



Determinants of Organizational Net Benefits in Enterprise Resource Planning-Based Core Insurance Systems: An Extended DeLone–McLean IS Success Model

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ABSTRACT

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Enterprise Resource Planning, Core Insurance System, DeLone–McLean model, information systems success, structural equation modeling, user satisfaction, intention to use, net benefits

Enterprise Resource Planning (ERP) based Core Insurance Systems play a critical role in integrating and managing core business processes in life insurance organizations. However, assessing their organizational value remains a complex challenge due to the interplay between system quality, user perceptions, and service performance. This study investigates the determinants of organizational net benefits of an ERP-based Core Insurance System using an extended DeLone–McLean Information Systems Success Model, incorporating Trust and Perceived Usefulness as additional constructs. Data were collected from 270 active users and analyzed using partial least squares structural equation modeling (PLS-SEM). The results indicate that information quality, service quality, trust, and perceived usefulness significantly influence user satisfaction, while system quality and service quality affect intention to use. Furthermore, both user satisfaction and intention to use are found to have significant positive effects on organizational net benefits. These findings highlight the importance of system reliability, service responsiveness, and user trust in maximizing the value of ERP-based systems. The study contributes to the literature by extending the information system success model in the context of insurance ERP systems and provides practical insights for improving system performance and organizational benefit.

1. INTRODUCTION

Information systems play a critical role in supporting operational activities in the life insurance industry, particularly in policy administration, underwriting, premium processing, claims management, and customer data handling. To enhance process integration and service quality, XYZ Life Insurance Company implemented an Enterprise Resource Planning (ERP)-based Core Insurance System.

The Core Insurance System serves as an integrated platform that automates and manages key insurance operations, including policy lifecycle management, premium billing, claims processing, and centralized customer data management. Within the ERP environment, the system facilitates real-time data exchange, standardizes business processes, and enhances coordination across departments, thereby improving operational efficiency and supporting more informed decision-making.

However, despite these intended benefits, the system has encountered recurring operational issues, including calculation inaccuracies, incomplete or inconsistent data records, and failures in report or data generation. These issues disrupt business processes and require frequent corrective actions to maintain data accuracy and integrity. Based on the company's Jira ticketing records, a total of 564 cases related to system bugs and data corrections were reported between March 1, 2022, and February 28, 2023. This condition

indicates ongoing challenges in terms of system reliability and data quality for daily operations. Figure 1 presents the monthly distribution of these incidents.

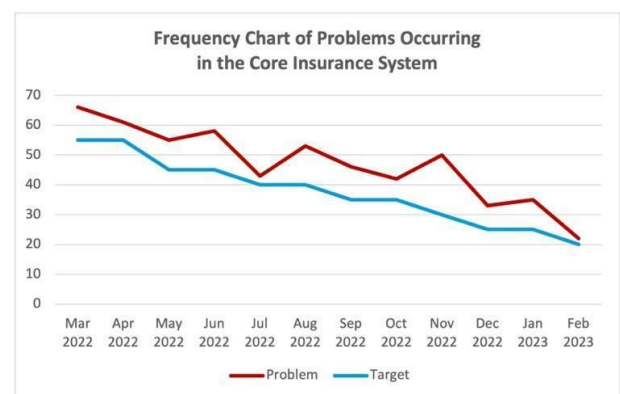


Figure 1. Monthly number of Jira tickets related to software bugs and data corrections in the Core Insurance System (March 2022–February 2023)

A systematic evaluation is therefore necessary to determine the key factors influencing system success and its contribution to organizational value. This study assesses the Core Insurance System using the updated DeLone and McLean Information Systems Success Model, extended by incorporating Trust and

Perceived Usefulness as additional constructs reflecting user perceptions. Using data collected from 270 active internal users and analyzed through structural equation modeling-partial least squares (SEM-PLS), this study examines the effects of system quality dimensions and user perceptions on User Satisfaction, Intention to Use, and ultimately Net Benefits.

This study contributes to the literature by providing empirical evidence from an ERP-based core insurance context, identifying the most significant determinants of user satisfaction, intention to use, and net benefits, and offering practical implications for system stabilization, service support enhancement, and the development of trust in enterprise insurance systems.

2. LITERATURE REVIEW

2.1 Information system

An information system can be defined as an integrated set of interconnected components that collectively function to collect, process, store, and distribute information. This information plays a crucial role in supporting core organizational functions, including data provision, data visualization, data analysis for decision-making, as well as communication and coordination within the organization [1]. An information system comprises several key components, namely hardware, software, data, people, and procedures. These elements interact systematically to support organizational operations and facilitate effective decision-making processes [2].

2.2 Enterprise Resource Planning

ERP refers to an integrated business system designed to unify and coordinate data across an organization within a single, structured platform that meets the needs of multiple functional areas [3]. ERP systems aim to enhance efficiency in key operational domains, such as purchasing, accounting, manufacturing, and sales, by integrating processes that were previously managed separately through legacy or standalone systems [4].

ERP systems are designed to be adaptable to organizational requirements, enabling effective data integration and process alignment across different functional units. Organizations adopt ERP systems to improve operational performance, either by supporting new business models or by optimizing business processes through better utilization of information [5].

In a broader context, information systems also play a strategic role by enabling organizations to develop products, services, and capabilities that provide a competitive advantage. This perspective underlies the concept of strategic information systems, which align with business strategies and support organizational sustainability in competitive environments [5]. Strategic information systems are described as instruments that enable the construction of knowledge, changing of knowledge, and sharing of information within the course of creation and performance of business strategies [6].

2.3 DeLone and McLean Information Systems Success Model (DeLone & McLean, 2003)

The Information System Success Model developed by

DeLone and McLean is among the widely used models in finding out the success or failure of embraced/adapted information system [7], as shown in Figure 2.

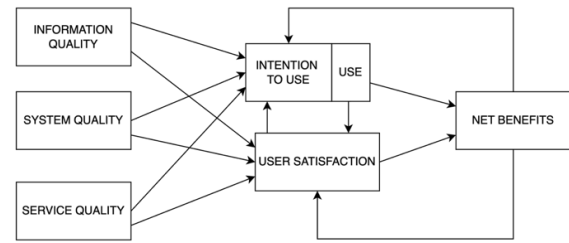


Figure 2. DeLone and McLean Information Systems Success Model (ten-year update)

Source: DeLone and McLean [8]

The following are the variables measured using the DeLone & McLean IS Success Model:

2.3.1 System quality

IS quality refers to key system attributes, including reliability, availability, and usability, and represents a critical determinant of user satisfaction [9]. Within the DeLone and McLean IS Success Model, system quality is primarily associated with technical performance dimensions such as reliability, response time, security, and flexibility. However, as the counterparts of the D&M IS Success Model spread the light [10], in addition to technical efficiency, system quality is also evaluated based on user perceptions, particularly in terms of ease of use and overall user-friendliness. A well-designed system is therefore expected to enhance usability and support effective interaction.

2.3.2 Information quality

Information quality reflects the extent to which system-generated information is accurate, relevant, up-to-date, and complete. It is a fundamental factor contributing to information system success [11]. High-quality data is essential for ensuring the reliability of information and its usefulness in supporting business processes and decision-making. Conversely, poor data quality may reduce information value and undermine user confidence. Negative perceptions of underlying data quality can lead to unfavorable evaluations of overall information quality [12].

2.3.3 Service quality

Service quality in the context of information systems refers to the level of support provided to end users. This includes aspects such as reliability, responsiveness, accuracy, help desk support, and user training. It reflects the extent to which IT services meet user expectations and system requirements [13]. High service quality is associated with timely support, dependable assistance, and clear communication, all of which contribute significantly to user satisfaction [14].

2.3.4 System use and intention to use

System use and intention to use represent the degree to which users engage with, or intend to engage with, a particular system. Intention to use is commonly regarded as a precursor to actual system usage. As an indicator of system effectiveness, it reflects users' willingness to adopt and utilize the system under varying conditions. However, the relationship between intention and actual usage is not always

consistent, as behavioral intentions do not necessarily translate into observable actions in all contexts [15].

2.3.5 User satisfaction

User satisfaction refers to the extent to which users feel satisfied with their experience in using an information system. It is considered a central construct in the DeLone and McLean IS Success Model and a key indicator of system success [16]. User satisfaction will be especially relevant in cases when the use of the system is necessary and possibly unplanned and where frequencies are not a sound indicator of system success [17].

2.3.6 Net benefits

Net benefits represent the overall value generated by an information system for individuals, organizations, and broader social contexts. These benefits may vary depending on the study context, system characteristics, and level of analysis. While user satisfaction and system usage indicate system success, net benefits provide a more direct measure of the outcomes achieved through system implementation [18]. Empirical evidence from a study on Thailand's national pension system, analyzed using structural equation modeling (SEM), indicates that system quality can enhance perceived ease of use, although system instability may reduce perceived usefulness [19].

2.4 Trust and Perceived Usefulness variables

In addition to the six elements in the DeLone and McLean IS Success Model, this paper will use two other elements that enabled a meaningful impact on the information system success: perceived usefulness and trust.

2.4.1 Trust

Trust is characterized as the readiness of the individual to depend on their own belief in the competency and honesty of a third party. Within the scope of information systems, trust refers to the trustworthiness of some application by a user. It is also a very important element in the acceptance of technology since users tend to isolate technology that they lack faith in. Simply stated, trust is the assurance that the capabilities, goodwill, and integrity of a service provider of an application are perceived by the users. On the other hand, distrust may predispose poor user experiences and slow down the adoption of systems [13].

2.4.2 Perceived usefulness

Perceived usefulness has been demonstrated in previous studies to have a major impact on user satisfaction with the information system [19, 20]. Perceived usefulness. Within the theory, perceived usefulness is a perception by an individual that, through using a certain system, better job performance would be involved [21].

This principle is subjective in nature since users evaluate the possibility of improving or enhancing individual or collective performance in an organization through technology [22]. The higher the perception of a user with regards to the usefulness of an information system, the greater the anticipated gains in efficiency and overall performance [23].

3. METHODOLOGY

This research begins by diagnosing the primary issues

occurring within XYZ Life Insurance Company, especially those related to user difficulties in operating the Core Insurance System. Subsequently, a review of relevant theories is undertaken to provide a conceptual basis, strengthen the proposed research framework, and support the formulation of hypotheses.

The problems that have been identified are then integrated into the research evaluation framework. In measuring the effectiveness of the system implementation, this study utilizes the DeLone and McLean IS Success Model, which is further expanded by incorporating perceived usefulness and trust as additional constructs. These variables are translated into specific indicators and designed into a structured questionnaire to facilitate data collection.

Following the data gathering process, several statistical procedures are applied, including tests of validity, reliability, and hypothesis evaluation. The findings from these analyses serve as the basis for drawing conclusions and offering actionable recommendations to enhance both system performance and operational efficiency within XYZ Life Insurance Company.

3.1 Models and method of analysis

The proposed study adopts the updated DeLone and McLean Information Systems Success Model, as it incorporates all key constructs relevant to this research, including information quality, system quality, service quality, intention to use, user satisfaction, and net benefits. This makes the model highly suitable for examining the relationships among these variables within the current study context. Two distinct variables used in this model are Trust and Perceived Usefulness, as shown in Figure 3.

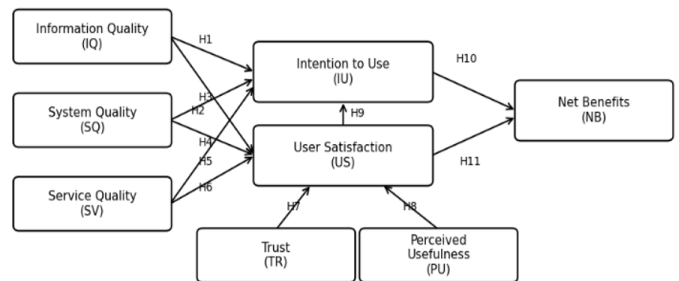


Figure 3. Research model of Core Insurance System success (extended DeLone and McLean Model with Trust and Perceived Usefulness)

When the evaluation data is obtained, it will be followed by an analysis of the results. It is performed with a myriad of tests that include validity tests, reliability tests, and hypothesis testing. The research conducted at the end of this analysis will be used to provide the conclusion and suggestions on the necessary improvements to be made to the insurance company XYZ Life Insurance Company.

3.2 Variables and indicators

The data will be collected through the distribution of off-forms or questionnaires to employees of XYZ Life Insurance Company using the Core Insurance System. These statements are formulated on the basis of predetermined indicators of each variable being studied. Evidence from previous studies of the DeLone and McLean model is used to develop the indicators

to make up the questionnaire [24-41]. As indicated in Table 1, the variables that will be measured at XYZ Life Insurance Company are as follows.

3.3 Sample and population

At the time of data collection, the organization recorded 270 active internal users who held valid accounts and routinely accessed the Core Insurance System across head-office and branch functions. Therefore, this study applied a total population (census) approach by targeting all active users to minimize sampling bias and ensure broad representation of real system usage. From a PLS-SEM adequacy perspective, the sample size also exceeds common minimum guidance (e.g., the “10-times rule”), since the maximum number of structural paths directed to a single endogenous construct in

this model is five (toward User Satisfaction). Thus, a minimum of 50 cases would be sufficient under that rule, and 270 responses provide robust estimation power for the proposed model.

The study population consists of all internal stakeholders of XYZ Life Insurance Company who have valid accounts and passwords to access and operate the Core Insurance System. From this population, a sample of 270 users was selected to participate in the study. Data were collected using a structured questionnaire designed to obtain systematic and objective responses from participants. The questionnaire included a set of predefined statements intended to assess respondents’ knowledge, awareness, and perceptions [24], and was distributed via Google Forms [25]. The results of the questionnaire are available at: <https://doi.org/10.17632/8ry5w5h9rb.1>.

Table 1. Indicators and questionnaire

Variable	Indicator	Statement	Code
Information quality	Up-to-date [26]	I acknowledge that the information provided by the Core Insurance System is up-to-date.	IQ1
	Helpfulness [27]	I find the information provided by the Core Insurance System helpful for my work.	IQ2
	Accuracy [28]	I consider the information provided by the Core Insurance System to be accurate.	IQ3
System quality	System Features [29]	I believe that the functions and features of the Core Insurance System are useful for my work needs.	SQ1
	Availability [12]	I can always access the Core Insurance System because it is consistently operational.	SQ2
	Reliability [30]	I trust that the Core Insurance System is highly reliable and free from system errors.	SQ3
	Understanding [26]	I feel that the Core Insurance System support team understands my needs.	SV1
Service quality	Responsibility [28]	I believe that the Core Insurance System support team provides responsive service by addressing my requests quickly.	SV2
	Assurance [28]	I trust that the Core Insurance System support team is knowledgeable and provides assurance when I need assistance.	SV3
Intention to use	Recommendation [27]	I would recommend the Core Insurance System to others.	IU1
	User Needs [36]	I rely on the Core Insurance System application.	IU2
	Perceived Utility [36]	I will continue using the Core Insurance System even if its use is not mandatory.	IU3
User satisfaction	Satisfaction [29]	I am overall satisfied with using the Core Insurance System.	US1
	Efficiency [31]	I believe the Core Insurance System functions as expected.	US2
	Ease of Use [32]	I find the Core Insurance System very user-friendly use.	US3
Net benefits	Job Simplification [29]	I feel that the Core Insurance System simplifies my work.	NB1
	Valuable [28]	I consider the Core Insurance System to be an essential and valuable tool for my job.	NB2
	Time Saving [33]	Using the Core Insurance System helps me save time when searching for necessary information.	NB3
Perceived usefulness	Useful [34]	I find the Core Insurance System useful for my work.	PU1
	Improves Performance [26]	I believe the Core Insurance System enhances my performance.	PU2
	Effectiveness [35]	I feel that the Core Insurance System increases my work effectiveness.	PU3
Trust	Trustworthy [36]	I trust that the Core Insurance System will perform its tasks correctly, even without supervision.	TR1
	Interests [37]	I believe the Core Insurance System always prioritizes user interests.	TR2
	Commitment [41]	I trust that the Core Insurance System fulfills its promises and commitments.	TR3

3.4 Hypothesis

Drawing on the conceptual model depicted in Figure 3, the study formulates the following hypotheses:

H1: Information quality exerts a significant positive effect on users’ intention to use the system.

H2: Information quality significantly contributes to enhancing user satisfaction.

H3: System quality has a meaningful impact on the intention to use.

H4: System quality significantly influences user satisfaction levels.

H5: Service quality plays a significant role in shaping the

intention to use the system.

H6: Service quality significantly affects user satisfaction.

H7: Trust has a significant effect on user satisfaction.

H8: Perceived usefulness significantly influences user satisfaction.

H9: User satisfaction significantly drives the intention to use the system.

H10: Intention to use significantly contributes to net benefits.

H11: User satisfaction has a significant impact on net Benefit.

The specific research indicators, along with their corresponding questionnaire item, are outlined in Table 1.

3.5 Technical architecture of the Core Insurance System

The Core Insurance System is an ERP-based internal application that supports core insurance operations through an integrated platform. At a high level, the system follows a typical enterprise architecture consisting of: (1) a **presentation layer** used by internal staff to execute daily transactions and retrieve operational information; (2) an **application/service layer** that implements business logic for policy administration, premium processing, underwriting, and claims; and (3) a **data layer** that stores master and transaction records used across modules. The system also requires controlled access (e.g., role-based authorization) to ensure that users can only view or process functions relevant to their responsibilities. This high-level architecture is relevant to the present study because user perceptions of system reliability, information accuracy, and support responsiveness are shaped by how consistently these layers operate together during daily use.

4. RESULT

4.1 General description of respondents

The questionnaire will be distributed to all internal workers of the XYZ Life Insurance Company who have an account and a password to access the Core Insurance System. The population needed for this study was 270 respondents, who were the staff members of both the head office and branch offices of the XYZ Life Insurance Company. In gender composition, the respondents were stratified into two groups: male, 41.5% or 112 respondents, and female, 58.5% or 158 respondents.

The respondents were stratified according to their ages as follows: 20-30 years old, 65.2% or 176 respondents, 31-41 years old, 27.4% or 74 respondents, 42-52 years old, 6.3% or 17 respondents, and over 52 years old, 1.1% or 3 respondents.

In terms of department, the respondents were spread as follows: Policy Holder Services-10.7% or 29 respondents, Actuarial Services-11.9% or 32 respondents, Sales Channel Planning & Administration 23% or 62 respondents, Accounting 8.1% or 22 respondents, Finance 5.6% or 15 respondents, Claim 7.4% or 20 respondents, Business System 14.4% or 39 respondents, Marketing Officer Operations 9.6% or 26 respondents and Underwriting.

The percentages and numbers of the respondents according to job position will be in the eight levels of Vice President 2.6% or 7, Assistant Vice President 3.7% or 10, Senior Manager 4.4% or 12, Manager 11.9% or 32, Assistant Manager 8.5% or 23, Supervisor 8.5% or 23, Senior Officer 18.5% or 50, and Officer 41.9% or 113.

4.2 Measurement model

4.2.1 Evaluation convergent validity

Convergent validity refers to the degree to which a set of indicators consistently represents a single underlying construct by sharing a high proportion of common variance. In this context, a construct is expected to exhibit strong associations with its corresponding indicators, while maintaining weaker relationships with unrelated constructs. The evaluation of convergent validity is typically based on two primary measures, namely outer loadings and the Average variance

extracted (AVE) [38].

4.2.2 Loading factors

The outer loading value is the extent of reliability of any indicator within a construct. Outer loading values of greater than 0.708 are desirable as they imply that the construct accounts for over 50 percent of the variance of the indicator [39].

Table 2. Validity test result

Variable	Indicator	Value	Description
Information quality	IQ1	0.728	Valid
	IQ2	0.864	Valid
	IQ3	0.857	Valid
System quality	SQ1	0.857	Valid
	SQ2	0.819	Valid
	SQ3	0.813	Valid
Service quality	SV1	0.745	Valid
	SV2	0.841	Valid
	SV3	0.827	Valid
Intention to use	IU1	0.823	Valid
	IU2	0.718	Valid
	IU3	0.832	Valid
User satisfaction	US1	0.814	Valid
	US2	0.774	Valid
	US3	0.803	Valid
Net benefits	NB1	0.841	Valid
	NB2	0.835	Valid
	NB3	0.835	Valid
Perceived usefulness	PU1	0.844	Valid
	PU2	0.794	Valid
	PU3	0.810	Valid
Trust	TR1	0.755	Valid
	TR2	0.843	Valid
	TR3	0.830	Valid

The results of the validity test, shown in Table 2, confirm that the coefficients of all the variables and indicators range above 0.7.

4.2.3 Average variance extracted

AVE measures the convergent validity of a scale. An AVE value of greater than 0.5 is desirable, and in this case, the indicators explain over 50 percent of the variance in the reflective indicators successfully in relation to the latent construct [40]. This suggests that the model effectively captures the relationship between indicators and their underlying construct, as shown in Table 3.

Table 3. Average variance extracted (AVE) test

Variable	AVE	Description
Information quality	0.671	Reliable
System quality	0.689	Reliable
Service quality	0.648	Reliable
Intention to use	0.628	Reliable
User satisfaction	0.636	Reliable
Net benefits	0.701	Reliable
Perceived usefulness	0.667	Reliable
Trust	0.657	Reliable

AVE is unitless. $AVE \geq 0.50$ indicates adequate convergent validity (the construct explains at least 50% of indicator variance).

4.2.4 Evaluation discriminant validity

Discriminant validity was assessed using the Heterotrait–Monotrait (HTMT) ratio. The criterion for acceptable discriminant validity is that HTMT values should be below 0.90 for constructs that are conceptually similar, while a more conservative threshold of 0.85 is applied when constructs are

theoretically more distinct. This assessment can be further strengthened through a bootstrapping procedure, in which the upper bound of the 95% confidence interval must also remain below the specified cutoff values (0.90 or 0.85). It is important to note that HTMT values are standardized ratios and therefore do not carry units.

Table 4. Cross-loading test

	IQ	SQ	SV	IU	US	NB	PU	TR
IQ1	0.728	0.421	0.405	0.310	0.362	0.373	0.319	0.143
IQ2	0.864	0.391	0.419	0.354	0.430	0.464	0.275	0.047
IQ3	0.857	0.354	0.440	0.348	0.439	0.485	0.367	0.116
SQ1	0.403	0.857	0.477	0.559	0.405	0.433	0.386	0.029
SQ2	0.426	0.819	0.421	0.489	0.308	0.370	0.304	0.067
SQ3	0.351	0.813	0.405	0.509	0.401	0.376	0.286	0.075
SV1	0.368	0.433	0.745	0.413	0.399	0.409	0.321	0.038
SV2	0.473	0.567	0.841	0.457	0.457	0.481	0.392	-0.030
SV3	0.396	0.509	0.827	0.418	0.465	0.412	0.384	0.037
IU1	0.389	0.433	0.424	0.823	0.431	0.458	0.349	0.057
IU2	0.210	0.296	0.333	0.718	0.308	0.274	0.228	0.024
IU3	0.351	0.407	0.491	0.832	0.440	0.463	0.371	0.040
US1	0.461	0.411	0.487	0.372	0.814	0.487	0.427	0.129
US2	0.384	0.357	0.384	0.404	0.774	0.496	0.374	0.186
US3	0.354	0.309	0.438	0.434	0.803	0.412	0.351	0.185
NB1	0.442	0.391	0.454	0.407	0.542	0.841	0.449	0.065
NB2	0.424	0.367	0.428	0.475	0.464	0.835	0.499	0.165
NB3	0.496	0.437	0.475	0.419	0.457	0.835	0.401	0.021
PU1	0.337	0.351	0.380	0.359	0.446	0.499	0.844	0.193
PU2	0.270	0.278	0.324	0.338	0.375	0.422	0.794	0.216
PU3	0.348	0.334	0.414	0.301	0.352	0.387	0.810	0.084
TR1	0.053	0.102	0.000	0.039	0.126	0.070	0.134	0.755
TR2	0.092	0.037	-0.003	0.045	0.178	0.092	0.164	0.843
TR3	0.137	0.041	0.039	0.043	0.191	0.081	0.191	0.830

Cross-loading has been applied to ensure that the loading of an indicator is maximized to the latent variable he/she is destined to measure. A construct is taken to be valid in case its cross-loading figure is above 0.7 and higher than the cross-loading numbers of items on other scales [42], this means that the indicator best describes the related construct as compared to any other construct. The results presented in Table 4 reveal that all the indicators are highly correlated with their corresponding constructs as opposed to the other constructs.

4.2.5 Reliability test

The reliability test checks the comparability and stability of a measuring instrument in giving reproducible results in similar circumstances [43]. The primary rationale behind a reliability test is to assess how far all indices of a variable provide consistent findings. The level of reliability can be checked on composite reliability and Cranach’s Alpha, with the range of recommended coefficients exceeding 0.7 to denote a high level of reliability [39], as shown in Table 5.

4.2.6 Model Fit (SRMR) and Global Model Index (GoF)

Model fit was assessed using the Standardized Root Mean Square Residual (SRMR) and complementary fit indices provided by the PLS-SEM output (d_ ULS, d_ G, Chi-square, and NFI). SRMR values below 0.08 are commonly interpreted as indicating an acceptable approximate model fit in PLS-SEM reporting. All indices reported in this section are unitless.

The SRMR values for both the saturated model (0.066) and the estimated model (0.079) indicate an acceptable approximate fit based on the < 0.08 guideline, suggesting that the specified structural relations do not introduce substantial residual discrepancies. The remaining indices (d_ ULS, d_ G,

Chi-square, and NFI) are reported descriptively to provide additional context on model fit.

Table 5. Reliability test result

Variable	Composite Reliability	Description
Information quality	0.888	Reliable
System quality	0.848	Reliable
Service quality	0.813	Reliable
Intention to use	0.813	Reliable
User satisfaction	0.803	Reliable
Net benefits	0.803	Reliable
Perceived usefulness	0.827	Reliable
Trust	0.824	Reliable

Table 6. Model fit indices output

Fit Index	Saturated Model	Estimated Model
SRMR	0.066	0.079
d_ ULS	1.290	1.855
d_ G	0.335	0.366
Chi-square	817.180	863.614
NFI	0.481	0.469

In addition, a global goodness-of-fit (GoF) index was reported as a descriptive overall model quality indicator by combining the model’s average convergent validity and explanatory power. Based on the AVE values in Table 3 (average AVE = 0.662) and the endogenous R² values in Table 6 (average R² = 0.405), the GoF value obtained was 0.518. This GoF value suggests relatively strong overall model performance; however, it should be interpreted cautiously and treated as supportive rather than definitive evidence of fit.

4.3 Structural model

The assessment of the structural model was done along the framework of the conceptual research model. This criterion was decisive in determining the R² and path coefficients. The evaluation of the structural model was based on the relevance and compatibility of the research variables in the model. Figure 4 shows the variables used in this research.

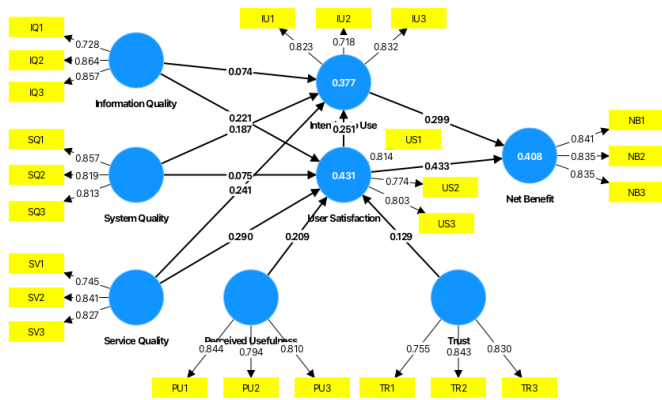


Figure 4. PLS path model (Initial structural model configuration)

4.3.1 R-Square coefficient

Within the context of SEM, the coefficient of determination (R²) reflects the proportion of variance in the dependent variable that can be accounted for by the independent variables in the model. A higher R² value indicates stronger explanatory power, meaning that a larger share of the variation in the endogenous construct is captured by the proposed model.

As a general guideline, R² values of 0.67 are considered substantial, 0.33 indicate moderate explanatory capability, and 0.19 suggest weak explanatory power. These benchmarks serve as useful references for evaluating the overall robustness and predictive relevance of the structural model [44].

Table 7. R-squared value

Variable	R Square	R Square Adjusted
Intention to use	0.377	0.367
User satisfaction	0.431	0.421
Net benefit	0.408	0.404

The R² values presented in Table 7 indicate the explanatory power of the structural model for each endogenous construct. The R² value for User Satisfaction (0.431) suggests a moderate level of explanatory power, meaning that 43.1% of the variance in User Satisfaction is explained by its predictor variables. Similarly, the R² value for Net Benefits (0.408) indicates that the model explains 40.8% of its variance, which can also be considered moderate.

4.3.2 Path coefficient

The subsequent section provides an explanation of the measurements of the inner model derived from the analysis results, as shown in Figure 5.

Table 8 present the results of the t-statistic test, indicating that 9 out of the 11 proposed hypotheses were accepted. The acceptance was based on the criterion that the t-statistic value exceeded the critical threshold of 1.96, signifying statistical significance at the 5% level. Conversely, 2 hypotheses were rejected, as their corresponding t-statistic values fell below

1.96, suggesting that the relationships proposed in those hypotheses were not supported by the data. Table 8 shows the t-statistic results, where 9 of 11 hypotheses were accepted ($t > 1.96, p < 0.05$), while 2 were rejected ($t < 1.96$).

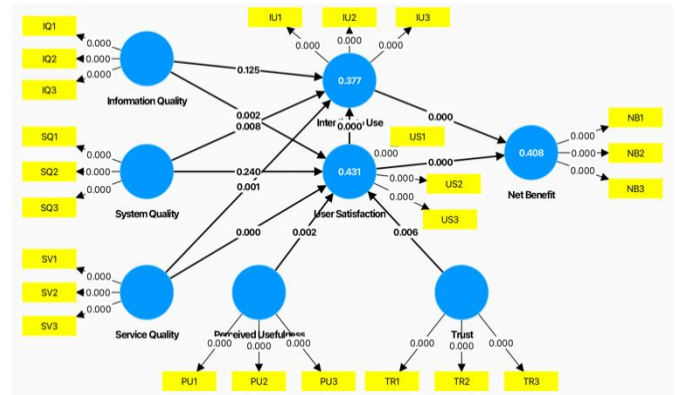


Figure 5. PLS Structural model assessment results (Bootstrapping t-statistics and supported paths)

Table 8. Path coefficient

Hypothesis	T Statistics ((O/STDEV))	P Value	Result
H1 IQ -> IU	1.534	0.125	Not Supported
H2 IQ -> US	3.101	0.002	Supported
H3 SQ -> IU	2.636	0.008	Supported
H4 SQ -> US	1.176	0.240	Not Supported
H5 SV -> IU	3.369	0.001	Supported
H6 SV -> US	3.787	0.000	Supported
H7 TR -> US	2.777	0.006	Supported
H8 PU -> US	3.176	0.002	Supported
H9 US -> IU	4.153	0.000	Supported
H10 IU -> NB	5.353	0.000	Supported
H11 US -> NB	6.479	0.000	Supported

- H1 (Information Quality to Intention to Use): Information quality does not significantly influence intention to use, consistent with prior e-learning studies, though conflicting with findings in e-tourism contexts.
- H2 (Information Quality to User Satisfaction): Information quality has a significant positive effect on user satisfaction; accurate and relevant information enhances user confidence and system experience.
- H3 (System Quality to Intention to Use): System quality significantly affects intention to use; reliable, accessible, and well-functioning systems encourage continued usage.
- H4 (System Quality to User Satisfaction): System quality does not significantly impact user satisfaction, aligning with several prior studies but differing from findings in accounting systems.
- H5 (Service Quality to Intention to Use): Service quality significantly influences intention to use; responsive and supportive services increase user willingness to adopt the system.
- H6 (Service Quality to User Satisfaction): Service quality has a significant positive effect on user satisfaction; better responsiveness and assurance improve user experience.

7. H7 (Trust to User Satisfaction):

Trust significantly enhances user satisfaction; higher perceived reliability and provider commitment lead to greater satisfaction.

8. H8 (Perceived Usefulness to User Satisfaction):

Perceived usefulness significantly affects satisfaction; systems that improve performance and task completion increase user approval.

9. H9 (User Satisfaction to Intention to Use):

User satisfaction significantly drives intention to use; satisfied users are more likely to continue using the system.

10. H10 (Intention to Use to Net Benefits):

Intention to use significantly contributes to net benefits; higher usage leads to greater organizational value.

11. H11 (User Satisfaction to Net Benefits):

User satisfaction significantly affects net benefits; satisfied users increase system utilization and overall benefits.

5. DISCUSSION

The findings of the current research will give detailed data on critical variables that shape an effective adoption of the Core Insurance System [45-58]. This research gives useful guidelines to organizations to improve their organization implementation efforts, user-centered design, and continuous betterment to improve organizational performance during the digital era.

Such identification has as its cause the fact that the Information Quality (H2) positively and significantly selects the User-Satisfaction variable, thus determining the impact of the information generated by the Core Insurance System on the user experience. Compactness of information quality, accuracy, reliability and relevance is front-and-center in the productivity and user-friendliness to an industry that so depends on such information systems as insurance. The Core Insurance System can sustain user satisfaction by ensuring that information is accurate, current, and relevant across modules. When bugs or system errors occur, corrective actions should be implemented promptly. Regular data audits and validation routines are also necessary to maintain data integrity and support reliable decision-making. The level of quality is significant in relation to Intention to Use (H3), meaning that the better the Core Insurance System functions and is user-friendly, the more likely the user is to proceed with using the system. A user-friendly and stable system increases the confidence and comfort of the user in carrying out every day operational tasks. As such, the system development team should make a concerted effort to ensure that the system is stable by conducting regular maintenance to minimize technical interruptions, the system presents an intuitive and responsive user interface that eases its use, especially to users with no technical background, continuously enhance system features with reference to internal user requirements, and give proper documentation of the system to enable users resolve operational challenges by themselves.

Regarding the Service Quality, there is a significant positive impact on two of the variables: Intention to Use (H5) and User Satisfaction (H6), pointing to a meaningful role of the support services offered by the Core Insurance System development team. The sense of security and reliable service is based on the responsive, professional approach and instills a feeling of trust in the users, which further improves the usage of the system and improves satisfaction. Users are more confident in

completing operational tasks when support is timely and effective. Responsive assistance reduces disruptions and strengthens both satisfaction and continued intention to use. Consequently, organizations should get their development team to work on faster and more accurate response towards user complaints or request to avoid interference to the daily activities, maintain an open and proactive liaison between technical personnel and user, so that they can understand their expectations and accommodate their feedback into possible program improvements, increase technical and people skills of support personals through routine training to provide efficient and user friendly service and they should also have readily accessible support mechanisms like helpdesks, complaint portal or Chabot's that can assist at their behest.

Another variable that has a strong effect on the User Satisfaction User Satisfaction (H7) is trust, meaning that the Trust in the Core Insurance System is a critical determinant of user satisfaction. This trust develops over time through consistent system performance, prompt issue resolution, and stable service delivery that supports day-to-day business operations. This trust cannot be formed immediately but is built over time via regular delivery of services by the involved professionals, promptness, and stability of the system in promoting business undertakings of the company. To build and preserve user confidence, management team should develop reputation of responsiveness and solution orientation technical support where issues are handled professionally and promptly, maintain system stability in terms of performance such that no technical issue occurs repeatedly as a stable and reliable system is key contributor to long term trust, ability to convey a sense of user needs through constant system modification based on user feedbacks and to ensure data safety and restricted system access through strong information security measures like multilayered authentication and role based access.

Moreover, the Perceived Usefulness is found to also have an impact in significantly influencing the User Satisfaction (H8), meaning that how useful the system is perceived by the user is critical to user satisfaction with the Core Insurance System. Users will be more likely to experience and maintain a positive integration experience when they believe that the system is helping them work more efficiently, it is productive, and enhances quality. System development team should incorporate features that reflect user operational needs, involve users in the development or enhancements process by holding forums or discussion to ensure features address business need, conduct training or user guides to help users maximize the system functionalities in everyday operations and assess the features and utility of the system regularly to ensure the system can meet the dynamic business needs and keep abreast with changes in the technology sphere.

The results point in the direction of User Satisfaction playing a significant factor in Intention to Use (H9) and Net Benefit (H11), thus showing that user satisfaction holds importance in the continued usage of the Core Insurance System and the perceivably generated benefits by it. When users are delighted with the system because it is user-friendly, reliable, and with effective service, chances are high that users stick with the system and experience an increase in efficiency and work productivity. To continue with high user satisfaction rates, the organization will have to undertake several strategic initiatives namely periodic user satisfaction surveys to understand the evolving needs and to gauge user experiences, improve system interface to be simple and intuitive to enable

easy access by users with varying levels of technical expertise, maintain system reliability, velocity and stability to enable consistent operations, implement technical support that is responsive and solution oriented that can quickly redress user problems, and involve the users actively on system reviews and development processes, through forums sessions to encourage incorporation of the user feedback to the ongoing developments.

Finally, the study establishes that there is a significant relationship between Intention to Use and Net Benefit (H10), implying that the stronger the users' intention to continue using the Core Insurance System, the higher the perceived benefits at both individual and organizational levels. The effective and efficient use of the system contributes to improved work performance and facilitates data-driven decision-making. To sustain user intention, organizations should adopt several strategic measures, including maintaining high system quality through regular maintenance, timely bug fixes, and performance enhancements to ensure system stability and usability; developing features aligned with user needs, particularly in core processes such as policy management, claims handling, premium management, and reporting; improving the quality of technical support services through responsive helpdesk teams; and continuously monitoring and evaluating system usage to identify usage patterns, potential barriers, and opportunities for further improvement, thereby fostering sustained user engagement and long-term commitment to the system.

6. CONCLUSION

The inclusion of the two variables, Trust and Perceived Usefulness, along with the appraisal of the Core Insurance System implementation with reference to the implementation of the DeLone and McLean IS Success Model, has two principal implications. The participants in the study included a sample of 270 internal staff members who were active users of the Core Insurance System. Pilot data consisting of 11 hypotheses and 8 variables, which included Information Quality, System Quality, Service Quality, Use, User Satisfaction, Net Benefit, Trust, and Perceived Usefulness's, were analyzed using a PLS-SEM.

The hypothesis results show that most hypotheses are supported. Information quality, service quality, trust, and perceived usefulness positively influence user satisfaction, as users feel more satisfied when the system provides accurate information, responsive services, and reliable performance. In addition, system quality, service quality, and satisfaction significantly increase users' intention to continue using the system, especially when it is stable and easy to use. Finally, both user satisfaction and usage intention contribute positively to net benefits, including improved work efficiency, better business processes, and stronger achievement of organizational goals.

On the other hand, the results also identify two hypotheses that were rejected, as detailed below:

1. Information Quality does not have a significant influence on Intention to Use.
2. System Quality does not have a significant influence on User Satisfaction.

Despite these findings, this study has several limitations that open avenues for future research. Future studies may examine system personalization features (e.g., role-based dashboards or

adaptive interfaces) and their impact on user satisfaction and continued usage intention. In addition, the role of data governance and automated validation mechanisms can be further explored as key antecedents of information quality and trust.

Further research may also apply multi-group analysis across departments, job levels, or user experience to identify potential differences in system perception and usage behavior. Moreover, incorporating objective operational performance metrics, such as processing time, rework rate, and ticket resolution time, would provide a more comprehensive assessment of net benefits.

AUTHOR CONTRIBUTIONS

Icha Nafisatul Khumairoh: Conceptualization, Study Design, Methodology, Literature Review, Case Study Investigation, Data Collection, and Writing-Original Draft.
Nilo Legowo: Supervision, Methodological Guidance, Validation of Findings, Writing-Review & Editing, Project Oversight, and Final Approval of the Manuscript.

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