

The Influence of *Experiential Marketing* and Service Innovation against *Positive Word of Mouth* with Patient Satisfaction as a Mediating Variable at Ntb Provincial Hospital



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ABSTRACT: The phenomenon of the emergence of many hospitals and increasing public knowledge and awareness about health causes demands on health care providers including hospitals are also increasing. The hospital must maintain its positive image to be able to seize the market. One of the positive images is built by positive *word of mouth* (*positive WOM*). Many factors encourage the formation of *positive WOM*. This study aims to examine the effect of *experiential marketing* and service innovation on *positive WOM* mediated by patient satisfaction. The population is all patients of NTB Provincial Hospital with a total sample of 100 people. The retrieval technique uses *the purposive sampling* method. Data analysis using SEM-Partial Least Square (PLS). The results showed that *experiential marketing* does not have a direct effect on *positive WOM*, but must be mediated by patient satisfaction. *Experiential marketing* and service innovation have a positive effect on patient satisfaction while service innovation has a positive effect on *WOM* both directly and mediated by patient satisfaction.

KEYWORDS: Experiential Marketing, Service Innovation, Positive WOM, patient satisfaction

I. INTRODUCTION

The increasing knowledge and awareness of the public about health causes their demands for quality health services to also increase. The phenomenon of increasing number of hospitals also requires hospitals as health service providers to continue to improve the quality of their services in order to remain competitive and maintain a positive image. One of the positive images is built from *positive word of mouth*.

Word of mouth is formed in a group because in reality consumers trust news from others more than advertisements launched by business people (Nurgiyantoro, 2014; p.21). *Word of Mouth* can shape consumer trust and can facilitate the dissemination of information indirectly (Hasan, 2010). According to Harsasi (2006), satisfied consumers with the service obtained will tell their experiences to only 5 people, while dissatisfied consumers will tell their dissatisfaction to around 9 people. According to Suryani and Hendryadi (2015), consumer satisfaction can create loyalty so as to cause *WOM* behavior and these consumers can act as word-of-mouth marketing agents.

Consumer satisfaction is one of the factors that can encourage *word of mouth*. Satisfied consumers will provide recommendations to colleagues and family members in the form of *positive word of mouth*. This indicates that satisfaction can mediate the emergence of *positive word of mouth*. Customer satisfaction occurs when the performance of results exceeds the expected performance, that is, when patients get a positive impression of the service they receive. For this reason, hospitals must provide quality services and have characteristics to distinguish from other hospitals. One way that can be done is through *experiential marketing* (Smilansky, 2009). *Experiential marketing* is a marketing approach by providing real experiences that touch consumer emotions.

In accordance with the mandate of Law No. 44 of 2009 concerning hospitals, hospitals must make efforts to improve the quality of health services. In this effort, hospitals must continue to innovate for the smooth process of services in the public sector (Mulia & Saputra, 2020). According to Miles in Dhewanto, et al (2014; p. 94) the concept of service innovation includes service innovation related to service design and the development of new services or improvements in the process of designing and producing services.

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NTB Provincial Hospital is a type A hospital owned by the local government and is the highest referral in NTB Province. As a public service institution, services at NTB Provincial Hospital that are still widely complained by the public include complicated procedures, costs that must be incurred, slow handling of patients to the attitude of service providers that are not friendly. Based on the patient satisfaction survey, the overall value of the Community Satisfaction Index (IKM) for NTB Provincial Hospital services in 2022 is 87.16 with an Average Value (NRR) per element of 3.49, included in the Good category (3.0644 – 3.532). However, this value has not reached the Very Good Service Standard (≥ 88.31) or NRR of (3.5324 – 4.00).

Table 1.1 Community Satisfaction Index Value on Service NTB Provincial Hospital in 2022

No	Information	The value of SMIs	Conversion Value	Service Quality Criteria
1.	First Quarter	3,44	86,08	Good
2.	Second Quarter	3,45	86,27	Good
3.	Third Quarter	3,518	87,95	Good
4.	Fourth Quarter	3,53	88,25	Good

However, judging from the ratings on social media, NTB Provincial Hospital still received a rating of 3.4, still below other hospitals in the city of Mataram (*google review* version as of February 1, 2023).

Table 1.2 Rating 10 Hospitals in Mataram City on Social Media

No.	Hospital Name	Rating	Information
1.	NTB Provincial Hospital	3,4	Government Hospital type A
2.	Mataram City Hospital	4,2	Government Hospital type B
3.	Siloam Hospital Mataram	4,3	Private Hospital type C
4.	Risa Hospital Medika Center	3,7	Private Hospital type C
5.	Biomedical Hospital	4,2	Private Hospital type D
6.	Family Hope Hospital	3,6	Private Hospital type C
7.	RSI Siti Hajar	3,1	Private Hospital type C
8.	RS. Bhayangkara Mataram	4,8	Police Hospital type C
9.	RS. Wira Bhakti	3,8	ABRI Hospital type D
10.	RSK. St. Anthony	4,2	Private Hospital type D

Many things have been done by NTB Provincial Hospital to improve the marketing experience to consumers. Among them by building a modern building with complete facilities, a clean and beautiful environment, providing effective communication training and excellent service for its employees and providing ease of procedures and certainty of service time. NTB Provincial Hospital has also made many innovations in the field of services, including online registration, emergency evacuation services that can be accessed 24 hours from anywhere, as well as the development of services that are not owned by other hospitals in NTB such as integrated oncology services, integrated heart services, pediatric respirology, heart and blood vessel surgery, as well as several other services that are still in the process of development.

This study aims to determine the effect of *experiential marketing* and service innovation on *positive word of mouth* mediated by patient satisfaction. Several previous studies conducted by Muhammad & Artanti (2016), Kailani & Ciobotar (2015), Osturk (2015), Lee & Chang (2012) stated that *experiential marketing* has a positive effect on *word of mouth*. However, this result is not in line with research conducted by Soelasih & Sumani (2020) and Setiawati & Rozinah (2020) which states that there is no direct influence of *experiential marketing* on WOM. While Jones, et al (2014) stated that a person's experience does not provide significant WOM, because consumers may feel that the experience is something personal so it is difficult to give positive or negative opinions.

Previous research conducted to determine the effect of service innovation on satisfaction found that service innovation had a significant effect on consumer satisfaction (Gunawan and Saragih, 2019; Muslichati & Zakiya, 2015; Delafrooz, 2013; Owano, 2014). Not much research has been done to determine the effect of service innovation on *positive word of mouth*.

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II. LITERATURE REVIEW

The Effect of *Experiential Marketing* on *Positive Word of Mouth*

According to Schmitt (1999) *experiential marketing* is a way of creating experiences to consumers through sensory experiences (*sense*), creating affective experiences (*feel*), creating creative thinking experiences (*think*), creating consumer experiences that relate to the physical body with behaviors and lifestyles and experiences resulting from interaction with others (*act*), as well as creating experiences connected to social circumstances, lifestyles, and cultures that the brand can reflect on which is a development of *sensations, feelings, cognitions, and actions* (relate).

Compared to traditional marketing, *experiential marketing* focuses more on the process of creating a consumer experience. If this experience leaves a positive impression on consumers, they will share that positive impression with others. According to Greg in Muhammad & Artanti (2016), *experiential marketing* is an experience gained by providing resources beyond the limits of the product or service offered. That's why *experiential marketing* is able to create *word of mouth*. Smilansky (2009) states that the purpose of *experiential marketing* is not only to turn on brand personality, reposition brands, increase consumer loyalty, but also to encourage the creation of *word of mouth*.

H1: The higher the influence of *experiential marketing*, the higher the *positive word of mouth of patients* at NTB Provincial Hospital

The Effect of *Experiential Marketing* on Consumer Satisfaction *Experiential marketing* must provide emotional and functional value as well as positive customer satisfaction for all aspects (Schmitt, 1999). The concept of *experiential marketing* is a modern marketing concept that prioritizes customer satisfaction (Lululangi, 2014). Yuan & Wu (2008) also stated that *experiential marketing* can encourage consumer satisfaction because the main goal of *experiential marketing* is to provide valuable experiences for consumers. After getting a service, consumers will feel satisfied and dissatisfied. The higher the *experiential marketing* is felt, the higher the customer satisfaction is felt. According to Dimiyati in Pertiwi (2019), satisfaction itself is measured by three indicators, namely product satisfaction, satisfaction with service quality and satisfaction with product benefits.

H2: The higher the influence of *experiential marketing*, the higher the level of patient satisfaction at NTB Provincial Hospital.

The Effect of *Experiential Marketing* on *Positive Word of Mouth* through Patient Satisfaction

Experiential marketing encourages the creation of unforgettable sensations and experiences to meet patient satisfaction. Satisfied customers will be loyal to the products and services that have been obtained for a long period of time, conveying good things to others about the company, products and services obtained (Koetler & Keller, 2009). Smilansky (2009) suggests that *experiential marketing* has many benefits, including encouraging *positivityve word of mouth*. The *word of mouth* dictator according to Sumardy in Effendi et al (2016) included saying positive things about NTB Provincial Hospital, recommending NTB Provincial Hospital to others, and persuading others to get health services at NTB Provincial Hospital.

Yu & Lin (2010) posited that satisfied customers not only have higher returns but also bring in more customers, while dissatisfied customers cause negative publicity and shrinking company profitability. Various studies show higher levels of customer satisfaction ultimately lead to greater customer loyalty and word-of-mouth recommendations (Yoo, SJ, Huang, WHD, & Kwon, S., 2015).

H3: The higher the influence of *experiential marketing*, the higher the *positivity ve word of mouth* through patient satisfaction at NTB Provincial Hospital.

The Effect of Service Innovation on Patient Satisfaction

Service innovation is a new form of service, new work methods and the use of new technology according to the times that companies use to meet consumer desires (Changkaew, et al, 2012). Meanwhile, according to Delafrouz, et al (2013) define service innovation as new activities carried out by companies that produce new services or are processes that provide added value to the services provided by the company.

Service innovation is the company's strategy in improving marketing performance. Service innovation will accelerate the service work system. Owano, et al (2013) stated that service innovation positively affects consumer satisfaction. Delafrouz (2013) mentions that innovation can be measured through the use of technology, company interaction with consumers, service delivery systems and the development of new services.

The Effect of Service Innovation on *Positive Word of Mouth* through Patient Satisfaction as a Mediating Variable

Service innovation is applied because consumers want renewal in the services provided by a company (Fristy, 2021). Service innovation in addition to being able to act as a differentiator with services in other places can also be an added value and improve company performance. If the company's performance is in line with consumer expectations, consumers are satisfied, and vice versa (Kotler & Keller, 2009; p. 139). Highly satisfied consumers tend to become loyal supporters of the company, buy into service providers, and spread positive news (Lovelock, 2011).

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H5: The better the service innovation, the higher the *positive word of mouth* through patient satisfaction at NTB Provincial Hospital.

III. RESEARCH METHODOLOGY

A. Research Design

The type of data in this study is quantitative with a *cross sectional* approach to see the influence of *experiential marketing* and service innovation on *positive word of mouth* with patient satisfaction as a mediation variable. In addition, there is also qualitative data collection in this study to obtain respondents' answers to open questions that aim to clarify some quantitative answers. Data collection in this study was carried out at NTB Provincial Hospital, Mataram City, West Nusa Tenggara, Indonesia during April 2023.

B. Measurement Scale

All variables in this study were measured using the *Likert Scale* on a scale of 1-5 where 5 means Strongly Agree, 4 Agree, 3 Neutral, 2 Disagree, and 1 Strongly Disagree, with assessment criteria based on class intervals according to Table 1.

Table 1. Statement Category Matrix

Criterion	Interval	Research Variables			
		<i>Experiential Marketing</i>	<i>Service Innovation</i>	<i>Satisfaction</i>	<i>Positive WOM</i>
1	< 1.8	Very bad	Very bad	Very Low	Very Low
2	1,8 – 2,6	Bad	Bad	Low	Low
3	2,61 – 3,4	Neutral	Neutral	Neutral	Neutral
4	3,4 – 4,2	Good	Good	Tall	Tall
5	4,21 – 5	Excellent	Excellent	Very High	Very High

C. Population and Sample

The population in this study is all NTB Provincial Hospital patients who have received health services with the following sample inclusion criteria: 1) NTB Provincial Hospital patients in the last 3 months; 2) Age 18 years and over; 3) Patients who have undergone inpatient services at NTB Provincial Hospital; 4) The patient is conscious and can communicate well; and 5) Patients are willing to be respondents.

Data in this study was collected using the *Non Probability Sampling* method with *purposive sampling* techniques to 100 respondents at UD Hospital NTB Province. Sample determination in this study refers to the criteria proposed by Hair et al. (2011), namely: when estimating parameters using the *maximum likelihood estimation* method, the recommended sample size is between 100 to 200, with a minimum sample of 50 with reference to the number of parameters in the model multiplied by 5 to 10 times. So that the number of samples obtained is 100 respondents.

D. Research Instruments

Validity and Reliability

The questionnaire in this study has been tested on 30 respondents to check its validity and reality. The validity test is carried out using the *Pearson product moment coefficient* formula where this test measures the tools used to find out whether the tools used can measure variables (Ferdinand, 2014). Decision making on this validity test uses the constraint *r* table with a significance of 0.05. If the correlation value > 0.30, the sample in the study is considered sufficient and worthy of further analysis. While reliability testing is the process of measuring whether research instruments consistently produce the same results every time measurements are made (Ferdinand, 2014). The *Cronbach Alpha* coefficient formula was used to test the reliability of the questionnaire. The *Cronbach Alpha* value shows the results of the reliability test. The instrument is said to be reliable if the result of the *Cronbach alpha* calculation > 0.70 (Hair, et al, 2011). In this study, validity and reliability tests were carried out using SPSS.

The results of the validity test showed that from 15 items of *Experiential Marketing* variables, 7 items of *Service Innovation* variables, 14 items of *Patient Satisfaction*, and 4 items of *Positive Word of Mouth* variables almost all items have a correlation of > 0.30 except item number 3 in the *Experiential Marketing* variable "The room where I get treatment/service is not noisy" and item number 2 in the patient satisfaction variable "I am satisfied with the equipment facilities in the hospital NTB Province so that both items are excluded from the calculation. As for reliability tests, all showed a *Cronbach alpha* value of > 0.70 with details of

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experiential marketing variables of 0.880, service innovation variables of 0.840, patient satisfaction variables of 0.937, and positive word of mouth variables of 0.861.

Analysis Model and Data Analysis Techniques Data

This research uses an analytical method with a *Structural Equation Model* (SEM) approach based on *Partial Least Square* (PLS). PLS is used because it can work efficiently with small sample sizes and methods can be used for formative and reflective constructions (Gunarto, 2018). Analysis in PLS is carried out in three stages, namely: 1) Outer Model Analysis (Measurement Model); 2) Inner Model Analysis (Structural Model); and Hypothesis Testing.

The measurement model or *outer model* was carried out on all variables in this study, namely the independent variable using the convergent validity test with the *Rule of thumb* for *loading factors* commonly used to measure *convergent validity* is ≥ 0.7 with an *average variance extracted* (AVE) value of ≥ 0.5 (Hair, et al, 2011). *Discriminant validity*) and *internal consistency reliability*. This model is also called a reflective measurement model because it evaluates the values of *loading factor*, *composite reliability*, *cronbach's alpha*, AVE and *discriminant validity*, with the *rule of thumb*.

Inner model analysis is used to predict causal relationships between variables tested in the model. Using the indicator coefficient of determination (R^2) where the R-square in the PLS model is evaluated by looking at the Q-square (Predictive Relevance) with a value if greater than 0 (zero) will show that the model has a value of Predictive Relevance, while if the value of Q-square is less than 0 (zero) it will show that the model lacks *Predictive Relevance*.

Next is to test the hypothesis with a t-statistic value of 1.96 at α (alpha) 5% and a probability value (Muniarti et al, 2013). So the criterion for acceptance or rejection of the hypothesis is H_a accepted and H_0 rejected if the t-statistic > 1.96 . To reject or accept the hypothesis using probability, H_a is accepted if the p value < 0.05 (Husein, 2015).

IV. RESEARCH RESULTS AND DISCUSSION

The number of responses in this study was 100 respondents with several dominant characteristics, namely women (58%), with the most age in the range of 36-45 years (33%), the last high school education (45%), work as a housewife (32%) followed by self-employment (24%) with most respondents being BPJS users (96%) with 63% having visited the hospital at least 3 times.

Measurement Model

Because the type of data in this study is ordinal, it is included in the requirements for non-parametric testing, and the method used is with *Partial Least Square* (PLS), which includes evaluation of measurement models (*outer model*) and evaluation of structural models (*inner model*).

Based on **Table 2**, the Evaluation of the Measurement Model (*Outer Model*) consisting of convergent validity tests, discriminant validity tests, and model reliability tests shows that the data meets the requirements for analysis using PLS.

Table 2. Composite Reliability, Average Variance Extracted, and Comparison of AVE Square Root Values with Correlation between Constructs

Latent Variables	α	CR	AVE	1	2	3	4
(1) <i>Experiential Marketing</i>	0,923	0,933	0,501	0.770			
(2) Service Innovation	0,852	0,885	0,525	0.541	0.725		
(3) Patient Satisfaction	0,918	0,930	0,507	0.708	0.682	0.712	
(4) <i>Positive Word of Mouth</i>	0,844	0,893	0,676	0.525	0.608	0.683	0.822

Note: α -Crombach Alpha; CR-Composite Reliability, AVE- Average Variance Extracted; the bolded number is the square root value of AVE with correlation between constructs.

Furthermore, a Structural Model Evaluation (*Inner Model*) was carried out consisting of an R-Square test (R^2) and a Predictive Relevance test (Q^2). R-Square showed results that 69.2% of the diversity of the Patient Satisfaction variable can be explained by the Experiential Marketing and Service Innovation variables which shows that this model falls into the strong category and 50.4% of the *diversity of the Positive Word of Mouth* variable can be explained by the *Experiential Marketing* variable and the Patient Satisfaction variable which indicates that this model falls into the moderate category. While Q-Square shows the Q^2 value for 2 models that meet the $Q^2 > 0$ criteria, which is 0.338 for the *Experiential Marketing* and Service Innovation variable model with the Patient Satisfaction variable and 0.306 for the Patient Satisfaction variable model with the *Positive Word of Mouth* variable. The results of these tests prove that the data in this study is feasible to be analyzed using PLS.

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Table 3. Research Hypothesis Decision

Hypothesis	Variable	P Value	Ket.	Decision	Coefficient
Hypothesis 1	EM → PWM	0,926	Insignificant	H1 Rejected	-0,012
Hypothesis 2	EM → KP	<0.001	Significant	H2 Failed to Reject	0,567
Hypothesis 3	KP→PWM	<0.001	Significant	H2 Failed to Reject	0,510
Hypothesis 4	IL→KP	<0.001	Significant	H2 Failed to Reject	0,375
HYPOTHESIS 5	IL → PWM	0,006	Significant	H2 Failed to Reject	0,267

Note: EM- Experiential Marketing; PWM-Positive Word of Mouth; KP-Patient Satisfaction; and IL-Service Innovation

Source: Smart PLS Analysis Results

Table 3 shows the results of the PLS test to prove hypotheses 1 to 5. Based on the results of statistical tests, it was found that only *Experiential Marketing* variables were not significantly related to *Positive Word of Mouth* with a p-value of more than 0.05 (p-value = 0.926). The rejection of hypothesis 1 explains that the *Experiential Marketing* variable does not significantly affect the *Positive Word of Mouth* variable directly, on the contrary, the effect of the *Experiential Marketing* variable is negative for the *Positive Word of Mouth* variable seen from the negative coefficient number (-0.012). Impressive patient experiences do not encourage patients to tell positive things about the hospital. This actually supports research conducted by Jones, et al (2014) which states that a person's experience does not provide significant WOM, because sometimes consumers feel that the experience is personal, and not to be told to others.

Although *Experiential Marketing* is not directly related to *Positive word of Mouth*, hypothesis 2 proves that *experiential marketing* has a significant direct effect on patient satisfaction ($p < 0.001$). So, these results also show that the better the experience felt by the patient, the higher the satisfaction felt by the patient. This is in line with the theory proposed by Schmitt (1999) that experiential marketing is a form of marketing that provides emotional and functional value and creates satisfaction for customers. Several previous studies have also corroborated this theory, such as research conducted by Yuan and Wu (2008); Alkilani, et al (2012); Aristiawan, S.A., et al (2019) who stated that experiential marketing can encourage consumer satisfaction and the better the category of experience received by customers, the higher the satisfaction felt (Hamidi, et al, 2022).

Table 4. Analysis of Mediation Effects4

Kind	Variable	P Value	Decision	Coefficient
Direct	EM → PWM	0,926	H1 Rejected	-0,012
	IL → PWM	0,006	H5 Accepted	0,267
Indirect	EM → PWM	0,001	H6 Accepted	0,289
	IL → PWM	0,001	H7 Accepted	0,191

Based on **Table 3**, it turns out that patient satisfaction is significantly related to *positive word of mouth* ($p < 0.001$) as well as Service Innovation ($p < 0.001$) where in **Table 4** this variable is significantly related *directly* and *indirectly* to *Positive Word of Mouth*, so it is necessary to calculate the value of *Variance Accounted For* (VAF) to find out whether the service satisfaction variable can be a mediation variable and the results show that the VAF value obtained is 41.7% which means the Patient Satisfaction variable can be a mediation variable and is included in the partial category of mediation, meaning that there is a decrease in the amount of coefficient when the Patient Satisfaction variable becomes mediation but is still within the level of hypothesis acceptance (significant). So that the flow of the model can be selected using direct or indirect relationships (Figure 1).

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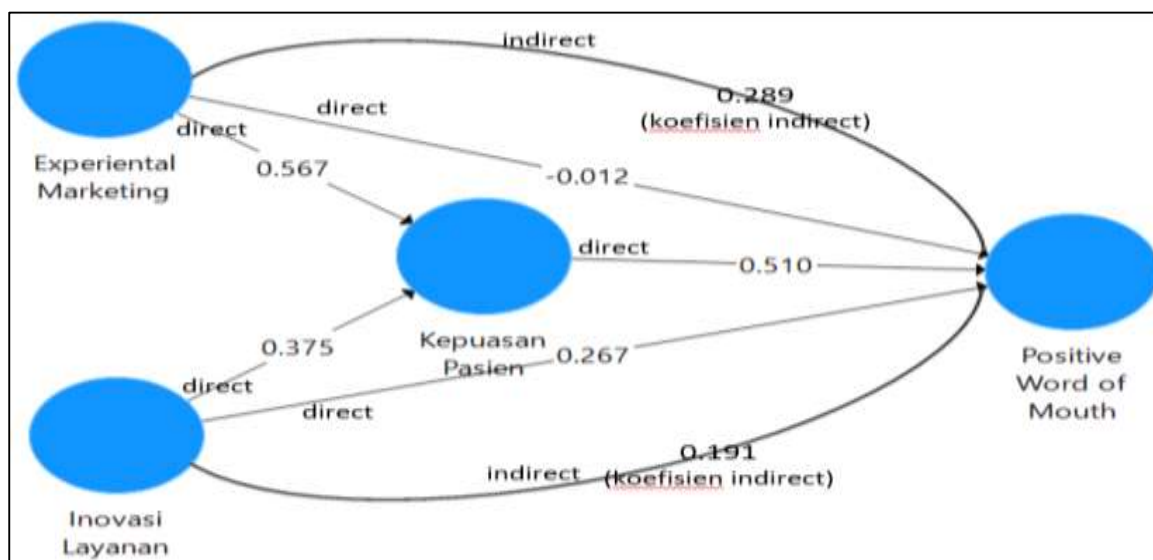


Figure 1. Chart of Direct and Indirect Coefficients Between Variables for Mediation Effects Testing

The results of the above hypothesis test are supported by several previous studies. The more satisfied the patient is with the experience, the higher the desire to tell positive things to the hospital. These results are in line with Smilansky's (2009) theory that *experiential marketing* has many benefits, including encouraging positive word of mouth. Kotler and Keller (2009) also state that satisfied customers will be loyal to the products and services obtained to then convey good things to others.

Service innovations that have a positive influence with patient satisfaction and *Positive Word of Mouth* are also in line with previous studies, including those conducted by Delafrooz, et al (2015), Owano, et al (2014), Ming Yeh, et al (2018) and Gunawan & Saragih (2019) which found that service innovation is significantly related to Patient Satisfaction and Permana research, et al (2017) and Manohar, et al (2019) who stated that service innovation has a positive impact on positive *word of mouth*. Service innovation is the company's strategy in improving marketing performance. Previous research from Pribadi, et al (2022) found that the better the service innovation provided, the higher the level of satisfaction felt by customers in the work area of RSUD dr. R. Soedjono Selong. Service innovation can accelerate the service work system. This speed in service makes consumers do not have to wait long to receive service (Owano, et al, 2013). Several theories link the influence of service innovation on company performance, both financial performance and non-financial performance. Judging from non-financial performance, which is divided into internal performance and external performance, where external performance includes behavioral intentions, customer satisfaction and customer loyalty (Damanpour, et al, 2009), innovation has an influence on customer loyalty, which in turn will encourage positive *word of mouth*.

V. CONCLUSION

Based on the results of the study, the results were summarized as follows: experiential marketing does not directly affect positive word of mouth patients, while experiential marketing has a significant effect on patient satisfaction and *experiential marketing* has a significant effect on *positive word of mouth* through patient satisfaction. Then service innovation has a significant influence on patient satisfaction and then service innovation has a significant influence on *positive word of mouth* both directly and with patient satisfaction as a mediation variable. It was even found that the effect of service innovation on *positive word of mouth* was directly stronger than mediated by patient satisfaction.

Some things that later became recommendations to the NTB Provincial Hospital were that the Provincial Hospital still needs to increase the use of technology in its innovations, among others, by making *online* registration applications that are more accessible to the public than what is currently available, namely through the *website*. NTB Provincial Hospital also needs to increase interaction with consumers, for example by answering complaints and questions on social media or by *following up* patients who have undergone treatment at NTB Provincial Hospital personally.

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