p–ISSN: 2723 - 6609 e-ISSN: 2745-5254
Vol. 5, No. 3 March 2024 http://jist.publikasiindonesia.id/

The Effect of Engine Specifications, Technician Quality, and Bmhp Prices On Hospital Preferences In Nipro Hemodialysis KSO Contracts In Eastern Indonesia

Arif Joko Supriyanto
Universitas Airlangga, Indonesia
Email: kusumanegaran@yahoo.com

*Correspondence: kusumanegaran@yahoo.com

Keywords: engine specifications; engine quality; BMHP price; KSO contract extension.

ABSTRACT

The number of people with kidney failure in Indonesia currently reaches 1.6 million people with a prevalence of 6 per mile. The high number of people with kidney failure is caused by 2 main triggers, namely diabetes and hypertension. One form of treatment / treatment for patients with kidney failure is hemodialysis / dialysis using dialyzer services. Hemodialysis treatment can now be done in various health facilities services and is covered by BPJS financing. Hospitals as service providers collaborate with vendors / partners to procure machines and BMHP (Medical Consumables). The high demand for hemodialysis machines makes this industry/business create fierce competition. The form of competition between service provider vendors is in terms of machine specifications, after-sales service, and prices offered by each vendor. The form of cooperation between hospitals and vendors consists of various patterns / schemes. However, a common pattern used in cooperation between hospitals and vendors is in the form of Operational Cooperation (KSO) Consumable Purchases. This study raised the topic of opportunities for extending existing KSO contracts between hospitals and KSO partners, based on the influence of machine specifications, technician quality, and BMHP prices. This study will examine whether or not there is an influence of the three variables mentioned above on the hospital's decision to extend or terminate the KSO contract. The study data used the population of hemodialysis installations in the working area of Eastern Indonesia.

Introduction

Business competition conditions in all business fields are currently getting tighter. The tighter competition that arises, business people to be able to continue to improvise in a positive direction to maintain and improve their position to be able to continue to grow and compete in regional, national, and even global markets. Business people must

continue to strive to learn, understand, and meet the needs and desires of the market and its customers (Bian & Forsythe, 2012). By successfully understanding and meeting the needs and desires of the market, customer satisfaction will be realized which leads to their loyalty to use our products and services. One of the main keys for companies in winning market competition is to provide experience and satisfaction to customers through quality service and competitive prices (Adyanto & Santosa, 2018).

One of the business fields that until now is still and always needed is the medical device industry business. With the increasing awareness of the importance of health, and the desire to survive longer, the medical device industry is one of the industries that is increasingly in demand (Levrini & Jeffman dos Santos, 2021). This is marked by the number of new companies that have emerged in the safety equipment industry. Of the many kinds of medical devices, one type of device that will be the object of this study is hemodialysis medical devices (dialysis) for patients with acute / chronic kidney failure. The condition of the number of kidney failure patients is increasing every year, making competition in this field very competitive. In addition to the hemodialysis equipment must have technology and a high level of patient safety, the quality of service and competitive prices are one of the important things that customers focus on before making their choice to buy the item directly (buy out) or through an operational cooperation agreement mechanism (Tulbah, AlHamdan, AlQahtani, AlShahrani, & AlShaye, 2017).

In simple terms, the scheme of the operational cooperation agreement is that the hospital as a user will provide a place / room for hemodialysis, we as a manufacturer and distributor make a network of piping and water treatment installations, as well as provide tools and serve regular machine maintenance (Purnomo, 2015). The hospital must then purchase BMHP (Medical Consumables) products and other medical support materials related to hemodialysis services to us. Within the mutually agreed cooperation period (usually 5 years), there will be cooperation between RS and us as vendors/partners. If the period has ended, the hospital can choose the option of continuing the cooperation or choose to end it. For us, being able to continue the period of cooperation is a target that must be met. One way to achieve these targets is by maintaining customer satisfaction through excellent service quality and price factors. Previous research: HudaTulbaha, Eman Al Hamdan, Amal Al Qahtania, Asma Al Shahranic, Mona Al Shaye. (2017). Quality of Communication Between Dentists and Dental Laboratory Technicians for Fixed Prosthodontics in Riyadh, SaudiArabia. The Saudi Dental Journal Vol. 29

This research context is about the process of making dental prostheses that are clinically acceptable, in which there is a need for appropriate communication between dentists and dental technicians. Prosthodontic educators have noticed this interaction and communication. Prosthodontic labs readily reveal that technicians are often dissatisfied with the information provided in work permits. The purpose of this study was to evaluate the quality of communication between dentists and laboratory technicians through work authorization for fixed prosthodontics in government and private dental laboratories in Riyadh region from the technician's point of view (Shahid, Hussain, & Zafar, 2017).

The study took samples in 66 dental laboratories, including all government dental labs and a number of private dental labs randomly selected from each district in Riyadh (40%). The questionnaire was developed to include questions relating to the following areas of work authorization: clarity and accuracy of instructions, patient information,

type of prosthesis, choice of material, design and color of the prosthesis and type of porcelain glaze. The questionnaire is answered in a face-to-face interview by a qualified technician in fixed prosthetic work. The data were analyzed through parametric tests (T-test and one way ANOVA) to identify significance values ($P < 0.05$) (Wasem et al., 2023).

The results of the survey in this study showed a lack of communication between the dentist and the dental laboratory regarding the following: marginal design, pontic design, staining diagrams, types of porcelain and glazes required for the prostheses. Significant differences were observed between government and private dental laboratories. Lack of communication between dentists and government laboratory technicians in Riyadh. There was no statistically significant difference between private laboratories in different areas of Riyadh city ($P <0.05$). The conclusion drawn from this study is that the quality of communication between dentists and dental technicians in Riyadh is sometimes inadequate, and government laboratories have a lower level of communication, which greatly affects the output of dental prosthetic products.

The objectives to be achieved in this study are:

1. Analyzing the influence of engine specifications on HD Center's contract renewal decision in Eastern Indonesia.
2. Analyze the effect of on-site technician quality on HD Center contract renewal decisions in Eastern Indonesia.
3. Analyzing the effect of BMHP prices on HD Center contract renewal decisions in Eastern Indonesia.

Research Methods

Types of Research

This research was carried out quantitatively with the object of research being consumer behavior in making decisions to extend KSO contracts for hemodialysis machines brand / brand NIPRO marketed by PT. Main Wheel Ray. The main concentration in quantitative research lies in theoretical tests, building and compiling existing data and facts owned by researchers, conducting statistical analysis and tests, which will ultimately be able to provide Indonesiaban or clarity of relationship to hypotheses (Bryman, 2017). Data collection has been carried out on a predetermined sample of the existing population. The data in this study was obtained from samples who filled out questionnaires that had been distributed as instruments in this study. Furthermore, data analysis is carried out statistically to test predetermined hypotheses and draw conclusions in this mini theis.

Variable Measurement

A variable is something that varies and can vary from one instance / form to another example / form (Zikmund, Babin, Carr, & Griffin, 2013). In this research using 2 main variables, namely independent variables (free) and dependent variables (bound).

Independent Variables

Independent variables (independent variables) are those variables that affect the dependent variable or other dependent variables. In this study, what is meant and included in the independent variables are engine specifications (X1), quality of on-site technicians (X2), and BMHP prices (X3).

Dependent Variables

A dependent variable or dependent variable is a variable that is signaled and/or described by another variable. In this study, the dependent variable is the extension of the KSO (Y) contract.

Data Types and Sources

The data that has been collected by researchers is then processed and presented in order to become useful information. In the process of collecting data, there are two main sources used, namely primary data sources and secondary data sources. Primary data is data collected by researchers directly to answer research problems that are being carried out exploratorily, descriptively, and causally with the method of collecting them through surveys. Meanwhile, secondary data is information obtained from supporting books and relevant scientific journals obtained physically and online.

In this study, researchers obtained and used primary data obtained directly through the distribution of questionnaires or questionnaires to respondents in the form of questions about indicators of research variables. This research is included in the cross sectional category whose meaning is that the research data is taken in one period and the information obtained from respondents is only once.

Population and Research Sample

According to Sekaran and Bougie, the definition of population is a collection of several individuals or research objects that have the qualities and characteristics as determined by researchers to be further investigated (Sekaran and Bougie, 2013). The population in this study is hospitals / clinics in the Eastern Indonesia working area that have collaborated in the form of KSO contracts. The Eastern Indonesia region was chosen as the population in this study because the sales level in the Eastern Indonesia region contributed the highest to the total national sales. Currently, the population of hospitals and health facilities that have collaborated in Eastern Indonesia is 182 units, and the population of machines is 1407 units.

The sampling method in this study is a probability sampling technique where this technique is a sampling technique in which each member of the population has the same chance of being selected as a sample. In other words, all single members of that population have a non-zero chance. Meanwhile, the sampling technique used in this study is a saturated sampling technique. The saturated sample technique is a sampling technique when all members of the population studied are used as samples (Sugiyono, 2014). Therefore, referring to the population of hospitals in Eastern Indonesia that contract KSO with us as many as 182 units, the researchers decided to use the saturated sample technique using 182 members of the population as samples.

Data Collection Methods

The data collection technique carried out in this study used questionnaires. Questionnaire is an arrangement of a series of questions in which respondents will record or choose Indonesiaban which according to them is appropriate to several alternative Indonesiabans that have been provided (Sekaran & Bougie, 2017)

Meanwhile, the scale used in this study is the Likert scale. According to (Durianto & Sugiarto, 2021) view, the Likert scale is a scale that shows the response of customers to a product (very good, good, enough, less good, not good). The information obtained by the Likert scale method is an ordinal measurement scale. The results of these scale measurements can only be made in order / ranking without knowing the difference between levels of Indonesiaban.

Data Analysis Techniques

In this study, researchers used several test techniques to analyze the data they already had.

Validity Test

Validity is a measure that shows that the variable being measured by the researcher is indeed proven to be the variable that the researcher wants to study (Zulganef, 2016). Meanwhile, the validity test itself is generally used to measure the validity or validity of a questionnaire (Ghozali, 2016). A questionnaire is valid if the arrangement and questions are able to reveal something that will be measured in the questionnaire.

A test can be said to have high validity if the test is able to carry out its measurement function and provide accurate measurement results. To conduct validity tests, researchers utilize the SPSS 26 software program. While the testing technique used Pearson's Bivariate correlation. The decision making in this test is carried out by:

a. If the r value is calculated > r table, then the items in the questionnaire question are declared valid.
b. If the r value is calculated < r table, then the items in the questionnaire question are declared invalid.

Reliability Test

The meaning of reliability is a scale or data measurement instrument that consistently produces results that are always high every time you make a measurement process (Ferdinan, 2023). A questionnaire can be said to be reliable if Indonesiaban to questions from respondents is consistent from time to time. Reliability testing refers to the degree of stability, predictability, consistency, and finally accuracy. In conducting this reliability test, researchers used the SPSS 26 software program with Cronbach Alpha as a statistical test. The test results are considered reliable if the CA > 0.70.

Test t

The t test is used as a means to test the significance of the relationship between variables X1, X2, X3 to Y. To perform the t test, researchers use the SPSS26 program. The confidence level used is set at 95% and the significance level (α) is 5% with the following test criteria:

a. When the significance < 0.05, H0 is rejected and H1 is accepted
b. When the significance > 0.05, H0 is accepted and H1 is rejected

Test Coefficient of Determination (R2)

The determinant coefficient basically measures how far the model is able to translate the variance of the dependent variable (Ghozali, 2018). The determinant coefficient (R2) is intended to determine the best accuracy and accuracy in regression analysis, where it is shown the magnitude of the coefficient of determination (R2) between 0 (zero) and 1 (one). The smaller the coefficient of determination, the ability of the independent variable to explain the dependent variable is very limited. Conversely, if the value is close to 1 (one), then its independent variable almost shows all the information needed to predict the dependent variable.

Results and Discussion

Overview of the Research Object

Nipro brand hemodialysis machine marketed in Indonesia by PT. Sinar Roda Utama as its sole agent. Nipro has been supplied in Indonesia for the last 40 years (4 decades). PT. Sinar Roda Utama was established in 1983 in Jakarta. At this time, PT.

Sinar Roda Utama has grown to become one of the leading medical device distributor companies in Indonesia. Through partnerships with international brands renowned for safety and quality, PT. Sinar Roda Utama is growing to become one of the market leaders in the distribution of medical devices. Currently, brands that are the company's main commodities include; Nipro Corporation, Toray Industries, and PDC Healthcare. The Company continues to strive to provide the best products and services to meet the needs of medical devices in Indonesia. To this day, PT. Sinar Roda Utama has become a trusted partner in the health sector for nearly 1000 hospitals and Puskesmas throughout Indonesia and supports government health programs and initiatives funded by "BPJS Kesehatan". Distribution of products marketed by PT. Sinar Roda Utama is not only focused on hemodialysis products, but also non-hemodialysis medical devices such as syringes, IV catheters, blood line sets, infusion sets, blood glucose meters, id bands, etc.

Main products of PT. Sinar Roda Utama is indeed a hemodialysis machine and all its supporting equipment with the NIPRO brand. Nipro is a hemodialysis product from Japan that has been very global. Nipro is very global for reasons of safety, quality, and evidence. Tool safety is the main flagship of NIPRO products. NIPRO products are recognized as having a very high safety grade so that they can be marketed to the European and American markets. In addition to safety factors, the quality of NIPRO has also been recognized worldwide. This quality is directly proportional to the evidence perceived by users (patients). By using NIPRO products as a therapeutic tool for kidney failure, patients / users have a longer life expectancy, even almost equal to other humans who have healthy kidneys. By using ingredients that have been certified by international health bodies such as PES and Fre BPA, all NIPRO products have obtained certification and are eligible for distribution throughout the world. In Indonesia itself, PT. Sinar Roda Utama as the holder of the NIPRO brand has ISO and CDAKB (Good Medical Device Distribution Methods) certifications.

Meanwhile, the pattern of Operational Cooperation between PT. SInar Roda Utama with its partners (hospitals and health facilities) is in the form of KSO Purchasing Consumable. The form of KSO Purchasing Consumable is an operational cooperation concept where the hospital provides a hemodialysis center location and all licensing processes, while PT. Sinar Roda Utama prepares machines and all infrastructure facilities including RO installation and water treatment. After the cooperation process takes place, then the hospital only needs to buy BMHP (Medical Consumables) to PT. Sinar Roda Utama by issuing PO (Purchase Order). In the Operational Cooperation, there is a duration of time, object of agreement, rights and obligations that must be complied with by both parties during the running of the KSO.

Analysis of Respondent Characteristics

In this study, there were a total of 182 respondents who had participated in filling out questionnaires on predetermined criteria. The respondents were hospitals in Eastern Indonesia that had collaborated with PT.

Sinar Roda Utama in the form of KSO Contract. In this section, respondent profiles based on hospital type categories will be explained.

Description of Respondent Profile by Hospital Type / Class

In table 1 below, the characteristics of the hospital type of respondents used as a sample are displayed.

Table 1 Characteristics of Respondents Based on RS Type

RS Type / Class	Sum	Percentage
Type A Hospital	5	2,75%
Type B Hospital	139	76,37%
RS Type C	38	20,88%
Total	**182**	**100%**

The differences from the three types of hospitals used as respondents mentioned above are as follows:

1. For type A hospitals at least must have medical service facilities and capabilities, at least at least 4 basic medical specialists, 5 medical support specialists, 12 other medical specialists, and 13 medical subspecialists.
2. For type B hospitals, at least able to provide facilities and have medical service capabilities of at least 4 basic specialists, 4 medical support specialists, 8 other specialists, and 2 basic subspecialists.
3. Type C hospitals further limit their medical services, which provide at least 4 basic medical specialists and 4 medical support specialists.

Based on the display in table 1 above, below, the characteristics of the hospital type of respondents used as a sample are displayed. There are 3 types of hospitals with a percentage of 2.75% Type A hospitals (5 hospital units), 76.37% Type B hospitals (139 hospital units), and the remaining 20.88% Type C hospitals (38 hospital units).

Table 2 Mean category of interval scores

Average Interval	Information
1,00-1,80	Very Low
> 1.80-2.60	Low
> 2.60-3.40	Keep
> 3.40-4.20	Tall
> 4.20-5.00	Very High

Description of Engine Specifications

The following is a description and frequency of respondents' answers to machine specification variables.

Table 3 Frequency of Answers Respondents Variable Machine Specifications

Items	Question	Answer Score					Mean	Information
		TB	KB	C	B	BS		
SM1	How is technical specification (system/application) HD engine who is in the hospital?	4	4	12	79	83	4,28	Very Tall
SM2	How condition physical HD machine that is in RS?	4	7	22	75	74	4,14	Tall
SM3	How is the completeness of the tools supporting HD machines in hospitals?	2	2	21	87	70	4,21	Very High

Based on the display of table 3 above, it can be seen that the composite mean on the engine specification variable is 4.21. The mean value in the machine specification variable mentioned above shows that RS has a fairly high understanding and concern about it. The highest mean value of 4.28 is seen in the SM1 indicator which means that respondents stated that the specifications of the Surdial Type 55 Plus engine met their expectations. Meanwhile, the lowest mean value in SM-2 was 4.14.

Quality Description of On-site Technicians

The following is a description and frequency of respondents' answers to on-site technician quality variables.

Table 4 Frequency of Respondent Answers Variable Quality of On-site Technicians

Items	Question	Answer Score					Mean	Information
		TB	KB	C	B	BS		
KT1	How HD technician attendance rate is it in the hospital?	1	0	19	83	79	4,31	Very High
KT2	What is the skill level HD technician in hospital?	1	1	9	100	71	4,31	Very Tall
KT3	How to communicate HD technician in hospital?	1	2	19	89	71	4,25	Very Tall

Based on the display of table 4 above, it can be seen that the composite mean on the on-site technician quality variable is 4.29. The mean value in the machine specification variable mentioned above shows that RS has a fairly high understanding and concern about it. The highest mean value of 4.31 is seen in the KT1 and KT2 indicators, which means that respondents state that the level of technician attendance and level of expertise meet user expectations. Meanwhile, the lowest mean value in KT3 was 4.25.

BMHP Price Description

The following is displayed the description and frequency of respondents' answers to the variable price of BMHP (Medical Consumables).

Table 5 Frequency of Answers Respondents BMHP Price Variable

Items	Question	Answer Score					Mean	Information
		TB	KB	C	B	BS		
HB1	How price BMHP provided by partners KSO?	3	12	114	39	14	3,27	Neutral
HB2	How role price to efficiency in hospitals?	1	14	111	44	12	3,29	Neutral
HB3	How Price comparison towards quality thing?	1	9	102	54	16	3,41	Tall
BMHP Price Composite Mean							**3,32**	**Neutral**

Based on the display of table 5 above, it can be seen that the composite mean on the BMHP price variable is 3.32. The mean value in the machine specification variable mentioned above shows that RS has a fairly high understanding and concern about it.

The highest mean value of 3.41 is seen in the HB3 indicator, which means that respondents state that the price offered and the quality of goods received are directly proportional and meet user expectations. Meanwhile, the lowest mean value in HB1 was 3.27.

Hypothesis Testing

Model analysis and hypothesis testing at this stage using SPSS 26. There are several steps in this testing process. The steps are validity tests and reliability tests. Next, test the model using the T test, and the coefficient of determination (R2) test.

Validity Test

The validity test carried out in this study aims to see all functions of the questions asked, with criteria if the calculated r value is greater than the r table value. The r table value obtained with a total of 182 data and a signification level of 0.05 is at 0.146.

Table 6 Validity Test

Variable	Items	r Calculate	r Table	Decision
Engine Specifications	P1	0,821	0,146	Valid
	P2	0,829	0,146	Valid
	P3	0,712	0,146	Valid
Quality of On-site Technicians	P1	0,814	0,146	Valid
	P2	0,841	0,146	Valid
	P3	0,840	0,146	Valid
BMHP Price	P1	0,912	0,146	Valid
	P2	0,929	0,146	Valid
	P3	0,901	0,146	Valid
KSO Contract Extension Decision	P1	0,816	0,146	Valid
	P2	0,834	0,146	Valid
	P3	0,840	0,146	Valid
	P4	0,850	0,146	Valid

Based on table 6 mentioned above, it can be seen that all statements submitted through the questionnaire are valid. Proof of its validity is seen from all statement items in the variable whose calculated r value exceeds the table r threshold of 0.146. Therefore, it can be stated that all question variables on the questionnaire are appropriate to be used as a measuring tool in this study. Reliability Test A single questionnaire can be said to be reliable if respondents' answers to the questions asked in the questionnaire are answered stably or consistently over time. Meanwhile, a variable is declared to contain reliability if it shows a Cronbac Alpha value greater than 0.60.

Reliability Test

A unified questionnaire can be said to be reliable if respondents' answers to the questions asked in the questionnaire are answered stably or consistently over time. Meanwhile, a variable is declared to contain reliability if it shows a Cronbac Alpha value greater than 0.60.

Table 7 Reliability Test

Variable	Cronbac Alpha Value	Decision
Engine Specifications	0,696	Reliable
Quality of On-site Technicians	0,775	Reliable
BMHP Price	0,901	Reliable
KSO Contract Extension Decision	0,851	Reliable

Regression Analysis

The equation shown below explains the relationship of independent variables consisting of engine specifications, on-site technician quality, and BMHP prices to the dependent variables in the form of KSO contract renewal decisions, with the following formulation:

KSO Contract Renewal Decision = constant + b1 engine specification + b2 on-site technician quality + b3 BMHP price + error

Table 8 SPSS Equation Results

Type	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	2.399	1.237		1.940	.054
Engine Specifications	.196	.083	.163	2.352	.020
Quality of On-site Technicians	.216	.098	.153	2.197	.029
BMHP Price	.601	.071	.504	8.400	.000
a. Dependent Variable: KSO Contract Extension Decision					

In table 7 there is an unstandardized coefficient beta value which is the directional coefficient of linear regression, which states the change in the average KSO extension decision variable for each change in machine specification variables, on-site technician quality, and BMHP price. The change has the meaning of increase if "b" is a positive sign, and decrease / decrease if it is marked negative.

T Test

If the value of sig. 0.05 or 5% then the variable can be expressed

has an influence on the dependent variable. Based on the hasl of processing partial test data against the table mentioned above, the following conclusions can be drawn:

a. The engine specification (X1) has a t value of 2.352 and the variable value significance of 0.020 is less than 0.05, which means that the engine specification has an effect on the KSO contract renewal decision.
b. The quality of on-site technicians (X2) has a t value of 2.197 and the significance of the variable value of on-site technician quality of 0.029 is less than 0.05, which means that the quality of on-site technicians affects the decision to extend the KSO contract.
c. The BMHP price (X3) has a t value of 8.400 and the variable value significance of 0.000 is less than 0.05, which means that the BMHP price affects the decision to extend the KSO contract.

In the discussion of the results of this study, the influence of independent variables on dependent variables is discussed. Based on sample data that has been taken from all existing populations, there are 76.37% of the most dominant types of hospitals

(total respondents 139 units), namely Type B Hospitals. 8 other specialists, and 2 basic subspecialists.

In the explanation in the previous sub-chapter, it was presented that the value of the engine specification influence coefficient, the quality of on-site technicians, and the BMHP price for the KSO contract renewal decision was 37.7%. So it can be concluded that the value of the coefficient of determination is obtained from Type B hospitals whose INA CBG's tariff is in the effective range for hospitals. Next, a discussion of test results against hypotheses will be presented.

The Effect of Engine Specifications on KSO's Contract Renewal Decision

Based on the results of the hypothesis test using SPSS 26, it was found that the engine specifications had a positive effect on the decision to extend the KSO contract, where the higher the features and specifications of the engine placed in the RS, the more comfortable the RS would be to use the machine and would have an impact on the decision to extend the KSO contract.

The specification has a very significant and positive influence on the decision to extend the KSO contract. This significant and positive influence is evidenced by the results of the t-test value which reaches a sig value of 0.020 smaller than 0.050 which means that there is a significant influence on the importance of engine specifications on the contract renewal decision to be taken by the hospital. In addition, it was also found that the composite mean value of the engine specifications was 4.21 and for the KSO contract renewal decision was 3.41. This shows that the answer from respondents regarding the importance of engine specifications is included in the very high category because in the initial process of selecting KSO partners, RS has used machine specification variables as one of the benchmarks, so that during the KSO contract renewal process it greatly affects the decision to be taken by RS. The tendency to extend the KSO contract will be directly proportional to the high specifications of the machines used by KSO partners.

The effect of the quality of on-site technicians on the decision to extend the KSO contract

The results of hypothesis testing show that the quality of on-site technicians has a positive and significant effect on the decision to extend the KSO contract. The hospital as a hemodialysis service provider realizes the importance of the quality of on-site technicians prepared by KSO partners in hospitals. Qualified technicians will greatly facilitate hemodialysis doctors and nurses in performing actions or treatments for patients. The importance of the quality of on-site technicians so that they are able to influence the decision to extend the KSO contract is shown by the t-test value which shows a sig result of 0.029 smaller than 0.050. Meanwhile, the study showed a composite mean of on-site technician quality of 4.29 and a decision for KSO contract renewal of 3.41. This figure further emphasizes that the more qualified on-site technicians, the more helpful end users are, and this greatly affects the decision to extend the KSO contract from the hospital. The quality of technicians can be improved through a continuous learning process by KSO partners.

The Effect of BMHP Price on KSO Contract Renewal Decision

The results of hypothesis testing show that the BMHP price has a positive and significant effect on the decision to extend the KSO contract. Hospitals as hemodialysis service providers realize the importance of efficiency that can be done by reducing the price of BMHP offered by KSO partners as a single bundling package. The more competitive the price offered by KSO partners, the more likely the BMHP is chosen by

RS. However, the hemodialysis device business pattern cannot separate between equipment services and BMHP packages. So even though the BMHP price from one vendor is less competitive but the vendor has more value in the form of high engine specifications and also good on-site technician quality, the chances of being selected by RS in the initial contestation are still very high.

The importance of a competitive BMHP price so that it can influence the decision to extend the KSO contract is shown by the t-test value which shows a sig result of 0.000 smaller than 0.050. Meanwhile, this study shows a composite mean of BMHP price of 3.32 and the decision for KSO contract extension of 3.41. This figure further emphasizes that the more competitive the BMHP price, the more efficient the hospital will feel in terms of cost control. If the hospital feels able to carry out efficiency and cost control, then it greatly affects the decision to extend the KSO contract from the hospital.

Conclusion

Based on the results of the analysis and description of the discussion that has been carried out in the previous chapter, the conclusions that can be presented by researchers in this study are as follows: Engine specifications had a significant and positive effect on RS's decision on KSO's contract extension. The quality of on-site technicians has a significant and positive influence on the hospital's decision on the extension of the KSO contract. The BMHP price has a significant and positive effect on RS's decision on the extension of the KSO contract.

Bibliography

Adyanto, Brian Cahyo, & Santosa, Suryono Budi. (2018). Pengaruh kualitas layanan, brand image, harga dan kepercayaan produk terhadap keputusan pembelian (studi layanan e-commerce Berrybenka. com). *Diponegoro Journal of Management*, *7*(1), 10–29.

Bian, Qin, & Forsythe, Sandra. (2012). Purchase intention for luxury brands: A cross cultural comparison. *Journal of business research*, *65*(10), 1443–1451.

Bryman, Alan. (2017). Quantitative and qualitative research: further reflections on their integration. In *Mixing methods: Qualitative and quantitative research* (bll 57–78). Routledge.

Durianto, Darmadi, & Sugiarto, Tony Sitinjak. (2021). Strategi menaklukkan pasar melalui riset ekuitas dan perilaku merek. *Jakarta: Gramedia Pustaka Utama*, *56*, 58–59.

Ferdinan, Ferdinan. (2023). *Implementasi Pendekatan Kontekstual dalam Pembelajaran Pendidikan Agama Islam pada Peserta Didik di MTs Muhammadiyah Datarang Kabupaten Gowa*. *06*(01), 8577–8590.

Ghozali, Imam. (2016). *Desain penelitian kuantitatif dan kualitatif: untuk akuntansi, bisnis, dan ilmu sosial lainnya*.

Ghozali, Imam. (2018). *Aplikasi Analisis Multivariate dengan Program IBM SPSS 25. Badan Penerbit Universitas Diponegoro: Semarang*.

Levrini, Gabriel R. D., & Jeffman dos Santos, Mirela. (2021). The influence of price on purchase intentions: Comparative study between cognitive, sensory, and neurophysiological experiments. *Behavioral Sciences*, *11*(2), 16.

Purnomo, Hery. (2015). Analisis Pengaruh Citra Merek Produk Asli, Persepsian Nilai, Kualitas Produk, dan Kewajaran Harga Pada Niat Beli Produk Bajakan. *Fokus Manajerial*, *13*(1).

Sekaran, Uma, & Bougie, Roger. (2017). *Metode Penelitian untuk Bisnis: Pendekatan Pengembangan Keahlian Edisi 6 Buku 2*.

Shahid, Zarlish, Hussain, Tehmeena, & Zafar, Fareeha. (2017). The impact of brand awareness on the consumers' purchase intention. *Journal of Accounting & Marketing*, *6*(01), 34–38.

Tulbah, Huda, AlHamdan, Eman, AlQahtani, Amal, AlShahrani, Asma, & AlShaye, Mona. (2017). Quality of communication between dentists and dental laboratory technicians for fixed prosthodontics in Riyadh, Saudi Arabia. *The Saudi Dental Journal*, *29*(3), 111–116.

Wasem, Valerie, Woodyard, Ashley, Desselle, Shane P., Hosseini, Sina, Hohmeier, Kenneth C., & McKeirnan, Kimberly C. (2023). Correlations to and potential implications of resilience among certified pharmacy technicians. *Journal of the American Pharmacists Association*, *63*(1), 90–96.

Zikmund, W. G., Babin, B. J., Carr, J. C., & Griffin, M. (2013). Business Research Methods, 9th International Edition. *South-Western Cengage Learning, Canada*.

Zulganef. (2016). Pemodelan Persamaan Struktur. Aplikasinya menggunakan AMOS 5. *Bandung: Penerbit Pustaka*.