CHCF

CHCF WEBINAR

From Skepticism to Possibility: Californians' Views on AI in Health Care

November 12, 2025
1-2 PM (PT)

ARTIFICIAL INTELLIGENCE IN HEALTH CARE

Patient Research Study

CHCF

Culture IQ GROUP

Key Takeaways

- Consumers want to understand **how** AI is being used
- **Transparency and control** build trust
- Patients and their families want **human connections** to remain central
- **Cultural and racial context matter** for AI adoption
- The **digital divide** affects perceptions of AI
- **Administrative** AI applications receive the most support

DETAILED FINDINGS

AWARENESS + UNDERSTANDING OF AI

General Awareness of AI

- Most respondents across groups had **some familiarity with AI;** either they had heard the term, had seen something about what it is and how it works, or had used it themselves.

- Initial exposure to AI often came through **work, school,** or **social media**. Most who were familiar with AI had **Siri or Alexa** at home or had used **ChatGPT** or other AI tools for school (essays), work (emails, resumes), or personal research.

- **Awareness was lowest** among older adults, respondents with lower incomes, and non-English speakers.

- Many noted **increased mentions of AI** in news, movies, and other entertainment programming over recent years.

Benefits and Drawbacks of AI in General

Respondents across groups expressed **the need for balance** so the benefits of AI could be enjoyed but the greatest risks could be diminished or avoided.

- Valuable source of information (research)
- Ability to summarize and synthesize large amounts of data
- Can use it to generate content (emails, reports)
- Makes common tasks more efficient

- Concern over jobs being eliminated
- Fear of potential biases based on quality of training/input used
- Real-life experiences needed to process information, reason, and make decisions
- Could eventually surpass human capabilities and replace them.

DETAILED FINDINGS

AI IN HEALTHCARE

Relationship with the Healthcare System

- Most respondents were insured, either through **Medi-Cal, Covered CA, employer-provided insurance** or **Medicare**. Several lower-income respondents reported going to **community clinics** for health services.

- Healthcare experiences were strongly shaped by **personal relationships with doctors.** Respondents valued continuity of care and familiarity with their medical history.

- **Trust in the healthcare system** was built on empathetic, attentive providers who were perceived as knowledgeable and up to date.

- **Distrust** stemmed from dismissive doctors, diagnostic delays or errors, lack of transparency in billing/charges, and profit-driven insurers.

Awareness of AI in Healthcare

- Some respondents were aware of how AI is **currently being used in healthcare**, either through personal experience or hearing about it on the news or social media.

- AI applications in healthcare some were aware of included **automated phone systems** and **help lines, early cancer detection**, **medication administration, virtual try-on**s for prescription glasses, and **robotic surgery**.

- In terms of actual experience, some respondents had seen **laptops and tablets** being used at their doctor visits. Several mentioned AI being used to **help interpret mammography results**.

Perception of AI in Healthcare

- Some respondents were **optimistic** about the ways AI might be able to **help improve healthcare outcomes**, with more accurate diagnoses, more precise surgeries, or better customer service.

- However, the prevailing sentiment was that AI should be used **as a tool to help doctors, not to replace the human interaction and experience** a doctor represents. Concerns were also raised regarding **data privacy and security,** a loss of genuine **human interaction**, and the potential for **over-reliance** on AI by doctors and other medical professionals.

- There was some **uncertainty (and apprehension)** about whether AI was already being used without their awareness

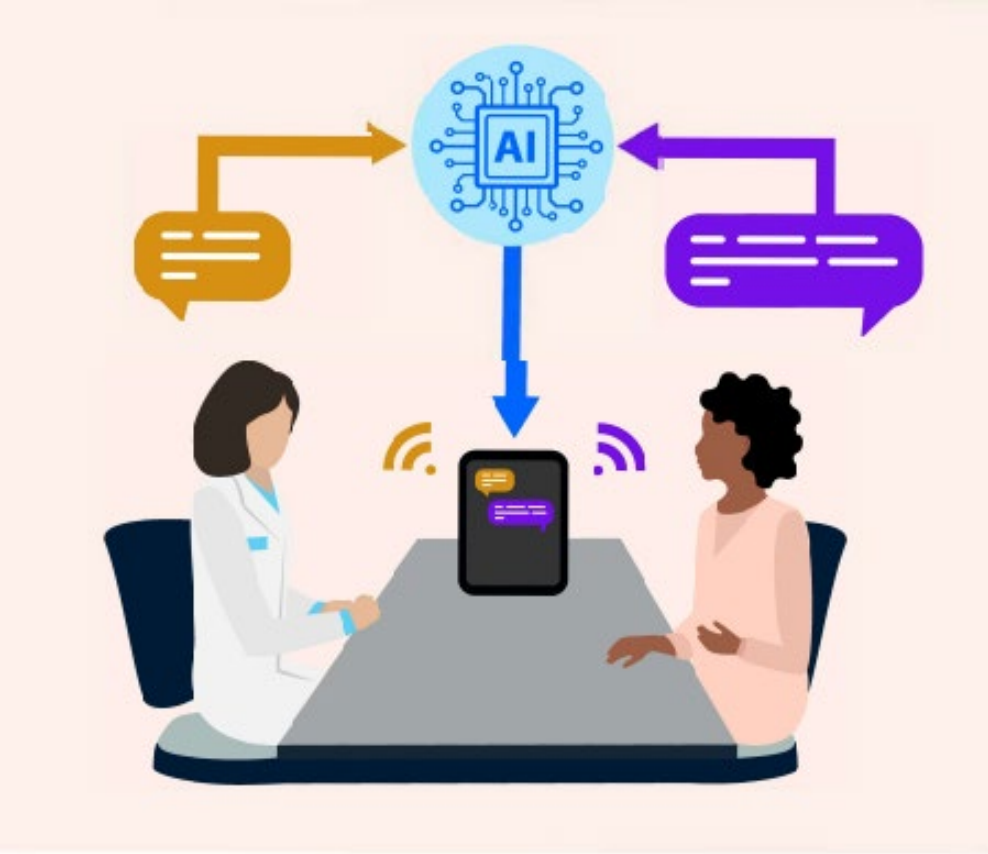
Cultural Insights Around Healthcare

AANHPI	• Respect, dignity, independence • Family-centered care
Hispanic/Latino	• Empathy, connection • Prefer in-person visits with trusted provider
African American	• Overall distrust of health care system • Experience with not being listened to, dismissed, misdiagnosed or undiagnosed
Older Americans	• Less technologically savvy • Fear of being "left behind" • Need patience, reassurance and clarity
Prefer language other than English	• Shame, discomfort, fear of misunderstanding • Don't feel "seen"

DETAILED FINDINGS

REACTION TO SCENARIOS

AI in Healthcare Scenarios



- Interpretation Services
- Scribing
- AI-Powered Screenings
- AI Front Desk & Triage
- Prior Authorization
- Predictive Analytics

Positive Reactions

Improved Efficiency

- More complete, accurate records
- Shorter wait times; increased availability of appointments

Improved Accuracy in Diagnosis + Treatment

- Reduce human error
- Allow doctors to focus more on patients

Improved Communications

- Translation tools allow patients to speak more freely
- Reduced risk of misunderstanding, misdiagnosis

Potential Cost Savings

- Administrative tools can streamline the complex insurance process
- Other cost savings (efficiency) could be passed on to patients

Negative Reactions

Fears over Data Security/Privacy

- Concerns over who has access to AI-generated data
- Fears about data storage and security
- Apprehension over continuity of HIPAA protections

Inaccuracy in Diagnosis + Treatment

- Uncertainty over reliability, accuracy of AI tools; potential for misdiagnosis, treatment errors
- Concerns that "robots" could replace actual practitioners (no human oversight)

Reduced Communications

- Preference for human interaction in health-related situations
- Translation tools can't capture nuances
- Risk that doctors could become overly reliant on AI and less engaged with patients

Reduced Quality of Care

- Fears of magnified inaccuracy/bias in development, implementation of AI tools
- Skepticism that any cost savings would only further enrich insurance companies

Ways to Improve Acceptance

- Assurances of **human oversight, auditing/review**, robust **testing** and **reporting**
- Implementation of **robust data privacy** and **security measures**
- Ensuring that patients are i**nformed** when AI is being used in their healthcare and given the opportunity to **opt in or out.**
- **Involvement of medical professionals** in systems, processes aided by AI, including a process for complaints/grievances
- Making sure the technology is **available to everyone**

RECOMMENDATIONS

Patient Education

Patient education is key to introducing AI applications in a healthcare setting. No matter how familiar respondents were with the general concept of AI, they struggled to understand how each application worked in real life, especially how the doctor interacts with the technology and how the patient might benefit from it.

- **We recommend creating patient education materials such as videos, interactive tools (with Q & A), brochures with graphics/illustrations, emails, etc. featuring AI tools being used in settings familiar to patients.**

- **Include a thorough explanation of how the application works and how it empowers providers rather than replaces them. Point out where in the process the human involvement/oversight occurs and emphasize where the patient can save time or get better results.**

Building Trust

Respondents across groups shared a human-centered vision of healthcare – where providers and patients have a strong personal connection and clear interactions.

They tended to embrace the potential of AI most when it was seen as serving practical needs: simplifying administrative work, providing translation, and speeding up insurance hurdles. It is also important to note that the concerns raised were not in opposition to AI itself, but rather about misuse, depersonalization, and lack of transparency.

- **Communications about AI tools should center on the human benefits: how they support the doctor-patient relationship, help physicians and techs do their jobs better, reduce patient wait times and improve outcomes.**

Informed Consent

These respondents also wanted to be informed (in advance or at the visit) when AI was in use, what data was involved, and what precautions were being taken (by humans) to protect their data. Most wanted to be able to "opt out" of the use of AI in their health care, even as many said they probably would not exercise that option.

- **While it may not always be practical or applicable to provide informed consent for the use of AI, we do recommend that wherever possible, the explanation of the tool include an "opt out" feature, or at least a paragraph describing a process for doing so.**

- **Similarly, addressing data security, data privacy and oversight practices in the application description/demo will help increase trust in these tools.**

THANK YOU!

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