction at primary healthcare facilities in rural areas, particularly in Kabawo, Muna Regency. In addition to measuring the influence of demographic factors, this study also analyzes service quality dimensions that may serve as a foundation for improving JKN service policies in the region. A comprehensive understanding of the factors influencing patient satisfaction is essential for improving service quality, strengthening service management systems, and enhancing the role of puskesmas as the frontline of healthcare services.

Thus, the aim of this study is to address questions regarding the factors associated with BPJS patient satisfaction at the Kabawo Community Health Center in Muna Regency. This research is not only relevant for the development of service policies at the puskesmas and district levels but also provides academic contributions by expanding studies on JKN patient satisfaction in remote areas. The findings are expected to serve as a reference for puskesmas and the health office in formulating strategies to improve service quality and strengthen the implementation of JKN to achieve more equitable, accessible, and high-quality healthcare services.

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2. Research Method

This study employed a quantitative analytic design with a cross-sectional approach, in which all variables were measured once at the same time on respondents who met the inclusion criteria. The study population included all BPJS participants visiting the Kabawo Community Health Center, and the sample size was calculated using the Slovin formula with a 10% margin of error, resulting in a required sample of 100 respondents. Sample selection was carried out through simple random sampling using a lottery system based on the daily visit list.

Data were collected using a structured questionnaire consisting of two sections. The first section contained six items on respondent characteristics, while the second section was a modified SERVQUAL instrument covering five dimensions: tangibles, reliability, responsiveness, assurance, and empathy. Each statement item used a 1–5 Likert scale. The questionnaire underwent validity and reliability testing on 30 respondents, and all items were declared valid with a calculated r value ≥ 0.361 and reliable with a Cronbach's Alpha value of 0.803.

Data collection was conducted directly by distributing questionnaires to selected respondents, accompanied by field observations to ensure that facility conditions aligned with the responses provided. The data obtained through the questionnaire then went through editing, coding, entry, and cleaning before analysis. Univariate analysis was used to describe the frequency distribution of each variable, while bivariate analysis using the Spearman rho test assessed the relationship between patient characteristics and service quality dimensions with the level of satisfaction. The test was conducted at a 5% significance level to determine the significance of relationships between variables.

3. Result and Discussion

Result

Analysis of the relationship between demographic variables and the level of BPJS patient satisfaction was carried out using the Spearman/Chi-Square statistical test according to the type of data. The test results showed that most variables had a significant relationship with the level of patient satisfaction. The details of the test results are presented in the following tables:

Tabel 1. Relationship Between Age and Patient Satisfaction

Variable	BPJS Patient Satisfaction						Total		*P*
Age	Not Satisfied		Quite Satisfied		Satisfied				*value*
	f	%	f	%	f	%	f	%	
17-45 Years	15	9.5	13	12.5	15	21.1	43	100	0.031
46-55 Years	4	5.7	9	7.5	13	12.7	26	100	
> 56 Years	3	6.8	7	9.0	21	15.0	31	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

Source : Primary Data 2025

Based on Table 1 above, it shows that among 43 respondents aged 17–45 years, 15 respondents (21.1%) were in the satisfied category. In the 46–55 year age group, most were also in the satisfied category, namely 13 respondents (12.7%). Meanwhile, in the >56 year age group, 21 out of 31 respondents (15.0%) were in the satisfied category. Overall, the satisfaction level of BPJS patients was dominated by the satisfied category, totaling 49 respondents (49.0%). The statistical test showed a p-value of 0.031, which means that there is a relationship between age and the satisfaction of BPJS patients at Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

Tabel 2. Relationship Between Gender and Patient Satisfaction

Variable	BPJS Patient Satisfaction						Total		*p*
Gender	Not Satisfied		Quite Satisfied		Satisfied				*value*
	f	%	f	%	f	%	F	%	
Men	12	7.7	6	10.1	17	17.2	35	100	0.043
Women	10	14.3	23	18.9	32	31.9	65	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

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Source : Primary Data 2025

Based on Table 2 above, it shows that among male respondents (35 respondents), 17 respondents (17.2%) were in the satisfied category. Meanwhile, among female respondents (65 respondents), 32 respondents (31.9%) were in the satisfied category. The statistical test showed a p-value of 0.043, so it can be concluded that there is a relationship between gender and the level of satisfaction of BPJS patients at Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

Tabel 3. Relationship Between Eduation and Patient Satisfaction

Variable	BPJS Patient Satisfaction						Total		*p*
Education	Not Satisfied		Quite Satisfied		Satisfied				*value*
	f	%	f	%	f	%	f	%	
Elementary School	1	5.3	8	7.0	15	11.8	24	100	0.156
Junior High School	4	4.4	5	5.8	11	9.8	20	100	
Senior High School	5	4.0	7	5.2	5	8.8	18	100	
College	11	8.4	9	11.0	18	18.5	38	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

Source : Primary Data 2025

Based on Table 3 above, it shows that respondents with an elementary school (SD/MI) education level were mostly in the satisfied category, totaling 15 respondents (11.8%) out of 24 respondents. Among respondents with a junior high school (SMP/MTs) education, most were also satisfied, totaling 11 respondents (9.8%). Respondents with a senior high school (SMA/SMK/MA) education were dominated by the satisfied category, totaling 6 respondents (8.8%). Meanwhile, respondents with a higher education level were in the satisfied category, totaling 18 respondents (18.5%) out of 38 respondents. Overall, the level of BPJS patient satisfaction across all education levels was mostly in the satisfied category (45%). However, the statistical test showed a p-value of 0.156, indicating that there is no relationship between education level and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

Tabel 4 Relationship Between Job and Patient Satisfaction

Variable	BPJS Patient Satisfaction						Total		*p*
Job	Not Satisfied		Quite Satisfied		Satisfied				*value*
	f	%	f	%	f	%	f	%	
Government/state workers	3	7.3	6	9.6	24	16.2	33	100	0.018
Private/ entrepreneurial	10	6.8	10	9.0	11	15.2	31	100	
Not working/non productive	9	7.9	13	10.4	14	17.6	36	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

Source : Primary Data 2025

Based on Table 4 above, it shows that in the government/public sector group totaling 33 respondents, most were in the satisfied category, namely 24 respondents (16.2%). In the private/entrepreneur group totaling 31 respondents, only 11 respondents (15.2%) were in the satisfied category, while in the unemployed/non-productive group totaling 36 respondents, most were also in the satisfied category, totaling 14 respondents (17.6%). Overall, BPJS patient satisfaction was dominated by the satisfied category (49%). The statistical test showed a p-value = 0.018, thus it can be concluded that there is a relationship between occupation and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

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Tabel 5. Relationship between participant status and patient satisfaction

Variabel	BPJS Patient Satisfaction						Total		*p value*
Participant Status	Not Satisfied		Quite Satisfied		Satisfied				
	f	%	f	%	f	%	f	%	
PBI	19	15.2	24	20.0	26	33.8	31	100	0.003
Non PBI	3	6.8	5	9.0	23	15.2	69	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

Source : Primary Data 2025

Based on Table 5 above, it shows that among BPJS participants in the PBI category, totaling 69 respondents, most were in the satisfied category, amounting to 26 respondents (33.8%). Meanwhile, among Non-PBI participants, totaling 31 respondents, most were also in the satisfied category, with 23 respondents (15.2%). Overall, BPJS patient satisfaction was dominated by the satisfied category (49%). The statistical test showed a p-value = 0.003, thus it can be concluded that there is a relationship between membership status and the level of BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

Tabel 6. Relationship Between Length of Membership and Patient Satisfaction

Variable	BPJS Patient Satisfaction						Total		*p value*
Length of Membership	Not Satisfied		Quite Satisfied		Satisfied				
	f	%	f	%	f	%	f	%	
1-3 Years	13	5.3	1	7.0	10	11.8	24	100	0.000
4-6 Years	6	4.0	6	5.2	6	8.8	18	100	
> 6 Tears	3	12.8	22	16.8	33	28.4	58	100	
Total	22	22.0	29	29.0	49	49.0	100	100	

Source : Primary Data 2025

Based on Table 6 above, it shows that respondents with a membership duration of 1–3 years were mostly in the dissatisfied category, with 13 respondents (5.3%). In the 4–6 year group, respondent satisfaction levels were relatively equal, with 6 respondents (8.8%) in the satisfied category. Meanwhile, among respondents with membership duration > 6 years, most were in the satisfied category, namely 33 respondents (28.4%) out of a total of 58 respondents. Overall, the level of BPJS patient satisfaction was more commonly found among respondents with membership durations of > 6 years. The statistical test showed a p-value = 0.000, thus it can be concluded that there is a relationship between membership duration and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

Discussion

The study results show that based on the frequency distribution of respondents regarding BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province, it was found that out of 100 respondents studied, the number of respondents who reported being satisfied was 49 people (49%).

Patient satisfaction is a response to the fulfillment of needs according to patient expectations [11]. Satisfaction or dissatisfaction is a customer response resulting from an evaluation of the mismatch between perceived performance and expectations, which essentially refer to expectations [12]. If the service received meets or exceeds expectations, the patient will feel satisfied. Conversely, if the service received is below expectations, the patient will feel dissatisfied.

Based on the Chi-Square statistical test at a 95% confidence level ($\alpha = 0.05$), the results showed that the p-value = 0.031, thus p-value < 0.05, meaning H0 is rejected and H1 is accepted. This indicates that there is a relationship between age and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

According to health behavior theory, age is a predisposing factor that influences how individuals assess health services. Younger patients tend to be more productive, critical, and have higher expectations regarding the speed and completeness of facilities. If the services provided do not meet expectations, they are more likely to feel dissatisfied. Conversely, older patients value attention and friendliness from health workers and are more patient with existing service limitations, making them more easily satisfied.

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This study is consistent with research conducted by (COKRO et al., 2023), which showed a significant relationship between age and BPJS patient satisfaction at Lubuk Durian Health Center, North Bengkulu, with a p-value = 0.003 (< 0.05) [4]. The results indicated that older patients tend to be more satisfied with health services, whereas younger patients have lower satisfaction levels. This is because younger patients are in a productive stage of life and have high expectations for service quality, so when services fail to meet expectations, they are more likely to feel dissatisfied.

These findings are also consistent with research by Rahayu (2024), which stated that older patients tend to have higher satisfaction levels than younger ones [14]. However, younger individuals generally tend to be more active in seeking information and do not exhibit adaptive behavior [15].

Based on the Chi-Square statistical test at a 95% confidence level (α = 0.05), the results showed that the p-value = 0.043, thus p-value < 0.05, meaning H0 is rejected and H1 is accepted. This indicates that there is a relationship between sex and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

The findings of this study show that there is a relationship between sex and BPJS patient satisfaction, meaning that among male respondents, many felt dissatisfied. This difference in satisfaction levels may be influenced by several factors. It is often affected by individual characteristics, including sex. Women generally pay more attention to aspects such as communication, friendliness of healthcare workers, and service comfort, so if these needs are met, they tend to feel more satisfied. Meanwhile, men often assess satisfaction based on the speed and effectiveness of services, so if services do not meet expectations, they are more likely to feel dissatisfied.

This study is also in line with several previous studies showing a relationship between sex and satisfaction levels [4]. The results showed that the relationship between sex and BPJS patient satisfaction had a p-value = 0.023, meaning the p-value was smaller than the significance level.

Therefore, the results of this study indicate that health centers need to consider different needs based on sex in improving service quality, so that both men and women can obtain optimal satisfaction levels.

Based on the Chi-Square statistical test at a 95% confidence level (α = 0.05), the p-value obtained was 0.156. Since p-value > 0.05, H0 is accepted and H1 is rejected. This shows that there is no significant relationship between education and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

The results show that differences in education level do not significantly affect patients' perceptions of satisfaction with the services at Kabawo Health Center. Patient satisfaction is more influenced by other factors such as service quality, availability of facilities, and quality of interaction with healthcare workers. The relatively even distribution of satisfaction levels across different education groups also indicates that Kabawo Health Center has provided fairly equal services. However, there is a tendency for respondents with higher education to be more critical, as shown by a higher proportion of dissatisfaction. The higher the education level, the greater the desire to apply knowledge and skills, and the more likely they are to make demands and have higher expectations [16].

This study aligns with Saputra (2025), showing that the Chi-Square test resulted in a p-value of 0.475 (> 0.05), meaning that there is no relationship between education and patient satisfaction [16].

Based on the Chi-Square statistical test at a 95% confidence level (α = 0.05), the results showed that the p-value = 0.018, thus p-value < 0.05, meaning H0 is rejected and H1 is accepted. This indicates that there is a relationship between occupation and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

The results show that occupation is significantly associated with BPJS patient satisfaction. This is because a person's occupational background may influence their perspective, expectations, and evaluation of health services. Respondents who work as government employees tend to have higher satisfaction levels compared to those working in the private sector or those who are unemployed. Additionally, government employees—

This study is in line with previous research by Saputra (2025), in which the analysis produced a p-value of 0.001, indicating a relationship between occupation and patient satisfaction. The findings suggest that workplace environment and family context influence satisfaction levels [16].

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A person's occupation also affects their income. Higher-income occupations tend to bring greater demands, which can affect satisfaction levels. This shows that there is a significant relationship between income and satisfaction. The higher a person's income, the lower their satisfaction level tends to be [17]. This drives healthcare providers to continuously improve the quality of services delivered.

Based on the Chi-Square statistical test at a 95% confidence level ($\alpha = 0.05$), the results showed that the p-value = 0.003, thus p-value < 0.05, meaning H0 is rejected and H1 is accepted. This indicates that there is a relationship between membership status and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

This indicates that there is a significant relationship between membership status and satisfaction levels. This means that BPJS membership type (PBI and Non-PBI) influences how patients assess the health services they receive at Kabawo Health Center. Respondents with Non-PBI status tend to have higher satisfaction levels than PBI participants. This may be due to several factors, including economic ability, education level, and expectations regarding the services received. Non-PBI participants generally have better financial capability and may be more familiar with BPJS procedures, making it easier for them to access health services. Meanwhile, many PBI participants come from low-economic backgrounds. PBI participants may have higher expectations of the free health services they receive, but they sometimes encounter obstacles such as long queues, limited medication availability, or differences in treatment compared to Non-PBI patients. These factors can reduce their satisfaction levels.

Based on the Chi-Square statistical test at a 95% confidence level ($\alpha = 0.05$), the results showed that the p-value = 0.000, thus p-value < 0.05, meaning H0 is rejected and H1 is accepted. This indicates that there is a relationship between duration of membership and BPJS patient satisfaction at the Kabawo Health Center, Muna Regency, Southeast Sulawesi Province.

This indicates that there is a significant relationship between the length of BPJS membership and patient satisfaction levels, meaning that the longer a person has been a BPJS participant, the higher their satisfaction with the health services they receive [18]. The duration of membership is calculated from the date they obtained the BPJS card until the present. This is because participants who have been members longer have better experience and understanding of BPJS service mechanisms. They are more familiar with administrative procedures, referral systems, and service processes. Conversely, participants who have been registered for only 1–3 years tend to still experience confusion or administrative difficulties when using BPJS facilities.

This study is consistent with research by Ritonga (2025). The results of the analysis indicate a relationship between membership duration and patient satisfaction, meaning that respondents with longer membership tend to feel very satisfied with services because the perceived experience is greater than expected. The longer the membership duration, the higher the satisfaction level. Likewise, shorter membership duration results in lower satisfaction [19].

4. Conclusion

This study confirms that BPJS patient satisfaction at the Kabawo Community Health Center is influenced by several key characteristics that show statistically significant relationships, namely age, sex, occupation, membership status, and duration of membership. Meanwhile, education does not contribute significantly to satisfaction levels. Overall, this pattern illustrates that patients' experiences and perceptions of healthcare services do not stand alone but are shaped by their social and administrative backgrounds as JKN users. These findings are relevant for primary healthcare facilities seeking to improve service quality in a more targeted manner, as they highlight which factors most strongly influence satisfaction perceptions. The results also open opportunities for developing service systems that are more adaptive to the needs of specific patient groups, especially PBI participants and long-term members. In the future, further research incorporating variables such as service quality, staff behavior, and qualitative approaches will help deepen the understanding of how patients form their evaluations of BPJS services at the primary healthcare level.

References

1. A. Asyary, "Indonesian Primary Care Through Universal Health Coverage Systems," Public Health of Indonesia, vol. 4, no. 3, pp. 138–145, 2018.
2. M. P. Ambat, M. Pangemanan, and P. Mamuaja, "Hubungan Mutu Pelayanan BPJS Kesehatan dengan Kepuasan Pasien Peserta Jaminan Kesehatan Nasional di Instalasi Rawat Inap Kelas III Rumah Sakit Umum Daerah Biak Kabupaten Biak Numfor Provinsi Papua" Epidemia, vol. 1, no. 4, pp. 25–29, 2020
3. N. Apriani et al., "Faktor-faktor Faktor-Faktor Yang Berhubungan Kepuasan Pasien Peserta Badan Penyelenggara Jaminan Kesehatan (BPJS) Terhadap Layanan Whatsapp Siap 45 Dalam Pelayanan Di Rumah Sakit Umum Daerah 45 Kuningan 202" Journal of Health Research Science, vol. 3, no. 2, pp. 83–98, 2023.

DOI: https://doi.org/10.31004/riggs.v4i4.4166
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4. C. Cokro, M. Murwati, and H. Rustandi, " Faktor-Faktor Yang Berhubungan Dengan Kepuasan Pasien Bpjs Pada Pelayanan Di Puskesmas Lubuk Durian Bengkulu Utara Tahun 2023" JNPH, vol. 11, no. 2, pp. 609–614, 2023.
5. C. Sartiasih et al., " Analisis Faktor-Faktor Yang Berhubungan Dengan Kepuasan Pasien Peserta Badan Penyelenggara Jaminan Sosial (Bpjs) Kesehatan Pada Masa Pandemi Covid-19 Di Puskesmas Jatibarang Kabupaten Indramayu Tahun 2022" Journal of Nursing Practice and Education, 2022.
6. F. Rufaidah, A.M. Nasrudin, H. Haeruddin "Analisis Faktor Yang Berhubungan Dengan Tingkat Kepuasan Pasien Di Pelayanan Poli Umum Puskesmas Langgikima, Konawe Utara: Analysis Of Factors Associated With Patient Satisfaction Level At General Poli Services Of Langgikima Health Center, North Konawe" JAHR, vol. 5, no. 2, pp. 164–171, 2024.
7. B. Saerang, P.P. Mamuaja, and B. C. Pajung, "Analisis manajemen sistem pelayanan administrasi dalam penerimaan pasien BPJS di ruang IGD RSUD Noongan tahun 2024," *Jurnal Ilmiah Kesehatan Manado*, vo. 4, No. 1, pp. 16-14, 2025.
8. R. Isnaniah, " Faktor-Faktor Yang Berhubungan Dengan Kepuasan Pasien Bpjs Rawat Jalan Di Rumah Sakit Tk. Iii Dr. R. Soeharsono Banjarmasin Tahun 2020" 2020.
9. U. Mutmainnah and R. A. Ahri, " Analisis Faktor Yang Berhubungan Dengan Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien Rawat Inap Di RSUP. Dr. Wahidin Sudirohusodo Makassar 2020," JMCH, vol. 2, no. 1, pp. 52–74, 2021.
10. D. S. Rata Mohan, S. Jawahir, A. Manual, N. E. Abdul Mutalib, S. N. Mohd Noh, I. Ab Rahm, J. Ab Hamid, A. Amer Nordin "Gender Differences in Health-Seeking Behaviour," BMC Health Services Research, vol. 25, no. 1, 2025.
11. D. N. Khofifah and M. Aztriana, "Manajemen Pengelolaan Obat di Puskesmas," Makassar Pharmaceutical Science Journal, vol. 1, pp. 233–242, 2024.
12. A. T. Rijal, B. Pajung, and A. Telew, "Hubungan Kepuasan Pasien BPJS terhadap Mutu Layanan di Puskesmas Kolonodale," Jurnal Ilmu Kesehatan Masyarakat, vol. 2, no. 1, 2023, doi: 10.64418/jikma.v2i1.66.
13. I. Septyaningrum, R. Ratnawati, and R. Widiarini, "Kualitas Pelayanan terhadap Kepuasan Pasien Rawat Jalan di Puskesmas Tawangrejo Menggunakan Metode SERVQUAL," GIKes: Jurnal Ilmu Kesehatan, vol. 5, no. 2, 2024, doi: 10.30867/gikes.v5i2.1467.
14. S. Rahayu, "Analisis SERVQUAL dalam Mengukur Tingkat Pelayanan Kesehatan BPJS," PJ – Public Journal, 2024.
15. N. Yuniar, "Hubungan Mutu Pelayanan dan Tingkat Kepuasan Pasien BPJS Rawat Jalan di Puskesmas," Journal of Public Health Innovation, 2025.
16. D. M. D. Saputra, "Pengaruh Kualitas Pelayanan Puskesmas terhadap Kepuasan Pasien BPJS Menggunakan Metode Service Quality," Jurnal Rekayasa Proses dan Industri Terapan, vol. 1, no. 3, 2025.
17. D. S. J. Pamungkas, R. S. Wardani, and H. R., "Hubungan Pendidikan dan Mutu Pelayanan dengan Kepuasan Pasien Rawat Jalan Puskesmas Poncol Kota Semarang," in Prosiding Seminar Nasional, pp. 1155–1163, 2022.
18. N. Yuniar et al., "Tingkat Kepuasan Pasien JKN terhadap Pelayanan Rawat Jalan di Puskesmas Simalingkar," ViMed Journal, 2025.
19. E. R. Ritonga, "Perbandingan Tingkat Kepuasan Layanan pada Pasien BPJS dan Umum di Puskesmas X, Kota Jambi," Jurnal Kesmas Jambi, 2025.

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