



The new economics of patient acquisition

How AI is reshaping healthcare search, paid media, and patient acquisition

Executive summary

AI is changing the economics of patient acquisition. Patients still use search engines, provider websites, maps, calls, and appointment flows, but more of the early research and triage process now happens inside AI-assisted environments. KFF found that about a third of U.S. adults have used AI for health information or advice. That behavior changes what health systems can see, what paid media can capture, and how leaders should judge performance.

Click volume no longer tells the whole story. Search volume can rise while clicks soften, and conversion rates can improve when AI strips out lower-intent research traffic. The shift changes how leaders should think about service-line strategy, measurement, and budget discipline.

- The patient journey starts earlier, with a conversation before a keyword.
- Clicks are becoming scarcer, but the remaining clicks can carry higher intent.
- Service-line economics are diverging. Weight loss, oncology, mental health, cardiology, urgent care, primary care, and HRAs do not behave the same way.
- Local action still matters. Calls, directions, map actions, and location-detail clicks can represent real patient movement before a website visit.
- Measurement has become part of the acquisition strategy. Freshpaint reports that 91% of healthcare marketers say they make data-driven decisions, but only 1% can connect more than half of marketing spend to patient outcomes.

01

The patient journey now starts inside AI-assisted search

As patients navigate complex healthcare decisions, the patient journey to care has become a multi-channel experience. AI tools and experiences are also becoming a de facto competitor to in-person healthcare services for early research, triage, and reassurance. For healthcare organizations, the strategic mandate is shifting. You are less often the destination at the start of the journey; you are becoming a resource that must earn its place within the consumer's AI navigation layer.

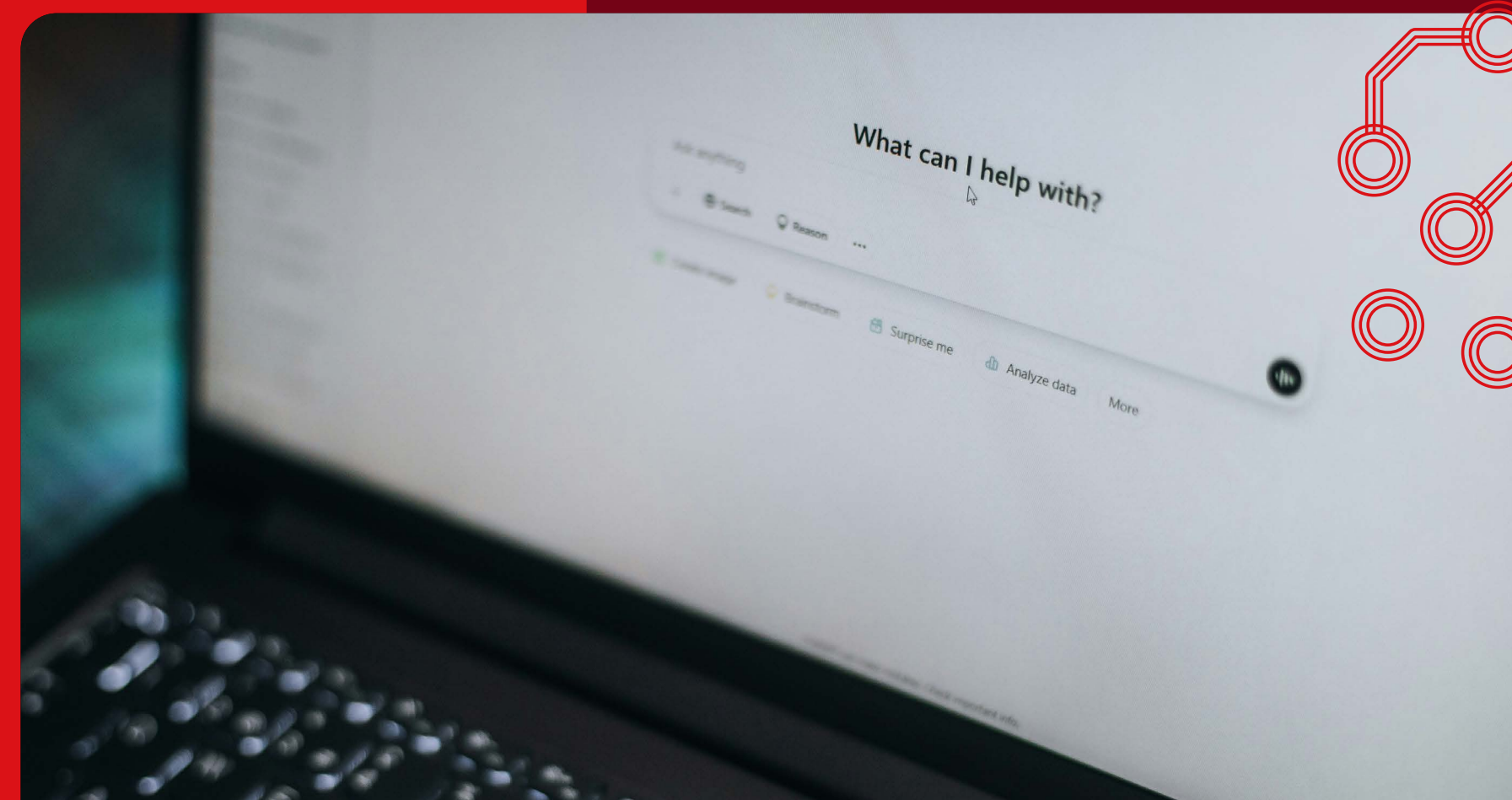


Exhibit 1

AI adoption and healthcare trust by demographic

Age group	AI usage rate	Primary access barrier	Trust levels in AI
18–29	High (~41%)	Cost, trust, access, and speed of care	High: view AI as the primary triage gateway
30–49	Moderate-High (33%)	Work and/or childcare constraints, privacy, access	Moderate: value AI for family care efficiency
50–64	Moderate (28%)	Chronic management needs (test result interpretation), speed	Emerging: focused on remote patient monitoring.
65+	Moderate (28%)	Medical test research, speed, confirm need for treatment	Low: prefer traditional Medicare and/or provider choice.

KFF found that 32% of adults have used AI for health information or advice. Adoption is concentrated among younger adults. Younger and middle-aged consumers may use AI as a first triage layer, while older consumers may continue to rely on existing provider relationships, Medicare structures, and direct referrals.

AI-first entry points are replacing the traditional digital front door. The journey less regularly starts with a keyword; it starts with a conversation. That change does not eliminate search, but it changes when search happens and what kind of intent reaches a health system’s site.

Source: KFF Tracking Poll on Health Information and Trust: Use of AI For Health Information and Advice

02

Clicks are becoming scarcer, but remaining clicks are more valuable

AI's influence and auction competitiveness are shifting efficiency and cost patterns across paid media. The central performance story is the inverse trend between click-through rate and conversion efficiency. Fewer users may click from search results, but AI can leave a more qualified pool of users who reach the site after resolving broad informational intent.

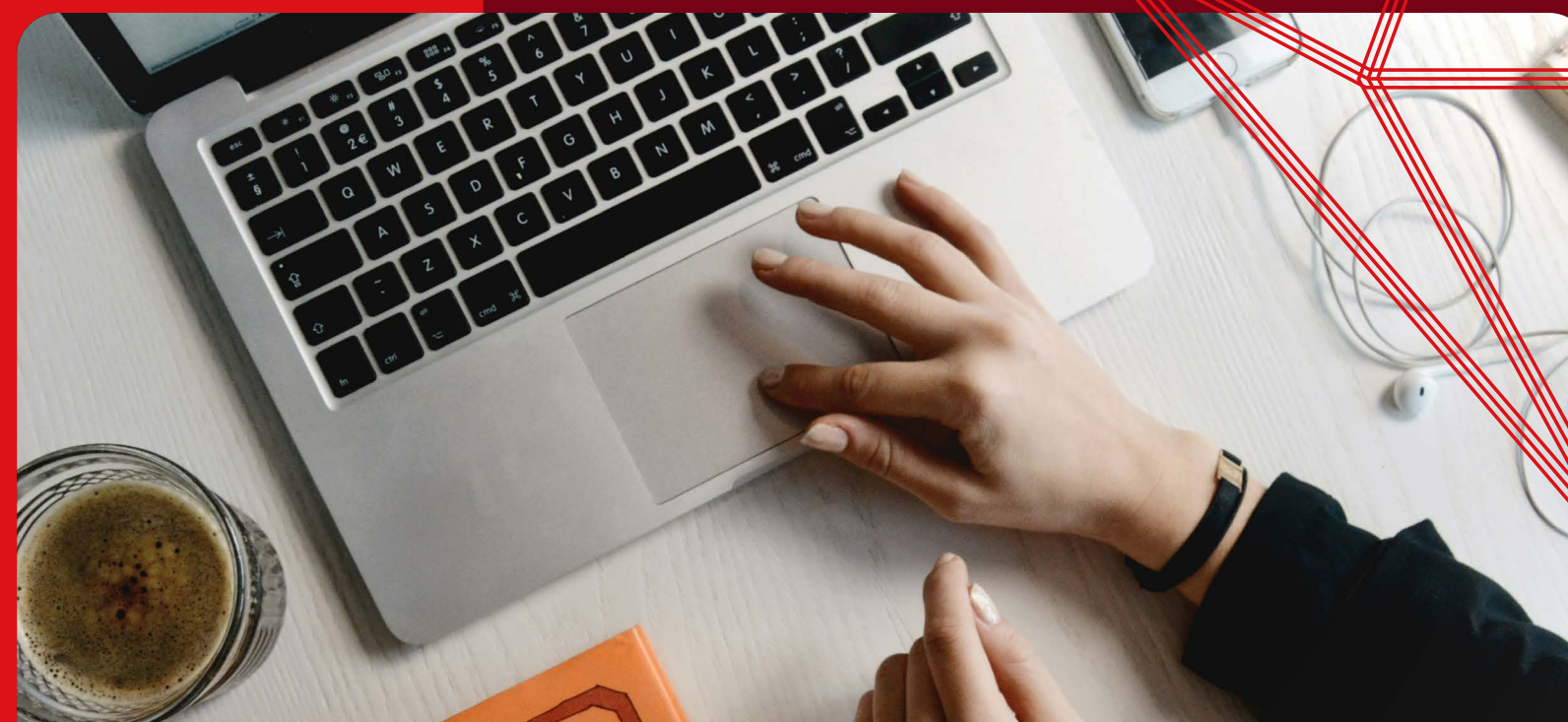
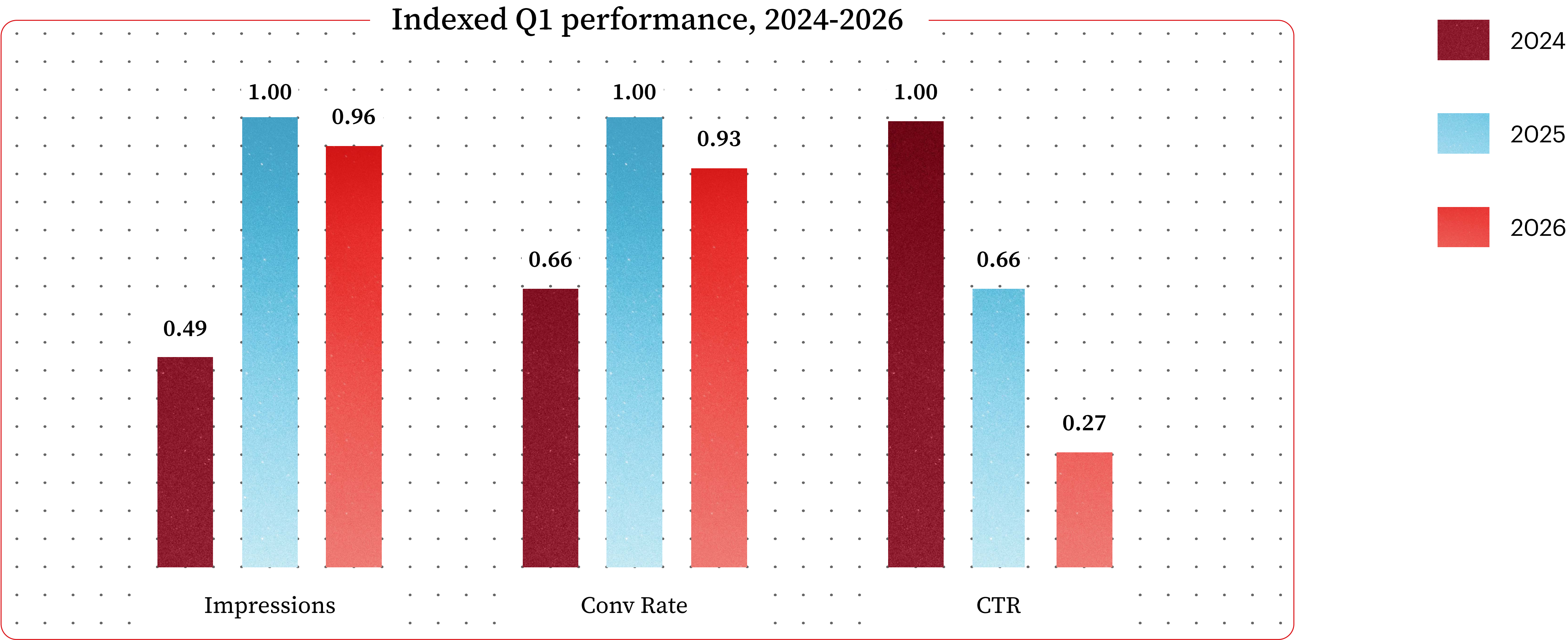


Exhibit 2

HRA search visibility rose while click-through softened and conversion rates improved



Source: Unlock Health book of business data 2024-2026

Exhibit 3

Transplant traffic followed the same pattern: higher visibility, lower CTR, stronger conversion

The HRA and transplant examples show the same acquisition pattern from different parts of the funnel: search visibility increased, click-through rates weakened, and conversion rates improved. In practice, that means fewer clicks can still produce better acquisition value when the remaining traffic carries stronger intent.

Across Unlock Health book of business data, calendar years 2024-2025, exact-match conversion rates increased 80% year over year on a like-for-like basis, while overall click-through rates dropped approximately 30%. Qualified action now tells a more useful story than click volume alone.

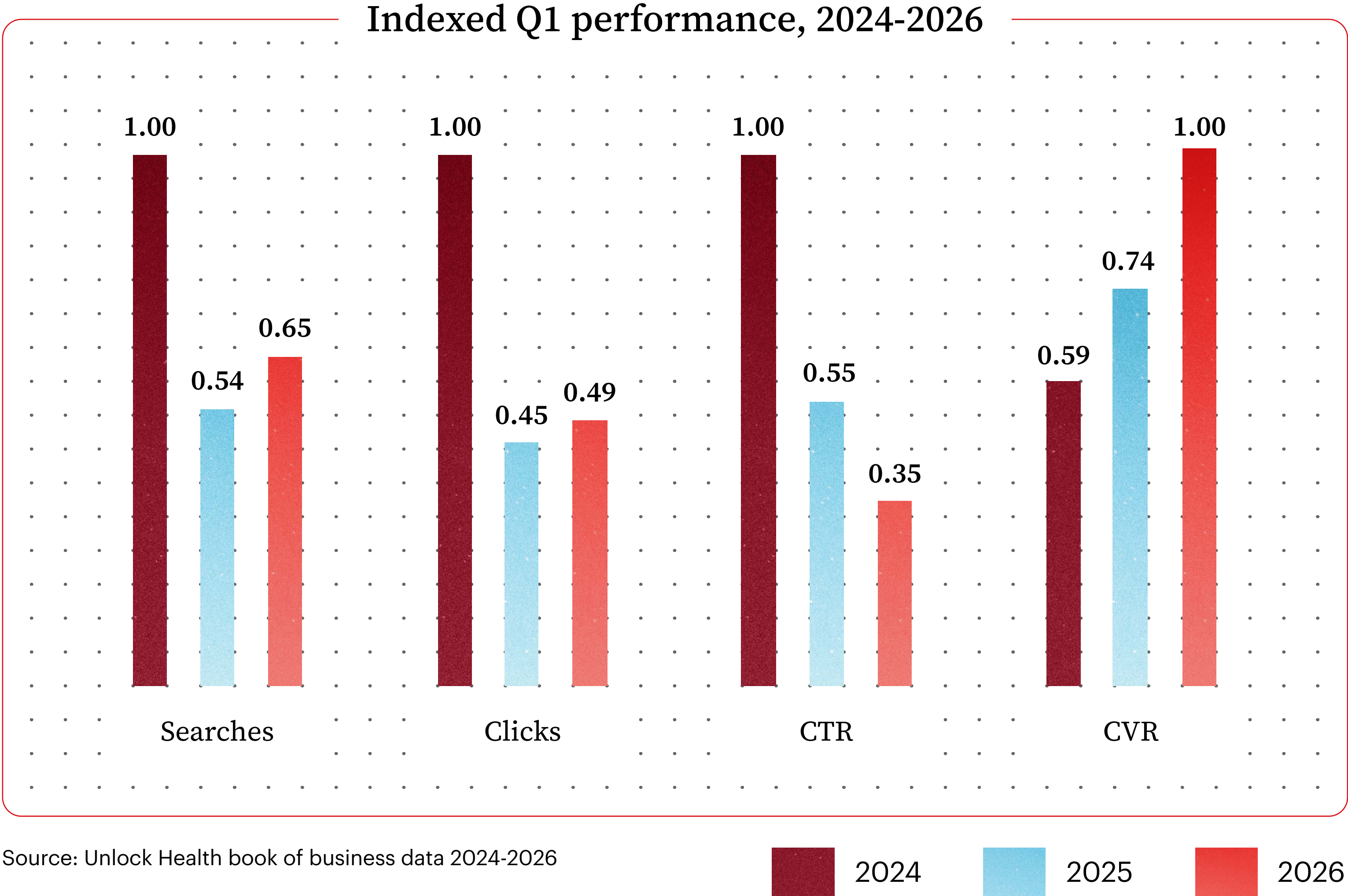
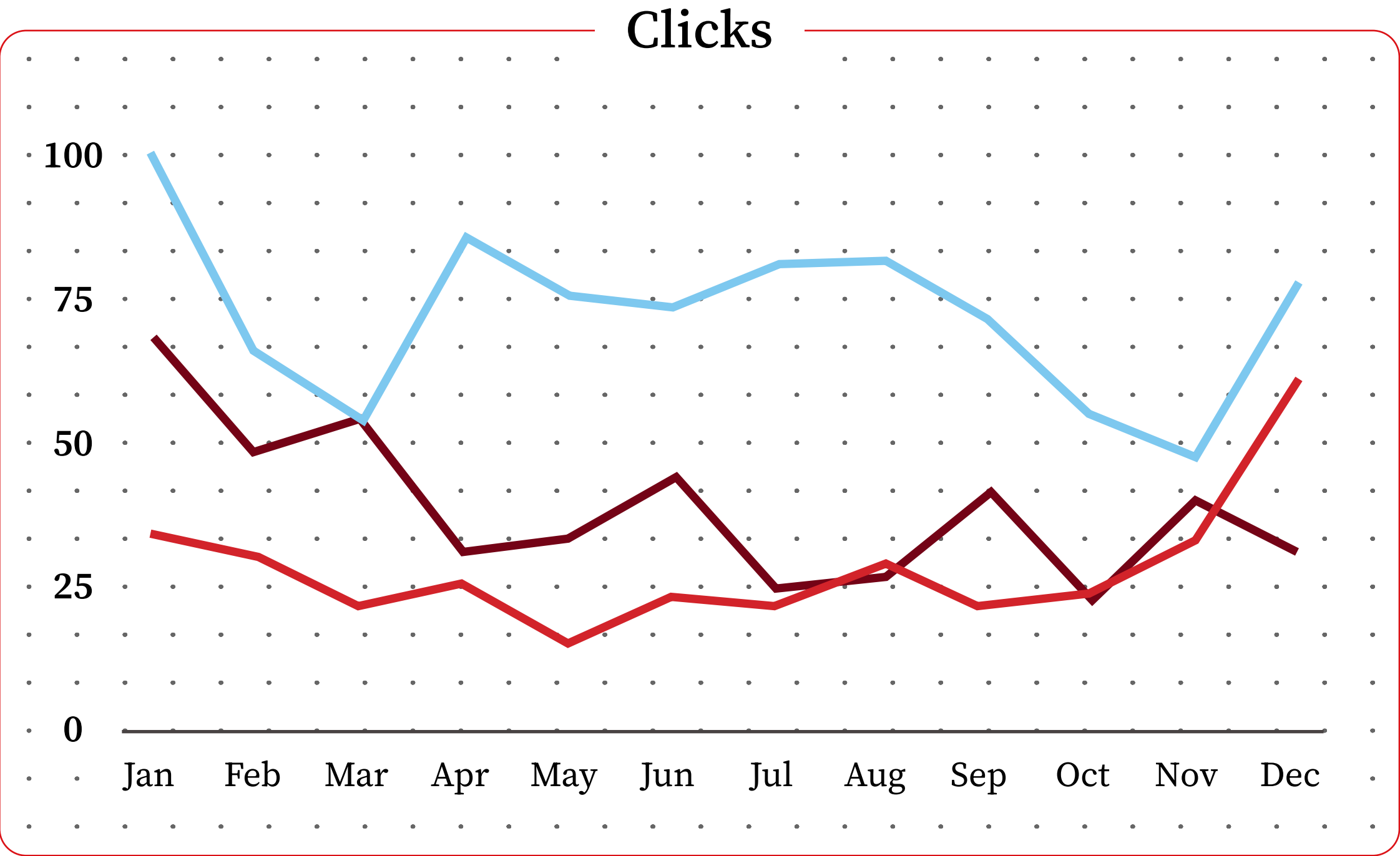
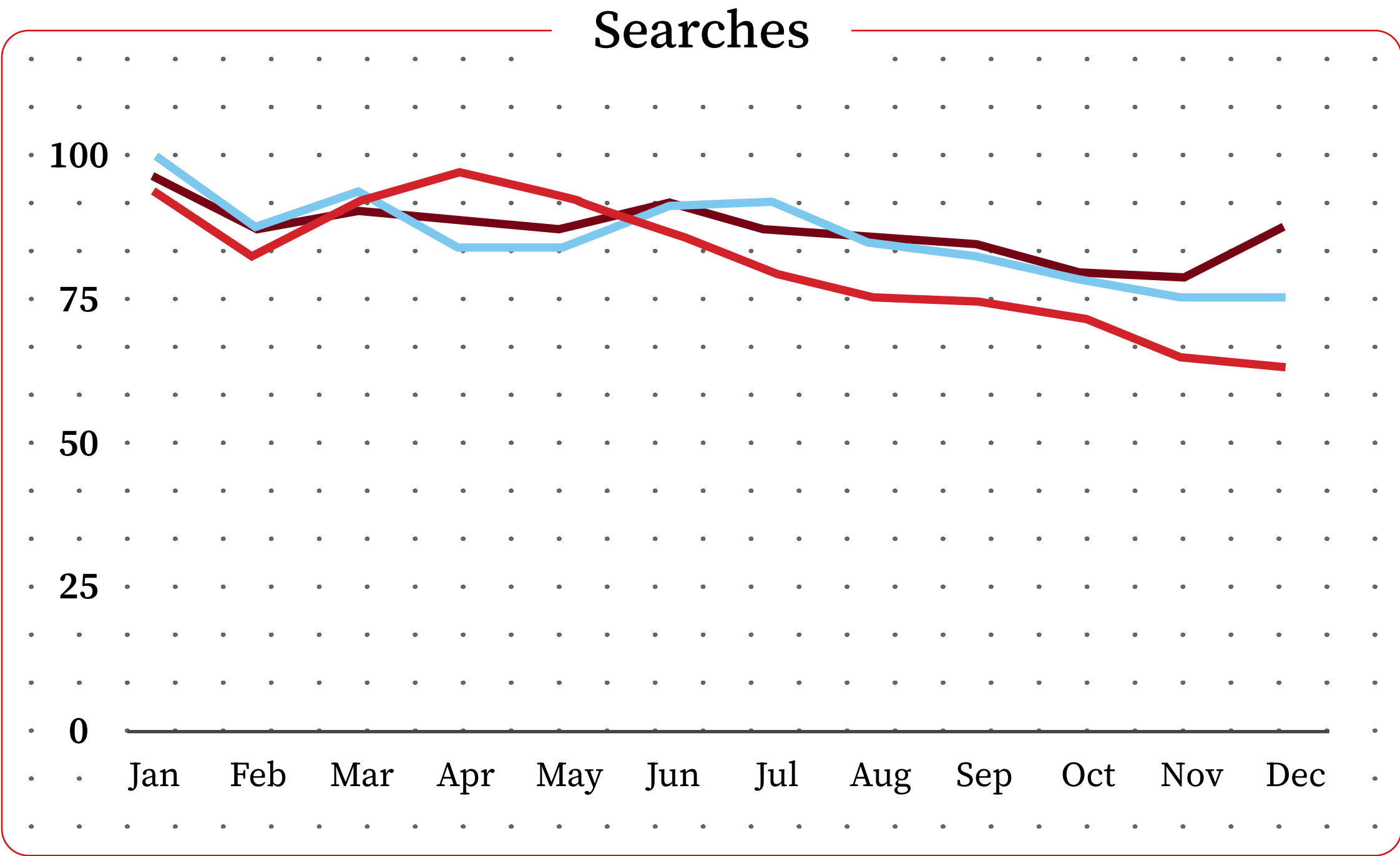


Exhibit 4

Cardiology clicks rebounded as search volume declined



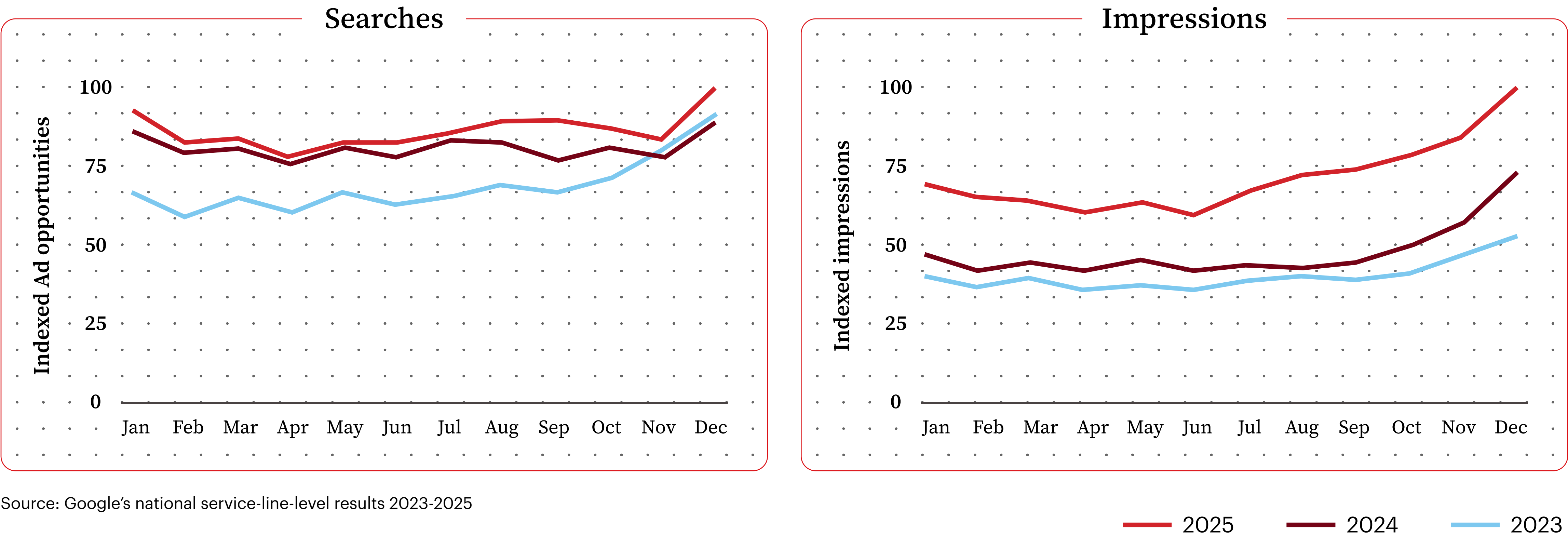
Source: Google’s national service-line-level results 2023-2025

In cardiology, the data shows lower overall search volume and fewer clicks in 2025, while early 2026 client themes shifted toward brand and heart-screening queries. The pattern suggests AI is absorbing more research-oriented traffic while higher-intent demand becomes more prominent.

2025 2024 2023

Exhibit 5

Urgent care search demand and ad impressions increased

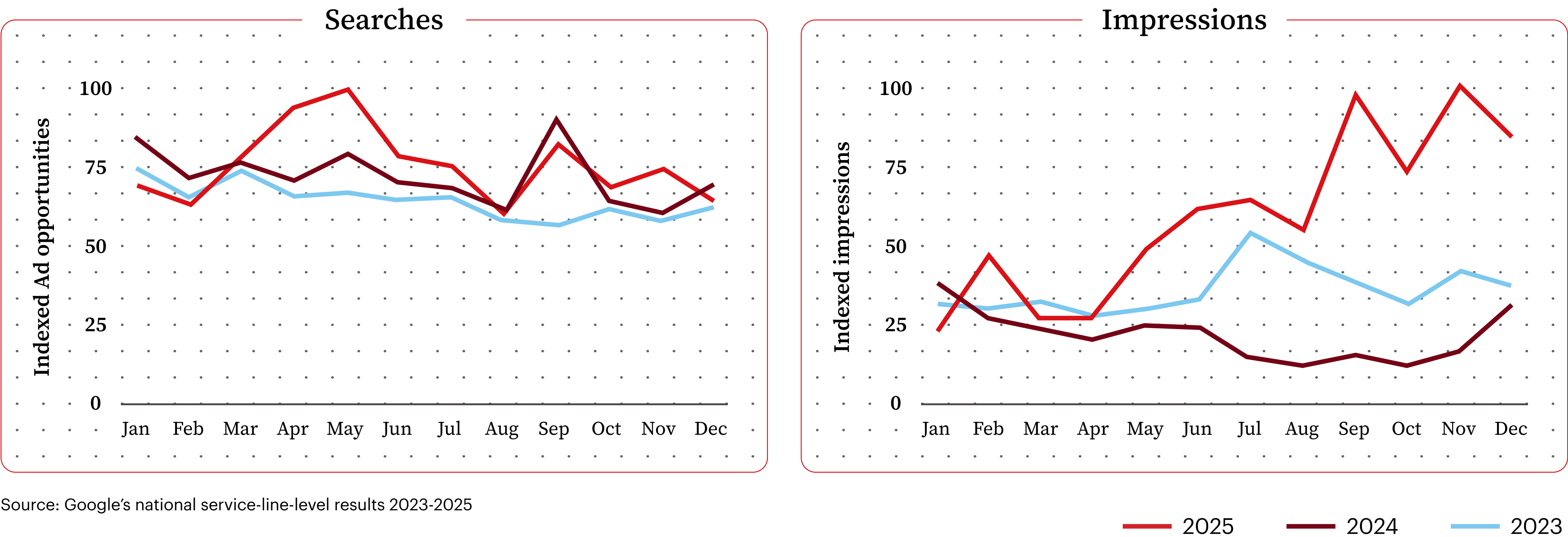


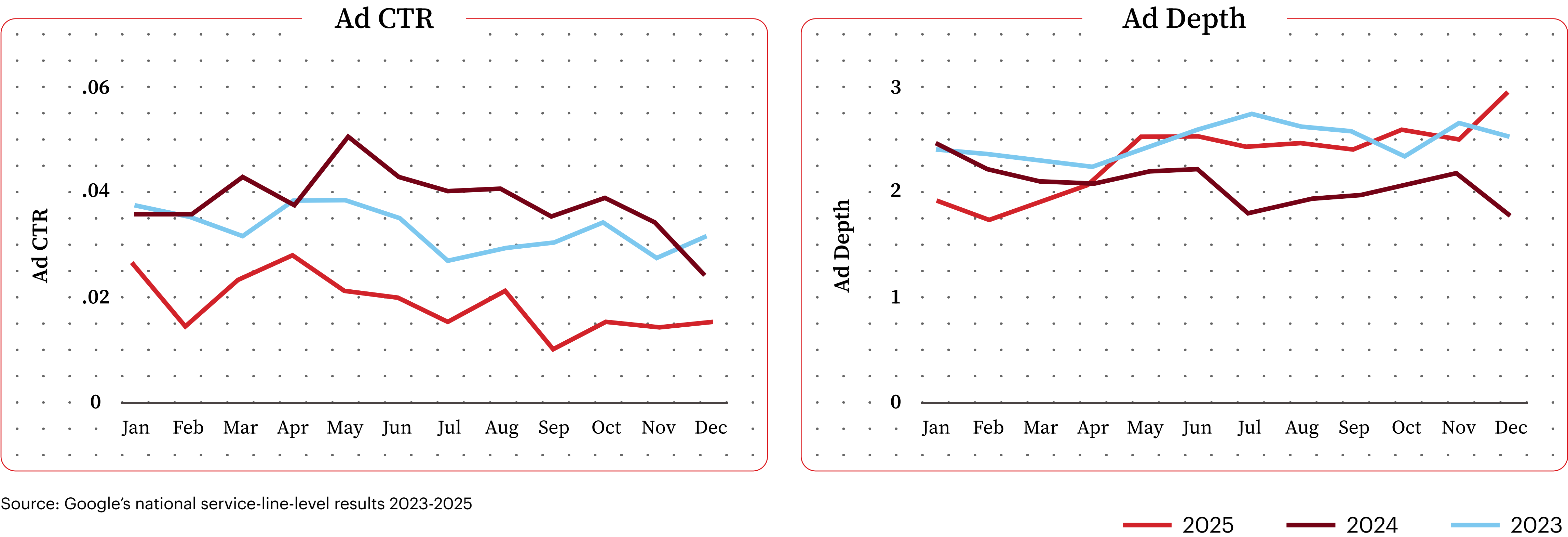
Source: Google’s national service-line-level results 2023-2025

High-intent local behavior still matters, but paid engagement may be fragmenting across ad assets, maps, local listings, and AI-shaped search results.

Exhibit 6

Oncology demand grew while acquisition signals became more expensive and less linear





Source: Google’s national service-line-level results 2023-2025

Specialty care demand is still visible in search, but acquisition signals are harder to read because volume, CTR, cost, and conversion aren’t moving in one clean direction.

Search volume increased across several major service lines in 2025, but clicks didn’t keep pace. AI-assisted search may be absorbing more early-stage research before patients reach provider websites, which makes click volume a weaker proxy for patient demand.

03

Patient acquisition economics now vary sharply by service line

Search performance no longer moves in one direction across the enterprise. Some service lines show rising demand and softer engagement. Others show sharper topic shifts, stronger conversion signals, or more volatile acquisition costs. Health systems need to evaluate patient acquisition at the service-line level because AI-assisted search, paid media behavior, and patient intent affect each category differently.



Exhibit 7

2025-Q1 2026 Service-line performance scorecard

Service Line	Timeframe	Search Growth	Ad Impression Growth	Clicks Change	CTR Change	CPC Change	Ad Depth/ Competition	Conversion/Traffic Patterns	Primary Strategic Implication
Orthopedics & Sports Medicine	Full Year YoY	9%	28%	13%	-12%	-5%	12%	Search intent shifted away from symptom research toward action (clinic names, physician names, brands) due to AI Overviews absorbing broad informational queries. Overall CTR dropped by 12%, but traffic reaching landing pages was significantly more qualified.	Target action-oriented terms (brand, locations, doctors) rather than symptom keywords that are easily answered by AI. Prioritize scheduling-focused post-click experiences.
Mental Health	Full Year YoY	6%	-2%	-7%	-5%	26%	2%	Faced significant “scale tax” pressures with national CPC surging 26% on high-intent terms. Desktop search volume grew (+14%), likely driven by researching older relatives of patients who prefer computer interfaces. Client-specific conversion rates grew by 38% at the end of the year.	Defend budgets against CPC inflation by optimizing bidding toward specific exact match keywords and desktop-oriented audiences. Capitalize on rising conversion rates by targeting higher-intent, pre-qualified traffic.

Section 03: Patient acquisition economics now vary sharply by service line

Service Line	Timeframe	Search Growth	Ad Impression Growth	Clicks Change	CTR Change	CPC Change	Ad Depth/ Competition	Conversion/Traffic Patterns	Primary Strategic Implication
Urgent Care	Q4 2025 YoY	↑9%	↑46%	↑26%	↓-14%	↓-6%	↑28%	Resilient to AI research modes due to local, immediate physical needs (“near me” searches). Over 40% of all ad clicks represent on-SERP engagement (maps, directions, click-to-call) rather than website visits. Conversion rates on click-through traffic to the website exceeded 30%.	Focus ad spend on mobile search, maps, and direct-call extensions to capture immediate local physical needs. Optimize local listings and on-SERP ad extensions to capture the 40%+ searchers who convert without visiting the site.
Cardiology	Q4 2025 YoY	↓-19%	↑17%	↑28%	↑9.4%	↑23%	↑7%	Heavy AI impact has filtered out research-based, lower-intent searches, leaving higher-intent, more expensive traffic. Heart condition screening terms (calcium score) grew 21% in search share, and brand searches surged as patients sought trusted providers.	Pivot budgets to target specific heart screenings and established brand keywords to capture high-intent patients who bypass conversational AI. Maximize visibility on maps and specialist names to secure high-value cardiovascular patient acquisitions.

Section 03: Patient acquisition economics now vary sharply by service line

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Neurology / Neurological Conditions	Full Year YoY	↑9%	↑18%	↑3%	↓-12%	↑11%	↑13%	Neurology patients are highly repetitive searchers of chronic conditions. AI Overviews and AI Mode captured informational research queries, inflating searches and impressions (+18%) but resulting in a steep drop in CTR (-12%), especially on mobile. Symptoms/conditions and surgical queries still represent 45% of search impressions on Unlock clients.	Leverage interactive Health Risk Assessments (HRAs) and nurture sequences to capture chronic symptom searchers seeking concrete action. Filter out low-intent informational traffic on mobile by shifting budget to desktop and applying value-based bidding.
Weight Loss Drugs & Meds	Full Year YoY	↓-11%	↓-7%	↓-12%	↓-5%	↑64%	↑14%	National CPC skyrocketed by 64% due to intense competition (ad depth up 14% to 14.8) for a dwindling set of high-intent keywords as overall search volume fell by 11%. In the second half of 2025, CTR actually rose from July as ad depth dropped from 19 to 10 ads per SERP, but remaining players bid extremely aggressively.	Mitigate extreme CPC inflation by employing Value-Based Bidding (VBB) focused exclusively on qualified clinical enrollments rather than top-funnel clicks. Prioritize ad copy that addresses insurance pre-qualification to maximize conversion efficiency of expensive traffic.

Source: Unlock Health internal Google SEM and client performance data 2025-2026

Section 03: Patient acquisition economics now vary sharply by service line

Service Line	Timeframe	Search Growth	Ad Impression Growth	Clicks Change	CTR Change	CPC Change	Ad Depth/ Competition	Conversion/Traffic Patterns	Primary Strategic Implication
Pediatrics & Children's Health	Full Year YoY	↑7%	↓-13%	↓-6%	↑8%	↑11%	↓-20%	Mobile-centric market where broad informational queries are captured by AI Overviews (causing a 13% drop in ad impressions). However, CTR rose 8% because parents who click are highly targeted, qualified, and motivated to find local pediatric care.	Target near-term provider/facility searches and utilize mobile click-to-call assets to capture parents ready to schedule. Avoid broad pediatric disease/condition information keywords since AI is retaining this traffic.
Oncology / Cancer	Q4 2025 YoY	↑6%	↑323%	↑111%	↓-50%	↓-9%	↑38%	Exploding ad impressions (+323%) driven by Google displaying ads on additional inventory (likely display network) rather than new search queries, which severely eroded overall CTR (-50%). Ad depth rose 38% YoY, while client-specific conversion rates grew by 84% by focusing on exact match terms.	Use strict exact match keyword targeting to prevent budgets from being wasted on broad Google ad placements that dilute click quality. Restructure campaign bids toward proven, HIPAA-compliant down-funnel conversions.
General Health Care Services	Full Year YoY	↑3%	↑21%	↑12%	↓8%	↑8%	↑11%	Highly generic front-door search terms often involve users with lower, less specific scheduling intent. Impressions grew 21% (from AI Overviews and increased competition) but CTR fell 8%. Device trends show mobile conversion rates grew 15% while computer conversion rates fell 22%.	Maximize device UX alignment by making landing pages friction-free for both desktop scheduling and mobile click-to-call conversions. Focus budgets on local provider relationships (PCPs, family medicine) to capture active schedulers.

Exhibit 8

Cost pressure by service line

Service line	CPC change
Weight loss drugs	+64%
Oncology	+60%*
Mental health	+26%
Cardiology	+23%
Weight loss, general	+13%
Neurology	+11%
Primary care	+8%
Urgent care	-6%

Competition is driving cost pressure in highly contested service lines. The weight-loss drug vertical is the most volatile example, with a 64% year-over-year increase in Google Ads national CPC. Oncology saw CPC rise 60% in the second half of 2025, while mental health and cardiology also showed meaningful cost pressure, with CPC increases of 26% and 23%, respectively. The strategic point is practical: budget size matters less when the wrong traffic absorbs spend.

Source: Google’s national service-line-level results 2023-2025. CPC changes are 2025 YoY unless noted.

* Oncology reflects H2 2025 YoY CPC change.

04

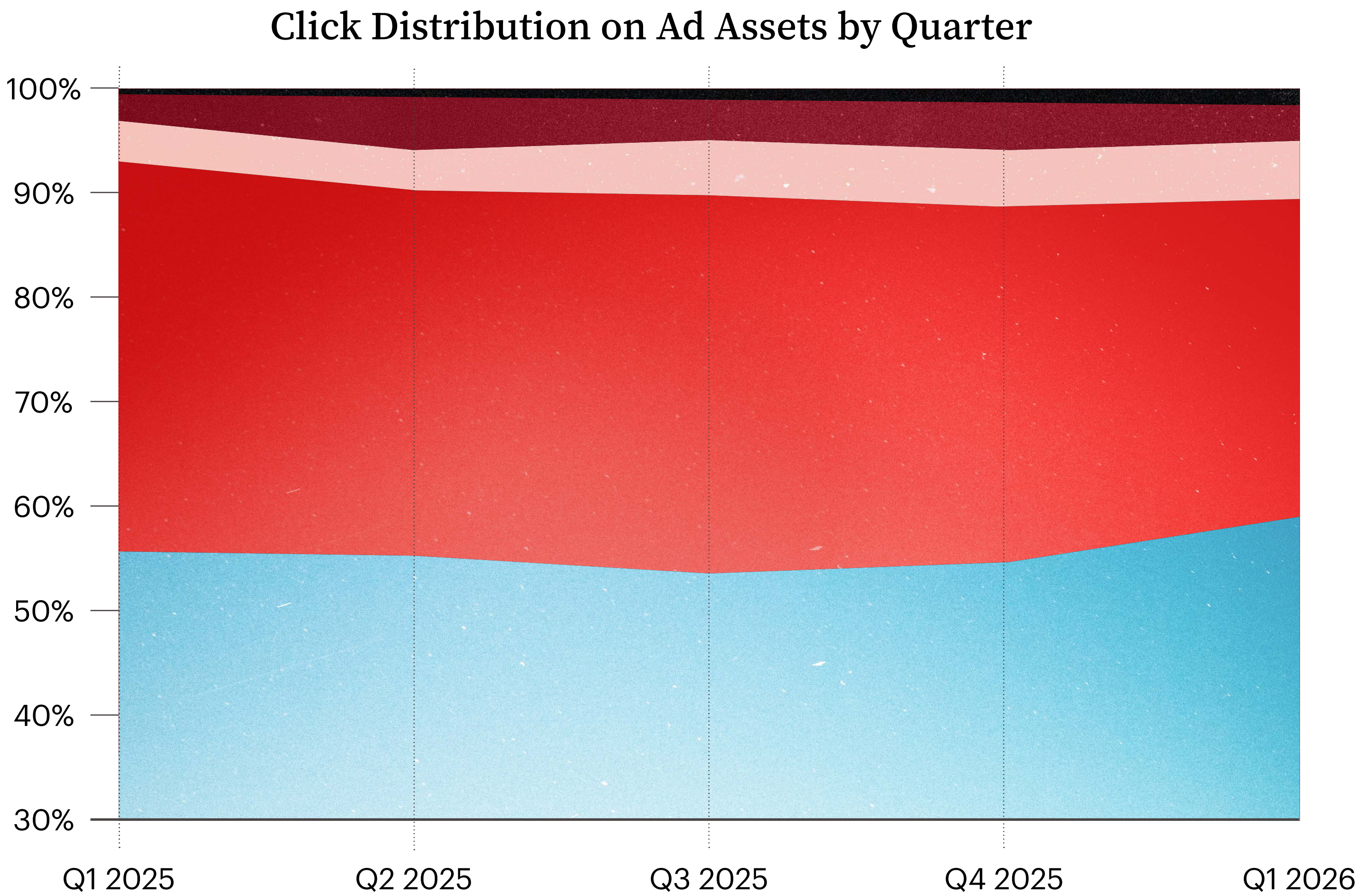
Local and action-oriented demand still behaves differently

Local and action-oriented demand does not behave like research-heavy demand. Urgent care is the clearest example. Patients often search because they need care now, nearby, and with minimal friction. Primary care adds another wrinkle. Device behavior can change the acquisition path, especially when mobile and desktop users convert differently.



Exhibit 9

Urgent care action clicks before the website



In urgent care, meaningful acquisition activity often happens before a website visit. Location details, map clicks, directions, and calls can account for 40% or more of ad clicks, meaning website-only reporting can undercount real patient action.

- Clicks (Maps Pin Clicks)
- Clicks (Driving direction)
- Clicks (Mobile clicks-to-call)
- Clicks (Get location details)
- Clicks (Headline)

Exhibit 10

Primary care device divergence, Q1 2026 vs. Q2 2026

Metric	Computer	Mobile
Searches	Nearly doubled	+68%
CTR	Stable	Fell substantially
Conversion rate	-22%	+15%

Primary care performance moved differently by device. Desktop search volume rose sharply, but conversion rate fell. Mobile search volume also grew, and despite lower CTR, mobile conversion rate improved.

Source: Google’s national service-line-level results 2026

05

Measurement gaps now create patient acquisition risk

The gap between measuring healthcare marketing strategy and organizational revenue continues to be an issue for healthcare marketers. It becomes even more important as AI-assisted search changes which users click, which users convert, and which signals ad platforms use to optimize campaigns. Healthcare marketers need clearer downstream measurement to understand which campaigns are creating appointments, revenue, and service-line growth.

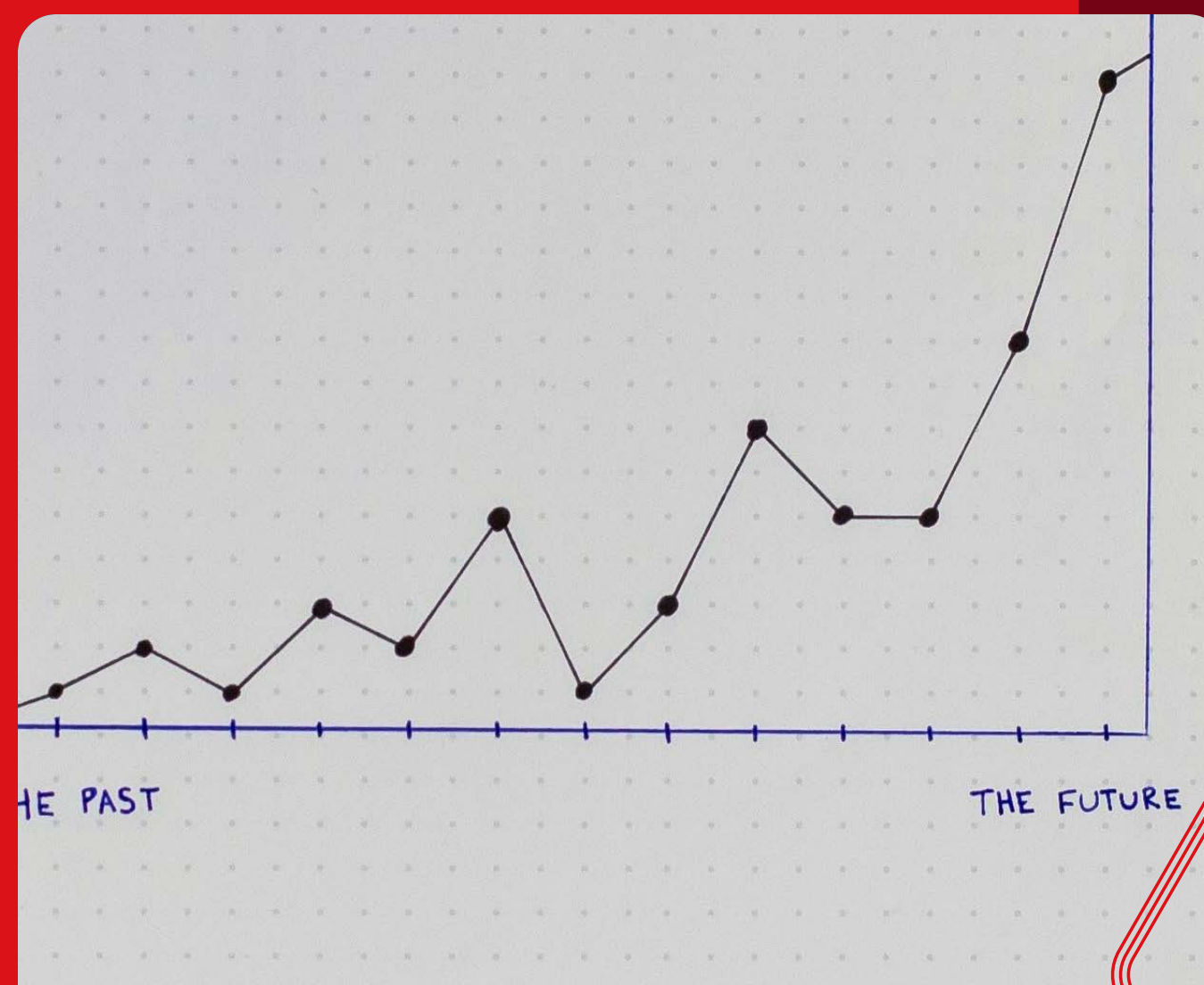


Exhibit 11

Healthcare marketing’s measurement gap, 2026

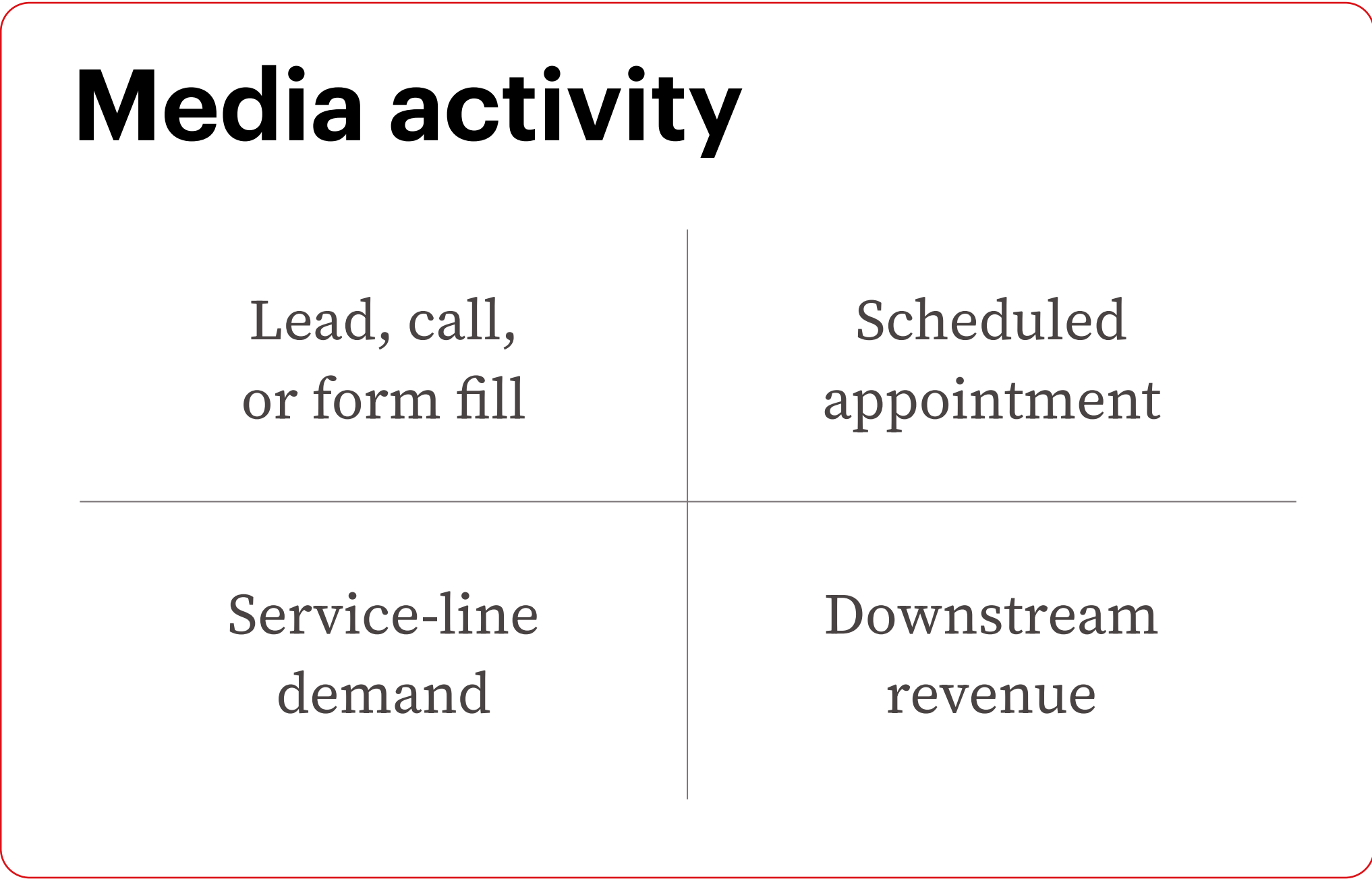


Source: Freshpaint. The State of Healthcare Marketing in 2026: A Measurement Reckoning.

Effective measurement architecture connects media activity to meaningful business signals, including leads, calls, form fills, scheduled appointments, service-line demand, and downstream revenue.

Exhibit 12

What acquisition measurement needs to connect



Learn more: Unlock Health. Reporting isn’t enough: How healthcare marketing analytics drives enterprise value. May 20, 2026.

06

Leaders need a diversified, measurable, privacy-safe response

Relying solely on the standard search engine results page is a high-risk strategy in a zero-click world. Search remains critical, but the acquisition system has to diversify across paid search, paid social, YouTube, Demand Gen, programmatic video and audio, maps, calls, HRAs, and other action-oriented tools. Instead of adding channels for the sake of adding channels, the task is to give each channel a clear job and connect that job to outcomes.

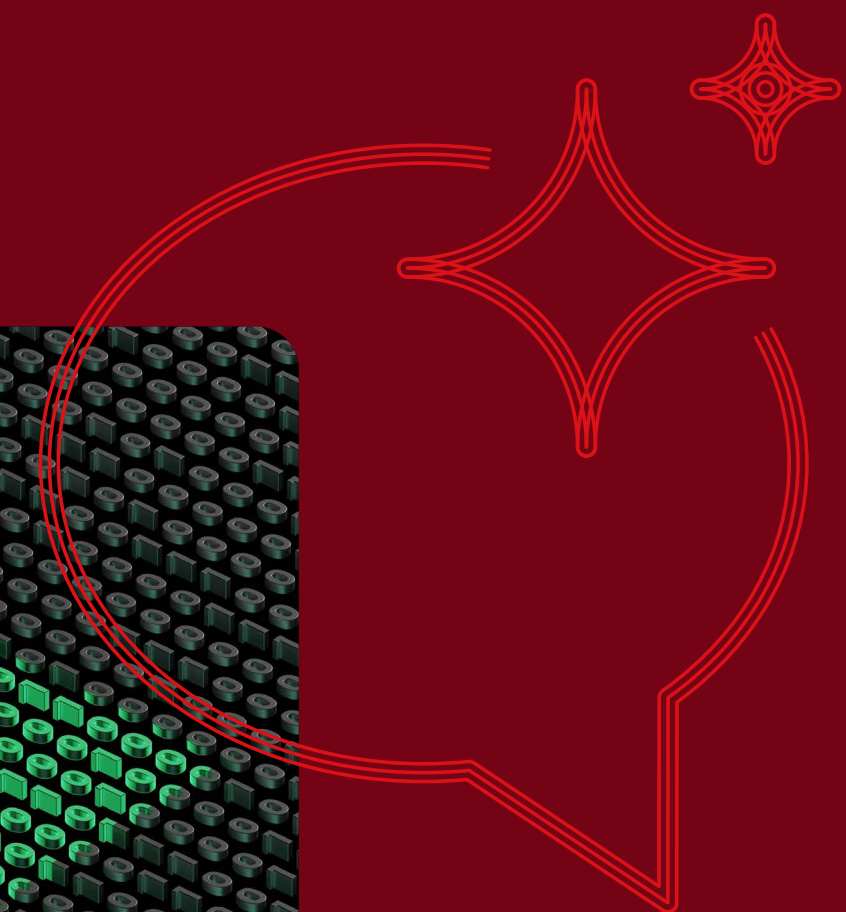
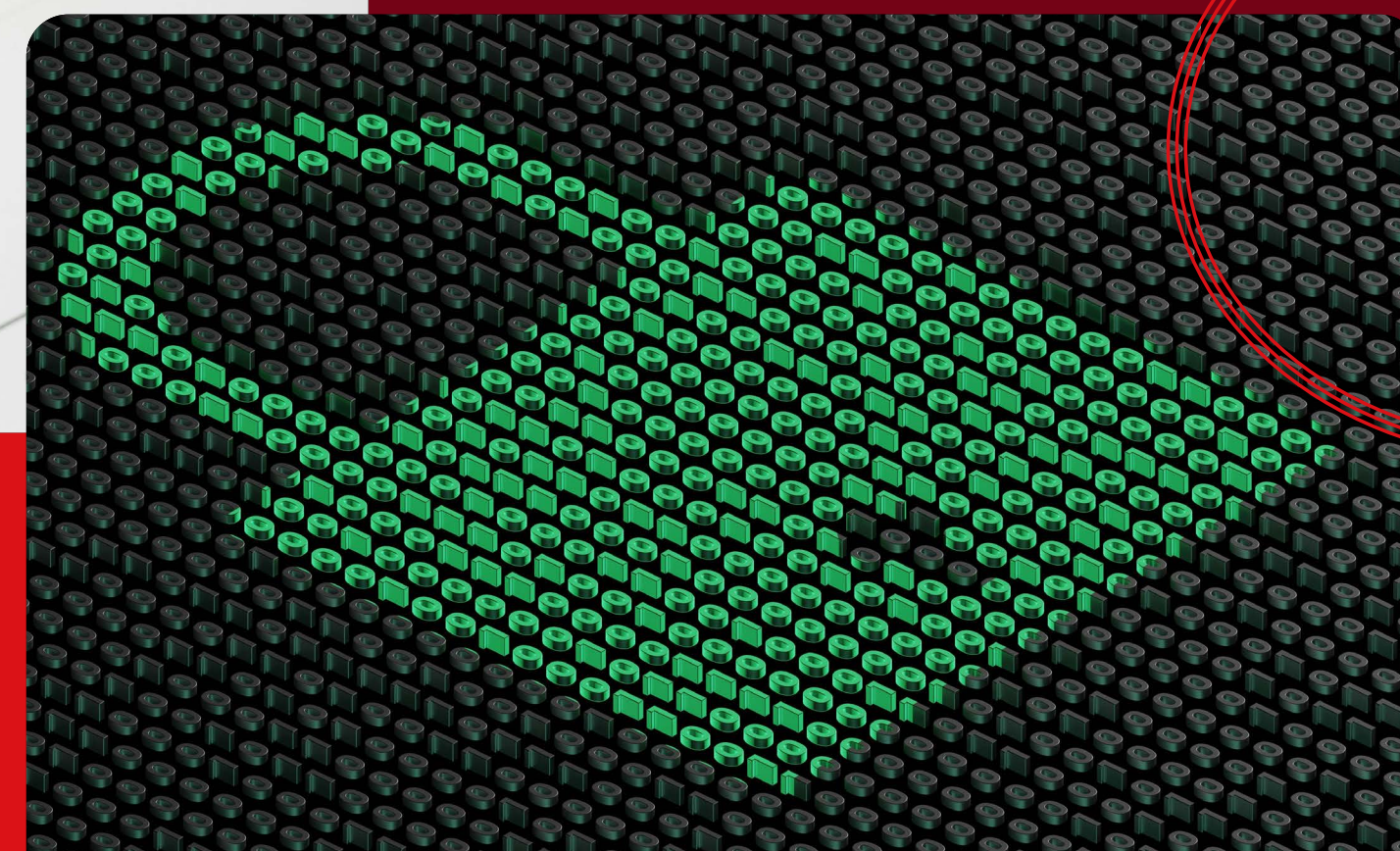


Exhibit 13

Healthcare channel adoption vs. investment concentration, 2026

Channel	Organizations using the channel	Organizations with concentrated investment in the channel
Paid search	95%	62%
SEO	86%	49%
Email	97%	37%
Programmatic	81%	37%
Paid social	69%	19%

Privacy is the other constraint shaping channel mix. Healthcare marketers tend to invest where measurement feels safer and compliance is easier to manage. But as patient journeys spread across AI-influenced search, video, social, maps, calls, HRAs, and other touchpoints, health systems need privacy-first infrastructure that can support diversification without exposing sensitive data or weakening performance signals.

Source: Amsive | Freshpaint. The State of Healthcare Marketing in 2026.

What leaders should do **next**

Rebuild reporting around qualified patient actions, not click volume alone.

Segment service-line strategy by intent, cost pressure, device behavior, and conversion pathway.

Treat calls, directions, map actions, HRAs, scheduling starts, and booked appointments as part of acquisition performance.

Use privacy-safe measurement to connect ad spend to patient outcomes wherever possible.

Define each channel's job across the journey, from AI-influenced discovery to action.

Prepare for AI Mode and AI-assisted search with richer optimization signals, stronger landing experiences, and more flexible campaign architecture.

