NORC at the University of Chicago

Spotlight on Health: Patient-Facing Digital Health Tools Show Promise in Improving the Patient Experience

November 2025 AmeriSpeak Omnibus Survey

Funded and Conducted by NORC at the University of Chicago

Interviews: 11/6-10/2025

Sample: 1,090 adults completed the survey. Results for the initial screening question reflect all respondents (n=1,090); subsequent results are based on the 240 respondents who reported having used patient-centered clinical decision support in the past six months.

Margin of Sampling Error: ± 4.0 percentage points at the 95 percent confidence level based on all survey respondents (n= 1,090)

Note: All results show weighted percentages. Percentages may not sum to 100 percent due to rounding or the allowance of multiple responses.

HS1. In the past six months, have you used patient-centered clinical decision support?

	NORC 11/6-10/2025
Yes	22
No	66
Unsure	12
SKIPPED ON WEB/REFUSED	-

N=1,090

HS2. In the past 6 months, what health information tools did you use?

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS2]

	NORC 11/6-10/2025
An online patient portal from my doctor's office	75
A smartphone application I use to submit my health information to my doctor(s) or care team	42
A smartphone application connected to an electronic wearable device that tracks my health (e.g., Fitbit, Apple Watch, Garmin Vivofit)	33
A chatbot that could address questions about my health in real time	8
None of the above	4
DON'T KNOW	-
SKIPPED ON WEB/REFUSED	1

N=240

HS3. In the past 6 months, what kind of decisions did patient-centered clinical decision support help you make with your doctor(s) or care team?

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS3]

	NORC 11/6-10/2025
Starting, changing, or stopping my medication(s)	47
Making a care plan or treatment plan	33
Whether to see a specialist	26
Choosing which medical tests I should receive	25
Making lifestyle changes	21
Whether to have a medical procedure	17
Choosing the type of procedure I will receive	14
Other health-related decision(s)	19
I did not use patient-centered decision support tools to make a healthcare decision	9
Unsure	8
SKIPPED ON WEB/REFUSED	1

N=240

HS4. Thinking about your experience with patient-centered clinical decision support in the past 6 months, select the answer that reflects your level of agreement with the statement.

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS4]

NORC 11/6-10/2025	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	Unsure	Skipped on Web/ Refused
HS4A. Patient-centered clinical decision support gave me information that reflected my unique healthcare preferences.	15	47	22	7	1	7	1
HS4B. Patient-centered clinical decision support gave me information that was relevant to my health and well-being.	23	56	13	1	3	3	1
HS4C. Patient-centered clinical decision support gave me information when I needed to make decisions with my care team.	17	47	17	6	4	8	1

N=240

HS5. Patient-centered clinical decision support gave me information that helped me weigh the benefits and risks of my treatment options. Select one, thinking about your experience with patient-centered clinical decision support in the past 6 months.

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS5]

	NORC 11/6-10/2025
Yes	57
No	22
Unsure	20
SKIPPED ON WEB/REFUSED	-

N=240

HS6. Thinking about your experience with patient-centered clinical decision support in the past 6 months, select the answer that reflects your level of agreement with the statement.

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS6]

NORC 11/6-10/2025	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	Unsure	Skipped on Web/ Refused
HS6A. Patient-centered clinical decision support helped me feel knowledgeable about my health.	18	49	23	3	2	3	1
HS6B. Patient-centered clinical decision support helped me feel empowered to manage my health with my doctor(s) or care team.	18	45	22	5	5	4	1
HS6D. Patient-centered clinical decision support helped me receive healthcare that aligned with my preferences.	16	52	20	8	1	2	1
HS6E. Patient-centered clinical decision support helped me effectively manage my illness or condition.	14	49	20	8	4	4	1

N=240

HS7. Thinking about your experience with patient-centered clinical decision support in the past 6 months, select the answer that reflects your level of agreement with the statement.

Patient-centered clinical decision support helped me feel confident in making decisions with my doctor and care team.

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS7]

	NORC 11/6-10/2025
Strongly agree	17
Agree	46
Neither agree nor disagree	26
Disagree	6
Strongly disagree	1
Unsure	3
SKIPPED ON WEB/REFUSED	-

N=240

HS8. Thinking about your experience with patient-centered clinical decision support in the past 6 months, select the answer that reflects your level of agreement with the statement.

[ONLY RESPONDENTS WHO ANSWERED "YES" TO HS1 RECEIVED HS8]

NORC 11/6-10/2025	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	Unsure	Skipped on Web/ Refused
Patient-centered clinical decision support improved my communication with my doctor and/or other clinicians I work with (e.g., nurse, specialist).	25	44	25	2	1	3	1
Patient-centered clinical decision support improved my healthcare experience.	17	51	22	3	2	4	1

N=240

Survey Methodology

This survey was funded and conducted by NORC. The data were collected using the AmeriSpeak® Omnibus, a bi-monthly multi-client survey using NORC's probability-based panel designed to be representative of the U.S. household population. The survey was part of a larger study that included questions about other topics not included in this report. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face-to-face). The panel provides sample coverage of approximately 97 percent of the U.S. household population. Those excluded from the sample include people with P.O. Box-only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings.

Interviews were conducted in English, online and by phone, between November 6 and 10, 2025, with adults ages 18 and older. Panel members were randomly drawn from AmeriSpeak, and 1,090 adults completed the survey, including 1,036 online and 54 by phone. Panel members were invited by email or by phone from a NORC telephone interviewer.

The overall margin of sampling error is ± 4.0 percentage points at the 95 percent confidence level, including the design effect. The margin of sampling error may be higher for subgroups. Sampling error is only one of many potential sources of error, and there may be other unmeasured error in this or any other survey.

Quality assurance checks were conducted to ensure data quality. In total, 100 interviews were removed for nonresponse to at least 50 percent of the questions asked of them, for completing the survey in less than one-third the median interview time for the full sample, or for straightlining all grid questions asked of them. These interviews were excluded from the data file prior to weighting.

Once the sample was selected and fielded, and all the study data were collected and made final, a poststratification process was used to adjust for any survey nonresponse as well as any noncoverage or under- and oversampling resulting from the study-specific sample design. Poststratification variables included age, gender, census division, race/ethnicity, and education. Weighting variables were obtained from the 2025 Current Population Survey. The weighted data reflect the U.S. population of adults ages 18 and over.

Additional information on the AmeriSpeak Panel methodology is available at: https://amerispeak.norc.org/about-amerispeak/Pages/Panel-Design.aspx.

For more information, please contact info@norc.org.

About the NORC Spotlight on Health

NORC at the University of Chicago's Spotlight on Health is a series of quick-hitting national surveys on issues vital to health and well-being, conducted using AmeriSpeak's probability-based panels.

About NORC at the University of Chicago

NORC at the University of Chicago conducts research and analysis that decision-makers trust. As a nonpartisan research organization and a pioneer in measuring and understanding the world, we have studied almost every aspect of the human experience and every major news event for more than eight decades. Today, we partner with government, corporate, and nonprofit clients around the world to provide the objectivity and expertise necessary to inform the critical decisions facing society.