
The Influence of Relationship Marketing and Word of Mouth on Patient Loyalty Mediated by Digital Marketing at BC Clinic

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Abstract. This research examines the influence of marketing on patient loyalty at BC Clinic, located in the Cilegon industrial area. Amid fierce competition for healthcare services, it is important for clinics to utilize effective marketing strategies to improve relationships with patients. This study aims to analyze the impact of relationship marketing and word of mouth on patient loyalty, as well as the role of digital marketing as a mediator in these relationships. The method used was a quantitative approach through the distribution of questionnaires to 100 respondents. The collected data were analyzed using the partial least squares (PLS) method to evaluate the relationships between variables. The research also involved descriptive statistical analysis to understand the characteristics of patients and their visit patterns. The results show that relationship marketing has a significant positive effect on patient loyalty, and word of mouth also contributes to increasing loyalty. However, digital marketing did not prove to be an effective mediator in these relationships. These findings provide important insights for BC Clinic in developing a more integrated marketing strategy. Suggestions for BC Clinic include strengthening direct interactions with patients and utilizing positive testimonials to enhance word of mouth. Further research is suggested to explore other influential variables as well as the broader context of health services.

Keywords: Marketing Strategy, Patient Loyalty, *Relationship Marketing*, *Word of Mouth* (WOM), *Digital Marketing*, Healthcare

INTRODUCTION

Primary care clinics, whether affiliated with BPJS or operating independently, are required to meet patients' needs and expectations effectively. This is critical for sustaining patient loyalty, a key determinant of long-term organizational success.

BC Clinic is a non-BPJS primary care clinic located in Cilegon, established on November 11, 2022. The clinic originated from Bintang Corp's involvement in organizing free COVID-19 vaccination programs. Subsequently, PT B Corp committed to delivering continuous healthcare services, with the vision of becoming a leading and preferred healthcare provider.

Despite being a relatively new healthcare provider, BC Clinic has demonstrated the ability to compete with other clinics by emphasizing its distinctive features and strengths in healthcare facilities. Its services include general medical care, dental care, midwifery services, home care, vaccination services, pharmaceutical services, and other supporting facilities.

The Patient Visit Data at BC Clinic from January 2024 to June 2025 are illustrated in Figure 1.

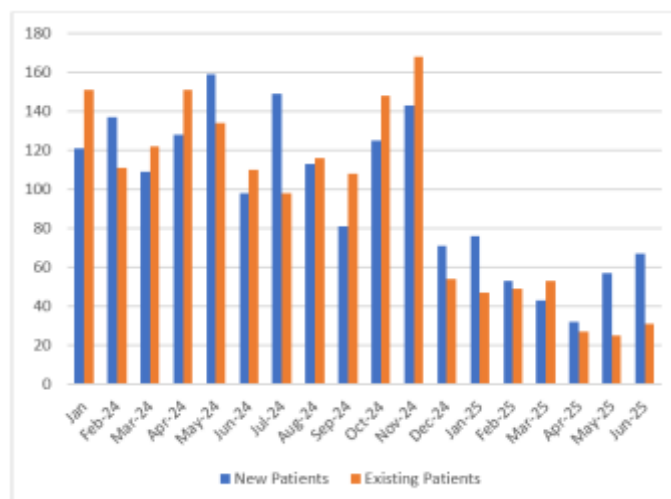


Figure 1. Patient Visit Data at BC Clinic from January 2024 to June 2025
Source: BC Clinic, 2024-2025

The total number of patients at BC Clinic in 2024 was 2,905. Overall, monthly patient visits showed an increasing trend compared to the initial phase of operation. The most significant increase occurred in October, with 273 patients, up from 189 patients in September, representing an increase of 84 patients (44.44%) from the previous month.

Despite this growth, only approximately 1,471 patients (50.63%) of the total returned for repeat visits. However, at the end of 2024, particularly in December, the number of patients declined significantly by approximately 186 patients (40.19%), decreasing from 311 patients to 125 patients.

The total number of patients at BC Clinic from January to June 2025 was 560. Overall, monthly patient visits showed a declining trend compared to the previous year. Only approximately 232 patients (41.42%) of the total returned for repeat visits during this period.

Klinik BC itself has developed partnerships with several companies and has also received many insurance collaborations. The BC clinic has agreed several MoUs with insurance and companies. BC Clinic has established partnerships and formalized memoranda of understanding (MoUs) with several companies, as well as collaborations with multiple insurance providers. Some of these partnerships adopt a relationship marketing approach through direct deduction or claims against the companies' healthcare benefit ceilings at BC Clinic, while others apply a reimbursement system. Under the direct deduction or claims system, patients are provided with convenience by only presenting their employee identification card at BC Clinic, without the need to make immediate out-of-pocket payments at the clinic. The recapitulated data on patient payment coverage at BC Clinic are shown in Table 1.

Table 1. Summary of Patient Payment Coverage at BC Clinic

MONTH (PERIOD)	OUT-OF-POCKET (SELF-PAY)		COMPANY-SPONSORED		INSURANCE	
	2024	2025	2024	2025	2024	2025
Jan	56	93	213	12	3	18
Feb	69	73	164	10	15	19
Mar	57	86	157	0	17	10
Apr	49	45	221	5	9	9
May	55	66	217	5	21	11
Jun	54	76	135	1	19	21
Jul	53	-	180	-	14	-

Aug	43	-	165	-	21	-
Sep	43	-	129	-	17	-
Oct	87	-	173	-	13	-
Nov	95	-	199	-	17	-
Dec	92	-	15	-	18	-
Total	753	439	1968	33	184	88

Source: BC Clinic, 2024-2025

Based on the available data, in 2024 the majority of patients at BC Clinic utilized company-sponsored payment guarantees, accounting for approximately 1,968 out of 2,905 patients (67.74%). However, data from 2025 indicate a shift, with the majority of patients using self-pay schemes, totaling approximately 439 out of 560 patients (78.39%).

These findings suggest both a decline in patient volume and a shift in payment patterns, from predominantly company-sponsored coverage to self-pay arrangements at BC Clinic. One contributing factor is the renewal of cooperation agreements by several companies, in which the initial relationship marketing scheme—based on direct coverage of corporate healthcare benefit ceilings—was replaced by a reimbursement system. As a result, patients previously covered under corporate guarantees transitioned to self-paying patients.

The change in the payment guarantee system was disseminated through word-of-mouth among patients who had experienced the reimbursement process, influencing other repeat patients to shift to alternative coverage schemes, such as BPJS Kesehatan, for their healthcare services. Another consideration is that reimbursement systems implemented by some companies require a relatively long processing time for claim repayment, which may further discourage patients from utilizing such schemes.

This study was preceded by a preliminary survey conducted in October 2024 among the general population within the service area of BC Clinic, aimed at substantiating the observed phenomenon using data obtained from the clinic. Data collection was carried out through an online open-ended questionnaire distributed via Google Forms. A total of 30 respondents participated in the survey, comprising 18 females and 12 males. In terms of residence, 24 respondents were from Cilegon, 5 from Serang, and 1 from Tangerang. The findings indicated that 29 respondents (96.67%) were aware of BC Clinic, while 1 respondent (3.33%) was not. Among the 29 respondents who were aware of BC Clinic, 10 respondents (34.48%) reported learning about it through friends or relatives, 8 respondents (27.58%) through their workplace or company, and 5 respondents (17.24%) through social media. Additionally, 4 respondents (13.80%) indicated multiple sources (friends/relatives and social media), while the remaining 2 respondents (6.90%) were categorized under other sources. Of the 29 respondents who were aware of BC Clinic, only 16 respondents (55.17%) had visited or utilized its services, while the remaining 13 respondents (44.83%) had not.

The findings of the preliminary study indicate that awareness of BC Clinic is more commonly derived from friends or relatives than from social media. BC Clinic maintains several social media platforms as part of its digital marketing strategy, including WhatsApp, Instagram, Facebook, TikTok, and Threads. As of the time of data collection, the clinic's Instagram account had 2,640 followers, while its TikTok account had 167 followers.

Based on the available data, the marketing team at BC Clinic has been highly active in implementing digital marketing strategies. Instagram represents the primary platform, as most BC Clinic patients are more active on Instagram compared to other platforms. The content disseminated includes information on available services, schedules, health education, records of service activities, and other related materials.

However, these efforts are not fully aligned with the findings of the preliminary study, which indicate that only 17.24% of respondents became aware of the clinic solely through social media. Word-of-mouth communication—through friends, relatives, or family members—appears to play a more significant role in disseminating information about the clinic's existence and services within the community. This, in turn, influences patients' decisions to visit the clinic and contributes to patient loyalty, as reflected in repeat visits.

A study by Ahmudin and Ranto (2023) demonstrates that word-of-mouth (WOM) communication holds substantial strategic significance in shaping customer loyalty through complex and dynamic interpersonal communication mechanisms. Theoretically, WOM functions as a persuasive information channel that transmits personal experiences and subjective perceptions among individuals, thereby directly influencing decision-making processes and the formation of consumer loyalty.

A study by Amelia et al. (2024) found that customer relationship marketing strategies have a positive and significant effect on customer loyalty at Gerasia Clinic in Sumbawa Besar. However, the explanatory power of the customer relationship marketing variable in influencing variations in customer loyalty was relatively weak, accounting for only 12.6%, while the remaining 87.4% was explained by other variables outside the research model, such as price, promotion, and the quality of products and services.

A study by N. S. Putri and Arif Muanas (2025) demonstrates that digital marketing has a positive and significant effect on customer loyalty, indicating that improvements in digital marketing strategies lead to increased customer loyalty. Customer Relationship Management (CRM) exhibits the strongest and most significant influence on customer loyalty, as evidenced by a significance value of 0.000 and the highest regression coefficient (0.630). This finding underscores the importance of establishing strong relationships between businesses and customers in fostering loyalty.

Based on the aforementioned background, this study was conducted to examine the effect of Relationship Marketing and Word of Mouth on Patient Loyalty mediated by Digital Marketing at BC Clinic.

RESEARCH METHOD

Types and Research Approaches

This study uses a quantitative approach with a survey method. The quantitative approach was chosen because this study aims to analyze the causal relationships between variables and test the hypotheses that have been formulated. Data was collected through a structured questionnaire that was distributed to respondents.

Population and Sample

The population in this study is all BC Clinic patients who have made at least two visits. The sampling technique used is purposive sampling with the criteria that respondents are patients who have used BC Clinic services starting in August 2025. Based on calculations using a purposive sampling method for sample selection. The sample size was determined based on the recommendation of Hair et al. (2021), using the formula: (number of indicators + number of variables) × (5 to 10 times). Accordingly, the calculation was as follows: $(16 + 4) \times 5 = 100$ respondents. Therefore, the sample in this study consisted of 100 patients who visited BC Clinic.

Research and Operationalization Variables

The variables in this study consisted of:

- Variabel Independen: Relationship Marketing (X1) dan Word of Mouth (X2)
- Mediation Variable: Digital Marketing (M)
- Dependent Variable: Patient Loyalty (Y)

The operationalization of the research variables can be seen in Table 2.

Table 2. Operationalization of Research Variables

Variabel	Indicator	Measurement Scale
<i>Relationship Marketing (X1)</i>	Communication, Trust, Commitment, Conflict handling	Likert 1-5
<i>Word of Mouth (X2)</i>	Talking positively, Recommending, Encouraging others	Likert 1-5
<i>Digital Marketing (M)</i>	Accessibility, Interaction, Entertainment, Credibility, Information	Likert 1-5
Patient Loyalty (Y)	Repeat visits, Recommendations, Top preferences, Resistance to competitors	Likert 1-5

Data Collection Methods

Primary data in this study was collected through questionnaires distributed to respondents. The questionnaire was compiled using a Likert scale of 1-5, where 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, and 5 = Strongly Agree. The questionnaire included questions related to four main variables: Relationship Marketing, Word of Mouth, Digital Marketing, and Patient Loyalty.

Data Analysis Methods

The collected data was analyzed using the Partial Least Square - Structural Equation Modeling (PLS-SEM) method with the help of SmartPLS software. PLS-SEM was chosen because this method is suitable for predictive analysis and can handle complex models with relatively small samples (Hair et al., 2021). The analysis is carried out in two stages:

- Evaluation of the measurement model (outer model) to assess the validity and reliability of the instrument
- Evaluation of structural models (inner models) to test research hypotheses

RESULTS AND DISCUSSION

Characteristics of Respondents

The characteristics of the respondents in this study included gender, age and frequency of visits. Based on the results of data collection on 100 respondents, the following respondent gender profiles were obtained (Table 3).

Table 3. Respondent Characteristics

Category	Quantity	Percentage (%)
Gender		
Male	58	58,0
Female	42	42,0

Source: Data collected through questionnaires completed by 100 BC Clinic patient respondents in June 2025

From Table 3, it can be seen that the majority of respondents are male (58%) and female (42%), indicating a relatively balanced distribution.

The Age of respondents can be seen in Figure 2.

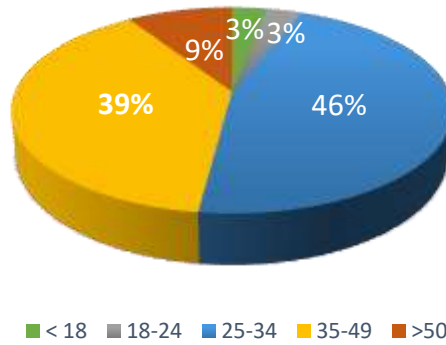


Figure 2. Age of Respondents

Respondents are dominated by productive age groups who actively use health services. The respondents visit frequency can be seen in Figure 3.



Figure 3. Respondents Visit Frequency

These findings suggest that the majority of patients rely on BC Clinic as a regularly accessible healthcare provider, particularly industrial workers who may require periodic medical care.

Evaluation of Measurement Models (Outer Model)

Evaluation of the measurement model was carried out to assess the validity and reliability of the construct. The results of the Convergent Validity Test are presented in figure 4 and Table 4.

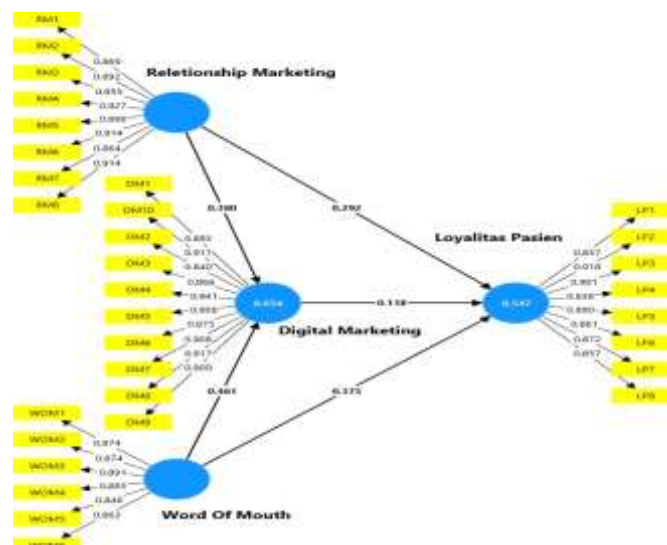


Figure 4. Construct Model

Table 4. Results of the Loading Factor Validity Test

	Digital Marketing	Patient Loyalty	Relationship Marketing	Word of Mouth	Status
DM1	0.893	-	-	-	Valid
DM10	0.917	-	-	-	Valid
DM2	0.840	-	-	-	Valid
DM3	0.866	-	-	-	Valid
DM4	0.941	-	-	-	Valid
DM5	0.868	-	-	-	Valid
DM6	0.875	-	-	-	Valid
DM7	0.908	-	-	-	Valid
DM8	0.917	-	-	-	Valid
DM9	0.900	-	-	-	Valid
LP1	-	0.857	-	-	Valid
LP2	-	0.918	-	-	Valid
LP3	-	0.901	-	-	Valid
LP4	-	0.838	-	-	Valid
LP5	-	0.890	-	-	Valid
LP6	-	0.861	-	-	Valid
LP7	-	0.872	-	-	Valid
LP8	-	0.857	-	-	Valid
RM1	-	-	0.869	-	Valid
RM2	-	-	0.892	-	Valid
RM3	-	-	0.955	-	Valid
RM4	-	-	0.927	-	Valid
RM5	-	-	0.896	-	Valid
RM6	-	-	0.914	-	Valid
RM7	-	-	0.864	-	Valid
RM8	-	-	0.914	-	Valid
WOM1	-	-	-	0.874	Valid
WOM2	-	-	-	0.874	Valid
WOM3	-	-	-	0.891	Valid
WOM4	-	-	-	0.885	Valid
WOM5	-	-	-	0.846	Valid
WOM6	-	-	-	0.863	Valid

Based on Table 4, Overall, the loading factor results demonstrate that all examined variables possess adequate validity in representing their respective constructs.

Discriminant Validity Test can be assessed using the Fornell–Larcker criterion and can also be evaluated through the Cross Loading criterion. The results of the Fornell–Larcker criterion are presented in Table 5.

Table 5. Fornel – Larcker test

	Digital Marketing	Patient Loyalty	Relationship Marketing	Word of Mouth
Digital Marketing	0.893			
Patient Loyalty	0.636	0.875		
Relationship Marketing	0.771	0.700	0.904	
Word of Mouth	0.783	0.714	0.848	0.872

These analytical results are consistent with the standards proposed by Hair et al. (2021), which state that constructs should have an Average Variance Extracted (AVE) value above 0.5, and that the correlation values among constructs should be lower than the AVE values to ensure adequate construct validity.

The results of the Cross Loading criterion are presented in Table 6.

Table 6. Cross Loading

	Digital Marketing	Patient Loyalty	Relationship Marketing	Word of Mouth
DM1	0.893	0.573	0.717	0.745
DM10	0.917	0.619	0.720	0.705
DM2	0.840	0.527	0.611	0.618
DM3	0.866	0.562	0.685	0.701
DM4	0.941	0.591	0.772	0.757
DM5	0.868	0.533	0.684	0.721
DM6	0.875	0.547	0.641	0.684
DM7	0.908	0.558	0.666	0.702
DM8	0.917	0.619	0.720	0.705
DM9	0.900	0.543	0.653	0.646
LP1	0.497	0.857	0.609	0.602
LP2	0.610	0.918	0.725	0.671
LP3	0.652	0.901	0.700	0.708
LP4	0.535	0.838	0.552	0.576
LP5	0.622	0.890	0.636	0.677
LP6	0.492	0.861	0.524	0.573
LP7	0.512	0.872	0.495	0.552
LP8	0.497	0.857	0.609	0.602
RM1	0.646	0.543	0.869	0.672
RM2	0.671	0.604	0.892	0.705
RM3	0.722	0.667	0.955	0.807
RM4	0.662	0.658	0.927	0.761
RM5	0.698	0.656	0.896	0.779
RM6	0.682	0.624	0.914	0.788
RM7	0.741	0.639	0.864	0.764
RM8	0.746	0.660	0.914	0.842
WOM1	0.685	0.581	0.739	0.874
WOM2	0.691	0.541	0.742	0.874
WOM3	0.727	0.661	0.774	0.891
WOM4	0.662	0.648	0.739	0.885
WOM5	0.644	0.625	0.700	0.846
WOM6	0.688	0.673	0.741	0.863

The cross-loading analysis demonstrated that the loading factors of each indicator for the latent variables Digital Marketing (DM), Patient Loyalty (LP), Relationship Marketing (RM), and Word of Mouth (WOM) satisfied the discriminant validity criteria. Each indicator showed a higher loading factor on its respective latent construct than on other constructs.

Reliability Test

The results of the reliability test are presented in Table 7.

Tabel 7. Cronbach's Alpha and Composite Reliability Results

<i>Variabel</i>	<i>Cronbach's Alpha</i>	<i>Composite Reliability</i>	<i>Status</i>
Digital Marketing	0.972	0.975	Reliable
Patient Loyalty	0.956	0.963	Reliable
Relationship Marketing	0.968	0.973	Reliable
Word of Mouth	0.937	0.950	Reliable

Since all values are above the recommended minimum threshold of 0.70, both Cronbach's Alpha and Composite Reliability demonstrate that all variables examined in this study possess adequate reliability.

Evaluation of Structural Models (Inner Model)

Structural model evaluation was carried out to test the causal relationship between constructs. The results of the R-Square test are presented in Table 8.

Table 8. R-Square test

	<i>R-square</i>	<i>R-square adjusted</i>
Digital Marketing	0.654	0.647
Patient Loyalty	0.547	0.532

According to the criteria established by Hair et al. (2021), the R-square values for both constructs demonstrate strong explanatory power. Digital Marketing exhibits an R-square value above 0.50, while Patient Loyalty also falls within the same category, although relatively closer to the threshold. These results indicate that the proposed structural model is both appropriate and effective in explaining the relationships among the investigated constructs and offers substantial relevance in the context of marketing and patient loyalty.

The results of the F-Square test are presented in Table 9.

Table 9. F-Square test

	Digital Marketing	Patient Loyalty
Digital Marketing		0.011
Relationship Marketing	0.118	0.047
Word of Mouth	0.173	0.074

An f-square value of 0.02 is categorized as a weak effect, a value of 0.15 is considered a moderate effect, and a value of 0.35 is classified as a strong effect. Overall, the f-square test results indicate that Word of Mouth represents the most significant predictor in the model, followed by Relationship Marketing, while Digital Marketing demonstrates the smallest effect.

Q-Square test

Following the evaluation of the R² values, the inner model was further assessed through the calculation of the Q² value. The analysis produced a Q² value of 0.843, indicating that the proposed research model accounts for 84.3% of the observed variance, whereas the remaining 15.7% is explained by factors not included in the present study.

Hypothesis Testing

The results of hypothesis testing are presented in Table 10 and 11.

Table 10. Direct Path Coefficient Hypothesis Testing Results

Hypothesis	Variabel	Original Sample (O)	T statistics (O/STDEV) (>1.985)	P Values (<0.05)	Result
H1	<i>Relationship Marketing -> Digital Marketing</i>	0.380	3.243	0.001	Positive effect
H2	<i>Word of Mouth -> Digital Marketing</i>	0.461	4.156	0.000	Positive effect
H3	<i>Relationship Marketing -> Patient Loyalty</i>	0.292	2.305	0.021	Positive effect
H4	<i>Word of Mouth -> Patient Loyalty</i>	0.373	2.464	0.014	Positive effect
H5	<i>Digital Marketing -> Patient Loyalty</i>	0.118	1.276	0.202	Has no effect

Table 11. Indirect Path Coefficient Hypothesis Testing Results

Hypothesis	Variabel	Original Sample (O)	T statistics (O/STDEV) (>1.985)	P Values (<0.05)	result
H6	<i>Relationship Marketing -> Digital Marketing -> Patient Loyalty</i>	0.045	1.173	0.241	Has no effect
H7	<i>Word of Mouth -> Digital Marketing -> Patient Loyalty</i>	0.055	1.143	0.253	Has no effect

Based on the table above, as indicated by the p-values, the effects of Relationship Marketing on Digital Marketing, Word of Mouth on Digital Marketing, Relationship Marketing on Patient Loyalty, and Word of Mouth on Patient Loyalty are all positive effect ($0.000 < 0.05$). Therefore, Hypotheses 1, 2, 3, and 4 are supported by the data and accepted.

In contrast, Digital Marketing does not affect Patient Loyalty, as indicated by the p-value ($0.202 > 0.05$). Thus, Hypothesis 5 is not supported by the data and is rejected. Similarly, the indirect effect of Relationship Marketing on Patient Loyalty mediated by Digital Marketing had no effect, as shown by the p-value ($0.241 > 0.05$), and the indirect effect of Word of Mouth on Patient Loyalty mediated by Digital Marketing is also had no effect, as indicated by the p-value ($0.253 > 0.05$). Therefore, Hypotheses 6 and 7 are not supported by the data and are rejected.

DISCUSSION

The results showed that Relationship Marketing (RM) had a positive effect on Digital Marketing (DM). According to Philip Kotler et al. (2018), Relationship Marketing (RM) significantly influences the effectiveness of Digital Marketing. This shows that a good RM strategy can increase the effectiveness of DM. Clinics that have a strong relationship with patients tend to be more successful in implementing digital marketing strategies. Research examining the influence of Relationship Marketing on Digital Marketing remains scarce. Previous studies examining the effect of Relationship Marketing on Digital Marketing remain limited. Therefore, this study contributes to the existing research gap in the marketing literature by exploring how Relationship Marketing (RM) may add a new dimension to Digital Marketing strategies, particularly in the healthcare sector, which is increasingly dependent on technology.

Word of Mouth (WOM) had a positive effect on DM. A study by Pasaribu et al. (2022) demonstrated that effective digital marketing not only enhances patient satisfaction but also fosters loyalty through positive reviews and recommendations that strengthen the clinic's image on online platforms. Word of Mouth (WOM) not only improves the clinic's reputation but also reinforces the effectiveness of Digital Marketing by fostering greater patient trust and loyalty. Previous studies examining the effect of Word of Mouth on Digital Marketing remain limited. Therefore, this study contributes to addressing the existing research gap, particularly in the healthcare service context, by providing empirical evidence on how Word of Mouth (WOM) can serve as a key driver in generating engagement across various digital platforms.

Relationship Marketing (RM) was shown to have a positive effect on patient loyalty. These findings are in line with Rahayu (2023) research which found that RM has a positive influence on patient loyalty. The effective implementation of RM in BC Clinics, including good communication, trust-building, and responsive complaint handling, contributes to increased patient loyalty.

Word of Mouth (WOM) was also shown to have a significant positive effect on patient loyalty. These results support the research of Ruswanti et al. (2020) which shows that WOM has an effect on patient satisfaction and loyalty. Positive recommendations from satisfied patients are an important factor in building the trust of new potential patients and strengthening the loyalty of existing patients.

However, the study found that DM had no significant effect on patient loyalty. These findings are different from the research of Rana et al. (2024) revealed that effective digital marketing strategies, such as content personalization and active interaction through social media, can enhance patient experience and, in turn, strengthen patient loyalty. Nevertheless, research conducted by Aprillia et al. (2025) demonstrated that, although Digital Marketing may enhance patient awareness and interest, it does not directly influence patient loyalty. The findings suggest that other factors, particularly service quality and patient experience, exert a more significant effect on the development of long-term patient loyalty. Therefore, although Digital Marketing has the potential to enhance patient awareness and interest, evidence suggests that its contribution to patient loyalty may not be as strong as expected without support from high-quality services and strong interpersonal relationships between patients and healthcare providers.

The results of the mediation test showed that DM did not mediate the relationship between RM and patient loyalty, nor the relationship between WOM and patient loyalty. This indicates that in the context of the BC Clinic, the effects of RM and WOM on patient loyalty are more direct and do not require a DM intermediary.

CONCLUSION

The conclusion of the study showed that Relationship Marketing (RM) and Word of Mouth (WOM) had a positive effect on Digital Marketing (DM). RM and WOM increasing the effectiveness of digital marketing in terms of brand awareness and customer retention. RM and WOM also contributes positively to patient loyalty, Optimal implementation of RM strengthens loyalty through meaningful interactions, while effective WOM in disseminating positive information strengthens trust and perception of service quality. However, DM does not directly increase patient loyalty and does not successfully mediate the influence of RM and WOM, due to the nature of DM which is often one-way and less personal. Without a more holistic approach and focused on direct interaction, most patients may not feel the added value of the digital experience on offer. Therefore, a better marketing strategy must integrate RM and WOM with digital channels that are interactive and represent the real patient experience

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