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THE EFFECT OF CORE AND PERIPHERAL QUALITY OF SATISFACTION AND LOYALTY OF MODERATED PATIENTS BY SWITCHING COST

Mesra Surya Ariefin,

Faculty of Economics and Business Brawijaya University, Indonesia mesrasuryaariefin93@gmail. com

Andarwati, Faculty of Economics and Business Brawijaya University, Indonesia

Djumilah Hadiwidjojo Faculty of Economics and Business

Brawijaya University, Indonesia

This study aims to examine and analyze the effect of core service quality and Peripheral service quality on patient satisfaction and loyalty at the RSUD Dr. Soegiri Lamongan which is moderated by switching costs. The number of samples in this study were 36 patients at Dr. Soegiri Lamongan. The technique of collecting data uses questionnaires, interviews, and literature studies. Data analysis in this study was SEM using PLS software. The results of this study indicate that core service quality and peripheral service quality have a significant effect on patient satisfaction, core service quality has no direct significant effect on patient loyalty, peripheral service quality has a significant effect on patient loyalty, patient satisfaction has a significant effect on patient loyalty. Patient satisfaction acts as a perfect mediation of the influence of core service quality on patient loyalty and patient satisfaction plays a role as not a mediation of the influence of peripheral service quality on patient loyalty. Switching cost strengthens the relationship between patient satisfaction and patient loyalty but is not significant ...

Keywords: Core Service Quality, Peripheral Service Quality, Satisfaction, Switching Cost, and Loyalty.

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ABSTRACT

INTRODUCTION

Hospital is one form of service to the community that must be provided by the government. Hospitals are service businesses that are very complex when compared to other services because they have a high risk of patient health (Rashid, 2009). Service quality and satisfaction are two factors that affect loyalty (Keiningham, 2006). Customer-oriented service companies and placing customers in important positions, they will become satisfied (Bailey and Dandrade (1995), Johnson (1966)). A consumer who is satisfied with the service he receives will form loyalty to the service.

Lovelock (1992) divides service quality into a core and peripheral that allows a more rigorous assessment of elements that are critical of loyalty. Separation of service aspects is supported by Ferguson et al. (1999) who found that the technical and functional aspects of service quality and their relationship to the effectiveness of service management were different between the quality of core services and the quality of

supporting services. Good service quality will give the impact of satisfaction and shape loyalty attitudes and behaviors to consumers. This can be seen from the research conducted by T. Vanniarajan, P. Gurunathan (2006) that the core service quality and peripheral service quality have a significant effect on satisfaction. After the formation of satisfaction with consumers, it will create loyalty attitudes and behavior. This is supported by research conducted by Burnham et al. (2003) and Celso Augusto de Matos (2009) provide results that satisfaction has a significant effect on loyalty.

In the relationship of satisfaction with loyalty there are factors that can influence the relationship. According to Jones, et al, (2000) that the relationship of satisfaction and loyalty is influenced by construction or other variables, namely trust, commitment, and switching costs. Switching costs themselves are customer perceptions of time, money, and efforts related to changes in service providers (Jones et al., 2000). Switching costs can also influence the relationship between patient satisfaction and loyalty because this can be seen in the research conducted by Serkan Aydin and Gokhan Ozer (2005) and Matos (2009) that strengthen or moderate the relationship between satisfaction and loyalty.

LITERATURE REVIEW AND HYPOTESHIS

Satisfaction

Satisfaction is a feeling of pleasure or disappointment that arises because someone compares the perceived performance of the product (or result) to their expectations. If performance fails to meet customer expectations, it will not be satisfied. If performance is in line with expectations, customers will be satisfied (Kotler, 2009). Patient satisfaction is determined by the services provided, both tangible and intangible, in this case the assessment is carried out by the patient regarding the categories of services provided. The measurement of customer satisfaction indicators uses several indicators, namely experience, hope, and overall satisfaction (Selnes (1993), Aydin and Ozer (2005), Ranaweera (2003).

Loyalty

Oliver (1997) defines consumer loyalty as the depth of commitment held to repurchase or subscribe to service products in the future. Customer loyalty is a form of repetitive purchase. Consumer loyalty can be measured using three aspects, namely continuing use, recommendations to others, and resilience not to move to other products or services (Hellier (2003); Aydin and Ozer (2004); and Selnes (1993)). This is also in accordance with the dimensions given by Griffin (2000). That consumers who continue to use, recommend products that are consumed, and do not move to other indicators that are very suitable for use in hospital services.

Switching cost

Switching costs are conceptualized as customer perceptions of the amount of additional costs to complete the current relationship and guarantee an alternative; perceived costs are like preventing customers from switching to competing offers (Yanamandram and White, 2006). Switching costs do not only include those that can be measured monetary or financial, but also the psychological effects of being a customer of a new provider, as

well as the time and effort involved in the acquisition of new products (Dick and Basu, 1994). The indicators used in measuring the switching cost variable in this study are the three typologies used by Burnham et al. (2003). The first is Procedural switching costs, which mainly involve the time and effort spent, consisting of economic risk, evaluation, learning and managing costs. The second is the Financial switching cost (contractual switching cost) that is related to the contractual relationship that creates economic benefits to stay with these service providers and such as the initial cost when moving to a new hospital. And the third is Relational switching costs, which involves psychological or emotional discomfort due to loss of identity or the breakdown of relationships with employees or hospitals. So that this indicator is considered more appropriate because it describes the burden that will be received by the patient if he will move to another hospital.

HYPOTHESIS

Research Mu'ah (2012) and Hilman Faza, Ibnu Widiyanto (2016) which show the desire to repurchase due to the influence of the quality of core services. Based on previous research that has been described, the hypothesis can be arranged as follows:

H₁. Core service quality has a significant effect on the loyalty of inpatients at RSUD Dr. Soegiri in Lamongan Regency.

Research by Margee Hume (2010) and Hilman Faza, Ibnu Widiyanto (2016) which shows the desire to repurchase due to the influence of the quality of peripheral services. Based on previous research that has been described, the hypothesis can be arranged as follows:

H_{2.} Peripheral service quality has a significant effect on the loyalty of inpatients at Dr. Soegiri in Lamongan Regency

Research by Mu'ah (2012), Terrence Levesque (1996), Abdul Rokhim (2016), Jun-Gi Park (2013), Gordon H.G. McDougall and Terrence Levesque (2000), Johra Kayeser Fatima and Mohammed Abdur Razzaque (2014), Hilman Faza, Ibnu Widiyanto (2016), which shows core service quality, directly affects customer satisfaction. Based on previous research that has been described, the hypothesis can be arranged as follows:

H₃. Core service quality has a significant effect on customer satisfaction of inpatients at RSUD Dr. Soegiri in Lamongan Regency.

Mu'ah (2012) research, Abdul Rokhim (2016), Jun-Gi Park (2013), Hilman Faza, Ibnu Widiyanto (2016), which shows the quality of supporting services directly affects customer satisfaction. Based on previous research that has been described, the hypothesis can be arranged as follows:

H_4 . Peripheral service quality has a significant effect on customer satisfaction of inpatients at Dr. Soegiri in Lamongan Regency.

Research by Ari Wijayanti (2008), Margee Hume (2010), Elisabeth Kastenhols (2010), Margee Hume (2008), Burnham et al. (2003), Mu'ah (2012), Celso Augusto de Matos (2009), Gjoko Mile Stamenkov Zamir Dika (2015), Jun-Gi Park (2013), Gordon H.G. McDougall and Terrence Levesque (2000), Hilman Faza, Ibnu Widiyanto (2016), Irene Gil

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Saura (2008), state that patient satisfaction has a significant effect on the desire to repurchase and service quality has little effect on repurchase compared to patient satisfaction. This study provides an explanation that patient satisfaction affects patient loyalty which is defined as the desire to repurchase. Based on previous research that has been described, the hypothesis can be arranged as follows:

H₅. Customer satisfaction has a significant effect on the loyalty of inpatients at Dr. Soegiri in Lamongan Regency.

Hilman Faza's research, Ibnu Widiyanto (2016), Margee Hume (2008), T. Vanniarajan., And P. Gurunathan (2009) which show that Customer satisfaction mediates core service quality to interest in referencing or WOM which is also one indicator of loyalty. Based on previous research that has been described, the hypothesis can be arranged as follows:

H₆. Customer satisfaction mediates core service quality on the loyalty of inpatients at Dr. Soegiri in Lamongan Regency

Hilman Faza's research, Ibnu Widiyanto (2016), Margee Hume (2008), T. Vanniarajan., And P. Gurunathan (2009) which shows that Customer satisfaction mediates peripheral service quality to interest in referencing or WOM which is also one indicator of loyalty. Based on previous research that has been described, the hypothesis can be arranged as follows:

H₇. Customer satisfaction mediates peripheral service quality on the loyalty of inpatients at Dr. Soegiri in Lamongan Regency

Empirical research on Matos (2009), which obtained results in one of its studies, revealed that switching cost as a moderator in the relationship between satisfaction and loyalty variables was weakening the relationship of satisfaction to loyalty, which meant that the effect of switching cost in the satisfaction and loyalty relationship was very strong. Serkan Aydin and Gokhan Ozer (2005), in the results of his research also stated that switching costs have a moderating effect on the effect of customer satisfaction on customer loyalty. In other words, perceived switching costs reduce the sensitivity of customers to the level of customer satisfaction. Based on previous research that has been described, the hypothesis that can be used as a reference for research are:

$\rm H_8$ Switching costs moderate the effect of customer satisfaction on the loyalty of inpatients at Dr. Soegiri in Lamongan Regency





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METHODS

The approach in this study uses a quantitative approach with the survey method. The purpose of this study is to find out and analyze the relationship between variables hammering hypothesis testing so that it is also called explanatory research. The population of this study was inpatients at Dr. Soegiri Lamongan. The sampling technique in this study uses non-probability sampling with a type of purposive sampling. Sampling by purposive sampling requires that respondents must have various criteria, namely inpatients at least three days, patients who can communicate and not including mental patients, pediatric patients and patients treated in intensive care (ICU). The number of samples in this study were 36 inpatients.

The data obtained in this study were then carried out statistical analysis using Partial Least Square (PLS) with the help of WarpPLS 6.0 software. Model evaluation in PLS analysis is done in two ways, namely the measurement model (outer model) and the structural model (inner model). Outer model is a measurement model to show specifications of the relationship between variables and indicators. While the structural model (inner model) shows the specification of the relationship between hidden or latent variables, namely between exogenous variables with endogenous variables (Ghozali, 2012).

RESULTS (AND OR DISCUSSION)

Evaluation of Construction Model (Outer Model)

Evaluation of the construct model is carried out to see and evaluate whether the manifest variables are able to measure the latent variables studied in this study reliably. Evaluation on the construct model in this study consisted of three evaluations, namely: 1) evaluation of convergent validity; 2) discriminant validity evaluation; and 3) evaluation of construct reliability.

Convergent validity evaluation

Variable	Indicator	Outer Loading	Information
Core Service Quality (X1)	X1.1	0,694	Valid
	X1.2	0,707	Valid
	X1.3	0,878	Valid
	X1.4	0,831	Valid
	X1.5	0,782	Valid
	X1.6	0,868	Valid
	X1.7	0,879	Valid
	X1.8	0,733	Valid
	X1.9	0,669	Valid
	X1.10	0,540	Valid
Peripheral	X2.1	0,775	Valid
Service Quality	X2.2	0,804	Valid

Tabel. 1 Convergent Validity Test Results

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Variable	Indicator	Outer Loading	Information
(X2)	X2.3	0,759	Valid
	X2.4	0,769	Valid
	X2.5	0,567	Valid
	X2.6	0,599	Valid
	Y1.1	0,598	Valid
	Y1.2	0,841	Valid
Customer	Y1.3	0,723	Valid
Customer Satisfaction (Y1)	Y1.4	0,725	Valid
Sucisfaction (11)	Y1.5	0,863	Valid
	Y1.6	0,848	Valid
	Y1.7	0,627	Valid
	Y2.1	0,871	Valid
	Y2.2	0,790	Valid
	Y2.3	0,709	Valid
	Y2.4	0,572	Valid
	Y2.5	0,630	Valid
	Y2.6	0,691	Valid
Switching Cost (Y2)	Y2.7	0,642	Valid
	Y3.1	0,775	Valid
Customer	Y3.2	0,912	Valid
Loyalty (Y3)	Y3.3	0,891	Valid
	Y3.4	0,796	Valid

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Evaluation of discriminant validity

This evaluation is done by comparing the square root value of average variance extracted (AVE) / root AVE with the correlation between constructs in the structural model.

	CSQ	PSQ	CS	SC	CL
CSQ	(0,765)	0,563	0,696	-0,413	0,284
PSQ	0,563	(0,718)	0,536	-0,285	0,315
CS	0,696	0,536	(0,753)	-0,479	0,443
SC	-0,413	-0,285	-0,479	(0,707)	-0,343
CL	0,284	0,315	0,443	-0,343	(0,846)

Table. 2. Discriminant Validity	Test Results
	reservesares

Based on Table 2, it appears that the root square value of AVE is the Core Service Quality (X1) latent variable (0.765), Peripheral Service Quality (X2) (0.718), Customer Satisfaction (Y1) (0.753), Switching Cost (Y2) (0.707), and Customer Loyalty (Y3) (0.846) is greater than the correlation between the constructs so that it can be said that discriminant validity, the measurement model is good.

Evaluate the construct of reliability

A construct is declared reliable if the composite reliability value is greater than 0.700.

Variable	Composite Reliability		
Core Service Quality (X1)	0,933		
Peripheral Service Quality (X2)	0,863		
Customer Satisfaction (Z1)	0,900		
Switching Cost (Z2)	0,873		
Customer Loyalty (Y1)	0,909		

Based on table 3, it can be seen that composite reliability values on the Core Service Quality (X1) latent variable (0.933), Peripheral Service Quality (X2) (0.863), Customer Satisfaction (Y1) (0.900), Switching Cost (Y2) (0.873), and Customer Loyalty (Y3) (0.909) is worth more than 0.700 and it can be said that all construct models in this study have good reliability.

Evaluation of Structural Models (Inner Model)

Testing the hypothesis by testing the significance of the path coefficient of partial least square (PLS), the path coefficient shows the magnitude of the influence of one exogenous variable on its endogenous variables. If the value of the path coefficient is significant then it can be said that the exogenous variable has a significant effect on the endogenous variable. The path coefficient in this study can be seen in Figure 2 below:



Figure 2. Path Coefficient Test Results

		Path coefficient		P-	
Hypothesis	Relationship	Direct Effect	Indirect Effect	P- Value	Information
H1	X1 -> Y3	0,053		0,374	Not significant
H2	X2 -> Y3	0,293		0,026	Significant
H3	X1 -> Y1	0,604		0,000	Significant
H4	X2 -> Y1	0,289		0,028	Significant
H5	Y1 -> Y3	0,281		0,005	Significant
H6	X1 -> Y1 -> Y3		0,230	0,018	Signifikan
H7	X2 -> Y1 -> Y3		0,110	0,167	Not significant
H8	Y1*Y2 -> Y3	0,176		0,130	Not significant

Table 4. Results of Testing Direct and Indirect Influence Hypotheses

The hypothesis can be accepted if the P-Value value is not greater than 0.05 ($\alpha = 5\%$). Based on table 4 shows that the effect of Core Service Quality on Customer Loyalty is not significant at $\alpha = 0.05$, seen through the p-value of 0.374, the value is greater than 0.05 ($\alpha = 5\%$), so H1 is rejected. The influence of Peripheral Service Quality support on Customer Loyalty is significant at $\alpha = 0.05$, seen through the p-value of 0.026, the value is smaller than 0.05 ($\alpha = 5\%$), so H2 is accepted. Hypothesis testing also shows Core Service Quality (X1) towards Customer Satisfaction significant at $\alpha = 0.05$, seen through the p-value of 0,000, the value is smaller than 0.05 ($\alpha = 5\%$), so H3 is accepted. Peripheral Service Quality was found to have a significant influence on Customer Satisfaction significantly at $\alpha = 0.05$, seen through the p-value of 0.028, the value is smaller than 0.05 ($\alpha = 5\%$), so H4 is accepted. Customer Satisfaction (Y1) towards Customer Loyalty is significant at $\alpha = 0.05$, seen through the p-value of 0.028, the value is smaller than 0.05 ($\alpha = 5\%$), so H3 is accepted. Customer Satisfaction (Y1) towards Customer Loyalty is significant at $\alpha = 0.05$, seen through the p-value of 0.005, the value is smaller than 0.05 ($\alpha = 5\%$), so H5 is accepted.

The indirect effect between Core Service Quality on Customer Loyalty through Customer Satisfaction, is obtained from the results of the direct effect between Core Service Quality on Customer Satisfaction and the direct effect of Customer Satisfaction on Customer Loyalty, so that the indirect effect is $0.604 \times 0.381 = 0.230$. Testing the indirect effect using the sobel test, it is known that the p-value value calculated using the sobel formula is 0.018, the value is smaller than the value of $\alpha = 0.05$ (5%), so it is stated that there is a positive and significant indirect effect between Core Service Quality to Customer Loyalty through Customer Satisfaction, so that H6 is accepted.

The indirect effect between Peripheral Service Quality on Customer Loyalty through Customer Satisfaction, is obtained from the direct effect of Peripheral Service Quality on Customer Satisfaction and the direct effect of Customer Satisfaction on Customer Loyalty, so that the indirect effect is $0.289 \times 0.381 = 0.110$. Testing the indirect effect using the sobel test, it is known that the p-value value calculated using the sobel formula is 0.167, the value is greater than the value of $\alpha = 0.05$ (5%), so that there is no significant

indirect effect between Peripheral Service Quality to Customer Loyalty through Customer Satisfaction, so that **H7 is accepted**

The effect of Customer Satisfaction support on Customer Loyalty with moderating Switching Cost variables is not significant at $\alpha = 0.05$, seen through the p-value of 0.130, the value is greater than 0.05 ($\alpha = 5$ %). The coefficient of 0.176 has a positive sign indicating the relationship between the two is unidirectional but not significant, meaning that the better customer satisfaction moderated by switching costs to move to another hospital will not have an impact on the customer loyalty of patients undergoing hospitalization at Dr. Soegiri Lamongan, even though the patient's customer loyalty tends to be good if there is a switching cost that is burdensome to move to another Hospital with the existence of customer satisfaction with the Regional General Hospital Dr. Soegiri Lamongan is good. So that H8 is rejected.

DISCUSSION

The results of this study suspect that there is a direct influence from the Core Service Quality on Customer Loyalty or consumer loyalty in this case inpatients Dr. RSUD Soegiri Lamongan. However, the analysis results prove that it turns out that Core Service Quality does not directly affect Customer Loyalty. These findings are in line with research conducted by Margee Hume and Gilian, S. M (2010) and Marge Hume (2008) who found that core service quality does not directly influence consumer loyalty. While the influence of Peripheral Service Quality on Customer Loyalty inpatients proves that there is a significant influence. , this means that the better the implementation of Peripheral Service Quality, it will be followed by an increase in the loyalty of hospitalized patients. This study supports the study conducted by Margee Hume and Gilian, S. M (2010) which provides results that peripheral service quality has a significant effect on repurchase intentions. The same thing is also given by research conducted by Hilman Faza, Ibnu Widiyanto (2016) and sudiyono (2011) which provides peripheral service quality results that have a significant effect on word of mouth.

The results of analysis using a structural model in this study prove that Core Service Quality has a significant effect on Customer Satisfaction or inpatient satisfaction. The effect is 0.604 and is significant at the level of 5 percent, which means that the better the Core Service Quality is given, the higher the level of satisfaction of patients with inpatient roses. The results of this study support the results of research conducted by Mu'ah (2012), Terrence Levesque (1996), Abdul Rokhim (2016), Jun-Gi Park (2013), Gordon H.G. McDougall and Terrence Levesque (2000), Johra Kayeser Fatima and Mohammed Abdur Razzaque (2014), namely core service quality has a significant effect on castomer satisfaction. Peripheral Service Quality also has a significant influence on Customer Satisfaction in this case is inpatients at Dr. Soegiri Lamongan. The results of this study indicate that most patients who were respondents gave a satisfied response to the overall support services they received from the hospital. The results of this study are supported by Abdul Rokhim (2016), Jun-Gi Park (2013), Hilman Faza, Ibnu Widiyanto (2016), and T. Vanniarajan (2009) which provide results of peripheral service quality studies that have a significant effect on customer satisfaction. While the Customer Satisfaction of inpatients at RSUD Dr. Soegiri Lamongan towards patient loyalty has a significant influence. This effect is 0.291 which is positive and significant at the level of 5 percent. MacStrafic (1987) in his study conducted in a hospital, showed that patient

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loyalty is a combination of attitude and behavior. The results of this study support and strengthen the study of Ari Wijayanti (2008), Margee Hume (2010), Elisabeth Kastenhols (2010), Margee Hume (2008), Burnham et al. (2003), Mu'ah (2012), Celso Augusto de Matos (2009), Gjoko Mile Stamenkov Zamir Dika (2015), Jun-Gi Park (2013), Gordon H.G. McDougall and Terrence Levesque (2000), Hilman Faza, Ibnu Widiyanto (2016), and Irene Gil Saura (2008) which prove that there is an effect of customer satisfaction on customer loyalty.

The results of the analysis using a structural model in this study prove that there is an effect of the Core Service Quality or the quality of core services to Customer Loyalty or the loyalty of inpatients at the RSUD Dr. Soegiri Lamongan through Customer Satisfaction or inpatient satisfaction. This influence is 0.230 and is significant at the 5 percent level. The results of this study support the research conducted by Caruana (2002) which proves that service quality has an influence on customer satisfaction which ultimately can shape service loyalty. The results of this study also support the study of Hilman Faza, Ibnu Widiyanto (2016) and Margee Hume (2008), which shows that Customer satisfaction mediates core service quality towards interest in referencing or WOM which is also one indicator of loyalty. The study conducted by T. Vanniarajan., And P. Gurunathan (2009), gave the results that core services quality had a significant effect on customers loyalty through customer satisfaction. While Customer Satisfaction does not mediate the influence of Peripheral Service Quality on Customer Loyalty, namely inpatients at Dr. Soegiri Lamongan. The results of this study are not in line with the research or study conducted by Hilman Faza, Ibnu Widiyanto (2016) and Margee Hume (2008) which gives results in his research is Customer Satisfaction which mediates the influence of Peripheral Service Quality on Customer Loyalty.

The effect of customer satisfaction on customer loyalty which is moderated by switching costs, shows insignificant results at $\alpha = 0.05$, seen through the p-value of 0.130, the value is greater than 0.05 ($\alpha = 5$ %). The coefficient of 0.176 has a positive sign indicating the relationship between the two is unidirectional but not significant, meaning that the better customer satisfaction moderated by switching costs to move to another hospital will not have an impact on the customer loyalty of patients undergoing hospitalization at Dr. Soegiri Lamongan, even though the customer loyalty of patients tends to be good if there is a costly switching cost to move to another Hospital. The results of this study do not support the study conducted by Serkan Aydin and Gokhan Ozer (2005) and Matos (2009), namely switcing cost gives the effect of strengthening or moderating the relationship of customer satisfaction to customer loyalty.

CONCLUSION

Based on the data analysis that has been done and the discussion described in the previous chapter, the conclusions can be drawn from this study as follows: (1) The effect of Core Service Quality (X1) on Customer Loyalty has no significant effect. The coefficient of 0.053 has a positive sign indicating the relationship between the two is in the same direction but not significant, meaning that the better the core service quality provided by the Regional General Hospital Dr. Soegiri Lamongan to patients will not have an impact on customer loyalty of patients undergoing hospitalization at the Regional General Hospital Dr. Soegiri Lamongan, although the customer loyalty of patients tends to be good if the core service quality is given by the Regional General Hospital Dr. Soegiri Lamongan is good; (2) Peripheral Service Quality has a significant effect on Customer

Loyalty. The coefficient of 0.293 has a positive sign indicating the relationship between the two is in the same direction and significant, meaning that the better the peripheral service quality provided by the Regional General Hospital Dr. Soegiri Lamongan for patients will increase customer loyalty, as well as vice versa, the worse the peripheral service quality provided by the Regional General Hospital Dr. Soegiri Lamongan to patients will reduce customer loyalty.

(3) Core Service Quality has a significant effect on Customer Satisfaction. The coefficient of 0.604 has a positive sign indicating the relationship between the two is in the same direction and significant, meaning that the better the core service quality provided by the Regional General Hospital Dr. Soegiri Lamongan to patients will improve customer satisfaction, and vice versa, the worse the core service quality provided by the Regional General Hospital Dr. Soegiri Lamongan to patients will reduce customer satisfaction; (4) Peripheral Service Quality has a significant effect on Customer Satisfaction (Y1). The coefficient of 0.289 has a positive sign indicating the relationship between the two is in the same direction and significant, meaning that the better the peripheral service quality provided by the Regional General Hospital Dr. Soegiri Lamongan towards patients will improve customer satisfaction, as well as vice versa, the worse the peripheral service quality provided by the Regional General Hospital Dr. Soegiri Lamongan to patients will reduce customer satisfaction; (5) Customer Satisfaction has a significant effect on Customer Loyalty. The coefficient of 0.291 has a positive sign indicating the relationship between the two is in the same direction and significant, meaning that the better the customer satisfaction possessed by inpatients at the Dr. Hospital Soegiri Lamongan will increase customer loyalty, and vice versa the worse the customer satisfaction inpatients at the Regional General Hospital Dr. Soegiri Lamongan to patients will reduce customer loyalty; (6) Indirect influence between Core Service Quality on Customer Loyalty through Customer Satisfaction, obtained p-value value from the calculation using the sobel formula of 0.018, the value is smaller than the value of $\alpha = 0.05$ (5%), so that a positive and significant indirect effect between Core Service Quality on Customer Loyalty through Customer Satisfaction.

These results provide an explanation that the effect of core service quality on patient loyalty can be achieved if given customer satisfaction mediation; (7) The indirect effect between Peripheral Service Quality on Customer Loyalty through Customer Satisfaction, the p-value value obtained from the calculation using the sobel formula is 0.167, the value is greater than the value of α = 0.05 (5%), so that it is not there is a significant indirect effect between Peripheral Service Quality on Customer Loyalty through Customer Satisfaction. These results provide an explanation that customer loyalty cannot mediate the influence of Peripheral Service Quality on Customer Loyalty; (8) Effect of Customer Satisfaction on Customer Loyalty with the moderating variable Switching Cost. The coefficient of 0.176 has a positive sign indicating the relationship between the two is unidirectional but not significant, meaning that the better customer satisfaction moderated by switching costs to move to another hospital will not have an impact on the customer loyalty of patients undergoing hospitalization at Dr. Soegiri Lamongan, even though the patient's customer loyalty tends to be good if there is a switching cost that is burdensome to move to another Hospital with the existence of customer satisfaction with the Regional General Hospital Dr. Soegiri Lamongan is good.

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