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Disconfirmation as a Mediator of Expectation and Performance Effects on UHC Satisfaction in Sampang Regency

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ABSTRACT

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Citizen Satisfaction; Expectancy Disconfirmation Model; RSUD Kabupaten sampang; Universal Health Coverage

The Sampang Regency Government has implemented the Universal Health Coverage (UHC) program, which means that all levels of society will receive quality health services without considering finances. However, in its implementation, there are still budgetary problems so that the government deactivated 38,990 UHC participants. The purpose of this study is to examine the influence of expectations, performance, and disconfirmation on the level of public satisfaction as recipients of UHC services at the Sampang Regency Regional Hospital using the Expectancy Disconfirmation Model from Van Ryzin (2004). This study uses a quantitative approach with an explanatory research type and a survey research strategy. The study population is inpatients at the Sampang Regency Regional Hospital in 2024. To determine the number of samples, the Isaac and Michael formula was used with a sampling technique, namely simple random sampling. The instrument used was a questionnaire. The data analysis and interpretation technique in this study uses path analysis. In addition, correlation and multiple regression are used as the basis for calculating the path coefficient. The results of this study indicate that the level of expectations and performance influences disconfirmation by 0.478, and the level of expectations, performance, and disconfirmation influences the level of citizen satisfaction by 0.678. From the results of this study, it shows that the expectation disconfirmation model is very appropriate for the public sector because it can determine how to manage public satisfaction.

INTRODUCTION

Universal Health Coverage (UHC) is a program that ensures that everyone has access to health services without causing financial difficulties for service recipients, where UHC is a global program planned by the UN since 2012 and began to be promoted in 2017 (Mulasari & Suratman, 2020)(Rodin & De Ferranti, 2012). In addition, UHC is listed in SDGs point 3.8, namely a healthy and prosperous life. The concept of UHC means that all people can access any health services, wherever and whenever they need them, without having to worry about the cost. The services offered range from health kuratif, rehabilitativ, promotif, preventif (Word Health Organization, 2021).

The UHC program has been decided by PBB to be implemented by all countries, but what happens in the field is that the implementation of UHC in several countries has not been achieved according to its objectives, so support is needed from other countries that have achieved UHC implementation (Pradana et al., 2022). Some of the main obstacles that occur in several countries in implementing UHC progress include inadequate infrastructure, limited basic facilities, weakness in designing financing policies, inefficient distribution of health workers, expensive prices of drugs and medical devices, and access to digital health and innovative technology is still lacking (Word Health Organization, 2021).

The Republic of Indonesia makes health a major capital in order to obtain high welfare. These health problems are listed in the Constitution Number 17 of 2023 Article 4 which contains the rights and obligations of the community in ob-

taining guaranteed health services. The Indonesian government has provided health assurance since 2014 by creating the National Health Insurance (JKN) program which aims to provide health assurance for the entire community (Sinaga et al., 2021). JKN implemented in Indonesia uses the BPJS system. According to Law Number 40 of 2004 concerning the National Social Security System, it is formulated that JKN is a social security that guarantees health costs and the fulfillment of basic health needs by working together, namely by the community paying regular contributions based on a percentage of income, but the services obtained are the same, not according to the contributions that have been paid (JKN, 2020).

Based on the UHC Roadmap that has been prepared, the program can be completed in January 2019, but in fact there are still obstacles in the field that cause UHC not to be achieved according to target (Pradana et al., 2022). In a study entitled "Is Indonesia Achieving Universal Health Coverage? Secondary Analysis Of National Data On Insurance Coverage, Health Spending And Service Availability" it was found that the UHC program greatly helps patients in inpatient treatment, especially patients with low incomes, but eastern Indonesia cannot benefit from it due to limited services and only 27% of villages have easy access to hospitals. In achieving equality in the health sector, the Indonesian government is needed to be able to solve the problem of supply and lack of structural funds (Pratiwi et al., 2021).

In order to accelerate the UHC program process, the President issued Presidential Instruction Number 1 of 2022

which explains that the UHC program is the responsibility of all Ministries/Institutions and the Central Government to the Regency/City, not just the responsibility of BPJS Kesehatan (Saputro & Fathiyah, 2022). To fulfill Presidential Instruction Number 1 of 2022, the Regent of Sampang Regency has issued Regent Regulation Number 34 of 2024 concerning the Implementation of National Health Insurance in fulfilling Universal Health Coverage in Sampang Regency. The first regency on Madura Island to implement the UHC program is Sampang Regency because the JKN percentage has reached 97.52% in 2022, which means that 904,609 people have received JKN protection (Detik Jatim, 2022). As the first regency in Madura to implement UHC, Sampang Regency won the UHC award along with 22 other Provinces and 334 Regencies/Cities from the Coordinating Ministry for PMK RI in the first year the UHC program was implemented. In addition, in 2024, the Sampang Regency Government again received the UHC award in the main category, whereas previously in 2023 it only received the middle category (salsabila.com, 2024).

The provision of health services in the UHC program that applies at RSUD dr. Mohammad Zyn Sampang Regency is in accordance with the applicable PERBUP, namely that people who receive health services are only allowed to receive treatment in class III and have an original Sampang ID card who will receive free medical costs (Nursalim et al., 2024). Since the implementation of the UHC program, RSUD Sampang Regency has experienced a very significant increase in patients for approximately 2 years of the program, especially inpatients. The average number of inpatients in 2023 was only 1,429 patients, while in 2024 it increased to 1,767 patients.

Table 1. Number of BPJS Class III Patients at Sampang
District Hospital

2023		2024		
January	1.394	January	1.835	
February	1.153	February	1.684	
March	1.187	March	1.777	
April	1.100	April	1.723	
Mei	1.441	Mei	1.856	
June	1.309	June	1.605	
July	1.502	July	1.804	
August	1.555	August	1.688	
September	1.501	September	1.550	
October	1.735	October	1.888	
November	1.620	November	1.768	
December	1.646	December	2.030	
Average	1.429	Average	1.767	

Source: RSUD Kabupaten Sampang, 2024

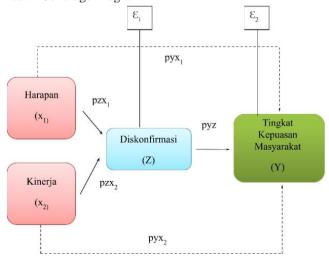
However, in the last few months there have been problems in the implementation of the UHC program in Sampang Regency, one of which is that the health office has currently deactivated the UHC program for 38,990 people on the grounds of overload and minimal budget because in 2023 the Sampang Regency government had arrears to BPJS of 5 billion (panjinasional, 2024). The burden of the Regency Government on BPJS in 2024 has the potential to be 19M, the additional budget will burden the capacity of the APBD. The problems

that occur are due to the weak updating of UHC user data. The large number of data on people who have died and moved from Sampang has not been updated, while the contributions paid by the Regency Government to BPJS are based on existing population data. The problem of arrears is considered to be able to affect the sustainability of the UHC program. The quality of health services is considered suboptimal, because the government is considered to have failed to improve services in accordance with the mandate of the Law (Kabar Harian, 2024).

According to research conducted by Abd. Hamid & Dafis Ubaidillah Assiddiq in 2020 who analyzed the quality of service at the Sampang Regency Hospital, concluded that the Sampang Regency Hospital was in the service category B (good) meaning that there were still weaknesses in the service including poor cleanliness and patient comfort because in the inpatient room there were no rules for visiting family and there were still visitors who smoked so that it could disturb the comfort and tranquility of other patients (Assiddiq & Hamid, 2023).

Citizen satisfaction, as service users, is a factor in assessing indicators and service quality in hospitals. High levels of public satisfaction indicate a hospital's success in providing quality healthcare (Nursalim et al., 2024). High expectations from the Regency community regarding the UHC program can lead to services that do not meet expectations, such as limited inpatient rooms, very long queues, or even inadequate facilities, potentially lowering public satisfaction levels. Therefore, a balance between expectations and performance is necessary to achieve high levels of public satisfaction.

In accordance with the background of the problem, this study will further analyze how public satisfaction with the UHC program services at the Sampang District Hospital using the Expectancy Disconfirmation Model from (Van Ryzin, 2004). The researcher used the Expectancy Disconfirmation Model from Van Ryzin (2004) because this theory can find out what the real expectations of the community are. This is certainly useful for assessing whether the program carried out by the government for the community is in accordance with the wishes of the community because if the existing program does not have a function that is in accordance with the wishes of the community, the program will not run well. So the researcher formulated the title " Effect Of Expectation And Performance Satisfaction Towards Citizen Through Disconfirmation As An Intervening Variable In The Universal Health Coverage Program.".



Picture 1. Expectancy Disconfirmation Model, Van Ryzin (2004)

Hypothesis

- Hypothesis one (H1): Expectations have an effect on disconfirmation
- 2. Hypothesis two (H2): Performance has an effect on disconfirmation
- 3. Hypothesis three (H3): Expectations have an effect on public satisfaction.
- 4. Hypothesis four (H4): Performance has an effect on public satisfaction
- 5. Hypothesis five (H5): Disconfirmation has an effect on public satisfaction

RESEARCH METHODS

This study uses a quantitative approach with an explanatory research type. The quantitative method used in this study was carried out with a survey research strategy. The population used was users of the UHC program services in 2024 at Dr. Mohammad Zyn Regional Hospital, Sampang Regency. The population in this study has an equal chance of being selected as a sample (simple random sampling). The researcher used an average of 1,767 users of class III Sampang Regency Hospital services.

To determine the number of samples using the Slovin formula:

$$n = \frac{N}{(1 + N \times e^2)}$$

Description:

n = Number of Samples

N = Population

e2 = Error Tolerance Limit

* the value of e depends on the error tolerance (10% = 0.10)

In this study, the population of people using UHC services at the Sampang Regency Hospital in 2024 was 21,208 people and the error limit was determined to be 10%. Then the number of samples can be produced as follows:

$$n = \frac{21.208}{1 + 21.208 \times (0.10^2)}$$
$$s = \frac{21.208}{213.08}$$
$$s = 99.530069$$
$$s = 100$$

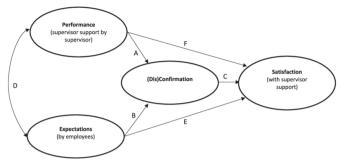
The number of samples in this study was determined as 100 people in Sampang Regency who had received UHC services, more precisely BPJS class III patients at the Sampang Regency Hospital. with random sample selection of UHC service users at the Sampang Regency Hospital. The research instrument used was a questionnaire. The questionnaire was given directly by the researcher to the respondents, namely service users (the community) who had received UHC services at the Sampang Regency Hospital. The questionnaire was made with closed statements with answer choice categories provided by the researcher.

In this study, a Likert scale was used. For quantitative analysis purposes, the researcher will give a score to each answer choice item as follows:

Table 2. Scale Likert

Table 2. Seale Elkert			
Score Indikator			
Very Satisfied	4		
Satisfied	3		
Dissatisfied	2		
Very Dissatisfied	1		

RESULTS AND DISCUSSION



Picture 2. Expectancy Disconfirmation Model. Ryzin (2004)

The Expectancy-Disconfirmation Model developed by Van Ryzin (2004) is a theoretical framework that explains the process of forming publik satisfaction based on a comparison between expectations and performance through disconfirmation. In this model, the main components are expectations, performance, disconfirmation, and satisfaction. Lines A, B, C show the core of the community satisfaction theory that explains the comparison between expectations, performance, disconfirmation, and satisfaction. In addition, there is a confirmed mechanism assumed in this EDM theory, there are also two things of special concern. First, line D which shows a positive relationship between expectations and performance, where in this theory it is used as an exogenous variable but the EDM theory does not discuss this relationship because the causality and effects are not yet clear. Second, line E assumes a direct effect of expectations on satisfaction. (Van Ryzin, 2004).

In this study, for example, the results of quantitative research involving three types of variables. The variables used consist of 2 independent variables, namely expectations and performance, 1 intervening variable, namely disconfirmation, and 1 dependent variable, namely community satisfaction.

The creation of public satisfaction can have a positive effect on public services in the future, including establishing a closer relationship between the public as customers and officers as service providers, so that it can be the basis for creating public loyalty as customers. This can also create a good recommendation from the public who have received services from other communities. In addition, high public satisfaction also supports a good government image.

In UHC services at the Sampang District Hospital, the community is considered to have high expectations because the service is "free". Things that make the service not in accordance with expectations such as limited inpatient rooms, very long queues, or even facilities that are considered inadequate will potentially reduce the level of community satisfaction.

Tabel 3. Correlation Test

Variable	correlation coefficient (r)	α	Significance	Ket.
X ₁ to Z	0,524	0,10	< 0,001	Significant
X2 to Z	0,646	0,10	< 0,001	Significant
X ₁ to Y	0,553	0,10	< 0,001	Significant
X2 to Y	0,773	0,10	< 0,001	Significant
Z to Y	0,689	0,10	< 0,001	Significant

Source: Output SPSS, 2025

The results of data analysis conducted using SPSS version 29, obtained the correlation value of expectations and performance significantly influence satisfaction through disconfirmation as an intervening variant. The results of the correlation test showed that the relationship between all

variables was significant. Expectations (X1) have a fairly strong correlation with disconfirmation (Z) of 0.524, meaning that the higher the public's expectations of UHC services at the RSUD, the higher the level of perception of nonconformity (disconfirmation). In addition, performance (X2) has a stronger relationship with disconfirmation, namely 0.646, meaning that service quality greatly influences the public's view of nonconformity of expectations. When the performance provided by community officers is not good, the resulting disconfirmation value will also decrease or is usually called negative disconfirmation, so this results in low community satisfaction (Van Ryzin, 2004).

Whereas, the relationship between expectations and performance on public satisfaction produces an expectation coefficient of 0.553 and a performance coefficient value of 0.773. This shows that the performance or quality of service provided has a greater influence on public satisfaction. The disconfirmation coefficient value of 0.689 means that the higher the level of expectations and service performance felt by the public, the stronger the public's perception of disconfirmation and public satisfaction.

Tabel 4. Regression Test 1

Model	Regression Coefficients	Significance	R Square	
Expectation	0,280	0,001	0,478	
Performance	0,513	< 0,001		
Dependen Variable: Disconfirmation				

Source: Output SPSS, 2025

Based on the table, it shows that the R square value is 0.478. This means that the total influence of expectations and performance on disconfirmation is 0.478, while the rest (0.522) is influenced by other variables.

Tabel 5. Regression Test 2

Model	Regression Coefficients	Significance	R Square
Expectation	0,165	0,020	0,678
Performance	0,523	< 0,001	
Disconfirmation	0,265	0,001	
Dependen Variable: Citizen Satisfaction			

Source: Output SPSS, 2025

Based on the test results, it shows that the R square value is 0.678. It can be interpreted that the total influence of expectations, performance, and disconfirmation is 0.678 and the rest (0.322) is influenced by other variables.

Tabel 6. Path Analysis Test

STRUCTURE 1					
Variable	Coeffisient	Effect			R Square
		Direct	Indirect	Total	
X_1		0,280			
X_2		0,513			
ε1		0,522			
X ₁ dan X ₂					0,478
		STRUCT	TURE 2		
Variabel	Coeffisient	Effect			R Square
		Direct	Indirect	Total	
X_1	0,165	0,165	0,074	0,239 or	
				23,9%	
X_2	0,523	0,523	0,136	65,9%	
Z	0,265	0,265			
\mathcal{E}_2	0,322				
X ₁ , X ₂ , & Z					0,678

Through the results of path analysis, it is divided into 2 equations. In the first equation, it is shown that variables X1 (expectation) and X2 (performance) have a significant effect on variable Z (disconfirmation). With a path coefficient value from expectation to disconfirmation of 0.280, even though the value of the influence of expectations is not the most dominant, the expectation variable still plays an important role because it is the initial perception of the public services that will be received. While the path coefficient value from performance to disconfirmation is 0.513. From the coefficient value, it shows that both independent variables have a real influence on public perception regarding the suitability between expectations and the reality of UHC program services at Sampang District Hospital.

In the second equation, it is known that the third independent variable (expectation, performance, and disconfirmation) has a significant effect on community satisfaction. The coefficient value from expectation to community satisfaction is 0.165. In addition, the coefficient value from performance to community satisfaction is 0.523, and the disconfirmation coefficient value is 0.265. The significance value of the third variable is also $<\alpha$. This shows that statistically the variables used directly affect the level of community satisfaction with the UHC service program. In the results, there is also an R Square value of 0.678, meaning that the direct influence that occurs from the third variable is 67.8% and the rest is influenced by other factors outside the study.

In addition to the direct influence, this study found that there is an indirect influence of the performance expectation variable on satisfaction through the public disconfirmation variable. The expectation variable has an indirect influence of 0.074 and an indirect influence of performance on satisfaction through disconfirmation of 0.136. So it can be concluded that the expectation variable has a total influence of 0.239, while the performance variable is 0.659. From the coefficient value, it produces the finding that performance is the most dominant variable in determining the level of satisfaction in public services. The findings of this research are reinforced by previous research conducted by Parasuraman et al (1998) through the SERVQUAL model, which states that service quality is influenced by high performance, thereby creating public satisfaction.

Theoretically, the results of this study prove that the EDM model is relevant for analyzing public service satisfaction, particularly in the health sector. Practically, these results indicate the need for regular evaluation in the implementation of UHC, especially in managing public expectations, improving service performance, and the accuracy of participant data. Public satisfaction is influenced by the extent to which service performance exceeds public expectations. In line with previous research conducted by Ratnasari D (2015), which also found that Van Ryzin's Expectancy Disconfirmation Model is empirically very suitable for explaining phenomena in public services that see public expectations and service performance provided. Therefore, the management of the Regional General Hospital (RSUD) must manage expectations realistically and maintain consistent performance to prevent public satisfaction from declining.

CONCLUSION

1. Variable X1 (expectation) has a significant effect on variable Z (disconfirmation) because its significance value is smaller than α (0.10), which is 0.001. In addition, the coefficient value of the influence of expectations on

- disconfirmation is 0.280. This states that the null hypothesis (H0) is rejected and hypothesis 1 (H1) is accepted.
- 2. Variable X2 (performance) has a significant effect on variable Z (disconfirmation) with a value smaller than α (0.10), which is <0.001. The coefficient value of the influence of performance on disconfirmation is 0.513, meaning that the null hypothesis (H0) is rejected and hypothesis two (H2) is accepted. This explains that public perception of the performance of UHC program services at the District Hospital also greatly influences the extent to which the services received are appropriate.</p>
- 3. Variable X1 (expectation) has a significant effect on variable Y (community satisfaction) with a value smaller than α (0.10) which is 0.020 and a path coefficient of 0.165. Although the coefficient value is smaller than variables X2 (performance) and Z (disconfirmation), it also proves that the initial expectations of the community are one of the important factors influencing community satisfaction. This means that the null hypothesis (H0) is rejected and hypothesis three (H3) is accepted.
- 4. Variable X2 (performance) has a significant effect on variable Y (community satisfaction) which is <0.001 and produces the highest coefficient value of 0.659. Performance is one of the most dominant factors influencing community satisfaction, this shows that users of public services consider service quality more than expectations. This means that the null hypothesis (H0) is rejected and hypothesis four (H4) is accepted.
- 5. Variable Z (disconfirmation) has a significant influence on variable Y (community satisfaction) of 0.001 and produces a coefficient value of 0.265. This shows that community satisfaction is also influenced by the suitability between initial expectations and the performance received. This means that the null hypothesis (H0) is rejected and the fifth hypothesis (H5) is accepted.
- 6. The R Square value is 0.678, this value is greater than other influences that were not studied, meaning that the independent variables used in this study are able to explain the dependent variable. This also shows that the Expectancy Disconfirm Model is appropriate and is able to explain 67.8% of the variation in community satisfaction through the variables of expectations, performance, and disconfirmation. The remaining 32.2% is influenced by other variables that were not studied.

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