

Role of patient satisfaction in mediating the effects of service quality and brand image on hospital selection decisions

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ABSTRACT

Hospital selection has become an increasingly important issue as patients consider both healthcare quality and institutional reputation before choosing healthcare providers. This study aimed to examine the effects of service quality and brand image on hospital selection decisions, with patient satisfaction serving as a mediating variable. A quantitative cross-sectional design was employed using data collected from 259 patients who had received outpatient or inpatient services at a Type B regional public hospital in Indonesia. Data were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM) with SmartPLS 4. The measurement model demonstrated satisfactory indicator reliability, convergent validity, discriminant validity, and construct reliability. The structural model also showed strong explanatory power. The results indicated that service quality and brand image significantly improved patient satisfaction. Brand image and patient satisfaction significantly influenced hospital selection decisions, whereas the direct effect of service quality on hospital selection decisions was not significant. Furthermore, patient satisfaction significantly mediated the relationships between service quality and hospital selection decisions and between brand image and hospital selection decisions. These findings suggested that patient satisfaction represented the primary mechanism through which healthcare quality and institutional reputation influenced patients' hospital selection decisions. The study provides empirical evidence supporting the integration of service quality, brand image, and patient satisfaction in explaining hospital selection decisions within regional public hospitals.

Article information

Kata Kunci:

Kepuasan Pasien; Kualitas Layanan; Keputusan Pemilihan Rumah Sakit; PLS-SEM.

ABSTRACT

Pemilihan rumah sakit menjadi keputusan yang semakin penting karena pasien mempertimbangkan kualitas layanan dan reputasi institusi sebelum menentukan penyedia layanan kesehatan. Penelitian ini bertujuan menganalisis pengaruh kualitas layanan dan citra merek terhadap keputusan pemilihan rumah sakit dengan kepuasan pasien sebagai variabel mediasi. Penelitian menggunakan pendekatan kuantitatif dengan desain cross-sectional terhadap 259 pasien yang pernah menerima layanan rawat jalan maupun rawat inap pada sebuah rumah sakit umum daerah tipe B di Indonesia. Data dianalisis menggunakan Partial Least Squares Structural Equation Modeling (PLS-SEM) dengan SmartPLS 4. Hasil evaluasi menunjukkan bahwa model pengukuran memenuhi kriteria validitas dan reliabilitas, sedangkan model struktural memiliki daya jelaskan yang kuat. Kualitas layanan dan citra merek berpengaruh signifikan terhadap kepuasan pasien. Citra merek dan kepuasan pasien juga berpengaruh signifikan terhadap keputusan pemilihan rumah sakit, sedangkan pengaruh langsung kualitas layanan tidak signifikan. Selain itu, kepuasan pasien terbukti memediasi hubungan antara kualitas layanan dan citra merek terhadap keputusan pemilihan rumah sakit. Temuan ini menegaskan bahwa kepuasan pasien merupakan mekanisme utama yang menghubungkan kualitas layanan dan citra merek dengan keputusan pemilihan rumah sakit.

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1. Introduction

Hospital performance has become a key indicator for evaluating the effectiveness and sustainability of healthcare services, particularly in an increasingly competitive healthcare environment. Among various performance indicators, patient visits and the Bed Occupancy Rate (BOR) are widely used to assess healthcare service utilization and the efficiency of hospital resource management. A higher number of patient visits generally reflects greater public trust in healthcare services, whereas BOR indicates the extent to which inpatient facilities are optimally utilized. According to patient visit records from RSUD Dr. Harjono S. Ponorogo (RSDH), outpatient visits increased from 117,093 in 2021 to 200,489 in 2024, while inpatient visits rose from 15,666 to 22,042 during the same period. However, despite this upward trend, the hospital's BOR increased only from 32.20% in 2021 to 57.59% in 2024, remaining below the ideal occupancy standard of 75% for Type B hospitals. Furthermore, monthly BOR data from January to October 2025 showed considerable fluctuations, with the target achieved only in April. These findings indicate that increasing patient visits alone has not been sufficient to ensure optimal utilization of inpatient services, suggesting the existence of underlying factors that influence patients' hospital selection decisions.

Table 1. Patient visits and Bed Occupancy Rate (BOR) at RSDH Ponorogo (2021–2025)

Descripti on	2021	2022	2023	2024	2025 (Jan– Oct)
Outpatient Visits	117.093	133.224	164.939	200.489	182.484
Inpatient Visits	15.666	17.891	19.081	22.042	18.350
BOR %	32,20	42,60	50,60	57,59	67,09

Source: RSUD Dr. Harjono S. Ponorogo patient visit data (2021–2025)

The phenomenon observed at RSUD Dr. Harjono S. Ponorogo indicates that increasing patient visits does not necessarily lead to optimal utilization of hospital services. This condition suggests that patients' hospital selection decisions involve a complex evaluation process rather than being influenced solely by the availability of medical services. According to [1], consumer decision-making is a process in which individuals recognize their needs, evaluate available alternatives, and ultimately select the option perceived to provide the greatest value. In the healthcare context, hospital selection decisions are influenced by patients' evaluations of both tangible and intangible aspects of healthcare services, including their previous service experiences and perceptions of healthcare providers [2]. Recent empirical studies have also shown that patients consider multiple factors when selecting hospitals, particularly service quality and the image of healthcare institutions [3], [4]. Therefore, identifying the determinants of hospital selection decisions is essential for explaining the phenomenon observed at RSUD Dr. Harjono S. Ponorogo and supporting the development of more effective patient-centered healthcare strategies.

Among the various factors influencing hospital selection decisions, service quality has consistently been recognized as one

of the most important determinants of patients' evaluations of healthcare providers. In the healthcare sector, service quality extends beyond the delivery of medical treatment and encompasses a hospital's ability to provide reliable, responsive, empathetic, and patient-centered services that meet or exceed patients' expectations [5]. High-quality healthcare services enhance patients' confidence in the hospital and encourage positive evaluations, which subsequently influence their hospital selection decisions [2]. Empirical studies have also demonstrated that service quality positively affects hospital selection decisions, as patients tend to prefer hospitals that consistently deliver professional, responsive, and dependable services [6], [3]. Therefore, improving service quality is considered a strategic approach for hospitals to strengthen patients' preferences and increase the likelihood of being selected as their healthcare provider. Nevertheless, patients' decisions are not solely determined by their evaluation of service quality, as intangible aspects such as the hospital's image also contribute to their overall assessment.

Beyond service quality, brand image plays a crucial role in shaping patients' perceptions and influencing their hospital selection decisions. A favorable brand image reflects the overall impression of a hospital formed through patients' experiences, public reputation, and perceived credibility, which can strengthen patients' confidence when selecting healthcare providers [7]. In healthcare services, a positive institutional image not only enhances public trust but also reduces patients' uncertainty regarding the quality and reliability of medical services, particularly when they have limited information or prior experience with a hospital [2]. Empirical evidence further indicates that hospitals with a strong and positive image are more likely to be selected because patients tend to associate a favorable reputation with better quality of healthcare and service outcomes [4], [8]. However, although service quality and brand image are important considerations, patients' hospital selection decisions may not be fully explained by these factors alone. Positive evaluations of healthcare services and hospital reputation are more likely to influence hospital selection decisions when they generate a satisfactory healthcare experience. Therefore, patient satisfaction is considered a key mechanism that may explain how service quality and brand image translate into hospital selection decisions.

Patient satisfaction has been widely recognized as a critical outcome of healthcare service delivery and an essential factor influencing patients' behavioral intentions. In healthcare settings, patient satisfaction reflects the extent to which healthcare services meet or exceed patients' expectations, encompassing not only the quality of medical treatment but also patients' overall experiences throughout the service process [2]. When patients perceive that a hospital consistently delivers high-quality services and maintains a positive institutional image, they are more likely to develop favorable evaluations that lead to higher levels of satisfaction. Consequently, satisfied patients tend to demonstrate greater confidence in their hospital selection decisions and are more likely to select or revisit the same hospital when future medical needs arise. Consistent with this perspective, previous empirical studies have reported that patient satisfaction plays an important mediating role in explaining how service quality and brand image influence patients' behavioral outcomes [9], [10], [11]. Although these findings highlight the importance of patient satisfaction in healthcare decision-making,

variations in research contexts, conceptual frameworks, and empirical findings suggest the need to synthesize existing evidence to better understand the relationships among these variables. Therefore, a review of previous studies is provided to identify the research gaps addressed in this study.

Table 2. Synthesis of previous studies and identified research gaps

Authors	Research Focus	Key Findings	Identified Research Gap
Hasibuan et al. (2022)	Service quality and patient behavior	Service quality positively influences patients' behavioral outcomes.	The study did not examine the mediating role of patient satisfaction in hospital selection decisions.
Maulana & Ayuningtyas (2023)	Service quality and hospital selection decision	Service quality significantly affects hospital selection decisions.	Brand image was not incorporated into the research model.
Prayogo & Ariadi (2024)	Brand image and hospital selection	Brand image positively influences patients' hospital selection decisions.	Service quality was not simultaneously analyzed in explaining hospital selection decisions.
Supriyanto & Dahlan (2024)	Patient satisfaction as a mediator	Patient satisfaction mediates the relationship between healthcare service attributes and behavioral outcomes.	The dependent variable focused on behavioral outcomes other than hospital selection decisions.
Maharani et al. (2026); Abigail et al. (2026)	Mediation model in healthcare/service context	Patient satisfaction serves as an important mediating variable.	The studies were conducted in different research contexts and did not examine public referral hospitals.

Source: [3], [4], [6], [9], [10], [11]

As summarized in Table 2, previous studies have consistently demonstrated the importance of service quality, brand image, and patient satisfaction in influencing patients' behavioral outcomes in healthcare settings. However, most existing studies have examined these variables separately or focused on outcomes such as patient loyalty, revisit intention, and general healthcare utilization rather than hospital selection decisions. Furthermore, although several studies have acknowledged the mediating role of patient satisfaction, empirical evidence investigating how patient satisfaction simultaneously mediates the effects of service quality and brand image on hospital selection decisions remains limited. In addition, previous studies have generally been conducted in different healthcare settings and have rarely focused on Type B public referral hospitals, particularly within the Indonesian healthcare system. These limitations indicate the need for a more comprehensive investigation that integrates service quality, brand image, patient satisfaction, and hospital selection decisions within a single research model. Therefore, this study addresses the identified research gaps by examining the mediating role of patient satisfaction in the relationship between service quality, brand image, and hospital selection decisions at RSUD Dr. Harjono S. Ponorogo (RSDH).

2. Research Method

This study employed a quantitative explanatory research design using a cross-sectional survey to examine the direct and indirect relationships among service quality, brand image, patient satisfaction, and hospital selection decisions. The study was conducted at RSUD Dr. Harjono S. Ponorogo (RSDH), a government-owned Type B referral hospital in East Java, Indonesia. As a regional referral hospital providing comprehensive specialist healthcare services, RSDH represents an appropriate setting for investigating the determinants of patients' hospital selection decisions. The target population comprised patients who received healthcare services at RSDH during the research period. A total of 259 respondents participated in this study. Respondents were selected using purposive sampling based on predetermined inclusion criteria. Eligible participants were patients who had

received either outpatient or inpatient healthcare services at the hospital, had experienced at least one direct healthcare service encounter, were aged 17 years or older, had sufficient cognitive ability to understand and complete the questionnaire, and voluntarily agreed to participate by providing informed consent. These criteria ensured that respondents possessed sufficient experience to objectively evaluate service quality and the research variables.

The research instrument consisted of a structured questionnaire developed based on established theoretical frameworks. The questionnaire comprised 38 reflective measurement indicators representing four latent variables: service quality (10 indicators), brand image (10 indicators), patient satisfaction (8 indicators), and hospital selection decision (10 indicators). All measurement items were assessed using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The operationalization of each variable, including its indicators and representative measurement items, is presented in Table 3.

Table 3. Research variables and measurement

Variable	Indicator	Representative Measurement Items	Source
Service Quality (X1)	Tangibles	Comfortable physical facilities; modern medical equipment.	Parasuraman et al. (1988)
	Reliability	Timely healthcare services; efficient patient registration procedures.	
	Responsiveness	Prompt assistance; quick response in handling patients' needs and complaints.	
	Assurance	Competent healthcare professionals; courteous staff creating a sense of security.	
	Empathy	Personalized attention; easy access to assistance and effective communication.	
Brand Image (X2)	Brand Awareness	Hospital name recognition; hospital recall when healthcare services are needed.	Aaker (1991)
	Perceived Quality	Perceived superiority of healthcare service quality; favorable service reputation.	
	Brand Association	Professionalism, credibility and positive institutional image.	
	Brand Loyalty	Intention to revisit, preference over competing hospitals.	
Patient Satisfaction (Z)	Brand Legality	Trust in the hospital's accreditation status; confidence in the hospital's legal legitimacy.	Oliver (1980)
	Expectation	Healthcare services meeting prior expectations.	
	Perceived Performance	Evaluation of the actual healthcare services received.	
	Disconfirmation	Comparison between expected and actual service performance.	
Hospital Selection Decision (Y)	Satisfaction	Overall satisfaction with healthcare experiences.	Engel et al. (1995)
	Need Recognition	Awareness of healthcare needs requiring professional medical treatment.	
	Information Search	Seeking healthcare information from internal and external sources.	
	Evaluation of Alternatives	Comparing hospitals based on relevant selection criteria.	
	Purchase Decision	Decision to receive treatment at the selected hospital.	
	Post-Purchase Evaluation	Evaluation of treatment experiences influencing future hospital selection decisions.	

Source: [1], [5], [12], [13]

The conceptual framework illustrating the hypothesized relationships among the research variables is presented in Figure

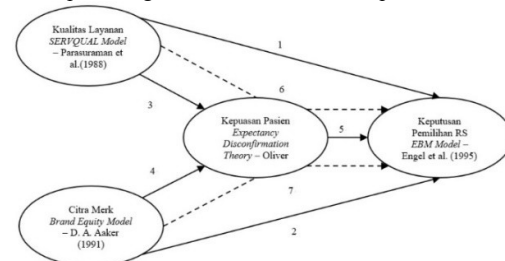


Figure 1. Conceptual Framework

Source: [1], [5], [12], [13]

The collected data were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM) with SmartPLS 4.0. PLS-SEM was selected because it enables the simultaneous assessment of complex relationships among multiple latent constructs while accommodating mediating effects. The analysis was conducted in two stages. First, the measurement model (outer model) was evaluated by assessing indicator reliability,

convergent validity, discriminant validity, composite reliability, and Cronbach's alpha. Second, the structural model (inner model) was assessed by examining path coefficients, the coefficient of determination (R^2), effect size (f^2), predictive relevance (Q^2), and bootstrapping procedures to test the proposed hypotheses. The significance of the structural relationships was determined at a 5% significance level.

Participation in this study was entirely voluntary. Before completing the questionnaire, all respondents received information regarding the study objectives and provided informed consent. Respondent confidentiality and anonymity were maintained throughout the research process, and all collected data were used exclusively for academic purposes.

3. Results and Discussion

3.1 Respondent Characteristics

A total of 259 valid questionnaires were included in the final analysis. Prior to statistical analysis, the collected data were screened to ensure completeness and consistency. All questionnaires met the predetermined inclusion criteria and contained complete responses; therefore, none were excluded from the analysis. The demographic characteristics of the respondents are presented in Table 4.

Table 4. Demographic characteristics of respondents

Characteristics	Category	Frequency	Percentage (%)
Gender	Male	100	38.61
	Female	159	61.39
Age	17–25 years	116	44.79
	26–35 years	59	22.78
	36–45 years	36	13.90
	46–55 years	34	13.13
	56–65 years	12	4.63
	>65 years	2	0.77
Education	Elementary School	2	0.77
	Junior High School	4	1.54
	Senior High School	42	16.22
	Bachelor's Degree	187	72.20
	Others	24	9.27
Occupation	Civil Servant / Military / Police	109	42.08
	Private Employee	41	15.83
	Entrepreneur	48	18.53
	Student	22	8.49
	Others	39	15.06
Health Insurance	BPJS Health	173	66.80
	Self-funded	54	20.85

Source: Processed Research Data (2026)

Table 4 presents the demographic characteristics of the respondents. Female patients constituted the majority of the sample (61.39%), whereas male respondents accounted for 38.61%. Most respondents were aged 17–25 years (44.79%), followed by those aged 26–35 years (22.78%), indicating that the sample was predominantly composed of young adults. Regarding educational attainment, respondents with a bachelor's degree represented the largest proportion (72.20%). In terms of occupation, civil servants, military personnel, and police officers constituted the largest occupational group (42.08%), followed by entrepreneurs (18.53%) and private-sector employees (15.83%). Furthermore, BPJS Health was the predominant healthcare financing scheme among respondents, accounting for 66.80% of the sample, whereas 20.85% financed their healthcare services independently. Overall, these demographic characteristics

indicate that the respondents had diverse backgrounds and were appropriate for evaluating the relationships among service quality, brand image, patient satisfaction, and hospital selection decisions.

3.2 Descriptive statistics of the research constructs

Before assessing the measurement model and structural model, descriptive statistics were examined to provide an overview of respondents' evaluations of each research construct. The analysis summarizes the mean scores of the latent constructs, reflecting respondents' overall assessments of service quality, brand image, patient satisfaction, and hospital selection decisions. The results are presented in Table 5.

Table 5. Descriptive statistics of the research constructs

Research construct	Mean
Service quality	4.27
Brand image	4.30
Patient satisfaction	4.21
Hospital selection decision	4.24

Source: Processed Research Data (2026)

Table 5 indicates that all research constructs achieved consistently high mean scores, ranging from 4.21 to 4.30. These findings suggest that respondents generally expressed favorable evaluations of the hospital across all investigated dimensions. The relatively small differences among the mean scores indicate that respondents perceived service quality, brand image, patient satisfaction, and hospital selection decisions at similarly positive levels rather than emphasizing one construct substantially over another. Overall, the descriptive results provide an initial indication that respondents viewed the hospital positively, thereby supporting the subsequent assessment of the measurement model and structural model using Partial Least Squares Structural Equation Modeling (PLS-SEM).

3.3 Inferential analysis (PLS-SEM)

Inferential analysis was performed using Partial Least Squares Structural Equation Modeling (PLS-SEM) with SmartPLS 4 version 4.1.1.8. Following the recommended PLS-SEM procedure, the analysis consisted of two sequential stages: measurement model assessment and structural model assessment. The measurement model was evaluated through indicator reliability, convergent validity, discriminant validity, and construct reliability, whereas the structural model was assessed using the coefficient of determination (R^2), predictive relevance (Q^2), and effect size (f^2) before the proposed hypotheses were tested [14].

3.3.1 Measurement model assessment

The measurement model assessment was conducted to ensure that all indicators adequately represented their respective latent constructs before the structural relationships were evaluated. This assessment included indicator reliability, convergent validity, discriminant validity, and construct reliability. The results are presented in Tables 7–10.

Table 7. Indicator reliability (outer loadings)

	Brand image (X2)	Patient satisfaction (Z)	Hospital selection decision (Y)	Service quality (X1)	Remarks
X1.1.1				0.590	Valid
X1.1.2				0.691	Valid
X1.2.1				0.810	Valid
X1.2.2				0.763	Valid
X1.3.1				0.827	Valid
X1.3.2				0.763	Valid
X1.4.1				0.736	Valid
X1.4.2				0.773	Valid
X1.5.1				0.776	Valid
X1.5.2				0.750	Valid
X2.1.1	0.641				Valid
X2.1.2	0.803				Valid
X2.2.1	0.783				Valid
X2.2.2	0.815				Valid
X2.3.1	0.782				Valid
X2.3.2	0.761				Valid
X2.4.1	0.828				Valid
X2.4.2	0.778				Valid
X2.5.1	0.798				Valid
X2.5.2	0.742				Valid
Y.1.1		0.708			Valid
Y.1.2		0.682			Valid
Y.2.1		0.770			Valid
Y.2.2		0.709			Valid
Y.3.1		0.820			Valid
Y.3.2		0.810			Valid
Y.4.1		0.844			Valid
Y.4.2		0.839			Valid
Y.5.1		0.824			Valid
Y.5.2		0.778			Valid
Z.1.1	0.779				Valid
Z.1.2	0.806				Valid
Z.2.1	0.824				Valid
Z.2.2	0.826				Valid
Z.3.1	0.806				Valid
Z.3.2	0.831				Valid
Z.4.1	0.800				Valid
Z.4.2	0.785				Valid

Source: Processed Research Data (2026)

Indicator reliability was first evaluated using outer loading values. According to [15], indicators with loading values greater than 0.50 are considered acceptable. As shown in Table 7, all indicators met this criterion, with loading values ranging from 0.590 to 0.844. The highest loading value was obtained for indicator Y4.1 (0.844), whereas the lowest was observed for X1.1.1 (0.590). Since all indicators exceeded the recommended threshold, none of the measurement items required elimination, indicating that all observed variables adequately represented their corresponding latent constructs.

Table 8. Convergent validity (average variance extracted)

	Average variance extracted (AVE)	Keterangan
Kualitas Layanan (X1)	0.563	Valid
Citra Merek (X2)	0.600	Valid
Kepuasan Pasien (Z)	0.652	Valid
Keputusan Pemilihan (Y)	0.609	Valid

Source: Processed Research Data (2026)

Convergent validity was subsequently assessed using average variance extracted (AVE). Hair et al. (2022) recommend an AVE value greater than **0.50**, indicating that a latent construct explains more than half of the variance in its indicators. As presented in Table 8, the AVE values were **0.563** for service quality, **0.600** for brand image, **0.652** for patient satisfaction, and **0.609** for hospital selection decision. Since all constructs exceeded the recommended threshold, convergent validity was established for the entire measurement model.

Table 9. Discriminant validity (cross-loadings)

	Service quality (X1)	Brand image (X2)	Patient satisfaction (Z)	Selection decision (Y)	Description
X1.1.1	0.590	0.521	0.560	0.512	Valid
X1.1.2	0.691	0.640	0.597	0.627	Valid
X1.2.1	0.810	0.735	0.742	0.717	Valid
X1.2.2	0.763	0.685	0.674	0.646	Valid
X1.3.1	0.827	0.782	0.786	0.751	Valid
X1.3.2	0.763	0.654	0.699	0.670	Valid
X1.4.1	0.736	0.695	0.682	0.679	Valid
X1.4.2	0.773	0.737	0.713	0.723	Valid
X1.5.1	0.776	0.705	0.746	0.721	Valid
X1.5.2	0.750	0.691	0.718	0.690	Valid
X2.1.1	0.597	0.641	0.588	0.586	Valid
X2.1.2	0.721	0.803	0.716	0.766	Valid
X2.2.1	0.733	0.783	0.752	0.722	Valid
X2.2.2	0.739	0.815	0.744	0.766	Valid
X2.3.1	0.704	0.782	0.709	0.719	Valid
X2.3.2	0.712	0.761	0.692	0.676	Valid
X2.4.1	0.743	0.828	0.727	0.788	Valid
X2.4.2	0.731	0.778	0.726	0.734	Valid
X2.5.1	0.749	0.798	0.724	0.755	Valid
X2.5.2	0.657	0.742	0.685	0.673	Valid
Z.1.1	0.731	0.705	0.779	0.723	Valid
Z.1.2	0.774	0.766	0.806	0.753	Valid
Z.2.1	0.747	0.721	0.824	0.731	Valid
Z.2.2	0.758	0.753	0.826	0.746	Valid
Z.3.1	0.729	0.722	0.806	0.734	Valid
Z.3.2	0.737	0.714	0.831	0.712	Valid
Z.4.1	0.770	0.749	0.800	0.746	Valid
Z.4.2	0.730	0.762	0.785	0.773	Valid
Y.1.1	0.669	0.697	0.639	0.708	Valid
Y.1.2	0.595	0.630	0.634	0.682	Valid
Y.2.1	0.681	0.697	0.666	0.770	Valid
Y.2.2	0.591	0.603	0.612	0.709	Valid
Y.3.1	0.756	0.793	0.784	0.820	Valid
Y.3.2	0.705	0.738	0.709	0.810	Valid
Y.4.1	0.777	0.784	0.792	0.844	Valid
Y.4.2	0.744	0.782	0.765	0.839	Valid
Y.5.1	0.773	0.776	0.757	0.824	Valid
Y.5.2	0.713	0.729	0.767	0.778	Valid

Source: Processed Research Data (2026)

Discriminant validity was evaluated using the cross-loading criterion. As presented in Table 9, each indicator consistently exhibited its highest loading on the construct it was intended to measure, compared with the other constructs. For example, all indicators of service quality loaded more strongly on the service quality construct than on brand image, patient satisfaction, or hospital selection decision. A similar pattern was observed across all constructs, confirming that each latent variable measured a distinct concept without substantial overlap. Therefore, the discriminant validity requirement was satisfactorily fulfilled [16].

Table 10. Construct reliability

	Cronbach's alpha	Composite reliability	Keterangan
Kualitas Layanan (X1)	0.913	0.928	Reliabel
Citra Merek (X2)	0.925	0.937	Reliabel
Kepuasan Pasien (Z)	0.924	0.937	Reliabel
Keputusan Pemilihan (Y)	0.928	0.939	Reliabel

Source: Processed Research Data (2026)

Construct reliability was assessed using Cronbach's alpha and composite reliability. According to Hair [16], values above 0.70 indicate satisfactory internal consistency. As shown in Table 10, Cronbach's alpha values ranged from 0.913 to 0.928, whereas composite reliability values ranged from 0.928 to 0.939. These findings demonstrate excellent internal consistency, indicating that all constructs were measured reliably and were suitable for subsequent structural model evaluation.

3.3.2 Structural model assessment

Following confirmation of the adequacy of the measurement model, the structural model was evaluated to determine its explanatory and predictive capabilities. This assessment included the coefficient of determination (R^2), predictive relevance (Q^2), and effect size (f^2). The results are presented in Tables 11–13.

Table 11. Coefficient of determination (R^2)

	R-square	R-square adjusted
Kepuasan Pasien (Z)	0.883	0.882
Keputusan Pemilihan (Y)	0.894	0.893

Source: Processed Research Data (2026)

The coefficient of determination (R^2) was examined to evaluate the explanatory power of the proposed structural model. As shown in Table 11, patient satisfaction achieved an R^2 value of 0.883, indicating that 88.3% of its variance was jointly explained by service quality and brand image. Meanwhile, hospital selection decision obtained an R^2 value of 0.894, suggesting that 89.4% of its variance was explained by service quality, brand image, and patient satisfaction. Based on the classification proposed by Hair [16], both endogenous constructs exhibited substantial explanatory power, indicating that the proposed model adequately explained the observed relationships among the study variables.

Table 12. Predictive relevance (Q^2)

	Q^2 predict	RMSE	MAE
Kepuasan Pasien (Z)	0.881	0.349	0.246
Keputusan Pemilihan (Y)	0.873	0.362	0.229

Source: Processed Research Data (2026)

Predictive relevance was assessed using the Stone–Geisser Q^2 criterion. As presented in Table 12, the Q^2 values were 0.881 for patient satisfaction and 0.873 for hospital selection decision. Because both values are greater than zero, the structural model demonstrates satisfactory predictive relevance, indicating that it has adequate predictive capability for the endogenous constructs included in the proposed model [16].

Table 13. Effect size (f^2)

	Kepuasan Pasien (Z)	Keputusan Pemilihan (Y)
Kualitas Layanan (X1)	0.424	0.014
Citra Merek (X2)	0.225	0.321
Kepuasan Pasien (Z)		0.131

Source: Processed Research Data (2026)

Effect sizes (f^2) were evaluated to determine the contribution of each exogenous construct to the endogenous variables. As presented in Table 13, service quality exerted a large effect on patient satisfaction ($f^2 = 0.424$), whereas its direct contribution to hospital selection decision was negligible ($f^2 = 0.014$). Brand image demonstrated moderate effects on both patient satisfaction ($f^2 = 0.225$) and hospital selection decision ($f^2 = 0.321$). Furthermore, patient satisfaction exerted a small-to-moderate effect on hospital selection decision ($f^2 = 0.131$). These findings indicate that patient satisfaction may function as an important intermediary mechanism through which service quality and brand image influence hospital selection decisions, as further examined in the hypothesis testing section.

3.4 Hypothesis testing

The proposed hypotheses were examined using the bootstrapping procedure in SmartPLS 4 with 5,000 bootstrap resamples. Following Hair [16], the hypotheses were evaluated using the standardized path coefficient (β), t -statistic, and p -value. A

hypothesis was considered supported when the p -value was below 0.05, indicating a statistically significant relationship between the constructs.

Table 14. Direct effects (path coefficients)

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics	P values
Kualitas Layanan (X1) → Keputusan Pemilihan (Y)	0.116	0.125	0.127	0.906	0.182
Citra Merek (X2) → Keputusan Pemilihan (Y)	0.509	0.502	0.122	4.185	0.000
Kualitas Layanan (X1) → Kepuasan Pasien (Z)	0.555	0.556	0.075	7.420	0.000
Citra Merek (X2) → Kepuasan Pasien (Z)	0.404	0.403	0.077	5.261	0.000
Kepuasan Pasien (Z) → Keputusan Pemilihan (Y)	0.345	0.342	0.088	3.934	0.000

Source: Processed research data (2026)

The direct effect results presented in Table 14 indicate that four of the five proposed direct hypotheses were supported. Among the tested relationships, service quality emerged as the strongest predictor of patient satisfaction, highlighting the importance of delivering reliable, responsive, and patient-oriented healthcare services to create positive patient experiences. This finding suggests that patients primarily evaluate hospital performance based on the quality of the services they receive, making service quality a fundamental determinant of satisfaction.

Brand image also demonstrated a significant positive influence on patient satisfaction, indicating that patients' perceptions of the hospital's reputation, credibility, and overall image contribute meaningfully to their level of satisfaction. Beyond its influence on patient satisfaction, brand image was identified as the strongest direct determinant of hospital selection decision, implying that patients place considerable emphasis on the hospital's reputation and public image when making hospital selection decisions. This result underscores that hospital selection is influenced not only by functional service attributes but also by patients' confidence in the institution's overall reputation.

In addition, patient satisfaction significantly influenced hospital selection decision, confirming that satisfied patients are more likely to select the hospital and maintain their intention to revisit when healthcare services are required in the future. This finding emphasizes the strategic importance of patient satisfaction as a driver of behavioral decision-making in healthcare settings.

Conversely, the direct relationship between service quality and hospital selection decision was not statistically significant. This result suggests that improvements in service quality alone are insufficient to directly influence patients' hospital selection decisions. Instead, patients appear to translate their service experiences into actual hospital selection decisions only after those experiences generate patient satisfaction, indicating that the influence of service quality operates primarily through an indirect mechanism.

Table 15. Indirect effects (mediation analysis)

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics	P values
Kualitas Layanan (X1) → Keputusan Pemilihan (Y)	0.192	0.190	0.054	3.561	0.000
Citra Merek (X2) → Keputusan Pemilihan (Y)	0.140	0.139	0.046	3.050	0.001

Source: Processed research data (2026)

The mediation analysis presented in Table 15 confirms the important mediating role of patient satisfaction within the proposed structural model. The indirect effect of service quality on hospital selection decision through patient satisfaction was statistically significant, whereas the corresponding direct effect was not significant. Based on this pattern, patient satisfaction can be interpreted as providing indirect-only mediation, indicating that improvements in service quality influence hospital selection decisions primarily by increasing patient satisfaction rather than through a direct pathway.

Similarly, patient satisfaction significantly mediated the relationship between brand image and hospital selection decision. Because both the direct and indirect effects remained statistically significant, the mediation can be classified as complementary mediation. This finding suggests that brand image affects hospital selection through two simultaneous mechanisms: directly by strengthening patients' confidence in the hospital and indirectly by improving patient satisfaction, which subsequently reinforces hospital selection decisions.

Overall, the mediation findings highlight that patient satisfaction functions as a central explanatory mechanism linking service quality and brand image with hospital selection decision. These results demonstrate that patients' evaluations of healthcare services and hospital reputation are translated into actual hospital selection decisions largely through the patient satisfaction they experience during the service encounter.

Overall, the hypothesis testing results demonstrate that six of the seven proposed hypotheses were supported, while one direct hypothesis was not supported. Service quality and brand image significantly enhanced patient satisfaction, whereas brand image and patient satisfaction directly influenced hospital selection decision. Furthermore, patient satisfaction played a pivotal mediating role by transmitting the effects of service quality and brand image on hospital selection decision. Collectively, these findings provide empirical support for the proposed conceptual framework and establish patient satisfaction as the key mechanism through which service quality and hospital brand image shape patients' hospital selection decisions.

The effect of service quality on patient satisfaction

The findings of this study demonstrate that service quality has a positive and significant effect on patient satisfaction, indicating that higher perceived service quality leads to greater patient satisfaction. In healthcare settings, patients evaluate service quality not only based on treatment outcomes but also on the overall service experience, including the responsiveness of healthcare personnel, administrative efficiency, reliability of medical services, empathy, and the adequacy of healthcare facilities. When these service attributes meet or exceed patients' expectations, patients develop positive perceptions of the healthcare services received, resulting in higher levels of satisfaction. This finding supports the SERVQUAL model, which explains that patients assess healthcare quality through five key dimensions—tangibles, reliability, responsiveness, assurance, and empathy—and that improvements in these dimensions contribute directly to patient satisfaction. Furthermore, Expectancy Disconfirmation Theory explains that satisfaction arises when perceived service performance meets or exceeds patients' prior expectations, generating positive evaluations of healthcare experiences [5], [13].

The findings are consistent with previous studies demonstrating that service quality is a major determinant of patient satisfaction across healthcare settings. Previous research reported that improvements in healthcare service quality significantly enhanced patient satisfaction because patients perceived greater value, comfort, and trust throughout the healthcare process. Similar findings indicate that responsive healthcare personnel, effective communication, and reliable healthcare delivery positively influence patients' evaluations of hospital services and strengthen overall satisfaction. Collectively, these studies reinforce the conclusion that service quality remains one of the most important predictors of patient satisfaction in healthcare organizations [9], [17], [18].

This study extends previous research by providing empirical evidence from a Type B regional public hospital operating within Indonesia's National Health Insurance system. In this context, patient satisfaction is influenced not only by the technical quality of healthcare services but also by patients' overall experiences during healthcare delivery. The findings suggest that hospital managers should prioritize continuous improvements in both clinical and nonclinical service quality, including administrative efficiency, professional competence, effective communication, and patient-centered care. Strengthening these aspects of service quality is expected to enhance patient satisfaction, reinforce public trust, and improve the hospital's long-term competitiveness in delivering sustainable healthcare services.

The effect of brand image on patient satisfaction

The findings of this study indicate that brand image has a positive and significant effect on patient satisfaction, suggesting that patients who perceive a hospital as reputable, trustworthy, and professionally managed tend to report higher levels of satisfaction. In healthcare services, brand image is formed through patients' perceptions of the hospital's reputation, credibility, service quality, and organizational values. A positive institutional image shapes patients' expectations before they receive healthcare services and influences how they evaluate their subsequent service experiences. When the actual healthcare services are consistent with these positive expectations, patients are more likely to experience satisfaction. This finding is consistent with the Brand Equity Model, which explains that a strong brand image is established through brand awareness, perceived quality, brand associations, and brand loyalty. In addition, Expectancy Disconfirmation Theory suggests that satisfaction emerges when patients perceive that the healthcare services delivered meet or exceed the expectations formed by the hospital's positive reputation [12], [13].

The present findings are consistent with previous studies demonstrating that brand image significantly influences patient satisfaction in healthcare organizations. Previous research has shown that hospitals with strong institutional reputations tend to achieve higher patient satisfaction because patients perceive them as more credible, reliable, and capable of delivering high-quality healthcare services. A favorable brand image also reduces patients' uncertainty before receiving treatment and strengthens their confidence in the hospital, thereby contributing to more positive healthcare experiences. These findings consistently indicate that brand image functions as an important intangible asset that enhances patient satisfaction by strengthening positive perceptions of healthcare services [19], [10], [11].

This study contributes to the existing literature by confirming the

importance of brand image within a regional public hospital, where institutional reputation is primarily built through consistent service performance rather than extensive commercial promotion. The findings suggest that hospital management should continuously strengthen public trust by maintaining high standards of healthcare quality, ensuring professional conduct among healthcare personnel, and providing transparent, patient-centered services. By consistently delivering positive healthcare experiences, hospitals can reinforce their institutional image, enhance patient satisfaction, and strengthen their competitive position within Indonesia's healthcare system.

The effect of service quality on hospital selection decisions

The findings of this study demonstrate that service quality has a positive and significant effect on hospital selection decisions, indicating that patients are more likely to choose a hospital that consistently delivers high-quality healthcare services. Hospital selection is a complex decision-making process in which patients consider not only the effectiveness of medical treatment but also various service attributes, including responsiveness, reliability, empathy, assurance, and the quality of healthcare facilities. High-quality healthcare services reduce patients' uncertainty, strengthen confidence in the hospital's capabilities, and create favorable perceptions that influence future hospital selection decisions. This finding is consistent with the SERVQUAL model, which emphasizes that patients evaluate healthcare providers through multiple dimensions of service quality, as well as the Consumer Decision Process Model, which explains that consumers integrate their service evaluations into subsequent purchasing or hospital selection decisions [1], [5].

The present findings are consistent with previous studies demonstrating that service quality significantly influences patients' hospital selection decisions. Earlier studies reported that patients tend to prefer hospitals capable of delivering reliable, responsive, and patient-centered healthcare services because these characteristics increase confidence in healthcare outcomes and improve the overall treatment experience. Furthermore, consistent service quality has been shown to strengthen patients' willingness to revisit the same healthcare provider and recommend it to others, highlighting its strategic importance in influencing healthcare decision-making. These findings collectively confirm that service quality is one of the primary determinants of patients' hospital selection decisions [4], [6], [17].

This study contributes to the healthcare management literature by providing evidence that service quality directly influences hospital selection decisions within the context of a regional public hospital. Unlike many previous studies conducted in private healthcare institutions, the present research demonstrates that patients of public hospitals also place considerable importance on service quality when making hospital selection decisions. Therefore, hospital managers should continuously improve both clinical and nonclinical aspects of healthcare services, including service responsiveness, administrative efficiency, healthcare professionalism, and patient communication. Strengthening these dimensions is expected not only to improve patients' healthcare experiences but also to reinforce their confidence in selecting the hospital as their preferred healthcare provider in the future.

The effect of brand image on hospital selection decisions

The findings of this study demonstrate that brand image has a positive and significant effect on hospital selection decisions, indicating that patients are more likely to choose hospitals with favorable reputations, strong credibility, and positive public perceptions. In healthcare services, patients frequently experience information asymmetry because they have limited ability to evaluate the technical competence of healthcare providers before receiving treatment. Consequently, patients rely on institutional reputation as an important indicator of healthcare quality and service reliability when comparing alternative hospitals. A positive brand image reduces perceived risk, strengthens patients' confidence, and facilitates the decision-making process by creating favorable expectations regarding the quality of healthcare services. This finding is consistent with the Brand Equity Model, which explains that brand awareness, perceived quality, brand associations, and brand loyalty collectively shape consumers' perceptions and influence their behavioral decisions. Likewise, the Consumer Decision Process Model suggests that consumers evaluate both tangible and intangible attributes before selecting a particular service provider [1], [12].

The present findings are consistent with previous studies demonstrating that brand image is an important determinant of hospital selection decisions. Previous research has shown that patients are more likely to select hospitals with strong institutional reputations because they associate a positive brand image with higher service quality, professional healthcare delivery, and greater organizational credibility. In addition, a favorable brand image enhances patients' confidence before receiving treatment, thereby reducing uncertainty and strengthening their intention to choose the hospital. These findings indicate that brand image serves not only as a marketing asset but also as a strategic factor influencing patients' hospital selection decision-making processes [3], [8], [20].

This study contributes to the existing healthcare marketing literature by confirming the importance of institutional reputation within a regional public hospital, where public trust is primarily developed through consistent healthcare performance rather than extensive commercial promotion. The findings suggest that hospital managers should strengthen organizational credibility by maintaining high standards of service quality, improving transparency, ensuring professional conduct among healthcare personnel, and consistently delivering patient-centered services. By integrating reputation management with continuous quality improvement initiatives, hospitals can strengthen their institutional image, enhance patients' confidence, and encourage patients to select the hospital as their preferred healthcare provider in the future.

The effect of patient satisfaction on hospital selection decisions

The findings of this study demonstrate that patient satisfaction has a positive and significant effect on hospital selection decisions, indicating that satisfied patients are more likely to maintain their preference for the same hospital when seeking healthcare services in the future. Patient satisfaction reflects patients' overall evaluation of their healthcare experiences after comparing the services received with their initial expectations. When patients perceive that healthcare services have met or exceeded their expectations, they develop greater confidence in

the hospital and become more willing to continue utilizing its services. As a result, patient satisfaction not only represents an outcome of healthcare service delivery but also serves as an important determinant of patients' future behavioral decisions. This finding is consistent with Expectancy Disconfirmation Theory, which explains that satisfaction is formed when perceived service performance confirms or exceeds prior expectations, as well as the Consumer Decision Process Model, which identifies post-purchase evaluation as a critical stage influencing future purchasing or hospital selection decisions [1], [13].

The present findings are consistent with previous studies demonstrating that patient satisfaction significantly influences patients' decisions to select and revisit healthcare providers. Previous research has reported that satisfied patients are more likely to return to the same hospital, recommend the hospital to others, and develop stronger confidence in the quality of healthcare services. Positive healthcare experiences also strengthen patients' emotional attachment to healthcare providers, thereby encouraging long-term relationships between hospitals and patients. Collectively, these findings confirm that patient satisfaction represents one of the most influential predictors of patients' behavioral intentions and hospital selection decisions in healthcare services [6], [9].

This study contributes to the existing literature by confirming the strategic role of patient satisfaction in strengthening hospital selection decisions within the context of a regional public hospital. The findings suggest that hospital managers should not regard patient satisfaction merely as a service performance indicator but as a strategic organizational asset that supports patient retention and long-term healthcare utilization. Continuous monitoring of patient experiences, systematic evaluation of patient feedback, and ongoing improvements in patient-centered healthcare services are therefore essential to maintaining high levels of satisfaction, strengthening public trust, and encouraging patients to repeatedly select the hospital for their future healthcare needs.

The mediating role of patient satisfaction in the relationship between service quality and hospital selection decision

The findings of this study demonstrate that patient satisfaction significantly mediates the relationship between service quality and hospital selection decisions, indicating that the influence of service quality on patients' hospital selection decisions is strengthened through positive healthcare experiences. Although high-quality healthcare services directly encourage patients to select a hospital, their influence becomes stronger when patients experience satisfaction after receiving healthcare services. In other words, patients are more likely to repeatedly select a hospital when superior service quality successfully fulfills or exceeds their expectations and generates positive emotional evaluations. This mechanism is consistent with the SERVQUAL model, which explains that patients evaluate healthcare quality through tangible facilities, reliability, responsiveness, assurance, and empathy. It also aligns with Expectancy Disconfirmation Theory, which proposes that satisfaction emerges when perceived service performance exceeds expectations, and with the Consumer Decision Process Model, which identifies post-purchase satisfaction as an important determinant of future behavioral decisions [1], [5], [13].

The present findings are consistent with previous studies reporting that patient satisfaction serves as an important mediating variable linking service quality and patients' behavioral decisions. Previous research has demonstrated that improvements in healthcare service quality increase patient satisfaction, which subsequently strengthens patients' intentions to revisit healthcare providers and maintain long-term relationships with healthcare institutions. These findings indicate that the effectiveness of service quality is not limited to improving operational performance but also depends on its ability to generate satisfying healthcare experiences that encourage patients to continue selecting the same hospital. Collectively, these studies confirm that patient satisfaction represents a crucial psychological mechanism through which service quality influences hospital selection decisions [4], [9], [17].

This study contributes to the healthcare management literature by demonstrating that patient satisfaction functions as a strategic pathway through which service quality translates into patients' hospital selection decisions within a regional public hospital. The findings imply that improving service quality alone is insufficient unless these improvements consistently produce positive patient experiences. Therefore, hospital management should integrate quality improvement initiatives with systematic patient satisfaction monitoring, continuous evaluation of patient experiences, and patient-centered service innovations. By ensuring that service quality consistently generates patient satisfaction, hospitals can strengthen patients' confidence, encourage repeated utilization of healthcare services, and sustain their competitive position within the healthcare sector.

The mediating role of patient satisfaction in the relationship between brand image and hospital selection decisions

The findings of this study demonstrate that patient satisfaction significantly mediates the relationship between brand image and hospital selection decisions, indicating that a positive hospital image influences patients' decisions more effectively when supported by satisfying healthcare experiences. Although a favorable institutional reputation encourages patients to consider a hospital their preferred healthcare provider, patients' long-term hospital selection decisions depend on whether the healthcare services delivered meet or exceed their expectations. Positive perceptions developed before treatment therefore need to be reinforced by actual service experiences that generate satisfaction. This finding is consistent with the Brand Equity Model, which explains that brand image shapes consumers' perceptions and expectations through brand awareness, perceived quality, brand associations, and brand loyalty. Furthermore, Expectancy Disconfirmation Theory explains that satisfaction develops when healthcare performance confirms patients' expectations, whereas the Consumer Decision Process Model suggests that post-purchase evaluations play a decisive role in influencing future behavioral decisions [1], [12], [13].

The present findings are consistent with previous studies demonstrating that patient satisfaction serves as an important mediating mechanism linking brand image to patients' behavioral decisions. Previous research has shown that hospitals with favorable institutional reputations are more likely to encourage healthcare utilization when patients experience satisfactory healthcare services that reinforce their initial positive perceptions. Positive healthcare experiences strengthen patients'

confidence in the hospital, reduce uncertainty regarding future healthcare utilization, and encourage patients to repeatedly select the same hospital. These findings consistently indicate that patient satisfaction transforms favorable perceptions of hospital reputation into actual behavioral decisions, thereby strengthening the long-term influence of brand image on hospital selection [20], [21], [22].

This study extends the existing healthcare marketing literature by confirming that patient satisfaction represents a key psychological mechanism linking institutional reputation to hospital selection decisions in the context of a regional public hospital. The findings imply that hospital managers should not rely solely on building a favorable public image through communication or promotional activities. Instead, a strong institutional reputation should be continuously reinforced through consistent service quality, professional healthcare delivery, patient-centered care, and continuous evaluation of patient experiences. By ensuring that a positive brand image is supported by high levels of patient satisfaction, hospitals can strengthen public trust, encourage repeated utilization of healthcare services, and improve their long-term organizational sustainability within Indonesia's healthcare system.

4. Conclusion

This study examined the relationships among service quality, brand image, patient satisfaction, and hospital selection decisions in the context of a Type B regional public hospital using Partial Least Squares Structural Equation Modeling (PLS-SEM). The findings demonstrate that service quality and brand image significantly improve patient satisfaction, while service quality, brand image, and patient satisfaction each exert significant positive effects on hospital selection decisions. Furthermore, patient satisfaction was confirmed as a significant mediating variable that strengthens the influence of both service quality and brand image on hospital selection decisions. These findings indicate that patients' hospital selection decisions are shaped not only by their perceptions of healthcare quality and institutional reputation but also by the satisfaction developed through their healthcare experiences.

From a theoretical perspective, this study extends the application of the SERVQUAL model, Brand Equity Model, Expectancy Disconfirmation Theory, and Consumer Decision Process Model by integrating these theories into a comprehensive framework for explaining patients' hospital selection behavior. The findings provide empirical evidence that patient satisfaction represents an important psychological mechanism linking service quality and brand image to hospital selection decisions, thereby enriching the existing literature on healthcare marketing and patient behavior, particularly within the context of regional public hospitals.

From a practical perspective, hospital management should prioritize continuous improvements in service quality while simultaneously strengthening institutional reputation through professional, reliable, and patient-centered healthcare delivery. Enhancing administrative efficiency, the responsiveness of healthcare personnel, effective communication, empathy, and the consistency of healthcare services is expected to improve patient satisfaction and reinforce patients' hospital selection decisions. In addition, hospital managers should consider patient satisfaction a strategic organizational performance indicator and routinely evaluate patient experiences to support continuous

quality improvement and strengthen public trust in healthcare services.

Despite its contributions, this study has several limitations. The research employed a cross-sectional design that captured patients' perceptions at a single point in time and was conducted in only one Type B regional public hospital, which may limit the generalizability of the findings to other healthcare settings. Moreover, the study focused exclusively on service quality, brand image, and patient satisfaction as predictors of hospital selection decisions. Future research is therefore encouraged to employ longitudinal research designs, examine different hospital classifications and geographic contexts, and incorporate additional variables such as patient trust, perceived value, electronic word-of-mouth, digital healthcare services, or health literacy to develop a more comprehensive understanding of patients' healthcare decision-making processes.

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