TITLE: FACTORS DETERMINING CUSTOMERS' REPURCHASE INTENTION OF HEALTHCARE INSURANCE PRODUCTS IN MALAYSIA.

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Abstract

This inquiry studies the empirical testing the determinant of customers' behaviour towards the healthcare insurance products in Malaysia. The research was established on an empirical investigation of the existing healthcare insurance customers from Klang valley, Malaysia. The main data for the study were generated from self-administered survey of 160 respondents. Data were analysed using descriptive and inferential statistics (Exploratory Factor Analysis). From the application of exploratory factor analysis, it was concluded that the correlation matrix was all positive and above 0.6. Three factors were extracted which explain 47% of the variation. Lastly, the studied variables were loaded in one domain or another confirming suitability for further analysis. As the survey is based on healthcare insurance in particular from Malaysian customers' perspective, the findings would be of interest to the managers of health insurance providers as well as policy makers to draw future strategies for development.

Keywords: Service Quality, Customer Satisfaction, Customer Repurchase Intention, Healthcare insurance products, Malaysia.

Introduction:

The repurchase intention is affected by customer satisfaction, and the quality of service offered, are recognized as an important concepts in service industries to maximize the firms' market share and increase its revenue, as well as, bringing down the cost of getting and holding back customers (Abdel-Maguid Lotayif, 2004; Ahmed, Nawaz, Usman, Shaukat, Ahmed, & Rehman, 2010; Roberts, 2005). Healthcare insurance is not barely a service business, merely it is become as a core of attention of the Malaysian government; due to introduce the insurance-based healthcare plan for its citizens, as it strives to be a developed nation by 2020. Also, most of the past discussions on customer repurchase intention were mainly in the context of different industries, seldom this concept has been discussed in Asia Region under the context of healthcare insurance products. Furthermore, to get a more honest understanding of customers' repurchase intention in the setting of healthcare insurance products; which seen as a crucial topic to conduct an in-depth research in the developing country like Malaysia. Furthermore, this field has a significant contribution to the understanding of consumer's behavioural intention towards health care products which eventually assist policy makers of Malaysian healthcare insurance companies to apply appropriate strategies in order to gain more customers to purchase healthcare insurance products.

Recently, Malaysia Government launched a plan for Economic Transformation Program aiming to be a developed nation by 2020, to include 12 National Key Economic Areas (NKEA) that cover 11 industries and one geographic territory, that were jointly identified by the private and public sectors. Among the 11 industries; health care industry is one of the important components. As the Malaysian government puts huge concentration on the health care sector to reduce the imbalance in health care utilization; mitigate the challenges in quality of health care (MOH Strategic Plan, 2013).

During the last few years, the Malaysian government has increased their expenditure substantially to improve the citizens' health care services. The estimated expenditure on health care was RM29.30 billion as operational budget and RM 3.86 billion for 2012-13 respective development (Ministry Of Health Malaysia, 2011). In addition, the Malaysian government is gradually improving its healthcare service by comprising three schemes: re-evaluate the healthcare strategy and enhancing healthcare service development, and the capability for cost reduction. These improvements are anticipated to be progressively placed by 2020 in order to offer more expert healthcare services to the public (Ministry Of Health Malaysia, 2012). As

the Healthcare under NKEA focuses on bringing both the public and private sectors into collaboration; the Ministry of Health puts forth conducive efforts to implement 1CARE initiatives to scrutinise new horizons in health care insurance services offered to the citizens in order to distinguish the principles of inclusiveness and social justice. Above all, Malaysian government is aiming to be a developed nation by 2020 with expected citizens of 34 million. However, the biggest challenge is to expand the health care coverage, in terms of quality and capacity at the same time by inhibiting the cost of health insurance coverage (Malaysian Institute of Economical, 2011).

One of the greatest challenges faces by the service firms is the ability to maintain customers purchase and repurchase intention. Researchers assured that it is much better for service firms to support its former customers than looking for new customers (Ahmad, Nawaz, Usman, Shaukat & Ahmad, 2010; Assael, 1995; Kotler, 2000). Nevertheless, customers repurchase intentions of a given services like health insurance products does not virtually appear instantly. But it appears once the quality of service offered and the firm's reputation is in higher status.

Thus, the power to deliver optimal service quality will get the service firms competitive advantages among others in the same industry (Turel, Serenko & Bontis, 2007). As Berry, Parasuraman, and Zeithaml (1988; 1991) assured that delivering greater service by upholding high quality is an important requisite for success and firms' survival. on the same perspective, Kandampully (1998) traced the leading service firms striving to preserve a more beneficial service to maximise the customer satisfaction which reflects on their repurchase behaviour (Cronin & Taylor, 1992; Patterson & Johnson, 1993; Ruyter &Wetzels, 1999). Researchers like Jones and Sasser (1995); and Mittal & Lassar (1998) agreed that the customer repurchase intention is affected by customer satisfaction, but the overall relationship between service quality, customer satisfaction and customer repurchase intention had not yet been intensely explored under the health insurance industry (Olsen, 2002; Szymanski & Henard, 2001; Zeithaml, 2000). Hence, offering better services from the existing health care insurance companies, it is an important agenda to key out the causal elements of perceptual experience that influence customers repurchase intention of health insurance products.

Literature Review

Service Quality

The continuous competition among the service firms and increase customer expectation; require the service firms to make more efforts to achieve service quality. So, it is inevitable for service firms provide better quality of service to meet the client expectations with their perceptual experience in order to increase its market share (Ahmad et. al., 2010; Ramsaran-Fowdar, 2008). According to Zeithaml (1988) perceived quality is defined as: "Consumers' appraisal of a product's overall excellence or superiority" (P. 474). Previous researchers agreed that perceived service quality can be recognised as matching the customer service actual performance perceptions with the service performance expectations (Gronroos, 1982; Zeithaml, 1988). Apart from that, Gronroos (1982) distinguished between two types of service quality: technical and functional quality, which are referring to the delivery of the service and the style in which it is saved or picked up. Brady and Cronin (2001) ensured that the features of service quality to be considered as a quality outcome, interaction quality, and physical environment quality. In addition, Bitner and Matthew (2000) clarifies that the evidence of service quality could consist of three Ps of services specifically, people, process, and physical evidence.

To measure service quality, researchers have developed various instruments that relied on their classification of the quality. It is worthwhile to say that researchers are continuing to use SERVQUAL instrument that developed by Parasuraman and Zeithaml (1985) to measure the service quality; because SERVQUAL is considered as a reliable tool to measure service quality (Lewis & Mitchell, 1990). Moreover, the SERVQUAL instrument relies on five primary dimensions, which are described by Cronin and Taylor (1992), and Teas (1993). Cavana, Corbett, and Lo (2007) declared that service quality dimension represented by tangibility (appearance of physical facilities, equipment, personnel, and written materials), reliability (for instance: ability to health care insurance companies to do the promised service dependably and accurately. Once something is promised, then it should do and provision of services at the time promised); responsiveness (willingness of health care insurance personnel to help customers and provide on time service); assurance (the knowledge and courtesy of health care insurance employees and their ability to inspire trust and confidence); empathy (caring, individualized attention to its customers i.e. understanding specific needs, and personal attention).

Customer Satisfaction

Client satisfaction is a comparison between what the client expects and what they actually get from the service providers (Zeithaml, Bitner & Gremler, 2006). Oliver (2009) defines

satisfaction as the fulfilment of response. It is a judgment that a product or service should provide a pleasurable level of consumption-related fulfilment. In this regard, it is significant to note that satisfaction is an active process which requires continuous development and improvement (Fournier & Mick, 1999). Ruyter and Bloemer (1999) stated that the satisfaction is thus perceived to be a post consumption evaluation or a pleasurable level of consumption-related fulfilment. Aside from that, the failure of meeting the client demands and expectation are supposed to be a status of dissatisfaction. Vansteenwegen (2008) reported that the service quality and customer satisfaction are the essential indicators of the repurchase process. Nevertheless, customer satisfactions obviously ensure the persistence of the firm's business progress (Ahmad & Sungip, 2008; Kotler, 2000).

So far the complaint ratio is regarded as one of the current indicators to assess an insurance company's performance, which identifies as a serious measure of customer satisfaction and service quality (Stafford, Stafford, & Wells, 1998). Furthermore, satisfying the customer's requirement through providing them with high quality services considered as a selling strategy (Stafford et al., 1998). Customer satisfaction, in the context of this research, defines as a judgment of a gratifying level of fulfilment experienced by the healthcare insurance customers. This feeling of fulfilment is measured by the customer's assessment of his / her purchase decision. More distinctly, a determination reached by customers based on sound or defective and whether he/ she is happy to consider the decision to repurchase (Hellier, Geursen, Carr, & Rickard, 2003).

Repurchase Intention

A direct positive relationship between client satisfaction and their repurchase intention is held up through service studies (Ahmad et, al., 2010; Bolton & Lemon, 1999; Patterson & Spreng, 1997; Selnes, 1998). Nevertheless, these studies concluded that, within service firm, the customer satisfaction is strongly linked to the behavioural decision. Moreover, it also mentioned that the direct positive relationship of satisfaction on customers' repurchase intention. While customer repurchase intention is the chief component, it is just one of the many variables that can affect by customer satisfaction (Mittal & Lassar, 1998; Sharma & Patterson, 2000). Henkel, Houchaime, Locatelli, Singh and Zeithaml (2006) suggested that satisfied customers in the service industry have a high future repurchase intentions.

Fishbein and Ajzen (1975) agreed that the consumers' purchase intention is an essential index to predict consumer behaviour as a subjective attachment to the product. Purchase intention can be translated as the probability that the consumers will plan or be willing to buy a

particular merchandise or service in the future. When there is an increase in purchase intentions, it will contribute to an increment in the customers purchasing probability (Dodds, William & Kent, 1991; Schiffman & Kanuk, 2004). Consumers' purchase intention also serves as a mediator between their attitude towards a special product and their real purchase behaviour (Fishbein & Ajzen, 1975). Measurement scales to measure purchase intentions are; possible to buy, intended to buy and consider buying. Engel, Blackwell & Miniard (1995) expanded that purchase intention into: unplanned buying, partially planned buying, and fully planned buying.

As the firms make every effort to retain a superior service to reach client satisfaction by working them to repurchase (Kandampully, 1998; Zeithaml, Valarie & Mary Bitner, 1996). In fact, several subjects reported that the service quality can consider as an earlier request to the customer satisfaction (Ruyter & Josee, 1999; Szymanski & Henard, 2001). Additionally, Caruana, (2002) assured that the atonement has a mediating role play in the relationship between service quality and customer repurchase intention. Referable to the lively nature of health insurance customers' expectation, it is thus necessary to examine the efficacy of the questionnaire of service quality, satisfaction and customers' repurchase intention on the health insurance perspective of subjecting the result of the instrument to factor analysis. As exploratory factor analysis, use by various researchers to ensure the questions asked to the respondents relate to the construct that, one intends to measure.

Methodology

Sample

This research is a cross sectional study which applied convenience sampling technique for sampling design. The researchers selected a sample from Klang Valley area, particularly from Kuala Lumpur and Cyberjaya. The targeted respondents were picked under the criteria of age 18 or above and be current health care insurance policyholders. The reasons for choosing Kuala Lumpur and Cyberjaya regions are due these two cities considered as the commercial capital of Malaysia and a sizeable bit of healthcare centres are fixed here. 200 respondents from two cities were given the instruments. Only 180 respondents were returned. After assessing the missing and accuracy, the researchers chose 160 responses for further analysis which represent 80% as the response rate.

This research adapted pre-existed questionnaire as a tool for data collection. The original questionnaire has two parts. Part one includes the respondents' demographic information e.g.: sex, age, job, educational level, marital status, race, type of insurance policy and the length of

period subscribing healthcare insurance. While section two includes the indicators of the main elements of this research (service quality dimensions, customer satisfaction and customer repurchase intention).

Measurement instrument

The study tool was adapted based upon previous research. Table1 shows the items included in this research The items were developed from SERVQUAL, which need to be modified to fit with this particular industry context (Stafford et al., 1998). Hence, the instruction for the questionnaire was refined based on the Malaysian healthcare insurance industry customers' perspective. Service quality was adapted from the 25-item SERVQUAL Chen and Hitt, (2002); Parasuraman, Berry, (1991); Yang, Jun and Peterson, (2004) this includes five dimensions: Tangibles (four items), Reliability (eight items), Responsiveness (four items), Assurance (four items), and Empathy (five items). Client satisfaction was evaluated by eight items adapted from Castro, Armario and Ruiz, (2004); Lam, Shankar, Erramilli, and Murthy, (2004). At last, the customer repurchase intention was measured by four items adapted from Sharma and Patterson, (2000). All items were measured via 7-point rating scale with scales categories ranging from strongly disagree to strongly agree (1 very strongly disagree, 2 strongly disagree, 3 disagree; 4 somewhat agree, 5 agree; 6 strongly agree and 7 very strongly agree).

Table 1: Items adapted for the variables

Tangibles	Modern looking Equipment and Technology (T1)	
	Visually appealing physical facilities (T2)	
	Neat appearing employees and agents(T3)	
	Visually appealing service materials(T4)	
Reliability	Keeping promises (R1)	
	Offer quality products and services (R2)	
	Contracts with clear terms (R3)	
	Settling claims with no unnecessary delays (R4)	
	Being interested on solving customers' problems (R5)	
	Perform the service right the first time (R6)	
	Provide services at the promised time (R7)	
	Issuing error free documents (R8)	
Responsiveness	Informing customers exactly when services will be performed (Re1)	Service Quality (SQ)
	Offering prompt service to customers (Re2)	
	Always willing to help customers (Re3)	
	Never being too busy to respond to customer	

	requests (Re4)	
Assurance	Customers feeling safe in their transactions (A1)	Chen et al., (2002); Parasuraman et al., (1991); Yang et al., (2004)
	Employees and agents instilling confidence in customers (A2)	
	Employees and agents being consistently courteous with customers(A3)	
	Employees and agents having the knowledge to respond to customers' requests(A4)	
Empathy	Giving to customers individual attention(E1)	
	Having convenient operating hours(E2)	
	Employees and agents giving customers personal attention(E3)	
	Having the customers' best interests at heart(E4)	
	Employees and agents understanding the specific needs of customers (E5)	
Customer Satisfaction	My decision to purchase health care insurance from my current insurer was a wise one(CS1)	Castro et al., (2004); Lam et al., (2004)
	My health care insurance is very reliable(CS2)	
	I am pleased that I purchased the healthcare insurance from the Company(CS3)	
	I'm very satisfied with my current healthcare insurance company(CS4)	
	My health care insurance satisfies my needs(CS5)	
	My health care insurance is as good or better in comparison of the other healthcare insurance(CS6)	
	My complaints or problems are addressed in a fair manner(CS7)	
	My health care insurance gives me the service I expect(CS8)	
Customer Repurchase Intention	I intend to continue to purchase, at least the same health care insurance policy over the next 12 months (CRP1)	Sharma and Patterson, (2000)
	I intend to continue to contribute, at least the same amount, to personal healthcare from my present financial services company over the next 12 months (CRP2)	
	With all my considered, I would likely to actually purchase, at least the same policy, of health care insurance over the next 12 months(CRP3)	
	If I had the chances I will continue to purchase, at least the same Healthcare insurance, over the next 12 months(CRP4)	

Data analysis Procedure

Referable to the critical nature of customer repurchase intention on the firm's objectives of Malaysian healthcare insurance industry; it is, thus, necessary to test the efficacy of the questionnaire of determining the elements that bear on the customer repurchase intention in

the Malaysian healthcare insurance industry by subjecting the result of the questionnaire to factor analysis.

Furthermore, Exploratory Factor Analysis (EFA) is a common method utilized to develop, elaborate, and evaluation of questionnaires. It is likewise employed to examine the ability of the instruments to ensure that the construct which the researcher intends to major in further. Costello, Anna and Osborne (2005) noted that EFA is a correlation technique which design to determine meaningful clusters of shared variance.

In that regard, Williams, Brown and Onsman (2010) confirm that EFA is a technique to minimize the number of variables by exploring the relationship structure among the research variables. In summation, this research applies EFA as this method can be applied to describe variability among observed, correlated variables in terms of the potentially lower number of unobserved variables which called factoring and to identify common underlying variables called factors within larger set measures (Hair, Black, Barry & Babin, 2010).

EFA is widely used and broadly applied statistical technique in the social sciences (Costello & Osborne, 2005). As stated by Pett and Lackey (2003); and Thompson (2004) EFA can support researcher to analyse and define the main dimensions to make a hypothesis, or model from a relatively significant lot of latent constructs to be presented by a set of points.

Results and Discussion:

A total of 160 respondents form the sample for this research. Out of 160 respondents, 60% were male, and 40% were female. Most of the respondents were within 18 to 29 years of age categories (70%) followed by 30-39 years (25%), 50 and over (5%). Apart from that, 90% respondents have their own insurance policy for more than 20 years. Whereas the majority of the respondents (80%) have both life and health insurance scheme under various private, local and international companies. In terms of racial distribution, most of the respondents belonged to Malay (65%) followed by Chinese (20%) and Indian (15%). Under occupational categories majority of the respondents worked under different local and international companies (50%) followed by 30% of students and 20% under different government department. The bulk of the respondents were at least a bachelor degree holder (60%) complied by a diploma (30%) and masters (10%). The majority of the respondents were married (60%) followed by single (40%).

This research applied EFA for data reduction purpose on 37 items to identify the factor structure for assessing the health insurance repurchase intention in Kang valley, Malaysia. (See Table- I) A sample size of 160 provides an adequate basis for testing of the correlations

between the variables (Hair et al., 2010). In this research, the Bartlett's test indicated the correlations were in a significant at the .0001 levels. The overall MSA value falls in the acceptable range with a value of .884 and the Bartlett's test of sphericity was significant ($\chi2$ (N=160) =3233.106, p < .000). All the diagonals of the anti-image correlation matrix were over 0.60, supporting the inclusion of each item in the factor analysis.

Table 2 also contains the information's regarding the three potential factors and their relative explanatory power as evidenced by their eigenvalues. In addition to assessing the importance of each component, this research also used the eigenvalues to assist in choosing the number of elements. The initial eigenvalues showed that the first factor explained 32.132 percent of the variance; the second factor 8.157 percent of the variance, the third factor explained6.518 percent of the variance (see, Table 2). Table 2 present the effects of the principal components factor analyses using a varimax rotation on the 37 items. Note that there are three factors with eigenvalues greater than 1.0, and they account almost 47% of the total variance.

The final results (Table 2) showed reliabilities of between 0.60 and 0.82 for three construct namely: service quality, customers' satisfaction and customers' repurchase intention, which are considered sufficient (Nunnally, 1978). These dimensions encompass a full range of factors in the service quality, client satisfaction and customers' repurchase intention on health insurance products in Malaysia. The answers proved that reliability and validity were very strong in assessing the unique variability of each manufacture, e.g., service quality, customers' satisfaction and customers' repurchase intention. The determinations of the statistical analysis are in the line of existing literature.

Table 2: Summary of Exploratory Factor Analysis

Factor Name	EV	PV	CV	Variables Component	Factor Loading
Service Quality; α = .821	6.931	32.132	32.132	Modern looking Equipment and Technology (T1)	.617
				Visually appealing physical facilities (T2)	.593
				Neat appearing employees and agents(T3)	.775
				Visually appealing service materials(T4)	.687
				Keeping promises (R1)	.601
				Offer quality products and services (R2)	.526
				Contracts with clear terms (R3)	.562
				Settling claims with no unnecessary delays (R4)	.636
				Being interested in solving customers' problems	.621

				(R5)	
				Perform the service right the first time (R6)	.657
				Provide services at the promised time (R7)	.565
				Issuing error free documents (R8)	.512
				Informing customers exactly when services will be performed (Re1)	.501
				Offering prompt service to customers (Re2)	.559
				Always willing to help customers (Re3)	.613
				Never being too busy to respond to customer requests (Re4)	.568
				Customers feeling safe in their transactions (A1)	.626
				Employees and agents instilling confidence in customers (A2)	.681
				Employees and agents being consistently courteous with customers(A3)	.634
				Employees and agents having the knowledge to respond to customers' requests(A4)	.538
				Giving to customers individual attention(E1)	.586
				Having convenient operating hours(E2)	.628
				Employees and agents giving customers personal attention(E3)	.648
				Having the customers' best interests at heart(E4)	.636
				Employees and agents understanding the specific needs of customers (E5)	.582
Customer Satisfaction α = .862	2.084	8.157	40.289	My decision to purchase health care insurance from my current insurer was a wise one(CS1)	.557
				My health care insurance is very reliable(CS2)	.662
				I am pleased that I purchased the healthcare insurance from the Company(CS3)	.666
				I'm very satisfied with my current healthcare insurance company(CS4)	.625
				My health care insurance satisfies my needs(CS5)	.672
				My health care insurance is as good or better in comparison of the other healthcare insurance(CS6)	.648
				My complaints or problems are addressed in a fair	.583

				manner(CS7)	
				My health care insurance gives me the service I expect(CS8)	.629
Customers' Repurchase intention, α = .871	1.627	6.518	46.807	I intend to continue to purchase, at least the same health care insurance policy over the next 12 months (CRP1)	.587
				I intend to continue to contribute, at least the same amount, to personal healthcare from my present financial services company over the next 12 months (CRP2)	.563
				With all my considered, I would likely to actually purchase, at least the same policy, of health care insurance over the next 12 months(CRP3)	.628
				If I had the chances I will continue to purchase, at least the same Healthcare insurance, over the next 12 months(CRP4)	.629

Notes: 1: Eigenvalue (EV); 2: Percent of Variance (PV); 3: Cumulative Variance (CV)

Implication and Conclusion

This research examined the factors determining customers' behaviour of Malaysian healthcare insurance products. The aim of this study is to identify the items, structured under three different constructs (Service, quality, Customer satisfaction and Customers' repurchase intention) under Malaysian health insurance industry's context.

To accomplish the above mentioned objective, an empirical study was conducted with a total of 160 valid respondents' responses and the data were analysed through descriptive and inferential statistics (Exploratory Factor analysis). From the application of exploratory factor analysis, it is concluded that the correlation matrix was all positive and above 0.6. Three factors were extracted which explain 47% of the variation.

As the view is based on health insurance in particular under Malaysian perspective, its consequences may also be of interest to the managers of health insurance providers as well as policy makers to draw additional strategy in their parts. The significance of the results indicates that practitioners require developing appropriate strategies to improve their operation and keep customers by attending at the points generated by the constructs. Another significance of the findings of this research suggests that the policy makers need to devise better and more comprehensive regulatory measures to enhance the acceptability of the reformed system and to increase the security of the policyholders.

Limitations and Future Research

Although this research contributes to the body of knowledge of consumer behaviour, it is not without limitations. The use of positivism paradigm in this research takes for granted the existence of a single tangible reality and the reliance of the written report on quantitative research methods, imposed the first limitation on the subject's area. Equally, there may be other variables may be a role played as a significant part in excusing the behaviour of health insurance clients, further research need to look for those particulars. In further, research can be urged to explore the causal relationship between service quality, customer satisfaction and customers repurchase intention.

Generalizability of the findings imposed the second limitation on the subject area. Although the sample size (n=160) adds to the calibre of the work, all data were collected from healthcare insurance policyholders in Kuala Lumpur and Cyberjaya. The finding of this research may, consequently, solely reflect the perceptual experiences of that special group of people. The industry-specific and single culture sample frame may limit the applicability of the findings of this survey to other services and other settings in Malaysia. Further studies are recommended to discover the generalizability of the findings.

A third limitation is the sampling method used in the study. A portion of the people missed the chance to be selected and surveyed. A survey with a larger sample size which uses the quota sampling method should be conducted to corroborate the findings of this survey. With a quota sampling method, which segments the group into subgroups, it will be possible to check the number of respondents with the demographic profile of Malaysia's general population. Within each section, a probability, random sampling technique can be applied to generate more honest solutions.

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