

# America's Health Insurance Plans' Response to Health Literacy

Institute of Medicine Roundtable on  
Health Literacy Workshop on Measures of Health Literacy

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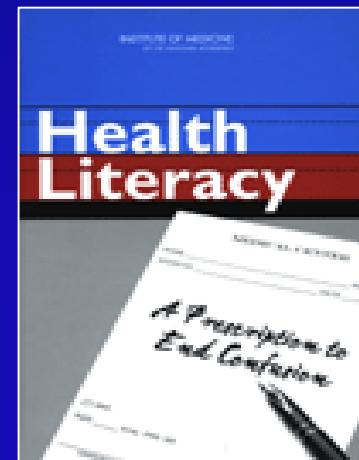


# Overview of Session

- **Why should health plans care?**
- **America's Health Insurance Plans (AHIP) health literacy activities**
- **Pharmacy Intervention for Limited Literacy (PILL) study**
- **Improving health literacy friendliness of health plans**
- **Where do we go from here?**

# *Why Health Plans?*

- Chronic disease care and self-management
- Patient-provider communication
- Patient safety and health-care quality
- Access to health care and preventive services
- Provider time limitations
- Consumer-directed health care
- Health expenditures

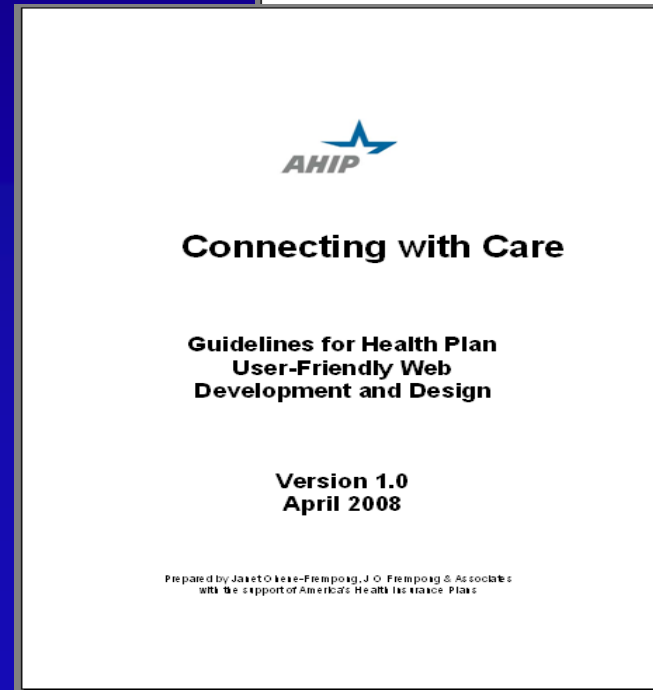


# AHIP Health Literacy Activities

- Created Health Literacy Task Force
- Ongoing discussions with the ACP Foundation
- Present case studies and other information sharing during monthly Task Force conference calls
- Webinar on reader and user friendly web design for health plans, April 2008
- Sponsored an all day training session in June 2008
- Transformed training session into a series of three webinars

# Checklist and Guidelines

- Checklist of steps to apply principles of clear health communication to web-based materials, including Personal Health Records
- Guidelines for developing and designing user-friendly health plan Web sites



# AHIP Webinars on Health Literacy

## *Three-Part Virtual Seminar on Health Literacy:*

- **January 22: Health Literacy Overview and Steps for Implementing Your Own Program**
- **February 26: Starting Up and Advancing Your Company's Health Literacy Program**
- **March 26: Health Literacy Campaigns  
Case Studies from the National Health Insurance Plans**

<http://www.ahip.org/virtual/healthliteracy>



# **AHIP Board Proposed Key Steps Toward Creating a Culture of Clear Health Communication**

- **Create responsibility for health literacy at an appropriate level in the organization**
- **Adopt a consistent approach to clear health communication**
- **Provide training in clear health communication for staff who prepare written communications for members and interact with members directly**
- **Adopt a target reading level for written consumer communications, and review the content of documents to ensure that they meet the target**

# **AHIP Health Literacy Activities (continued)**

**Collaboration with Emory University on  
developing, piloting and evaluating health  
literacy friendliness assessment**

# Pharmacy Intervention for Limited Literacy: The PILL Study



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# Study Purpose

- **Health literacy intervention: 3-P Approach**
- **Determine the effect of health literacy intervention on:**
  - **Medication refill adherence**
  - **Costs**
  - **Secondary outcomes:**
    - **Self-reported adherence**
    - **Understanding of medication instructions**
    - **Patient satisfaction**
    - **Pharmacist satisfaction**
- **Assess effect of health literacy on success of intervention**

# Setting

- **Intervention site**
  - **Grady Memorial Hospital outpatient pharmacies**
  - **High volume: 5,000 Rx per day, 3<sup>rd</sup> in nation**
- **Control site: Dekalb Grady clinic**
- **High burden of co-morbidities**



# Study Phases

**Phase 1:**

**Assessment of the pharmacy**

**Phase 2:**

**Implementation of intervention**

**Phase 3:**

**Outcome evaluation**

# Why Conduct a Pharmacy Health Literacy Assessment?

To better meet the needs of limited-literacy patients by:

- Raising staff awareness
- Detecting barriers to effectively using pharmacy services
- Identifying opportunities for improvement

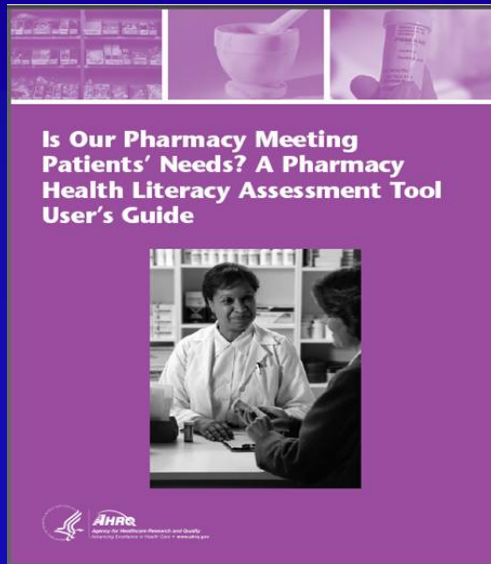
# What Does a Pharmacy Health Literacy Assessment Involve?

- **Part 1: Pharmacy assessment tour**  
Adapted from Literacy Alberta's *Health Literacy Audit*
- **Part 2: Pharmacy staff survey**
- **Part 3: Patient focus groups**

**Three-part approach limits bias**

**Full guide available at:**

***<http://www.ahrq.gov/qual/pharmlit/>***



# Part 1: Assessment Tour

- **Physical environment and staff interactions**
- **Identify existing barriers in these areas:**
  - **Promotion of services**
  - **Print materials**
  - **Clear verbal communication**
- **Should be completed during both busy and less busy times in the pharmacy**
- **Pharmacy staff should not be aware of assessment**
- **Takes 20-30 minutes**

# **Part 1: Assessment Tour**

## **Who Should Conduct the Assessment?**

- **Trained, objective assessors who are:**
  - **Familiar with principles of clear health communication**
  - **Not pharmacy staff or patients**
  - **Able to blend in with patients who use the pharmacy**
- **At least two assessors per pharmacy**
- **Should be trained together**

# Part 2: Survey of Pharmacy Staff

- **Why survey all staff?**
  - Staff members help create the environment
  - Offer different perspectives
- **Evaluates staff opinions of pharmacy's sensitivity to the needs of limited-literacy patients in 3 areas:**
  - Print materials
  - Clear verbal communication
  - Sensitivity to health literacy
- **Takes about 20 minutes**

# Part 3: Pharmacy Patient Focus Groups

Ask patients about their personal experiences in four areas:

- Physical environment
- Care process and workforce
- Paperwork and written communication
- Culture

# Pharmacy Assessment: Results

- **Many strengths identified**
- **Main areas for improvement:**
  - **Literacy-sensitive counseling**
  - **Pharmacy flow, signage, wait times**
  - **Few take-home materials available**
  - **Few services for limited English proficiency**
  - **Printed information not easy to understand**

# Moving Beyond the Research

## *Improving Health Literacy Friendliness of Health Insurance Plans*

# Improving Health Literacy Friendliness of Health Plans

- **Goal: to modify the PILL assessment tool and its applicability to the needs of health insurance plans**
- **Plans for expansion of the tool:**
  - **Adapt the current health literacy assessment tool for application in health insurance plans**
  - **Test new assessment tool in a variety of health plan organizations**
  - **Disseminate the tool for widespread use in assessing health literacy friendliness of health insurance plans.**

# Improving Health Literacy Friendliness of Health Plans

- **Collaboration with AHIP**
- **Opportunity to work with diverse health plans throughout the country**
- **Timeline:**
  - **Adapt/develop tool: Nov 08-March 09**
  - **Pilot test: April 09**
  - **Implement: May-June 09**
  - **Develop and distribute report: July-Sept 09**

# Proposed Assessment Areas

- Member information
- Member services/Communication Personnel
- Web navigation
- Forms
- Nurse call line
- Nurse case/disease management

# **Inventory of Health Plan Health Literacy Activities**

- **Assess current state of health literacy among health plans**
- **Brief, 10 question, web-based survey**
- **Invited 41 plans to complete survey by e-mail (phone follow-up)**
- **January-February 2009**
- **27 of 41 plans completed survey to date (66% response) – 29 individuals**

# Inventory Results

	Yes	No
<b>Have you heard of the term “health literacy”?</b>	<b>100%</b>	
<b>Does your company currently have a policy or program in place to address health literacy?</b>	<b>69%</b>	<b>31%</b>

# Type of Job Title for Person Responsible for Health Literacy

- **Media, Public Affairs, Communications, Marketing, Editing – 7**
- **Health Education, Promotion, Cultural, Health Equity – 6**
- **Management – 6**
- **Project, Program Coordinator, Manager (vague) – 3**
- **Quality/Healthcare Improvement – 2**
- **None, N/A - 3**

# Rating Company Support for Health Literacy

<b>Poor</b>	<b>3%</b>
<b>Fair</b>	<b>28%</b>
<b>Good</b>	<b>59%</b>
<b>Excellent</b>	<b>10%</b>

# Funding of Organization's Health Literacy Programs

<b>Health Literacy Department</b>	<b>4%</b>
<b>Each Department</b>	<b>25%</b>
<b>Unsure</b>	<b>29%</b>
<b>Other</b>	<b>43%</b>

# Responsibility for Carrying Out Health Literacy Programs/Policies

<b>Health Literacy Department</b>	<b>4%</b>
<b>Each Department</b>	<b>32%</b>
<b>Unsure</b>	<b>11%</b>
<b>Other</b>	<b>54%</b>

# How are Health Literacy Efforts Focused?

<b>Universal health literacy precautions</b>	<b>50%</b>
<b>HL efforts targeted to members with low HL skills</b>	<b>14%</b>
<b>Unsure</b>	<b>14%</b>
<b>Other</b>	<b>21%</b>

# Examples of Programs/Materials for Members with Low HL Skills

- Specific reading levels for all materials
- Staff training
- Simplified consent forms
- Simplified health education materials
- Plain language toolkit
- Revised enrollment form
- Interpreter translates materials

# Assessment of Member Understanding

- Yes – 11
  - Surveys, focus groups, informally at member benefit education classes
- Sort of – 4
  - Health plan satisfaction survey, advertising understanding
- No / Don't know – 9

# Where Do We Go From Here?

- **Infuse clear health communication into all prevention and chronic care disease management programs**
- **Integrate disciplines and approaches within organizations**
- **Collaborate with other health care partners and communities**
- **Document success**