

Patient Affordability in 2025: Why Rising Costs Matter More Than Ever

For years, Americans have been concerned about the cost of healthcare. In 2025, that concern has become a crisis for many families. Even as inflation cools in other parts of the economy, healthcare costs continue to rise—stretching household budgets and forcing families to make difficult trade-offs between their health and their finances.

The Growing Cost Burden

According to the American Medical Association, U.S. health spending reached **\$4.9 trillion in 2023**—a 7.5% increase from the year before, and a growth rate faster than the overall economy. That spending translates to nearly **\$14,570 per person**, a staggering figure that many families cannot afford. (Martin, Hartman, Washington, & Catlin, 2025)

Out-of-pocket costs are also on the rise. The Centers for Medicare & Medicaid Services (CMS) reported that patient spending grew by more than 7% in 2023 alone. (CMS, 2025) That means higher premiums, deductibles, copays, and bills at the pharmacy counter—even for families with insurance. For many, these added expenses come at the expense of groceries, rent, or savings.

Inflation Hits Health Care Harder

While the overall Consumer Price Index has leveled off somewhat in recent months, **medical inflation continues to outpace general inflation**. The Health System Tracker from KFF found that medical care prices rose 3.3% in June 2024, compared to 3.0% for all consumer prices. Hospital services and nursing home costs are climbing even faster. (Rakshit, Wager, Hughes-Cromwick, Cox, & Amin, 2024)

That difference may seem small, but it adds up quickly when medical care makes up such a large portion of a household budget. As a result, healthcare becomes more expensive year after year, even when other costs are stabilizing.

Families Are Making Hard Choices

The consequences of these rising costs are very real. A 2025 survey from KFF found that nearly **half of U.S. adults say it's difficult to afford health care**. One in four reported that someone in their household had trouble paying for care in the past year. (Sparks, Lopes, Montero, Presiado, & Hamel, 2025) To cope, families are delaying doctor visits, skipping recommended treatments, and even cutting pills in half to make prescriptions last longer.

The Commonwealth Fund revealed that more than half of adults now spend **at least 10% of their household budget** on healthcare costs. For some, especially those with marketplace coverage or lower incomes, that number climbs to **25% or more**. (Collins,

Roy, & Masitha, 2023) That means one out of every four dollars is going to medical expenses—a level of financial strain that would be unsustainable for any family.

The Ripple Effect of Delayed Care

Skipping or postponing care may seem like a short-term fix, but it creates long-term problems. Delayed preventive care often leads to more serious (and more expensive) conditions down the line. When patients can't afford to manage chronic conditions like diabetes or hypertension, they're more likely to end up in the emergency room, driving costs even higher.

This cycle is bad for patients, families, and the healthcare system as a whole. What begins as a budget decision at the kitchen table often becomes a public health issue with far-reaching consequences.

Why Patient Affordability Matters

The affordability crisis isn't just about dollars—it's about access. Families who cannot afford care are forced to choose between their health and other necessities. The reality is that healthcare in the U.S. is not just expensive; it's financially devastating for too many households.

For providers, this growing affordability gap also creates challenges. When patients can't pay, practices struggle to maintain consistent cash flow. Providers face the tough choice of discounting services (sometimes in ways that may not be compliant) or losing patients altogether.

Moving Toward Solutions

There is no single solution to the affordability crisis, but there are strategies that can help:

- **Transparent Pricing** that allows patients to understand their costs upfront.
- **Discount Medical Plan Organizations (DMPOs)** help patients legally access lower fees without jeopardizing provider compliance.
- **Education for Patients and Providers** on navigating high deductibles and maximizing available resources.

As Harvard public health experts note, protecting families from catastrophic health costs requires both policy reform and practical solutions at the clinic level. (Sobotko, 2024) Providers who take proactive steps to address affordability not only protect their patients but also strengthen their own practices.

The Bottom Line

Healthcare affordability is no longer a distant policy issue—it's a pressing, everyday reality for millions of families. Inflation, rising medical costs, and growing out-of-pocket expenses are forcing patients to delay care and stretching household budgets to the breaking point.

For providers, understanding these pressures isn't optional; it's essential. By offering compliant and affordable care, providers can meet patients where they are, ensure access to needed services, and build practices that thrive even in today's economic climate.

We've put together an in-depth white paper on compliance, affordability, and strategies providers can use to protect both their patients and their practice.

Download the White Paper: [Four Overlooked Secrets of Successful Chiropractic Practices](#)

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