

Health Literacy: Why It Matters and What You Can Do

Greater Philadelphia Business Coalition on Health
October 8, 2015



Susan Cosgrove, MPA, CPHQ, Project Manager,
Team Leader of Health Literacy Initiatives

Health Care Improvement Foundation

Health Care Improvement Foundation

- An independent, nonprofit organization that drives high-value health care through stakeholder collaboration and targeted quality improvement initiatives
- Focused on health literacy since 2010, with funding from the Pennsylvania Department of Health
- Lead organization in the formation of the Pennsylvania Health Literacy Coalition



THE HEALTH CARE IMPROVEMENT FOUNDATION
Building Partnerships For Better Health Care

“How Does an HSA Work?”

Your HSA is combined with an IRS-qualified High Deductible Health Plan (HDHP). An HDHP typically offers lower insurance premiums in exchange for higher deductibles. You can use your HSA to pay for many of your plan expenses, including doctor and hospital visits, copayments, prescriptions, and medical equipment. Find a complete list of eligible expenses in *Publication 502* at [irs.gov](https://www.irs.gov).

You can use your HSA funds to pay for nonqualified expenses, but the dollars are subject to ordinary tax plus a 20 percent penalty. This penalty does not apply if you are over age 65 or disabled, but ordinary income tax may still apply.

“Dental Questions for Employer”

For the bitewing x-rays, 1 in 12 months for age 14 and older, is that for both sides of the mouth?

- Yes.

Is there a difference between posterior teeth vs. 1st and 2nd molars?

- Yes bicuspid or premolars are also considered posterior teeth

Basic restorative—not within 12 months of previous placement? (What does this mean? And what is covered?)

- Fillings are eligible for coverage once per tooth, per 12 months

Design of Materials

Limits and Maximums	Amounts Members Are Responsible For:	
	DO NOT APPLY BENEFIT PERIOD MEDICAL DEDUCTIBLE	
	Participating Providers	Non-Participating Providers
	\$2,000 per member \$4,000 per family	
	Retail Pharmacy (up to a 30-day supply)	Specialty Pharmacy (up to a 30-day supply)
BENEFIT	Covered in full after deductible	Covered in full after deductible
Covered in full after deductible	Covered in full after deductible	Covered in full after deductible
Covered in full after deductible	Covered in full after deductible	Covered in full after deductible
Covered in full after deductible	Covered in full after deductible	Covered in full after deductible
Covered in full, waive deductible		
CVS Caremark National Pharmacy Network		
BENEFIT		Not covered
\$0 copayment	\$0 copayment	Not covered
\$0 copayment	Covered in full after deductible	Not covered
Covered in full after deductible	Covered in full after deductible	Not covered
Covered in full after deductible		
Open		
BENEFIT		
Mandatory Generic Substitution - In addition to the coinsurance/copayment, the member pays the difference between the brand drug and generic drug price (when there is a generic drug alternative) regardless of whether the prescribing physician requests that the brand drug be dispensed.		
The dispensing of maintenance covered drugs for up to a 90 day supply is available through Mail Service or at CVS Pharmacies.		
For most specialty medications, coverage is available only when dispensed by Accredo Health Group, Inc.		
Applicable to selected drugs. Refer to the Capital BlueCross formulary or go to www.capbluecross.com .		
Applicable to selected drugs. Refer to the Capital BlueCross formulary or go to www.capbluecross.com .		

this program are separate from any deductibles, coinsurance and copayments required under any other health plan that is not a part of this program. CVS/Caremark is an independent member of Capital BlueCross.

whether you want to limit our use, disclosure or both; and if you want the limits to apply, for example, disclosures to you.

Initial Communication: You have the right to request that we contact you about protected health information in person or at a certain location. For example, you can ask that we contact you at home or only by mail. To request confidential communications, you must make your request in writing. Your request must specify how or where you wish to be contacted. We will honor all reasonable requests as long as it permits us to collect and pay claims under your plan.

Right to Amend: You have the right to request that we amend your health information. Your request must be in writing, and it must specify why the information should be amended. We may deny your request if we did not create the information you want amended or if there are other reasons. If we deny your request, we will provide you with a written explanation. You may respond with a statement of disagreement. If your request to amend the information was denied, you may request to amend the information, we will make every effort to inform others, including people you name, of the changes to include the changes in any future disclosures of your information.

Right to a Copy of This Notice: You have the right to a copy of this notice, and you may ask us to give you a copy at any time. You may obtain an electronic copy of this notice at our website, www.UnitedConcordia.com.

Right to Complain: If you have information about our privacy practices or have a complaint, please contact us using the information listed below.

If you believe that we may have violated your privacy rights, you may contact us with a decision we made about access to your health information or in response to a request you made about the use or disclosure of your protected health information. We will communicate with you in confidence by mail. If you contact us at an alternative location, you may complain to the U.S. Department of Health and Human Services. You may also submit a complaint to the U.S. Department of Health and Human Services with the address to file your complaint. We will protect the privacy of your health information and will not retaliate in any way if you choose to file a complaint with the U.S. Department of Health and Human Services.

Quality of Copying

Flexible Spending Accounts:

- You can elect to participate in a Flexible Spending Account each year - and you must sign up each year. Enrollment does not automatically carry forward. Once from one plan year to the next. Once you have begun to contribute, you can change your election ONLY if you have a change in family status, as defined by the Internal Revenue Service. A family status change includes marriage, divorce, birth or adoption of a child or the death of a dependent.
- Because you are actually affecting your taxable income, the IRS regulations very clearly define rules for taking advantage of this benefit. You must keep these rules in mind when you are planning your contributions and actually using the Flexible Spending Accounts.
- Flexible Spending Accounts are governed by the "use it or lose it" rule. The IRS regulations state that you must forfeit any contributions you do not use for eligible expenses incurred within the current plan year. Because of this rule, we caution you to estimate your expenses conservatively.
- If you participate in more than one Flexible Spending Account category, you can receive reimbursement only from the account (or category) for which the contribution was designated. In other words, if you set aside money in both Health Care and Dependent Care Accounts, you cannot be reimbursed for a dependent care expense from your Health Care Flexible Spending Account.
- Be aware that when you reduce your taxable income, you are also reducing your Social Security contributions. This reduction of Social Security (FICA) contributions may affect future retirement or disability benefits.

Rules that govern Section 125 plans may vary. See Publication #602.

DUAL INCOME HOUSEHOLD

Paul and Jenny are both employed and have two children. Their combined annual income is \$78,000. They also decide to use Jenny's Premium Conversion Account to help pay for their dependent medical expenses. The Dependent Care Reimbursement Account helps pay for their daycare expenses. If one of their children is in school, they also use the Health Reimbursement Account to pay for orthodontic expenses, which are not covered by their plan. By participating in both Flexible Spending Accounts, Jenny increases their income by \$268.82.

FULL FAMILY

Mike, 57, and his wife Linda have two grown children who no longer live with them. Mike's annual salary is \$98,000 and he uses the Premium Conversion Account to pay for his monthly premium contributions for health care coverage for himself and his wife. He also uses the Health Care Reimbursement Account to cover their annual medical and dental deductibles. By using the accounts, his monthly savings equals \$128.01 as illustrated below.

	\$9,334		\$8,167	
	with flex	without	with flex	without
	\$185.00	—	\$140.00	—
	\$125.00	—	\$200.00	—
	\$400.00	N/A	N/A	—
	\$5,624.00	\$8,167.00	\$7,827.00	—
	\$1,687.20	\$2,450.10	\$2,348.10	—
	\$430.24	\$424.78	\$598.77	—
	\$3,506.56	\$5,092.12	\$4,880.13	—
	—	\$140.00	—	—
	—	\$200.00	—	—
	—	N/A	—	N/A
	\$3,986.56	\$4,752.12	\$4,880.13	—
	\$268.82		\$128.01	

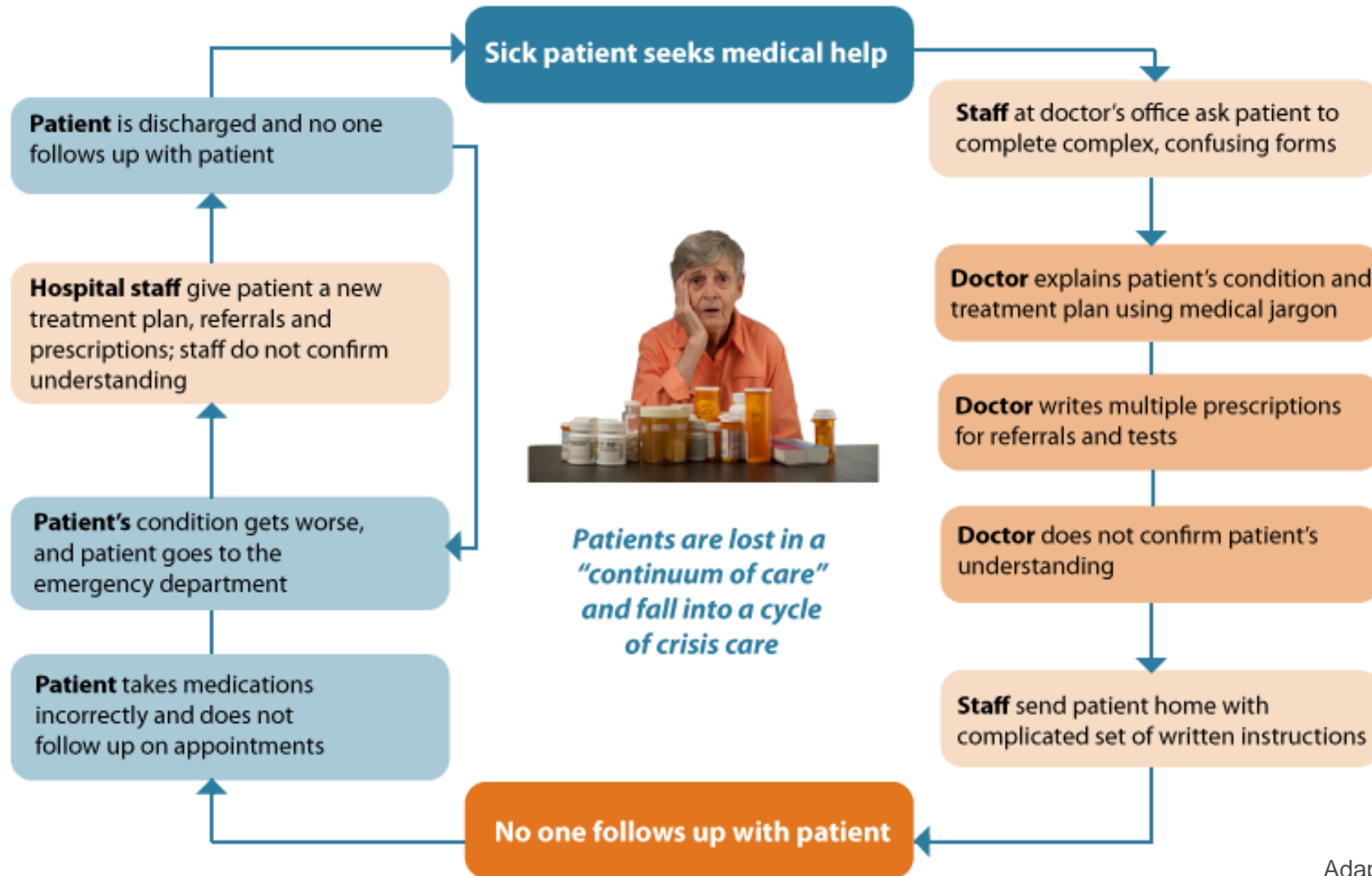
Only 14% of U.S. workers can correctly define common insurance terms like deductible, copay, coinsurance and out-of-pocket maximum.

The healthcare process is complex...



Inspired by the "Continuum of Confusion," American Medical Association Foundation, 2007

...and communication challenges make it even harder to navigate.



What is health literacy?

Health literacy is the ability to **find**, **understand**, **evaluate**, **communicate**, and **use** health information to make **informed decisions** about your health.



From <http://healthliteracy.com/tips.asp?PageID=10117>

Contributing Factors

Personal & Individual Factors

- Experience with health system
- General literacy
- Cultural and language factors
- Stress and emotional factors
- Aging
- Fatigue, illness, medications

System & Situational Factors

- Complexity of information
- How information is communicated
- Signage, directions, navigation
- Time

You Can't Tell By Looking.

Certain groups are more likely to show signs of low health literacy...

You are at greater risk if you are:

- Black
- Hispanic
- An older adult
- A non-native English speaker

Only **10% of adults** have the skills needed to use health information that is routinely available in healthcare facilities, retail outlets, and the media.

What about the other 90%?



...but almost everyone is at risk.

Not having the needed skills can lead to:

4x

- Health care cost = More \$\$\$

6%

- More trips to the hospital

2

- More days in the hospital

Health literacy is a stronger predictor of individual health status than age, income, employment status, education level or racial/ethnic group.

Health Literacy: A National Priority

The Affordable Care Act, the National Action Plan to Improve Health Literacy, and the Plain Writing Act all address health literacy as a systems-level challenge.

WEB FIRST

By Howard K. Koh, Donald M. Berwick, Carolyn M. Clancy, Cynthia Baur, Cindy Brach, Linda M. Harris, and Eileen G. Zerhusen

New Federal Policy Initiatives To Boost Health Literacy Can Help The Nation Move Beyond The Cycle Of Costly 'Crisis Care'

ABSTRACT Health literacy is the capacity to understand basic health information and make appropriate health decisions. Tens of millions of Americans have limited health literacy—a fact that poses major challenges for the delivery of high-quality care. Despite its importance, health literacy has until recently been relegated to the sidelines of health care improvement efforts aimed at increasing access, improving quality, and better managing costs. Recent federal policy initiatives, including the Affordable Care Act of 2010, the Department of Health and Human Services' National Action Plan to Improve Health Literacy, and the Plain

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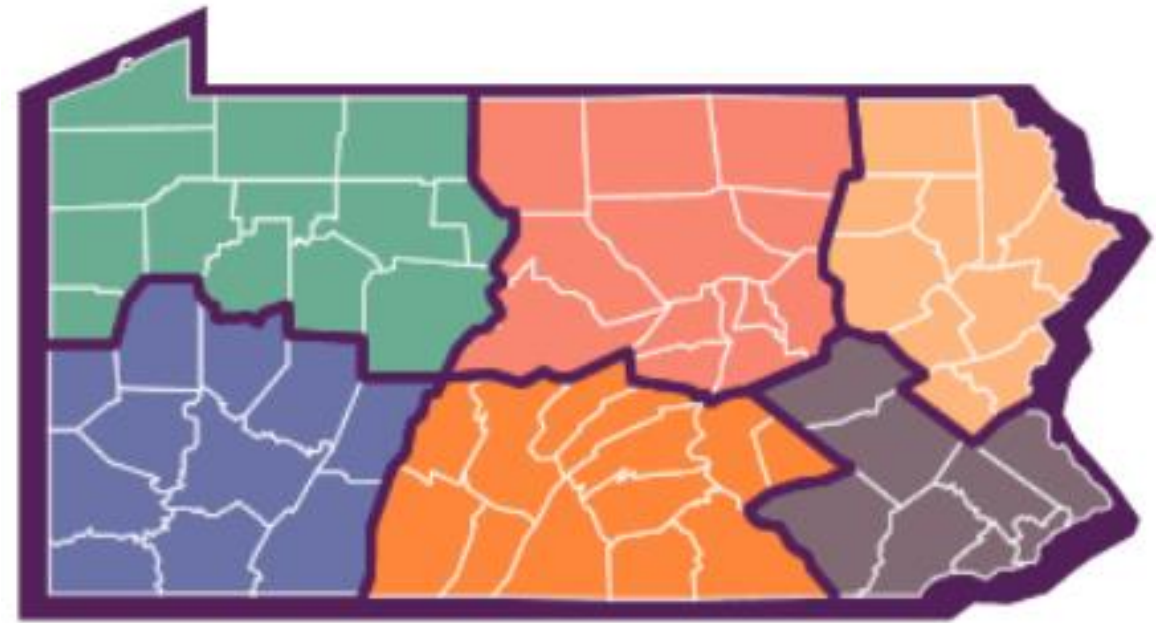
Donald M. Berwick is the former administrator of the Centers for Medicare and Medicaid Services (CMS), in Washington, D.C.

Carolyn M. Clancy is director

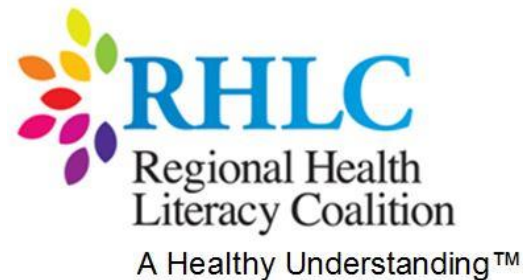
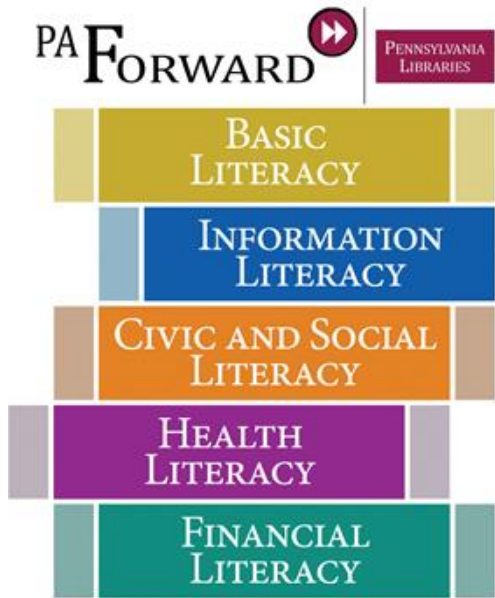
Health Literacy: A Priority for Pennsylvania

The Pennsylvania Health Literacy Coalition is working to create a culture of health literacy in the commonwealth.

Funding provided by the Pennsylvania Department of Health.



Health Literacy is Already Happening



And many others:

- Hospitals, health systems, practices, clinics
- Community organizations
- Researchers and academic institutions
- Advocacy organizations
- Patients and consumers
- Government

the Foundation
for Enhancing Communities

What's next for the Coalition?

- Host meetings so people can talk to and learn from each other.
- Form work groups to focus on key topics.
- Write mission, vision, and action plan.
- Create a shared agenda.

Get involved! Sign up for the coalition mailing list to receive updates, or commit to participation by submitting your Commitment Form.

How will you be a health literacy hero?

“Develop health literacy initiatives for limited-English proficient patients.”

“Listen to the needs of the community and be a bridge to provide them with the resources they need most.”

“Bring health literacy to the forefront of hospital administration and collaborate with nursing education.”

“Engage leadership in plain language initiatives.”

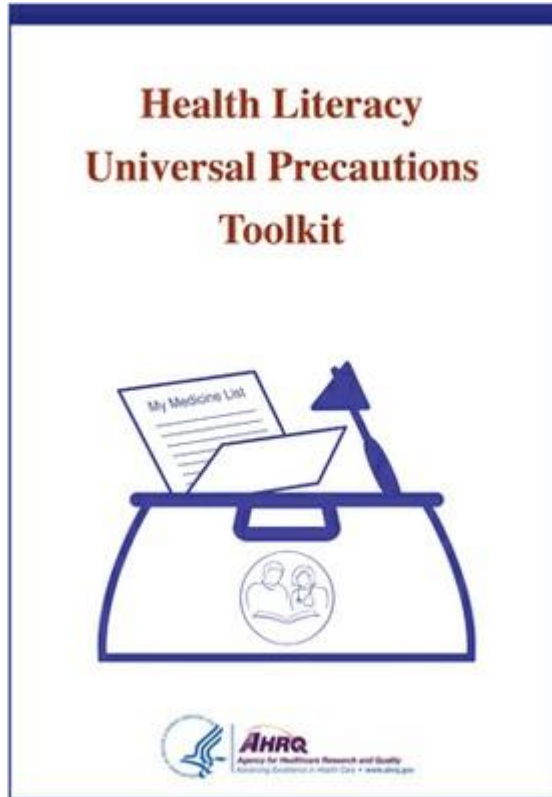
“Include the patient’s voice.”

What can I do to address health literacy needs?

How can I tell if someone doesn't understand?

- Incomplete or inaccurate forms
- Asks to read documentation at home
- Slow reading speed
- Asking others to assist with reading
- “Forgetting glasses”
- Has no questions

Create a Blame Free, Shame Free Environment.



- Screening has the potential for harm and is currently **not recommended**.
- Create an environment where employees feel comfortable asking questions—a blame free, shame free environment.
- Making information easier to understand will benefit **everyone**.

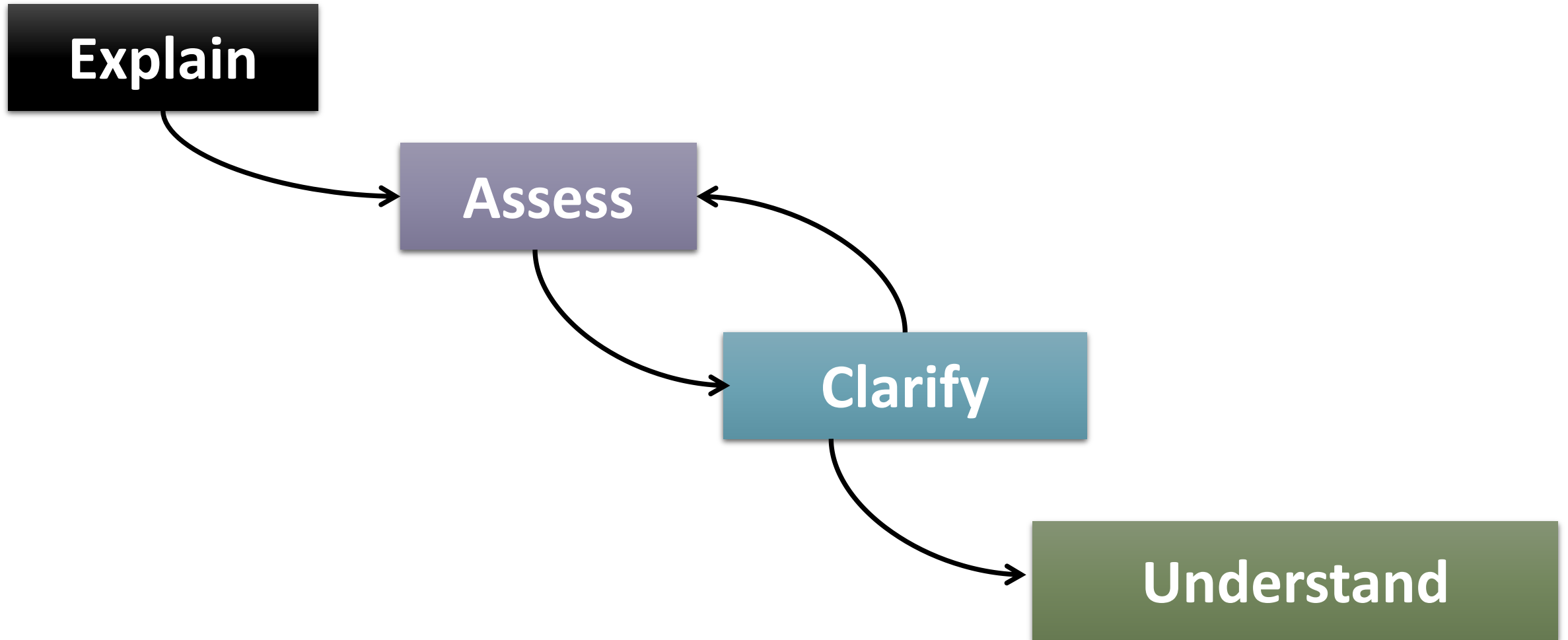
Confirm understanding.

Teach-back is one communication technique you can use to confirm understanding—but it's **not a test** of the consumer.



**Always Use
Teach-back!**

Confirm understanding.



Encourage employees to participate in their healthcare.

Prepare for your visit:



Make a list of questions or concerns



Gather medications to bring with you or make a list



Be ready to take notes

Encourage employees to participate in their healthcare.

Free resources to help you ask questions and record answers

- **Be More Involved in Your Health Care:** tips to use before, during, and after your medical appointment to make sure you get the best possible care
- **My Questions for This Visit:** use to list the questions you want to ask during your medical visits.

Become a Health Literate Organization.

Leadership makes health literacy integral to mission, structure, and operations	Integrates health literacy into planning and evaluation
Prepares the workforce to be health literate and monitors progress	Includes populations served in the design, implementation, and evaluation of health information and services
Meets the needs of a wide range of populations while avoiding stigmatization	Uses health literacy strategies in communications and confirms understanding
Provides easy access to health information and navigation assistance	Designs and distributes content that is easy to understand and act on
Addresses health literacy in high risk situations	Communicates clearly what health plans cover and what individuals will have to pay for services

Collaborate for good communication.

PATIENT-CENTERED CARE⁵



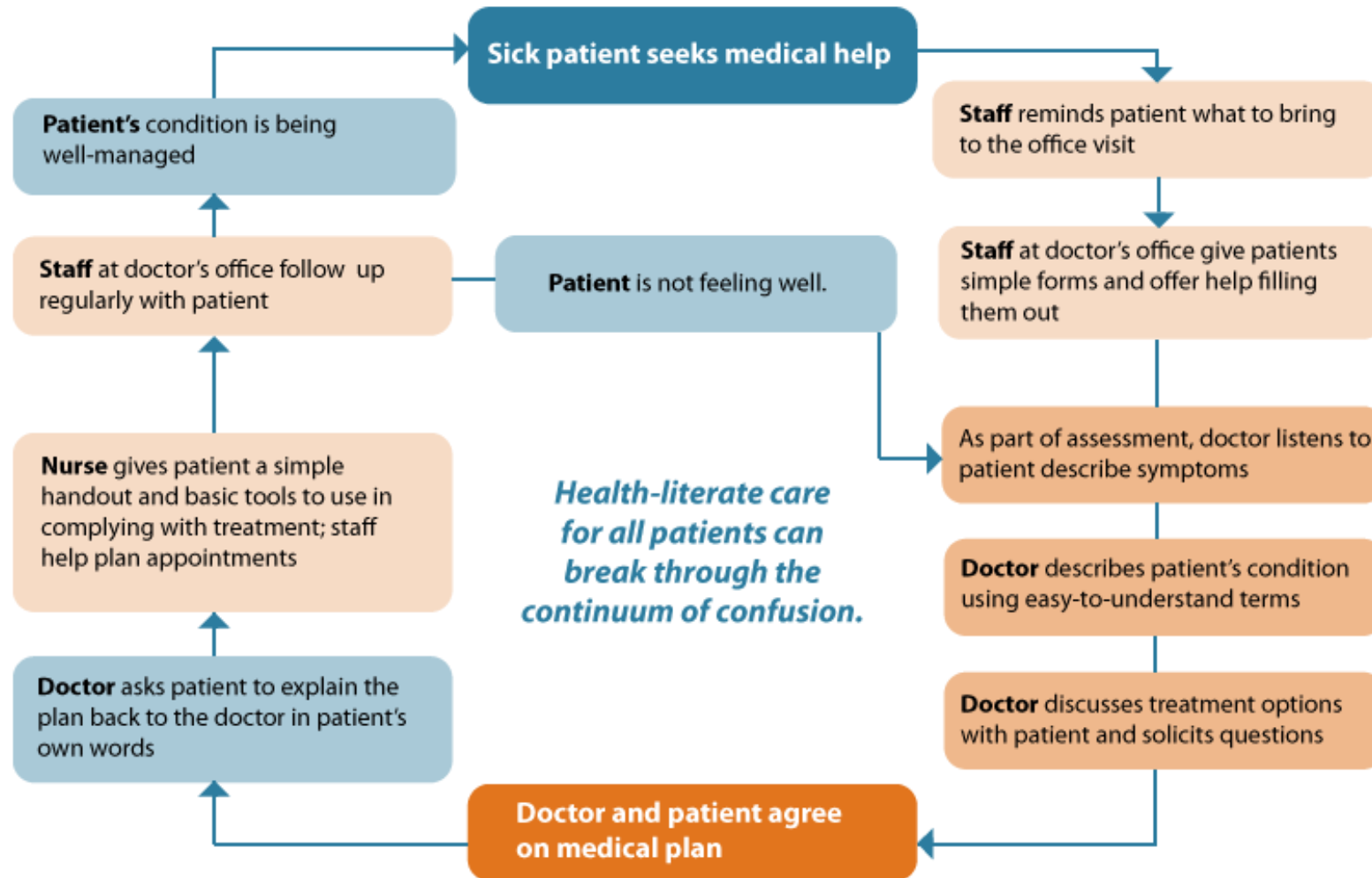
Health literacy and good communication go beyond any one person, profession, program, or organization.

Collaborate for good communication.

Collaborate with your audience, colleagues, and community.



Together, we can improve health understanding!





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Resources

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