

# Patient Perspectives on AI for Healthcare 2025

---

Optimism, Caution & the Call for Oversight

October 2025



This report is the result of a nonfinancial collaboration between Luma Health and KLAS, reflecting a shared interest in better understanding patients' beliefs and experiences with AI in healthcare. KLAS independently analyzed the data, created this report, and retains full editorial rights; Luma Health reviewed and provided feedback on KLAS' final analysis. The partnership for this research is not an endorsement of Luma Health's performance and has no impact on their customer feedback, performance results, or standings in KLAS ratings.

# Executive Summary

AI is rapidly reshaping healthcare, and patient trust will be key to its safe and responsible adoption. To understand how patients view AI, KLAS Research and Luma Health surveyed 1,006 patients nationwide in July 2025. **The insights are designed to help healthcare leaders, technology vendors, and policymakers build AI solutions that align with patient expectations and support transparent, responsible use.** The survey results coalesce around four themes, which are each examined in detail in the following slides:

## Key Findings

### 1. Patients are optimistic, but selective, about AI's role in healthcare.

- AI could improve the speed, affordability, and accuracy of care.
- Some respondents, especially older patients, feel AI won't benefit their care.

### 2. Caution toward clinical AI is widespread, especially among older patients.

- Comfort with AI is highest for administrative tasks and lowest for aiding clinical care.
- Across demographics, concerns for clinical AI use center around accuracy and oversight.
- Older patients show more widespread concern with clinical AI use.

### 3. Human oversight and government regulation are viewed as essential.

- Across clinical and operational settings, patients expect human supervision of AI.
- Patients want government AI regulation, but generational differences shape expectations.

### 4. AI is unlikely to drive provider selection.

- The largest share of patients don't consider AI use when choosing a provider.

#### Defining types of use cases

To assess differences in patient perspectives across settings, this report distinguishes between use cases, defined as follows:

**Clinical** use cases include supporting diagnosis through image or pattern recognition, recommending treatment options, or assisting clinicians in making care decisions at the point of care.

**Operational** use cases include appointment scheduling, ambient listening and scribing during clinical visits, or processing faxes.

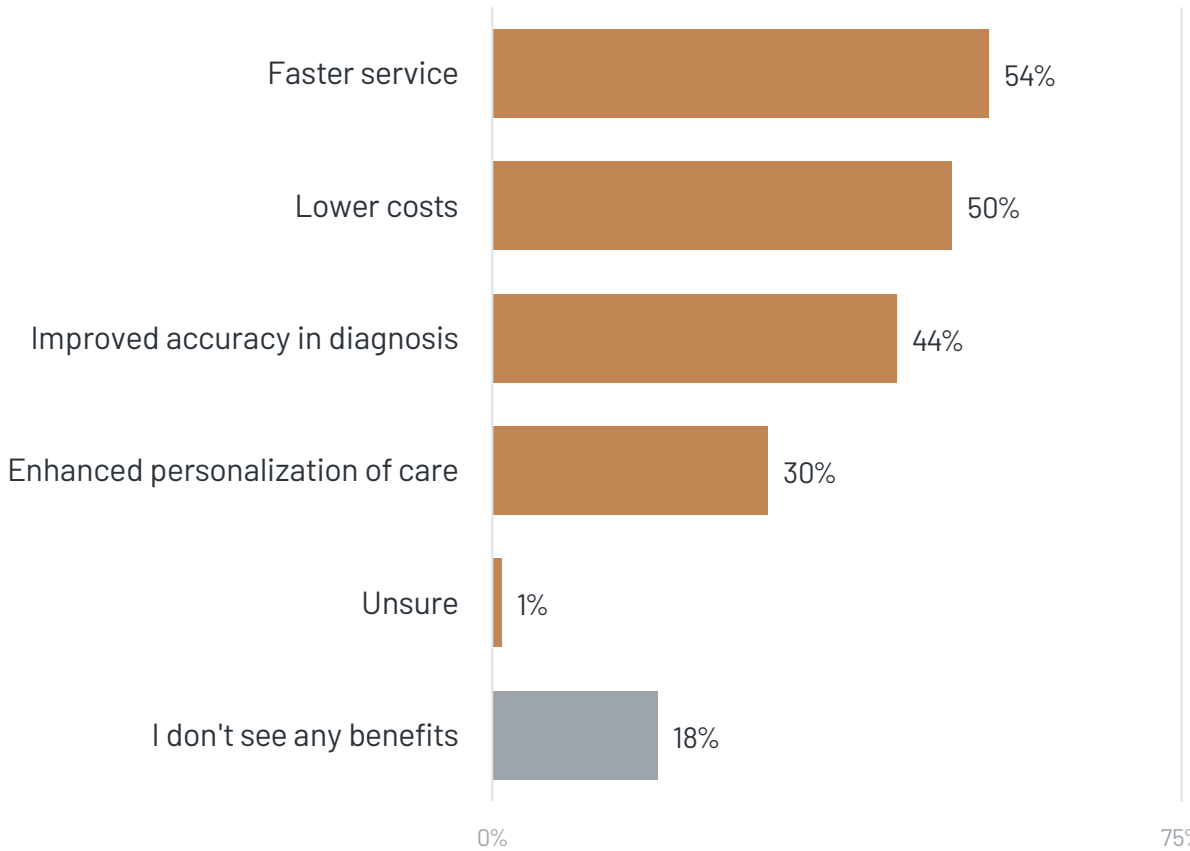


**Patients are optimistic, but selective, about AI's role in healthcare.**

# Just over half of respondents say AI will improve care quality, mainly by enhancing speed, affordability, and accuracy.

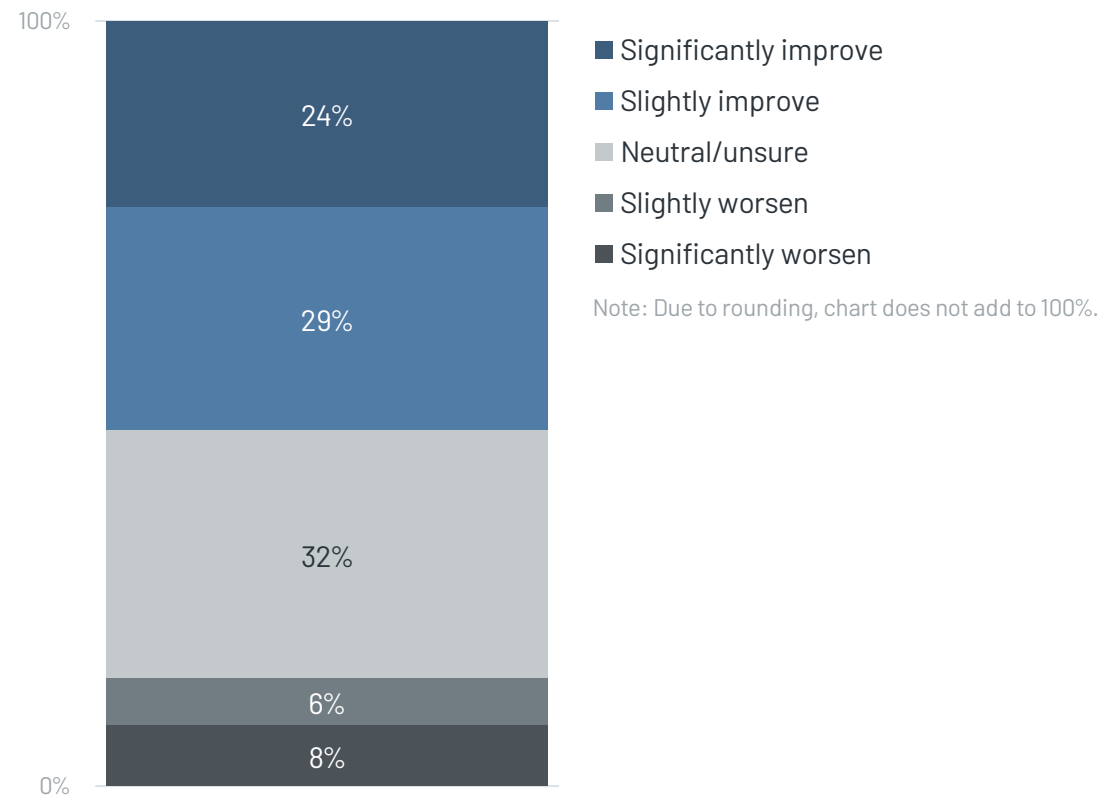
## What potential benefits of AI in healthcare are most important to you?

Respondents could select multiple choices (n=985)



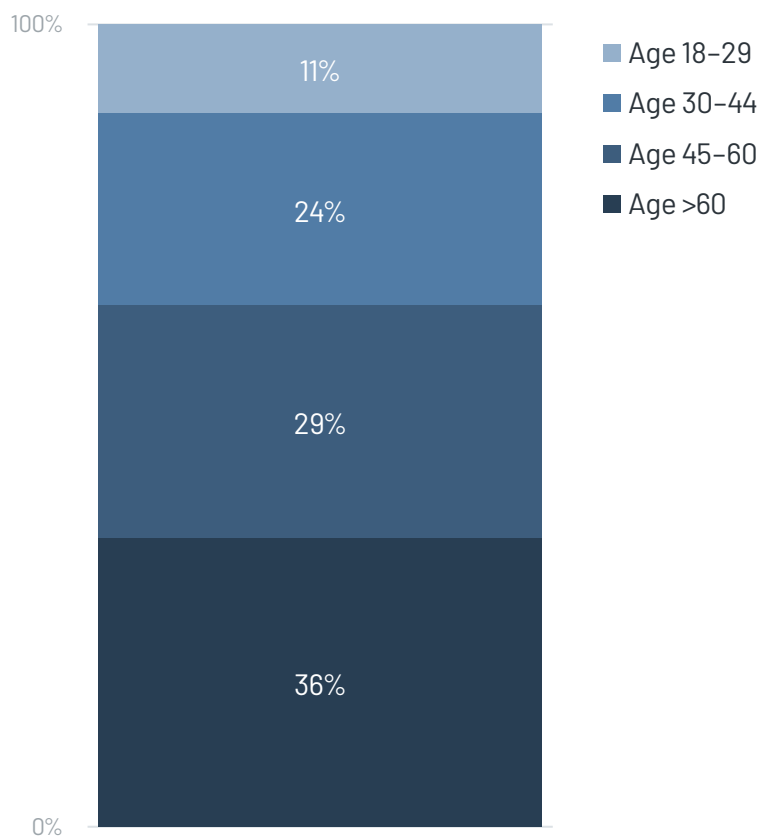
## How do you think AI will impact your overall quality of care in the next five years?

(n=981)



# Some respondents, especially older patients, feel AI won't benefit their care.

Age distribution of respondents reporting no perceived benefits from AI  
(n=175)



- **Belief in AI's benefits declines significantly in older populations;** patients over 45 are nearly twice as likely to see no benefit at all.
- This highlights the need for **targeted education and transparency for older demographics.**

*"I would expect to have a human confirm everything, so I don't see any benefits."*

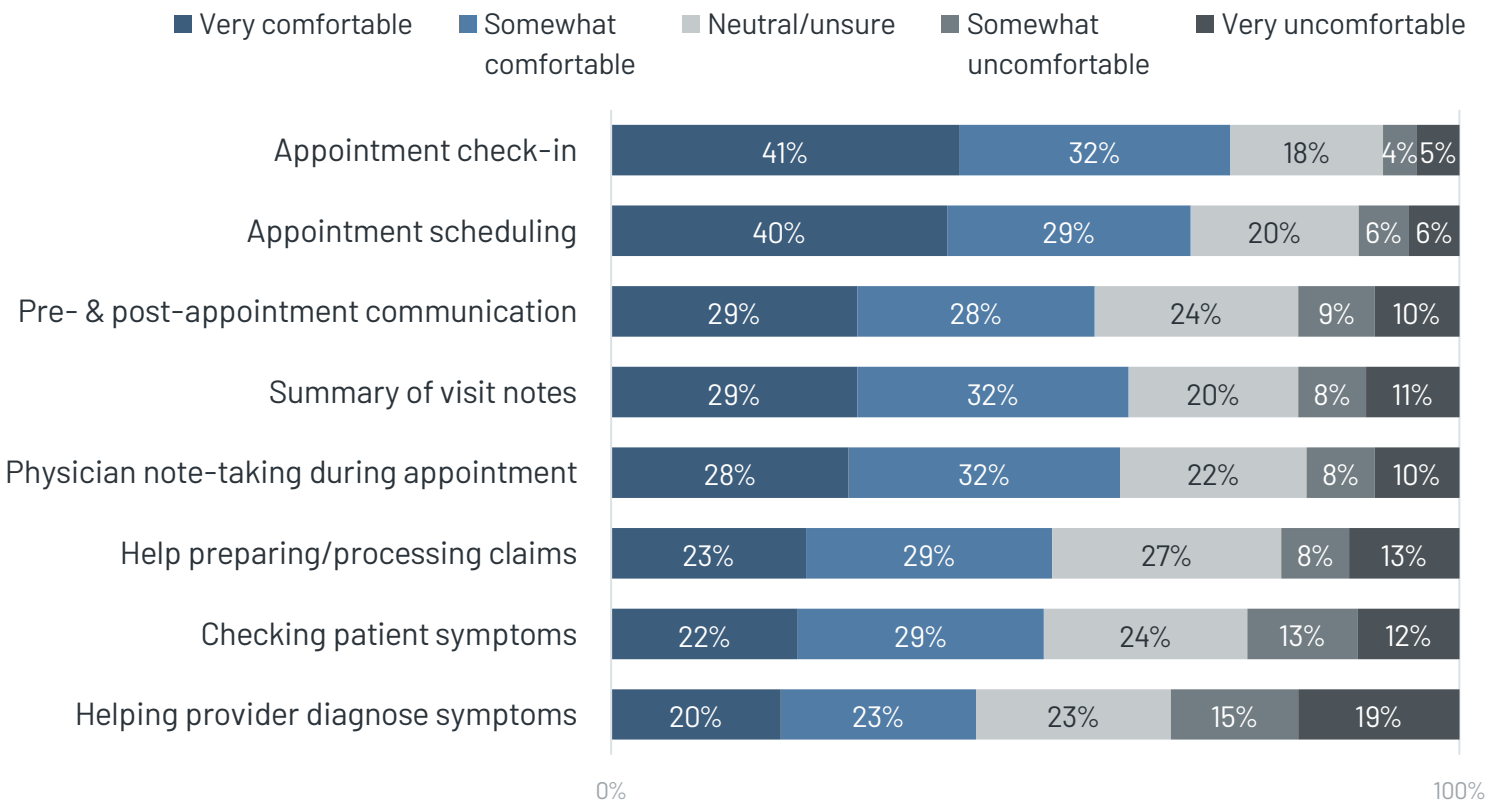


**Caution toward clinical AI is widespread, especially among older patients.**

# Patients are most comfortable with AI when used to increase ease and efficiency of appointments; distrust in AI is highest in clinical decision-making.

How comfortable would you be if AI were used to assist with the following use cases?

(n=990)



Note: Due to rounding, percentages may not add to 100%.

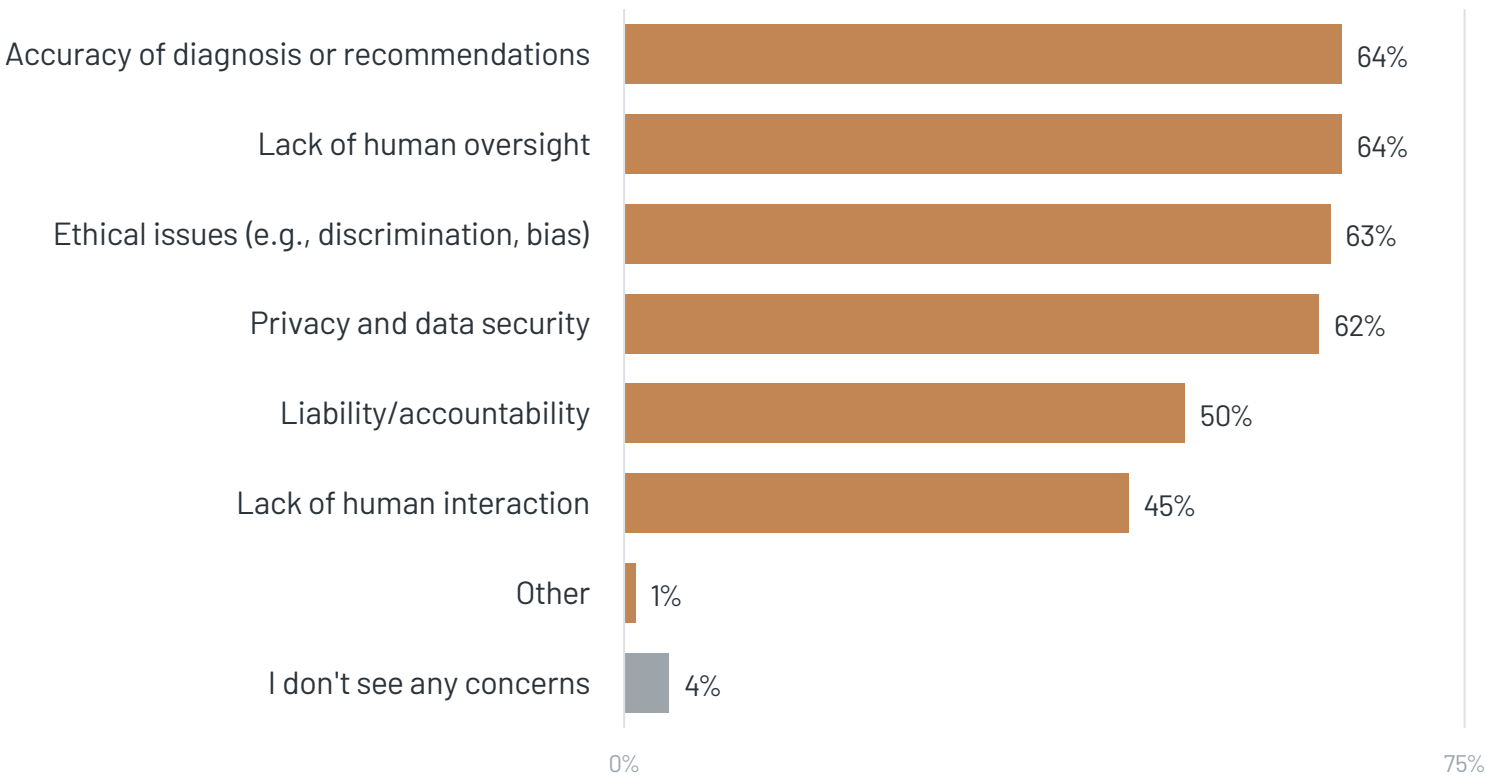
- Comfort levels drop for AI involvement closer to clinical care—**diagnostic and treatment-related AI use generates noticeable caution** across demographics. Discomfort with AI is also higher when used to help with insurance claims.
- This data highlights a clear boundary between administrative efficiency and trusted clinical judgment.
- **Patients prefer human involvement in complex, personal healthcare choices.**



# Across demographics, concerns for clinical AI use center around accuracy and oversight.

## What concerns, if any, do you have about AI being used in your clinical healthcare?

Respondents could select multiple choices (n=985)



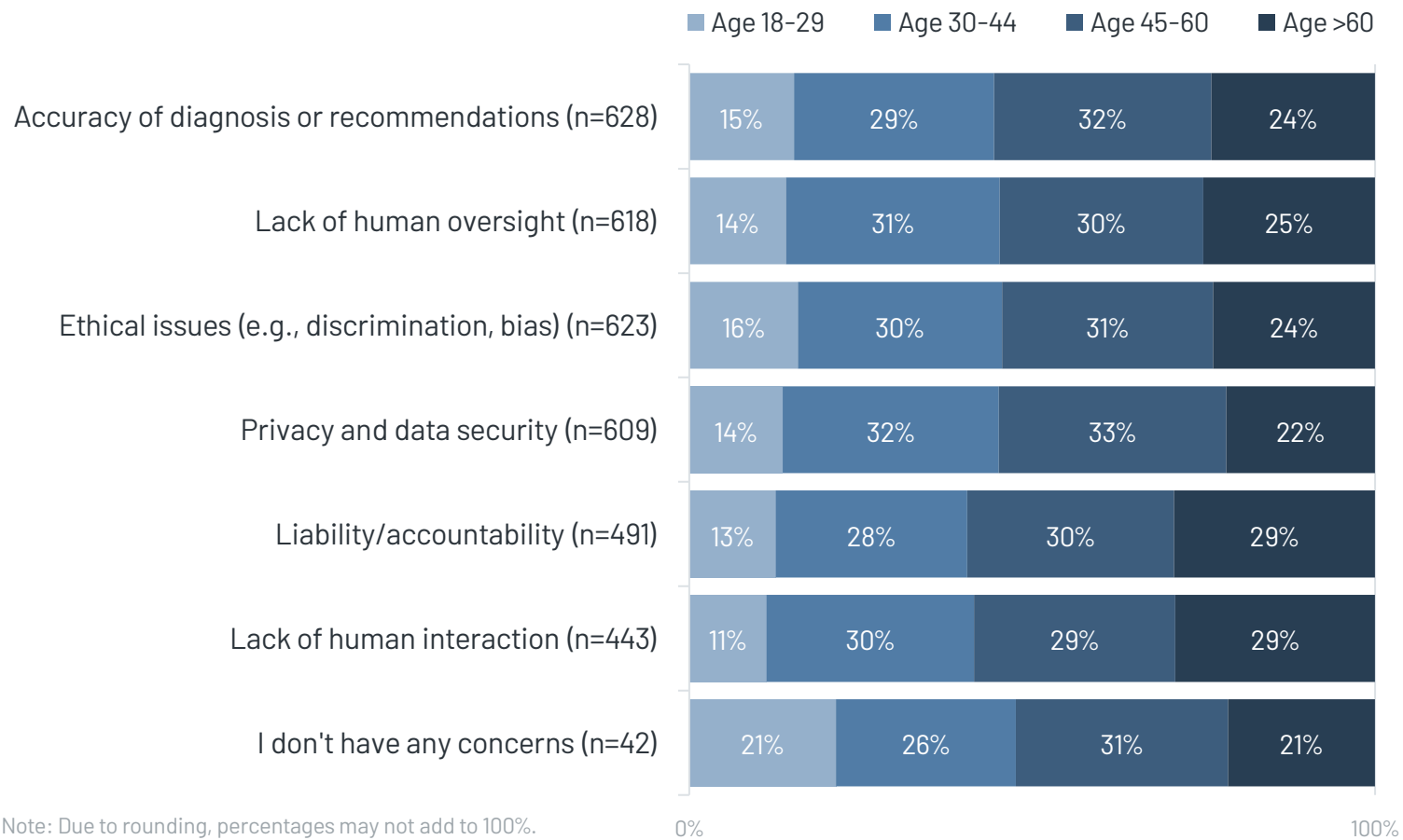
- Patients note many concerns about AI use. Across all age groups, **diagnosis accuracy, lack of proper oversight, bias, and privacy are top concerns** about AI use in clinical care.
- Results suggest a need for better communication on how AI complements—not replaces—physicians.
- **Clear messaging around safeguards and accountability is essential.**

*"My concerns [about AI] are surrounding environmental costs, infrastructure costs, consent issues, inaccurate and inappropriate treatment, erosion of clinical judgement and compassion, job displacement, and lack of transparency."*

Note: "Other" includes concerns regarding employment, environmental impact, and infrastructure costs.

# Older patients show more widespread concern with clinical AI use, often due to more complex conditions and desire for personal connection.

What concerns, if any, do you have about AI being used in your clinical healthcare?—by age breakout



- Younger patients emphasize specific functional concerns (e.g., data security), while older patients express broader skepticism and discomfort.
- Older adults often manage more complex and chronic conditions, making them more sensitive to the risks of diagnostic errors.
- **Personal connection with providers is especially important for older adults**, many of whom value relational care. They may fear AI will depersonalize interactions or reduce face-to-face time with clinicians.

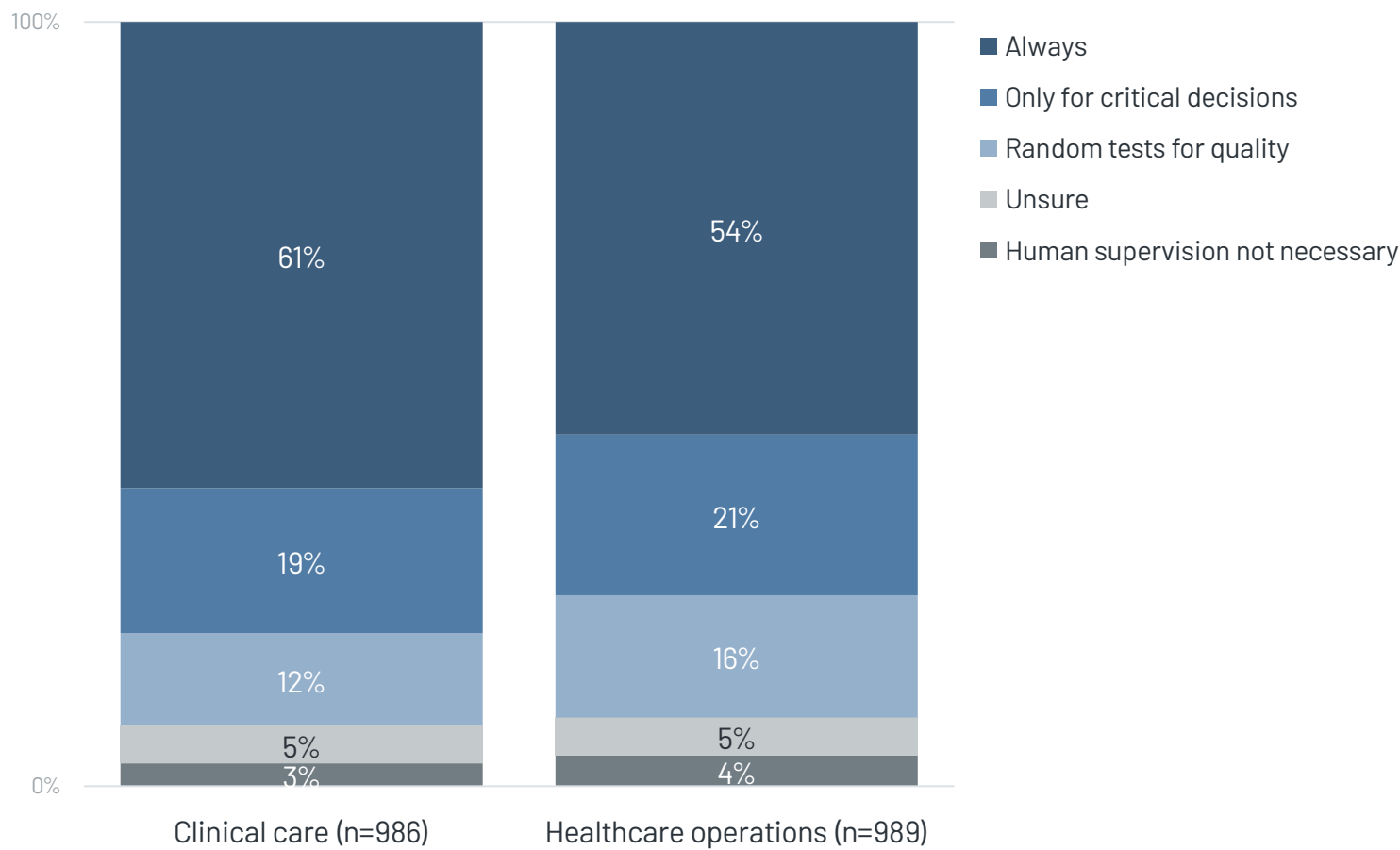
*"I don't want a machine diagnosing me. There needs to be a human who understands my whole situation."*



**Human oversight and government regulation are seen as essential.**

# Across clinical and operational settings, patients expect human supervision of AI.

## When should a human be required to supervise AI in clinical care and healthcare operations?



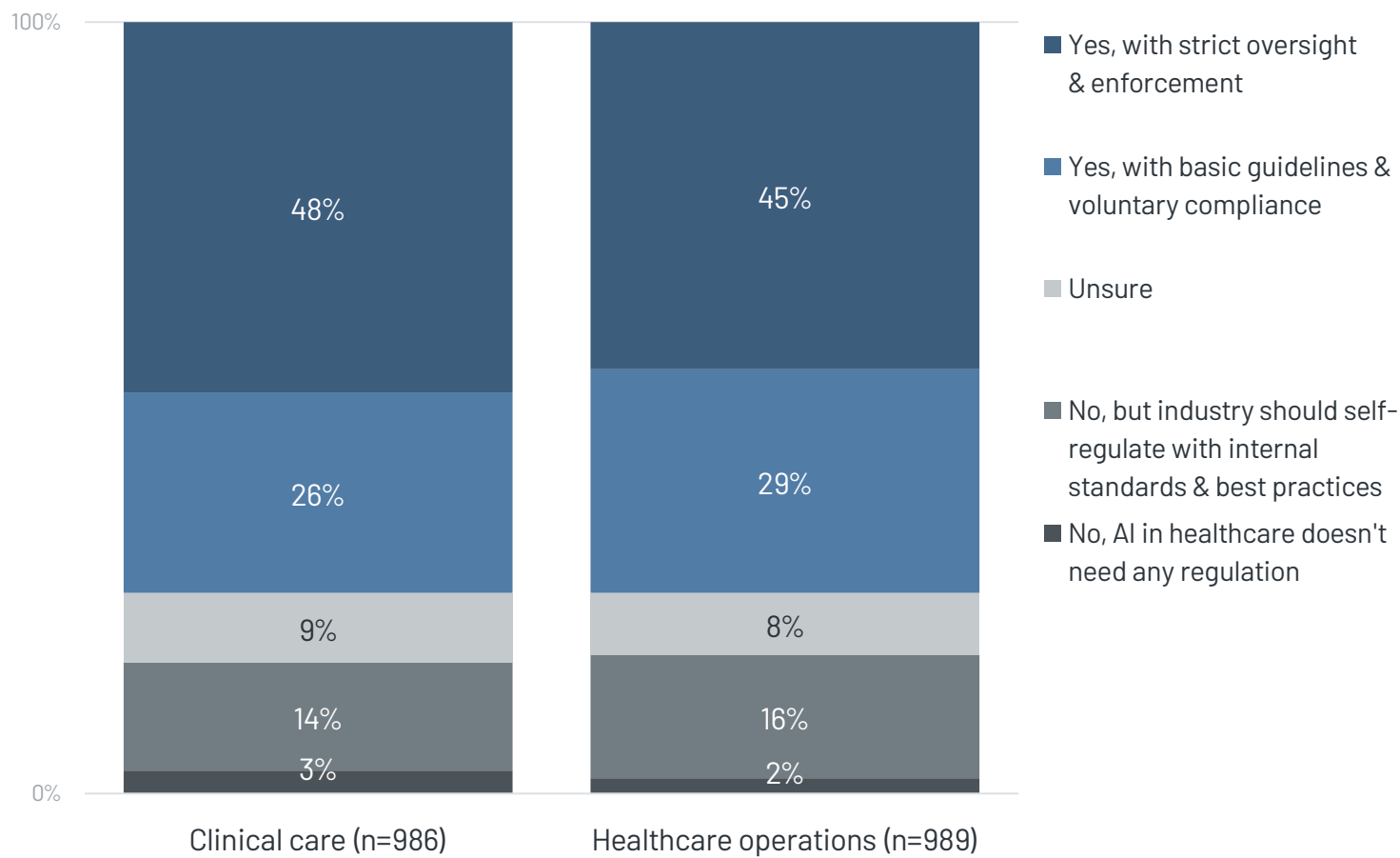
- Most patients want humans to always supervise AI in healthcare.
- Older respondents show the strongest support for continuous oversight.
- **The data reflects the common desire for AI to be a tool—not a decision-maker.**

(See Appendix for more detailed breakouts by age.)

*"I like the idea of AI making things faster, like appointments or billing. Just don't let it make medical decisions without a real doctor involved."*

# Patients want government AI regulation, but generational differences shape expectations.

## Should AI in healthcare operations vs. healthcare clinical care be regulated by the government?



- Most patients support government regulation of AI in healthcare, though **a generational divide exists in the level of trust for government involvement.**
- Younger and middle-aged patients are more likely to endorse strong regulation.
- Despite expressing the most concerns toward AI use in healthcare, older patients are less supportive of government involvement.

(See Appendix for further age breakouts.)

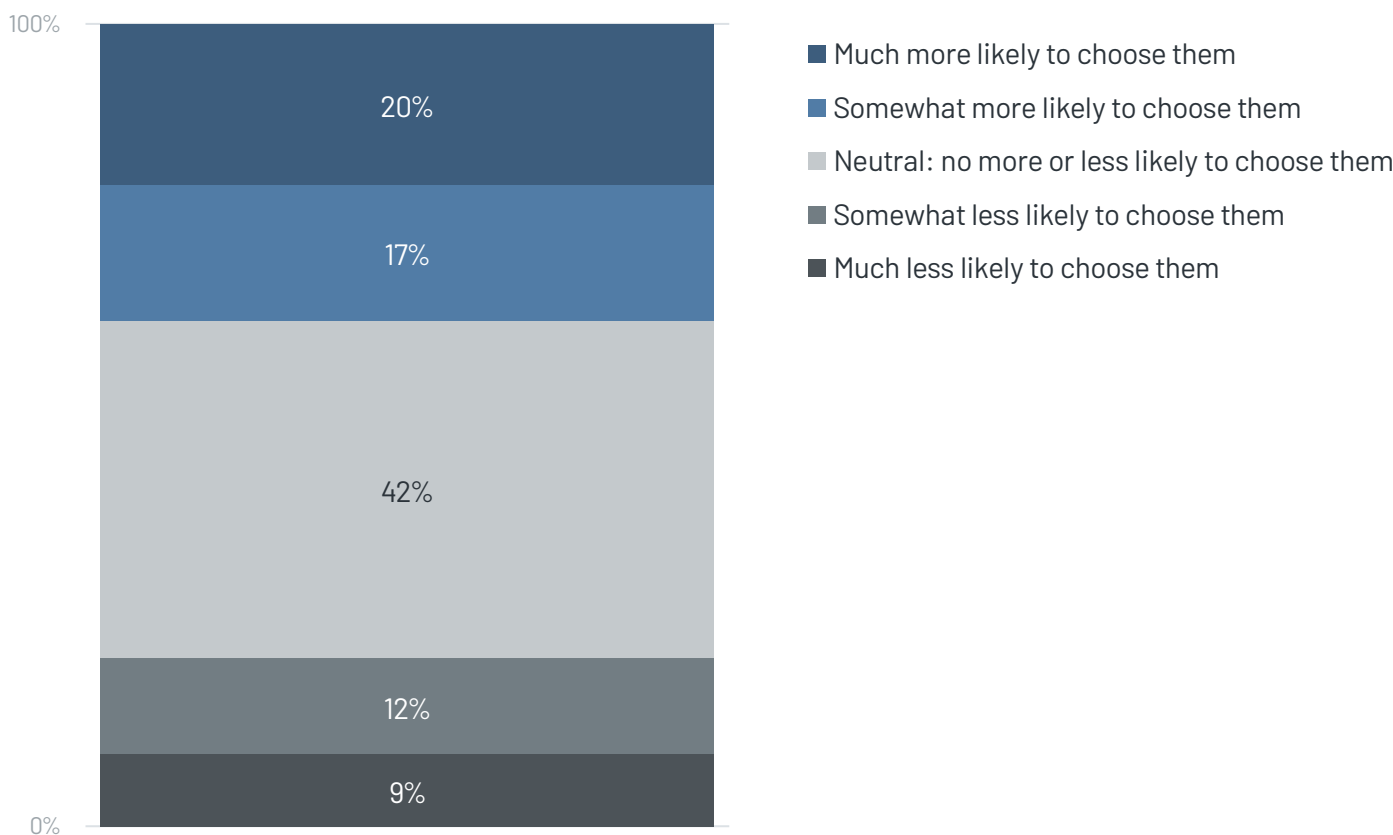


**AI is unlikely to drive provider selection.**

# The largest share of patients don't consider AI use when choosing a provider.

How would a healthcare provider using AI affect your likelihood of choosing them?

(n=974)



*"I'm not picking a doctor because they use AI. I just want someone I trust."*



## **Key takeaways: Patients are balancing promise with caution.**

- Patients welcome AI in administrative tasks but show skepticism in clinical decisions.
- Strong demand exists for human oversight and government regulation.
- AI alone won't drive provider trust; trust and transparency are central to loyalty.





## Going forward, organizations need to build patient trust to ensure AI success.

- The use of AI for healthcare is not just a technology shift—it is a **trust shift**. Patients welcome innovation and efficiency, but they worry about safety, privacy, and the loss of human judgment and compassion in care.
- For healthcare organizations, success will depend on **pairing innovation with integrity**. Going forward, clear oversight, transparency, accountability, and thoughtful implementation will be key to earning patient confidence and ensuring that AI strengthens—rather than undermines—the human side of care.

# Report Information

To gather patient perspectives on AI in healthcare, KLAS partnered with Luma Health to survey 1,006 adult patients across the US. KLAS independently analyzed the data, created this report, and retains full editorial rights; Luma Health reviewed and provided feedback on KLAS' final analysis.

This nonfinancial collaboration reflects a shared interest between Luma Health and KLAS in better understanding patients' belief and experiences with AI in healthcare. The partnership for this research is not an endorsement of Luma Health's performance and has no impact on their customer feedback, performance results, or standings in KLAS ratings.

Please see the [KLAS DATA USE POLICY](#) for information regarding use of this report.  
© 2025 KLAS Enterprises, LLC. All Rights Reserved.



## Our Mission

Improving the world's healthcare through collaboration, insights, and transparency.

365 S. Garden Grove Lane, Suite 300  
Pleasant Grove, UT 84062

Ph: (800) 920-4109

For more information about KLAS, please visit our website: [engage.KLASresearch.com](https://engage.KLASresearch.com)



## CO-AUTHOR

**Adam Cherrington**

[adam.cherrington@KLASresearch.com](mailto:adam.cherrington@KLASresearch.com)



## CO-AUTHOR

**Spencer Snyder**

[spencer.snyder@KLASresearch.com](mailto:spencer.snyder@KLASresearch.com)

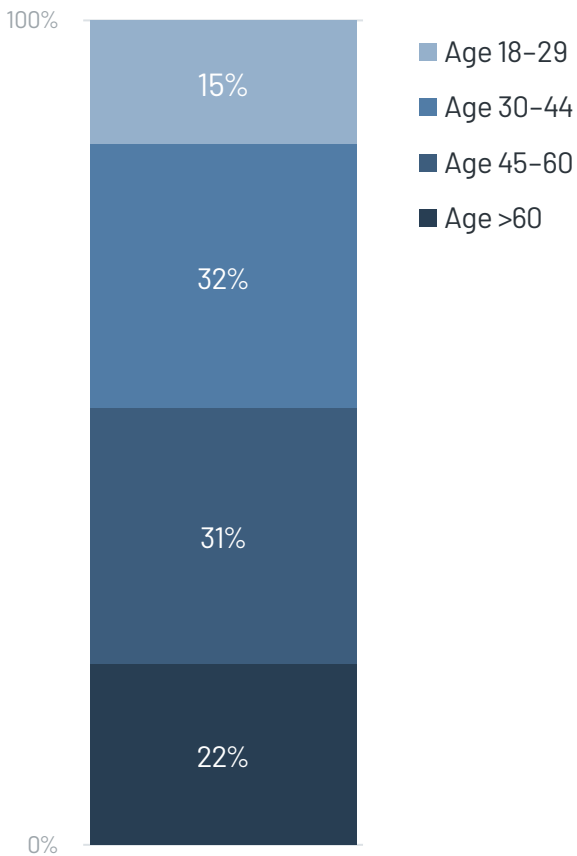
# Appendix

---

# Respondent demographics

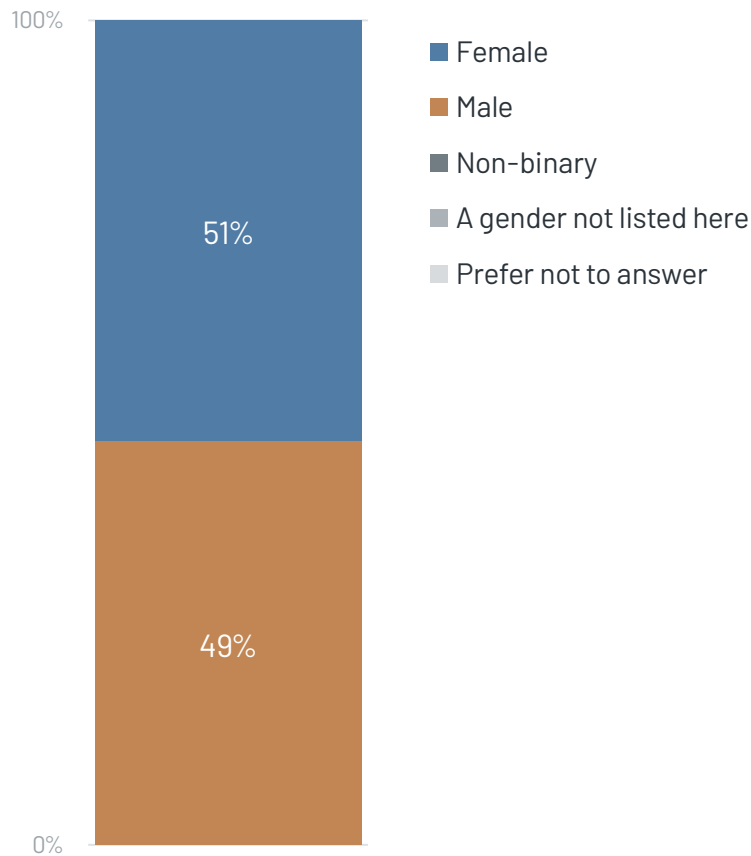
## Respondent age

(n=1,006)

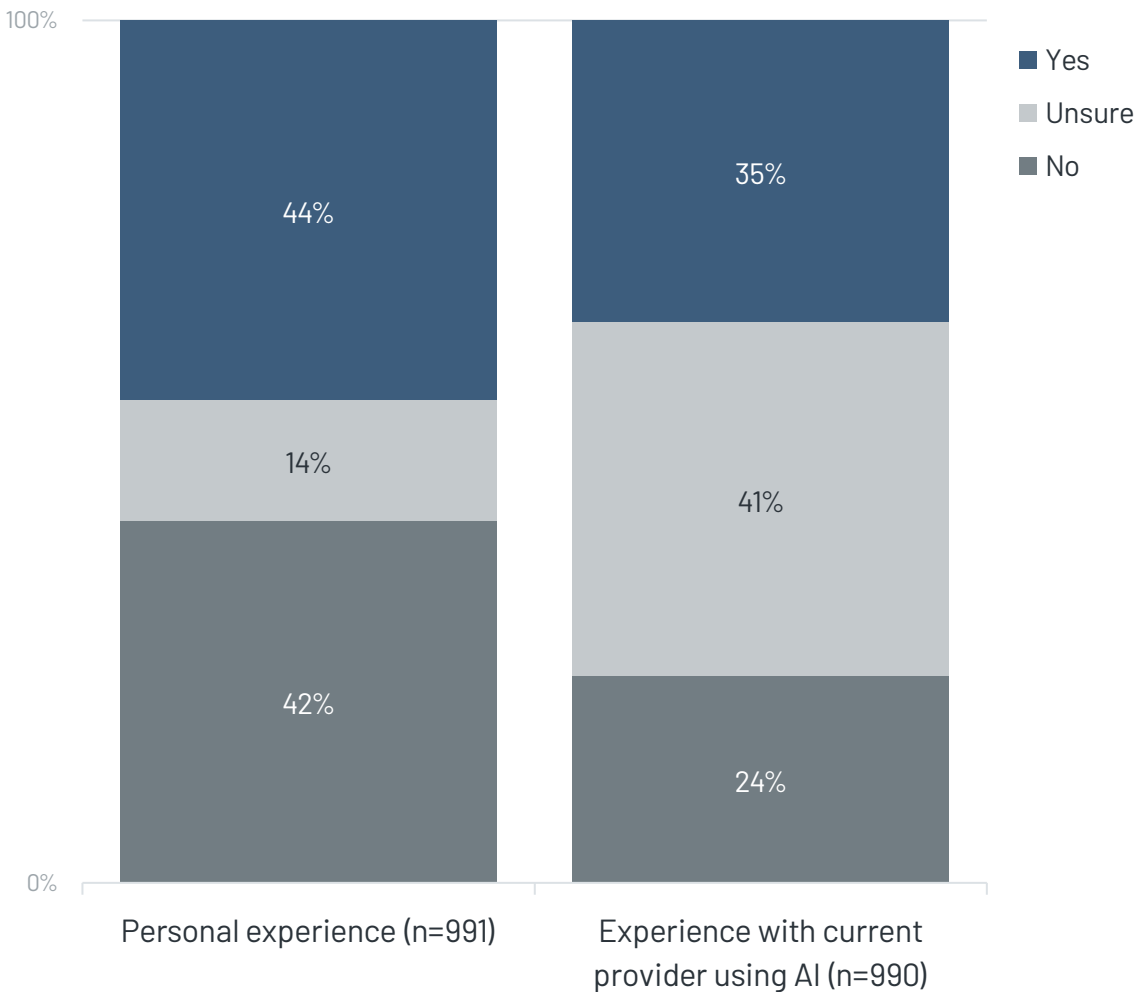


## Respondent gender

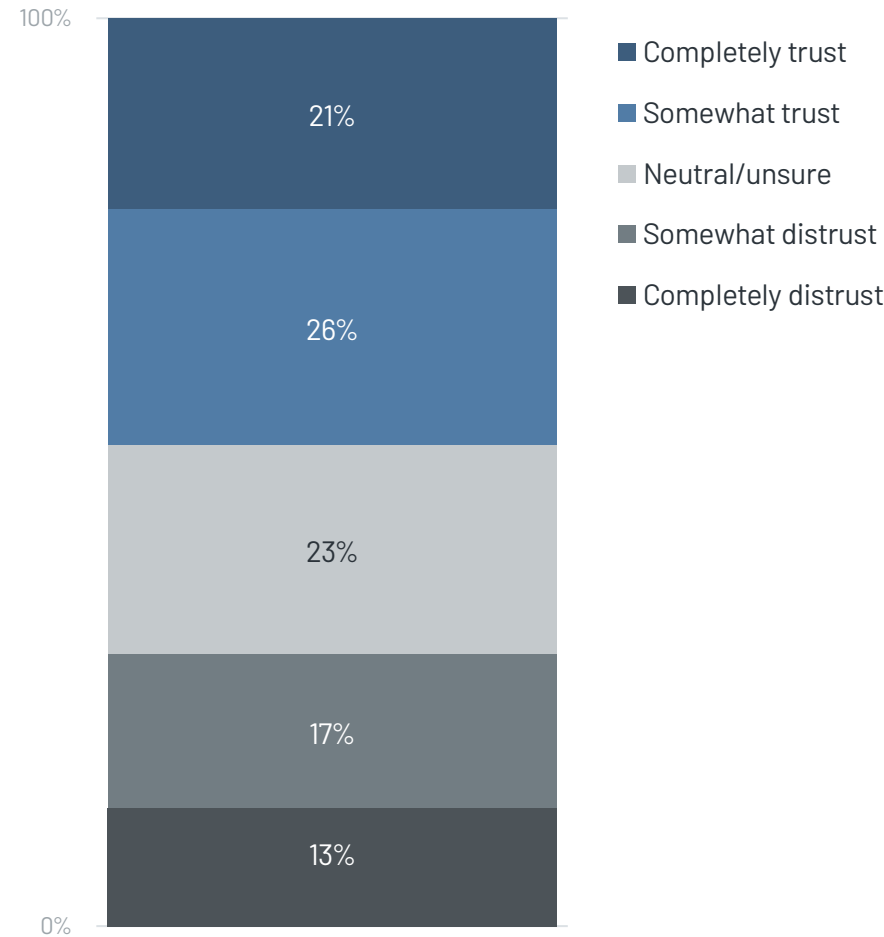
(n=1,006)



Respondent experience with AI in healthcare

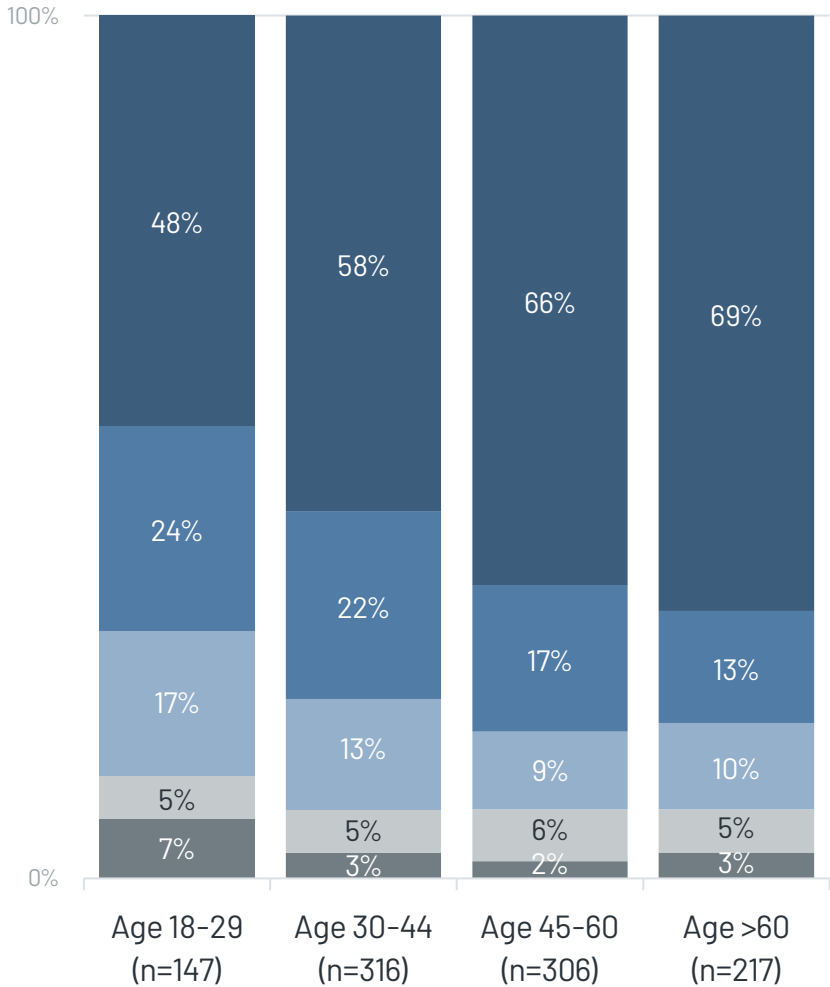


How much do you trust AI to help doctors make decisions about your care, like diagnosing a condition or recommending treatment?  
(n=1,006)

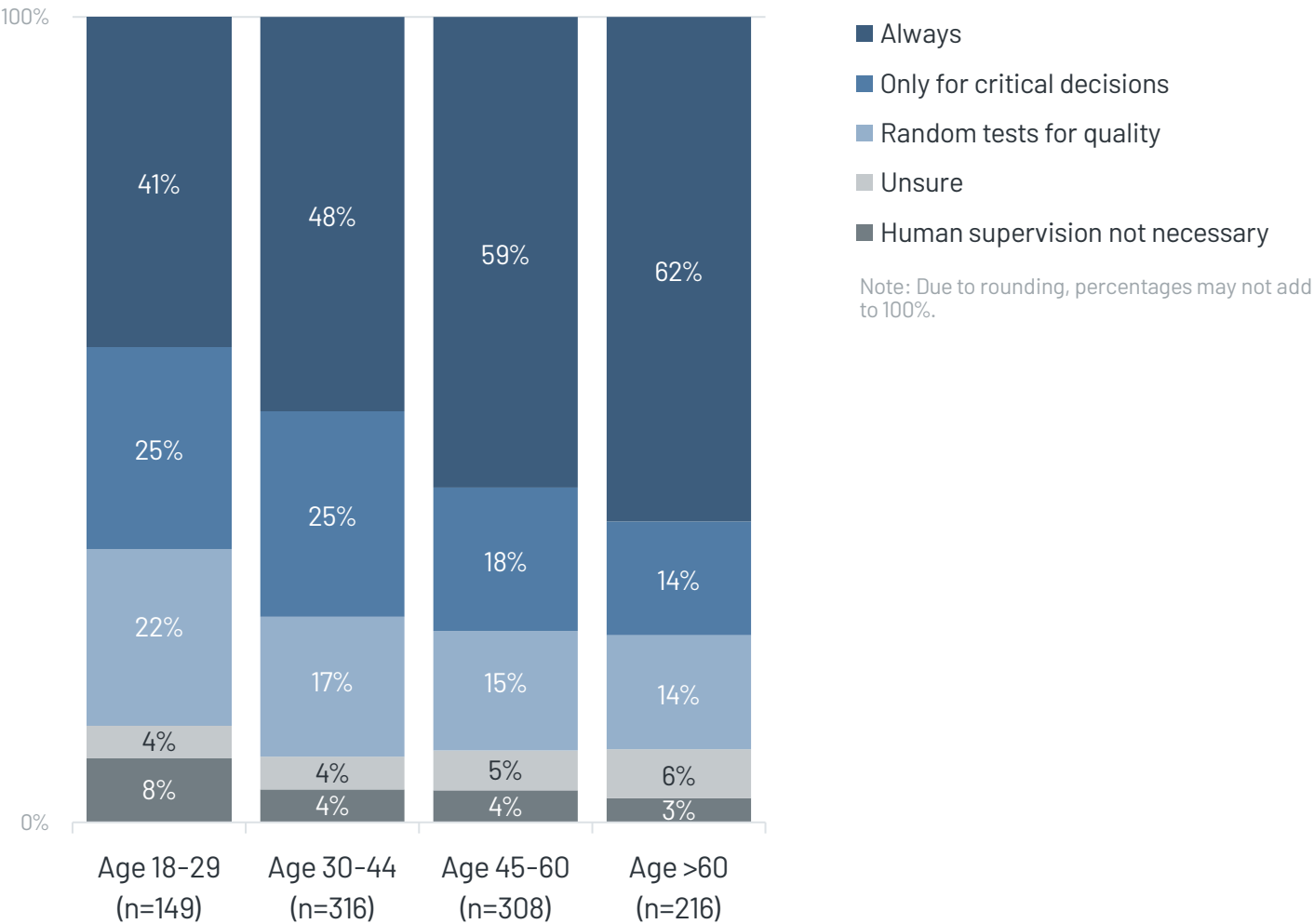


When should a human be required to supervise AI in healthcare?—by age breakout

Clinical care

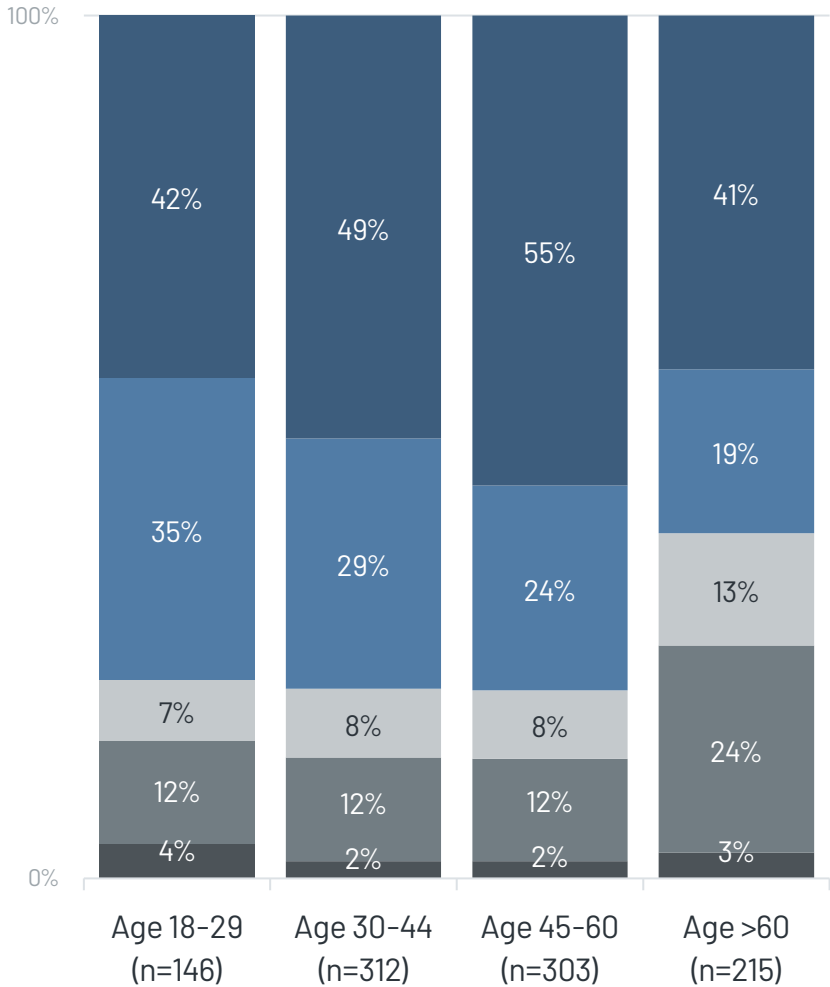


Healthcare operations

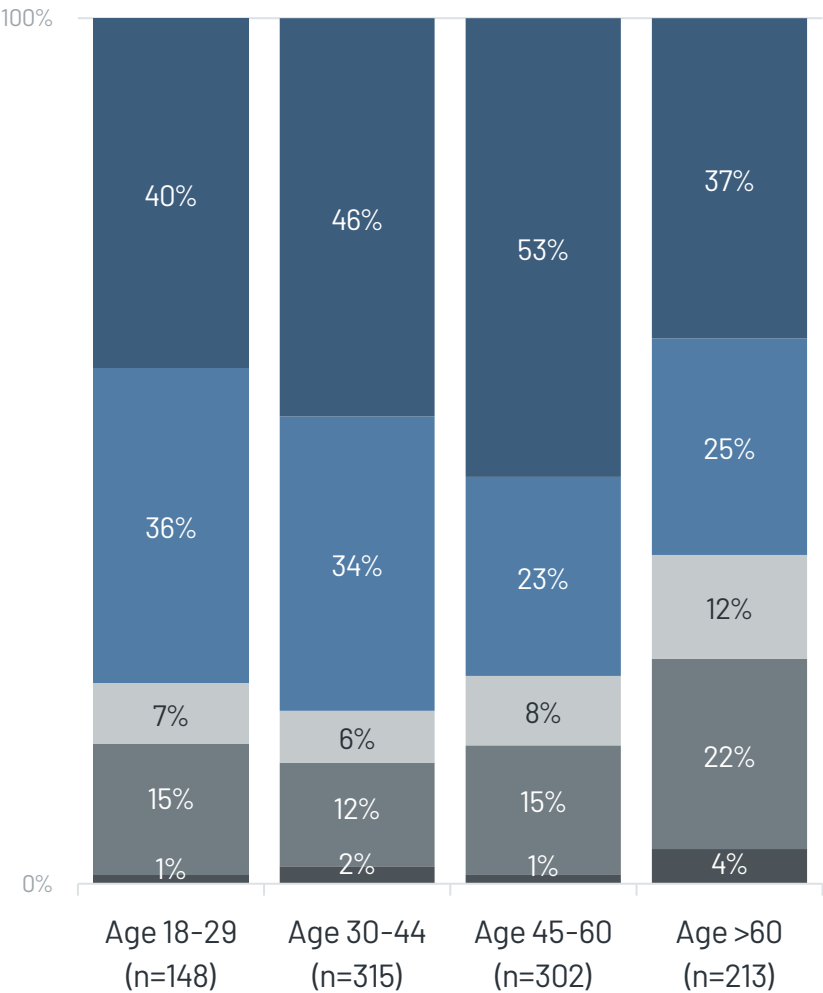


# Should AI in healthcare be regulated by the government?—by age breakout

## Clinical care



## Healthcare operations



- Yes, with strict oversight & enforcement
- Yes, with basic guidelines & voluntary compliance
- Unsure
- No, but industry should self-regulate with internal standards & best practices
- No, AI in healthcare doesn't need any regulation

Note: Due to rounding, percentages may not add to 100%.