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Implementation of Quality Management towards the Internal Service Quality and Trust in Management and its Impact on Job Satisfaction: The Role of Moderation of the National Health Insurance System

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ABSTRACT

This research aims to explain the effects of the Implementation of Quality Management towards the Internal Services quality and Trust in Management and its Impact on Health Workers' Job Satisfaction and to examine the role of moderation variable of the national health insurance system. The method used in this study was quantitative and research participants were health workers who work in 20 health centers with 365 health workers. The data were analyzed using the statistical method of Structural Equation Modeling with the WarpPLS approach. The results of the study found that the implementation of quality management had a significant effect on (1) internal service quality, (2) trust in management, (3) health workers' job satisfaction, (4) internal service quality had a significant effect on the mediation of the implementation of quality management towards health workers' job satisfaction (6) trust in management had a significant effect on the mediation of the moderation of the quality of internal service towards health workers' job satisfaction (8) the national health insurance system had a significant effect on the moderation of trust in management towards health workers' job satisfaction.

Keywords: Quality Management, Job Satisfaction, Trust, Insurance

JEL Classifications: I13, I18

1. INTRODUCTION

According to a Health care research report in 2017, the job satisfaction level of staff working at the public health center in West Kalimantan Province was categorized medium (51.4%). It was then followed by low (27.9%) and high (20.7%). The data indicate that the job satisfaction level of health workers in the province is not yet optimal because medium and low categories dominate it. In fact, staff's job satisfaction has a close relationship with the implementation of quality management, as illustrated by the research of (Amin et al., 2017). The research reveals that better quality management will likely increase the worker's job satisfaction.

As argued earlier, unfortunately, the implementation of quality management at the public health center was not yet optimal. It is evidenced by a lack of the human resource's competence in health science, making the management does not work well as stipulated in the Strategic Plan of the Health Ministry (2020-2024). The document asserts that the quality management of a public health center is carried out through an accreditation process. According to the Regulation of the Minister of Health No 46 of 2015, the accreditation of the public health center aims to illustrate the quality and performance of public health centers through a continuous improvement towards the quality management system and the program and service delivery

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system and programs, as well as the implementation of risk management.

As mentioned above, efforts to improve the quality management of the public health center and increase the capacity of human resources for the management of the health center are not in line with the Performance Report of the Sintang Health Office in 2020. The report reveals that many performance indicators still have not reached the target, this issue might show a gap in health services and is a phenomenon that occurs in health centers in Sintang Regency.

Issues that occurred in the public health center affected by the aforementioned phenomena encourage the author to solve them. Because this research is perceived as a scientific matter, the solution should also be conducted in a scientific way; by looking for variables that can be built to explain interpersonal, inter-departmental relationships within the organization to find appropriate solutions. Next the author reviews previous studies related to the variables that will be built in this research and finds inconsistencies in the research results, for example:

Quality management variable with job satisfaction variable, research results (Arunachalam and Palanichamy, 2017), (Addis et al., 2019), (Wang et al., 2019) found that quality management was significant on job satisfaction. Meanwhile, (de Menezes, 2012) and (Pedersen et al., 2020) claimed that quality management was not significant to job satisfaction The variables of internal service quality with job satisfaction also found inconsistencies in research results (Sharma et al., 2016), (Pantouvakis and Mpogiatzidis, 2013), (Abdullah et al., 2021). They discovered that the variable of internal service quality was significant to job satisfaction, Meanwhile, (Dauda et al., 2013) found that the internal service quality variable was not significant to the job satisfaction variable.

The inconsistency of the research results of the trust variable with the job satisfaction variable was also found. For instance, (Zeffane and Bani Melhem, 2017) found that trust was significant on job satisfaction, while other research (Inmaculada et al., 2020) found that trust was not significant on job satisfaction. Due to inconsistencies in previous studies, the author added mediating and moderating variables in this study. To re-examine and clarify the relationship between variables, mediating and moderating variables were added as follows:

- 1. The internal service quality variable mediates the quality management implementation and job satisfaction variables for health workers.
- The variable of trust in management mediates the variable of implementing quality management and the variable of health workers' job satisfaction.
- 3. The national health insurance system moderates the variable of internal service quality and the variable of job satisfaction of health workers, as well as moderating the variable of trust in management and the variable of job satisfaction of health workers.

The mediating and moderating variables in this study distinguish it from previous ones. The problems at the public health center, as illustrated by the phenomena at the public health center in Sintang and the inconsistency of previous research, became the basis for doing this research.

2. LITERATUR REVIEW

2.1. Quality Management

(Harteloh, 2003) states that quality describes the direct characteristics of a product: easy to use and so on. Health Center Quality Management is an effort to improve the health status of the community through the accreditation of the public health center as stipulated in the Minister of Health Regulation no. 46 of 2015. The main objectives of the certification of the public health center are to improve the quality of health services and patient safety and to increase protection for health workers, the community, and the environment. According to that regulation, the accreditation assessment includes the following:

- 1. Management Administration Group
- 2. Community Health Efforts Group
- 3. Individual Health Efforts Group

2.2. Internal Service Quality

(Stauss, 1995) states that internal service quality is the service provided by organizational units to people who work in departments or employees within the organization. (Prakash and Srivastava, 2019) argue that internal service quality can play a central role in designing internal customer care and satisfaction because internal customers are employees within the organizational unit. (Skarpeta et al., 2020) stated that internal service quality in public organizations was carried out in order to determine the key elements that determine the concept of internal service quality and to identify factors that support the achievement of internal quality levels. Further, (Moores and Reynoso, 1995) said that internal service quality occurs because of the internal interactions that occur between departments in the company. Organizational dynamics are of particular relevance to service production and delivery in service organizations. Thus, interactions between units/departments can serve each other so that employees can receive services from other units or departments. On the other hand, the employee continues to provide services to the company's customers. The quality of internal services greatly influences the services provided by employees to the company.

2.3. Internal Services Quailty in the Health Sector

Internal customers are health units, both work units, and employees such as doctors, nurses, and other medical professionals. These internal customers must be served well to improve performance and job satisfaction. (Parasuraman et al., 1985) have identified five dimensions of quality service, namely: (1) Tangible is the ability to show existence to external parties, (2) Reliability is the ability to provide real, real services as promised. (3) Responsiveness refers to the desire of staff to help customers and provide responsive service. (4) Assurance is the knowledge and courtesy of employees, and the ability to gain trust and confidence (5) Empathy is personal attention to customers.

2.4. Job Satisfaction

Job satisfaction is an attitude or response to his work that indicates a deviation between the worker's number of awards and the amount

that the worker believes they should receive (Robbin, 2003). (Luthan et al., 2008) stated that job satisfaction is an employee's emotional state in which a meeting point occurs or does not occur between the service limit of employees and the level of remuneration, both financial and non-financial. In other words, the level of employee satisfaction with their work is not only measured through salary but also other factors such as work comfort, communication, facilities, and others., (Robbins and Judge, 2011) states that job satisfaction can be influenced by several factors, such as mentally challenging work, equitable rewards, supportive working conditions, and supportive colleagues. Here are the explanations of each factor:

1. Mentally challenging work

The mentally challenging work factor of employees in job satisfaction illustrates that employees prefer jobs that allow them to maximize all of their abilities freely when completing the given work. Usually, employees really expect a response from superiors about how well the job is done. Jobs that are not challenging often make employees bored. Conversely, too challenging jobs tend to be difficult to do and frustrate employees. In short, the challenges of work between these two extreme limits make employees happy and satisfied.

2. Equitable rewards

Employees want fair and expected organizational policies, especially in terms of pay and promotion opportunities. Although not all employees aim to make money alone, job satisfaction will be achieved if salary payments are made fairly, in accordance with the scope of work, employee abilities, and applicable standards.

3. Supportive working conditions

Employees will always pay attention to the work environment to get a sense of comfort. Employees do not like work facilities that are unpleasant and dangerous. Employees want a work environment that resembles the atmosphere when they are at home.

4. Supportive colleagues

Employees do not just work for money or physical rewards. For most employees, work is basically to meet the needs of social interaction. Having positive co-workers support will provide employee job satisfaction. In addition, leadership behavior also affects employee job satisfaction.

2.5. Trust in Management

(Mayer et al., 1995) points out that trust is a willingness to believe in the actions of another party with the hope that the other party will act in accordance with the expectations of the person who believes in them, regardless of the ability to monitor or control that party. (Tseng and Chung, 2017) said that trust must be maintained continuously because trust has logical consequences. Trust in management is an indication of employee reactions to the support and encouragement given to management. (Chams-Anturi et al., 2020) explains that managers can use tools to increase organizational trust, which will eventually help to improve company performance. Since trust can make employees adopt performance-related behaviors, managers can use trust as a mechanism to encourage more stable relationships, increase the transfer of existing knowledge, facilitate

experimentation, and express ideas. In this case, it seems that managers or organizational leaders can make employees trust the organization to create trust in management.

2.6. National Health Security System

Law Number 40 of 2004 on the National Social Security System (SJSN) mandates that the social security program is mandatory for all residents, including the Health Insurance program, which is managed through social security administering agency The social security administration body has been regulated in Law Number 24 of 2011 concerning the Social Security Administering Body (BPJS) In the Regulation of the Minister of Health No. 28 of 2014 concerning guidelines for the implementation of the National Health Insurance, the implementation of the National Health Insurance Program aims to provide health protection in the form of health care benefits in order to meet the basic health needs that are given to everyone who has paid dues or whose contributions are paid by the government. The targets for implementing the National Health Insurance Program are all components, starting from government participants, health facilities, and stakeholders, BPJS. BPJS has a strategic role in the implementation of the national health insurance system.

BPJS has a strategic role in the implementation of the national health insurance system. The results of the study (Nugrahaningsih et al., 2021) concluded that increasing BPJS service motivation was able to improve employee performance. Moreover, improving performance will improve the service of the national health insurance system. Motivation also influences job satisfaction (Setyadi et al., 2020). This means that the increasing motivation of services in the national health insurance will further increase employee job satisfaction.

2.7. Principles of Implementation

When implementing the National Health Insurance System (JKN), the Health Social Security Administering Body refers to the provisions mandated in Law Number 40 of 2004 on the National Social Security System (SJSN), namely:

1. Mutual cooperation

The principle of mutual cooperation means that participants are able to help those who are less fortunate. In addition, healthy participants help the sick. This is realized because participation is mandatory for all Indonesians.

2. Non profit

Funds managed by the Health Social Security Administering Body are trusted funds collected from participants on a nonprofit basis with the aim of not seeking profit

3. Openness

The principles of transparency and prudence management underlie all fund management activities originating from participant contributions.

4. Portability

The principle of social security portability is intended to provide ongoing guarantees to participants.

5. Participation is mandatory

Mandatory participation is intended so that all people become participants so that they can be protected. Although participation is mandatory for all people, its implementation is still adjusted to the economic capacity of the people and the government, as well as the feasibility of implementing the program.

6. Trust funds

Funds collected from participant fees are deposited with the organizing body to be managed and possible to optimize these funds for the welfare of participants.

2.8. Organizational Theory

The organization is a unit that enables society to achieve a goal that cannot be achieved by individual efforts. Meanwhile, organizational behavior is the study of individuals and groups in the organizational environment. Organizational Theory (Laegaard and Binsley, 2006) divides the goals of the organization into three levels. The first is the socio-psychological level, in which organizational theory focuses on interpersonal/individual relationships in organizations that are interrelated to achieve their respective goals. The second is the structural level, where the organizational theory focuses on the organization in general and the parts within it such as divisions, sub-divisions, and units. At this level, the organizational theory explains the existence of relationships between units, divisions, and parts of the organization that are interrelated to achieve goals between these units. The third is the macro level, the namely organizational theory that focuses on organizational relationships with other organizations to achieve their goals.

Based on the description above, the authors propose the following hypothesis:

- (H1): The implementation of quality management has a significant impact on the internal services quality at the public health centers in Sintang Region.
- (H2): The implementation of quality management has a significant impact on trust in management at the public health centers in Sintang Region.
- (H3): The implementation of quality management has a significant impact on the job satisfaction of the health workers at the public health centers in Sintang Region.
- (H4): The internal services quality significantly impacts trust in management at the public health centers in Sintang Region.
- (H5): The internal services quality significantly mediates the implementation of quality management on the job satisfaction of health workers
- (H6): Trust in management significantly mediates the implementation of quality management on the job satisfaction of health workers
- (H7): The National Health Insurance System significantly moderates the internal services quality on the job satisfaction of health workers at the public health centers in Sintang Region.
- (H8): The National Health Insurance System significantly moderates trust in management on the job satisfaction of health workers at the public health centers in Sintang Region.

3. RESEARCH METHODOLOGY

This research used a quantitative approach with a survey method. The research was conducted in 20 public health centers in Sintang Regency, West Kalimantan Province. 365 health workers participated, and their responses were stored for data analysis. The data were then analyzed using a specific statistical method, called the Structural Equation Modelling with the WarpPLS 5.0 approach. Research model of the paper is presented in Figure 1.

4. RESULT

4.1. Outer Model Evaluation (Measurement Model)

4.1.1. Convergent validity

Convergent validity aims to examine the relationship between indicators in measuring constructs. Convergent validity is measured through the factor load value greater than or equal to 0.5-0.6. Meanwhile, the criteria for the AVE (Average Variances Extracted) value must be > 0.50 (Solimun et al., 2017).

Based on the convergent validity test with the loading factor in Table 1, the loading factor value was greater than 0.5 to 0.6 and has met the requirements for each variable.

Convergent validity test was carried out based on the AVE (average variances extracted) value with the criteria must be > 0.50 (Solimun et al., 2017). Based on Table 2, all variables in this study have met the convergent validity test based on the AVE (Average Variances Extracted) value because they have met the criteria for the Ave value > 0.50.

4.1.2. Discriminant validity

Discriminant Validity aims to test indicators of two constructs that should not be highly correlated and can be evaluated through the value of the AVE Square Root and the correlation between constructs (Ghozali, 2014). An indicator is claimed to meet Discriminant Validity if the square root value of AVE is greater (>) than the correlation between latent constructs (Ghozali, 2014).

Internal Service Quality (X2)

Implementation of quality management (X1)

Trust in Management (X3)

National Health Insurance System (Z)

Job Satisfaction of Health workers (Y)

Based on Table 3, the square root value of AVE (the value in brackets) was greater (>) than the correlation between the latent constructs of the other variables so that the five latent variables met the discriminant validity value.

4.1.3. Reliability measurement

Reliability measurement intends to see the internal consistency of the measuring instrument; to test whether the indicators from the instrument can be used to make measurements more than twice with accurate results (Ghozali, 2014). There are two ways to measure reliability, namely by looking at the composite reliability value. An instrument is claimed to be reliable if the composite reliability value is > 0.70 and has a Cronbach alpha value > 0.6 (Solimun et al., 2017).

Based on Table 4, the composite reliability value for the constructed variable meets the rule of thumb (>0.70). These results indicate that the latent variable has met composite reliability so that it can be concluded that the variable meets the requirements and is reliable. The reliability test with composite reliability above can be strengthened by using the Cronbach alpha value. Based on

Table 1: Convergent Validity Testing Based on Loading Factor

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Variable	Indicator	Loading
		Factor
X1 (Implementation of quality	X11	0.741
management)		
	X12	0.769
	X13	0.783
	X14	0.748
X2 (Internal Service Quality)	X21	0.703
	X22	0.780
	X23	0.784
	X24	0.708
X3 (Trust in Management)	X31	0.787
,	X32	0.803
	X33	0.840
	X34	0.757
	Y11	0.716
	Y12	0.737
	Y13	0.706
	Y14	0.804
	Y15	0.814
	Y16	0.747
Z (National Health Insurance System)	Z11	0.728
	Z12	0.778
	Z13	0.736
	Z14	0.719

Source: Primary Data Processed with WarpPLS 5.0 Software

Table 2: Convergent Validity Testing based on AVE

Table 2. Convergent valuaty Testing based on Av E	
Variable	AVE
X1 (Implementation of quality	0.579
management)	
X2 (Internal service quality)	0.555
X3 (Trust in management)	0.636
Y (Job satisfaction of health workers)	0.570
Z (National Health Insurance System)	0.548

Source: Primary Data Processed with WarpPLS 5.0 Software

the table above, the instrument can be declared reliable or fulfills Cronbach alpha because it has a Cronbach alpha value > 0.6.

Based on Table 5, the value of the significant weight indicator for the constructed variable has met the standard. Meanwhile, the result for VIF (Variance Inflitation factor) was smaller than 3.3. The table above shows that the formative latent variables have met the formative measurements, so it can be concluded that the variables meet the requirements, (Sholihin and Ratmono, 2021).

4.2. Effect Significance Test

Table 6 shows that the implementation of quality management (X1) had a significant impact on the quality of internal services (X2). In addition, the implementation of quality management (X1) also had a significant impact on the job satisfaction of health workers (Y) and on trust in management (X3). Then, the internal services quality (X2) was significant to trust in management (X3). The Z*X2 interaction was 0.011, whereas the Z*X2 interaction was more than 0.05. In other words, the National Health Insurance System (Z) was significant as a moderator of the relationship between Internal Service Quality (X2) and Job Satisfaction of Health Workers (Y). The Z*X3 interaction was <0.001, whereas

Table 3: Discriminant Validity Testing

Variable	X1	X2	X3	Y	Z
X1	(0.761)	0.528	0.466	0.366	0.289
X2	0.528	(0.745)	0.644	0.523	0.505
X3	0.466	0.644	(0.797)	0.583	0.476
Y	0.366	0.523	0.585	(0.755)	0.456
Z	0.289	0.505	0.476	0.456	(0.741)

Source: Primary data processed with WarpPLS 5.0 Software

Table 4: Reliability testing based on CR and CA

Variable	CR	CA
X1(Implementation of quality	0.846	0.757
management)		
X2 (Internal service quality)	0.832	0.731
X3 (Trust in management)	0.875	0.809
Y (Job satisfaction of health workers)	0.888	0.848
Z (National Health Insurance System)	0.829	0.725

Source: Primary Data Processed with WarpPLS 5.0 Software

Table 5: Formative measurement model

Variabel	Indikator	P	VIF
X2	X21	< 0.001	1.308
	X22	< 0.001	1.491
	X23	< 0.001	1.506
	X24	< 0.001	1.319
Y	Y1	< 0.001	2.263
	Y2	< 0.001	2.332
	Y3	< 0.001	1.529
	Y4	< 0.001	2.080
	Y5	< 0.001	2.660
	Y6	< 0.001	2.084
Z	Z1	< 0.001	1.376
	Z2	< 0.001	1.478
	Z3	< 0.001	1.364
	Z4	< 0.001	1.342

Source: Primary Data Processed with WarpPLS 5.0 Software

the Z*X3 interaction was more than < 0.05. This means that the National Health Insurance System (Z) is significant as a moderator of the relationship between trust in management (X3), and job satisfaction for health workers (Y).

Table 7 shows that the relationship between variables has a positive effect. The increasing implementation of quality management (X1) will further improve the internal services quality (X2). In addition, increasing the application of quality management (X1) will increase the job satisfaction of health workers (Y) and further increase trust in management (X3). Furthermore, improving the internal services quality (X2) will increase trust in management (X3). The interaction effect of Z*X2 is 0.118. This means that the National Health Insurance System (Z) has a positive effect as a moderator of the relationship between Internal Service Quality (X2) on the job satisfaction of Health Workers (Y). The interaction effect of Z*X3 is 0.162, which means that the National Health Insurance System (Z) has a positive influence as a moderating of the relationship between trust in management (X3) and job satisfaction for health workers (Y).

Table 8 and Figure 2 explain that the internal services quality (X2) significantly mediated the implementation of quality management (X1) on the job satisfaction of health workers (Y), where the p-value < 0.001 was more than < 0.05. Then, trust in management (X3) significantly mediated the implementation of quality management (X1) on the job satisfaction of health workers (Y), where the p-value was < 0.001 more than < 0.05

From the tables above, it can be concluded:

1. The implementation of quality management (X1) had a significant impact on internal services quality (X2)

Table 6: P values

	X1	X2	X3	Y	Z	Z*X2	Z*X3
X1							
X2	< 0.001						
X3	< 0.001	< 0.001					
Y	0.002	< 0.001	< 0.001			0.011	< 0.001
Z							

Source: Primary Data Processed with WarpPLS 5.0 Software

Table 7: Path coefficients

	X1	X2	X3	Y	Z	Z*X2	Z*X3
X1							
X2	0.531						
X3	0.215	0.576					
Y	0.151	0.210	0.383			0.118	0.162
Z							

Source: Primary Data Processed with WarpPLS 5.0 Software

Table 8: P value of Indirect for Paths with 2 Segment

	X1	X2	X3	Y	Z
X1					
X2					
X3	< 0.001				
Y	< 0.001	< 0.001			
Z					

Source: Primary Data Processed with WarpPLS 5.0 Software

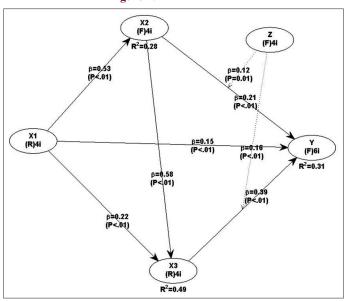
- 2. The implementation of quality management (X1) was significant to trust in management (X3)
- 3. The implementation of quality management (X1) was significant to the job satisfaction of health workers (Y)
- 4. The internal service quality (X2) had a significant impact on trust in management (X3)
- 5. The internal service quality (X2) significantly mediated the implementation of quality management (X1) on the job satisfaction of health workers (Y).
- 6. The trust in management (X3) significantly mediated the implementation of quality management (X1) on the job satisfaction of health workers (Y).
- 7. The National Health Insurance System (Z) was significant as a moderator of the relationship between internal service quality (X2) on job satisfaction of health workers (Y)
- 8. The National Health Insurance System (Z) was significant as a moderator of the relationship between trust in management (X3) and job satisfaction of health workers (Y)

5. DISCUSSION

Results of the study revealed that the implementation of quality management (X1) was significant with the quality of internal services (X2). This finding is in line with research (Fleischman et al., 2017) which claims that good management will provide good quality services. Another study (Pattanayak et al., 2017) also finds that higher-quality management improves service quality. This finding supports the main objective of quality management, which aims to improve overall quality, including process quality and service quality.

The implementation of quality management at the public health centers in Sintang is performed through accreditation. Based on the research results, it is clear that the implementation of quality management through accreditation improves the quality of service to employees or improves internal services. This is in line with research (Ghareeb et al., 2018) which shows that accreditation

Figure 2: Research results



triggers major changes in organizations both in improving the quality and level of organizational learning. Therefore, accreditation is imperative as the main effort to improve quality in primary care.

This study also found that the implementation of quality management was significant on trust in management at the public health centers in Sintang. This finding corroborates with research (Bugdol, 2013) which says that quality management is significant with trust. Improving quality management will increase trust in management. Other research (Azarian and Taghipour, 2020) found that the influence of the quality management system had a significant impact on organizational trust.

In addition, another important finding from this study is that the application of quality management has a significant impact on the job satisfaction of health workers. This finding is in line with research (Prajogo and Cooper, 2017) which argues that quality management increases job satisfaction One of the implementations of quality management in health centers is the application of accreditation. In another study (Kousgaard et al., 2019) it was found that the impact of accreditation makes changes in behavior and physical infrastructure. Furthermore, accreditation has increased competence and increased job satisfaction.

This study also found that internal service quality was significant to trust in management. This study is in line with research (Boonlertvanich, 2019) and research (Rasheed and Abadi, 2014), which found service quality significantly with trust. Research (Thaichon and Quach, 2015) found that service quality positively affects customer affective and cognitive evaluations, including satisfaction, trust, commitment, and value. It was also found that the higher the quality of service for health workers, the greater the trust in the management of the public health center. Research (Cuong and Khoi, 2019) also found that service quality was significant for trust.

This study also proves that the quality of internal services significantly mediates the relationship between the variables of the implementation of quality management and job satisfaction of health workers. In fact, previous research noted that there were differences in research results between the variables of quality management and job satisfaction. Therefore, in this study, the author added the internal service quality as a mediating variable to clarify the relationship between quality management variables and job satisfaction. In addition, it was also found that the variable of trust in management significantly mediated the relationship between the variables of implementing quality management and job satisfaction of health workers. Previous research indicated result differences in the relationship between quality management variables and job satisfaction. Therefore, in this study, the author added trust in management as a mediating variable to clarify the relationship between quality management variables and job satisfaction.

Based on the results of the moderation test, the P-Value of the interaction of the National Health Insurance System*Internal Service Quality (Z*X2) was 0.011, which means <0.05. The

National Health Insurance System had a significant impact as moderating the relationship between the quality of internal services and job satisfaction for health workers because the national health insurance system can strengthen the relationship between the quality of internal services for health workers and the job satisfaction of health workers. This supports the theory of job satisfaction (Robert et al., 2007), namely the Equity of motivation theory. In principle, this theory suggests that people will be satisfied as long as they feel there is justice. Feelings of Equity and inequity are obtained by comparing themselves with other people in the same class, office, or elsewhere. This theory identifies Equity in input, which is something valuable felt by employees as input to support their work, such as education, training, and work tools.

The National Health Insurance System influences the quality of internal services. It affects the public health center in serving health workers, ensuring the availability of medicines, or managing medical devices following the mandate of the Minister of Health Regulation No. 21 of 2016 concerning the management of capitation funds for national health insurance. That regulation stipulates that capitation funds can be used to procure medicines and medical devices at the public health center. The availability of medicines and medical devices will undoubtedly support the work of health workers so that it will increase the job satisfaction of health workers at the health center.

Next, based on the results of the moderation test, the P-values of the interaction of the National Health Insurance System*Trust to management (Z*X3) was <0.001, which means <0.05. This means that the National Health Insurance System is significant as a moderator of the relationship between trust in management and job satisfaction for health workers. The National Health Insurance System that moderates trust in management on health workers' job satisfaction at the health centers in Sintang Regency was accepted and could be proven.

The National Health Insurance System as a moderating variable in the study also has a significant relationship as a moderating relationship between trust in management and job satisfaction of health workers. In other words, the national health insurance system strengthens the connection of trust in management with health workers' job satisfaction.

The Health Insurance System influences trust in regulating and distributing national health insurance capitation funds in a transparent, open, and proportional manner, according to the Minister of Health Regulation No. 21 of 2016. This will ensure accountability and transparency of the distribution of capitation funds. Hence, increasing trust in the management of the health center will certainly increase the job satisfaction of health workers at the public health center. So management that is trusted in the national health insurance system is transparent, accountable, and shares the right of health workers so that it increases the job satisfaction of health workers.

6. CONCLUSION

In conclusion, this study found that the quality management variable influenced the job satisfaction of health workers at the

public health centers in Sintang Regency. The implementation of quality management at the health center was carried out through an accreditation process. The more optimal the implementation of the health center accreditation, the higher the job satisfaction of health workers in the health center. Job satisfaction of health workers at the public health center in Sintang Regency was also influenced by the variables of internal service quality and trust in management. By increasing the quality of internal services and trust in management, health workers' job satisfaction at the public health center in Sintang Regency will increase.

The National Health Insurance System is also proven to be a moderating variable of the relationship between internal service quality and job satisfaction of health workers. The National Health Insurance System strengthens the relationship between the internal services quality for health workers and the job satisfaction of health workers. The National Health Insurance System has an influence on the quality of internal services or for the public health centers in serving health workers, ensuring the availability of medicines, or managing medical devices. Availability of adequate medicines and medical devices will increase the job satisfaction of those working at the public health centers in Sintang Regency.

The National Health Insurance System is also proven to be a moderating variable of the relationship between trust in management and job satisfaction of health workers at the public health centers in Sintang Regency. The National Health Insurance System has an impact on trust in management in regulating and distributing capitation funds for national health insurance in a transparent, open, and proportional manner. This will increase the job satisfaction of health workers at the public health centers in Sintang Regency.

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