

Analysis of the Hospital Marketing Mix and Its Effect on Patient Loyalty in the Outpatient Department of Arjawinangun Regional General Hospital

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ABSTRACT

This study aims to analyze the influence of the hospital marketing mix on patient loyalty at RSUD Arjawinangun, Cirebon Regency. Using a quantitative cross-sectional design, data were collected from 151 outpatient respondents through structured questionnaires. The marketing mix variables examined included product, price, place, promotion, people, process, and physical evidence. Data were analyzed using descriptive statistics, Chi-Square tests, and multivariate logistic regression with a forward stepwise method. The results of the bivariate analysis showed that price, place, promotion, people, process, and physical evidence were statistically significantly associated with patient loyalty ($p < 0.05$), whereas the product dimension was not. Multivariate analysis revealed that physical evidence, promotion, and people were the most dominant factors influencing patient loyalty, with the final model explaining 60.5% of the variance in loyalty. Patients who perceived hospital facilities as clean, comfortable, and well-organized, received clear and informative promotional communication, and experienced professional and empathetic services from hospital staff were significantly more likely to demonstrate high loyalty. These findings indicate that patient loyalty in public hospitals is shaped not only by clinical services but also by experiential and relational aspects of healthcare delivery. Therefore, hospital management should integrate service quality improvement, human resource development, and strategic promotion to enhance sustainable patient loyalty.

Keywords:

Hospital Marketing Mix; Patient Loyalty; Public Hospital; Healthcare Services; Service Quality

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INTRODUCTION

Hospitals constitute a vital component of the healthcare system, playing a significant role in improving population health outcomes while simultaneously supporting sustainable development goals (World Health Organization [WHO], 2020). In Indonesia, the operational framework for hospitals is regulated under the Regulation of the Minister of Health Number 3 of 2020, which stipulates hospital classification, licensing, and the mandatory provision of outpatient services as an integral part of medical care. The Outpatient Department (OPD) serves as the primary gateway for patients seeking healthcare services, whether for ambulatory treatment or as an initial stage prior to hospitalization. These services encompass promotive, preventive, curative, and rehabilitative care (Ministry of Health of the Republic of Indonesia, 2020).

In addition, Government Regulation Number 47 of 2021 concerning Hospital Administration emphasizes that outpatient service management must adhere to the principles of good clinical governance. This includes compliance with healthcare quality standards, implementation of measurable patient safety systems, and routine reporting of service data to governmental authorities. Such measures aim to enhance service quality, transparency, and accountability within the healthcare sector (Ministry of Health of the Republic of Indonesia, 2021).

From a service perspective, healthcare delivery is a series of actions provided to service users, in both tangible and intangible forms, to meet their needs and resolve health-related problems. Hospitals function as healthcare service providers, while patients act as service recipients. Beneficiaries inherently expect high-quality services that align with their needs, preferences, and expectations (Irawan et al., 2020).

Recent data from the Ministry of Health of the Republic of Indonesia indicate that as of December 5, 2024, a total of 3,217 hospitals were operating nationwide, with 28% under private ownership and 21% owned by local governments. Furthermore, in 2024, there were approximately 121.86 million outpatient visits at the primary care level and 34.64 million visits at the advanced outpatient level, highlighting the substantial demand for outpatient services in Indonesia.

In Cirebon Regency, there are 13 hospitals, including 2 specialized hospitals and 11 general hospitals. Arjawinangun Regional General Hospital, located on Jl. Palimanan–Jakarta KM 2 No. 1, Cirebon Regency, operates in a highly competitive environment, facing competition from several nearby hospitals, including Sumber Waras Hospital Cirebon, Khalisa Hospital Palimanan, Pasar Minggu Hospital Cirebon, Hasna Medika Heart Hospital, Mitra Plumbon Hospital, Sumber Hurip Hospital, Permata Hospital Cirebon, and Pertamina Hospital Cirebon. This competitive landscape presents significant challenges for Arjawinangun Regional General Hospital in sustaining growth and maintaining competitiveness in an increasingly globalized healthcare market.

Outpatients visit data show that Arjawinangun Regional General Hospital recorded 17,177 visits in 2020, followed by a decline to 9,704 visits in 2021. Subsequently, outpatient visits increased to 12,355 in 2022 and 12,763 in 2023, before rising to 18,597 visits in 2024. Despite this upward trend, the number of visits remains lower compared to surrounding hospitals. According to data from the Cirebon Regency Health Office, the highest outpatient visit volume in 2024 was recorded at Mitra Plumbon Hospital with 350,965 visits, followed by Waled Regional General Hospital with 129,837 visits and Sumber Waras Hospital with 97,612 visits, located approximately 5.5 kilometers from Arjawinangun Regional General Hospital.

The ongoing growth in the number of hospitals in Indonesia has intensified competition among healthcare institutions to attract and retain patients. To compete effectively, particularly in a globalized healthcare environment, hospitals must prioritize strategic marketing initiatives that are aligned with the needs and preferences of their target markets. One widely adopted approach is the marketing mix, which has been shown to significantly influence consumer decision-making in healthcare service selection. By aligning marketing strategies with patient expectations, hospitals can better attract new patients and retain existing ones.

The hospital marketing mix is commonly conceptualized using the 7P framework, which includes product, price, place, promotion, people, process, and physical evidence (Kotler & Keller, 2016). Effective implementation of this framework requires a strong focus on improving patient experience, strengthening communication, and delivering consistent service quality. Through these efforts, hospitals can foster patient satisfaction, build trust, and cultivate long-term patient loyalty, particularly in outpatient services.

Strengthening patient loyalty requires a comprehensive marketing strategy that attracts new patients, retains existing ones, and enhances the institution's reputation. Such strategies contribute not only to increased patient volumes but also to improved hospital performance and financial sustainability.

Previous research by Murniati (2023) examining patient satisfaction and loyalty toward the hospital marketing mix at Hospital ABC revealed that the highest satisfaction levels were observed in the price (71%) and people (70.6%) dimensions, while promotion (59%) and process (48%) recorded the lowest satisfaction levels. Overall patient loyalty was reported at 69.6%. Meanwhile, a study by Rizki et al. (2024) found that product, process, and physical evidence were significantly associated with outpatient loyalty at TNI AU Lanud El Tari Hospital.

Furthermore, Hari et al. (2024) demonstrated that all elements of the 7P marketing mix significantly influenced outpatient visit volumes at RSIA Karunia Bunda ($p \leq 0.05$), with place emerging as the most dominant factor ($p = 0.000$; Odds Ratio = 167.859).

Based on these empirical findings and the competitive context faced by Arjawinangun Regional General Hospital, this study seeks to further analyze the influence of the hospital marketing mix on patient loyalty in the Outpatient Department of Arjawinangun Regional General Hospital, Cirebon Regency.

METHOD

This study employed a quantitative research design to examine and measure the relationship between the hospital marketing mix and patient loyalty at Arjawinangun Regional General Hospital (RSUD Arjawinangun), Cirebon Regency. Data were collected through a structured questionnaire designed to capture patients' perceptions of the marketing mix dimensions and their loyalty toward outpatient services. The quantitative approach enabled the use of numerical data and statistical analysis to assess the influence of marketing mix variables on outpatient loyalty. The study population comprised all outpatient visitors to RSUD Arjawinangun during the data collection period.

The sample was selected based on predefined inclusion and exclusion criteria. Eligible respondents included outpatients or their family members who had visited the hospital at least twice, were able to read and write, and were conscious and capable of effective communication, while hospital employees and individuals who declined participation were excluded. The minimum sample size was determined using the Slovin formula with a 5% margin of error, resulting in a minimum requirement of 133 respondents. To enhance data reliability and reduce potential non-response bias, the final sample size was rounded up to 150 respondents.

RESULTS AND DISCUSSION

1. Relationship Between Price and Patient Loyalty

The analysis of the relationship between the price dimension and patient loyalty yielded a Pearson Chi-Square value of 16.545 with a significance level of $p = 0.000$ ($p < 0.05$), indicating a statistically significant association. The results demonstrate that within the low-price perception group, a substantial proportion of respondents exhibited low loyalty (50%). In contrast, among patients who perceived prices as high but reasonable, 88% demonstrated high loyalty. These findings indicate that pricing policies perceived as fair and commensurate with service quality contribute positively to enhancing patient loyalty.

From a hospital marketing perspective, price does not merely reflect the monetary cost incurred by patients, but also encompasses perceived value. Kotler and Keller (2022) emphasize that in healthcare services, transparent and reasonable pricing fosters trust and satisfaction, which ultimately strengthens patient loyalty. This

finding aligns with Budi and Astuti (2023), who reported that competitive and value-consistent pricing significantly influences patients' intention to reuse hospital services.

At RSUD Arjawinangun, payment systems accommodate BPJS Health Insurance, private insurance, and self-paying patients. Pricing is regulated by local government policies and national healthcare regulations, including the INA-CBGs tariff system. Such transparency and regulatory compliance reinforce perceptions of fairness, thereby strengthening patient trust and long-term loyalty.

2. Relationship Between Place and Patient Loyalty

Table 7. Relationship Between Place and Patient Loyalty

	Place Low	High Loyalty	Total
Low	11	6	17
High	14	120	134
Total	25	126	151

Table 8. Chi-Square Test Results for Place and Patient Loyalty

Test	Value	df	Sig. (2-sided)
Pearson Chi-Square	32.148	1	0.000
Valid Cases		151	

The Chi-Square test revealed a Pearson Chi-Square value of 32.148 ($p < 0.05$), confirming a significant relationship between place and patient loyalty. Among respondents perceiving place as low, 64.7% exhibited low loyalty, whereas in the high-place group, only 10.4% showed low loyalty. This demonstrates that accessibility, strategic location, and convenience strongly influence patient loyalty.

In hospital service marketing, place encompasses location, accessibility, facility layout, and environmental comfort (Kotler & Keller, 2022). These factors are particularly critical in healthcare settings where patients require repeated visits. Previous studies by Al-Borie and Damanhour (2013) and Zeithaml et al. (2020) confirm that ease of access and facility layout directly affect patient satisfaction and retention.

RSUD Arjawinangun benefits from a strategic geographic location along a major interregional route, integrated service facilities, and accessibility for middle- and lower-income communities. These characteristics reinforce its role as a public service-oriented healthcare provider and significantly enhance patient loyalty.

3. Relationship Between Promotion and Patient Loyalty

Table 9. Relationship Between Promotion and Patient Loyalty

	Promotion Low	High Loyalty	Total
Low	17	8	25
High	8	118	126
Total	25	126	151

Table 10. Chi-Square Test Results for Promotion and Patient Loyalty

Test	Value	df	Sig. (2-sided)
Pearson Chi-Square	57.392	1	0.000
Valid Cases		151	

The Chi-Square test for promotion produced a Pearson Chi-Square value of 57.392 ($p < 0.05$), indicating a highly significant relationship. Among respondents perceiving promotion as low, 68% exhibited low loyalty, whereas 93.7% of those perceiving promotion as high demonstrated high loyalty. These findings confirm that effective promotional strategies significantly contribute to patient loyalty formation.

In healthcare marketing, promotion extends beyond advertising to include health education campaigns, social media engagement, community outreach, and informational transparency (Kotler, Bowen, & Makens, 2021). Zeithaml et al. (2020) and Osei-Frimpong et al. (2022) highlight that educational and transparent promotions strengthen patient trust and emotional attachment.

Although RSUD Arjawinangun lacks a formal marketing team, its digital platforms and social media channels present opportunities for improving promotional effectiveness and strengthening patient loyalty.

4. Relationship Between People and Patient Loyalty

Table 11. Relationship Between People and Patient Loyalty

	People Low	People High	Total
Low	14	1	15
High	11	125	136
Total	25	126	151

Table 12. Chi-Square Test Results for People and Patient Loyalty

Test	Value	df	Sig. (2-sided)
Pearson Chi-Square	71.062	1	0.000
Valid Cases		151	

The analysis yielded a Pearson Chi-Square value of 71.062 ($p < 0.05$), indicating a very strong relationship between people and patient loyalty. Among respondents perceiving people quality as low, 93.3% demonstrated low loyalty, whereas 91.9% of those perceiving people quality as high exhibited high loyalty.

This result underscores the importance of human resources in healthcare services. Interpersonal interaction, empathy, professionalism, and communication skills play a decisive role in shaping patient trust and loyalty (Al-Abri & Al-Balushi, 2014; Li et al., 2023).

5. Relationship Between Process and Patient Loyalty

Table 13. Relationship Between Process and Patient Loyalty

	Process Low	Process High	Total
Low	14	5	19
High	11	121	132
Total	25	126	151

Table 14. Chi-Square Test Results for Process and Patient Loyalty

Test	Value	df	Sig. (2-sided)
Pearson Chi-Square	51.345	1	0.000
Valid Cases		151	

The Chi-Square value of 51.345 ($p < 0.05$) confirms a significant association between service process and patient loyalty. Efficient, transparent, and patient-centered processes significantly reduce dissatisfaction and enhance loyalty, particularly when supported by digital systems such as online registration and electronic medical records.

6. Relationship Between Physical Evidence and Patient Loyalty

Table 15. Relationship Between Physical Evidence and Patient Loyalty

	Physical Evidence Low	Physical Evidence High	Total
Low	16	3	19
High	9	123	132
Total	25	126	151

Table 16. Chi-Square Test Results for Physical Evidence and Patient Loyalty

Test	Value	df	Sig. (2-sided)
Pearson Chi-Square	72.010	1	0.000
Valid Cases		151	

The Pearson Chi-Square value of 72.010 ($p < 0.05$) indicates a very strong relationship between physical evidence and patient loyalty. Clean, modern, and well-maintained facilities significantly enhance patient perceptions of service quality and institutional credibility (Nugraha et al., 2023; Setyawan & Rahmawati, 2024).

7. Multivariate Analysis: Logistic Regression

Multivariate logistic regression analysis using the Forward Stepwise (Likelihood Ratio) method identified Physical Evidence, Promotion, and People as significant predictors of patient loyalty. The final model explained 60.5% of the variance in patient loyalty (Nagelkerke $R^2 = 0.605$), with a satisfactory model fit indicated by the Hosmer–Lemeshow test ($p > 0.05$).

Negative coefficients for all three variables indicate that unfavorable perceptions substantially reduce the likelihood of patient loyalty. These findings reinforce the strategic importance of integrating tangible service quality, effective communication, and human resource excellence in hospital marketing strategies.

CONCLUSION

This study examined the relationship between the hospital marketing mix and patient loyalty at RSUD Arjawinangun using both bivariate and multivariate analyses. The findings demonstrate that all dimensions of the marketing mix—price, place, promotion, people, process, and physical evidence—have a statistically significant relationship with patient loyalty. Among these dimensions, physical evidence, promotion, and people emerged as the most influential predictors in the multivariate logistic regression model, explaining 60.5% of the variance in patient loyalty.

The results indicate that patient loyalty in hospital services is not determined solely by clinical outcomes, but is strongly shaped by patients' overall service experience. Fair and transparent pricing contributes to positive value perceptions, while strategic location and accessibility enhance convenience and repeat visits. Effective promotion, particularly through educational and informative communication, strengthens patient trust and engagement. Moreover, the quality of human resources, efficient service processes, and well-maintained physical facilities play a decisive role in forming long-term patient loyalty. These findings reinforce contemporary service marketing theories, which emphasize the integration of tangible and intangible service elements in healthcare settings.

Recommendations

Based on the findings, several strategic recommendations are proposed for hospital management. First, RSUD Arjawinangun should prioritize continuous improvement of physical evidence, including facility maintenance, cleanliness, comfort, and modernization of medical equipment, as this dimension shows the strongest influence on patient loyalty. Second, the hospital should strengthen its promotion strategy by establishing a dedicated marketing team responsible for managing digital platforms, health education campaigns, and community engagement activities. Clear, consistent, and educational promotional content will enhance trust and reinforce the hospital's public image.

Third, management should invest in the development of human resources (people) through continuous training programs focusing on both technical competencies and soft skills such as communication, empathy, and patient-centered

care. Fourth, optimization of service processes through digital transformation—such as online registration systems, electronic medical records, and integrated service flows—should be further expanded to reduce waiting times and improve service efficiency. Finally, future research is recommended to incorporate additional variables such as patient satisfaction, trust, and service quality as mediating or moderating factors, as well as to employ longitudinal designs to better capture changes in patient loyalty over time.

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