

STRATEGIC DECISION MAKING FOR BUSINESS DEVELOPMENT AND PROFIT OPTIMIZATION USING THE ANALYTICAL HIERARCHY PROCESS : THE CASE OF KLINIK PRATAMA SINDANG SARI

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ABSTRACT

Health is important for the well-being of the community, and basic clinics are important places for people in Indonesia to get health treatment. Klinik Pratama Sindang Sari has been committed to providing great service since it opened in 1997. In 2024, it received "Paripurna" (excellent) accreditation. Even though the clinic knows this, it still has trouble being financially stable, mostly because it relies heavily on BPJS capitation, which makes up 80% of its income. Rising costs of doing business and not enough variety make it even harder for it to earn profit. This study looks into ways for Klinik Pratama Sindang Sari to build its business in a smart way that will help its finances. The study uses Value-Focused Thinking (VFT), the Analytic Hierarchy Process (AHP), Stakeholder Analysis, Focus Group Discussions, and the Kepner-Tregoe Problem Analysis to find and rank alternative service innovations. The Analytic Hierarchy Process (AHP) is very important for judging four proposed strategies: Vaccine Service Implementation; Dental Aesthetic Care; Corporate Health Screening Cooperation; and BPJS Capitation Optimization. It does this by looking at factors like cost, regulation, market demand, profit potential, and implementation challenges.

Keywords : Analytical Hierarchy Process; AHP; Healthcare Industries; Clinic; Strategic Decision Making

ABSTRAK

Kesehatan merupakan hal penting bagi kesejahteraan masyarakat, dan klinik dasar merupakan tempat penting bagi masyarakat Indonesia untuk mendapatkan perawatan kesehatan. Klinik Pratama Sindang Sari telah berkomitmen untuk memberikan layanan yang baik sejak dibuka pada tahun 1997. Pada tahun 2024, klinik ini telah memperoleh akreditasi "Paripurna" (sangat baik). Meskipun klinik ini menyadari hal ini, klinik ini masih mengalami kesulitan untuk menjaga kestabilan keuangannya, terutama karena sangat bergantung pada kapitasi BPJS, yang mencapai 80% dari pendapatannya. Meningkatnya biaya menjalankan bisnis dan kurangnya variasi membuat klinik ini semakin sulit untuk mendapatkan keuntungan. Studi ini mengkaji berbagai cara bagi Klinik Pratama Sindang Sari untuk membangun bisnisnya dengan cara yang cerdas yang akan membantu keuangannya. Studi ini menggunakan Value-Focused Thinking (VFT), Analytic Hierarchy Process (AHP), Stakeholder Analysis, Focus Group Discussion, dan Kepner-Tregoe Problem Analysis untuk menemukan dan memberi peringkat inovasi layanan alternatif. Proses Hirarki Analitik (AHP) sangat penting untuk menilai empat strategi yang diusulkan: Implementasi Layanan Vaksin; Perawatan Estetika Gigi; Kerja Sama Skrining Kesehatan Perusahaan; dan Optimalisasi Kapitasi BPJS. Proses ini dilakukan dengan melihat

faktor-faktor seperti biaya, regulasi, permintaan pasar, potensi keuntungan, dan tantangan implementasi.

Kata Kunci : Proses Hirarki Analitik; AHP; Industri Perawatan Kesehatan; Klinik; Pengambilan Keputusan Strategis

INTRODUCTION

The primary clinics serve as the initial point of contact for individuals seeking medical care from non-specialist healthcare professionals (Sujarwoto & Maharani, 2022) . The services provided by primary clinics encompass a holistic approach to healthcare, integrating curative, preventive, promotional, and rehabilitative care (Hensrud, 2000) . Community health services are an important component of primary health care Clinics must adhere to numerous health and safety regulations, necessitating considerable administrative work and resources (Mogakwe et al., 2020) . Adapting services to the needs of diverse demographics is critical to the success of clinics (Placide et al., 2023).

Klinik Pratama Sindang Sari, established in 1997, is a primary healthcare facility located in Cimahi. Over the last two years, Klinik Pratama Sindang Sari has been in the process of improving its entire management system. Klinik Pratama Sindang Sari encountered business challenges following the transition to new management and the implementation of more comprehensive financial records, revealing a significant issue, the clinic operates with a very small profit margin.

Klinik Pratama Sindang Sari needs to find strategies to deal with these difficulties by lowering costs. Accreditation has made the clinic better and given it a better reputation. Klinik Pratama Sindang Sari may face financial problems because it doesn't have enough different sources of income.

The increase in 2024 revenue (Figure 1) shows that the clinic can grow because more patients are coming in. Accreditation resulted in multiple advantages, such as an elevated reputation, increased patient trust, and adherence to healthcare standards, which collectively led to a rise in patient visits and revenue. The Figure 2 illustrates the discrepancy between the actual revenue of Klinik Sindang Sari (KSS) and its projected revenue targets over a five-year period from 2022 to 2026. Clinics need to innovate and differentiate their services to attract and retain patients. Innovation not only enhances patient satisfaction but also fosters a competitive edge in the healthcare market, making it essential for clinics to adapt to evolving patient needs (ŞEN & ORHAN, 2023).

Entrepreneurship within healthcare involves the proactive exploration of innovative practices and business opportunities to improve profitability and service delivery (Ratten, 2012). Offering specialized and targeted services, such as wellness programs and preventive care, plays a critical role in appealing to a broader audience, this approach is particularly effective in diversifies revenue streams by catering to patients (Mehta, 2022). Customized, cutting-edge service offers that meet the specific needs of a community can boost clinic profits and make it easier for people to get the treatment they need (Berry, 2019). Making new healthcare services for underserved groups is a way to earn revenue and have a bigger influence on the community (Das et al., 2021).

This study aims to address three research questions (RQs) formulated by the author, which are as follows: (RQ1) What are the root cause of the small profit generated by Klinik Pratama Sindang Sari?; (RQ2) What business opportunities that Klinik Pratama Sindang Sari may explore to enhance its revenue?; (RQ3) What are the most feasible service diversification measures to augment profitability at Klinik Pratama Sindang Sari?

LITERATURE REVIEW

The literature review assists comprehend what other people have already done in the same research. By looking at past studies, we can see what methods and terms they used. The literature review helps us choose the best methods for the research.

Kepner Tregoe Problem Analysis

Kepner Tregoe analysis can identify any problem (Kepner, 1985). This process aids individuals and organizations in making educated decisions in difficult scenarios by meticulously analyzing problems, identifying feasible solutions, and assessing the most advantageous course of action. Multiple areas, including business, engineering, healthcare, and project management, heavily rely on Kepner Tregoe Decision Analysis (Dai et al., 2022).

Stakeholder Analysis

Stakeholder analysis involves identifying relevant stakeholders and assessing their interests, strengths, and relationships concerning a specific project or organization (Pouloudi, 1997). The primary objective is to discern and understand the interests,

strengths, limitations, and positions of stakeholders. The theoretical underpinnings of stakeholder analysis include numerous essential elements.

Focus Group Discussion

Critical insights on the execution of focus groups, a methodology utilized to explore specific subjects and favored by researchers (Breen, 2006) . The researcher serves as a facilitator, directing discussions, sustaining focus, and ensuring participation from all individuals involved. Facilitation skills are essential, often requiring two researchers: one to facilitate and pose questions, and another to record responses.

Value Focused Thinking

Value-Focused Thinking (VFT) is an analytical methodology that prioritizes the identification and ranking of fundamental values to inform intricate decision-making processes (Keeney, 1996). VFT promotes the importance of first comprehending one's core values, rather than merely responding to pre-existing options.

The Analytic Hierarchy Process (AHP)

The Analytic Hierarchy Process (AHP) is a way to make decisions using more than one criterion by comparing pairs of choices and ranking them based on those criteria (Saaty, 1984) . This hierarchical strategy is good for solving complicated problems, including figuring out the best ways for Klinik Pratama Sindang Sari to grow as a business.

RESEARCH METHODOLOGY

Method is a method of work that can be used to obtain something. While the research method can be interpreted as a work procedure in the research process, both in searching for data or disclosing existing phenomena (Zulkarnaen, W., et al., 2020:229). The goal of the study is to help Klinik Pratama Sindang Sari make choices on how to grow their business in next year.

Research Design

The research employs a descriptive objective, utilizes a mixed-method approach, integrating qualitative and quantitative research methodologies. This combination ensures a comprehensive understanding of the challenges and opportunities faced by Klinik Pratama Sindang Sari. The distinct phases of the research design illustrates in Figure 5.

Data Collection Method

The author will employ diverse data collection techniques in this study, encompassing:

1. Literature Review

Conducting a literature review is a research methodology that encompasses the gathering, assessment, and analysis of various literary sources pertinent to the research topic under investigation.

2. Interview

Conducting an interview, which is semi-structured, is carried out to ensure that the key person from KSS does not feel pressured and can tell the truth as it is. After obtaining the information needed, the researcher will carry out analysis and verification based on checking from each source whether they are compatible with each other.

3. Focus Group Discussion (FGD)

An FGD is conducted to devise a business solution for challenges encountered in Klinik Pratama Sindang Sari.

Data Analysis Method

This study employs a mixed-methods research technique, collecting data via interviews, direct observations, and document analysis. This research includes interviews, focus groups, and the Kepner-Tregoe problem analysis. It uses the Value-Focused Thinking (VFT) method to find out what stakeholders' core values. The Analytical Hierarchy Process (AHP) uses structured pairwise comparisons to rank these options and find the best commercial development strategy for the clinic.

RESULT AND DISCUSSION

Kepner Tregoe Problem Analysis

KSS does not earn much revenue because it doesn't offer a lot of different services. In 2023, the clinic got "Paripurna" accreditation and improved its operating standards. This imbalance has cut profit margins by a large amount, showing a gap in business development strategy.

Stakeholder Analysis

The stakeholder analysis of Klinik Pratama Sindang Sari classifies stakeholders according to their influence and interest, thereby informing engagement strategies.

Stakeholders with significant influence and interest, including the Head of Clinic, Head of Finance, Clinic Owner, department heads from Administration, General Affairs, and HRD, necessitate active participation in decision-making and strategic planning processes.

Value Focused Thinking

Value-Focused Thinking (VFT) emphasizes aligning decision-making with core values to enhance the quality and relevance of chosen alternatives (Keeney, 1996). By distinguishing between fundamental and means objectives, VFT guides decision-makers to focus on what truly matters before solving a problem.

Generate Alternative

Based on the results of Focus Group Discussions (FGDs) and interviews with key stakeholder representatives, the questions were developed around the root causes of KSS's financial problems, along with several potential solution scenarios. From this process, four alternative strategies were identified as highly feasible for implementation, there is: 1) Vaccine Service Implementation ; 2) Develop Dental Aesthetic Care ; 3) Establish Corporate Health Screening Cooperation ; and 4) Optimize BPJS Patient Capitation.

Analytical Hierarchy Process

1. Construct a Hierarchy Structure

The aim of this analysis is to identify the most effective solution for mitigating the financial difficulties encountered by KSS. Based on the analysis presented in the previous section, four strategic alternatives have been proposed. Furthermore, five evaluation criteria have been synthesized from FGD with SMEs, reflecting key value expectations relevant to KSS's long-term success. To support this process, the Analytic Hierarchy Process (AHP) is employed, with the evaluation facilitated through AHP Super Decisions software. The hierarchical structure of the AHP model is depicted in Figure 8.

2. Pairwise Comparison of AHP Models

The defined criteria have been evaluated through pairwise comparisons, and the results were formulated into a questionnaire designed for respondents with decision-making authority. Each respondent is required to assign scores for every comparison

table. Interviews were conducted with five key individuals (KPs) involved in decision-making related to service development strategies at KSS. Each respondent provided pairwise comparison scores for both the evaluation criteria and the proposed alternative solutions. The outcomes of these calculations are presented in Table 4 (Criteria Pairwise Comparison) and Table 5 (Alternatives Pairwise Comparison).

3. Synthesize the results to identify the optimal alternative solution.

To identify the optimal alternative solution, the outcomes from the pairwise comparisons at both the criteria and alternative levels (as seen in Tables 4 and 5) must be integrated. The synthesis process is conducted using the Super Decisions AHP program. Before utilizing the software, it is important to generate the comprehensive pairwise comparison matrices for both the criteria and alternatives. Utilize Super Decision AHP software to synthesize calculations, with the outcomes illustrated in Figure 9.

4. Development of Priority Ranking

The gathered data was processed and evaluated with the Super Decisions AHP program, yielding a prioritized ranking of the criteria and potential solutions, as depicted in Figure 10.

5. Consistency Ratio

The consistency of decision-makers assessments during pairwise comparisons plays a critical role in ensuring the reliability and quality of the final decision. In the AHP methodology, the next step involves calculating the consistency ratio, which evaluates the level of agreement among the pairwise judgments provided by key decision-makers. The outcome shows consistency ratios below 0.1 at both the criteria and alternative levels, as presented in Table 4.14. These results indicate that the pairwise comparisons made by respondents are within acceptable limits and are therefore considered consistent.

6. Result

The prioritization results indicate that Market Demand (32.5%) and Profit Potential (30.1%) are the most influential criteria in determining the optimal development strategy for KSS. These two criteria collectively contribute over 60% of the total weight, highlighting the importance of aligning any proposed alternative with public needs and its ability to generate significant financial returns. Meanwhile, Cost

(11%) and Regulation (11.5%) hold moderate importance, suggesting that while financial feasibility and compliance are important, they are secondary to market responsiveness and profitability. Implementation Challenges (10.9%) ranks the lowest, indicating that decision-makers are willing to accept a certain level of complexity in execution, as long as the strategy promises strong market relevance and financial viability. This insight reinforces the strategic direction for KSS to focus on high-demand and high-profit opportunities, even if they come with greater regulatory and operational hurdles.

The results of the AHP synthesis indicate that Developing Dental Aesthetic Care is the most preferred strategic alternative, receiving the highest weight of 37.41%. This suggests that stakeholders view it as the most impactful and feasible option in addressing KSS's development challenges—particularly due to its strong alignment with high market demand and profit potential, as reflected in the earlier prioritization of criteria. The second-highest priority is Vaccine Service Implementation at 25.75%, signaling a viable opportunity with moderate complexity and cost-efficiency. Establishing Corporate Health Screening Cooperation ranks third with 19.53%, showing potential but possibly hindered by high capital requirements and competition. Meanwhile, Optimizing BPJS Patient Capitation ranks lowest at 17.3%, likely due to rigid regulatory limitations and the difficulty in acquiring patients already registered with other facilities.

CONCLUSION

After following a series of comprehensive analyses, this study offers valuable insights into “Determining the best service development strategy at Klinik Pratama Sindang Sari” based on stakeholders expectations. The findings present a clear and in-depth understanding of the research topic and are structured to directly address the core research question:

RQ 1 : What are the causes of Klinik Pratama Sindang Sari’s low profit performance?

According to Kepner Tregoe problem analysis which is used in this research, at least there are 5 root causes that make KSS has low profit :1) Increased Operational Costs Post-Accreditation; 2) Stable Revenue with No Significant Growth; 3)Lack of

Service Diversification; 4) Underutilized Operational Capacity; and 5) No Significant Patient Growth

RQ 2 : What business opportunities can Klinik Pratama Sindang Sari pursue to improve its financial sustainability?

By using stakeholder analysis, brainstorming, and interviewing them, the synthesized analysis results reveal four alternatives to address the current situation, there is: 1) Vaccine Service Implementation; 2) Develop Dental Aesthetic Care; 3) Establish Corporate Health Screening Cooperation; and 4) Optimize BPJS Patient Capitation

RQ 3 : What are the most feasible diversification strategies to enhance profitability at Klinik Pratama Sindang Sari?

Based on Analytical Hierarchy Process (AHP) method which involves five Decision Maker in KSS and considered several attributes conveyed by stakeholders were synthesized into five main objectives using the Value Focused Thinking (VFT) approach, and then converted into five criteria, the result of the analysis assist by AHP Super Decision software show that “Develop Dental Aesthetic Care” is the best developing strategy for KSS to improve their financial performance.

REFERENCES

- Berry, L. L. (2019). Service innovation is urgent in healthcare. *AMS Review*, 9(1–2), 78–92. <https://doi.org/10.1007/s13162-019-00135-x>
- Breen, R. L. (2006). A Practical Guide to Focus-Group Research. *Journal of Geography in Higher Education*, 30(3), 463–475. <https://doi.org/10.1080/03098260600927575>
- Dai, Z., Xu, S., Wu, X., Hu, R., Li, H., He, H., Hu, J., & Liao, X. (2022). Knowledge Mapping of Multicriteria Decision Analysis in Healthcare: A Bibliometric Analysis. *Frontiers in Public Health*, 10. <https://doi.org/10.3389/fpubh.2022.895552>
- Das, T., Narayanan, R., & Rao, G. N. (2021). Health Financing and Sustainability. In *South-East Asia Eye Health* (pp. 91–101). Springer Singapore. https://doi.org/10.1007/978-981-16-3787-2_6
- Hensrud, D. D. (2000). Clinical Preventive Medicine in Primary Care: Background and Practice: 1. Rationale and Current Preventive Practices. *Mayo Clinic Proceedings*, 75(2), 165–172. <https://doi.org/10.4065/75.2.165>
- Keeney, R. L. (1996). Value-focused thinking: Identifying decision opportunities and creating alternatives. *European Journal of Operational Research*, 92(3), 537–549. [https://doi.org/10.1016/0377-2217\(96\)00004-5](https://doi.org/10.1016/0377-2217(96)00004-5)
- Kepner, J. L. (1985). On the Probability that the Better Team Wins the World Series. *The College Mathematics Journal*, 16(4), 250–256. <https://doi.org/10.1080/07468342.1985.11972890>
- Mehta, S. (2022). Healthcare Marketing. In *Healthcare System Management* (pp. 239–260). Springer Nature Singapore. https://doi.org/10.1007/978-981-19-3076-8_10

- Mogakwe, L., Ally, H., & Magobe, N. B. D. (2020). Facilitating Compliance with Quality Standards at Primary Health Care Clinics through Adequate Health Care Resources. *Africa Journal of Nursing and Midwifery*, 22(1). <https://doi.org/10.25159/2520-5293/6569>
- Placide, V., Brown, R. A., Blavos, A., Grover, O., & Chubb, C. S. (2023). *The Importance of Diversity in the Healthcare Workforce* (pp. 374–396). <https://doi.org/10.4018/978-1-6684-8412-8.ch018>
- Pouloudi, A. (1997). Stakeholder analysis as a front-end to knowledge elicitation. *AI & Society*, 11(1–2), 122–137. <https://doi.org/10.1007/BF02812443>
- Ratten, V. (2012). A theoretical framework of entrepreneurship and innovation in healthcare organisations. *International Journal of Social Entrepreneurship and Innovation*, 1(3), 223. <https://doi.org/10.1504/IJSEI.2012.047627>
- Saaty, T. L. (1984). The Analytic Hierarchy Process: Decision Making in Complex Environments. In *Quantitative Assessment in Arms Control* (pp. 285–308). Springer US. https://doi.org/10.1007/978-1-4613-2805-6_12
- ŞEN, H., & ORHAN, F. (2023). The Potential Impact of Product Innovation on Employment in Healthcare Organizations. *Journal of Innovative Healthcare Practices*, 4(3), 201–213. <https://doi.org/10.58770/joinihp.1389266>
- Sujarwoto, & Maharani, A. (2022). Participation in community-based healthcare interventions and non-communicable diseases early detection of general population in Indonesia. *SSM - Population Health*, 19, 101236. <https://doi.org/10.1016/j.ssmph.2022.101236>
- Zulkarnaen, W., Fitriani, I., & Yuningsih, N. (2020). Development of Supply Chain Management in the Management of Election Logistics Distribution that is More Appropriate in Type, Quantity and Timely Based on Human Resources Competency Development at KPU West Java. *MEA Scientific Journal (Management, Economics, & Accounting)*, 4(2), 222-243. <https://doi.org/10.31955/mea.vol4.iss2.pp222-243>.

FIGURE AND TABLE



Figure 1. KSS's Gross Income Data
(Source : KSS's 2024 Annual Report)



Figure 2. KSS's Gap Revenue
(Source : internal data)

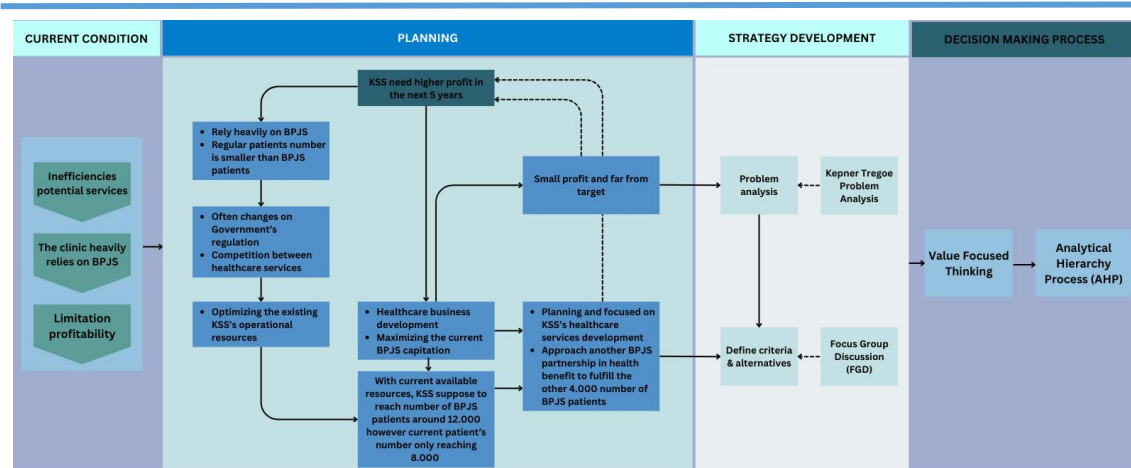


Figure 3. Conceptual Framework

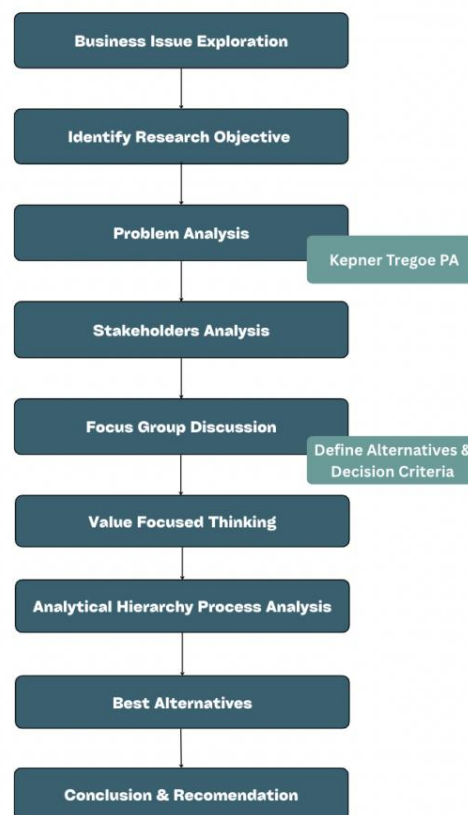


Figure 4. Research Design

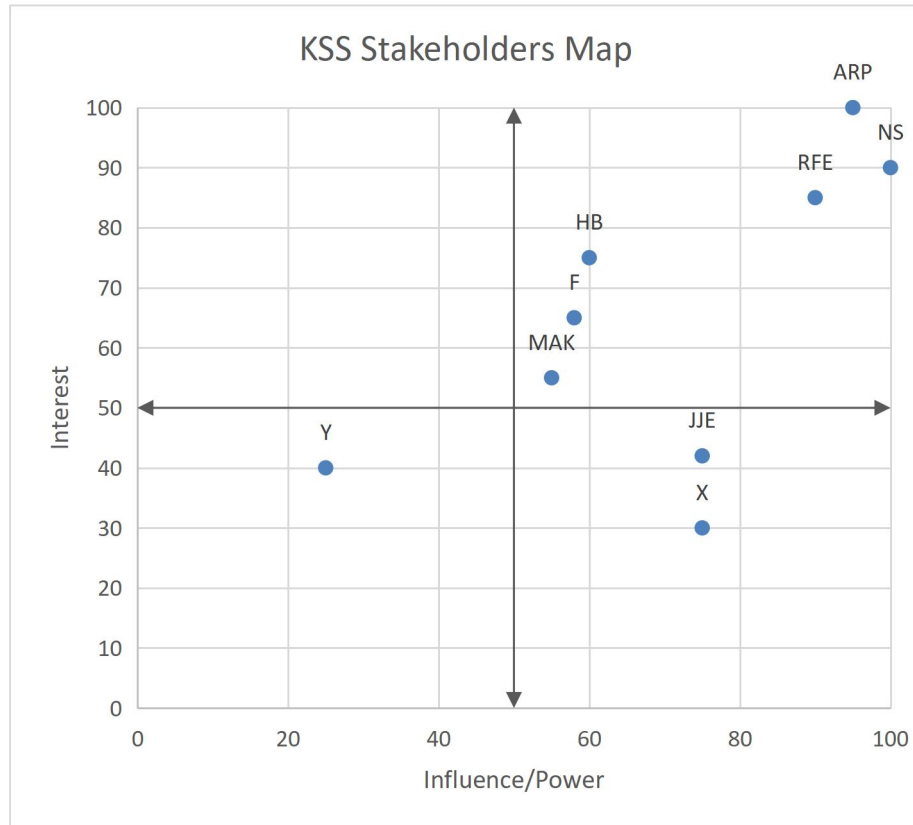


Figure 5. KSS Stakeholders Map

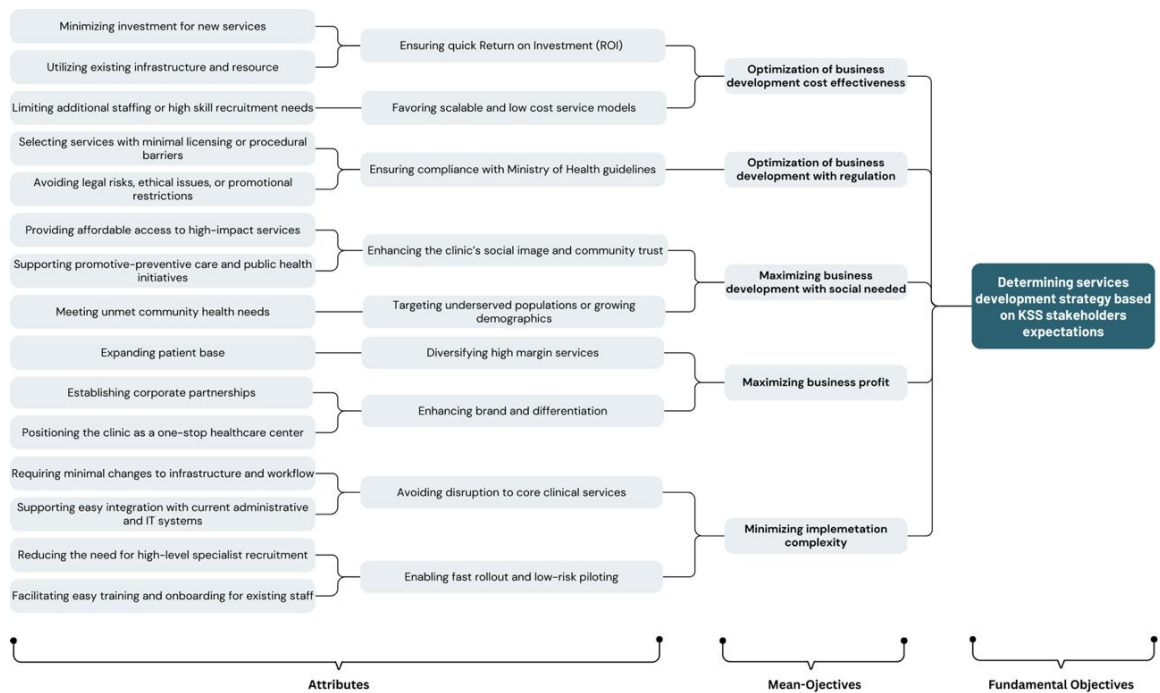


Figure 6. Hierarchy of the Objectives



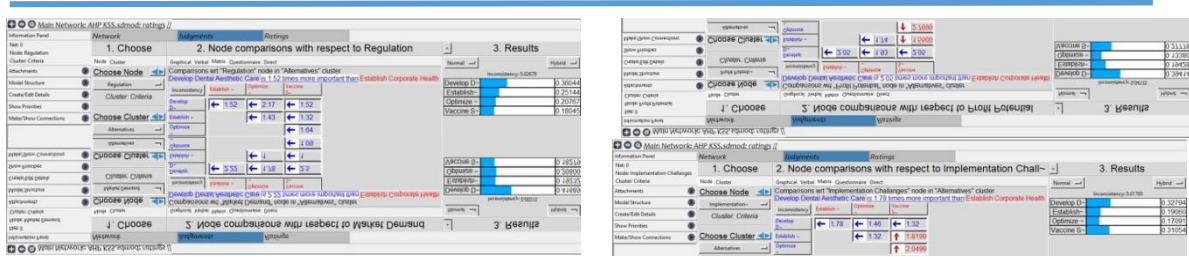


Figure 7. Analysis result of SuperDecision software

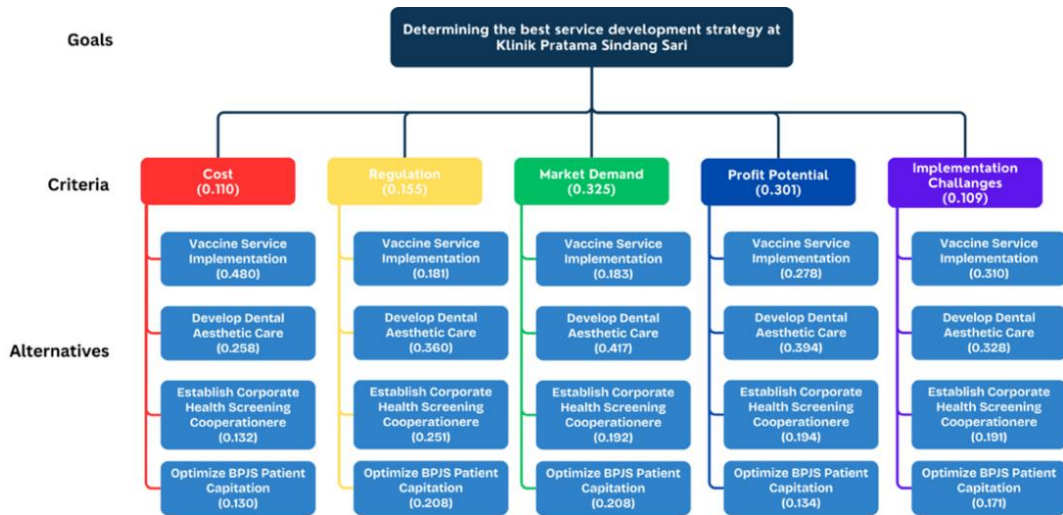


Figure 8. The weight of all criteria and alternatives

New synthesis for: Main Network: Determining the best service...

Here are the overall synthesized priorities for the alternatives. You synthesized from the network Main Network: Determining the best service development strategy at Klinik Pratama Sindang Sari.sdmmod: ratings

Name	Graphic	Ideals	Normals	Raw
Develop Dental Aesthetic Care		1.000000	0.374130	0.187065
Establish Corporate Health Screening Coopera~		0.522128	0.195344	0.097672
Optimize BPJS Patient Capitation		0.462476	0.173026	0.086513
Vaccine Service Implementation		0.688265	0.257500	0.128750

Okay Copy Values

Figure 9. Data capture from Super Decision AHP software related alternatives synthesized priorities

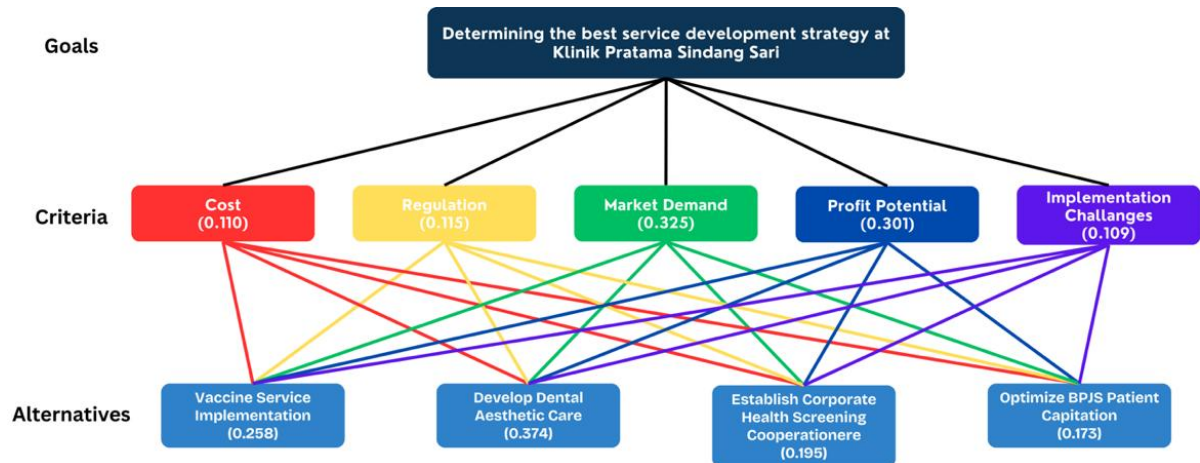


Figure 10. The weight priorities of all criteria and alternatives

Table 1. Kepner Tregoe Framework

Problem : KSS has Low Profit				
SPECIFICATION	IS	IS NOT	DESCRIPTIONS	CHANGES
WHAT	KSS's Low Revenue	KSS's High Operational Cost	KSS's low profit is due to operational costs that have remained high following accreditation optimization, without being accompanied by an increase in revenue.	After KSS completed the accreditation process and achieved the "Paripurna" (Excellent) rating, the clinic experienced an increase in operational costs. This increase in operational costs was not accompanied by a rise in revenue, resulting in a decline in KSS's profit.
WHERE	Klinik Pratama Sindang Sari Kota Cimahi	Dinas Kesehatan Kota Cimahi	Klinik Pratama Sindang Sari is a privately owned clinic that partnered with Dinas Kesehatan Kota Cimahi	
WHEN	Januari 2023 - Present	Before Januari 2023	In Januari 2023, Sindang Sari Clinic transitioned to new management in preparation for accreditation in November 2023.	
HOW MUCH	Stable	Fluctuative	KSS's revenue can be considered stable, with no significant increase.	
POSSIBLE CAUSES :			THE MOST POSSIBLE CAUSE :	
1. The regulation requiring clinics to be accredited has placed a burden on KSS's operational costs. 2. The number of KSS patients has not increased significantly after accreditation. 3. KSS has not yet explored which services are most in demand by the general public. 4. KSS's operations have not been utilized optimally.			There is no services diversification at KSS, resulting in no additional income and limited appeal to prospective general patients.	
VERIFICATION: 1. The healthcare industry operates under complex and strict regulations. 2. Marketing strategies in the healthcare industry are highly limited due to legal regulations and professional codes of ethics.				

Table 2. KSS's Stakeholders

No	Stakeholder	
	Initials	Position
1	NS	Clinic Owner
2	ARP	Head of Clinic
3	RFE	Head of Finance
4	HB	Head of Administration
5	F	Head of General Affairs
6	MAK	Head of HRD
7	JJE	Investor

Table 3. Conversion table from mean objectives (VFT) to criteria design (AHP).

NO	Mean Objectives (VFT)	Criteria (AHP)	Description
1	Optimization of business development cost effectiveness	Cost	Refers to the estimated investment and operational costs required to implement a new service. This includes infrastructure, equipment, staffing, and training. Cost-effectiveness focuses on minimizing expenditure while maximizing benefit, using existing resources whenever possible.
2	Optimization of business development with regulations	Regulation	Relates to the level of compliance needed with national healthcare regulations. Services that require minimal regulatory barriers are preferred.
3	Maximizing business development with social needed	Market Demand	Measures how well the proposed service aligns with current community needs and preferences. Includes consideration of demographic trends, health awareness, disease burden, and willingness to pay among patients. High-demand services ensure higher utilization and social value.
4	Maximizing business profit	Profit Potential	Refers to the service's ability to generate revenue and yield high margins. Factors include pricing flexibility, potential market size, expected visit frequency, and operational scalability. Services that offer recurring revenue and target higher-paying patients are prioritized.
5	Optimization of service quality	Implementation Challenges	Assesses the technical and logistical difficulty of launching and integrating new services into current clinic operations. Includes staff readiness, space availability, training needs, system integration, and potential disruptions. Services that are easy to deploy with minimal change are ideal.

Table 4. Criteria Pairwise Comparison

No	Criteria	Respondent					Geometric Mean
		KP1	KP2	KP3	KP4	KP5	
1	Cost - Regulation	0.33	2.00	0.33	0.25	0.50	0.49
2	Cost - Market Demand	0.50	0.50	0.25	0.50	0.33	0.40
3	Cost - Profit Potential	0.50	0.33	0.25	0.25	0.33	0.32
4	Cost - Implementation Challenges	2.00	3.00	0.33	0.33	0.33	0.74
5	Regulation - Market Demand	0.50	0.50	0.33	0.33	0.50	0.42
6	Regulation - Profit Potential	0.50	0.50	0.33	0.25	0.50	0.40
7	Regulation - Implementation Challenges	3.00	1.00	3.00	0.33	2.00	1.43
8	Market Demand - Profit Potential	2.00	1.00	1.00	0.25	0.33	0.70
9	Market Demand - Implementation Challenges	2.00	2.00	3.00	3.00	2.00	2.35
10	Profit Potential - Implementation Challenges	3.00	2.00	3.00	3.00	2.00	2.55

Table 5. Alternatives Pairwise Comparison

Criteria	Alternative	Respondent					Geometric Mean
		KP1	KP2	KP3	KP4	KP5	
Cost	Vaccine Service Implementation - Develop Dental Aesthetic Care	2.00	2.00	3.00	3.00	2.00	2.35
	Vaccine Service Implementation - Establish Corporate Health Screening Cooperation	3.00	3.00	4.00	4.00	3.00	3.36
	Vaccine Service Implementation - Optimize BPJS Patient Capitation	2.00	3.00	4.00	4.00	3.00	3.10
	Develop Dental Aesthetic Care - Establish Corporate Health Screening Cooperation	2.00	2.00	3.00	2.00	3.00	2.35
	Develop Dental Aesthetic Care - Optimize BPJS Patient Capitation	0.50	3.00	0.50	2.00	3.00	2.05
	Establish Corporate Health Screening Cooperation - Optimize BPJS Patient Capitation	0.50	0.50	4.00	2.00	1.00	1.15
Regulation	Vaccine Service Implementation - Develop Dental Aesthetic Care	0.50	1.00	0.25	0.50	2.00	0.66
	Vaccine Service Implementation - Establish Corporate Health Screening Cooperation	2.00	2.00	0.25	2.00	2.00	1.32
	Vaccine Service Implementation - Optimize BPJS Patient Capitation	0.50	2.00	3.00	2.00	2.00	1.64
	Develop Dental Aesthetic Care - Establish Corporate Health Screening Cooperation	2.00	2.00	0.25	4.00	2.00	1.52
	Develop Dental Aesthetic Care - Optimize BPJS Patient Capitation	0.50	2.00	3.00	4.00	3.00	2.17
	Establish Corporate Health Screening Cooperation - Optimize BPJS Patient Capitation	2.00	0.50	4.00	0.50	3.00	1.43
Market Demand	Vaccine Service Implementation - Develop Dental Aesthetic Care	0.33	0.50	0.33	0.25	3.00	0.40
	Vaccine Service Implementation - Establish Corporate Health Screening Cooperation	0.33	3.00	0.33	1.00	3.00	1.00
	Vaccine Service Implementation - Optimize BPJS Patient Capitation	0.33	0.50	2.00	1.00	2.00	0.92
	Develop Dental Aesthetic Care - Establish Corporate Health Screening Cooperation	0.50	3.00	4.00	3.00	3.00	2.22
	Develop Dental Aesthetic Care - Optimize BPJS Patient Capitation	0.33	0.50	4.00	4.00	3.00	1.78
	Establish Corporate Health Screening Cooperation - Optimize BPJS Patient Capitation	0.50	0.50	3.00	3.00	0.33	1.00
Profit Potential	Vaccine Service Implementation - Develop Dental Aesthetic Care	1.00	0.33	0.25	0.20	1.00	0.44
	Vaccine Service Implementation - Establish Corporate Health Screening Cooperation	2.00	3.00	0.25	1.00	3.00	1.55
	Vaccine Service Implementation - Optimize BPJS Patient Capitation	0.50	3.00	0.50	0.33	2.00	2.77
	Develop Dental Aesthetic Care - Establish Corporate Health Screening Cooperation	0.50	3.00	3.00	4.00	3.00	2.05
	Develop Dental Aesthetic Care - Optimize BPJS Patient Capitation	0.50	3.00	3.00	3.00	2.00	1.93
	Establish Corporate Health Screening Cooperation - Optimize BPJS Patient Capitation	0.50	1.00	4.00	4.00	2.00	1.74
Implementation Challenges	Vaccine Service Implementation - Develop Dental Aesthetic Care	1.00	0.50	0.25	2.00	3.00	0.76
	Vaccine Service Implementation - Establish Corporate Health Screening Cooperation	3.00	3.00	0.25	3.00	3.00	1.82
	Vaccine Service Implementation - Optimize BPJS Patient Capitation	0.50	3.00	2.00	2.00	4.00	2.05
	Develop Dental Aesthetic Care - Establish Corporate Health Screening Cooperation	1.00	3.00	0.33	4.00	0.50	1.78
	Develop Dental Aesthetic Care - Optimize BPJS Patient Capitation	0.50	3.00	4.00	3.00	0.50	1.46
	Establish Corporate Health Screening Cooperation - Optimize BPJS Patient Capitation	2.00	1.00	4.00	1.00	0.50	1.32

Table 6 Summary result of consistency

Item	Consistency Ratio (CR) by Super Decision	Standard CR<0,1	Result
Criteria Pairwise Comparison	0,022	CR<0,1	Acceptable
Alternative Comparison			
Cost	0.013	CR<0,1	Acceptable
Regulation	0.026	CR<0,1	Acceptable
Market Demand	0.003	CR<0,1	Acceptable
Profit Potential	0.041	CR<0,1	Acceptable
Implementation Challenges	0.017	CR<0,1	Acceptable