

The Relationship between Pharmaceutical Services and BPJS Patient Satisfaction at the Wijaya Kusuma Clinic, Tangerang

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Abstract:

The purpose of this research is to ascertain whether or not the Wijaya Kusuma Clinic's pharmaceutical services correlate with the level of pleasure its BPJS patients report. The data for this study was collected using a quantitative survey method. Outpatients who participated in BPJS Kesehatan at the Wijaya Kusuma Clinic in Tangerang were asked to fill out questionnaires using Google Form. All patients receiving BPJS as an outpatient made up the study population. We used a combination of the non-probability sampling technique and the purposive selection type to select 328 participants for the study. We processed the data using Ms. Excel 2010 and IBM SPSS Statistics version 29. The study's results revealed that the average age of BPJS patients treated in January 2024 was 26-55 years, with a majority of women at 62.5% and male patients at 37.5%. The patient satisfaction survey revealed that 2.1% of respondents were less satisfied, 43.0% were quite satisfied, 35.4% were satisfied, and 19.5% were very satisfied. Therefore, we can conclude that a significant proportion of patient satisfaction respondents fell into the "quite satisfied" category. There is a significant association between the pharmaceutical service variable and the patient satisfaction variable, as indicated by the significance value of $0.001 < 0.05$, as determined by the Spearman rank test. With a level of 0.877, it is quite powerful. The satisfaction of BPJS patients at the clinic is positively correlated with pharmaceutical treatments.

Keywords: Pharmaceutical Services, BPJS Patient Satisfaction, Spearman Rank Test

Introduction

Direct patient care is the focus of clinical pharmacy services. In order to promote patient safety and enhance their quality of life, this service primarily aims to maximize the efficacy of treatment while decreasing the likelihood of pharmacological adverse effects (Permenkes RI, 2014). With this approach, clinical pharmacy services play an important role in ensuring that the drug therapy provided is optimal and safe for patients. Clinical pharmacy services represent the final stage in the interaction between patients and pharmacists within the pharmaceutical service cycle. Therefore, patients typically evaluate the pharmaceutical service process based on their experiences during service delivery. This patient assessment is important because it reflects the quality of the service received and patient satisfaction with it. Continuous evaluation of service quality is necessary to support the improvement of the pharmaceutical service process. A common method for evaluating service quality is through a patient satisfaction survey. This survey not only provides an

overview of the patient's experience but can also be a basis for improving and optimizing pharmaceutical services in the future.

Efforts to enhance the quality of health services must prioritize patient satisfaction. Everyone working in the health care industry must understand that their patients come first. When patients are happy with the care they receive, they are more likely to use the services for an extended period of time, come back for more, and even suggest them to others. This shows that patient satisfaction not only affects the quality of service but also patient loyalty to health facilities. We encourage pharmacists and pharmaceutical technicians to continuously enhance their knowledge, skills, and behavior to meet the demands and expectations of patients. This step is important so that they can interact directly with patients effectively. In line with this, the philosophy of pharmaceutical services has also shifted from a drug-oriented paradigm to a patient-oriented one, with a focus on patient safety. This change emphasizes the importance of patient-centered services as an effort to improve therapy outcomes while ensuring patient safety. One form of pharmaceutical service that has enormous potential is improving the quality of health services for BPJS patients, such as at the Wijaya Kusuma Clinic in Tangerang. We chose BPJS patients as the study's focus because they receive the most care at the clinic. Additionally, the government covers BPJS patients through the BPJS Kesehatan program, ensuring that the quality of services they receive is on par with that of other general patients. The success of the health services at the facility can be measured by this emphasis on quality equality.

Concerning the degree to which BPJS patients are satisfied with the quality of health services they receive as outpatients at the Duren Sawit Regional Special Hospital in Jakarta, a study by Aminilia et al. (2018) found some intriguing results. Participants in this study were asked to rate the quality of care they got as outpatients at Jakarta's Duren Sawit Regional Special Hospital. The survey found that the majority of BPJS patients who visited the hospital were unhappy with the care they received. Of the total 92 patients who were respondents, 54 patients, or 54.0%, expressed dissatisfaction with the health services they received. This finding paints a significant picture of BPJS patient satisfaction with hospital health services, providing valuable insights for enhancing service quality. However, the study's results reveal a group of satisfied patients, suggesting a variation in the hospital's assessment of service quality.

The study by Daulay M.A. (2015), called "The Level of Satisfaction of Outpatients of BPJS Kesehatan Participants Regarding Pharmaceutical Services in Two Health Centers in Medan City in August 2015," found that patients were mostly satisfied with the pharmaceutical services they received. The survey found that a significant majority of patients, up to 84%, were unhappy with the service they received from the pharmacists at the two health centers. Patient discontent was caused by a combination of causes, one of which was the lack of pharmacists in the two health centers that were part of the study. Because of this issue, patients were less satisfied with the pharmaceutical services they received because the quality of such services fell short of their expectations. The significance of both the quantity and quality of pharmacists in delivering sufficient services is shown by these findings. Greater focus on pharmaceutical human resource management is required to enhance the quality of services provided by healthcare facilities in light of the fact that the scarcity of pharmacists can have an immediate effect on patient satisfaction.

Analysis of Pharmaceutical Service Users' Satisfaction Levels In their study, Kristanti et al. (2015) found that patient satisfaction with pharmaceutical services is influenced by several factors. The study was conducted at community health centers in Garut Regency and used the Servqual model. In order to increase patient happiness, this survey identifies specific service areas that need improvement. We need to make the waiting room more comfortable, the pharmacist more friendly, and the staff more responsive to help patients

who have trouble understanding the service procedures, according to the study's results. These factors are considered to have a significant impact on the patient's experience while receiving pharmaceutical services. This study emphasizes the importance of improving the quality of service in these aspects so that pharmaceutical services at community health centers can better meet patient expectations. We anticipate this effort to enhance overall patient satisfaction, leading to more optimal health services at community health centers.

Based on a preliminary study at the Wijaya Kusuma Clinic, BPJS patients conveyed several complaints related to pharmaceutical services. These complaints include the perceived long service time, irregular drug delivery orders, limited drug availability, insufficient number of given drugs, and limited-service operating hours. These issues hold significant importance in our efforts to enhance the quality of pharmaceutical services. We conducted a measurement of BPJS patient satisfaction with pharmaceutical services to assess the quality of services offered at the Wijaya Kusuma Tangerang Clinic. This aims to understand the extent to which drug services at the clinic meet patient expectations. Patient satisfaction serves as the primary metric for evaluating the effectiveness and efficiency of pharmaceutical services provided at the clinic. The study's GAP analysis results revealed discrepancies between patient expectations and their perceptions of the services they received. We found positive gaps in the tangible, reliability, assurance, and empathy dimensions, suggesting that the clinic's services had either met or exceeded patient expectations in these areas. However, a negative GAP surfaced in the responsiveness dimension, suggesting that the officers' responsiveness still fell short of patient expectations, necessitating further improvements to enhance overall patient satisfaction.

Previous research is an important reference in compiling research so that the author can enrich the theory used to study the topic to be studied. In this study, the author references multiple studies to enhance the study material. Li et al. (2015) conducted a relevant study that asserts the importance of patient perceptions of service quality in meeting their needs. This study highlights the importance of understanding how patients assess the services they receive. In addition, Lukas et al. (2016) conducted a study on the level of patient satisfaction with pharmaceutical services in community health centers. The results of this study indicate that there are several factors that influence the level of patient satisfaction, including responsiveness, assurance, and empathy. These factors are important elements in providing quality services to patients. These studies provide theoretical and empirical foundations that support this study. The author can identify aspects of pharmaceutical services that require improvement and understand the relationship between patient perceptions, service quality, and their level of satisfaction by referring to the results of previous studies. This is an important first step in efforts to improve the quality of health services, especially pharmaceutical services.

Literatur Review

Clinic

Clinics are vital to the improvement of both individual and community health because they offer basic and specialty medical services. Clinics address the health needs of the population by providing promotive, preventative, curative, and rehabilitative services. The Minister of Health's Regulation (Permenkes, 2014) divides clinics into First Clinics and Main Clinics. First Clinics, owned by either individuals or business entities, concentrate on providing basic medical services by general practitioners. Meanwhile, only business entities such as CV or PT own the main clinics, which provide more complex specialist services. In accordance with the Regulation of the Minister of Health Number 24 of 2022, clinics not only provide health services but also have a number of other obligations. Clinics are required to provide safe and quality services, prioritize patient interests, and comply with applicable professional standards and operational

procedures. Clinics are also required to provide emergency services without asking for advance payments, emphasizing their commitment to patient welfare. In addition, clinics must support government programs in the health sector, implement efficient quality and cost control systems, and have clear internal regulations. Other obligations include maintaining accurate medical records, implementing an effective referral system, and respecting patient rights. Clinics must also obtain consent for medical procedures from patients and reject requests that conflict with professional, ethical, and legal standards. By fulfilling these obligations, clinics not only maintain public trust but also ensure optimal quality of health services in accordance with applicable regulations.

Pharmaceutical Services

Direct pharmaceutical services pertaining to patients and pharmaceutical preparations are governed by Ministerial Regulation No. 35 of 2014, with the objective of attaining certain outcomes and improving patients' quality of life. From its humble beginnings as a model for drug processing, pharmaceutical services have expanded to encompass a wide array of offerings, such as drug services and clinical pharmacy, with the common goal of bettering patients' lives. In order to provide high-quality pharmaceutical care, these patient-centered services necessitate that pharmacist expand their knowledge and skills. Since patient satisfaction is one metric that may be used to evaluate pharmaceutical services, this will have an effect on how satisfied patients are with such treatments (Kusnaedi, 2022). Producing high-quality pharmaceutical preparations is just one aspect of the pharmaceutical industry. Other facets include medication management, prescription drug manufacturing, storage, and distribution, as well as the providing of drug information. In addition to modern pharmaceuticals, traditional remedies, and pharmaceutical ingredients are all part of the pharmaceutical workforce. The pharmaceutical industry is governed by Regulation No. 73 of 2016, which is issued by the Ministry of Health. The services of pharmacists are in great demand in the pharmaceutical industry. For pharmacists to effectively address patient concerns, they must continuously expand their knowledge and expertise. It is undeniable that medication or treatment errors still occur during pharmaceutical work. Therefore, to minimize the occurrence of medication errors, it is crucial to adhere to pharmaceutical service standards (Ministry of Health, 2014).

Standards of Pharmaceutical Services in Clinics

Clinic pharmaceutical service standards are essential because they provide as a benchmark for pharmaceutical staff to meet. Improving the quality of pharmaceutical services, safeguarding pharmaceutical personnel and other health workers from legal uncertainty, and protecting patients and the community from irrational drug use are the key objectives of this standard. Pharmaceutical preparations, medical devices, and disposable medical materials (BMHP) management and clinical pharmacy services are the norm in pharmaceutical services provided by clinics. Choosing, organizing, acquiring, storing, destroying, withdrawing, controlling, and administering are all parts of this management that adhere to relevant regulations. Assessment and services related to prescriptions, drug information, counseling, therapy monitoring, medication side effect monitoring (MESO), and evaluation of drug use are the primary components of clinical pharmacy services provided in clinics. To make sure the patient is taking the correct next step in their treatment, prescription assessment and services include tasks including receiving, checking availability, and reviewing prescriptions. The goal of drug information services is to supply healthcare providers, patients, and pharmacists with reliable, impartial, and current data on medications. Meanwhile, drug counseling is communication between pharmacists or health workers and patients regarding the proper and safe use of drugs.

Clinical pharmacy services also include medication treatment monitoring (PTO) and medication side effect monitoring (MESO). With the goal of maximizing therapy efficacy while decreasing the risk of adverse

drug reactions, PTO guarantees that patients receive safe, effective, and logical medication therapy. MESO's primary objective is to track and assess the potential adverse drug reactions in patients, particularly those taking medications at recommended dosages. We carry out Evaluation of Drug Use (EPO) qualitatively and quantitatively to ensure that the given drugs align with the patient's needs. In addition, home pharmacy care provides services to patients, especially the elderly or those who use drugs in the long term, such as for cardiovascular disease, diabetes, TB, asthma, and other chronic diseases. This service aims to ensure that patients can use drugs correctly and understand the treatment given.

Patient Satisfaction

Satisfaction is an expression of feelings, both sad and happy, by comparing the results thought or expected with the results or reality received. Handayani (2016) defines patient satisfaction as the level of feelings a patient experiences after comparing the performance of health services they receive with their feelings. Dewi et al.'s (2020) research concluded that patients experience satisfaction when the health services they receive meet or surpass their expectations. A health care facility values patient satisfaction as it provides valuable data to enhance their patient services. Patients who feel satisfied with the services provided can take repeated actions, such as repeated use of services in the future, and patient satisfaction is closely related to the quality of services provided (Fitriani, 2014).

Customer Satisfaction Aspects

According to Lissa (2016), the Servqual method has five dimensions used to evaluate the quality of customer service. In the first dimension, known as tangibles, customers can observe physical aspects such as the competence of health workers, the condition of service facilities, and the comfort and cleanliness of the building. This dimension also includes the neat appearance of officers and the availability of adequate facilities in the service room. Thus, the physical quality of facilities that support health services is an important factor influencing patient satisfaction (Yuliani et al., 2020). The second dimension, reliability, focuses on the ability of officers to provide services accurately and on time. This includes the knowledge, skills, and mastery of officers in carrying out tasks according to their fields, as well as their ability to utilize existing technology. Officers' accuracy and speed in providing pharmaceutical services demonstrate their reliability and can impact patient satisfaction levels (Kapoh, O. C., 2018). The third dimension of responsiveness describes the desire of officers to help patients and respond quickly to requests, complaints, and criticisms given by patients (Hariyanto et al., 2020).

The assurance dimension pertains to the officers' capacity to foster trust between patients and the services they provide. This encompasses the officers' politeness, knowledge, and skills, which foster a sense of trust in patients about the services they provide. This trust is highly dependent on the patient's assessment of the officer's ability to provide adequate service (Kurniawan, K. Y., 2018). Finally, the empathy dimension reflects the ability of officers to show concern for patient needs, understand their feelings, and establish positive relationships. The caring and friendly attitude of pharmacists toward all patients, regardless of social or cultural background, can make patients feel more comfortable and appreciated (Yuliani et al., 2020).

Patient Satisfaction Indicators

According to Tjiptono (2016), several attributes are used to assess customer satisfaction, one of which is the suitability of expectations. This refers to the extent to which the service received meets or exceeds the customer's expectations. The intention to revisit refers to the customer's readiness to return to using a service or product because the service provided is satisfactory. In addition, the willingness to recommend is an attribute that describes the customer's desire to recommend a product or service to others based on their positive experiences. These three attributes serve as crucial markers for evaluating the level of customer

satisfaction with the service they have received. Additionally, Kotler (Firdaus, 2015) proposed four methods for measuring customer satisfaction: the complaint and suggestion system, which allows customers to submit complaints or feedback about the service they received; customer satisfaction surveys, which gather data directly on customer satisfaction; ghost shopping, which involves direct observation of service quality using anonymous customers; and lost customer analysis, which examines the reasons customers abandon a product or service.

Researchers refer to the elements in Permenpan No. 14 of 2017 for the dimension of patient satisfaction. These elements encompass several crucial factors, including the technical and administrative service management requirements. Furthermore, systems, mechanisms, and procedures delineate the processes for executing services, including handling complaints. Completion time refers to the duration required to complete the service, while the product specification of the type of service is the result received by the customer in accordance with applicable provisions. Other factors include the competence of the implementer, namely the ability that must be possessed by the service officer, the behavior of the implementer, which includes the attitude of the officer in providing services, and complaint handling, which includes how to handle complaints and input from customers. Finally, facilities and infrastructure refer to the equipment and facilities that facilitate seamless service delivery.

Research Method

This study employed a survey design, utilizing a quantitative method to gather data through a questionnaire approach. The study population consisted of all outpatient BPJS participants at the Wijaya Kusuma Clinic in Tangerang. Based on patient visit data, the average number of outpatients at BPJS in January was 1,814 people. In order to make sure the study was genuine; the researcher chose to use a larger sample size of 328 persons. Outpatient BPJS patients who sought pharmacological treatment at Tangerang's Wijaya Kusuma Clinic made up the study's sample. The method of sampling relied on non-probability sampling, specifically purposive sampling, which chooses samples according to predetermined criteria. Individuals who had previously made advantage of the clinic's offerings were the primary focus of this research. This method is considered appropriate because it can represent the population studied.

This study's main instrument was a questionnaire, designed in the form of questions and statements, and distributed to respondents via Google Form. The use of questionnaires provides flexibility in data collection, with the results categorized as factual data. The distribution strategy and wording of the questionnaire have a significant impact on the accuracy of the data collected. Arranging the questionnaire questions systematically and in accordance with the research objectives improves data reliability (Pranatawijaya VH, et al., 2019). We processed the data using Ms. Excel 2010 and IBM SPSS Statistics version 29 software. We first entered the data collected through Google Form into Ms. Excel for initial organization, and then further analyzed it with SPSS. This process allows researchers to evaluate data systematically and produce findings that are relevant to the research objectives.

Results

The study included 328 respondents, of which 205 (62.5%) were female and 123 (37.5%) were male. This shows that the majority of respondents are female, with a percentage reaching 62.5%. Meanwhile, in terms of age distribution, most respondents, namely 110 people (33.5%), are in the age range of 15-25 years, followed by 86 people (26.2%) aged 46-55 years, 76 people (23.2%) aged 36-45 years, and 56 people (17.1%) aged 46-55 years. At the final level of education, the majority of respondents, comprising 147 individuals (44.8%), possess a high school education. Followed by 76 people (23.2%) who have junior high school education, 64 people (19.5%) have a bachelor's degree, and 41 people (12.5%) have junior high

school education. In terms of employment, the largest number of respondents came from the self-employed group, as many as 101 people (30.8%), followed by 96 people (29.3%) who work in the private sector, 70 people (21.3%) housewives, and 61 people (18.6%) students. Regarding the level of satisfaction of BPJS patients at the Wijaya Kusuma Clinic, the survey results showed that the majority of respondents, namely 141 people (43.0%), fell into the category of very satisfied. Meanwhile, 116 people (35.4%) gave the category of satisfied, 64 people (19.5%) gave the category of quite satisfied, and 7 people (2.1%) gave the category of less satisfied. Therefore, we can conclude that the majority of BPJS patients at the Wijaya Kusuma Clinic express high satisfaction with the provided services.

Table 1. Spearman Rank Correlation Test Data Results

Variables	p-value	correlation coefficient
Pharmaceutical Services & Patient Satisfaction	0,001	0,877

Source: Primary Data Analysis, June 2024

According to the study's findings, the Wijaya Kusuma Clinic's pharmaceutical services significantly correlated with the satisfaction of BPJS patients. A significant link between the two variables was concluded with a value of 0.001, which is smaller than the critical threshold of 0.05. This proves that patients are more satisfied with the clinic's pharmaceutical treatments when those services are of high quality. In addition, we found a correlation of 0.877 between pharmaceutical services and patient satisfaction. The strong positive correlation between the two variables is indicated by this figure's placement in the extreme group (0.80-1,000). According to this strong correlation, patient satisfaction rises in direct proportion to the quality of pharmaceutical treatments received. There is strong evidence from these findings that pharmaceutical services significantly affect patients' levels of satisfaction. With a p-value of 0.001 and a correlation coefficient of 0.877, we find that pharmaceutical services considerably boost BPJS patients' happiness.

Discussion

Data collected through patient responses stated that females seek medical assistance more quickly than males. One factor that influences individuals' response to a service is their gender. According to Rahmayanti et al. (2017), women tend to be more susceptible to disease and seek medical assistance more quickly when they experience health problems compared to men. Wibowo et al. (2016) found that women have a higher morbidity rate and experience more pain than men, as evidenced by the higher proportion of female clinic service users. The frequency data reveals that 62.5% of women utilize clinic services. Men, on the other hand, account for 37.5% of the data.

The frequency of patients who are the most recent is 26-35 years. Patients aged 15-25 years: 17.1%, 26-35 years: 33.5%, 36-45 years: 23.2%, and 46-55 years: 26.2%. Age can affect the assessment of service quality because the older the respondent, the more experienced they are in providing assessments and vice versa. Age greatly influences a person's perception, as past experiences, among other factors, shape this perception (Lubis and Astuti, 2019). According to Christasani (2016), the older the respondent, the higher the tendency to use health services more often.

The patient with the highest frequency of work is self-employed. 30.8% have self-employed jobs, 18.6% are students, 29.3% are private employees, and 21.3% are housewives. Work is one of the factors that

influences a person's use of services. A person who works has a higher tendency to use health services compared to someone who does not work. Chusna et al. (2018) asserted that a person's work closely influences their purchasing power. The highest frequency of patient education is high school. Patients who are educated are 23.2% junior high school, 44.8% high school, 12.5% S1/profession, and 19.5% S1. Families with a higher education level are more likely to recognize early symptoms and initiate treatment promptly, leading to more efficient treatment seeking and utilization. The level of education also influences the patient's assessment of the information provided, because the higher the level of education, the more it will affect a person's knowledge, comprehension, information, attitude, and interests, which are expected to be able to provide subjective assessments (Chusna et al., 2018). Patient satisfaction is typically quite high. As much as 19.5% resulted in the very satisfied category; 35.4% resulted in the satisfied category; 43.0% resulted in the quite satisfied category; and 2.1% resulted in the less satisfied category. Therefore, we can conclude that the majority of BPJS patient satisfaction at the Wijaya Kusuma Clinic fell into the quite satisfied category.

By comparing consumer expectations of the desired quality of service with the reality they receive or feel, one can measure the level of consumer satisfaction with a service (Baroroh, 2014). Patient satisfaction levels can assess service quality (Astutiet al., 2018). A patient satisfaction survey is one tool that can be used to assess the quality of pharmaceutical service in the JKN era, as stated by Larasanty et al. (2018). When patients receive health services from the health center that meet their expectations, it leads to patient satisfaction (Prihandiwati et al., 2018). According to Li et al. (2015) and other prior research, satisfying patients' demands requires their evaluations of the quality of the services they receive. After being tested with the Spearman rank test using SPSS.V.29, the correlation between BPJS patient satisfaction and pharmaceutical services at the clinic was found to be significant with a sig value of $0.001 < 0.05$. This indicates that pharmaceutical services do in fact contribute to patient satisfaction. A positive correlation value of 0.877 indicates a good association between the pharmaceutical service variables and patient satisfaction. There is a direct correlation between the two variables. This points to a relationship between the degree of patient happiness and the caliber of pharmaceutical services. Patients are more likely to be satisfied with pharmaceutical treatments when those services are of high quality. Those findings are consistent with those of the previous study (Susilowati et al., 2020).

When health services meet the established standards and code of ethics, they can bring satisfaction to every patient. The quality of health services inextricably links to patient satisfaction, making it a crucial component of health services. We need a patient satisfaction level survey to enhance the service quality. Parasuraman et al. (2019) identified five dimensions of service quality, known as ServQual, to measure consumer or patient satisfaction. The five dimensions of ServQual encompass reliability, responsiveness, confidence, empathy, and tangible, direct evidence (Andriani et al., 2021). According to Mabow and Wulandari (2017), quality service involves meeting patients' needs and desires with services that meet quality standards, ensuring their satisfaction and fostering patient loyalty to the clinic. Health service facilities expect clinics to provide high-quality pharmaceutical services to enhance patient satisfaction. When patients are satisfied with the quality of services provided by the clinic/pharmacy staff, they form patient loyalty (Melizsa et al., 2020).

Based on Putri's research (2017), it shows that the variables of service quality and satisfaction are positively related, which means that if there is an increase in the quality of service provided to patients, there will be an increase in their satisfaction. When pharmacists and pharmaceutical technical staff deliver high-quality service that patients can accept, it leads to an increase in consumer satisfaction with pharmacy services. According to Saragih (2021), patient satisfaction is closely related to whether or not the patient's needs are

met; if the patient is satisfied with what is obtained, the patient will come back to need services both for himself and for his family. Therefore, the aforementioned studies suggest that patient satisfaction influences health services, specifically pharmaceutical services. High-quality pharmaceutical services ensure patient satisfaction, implying that pharmaceutical service variables positively impact patient satisfaction.

Conclusion

These are the results of the research conducted at the Wijaya Kusuma Clinic in Tangerang on the topic of pharmaceutical services and BPJS patient satisfaction: In January 2024, the Wijaya Kusuma Clinic saw BPJS patients ranging in age from 26 to 55. Female patients made up 62.5% of the total, while male patients accounted for 37.5%. Among those who took part in the patient satisfaction survey, 2.1% expressed dissatisfaction, 43.0% expressed great satisfaction, 35.4% expressed satisfaction, and 19.5% expressed extremely high levels of happiness. As a result, we can say that a large percentage of patients who filled out the survey were really satisfied. There is a significant association between the pharmaceutical service variable and the patient satisfaction variable, as indicated by the significance value of $0.001 < 0.05$, as determined by the Spearman rank test. With a level of 0.877, it is quite powerful. Patients at the Wijaya Kusuma Clinic who get BPJS are more likely to be satisfied with the pharmaceutical treatments they receive.

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