

ARTIFICIAL INTELLIGENCE (AI)

in Health Care Patient and Physician Perspectives

Executive Summary

United States of Care (USofCare), an organization focused on understanding and centering people's needs within the health care system, recognizes that the voices of everyday individuals are often missing from critical conversations about the integration of artificial intelligence (AI) in health care. To address this gap, USofCare partnered with athenahealth to examine both patient and physician perspectives on Al's expanding role in care settings. athenahealth is a U.S.based healthcare technology company that provides cloudbased services and software solutions for medical practices and healthcare organizations. This report incorporates information and analysis from both athenahealth's annual Physician Sentiment Survey as well as a USofCare national poll of health care consumers.

This collaborative research highlights the potential of AI to transform health care delivery while identifying key concerns that must be addressed to ensure responsible and equitable implementation. The findings reveal a complex landscape where patients exhibit cautious optimism, and physicians, while increasingly familiar with AI, express reservations about its impact on clinical decision-making and patient relationships.

KEY FINDINGS

Mixed Patient Sentiment

Patients show a mix of optimism (26%), uncertainty (27%), and concern (26%) regarding AI in health care. While awareness of AI use is growing among adults in general, particularly for tasks like managing medical records (49% of adults) and image analysis (44% of adults), comfort levels vary depending on the specific application.

Physician Familiarity and Increasing Use

A majority of physicians (61%) are familiar with Al applications, and its use is increasing, especially for clinical documentation (up 68% year over year from 2024 to 2025). Physicians are generally more comfortable with Al for administrative tasks and patient education but are less so with its use in clinical decision-making and direct patient interaction.

Potential Benefits and Perceived Risks

Both patients and physicians acknowledge Al's potential to improve efficiency. Physicians cite benefits such as enhanced pattern identification (48%), improved documentation (48%), and reduced administrative burden (46%). However, significant concerns exist regarding the potential loss of human interaction (61%), overreliance on AI for diagnosis (58%), and the risk of improper diagnosis (52%).

Concerns About Bias

Concerns about AI bias are prominent, particularly among marginalized communities. For example, Black patients are more likely to anticipate increased bias from AI tools (25% overall). Addressing bias and promoting fairness is seen as crucial for building trust.

Demand for Transparency and Oversight

A large majority of patients (77%) believe they should be informed when Al is used in their care. There is also a strong call for stronger Al oversight, with 43% of patients believing AI in health care is not well-regulated and 63% advocating for increased oversight.



of patients believe they should be informed when AI is used in their care.

CONCLUSION AND RECOMMENDATIONS:

This report underscores that while Al holds substantial promise for advancing health care, its successful and ethical integration hinges on addressing the concerns and expectations of both patients and physicians. To foster confidence and ensure equitable outcomes, health care leaders should:

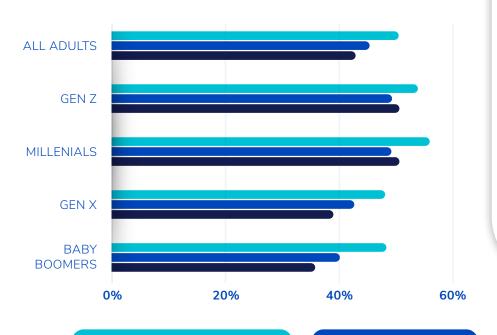
- Prioritize transparency by ensuring patients are informed about when and how AI is used in their care.
- Actively work to mitigate bias through the development and implementation of Al systems that utilize diverse
 and representative datasets.
- Establish clear lines of accountability for Al-driven decisions to address concerns about potential harm.
- Enhance education for both patients and providers regarding Al's capabilities and limitations.
- Implement robust regulatory frameworks to safeguard patient safety and promote trust.

By proactively addressing these issues, actors in the health care system can leverage the transformative power of AI to improve care delivery and patient outcomes in a manner that is both effective and just.

OVERVIEW

Artificial intelligence is rapidly transforming health care by offering new opportunities to improve efficiency, personalization, and care delivery. As Al adoption grows, understanding the patient perspective becomes critical to ensure responsible implementation. The following report unpacks survey findings conducted by USofCare and athenahealth to assess how both patients and physicians view Al's role in health care. The findings focus primarily on the similarities and differences among themes of familiarity with Al in health care, perceived benefits and risks, ethical considerations, regulatory expectations, equity, and trust.

PATIENT AWARENESS OF AI IN HEALTH CARE



Patient Sentiment is Mixed: **Optimism Meets Uncertainty**

Nearly equal proportions of respondents in the USofCare survey identified as optimistic (26%), uncertain (27%), or concerned (26%), with a smaller share expressing comfort (17%) or excitement (15%). These findings suggest cautious patients, influenced by limited exposure to Al and mixed messages in the media.

Awareness of Al Use Is Rising, **But Comfort Depends on Context**

Patient awareness of the use of AI in health care is relatively widespread. USofCare findings show that many patients are aware of AI managing medical records (49%). Awareness is highest among younger adults, especially Millennials (54%) and Gen Z (51%). Additionally, patients are aware of AI use in CT scans and x-rays (44%), as well as its use in determining prior authorizations (43%).

Managing Medical Records

CTs and X-Rays

Prior Authorizations

In the athenahealth survey, a majority of physicians (61%) reported some familiarity with Al applications in the health care space. Physician use of AI surged in 2025, as many clinicians seek ways to automate the work of clinical documentation and administrative tasks. Over two-thirds (68%) noted increased use of Al for clinical documentation, and a substantial share cited growth in clinical (46%) and non-clinical (36%) applications. The rising use of Al in health care, particularly for ambient documentation and administrative support, presents opportunities for improved efficiency, accuracy, and patient care.

Approximately half of patients are comfortable with Al performing simple or administrative tasks, such as recording conversations and taking notes (49%), analyzing medical data and history (49%), communicating test results (47%), and reviewing medical images or scans (47%). However, patients are generally uncomfortable with Al performing more complex or subjective medical tasks, such as determining a treatment plan (41%), determining a diagnosis (37%), or performing surgery (33%).

When it comes to comfort levels among physicians, we see a dichotomy emerge. Physicians are most comfortable with Al applications that reduce administrative work, such as clinical documentation. However, they are less comfortable with Al that affects clinical decisions or their one-on-one relationships with patients. Physicians recognize the potential of Al to enhance efficiency, improve patient outcomes, and reduce administrative burdens; they are most comfortable using AI for patient education resources (84%), non-clinical administrative support (72%), and clinical documentation (64%). Physician support of Al is highest for AI in administrative roles and patient education resources (84%), non-clinical administrative support (72%), and clinical documentation (64%).

Growth in Al since 2024 •

68%

of physicians report increase in AI for clinical documentation Refers to the accurate recording and management of patient information

46%

of physicians report increase in Al for clinical use Refers to patient care and clinical decision—making through Al applications

36%

of physicians report increase in AI for administrative use E.g., scheduling, claims processing, RCM

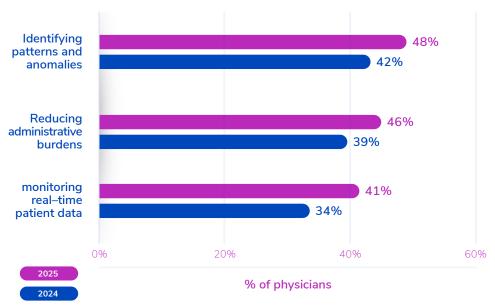
Physician support for AI

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Both patients and physicians expressed concerns about the potential risks of Al in health care. The most frequently cited potential risks and concerns among physicians include the potential loss of human interaction in care (61%), overreliance on Al to diagnose patients (58%), and improper diagnosis (53%). For example, fewer than half (47%) of physicians are comfortable with using Al for treatment planning. These findings highlight the importance of involving physicians in the development and implementation of Al tools to ensure they align with clinical workflows and enhance patient care.

Al Can Improve Efficiency, But Risks Around Accuracy and Oversight Remain

Growth in top three potential benefits of AO from 2024–2025, but these benefits are reported by fewer than 50% of physicians.



Al can be an attractive option for physicians looking to optimize their practice operations and focus more on patient care. It is important to note, however, that these benefits are reported by fewer than 50% of physicians, indicating that there is still work to be done in demonstrating Al's value and ensuring its effective implementation in clinical settings.

A notable portion of physicians (37%) feel that AI is evolving too rapidly without sufficient oversight. Patient confidence in AI grows when risks are explicitly addressed. For example, respondents from the USofCare survey indicated they would feel more assured if efforts were made to resolve issues related to diagnostic accuracy (34%), privacy protections (34%), and reduction in bias (30%). These concerns underscore the need for careful consideration of the ethical, regulatory, and practical implications as AI technology continues to evolve and integrate into health care practice.

Bias Is a Top Concern, *Especially Among Marginalized Communities*

Concerns about AI amplifying bias are especially pronounced among historically marginalized communities. These findings reflect a broader apprehension about the underrepresentation of diverse populations in AI training data and the potential perpetuation of inequities. Confidence improves when equity is prioritized. In the USofCare survey, respondents across racial and ethnic groups reported greater trust in AI when organizations proactively addressed bias and promoted fairness, including 37% of Black adults and 30% of Hispanic adults. These findings emphasize the importance of inclusive practices and representative data in the development and implementation of AI.

% OF PHYSICIANS CONCERNED ABOUT AI IN HEALTHCARE

61%

Concerned about a loss of human touch in healthcare

66% of small practices59% of med/large practices

58%

Concerned about overreliance on it for diagnosis

60% of small practices 56% of med/large practices

53%

Concerned about improper diagnosis

54% of small practices52% of med/large practices

In the USofCare survey, Black adults (33%) were significantly more likely than White adults (21%) to anticipate increased bias from Al tools. Similarly, about a quarter (26%) of physicians in the athenahealth survey report that they are concerned about Al bias negatively impacting health care access.

Patients Want *Transparency and Shared Accountability* for Al Use

Transparency is a central theme in patient attitudes toward Al. A large majority of patients (77%) believe they should be informed when Al tools are used in their care. This expectation reflects a growing demand for patient autonomy and informed consent in the digital age. Accountability is equally important. When asked who should be responsible if Al causes harm, respondents identified hospital systems (46%), health care providers (41%), and Al developers (39%) as key stakeholders. These views suggest the need for clear, shared accountability frameworks to guide ethical Al deployment.

These statistics suggest that physicians may need to enhance communication strategies to ensure patients understand how AI impacts their treatment. A shift towards greater patient autonomy and informed consent may require physicians to adapt their practices to foster greater trust and engagement. Physicians might also collaborate with stakeholders such as hospital systems, health care providers, and AI developers to establish ethical guidelines and protocols, ensuring that AI is deployed responsibly.

Patients and Providers Alike Call for **Stronger AI Oversight**

A significant portion of patients believe that AI in health care is not well regulated (43%) and requires more oversight (63%). This perception is driven by concerns about rapid technological advancement outpacing regulatory structures. In response, multiple states (12) introduced legislation in 2024 to address patient consent, data privacy, and algorithmic fairness. Lawmakers and regulators alike are considering what appropriate AI regulations looks like in healthcare. There are many challenges and interests at play, and the potential for a patchwork of differing state approaches to Al further complicates matters. Physician sentiment supports these actions, with 15% of respondents identifying AI regulation as the top issue for policymakers to address – up 50% from 2024 to 2025. These findings emphasize the urgent need for

comprehensive regulation to address patient concerns about AI in health care. Technological advancements should be accompanied by appropriate oversight to ensure patient safety and trust.

Building Trust in Al throughEquity, Education, and Governance

Findings from the USofCare and athenahealth surveys reveal a patient population that is cautiously optimistic about Al's role in health care. While participants in both surveys acknowledge Al's potential to streamline workflows and improve care, they remain wary of its limitations and unintended consequences. Like a stethoscope, Al's design enhances human performance rather than replaces it, complements the clinician's strengths, and improves patient outcomes. Low-risk uses of AI, such as those that support operational efficiency, rather than clinical decision making, may address the needs of both physicians and their patients. By integrating AI into daily workflows, providers can reclaim time lost to administrative burdens, focus more on one-on-one time with their patients, and strengthen their relationships. Trust hinges on efforts to enhance transparency, reduce bias, and implement effective governance. To support the ethical and equitable use of AI, health care leaders should focus on educating the patient, building accountability into Al systems. and ensuring that datasets reflect the diversity of the populations they serve. Transparent communication and regulatory clarity will be essential in fostering confidence.

As AI becomes more embedded in health care, continued research and policy attention will be critical. Regulators must be cognizant of the speed at which technology is advancing and leverage a framework that is flexible and designed to age and grow with technology by focusing on use cases and outcomes, as opposed to prescriptive, technology-specific limitations. Regulations of AI should enable a range of options for compliance, depending on the size, sophistication, and impact of the organization developing or deploying the AI on the health care industry and patients. Patient perception, technological evolution, and regulatory landscapes must be closely monitored to ensure AI contributes to a more just and effective health care system.

Methodology

The 2025 Physician Sentiment Survey was conducted by The Harris Poll from January 2-15, 2025. The total population for the 2025 survey was a pool of 1,001 physicians, consisting of 750 primary care providers (PCPs) and 251 specialists. In 2025, 6% of the total sample use athenahealth as their primaryElectronic Health Record (EHR). athenahealth's sponsorship of the survey was not revealed.

The 2024 United States of Care National poll on AI was conducted in partnership with Morning Consult between May 30-June 2, 2024 among a sample of 2,517 adults. The interviews were conducted online, and the data were weighted to approximate a target sample of adults based on age, gender, race, educational attainment, region, gender by age, and race by educational attainment. Results from the full survey have a margin of error of plus or minus 2 percentage points.