



2025

# State of Patient Access

The numbers show that patient access continues to improve. Casting a shadow over the results: cost and payment issues are a growing concern.

*A survey by Experian Health*





# Table of contents

**p.3** - Better or worse? When “about the same” isn’t a bad answer

**p.4** - Addressing the No. 1 patient access complaint

## PATIENT PERSPECTIVES

**p.6** - What’s important to patients?

**p.7** - The good and the bad of access

**p.8** - Troubles from the start

**p.9** - Cost as a barrier to healthcare access

**p.10** - A tale of two payment experiences

**p.11** - Estimates have a long way to go

## PROVIDER PERSPECTIVES

**p.13** - Improvement continues, but staffing issues remain

**p.14** - Top 5 provider challenges

**p.15** - Patients dread scheduling an appointment; providers are trying to fix that





**p.16** - The best case for digital tools and automation: registration and check in

**p.17** - What would patients say about access to your organization?

# Better or worse?

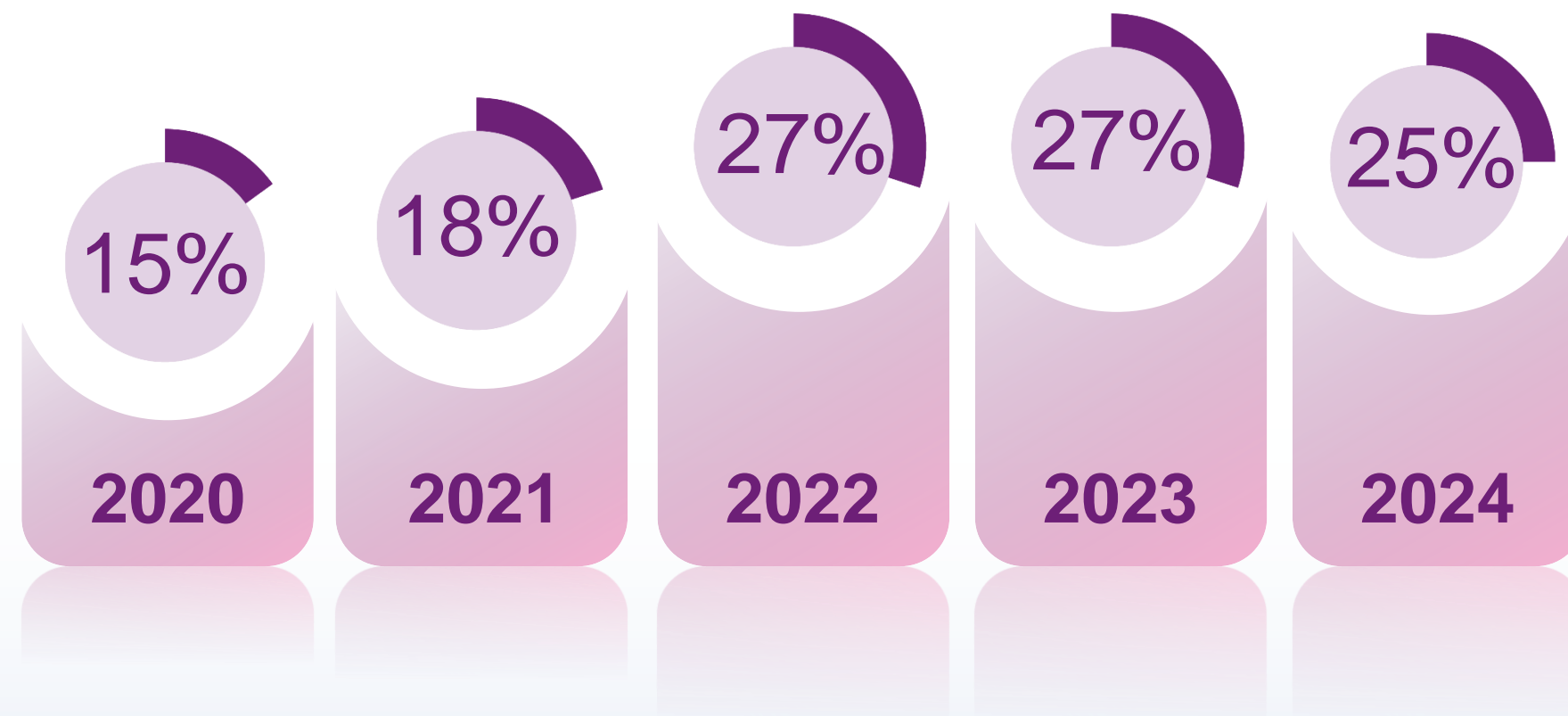
## When “about the same” isn’t a bad answer

Patient and provider respondents said access “was about the same” at the highest levels since 2022 (68% and 43%, respectively), which may reflect an overall better experience. How? The improvements of 2024 have likely set a new standard, so there is a raised bar for “better.” Additionally, the percentage of “worse” sentiment was at its lowest since 2022.

	Better	Worse	Same
 <b>Patient access is...</b>	 Patients — <b>16%</b> Providers — <b>36%</b>	 Patients — <b>15%</b> Providers — <b>22%</b> (Lowest since 2022)	 Patients — <b>68%</b> Providers — <b>43%</b> (Highest since 2022)

# Addressing the No. 1 patient access complaint

Once again, the No. 1 access challenge for patients is their inability to see a practitioner quickly (25%) — but that percentage decreased for the first time in five years (having increased from 15% to 27% between 2020 and 2024). Ironically, the biggest challenge for providers is getting patients to use the digital access services designed to help remedy this issue.



## Help me, help you!

**55%**

Percentage of providers who say patients are unsure how to navigate self-scheduling.

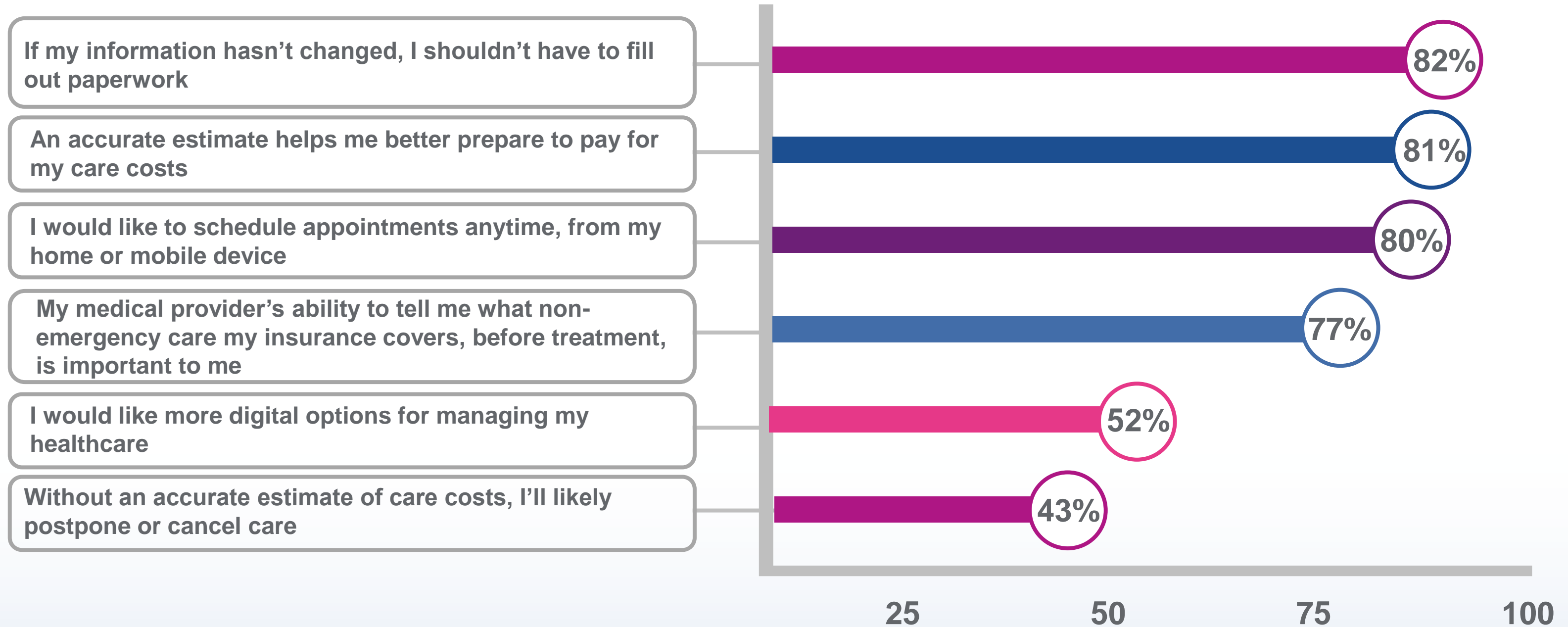
In fact, 37% of providers said “getting patients to use digital tools” is in their top 3 patient access challenges.





# Patient Perspectives

# What's important to patients?



# The good and the bad of access

Patients who say access is better (16%) are getting in to see a practitioner quickly, experience an improved scheduling process, and find check-in and registration less difficult. Those with a “worse” take on access (15%) have trouble seeing a practitioner quickly and gaining access to specialists, and they have difficulties scheduling an appointment.



## Why worse?

65%

Can't see practitioner quickly

52%

Difficulty scheduling appointments

44%

Specialists are hard to access

31%

Appointments don't work with personal schedule

29%

Difficulty obtaining authorizations



## Why better?

59%

Can see a practitioner quickly

53%

Scheduling process is better

51%

Appointments work with personal schedule

49%

Improved check-in and registration

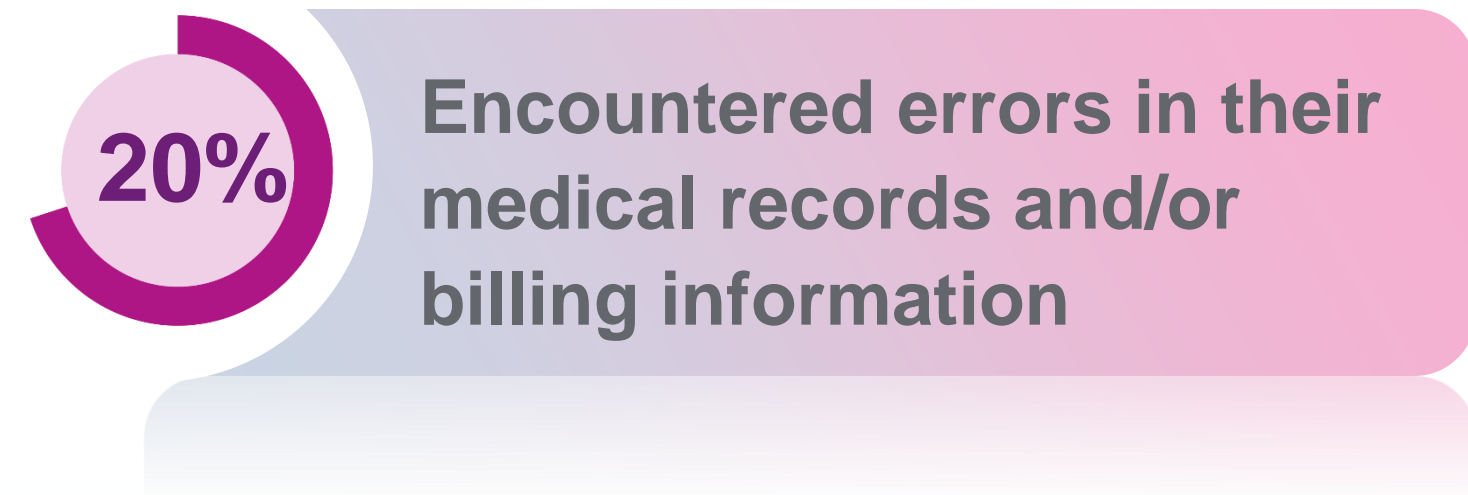
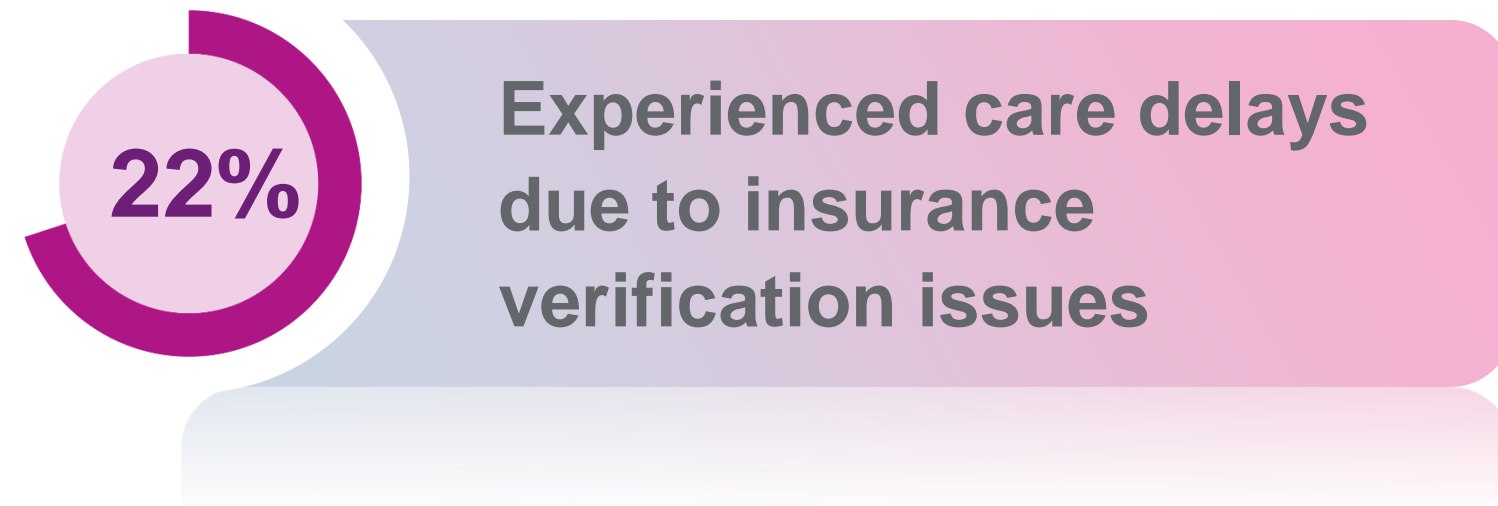
38%

Better access to specialists



# Troubles from the start




Due to information discrepancies, at least **1 in 5 patients encounter issues** even before they see a doctor.





# Cost as a barrier to healthcare access

Paying for healthcare is trending in the wrong direction, with more people saying the experience has worsened in the last 12 months and fewer people saying it has improved. Even the “about the same” crowd shrunk.

Better	Worse	Same
 11% (2025) 12% (2024)	 29% (2025) 23% (2024)	 60% (2025) 65% (2024)

**34%** Percentage of patients who often struggle to pay for their healthcare. Almost everyone (95%) struggles to pay for healthcare at least occasionally.

# A tale of two payment experiences

The reasons people view the healthcare payment experience as worse than 12 months prior are generally the same as why some people consider the experience better.



## Why worse? (29%)

51%

Less able to afford care

39%

Don't understand my insurance coverage

35%

Didn't understand costs prior to care

12%

Not offered payment plans

20%

There was an excessive amount of paperwork required



## Why better? (11%)

55%

Better able to afford care

52%

Understand my insurance coverage

38%

Understood costs prior to care

37%

Payment plans make care more affordable

34%

Paperwork was completed digitally

Additional resources:

Case study - [Boosting self-pay collections](#)

Products - [Patient collections](#)

# Estimates have a long way to go

Estimates have long been a pain point for patients. Not surprisingly, “understanding how much care will cost” came in as patients’ No. 2 access challenge. Compounding the issue, accuracy of estimates fell again, a decline that’s continued since 2022.

## More estimates, less accuracy.

Year	Received estimate	The estimate was accurate to \$400
2022	29%	78%
2024	31%	74%
2025	41%	71%

## Estimates are important to patients ...

81%

Say an accurate estimate helps them better prepare to pay care costs.

43%

Say that they are likely to postpone care without an accurate estimate.

## ... and providers

88%

Say there’s an urgency to improve or implement accurate estimates.





# Provider Perspectives

# Providers see continuing improvement in patient access, but staffing issues remain

Providers followed up their rosy outlook in 2024 — when 55% felt access had improved — with 36% saying things are even better now. The pandemic exposed shortcomings requiring process and technology improvements that now benefit providers and patients, but the stubborn problem of staff shortages still negatively impacts both.



## Why worse? (22%)

- 57% Staffing shortage continues, impacting service levels
- 48% Lack of thorough staff training is impacting service levels
- 43% Limited appointment availability impacts access
- 39% Difficulty collecting accurate, comprehensive patient information at intake
- 39% Estimates are inaccurate
- 26% Estimates are unavailable for patients

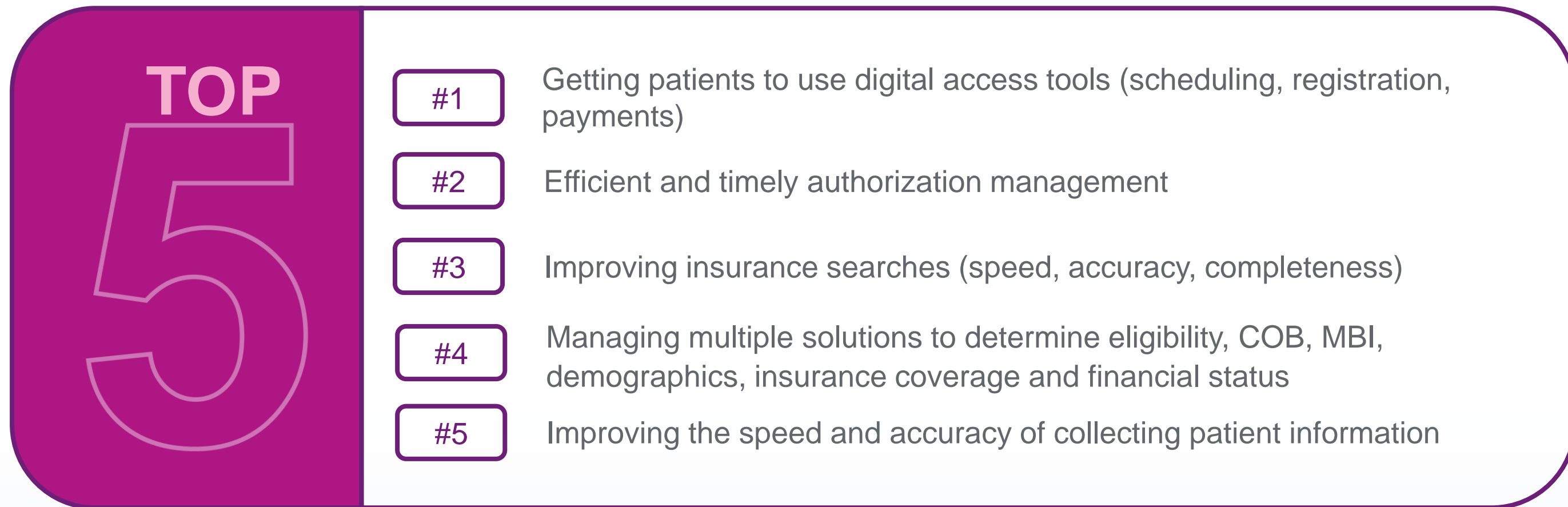


## Why better? (36%)

- 68% Telehealth has improved the time to see a provider
- 58% Improved insurance identification technology
- 55% Automated process speeds up registration and improves information accuracy
- 54% Digital/mobile/self-service tools are meeting patient expectations
- 51% Patient communications now have digital/mobile options
- 50% Patients have more flexible payment options

# Provider challenges to improve patient access

Patients say there aren't enough digital access tools. Providers say patients don't use them. How to fix that is the No.1 challenge providers are wrestling with. After that, it's all about the headaches of front-end data collection.





# Patients dread scheduling an appointment and providers are trying to fix that

If the scheduling experience sets the tone for a patient's expectations of how their healthcare journey will progress, it's no wonder that providers are working to modernize and streamline the process.



## Provider problems impacting the scheduling experience

70%

Limited appointment slot availability

54%

Long wait times

25%

Lack of digital scheduling options

63%

Staffing shortages

31%

Inefficient scheduling systems



## What providers are doing to improve

54%

Offering self-scheduling

10%

Plan to offer self-scheduling in the next 6 months

71%

Consider self-scheduling an urgent priority

# The best case for digital tools and automation: registration and check-in

Patients like the convenience and providers benefit from the speed and accuracy of automation. It also improves back-end claims and billing, minimizing denials and helping patients better understand their financial commitment.

Improving patient data collection	All providers	Providers offering self-scheduling
Using patient portals	64%	70%
Online preregistration	54%	68%
Automating insurance lookup and verification	45%	46%
Automating data entry	29%	39%

## Providers say there's need for more automation

56%

Patient information errors are a primary cause of denied claims

48%

Data collected at registration and check-in is "somewhat" or "not" accurate

83%

There's an urgency to improve or implement faster, more comprehensive insurance verification

# What would patients say about access to your organization?

Would patients rate access — things like scheduling, registration, check-in, communications, clarity of cost, ease of payment options — highly at your healthcare organization? Is it a challenge to collect patient data quickly and accurately? Are your claims and billing teams slowed down by errors at registration? Are information errors leading to denied claims? Are your patients postponing care because they don't know the cost?

Automation and digital enablement — and now, artificial intelligence — can accelerate patient access, make the process much easier for patients, dramatically improve information accuracy, and mitigate staffing issues by getting data right the first time.

[LEARN MORE >](#)





This report is based on a survey of 213 healthcare revenue cycle decision-makers and 1,004 U.S. adults who received care or oversaw care for a dependent from January 2024 through February 2025. The survey was conducted Feb. 3–13, 2025.



Experian Health's 2025 Patient Access Survey is designed to determine perceptions of healthcare access from both patients and providers and to identify common and divergent views. Select results are compared to previous years' responses.

### Provider survey participant breakdown:



Participate in decision-making



Make final purchase decisions



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