Impact of perceived value on perceived quality, perceived price, perceived location and satisfaction of hospitals in Kathmandu Valley

Article · June 2021

1 author:

Hem Bahadur Gurung
London Metropolitan University
1 PUBLICATION   **0** CITATIONS

SEE PROFILE

Some of the authors of this publication are also working on these related projects:

Impact of perceived value on perceived quality, perceived price, perceived location and satisfaction of hospitals in Kathmandu Valley View project

Impact of perceived value on perceived quality, perceived price, perceived location and satisfaction of hospitals in Kathmandu Valley View project

Management Investigation and Dissertation

Impact of perceived value on perceived quality, perceived price,

perceived location and satisfaction of hospitals

in Kathmandu Valley

Submitted By:	**Submitted To:**
Student Name: Hem Bahadur Gurung	Mr. Navraj Bhusal
Student Id Number: 16033030	Lecturer, BBA Faculty
Group: L3F	

Date: April 10th 2019

Management Investigations and Dissertation MN6P00
2019
Dissertation Assessment

EVALUATION PAGE

Student Name:

Student ID:

First Marker: Mr. Navraj Bhusal
Second Marker:

Assessment Criteria	Comments
• Extent to which you have identified aims and objectives and researched the chosen topic. • Extent to which you identified and discussed relevant research methodology and acknowledged its reliability, validity and ethics. • Extent to which data has been analyzed correctly and discussed with reference to previous academic research. • Extent to which you demonstrated that you understand limitations of your research design and provide suggestions for future research. • Extent to which you have structured and presented the dissertation professionally. • Extent to which you evidence appropriate academic writing and referencing.	

Overall Comments

First Marker:	
Second Marker:	
Date: 12/05/2019	**Signed:** **Second Marker:**
Agreed Mark:	**Refer:**

DECLARATION

I hereby declare that the dissertation entitled **"Impact of perceived value on perceived quality, perceived price, perceived location and satisfaction of hospitals in Kathmandu Valley"** submitted to theLondon Metropolitan University, London is an original piece of work under the supervision of **Mr.Navraj Bhusal,BBA faculty,Islington college,Kamalpokhari** and is submitted in partial fulfillment of the requirements for the degree of **Bachelor of Business Administration (BBA).** This dissertation has not been submitted to any other university or institution for the award of any degree.

Signature: hem

Name of Student: Hem Bahadur Gurung

Date:May 6th 2019

ACKNOWLEDEMENT

TABLE OF CONTENTS

LIST OF TABLES

LIST OF FIGURES

LIST OF ABBREVIATION

APPON   *Association of Pharmaceutical Producers of Nepal*

ANOVA   *Analysis of Variance*

CAGR   *Compound Annual Growth Rate*

DoHS   *Department of Health Services*

GDP   *Gross Domestic Product*

HIMS   *Health Management Information System*

IPD   *Inpatient Department*

OPD   *Outpatient Department*

SPSS   *Statistical Package for the Social Sciences*

ABSTRACT

Purpose-The purpose of this study is to analyze perceived value and its effect on perceived quality, price, location and satisfaction of hospitals in Kathmandu valley.

Design/Methodology/approach-The research is based on exploratory study on which causal comparative research design has been used. A convenience sampling technique was used in this study. 149 respondents have been taken as sample size through random sampling.

Finding- The result conformed that four-dimension location, perceived price, perceived quality and satisfaction are a distinct construct for perceived value.Perceived price,perceived location and satisfaction donot generally impact on perceived value of hospitals in Nepal. Perceived quality has been found as strong impacting predictor of perceived value. Price is the highly sensitive for health service in context of developing countries like Nepal. Price discrimination among the same level of hospitals might be insignificant cause on perceived value. Perceived location doesnot impact on perceived value because Nepalese people are more concern about the trust and relibility of service,reputation of hospitals and recommendation from our relatives and doctors rather than convenience hospital location. In additional, the correlation between price-quality and perceived quality-satisfaction have been found positive. The result revealed that hospitals should increase their service quality through its supportive visionary leadership, proper planning, education and training, availability of resources, effective management of resources, employees and processes, and collaboration and cooperation among employers in Nepal.

Research limitation/Implication-The research examine the concept of perceived value, perceived quality, satisfaction, perceived price and perceived location from the perspective of patients. It doesn't consider the perspective of service providers. This is a limitation as it only explores from the patients view which might be different from provider view.

Practical implication-The result indicate that managers should perceived value as mechanisms for competitive advantage that will lead patient loyalty among present customers.Quality should given preference to incrase perceived value of the hospitals.

Originality/Value-This study will enable hospital to have sound understanding of their perceived value on the effect of perceived value on the basis of perceived quality, perceived value, perceived price, location and satisfaction in order to build sustainable relationship with their patients and competitive advantage on market.

Keywords: Perceived value, perceived location, perceived price, perceived quality satisfaction, Hospitals, patients

CHAPTER 1: INTRODUCTION

1.1 Background of the Study

Organization has recognized customer perceived value as key factor for competitve advantage (Eggert & Ulaga, 2002) and strategy management (Mizik & Jacobson, 2003).Customer value is "the fundamental basis for all marketing activity" (Holbrook,p.22) And high value is one primary motivation for customer patronage. In this regard, Sir Deshmukh, Singh, and Sabol (2002) argue that customer value is a superordinate goal and customer loyalty is a subordinate goal, as it is a behavioral intention. According to goal and action identity theories, a superordinate goal is likely to regulate subordinate goals. Thus, customer value regulates "behavioral intentions of loyalty toward the service provider as long as such relational exchanges provide superior value. (Sirdeshmukh, et al., 2002,p.21). Woodruff (1997) further identified that customer satisfaction measurement without fulfillment of customer perceived value cannot really meet the customer expectation. It means that offering the real value to customer should be one of the most important goals of the company. Thus, providing the superior value to customer builds the competitive advantage. The key to success in this business world is to understand and meet the needs and minds of customer and ability to continually deliver the value better than other (Duchessi, 2003) .Barnes(2001) states a client will buy a buy or service after a commercial relationship generates value for a client. Marketing exists to deliver more value to customer as well as build a long term and mutually profitability relationship with the customer (Kotler, 2005). Lemon, et al.(2001) states value is the foundation stone for the success of consumer and supplier relationship. Customer value is uncertainty and helps in sustainable relationship with a firm (DongHee & Jang, 2013) and (Moliner et al., 2007) . Higher expensiveness in healthcare is the measure problem of the healthcare in today's world. (Leaf, 2018) Customer must serve well to get a better revenue. (Alam, 2009) The marketing concept also advised that the values of services provided were just what customers wished to exchange for their needs. Many researchers have found out that customer satisfaction is essential but not for customer loyalty and studies find out the perceived value is the real driver for customer loyalty. (Neal, 1999), (Sapicssapic et al., 2014) and (Hsu et al., 2008). Patients select institutions that they perceived as valuable to their overall health needs. Knowing the patients' needs and being able to satisfy the needs of patients helped retaining loyal behaviors (Macstravic, 1997). Kurt and Hacioglu2010) states higher the value that customer perceived and their level of satisfaction with the quality they received, the longer and stronger patronage to the product or businesses will be Gounaris ,et al.(2007) also suggested delivering superior customer value enables a firm to achieve favorably behavioral intentions. Chang , et al.(2009) recommend website owners should not only improve e-service quality, but also emphasize

customer perceived value. It has been found perceive value has led to customer loyalty in several industry like Telecommunication (Pura, 2005) , Banking (Rahi & Ghani, 2016) and retail industry (MolinaIrene & Saura, 2008).Since, Perceived value can be one of the key indicators of performance and measurement and essential for healthcare industry to lead customer loyalty towards its service and take competitive advantage. Thus, this study has aimed to investigate perceived vale on perceived price,location,satisfaction and perceived quality.

1.2 Introduction to Nepalese Health care sector

Health care industry is growing industry in Nepal. Healthcare in Nepal comprises about 5.5% of the GDP and is an important part of the services industry. After the political changes of 1990 the attraction of private investors towards the country's healthcare sector began to rise. Supported by the government' policy of economic liberalization, the sector saw massive investment with the opening of hundreds of private 2hospitals over the period of 27 years. Among the long list of private hospitals in Nepal are Norvic, Grande, B&B, Om, Kathmandu Medical College, Manipal Medical College, Vayvoda and Medicare who established themselves as the major multi-specialty healthcare centers by building a strong level of trust among Nepalis through quality service. A total number of 383 public and private hospitals were listed in HMIS under Department of Health Services (DoHS) in fiscal year (FY) 2014/15. Out of 383 hospitals 110 public hospitals and 273 private hospitals were reported to HMIS system in FY 2014/15. According to APPON, Nepal has 45 registered pharmaceutical companies which produce modern as well as basic medicines. It is now estimated that Nepal manufactured drugs have captured 48% of the domestic market. There are 2,064 registered private diagnostic centers in Nepal. Private diagnostic centers are predominantly multi-specialty in nature and offer a range of services including X-ray, ultrasound, pathological testing, cardiac testing and endoscopy. (Investment Board Nepal, 2019)

In 2014 Nepal's healthcare sector employed approximately 50,000 people, including skilled and semi-skilled personnel. Healthcare services are delivered by public and private sector entities and account for a total expenditure of over US$ 1 billion each year. The total market size of private sector hospitals to be over Rs 20 billion at present with a total bed strength of approximately 15,000. There is huge demand-supply 0.36 doctors,1.17 nurses,0.9 hospitals bed per 1000 people in compared with BRIC median 1.8,4.9 and 3.7 respectively. (Fund, 2014)

1.3 Research and research objective

Pathak(2017) studies on "analysis of Outpatients' Perceived Service Quality and Satisfaction in Selected Private Hospitals of Kathmandu using convenient sampling method" mentioned patient satisfaction and perceived quality in private hospitals is satisfactory in Kathmandu valley and recommended about lacking research related with private hospitals Shafiq, et al.(2017) studied on Service Quality Assessment of Hospitals in Asian Context: An Empirical Evidence From Pakistan

based on a cross-sectional study find out out need for qualitative studies to investigate more service quality dimensions in SERVEQUAL model to generalize in developing countries. Neupane and Devkota(2017) examined the impacts of service quality dimensions on patient satisfaction as a study of private hospitals in Nepal based on influence of positivism philosophy and deductive approach. mentioned about limitation of this model on service quality research on private hospitals of Nepal. Damen (2017) studies to measure the impact of perceived health care service quality on patient satisfaction at a major government hospital in Jordan which is limited to single hospital. (Shrestha KK et al.(2015), Mahnaz Razmjoee (2017) and Kalutharawithana & Jayawardena (2017) investigated on the perceived service quality of the patients in ABC private hospital based on self-administered questionnaire. It was limited to single hospital. Cengiz & Kirkbir (2007) researched on customer perceived value in hospital recommended to analyze the relation between perceived value and satisfaction.Heryanto, et al., (2016) examined the effect of quality services of pharmaceutical service on patient satisfaction on public hospital in Bandung, Indonesia based on Structural Equation Modeling find out only patient satisfaction cannot be determined by service quality but also influenced by customer value. Pan(2011) studied to investigate the patients' perceived values toward hospitals based on a fuzzy logic states there have been rare measurement on study of perceived value of hospitals.Pevec & Pisnik(2018) empirically assess the conceptual model with perceived service value as its central component using exploratory and confirmatory factor analyses with 800 patients concluded about non-monetary cost involvement in hospital perceived value. Since, this research aims to analyze the impact of the perceived value in perceived price. location, quality and patient satisfaction of hospitals in Kathmandu valley.

1.4 Research Problem

Health service has been challenging for its consumption and convenience in Nepal.The reason might be on purchasing quality health service is due to governmental and infrastructure issues. The percentage of the health budget against the total government budget has decreased by 1.7% from 6.1% in FY 2013/14 to 4.4% in FY 2017/18 including the health budget allocated to the local level. (Department of Health Services, 2016).

Nepal imports over US$ 50 million worth of medical consumables and tools each year has been growing at a CAGR of 17.6% since 2010. 12.6 billion medical commodities were imported in 2016/2017 from abroad. The corporate tax for healthcare is 25% excessively higher than other industry. Since, health care is quite excessive for consumption. Nepal's per capita annual expenditure on health is US$40.The general government's expenditure represents about 40 percent of total health expenditures, with the remainder covered by private sources, mainly Nepali households. Out-of-pocket expenditures byhouseholds represent 53 percent of total health expenditures. (Ministry

of Health, 2017) .In additional access of healthcare has been great challenge in rural areas due to the geographic feature. It takes peoples around 2 hrs. and 6 min to reach private hospitals and 2 hrs.28 min to reach public hospitals from their places. (Fund, 2014)

So, Hospital is facing the biggest issue as the people inability to meet the cost of proper healthcare and access to it considering our geographical difficulties. Most hospital and diagnostic infrastructure have been concentrated in larger cities including Kathmandu, Biratnagar, Butwal, and Pokhara. The involvement of private sector in health has been mainly in curative services, production of medicines and equipment, and they are concentrated in urban areas. (Ministry of Health, 2016). Since,city areas hospitals have been major destination for their medical treatement. Thus, this paper tries to explain the relationships of perceived location,perceived price,quality and satsifaction affecting the perceived value.

1.5 Research Question

Based on the research problem,the study has following questions**:**

- The effect of perceived price and location on perceived value of hospitals in Kathmandu valley
- The effectof perceived quality and satisfaction on perceived value
- The relationship between perceived price and perceived quality
- The relationship between perceived quality and satisfaction

Based on research questions, the study has following objectives:

The main objective of this research to analyze the effect of perceived price and location on perceived value and secondary objectives as given below:-

II) To analyze the effect of perceived quality on perceived value

III) To analyze the effect of satisfaction on perceived value

IV)To examine the relationship of price and quality

V)To examine the relationship of patient satisfaction and perceived quality

VI)To examine the relationship between perceived location and perceived quality

1.6 Significance of the study

This research will provide a framework of the perceived value decision in Nepalese healthcare sector. This will help the planners as well as policy makers to maximize the value of the concerned stakeholders

based perceived value. Health institution will be able to find focus on their competitive advantage based on the perceived value of hospitals in the future. This research can also be useful for the researchers that look for information regarding the perceived value.

1.7 Limitation of the Study

This research examined the concept of perceived value on price, quality, satisfaction and location form the perspective of patients. However, this research does not explore the perspective of service providers. This can be taken a limitation as it considers only from patient perspective which might be different from provider view. The R-square value of 31.25 % indicates that there may be other variables that contributed, but have not yet been defined or found. Based on these limitations, further research should explore other variables and retest the perceived value model with bigger and more various samples, including outside Kathmandu valley.

1.8 Organization of the Thesis

The remaining part of research is structured as follows**:**

Chapter 2:

This part represents literatures which are relevant to this research such as Mean Zeithaml theory as well as past studies which helps to generate the hypothesis. This section also presents the conceptual framework as well as hypotheses, defining conceptual framework briefly and description of relationship among the variables.

Chapter 3:

This sector discusses about research methodology and include detail discussion about research procedure, design and data collection methods which we use for this research.

Chapter 4:

This chapter presents the findings of the result with the help of SPSS as well as discussion of hypotheses and analyze based on previous research and literature review.

Chapter 5:

This chapter highlights the research by summarizing the main findings and also check whether research objectives that are presented in chapter 1 are proved or not and conclusion from the research as well as limitations and managerial implementation.

CHAPTER 2: LITERATURE REVIEW

2.1 Patient satisfaction

Patient satisfaction is a person's feeling after comparing its perceived service in relation to the expectation. (Kotler, 2000) Satisfaction is the result of experience after service experience (Parasuraman et al., 1991) patient satisfaction is defined as the state of mind of patient towards their experience which involves their positive and negative feeling. (Chang et al., 2013).It has been defined as the measurement of capability of service/product to meet customer expectation. (Alan et al., 2016).Healthcare quality theory of Donabedian (1980) proposed that satisfaction was the principal outcome of the interpersonal process of care. He argued that the expression of satisfaction or dissatisfaction is the patient's judgement on the quality of care in all its aspects, but particularly in relation to the interpersonal component of care. In the health care industry, the discrepancy and transgression theories explain that the patients' orientations and the provider conditions were different, and that if these orientations and conditions were matched with the patients expectations, then the patients would be satisfied, but if not, then the patients would be dissatisfied. Since, patients' satisfaction plays an important role in measuring the quality of care and continuing their services. (Gill & White, 2009)

2.2 Mean-end theory: Zeithaml Perceived value

Value implies tradeoff between sacrifice and benefits. In additional it implies interaction between a customer and products. Perceived value has two research approach one dimensional and multidimensional approach. From the unidimensional approach, Mean-end theory: Zeithaml's approach provides a theoretical and conceptual framework which connects between consumers value with their behaviour. This theory states decision process on consumption are influenced by linkage between product attributes, the perceived consequence of consumption and the personal values of customers. The purpose of this theory states individuals is goal oriented and use their products as a means of inferring desires end states. Many studies have used the mean-end approach to analyze various aspects of consumption behaviour. (Zeithaml, 1988)used this theory to adopt a model first proposed by Dodds and Monroe (1985) whose conceptualization of value has been based on quality-price relationship. Zeithaml described four different definitions of value-Value as low price, value as whatever the consumers want in products, Value as the quality obtained for the price paid and Value as what the consumer gets for what he or she gives. He has defined perceived value as bi-directional tradeoff between giving an getting. In this way, Zeithaml proposed mean-end model in which a hierarchy of

variables is established according to their level of abstraction. This model provides a picture of relationship among the concepts of price, perceived quality and perceived value. Based on this model, people evaluate products or services on the basis of their perception of price, quality and value rather than on the basis of objective attributes such as actual price or quality. (Zeithaml, 1988)indicates value is proposed to be a higher-level abstraction. Value is differed from quality in two aspects a. Value is more individualistic and personal than quality b. a high-quality concept than quality. Thus, Zeithaml model reflects both perceived price and perceived sacrifices are lower level attribute; that percievd quality is high level attribute and that the perceived value is a higher-level construct that is inferred from percievd sacrifice and quality. He has also differentiated attributes of products into intrinsic cues (physical part of product) and extrinsic cues (without part of product). He also proposed interesting distinction between objectives attributes and perception of those products. Balton and Drew offered a multi-stage model of service assessments in which they collaborated Zeithaml suggestion that value can be context specific. Although price and quality contributed to perceived value in their model, the components of quality were weighted differently when assessing value as distinct from quality. Bolton and Drew concluded Zeithaml that value model is inconsistent across individuals and different contexts. Perceived value is the consumer overall assessment of the utility of a product based on perception of what is received and what is given. (Zeithaml, 1988) It is essential to give real value to the patient. Customer perceived value include difference between the received benefits and sacrifice.) McDougall and Levesque(2000) defined perceived value as benefits that customer get in relation to the total cost which include price plus and other cost related with purchase. The benefits include both monetary and non-monetary sacrifices. The value in business market has been defined as perceived value in monetary units of the set of economic, technical, service and social benefit received from firm in sacrifice for the price paid for a product including the available suppliers offering and prices. (Dodd et al., 1991)

2.3 Perceived Price

Heskett(2007) has defined priced as give up or sacrificed thing to acquire a service. It is a multidimensional concept measured in terms of visitor's perception of the monetary and the nonmonetary dimensions of price associated with acquisition and use of service. Perceived price in terms of monetary value is measure of price paid for the service and non-monetary value measured with time and effort associated with service. (Cronin et al., 2000)

2.4 Location (Non-monetary cost)

Customers' value perceptions of a product or a service are not only affected by monetary costs, but influenced by other cost as well. Also sometimes named as behavioral price, non-monetary costs refer to non-monetary price of obtaining a service, which includes time spent in addition to physical and mental efforts made to search and attain the service (James F. Petrick, 2002) first of

all, nonmonetary costs -such as time and effort must be acknowledged since many customers consider time as an important commodity. Anything can be built into products/services to reduce time, effort, and search costs can reduce perceived sacrifice and thereby increase perceptions of value (Zeithaml, 1988). Nonmonetary costs are also likely to have a considerable effect on the purchasing intentions of the costumers. Moreover, sometimes they might be more important concerns than monetary cost. and be a reference point for customers while making a purchasing decision.

2.5 Perceived Service Quality

Perceived quality can be defined as the consumer's judgement about a product's overall excellence or superiority. Perceived quality is different from actual or objective quality, a higher level of abstraction rather than a specific attribute of a product and a global assessment that in some cases resembles attitude and a judgment usually made within a consumer's evoked set. Service quality is comparing between patient's perception and expectations. Expectations are consumer wants when they feel an ideal service provider should offer Perception refers to the consumer's service evaluation. (Zeithaml et al., 1993) SERVQUAL model is one of the most influential models being used primarily in service industry to measure service quality. Several stuides have done using servequal model in healthcare ((Emin & Boller, 1992); (Li, 1997) (Dean , 1999); (Lee et al., 2000); (CI et al., 2002) (C et al., 2008); (Lee MA et al., 2007), (RR, 2008); (Gheorghe et al., 2013); (Cho et al., 2004) (Dosen , 2010); (Zaim et al., 2013) (Suzana Markovi, 2014) .

It is also called gaps model' which SERVQUAL was coined by A. Parasuraman(1985) to evaluate service performance, based on five dimensions.

Tangibles refer to physical facilities, tools or equipment used to provide services and staff appearance.

 Reliability involves service consistency and dependability, which refers to the ability to deliver the service dependably and accurately that customers desire. Providers deliver the service at the right time and honors their promises, especially billing accurately, keeping records correctly and delivering the service to the customer at the designated time.

Responsiveness concerns service provider's willingness or readiness to offer a prompt service. It deals with timeliness, such as providing quick services to the customer, setting-up appointments as soon as possible, immediately sending the transaction slip to the customer so that s/he does not form the wrong impression and calling the customer quickly.

Assurance refers to employee knowledge, courtesy and the ability to convey trust and confidence. Employees should have the necessary knowledge and skills to provide the best service to their customers. Courtesy means politeness, respect, consideration and friendliness, such as consideration for

the customer's/consumer's property. Conveying trust and confidence means trustworthiness, believability and honesty.

Empathy refers to caring, knowing customer demands and individualized attention provided to patients. Capacity to understand patient needs refers to the ability to respond to them such as recognizing regular customers and learning their specific requirements.

Using SERVQUAL in healthcare services is inappropriate because the medical treatment is generally involved with a highly labor-intensive service procedure. (DE & SJ, 1993) There has been debate over the period that using the conventional SERVQUAL is that a quality service perceived by the medical professionals is not equal to the values perceived by the patients. (Zeithaml, 1988). In additional this model was unable to comprehensively evaluate the health care situation in light of the observations of price in Pakistan. (Javed & Ilyas, 2018).Several instruments were then developed specifically for the concept of perceived value. (Sweeneya & NSoutarb, 2001) and (Petrik, 2002).Since this research tries to recover this limitation of perceived quality price and location, satisfaction.

HYPOTHESIS AND CONCEPTUAL FRAMEWORK

3.1 Price-quality

Consumer use price as an indicator of quality. About 90 research studies in the past 30 years found positive relation between price and quality. Many researchers also have found similar results. (Lichtenstein & Bearden, 1989), (Tull et al., 1964) (McConnell, 1968) and Monroe and Krishnan (1985). Gerstner (1985) assessed the degree of positive correlation between quality and price for 145 products and concluded that the relationship between quality and price appeared to be product specific and generally weak. Chen, et al.(1994) studied price-quality relationship and found that this relationship is service specific.Dodds(1991)and Zeithaml(1988) disclosed positive relationship between price and quality but this relation does not hold if more cues are available. In several studies like (Oh, 2000), (Hanzaee & Yazd, 2010) and (Noel & Hanna, 1996) the overall association between price and quality is positive but Peterson (1985) argued that the relationship between price and perceived quality is not universal and the direction of relationship may not always be positive. ((Friedman & Lawrence, 1967), Shapiro 1973, (Peterson, 1970), (Peterson & Jollbert, 1976), (Olson, 1976), (A. Parasuraman, 1985) (P.G. & R, 1985). Jensen & Joyce (1986) states that more healthcare users are willing to pay more for higher quality services because they believe that higher prices mean higher quality. Steenkamp (1988) studied on the actual relationship between price and quality in the market found that most products price and objective quality are positively correlated. Correlations were higher for durable products than for nondurables. Price is a poor market signal of quality for most products. Monroe(2012) studies on the behavioral pricing research findings of price and how buyers respond to price. The study found that buyers also use price as an indicator of product quality. Based on previous research following

hypothesis has been designed. Johnson , et al. (1988)   studied on extend price/perceived-quality research into -the realm of consumer service found that the extent of belief in positive price-quality relationships varies across service types. Shintaputri & Wuisan(2017) understood the mediation effect in perceived price and perceived value relationship in smartphone industry. This research finds a significant relationship between perceived quality and perceived value.

H1: perceived price has positive relation with perceived quality.

3.2 Price-perceived value

Li, Monroe, and Chen (1994) stated that expected price significantly influences perceived value. They revealed that higher the expected price, higher will be perceived value. But Dodds (1991) disclosed that price has a negative effect on perceived value. Grewal et al. (1998) highlighted that price exerts significant influence on perceived value. Similarly, Oh(2000) found significant role of price in customer value process. Shifflet et al.(1997)and Chen & Dubinsky (2003) found a negative correlation between price and value. Cheng, et al.(2006) stuided on Quality Competition Among Hospitals: The Effects of Perceived Quality and Perceived Expensiveness on Health Care Consumers in Taiwan based on logistic regression models find out a patient's perception of expensiveness was determined simultaneously with the perceived quality. Korda & Snoj(2007) studied on the examination of factors affecting perceived value, emphasizing the relationship between perceived price and perceived value. The results reflected that statistically significant relationships exist and that perceived price has direct as well as indirect effects on perceived product value. Fedai(2012) analyzed the multi-item dimensionality of patients' perceived value in hospital service through convenience sampling procedure. Quality has significant impact on perceived value ($r=.45$, $t=19.78$). Bojanic (1996) examined the relationship among perceived value, price, quality, and satisfaction, and noted that price and quality determine perceived value, which correlates positively with satisfaction. Chen & Dubinsky(2003) and   (Shifflet et al., 1997) found a negative correlation between perceived value and price. Varki & Colgate (2001) found price has been strong predictor of perceived value. Bolton & Lemon (1999) states perceived value has its roots equation in equity theory with price.

H2: perceived price has a significant influence on perceived value.

3.3 Quality-value

Quality is an absolute measure whereas value is more relativistic and individualistic (Zeithaml, 1988), (Caruana et al., 2000).   Petrik (2002)and Zeithaml (1988) has shown quality leads to value. Monroe (1990) considered quality as being an input of value. Likewise,Sahadev & Edward(2011)and Dubinsky

(2003) supported relationship between service quality and customer value. (Monroe & Chapman, 1987) model perceived quality is positively related to perceived value. Olshansky (1995) stated that not all consumers want to buy the highest quality item. It may be implicit or explicit valuation of a product by many consumers. (Dodds, 1991), (Sawyer and Dickson,1984) A service may be high quality but if the consumer doesn't have enough money to consume it, its value will not be perceived as being as high as that of a product with lower quality but at affordable price. (Ozer et al., 2017) test the multi-dimensionality of perceived value in hospitals and to examine the direct or indirect relations between perceived value, patient satisfaction and patient loyalty in university hospitals in Turkey. All dimensions have significant effects on perceived value of patients in healthcare services. However, service quality, emotional value and professionalism have relatively more effects. Alex & Thomas(2011) has explained relative impact of product quality, service quality and contextual experience on customer perceived value and intention to shop in the future. Service quality and contextual experience have a major influence on customer perceived value. Cengiz & Kirkbir (2007) has analyzed the dimensionality of the concept of perceived value in the health sector which incorporates valuations of functional aspects and of affective aspects, thus obtaining an overall quantification of the value perceived by the patient using structural equations models. The most important factor that influence perceived value is service quality and price.

H3: perceived quality has positive influence on perceived value.

3.4 Location-quality

Bekar, et al.,(2013) studies on the effects of nonmonetary costs on perceived service quality as well as on hospital perceived value and customer satisfaction in the context of health care services. Th research has found that nonmonetary cost has strong and positive relation with perceived quality and satisfaction and also reveals that perceived value has significant influence on patient satisfaction.

H4: Nonmonetary cost (Location) has positive influence on perceived quality.

3.5 Location-value

Heinonen (2004)investigate the importance of time and location as value dimensions, and their relative importance in comparison with technical and functional dimensions. The result finds out that time and location are perceived as important value dimensions and that they are even more important dimensions than outcome and process elements. Faryabi, et al.(2012) researched on investigation the relationship between customer perceived value and customer satisfaction in banking industry. It has been found that there was a statistically significant and positive correlation between price and place and customer value and as a result between customer perceived value and customer satisfaction.

H5: Nonmonetary cost (Location)has positive Influence on perceived value

3.6 Satisfaction-value

Perceived value has positive impact on patient satisfaction (Jr. et al., 2000) and (Lin & Wang, 2006) Anderson et al. (1994) states that satisfaction depends of perceived value and the intentions that a customer has in the future are largely determined by perceived value . Malik (2012) studies on perceived service quality using SERVQUAL and then the role of perceived value as a mediating variable in the service sector of Pakistan find out that Perceived value was found strongly correlated with satisfaction.   ((Morar, 2013)) (Hwang et al., 2010), (Yang & Peterson, 2004), (Hur et al., 2012) and (HaemoonOh, 1999) (Raza et al., 2012)   found that perceived value and service quality have important and positive relationship with satisfaction. Sujipinyo & Chaipoopirutana(2014) found that customer perceived value, perceived price, affect, interaction orientation and found a positive effect on customer satisfaction. Fornell , et al.(1996) studied the nature and purpose of American Customer Satisfaction and explain the theory underlying the ACSI model using the nation-wide survey methodology. The study supported a positive influence of perceived value on customer satisfaction.Chongsanguan et al.(2017) investigated the effect of relationships between service quality, customer satisfaction, perceived value and customer purchase intentions in Bangkok's metropolitan rapid transit (MRT) system. A convenience sampling technique was used. perceived service quality and perceived value significantly influence customer satisfaction.

H6: Patient satisfaction has positive influence on perceived value

3.7 Satisfaction-quality

Wu , et al.(2008)proposes an integrative model of customers' perceptions of health care services based on the established relationship among four key constructs (service quality, perceived value, satisfaction, and behavioural intentions) using Structural equation modelling. The research found that Service quality exerted a greater impact upon satisfaction than perceived value. Man(2002) analyzed on Patients' and personnel's perceptions of service quality to position nuclear medicine organizations in the service triangle theory of Haywood Farmer. The research found that service quality is positively related to patient satisfaction.Duggirala, et al.(2008) studies on Patient-perceived dimensions of total quality service in healthcare based on Multiple regression analysis – Findings highlight seven distinct dimensions of patient-perceived TQS and the relationships among them. Positive and significant relationships among the dimensions and patient satisfaction have been found. Goldstein & Schweikhart (2002)studies on empirical evidence that focusing on the content addressed in the Baldrige Criteria leads hospitals to improvement on some dimensions of performance found that service quality is an indicator of patient satisfaction levels. Lim, et al.,(2018) examined a conceptual model for the

relationships between hospital service quality, patient satisfaction, hospital utilization, and hospital financial performance. The analysis results provide support for the previous findings that hospital service quality is positively related to patient satisfaction. (Mhasnah et al., 2018) investigate the effect of the application of service quality on patient satisfaction in Jordanian hospitals using the SERVQUAL model. The study uses samples from Al Hussein Military Hospital in Jordan, where 350 questionnaires were distributed to the admitted patients. quality of service dimensions affected patient satisfaction. Chand, et al. (2018) investigated on a cross-sectional descriptive study using simple random sampling on assess the satisfaction with the quality of health care among teaching hospitals in Kathmandu, Nepal. Patients from Kist and KMC medical patients satisfied with their hospitals service on average.Kayral (2014) studies to make a comparative analysis by assessing whether patients' service quality perceptions vary according to hospital types and in which quality dimensions these differences occur. The positive relationship between the perceived service quality and patient satisfaction was also evaluated in service quality dimensions. Neupane & Devkota (2017) examined the impacts of service quality dimensions on patient satisfaction as a study of private hospitals in Nepal. Samples of 490 patients from different 10 private hospitals which all are based on Kathmandu were considered in the study. Service quality has strong positive impacts on patient satisfaction as regression analysis demonstrates that service quality has significant impacts on patient satisfaction. private hospitals in Nepal are providing high level of service quality in the view of patients/customers. Similar results found by (Cronin et al., 2000) (Arsanam & Yousapronpaib, 2014),Khasimah Alimana(2016) , (Shrestha & Devkota, 2018) ,Malik(2018), (Devi & Muthuswamy, 2016) , (Pathak, 2017) and (B & M, 2018).Based on previous studies following hypothesis has been made.

H7: Patient satisfaction has positive relation with perceived quality.

3.8 Conceptual framework

Many studies have accomplished to determine a relation between healthcare service and patient satisfaction. (Pathak, 2017) and perceived price, quality and perceived value (Tahir, 2017) and nonmonetary value and perceived value and patient satisfaction (Orgev & Bekar, 2013) and perceived value has strong relation with patient satisfaction

Figure 1 Conceptual Framework

Figure 1 Conceptual Framework
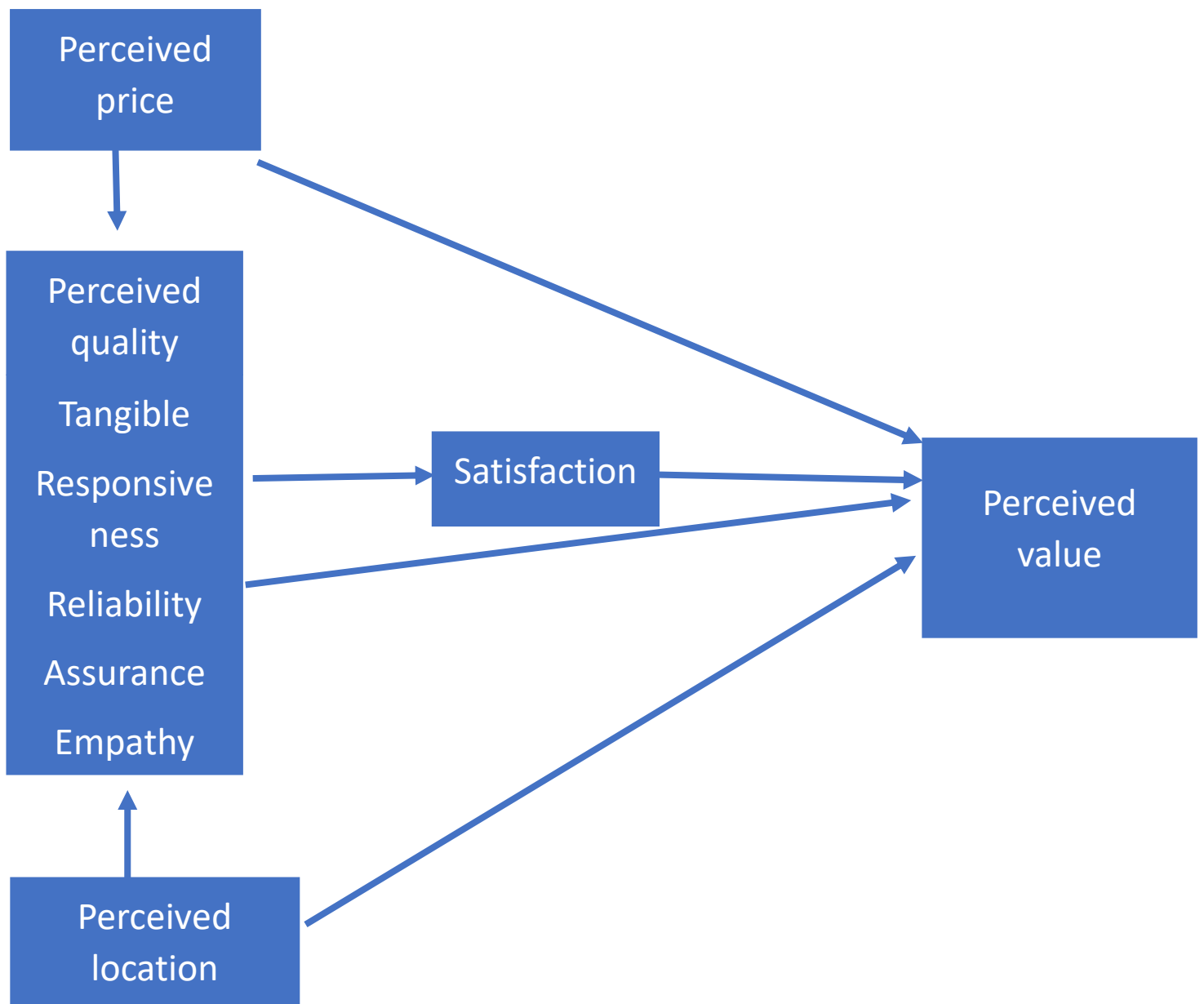
CHAPTER 3 RESEARCH METHODOLOGY

4.1 Research Design

This research was based on positivism philosophy where deductive approach was used. Correlation and regression test was done on perceived value with perceived price, quality and location. As per the data, causal comparative research design was used. This design examines the causal relation between independent (perceived price,perceived quality,perceived location and satsifaction)and dependent variables(perceived value).As a hypothetical construct, perceived value cannot be measured directly. (Chowdhury, & Abe, 2002)

4.2 Study population

The main institutions that delivered basic health services in 2072/73 are about 104 public hospitals, 303 private hospitals, 202 Primary Health Care Centres (PHCCs) and 3,803 health posts. (Department of Health Services, 2016).The no of patients In Nepal were 5,156,021 in private hospitals from IPD,OPD and others, 1,434,667 in community hospitals, 1205,046 in other hospitals in 2013. (Central Bureu of Statistics, 2014).Therefore this study took population as the patients admitted and visited in IPD, OPD and other services of hospitals in Kathmandu.

4.3 Sampling

Since, the study's unit of analysis was patients admitted in IPD, OPD and other services. According to the Central Bureau of Statistics (2014) there are 49 private hospitals in Nepal. Among them out of total,55.07 % patients visited hospitals located in central region. The study was focused in Kathmandu valley and used convenience technique to draw a sample. To solve the problem of bias extremity and outliers under convenience sampling, the sample size was increased to meet the standard of 384 units. (Cochran, 1977),where Zi(2014) noted that increase in sample size increases the power of convenience sampling technique.

4.4 Sample size

The study is focused in identifying the relationship and impact between variable perceived value with independent variable such perceived price, location, quality and satisfaction, where correlation model was used. Since, the majority of the literature review took an average sample size of 150 units, thus did not conform the accurate standard sample size. So,this study used Cochran(1977) formula for calculating the sample size when population is fixed.600 people were approached for respondents. Around 380 was found as respondents.Among them 149 were randomly select as a sample size for this

research. Sudman(1976) also suggested that a minimum of 100 elements is needed for each major group or subgroup in the sample. (Taherdoost, 2017;Blair, 2014)

4.5 Nature and source of data

This studyhas used primary source of data collection, used questionnaire technique to collect data required for the research questionnaire referenced from (Mahapatra et al., 2001) research on a patient satisfaction survey in Public hospitals. Since, this study examines the role of perceived price, location, quality and satisfaction on perceived value within the same period of time, therefore cross-sectional design is used.

4.6 Participants

Participants were chosen from three districts of Kathmandu valley. There are three prominent cities located in this places-Kathmandu, Bhaktapur and Lalitpur. Private hospital, hostels, banks and colleges were approached for permission to conduct survey at their permission and was informed that survey would not disturb their activities. All the participants were patients who were once admitted and got service from hospital base on last recent to previous six-month visit. The collection period was held between February first week to February 22,2019.

4.7 Measurement tools

This study had altogether 73 questions. Questionnaire had been translated and verified in Nepali by one of the expert Nepali lawyer from Kathmandu District Court in order to ensure the clarity of questionnaire. Later, Nepali questionnaire was translated same as English.

The questionnaire is divided into two parts-

Part 1: It consists questionnaire related with demographic of respondents such as information regarding hospital name, first time visit, primary hospital, gender, age, occupation, income, qualification, family size, marital status, location, distance, insurance, vehicle and purpose of visit. There are altogether 16 questions on demographic.

Part 2: The second part of questionnaire is based on perceived value. There are altogether 57 questions in this section. It consists hospital services related questionnaire with variables accessibility-availability, convenience, communication, technical quality, interpersonal aspects and financial aspects with closed ended question. Later it was restructured based on categories lie on perceived

SERVEQUAL (tangible, responsiveness, reliability, Assurance, Empathy), perceived value, price and location. After Cronbach test, the determinants of perceived quality consist items such as tangible (40 items, empathy (8) items, reliability (4) items, responsiveness (4) items, and assurance (7) items. In additional, perceived price has 7 items, satisfaction (8) items, perceived location (2) items and perceived value (3) items. These sample questions are positive-negative framework question on a five-point Likert scale ranging from 1(Strongly disagree) and 5(Strongly agree) and vice versa. So that higher score represents more perceived value with the hospital services. Thus, a score of 1 or 2 would mean poor performance. Score of 3 means the respondents was uncertain. Score 4 or 5 means good performance, by the hospital. In order to find out descriptive statistics of perceived value, perceived quality, perceived location, price and satisfaction Items converted into average standardized 100 in order to equalize. Around more than ten reverse questions were also used in order to check bias on respondents.

Our research had preplanned and designed following research matrix based on above objectives and questions using descriptive, regression and correlation tools.

Table 1: Research Matrix

Main Objective	Research Questions	Research Tool	Data source
1.To analyze the effect of perceived price and location on perceived value.	What's the effect of perceived price and location on perceived value of hospitals?	regression	Primary
To analyze the effect of perceived quality on perceived value	What's the effect of perceived quality and satisfaction on perceived value ?	regression	Primary
To analyze the effect of satisfaction on perceived value		regression	Primary
To examine the relationship between price and quality	What the relationship between perceivedd price and perceived quality?	correlation	Primary
To examine the relationship between patient satisfaction and perceived quality	What's the relationship between perceived quality and satisfaction?	Correlation	Primary
To examine the relationship between perceived location and perceived quality		Correlation	Primary
Sub Objective	**Sub Question**		
To identify which variable has highest mean	What is the name of variable has highest mean?	Descriptive	Primary
To identify which variable has lowest mean	What is the name of variable which has lowest mean?	Descriptive	Primary
To identify which variable has highest standard deviation	Writ the name of the variable that has highest standard deviation?	Descriptive	Primary
To identify which variable has lowest standard deviation	Write the name of the variable which has lowest standard deviation?	Descriptive	Primary
To examine the relationship between perceived price and perceived location	What's the relationship between perceived price and perceived location?	Correlation	Primary
To examine the relationship between perceived price and satisfaction	What's the relationship between perceived price and satisfaction?	Correlation	Primary
To examine the relationship between satisfaction and perceived location	What's the correlation between perceived location and satisfaction?	Correlation	Primary
To predict which variable has highest impact on perceived value	Name the most predictor variable which has higher impact on perceived value?	Regression	Primary
To predict on which relation has higest correlation	In which correlation has higher relationship between variables?	Correlation	Primary

4.8 Questionnaire administration

Since, this study questionnaire was self-report questionnaire. So, participants were informed about the topic and objective and procedure to be followed in fulfilling the requirements. Any Inquiry asked in the process of fulfilling the question were immediately answered by the researchers and colleagues to have complete fulfillment. The questionnaire was subjected to complete in 15 minutes and were given one to two-week time to fill as per their convenience. So, each participant was given adequate time in the process of fulfillment. Pilot testing was conducted by collecting feedback from 30 students who were admitted to the hospital last six months to assess the content validity and to ensure that the statements were easy for respondents to respondents.

4.9 Data analysis techniques

This Study used SPPS statistics 25 for data analysis and MS Office 2010 for data collection. Since, this study examines and analyzes the effect of perceived value on perceived quality, perceived location and satisfaction. So, correlation analysis and regression analysis were used along with descriptive statistics. Correlation of variables was used in order to find out their degree and relation of their variables. Apart from that regression test was also used in order to find out cause and effect relation of perceived quality, perceived location and satisfaction on perceived value.

5.0 Reliability and Validity Measurement

Reliability Test has been used in this report in order to test how scale produced are consistent results. Cronbach's alpha determines reliability degree of sampling which is expressed between 0 and 1. Cronbach's alpha is that mostly used for measurement of internal consistency. If the alpha is near to 1, specific sampling is higher internal consistency or comfortable for analysis. Cronbach's value must be at least between 0.6 and 0.7 or higher to confirm consistency and reasonable within range 0.67 to 0.87. (Taber, 2018) In all the factor analyses, the assumptions pertinent to this method were assessed, and, in all cases, the final factor analyses met the criteria. The designed tool was guided by supervisor and examined by module leader to obtain content validity.

Based on our objective have estimate perceived value as dependent variable and dependent variable perceived quality, price, location and satisfaction. The linear regression we have assume-

A =k + w*perceived price + x*perceived location + y*perceived quality + z*satisfaction

where,
A=perceived value
k=constant
w=coefficient of perceived price
x=coefficient of perceived location
y=coefficient of perceived quality
z=coefficient of satisfaction

CHAPTER 4 FINDINGS AND ANALYSIS

5.1 Reliability Test Result

Table 2:Reliability Test

Variables	Cronbach Alpha
Perceived value	0.716
Perceived quality	0.77
Perceived location	0.863
Perceived price	0.727
Satisfaction	0.69

Cronbach's α for the construct of perceived service quality was 0.7,perceived value 0.716, perceived price 0.727, satisfaction 0.690 and perceived location 0. 863.Also, all item's reliability statistics are higher than 0.6, and it means each item reach to the acceptable level.

5.2 Descriptive Statistics

This study finds the mean and standard deviation of perceived value,perceived quality,perceived location,satisfaction and perceived value

Table 3:Mean and standard deviation of perceived value and its determinants

		Mean	Std.Deviation
Perceived price	61.3423	17.51072	
Perceived value	63.5794	20.96076	
Perceived location	61.4094	26.86352	
Perceived quality	63.9771	12.60623	
Satisfaction	66.6443	13.37407	

Satisfaction which has mean 66.64 represents that 66.64 respondents have rated satisfaction. Perceived value has mean 63.57 represents average 63.57 have rated perceived value.

Perceived price which has mean 61.34 represents 61.34 respondents rated perceived price. Perceived quality has mean 63.97 represents 63.97 respondents have rated perceived quality.Perceived location has higher mean 26.86 which represents perceived location is distributed from its mean by 26.86 variance in comparison with others.Perceived quality has SD 12.60 which represents it is scattered from its mean by 12.60. It represents that the result of perceived quality is more consistent from its mean.

5.3 Correlation Analysis

Correlation analysis has been used in this research in order to find out the relation between perceived value, perceived quality, price, location and satisfaction. The result of the analysis shows Independent variables (perceived quality, price, location and satisfaction) and the dependent variable (perceived value) have a significant and positive relationship at 0.01 level. According to medical literture review,if Pearsons r coefficient exists between ±0.5 to 0.7, it has moderate spositive/negative correlation and below the ±0.5,it has low postive/negative correlation (Mukak, 2012)

Table 4: Relation between perceived value-price-quality-location-satisfaction

	Perceived value	Perceived location	Perceived price	Satisfaction	Perceived quality
Perceived value	1	0.107	0.319	0.422	0.589
Perceived location		1	-0.008	0.178	0.147
Perceived price			1	0.467	0.591
Satisfaction				1	0.682
Perceived quality					1

Bivarate analysis for all variables was conducted and their result indicates that all the variables have significant correlation with one another.The correlation between perceived value and perceived price (r=0.319, p>0.01) is positive and low correlation which states that perceived value and perceived price increases simultaneously.

In additional, the correlation between perceived value and perceived location (r=0.107, p<0.05) is positive and negligible. perceived location and perceived value increases simultaneously.

H5: Nonmonetary cost (Location)has positive Influence on perceived value

To analyze the impact of location on perceived value, regression analysis was done. The table shows that ($_\beta$=0.015, p>0.05). The hypothesis is rejected. Perceived location doesnot impact on perceived value.The correlation between perceived value and perceived quality (r=0.589, p<0.01) is moderate and positive which states perceived quality and perceived value increases simultaneously.

The correlation between perceived value and satisfaction (r=0.422, p<0.01) is low and positive which states that perceived value and satisfaction increases simultaneously.

The correlation between perceived price and perceived location (r=-0.008, p<0.05) is inverse which represents when   perceived price and perceived location doesnot increases simultaneously.

The correlation between perceived price and perceived quality (r=0.591, p<0.05) is positive and moderate correlation which states that perceived price and perceived quality increases simultaneously.

H1: Perceived price has positive relation with perceived quality.

The correlation between perceived price and satisfaction is (r=0.467, p-value<0.01) is positive and moderate correlation which states perceived price and satisfaction increases simultaneously.

The correlation between perceived location and perceived quality (r=0.147, p<0.05) is weak and positive correlation. Which states perceived location and perceived quality increases simultaneously.

H4: Nonmonetary cost (Location) has positive influence on perceived quality.

The correlation between perceived location and satisfaction (r=0.178, p<0.05) is negligible and positive correlation which states perceived location and satisfaction increases simultaneously.

The correlation between perceived quality and satisfaction is (r=0.682, p>0.00) is moderate and positive, which defines perceived quality and satisfaction increases simultaneously. The hypothesis is positive.

H7: Patient satisfaction has positive relation with perceived quality.

In conclusion, satisfaction-perceived quality(r=0.682) has highest correlation in comparison with other correlation and lowest correlation between perceived price-location relation.

5.4 Regression Analysis

The general purpose of enter regression is to investigate more about the relationship between several independent or predictor variables and a dependent variable. Here we are using regression analysis in order to find out the cause and effect relationship of perceived value on perceived quality, price, location, price and satisfaction. R-squared is a statistical measure of how close the data are to the fitted regression line. Table 4 shows the model summary of regression analysis.

Table 5 Model summary

Model	R-square
1	0.349

The model 1 has been obtained simple regression 0.591. We found that R square of our model is 0.349 (R^2= .349). R-square-0.349. represents 34.9% of the total variance in perceived value is determined by independent variables such perceived price, perceived quality, perceived location and satisfaction and rest i.e. 0.651% is determined by other error factors and other variables which are outside of this model. The result table shows that significant value is .000 (F=19.300) which is lower than 0.05. Thus, it is highly significant and rejects the null hypothesis. Since, the model is good.

The linear regression analysis estimates following linear regression function -

Perceived value =-0.059-0.024*(perceived price) + 0.015*(perceived location) + 0.108*(perceived quality) + 0.025*(satisfaction)

where, k=-0.059, w=-0.024, x=0.015, y=0.0108 and z=0.025

Table 6: Regression Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std.Error	Beta	t	Sig.
1	Constant	-0.049	1.218		-0.04	0.968
	Perceived location	0.015	0.081	0.013	0.184	0.854
	Perceived price	-0.024	0.043	-0.047	-0.553	0.581
	Satisfaction	0.025	0.055	0.043	0.462	0.645
	Perceived quality	0.108	0.019	0.585	5.751	0

Based on enter regression model from the result, four predictor variables were found to be significant in explaining perceived value. Perceived price has significance level $p< 0.581$, perceived location $p<0.854$, perceived quality $P <0.000$ and satisfaction $p<0.645$. Since, perceived quality has significant influence on perceived value whereas perceived location, price and satisfaction has insignificant impact on perceived value. Perceived price has unstandardized coefficients ($_\beta$= -0.049) which represents one unit change in perceive quality will have reverse impact by 0.049 units in perceived value whereas perceived location has unstandardized coefficients ($_\beta$ =0.015) which represents one unit change in perceived location will be changed by 0.015 units in perceived value. Perceived quality has unstandardized coefficients($_\beta$=0.108) which represents on unit change in perceived quality will change 0.108 units in perceived value or vice versa. Satisfaction has unstandardized coefficients($_\beta$=0.025) which represents on unit change in satisfaction will change 0.025 units in perceived value. Standard coefficients represent role of its impact on dependent variable. Perceived quality has standard coefficients 0.585 comparatively higher than other variables. Standard coefficient represents its impact on dependent variable. Here, standard coefficient of perceived price. location, quality and satisfaction are found – 0.047,0.013,0.585 and 0.043 respectively.Perceived quality has higher standardized coefficient than any other dependent variables. Standardized coefficient of perceived

quality:0.0585>0.043.0.013.-0.047. Since, perceived quality is strongest predictor for impact on perceived value.

H2: perceived price has positive influence on perceived value.

To analyze the effect of perceived price on perceived value. Regression analysis was done. The hypothesis is rejected as it can be seen in the regression coefficient table ($_\beta$=-0.024, p>0.05). Since Perceived price doesnot impact on perceived value.

H3: perceived quality has a positive influence on perceived value.

To analyze the impact of perceived quality, regression analysis was done. The hypothesis is accepted as it can be seen in the regression coefficient table ($_\beta$=0.108, p<0.05). Since, perceived quality has significant impact on perceived value.

H6: Patient satisfaction has positive influence on perceived value.

To analyze the impact of satisfaction on perceived value, regression analysis was done. The Pearson coefficient table shows that ($_\beta$=0.025, p>0.05). The hypothesis is rejected. Satisfaction doesnot impact on perceived value.

**Table 7: Residual Statistics**

Standard Residual Mean
0

The mean standard residual value is zero which fit for the model.

Figure 2 Histogram for perceived value

Histogram
Dependent Variable: Perceived value
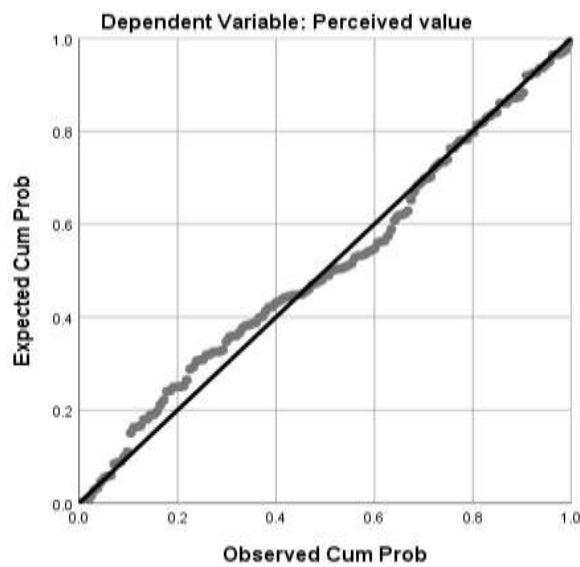Mean = -3.99E-16
Std. Dev. = 0.986
N = 149
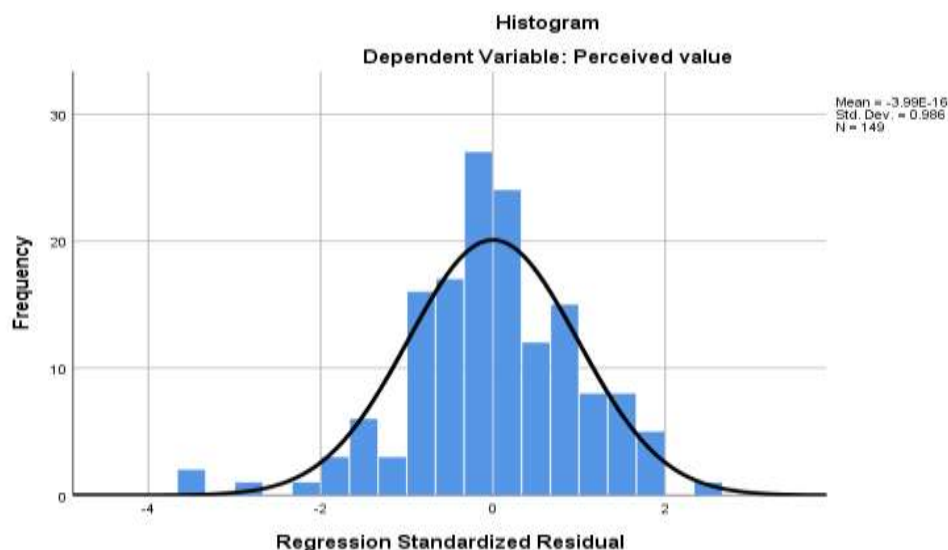
Standard deviation is 0.986 which shows lower variance in distribution. Since, data is normally distributed**.**

Figure 3 Scatterplot diagram
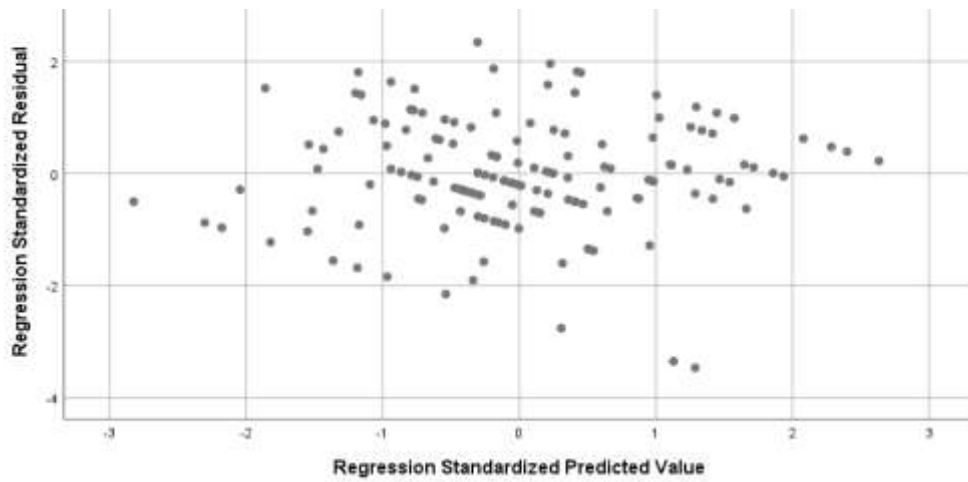
The data follow scatter pattern which is homosedasticity.Since the data is consistent(see fig 2)

Figure 4 Normal P-P Plot regression Standardized Residual

The data follows pattern of the line. Since, data is more acceptable.

5.6 Discussion

The main objective of this study is to analyze the effect of perceived price and location on perceived value. Result of the analysis revealed that perceived price and location doesnot have impact on perceived value. We found that perceived price doesnot impact on perceived value. The reason might be the price discrimination between hospitals in Kathmandu valley. Another reason might be higher price in comparison with service quality hospitals are delivering. Increase in price decreases utilization (Yoder, 1989) and cause higher impact on developing countries. (Jacobs & Price, 2004) Price elasticity of demand for health services is likely to be higher for lower income groups. (McPake, 1993)These results are inconsistent with Li, Monroe, and Chen (1994) which shows price has direct relationship with price. But similar result has found with (Dodds, 1991)which found price has negative impact with perceived value. It has simialrities with (Shifflet et al., 1997) and (Dubinsky, 2003) study which predict price has negative influence on perceived value i. e as price increases value decreases. Snoj(2007) studies on the examination of factors affecting perceived value, emphasizing the relationship between perceived price and perceived value. The result found that perceived price doesnot have impact on perceived product value. Bojanic (1996) studied on the relationship among perceived value, price, quality, and satisfaction, and noted that price and quality determine perceived value, which correlates positively with satisfaction. Our finding is different with the finding of Dubinsky (2003) and Shifflet (1997) found price has indirect relation with perceived value. But result is also diverse from the output of Varki & Colgate(2001) and Lemon (1999) which supports price has predictor of perceived value.

In additional,we found that Perceived location doesnot impact on perceived value. The Nepalese people are more concern about the trust and relibility of service,reputation of hospitals and recommendation from our relatives and doctors rather than convenience hospital location.It is inconsistent with the finding of Mwikisa & Hjortsberg, 2002) where People are more aware about convenient location of hospital in Zambia. In today's era, people are more conscious with their time and money. They are quiet motivated by convenient way of living but in context of Nepal we are still lacking in convenience location due to weak infrastructure,network,communication and roadways.Hospitals that are located in convenient places save their extra time and cost for transportation to reach hospitals in developing countries . (Hjortsberg, 2003) Since, perceived location doesnot impact on perceived value in context of Nepal. Our result is also inconsistent with Heinonen(2004) investigate the importance of time and location as value dimensions, and their relative importance in comparison with technical and functional dimensions. The result concluded out that time and location are perceived as important value dimensions. It is also insimilar with (Faryabi et al., 2012) result which found statistically significant and positive correlation between price and place and customer value.

The second objective of this study is to analyze the effect of perceived quality on perceived value. Our result reveals that perceived value has strong direct relationship with perceived quality. The reason

might be hospital facilities, responsiveness and assurance. (Pathak, 2017) Previous studies (Petrik, 2002) and (Zeithaml, 1988) support our result that quality has positive relationship with value. Monroe (1990) supports quality as being an input of value. Our result is consistent with Sahadev & Edward (2011) and Dubinsky (2003) which concluded quality as a direct relationship with perceived value. The result predicts that when patients are satisfied with service quality, they automatically get value from their service. Our result has similar result with Chapman (1987) which predicts perceived quality is positively related to perceived value. But our result is inconsistent with Olshansky (1995). The result concluded that a service may be high quality but if the consumer doesn't have enough money to consume it, its value will not be perceived.

The third objective of this study is to analyze the effect of satisfaction on perceived value. The main cause might be although Nepalese people are happy with the service they got but not get value of money they sacrifice and expect. It might be patients were satisfied with the doctors' care, accessibility of services, and nursing care. (Shrestha & Devkota, 2018) It has been found satisfaction has direct relationship with perceived value which is inconsistent with the study by Malik (2012) on perceived service quality using SERVQUAL and then the role of perceived value as a mediating variable in the service sector of Pakistan. The result found that Perceived value has strongly correlated with satisfaction. Raza, et al.(2012) found that perceived value has important and positive relationship with satisfaction. Similarly, Cronin, et al.(2000) studied on the efforts to conceptualize the effects of quality, satisfaction, and value on consumers' behavioral intentions found that Perceived value has positive impact on patient satisfaction.Sujipinyo & Chaipoopirutana (2014) also found perceived value has positive effect on satisfaction. Similar results are found (Morar, 2013) , (Lim, 2010), (Peterson, 2004), (Hur et al., 2012) and (HaemoonOh, 1999) and (Lin & Wang, 2006). (Fornell et al., 1996)discuss the nature and purpose of American Customer Satisfaction and explain the theory underlying the ACSI model using the nation-wide survey methodology. The study supported a positive influence of perceived value on customer satisfaction.Since our results differ with previous researchers.

The fourth objective of this study is to examine the relation of perceived price and quality. Our finding predicts that perceived price has positive correlation with perceived quality. The reason might be that people have general believe that higher price means higher quality in context of Nepal in consuming health service.We consumed quality of service based on the level of our purchasing price.The result obtained from Bearden(1989), (Tull et al., 1964) , (McConnell, 1968) and Monroe and Krishnan (1985) found positive relation between perceived price and quality. But our result is contradictory with the finding of (Gerstner, 1985) concluded that the relationship between quality and price appeared to be product specific and generally weak. (Chen et al., 1994) studied price-quality relationship and found that this relationship is service specific. Similar results found in (Dodds, 1991) and (Zeithaml, 1988) and predicted that this relation does not hold if more cues are available. The result is consistent with the result of (Oh, 2000), (Hanzaee & Yazd, 2010)and (Noel & Hanna, 1996) .The overall association

between price and quality is positive but inconsistent with (Peterson, 1985) argument that the relationship between price and perceived quality is not universal and the direction of relationship may not always be positive which is supposed by (A,1967), Shapiro 1973, (Peterson, 1970), (Peterson & Jollbert, 1976), (Olson, 1976), (A. Parasuraman, 1985)) (P.G. & R, 1985).Our finding supports with (Jensen & Joyce,1986;Monroe, 2012) concluded that in general people belief higer price means higher quality. So, more healthcare users are willing to pay more for higher quality services. But (Steenkamp, 1988)found that Price is a poor market signal of quality for most products. Our finding is not always same as defined by study by Johnson et al.(1988) on extend price/perceived-quality research into -the realm of consumer service found that the extent of belief in positive price-quality relationships varies across service types.

Our fifth objective is to examine the effect of perceived quality on satisfaction. The results show that perceived quality has significant impact on satisfaction.The reason might be people will satisfied with the hospitals when they perceived their expected service quality.It shows that Nepalese people are satisafied with hospitals based on service they are providing.The result is consistent with (Neupane & Devkota, 2017) examine the impacts of service quality dimensions on patient satisfaction as a study of private hospitals in Nepal. Samples of 490 patients from different 10 private hospitals which all are based on Kathmandu were considered in the study. Service quality has strong positive impacts on patient satisfaction. Similar result in (Wu et al., 2008) proposes an integrative model of customers' perceptions of health care services based on the established relationship among four key constructs (service quality, perceived value, satisfaction, and behavioral intentions) using Structural equation modelling. The research found that Service quality exerted a greater impact upon satisfaction than perceived value. (Fornell et al., 1996) states that satisfaction is quality driven rather than value driven. Similarly, (Man, 2002) analyze on Patients' and personnel's perceptions of service quality to position nuclear medicine organizations in the service triangle theory of Haywood Farmer. The result concluded that service quality is positively related to patient satisfaction. Our finding is consistent with (Lim et al., 2018) examine a conceptual model for the relationships between hospital service quality, patient satisfaction, hospital utilization, and hospital financial performance. The analysis results provide support for the previous findings that hospital service quality is positively related to patient satisfaction. (Mhasnah et al., 2018) investigate the effect of the application of service quality on patient satisfaction in Jordanian hospitals using the SERVQUAL model. Pathak (2017) studies on An Analysis of Outpatients' Perceived Service Quality and Satisfaction in Selected Private Hospitals of Kathmandu using convenience sampling method from 200 outpatients from private hospitals. Positive relationship is found between patient's perception of service quality and their satisfaction. The study concluded quality of service dimensions affected patient satisfaction. Similar results by (Chand et al., 2018), (Goldstein & Schweikhart, 2002) and (Duggirala et al., 2008), (Shrestha & Devkota, 2018) and (Malik, 2018).Our sixth objective is to examine the relation between perceived location and perceived

quality.Our result shows perceived location has positve relation wwith perceived quality,which is consistent with the finding by (Bekar et al., 2013) where nonmonetary cost has found positive with perceived quality in health institution.

CHAPTER 5 CONCLUSION AND RECOMMENDATION

6.1 Conclusion

This is the exploratory study on perceived value of hospitals in Kathmandu valley. The result shows that perceived price and perceived location doesnot impact on perceived value.In additional,satisfaction also doesnot impact on perceived value.But,there is significant relationship between perceived value and perceived quality. It is suggested hospital management to improve service quality of the hospital in order to enhance perceived value. Furthermore,. In additional, there is positive correlation between perceived price and perceived quality. Then, the result also showed significant correlation between perceived quality and satisfaction. Similar result also found in perceived location and perceived quality. The finding of this study indicate that the establishment of higher perceived quality will lead customers to have higher perceived value. In order to improve service quality, Shieh , et al.(2010) recommended that trusted medical staff with professional competence of health care is the most important criterion and mutually affects service personnel with good communication skills, service personnel with immediate problem-solving abilities, detailed description of the patient's condition by the medical doctor, and medical staff with professional abilities. Therefore, trainings on communication skills and problem-solving abilities would result in positive interaction for patients to trust medical staff.

Gaur, et al. (2011) emphasized that hospital providers must also learn to balance requirements from employees and patients to maintain a good relationship between patients and employees. hospitals should provide effective training and courses for all staff including nurses, doctors and general staff to enhance their skills in communication and motivation for them to provide a good service to patients to work productively. (Kumari, 2010) also mentioned about the need for training programmes on patient relationship management as a strategy to enhance employee's performance.

 Mosadeghrad (2014) argued that healthcare quality can be improved by supportive visionary leadership, proper planning, education and training, availability of resources, effective management of resources, employees and processes, and collaboration and cooperation among provider. Managers should develop their leadership skills and demonstrate their commitment to quality by establishing a shared vision and setting a clear direction for the organization. Managers should transform their organization's value system and ultimately the organizational culture, policies, and structure in order to meet the needs of their employees and customers. (Chua & Goh, 2002)

In conclusion, when the consumer perceives a significant value, person is willing to pay a higher price for the products and services. Clients should perceive that they are receiving value for their money and time. The value can be defined as supposed benefits of the purchase of a service. The benefits can include the reputation of the hospital, the reliability of the medical treatment, the personal care of the nurses, the appropriate advice and the advice of the doctors. In addition, in today's time it is essential to

sell value, not just a service with a higher price for medical service. The perceived value shows a negative relationship with the price because sometimes the price is not considered a monetary sacrifice, but also the time used in the queues and waiting lists in hospitals and the physical and mental efforts to access the service or the doctor desired, etc. In addition, the study also proves that the perceived value has a negative relationship with the perceived price. Therefore, the value refers to the cost that is more than a price. Therefore, health care companies should consider the total cost to the consumer when setting the price. Anything incorporated into health care services to reduce time, effort and search costs can cause an increase in the perceived value of the hospital. Non-monetary costs should be taken into consideration as a key component of the perceived value of the hospital and should not be considered as less important than any other factor, such as price, satisfaction, location and quality by hospital administrators.

6.2 Managerial implication

Practically, the findings of this research can provide valuable information for the management of healthcare service institutions in regards to perceived value. Managers can use the perceived value as mechanism for competitive strategy which will increase loyalty among the present customers. In addition to contributing to research this study will also contribute to practice by comprehensively positioning customer perceived value as a key source of competitive advantage in the context of relationship marketing, strategy, management policy and business model for healthcare industry in Nepal.

6.3 Recommendation

Hospitals should given preference on service quality through visionary leadership,active and cooperative participation of employee in responsiveness, effective management of resources, employees and processes,timely service,professionalism and collaboration and cooperation within service providers,proper utilization of resources in order to inhnace the perceived value.

Reference

A. Parasuraman, V.A.Z.a.L.L.B. (1985)) A Conceptual Model of Service Quality and Its Implications for Future Research. Journal of Marketing, 49(4), pp.41-50. Available at: v [Accessed 19 January 2019].

A. Parasuraman, V.A.Z.a.L.L.B. (1985) A Conceptual Model of Service Quality and Its Implications for Future Research. Journal of Marketing, (4), pp.pp. 41-50. Available at: www.jstor.org/stable/1251430 [Accessed 14 January 2019].

A.Zeithaml, V. (1988) Consumer Perceptions of Price, Quality, and Value: A Means. Journal of Marketing, 52(2-22), Available at: https://pdfs.semanticscholar.org/a54b/2631b97831fbea7d4155f4eff9a09220cb79.pdf

[Accessed 14 January 2019].

Alam, G.M. (2009) Can governance and regulatory control ensure private higher education as business or public goods in Bangladesh? African Journal of Business Management, 3(12), pp.890-906. Available at: http://www.academicjournals.org/AJBM [Accessed 11 January 2019].

Alan, W., Zeithaml, V.A., Bitner, M.J. & Gremler, D.D. (2016) Services Marketing: Integrating Customer Focus Across the Firm. McGraw Hill. Available at: https://www.researchgate.net/publication/315715048_Services_Marketing_Integrating_Customer_Focus_Across_the_Firm [accessed 11 January 2019].

Al-Damen, R. (2017) Health Care Service Quality and Its Impact on Patient Satisfaction "Case of Al-Bashir Hospital. International Journal of Business and Management, 12(9), p.147. Available at: https://doi.org/10.5539/ijbm.v12n9p136 [Accessed 6 December 2018].

Alex , D. & Thomas, S. (2011) Impact of Product Quality, Service Quality and Contextual Experience on Customer Perceived Value and Future Buying Intentions. European Journal of Business and Management, 3(3), Available at: https://dyuthi.cusat.ac.in/xmlui/bitstream/handle/purl/4657/Impact%20of%20Product%20Quality%2C%20Service%20Quality%20and%20ContextualExperience%20on%20Customer%20Perceived%20Value%20and%20Future%20Buying%20intentions.pdf?sequence=1 [Accessed 4 April 2019].

Arsanam , P. & Yousapronpaib, K. (2014) The Relationship between Service Quality and Customer Satisfaction of Pharmacy Departments in Public Hospitals. International Journal of Innovation, Management and Technology, 5(4), p.261. Available at: http://www.ijimt.org/papers/524-T043.pdf [Accessed 1 April 2019].

B , R. & M, H. (2018) The Impact of Service Quality Dimensions on Patient Satisfaction in the Private Healthcare Industry in Pakistan. Journal of Hospital & Medical Management, 4(3), Available at: https://10.4172/2471-9781.100044 [Accessed 18 March 2019].

b360. (2018) Ensure affordable minimum healthcare facility for all. Available at: https://www.b360nepal.com/ed-page/ensure-affordable-minimum-healthcare-facility-for-all.html [Accessed 15 January 2019].

Barnes, J.G. (2001) Secrets of Customer Relationship Management: It's All About How You Make Them Feel. Translated by J.G. Barnes. Available at: https://www.amazon.com/Secrets-Customer-Relationship-Management-About/dp/0071362533 [accessed 11 January 2019].

Bekar, C.Ö.a.T., Orgev, C. & Bkar, T. (2013) Non-Monetary Costs, Hospital Perceived Value and Patient Satisfaction in Health Institutions. International Journal of Alanya Faculty of Business, 5(2),

pp.87-97. Available at: http://www.acarindex.com/dosyalar/makale/acarindex-1423869024.pdf [Accessed 1 April 2019].

Blair, E.a.B.J. (2014) Applied survey sampling. Sage Publication.

Bojanic, D.C. (1996) Consumer perceptions of price, value and satisfaction in the hotel industry: An exploratory study. Journal of Hospitality \& Leisure Marketing, 4(1), pp.5-22. Available at: /https://www.tandfonline.com/doi/abs/10.1300/J150v04n01_02 [Accessed 4 April 2019].

Bolton , R.N. & Lemon, N. (1999) A Dynamic Model of Customers' Usage of Services: Usage as an Antecedent and Consequence of. Journal of Marketing Research, 36(2), pp.171-86. Available at: http://www.jstor.org/stable/3152091 [Accessed 7 April 2019].

C , B., HS , & AF , A.A. (2008) The role of expectations in patient assessments of hospital care: an example from a university hospital network, Turkey. International Journal of Health Care Quality Assurance, 21(5), pp.503-516. Available at: https://europepmc.org/abstract/med/18785460

[Accessed 14 January 2019].

Caruana, A., Money, A.H. & Berthon, R. (2000) Service quality and satisfaction – the moderating role of value. European Journal of Marketing, 34(11/12), pp.1338-53. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/03090560010764432 [Accessed 16 April 2019].

Cengiz , E. & Kirkbir , F. (2007) "Customer Perceived Value: The Development of a Multiple Item Scale in Hospitals. "Problems and Perspectives in Management", 5(3), Available at: https://businessperspectives.org/images/pdf/applications/publishing/templates/article/assets/1860/PPM_EN_2007_03cont_Cengiz1.pdf [Accessed 4 April 2019].

Chand, B., Katuwal, S., Pandit, R. & Pandey, A. (2018) Satisfaction with Quality of Health Care among Teaching Hospitals in Kathmandu, Nepa. Asian Journal of Medicine and Health, 10, Available at: https://www.researchgate.net/publication/323340004_Satisfaction_with_Quality_of_Health_Care_among_Teaching_Hospitals_in_Kathmandu_Nepal [Accessed 18 March 2019].

Chang, C.S., Chen, S.Y. & Lan, Y.T. (2013) Service quality, trust, and patient satisfaction in interpersonal-based medical service encounters. BMC Health Services Research, 13(22), Available at: https://bmchealthservres.biomedcentral.com/track/pdf/10.1186/1472-6963-13-22

[Accessed 11 January 2019].

Chang , H., Wang, Y.H. & Yang, W.Y. (2009) The impact of e-service quality, customer satisfaction and loyalty on e-marketing: Moderating effect of perceived value. Total Quality Management, 20(4), pp.423-43. Available at: https://sci-hub.tw/https://www.tandfonline.com/doi/abs/10.1080/14783360902781923 [Accessed 8 April 2019].

Chen , Z. & Dubinsky, A.J. (2003) A conceptual model of perceived customer value in e-commerce: A preliminary investigation. Psychology and Marketing, 20(4), pp.323-47. Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/mar.10076 [Accessed 14 January 2019].

Chen, I.J., Gupta , A. & Rom,. (1994) A Study of Price and Quality in Service Operations. International Journal of Service Industry Management, 5(2), pp.23-33. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/09564239410057663 [Accessed 14 January 2019].

Cheng, S.H., Wei, Y.J. & Chang, H.J. (2006) Quality Competition Among Hospitals:The Effects of Perceived Quality and Perceived Expensiveness on Health Care Consumers. American Journal of Medical Quality, 21(1), pp.68-75. Available at: ajm.sagepub.com [Accessed 13 March 2019].

Cho, w.H. et al. (2004) The relationships among quality, value, satisfaction and behavioral intention in health care provider choice: A South Korean study. Journal of Business Research, 57(8), pp.913-21. Available at: http://www.sciencedirect.com/science/article/pii/S0148-2963(02)00293-X [Accessed 14 January 2019].

Chongsanguan , P., Trimetsoontorn , & Fongsuwan , W. (2017) Examining the relationships between service quality, perceived value, customer satisfaction and purchase intentions: a marketing study of Bangkok's metropolitan rapid transit system, Thailand. Journal for Global Business Advancement, 10(1), Available at: https://www.inderscienceonline.com/doi/abs/10.1504/JGBA.2017.081532 [Accessed 4 April 2019].

Chowdhury, , H. & Abe, S. (2002) Consumer Perceptions of Value: a Multi-Item Scale For Its Measurement. Asia Pacific Advances in Consumer Research , 5, pp.160-68. Available at: http://acrwebsite.org/volumes/11791/volumes/ap05/AP-05 [Accessed 19 March 2019].

Chua, C.C. & Goh, M. (2002) Framework for evaluating performance and quality improvement in hospitals. Chow-Chua, C., & Goh, M. (2002). Framework for evaluating performance and quality improvement in hospitals. Managing Service Quality: An International Journal, , 12(1), pp.54-66. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/09604520210415399 [Accessed 9 April 2019].

CI, K., Bowers, M.R. & Kiefe, I. (2002) Measuring health care quality: comparing and contrasting the medical and the marketing approaches. American Journal of Medical Quality, 17(4), pp.136-44. Available at: https://www.ncbi.nlm.nih.gov/pubmed/12153066 [Accessed 14 January 2019].

Cochran, W. (1977) Sampling techniques. 3rd editionJohn Wiley \& Sons. Inc. New York. pp}, Available at: https://scholar.googleusercontent.com/scholar.bib?q=info:ZmecpiQ0xFMJ:scholar.google.com/&output=citation&scisig=AAGBfm0AAAAAXJG3ZRP1P_Vu_7FJIv_ZYrTRb_MdR15o&scisf=4&ct=citation&cd=-1&hl=en [Accessed 20 March 2019].

Cronin, J.J., Brady, M.K. & Hult, G.T.M. (2000) Assessing the effects of quality, value, and customer satisfaction on consumer behavioral intentions in service environments. Journal of Retailing, 76(2), p.93–218. Available at: https://pdfs.semanticscholar.org/4f09/2d37da6cfec6c64223a571b116e55d461b29.pdf?_ga=2.133108173.2136493011.1547204965-2040270.1547204965 [Accessed 11 January 2019].

Damen , R.A. (2017) Health Care Service Quality and Its Impact on Patient Satisfaction "Case of Al-Bashir Hospital". International Journal of Business and Management, 12(9), pp.136-52. Available at: https://doi.org/10.5539/ijbm.v12n9p136 [Accessed 7 December 2018].

David P. Nau, L.D.R.E.L.K.P. (2001) A Perceived Value Model for Explaining Patients' Intentions to Continue Use of Pharmaceutical Care Services. JOURNAL OF PHARMACEUTICAL MARKETING & MANAGEMENT, 14(1), Available at: www.tandfonline.com/doi/abs/10.3109/J058v14n01_03 [Accessed 17 March 2019].

Dean , A.M. (1999) The Applicability of SERVQUAL in Different Health Care Environments. Journal of Health Marketing Quarterly, 16(3), pp.1-21. Available at: https://www.tandfonline.com/doi/abs/10.1300/J026v16n03_01 [Accessed 14 January 2019].

DE, H. & SJ, M. (1993) Measuring service quality and its relationship to future consumer behavior. J Health Care Mark., 13(4), pp.32-41. Available at: https://www.ncbi.nlm.nih.gov/pubmed/10131732 [Accessed 12 January 2019].

Devi, K.V. & Muthuswamy, P.R. (2016) A STUDY ON SERVICE QUALITY GAP IN MULTI-SPECIALITY HOSPITALS. INDIAN JOURNAL OF APPLIED RESEARCH, 6(12), Available at:

https://www.worldwidejournals.com/indian-journal-of-applied-research-(IJAR)/file.php?val=December_2016_1480576100__205.pdf [Accessed 18 March 2019].

Dodd, W.B., Monre, K.B. & Grewa, D. (1991) Effects of Price, Brand, and Store Information on Buyers' Product Evaluations. Journal of Marketing Research, 28(3), pp.307-19. Available at: https://www.jstor.org/stable/3172866?seq=1#page_scan_tab_contents [Accessed 11 January 2019].

Dodds, W.B. (1991) In Search of Value: How Price And Store Name Information Influence Buyers' Product Perceptions. Journal of Services Marketing, 5(3), pp.27-36. Available at: https://www.researchgate.net/publication/235304351_In_Search_of_Value_How_Price_And_Store_Name_InformationInfluence_Buyers'_Product_Perceptions [Accessed 14 January 2019].

Dodds, W.B. & Monroe, K.B. (1985) The Effect of Brand and Price Information on Subjective Product. Advances in Consumer Research, 12, pp.85-90. Available at: http://www.acrwebsite.org/search/view-conference-proceedings.aspx?Id=6364 [Accessed 14 January 2019].

DongHee & Jang, S.(. (2013) Price placebo effect in hedonic consumption. International Journal of Hospitality Management, 35, pp.306-15. Available at: https://10.1016/j.ijhm.2013.07.004 [Accessed 19 January 2019].

Dosen , D.O. (2010) Mjerenje kvalitete usluge primarnezdravstvene zaštite SERVQUAL instrumentom. Revija za socijalnu politiku, 17(1), pp.27-44. Available at: http://www.academia.edu/2641801/Mjerenje_kvalitete_usluge_primarne_zdravstvene_za%C5%A1tite_SERVQUAL_instrumentom_Measuring_Health_Care_Service_Quality_by_Using_SERVQUAL_ [Accessed 14 January 2019].

Dubinsky, Z.C.a.A.J. (2003) A conceptual model of perceived customer value in e-commerce: A preliminary investigation. Psychology \& Marketing, 20(4), pp.323-47. Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/mar.10076 [Accessed 7 April 2019].

Duchessi, P. (2003) Crafting Customer Value: The Art and Science. Translated by P. Duchessi. Purdue University Press. Available at: http://www.thepress.purdue.edu/titles/format/9781557533708 [accessed 16 April 2019].

Duggirala, , Rajendran, C. & Anantharaman, R.N. (2008) Patient-perceived dimensions of total quality service in healthcare. Benchmarking: An International Journal, 15(5), pp.560-83. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/14635770810903150 [Accessed 17 March 2019].

Eggert , & Ulaga,. (2002) Customer perceived value: A substitute for satisfaction in business markets? The Journal of Business & Industrial Marketing, 17, pp.107-18. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/08858620210419754 [Accessed 10 April 2019].

Ehsan Zarei, M.A..A.R..S.M.G.T..A.R.f. (2013) he Relationship between Hospital Service Quality and Patient's Perceived Value. Journal of Mazandaran University of Medical Sciences , 23(98), pp.105-12. Available at: http://jmums.mazums.ac.ir/article-1-1874-en.html [Accessed 17 March 2019].

Emin, B. & Boller, G.W. (1992) An empirical assessment of the SERVQUAL scale. Journal of Business Research, 24(3), pp.253-68. Available at: www.sciencedirect.com/science/article/pii/0148-2963(92)90022-4 [Accessed 14 January 2019].

Faryabi, M., Kaviani, F. & Yasrebdoost , H. (2012) The relationship between Customer Perceived Value and Customers Satisfaction The Banking Industry in Iran. Australian Journal of Basic and Applied Sciences, 6(12), pp.76-85. Available at: https://pdfs.semanticscholar.org/3088/4fee69dc2a2f81fd4e294fca1acf1b7b6b12.pdf [Accessed 5 April 2019].

Fedai, A.T.&.E.C.&.M.Ç.&.C.D.&.F.K.&.T. (2012) Analysis of the Multi-Item Dimensionality of Patients' Perceived Value in Hospital Services. Journal Medical System , 36, p.1301–1307. Available at: https://link.springer.com/article/10.1007%2Fs10916-010-9590-0 [Accessed 4 April 2019].

Fornell , C., Johnson, D. & W, E. (1996) The American Customer Satisfaction Index: Nature, Purpose, and Findings. Journal of Marketing, 60(4), pp.7-18. Available at: www.jstor.org/stable/1251898 [Accessed 4 April 2019].

Friedman & Lawrence. (1967) Psychological Pricing in Food Industry in Prices:Issues in Theory,practice and Public policy. Prices: Issues in theory, practice, and public policy} , 266(2), [Accessed 14 January 2019].

Fund, d.d., 2014. A Report on Market Data for Private Sector Investments in Nepal Healthcare. September. Available at: http://www.dolmaimpact.com/pdf/DIF%20I-%20Healthcare%20Market%20Report_Final_1-10-2014.pdf [Accessed 12 December 2018].

Gaur, S., Xu, Y., Quazi , & Nandi,. (2011) "Relational impact of service providers' interaction behavior in healthcare". Managing Service Quality, 21(1), pp.67-87. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/09604521111100252 [Accessed 9 April 2019].

Gerstner, E. (1985) Do Higher Prices Signal Higher Quality? Journal of Marketing Research, 22(2), pp.209-15. Available at: https://www.jstor.org/stable/pdf/3151366.pdf?seq=1#page_scan_tab_contents [Accessed 14 January 2019].

Gheorghe , I., Madalina, P.C. & Purcarea, V.L. (2013) THE ASSESSMENT OF PERCEIVED SERVICE QUALITY OF PUBLIC HEALTH CARE SERVICES IN ROMANIA USING THE SERVQUAL SCALE. Procedia Economics and Finance, 6(13), pp.573-585. Available at: http://www.academia.edu/8029832/THE_ASSESSMENT_OF_PERCEIVED_SERVICE_QUALITY _OF_PUBLIC_HEALTH_CARE_SERVICES_IN_ROMANIA_USING_THE_SERVQUAL_SCAL E [Accessed 14 January 2019].

Gill , L. & White, L. (2009) A critical review of patient satisfaction. Leadership in Health Services, 22(1), pp.8-19. Available at: www.emeraldinsight.com/1751-1879.htm [Accessed 7 December 2018].

Goldstein, S. & Schweikhart, S. (2002) Empirical support for the Baldrige Award framework in US hospitals}. Health care management review, 27(1), pp.62-75. Available at: https://www.researchgate.net/profile/Susan_Goldstein2/publication/297377901_Empirical_support_fo r_the_Baldrige_Award_framework_in_US_hospitals/links/59357ddfaca272fc555c6bdd/Empirical-support-for-the-Baldrige-Award-framework-in-US-hospitals.pdf [Accessed 4 April 2019].

Gounaris , P., Tzempelikos , N.A. & Chatzipanagiotou ,. (2007) The Relationships of Customer-Perceived Value, Satisfaction, Loyalty and Behavioral Intentions. Journal of Relationship Marketing, 6(1), pp.63-87. Available at: https://sci-hub.tw/https://www.tandfonline.com/doi/abs/10.1300/J366v06n01_05 [Accessed 8 April 2019].

HaemoonOh. (1999) Service quality, customer satisfaction, and customer. International Journal of Hospitality Management, 18(1), pp.67-82. Available at: https://www.sciencedirect.com/science/article/pii/S0278431998000474 [Accessed 14 January 2019].

Hamid, A.B.Z.M.I.I.a.A.A. (2018) Level of Satisfaction on Service Quality Dimensions Based on SERVQUAL Model Among Patients Attending 1 Malaysia Clinic in Kota Bharu, Malaysia. Oman m, 33(5), pp.416-22. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6131925/pdf/OMJ-D-18-00027.pdf [Accessed 7 December 2018].

Hanzaee , K. & Yazd, M. (2010) The impact of brand class, brand awareness and price on two important consumer behaviour factors; customer value and behavioral intentions. African Journal of Business Management, 4(17), pp.3775-84. [Accessed 14 January 2019].

Health, M.o. (2016) Annual Report Department of Health services 2073/74. Government of Nepal Ministry of Health and Population,Department of Health Services.

Health, G.o.N.M.o. (2016) Annual report Department of Health Services2072/73 (2015/2016).

Health, M.o. (2017) Health Facility Survey 2015 Final Report.

Heinonen, K. (2004) Time and Location as Customer Perceived Value Drivers. Available at: https://www.researchgate.net/publication/50231268_Time_and_Location_as_Customer_Perceived_V alue_Drivers?enrichId=rgreq-b596f9354f853247395932a0901824c7-XXX&enrichSource=Y292ZXJQYWdlOzUwMjMxMjY4O0FTOjk5ODc0OTg5MTUwMjA4QDE0 MDA4MjM0NjEyMzI%3D&el=1_x_2&_esc=p [Accessed 5 April 2019].

Heryanto, I., Sidharta, I. & Mulyawan, A. (2016) Pharmaceutical Service Quality and Loyalty at Public Hospital in Bandung Indonesia. International Journal of PharmTech Research, 7(9), pp.154-60. Available at: https://www.researchgate.net/publication/307016948_Pharmaceutical_service_quality_and_loyalty_at _public_hospital_in_bandung_Indonesia [Accessed 14 January 2019].

Heskett, J.L. (2007) Service breakthroughs: Simon and Schuster. Free Press. Available at: https://www.simonandschuster.com/books/Service-Breakthroughs/James-L-Heskett/9781416576860 [accessed 11 January 2019].

Hjortsberg, C. (2003) Why do the sick not utilise health care? The case of Zambia. Econometrics and Health Economics, 12(9), pp.755-70. Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/hec.839 [Accessed 20 April 2019].

Holbrook, M.B. (1994) Service Quality: New Directions in Theory and Practice. Available at: http://sk.sagepub.com/books/service-quality/n2.xml [accessed 8 April 2019].

Hsu, W.H., Liu, C.Y. & Wu, H.L. (2008) An integrative model of customers' perceptions of health care services in Taiwan. The Service Industries Journal, pp.1307-19. Available at: https://www.tandfonline.com/doi/abs/10.1080/02642060802230130 [Accessed 12 January 2019].

Hu, P.-T.C.a.H.-H. (2010) How determinant attributes of service quality influence customer-perceived value. International Journal of Contemporary Hospitality Management , 22(4), pp.535-51. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/09596111011042730 [Accessed 17 March 2019].

Hur , W.M., Park, & Kim,. (2012) Assessing the Effects of Perceived Value and Satisfaction on Customer Loyalty: A 'Green' Perspective. Corportae Social Responsibility and Social Management, Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/csr.1280 [Accessed 14 January 2019].

Hwang, I.k., Lim, H.Y. & Suh, W.S. (2010) Structural relationship among service value, brand image, and patients revisits in regional public hospitals in Korea. The Journal of the Korea Contents Association, 10(11), pp.304-17. [Accessed 14 January 2019].

Investment Board Nepal. (2019) Sector Overview. Available at: http://ibn.gov.np/health#horizontalTab1 [Accessed 17 January 2019].

Iwan Sidharta, A.A.a.S.P. (2016) Service quality of pharmaceutical service at public hospital in Bandung, Indonesia. International Journal of PharmTech Research, pp.142-46. Available at: https://www.researchgate.net/publication/303574374_Service_quality_of_pharmaceutical_service_at_ public_hospital_in_Bandung_Indonesia [Accessed 14 January 2019].

Jacobs, B. & Price, N. (2004) The impact of the introduction of user fees at a district hospital. Health Policy and Planning, 19(5), pp.310-21. Available at: https://academic.oup.com/heapol/article-abstract/19/5/310/713591 [Accessed 20 April 2019].

James F. Petrick, P.D. (2002) Development of a Multi-Dimensional Scale for Measuring the Perceived Value of a Service. Journal of Leisure Research, 34(2), pp.119-34. Available at: https://www.nrpa.org/globalassets/journals/jlr/2002/volume-34/jlr-volume-34-number-2-pp-119-134.pdf [Accessed 14 January 2019].

Javed, S.A. & Ilyas, F. (2018) Service quality and satisfaction in healthcare sector of Pakistan— the patients' expectations. International Journal of Health Care Quality Assurance, 31(6), pp.1-13. Available at: www.emeraldinsight.com/0952-6862.htm [Accessed 7 December 2018].

Jensen, J. & Joyce, J. (1986) More consumers are willing to pay higher price for quality healthcare. Modern healthcare, 16(17), pp.48-49. Available at: https://scholar.google.com/scholar?q=%20Jensen%20J.%20More%20consumers%20are%20willing%20to%20pay%20higher%20price%20for%20quality%20healthcare.%20Mod%20Healthcare.%201986%3B16%3A48-9. [Accessed 11 January 2019].

Johnson , L , R., Kellaris & J, J. (1988) An Exploratory Study of Price/Perceived-Quality Relationships Among Consumer Services. Advances in Consumer Research, 15, pp.316-22.

Jr., J.J.C., KBrady , & Hult, M. (2000) Assessing the effects of quality, value and customer satisfaction on consumer behavioral intentions in service environments. Journal Of Retailing, 76(2), pp.193-218. Available at: https://www.sciencedirect.com/science/article/abs/pii/S0022435900000282?via%3Dihub [Accessed 11 January 2019].

Kalutharawithana, K.V.D.H.S. & Jayawardena, N.S. (2017) The Impact of Service Quality towards Customer satisfaction in Private sector Hospitals- A Case Study on the ABC Private Hospital in Sri Lanka. International Journal of Scientific & Engineering Research, 8(12), pp.375-84. Available at: https://www.ijser.org/researchpaper/The-Impact-of-Service-Quality-towards-Customer-satisfaction-in-Private-sector-Hospitals-A-Case-Study-on-the-ABC-Private-Hospital-in-Sri-Lanka.pdf [Accessed 12 December 2018].

Kayral, İ.H. (2014) Perceived Service Quality in Healthcare Organizations and a Research in Ankara by Hospital Type*. Journal of Ankara Studies, 2(1), pp.22-34. Available at: http://www.journalagent.com/jas/pdfs/JAS_2_1_22_34.pdf [Accessed 18 March 2019].

KIRKBIR, E.C.a.F. (2007) "Customer Perceived Value: The Development of a Multiple item scale in hospital. Problem s a n d Persp ectiv es in M a n agem en t, 5(3), Available at: https://businessperspectives.org/images/pdf/applications/publishing/templates/article/assets/1860/PPM_EN_2007_03cont_Cengiz1.pdf [Accessed 30 December 2018].

Korda , P. & Snoj,. (2007) Direct and indirect effects of perceived price on perceived value of mobile phones. Annales Des Télécommunications, 62(9-10), p.967–989. Available at: https://link.springer.com/article/10.1007/BF03253301 [Accessed 4 April 2019].

Kotler, P. (2000) Marketing Management: The Millennium Edition. 10th ed. United States of America: Prentice-Hall, Inc. Available at: https://www.researchgate.net/publication/235362523_Marketing_Management_The_Millennium_Edition [accessed 11 January 2019].

Kotler, P. (2005) According to Kotler: The World's Foremost Authority on Marketing Answers Your Questions. AMACOM. Translated by P. Kotler. AMACOM. Available at: https://www.scholars.northwestern.edu/en/publications/according-to-kotler-the-worlds-foremost-authority-on-marketing-an [accessed 11 January 2019].

Kumari, H.C.a.N. (2010) "Development of multidimensional scale for healthcare service quality (HCSQ) in Indian context". Journal of Indian Business Research , 2(4), pp.230-55. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/17554191011084157?fullSc=1&journalCode=jibr [Accessed 9 April 2019].

Kurt, G. & Hacioglu , G. (2010) Ethics as a customer perceived value driver in the context of online retailing. African Journal of Business Management, 4(5), pp.672-77. Available at: https://academicjournals.org/article/article1380714105_Kurt%20and%20%20Hacioglu.pdf [Accessed 12 January 2019].

Leaf, C., 2018. Health Care Is Super Expensive. How Can We Squeeze More Value Out of It? 23 January. Available at: http://fortune.com/2018/01/23/davos-world-economic-forum-healthcare/ [Accessed 5 December 2018].

Lee MA, Y.Y., Ma Yom YH., L. & YH, Y. (2007) A comparative study of patients' and nurses' perceptions of the quality of nursing services, satisfaction and intent to revisit the hospital: a questionnaire survey. International Journal of Nursing Studies, 44(4), pp.545-555. Available at: https://www.ncbi.nlm.nih.gov/pubmed/16687147 [Accessed 19 January 2019].

Lee, H., Delene, L.M., Bunda, M.A. & Kim, C. (2000) Methods of Measuring Health-Care Service Quality. Journal of Business Research, p.233–246. Available at: https://pdfs.semanticscholar.org/78b0/64e9c74bb9b31a0d5b2157e74c153f489e94.pdf [Accessed 14 January 2019].

Lemon, N., Rust, T. & Zeithaml, V.A. (2001) What Drives Customer Equity. Marketing Management, 10(1), pp.20-25. Available at: http://www.markenlexikon.com/d_texte/customer_equity_drivers_2001.pdf [Accessed 12 January 2019].

Li, L.X. (1997) Relationships between determinants of hospital quality management and service quality performance – A path analytic model. Omega, 25(5), pp.535-45. Available at: https://www.sciencedirect.com/science/article/pii/S0305048397000170 [Accessed 16 April 2019].

Li, M.H. (2011) The Influence of Perceived Service Quality on Brand Image, Word of Mouth, and Repurchase Intention: A Case Study of Min-Sheng General Hospital in Taoyuan, Taiwan..assumptionjournal , 4(1), Available at: http://www.assumptionjournal.au.edu/index.php/AU-GSB/article/view/433/384 [Accessed 17 March 2019].

Lichtenstein , R. & Bearden, O. (1989) Contextual Influences on Perceptions of Merchant-Supplied Reference Prices. Journal of Consumer Research, Volume, 16(1), p.55–66. Available at: https://doi.org/10.1086/209193 [Accessed 14 January 2019].

Lim, J.S., Lim, K.S., Heinrichs, J.H. & Aali, K.A. (2018) The role of hospital service quality in developing the satisfaction of the patients and hospital performance. Management Science Letters, 8, pp.1353-1362}. Available at: https://www.researchgate.net/publication/328136133_The_role_of_hospital_service_quality_in_developing_the_satisfaction_of_the_patients_and_hospital_performance [Accessed 18 March 2019].

Lim, H.Y..H.I.K..S.W.S. (2010) Lim, H.Y., Hwang, I.K., Suh, W.S. (2010), Structural relationship among service value, brand image, and patients revisits in regional public hospitals in Korea. The Journal of the Korea Contents Association, 10(11), pp.304-17. [Accessed 14 January 2019].

Lin , H.H. & Wang, Y.S. (2006) An examination of the determinants of customer loyalty in mobile commerce contexts. Information & Management, 43, pp.271-82. Available at: https://www.semanticscholar.org/paper/An-examination-of-the-determinants-of-customer-in-Lin-Wang/3021e3f8b35aa34c6c14481e4bd9e0756cf130b3 [Accessed 11 Janauary 2019].

Macstravic, S. (1997) Questions of value in health care. Marketing health services, 17(4), p.50. Available at: https://scholar.googleusercontent.com/scholar.bib?q=info:nV-YtpOXxXUJ:scholar.google.com/&output=citation&scisig=AAGBfm0AAAAAXDlVQKtOR-i4He7EvbLjZcP3SlHzFmwn&scisf=4&ct=citation&cd=-1&hl=en [Accessed 12 January 2019].

Malik, S.U. (2012) Customer Satisfaction, Perceived Service Quality and Mediating Role of Perceived Value. International Journal of Marketing Studies , 4(1), Available at: http://dx.doi.org/10.5539/ijms.v4n1p68 [Accessed 17 March 2019].

Malik, H.S.A.-N.a.S.A.a.M. (2018) Measuring patient's satisfaction of healthcare services in the UAE hospitals: Using SERVQUAL. International Journal of Healthcare Management, 11(2), pp.96-105. Available at: https://doi.org/10.1080/20479700.2016.1266804 [Accessed 18 March 2019].

Man, S.D. (2002) Patients' and personnel's perceptions of service quality and patient satisfaction in nuclear medicine. European Journal of nuclear medicine and molecular imaging, 29(9), pp.1109-1117. Available at: https://www.researchgate.net/profile/Peter_Vlerick/publication/11194778_Patients%27_and_personnel%27s_perceptions_of_service_quality_and_patient_satisfaction_in_nuclear_medicine/links/564c3a2408ae020ae9f87eed/Patients-and-personnels-perceptions-of-service [Accessed 4 April 2019].

McConnell, J.D. (1968) The Price-Quality Relationship in an Experimental Setting. Journal Of Marketing Research, 5(3), pp.300-03. Available at: https://journals.sagepub.com/doi/pdf/10.1177/002224376800500309 [Accessed 14 January 2019].

McDougall, G.H.G. & Levesque, T. (2000) Customer satisfaction with services: putting perceived value into the equation. Journal of Services Marketing, 14(5), pp.392-410. Available at: https://www.emeraldinsight.com/doi/pdfplus/10.1108/08876040010340937 [Accessed 11 January 2019].

McPake, B. (1993) User charges for health services in developing countries: A review of the economic literature. Social Science and Medicine, 36(11), pp.1397-405. Available at: https://www.sciencedirect.com/science/article/abs/pii/027795369390382E?via%3Dihub [Accessed 20 April 2019].

Mhasnah, A.M.A., Salleh, F., Afthanorhan, A. & Ghazali, P.L. (2018) The relationship between services quality and customer satisfaction among Jordanian healthcare sector. Management Science Letters}, 8, pp.1413-20. Available at: https://www.researchgate.net/publication/328135863_The_relationship_between_services_quality_and_customer_satisfaction_among_Jordanian_healthcare_sector [Accessed 18 March 2019].

Mizik, N. & Jacobson,. (2003) 'Trading Off between Value Creation and Value Appropriation: The Financial Implications of Shifts in Strategic Emphasis'. Journal of Marekting, 67(1), pp.63-76. Available at: https://www.researchgate.net/publication/237939257_Trading_Off_Between_Value_Creation_and_Value_Appropriation_The_Financial_Implications_of_Shifts_in_Strategic_Emphasis [Accessed 10 April 2019].

MolinaIrene , M.-E.R. & Saura, I.G. (2008) Perceived value, customer attitude and loyalty in retailing. Journal of Retail and Leisure Property, 7(4), pp.305-14. [Accessed 10 April 2019].

Moliner, A., Sanchez , , Rodriguez, M. & Callarisa , L. (2007) Relationship Quality with a Travel Agency: The Influence of the Postpurchase Perceived Value of a Tourism Package. Tourism and Hospitality Research , 7(3-4), Available at: https://journals.sagepub.com/doi/10.1057/palgrave.thr.6050052 [Accessed 11 January 2019].

Monroe, K.B. (2012) PRICE AND CUSTOMERS' PERCEPTIONS OF VALUE. Advances in Business Marketing & Purchasing, 19, pp.129-52. Available at: https://www.emeraldinsight.com/doi/abs/10.1108/S1069-0964%282012%290000019012 [Accessed 4 April 2019].

Monroe, K.B. & Chapman, J.D. (1987) Framing Effects on Buyers' Subjective Product Evaluations. Advances in Consumer Research, 14, Available at: acrwebsite.org/volumes/6684/volumes/v14/NA-14 [Accessed 14 January 2019].

Morar, D. (2013) An overview of the consumer value literature –perceived value, desired value. p.November. Available at: https://www.researchgate.net/publication/271585009_An_overview_of_the_consumer_value_literature_-_perceived_value_desired_value [Accessed 30 December 2018].

Mosadeghrad, A.M. (2014) Factors influencing healthcare service quality. International Journal of Health Policy and Management, 3(2), pp.77-89. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4122083/ [Accessed 9 April 2019].

Mubashra Maqsood, *.H.M.k.j.W.P.D.S.A.G. (2017) Effects of hospital service quality on patients satisfaction and behavioral ntention of doctors and nurses. Saudi Journal of Medical and Pharmaceutical Sciences, p.566. Available at: http://scholarsmepub.com/ [Accessed 6 December 2018].

Mwikisa, C.N. & Hjortsberg, C.A. (2002) Cost of access to health services in Zambia. Health Policy and Planning, 17(1), pp.71-77. Available at: https://academic.oup.com/heapol/article/17/1/71/652239 [Accessed 20 April 2019].

Neal, W.D. (1999) Satisfaction is Nice, But Value Drives Loyalty. Marketing Research, Available at: https://archive.ama.org/archive/ResourceLibrary/MarketingResearch/Pages/1999/11/1/2014876.aspx [Accessed 12 January 2019].

Neupane, & Devkota,. (2017) Evaluation of the impact od Service quality Dimensions on pateint/Customer Satisfaction: A Study of Private Hospitals in Nepal. International journal of Social sciences and Management, 4(3), pp.165-76. Available at: nepjol.info/index.php/IJSSM/issue/archive [Accessed 6 December 2018].

Neupane, R. & Devkota, M. (2017) Evaluation of the Impacts of Service Quality Dimensions on Patient/Customer Satisfaction: A Study of Private Hospitals in Nepal. International Journal of Social Sciences and Management, 4(3), pp.165-76. Available at: http://nepjol.info/index.php/IJSSM/issue/archive [Accessed 18 March 2019].

Noel, N.M. & Hanna,. (1996) Benchmarking Consumer Perceptions of Product Quality with Price: An Explantaion. Psychology and Marketing, 13(6), pp.591-604. Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/%28SICI%291520-6793%28199609%2913%3A6%3C591%3A%3AAID-MAR4%3E3.0.CO%3B2-3 [Accessed 14 January 2019].

Nor Khasimah Alimana, .W.N.M. (2016) Linking Service Quality, Patients' Satisfaction and Behavioral Intentions: An investigation on Private Healthcare in Malaysia. Procedia - Social and Behavioral Sciences 224, pp.141-48. Available at: https://ac.els-cdn.com/S1877042816305031/1-s2.0-S1877042816305031-main.pdf?_tid=214a095d-6bc9-4679-98fd-91a319f145ac&acdnat=1552991627_a6baf899a3699555ba1138f547ee060e [Accessed 19 March 2019].

Nyandwe J1*, M.M.L.P.K.N.-4.a.K.P. (2017) Measuring Patients' Perception on the Quality of Care in the Democratic Republic of Congo Using a Modified, Service Quality Scale (SERVQUAL). Arch Science, an open access journal, 1(2), Available at: https://www.omicsonline.org/open-

access/measuring-patients-perception-on-the-quality-of-care-in-the-democraticrepublic-of-congo-using-a-modified-service-quality-scale-ser.pdf [Accessed 6 December 20108].

Nyandwe, M.M.L.P.K.N.a.K.P. (2017) Measuring Patients' Perception on the Quality of Care in the Democratic Republic of Congo Using a Modified, Service Quality Scale (SERVQUAL). Arch Sci, an open access journal, 1(2), Available at: https://www.omicsonline.org/open-access/measuring-patients-perception-on-the-quality-of-care-in-the-democraticrepublic-of-congo-using-a-modified-service-quality-scale-ser.pdf [Accessed 12 December 2018].

Oh, H. (2000) The Effect of Brand Class, Brand Awareness, and Price on Customer Value and Behavioral Intentions. Journal of Hospitality and Tourism Research, 24(2), pp.136-62. Available at: https://journals.sagepub.com/doi/10.1177/109634800002400202 [Accessed 14 January 2019].

Olson, J.C. (1976) Price as an informational cue : effects on product evaluations. University Park, Pa. : College of Business Administration, Pennsylvania State University, 1976. Available at: https://www.worldcat.org/title/price-as-an-informational-cue-effects-on-product-evaluations/oclc/4827760 [accessed 14 January 2019].

Orgev, C. & Bekar,. (2013) Non-Monetary Costs, Hospital Perceived Value and Patient Satisfaction in Health Institutions. International Journal of Alanya Faculty of Business, 5(2), pp.87-97. Available at: http://www.acarindex.com/dosyalar/makale/acarindex-1423869024.pdf [Accessed 14 January 2019].

Ozer, , Basgoze, P. & Karahan, A. (2017) The association between perceived value and patient loyalty in public university hospitals in Turkey. Total Quality Management & Business Excellence, 28(7), pp.782-800. Available at: https://www.researchgate.net/profile/Pinar_Basgoze/publication/292188605_The_association_between_perceived_value_and_patient_loyalty_in_public_university_hospitals_in_Turkey/links/59f0df8da6fdcc1dc7b8f1d9/The-association-between-perceived-value-and-patien [Accessed 17 March 2019].

P.G., B. & R, N. (1985) Product attributes and perceived quality: Foods. Translated by B. P.G & R. Nelson. Lexington Books. Available at: http://agris.fao.org/agris-search/search.do?recordID=US8840080 [accessed 14 January 2019].

Pan, F.F.C. (2011) Perceived values on hospital services: A fuzzy logic. African Journal of Business Management, 5(11), pp.4465-75. Available at: https://academicjournals.org/article/article1380537656_Pan.pdf [Accessed 12 January 2019].

Parasuraman, A., Berry, L.L. & Zeithaml, V.A. (1991) Understanding Customer Expectations of Service. Sloan Management Review, 3(32), pp.39-48. Available at: https://www.researchgate.net/profile/Valarie_Zeithaml/publication/225084143_Understanding_Customer_Expectations_of_Service/links/02e7e53cd16b876407000000.pdf [Accessed 11 January 2019].

Pathak, P. (2017) An Analysis of Outpatients' Perceived Service Quality and Satisfaction in Selected Private Hospitals of Kathmandu. Journal of Business and Social Sciences Research (JBSSR), 2(1 & 2), pp. 69-84. Available at: https://www.nepjol.info/index.php/jbssr/article/view/20958/17201. [Accessed 19 January 2019].

Peterson, R.A. (1970) The Price-Perceived Quality Relationship: Experimental Evidence. Journal of Marketing Research, 7(4), pp.525-8. Available at: https://journals.sagepub.com/doi/full/10.1177/002224377000700415 [Accessed 14 January 2019].

Peterson, R.A.W.R.W. (1985) Perceived Risk and Price Reliance Schema as Price Perceived Quality Mediators," in Perceived Quality: How Consumers View Stores and Merchandise Jerry C. Olson.

Peterson, R.A. & Jollbert, A.J.P. (1976) A Cross National Investigation of Price and Brand as Determinant of Perceived Product Quality. Journal of Applied Psychology, 61(4), pp.533-36. Available

at:
https://www.researchgate.net/publication/233986355_A_Cross_National_Investigation_of_Price_and_Brand_as_Determinant_of_Perceived_Product_Quality [Accessed 14 January 2019].

Petrik, J.F. (2002) Development of a Multi-Dimensional Scale for Measuring the Perceived Value of a Service. Journal of Leisure Research, 34(2), pp.119-34. Available at: https://www.tandfonline.com/doi/abs/10.1080/00222216.2002.11949965 [Accessed 12 January 2019].

Pevec , T. & Pisnik,. (2018) Empirical evaluation of a conceptual model for the perceived value of health services. Slovenian Journal of Public Health (SJPH), 57(4), pp.175-82. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6172529/ [Accessed 18 March 2019].

Prasanta Mahapatra, S.S.P. (2001) A patient satisfaction survey in Public hospitals. Journal of Academy of Hospital Administration, 13(2), p.14. Available at: https://www.researchgate.net/profile/Prasanta_Mahapatra2/publication/261993218_A_patient_satisfaction_survey_in_public_hospitals/links/00b49536262ac31d2a000000/A-patient-satisfaction-survey-in-public-hospitals.pdf [Accessed 15 January 2019].

Pura, M. (2005) Linking perceived value and loyalty in location-based mobile services. Pura, M. (2005). Linking perceived value and loyalty in l Managing Service Quality: An International Journal, 15(6), pp.509-38. Available at: https://sci-hub.tw/https://www.emeraldinsight.com/doi/abs/10.1108/09604520510634005?journalCode=msq [Accessed 10 April 2019].

Rahi , S. & Ghani, M.A. (2016) Internet Banking, Customer Perceived Value and Loyalty: The Role of Switching Costs. Journal of Accounting & Marekting, 5(4), p.1. Available at: https://www.omicsonline.org/open-access/internet-banking-customer-perceived-value-and-loyalty-the-role-ofswitching-costs-2168-9601-1000188.pdf [Accessed 10 April 2019].

Raza, A., Siddiquei, A., Awan, H.M. & Bukhari, K. (2012) RELATIONSHIP BETWEEN SERVICE QUALITY, PERCEIVED VALUE, SATISFACTION AND REVISIT INTENTION IN HOTEL INDUSTRY. INTERDISCIPLINARY JOURNAL OF CONTEMPORARY RESEARCH IN BUSINESS, 4(8), Available at: https://pdfs.semanticscholar.org/6604/a42cfde64c3beb313bbf54f4d3b48d2d2a37.pdf [Accessed 5 April 2019].

RR, R.F. (2008) The relative importance of service dimensions in a healthcare setting. nternational Journal of Health Care Quality Assurance, 21.(1), pp.104-24. Available at: https://www.ncbi.nlm.nih.gov/pubmed/18437943 [Accessed 14 January 2019].

Run, M.M.B.a.E.C.d. (2010) Private healthcare quality: applying a SERVQUAL model. International Journal of Health Care Quality Assurance , 13(7), pp.658-673. Available at: www.emeraldinsight.com/0952-6862.htm [Accessed 6 December 2018].

Sahadev, S. & Edward, M. (2011) Role of Switching Costs in the Service Quality, Perceived Value, Customer Satisfaction and Customer Retention Linkage. Asia Pacific Journal of Marketing and Logistic, 23(3), pp.327-45. Available at: https://www.researchgate.net/publication/239781491_Role_of_Switching_Costs_in_the_Service_Quality_Perceived_Value_Customer_Satisfaction_and_Customer_Retention_Linkage [Accessed 19 January 2019].

Sapicssapic, S., Topalovic, S. & Marinkovic, V. (2014) THE INFLUENCE OF PERCEIVED VALUE DIMENSIONS. Economic Themes, 52(4), p.392–408. Available at: https://content.sciendo.com/view/journals/ethemes/52/4/article-p392.xml [Accessed 10 April 2019].

Shafiq, M., Naeem, A., Munawar, & Fatima,. (2017) Service Quality Assessment of Hospitals in Asian Context: An Empirical Evidence. NQUIRY: The Journal of Health Care, 54(1), Available at: https://journals.sagepub.com/doi/pdf/10.1177/0046958017714664 [Accessed 6 December 2018].

Shah, P.P. (2017) In patient satisfaction survey- how does it help our health care delivery system (the patient, the health care giver and the organization)? International Surgery Journal, 4(10), pp.3280-87. Available at: https://www.ijsurgery.com/index.php/isj/article/viewFile/1970/1485 [Accessed 6 December 2017].

SHARMA, S., 2017. Health for All : Accelerating Universal Healthcare Coverage in Nepal. 23 December. Available at: www.newbusinessage.com/MagazineArticles/view/1997 [Accessed 12 December 2018].

Shieh , J.I., Wu , H.-H. & Huang, K.K. (2010) A DEMATEL method in identifying key success factors of hospital service quality. Knowledge-Based Systems, 23(3), pp.277-82. Available at: https://www.sciencedirect.com/science/article/pii/S0950705110000213 [Accessed 9 April 2019].

Shifflet, D.a.B.P. (1997) Customer satisfaction is still key. Hotel & Motel Management}, 212(6), [Accessed 7 April 2019].

Shifflet, D.K.a.V.B., Shifflet, & Bhatia, , D. (1997) Customer Satisfaction is Still Key. Hotel and Motel Management, 7(24), [Accessed 14 January 2019].

Shintaputri, & Wuisan, J. (2017) The Impact of Perceived Price towards Perceived Value Through the Mediation of Perceived Quality: A Case of Brand X Smartphone in Indonesian Middle-Class Customers. iBuss Management, 5(1), pp.29-42. Available at: https://media.neliti.com/media/publications/184744-EN-the-impact-of-perceived-price-towards-pe.pdf [Accessed 4 April 2019].

Shrestha, S. & Devkota, R. (2018) Patient Satisfaction in Nepal Medical College Teaching Hospital}. Nepal Medical College Journal, 19(4), pp.196-203. Available at: https://www.researchgate.net/publication/327768521_Patient_Satisfaction_in_Nepal_Medical_College_Teaching_Hospital [Accessed 18 March 2019].

Shrestha KK, K. et al. (2015) Assessment of ENT outpatient department services at a tertiary care centre: The patients' perspective. Nepal Med Coll Journal, 17(1-2), pp.31-35. Available at: https://pdfs.semanticscholar.org/7c70/66b3becd770d5f13712ee5649e80dcbc6543.pdf [Accessed 6 December 2018].

Sirdeshmukh, D., Singh, J. & Sabol, B. (2002) Consumer Trust, Value, and Loyalty in Relational Exchanges. Journal of Marketing, 66(1), pp.15-37. Available at: https://www.jstor.org/stable/3203367?seq=1#page_scan_tab_contents [Accessed 8 April 2019].

Steenkamp, J.B., 1988. THE RELATIONSHIP BETWEEN PRICE AND QUALITY IN THE MARKET PLACE. pp.491-507. Available at: https://www.researchgate.net/profile/Jan_Benedict_Steenkamp/publication/225826451_The_relationship_between_price_and_quality_in_the_marketplace/links/58e1652fa6fdcc41bf944da6/The-relationship-between-price-and-quality-in-the-marketplace.pdf [Accessed 16 April 2019].

Stephen O'Connor, S.L.U.M.C.3.C.S.. (n.d.) The Influence of Perceived Hospital Service Quality on Patient Satisfaction and Intentions to Return.

Sudhaya Vinodkumar, B.G.V.M.S.S. (2018) Factors associated with patient satisfaction in a private healthcares etting in India: Across-sectional analysis. Journal of Hospital Administration, 7(4), Available at: https://doi.org/10.5430/jha.v7n4p44 [Accessed 12 December 2018].

Sudman, S. (1976) Applied sampling. Academic Press New York.

Sujipinyo , K. & Chaipoopirutana, S. (2014) A Study of Relationship between Customer Perceived Value, Perceived Price, Affect Interaction Orientation and Customer Satisfaction towards Thai Suki Restaurant. International Conference on Business, Law and Corporate Social Responsibility, Available at: https://icehm.org/upload/9440ED1014048.pdf [Accessed 5 April 2019].

Surydana, L. (2017) Service Quality, Customer Value and Patient Satisfaction on Public Hospital in Bandung District, Indonesia. International Review of Management and Marketing, , 7(2), pp.187-92. A[Accessed 6 December 2018].

Sweeneya , C. & NSoutarb, G. (2001) Consumer perceived value: The development of a multiple item scale. Journal of retailing, 77(2), pp.203-20. Available at: https://www.sciencedirect.com/science/article/abs/pii/S0022435901000410 [Accessed 12 January 2019].

Taherdoost, H. (2017) Determining Sample Size; How to Calculate Survey Sample Size. International Journal of Economics and Management Systems , Available at: https://www.researchgate.net/publication/322887480_Determining_Sample_Size_How_to_Calculate_Survey_Sample_Size [Accessed 9 April 2019].

Tahir, Q.K. (2017) Understanding Consumer Perception of Price Value Relationship. International Journal of Advance Research, Ideas and Innovations in Technology. , 3(1), Available at: https://www.ijariit.com/manuscripts/v3i1/V3I1-1383.pdf [Accessed 14 January 2019].

Tull, D.S., Boring, R.A. & Gonsior, M.H. (1964) A Note on the Relationship of Price and Imputed Quality. The Journal of Business, 37(2), pp.186-91. Available at: https://www.jstor.org/stable/2351032 [Accessed 14 January 2019].

Varki, S. & Colgate,. (2001) The Role of Price Perceptions in an Integrated Model of Behavioral Intentions. Journal of Service Research, 3(3), pp.232--240. Available at: https://journals.sagepub.com/doi/abs/10.1177/109467050133004 [Accessed 7 April 2019].

Woodruff, R.B. (1997) Customer value: The next source for competitive advantage. Journal of Academy of Marketing Science, 25(2), pp.139-53. Available at: https://edisciplinas.usp.br/pluginfile.php/3725929/mod_resource/content/1/1.%20woodruff%201997%20Customer%20Value.pdf [Accessed 12 January 2019].

Wu , H.L., Liu , C.Y. & Hsu, W.H. (2008) An integrative model of customers' perceptions of health care services in Taiwan. The Service Industries Journal, 28(9), p.1307–1319. Available at: www.informaworld.com [Accessed 4 April 2019].

Yang , Z. & Peterson, T. (2004) Customer perceived value, satisfaction, and loyalty: The role of switching costs. Available at: https://onlinelibrary.wiley.com/doi/abs/10.1002/mar.20030 [Accessed 14 January 2019].

Yoder, R.A., 1989. Are people willing and able to pay for health services? Social Science and Medicine, pp.35-42. Available at: https://www.sciencedirect.com/science/article/pii/0277953689901251 [Accessed 20 April 2019].

Yukyoung Kim, S.K.D.M.a.H.R.L. (2012) Perceived Service Quality and Its Influence on Behavioral Intention in South Korean Public Dental Hospitals. Asia-Pacific Journal of Public Health , 24(2), p.391–405. Available at: https://journals.sagepub.com/home/aph [Accessed 17 March 2019].

Zaim, H., Bayyurt, N. & Zaim, S. (2013) Service Quality And Determinants Of Customer Satisfaction In Hospitals: Turkish Experience. International Journal of Economics and Business Research, 9(5),

pp.51-58. Available at: https://www.researchgate.net/publication/285893628_Service_Quality_And_Determinants_Of_Customer_Satisfaction_In_Hospitals_Turkish_Experience [Accessed 14 January 2019].

Zeithaml , V.A., Berry, L.L. & Parasuraman, A. (1993) The nature and determinants of customer expectations of service. Journal of the Academy of Marketing Science, 21(1), Available at: https://link.springer.com/article/10.1177/0092070393211001#citeas [Accessed 19 January 2019].

Zeithaml, V.A. (1988) Consumer Perceptions of Price, Quality, and Value: A Means-End Model and Synthesis of Evidence. Journal of Marketing, 52(3), Available at: https://journals.sagepub.com/doi/pdf/10.1177/002224298805200302 [Accessed 30 December 2018].

Appendix:

Appendix 1: Survey Nepali questionnaire
प्रश्नावली

Questionire

45

नमस्कार ! म हेम बहादुर गुरुङ । स्नातक श्रेणी अन्तर्गतको अन्तिम वर्षका लागि आधारभूत मानिने थेसिस (शोधग्रन्थ) को प्रयोजनार्थ 'काठमाडौं उपत्यकाका निजी अस्पताल सम्बन्धी आम चेतना, अवगत मूल्यांकन, बुझाई वा वो सम्मिलित तथ्यगत जानकारीका लागि यस 'सर्वेक्षण' को ढाँचा तयार गरिएको हो । विगत ६ महिना अवधिको अस्पताल भ्रमण बारेमा ९एभचअभष्खभम ख्वगिभिक0यस सर्वेक्षणमा उल्लिखित विवरणलाई भने काम गरिदिएर अनुसन्धानको आशयलाई सार्थक बनाइदिनुहुन यहाँहरुलाई विनम्र अनुरोध गरिन्छ । अस्पतालका कार्यपद्धति, मूल्य निर्धारण, स्थान लगायतका विषयसँग आम मूल्यांकनको सम्बन्धलाई स्वाभाविक र वास्तविक सारमा बुझ्नका लागि यहाँहरुको प्रामाणिक बुझाई र तर्कमूलक सचेतनाले विशेष एवं लाभदायक भूमिका अवश्य पुन्याउँदछ । शैक्षिक उद्देश्य आपुर्ती केवल तात्पर्य रहेको र प्रत्यर्थीको सूचना गोप्य रहने निर्भरतालाई सदर गरिनेछ । यहाँहरुको सहयोगात्मक सहृदयीप्रति आशावादी र आभारी छु ।

चिन्ह (✓) को प्रयोग गर्नुहोस् ।
गत ६ महिना अवधिभित्र तपाईले भ्रमण गर्नुभएको अन्तिम अस्पतालको नाम उल्लेख गर्नुहोस् ।
> के यो अस्पताल तपाईको पहिलो भ्रमण हो ?

☐ हो   ☐ होइन

> के यो प्राथमिक अस्पताल हो ?

☐ हो   ☐ होइन

कृपया ! निम्न सम्बन्धमा मूल्याङ्न गर्नुहोस् ।
१= प्रवल असमर्थन   ५= प्रवल समर्थन

सो अस्पतालसम्म पुग्ने दुरी सहज एवं सन्तोषजनक थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सो अस्पतालसम्म पुग्न खर्चिएको तपाईको समय सहज एवं सन्तोषजनक थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

औषधोपचारसम्बन्धी आवश्यकतामा तपाईले खर्चिनुभएको रकम मनासिव र उपयुक्त थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सो अस्पतालमा हुने भर्ना झन्झटयुक्त र बिना कष्टकारी थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सो अस्पताल सुविधाजनक र उचित हिसाबले अवस्थित पाइयो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अत्यधिक महंगीका कारण, कुनैबेला चिकित्सकीय सेवाबाट पनि वञ्चित हुन पुगियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आफ्नो लिङ्ग खुलाउनुहोस् ।

☐ पुरुष   ☐ महिला

कृपया निम्न सबन्धमा मूल्याङ्न गर्नुहोस् ।
१= प्रवल असमर्थन   ५= प्रवल समर्थन

चिकित्सकीय भ्रमणमा लागत (मूल्य) का कारण कहिलेकाँही समस्या उत्पन्न भएको थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकको परामर्शका निम्ति तपाईलाई लामो समयसम्म पर्खाइएको थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आपतकालीन औषोधपचारको लागि समेत तपाईले लामो समयसम्म पर्खनुभएको थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आपतकालीन अवस्थामा चिकित्सकीय सहायता र उद्धारका लागि तपाईलाई सरल वातावरण थियो ?

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अस्पतालमा चिकित्सकीय विशेषज्ञसँग सम्पर्क सुविधाका निम्ति सहज वातावरण पाउनुभयो ?

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

उपचार-इलाज वा परीक्षण गर्दा चिकित्सकहरुको वेवास्तापूर्ण व्यवहार, लापरवाही र असावधानीलाई अनुभूति आत्मासात गर्नुभयो ?

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

आफ्नो उमेर (वर्ष) खुलाउनुहोस् ।

२० वर्षभन्दा कम ☐

२०-३० वर्ष ☐

३०-४० वर्ष ☐

४०-५० वर्ष ☐

५० वर्षभन्दा माथि ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रबल असमर्थन ५= प्रबल समर्थन

चिकित्सकीय भ्रमणमा तपाईलाई लागेका हरेक कुराहरु निर्धक्क राख्दा स्वीकृत वातावरण थियो ?

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

तपाईको आवश्यकता बमोजिमको चिकित्सकीय सेवा र सावधानीलाई आर्थिक व्यवस्थापन र खर्चको परिणाममा कुनै जटिलता एवं वाधा अवरोध नभएकोमा तपाई विश्वस्त हुनुहुन्छ ?

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

चिकित्सकीय सम्बन्धी निर्धारित विशेष शब्द वा पारिभाषिक शब्दावलीलाई बेलाबखत चिकित्सकले स्पष्ट र साधारण अर्थमा व्याख्या-वर्णन नगर्ने गरेको पाईयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

उपचार/इलाज तथा विविध खर्चको अनुभवमा आमद-आपुर्ती भन्दा उच्च धनराशी तिर्नुपर्ने अवस्था थियो ?

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

आफ्नो भनाई वा बुभ्राईलाई चिकित्सकले सतर्क र सचेत भई सद्भावपूर्वक कार्य सम्पादन गरेको पाईयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

सम्पूर्ण सेवा र चिकीत्सकीय उत्तरदायित्वलाई समग्र विवेचना गर्दा व्यक्तिगत अनुमान र अपेक्षाभन्दा धेरै राम्रो र सहज पाइयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

आफ्नो पेशा खुलाउनुहोस् ।

स्वरोजगार ☐ रोजगारयुक्त ☐

अवकाश प्राप्त ☐ विविध ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रबल असमर्थन ५= प्रबल समर्थन

मूल्य सम्बन्धी विवरणमा स्पष्टिकरण तथा रकम भुक्तानीमा त्रुटी देखियो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

आफ्ना भनाईलाई बेलाबखत चिकित्सकबाट वेवास्ता हुने गरेको पाइयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

औषधी उपचारका क्रममा बाह्य रुपमा समेत मोटो रकमको चलखेलले बेला बखत मर्का र चिन्ताको स्थिति विद्यमान छ ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

चिकित्सकीय सम्बन्धी कुनै प्रश्न वा जिज्ञासालाई समस्या रहित तवरले चिकित्सकको परामर्श तथा सहयोगका निम्ति उपयुक्त वातावरण थियो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

आवश्यकता अनुसार चिकित्सकीय सहायता जुनसुकै बेला पनि उपलब्ध रहेको थियो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

चिकीत्सकीय परीक्षणको आवश्यकताका बारेमा चिकित्सकद्वारा दिइने राय, सचेत व्याख्या एकदम राम्रो पाइयो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आफ्नो मासिक आम्दानी खुलाउनुहोस् ।

रु. २५,००० भन्दा कम   ☐

रु. २५,००० - रु. ५०,०००   ☐

रु. ५०,००० - रु. ७५,०००   ☐

रु. ७५,००० - रु. १,००,०००   ☐

रु. १,००,००० - रु. १,२५,०००   ☐

रु. १,२५,००० - रु. १,५०,०००   ☐

रु. १,५०,००० - रु. १,७५,०००   ☐

रु. १,७५,००० - रु. २,००,०००   ☐

रु. २,००,००० भन्दा बढी   ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन   ५= प्रवल समर्थन

अल्प सूचनाका आधारमा चिकित्सकीय सहायताका निम्ति कठिनाई समेत भोग्नुपर्‍यो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सार्वजनिक हित र उपयोगिता बमोजिम आवश्यकता अनुसार भन्दा पनि बढी रकम तिर्नुपर्ने स्थिति थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

उपचार प्रयोजनमा बेलाबखत अप्रत्यासित छिटो उद्देश्यले अव्यवहारिक उपचार शैली र अभावको प्रचलन पनि देखियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकीत्सकीय सेवा लगायत विविध पक्षमा विचाराधीन हुँदा प्राप्त सुविधा उत्कृष्ट थिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आफ्नो परिवेश र पर्यावरणको अभावमा पनि सुख सुविधाका हिसाबले अस्पतालको वातावरण सहज र सुलभ पाइयो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सर्वमान्य रुपमा गरिने अस्पतालको सरसफाई यथोचित थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

तपाईले सम्पन्न गर्नुभएको शैक्षिक योग्यता खुलाउनुहोस् ।

एस.एल.सी.   ☐   प्लस टु   ☐

डिप्लोमा   ☐   स्नातक   ☐

स्नातकोत्तर   ☐   अन्य   ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन   ५= प्रवल समर्थन

अस्पतालमा शौचालयलाई राम्रो अवस्थामा संरक्षित गरेको पाइएन ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

प्राप्त गरिएका चिकित्सकीय सेवा वापत केही कुरा (पक्ष) लाई उच्चस्तर र झनै उपयोगी बनाउन आवश्यक थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

प्राप्त गरिएका सम्पूर्ण चिकित्सकीय सेवा उत्कृष्ट एवं न्यायोचित थिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

प्राप्त गरिएका चिकित्सकीय सेवा मध्यबाट केही पक्ष भने उपेक्षित, निन्दनीय, स्वेच्छाचारी र असन्तोषजनक समेत थिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

प्राप्त गरिएका सम्पूर्ण चिकीत्सकीय सेवा पर्याप्त र सन्तोषजनक पाईए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकको परामर्श तथा व्यावहारिक वास्ताका निमित्त तपाईले लामो समयसम्म प्रतीक्षा गरिरहनुपर्ने अवस्था थिएन ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

आफ्नो पारिवारिक सदस्य संख्या खुलाउनुहोस् ।

२ जना सदस्य भन्दा कम   ☐

२-५ सदस्य   ☐

५ सदस्य भन्दा बढी   ☐

आफ्नो वैवाहिक स्थितिका बारेमा खुलाउनुहोस् ।

अविवाहित ☐   विवाहित ☐

सम्बन्ध विच्छेद गरिएको ☐

विधवा/विदुर ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन   ५= प्रवल समर्थन

व्यक्तिलाई उपलब्ध गराइएको चिकित्सकको उपचारार्थ सेवामा मर्यादित सरोकार एवं उचित मनसायपूर्ण व्यवहार थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकीय सेवाको प्राप्तकर्ता बनिरहँदा आफ्नो गोपनियताको विशेषाधिकार पनि प्राप्त थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकीय व्यवहार तथा औषधोपचार क्रममा मैत्रीपूर्ण, भद्रता तथा शिष्टाचारयुक्त स्थिति थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकले दिने औषधोपचार सेवामा क्रमिक ध्यान, सम्मानित तथा दायित्वपूर्ण व्यवहारको जरुरत देखियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अस्पतालमा दिइने नर्सिङ सेवा यथोचित थियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

नर्सले प्रस्तुत गरेका कार्य-गतिविधि, कारोबार, व्यवसायी उन्मुख तथा असान्दर्भिक समेत देखिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अस्पतालको अन्तिम भ्रमणमा तपाईंले प्रयोग गर्नुभएको साधन खुलाउनुहोस् ।

स्कुटर   ☐   मोटरबाईक   ☐

कार   ☐   ट्याक्सी   ☐

सार्वजनिक गाडी   ☐   एम्बुलेन्स   ☐

हेलिप्याड   ☐   एरोप्लेन   ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन   ५= प्रवल समर्थन

प्राप्त गरिएका नर्सिङ सेवा उत्कृष्ट एवं सन्तोषजनक थिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

नर्सका व्यवहारमा शिष्टाचार, नम्रता, भद्रता, लगायतका गुण भने पाइएन ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

स्वस्थ्य उपचारको चिन्ता-पीरलाई हटाउन र धैर्यवान बनाउन चिकित्सकले महत्वपूर्ण भूमिका खेल्ने गरेको प्रत्यक्ष आभाष भयो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकले प्रस्तुत गरेका कार्य-गतिविधि, कारोबार-व्यवसायी उन्मुख तथा असान्दर्भिक समेत देखिए ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अल्प सूचनाका आधारमा चिकित्सकीय सहायताका निम्ति कुनै कठिनाई नभोगी सहज सुविधा प्राप्त भयो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सो अस्पतालमा चिकित्सकीय सहायताका लागि सम्पूर्ण पद्धति-आवश्यकताहरु उपलब्धित थिए ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

अस्पताल पुग्नका लागि तपाईलाई कति कि.मि. लाग्यो, खुलाउनुहोस् ।

१ कि.मि भन्दा कम ☐

१ कि. मि. देखि २.५ कि.मि. ☐

२.५ कि. मि. देखि ५ कि.मि. ☐

५ कि. मि. देखि ७.५ कि.मि. ☐

७.५ कि. मि. देखि १० कि.मि. ☐

१० कि.मि. भन्दा बढी ☐

आफू बस्ने स्थानबाट अस्पताल पुग्न लागेको समय खुलाउनुहोस् ।

१ घन्टा भन्दा कम ☐

१-२ घन्टा ☐

३-४ घन्टा ☐

४-५ घन्टा ☐

५ घन्टा भन्दा बढी ☐

अस्पतालको अन्तिम भ्रमणमा, तपाईंले बिमा (बिमा सम्बन्धी करार) गर्नुभयो ?

हो ☐ होइन ☐ अनुकूल थिएन ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन ५= प्रवल समर्थन

स्वस्थ बानी, रोग विरोधी कार्य र सफल जीवन पद्धतिका लागि परामर्श, सल्लाह र सिफारिस दिने सम्बन्धमा चिकित्सकद्वारा विरलैमात्र सहयोग पाइयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

रोगको निदान-निरुपण, उचित भए-नभएको सम्पुष्टि गर्दा बेलाबखत चिकित्सकद्वारा अलमल ⁄ अप्ठ्यारोमा पार्ने काम समेत भयो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

उपचारका क्रममा चिकित्सकको दक्षता एवं सक्षमताका विरुद्ध शंका समेत उत्पन्न हुने माहोल बन्यो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

जोखिम तथा अनावश्यक स्थितिलाई चिकित्सकले कहिल्यै पनि सार्वजनिक स्पष्टिकरण दिएनन् ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

उपचार-इलाज वा परीक्षण गर्दा चिकित्सकको सावधानयुक्त कार्य र होशियारीपूर्ण व्यवहार प्रष्ट रुपमा आकर्षित गुण र विशेष जिम्मेवारीवोध थियो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

उपचार-इलाज वा परीक्षण गर्दा चिकित्सकको विवेकपूर्ण, नैतिक र व्यावहारिक भूमिकाको आवश्यकता देखियो ।

१ ☐ २ ☐ ३ ☐ ४ ☐ ५ ☐

अस्पताल जानुको आफ्नो उद्देश्य (कारण) खुलाउनुहोस् ।

साधारण उपचार ९न्भलभचवा० ☐

शल्यक्रिया (सर्जरी) ☐

स्वास्थ्यलाभ ९च्भअयखभचथ० ☐

एक्सरे ९ह्(च्थ० ☐

कृपया निम्न सबन्धमा मूल्याङ्कन गर्नुहोस् ।

१= प्रवल असमर्थन ५= प्रवल समर्थन

अस्पताल भर्नामा झन्झटयुक्त तथा कष्टकारी विधि समेत प्रचलनमा छन् ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

चिकित्सकले सेवाग्राहीसँग प्रशस्त समय खर्चनु पक्कै पनि सह्राहनीय विशेषता हो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

सो अस्पताल जाने निर्णय उपयुक्त एवं व्यवहारिक ठहरियो ।

१ ☐   २ ☐   ३ ☐   ४ ☐   ५ ☐

अस्पतालको अन्तिम भ्रमणका लागि तपाई कुन ठाउँ (स्थान) बाट आउनुभयो, खुलाउनुहोस् ।

धन्यवाद !

Appendix 2: Survey English Questionnaire
Questionnaire

Hello! I am Hem Bahadur Gurung. This is the survey form about perceived value on private hospitals in Kathmandu valley for bachelor - final year dissertation. I humbly request you to take your time to fill this survey form based on your last six months visit to the hospital. Your genuine answers will help me to find out perceived value on price and location of hospitals. Respondents information will be kept confidential and only used for academic purpose. Please fill up the form with patience.
Hoping for your kindly cooperation.

Use symbol ✓ for ◯ **and** ☐ **hereas for** ● ◯

Write the name of last visited hospital over previous six-month period? ....

Is this your hospital first time visit? ◯ Yes   ◯ No

Is this your primary hospital? ◯ Yes   ◯ No

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
You felt happy with distance you took to reach hospital	◯	◯	◯	◯	◯
You felt happy with time taken to reach hospital.	◯	◯	◯	◯	◯
The amount you have to spend for medical needs was reasonable.	◯	◯	◯	◯	◯
You could get admitted to the hospital without any trouble.	◯	◯	◯	◯	◯
You found the hospital was conveniently located.	◯	◯	◯	◯	◯
Sometimes you went without the medical care you need because its too expensive.	◯	◯	◯	◯	◯

What's your Gender?   Male ◯ ◯ Female

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
Sometimes it was a problem to cover your share of the cost for medical visit.	◯	◯	◯	◯	◯
You were usually kept waiting for long time when you need doctor's consultation	◯	◯	◯	◯	◯
You had to wait too long for emergency treatment	◯	◯	◯	◯	◯
It was easy for you to get medical aid in the emergency.	◯	◯	◯	◯	◯
You had easy access to the medical specialists in the hospital.	◯	◯	◯	◯	◯
Doctors were careless to check everything when treating and examining you.	◯	◯	◯	◯	◯

What's your age?

◯ Less than 20   ◯ 20 to 30   ◯ 30 to 40   ◯ 40 to 50   ◯ Above 50

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
During your medical visits you were always allowed to say everything you think is important	○	○	○	○	○
You felt confident that you get the medical care you need without being set back financially.	○	○	○	○	○
Sometimes doctors used medical terms without explaining what they mean.	○	○	○	○	○
You had to pay more than you could afford for medical investigation and other expenses	○	○	○	○	○
Doctors listened carefully to what you to say.	○	○	○	○	○
The overall feelings about the service of care was better than what I expected.	○	○	○	○	○

What's your occupation?

○ Self-employee   ○ Retire   ○ Employee   None ○

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
There was error in clarity of price or error in payment.	○	○	○	○	○
Doctors sometimes ignored what you tell them.	○	○	○	○	○
You were worried sometimes about having to pay larger amounts of money for medicine from outside.	○	○	○	○	○
You had a medical question you can reach a doctor for help without any problem.	○	○	○	○	○
You were able to get medical aid whenever you need it.	○	○	○	○	○
Doctors awared good about explaining the reason for medical test is important.	○	○	○	○	○

What's your monthly income?

○ Less than Rs.25000   ○ Rs.75000 to 1 lakh   ○ Rs.150000 – 175000

○ Rs.25000-50000   ○ Rs. 1 lakh-125000   ○ Rs.175000 -2 lakhs

○ Rs.50000- 75000   ○ Rs.125000-150000   ○ Above 2 lakhs

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
It was hard for you to get medical care for short notice.	○	○	○	○	○
You paid more than you pay.	○	○	○	○	○
Those who provide you medical treatment sometimes hurried too much when they treated you.	○	○	○	○	○
All the things considered the medical care you received is excellent.	○	○	○	○	○
You felt comfortable without your bed and surroundings.	○	○	○	○	○
General cleanliness in the hospital was adequate.	○	○	○	○	○

What's your last education qualification? (Check for all that apply)

☐ SLC   ☐ +2   ☐ Diploma

☐ Bachelor   ☐ Masters   ☐ None

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
Toilets were not maintained well in the hospital.	○	○	○	○	○
There were some things about medical care you receive that could be better	○	○	○	○	○
The medical care you have been receiving was just about perfect.	○	○	○	○	○
You were dissatisfied with something's about medical care you receive.	○	○	○	○	○
You were very satisfied with the medical care you are receiving .	○	○	○	○	○
You werenot usually kept waiting for long time when you need doctor's attention/consultation	○	○	○	○	○

What's your family size?

○ less than 2 members   ○ 2 to 5 members   ○ Above 5 members

What's your marital status?
○ Single   ○   married ○ Divorce   ○ Widow

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
The doctors who treat you had a genuine interest in you as a person	○	○	○	○	○
When you were receiving medical care they paid attention to your privacy.	○	○	○	○	○
Your doctors treated you in a very friendly and courteous manner	○	○	○	○	○
The doctors who treated you should gave more respect.	○	○	○	○	○
Nursing care you are receiving in the hospital was adequate.	○	○	○	○	○
Nurses acted too businesslike and impersonal	○	○	○	○	○

In your last visit, how did you get to hospital? (Check for all that apply)

☐ Scooter   ☐ Motorbike   ☐ Car   ☐ Taxi

☐ Public vehicle ☐ Ambulance   ☐ Helipad   ☐ Aero plane

Where did you come from to visit hospital last time?...................................

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
Nursing care you received was excellent.	○	○	○	○	○
Nurses were aloof and discourteous.	○	○	○	○	○
Doctors always did their best to keep you from worrying	○	○	○	○	○
Doctors acted too businesslike and impersonal towards you.	○	○	○	○	○
It was easy for you to get medical care for short notice.	○	○	○	○	○
You think the hospital had everything needed to provide complete medical care.	○	○	○	○	○

How long it took you in km to reach the hospital?

○ less than 1 km 1   ○   km to 2.5 km   ○ 2.5 km to 5 km

○ 5km to 7.5 km ○ 7.5 to 10 km   ○ Above 10 km

How much time you took to reach hospital from your place? (Hours)

○ Less than 1 hrs.   ○ 1 hr. to 2 hrs. ○ 3 hrs. to 4 hrs.

○ 4 hrs. to 5 hrs.   ○ Above 5 hrs.

In your last visit, did you use your insurance?

○ Yes   ○ No   ○ Not applicable

Please rate the following1=strongly disagree and 5=strongly agree

	1	2	3	4	5
Doctors rarely gave you advice about ways to avoid illness and stay healthy.	○	○	○	○	○
Sometimes doctors made you wonder if their diagnosis is correct.	○	○	○	○	○
You had some doubts about the ability of the doctors who treat you	○	○	○	○	○
Doctors never exposed you need to unnecessary risk.	○	○	○	○	○
They were careful to check everything when treating and examining you.	○	○	○	○	○
Doctors needed to be more thorough in treating and examining you.	○	○	○	○	○

What's your purpose of your visit? (Check for all that apply)

☐ General   ☐ Surgery ☐ Recovery ☐ X ray

Please rate the following 1=strongly disagree and 5=strongly agree

	1	2	3	4	5
You could get admitted to the hospital with some trouble	○	○	○	○	○
Doctors spent plenty of time with you.	○	○	○	○	○
Your decision to visit that hospital had been a wise one.	○	○	○	○	○

Thank
You!

Appendix 3 : Regression and Correlation Test

Table 8 Model summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.591[a]	0.349	0.331	2.57181

Model Summary[b]

Table 9:Anova Test

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	510.604	4	127.651	19.300	.000[b]
	Residual	952.443	144	6.614		
	Total	1463.047	148			

a. Dependent variable: perceived value
b. Predictors: (Constant), Perceived quality, Perceived location, perceived price, Satisfaction

Table 10 Residual Statistics

Residuals Statistics[a]

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	4.2938	14.4260	9.5369	1.85743	149
Residual	-8.92787	6.02926	0.00000	2.53681	149
Std. Predicted Value	-2.823	2.632	0.000	1.000	149
Std. Residual	-3.471	2.344	0.000	0.986	149

Table 11 Pearson correlation between perceived value-price-quality-location-price-satisfaction

Correlations						
		Satisfaction	Perceived value	Perceived location	perceived price	Perceived quality
Satisfaction	Pearson Correlation	1	.422**	.178*	.467**	.682**
	Sig. (2-tailed)		0.000	0.030	0.000	0.000
	N	149	149	149	149	149
Perceived value	Pearson Correlation	.422**	1	0.107	.319**	.589**
	Sig. (2-tailed)	0.000		0.194	0.000	0.000
	N	149	149	149	149	149
Perceived location	Pearson Correlation	.178*	0.107	1	-0.008	0.147
	Sig. (2-tailed)	0.030	0.194		0.925	0.073
	N	149	149	149	149	149
perceived price	Pearson Correlation	.467**	.319**	-0.008	1	.591**
	Sig. (2-tailed)	0.000	0.000	0.925		0.000
	N	149	149	149	149	149
Perceived quality	Pearson Correlation	.682**	.589**	0.147	.591**	1
	Sig. (2-tailed)	0.000	0.000	0.073	0.000	
	N	149	149	149	149	149

Table 12: Reliability Test details

Variables	Items	Correlation	Cronbach
Perceived quality	**Tangible**		
	Q29 You felt comfortable without your bed and surroundings.	0.525	
	Q30 General cleanliness in the hospital was adequate.	0.41	
	Q48 You think the hospital had everything needed to provide complete medical care.	0.33	
	rQ31 Toilets were not maintained well in the hospital.	0.327	
	Empathy		
	Q43 Nursing care you received was excellent.	0.484	
	Q13 During your medical visits you were always allowed to say everything you think is important	0.248	
	Q17 Doctors listened carefully to what you to say.	0.263	
	Q37 The doctors who treat you had a genuine interest in you as a person	0.299	
	Q39 Your doctors treated you in a very friendly and courteous manner	0.488	
	Q41 Nursing care you are receiving in the hospital was adequate.	0.447	
	Q45 Doctors always did their best to keep you from worrying	0.477	
	Q56 Doctors spent plenty of time with you.	0.285	
	Reliability		
	Q28 All the things considered the medical care you received was excellent.	0.153	
	rQ25 It was hard for you to get medical care for short notice.	0.185	
	rQ9 You had to wait too long for emergency treatment	0.337	
	Q10 It was easy for you to get medical aid in the emergency.	0.268	
	Responsiveness		
	Q11 You had easy access to the medical specialists in the hospital.	0.413	
	Q23 You were able to get medical aid whenever you need it.	0.388	
	rQ8 You were usually kept waiting for long time when you need doctor's consultation	0.218	
	Q47 It was easy for you to get medical care for short notice.	0.267	
	Assurance		
	rQ12 Doctors were careless to check everything when treating and examining you.	0.393	
	Q15 Sometimes doctors used medical terms without explaining what they mean.	0.261	
	rQ51 You had some doubts about the ability of the doctors who treat you	0.47	
	rQ42 Nurses acted too businesslike and impersonal	0.385	
	rQ46 Doctors acted too businesslike and impersonal towards you.	0.546	
	Q53 They were careful to check everything when treating and examining you.	0.353	
	rQ49 Doctors rarely gave you advice about ways to avoid illness and stay healthy.	0.259	
Satisfaction	Q53 They were careful to check everything when treating and examining you.	0.431	
	Q36 You werenot usually kept waiting for long time when you need doctor's attention/consultation	0.292	
	rQ20 Doctors sometimes ignored what you tell them.	0.382	
	Q5 You found the hospital was conveniently located.	0.391	
	Q18 The overall feelings about the service of care was better than what I expected.	0.505	
	Q14 You felt confident that you get the medical care you need without being set back financially.	0.425	
	Q13 During your medical visits you were always allowed to say everything you think is important	0.27	
	Q10 It was easy for you to get medical aid in the emergency.	0.35	
Perceived value	Q57 Your decision to visit that hospital had been a wise one.	0.478	
	Q33 The medical care you have been receiving was just about perfect.	0.555	
	Q35 You were very satisfied with the medical care you are receiving .	0.565	
Perceived location	Q1 You felt happy with distance you took to reach hospital	0.759	
	Q2 You felt happy with time taken to reach hospital.	0.759	
Perceived price	rQ21 You were worried sometimes about having to pay larger amounts of money for medicine from outside.	0.467	
	rQ26 You paid more than you pay.	0.487	
	rQ7 Sometimes it was a problem to cover your share of the cost for medical visit.	0.463	
	rQ16 You had to pay more than you could afford for medical investigation and other expenses	0.498	
	rQ19 There was error in clarity of price or error in payment.	0.396	
	rQ6 Sometimes you went without the medical care you need because its too expensive.	0.519	
	Q3 The amount you have to spend for medical needs was reasonable.	0.235	