Affective commitment, trust, perceived value and service quality as predictors of customer engagement in the South African open medical aid industry

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ABSTRACT

The South African open medical aid industry is undergoing various challenges and is experiencing increased pressure to improve its service offerings. This is because customers of open medical aid providers are becoming progressively more educated about the various healthcare products and services available. As a result, customers are better equipped to make informed decisions concerning the available open medical aid options, which may lead to switching from their current open medical aid to a competitor when their needs are not met by the current medical aid product and service offerings. Consequently, open medical aid providers must retain and improve customer engagement by building strong relationships with their customers. Therefore, this study aims to determine if affective commitment, trust, perceived value and service quality predict customer engagement within the context of the open medical aid industry of South Africa. The study considered existing literature and a quantitative descriptive design. Non-probability convenience sampling was used to draw the sample through self-administered questionnaires, which resulted in a total of 307 questionnaires collected for data analysis. A standard multiple regression analysis was also conducted. Results indicated that affective commitment, customer trust, perceived value, and service quality could be predictors of customer engagement.

Keywords: Customer engagement, customer affective commitment, customer trust, customer perceived value, service quality, open medical aid provider

INTRODUCTION

The open medical aid industry of South Africa is categorised as a type of health subsidy arrangement designed to collect funds from customers to provide access to reliable healthcare services. This industry is impacted by increasing prices (Rangasamy, 2021:607), new and changing regulations, increased competition, amalgamations, solvency procedures, risk management, compliance requirements (PwC, 2017) and changes in consumer behaviour. Customers are becoming increasingly informed about the services and offers of medical aid providers, as well as the medical aid options available to them (SA Medical Aids, 2018). In South Africa, customers tend to view medical service encounters negatively, which is visible in the overall low satisfaction experienced as a result of intricate rules, exclusions, co-payments and high monthly rates (Consulta, 2019).

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Consequently, open medical aid providers are in a position where they need to maintain and develop strong relationships with their members and focus on providing quality medical aid coverage services that meet the expectations of members and decrease the chances of members moving to competing medical aid providers (SA Medical Aids, 2018). Furthermore, open medical aid providers can benefit from improving their customers' engagement by focusing on increasing their members' affective commitment, trust, perceived value and service quality.

RESEARCH PROBLEM, PURPOSE AND OBJECTIVES

The South African open medical aid industry has been experiencing rapid changes since 2017 due to new regulations introduced by the National Treasury (PwC, 2017). According to Makgoo (2017), these new regulations include limitations on what customers can claim regarding their gap cover and hospital cash-back. The non-healthcare costs applicable to open medical aid providers are comparatively high regarding marketing and acquisition, as open medical aid providers mostly use brokers to attract new members (McLeod & Ramjee, 2007:56). Furthermore, there is overwhelming evidence that healthcare quality in South Africa is compromised by several challenges (Maphumulo & Bhengu, 2019:1). Therefore, it is vital to building strong relationships to retain members (Bouavang, 2014).

Therefore, the objective of this study is to determine whether customer affective commitment, customer trust, customer perceived value and service quality predict customer engagement within the open medical aid industry of South Africa.

From the above discussion, the following hypotheses were formulated for this study, and the model is indicated in Figure 1:

- H₁: Affective commitment has a positive and significant effect on customer engagement.
- H₂: Customer trust has a positive and significant effect on customer engagement.
- H₂: Customer perceived value has a positive and significant effect on customer engagement.
- H₄: Service quality has a positive and significant effect on customer engagement.

Customer Affective Commitment

H1

Customer Trust

H2

Customer engagement

Perceived Value

H4

Service quality

FIGURE 1:
THE INFLUENCE OF CUSTOMER AFFECTIVE COMMITMENT, CUSTOMER TRUST, CUSTOMER PERCEIVED
VALUE AND SERVICE QUALITY ON CUSTOMER ENGAGEMENT

BACKGROUND TO THE STUDY

When it comes to health and finance, it is understandable that customers might experience frustration when medical aid providers fail to deliver on their promises or when customers often receive poor services (NIUSR, 2014). The core reason why customers acquire a medical aid is to get financial support concerning possible medical expenditures. Customers are continuously searching for quality products and services, which means that the pressures to improve and develop their service offerings by medical aid providers are increasing (Kaplan & Ranchod, 2015:114). It is widely recognised that building long-lasting, strong relationships with customers can be beneficial because it can lead to an increase in profitability as customers are increasingly satisfied and loyal, and as a result, it is essential for medical aid providers to aim to establish and preserve member relationships (Lombard, 2011:3488).

South Africa's medical aid industry has been branded as one of the lowest in overall satisfaction (Hunter, 2017). The SAcsi (South African Customer Satisfaction Index) results also discovered that most South Africans are not satisfied with their current medical aid provider (Medical Plan Advice, 2017). Grievances are commonly divided into two broad categories: benefit grievances (20%) and service grievances (80%). Customers mostly view medical service experiences negatively as they associate this with anxiety, discomfort, risk and occasional awkwardness (Bisschoff & Clapton, 2014:45).

In the open medical aid environment, one of the most challenging grievances to resolve is benefit-related grievances, as customers may not necessarily be entirely informed of all the benefits or shortfalls and medical aid rules. Benefit-related grievances consist of complaints concerning the daily cover, medication, and extensive medical costs, while service-related grievances result mainly from differences in the perception and experiences relating to perceived quality, value and service expectations.

It is clear that the survival of open medical aid providers is essential to the economy and the thousands of South Africans who need this service; however, there are difficulties and dissatisfaction within the industry that requires attention, especially concerning the services provided. Open medical aid providers can increase their survival and success rate by establishing increased engaged customers by increasing the customers' affective commitment, trust, perceived value and service quality received.

LITERATURE REVIEW

This section provides a short literature review of customer engagement, customer affective commitment and customer trust.

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CUSTOMER ENGAGEMENT

Over the last decade, the concept of customer engagement has emerged as a popular theme for academics (Brodie *et al.*, 2011:252; Thakur, 2016:152). Several scholars have defined customer engagement; however, it is well recognised that customer engagement is a psychological process that goes beyond merely being aware of a product or brand, or purchasing a product or service, or even just being satisfied or retained by the business (Williams & Mackay, 2020:42). Customer engagement goes further than this, and is considered to develop on a cognitive, emotional and behavioural level that is regarded as interactive and co-creative with the offerings and activities of the business (Sashi, 2012:258).

In simpler terms, customer engagement centres around providing customers with the best quality experience that the business can offer (Roche, 2015; Sashi, 2012:258). Businesses that provide excellent customer experience and support focus on customer engagement and not only the next sales pitch (Pansari & Kumar, 2016:296). Several predictors of customer engagement exist, including customer interaction, customer commitment, customer satisfaction, customer trust, customer involvement, brand attachment and commitment, perceived value and service quality (Sashi, 2012:260; Van Doorn *et al.*, 2010:256). For the purpose of this study, the predictor of customer affective commitment and customer trust was further considered as a possible predictor of customer engagement within the context of open medical aid providers.

CUSTOMER AFFECTIVE COMMITMENT.

The customer's involvement, identification and emotional attachment towards a business are regarded as the customer's affective commitment (Istikhoroh & Sukamdani, 2017:118). The affective commitment experienced also refers to a desire-based connection between the customer and the business, which means that the customer will remain loyal towards a business because they genuinely want to (Bansal *et al.*, 2004:236). Consequently affective commitment signifies the benefit of having a relationship with the business and signifies a desire-based connection that results in the customer's willingness to continue supporting the business (Istikhoroh & Sukamdani, 2017:118).

CUSTOMER TRUST

At the foundation of any strong, meaningful relationship, the primary ingredient is trust (Sarwar *et al.*, 2012:28). As a result, the trust that a customer has in a business or the trust in the capability of the business' products or services to meet the customer's needs highlights the significance thereof, as trust influences customers' decision to pursue or to terminate their relationship (Nguyen *et al.*, 2013:96).

PERCEIVED VALUE

Perceived value is widely recognised as the overall assessment that the customer makes with regard to the effectiveness of the business' products and services (Zeithaml, 1988:14). Consequently, perceived value can be explained from a number of different perspectives, including from a financial, quality or social psychology perspective (Demirgüneş, 2015:212). As a result, the actual experience that the customer has with a product or service in comparison to what the customers hoped to expect determines whether they have received the value or not (Lin, 2003:28).

SERVICE QUALITY

Service quality is defined as an attitude that was formed by the evaluation of the business' capability to meet product and service expectations with the performance of the products or services that leads to satisfied customers (Hoffman & Bateson, 2017:399; Parasuraman *et al.*, 1985:42). Furthermore, service quality has an influence on whether a customer will remain loyal to a business or switch to a competitor's business (Zeithaml *et al.*, 1996:33).

RELATIONSHIPS BETWEEN THE CONSTRUCTS OF THE STUDY

Affective commitment and customer engagement

The concept of customer engagement is appropriate to customer affective commitment as it shapes enduring customer relationships (Naumann & Bowden, 2015:59). Furthermore, customer affective commitment has several different benefits, including that the customers are willing to invest, engage with the business and remain loyal to the business' products and services (Bowden, 2009:579). Therefore, customer affective commitment positively and significantly influences

Customer trust and customer engagement

Trust is undoubtedly recognised as the basis of enduring relationships and increases a business' sales, customer recommendations, and positive word-of-mouth (Furman, 2017). According to Pansari and Kumar (2016:300), customer engagement occurs most often after a relationship was established with customers, and that was founded on trust and commitment. Trust can also be viewed as an antecedent to and a consequence of customer engagement (Sanders, 2012:2).

Perceived value and customer engagement

The customer's willingness to continue engaging with a business is influenced by perceived value (Floyd *et al.*, 2009:186; Kim *et al.*, 2013:364). In the research done by Hollebeek (2011:557), a significant positive effect was also determined between customer perceived value and customer engagement.

Service quality and customer engagement

Service quality predicts customer engagement positively (Rossmann *et al.*, 2016:543-544). Furthermore, it is widely recognised that consumers consider service quality as a considering factor when building long-term relationships with businesses, and that is why businesses aim to build enduring relationships with their customers and motivate customers to become engaged by providing better quality services (Poovalingam & Veerasamy, 2007:94).

RESEARCH METHODOLOGY

A quantitative research design was used for this study in the form of self-administered questionnaires. The population comprised of customers who were the main members of one of the five major South African open medical aid providers (i.e. Bonitas Medical Fund, Discovery Health, Fedhealth, Medshield and Momentum Health) for two years or longer in selected cities located in the North West Province. These cities have been selected according to their population size, as Potchefstroom, Klerksdorp and Rustenburg are some of the largest cities in the North West Province (Municipalities of South Africa, 2018). After ethical clearance was granted, the respondents were selected on a convenience basis where potential respondents were approached by the researcher, and a total of 307 usable questionnaires were collected for statistical analysis. A five-point unlabelled Likert-type scale was used to measure the key constructs of the study, with 1 representing strongly disagree and 5 strongly agree. The items were adapted or adopted from scales obtained through the work of Hellier *et al.* (2003:1798), Mosavi and Ghaedi (2012:10094), Parasuraman *et al.* (1988:38-40), Verhoef *et al.* (2002:209) and Williams (2017:227). This is illustrated in Table 1.

TABLE 1: CONSTRUCTS AND MEASURED VARIABLES

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Construct	Items	Source
Customer Affective	I consider myself a loyal customer of my medical aid provider.	Verhoef et al.
Commitment	I want to remain a customer of my current medical aid provider, because I feel strongly attached to it.	(2002:209)
	I want to remain a customer of my current medical aid provider, because I feel a strong sense of belonging towards it.	
Customer Trust	My medical aid provider offers me a feeling of trust.	Mosavi and Ghaedi
	My medical aid provider provides a trustworthy impression.	(2012:10094)
	I have trust in my medical aid provider's service.	
	My medical aid provider can be relied upon to keep promises.	
	My medical aid provider is trustworthy.	
	I have complete confidence in my medical aid provider.	
Customer perceived	The price of my medical aid provider is low compared to other medical aid providers.	Hellier et al.
value	The flexibility of my medical aid provider's product and service offerings is sufficient to meet my needs.	(2003:1798)
	My medical aid provider offers additional financial benefits and assistance.	
	I can readily understand the exclusions in the policy documents I received from my medical aid provider.	
	I regard the policy premium I pay to my medical aid provider as acceptable.	
	I consider the policy I have with my medical aid provider to be a good purchase.	
Service quality	When my medical aid provider promises to do something by a certain time, it does so.	Parasuraman et al.
(Reliability)	When I have a problem, my medical aid provider shows a sincere interest in solving it.	(1988:38-40)
	My medical aid provider performs its services right the first time.	
	My medical aid provider offers its services at the time it promises to do so.	
	My medical aid provider keeps error-free records.	
	I consider the policy I have with my medical aid provider to be a good purchase.	
Service quality	The employees of my medical aid provider tell me exactly when services will be performed.	Parasuraman et al.
(Responsiveness)	The employees of my medical aid provider delivers prompt services.	(1988:38-40)
	The employees of my medical aid provider are always willing to help me.	
	The employees of my medical aid provider are never too busy to respond to my requests.	
Service quality	My medical aid provider's employees instil confidence in its customers.	Parasuraman et al.
(Assurance)	I feel safe in my transactions with my medical aid provider.	(1988:38-40)
	The employees of my medical aid provider are consistently courteous towards me.	
	The employees of my medical aid provider have the necessary knowledge to answer my questions.	
Service quality	My medical aid provider offers me individual attention.	Parasuraman et al.
(Empathy)	My medical aid provider has convenient consulting hours.	(1988:38-40)
	The employees of my medical aid provider offers me personal attention.	
	My medical aid provider has my best interests at heart.	
	The employees of my medical aid provider understand my specific needs.	

Customer Engagement	My medical aid provider makes me feel like I belong.	Williams (2017:227)
	The employees of my medical aid provider makes me feel at home.	
	I am proud to be a customer of my medical aid provider.	
	My medical aid provider's employees inspire me.	
	I care about my medical aid provider's product and service offerings.	
	I mostly have positive service interactions with my medical aid provider.	
	My medical aid provider keeps its promises.	
	My medical aid provider is reliable.	
	My medical aid provider makes me feel like I belong.	
	I feel energised when interacting with my medical aid provider.	
	I am completely involved when interacting with my medical aid provider.	
	I am willing to put effort into interacting with my medical aid provider.	
	I frequently make use of my medical aid provider's products and/or services.	
	I frequently participate in the activities of my medical aid provider (such as fund raisers, competitions, etc.)0.807	

STATISTICAL ANALYSIS

The data was analysed using SPSS version 28 and the SAS statistical program. Cronbach's alpha was calculated to determine the reliability of the data. The descriptive statistics were calculated using frequencies, means, percentages, standard deviations, factor analysis and independent sample t-tests. Furthermore, hypothesis testing was completed to investigate whether customer affective commitment and customer trust predict customer engagement in the South African open medical aid industry.

FINDINGS OF THE RESEARCH

DEMOGRAPHIC PROFILE OF RESPONDENTS

The majority of the respondents were Afrikaans speaking (66.78%), females (50.16%), between the ages 30 and 39 years (30.94%), with matric/grade 12 completed (27.69%) and employed full-time (69.71%).

VALIDITY AND RELIABILITY

Items for customer affective commitment, customer trust, customer perceived value, service quality and customer engagement were adapted from existing, valid scales from previous researchers. Additionally, the researchers assessed the validity of the scales within the context of this study. The validity of the scales was also determined by means of an EFA (maximum likelihood model) to extract the factors, and Varimax was used to rotate the factor solutions (Pallant, 2016:186). The results indicated that one factor was extracted for each of the four constructs included in the study. Therefore, the scales measuring customer affective commitment, customer trust and customer engagement were considered valid.

The reliability of the measurement scales used in this study was determined by means of the Cronbach's alpha value of customer affective commitment, customer trust, customer perceived value, service quality and customer engagement. The Cronbach's alpha value for customer affective commitment was 0.916, customer trust was 0.966, customer perceived value was 0.927, service quality was 0.958, and customer engagement was 0.957. According to Mazzocchi (2011:10) and Pallant (2016:6), a minimum recommended value of 0.70 indicates internal consistency reliability. Therefore, customer affective commitment, customer trust, customer perceived value, service quality and customer engagement were considered to be reliable.

DESCRIPTIVE RESULTS

The standard deviations (SD) and mean scores of customer affective commitment, customer trust, customer perceived value, service quality and customer engagement are presented in Table 2.

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TABLE 2: DESCRIPTIVE RESULTS

Construct	SD	Mean
Customer Affective Commitment	1.013	3.40
Customer Trust	0.904	3.53
Customer perceived value	0.919	3.00
Service quality	0.839	3.33
Customer Engagement	0.807	3.25

The level of respondents' agreement with the items included in each of the main constructs was measured on a five-point unlabelled Likert scale (where 1 is strongly disagree and 5 is strongly agree). The highest mean was realised for trust (mean = 3.53), followed by affective commitment (mean = 3.40), service quality (mean = 3.33), customer perceived, customer engagement (mean = 3.24), and customer perceived value (mean = 3.00), respectively. These mean scores are all on 3, the average level of agreement, which indicates that there is definitely a need for open medical aid providers to provide better customer affective commitment, customer trust, customer perceived value, service quality, and customer engagement.

HYPOTHESIS TESTING

Assessing the assumptions: Standard multiple regression analysis

Before conducting a SEM, it is essential to meet several assumptions with respect to the data, including the size of the sample, the collinearity, the distribution of the data, the linearity outliers, and the homoscedasticity (Pallant, 2016:151-152). It can be reported based on these assumptions that the sample size was considered large enough to conduct a SEM based on the number of independent variables, and the multicollinearity between the constructs did not identify any outliers; therefore, a standard multiple regression analysis could be conducted.

The Pearson coefficient correlation was further completed, and significant linear relationships between the independent variables (customer affective commitment, customer trust, customer perceived value and service quality) and the dependent variable (customer engagement) were uncovered, with p-values <0.05, and the correlations, ranging from 0.756 to 0.870, are strong. Table 3 presents a model summary in which an R² of 0.820 is evident. This indicates that 82% of the variability in customer engagement can be allocated to the four predictors.

TABLE 3: MODEL SUMMARY

Model	R	R2	Adjusted R2	F change	Sig. F change
1	0.906 a	0.820	0.817	270.254	0.000

Consequently, it is apparent from Table 3 that the model is significant (p< 0.0005), and includes all four independent variables (Customer affective commitment, customer trust, customer perceived value and service quality). Furthermore, the results from the ANOVA testing the framework are considered to be valid (as presented in Table 4), which indicates that the p-value for the constant is less than 0.05.

TABLE 4: NOVA MODEL SUMMARY

Model		Sum of Squares	df	Mean square	F- value	p-value
1	Regression	161.733	5	32.347	270.254	0.000*
	Residual	35.428	296	0.120		
	Total	197.161	301			

a Predictors: (Constant), Affective commitment, Trust, Perceived value and Service quality

Evaluating the independent variables

TABLE 5: DIRECT EFFECTS OF HYPOTHESES TESTING

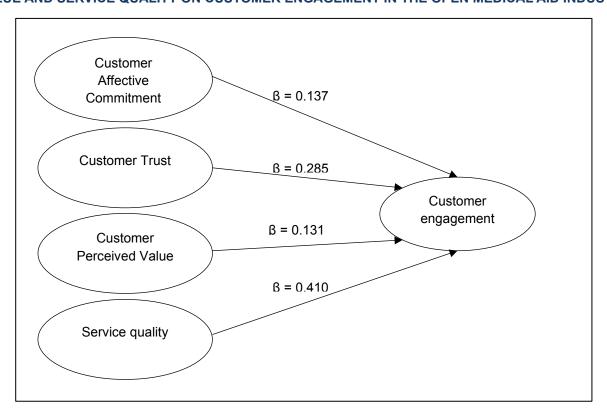
Hypotheses		Std.β	S.E.	p-value	Effect	Result
H ₁	Affective commitment has a significant positive effect on customer engagement	0.137	0.033	0.001*	Significant	Approve
H ₂	Customer trust has a significant positive effect on customer engagement.	0.285	0.049	0.000*	Significant	Approve
H ₃	Customer perceived value has a significant positive effect on customer engagement.	0.131	0.036	0.002*	Significant	Approve
H ₄	Service quality has a significant positive effect on customer engagement.	0.410	0.053	0.000*	Significant	Approve

The regression results in Table 5 revealed that customer affective commitment (β = 0.137; S.E. = 0.033; p-value = 0.001; accepting H1), customer trust (β = 0.285; S.E. = 0.049; p-value = 0.000; accepting H2), customer perceived value (β = 0.131; S.E. = 0.036; p-value = 0.002; accepting H₃) and service quality had a positive significant impact on customer engagement (β = 0.410; S.E. = 0.053; p-value = 0.000; accepting H4), and had a positive significant influence on customer engagement.

Figure 2 presents that customer affective commitment, customer trust, customer perceived value and service quality have a positive and significant influence on customer engagement in the South African open medical aid industry.

FIGURE 2:
THE INFLUENCE OF CUSTOMER AFFECTIVE COMMITMENT, CUSTOMER TRUST, CUSTOMER PERCEIVED VALUE AND SERVICE QUALITY ON CUSTOMER ENGAGEMENT IN THE OPEN MEDICAL AID INDUSTRY.

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From Figure 2, it is evident that an improvement in customer affective commitment, customer trust, customer perceived value and service quality has a positive and significant effect on customer engagement in the South African open medical aid industry.

DISCUSSION AND IMPLICATIONS

A standard multiple regression analysis was conducted to determine the effects of customer affective commitment, customer trust, customer perceived value and service quality on customer engagement. From the results, it was clear that customer affective commitment, customer trust, customer perceived value and service quality can be viewed as important predictors of customer engagement within the open medical aid industry. Results further indicated that service quality is the most important predictor of customer engagement, and it is therefore important to open medical aid providers to provide the best quality services to their customers. This can be done by employing customer research and interviews to pinpoint the gaps in service offerings, the present service failures, the customer service experiences and perceptions in order to improve their service offering. The second most important predictor of customer engagement is customer affective commitment, which implies that open medical aid providers should aim to increase the customers' willingness to remain loyal towards to open medical aid and increase the current customers' sense of belonging towards the open medical aid provider. The following significant predictor of customer engagement is customer trust. When an open medical aid provider wants to increase their customer engagement, they can most certainly aim to increase customers' feelings and belief of trust in the open medical aid providers' services, personnel and processes. Furthermore, the open medical aid provider needs to focus on establishing a feeling of confidence in their customers concerning their capability and performance. Open medical aid providers can also increase trust by being open and transparent with their processes and cover and reducing the fine print to increase customers' trust.

The last predictor of customer engagement is customer perceived value. Open medical aid providers need to increase customers' perceived value to increase their customer engagement. This can be established by setting your price less than competing open medical aid providers or making sure that customers view their premium as acceptable, supplying product and service offerings that are flexible and that meet the needs of the customer, offering

additional financial benefits and assistance to customers, making sure that the customer understands the exclusions in the policy documents that they receive, and convincing customers through marketing communications that the decision to be a customer of the open medical aid provider is a good purchase.

LIMITATIONS AND FUTURE RESEARCH

The theoretical and empirical limitations include a limited number of high-quality literature studies on the open medical aid industry of South African; the study did not focus on all three sub-dimensions of commitment as recognised by scholars, and the results and findings are not a representation of the opinions of all open medical aid customers in South Africa.

In future, the study can be conducted in a more representative sample of South African medical aid customers.

CONCLUSION

Within the open medical aid industry in South Africa, customer affective commitment, customer trust, customer perceived value and service quality were found to predict customer engagement significantly. The study also provides insight into the aspects that open medical aid providers need to consider in order to increase their customer engagement.

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