

Analysis of Socio-Economic Levels and Patient Satisfaction Levels on Revisit Intention at the Emergency Room of Pradipa Medika Hospital

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Abstract

The Emergency Department (ED) is a critical unit within hospitals, serving as the frontline for handling patients in emergency and critical conditions. The success of ED services depends not only on the quality of medical actions but also on patient satisfaction and their intention to revisit. This study aims to analyze the influence of socioeconomic level and patient satisfaction on patients' revisit intention to the ED of Pradipa Medika Hospital. This research uses a quantitative method with a cross-sectional approach involving 229 respondents selected through probability sampling. Data were collected using a validated and reliable questionnaire and analyzed using multiple linear regression. The results showed that socioeconomic level and patient satisfaction significantly affect patients' revisit intention. Patient satisfaction, particularly in the dimensions of reliability, assurance, tangibles, empathy, and responsiveness, is the main determinant driving patient loyalty to ED services. The study emphasizes the importance of improving hospital service quality by considering patients' socioeconomic aspects as a strategy to strengthen loyalty and patient retention.

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1. INTRODUCTION

Health is a fundamental need that encompasses physical, mental, social, and spiritual aspects, and is a key indicator of community well-being. Healthcare institutions such as hospitals play a central role in providing holistic services through various promotive, preventive, curative, rehabilitative, and palliative efforts in accordance with the mandate of Law Number 17 of 2023 concerning Health [1]. One of the important units within the hospital structure is the Emergency Department (ER), which serves as the first door in providing rapid and appropriate assistance to patients in critical and emergency conditions [2].

The quality of emergency room services not only determines the success of medical procedures but also influences patient satisfaction and their likelihood of repeat visits. Patient satisfaction plays a crucial role in building loyalty and influencing patient behavior in re-electing healthcare services. Satisfied patients are not only more likely to return to a hospital but also to provide positive recommendations through their referrals *word of mouth*, which impacts the reputation and sustainability of the hospital [3], [4].

In addition to patient satisfaction, socioeconomic factors have a significant influence on healthcare-seeking behavior. Socioeconomic status, which includes income, occupation, education, and access to resources, influences patients' perceptions, preferences, and ability

to access and utilize healthcare services [5]. Individuals from higher socioeconomic groups generally have greater access to quality healthcare, while individuals from lower socioeconomic backgrounds often face barriers such as cost, limited information, and geographic access that limit their healthcare options [6].

Pradipa Medika Hospital, a private hospital in Kuningan Regency, faces challenges in maintaining repeat patient visits to the Emergency Department (ED). Internal data shows fluctuations in patient numbers in recent months, indicating the need to evaluate factors influencing patient loyalty. Previous studies have highlighted the influence of service quality on patient satisfaction and repeat visit intention (Sutrisno et al., 2022; Widyastuti et al., 2023) [7], [8], but most have not considered the influence of socioeconomic conditions simultaneously.

This study is novel in integrating two important variables, socioeconomic status and patient satisfaction, into a single analytical model to explain the intention to revisit ED patients. By adopting a multidisciplinary approach that combines health behavior theory and health economics, this study is expected to provide theoretical and practical contributions in understanding the factors that influence patient loyalty to ED services.

The aim of this study is to analyze the influence of socio-economic levels on patient revisit interest in the Emergency Room of Pradipa Medika Hospital and to analyze the influence of patient satisfaction levels on patient revisit interest.

2. RESEARCH METHODS

This research uses a quantitative approach with an analytical design of *cross-sectional*. The population in this study was all patients who had visited the Emergency Room of Pradipa Medika Hospital. A sample of 229 respondents was obtained using a random sampling technique of *probability sampling* to ensure proportional representation of the population.

The research instrument was a questionnaire that had undergone validity and reliability testing. The collected data were analyzed using multiple linear regression to examine the effect of socioeconomic status and patient satisfaction on patient return visit intention. The analysis was performed using SPSS version 25.0 software.

3. RESEARCH RESULTS AND DISCUSSION

3.1. Research Results

This study aims to determine the influence of socioeconomic status and patient satisfaction on patient intention to revisit the Emergency Department of Pradipa Medika Hospital. Data were collected through questionnaires distributed to 229 patient respondents who had used the emergency department services at least once. The majority of respondents were aged 26–45 years (54.1%), with a high school education (48.9%), and an income below Rp3,000,000 per month (62.4%). This indicates that most emergency department users come from lower to middle socioeconomic groups.

Validity and reliability tests showed that all variable indicators had correlation values >0.30 and Cronbach's Alpha values >0.70 , thus being declared valid and reliable. The results of the multiple linear regression analysis are shown in Table 1.

Table 1. Results of Multiple Linear Regression Analysis

| Independent Variables | Regression Coefficient (β) | t-count | Sign. |
|---------------------------|------------------------------------|---------|-------|
| Socio-Economic Level (X1) | 0.312 | 4.865 | 0.000 |
| Patient Satisfaction (X2) | 0.498 | 7.612 | 0.000 |

| Independent Variables | Regression Coefficient (β) | t-count | Say. |
|-----------------------|------------------------------------|---------|------|
| Permanent | 2.114 | - | - |
| R ² | 0.658 | - | - |

Based on Table 1, the coefficient of determination (R²) value of 0.658 indicates that socio-economic level and patient satisfaction simultaneously explain 65.8% of the variation in patient revisit interest, while the remaining 34.2% is explained by other variables not examined. The test results showed that both independent variables have a significant effect on patient return visit interest ($p < 0.05$).

These findings show that the higher a patient's socioeconomic status, the more likely they are to return to the emergency room. Furthermore, the higher the patient's satisfaction with the service they received, the greater their intention to return to the same service in the future.

3.2. Discussion

3.2.1. The Influence of Socio-Economic Level on Revisit Interest

The results of the study showed that socioeconomic status significantly influenced patients' intention to revisit the Emergency Department (ER) of Pradipa Medika Hospital ($\beta = 0.312$, $p < 0.05$). This finding supports the theory of *Health Capital* as put forward by Grossman [1], who stated that health status is a form of human capital (*human capital*) which can be improved through sustainable investment, including in the consumption of health services. Individuals with higher income levels have greater flexibility in choosing health facilities, accessing higher-quality services, and making regular return visits [10]. Conversely, limited income often becomes a structural barrier that prevents individuals from lower economic groups from obtaining sustainable and timely health services.

In addition to income, other dimensions of socioeconomic status, such as education level and type of employment, also play a role in shaping people's health behavior. Education influences the level of health literacy and an individual's ability to understand the benefits of health services, thus influencing their decision to make repeat visits [5]. Mosley and Chen [4] emphasized that socioeconomic conditions influence health-seeking behavior through access to information, costs, and transportation availability. Individuals with adequate economic resources are not only able to afford health care costs but also have wider access to medical information and transportation options that make it easier for them to return to health facilities.

This condition can explain the behavioral patterns of patients at Pradipa Medika Hospital. The majority of ER patients come from the lower-middle class, which makes financial ability a primary consideration in making decisions about repeat visits. Patients from this group tend to be highly sensitive to service costs and potential additional expenses that may arise during treatment. This is in line with Mechanic's findings [10], which state that economic barriers are a major determinant in decisions to seek health services, including in the context of repeat visits.

Furthermore, socioeconomic factors not only directly influence visiting behavior, but also act as a structural context that can strengthen or weaken the influence of other factors such as patient satisfaction or perceived service quality. Patients with better economic conditions, for example, may be more tolerant of variations in service quality and more likely to return even with minor

dissatisfaction, because they have more flexible expectations of health care. Conversely, patients with lower economic conditions often have very specific expectations regarding cost-efficiency and service outcomes, so even a slight discrepancy can reduce their intention to return [11].

Therefore, hospital management strategies for increasing patient loyalty require serious attention to this socio-economic aspect. Possible approaches include establishing flexible and affordable tariff policies for low-income groups, providing cross-subsidy schemes (*cross-subsidy*) for patients in need, and expanding collaboration with public and private health insurance institutions to reduce financial barriers to patient access to services. Furthermore, improving health literacy through regular patient education can help address non-economic barriers that also hinder repeat visits. With inclusive and adaptive strategies tailored to patients' socioeconomic conditions, hospitals can strengthen patient loyalty while increasing service accessibility more equitably.

3.2.2. The Influence of Patient Satisfaction on Return Visit Intention

The research findings show that the level of patient satisfaction is the most dominant factor influencing the intention to revisit the Emergency Room (IGD) of Pradipa Medika Hospital ($\beta = 0.498$, $p < 0.05$). This indicates that patient satisfaction plays a central role in shaping revisit behavior, even stronger than socio-economic variables. This finding is consistent with the opinion of Kotler and Keller [2], who stated that customer satisfaction is key in forming long-term loyalty, because satisfied customers will not only make purchases or revisit, but also become loyal customers of *advocate* who spread positive recommendations. In the context of healthcare, patient satisfaction is not only a reflection of met expectations, but also a representation of perceptions of professional competence, system reliability, and the credibility of the hospital institution as a whole.

The SERVQUAL model developed by Parasuraman et al. [3] offers a comprehensive framework for measuring patient satisfaction through five main dimensions: *reliability* (reliability), *assurance* (guarantee), *tangible* (physical evidence), *empathy* (empathy), and *responsiveness* (responsiveness). The results of this study indicate that the dimensions' *reliability* and *responsiveness* is the most significant factor in shaping patient satisfaction in the Emergency Department of Pradipa Medika Hospital. Reliability in the Emergency Department context includes the ability of medical personnel to provide timely and procedural services, as well as accuracy in diagnosis and emergency treatment. Responsiveness reflects the speed and agility of staff in responding to critical patient conditions. These two dimensions are crucial in the Emergency Department context, which is characterized by time constraints and high clinical risks, and are therefore key determinants of patient perceptions of the quality of care received [8].

Research by Widyastuti et al. [8] also emphasizes the importance of responsiveness a key factor determining patient loyalty to emergency room services. In emergency situations, treatment time is a highly sensitive aspect and significantly influences perceptions of quality. Delays or unpreparedness of staff in providing treatment not only impacts the patient's clinical condition but also significantly reduces satisfaction levels. Therefore, hospitals need to ensure a responsive and efficient emergency room management system, including the availability of medical personnel, supporting facilities, and standard operating procedures.

In addition to the technical dimensions of service, emotional aspects also play a significant role in shaping patient satisfaction and intention to revisit. Positive emotional experiences during the care process—such as feeling safe, cared for, and treated with empathy—can improve patients' perceptions of overall service quality [13]. This is in line with the theory of *Service-Dominant Logic* as put forward by Vargo and Lusch, who emphasize that value in health services does not only come from the service output itself but also from the experience of interaction between patients and service providers [14].

Furthermore, the Theory of *Planned Behavior*, TPB (Triangular Behavioral Behavior Model) developed by Ajzen [12] can explain the relationship between patient satisfaction and revisit intention. TPB states that a person's behavioral intention is influenced by three main components: attitude toward the behavior, subjective norms, and perceived behavioral control. In the context of this study, patient satisfaction forms a positive attitude toward the hospital, strengthens subjective norms through social recommendations from other patients, and increases perceived control through efficient and accessible service experiences. The combination of these three factors significantly increases the likelihood of patients returning to the same ED service.

Patient satisfaction also acts as a mediating mechanism between service quality and patient loyalty. Research by Zeithaml et al. [6] shows that high service quality does not automatically guarantee loyalty without satisfaction as an intermediary. This means that satisfaction acts as a bridge between patient perceptions of the service and actual decisions to revisit. In the context of Pradipa Medika Hospital, this means that improving service dimensions such as speed, reliability, and empathy must not only meet technical standards, but must also be directed towards creating a comprehensive positive experience for patients.

Based on these findings, the strategic recommendation for hospital management is to strengthen the service dimensions that have the most influence on patient satisfaction, especially *reliability* and *responsiveness* can be done through ongoing training for medical personnel on emergency situation management, improving the infrastructure and technology supporting the ER, and implementing a system of *triage*. Efficient service delivery to expedite patient care. Furthermore, it's crucial to build a service culture oriented toward empathy and effective communication between medical personnel and patients, as these aspects have a significant impact on patients' emotional experiences and long-term loyalty.

3.2.3. Managerial Implications

The findings of this study have important strategic implications for hospital management in efforts to increase patient loyalty to Emergency Department (ER) services. Patient loyalty is one of the main indicators of a hospital's success in maintaining its operational sustainability, because loyal patients will not only make repeat visits but also become promotional agents through positive recommendations to their families and the community [2], [6]. Therefore, an appropriate strategy based on the results of this study is crucial to be implemented systematically.

First, improving the quality of service must be a top priority, especially in the reliability dimension (*reliability*) and responsiveness (*responsiveness*), which has been shown to have the strongest influence on patient satisfaction and loyalty. Reliability includes consistency in providing services according to standard operating procedures (SOPs), accuracy in diagnosis, and timeliness in handling emergency patients. Responsiveness relates to the ability of staff to immediately

respond to critical patient conditions quickly and effectively [3]. These two aspects are very important in the context of the ER, which demands speed, accuracy, and rapid decision-making. Therefore, management needs to ensure that the work system in the ER is designed to minimize patient waiting times, strengthen coordination between units, and increase the preparedness of medical staff in dealing with emergency situations.

Improving the quality of service does not only focus on technical aspects, but also includes aspects of communication and human interaction between health workers and patients. Empathetic and informative communication has been shown to improve patient perceptions of service quality and build long-term trusting relationships [13]. Patient-centered service (*patient-centered care*) needs to be the primary philosophy in developing emergency department service policies. This can be achieved through interpersonal communication training for medical and non-medical personnel, as well as the implementation of service protocols that prioritize empathy and respect for patient rights.

Second, hospital management needs to design financing policies that are inclusive and adaptive to the socio-economic conditions of patients. The results of this study indicate that socioeconomic status is a significant determinant in patients' decisions to revisit. Therefore, hospitals need to develop financing strategies that can reduce financial barriers for patients accessing emergency department services. This strategy could include implementing a tiered tariff system based on patients' economic capacity (*sliding scale payment*), provision of cross-subsidy programs (*cross-subsidy*) for less fortunate patients, as well as expanding cooperation with government and private health insurance providers [4], [10].

Furthermore, hospitals can develop partnership programs with local governments or social institutions to provide additional financial support for patients from vulnerable groups. Such policies not only increase the number of repeat visits but also create a positive image of the hospital as a caring and inclusive institution. In the long term, an inclusive financing strategy will expand the patient base, improve retention, and strengthen the hospital's financial sustainability.

Third, developing human resource competencies through continuous training is a non-negotiable need. The success of emergency room services depends heavily on the technical and non-technical competencies of medical and support staff. Continuous training is necessary to ensure that the entire hospital workforce remains up-to-date with the latest developments in medical practice, healthcare technology, and international service standards [15]. This training includes not only clinical skills, such as critical patient management and the use of emergency equipment, but also non-clinical skills such as effective communication, stress management, and rapid decision-making in emergency situations.

In addition to individual training, hospitals also need to build an organizational learning system (*learning organization*) which encourages knowledge exchange between staff, reflection on service practices, and innovation in ED governance. An organizational culture that supports learning will increase the hospital's ability to adapt to changing patient needs and developments in the external environment, which will ultimately have a positive impact on service quality and patient satisfaction [16].

Finally, hospitals need to conduct continuous monitoring and evaluation of patient experience and the effectiveness of ER services. Collecting patient feedback through satisfaction surveys, in-depth interviews, or digital assessment systems can provide critical information for continuous improvement. This data can be used to

identify areas for improvement, evaluate the impact of implemented policies, and develop service strategies that are more responsive to patient needs. This data-driven approach will strengthen managerial decision-making and ensure that any service innovations are truly relevant and impactful.

By integrating these three key strategies (improving service quality, inclusive financing policies, and developing workforce competencies), hospitals can significantly increase patient loyalty. These strategic implications are not only relevant to Pradipa Medika Hospital but can also serve as a reference for other hospitals in designing strategies to improve the quality of emergency department services in a comprehensive, sustainable, and patient-centered manner.

4. CONCLUSION

This study concludes that socioeconomic status and patient satisfaction significantly influence patient intention to revisit patients at the Emergency Department (ER) of Pradipa Medika Hospital. The analysis shows that patient satisfaction is the most dominant factor in shaping loyalty and revisit behavior, with a greater contribution than socioeconomic variables. This finding confirms that the quality of hospital services, both technical and non-technical, plays a crucial role in determining patients' decision to revisit ER services. Meanwhile, socioeconomic conditions have also been shown to influence revisit decisions through financial capabilities, access to information, and health literacy levels, all of which shape patient behavior in accessing healthcare services.

Furthermore, the results of this study indicate that these two variables not only work separately but also complement each other in influencing patient behavior. A higher socioeconomic level provides greater flexibility for patients in choosing healthcare services, but the final decision to revisit is strongly influenced by the level of satisfaction with the service received. This indicates that improving service quality needs to be accompanied by policies that consider aspects of economic inclusivity so that the benefits of services can be felt by all levels of society. In this context, hospitals need to view patient satisfaction and socioeconomic conditions as two strategic pillars that are interconnected in building long-term loyalty and service sustainability.

Based on these findings, this study recommends several strategic steps that hospitals can take. First, improving service quality must be a top priority, especially in terms of reliability (*reliability*) and responsiveness (*responsiveness*), which has been shown to have the greatest impact on patient satisfaction. Second, hospitals need to design tariff policies that are adaptive to patients' socio-economic conditions, including through inclusive financing programs and partnerships with health insurance providers, to reduce financial barriers that can prevent patients from returning. Third, hospitals need to build long-term relationships with patients through a patient-centered service approach (*patient-centered care*), strengthening empathetic communication, and creating positive emotional experiences during care. By integrating these three strategies, hospitals can not only increase patient loyalty but also strengthen their institutional competitiveness in facing the dynamic needs of the community for emergency healthcare services.

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