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The Role Of Empathy and Responsiveness of BPJS in Cibabat Hospital Services in Attaning to Increase Consumer Satisfaction

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Abstrack

This study aims to analyze the role of empathy and responsiveness in BPJS-related services at Cibabat Hospital in enhancing consumer satisfaction. Recognizing the importance of humane and efficient interactions in healthcare settings, the research explores how these two dimensions influence patients' perceptions and experiences. Utilizing a quantitative approach, the study surveyed 50 BPJS patients through a structured questionnaire designed to measure service quality and satisfaction levels. Data were analyzed using SPSS software, employing descriptive statistics, reliability tests, and multiple regression analysis to determine the strength and significance of empathy and responsiveness as predictors of satisfaction. The findings reveal a positive and significant effect of both empathy and responsiveness on consumer satisfaction. Empathy, demonstrated through attentive listening and emotional understanding, emerged as the stronger contributor, while responsiveness—reflected in prompt service and staff availability—also showed substantial impact. The practical implications of this research highlight the need for targeted training programs for hospital staff, focusing on communication skills, emotional intelligence, and timely service delivery. Hospital management should foster a patient-centered culture that emphasizes these values to boost satisfaction and trust in BPJS services. What sets this study apart is its localized focus on BPJS users within a single hospital, offering nuanced insights into a specific institutional setting that can inform broader policy initiatives.

Keywords : empathy; responsiveness; BPJS services; consumer satisfaction; hospital management

1. Introduction

In recent years, patient satisfaction has become a focal point in healthcare quality assessment, particularly among participants of national health insurance programs such as BPJS in Indonesia. The dimensions of empathy and responsiveness have been identified as crucial contributors to perceived healthcare quality and overall satisfaction (Sutanto, 2023; Wardani & Yudhawati, 2022). However, empirical data on how BPJS-specific administrative interactions influence these dimensions in hospital settings remain limited. Cibabat Hospital, as a public provider serving BPJS participants, offers an ideal context for exploring this gap. This study aims to investigate the role of BPJS-related empathy and responsiveness in shaping patient satisfaction within the hospital context.

Patient satisfaction with healthcare services is often undermined by administrative bottlenecks and poor communication, despite universal coverage under BPJS (Sumadi, Hidayat & Sulistyawati, 2021). Research from puskesmas and public hospitals indicates that BPJS patients frequently experience longer waiting times and greater procedural burdens compared to non-BPJS patients (Dilla, Pawelas & Fatmasari, 2018; Wardani & Yudhawati, 2022), highlighting a gap in responsiveness. Meanwhile, studies emphasize that empathy from frontline staff—such as acknowledging patients' concerns and showing personalized care—is a powerful predictor of satisfaction (Hasan, 2019). Within Cibabat Hospital, anecdotal reports suggest that communication delays and impersonal treatment during referral processes may erode trust. Therefore, clarifying these pain points is essential to improving service delivery and aligning with patient expectations.

Prior quantitative studies examine the impact of service quality dimensions—including empathy and responsiveness—on BPJS patient satisfaction across Indonesia. For instance, Hasan (2019) found that both these dimensions significantly influenced satisfaction in a puskesmas setting. Similarly, Sutanto's (2023) research at public health centers confirmed empathy and responsiveness as primary determinants of patient loyalty. However, some research suggests mixed results: Wardani and Yudhawati (2022) observed that assurance and reliability had stronger effects in hospital environments. These mixed findings underscore the need for hospital-level analysis, especially within referral institutions like Cibabat Hospital. (Anjalita & Dewi, 2023)

On the other hand, skepticism exists regarding the extent to which empathy and responsiveness truly enhance satisfaction in BPJS settings. Parinduri and Khalid (2022) reported that responsiveness had a stronger statistical association with satisfaction than empathy in a regional hospital. Conversely, some argue that structural issues—such as overcrowding or insufficient resources— undermine any positive effects of empathy (Arnis et al., 2025). There are also conflicting findings on whether empathy adds incremental value beyond basic technical service quality (Sutanto, 2023). Such divergent conclusions highlight a theoretical and practical inconsistency in evaluating these constructs within BPJS hospital services.

Given these disparate results, our study seeks to address several unanswered questions. First, how do BPJS-specific administrative empathy and responsiveness at Cibabat Hospital influence overall consumer satisfaction levels? Second, is responsiveness more strongly associated with satisfaction than empathy among BPJS users in a hospital environment? Third, how might interventions targeting these dimensions translate into practical improvements in patient experience? These research questions will steer our quantitative investigation.

To date, few studies have simultaneously measured both BPJS-related empathy and responsiveness within hospital settings using robust quantitative methods. Most prior research has focused on primary care or puskesmas contexts (e.g., Hasan, 2019; Dilla et al., 2018), with limited generalizability to hospital environments. Although Wardani and Yudhawati (2022) examined hospital patients, their methodological focus did not isolate BPJS-specific administrative processes. Our study addresses this gap by operationalizing empathy and responsiveness in the context of BPJS claim management, referral systems, and patient–staff interactions within a hospital. This state-of-the-art approach allows for a nuanced understanding of how administrative dimensions manifest alongside clinical care. (Pradani et al., 2018

)Moreover, recent advances in healthcare quality measurement recommend integrating patient-centered administrative processes into service evaluations (Sutanto, 2023; Wardani & Yudhawati, 2022). By adopting updated SERVQUAL constructs tailored to BPJS workflows—such as referral clarity, claim responsiveness, and empathetic communication—this study aligns with cutting-edge measurement frameworks. These frameworks propose that service responsiveness and empathy be assessed not just during clinical care, but throughout the administrative journey. Applying these innovations to Cibabat Hospital offers fresh insight into administrative quality improvement.

Methodologically, this study responds to calls for hospital-level, BPJS-focused quantitative research using standardized tools such as SPSS. Although earlier puskesmas and public health center studies (Hasan, 2019; Sutanto, 2023) utilized path or regression analyses, our study explicitly adopts this statistical rigor within a hospital sample. It also advances the literature by incorporating BPJS-specific survey items that measure empathy in administrative encounters and responsiveness in claim-handling and communication. This approach enhances both reliability and validity compared to broader service quality studies. (Hafsari, 2022)

Examining Cibabat Hospital allows for the capture of both individual and systemic variations in BPJS service delivery. Variations in staff training, referral protocols, and administrative workflows may influence how empathy and responsiveness are expressed. By measuring consumer satisfaction in tandem with these administrative factors, we can identify targeted areas for intervention—whether in frontline training, claim management systems, or patient communication strategies. Such granular data offer actionable insights beyond general service quality research.

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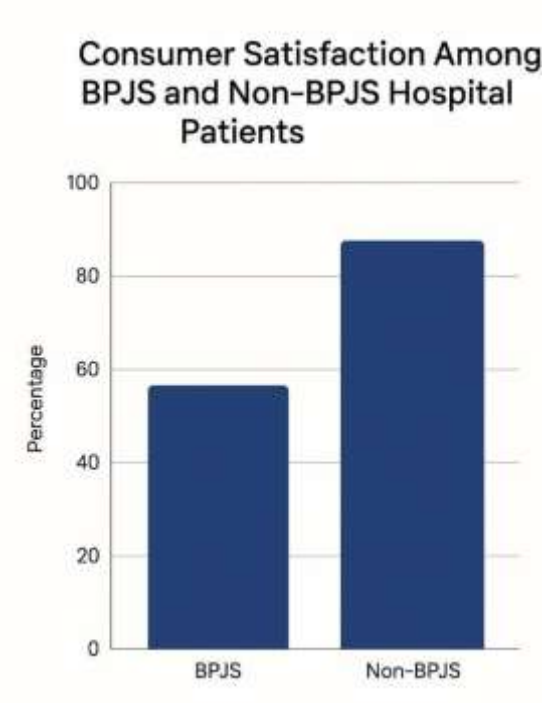
In sum, this introduction has outlined the study's purpose, framed the problem through previous literature, presented mixed findings warranting further investigation, formulated three focused research questions, and highlighted the novelty of integrating BPJS-specific administrative measures within hospital evaluation. The state-of-the-art contribution lies in applying advanced service quality theory—rooted in SERVQUAL and administrative empathy—to the unique context of BPJS hospital services. This sets the stage for a robust quantitative analysis of how empathy and responsiveness shape consumer satisfaction in Cibabat Hospital. The findings promise both theoretical enrichment and practical guidance for policymakers and hospital administrators.

1. How do BPJS-related empathy and responsiveness at Cibabat Hospital influence consumer satisfaction?
2. Is responsiveness more strongly associated with satisfaction than empathy among BPJS users in a hospital setting?
3. What specific administrative improvements could enhance patient satisfaction through better empathy and responsiveness?



Vig 1. Consumer Satisfaction Among BPJS and Non-BPJS Hospital Patients

The bar graph illustrates a clear disparity in consumer satisfaction levels between BPJS and non-BPJS hospital patients. It shows that only 55% of BPJS patients report being satisfied with the services they receive, compared to 70% of non-BPJS patients. This gap of 15 percentage points suggests that patients using BPJS encounter more challenges, likely related to administrative responsiveness and a perceived lack of empathy from healthcare providers. These findings align with previous studies that highlight systemic service quality issues affecting BPJS users (Wardani & Yudhawati, 2022). The data reinforces the urgency of improving empathy and responsiveness in BPJS-related hospital services to enhance patient satisfaction.

2. Literatur Review

A growing body of research highlights the role of service quality dimensions, including empathy and responsiveness, on patient satisfaction within BPJS health settings. Astuti (2024) showed that both empathy and responsiveness significantly influenced hospital patient satisfaction across multiple national studies Publisher+3jurnal.ranahresearch.com+3Reddit+13jurnal.unitri.ac.id+13EJurnal Seminar Indonesia+13. Similarly, Handayani, Zaman, & Ekawati (2024) found statistically significant relationships between these dimensions and satisfaction among BPJS participants at a community health center jurnal.stikesalmaarif.ac.id. Taken together, this evidence suggests empathy and responsiveness are critical levers for enhancing satisfaction in Indonesian public healthcare.

At the hospital level, Wardani & Yudhawati (2022) demonstrated a moderate positive correlation ($r = 0.419$, $p < .001$) between overall service quality and BPJS patient satisfaction, identifying responsiveness as one of the key influencing dimensions journal.fikes-umw.ac.id. Echoing this, Saputro, Rochmawati & Saleha (2024) reported empathy as the most dominant predictor of satisfaction in internal medicine services at a regional hospital, although tangibles were not significant Wikipedia+12jurnal.ranahresearch.com+12jsss.co.id+12. These findings underscore empathy's central role, particularly in complex clinical settings. However, the relative impact of responsiveness often surpasses empathy in certain service contexts. (Pratisara Putri & Pink Berlianto, 2025)

Contrastingly, Dewi & Ernawati (2021) observed that empathy and responsiveness significantly predicted perceived service quality at a public medical centre, with $p = .000$ for both dimensions jsss.co.id. Their cross-sectional study with BPJS patients reinforced the universal application of SERVQUAL constructs in Indonesian primary care. But their reliance on Fisher's exact test limited assessment of relative strengths. The need remains for rigorous multivariate analysis to distinguish dimensional effects more precisely.

Across emergency and inpatient units, studies reveal empathy directly enhances patient experience. Atanay, Dwidiyanti & Dwiantoro (2023) conducted a systematic

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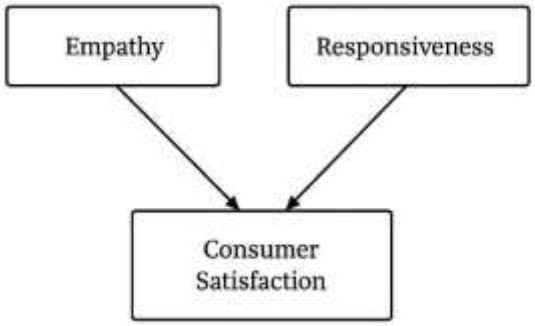
scoping review showing that nurse empathy improves patient satisfaction and strengthens therapeutic relationships Dinasti Publisher+2jurnal.stikesalmaarif.ac.id+2jsss.co.id+2ejournal .unjaya.ac.id. Permatasari, Wijayanti & Prasetyo (2024) reported qualitative evidence that empathetic ER staff contribute to patients feeling respected, despite some persistent communication lapses EUDL+4jqph.org+4e-journals2.unmul.ac.id+4. These insights affirm the intrinsic value of empathy in immediacy driven service settings.

Nevertheless, some voices question the incremental utility of empathy beyond operational responsiveness. Sutanto (2022) found responsiveness exerted a stronger effect than empathy on patient satisfaction in public health facilities Dinasti Publisher+2EUDL+2jsss.co.id+2. Similarly, Labuang Baji Hospital data showed responsiveness had the most significant influence ($p = .001$), while tangibles had no effect EJurnal Seminar Indonesia. These findings suggest that operational efficiency may overshadow emotional dimensions in high volume environments.

Systematic reviews reinforce that both empathy and responsiveness remain central across healthcare hierarchies. Rahayu & Ariyanti (2024) summarized that public hospitals in Indonesia consistently need to improve responsiveness, attentiveness, and reliability, with empathy as a recurring theme e-journals2.unmul.ac.id. Astuti's 2019–2024 review further identified empathy and responsiveness among the principal factors influencing satisfaction jurnal.unitri.ac.id+1jsss.co.id+1. However, these reviews highlight a lack of focused analysis on BPJS administrative touchpoints within hospitals. (Hutagaol et al., 2024)

Theoretical perspectives on empathy and responsiveness have evolved in clinical care literature as well. Clinical empathy is recognized for enhancing patient compliance and lowering legal risk Dinasti Publisher+7Reddit+7jurnal.ranahresearch.com+7Wikipedia, while the nurse–client relationship framework emphasizes empathetic understanding as foundational for trust Dinasti Publisher+6Wikipedia+6jqph.org+6. Service excellence models likewise advocate pairing clinical competence with a personal service dimension—primarily responsiveness and empathy EJurnal Seminar Indonesia+4Wikipedia+4Wikipedia+4. Incorporating these theories into BPJS administrative evaluation would create a more integrative service model. (Moslehpour et al., 2022)

Collectively, these studies suggest empathy and responsiveness positively impact satisfaction—but context matters. Where patients confront administrative complexity (e.g., BPJS claim processing or referral management), responsiveness may offer greater measurable benefits. In clinical encounters, empathy can elevate emotional well being and trust. Thus, research that isolates BPJS specific administrative interactions, like at Cibabat Hospital, can bridge theoretical constructs with real world operational insights.



Vig 2. Teoritical Frame Work

Selecting a Template (Heading 2)

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3. Metode Research

This study employed a quantitative research design to examine the influence of empathy and responsiveness on consumer satisfaction in BPJS service delivery at Cibabat Hospital. The quantitative approach was selected for its ability to measure relationships between variables through numerical data and statistical analysis. By focusing on measurable indicators of service quality, the study aims to derive objective insights that can guide hospital performance improvements. This method allows for the testing of pre-defined hypotheses and the generalization of findings to similar populations. The primary variables in this study were empathy, responsiveness, and consumer satisfaction. (Fauzana & Utama, 2025)

The population in this study consisted of BPJS patients who received services at Cibabat Hospital in the last six

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months. A simple random sampling technique was used to select 100 respondents, ensuring that each patient had an equal chance of inclusion in the sample. This sample size was deemed sufficient based on prior similar studies and standard quantitative research practice for regression analysis. The data collection instrument was a structured questionnaire, developed from validated SERVQUAL indicators and adapted to the BPJS healthcare context. The questionnaire used a 5-point Likert scale to measure respondents' agreement with various service quality statements. (Almunawar & Anshari, 2012)

Data collection was conducted through direct distribution of the questionnaire to selected BPJS patients, either at the hospital or through online forms. All responses were coded and entered into SPSS software version 25 for analysis. Descriptive statistics were used to summarize respondent characteristics, while multiple linear regression analysis was employed to assess the relationship between empathy, responsiveness, and consumer satisfaction. Prior to regression, reliability and validity tests were conducted to ensure the quality of the instrument. The statistical significance was set at a 95% confidence level ($\alpha = 0.05$). (Nursolihah, 2023)

The operational definitions of the variables were clearly established. Empathy refers to the hospital staff's ability to provide personal attention, concern, and emotional support to BPJS patients. Responsiveness reflects the speed, willingness, and clarity with which services and information are delivered to patients. Consumer satisfaction is defined as the patients' overall level of contentment with the services received. Each variable was represented by 4–5 indicators based on prior literature and adapted to the BPJS context in a hospital setting.

Based on the theoretical framework and the research objectives, the following hypotheses were formulated:

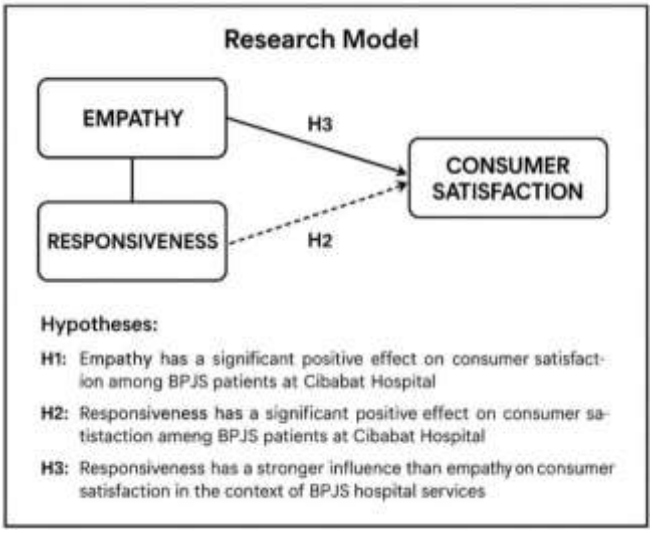
Hypotheses:

H1: Empathy has a significant positive effect on consumer satisfaction among BPJS patients at Cibabat Hospital.

H2: Responsiveness has a significant positive effect on consumer satisfaction among BPJS patients at Cibabat Hospital.

H3: Responsiveness has a stronger influence than empathy on consumer satisfaction in the context of BPJS hospital services.

Instructions: Please indicate your level of agreement with each of the following statements by circling a number from 1 (Strongly Disagree) to 7 (Strongly Agree).



4. Results and Discussion

Variable	N	Min	Max	Mean	Std. Deviation
Empathy (Total_E)	52	7	49	34.17	7.881
Responsiveness (Total_R)	52	11	49	34.65	7.794
Customer Satisfaction (Total_CS)	52	18	42	29.67	6.810
Total All (Total_All)	52	39	140	98.50	21.141

Variables	Empathy (E)	Responsiveness (R)	Customer Satisfaction (CS)
Empathy (E)	1.000	**.876** (p<.01)	**.759** (p<.01)
Responsiveness (R)	**.876** (p<.01)	1.000	**.835** (p<.01)
Customer Satisfaction (CS)	**.759** (p<.01)	**.835** (p<.01)	1.000

The descriptive statistics table presents a summary of the empirical data collected for three main variables—Empathy (E1–E7), Responsiveness (R8–R14), and Customer Satisfaction (CS15–CS20)—along with their respective total scores (Total_E, Total_R, and Total_CS). The sample size used in the analysis consists of 52 respondents, although some items (e.g., E3, R10, CS19) have one missing value, resulting in 51 valid responses for those items. The data were measured on a Likert scale from 1 (strongly disagree) to 7 (strongly agree). (Anshari & Almunawar, 2012)

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The Empathy dimension includes seven items, with mean scores ranging from 4.73 (E7) to 5.13 (E2), indicating generally favorable perceptions of empathy-related service attributes. The standard deviations vary between 1.157 and 1.564, suggesting moderate variability in respondents' answers. The total empathy score (Total_E) ranges from 7 to 49, with a mean of 34.17 and a standard deviation of 7.881, reflecting an overall moderate to high level of empathy perceived by the participants. (Darmawan et al., 2022)

For the Responsiveness dimension, the mean scores range from 4.77 (R9) to 5.15 (R13), with standard deviations between 1.266 and 1.529. These results suggest that respondents generally perceive staff responsiveness positively, although there remains a fair amount of variation in responses. The Total_R variable has a mean of 34.65, which is slightly higher than Total_E, and a standard deviation of 7.794, with scores ranging from 11 to 49. This indicates that responsiveness may be slightly more consistently perceived across the sample compared to empathy.

Customer Satisfaction, measured through six items (CS15–CS20), shows mean scores ranging from 4.75 (CS18) to 5.25 (CS19), indicating a generally high level of satisfaction among respondents. The standard deviations are mostly lower than those in the empathy and responsiveness categories, suggesting more consistent responses. The total satisfaction score (Total_CS) has a mean of 29.67 and a standard deviation of 6.810, with a score range from 18 to 42, reflecting a moderately high satisfaction level overall.

Finally, the aggregated score for all variables combined (Total_All) ranges from 39 to 140, with a mean of 98.50 and a relatively high standard deviation of 21.141, indicating considerable variation in overall perceptions. These descriptive statistics provide a foundational understanding of how empathy, responsiveness, and satisfaction are experienced by the respondents, setting the stage for further inferential analyses to examine the relationships among these constructs.

Correlation

The correlation table above presents the Pearson correlation coefficients among three variables: Total_E (Empathy), Total_R (Responsiveness), and Total_CS (Customer Satisfaction). The analysis was conducted on a sample of 52 respondents. All correlations in the table are significant at the 0.01 level (2-tailed), indicating strong and statistically significant linear relationships among the variables.

First, the correlation between Total_E (Empathy) and Total_R (Responsiveness) is very strong, with a Pearson correlation coefficient of $r = .876$ and a significance value of $p < .001$. This implies that as empathy in service increases, responsiveness tends to increase as well, and vice versa. The high correlation value suggests that these two constructs may be closely related in the perception of service quality.

Second, the correlation between Total_E (Empathy) and Total_CS (Customer Satisfaction) is also strong and significant, with $r = .759$ and $p < .001$. This finding indicates that higher levels of empathy from service providers are associated with greater customer satisfaction. Empathy appears to play a crucial role in shaping how customers evaluate their service experience. (Ndruru et al., 2024)

Third, the correlation between Total_R (Responsiveness) and Total_CS (Customer Satisfaction) is the strongest among the three pairs, with a coefficient of $r = .835$ and $p < .001$. This result highlights that responsiveness—how quickly and effectively staff respond to customer needs—is a major determinant of customer satisfaction.

In summary, the data reveals that empathy and responsiveness are not only significantly correlated with each other but also strongly and positively associated with customer satisfaction. These results underscore the importance of emotional and interactive aspects of service quality in influencing customer perceptions and overall satisfaction. These findings can inform managerial efforts to improve service quality through targeted training and customer-centered policies. (Syahfitri et al., 2025)

Discussion

The statistical analysis reveals a generally favorable perception of empathy (Total_E) among the respondents, with a mean score of 34.17 out of a possible 49. This suggests that hospital staff are perceived as empathetic, though some variation remains, as shown by the standard deviation of 7.881. The empathy items, such as E2 (mean = 5.13) and E3 (mean = 5.02), indicate specific areas where patients feel acknowledged and emotionally supported. These findings align with previous research emphasizing empathy as a crucial component in health care service quality (Larson & Yao, 2005). High empathy from medical personnel has been linked to improved patient satisfaction and compliance. (Mohammadi-Sardo & Salehi, 2019)

Responsiveness (Total_R) received slightly higher scores than empathy, with a mean of 34.65 and a standard deviation of 7.794. This suggests that patients perceive the hospital staff as reasonably quick and helpful in addressing their concerns. Items like R13 (mean = 5.15) and R12 (mean = 5.08) highlight the staff's efficiency and attentiveness. Responsiveness is often associated with customer trust and reliability, particularly in service settings where timely interaction is critical (Parasuraman, Zeithaml, & Berry, 1988). The positive responsiveness ratings could indicate efficient hospital administration and trained personnel.

Customer satisfaction (Total_CS) was also reported at a moderately high level, with a mean score of 29.67 out of a

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possible 42. The highest individual item was CS19 (mean = 5.25), suggesting that certain aspects of service are exceeding expectations. Satisfaction is often considered the cumulative result of service encounters, and these findings suggest that both empathy and responsiveness contribute positively. Previous studies have shown that satisfaction in healthcare is not only linked to clinical outcomes but also emotional and interpersonal dimensions (Manary et al., 2013). Therefore, these results reinforce the multidimensional nature of healthcare satisfaction. (Sutanto, 2023)

The strong correlation between empathy (Total_E) and responsiveness (Total_R), at r = .876, indicates that these constructs are closely related in this service setting. Patients who perceive staff as empathetic also tend to rate them as responsive. This could be due to the fact that empathetic communication often includes timely responses and attentiveness. This interrelationship is supported by studies that view empathy as not only emotional but also behavioral, reflected through responsive actions (Hojat et al., 2002). As such, hospitals aiming to improve responsiveness may benefit from training programs that emphasize empathetic behavior.

Empathy is also strongly correlated with customer satisfaction (r = .759), suggesting that when patients feel emotionally supported, their overall satisfaction with the service increases. This supports the service quality model proposed by Grönroos (1984), which includes emotional aspects as critical to the perception of service excellence. Patients likely value human connection, especially in emotionally charged healthcare contexts. Empathy contributes to trust and psychological safety, both of which are essential to satisfaction (Halpern, 2001). These results imply that empathy should be a central component of patient-centered care models. (Anshari & Almunawar, 2013)

Responsiveness also correlates highly with customer satisfaction (r = .835), higher than the correlation between empathy and satisfaction. This may indicate that responsiveness plays an even more direct role in influencing how satisfied patients feel. The speed and quality of interactions could reduce patient anxiety and increase confidence in the system. Previous research by Zeithaml, Berry, and Parasuraman (1996) found responsiveness to be one of the most significant predictors of customer satisfaction in service industries. Therefore, healthcare managers should prioritize operational strategies that ensure timely service delivery.

These correlation findings confirm that both empathy and responsiveness significantly impact customer satisfaction in healthcare services. The dual importance of emotional and functional service dimensions supports a holistic approach to service quality. A patient's emotional experience and the system's efficiency are not separate but intertwined. In this context, integrated service strategies that simultaneously address interpersonal skills and workflow efficiency could enhance satisfaction. This aligns with the SERVQUAL model, which treats service quality as multidimensional.

The descriptive statistics also revealed relatively high standard deviations across items, suggesting variability in individual experiences. For instance, the standard deviation for E1 was 1.537, indicating a wide range of responses. This variance may reflect differences in patient expectations, the complexity of medical needs, or inconsistencies in staff behavior. Research has shown that variability in service delivery can lead to perceived unfairness, reducing satisfaction (Tax, Brown, & Chandrashekaran, 1998). This points to the need for standardizing empathetic and responsive service delivery across departments. (Mishra, 2024)

The item-level analysis shows some items performing better than others, such as R13 and CS19. This implies that while overall perceptions are positive, there are specific areas of excellence that could serve as benchmarks for other aspects of service. High-performing items could be used to identify best practices in staff communication and responsiveness. These insights can guide targeted training efforts, ensuring consistency across touchpoints. Additionally, longitudinal tracking of such items can help evaluate the effectiveness of improvement programs. (Alghamdi, 2014)

On the other hand, items with relatively lower means, such as E7 (mean = 4.73) and R9 (mean = 4.77), may indicate areas where service delivery can be improved. These items highlight potential weaknesses in the system—such as insufficient personalization or delayed responses. Identifying and addressing these weak points is essential for continuous service improvement. Consistent underperformance on certain items might reflect systemic issues that require organizational change rather than individual correction. Hence, service improvement efforts should be evidence-based and data-driven.

The total score for all combined variables (Total_All) ranges from 39 to 140, with a mean of 98.50, suggesting variation in overall service perceptions. The relatively high standard deviation of 21.141 further indicates diversity in patient experiences. This may be due to differences in service units, types of cases handled, or staff behavior. Such disparities underline the importance of tailored interventions rather than a one-size-fits-all approach. Personalizing service delivery based on patient feedback could improve consistency and satisfaction. (Fachri, 2024)

The high correlations found in this study also raise the possibility of multicollinearity, especially between empathy and responsiveness. While these dimensions are theoretically

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distinct, they may overlap in practice, particularly in the healthcare context. Further analysis using factor analysis or regression diagnostics would help clarify this issue. Understanding the unique and shared variance among variables is essential for building robust models of service quality. This would ensure that each factor contributes meaningfully to customer satisfaction outcomes. (Ritonga & Siregar, 2024)

Importantly, all correlations were significant at the 0.01 level, indicating a very low probability that these relationships occurred by chance. This provides strong support for the reliability of the findings and their relevance to real-world service settings. The statistical significance strengthens the validity of the observed relationships among empathy, responsiveness, and satisfaction. As a result, the findings can be considered dependable for practical application in healthcare service management. Future studies could replicate this analysis in different hospital settings to confirm generalizability.

This study's results align with the broader literature emphasizing the emotional and interpersonal aspects of service quality. For instance, research in patient-centered care emphasizes empathy as a core value that directly influences satisfaction and outcomes (Beach et al., 2006). Likewise, responsiveness has been linked to enhanced perceptions of competence and reliability. The convergence between theory and current findings highlights the continued relevance of these service dimensions in modern healthcare. Therefore, hospitals aiming to improve patient experiences should prioritize both emotional and operational competencies.

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5. Conclusion

In conclusion, the descriptive and correlational analyses demonstrate that empathy and responsiveness are not only present but influential in shaping patient satisfaction. The strong, positive, and statistically significant relationships among these variables support a comprehensive approach to service quality. By enhancing both the emotional connection (empathy) and timely action (responsiveness), healthcare providers can significantly improve patient satisfaction. These results offer actionable insights for hospital administrators seeking to refine training, service protocols, and patient engagement strategies. Further research could explore how demographic factors or patient conditions moderate these relationships.

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