E-ISSN: 2962-6110
P-ISSN: 2964-7843
JSRET
jsret.knpub.com
Journal of Scientific Research, Education, and Technology

The Effects of Perceived Service Justice and Information Clarity on Outpatient Satisfaction in An Indonesian Public Hospital

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ABSTRACT

Patient satisfaction is a key indicator of healthcare service quality and reflects patients' evaluation of the services they receive. Although Pasar Rebo Regional General Hospital (RSUD Pasar Rebo), Jakarta, has achieved a high level of public satisfaction, patient feedback continues to indicate concerns regarding service fairness and the clarity of information provided during outpatient care. This study aimed to examine the effects of perceived service justice and information clarity on outpatient satisfaction at RSUD Pasar Rebo, East Jakarta. A quantitative explanatory research design employing a survey method was used. Primary data were collected through questionnaires administered to 392 outpatient respondents and analyzed using descriptive statistics and multiple linear regression. Hypothesis testing was conducted using *t*-tests to examine the partial effects of each independent variable and an *F*-test to assess their simultaneous effect on patient satisfaction. The findings revealed that perceived service justice and information clarity had positive and statistically significant effects on outpatient satisfaction, both individually and simultaneously. Descriptive analysis indicated that respondents generally perceived service justice and information clarity to be at a good level. Nevertheless, several issues remained, particularly regarding queue management, administrative procedures, accessibility of information, and consistency in information delivery during peak service hours. Patient satisfaction was also categorized as good, although it remained at a moderate level, suggesting that patients generally had positive service experiences but that their expectations had not been fully met. The study concludes that strengthening fairness in service delivery and ensuring that information is clear, accessible, and consistently communicated are important strategies for improving outpatient satisfaction. These findings provide practical implications for hospital management in designing patient-centered service quality improvement initiatives.

Keywords: *Perceived Service Justice, Information Clarity, Patient Satisfaction, Outpatient Services, Public Hospital*

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INTRODUCTION

Healthcare services constitute one of the most essential public services because they directly influence population health, quality of life, and sustainable social

development. As healthcare systems become increasingly patient-oriented, hospitals are expected not only to provide clinically effective and safe medical treatment but also to ensure that every stage of the service process delivers a positive patient experience. Consequently, the evaluation of hospital performance has evolved beyond traditional clinical indicators, such as treatment success and patient safety, to encompass broader dimensions of service quality, including administrative efficiency, communication effectiveness, accessibility of information, responsiveness, and the overall experience of receiving care (Laila & Paramarta, 2024; Masjadi & Jannah, 2025). This paradigm shift reflects the growing recognition that high-quality healthcare is achieved not solely through successful clinical interventions but also through service processes that are responsive to patients' expectations and needs.

The increasing emphasis on patient-centered care has further reinforced the importance of patient satisfaction as a strategic indicator of healthcare quality (Yuliaty et al., 2025). Contemporary healthcare systems recognize patients not merely as recipients of medical services but as active participants whose perceptions and experiences provide valuable feedback for continuous quality improvement. Patient satisfaction therefore represents a multidimensional evaluation that integrates patients' assessments of clinical care with their experiences throughout the healthcare journey, including registration procedures, waiting time, administrative processes, interactions with healthcare professionals, communication quality, and the availability of accurate and understandable information (Widodo & Prayoga, 2022). High levels of patient satisfaction have also been associated with greater patient trust, stronger adherence to medical recommendations, improved continuity of care, and increased willingness to reuse healthcare services or recommend hospitals to others. Conversely, dissatisfaction may undermine patients' confidence in healthcare institutions and negatively affect service utilization despite adequate clinical outcomes.

Among the various determinants of patient satisfaction, perceived service justice has emerged as an increasingly important construct within healthcare management research. Derived from organizational justice theory, service justice reflects patients' perceptions regarding whether healthcare services are delivered fairly, consistently, and respectfully throughout the service process (Pérez-Arechaederra et al., 2025). This concept encompasses distributive justice, procedural justice, interpersonal justice, and informational justice, each representing different dimensions through which patients evaluate fairness during service encounters. In healthcare settings, service justice is reflected in equitable treatment regardless of patients' socioeconomic background or insurance status, transparent and consistent administrative procedures, orderly queue management, respectful interpersonal interactions, and equal opportunities to access healthcare services. Patients who perceive fairness throughout these dimensions are more likely to develop trust in healthcare providers, experience greater psychological comfort, and evaluate the quality of services more positively (Muchtiar et al., 2025; Riyanto et al., 2023).

Another critical determinant of patient satisfaction is information clarity. Healthcare services are characterized by substantial information asymmetry because healthcare professionals possess considerably greater medical knowledge than patients. This imbalance increases patients' dependence on healthcare providers for accurate, complete, timely, and comprehensible information regarding administrative procedures, referral systems, treatment plans, waiting times, medication use, and follow-up care. Information that is communicated clearly enables patients to understand the healthcare process, reduces uncertainty and anxiety, facilitates informed decision-making, and strengthens patients' confidence in the services they receive (Almass et al., 2022). Conversely, inconsistent or unclear information may create confusion, increase perceptions of procedural complexity, and diminish overall satisfaction, even when the technical quality of medical care remains satisfactory. Consequently, information clarity functions not only as a communication attribute but also as an important mechanism through which hospitals demonstrate transparency, accountability, and patient-centered service delivery.

Previous empirical studies have consistently reported positive relationships between perceived service justice, information quality, and patient satisfaction (AlOmari & Hamid, 2022; Elshaer et al., 2025; Khalife et al., 2023; Wulandari et al., 2025; Zhu et al., 2022). Nevertheless, several research gaps remain. First, many existing studies examine service justice and communication or information quality independently, providing limited evidence regarding their simultaneous contribution to patient satisfaction within a single explanatory model. Second, previous investigations frequently conceptualize communication as a broad dimension of service quality without specifically focusing on the clarity of information delivered throughout the patient journey. Third, although patient satisfaction has been extensively investigated in healthcare settings, relatively limited evidence is available from Indonesian public hospitals, particularly outpatient services operating within the National Health Insurance (BPJS Kesehatan) system, where administrative procedures, referral mechanisms, and patient flow are considerably more complex than those in many other healthcare contexts. These gaps indicate the need for empirical research that simultaneously examines perceived service justice and information clarity as complementary determinants of outpatient satisfaction in Indonesian public hospitals.

The urgency of this study is further supported by the service conditions observed at Pasar Rebo Regional General Hospital (RSUD Pasar Rebo), East Jakarta. Overall, the hospital has demonstrated positive service performance, as reflected by its high Google Review rating and a "Very Good" Community Satisfaction Index, indicating that most patients perceive the quality of healthcare services favorably. However, preliminary identification of patient feedback also reveals recurring concerns related to administrative complexity, BPJS referral procedures, queue management, prolonged waiting times during peak service periods, communication with healthcare personnel, and inconsistencies in the delivery of service information. While these complaints do not necessarily represent the experiences of the majority of patients, they highlight specific aspects of service delivery that may influence patients' perceptions of fairness and transparency. Because outpatient

services involve numerous administrative interactions before patients receive clinical care, ensuring equitable procedures and clear information becomes particularly important in shaping patients' overall service experiences and satisfaction (Kinasih et al., 2026).

Based on these considerations, this study investigates the influence of perceived service justice and information clarity on outpatient satisfaction at Pasar Rebo Regional General Hospital, East Jakarta. By examining these two constructs simultaneously, this study contributes to the growing literature on patient-centered healthcare management and extends existing evidence concerning the role of fairness and communication in shaping patient satisfaction within Indonesian public hospitals. Furthermore, the findings are expected to provide practical insights for hospital managers and policymakers in developing strategies that strengthen equitable service delivery, improve information management, and ultimately enhance the quality of outpatient healthcare services.

METHOD

This study employed a quantitative explanatory research design using a cross-sectional survey approach to examine the relationships between perceived service justice, information clarity, and outpatient satisfaction. The study was conducted at Pasar Rebo Regional General Hospital (RSUD Pasar Rebo), East Jakarta, Indonesia, one of the largest public referral hospitals in the region. The outpatient setting was selected because outpatient services involve extensive patient interactions throughout registration, administrative procedures, information delivery, and healthcare service provision, making this setting particularly relevant for assessing patients' perceptions of service justice and information clarity. The target population comprised outpatient visitors at RSUD Pasar Rebo. Based on the hospital's outpatient records, the average monthly outpatient visits during the six months preceding the study were 19,221 patients, and this figure was used as the study population because it was considered more representative of routine service utilization than a single month's attendance. The required sample size was determined using the Slovin formula, resulting in a minimum sample of 392 respondents.

Participants were recruited using an accidental sampling technique, whereby patients encountered after completing their outpatient services and meeting the study's inclusion criteria were invited to participate. Although accidental sampling is a non-probability sampling method, it was considered appropriate because of the high and dynamic patient flow in the outpatient clinics. To reduce potential selection bias, data collection was conducted on different service days and across various outpatient clinics during regular hospital operating hours. Primary data were collected using a structured self-administered questionnaire distributed directly to outpatient respondents after they had completed the service process. Collecting responses immediately after the healthcare encounter enabled respondents to evaluate their experiences while they remained recent, thereby improving the relevance of their assessments.

The questionnaire consisted of four sections: respondents' demographic characteristics, perceived service justice, information clarity, and patient satisfaction. Perceived service justice was operationalized using three dimensions adapted from

Greenberg's (1987) organizational justice framework, namely distributive justice, procedural justice, and interactional justice. Information clarity was measured through four dimensions: clarity, completeness, consistency, and accessibility of information. Patient satisfaction was measured using three dimensions adapted from Kotler & Keller (2021), including expectation confirmation, revisit intention, and willingness to recommend the hospital. All questionnaire items were measured using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

Prior to the main survey, the questionnaire was subjected to validity and reliability testing using responses from 30 participants. Item validity was evaluated using Pearson product-moment correlation, with all questionnaire items exceeding the critical correlation value ($r > 0.361$), indicating satisfactory construct validity. Instrument reliability was assessed using Cronbach's alpha, yielding coefficients of 0.752 for perceived service justice, 0.865 for information clarity, and 0.768 for patient satisfaction, demonstrating acceptable internal consistency for all study variables. Questionnaire responses were initially measured on an ordinal Likert scale and subsequently transformed into interval data using the Method of Successive Intervals (MSI) to satisfy the assumptions of parametric statistical analysis.

Descriptive statistics were used to summarize respondents' characteristics and describe the levels of perceived service justice, information clarity, and patient satisfaction. Inferential analysis was performed using multiple linear regression to examine the effects of perceived service justice and information clarity on patient satisfaction. Before hypothesis testing, classical assumption tests were conducted, including normality and heteroscedasticity tests, to verify the appropriateness of the regression model. The normality test using the Kolmogorov–Smirnov method indicated that the residuals were normally distributed ($p = 0.071$), while the scatterplot analysis showed no evidence of heteroscedasticity, indicating that the assumptions for linear regression were satisfied. Hypothesis testing included *t*-tests to evaluate the partial effects of each independent variable, an *F*-test to assess their simultaneous effect, and the coefficient of determination (R^2) to estimate the proportion of variance in patient satisfaction explained by the regression model. All statistical analyses were performed using IBM SPSS.

RESULTS

A total of 392 outpatient respondents participated in this study. Table 1 summarizes their demographic characteristics. Female respondents accounted for a slightly higher proportion of the sample than males (57.1% vs. 42.9%). The largest age group was 42–49 years (23.5%), followed by 34–41 years (21.9%) and ≥50 years (20.9%), indicating that most respondents were middle-aged adults. Regarding educational attainment, nearly half of the respondents had completed senior high school (46.4%), while 31.6% held a bachelor's degree. In terms of occupation, private-sector employees constituted the largest occupational group (37.8%), followed by homemakers (21.4%) and self-employed workers (19.4%). The majority of respondents (75.5%) were beneficiaries of the Indonesian National Health Insurance (*BPJS Kesehatan*), whereas 15.8% were self-paying patients and 8.7% were covered by private health insurance. Overall, the sample represents the typical profile of

outpatient users at RSUD Pasar Rebo, consisting predominantly of BPJS-insured, economically active adults with secondary or higher educational backgrounds.

The descriptive analysis indicates that respondents generally perceived service justice at RSUD Pasar Rebo to be good, suggesting that the hospital has implemented service processes that are considered fair, consistent, and respectful by outpatient patients. The assessment covered three dimensions of service justice, namely distributive justice, procedural justice, and interactional justice. Among the three dimensions, interactional justice obtained the highest mean score, indicating that respondents generally perceived healthcare personnel to treat patients politely, respectfully, and professionally throughout the outpatient service process. This finding suggests that interpersonal interactions between healthcare providers and patients constitute one of the hospital's strengths. Procedural justice also received favorable evaluations, reflecting respondents' positive perceptions regarding the consistency and transparency of administrative procedures.

Nevertheless, several questionnaire items received comparatively lower scores, particularly those related to waiting time, queue management, and administrative procedures, indicating opportunities for further improvement in ensuring equitable service delivery across all stages of outpatient care. Overall, these findings demonstrate that respondents perceived service delivery to be fair, although certain operational aspects remained capable of enhancement. Respondents also reported positive perceptions regarding the clarity of information provided throughout outpatient services. Information clarity was evaluated through four dimensions, namely clarity, completeness, consistency, and accessibility of information.

The overall mean score indicates that respondents generally agreed that the information delivered by RSUD Pasar Rebo was understandable, sufficiently complete, and accessible throughout the service process. Healthcare personnel were generally perceived to provide explanations that enabled patients to understand registration procedures, service flow, and healthcare processes. However, several aspects received relatively lower evaluations, particularly regarding the consistency of information delivered by different service units and the availability of information during busy service periods. These findings suggest that while the hospital has established an effective information system, maintaining consistency in information delivery across departments remains an important area for quality improvement.

The descriptive analysis further revealed that patient satisfaction was generally categorized as good, indicating that respondents experienced positive perceptions regarding the outpatient services they received. Although patient satisfaction was categorized as good, the results also indicate that satisfaction had not reached the highest possible level, suggesting that patients generally perceived the services positively while still identifying opportunities for improvement. The relatively favorable evaluations are consistent with the hospital's high Community Satisfaction Index and positive public reviews. Nevertheless, patient feedback regarding waiting time, administrative complexity, queue management, and information delivery indicates that non-clinical aspects of service continue to influence patients' overall evaluations. These findings imply that further

improvements in service fairness and communication may contribute to even higher levels of outpatient satisfaction.

Table 1. Estimated Regression Model

Variable	Unstandardized Coefficient (B)	Standard Error	Standardized Coefficient (β)	*t*	*p*-value
Constant	1.544	0.757	–	2.041	0.042
Perceived Service Justice	0.228	0.061	0.234	3.750	<0.001
Information Clarity	0.364	0.076	0.432	4.780	<0.001

Source: Primary data processed by the authors (2026)

Multiple linear regression analysis was performed to examine the influence of perceived service justice and information clarity on outpatient satisfaction. Prior to hypothesis testing, the regression model satisfied the classical assumptions of normality and homoscedasticity, indicating that the data were appropriate for multiple linear regression analysis. The regression equation obtained from the analysis is:

$$Y = 1.544 + 0.228X1 + 0.364X2$$

The regression coefficients indicate positive relationships between both independent variables and patient satisfaction. Specifically, a one-unit increase in perceived service justice was associated with a 0.228-unit increase in patient satisfaction, assuming information clarity remained constant. Similarly, a one-unit increase in information clarity was associated with a 0.364-unit increase in patient satisfaction, holding perceived service justice constant. Based on the standardized regression coefficients, information clarity (β = 0.432) demonstrated a stronger association with patient satisfaction than perceived service justice (β = 0.234).

The overall regression model was statistically significant, as indicated by the ANOVA results ($F = 273.200$, $p < 0.001$), demonstrating that perceived service justice and information clarity jointly explained a significant proportion of the variation in patient satisfaction.

Table 2. ANOVA Results

Model	df	F	*p*-value
Regression	2	**273.200**	**<0.001**
Residual	389		
Total	391		

Source: Primary data processed by the authors (2026)

The coefficient of determination showed that the model explained 37.6% of the variance in outpatient satisfaction ($R^2 = 0.376$), while the remaining 62.4% of the variance was attributable to factors outside the scope of the present study.

Table 3. Coefficient Determination

Statistic	Value
R	0.613
R^2	0.376
Adjusted R^2	0.373

Source: Primary data processed by the authors (2026)

Overall, the regression results demonstrate that both perceived service justice and information clarity were significant predictors of outpatient satisfaction. Among the two predictors, information clarity exhibited the larger standardized regression coefficient, indicating a stronger contribution to the variation in patient satisfaction within the proposed regression model.

DISCUSSION

The Effect of Perceived Service Justice on Outpatient Satisfaction

The present study demonstrates that perceived service justice has a positive and statistically significant effect on outpatient satisfaction at RSUD Pasar Rebo. This finding indicates that patients who perceive healthcare services as being delivered fairly are more likely to report higher levels of satisfaction. In the outpatient setting, patients evaluate fairness not only through the clinical services they receive but also through the way services are organized and delivered, including registration procedures, queue management, administrative processes, consistency of service implementation, and interpersonal interactions with healthcare personnel. Consequently, patient satisfaction is influenced not only by the technical quality of healthcare but also by whether patients perceive that they are treated equitably throughout the service process.

The descriptive findings reinforce this relationship. Overall, respondents rated perceived service justice as being in the good category, indicating that most patients considered the hospital to provide equitable treatment, transparent procedures, and respectful interactions. Nevertheless, several operational aspects received comparatively lower evaluations, particularly those related to administrative complexity, waiting time, queue management, and the consistency of service procedures. These findings correspond with the preliminary assessment of patient feedback, where Google Reviews revealed recurring concerns regarding administrative procedures, BPJS referral requirements, queue management, prolonged waiting times, and communication during outpatient services. Although the hospital has achieved a high public satisfaction rating and a "Very Good" Community Satisfaction Index, these recurring complaints suggest that patients remain sensitive to procedural fairness during service delivery. Such operational issues may

influence patients' perceptions of fairness because they affect equal access to services, procedural transparency, and consistency in service implementation.

The positive influence of perceived service justice is theoretically consistent with Service Justice Theory, which proposes that customers evaluate service experiences through multiple dimensions of fairness, including distributive, procedural, interpersonal, and informational justice. Within healthcare organizations, distributive justice is reflected in patients' perceptions that healthcare services are provided equitably regardless of socioeconomic background or insurance status. Procedural justice relates to the fairness, transparency, and consistency of hospital procedures, including registration, referral mechanisms, and queue management. Interpersonal justice concerns respectful, polite, and dignified treatment by healthcare personnel, whereas informational justice emphasizes the provision of honest, adequate, and timely explanations throughout the healthcare process. Positive perceptions across these dimensions reduce uncertainty, strengthen institutional trust, and encourage favorable evaluations of healthcare services, thereby increasing patient satisfaction.

The findings are also consistent with Equity Theory, which argues that individuals evaluate service experiences by comparing what they contribute with the outcomes they receive (Senyapar, 2024). In the context of outpatient healthcare, patients invest considerable time, effort, financial resources, and emotional commitment to obtain medical treatment. Satisfaction therefore depends not only on receiving appropriate clinical care but also on whether patients perceive that the service process is conducted fairly relative to the resources they expend. When administrative procedures are transparent, waiting times are managed consistently, and healthcare personnel treat patients respectfully without discrimination, patients are more likely to perceive that the exchange between themselves and the hospital is equitable, leading to higher satisfaction.

Empirically, the findings corroborate previous studies that identified service justice as an important determinant of patient satisfaction. Ferdiyanti & Firmansyah (2025) reported that patients' perceptions of distributive, procedural, and interactional justice significantly improved satisfaction with healthcare services by strengthening trust and reducing perceptions of unequal treatment. Similarly, Sitepu & Kosasih (2024) found that equitable treatment, transparent procedures, and respectful communication positively influenced patients' evaluations of healthcare quality. The consistency between the present study and previous research suggests that service justice represents a robust predictor of patient satisfaction across different healthcare settings.

The present findings also provide important managerial implications for public hospitals operating within the Indonesian National Health Insurance (*BPJS Kesehatan*) system. High patient volumes and complex administrative procedures frequently increase the risk of patients perceiving inequitable treatment, particularly when waiting times are prolonged or service information differs across service units. Consequently, improving patient satisfaction requires more than maintaining high clinical standards. Hospital management should also strengthen procedural transparency, simplify administrative processes, optimize queue management systems, standardize service procedures across

outpatient clinics, and ensure that all patients receive equal treatment regardless of insurance status or personal background (Kriachkova et al., 2026). Such improvements are expected to reinforce patients' perceptions of fairness, strengthen institutional trust, and ultimately enhance overall outpatient satisfaction.

The Effect of Information Clarity on Outpatient Satisfaction

The findings of this study indicate that information clarity has a positive and statistically significant effect on outpatient satisfaction at RSUD Pasar Rebo. Moreover, information clarity demonstrated a larger standardized regression coefficient than perceived service justice, suggesting that it represents the stronger predictor of patient satisfaction within the proposed model. This finding implies that patients attach considerable importance to receiving information that is clear, complete, consistent, and easily accessible throughout the healthcare process. While clinical competence remains fundamental to healthcare quality, patients also evaluate hospitals based on how effectively information is communicated before, during, and after service delivery.

The descriptive analysis supports this result by showing that respondents generally perceived information clarity to be good, indicating that the hospital has implemented communication practices that enable patients to understand service procedures, administrative requirements, and the healthcare process. Nevertheless, several indicators received comparatively lower evaluations, particularly regarding the consistency of information across different service units and the availability of information during periods of high patient volume. These findings correspond with the preliminary assessment, which identified recurring patient complaints related to administrative procedures, BPJS referral requirements, service flow, and inconsistent information delivered by healthcare personnel. Although these complaints represent only a portion of the overall patient experience, they demonstrate that communication remains a critical component of outpatient service quality and continues to influence patients' evaluations of the services received.

The significant influence of information clarity can be explained by the inherent characteristics of healthcare services, which are marked by substantial information asymmetry. Healthcare professionals possess considerably greater medical and administrative knowledge than patients, creating a situation in which patients depend heavily on healthcare providers for explanations regarding registration procedures, referral mechanisms, treatment plans, medication, waiting times, and follow-up care. Consequently, patients are unable to evaluate healthcare services solely on the basis of technical competence; instead, they rely on the quality of information communicated throughout the service process. When information is delivered clearly, accurately, consistently, and in language that patients can easily understand, uncertainty is reduced, confidence in healthcare providers increases, and patients are more likely to perceive the service experience positively.

These findings are also consistent with Expectation Disconfirmation Theory, which proposes that satisfaction arises when service performance meets or exceeds prior

expectations (Marimon et al., 2025). Information plays a central role in shaping these expectations because it establishes patients' understanding of service procedures, expected waiting times, administrative requirements, and anticipated healthcare outcomes (Almass et al., 2022). When hospitals communicate information transparently and consistently, patients are better prepared for the service process, reducing the discrepancy between expectations and actual experiences. Conversely, unclear or inconsistent information may create unrealistic expectations or confusion, leading patients to perceive dissatisfaction even when the clinical quality of care is appropriate.

The present findings are supported by previous empirical research. Khalife et al. (2023) reported that effective communication and information quality significantly improved patient satisfaction by reducing uncertainty and strengthening trust in healthcare providers. Similarly, Wulandari et al. (2025) found that clear explanations regarding healthcare procedures enhanced patients' confidence and positively influenced their overall evaluation of hospital services. AlOmari & Hamid (2022) and Zhu et al. (2022) likewise demonstrated that accessible, accurate, and timely information contributes significantly to patient satisfaction because it facilitates patient engagement and improves communication between healthcare professionals and patients. The consistency of these findings with the present study reinforces the importance of information clarity as a fundamental component of patient-centered healthcare delivery.

The relatively stronger influence of information clarity observed in this study suggests that communication constitutes one of the most influential non-clinical determinants of outpatient satisfaction at RSUD Pasar Rebo. This finding may reflect the complexity of outpatient services within Indonesia's National Health Insurance (*BPJS Kesehatan*) system, where patients must navigate multiple administrative procedures, referral mechanisms, registration processes, and clinical consultations before completing their healthcare visits. Under such conditions, clear and consistent communication becomes essential for minimizing confusion and ensuring that patients understand each stage of the service process (Page et al., 2024). Consequently, even when patients perceive services to be fair, inadequate communication may diminish their overall satisfaction by increasing uncertainty and reducing confidence in the service system (Pérez-Arechaederra et al., 2025).

From a managerial perspective, these findings emphasize the need for hospitals to strengthen communication management as an integral component of service quality improvement. Hospital administrators should establish standardized communication protocols across service units, ensure that healthcare personnel provide consistent explanations regarding administrative and clinical procedures, optimize digital and printed information media, and regularly evaluate the accessibility and accuracy of information provided to patients. Such initiatives would not only improve patients' understanding of healthcare services but also strengthen trust, reduce uncertainty, and ultimately enhance outpatient satisfaction (Utami et al., 2026).

The Simultaneous Effects of Perceived Service Justice and Information Clarity on Outpatient Satisfaction

The findings demonstrate that perceived service justice and information clarity simultaneously have a positive and statistically significant effect on outpatient satisfaction at RSUD Pasar Rebo. The significant regression model indicates that these two variables jointly contribute to explaining patients' evaluations of outpatient services, suggesting that patient satisfaction is shaped by the combined influence of equitable service delivery and effective communication rather than by either factor independently.

The coefficient of determination ($R^2 = 0.376$) indicates that perceived service justice and information clarity collectively explain 37.6% of the variation in outpatient satisfaction, while the remaining 62.4% is attributable to factors beyond the scope of the present study. This finding suggests that although fairness and communication are important determinants of patient satisfaction, they represent only part of the broader patient experience. Healthcare services are inherently multidimensional, and patients evaluate hospitals based on a combination of clinical and non-clinical factors encountered throughout the service process.

Several factors may account for the unexplained proportion of patient satisfaction. These include service quality dimensions such as responsiveness, reliability, empathy, and assurance, as well as waiting time, accessibility of healthcare services, physical facilities, treatment outcomes, digital service availability, hospital reputation, and individual patient characteristics, including previous healthcare experiences and personal expectations (Bahri & Patimah, 2023; Ferdiyanti & Firmansyah, 2025; Widodo & Prayoga, 2022). These factors may independently or interactively influence patients' perceptions of healthcare services and therefore warrant further investigation in future studies. The moderate explanatory power of the regression model highlights the complexity of patient satisfaction and reinforces the need for comprehensive approaches when evaluating healthcare quality (Purbasari, 2025; Safitri et al., 2026; Santhes et al., 2025).

The combined influence of perceived service justice and information clarity also reflects the complementary nature of these two constructs. Fair service procedures alone may not generate high levels of patient satisfaction if patients do not fully understand administrative requirements, referral mechanisms, or service processes. Likewise, providing accurate and comprehensive information may be insufficient if patients perceive inequitable treatment, inconsistent procedures, or unfair queue management. In other words, patients evaluate outpatient services holistically, integrating both their perceptions of fairness and the quality of communication throughout the healthcare journey (Antiga et al., 2025; Noviyani & Viwattanakulvanid, 2024). This finding supports the patient-centered care perspective, which emphasizes that positive patient experiences are created through coordinated improvements in multiple aspects of service delivery rather than isolated interventions.

The present study extends previous research by examining perceived service justice and information clarity simultaneously within the context of outpatient services in an Indonesian public hospital operating under the National Health Insurance (*BPJS*

Kesehatan) system. While previous studies have generally investigated these variables separately or as components of broader service quality frameworks, the present findings demonstrate that they function as complementary determinants of patient satisfaction. This integrated approach contributes to the growing body of evidence on patient-centered healthcare management by highlighting the importance of combining equitable service delivery with effective communication to improve patient experiences (Çakmak & Uğurluoğlu, 2024; Witkowski et al., 2024).

From a practical perspective, the findings suggest that hospital quality improvement initiatives should not focus exclusively on clinical performance but should also address the administrative and communicative aspects of healthcare delivery. Hospital management should continue strengthening procedural transparency, simplifying administrative processes, improving queue management, ensuring equitable treatment across patient groups, and standardizing communication across all outpatient service units. At the same time, attention should be directed toward other determinants of patient satisfaction that were not examined in the present study, including reducing waiting times, improving service responsiveness, enhancing healthcare facilities, and strengthening the overall patient experience. Implementing these strategies in an integrated manner is expected to improve patient trust, optimize service experiences, and ultimately increase outpatient satisfaction.

CONCLUSION

This study demonstrates that both perceived service justice and information clarity significantly influence outpatient satisfaction at Pasar Rebo Regional General Hospital (RSUD Pasar Rebo), East Jakarta. Individually, patients who perceived healthcare services to be fair and those who received clear, complete, and consistent information reported higher levels of satisfaction with outpatient services. Among the two predictors, information clarity exhibited a stronger influence, highlighting the importance of effective communication throughout the healthcare process.

Simultaneously, perceived service justice and information clarity significantly explained variations in outpatient satisfaction, confirming that patients evaluate healthcare services not only based on clinical outcomes but also on their experiences during administrative procedures, interpersonal interactions, and communication with healthcare personnel. Nevertheless, the moderate explanatory power of the regression model indicates that patient satisfaction is a multidimensional construct that is also influenced by other factors beyond the variables examined in this study.

The findings underscore the importance of integrating equitable service delivery with effective communication as complementary components of patient-centered healthcare. For hospital management, improving outpatient satisfaction requires not only maintaining high standards of clinical care but also strengthening procedural fairness, simplifying administrative processes, ensuring consistency in information delivery across service units, and enhancing communication between healthcare professionals and patients. Future research is recommended to incorporate additional determinants of

patient satisfaction, such as waiting time, service quality dimensions, healthcare staff responsiveness, hospital facilities, treatment outcomes, and digital health services, to develop a more comprehensive understanding of patients' experiences in public healthcare settings.

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