Implementation of 5P Marketing Strategy to Improve Non-BPJS Patient Loyalty at Surya Husada Primary Clinic, Indonesia

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Abstract:

Patient loyalty is a critical determinant of sustainability for private healthcare providers, particularly in developing countries where competition with public insurance systems is intense. This study aimed to analyze the influence of the 5P marketing mix strategy product, price, place, promotion, and people—on the loyalty of non-National Health Insurance (non-BPJS) patients at Klinik Pratama Surva Husada Tulungagung, Indonesia, A quantitative explanatory design was employed with a sample of 110 non-BPJS patients selected through purposive sampling. Data were collected using a validated questionnaire and analyzed through multiple regression. Classical assumption tests confirmed normality, absence of multicollinearity, homoscedasticity, and autocorrelation, validating the regression model. The results indicated that product ($\beta = 0.601$, p < 0.001), promotion ($\beta =$ 0.080, p < 0.001), and people (β = 0.308, p < 0.001) had significant positive effects on patient loyalty. In contrast, price ($\beta = -0.070$, p < 0.001) and place ($\beta = -0.079$, p < 0.001) showed significant adverse effects. The simultaneous effect test revealed that all five variables significantly influenced loyalty (F = 2026.128, p < 0.001). The coefficient of determination ($R^2 = 0.990$; Adjusted $R^2 = 0.989$) demonstrated that the 5P marketing mix could explain 99% of the variance in patient lovalty. These findings underscore the critical role of service quality, human resources, and effective promotion in strengthening patient loyalty, while pricing and accessibility require careful strategic adjustments. The study contributes to healthcare marketing literature by validating the 5P framework in the Indonesian primary care context. It provides actionable insights for private clinics seeking to enhance competitiveness in a dual healthcare system.

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INTRODUCTION

The healthcare industry is undergoing a rapid transformation, driven by the increasing complexity of patient needs, demographic changes, and growing expectations for high-quality services (Al-Assaf et al., 2024). In this context, patient loyalty has emerged as a critical determinant of the sustainability and competitiveness of healthcare providers. Loyalty reflects patient satisfaction and indicates trust, perceived value, and long-term commitment to a healthcare institution (Trisno & Berlianto, 2023). For primary care clinics, especially in developing countries such as Indonesia, maintaining patient loyalty has become a strategic priority, as healthcare facilities face intense competition from public and private sectors (Belda & Irawan, 2024; Della et al., 2022).

Patient loyalty in healthcare is particularly significant due to the unique nature of healthcare services, which are characterized by intangibility, heterogeneity, and high involvement of trust

between patients and providers (Dayan et al., 2022). Unlike in other service industries, patients cannot easily evaluate the technical quality of healthcare services. Instead, they rely heavily on perceptions of service delivery, interpersonal communication, and overall experiences (Chen et al., 2021). Therefore, understanding the factors that drive loyalty in healthcare is crucial for institutions seeking to achieve long-term viability while enhancing the quality of care delivered to their communities.

One framework that has gained prominence in service management and marketing is the marketing mix strategy, popularly known as the 4Ps, encompassing product, price, place, and promotion (Babics & Jermolaieva, 2024). In the healthcare context, these dimensions have been adapted to reflect the unique service characteristics of the sector. The product refers to the quality of healthcare services and clinical outcomes provided to patients. Price is associated with affordability and perceived fairness for healthcare costs. Accessibility and convenience relate to the placement of the healthcare facility. Promotion involves communication strategies to inform and persuade patients about available services, while people emphasize the role of human resources, including physicians, nurses, and administrative staff, in shaping the patient experience (Li B., 2025; Fauzi et al., 2022). Collectively, these dimensions form the foundation of strategic efforts aimed at enhancing patient satisfaction and loyalty.

Global evidence underscores the significance of marketing mix strategies in shaping patient behaviors. For example, research conducted in South Korea has demonstrated that digital promotion and personalized communication have a significant influence on patient loyalty in private hospitals (Lee & Kim, 2021). Similarly, studies in Europe and North America have highlighted the central role of service quality (product) and interpersonal interactions (people) in fostering trust and commitment among healthcare consumers (Shie et al., 2022). These findings suggest that healthcare systems vary across countries; however, the 5P marketing mix consistently has a strong influence on patient perceptions and decisions.

In the Indonesian context, healthcare institutions operate within a dual system consisting of the publicly funded National Health Insurance program (BPJS) and private healthcare services (Susanti et al., 2022). The introduction of BPJS has expanded access to healthcare. However, it has also intensified competition among private clinics for patients who opt for out-of-pocket payments or non-BPJS services. Non-BPJS patients are particularly important for private clinics because they often represent a segment that values higher-quality care, shorter waiting times, and more personalized services (Wahyu, 2024). Consequently, understanding and addressing the loyalty of non-BPJS patients is essential for the financial sustainability of private clinics.

Surya Husada's private clinics in Tulungagung serve as a relevant case study for exploring these dynamics. As a primary care facility operating in a semi-urban area, the clinic serves a diverse patient population with varied sociodemographic characteristics. Preliminary observations indicate that non-BPJS patients constitute a significant proportion of the clinic's clientele. However, their loyalty cannot be taken for granted, given the region's availability of alternative healthcare providers. Factors such as service quality, pricing policies, clinic accessibility, promotional activities, and the interpersonal skills of healthcare personnel are likely to influence whether patients remain loyal to the clinic or switch to competitors.

Demographic factors also play an important role in shaping loyalty. For instance, this study found that female patients were more dominant among respondents, consistent with international evidence suggesting that women are generally more proactive in seeking healthcare services (Abou-Abbas et al., 2024; Afandi & Putri, 2023). Age distribution showed a predominance of older patients, many of whom face chronic or degenerative conditions, which increases their reliance on healthcare facilities (Ghadei et al., 2025). Education levels among respondents indicated that most patients had

completed secondary or tertiary education, implying a patient base capable of critically evaluating service quality and demanding professional care (Li et al., 2024). These demographic insights provide a valuable foundation for understanding how various aspects of the marketing mix may impact patient loyalty in the studied context.

From a theoretical perspective, this study draws upon the Health Belief Model (Odunsi & Farris, 2023), which posits that individuals' health-related behaviors are influenced by their perceptions of susceptibility, severity, benefits, and barriers. Applied to healthcare marketing, this model suggests that patients' evaluations of service quality, costs, accessibility, promotional information, and interpersonal experiences shape their perceived benefits and barriers, thereby influencing loyalty. Integrating this theoretical lens with marketing mix strategies provides a comprehensive framework for analyzing patient behavior in the healthcare sector.

Methodologically, the current study employs a quantitative approach using regression analysis to examine the impact of the 5P marketing mix on patient loyalty. This approach enables the identification of both individual and combined effects of the independent variables, offering nuanced insights into the relative importance of each dimension. For instance, preliminary results indicate that product, promotion, and people have a positive impact on patient loyalty, while price and place exhibit negative associations. These findings align with prior studies suggesting that service quality and interpersonal factors are more influential in healthcare than traditional pricing or location considerations (Carter et al., 2023; Putri et. al., 2024).

The significance of this study lies in its contribution to theory and practice. Theoretically, it enriches the literature on healthcare marketing by empirically validating the applicability of the 5P framework in the context of Indonesian private clinics. While much of the existing research has focused on hospitals or developed countries, fewer studies have addressed primary care clinics in developing settings. This research, therefore, fills an important gap by demonstrating how marketing strategies can be tailored to local patient populations while remaining aligned with global best practices.

Practically, the findings provide actionable insights for healthcare managers and policymakers. For private clinics such as Klinik Pratama Surya Husada, the evidence suggests that investing in service quality, human resources, and effective marketing will likely yield substantial returns in terms of patient loyalty. Conversely, strategies that rely heavily on pricing competition or physical accessibility may be less effective in retaining patients, particularly those who prioritize professionalism and trust in healthcare relationships. These insights can inform the design of marketing and operational strategies to strengthen competitiveness in an increasingly dynamic healthcare landscape.

Moreover, the implications extend beyond individual clinics to the broader healthcare system. As Indonesia continues to implement and expand its national health insurance program, private clinics must adapt to a changing environment where intrinsic service attributes and systemic factors, such as insurance coverage and government policies, influence patient loyalty. By focusing on the drivers of loyalty among non-BPJS patients, this study provides a lens through which private healthcare providers can develop sustainable strategies that complement public healthcare initiatives while addressing unmet needs in the population.

In summary, the introduction establishes the importance of patient loyalty in healthcare, highlights the relevance of the 5P marketing mix as a conceptual framework, situates the study within both global and Indonesian contexts, and outlines its theoretical and practical contributions. Focusing on non-BPJS patients at Klinik Pratama Surya Husada Tulungagung, the study addresses a timely and significant issue with implications for research and practice. The subsequent sections

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present the methodology, results, and discussion in detail, building upon the foundation laid by this introduction.

METHOD

This study employed a quantitative research design using an explanatory survey method to examine the relationship between the marketing mix strategy, known as the 5P (Product, Price, Place, Promotion, and People), and patient loyalty among non-National Health Insurance (non-BPJS) patients at Klinik Pratama Surya Husada Tulungagung. A quantitative explanatory approach was considered appropriate because it allows for the systematic measurement of variables, hypothesis testing, and generalization of findings within the defined population. Regression analysis was used as the primary analytical tool to evaluate both the partial and simultaneous effects of the independent variables on patient loyalty, thus providing robust evidence of causal relationships.

The population in this study comprised non-BPJS patients who accessed healthcare services at Klinik Pratama Surya Husada Tulungagung during the study period. One hundred ten respondents were recruited as the sample, with eligibility determined through purposive sampling. The inclusion criteria required that participants were registered clinic patients, had utilized outpatient services at least twice, and were 18 years or older. This ensured that respondents possessed sufficient experience to evaluate the quality of services. Patients enrolled in the BPJS national health insurance program were excluded from this research to maintain focus on consumer behavior associated with private healthcare payment systems. The sampling strategy was designed to achieve representativeness while accommodating practical constraints of time and resources.

Data were collected using a structured questionnaire based on established theoretical frameworks of the marketing mix and patient loyalty. The questionnaire consisted of two main sections. The first section addressed sociodemographic characteristics, including gender, age, and education level, which were anticipated to provide context for understanding consumer perceptions and loyalty variations. The second section contained items measuring perceptions of the 5P dimensions and patient loyalty. Each construct was operationalized through multiple indicators adapted from previously validated studies, taking into account the local healthcare context. Respondents were asked to provide answers on a five-point Likert scale, ranging from "strongly disagree" (1) to "strongly agree" (5), facilitating the quantitative measurement of attitudes and perceptions.

The development of the instrument underwent a rigorous validation process to ensure both reliability and validity. Content validity was established through expert judgment involving three academic professionals in health service management and two practitioners with extensive experience in healthcare marketing. Revisions were made to improve clarity, cultural appropriateness, and relevance to the local context. Construct validity was further tested using exploratory factor analysis (EFA), which confirmed that the items loaded significantly on their intended factors, with factor loadings exceeding 0.5. Reliability was examined using Cronbach's alpha, with all constructs achieving values above the recommended threshold of 0.70, indicating satisfactory internal consistency.

This study received ethical approval from Strada Indonesia University. The research was conducted in accordance with the ethical guidelines and standards set by the institution. Ethical approval was obtained from the relevant institutional review board before data collection to ensure compliance with research ethics in healthcare studies. All participants provided informed consent after being clearly informed about the study's objectives, procedures, and confidentiality assurances. Participation was voluntary, and respondents retained the right to withdraw at any stage without

consequences. To maintain anonymity, no identifying personal information was recorded, and responses were analyzed only in aggregate.

RESULT

The characteristics of the respondents in this study include gender, age, and educational background, providing a comprehensive overview of the profile of non-BPJS patients at Surya Husada Primary Clinic, Tulungagung. Regarding gender distribution, out of 110 respondents, 65 (59.09%) were female and 45 (40.91%) were male, indicating a predominance of female participants. Regarding age, most respondents were aged 55 years or older (48.18%), followed by those aged 41–55 years (29.09%), 25–40 years (15.45%), and under 25 years (7.27%). Regarding educational background, most respondents had completed senior high school (69.09%), while 30.91% held a diploma or bachelor's degree. More details can be seen in Table 1.

Table 1. Distribution of Respondents' Characteristics (n = 110)

Characteristics	Category	Frequency (n=110)	Percentage (%)
Gender	Female	65	59.09
	Male	45	40.91
Age (years)	< 25	8	7.27
. ,	25–40	17	15.45
	41–55	32	29.09
	> 55	53	48.18
Education Level	Senior High School	76	69.09
	Diploma/Bachelor's Degree	34	30.91

The Kolmogorov-Smirnov test produced an Asymp. Sig. value of 0.736 (>0.05), indicating that the data were normally distributed, which was further confirmed by the P-Plot graph showing that the data points followed the diagonal line, fulfilling the normality assumption. The multicollinearity test revealed that all independent variables had tolerance values greater than 0.1 and VIF values less than 10, suggesting the absence of multicollinearity among the predictors and confirming that all five independent variables could be analyzed simultaneously. The heteroscedasticity test showed that the scatterplot points were randomly distributed above and below the Y-axis, indicating no heteroscedasticity and confirming that the regression model satisfied the homoscedasticity assumption, with constant residual variance across observations. Furthermore, the Durbin-Watson statistic 1.751 fell within the acceptable range of 1.5–2.5, demonstrating that the model was free from autocorrelation, meaning that residuals across observations were not correlated. These results confirm that the regression model is valid and appropriate for predicting patient loyalty based on product, price, place, promotion, and people variables. More details can be seen in Tables 2, 3, and 4, as well as in Pictures 1 and 2.

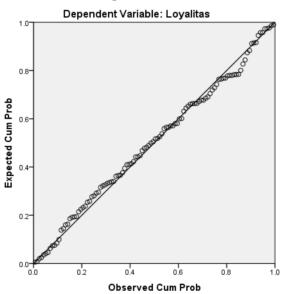
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Table 2. Normality Test with Kolmogorov-Smirnov Test

		Unstandardized Residual
N		110
Normal Parameters ^{a,b}	Mean	0E-7
	Std. Deviation	0.87666914
	Absolute	0.065
Most Extreme Differences	Positive	0.065
	Negative	-0.039
Kolmogorov-Smirnov Z		0.685
Asymp. Sig. (2-tailed)		0.736

a. Test distribution is Normal

Normal P-P Plot of Regression Standardized Residual



Picture 1. P-plot Graphic

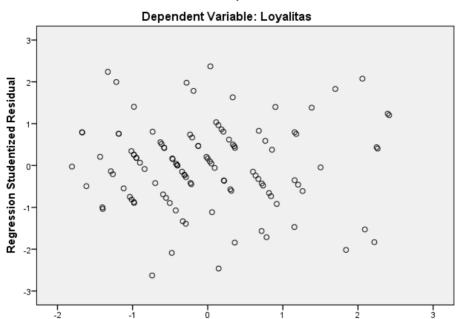
Table 3. Multicollinearity Test

		Coefficients ^a		
Model		Collinearity Statistics		
		Tolerance	VIF	
1	(Constant)			
	Product	0.113	8.818	
	Price	0.246	4.064	
	Place	0.158	6.323	
	Promotion	0.216	4.622	
	People	0.274	3.649	

a. Dependent Variable: Loyalty

b. Calculated from data

Scatterplot



Picture 2. Scatterplot Graphic

Regression Standardized Predicted Value

Table 4. Autocorrelation Test

Model Summary						
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson	
1	0.995ª	0.990	0.989	0.196	1.751	

a. Predictors: (Constant), People, Price, Place, Promotion, Product

Based on the regression analysis (Table 5), the multiple linear regression equation was obtained as follows: Y = $7.161 + 0.601X_1 - 0.070X_2 + 0.080X_3 - 0.079X_4 + 0.308X_5$. This equation indicates that patient loyalty (Y) is influenced differently by each element of the 5P marketing mix. The product variable (X₁) had a coefficient of 0.601 and was statistically significant (p<0.001), suggesting that improvements in the quality of healthcare services directly increase patient loyalty. Conversely, the price variable (X₂) showed a negative coefficient of -0.070 and was also significant (p<0.001), indicating that higher price perceptions reduce patient loyalty. The promotion variable (X₃) yielded a positive coefficient of 0.080 with statistical significance (p<0.001), demonstrating that well-targeted promotional strategies enhance patient loyalty. Meanwhile, the place variable (X₄) yielded a negative coefficient of -0.079 with significance (p < 0.001), suggesting that suboptimal perceptions of service location and accessibility may reduce loyalty. Lastly, the people variable (X₅) yielded a significant positive coefficient of 0.308 (p < 0.001), underscoring the critical role of human resources.

b. Dependent Variable: Loyalty

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Table 5. Multiple Linear Regression Analysis Test Results

			Coefficients ^a			
	Model	Unstandardiz	Unstandardized Coefficients		t	Sig.
		В	Std. Error	Beta		
•	(Constant)	7.161	0.442	_	16.201	0.000
	Product	0.601	0.019	0.770	31.022	0.000
1	Price	-0.070	0.014	-0.099	-5.105	0.000
	Promotion	0.080	0.018	0.104	4.319	0.000
	Place	-0.079	0.017	-0.097	-4.645	0.000
	People	0.308	0.016	0.334	18.809	0.000

a. Dependent Variable: Loyalty

Furthermore, the simultaneous test (F-test) presented in Table 6 showed an F-value of 2026.128 with a significance of 0.000 (p<0.05), confirming that the variables product, price, promotion, place, and people collectively exert a significant influence on non-BPJS patient loyalty. In other words, the combined implementation of the 5P marketing strategy is highly effective in enhancing patient loyalty.

Table 6. Simultaneous Test Results (F Test)

			ANOVAa			
	Model	Sum of Squares	df	Mean Square	F	Sig.
1	Regression	388.882	5	77.776	2026.128	0.000 ^b
	Residual	3.992	104	0.038		
	Total	392.874	109			

a. Dependent Variable: Loyalty

In addition, the coefficient of determination (R2) test presented in Table 7 revealed an R2 value of 0.990 and an adjusted R² of 0.989. This means that the independent variables studied can explain 99% of the variance in patient loyalty. In comparison, the remaining 1% is influenced by other factors not included in the model, such as service technology, prior patient experiences, or the clinic's reputation. The exceptionally high R2 value underscores the strong predictive power of the regression model in explaining patient loyalty at Surya Husada Primary Clinic, Tulungagung.

Table 7. Results of the Determination Coefficient Test

Model Summary ^b						
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson	
1	0.995ª	0.990	0.989	0.196	1.751	
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a. Predictors: (Constant), People, Price, Place, Promotion, Product

DISCUSSION

The present study investigated the influence of the 5P marketing mix—product, price, promotion, place, and people—on the loyalty of non-BPJS patients at Surya Husada Primary Clinic in Tulungagung. The findings confirm that all five variables significantly affect patient loyalty, with varying degrees of influence and direction. The regression model demonstrated extreme predictive power, with an adjusted R² value of 0.989, indicating that nearly all variations in patient loyalty can

b. Predictors: (Constant), People, Price, Place, Promotion, Product

b. Dependent Variable: Loyalty

be explained by the 5P marketing dimensions. This discussion will elaborate on these findings in relation to existing literature, theoretical frameworks, and implications for healthcare management.

Product as the Strongest Predictor of Loyalty

Among the five marketing mix dimensions, product emerged as the most influential predictor of patient loyalty, with a positive and significant coefficient of 0.601. This result highlights the central role of service quality in healthcare marketing. In healthcare services, a product refers to the tangible medical treatments and the comprehensiveness, reliability, and perceived value of the services.

These findings align with those of Ali et al. (2024), who emphasize that high-quality healthcare services are the cornerstone of patient satisfaction and retention. Similarly, Islam et al. (2021) have argued that service quality dimensions, such as responsiveness, assurance, and reliability, are key determinants of loyalty. In developing countries, where patients often face limited healthcare options, product quality becomes even more critical in shaping loyalty.

The practical implication for Surya Husada Primary Clinic is that continuous improvement of clinical services, adoption of evidence-based practices, and investment in modern diagnostic and treatment technologies are essential. Enhancing the perceived value of the healthcare "product" may increase loyalty among existing patients and attract new ones through positive word-of-mouth recommendations.

Price and Its Negative Effect on Loyalty

Interestingly, price showed a significant but negative coefficient (-0.070), suggesting that perceptions of high or unfair pricing can undermine patient loyalty. This finding is consistent with Ansah (2021), who asserted that discrepancies between expected and perceived price fairness directly affect satisfaction and loyalty. In healthcare settings, patients are susceptible to pricing due to the high costs often associated with treatments and medications.

Although the magnitude of the effect is smaller than that of product or people, the negative influence of price highlights the importance of affordability and transparency. Patients who perceive healthcare services as overpriced may switch providers, particularly in an increasingly competitive market among private clinics. Wahyu (2024) also noted that in contexts where patients bear out-of-pocket expenses, as is the case for non-BPJS patients in Indonesia, price fairness becomes a central determinant of continued patronage.

For the clinic, strategic pricing policies should be considered, including offering package deals, discounts for regular check-ups, or transparent breakdowns of treatment costs. Clear communication about the value patients receives for the price they pay may help mitigate negative perceptions and enhance overall satisfaction.

Promotion and the Role of Communication

Promotion had a small but positive and significant effect (coefficient = 0.080), supporting the argument that well-designed promotional strategies can enhance patient loyalty. While the coefficient is lower compared to product and people, it nevertheless indicates that promotion supports patients' perceptions and decisions.

In modern healthcare, promotion goes beyond traditional advertising and increasingly involves digital communication channels. According to Zillul and Shoeb (2025), digital marketing, including social media, search engine optimization, and online patient testimonials, has become vital in influencing patients' choices. The growing use of smartphones and internet access in Indonesia allows clinics to leverage digital platforms for targeted campaigns, educational content, and interactive patient engagement.

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For Surva Husada Primary Clinic, integrating promotional strategies that emphasize transparency, patient education, and community health campaigns could be highly effective. Educational promotions, such as webinars on preventive health, enhance visibility and establish the clinic as a trusted authority in community healthcare.

Place and Accessibility Challenges

The place variable, which refers to the accessibility and convenience of healthcare services, exhibited a negative coefficient (-0.079). Patients' dissatisfaction with the location, facility layout, or accessibility of services may reduce their loyalty. Accessibility has long been recognized as a fundamental determinant of healthcare utilization, particularly in primary care settings (Hashemi et al., 2022).

This finding is particularly relevant for older patients, who represented most respondents in this study. As patients above 55 years accounted for nearly half of the sample, their ability to access healthcare services easily becomes a critical factor in determining loyalty. Physical barriers such as distance, transportation, and clinic infrastructure may significantly impact service perceptions for this demographic.

Addressing accessibility issues may involve both infrastructural and operational solutions. On the infrastructural side, ensuring adequate parking, clear signage, and wheelchair-friendly facilities is vital. Operationally, offering flexible appointment scheduling, home visits, or telemedicine services could mitigate challenges associated with location and convenience.

People as a Determinant of Loyalty

The people dimension, with a coefficient of 0.308, also strongly impacted patient loyalty. In healthcare, the role of human resources is crucial. Patient interactions with doctors, nurses, and administrative staff often shape overall perceptions of service quality. Utami & Besral (2025) argue that interpersonal aspects of service delivery, such as empathy, responsiveness, and professionalism, are central to patient satisfaction and loyalty.

This finding aligns with prior research emphasizing that healthcare is a people-driven service industry. The competence, friendliness, and communication skills of healthcare providers significantly influence whether patients feel valued and respected. In the Indonesian context, cultural expectations regarding warmth and empathy further elevate the importance of human interaction.

For the clinic, investing in staff training, implementing patient-centered care models, and cultivating a culture of empathy can significantly enhance patient loyalty. Recognition and motivation programs for staff could also ensure sustained commitment to high-quality patient interactions.

Simultaneous Effects of the 5P Marketing Mix

The results of the F-test demonstrated that the five dimensions of the 5P marketing mix simultaneously and significantly influenced patient loyalty, with an F-value of 2026.128 (p<0.05). This finding confirms that loyalty is not shaped by a single factor but by the interplay of multiple service elements.

The strength of the simultaneous effect highlights the importance of integrated marketing strategies in healthcare. A clinic may not substantially improve patient loyalty by focusing exclusively on one dimension (e.g., product quality) while neglecting others (e.g., accessibility or staff performance). Instead, a holistic approach that balances product quality, price fairness, effective promotion, accessibility, and competent personnel is necessary.

This outcome supports Lasi's (2021) argument that a customer-centered marketing mix must be implemented as a system, where each element reinforces the others. In healthcare, where trust and continuity of care are critical, such integration is particularly essential.

Theoretical and Practical Implications

Theoretically, this study contributes to the body of knowledge by empirically validating the applicability of the 5P marketing mix in the healthcare sector, specifically in the Indonesian context. While previous studies have primarily focused on retail or service industries, this study demonstrates that the 5P framework also explains patient loyalty in healthcare settings.

Practically, the results provide actionable insights for healthcare managers. First, service quality (or product quality) should remain the cornerstone of marketing strategies. Second, pricing must be managed carefully to strike a balance between affordability and sustainability. Third, promotional activities should embrace digital platforms to enhance reach and engagement. Fourth, accessibility (in terms of location) must be improved, particularly for elderly patients. Finally, the human element (people) must be prioritized through staff training and patient-centered care initiatives.

CONCLUSION

The study underscores the multifaceted nature of patient loyalty in healthcare. While product quality remains the most influential factor, price fairness, promotional effectiveness, accessibility, and the competence of healthcare personnel all play critical roles. The exceptionally high explanatory power of the regression model confirms the robustness of the 5P framework in predicting patient loyalty. For healthcare providers like Surya Husada Primary Clinic, adopting a balanced and integrated marketing strategy based on the 5P mix is crucial for sustaining patient trust and loyalty in an increasingly competitive healthcare environment.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest regarding the publication of this research. All procedures were conducted independently, and no financial, personal, or professional relationships influenced the study design, data collection, analysis, or interpretation of the results.

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