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Analysis of E-Government Health Application Features Acceptance on Partner Applications During COVID-19

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[1*]Wan Azizah Sri Nuraini, [2]Hawwin Mardhiana, [3]Aris Kusumawati
[1-3]Sistem Informasi, Institut Teknologi Telkom Surabaya
E-mail: [1]wanazizah@student.ittelkom-sby.ac.id, [2]hawwin@ittelkom-sby.ac.id, [3]arisk@ittelkom-sby.ac.id
*Corresponding Author

Abstract— This study analyzes the factors that influence public acceptance of E-Government Health Application feature on partner applications. The current phenomenon in the health sector is the emergence of COVID-19 which has a very fast rate of human-to-human spread. To handle these cases, the government evaluates and looks for new innovations by cooperating with new partners and making E-Government Health Application feature accessible through partner applications to make it easier for the public. The successful use of the system is influenced by the acceptance and use of the individual who uses it. The research model used in this study is a modified UTAUT2 model with a total sample of 250 respondents. Model testing is done by statistical analysis using SmartPLS software. It was found that Facilitating Conditions and Behavioral Intention variables had a positive and significant effect on Use Behavior variable with t-statistic of 3.659 and 4.505. Habit had a positive and significant effect on Behavioral Intention and Use Behavior variables with t-statistic of 7.939 and 3.232. Meanwhile, the Experience moderating variable affects the Facilitating Condition on Behavioral Intention variable and affects the Behavioral Intention on Use Behavior variable with t-statistics of 2.069 and 1.972.

Keywords— Public Acceptance; E-Government Health Application; UTAUT2; SEM-PLS

Corresponding Author:

Wan Azizah Sri Nuraini,
Sistem Informasi,
Institut Teknologi Telkom Surabaya,
Email wanazizah@student.ittelkom-sby.ac.id

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I. INTRODUCTION

The current phenomenon in health sector is the emergence of COVID-19 which has a very fast rate of spread from human to human [1]. On March 9, 2020, WHO officially declared that COVID-19 became a global pandemic due to the widespread and uncontrolled spread of corona virus in the world. Based on current data from covid19.go.id, the number of COVID-19 cases in Indonesia has begun to decline. The Government of Republic of Indonesia has taken various ways in handling the spread of COVID-19 cases in Indonesia, namely by issuing several policies such as takes advantage of information technology by presenting an application that can assist in tracking COVID-19 cases. The United States Centers for Disease Control and Prevention (CDC) states that success in suppressing the spread of COVID-19 is not only influenced by mass vaccination, but also things that must be considered are proper tracking and consistent prevention [2]. The government is determined to use application as a strategy to deal with pandemic in the long term [3] and as a means that the public can use to continue their activities during pandemic. Besides being used in tracking, the application is also used by the government to support COVID-19 vaccination program in Indonesia.

Along with the decline in cases of COVID-19 in Indonesia, the use of these applications has also decreased. Based on data from [4], there are 2-3 million users of the E-Government Health Application per day, when compared to usage during the time when COVID-19 cases were increasing, this figure is very different. At a time when COVID-19 cases were increasing, there were 8 million application users per day. Expert Staff to the Minister for Health Technology, Ministry of Health (Kemenkes) of the Republic of Indonesia, Setiaji, regretted that as the number of COVID-19 cases decreased, the entire existing ecosystem and database would simply disappear. From this, the E-Government Health Application can be developed so that it can be used for the long term by the community. In the new normal era, this application can be used as a community service application and for handling the next pandemic if it occurs. According to Setiaji, the application will always be used continuously. One of the factors that have an important role in the success rate of technology application is the user acceptance factor [5]. From this, a study was conducted to analyze the factors that influence public acceptance of E-Government Health Application feature on partner applications. This is important to do because there has been no previous research that has conducted research on E-Government Health Application feature on partner applications.

The model used in this study is a modified model of Unified Theory of Acceptance and Use of Technology 2 (UTAUT2) which is a development model of the UTAUT model to measure the level of acceptance and use of special technologies in the context of users or end consumers [5]–

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[8]. Partial Least Square-Structural Equation Modeling (PLS-SEM) method is used to analyze the relationship between factors in the Unified Theory of Acceptance and Use of Technology 2 (UTAUT2) model and identify variables that contribute to technology acceptance.

Several studies related to the following analysis of e-government acceptance [9]–[13] also use the UTAUT2 model. Some of these studies were carried out by Sutjipto in 2020 [9] which analyzed the application of technology adoption for a mobile-based integrated Samsat service system with the UTAUT2 model, Ismarmiaty, et al. in 2018 [10] which analyzed the acceptance and use of e-government technology in West Nusa Tenggara with the modified UTAUT2 model which added the trust variable and removed all moderator variables, Dionika, et al. in 2020 [11] who analyzed the acceptance and use of digital public services with a modified UTAUT2 model that added the trust variable, Syamsudin, et al. in 2018 [12] which analyzed the factors influencing behavioral intention to use E-Government with the modified UTAUT2 model which added the trust variable, and Sutanto, et al. in 2018 [13] which analyzes the factors that affect the acceptance and use of the regional financial management information system (SIPKD) in Semarang Regency with the modified UTAUT2 model which removes the price value variable. This study aims to analyze public acceptance of the E-Government Health Application feature on partner applications by using the modified UTAUT2 model, so that the application can be developed in accordance with public acceptance and can be used for the long term. In addition, this study will find several influential variables so that a modified UTAUT2 model can be found which can be used for subsequent research.

II. RESEARCH METHOD

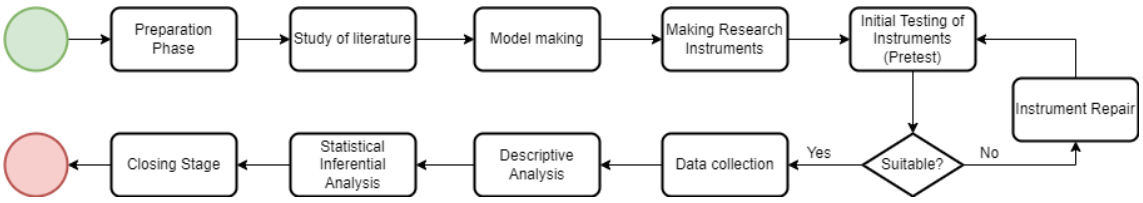

Figure 1. RESEARCH METHOD DIAGRAM

Preparation stage is the initial stage in the preparation of research which consists of problem identification, problem formulation, and goal setting. Then, literature study stage is carried out by collecting references that are supported by various sources in accordance with the research conducted.

The object of this research is E-Government Health Application on partner applications. E-Government Health Application is a COVID-19 tracking application that helps the Indonesian

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government in order to stop the spread of COVID-19. The application was officially released by Kominfo in April 2020 as the basis for tracing, tracking, and fencing. The Indonesian government requires the use of E-Government Health Application for the public to be able to access public facilities that have been accompanied by a QR Code, so it can be ensured that users have received the vaccine and are not currently infected with COVID-19 or in close contact with sufferers of COVID-19.

The modeling is formed according to the case studies used in the research with reference to the technology adoption model based on existing theories. At this stage the researcher uses the modified UTAUT2. UTAUT2 model is used because according to [5]–[8] this model was developed to measure the level of acceptance and use of certain technologies in the context of end users or consumers. In addition, UTAUT2 can prove an increase in Behavioral Intention (BI) variable from 56 percent to 74 percent and Use Behavior (UB) variable from 40 percent to 52 percent [8]. The UTAUT2 model is seen as a model of acceptance and use of technology that has been updated and well developed and has been considered significant by other researchers because it is a combination of the previous technology acceptance model [14]. In this study the model used consists of 6 main variables, 2 objective variables, and 3 moderator variables. The research model can be seen in Figure 2.

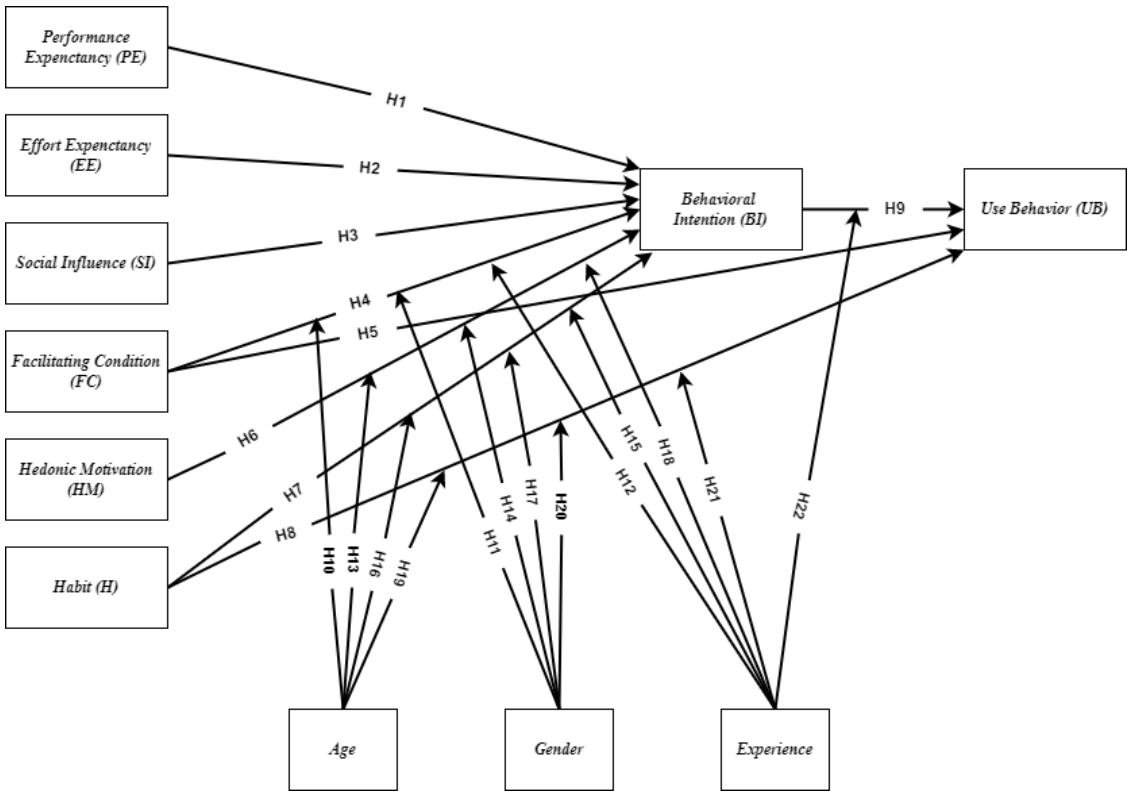

Figure 2. RESEARCH MODEL

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In the research model, Price Value variable is not integrated. Price Value is the cost incurred by the user when using the technology. Price Value variable was omitted because E-Government Health Application is a service provided by the government and is non-profit [15], the application is also a government facility provided to the community and does not require a fee to operate [5]. Several other studies [6], [13], [16]–[18] also omitted the Price Value variable because the available technology facilities are free facilities without requiring a fee to use them.

The research instrument in this study was a questionnaire that was arranged according to a predetermined model. The questionnaire was prepared using a Likert scale consisting of 5 points with a range of scales according to Table 1 [19].

Table 1. LIKERT SCALE

Score	Description
1	Totally disagree
2	Don't agree
3	Quite agree
4	Agree
5	Strongly agree

The questionnaire in this study was divided into two parts, namely general questions about the demographics of the respondents and test statements made based on the UTAUT2 model. The demographics of respondents consist of gender, age, last education, occupation, type of partner application used to access E-Government Health Application, and frequency of use. While the test statement on the questionnaire consists of 42 items.

The data collection method used is by distributing questionnaires indirectly or online using google forms which are distributed through social media. The population in this study are all users of E-Government Health Application feature on partner applications with productive age in East Java Province. Sampling in this study using purposive sampling technique. The respondent criteria used in sampling are people who use E-Government Health Application feature on partner applications with productive age (between 15 and 64 years) [20] in East Java Province.

In taking the sample, the researcher used several supporting theories from previous research. According to Hair et al. [21] , the sample that can represent the population depends on the number of indicators used in the research model by calculating the sample, namely the number of indicators multiplied by 5. This study uses 42 indicators, so the number of samples required is 210 samples. The number of respondents who have been collected is 250 so it can be said that the number of samples meets the minimum sample requirements in the Hair et al. formula.

Model testing was carried out by statistical descriptive analysis and statistical inferential analysis. Statistical descriptive analysis relates to respondent information. Inferential analysis is used to process quantitative data from the results of distributing questionnaires with hypotheses

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that have been made. In this study, statistical inferential analysis was performed using SmartPLS software. Evaluation of the model in PLS-SEM is carried out through several stages of assessment, namely evaluation of measurement model (outer model) and structural model (inner model). In evaluation of measurement model with reflective indicator model, there are three assessment criteria, namely convergent validity, discriminant validity to assess the validity of the model and composite reliability to assess reliability [22]. Meanwhile, the structural model is evaluated using R^2 (coefficient of determination), f^2 (effect size), Q^2 (prediction relevance), and path coefficients [22]. In this study, the hypothesis can be formulated as in Table 2.

Table 2. RESEARCH HYPOTHESIS

H1	Performance Expectancy has an effect on Behavioral Intention variable
H2	Effort Expectancy has an effect on Behavioral Intention variable
H3	Social Influence has an effect on Behavioral Intention variable
H4	Facilitating Condition has an effect on Behavioral Intention variable
H5	Facilitating Condition has an effect on Use Behavior variable
H6	Hedonic Motivation has an effect on Behavioral Intention variable
H7	Habit berpengaruh has an effect on Behavioral Intention variable
H8	Habit berpengaruh has an effect on Behavioral Intention variable
H9	Behavioral Intention has an effect on Use Behavior variable
H10	Age moderates Facilitating Condition variable on Behavioral Intention variable
H11	Gender moderates Facilitating Condition variable on Behavioral Intention variable
H12	Experience moderates Facilitating Condition variable on Behavioral Intention variable
H13	Age moderates Hedonic Motivation variable on Behavioral Intention variable
H14	Gender moderates Hedonic Motivation variable on Behavioral Intention variable
H15	Experience moderates Hedonic Motivation variable on Behavioral Intention variable
H16	Age moderates Habit variable on Behavioral Intention variable
H17	Gender moderates Habit variable on Behavioral Intention variable
H18	Experience moderates Habit variable on Behavioral Intention variable
H19	Age moderates Habit variable on Use Behavior variable
H20	Gender moderates Habit variable on Use Behavior variable
H21	Experience moderates Habit variable on Use Behavior variable
H22	Experience moderates Behavioral Intention variable on Use Behavior

III. RESULT AND DISCUSSION

Respondents' demographic data was obtained from distributing questionnaires to respondents who had used E-Government Health Application feature on partner applications in East Java Province. The number of respondents collected and in accordance with the required criteria is 250 respondents. Table 3 describes the profile of the respondents.

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Table 3. RESPONDENT PROFILE

Respondent Profile	Total	Percentage
Gender		
Male	65	26%
Female	185	74%
Age		
< 15 years	0	0%
15 - 64 years	250	100%
>64 years	0	0%
Last Education		
Associate Degree	22	9%
Bachelor Degree	74	29%
High School	152	61%
Middle School	2	1%
Elementary School	0	0%
Profession		
Employees	32	13%
Students	186	74%
Self-employed	7	3%
Entrepreneurs	10	4%
More	15	6%
Partner Application Type		
Shopee	161	25%
Gojek	101	16%
Grab	92	14%
Tokopedia	65	10%
LinkAja	49	8%
More	180	27%
Frequency of Use		
1-2 times per month	125	50%
3-6 times per month	89	36%
7-12 times per month	20	8%
>12 times per month	10	4%
Everyday	6	2%

The evaluation of the PLS-SEM model is carried out through two stages of assessment, namely evaluation of Measurement Model (Outer Model) and evaluation of Structural Model (Inner Model) [23].

A. Measurement Model (Outer Model)

Measurement model aims to identify the validity and reliability of each variable so that the relationship between latent variables and their indicators can be known. The measurement model test is carried out by three assessment criteria, namely Convergent Validity, Discriminant Validity, and Composite Reliability [23], [24].

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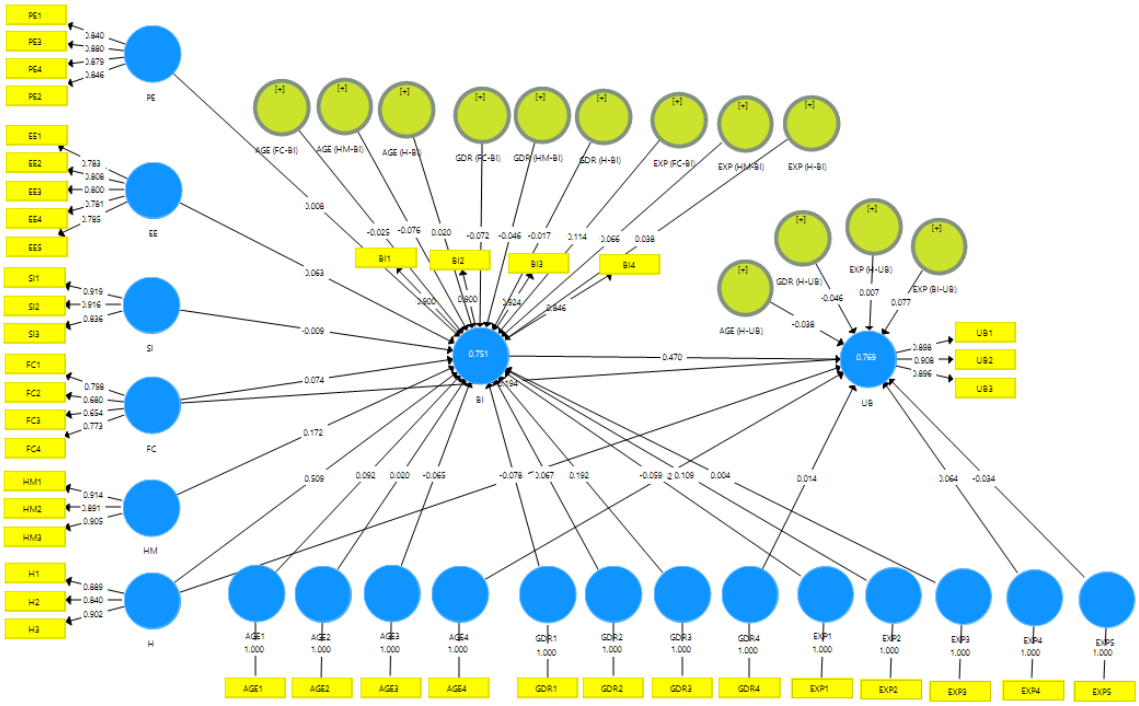

Figure 3. OUTER MODEL

1. Convergent Validity

Convergent validity is assessed based on the loading factor value to assess the validity of the model. The ideal loading factor value is if the loading factor value > 0.70, but for the loading factor value ≥ 0.50 it is still acceptable [23], [25]. The results of the loading factor values in detail can be seen in Table 4.

Table 4. LOADING FACTOR

Variable	Indicator	*Loading Factor*
Performance Expectancy **(PE)**	**PE1**	0,840
	PE2	0,846
	PE3	0,880
	PE4	0,879
Effort Expectancy **(EE)**	**EE1**	0,783
	EE2	0,808
	EE3	0,800
	EE4	0,781
	EE5	0,785
Social Influence **(SI)**	**SI1**	0,919
	SI2	0,916
	SI3	0,836
Facilitating Condition **(FC)**	**FC1**	0,798
	FC2	0,680
	FC3	0,654
	FC4	0,773

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***Hedonic Motivation* (HM)**	**HM1**	0,914
	HM2	0,891
	HM3	0,905
***Habit* (H)**	**H1**	0,889
	H2	0,840
	H3	0,902
***Behavioral Intention* (BI)**	**BI1**	0,900
	BI2	0,900
	BI3	0,924
	BI4	0,846
***Use Behavior* (UB)**	**UB1**	0,898
	UB2	0,908
	UB3	0,896
AGE1	**FC*AGE (FC-BI)**	1,017
GDR1	**FC*GDR (FC-BI)**	1,024
EXP1	**FC*EXP (FC-BI)**	1,141
AGE2	**HM*AGE (HM-BI)**	1,114
GDR2	**HM*GDR (HM-BI)**	1,128
EXP2	**HM*EXP (HM-BI)**	1,069
AGE3	**H*AGE (H-BI)**	1,208
GDR3	**H*GDR (H-BI)**	1,119
EXP3	**H*EXP (H-BI)**	1,048
AGE4	**H*AGE (H-UB)**	1,028
GDR4	**H*GDR (H-UB)**	1,065
EXP4	**H*EXP (H-UB)**	0,974
EXP5	**BI*EXP (BI-UB)**	1,327

From Table 4 all indicators have a loading factor value ≥ 0.50. This means that all indicators have valid values and can explain the latent variables.

2. Discriminant Validity

Discriminant validity can be assessed based on cross loading between indicators to ensure that there is a difference between the indicator and its construct and other block constructs. If the correlation value between the indicators and the construct is higher than the other block constructs, it has good discriminant validity [23], [25]. The cross loading value can be seen in Figure 4 and Figure 5.

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	PE	EE	SI	FC	HM	H	BI	UB	AGE1	AGE2	AGE3	AGE4	GDR1	GDR2	GDR3	GDR4	EXP1	EXP2	EXP3	EXP4	EXP5	AGE (FC-BI)	GDR (FC-BI)	EXP (FC BI)	AGE (HM-BI)	GDR (HM-BI)	EXP (HM-BI)	AGE (H-BI)	GDR (H-BI)	EXP (H BI)	AGE (H-UB)	GDR (H-UB)	EXP (H UB)	EXP (BI UB)
PE1	0,84	0,63	0,39	0,47	0,65	0,53	0,52	0,58	0,19	0,25	0,26	0,13	0,30	0,29	0,19	0,22	0,33	0,25	0,23	0,23	0,26	-0,08	-0,12	-0,14	-0,14	-0,22	-0,01	-0,24	-0,22	-0,17	-0,08	-0,18	-0,17	-0,10
PE2	0,85	0,64	0,34	0,40	0,60	0,47	0,48	0,53	0,15	0,23	0,19	0,19	0,31	0,25	0,20	0,22	0,26	0,24	0,18	0,16	0,22	-0,10	-0,05	-0,08	-0,12	-0,11	-0,06	-0,20	-0,06	-0,15	-0,04	-0,03	-0,14	-0,08
PE3	0,88	0,70	0,42	0,50	0,68	0,58	0,55	0,63	0,21	0,23	0,27	0,18	0,31	0,29	0,23	0,23	0,31	0,27	0,26	0,23	0,25	-0,06	-0,03	-0,10	-0,20	-0,24	-0,08	-0,25	-0,17	-0,13	-0,03	-0,12	-0,11	-0,07
PE4	0,88	0,67	0,48	0,45	0,65	0,56	0,56	0,59	0,25	0,29	0,29	0,21	0,43	0,38	0,31	0,24	0,34	0,33	0,27	0,26	0,28	-0,02	-0,10	-0,10	-0,12	-0,22	-0,05	-0,20	-0,20	-0,15	-0,03	-0,17	-0,15	-0,12
EE1	0,51	0,78	0,39	0,64	0,57	0,51	0,46	0,58	0,17	0,24	0,24	0,18	0,25	0,17	0,15	0,20	0,36	0,32	0,29	0,33	0,30	-0,17	-0,20	-0,26	-0,22	-0,21	-0,21	-0,17	-0,22	-0,23	-0,12	-0,16	-0,19	-0,17
EE2	0,52	0,81	0,43	0,65	0,62	0,52	0,52	0,60	0,23	0,25	0,30	0,24	0,26	0,25	0,18	0,20	0,34	0,28	0,38	0,28	0,34	-0,11	-0,20	-0,18	-0,17	-0,15	-0,09	-0,10	-0,10	-0,12	-0,04	-0,08	-0,09	-0,08
EE3	0,57	0,80	0,40	0,63	0,59	0,49	0,50	0,56	0,22	0,28	0,33	0,21	0,23	0,20	0,14	0,15	0,35	0,32	0,33	0,32	0,30	-0,22	-0,14	-0,24	-0,31	-0,24	-0,10	-0,27	-0,14	-0,20	-0,20	-0,13	-0,22	-0,09
EE4	0,71	0,78	0,48	0,49	0,69	0,52	0,50	0,62	0,28	0,25	0,31	0,25	0,37	0,37	0,31	0,29	0,44	0,33	0,31	0,30	0,24	-0,14	-0,02	-0,20	-0,13	-0,21	-0,07	-0,20	-0,15	-0,15	-0,11	-0,09	-0,10	0,00
EE5	0,70	0,78	0,51	0,48	0,67	0,62	0,63	0,66	0,26	0,25	0,27	0,19	0,44	0,34	0,27	0,27	0,39	0,24	0,27	0,22	0,24	-0,11	-0,13	-0,13	-0,14	-0,22	-0,03	-0,22	-0,23	-0,19	-0,02	-0,18	-0,14	-0,13
SI1	0,45	0,52	0,92	0,39	0,52	0,52	0,51	0,49	0,30	0,35	0,23	0,17	0,48	0,40	0,36	0,36	0,36	0,30	0,27	0,25	0,21	-0,06	-0,06	-0,07	-0,10	-0,08	-0,06	-0,19	-0,13	-0,12	0,01	-0,10	-0,08	-0,16
SI2	0,40	0,50	0,92	0,39	0,49	0,54	0,51	0,47	0,26	0,36	0,27	0,17	0,49	0,40	0,36	0,32	0,34	0,31	0,31	0,28	0,26	-0,07	-0,09	-0,05	-0,14	-0,11	-0,06	-0,17	-0,13	-0,12	0,00	-0,12	-0,12	-0,16
SI3	0,42	0,50	0,84	0,41	0,53	0,55	0,50	0,46	0,24	0,33	0,36	0,29	0,41	0,39	0,39	0,34	0,35	0,34	0,30	0,34	0,30	-0,04	-0,02	-0,10	-0,13	-0,18	-0,05	-0,19	-0,18	-0,16	-0,05	-0,17	-0,10	-0,07
FC1	0,49	0,61	0,37	0,80	0,59	0,57	0,54	0,58	0,37	0,28	0,40	0,30	0,33	0,22	0,22	0,26	0,46	0,33	0,42	0,42	0,38	-0,14	-0,15	-0,26	-0,21	-0,12	-0,11	-0,20	-0,20	-0,24	-0,09	-0,21	-0,25	-0,31
FC2	0,29	0,49	0,14	0,68	0,37	0,30	0,31	0,40	0,19	0,25	0,21	0,29	0,05	0,06	0,05	0,09	0,28	0,21	0,29	0,24	0,22	-0,09	0,00	-0,16	-0,18	-0,09	-0,12	-0,14	0,02	-0,06	-0,09	0,04	-0,08	0,02
FC3	0,41	0,51	0,49	0,65	0,52	0,48	0,42	0,45	0,12	0,24	0,27	0,15	0,25	0,21	0,17	0,12	0,25	0,29	0,33	0,24	0,29	0,00	-0,09	-0,11	-0,09	-0,09	-0,10	-0,07	-0,10	-0,08	-0,06	-0,08	-0,07	-0,06
FC4	0,31	0,48	0,25	0,77	0,39	0,35	0,35	0,40	0,29	0,23	0,28	0,21	0,15	0,11	0,06	0,10	0,35	0,26	0,30	0,27	0,34	-0,22	-0,11	-0,33	-0,19	-0,12	-0,17	-0,11	-0,09	-0,04	-0,04	-0,05	-0,12	-0,15
HM1	0,70	0,69	0,55	0,58	0,91	0,73	0,68	0,73	0,26	0,39	0,41	0,29	0,45	0,37	0,32	0,35	0,35	0,37	0,38	0,35	0,42	-0,09	-0,12	-0,19	-0,24	-0,23	-0,16	-0,27	-0,20	-0,23	-0,07	-0,17	-0,22	-0,14
HM2	0,67	0,73	0,48	0,59	0,89	0,69	0,63	0,74	0,24	0,32	0,40	0,24	0,29	0,28	0,23	0,27	0,37	0,34	0,35	0,33	0,36	-0,14	-0,13	-0,22	-0,32	-0,22	-0,16	-0,32	-0,22	-0,28	-0,14	-0,14	-0,27	-0,16
HM3	0,67	0,74	0,53	0,62	0,91	0,70	0,69	0,75	0,32	0,33	0,38	0,24	0,40	0,32	0,26	0,27	0,45	0,36	0,40	0,34	0,36	-0,07	-0,11	-0,18	-0,20	-0,22	-0,09	-0,26	-0,28	-0,25	-0,12	-0,23	-0,23	-0,13
H1	0,55	0,61	0,50	0,60	0,71	0,89	0,68	0,74	0,32	0,33	0,42	0,29	0,34	0,25	0,27	0,25	0,41	0,30	0,40	0,36	0,41	-0,12	-0,17	-0,22	-0,26	-0,17	-0,14	-0,31	-0,25	-0,28	-0,15	-0,22	-0,27	-0,20
H2	0,54	0,57	0,60	0,44	0,65	0,84	0,72	0,66	0,18	0,31	0,42	0,31	0,48	0,39	0,43	0,37	0,32	0,34	0,37	0,37	0,43	-0,11	-0,07	-0,15	-0,22	-0,13	-0,09	-0,20	-0,18	-0,18	-0,06	-0,15	-0,13	-0,12
H3	0,55	0,61	0,49	0,55	0,71	0,90	0,73	0,73	0,23	0,30	0,38	0,26	0,34	0,27	0,29	0,31	0,36	0,34	0,35	0,32	0,38	-0,07	-0,15	-0,17	-0,25	-0,21	-0,12	-0,29	-0,28	-0,26	-0,11	-0,21	-0,25	-0,18
BI1	0,58	0,60	0,51	0,50	0,68	0,73	0,90	0,72	0,33	0,36	0,44	0,41	0,46	0,43	0,46	0,41	0,40	0,42	0,45	0,45	0,48	-0,06	-0,07	-0,12	-0,20	-0,19	-0,08	-0,20	-0,17	-0,16	-0,02	-0,14	-0,15	-0,23
BI2	0,55	0,64	0,53	0,55	0,71	0,76	0,90	0,77	0,35	0,36	0,43	0,30	0,39	0,38	0,35	0,35	0,39	0,38	0,42	0,38	0,44	-0,04	-0,13	-0,13	-0,19	-0,16	-0,05	-0,21	-0,18	-0,20	-0,05	-0,16	-0,19	-0,18
BI3	0,55	0,57	0,48	0,52	0,65	0,75	0,92	0,74	0,30	0,39	0,40	0,37	0,39	0,37	0,40	0,38	0,35	0,40	0,40	0,43	0,54	-0,09	-0,13	-0,13	-0,24	-0,21	-0,09	-0,23	-0,19	-0,18	-0,05	-0,17	-0,16	-0,26
BI4	0,50	0,57	0,51	0,50	0,61	0,66	0,85	0,69	0,26	0,36	0,39	0,33	0,38	0,40	0,40	0,40	0,35	0,37	0,38	0,39	0,52	-0,10	-0,11	-0,10	-0,22	-0,20	-0,06	-0,19	-0,21	-0,16	-0,03	-0,19	-0,16	-0,22
UB1	0,63	0,72	0,47	0,60	0,78	0,70	0,73	0,90	0,25	0,31	0,39	0,26	0,33	0,34	0,28	0,29	0,36	0,39	0,39	0,37	0,41	-0,12	-0,09	-0,19	-0,27	-0,22	-0,10	-0,26	-0,27	-0,27	-0,15	-0,22	-0,23	-0,13
UB2	0,60	0,65	0,52	0,55	0,73	0,78	0,78	0,91	0,30	0,31	0,37	0,28	0,37	0,33	0,30	0,31	0,42	0,33	0,42	0,36	0,39	-0,15	-0,20	-0,20	-0,26	-0,25	-0,11	-0,28	-0,26	-0,21	-0,08	-0,21	-0,17	-0,11
UB3	0,60	0,71	0,45	0,59	0,71	0,70	0,69	0,90	0,28	0,31	0,33	0,26	0,28	0,24	0,27	0,29	0,38	0,30	0,41	0,38	0,37	-0,12	-0,17	-0,15	-0,27	-0,20	-0,11	-0,26	-0,19	-0,18	-0,08	-0,15	-0,15	-0,11
AGE1	0,23	0,30	0,30	0,34	0,30	0,28	0,34	0,31	1,00	0,48	0,47	0,42	0,44	0,30	0,28	0,24	0,60	0,37	0,43	0,46	0,32	-0,04	0,04	-0,04	-0,05	0,02	0,09	-0,16	0,01	-0,14	-0,04	0,02	-0,04	-0,07
AGE2	0,29	0,32	0,39	0,35	0,39	0,36	0,41	0,35	0,48	1,00	0,56	0,56	0,43	0,52	0,43	0,46	0,50	0,62	0,51	0,54	0,49	-0,03	0,05	-0,15	-0,08	0,04	-0,04	-0,19	0,00	-0,18	-0,02	0,05	-0,11	-0,13
AGE3	0,30	0,37	0,32	0,41	0,44	0,47	0,46	0,41	0,47	0,56	1,00	0,68	0,40	0,43	0,51	0,42	0,52	0,56	0,72	0,63	0,53	-0,03	-0,04	-0,21	-0,25	-0,03	-0,05	-0,29	-0,10	-0,26	-0,20	-0,06	-0,22	-0,09
AGE4	0,21	0,27	0,24	0,33	0,28	0,33	0,39	0,30	0,42	0,56	0,68	1,00	0,33	0,41	0,54	0,55	0,44	0,49	0,68	0,68	0,56	-0,03	0,05	-0,15	-0,08	0,03	-0,01	-0,17	0,02	-0,17	-0,07	0,09	-0,12	-0,09
GDR1	0,39	0,40	0,52	0,29	0,42	0,44	0,45	0,37	0,44	0,43	0,40	0,33	1,00	0,69	0,64	0,59	0,47	0,42	0,38	0,38	0,31	0,04	0,13	-0,03	0,03	0,01	0,00	-0,07	-0,05	-0,06	0,07	0,01	0,00	-0,06
GDR2	0,36	0,34	0,44	0,22	0,36	0,34	0,44	0,34	0,30	0,52	0,43	0,41	0,69	1,00	0,71	0,69	0,41	0,51	0,41	0,40	0,32	-0,01	0,15	-0,09	0,04	-0,03	0,03	-0,07	-0,11	-0,07	0,04	-0,01	-0,03	-0,01
GDR3	0,27	0,27	0,42	0,19	0,30	0,37	0,45	0,32	0,28	0,43	0,51	0,54	0,64	0,71	1,00	0,79	0,40	0,40	0,52	0,54	0,40	0,03	0,13	-0,13	-0,05	-0,05	-0,07	-0,10	-0,02	-0,11	0,02	-0,02	-0,04	-0,12
GDR4	0,27	0,28	0,38	0,21	0,33	0,35	0,43	0,33	0,24	0,46	0,42	0,55	0,59	0,69	0,79	1,00	0,36	0,40	0,44	0,53	0,42	-0,04	0,16	-0,13	0,01	0,03	-0,03	-0,05	-0,02	-0,06	0,09	0,09	-0,01	-0,13
EXP1	0,36	0,47	0,39	0,47	0,43	0,41	0,42	0,43	0,60	0,50	0,52	0,44	0,47	0,41	0,40	0,36	1,00	0,54	0,56	0,57	0,44	-0,05	-0,03	-0,25	-0,08	-0,09	-0,09	-0,18	-0,14	-0,23	-0,12	-0,10	-0,16	-0,09
EXP2	0,32	0,37	0,35	0,38	0,39	0,37	0,44	0,38	0,37	0,62	0,56	0,49	0,42	0,51	0,40	0,40	0,54	1,00	0,55	0,58	0,54	-0,04	0,06	-0,17	-0,04	0,03	-0,12	-0,08	0,00	-0,14	-0,04	0,05	-0,11	-0,11
EXP3	0,28	0,40	0,33	0,47	0,42	0,43	0,46	0,45	0,43	0,51	0,72	0,68	0,38	0,41	0,52	0,44	0,56	0,55	1,00	0,71	0,56	-0,06	-0,07	-0,19	-0,18	-0,03	-0,07	-0,23	-0,10	-0,22	-0,17	-0,06	-0,21	-0,13
EXP4	0,26	0,36	0,32	0,41	0,38	0,40	0,46	0,41	0,46	0,54	0,63	0,68	0,38	0,40	0,54	0,53	0,57	0,58	0,71	1,00	0,64	-0,07	-0,03	-0,19	-0,15	-0,07	-0,10	-0,17	-0,04	-0,20	-0,11	-0,01	-0,10	-0,16
EXP5	0,29	0,35	0,29	0,43	0,42	0,46	0,55	0,43	0,32	0,49	0,53	0,56	0,31	0,32	0,40	0,42	0,44	0,54	0,56	0,64	1,00	-0,15	-0,11	-0,22	-0,24	-0,02	-0,19	-0,12	-0,09	-0,17	-0,06	-0,12	-0,14	-0,38

Figure 4. DISCRIMINANT VALIDITY

FC * AGE1	-0,08	-0,19	-0,06	-0,15	-0,11	-0,11	-0,08	-0,15	-0,04	-0,03	-0,03	-0,03	0,04	-0,01	0,03	-0,04	-0,05	-0,04	-0,06	-0,07	-0,15	1,00	0,41	0,69	0,41	0,31	0,27	0,39	0,30	0,44	0,40	0,27	0,38	0,26
FC * GDR1	-0,09	-0,17	-0,06	-0,13	-0,13	-0,15	-0,12	-0,17	0,04	0,05	-0,04	0,05	0,13	0,15	0,13	0,16	-0,03	0,06	-0,07	-0,03	-0,11	0,41	1,00	0,48	0,40	0,43	0,30	0,27	0,46	0,39	0,23	0,43	0,35	0,32
FC * EXP1	-0,12	-0,25	-0,09	-0,30	-0,21	-0,21	-0,13	-0,20	-0,04	-0,15	-0,21	-0,15	-0,03	-0,09	-0,13	-0,13	-0,25	-0,17	-0,19	-0,19	-0,22	0,69	0,48	1,00	0,47	0,38	0,43	0,43	0,45	0,56	0,49	0,41	0,52	0,32
HM * AGE2	-0,17	-0,24	-0,14	-0,23	-0,28	-0,28	-0,24	-0,29	-0,05	-0,08	-0,25	-0,08	0,03	0,04	-0,05	0,01	-0,08	-0,04	-0,18	-0,15	-0,24	0,41	0,40	0,47	1,00	0,49	0,61	0,63	0,41	0,57	0,50	0,42	0,55	0,46
HM * GDR2	-0,23	-0,26	-0,14	-0,14	-0,25	-0,20	-0,21	-0,25	0,02	0,04	-0,03	0,03	0,01	-0,03	-0,05	0,03	-0,09	0,03	-0,03	-0,07	-0,02	0,31	0,43	0,38	0,49	1,00	0,39	0,41	0,64	0,38	0,35	0,55	0,41	0,08
HM * EXP2	-0,06	-0,12	-0,06	-0,17	-0,15	-0,14	-0,08	-0,12	0,09	-0,04	-0,05	-0,01	0,00	0,03	-0,07	-0,03	-0,09	-0,12	-0,07	-0,10	-0,19	0,27	0,30	0,43	0,61	0,39	1,00	0,31	0,27	0,42	0,36	0,31	0,45	0,42
H * AGE3	-0,26	-0,24	-0,20	-0,18	-0,31	-0,30	-0,23	-0,30	-0,16	-0,19	-0,29	-0,17	-0,07	-0,07	-0,10	-0,05	-0,18	-0,08	-0,23	-0,17	-0,12	0,39	0,27	0,43	0,63	0,41	0,31	1,00	0,53	0,77	0,68	0,35	0,68	0,26
H * GDR3	-0,19	-0,21	-0,17	-0,14	-0,26	-0,27	-0,21	-0,27	0,01	0,00	-0,10	0,02	-0,05	-0,11	-0,02	-0,02	-0,14	0,00	-0,10	-0,04	-0,09	0,30	0,46	0,45	0,41	0,64	0,27	0,53	1,00	0,60	0,53	0,83	0,62	0,26
H * EXP3	-0,17	-0,23	-0,15	-0,16	-0,28	-0,27	-0,19	-0,24	-0,14	-0,18	-0,26	-0,17	-0,06	-0,07	-0,11	-0,06	-0,23	-0,14	-0,22	-0,20	-0,17	0,44	0,39	0,56	0,57	0,38	0,42	0,77	0,60	1,00	0,78	0,49	0,82	0,41
H * AGE4	-0,05	-0,12	-0,02	-0,10	-0,12	-0,12	-0,04	-0,11	-0,04	-0,02	-0,20	-0,07	0,07	0,04	0,02	0,09	-0,12	-0,04	-0,17	-0,11	-0,06	0,40	0,23	0,49	0,50	0,35	0,36	0,68	0,53	0,78	1,00	0,50	0,72	0,22
H * GDR4	-0,15	-0,17	-0,15	-0,12	-0,20	-0,22	-0,19	-0,21	0,02	0,05	-0,06	0,09	0,01	-0,01	-0,02	0,09	-0,10	0,05	-0,06	-0,01	-0,12	0,27	0,43	0,41	0,42	0,55	0,31	0,35	0,83	0,49	0,50	1,00	0,54	0,37
H * EXP4	-0,17	-0,19	-0,11	-0,19	-0,27	-0,25	-0,18	-0,21	-0,04	-0,11	-0,22	-0,12	0,00	-0,03	-0,04	-0,01	-0,16	-0,11	-0,21	-0,10	-0,14	0,38	0,35	0,52	0,55	0,41	0,45	0,68	0,62	0,82	0,72	0,54	1,00	0,38
BI * EXP5	-0,11	-0,12	-0,15	-0,19	-0,16	-0,19	-0,25	-0,13	-0,07	-0,13	-0,09	-0,09	-0,06	-0,01	-0,12	-0,13	-0,09	-0,11	-0,13	-0,16	-0,38	0,26	0,32	0,32	0,46	0,08	0,42	0,26	0,26	0,41	0,22	0,37	0,38	1,00

Figure 5. DISCRIMINANT VALIDITY

From Figures 4 and 5 the green numbers indicate the relationship between each indicator and the variable has the greatest value than the other variables. This means that all indicators meet the discriminant validity test criteria and have good discriminant validity.

3. Composite Reliability

Construct reliability is used to measure the reliability of the model. According to [22], measurement using composite reliability is preferable than Cronbach's Alpha, although Cronbach's Alpha is acceptable. The recommended measurement of internal consistency is the composite reliability value ≥ 0.70 [22]–[24]. Table 5 is composite reliability value from the test.

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Table 5. COMPOSITE RELIABILITY

Variable	Composite Reliability
Performance Expectancy (PE)	0,920
Effort Expectancy (EE)	0,893
Social Influence (SI)	0,920
Facilitating Condition (FC)	0,818
Hedonic Motivation (HM)	0,930
Habit (H)	0,909
Behavioral Intention (BI)	0,940
Use Behavior (UB)	0,928
AGE1	1,000
AGE2	1,000
AGE3	1,000
AGE4	1,000
AGE (FC-BI)	1,000
AGE (HM-BI)	1,000
AGE (H-BI)	1,000
AGE (H-UB)	1,000
GDR1	1,000
GDR2	1,000
GDR3	1,000
GDR4	1,000
GDR (FC-BI)	1,000
GDR (HM-BI)	1,000
GDR (H-BI)	1,000
GDR (H-UB)	1,000
EXP1	1,000
EXP2	1,000
EXP3	1,000
EXP4	1,000
EXP5	1,000
EXP (FC-BI)	1,000
EXP (HM-BI)	1,000
EXP (H-BI)	1,000
EXP (H-UB)	1,000
EXP (BI-UB)	1,000

From Table 5 all variables have a composite reliability value ≥ 0.70, which means that all variables have met the test criteria and have good reliability.

B. Structural Model (Inner Model)

Structural Model aims to determine the relationship between latent variables. The Structural Model test is carried out by testing R^2 (coefficient of determination), f^2 (effect size), Q^2 (prediction relevance), and path coefficients [22], [23].

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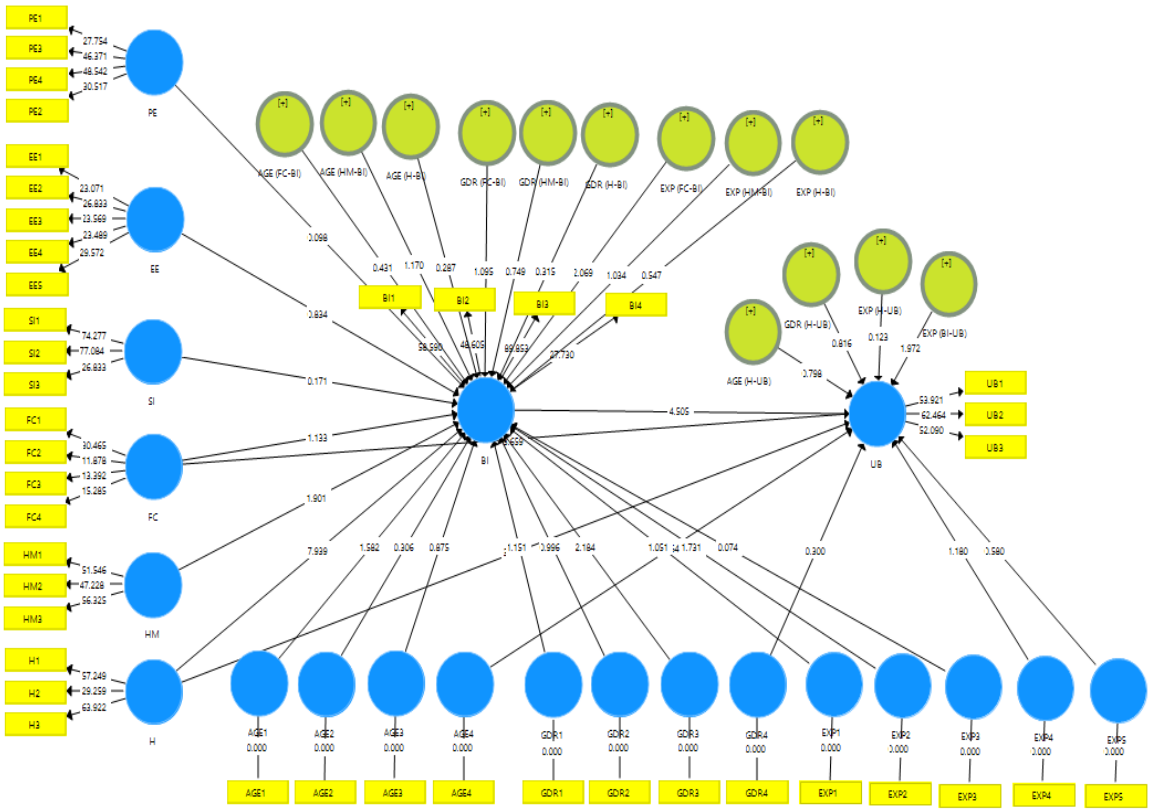

Figure 6. INNER MODEL

1. R^2 (coefficient of determination)

R-square is used to assess the effect of the independent latent variable on the dependent latent variable. The R-square value is in the range of 0 to 1, where the higher the R-square value, the stronger the influence of the independent variable on the dependent variable [22]. As a guideline, the criterion R-square value of 0.67 model is considered strong or substantial, 0.33 model is considered moderate, and 0.19 model is considered weak [23], [26]. The R-square value can be seen in Table 6.

Table 6. R-SQUARE

Variable	R-square Value
Behavioral Intention (BI)	0,751
Use Behavior (UB)	0,769

From Table 6, each variable has an R-square value exceeding 0.67, which means that both variables have strong or substantial criteria and are good in explaining the variation of the independent latent variable.

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2. f^2 (effect size)

f^2 (effect size) is carried out to assess the magnitude of the substantive influence between variables. The assessment of the f^2 test was based on the Cohen guidelines [22], an f^2 value of 0.02 representing a small effect, 0.15 representing a moderate effect, and 0.35 representing a large effect. The value of f^2 results from the test can be seen in Table 7.

Table 7. EFFECT SIZE

Variable	Behavioral Intention (BI)	Use Behavior (UB)	Desc.
Performance Expectancy (PE)	0,000		Small
Effort Expectancy (EE)	0,003		Small
Social Influence (SI)	0,000		Small
Facilitating Condition (FC)	0,008	0,092	Small
Hedonic Motivation (HM)	0,025		Small
Habit (H)	**0,316**		Moderate
Habit (H)		0,143	Small
Behavioral Intention (BI)		**0,270**	Moderate
Use Behavior (UB)			
AGE1	0,016		Small
AGE2	0,001		Small
AGE3	0,006		Small
AGE4		0,013	Small
AGE (FC-BI)	0,001		Small
AGE (HM-BI)	0,010		Small
AGE (H-BI)	0,001		Small
AGE (H-UB)		0,003	Small
GDR1	0,009		Small
GDR2	0,005		Small
GDR3	0,046		Small
GDR4		0,000	Small
GDR (FC-BI)	0,012		Small
GDR (HM-BI)	0,005		Small
GDR (H-BI)	0,000		Small
GDR (H-UB)		0,006	Small
EXP1	0,006		Small
EXP2	0,020		Small
EXP3	0,000		Small
EXP4	0,007		Small
EXP5		0,002	Small
EXP (FC-BI)	0,021		Small
EXP (HM-BI)	0,009		Small
EXP (H-BI)	0,002		Small
EXP (H-UB)		0,000	Small
EXP (BI-UB)		0,030	Small

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From Table 7, most of the f2 values have a small effect on Behavioral Intention and Use Behavior because they have an f2 value in the range of 0.02. The highest f2 value is 0.316 which is owned by the Habit variable on Behavioral Intention and has a moderate effect. The next highest value is 0.270 which is owned by the Behavioral Intention variable on Use Behavior and has a moderate effect as well.

3. Q^2 (prediction relevance)

Q^2 (prediction relevance) is used to assess the predictive power of the model or predictive relevance. The value of Q^2 is obtained from the blindfolding procedure. As a guideline, if the value of $Q^2 > 0$ indicates the model has a predictive relationship and if $Q^2 < 0$ indicates a lack of predictive relevance [22], [23]. The value of Q^2 can be seen in Table 8.

Table 8. PREDICTION RELEVANCE

Variable	Q^2 Value
***Behavioral Intention* (BI)**	0,564
***Use Behavior* (UB)**	0,598

From Table 8, the value of Q^2 on the Behavioral Intention and Use Behavior variables has a value of 0.564 and 0.598, where the value is > 0 which means the two variables have predictive relevance.

4. Path Coefficients

Path coefficients identify the relationship and significance between latent variables using bootstrapping procedure. The significance value of the influence between latent variables can be seen from the p-values and t-statistics. The hypothesis is known to be significant if p–values < α [27], where α is 0.05 [14], [15], [24]. Meanwhile, to find out the acceptance of the hypothesis, it can be known through the value of t-statistics, if t-statistics > t-table indicates that the hypothesis is accepted [23], [25], [28]. The t-table of this study is 1.96.

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Table 9. PATH COEFFICIENT (HYPOTHESIS TESTING)

	Hypothesis	Original Sample	t-statistic	t-table	P Values	Desc.
H1	**PE → BI**	0,008	0,098	1,96	0,922	Rejected
H2	**EE → BI**	0,063	0,834	1,96	0,405	Rejected
H3	**SI → BI**	-0,009	0,171	1,96	0,864	Rejected
H4	**FC → BI**	0,074	1,133	1,96	0,258	Rejected
H5	**FC → UB**	***0,194***	***3,659***	***1,96***	***0,000***	***Accepted***
H6	**HM → BI**	0,172	1,901	1,96	0,058	Rejected
H7	**H → BI**	***0,509***	***7,939***	***1,96***	***0,000***	***Accepted***
H8	**H → UB**	***0,331***	***3,232***	***1,96***	***0,001***	***Accepted***
H9	**BI → UB**	***0,470***	***4,505***	***1,96***	***0,000***	***Accepted***
H10	**AGE*(FC-BI) → BI**	-0,025	0,431	1,96	0,666	Rejected
H11	**GDR*(FC-BI) → BI**	-0,072	1,095	1,96	0,274	Rejected
H12	**EXP*(FC-BI) → BI**	***0,114***	***2,069***	***1,96***	***0,039***	***Accepted***
H13	**AGE*(HM-BI) → BI**	-0,076	1,170	1,96	0,242	Rejected
H14	**GDR*(HM-BI) → BI**	-0,046	0,749	1,96	0,454	Rejected
H15	**EXP*(HM-BI) → BI**	0,066	1,034	1,96	0,301	Rejected
H16	**AGE*(H-BI) → BI**	0,020	0,287	1,96	0,774	Rejected
H17	**GDR*(H-BI) → BI**	-0,017	0,315	1,96	0,753	Rejected
H18	**EXP*(H-BI) → BI**	0,038	0,547	1,96	0,584	Rejected
H19	**AGE*(H-UB) → UB**	-0,038	0,798	1,96	0,426	Rejected
H20	**GDR *(H-UB) → UB**	-0,046	0,816	1,96	0,415	Rejected
H21	**EXP *(H-UB) → UB**	0,007	0,123	1,96	0,903	Rejected
H22	**EXP*(BI-UB) → UB**	***0,077***	***1,972***	***1,96***	***0,049***	***Accepted***

From Table 9, it can be seen the relationship between independent variable and dependent variable. There are 6 hypotheses according to the research model that have p-values < 0.05 and t-statistics > 1.96, namely H5, H7, H8, H9, H12, and H22. This means that the six relationships have a significant relationship accepted.

From the test results above, there are 2 hypotheses (H12 and H22) related to the accepted moderator variables. To determine the effect of the moderator variable, strengthen or weaken, it can be seen by comparing the t-statistic value between the results of the model path coefficient test without moderating variables and the model path coefficient test results with moderating variable. If the t-statistic value in the model path coefficient test results without moderating variables is smaller than the t-statistic value in the model path coefficient test results with moderating variables, the moderating variable strengthens the influence of the main variable on Behavioral Intention or Use Behavior. The following are the results of the accepted moderator variable test.

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Table 10. COMPARISON OF THE T-STATISTICS VALUE ON MODERATOR VARIABLE

	Hyphotesis	t-statistic without moderating variables	t-statistic with the moderating variable	Desc.
H12	**EXP*(FC-BI) → BI**	1,682	1,051	Weaken
H22	**EXP*(BI-UB) → UB**	1,223	0,580	Weaken

The final model obtained from this study is as follows in Figure 7.

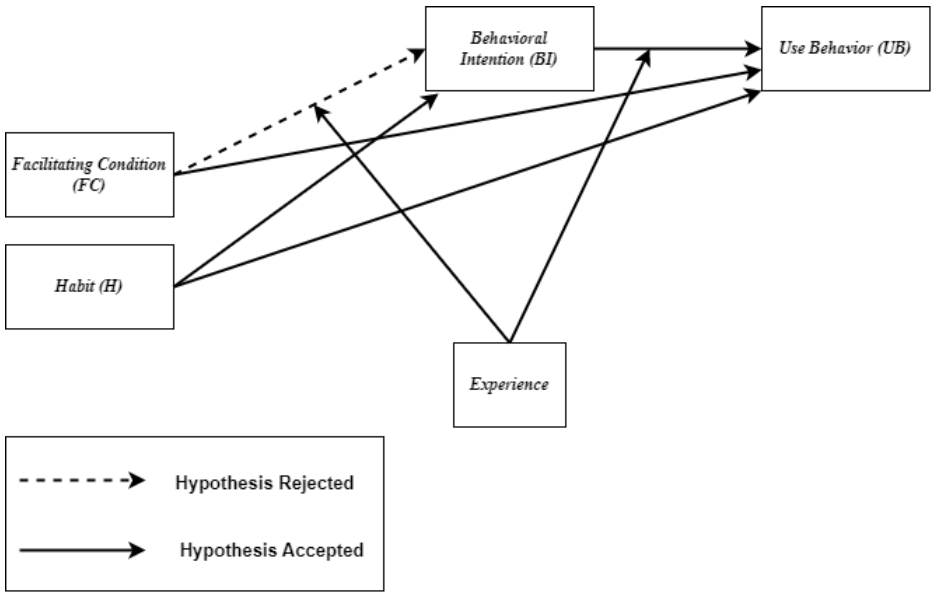

Figure 7. FINAL MODEL

This study shows that Facilitating Conditions have a positive effect on Use Behavior (H5). This means that the available resources or facility conditions can support user behavior in using E-Government Health Application feature on partner applications. The better the facilitating conditions, the more influence on user behavior in using E-Government Health Application feature on partner applications.

Habit has a positive effect on Behavioral Intention (H7). This means that the user's habits in using E-Government Health Application feature on partner applications can support the user's intention or desire to always use E-Government Health Application feature on partner applications in their activities. The more often users use these features on partner applications, the more intention or desire to reuse the system will increase.

Habit has a positive effect on Use Behavior (H8). This means that users who have the habit of using E-Government Health Application feature on partner applications as a fulfillment of their needs will affect the improvement of their usage behavior by using the feature anywhere, anytime and for various purposes. The more often users use these features on partner applications, the more usage behavior to use the system will increase.

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Behavioral Intention has a positive effect on Use Behavior (H9). This means that the user's intention or desire to use E-Government Health Application feature on partner application will create an action to always use E-Government Health Application feature on partner application as a fulfillment of needs anywhere and anytime.

Experience significantly moderates the relationship between Facilitating Conditions and Behavioral Intention (H12). From the results in Table 10, it is known that experience is proven to weaken the relationship between Facilitating Conditions and Behavioral Intentions. So that users with different experiences have different concerns about the availability of adequate support to have the intention to use E-Government Health Application feature on partner applications. According to [29], greater experience leads to greater affinity also to a technology, thereby reducing the user's dependence on external support (facilitating conditions). From this research [30] states that less experience will depend more on facilitating conditions.

Experience significantly moderates the relationship between Behavioral Intention and Use Behavior (H22). From the results in Table 10, it is known that experience is proven to weaken the relationship between Behavioral Intention and Use Behavior. So that users with different experiences have different intentions to influence the behavior of using E-Government Health Application feature on partner applications. With increasing experience, routine behavior becomes automatic. As a result, as experience increases, the effect of behavioral intention on technology use decreases [8].

From the results of the analysis, service providers for E-Government Health Application features on partner applications can improve their services by considering several significant influencing variables, so that it is expected to increase public acceptance of these applications. In addition, the E-Government Health Application feature on partner applications can integrate some government information from the health office, transportation service, education office and so on into one portal, so that by using this application users can access some information through one door. Comparison of the results of the analysis in this study with several previous studies can be seen in the following table.

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Table 11. COMPARISON WITH PREVIOUS STUDIES

	Hypothesis	This Study	[5]	[13]	[11]	[25]	[31]
H1	**PE → BI**	×	×	×	-	×	×
H2	**EE → BI**	×	×	×	✓	×	×
H3	**SI → BI**	×	×	×	-	✓	✓
H4	**FC → BI**	×	×	×	✓	×	-
H5	**FC → UB**	✓	✓	✓	✓	✓	✓
H6	**HM → BI**	×	-	-	×	×	-
H7	**H → BI**	✓	✓	×	×	-	-
H8	**H → UB**	✓	✓	✓	×	✓	-
H9	**BI → UB**	✓	×	✓	✓	×	✓
H10	**AGE*(FC-BI) → BI**	×	×	×	✓	×	-
H11	**GDR*(FC-BI) → BI**	×	×	×	✓	×	-
H12	**EXP*(FC-BI) → BI**	✓	×	×	✓	×	-
H13	**AGE*(HM-BI) → BI**	×	×	×	✓	×	-
H14	**GDR*(HM-BI) → BI**	×	×	×	✓	×	-
H15	**EXP*(HM-BI) → BI**	×	×	×	✓	×	-
H16	**AGE*(H-BI) → BI**	×	×	×	✓	×	-
H17	**GDR*(H-BI) → BI**	×	×	×	✓	×	-
H18	**EXP*(H-BI) → BI**	×	×	×	×	×	-
H19	**AGE*(H-UB) → UB**	×	×	×	×	×	-
H20	**GDR *(H-UB) → UB**	×	×	×	×	×	-
H21	**EXP *(H-UB) → UB**	×	×	×	×	×	-
H22	**EXP*(BI-UB) → UB**	✓	×	×	✓	×	-

IV. CONCLUSION

In this study, six hypotheses were accepted out of twenty-two hypotheses. The factors that influence public acceptance of E-Government Health Application feature on partner applications in East Java Province are user habits that will increase user intentions and behavior to always use the E-Government Health Application features in partner applications wherever and whenever for their activities. Adequate facilitation conditions and user intentions can support user behavior in using the Health E-Government Application features in partner applications. In addition, users with different experiences have different concerns about the availability of adequate support to have the intention of using E-Government Health Application feature on partner applications. Users with different experiences also have different intentions to influence the behavior of using E-Government Health Application feature on partner applications. From the results of the study, it is known that users have the intention to use E-Government Health Application feature on partner applications in the future, this means that E-Government Health Application feature on partner applications can be well received by the community. Further research is expected to

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broaden its scope so it can be seen the factors of public acceptance of E-Government Health Application feature on partner applications. In addition, further researchers can increase the number of respondents so they can provide a higher level of acceptance. It is also expected to be able to use tools other than Smart-PLS to test the research model so it can be seen the differences in the level of acceptance.

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