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DIGITAL TRANSFORMATION IN PRIVATE HEALTHCARE : EMERGING SERVICE TRENDS AND THEIR IMPACT ON PATIENT SATISFACTION IN BANGALORE

ABSTRACT : In the digital transformation of healthcare, private health services are being transported across the globe and carried by e-health apps, electronic health records, AI and diagnostic tools, mobile healthcare, and online booking. Such digital tools have been surging in popularity in Bangalore's private hospitals and clinics, known for their advanced technology and healthcare services. However, the literature lacks evidence to support the systematic study of the effect of the emerging digital services on patient satisfaction in this context.

The aim of this study is to uncover some of the prevailing trends in the Digital Services industry in the Private Healthcare industry of Bangalore and understand how they impact patients' satisfaction. The method of collecting data was questionnaire and the survey design used was quantitative survey design. This survey was carried out with structured questionnaires with patients accessing digital health services at private hospitals and clinics in Bangalore area within the last three months. Finally, analysis of the number of responses screened was (412). Partial Least Squares Structural Equation Modelling (PLS-SEM) was used to analyse the relationships among the ease of access to digital services, the perceived quality of the services, personalization of digital services and perceived usefulness of digital services with overall patient satisfaction.

The results show that the ease of access, service quality and perceived usefulness matters significantly and positively to patient satisfaction and the level of moderation for personalization is positive and meaningful. The results highlight how vital it is for digital interfaces to be integrated and for virtual care experiences to be dependable. The study has implications for both hospital managers looking to decide on digital investments and policy makers creating guidelines for the private sector on digital health. It will also serve as a tool for researchers to

explore the role of digital technology in patient outcomes in emerging markets.

Keywords : Digital Transformation; Healthcare Services; Artificial Intelligence; Telemedicine; Patient Satisfaction; PLS-SEM; Private Hospitals; Bangalore

1. INTRODUCTION : In today's world, healthcare systems have been dramatically transformed in past few decades by digital transformation. The advent of new information technologies, artificial intelligence, cloud computing and the high speed connectivity has opened up new ways of delivering care (*Suleiman et al., 2023*). Today, numerous digital tools are incorporated into hospitals and clinics, enhancing their operations, clinical precision, access and patient outcomes. COVID-19 served as a catalyst to make virtual solutions happen at a faster and more expansive rate and scale than before (*Chowdhury et al., 2022*). From the emergency response, it has become a permanent change in the organisation and delivery of healthcare. Digital healthcare is now not only considered to be 'optional' or 'additional' but is seen as part and parcel of healthcare provision as it is today (*Madduri et al., 2026*). Digital infrastructure and innovation investment is ongoing in governments, insurers and private interest. This change, which continues, is essentially changing the nature of the healthcare consumer-provider interaction. It is also opening new avenues for the personalisation, data-driven and patient-centred care across the world.

Private hospitals are early and early adopters of digital technologies, in contrast to many public institutions. Private hospitals have more financial freedom and management independence with which they can innovate, as opposed to government hospitals which are often constrained by budget and bureaucratic issues (*Neves et al., 2025*). They are actively adopting new and sophisticated digital solutions to streamline processes, reduce documentation and enhance the patient experience. These investments also help to make key competitive differentiation in the increasingly competitive healthcare markets. For the private provider, technology is the tool for reaching the types of patients who are seeking more convenience, transparency and quality. With the use of digital platforms, waiting times can be minimized, communication enhanced and care can be supported beyond the hospital walls (*Vallée et al., 2024*). This means that many private healthcare providers establish standards for the industry on digital excellence. Their innovative approach still has a ripple effect throughout the healthcare industry.

A number of trends in digital services have emerged and started to take on a strong presence in the private healthcare sector. Patients can book, reschedule or cancel appointments quickly via the web or an App on their mobile devices, thus cutting down on the traditional waiting times (*Gupta et al., 2024*). Secure video platforms facilitate video visits with specialists, helping to increase access to expert care particularly for follow-up visits and for patients who are unable to travel to their provider's offices (*Mahoney 2020*). EHRs enable healthcare providers to easily store, retrieve, and share patient information, enhancing care coordination. The digital payment portals, such as UPI, cards and online payment gateways, make billing easier and provide financial transparency (*Ansari et al., 2025*). Mobile health apps include features such as medication reminders, health vital sign monitoring, symptom checkers and direct communication of health care teams. AI-powered health systems can support clinical decision-making by analyzing images, risk-scoring predictive risk factors and offering personal treatment recommendations (*Lakhanpal 2025*). All these technologies are helping to transform the patient journey from initial contact to post care.

Patient satisfaction is directly linked to the quality of health care, and the performance of the health care organisations, and is regarded as one of the most important measures of these. After patients have been pleased with the care they receive, they can better adhere to treatment guidelines, attend follow-up visits and recommend their friends and family to the hospital (*King et al., 2023*). Patient satisfaction is an important metric of the reputation of an institution, and can

be a great asset in building patient loyalty in a highly competitive private setting. However, negative experiences can make a quick splash on consumers' perceptions through online reviews and word-of-mouth, and a bad review can easily be spread far and wide. Identifying what is affecting satisfaction, and what isn't, can enable managers to make the appropriate adjustments to their services and resources to improve satisfaction (Page et al., 2024). The usability, reliability and seamless integration of digital tools can make a huge difference to the patient experience. However, poorly-designed systems can lead to disenchantment and mistrust. Therefore, it is important to systematically review the impact of the trends in digital services on patient satisfaction to continuously improve and make strategic decisions.

Bangalore has emerged as a major hub for healthcare and IT industry in India. The city boasts multiple polyclinics, private hospitals and specialized medical centres, and has a thriving health-tech start-up hub. It is well established in its formidable information technology system that allows rapid rollout and scalability of digital health solutions (Ganapathy et al., 2020). In Bangalore, where most patients are technologically literate and professional, they seek easy and tech-friendly patient experiences. Innovation and experimentation within the field of digital health care (DHC) is fueled by a high level of concentration by clinicians, engineers and entrepreneurs (Khandelwal et al., 2022). The uniqueness of the qualities make Bangalore an ideal place to learn about the real-life implications of digital transformation. The exciting urban context can offer research outcomes that could be valuable for other cities with technology driven infrastructure, and new markets. The results are relevant to both healthcare leaders and policy makers, as well as innovators in the technology sector, who are interested in delivering patient-centric digital care.

1.2 Research Gap : While digital tools like telemedicine, electronic health records, mobile health apps, AI-powered diagnostics, and online appointment management are gaining widespread traction in private hospitals and clinics throughout Bangalore, there remains a great deal of research that requires systematic investigation of the specific impact of these new trends in digital services on patient satisfaction in this particular urban context (Singh et al., 2025). While many studies have been conducted on digital transformation across various health care settings, those related to telemedicine satisfaction in Indian context, CRM adoption, and consumer satisfaction with their overall behaviour towards digital readiness, there is a lack of literature that focuses on the combined effect of multiple concurrent services in healthcare sector that is as competitive as Bangalore (Varghese et al., 2026). The literature review has found that many studies have been conducted on digital transformation in various health care settings, including those concerning the satisfaction of telemedicine in India, CRM adoption, and general consumer behaviour in relation to digital readiness, but not much in relation to the joint impact of the various services on satisfaction results in the competitive private health care sector in Bangalore (Gandhi 2022). Previous research has tended to examine specific technologies, public-private partnerships in out-of-town contexts, or applications of digital marketing in sectors other than healthcare, without adopting a rigorous quantitative model, for instance PLS-SEM, to measure the relationships between ease of access, service quality, personalisation and perceived usefulness (Kumar et al., 2025). Furthermore, although better perceptions of digitalization have been found for higher and middle-class patients, or for the mediating effects of trust and loyalty in other service areas, these studies are not sufficiently capturing the unique characteristics of the Bangalore population, which are tech-savvy and highly advanced in terms of IT infrastructure. The relative power of these digital dimensions in increasing satisfaction remains unclear, as does the practical importance for hospital managers and policy makers (Truong et al., 2024). In this regard, there is a definite need to conduct empirical studies to test the practical applications of these theoretical constructs, like the Technology Acceptance Model and the DeLone and

McLean Information Systems Success Model, derived from primary data on recent users of private digital health services in the city of Bengaluru (*Dharma et al., 2022*). Filling this gap will yield valuable insights to maximize digital investments and improve patient-centred care in emerging market urban settings.

1.3 Objectives Of The Study :

1. Major emerging digital service trends (such as Telemedicine, Electronic Health Records, Mobile health apps, AI diagnostics solutions, and Online booking systems) used by private hospitals and clinics in Bangalore.
2. This study aimed to examine how ease of access, service quality, personalization and perceived usefulness of key dimensions of digital services affect overall patient satisfaction using Partial Least Squares Structural Equation Modelling (PLS-SEM).
3. To arrive at pragmatic conclusions and suggestions for hospital managers and policy makers which will enable the best utilisation of digital investments and improve patient-centred health care in the private health care sector in Bangalore.

2. REVIEW OF LITERATURE : *Halkiopoulou et al., (2022)* analyzed, assessed and evaluated many critical aspects of the official websites of hotel units that are located and operating in Greece as well as the latest technologies that are used to ensure strong visibility on the internet, in order to determine the status of the tourism industry's online presence and to identify ways to optimise its interaction with the potential tourist customer, concluding that the ICT integration of the hotels needs to be addressed promptly. *Ibrahim et al., (2021)* examined the sequential mediation effect of brand trust and brand loyalty between the linking of social media marketing activities and revisit intention, and found that, SMMA were more important predictors of revisit intention than brand loyalty and brand trust, brand loyalty and brand trust were significant mediators, and the sequential mediation effects were supported, thus recommending brand executives to promote certain SMMA and carry out such activities to the customer. *Swathi et al., (2024)* analyzed the impact of digitalizing healthcare services on customer-centric strategies that realize customers' expectations and ensure satisfaction, finding a positive impact especially among higher-class and middle-class family members in Bengaluru and suggesting that the outcomes will interconnect future research initiatives in healthcare service quality reachable to everyone in society. *Selvan et al., (2023)* discussed the digital revolution of healthcare in India, including the core concept, necessity, role of technology, trends, opportunities, challenges and future prospects as a blueprint for future research. *Murthy et al., (2022)* took CoviCare as a case study and used IBM's SPSS tool to highlight current trends and challenges of telemedicine in India, having sampled 100 individuals across age, marital status, education, gender, income level and satisfaction, they found that the patients generally gave good feedback, which led to the conclusion that telemedicine is the future and people can consult doctors from the comfort of their homes without having to visit clinics. Technology-enabled remote healthcare in public-private partnership mode is a story from India, wrote *Ganapathy et al., (2020)*, as the healthcare industry slowly understands the critical need of telehealth, particularly in developing nations; outlining mega PPP projects that are benefitting millions of people; explaining how to overcome operational, technical and clinical limitations to reach the unreached, and suggesting that after 5 years of proven effectiveness in remote areas where distance is irrelevant, TeRHC in a PPP setting should be adopted worldwide. *Gandhi (2022)* considered the effect of CRM in healthcare organizations and how the national e-health card mission of the Government of India will pave the way for a new era of healthcare marketing, explaining the benefits and factors that influence CRM adoption, developing a procedure for CRM adoption, and finally stating that the study contributes greatly to the literature on technological innovations for the healthcare industry. With qualitative research methodology, closed consumer group discussions and in-depth interviews,

Chatterjee et al., (2021) have found that the new generation of consumers is well aware of providers' digital readiness and key selection drivers are digital readiness, good customer experience, word of mouth, and brand image. Combined these investigations highlight the urgent need for the swift incorporation of ICTs and digital marketing within the contexts of hospitality websites and healthcare platforms, the mediating power of brand trust and brand loyalty in the context of revisit intention via social media, the measurable impact of hospital digitalization and telemedicine on Customer Satisfaction, the path of India's healthcare digital revolution – from the base to the future – and the importance of the strategically applied CRM and the patient centric digital readiness for the service to be more accessible, efficient and loyalty influencing for tourists and patients.

3. THEORETICAL FOUNDATION : This study builds upon the Technology Acceptance Model (TAM) and the DeLone and McLean Information Systems Success Model to understand the process of digital service adoption and possible outcomes. TAM assumes that the perceived usefulness and perceived ease of use are among the main factors affecting technology acceptance and behavioral intent. These constructs relate to the ease and usefulness of digital solutions, like online appointments and mobile apps, in the healthcare setting (*Rafique et al., 2020*). The model is used to understand how certain digital services are easily accepted by patients, while others are not. TAM emphasizes the human perception and offers a solid basis to understand the convenience of technology in private hospitals. It focuses on users' beliefs, fitting the patient-centred digital transformation. Therefore, TAM appropriately contributes to the dimensions of adoption and convenience for the current research context.

TAM builds on the DeLone and McLean Information Systems Success Model, which focuses on the other factors of information quality, system quality, and service quality, which lead to user satisfaction and net benefits. Information quality is the accuracy, completeness and relevance of digital health information, and system and service quality relates to reliability, responsiveness and support (*Syed et al., 2023*). User satisfaction is a key outcome that is at the heart of the link between the performance of the system and continued use. These constructs can be used to give a complete picture of digital service effectiveness that goes beyond adoption. The present study aims to further the two models by incorporating the new trends prevalent in the healthcare sector for the digital world in the context of private hospitals in Bangalore. This theoretical combination is used to provide a more differentiated consideration of the impact of digital Service Quality On Patient Satisfaction.

4. FRAMEWORK



The conceptual model used in the study is a combination of Technology Acceptance Model (TAM) and DeLone and McLean Information Systems Success Model to explain patient

satisfaction in the private healthcare sector of Bangalore. It conceptualizes four service dimensions of the digital service: Ease of Access, Service Quality, Personalization, and Perceived Usefulness as independent factors directly affecting the dependent factor Patient Satisfaction (*Saba et al., 2025*). Ease of Access refers to the ease in which online bookings and navigation take place, and Service Quality refers to the reliability and responsiveness of the online platforms. Personalization is the extent to which a digital experience is individualized, whilst Perceived Usefulness is the usefulness that a patient feels these tools can provide. Positive relationships between each of the four independent variables and Patient Satisfaction are hypothesized and illustrated by solid arrows in the model. Overall, the framework provides a structured view to consider the implementation of the new digital trends into better patient outcomes in a technologically-driven Health System Delivery Network in the urban context.

4. METHODOLOGY :

4.1 Research Design : The research design of this study was quantitative, cross-sectional research, to explore correlation between digital service trend and patient satisfaction. Respondents were only interviewed once, making it quite easy to analyse relations between variables. The design can be used to test hypothesized relationships that are based on the theoretical framework. Data recorded from structured questionnaires was standardized. This approach would allow for statistical analysis and further generalizability of the results with respect to the research.

4.2 Study Area : The study was conducted in Bangalore City of India in which the healthcare industry and technology is a strong industry. In Bangalore, polyclinic hospitals have expanded, and are in full embrace of digital health solutions. So it is the ideal setting in terms of the city's advanced IT infrastructure and its digitally-literate population. It is not uncommon for patients here to engage with web sites, telemedicine, and mobile apps. The insights into the digitalisation of Private Healthcare in Urban Environments is relevant for Bangalore.

4.3 Population : The target population were patients who have been served by selected private hospitals in Bangalore. Only those with recent experience of digital healthcare features, such as online booking or telemedicine were taken into account. This allowed respondents to fairly assess the digital service aspects studied. Adult patients from a variety of specialties were included. The present study focused only on private hospital users, because this was in line with the study objectives.

4.4 Sampling : A purposive sampling method was used in selecting respondents who had recently used digital services, as per the inclusion criteria. This method was complemented by convenience sampling, when patients were reached via hospital networks. The use of this combination helped to recruit effectively and at the same time provided relevance to the research topic. An attempt was made to represent various age groups and specialties. The final sample size was determined according to the need for PLS-SEM analysis.

5. ANALYSIS AND FINDINGS

Table 1. Descriptive Statistics

Construct	N	Mean	Standard Deviation	Minimum	Maximum
Ease of Access (EA)	412	4.12	0.68	2.25	5
Service Quality (SQ)	412	4.08	0.71	2	5
Personalization (PER)	412	3.86	0.79	1.75	5
Perceived Usefulness (PU)	412	4.21	0.65	2.5	5
Patient Satisfaction (PS)	412	4.15	0.67	2.25	5

Based on the descriptive statistics, it was observed that the respondents' perceptions of the dimensions of the digital service studied in this research were generally positive. The mean score of Perceived Usefulness was the highest one ($M = 4.21$), followed closely by Patient Satisfaction ($M = 4.15$) and Ease of Access ($M = 4.12$). Feedback was also very high for Service Quality ($M = 4.08$) with patients informing us that digital platforms were reliable and responded to them. The personalization was relatively low ($M = 3.86$) although positive, suggesting potential for improvement in the customisation of digital experiences. Moderate consistency of responses was also found for all constructs as measured by standard deviations. In conclusion, the findings suggest a positive perception of digital healthcare services among patients in private hospitals in Bangalore. Such positive perceptions offer a good basis for analyzing their effect on satisfaction.

Table 2. Measurement Model Assessment

Construct	Items	Outer Loadings	Cronbach's Alpha	Composite Reliability (CR)	Average Variance Extracted (AVE)
Ease of Access (EA)	EA1	0.812	0.871	0.912	0.675
	EA2	0.841			
	EA3	0.826			
	EA4	0.798			
Service Quality (SQ)	SQ1	0.854	0.889	0.923	0.701
	SQ2	0.837			
	SQ3	0.861			
	SQ4	0.819			
Personalization (PER)	PER1	0.792	0.846	0.897	0.686
	PER2	0.854			
	PER3	0.828			
Perceived Usefulness (PU)	PU1	0.867	0.901	0.931	0.771
	PU2	0.889			
	PU3	0.874			
Patient Satisfaction (PS)	PS1	0.881	0.914	0.939	0.794
	PS2	0.902			
	PS3	0.896			
	PS4	0.873			

The measurement model results show that all of the constructs have good reliability and validity. All loadings were greater than 0.70 (the recommended threshold of indicator reliability), with the highest being 1.00. The internal consistency is indicated by Cronbach's Alpha values which ranged from 0.846 to 0.914, and Composite Reliability (CR) values that ranged from 0.897 to 0.939, both of which exceeded the criterion value of 0.70. Convergent validity was supported by average variance extracted (AVE) values all of which exceeded the cut-off value of 0.50 and ranged from 0.675 to 0.794. The results show that the measurement items are satisfactory for their respective latent constructs. Thus, the measurement model is reliable and convergent valid. This means that a strong basis for moving on to the testing of discriminant validity and the structural model.

Table 3. Structural Model and Hypothesis Testing

Hypothesis	Path	Path Coefficient (β)	t-value	p-value	Result
H1	Ease of Access $\rightarrow$ Patient Satisfaction	0.247	4.862	0	Supported
H2	Service Quality $\rightarrow$ Patient Satisfaction	0.312	5.914	0	Supported
H3	Personalization $\rightarrow$ Patient Satisfaction	0.168	3.217	0.001	Supported
H4	Perceived Usefulness $\rightarrow$ Patient Satisfaction	0.289	5.438	0	Supported

According to the results of the structural model, all four relationships hypothesized are positive and statistically significant. Service Quality emerged as the strongest predictor of Patient Satisfaction ($\beta = 0.312$, $t = 5.914$, $p < 0.001$), followed by Perceived Usefulness ($\beta = 0.289$, $t = 5.438$, $p < 0.001$). Ease of Access also showed a significant positive effect ($\beta = 0.247$, $t = 4.862$, $p < 0.001$). The effect of personalization was relatively small, but still significant ($\beta = 0.168$, $t = 3.217$, $p = 0.001$). The results of these findings support that better quality of digital services, usefulness, accessibility, and personalization leads to better patient satisfaction. The overall results support all of the hypotheses proposed. The model thus corroborates the significance of these dimensions of digital services in the private healthcare environment of Bangalore.

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5.1 Findings & Discussion : The results indicate that Service Quality, Perceived Usefulness, Ease of Access and Personalization have significant influence on the patient satisfaction in Bangalore's private hospitals. Secure, efficient and customer-friendly digital services were reflected in the performance of Service Quality, which was the most effective factor. This was the second being perceived Usefulness, which reinforces the notion that patient value a digital tool that holds the promise of improving the efficiency and convenience of care. Accessibility also had a positive influence on the outcomes as it was easy for them to access, highlighting the need for smooth online booking and navigation. The Personalization effect was less pronounced but it is still applicable to build patient experiences that are resonating with every patient. The results support those of the Technology Acceptance Model and the DeLone and McLean model, which is an application of digital healthcare services. It can be summarized that the successful implementation of healthcare digital transformation in competitive private healthcare environments can have the potential to significantly enhance patient satisfaction.

5.2 Managerial Implications : In Bangalore, good quality digital platforms been invested by Private hospital managers which are reputable, reactive and user friendly. unifying the telemedicine, accurate electronic records and adequate online system, helps to enhance the service quality and to upgrade the patient satisfaction. However, the administrators have to ensure that digital tools offer clear, tangible benefits, otherwise patients are unlikely to value it if it does not. overall experience is improved by easy systems of appointments and mobile apps

with accessibility. Although not quite as noticeable as if it were a self-serve service, tailored reminders and suggestions can make services memorable. In future, it is attempted and polished by observing on-going patient feedback on digital touchpoints. By grasping and effectively navigating these aspects, private hospitals can improve patient satisfaction and gain a competitive advantage.

6. CONCLUSION : The present study focused on the effects of the new digital trends in the healthcare industry on patient satisfaction in the private sector of healthcare in Bangalore. The results indicate that Service Quality, Perceived Usefulness, Ease of Access and Personalization are significant factors that affect Patient Satisfaction. The results showed that Service Quality was the greatest predictor and Perceived Usefulness was the second greatest predictor. The results offer empirical evidence for the use of the Technology Acceptance Model (TAM) and DeLone and McLean framework in health-related digital research. Reliable, useful and accessible digital platforms can help to improve patient experience in private hospitals. In general, the findings of the study underscore the strategic benefit of digital transformation to enhance satisfaction outcomes. Additional mediating variables and longitudinal effects in a variety of healthcare settings could be explored in future research.

6.1 Limitations :

- Cross sectional designs were used in the study, which do not allow to make causal inferences over time.
- The study was conducted in selected private hospitals in Bangalore only, which limits the generalizability of results to other cities and/or public health facilities.
- Purposive and convenience sampling was employed, and thus, selection bias could be an issue.
- Only a few aspects of digital services were explored, and no framework was developed for investigating other factors that could affect digital services, including trust, privacy, and digital literacy.
- The data gathered from the self-reported questionnaires could have been influenced by common method bias and social desirability.

6.2 Future Research :

- Longitudinal research design may be used in future studies to explore the long-term effect of digital services experiences on patient satisfaction.
- Researchers can expand the study to other cities in India and/or to public hospitals to enhance generalizability.
- Other factors like trust, Data Privacy concerns, Digital literacy and perceived risk may be added to the model.
- Comparative analyses with other age groups and/or patient groups could show significant moderating effects.
- A combination of survey and interview (mixed methods) might be able to provide more insight into patient experiences with digital health services.

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