



MyHealth**GPS**
Healthy Starts Here



Health Literacy in a Care Coordination Context

Presented by:

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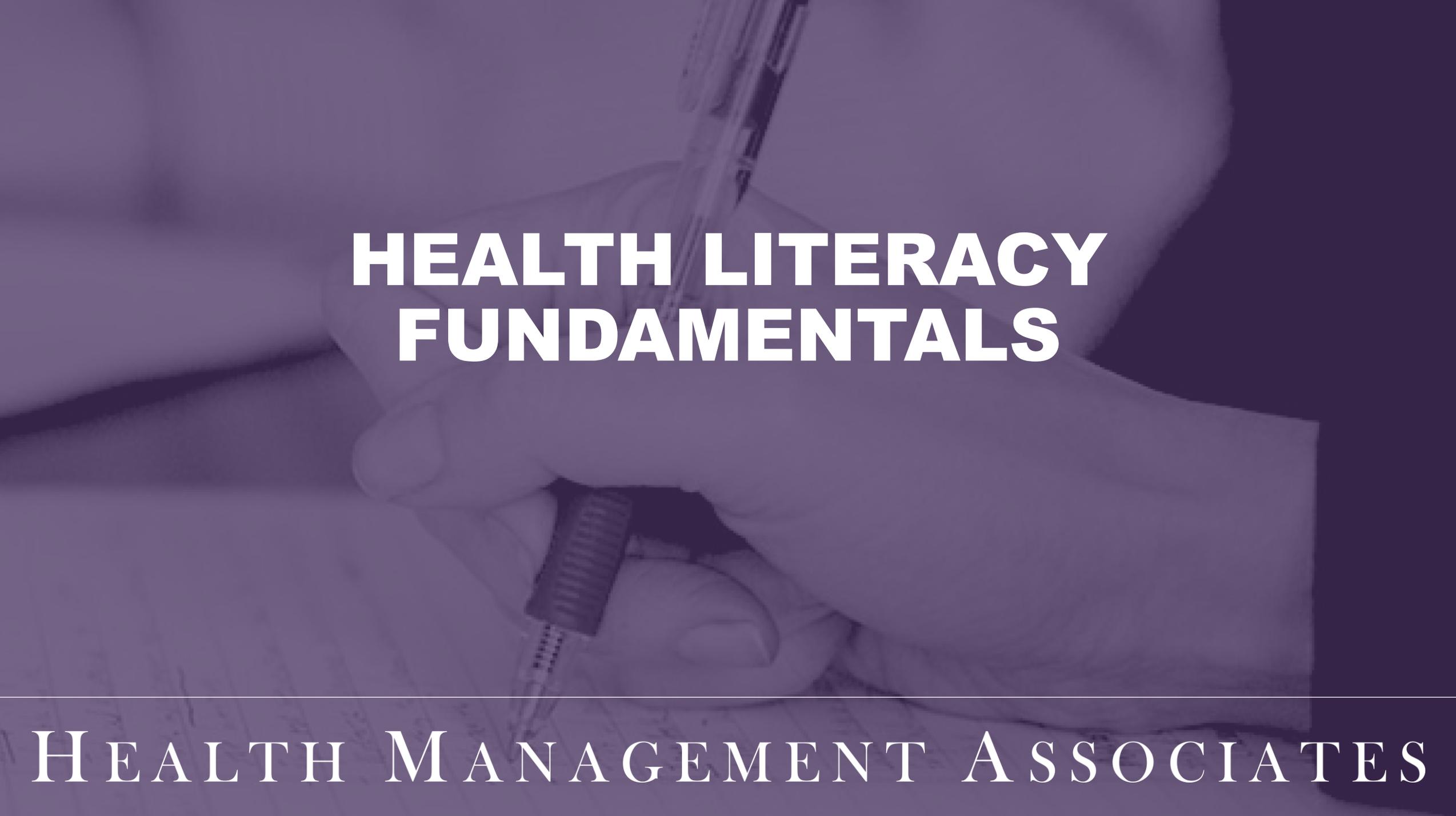
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■ CONFLICT OF INTEREST DISCLOSURE STATEMENT FOR CME

- + Health Management Associates (HMA) is a national research and consulting firm contracted by the Department of Health Care Finance (DHCF) to provide coaching and individualized assistance to My Health GPS (MHGPS) practices.
- + Disclosures:
 - + Jeffrey Ring received an honorarium/fee for participating in a speakers bureau for Merck Pharmaceuticals, but does not receive any other type of compensation from the company.

- + Health Literacy Fundamentals**
- + Assessment and Detection**
- + Interventions, Tools, and Tips**
- + Health Literacy in the MHGPS Program**
- + Q&A and Closing**

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HEALTH LITERACY FUNDAMENTALS

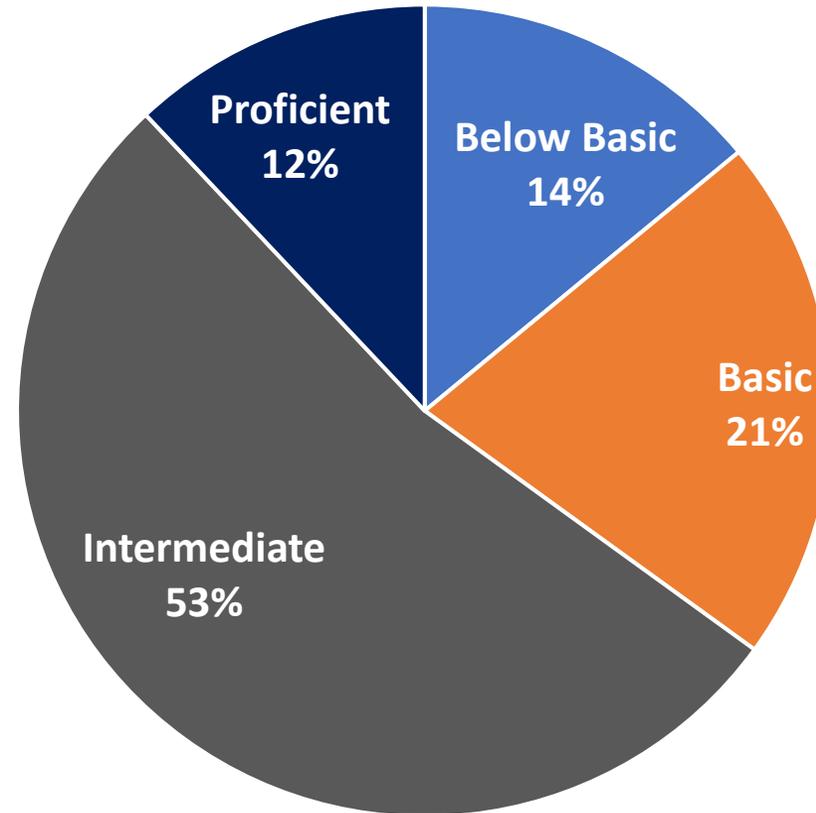
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Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.



Image source: [Innovations in Health Communications](#)

Health Literacy Levels, U.S. Adults (2003)



Source: U.S. Department of Education, Institute of Education Sciences, 2003 National Assessment of Adult Literacy. <https://health.gov/communication/literacy/issuebrief/>

Based on your experience, in what ways is health literacy linked to quality and safety with the My Health GPS patient population?



Low health literacy can result in:

Medication errors

Low rates of
treatment
compliance

Reduced use of
preventive services
and unnecessary
ER visits

Ineffective
management of
chronic conditions

Longer hospital
stays and increased
hospital re-
admissions

Poor
responsiveness to
public health
emergencies

Higher mortality

Source: Center for Health Care Strategies, Health Literacy Fact Sheet

■ POLLING QUESTION 1

What are some of the biggest health literacy challenges and issues that your MHGPS patients experience? (Select all that apply)

- + Low English proficiency
- + Unable to read
- + Difficulty reading and understanding health-related materials
- + Difficulty calculating numbers, e.g., for taking prescriptions
- + Difficulty communicating with or understanding health care professionals
- + Cultural barriers or miscommunications
- + Other

**What are the barriers to good health literacy that
your practice and/or patients experience?**



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ASSESSMENT AND DETECTION

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■ ASSESSING AND DETECTING HEALTH LITERACY CHALLENGES

- + Use a health literacy universal precautions approach.
- + Conduct assessments in private settings, and with sensitivity and respect, to ensure that patients do not feel ashamed, inferior, or like “targets of study.”
- + Distinguish low literacy skills from cognitive decline, developmental disability, or mental health disorder.
- + Differentiate English proficiency from health literacy.
- + Use a combination of informal and formal methods to gain a nuanced understanding of individuals’ abilities.



■ INDICATORS OF POOR HEALTH LITERACY

- + Inability to name medications, explain purpose or dosing
- + Difficulty providing coherent, sequential medical history and explaining concerns
- + Incomplete registration forms
- + Lack of follow-through on tests or referral
- + Frequently missed appointments
- + Returning for the same complaint
- + Repeated use of statements “I forgot my reading glasses,” or “I’m too tired to read”

■ POLLING QUESTION 2

Does your practice assess health literacy as part of the MHGPS biopsychosocial assessment?

- + We assess health literacy as part of the MHGPS biopsychosocial assessment
- + We do not assess health literacy as part of the MHGPS biopsychosocial assessment, but we assess health literacy in other ways
- + We do not assess health literacy at all

■ INCORPORATING HEALTH LITERACY INTO MHGPS ASSESSMENTS AND CARE PLANS

- + Health literacy should be part of the Educational Needs component of the MHGPS biopsychosocial assessment.
- + The care plan should be developed in a language or literacy level that the beneficiary can understand.
- + Ask questions to assess health literacy levels.

■ EXAMPLE ASSESSMENT QUESTIONS

- + Medical terms are complicated and many people find them difficult to understand. Do you ever get help from others in reading prescription labels, completing forms, or using health materials?
- + A lot of people have trouble reading and remembering health information. Is this ever a problem for you?
- + How confident do you feel in your ability to understand and communicate with doctors about your health? Are you able to understand what they tell you? Do you feel comfortable asking questions?
- + What do you rely on most to learn about health issues? Everyone has a unique source. TV? Radio? Internet? Friends and family?
- + Everyone learns and understands things differently. I want to make sure we know how to best communicate with you in a way that feels good. How do you feel when you receive written materials?

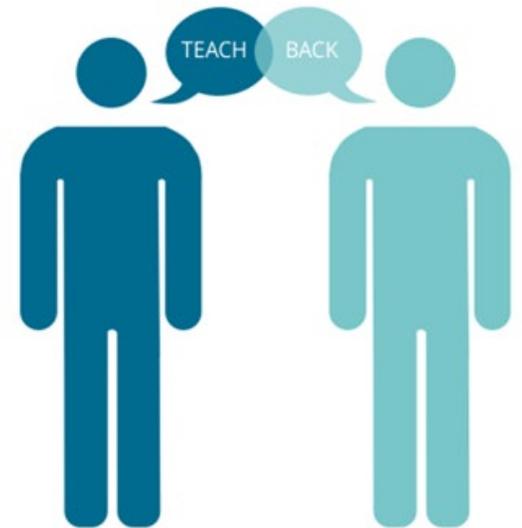
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HEALTH LITERACY TOOLS AND TIPS

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■ THE SKILLS OF TEACH-BACK

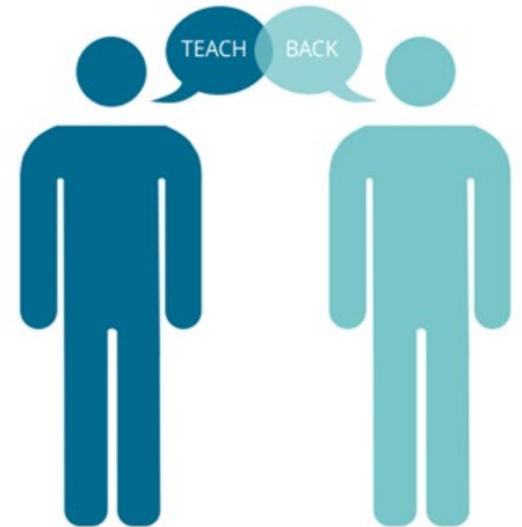
- + The *teach-back* method, also called the *show me* method, is a communication confirmation method used to confirm whether a patient (or caregiver) understands what is being explained to them, often regarding a treatment plan.
- + *Teach-back* and shared decision-making will actually take less time (It may take 2-3 min. when you are skilled)



■ THE SKILLS OF TEACH-BACK

- + Caring voice and attitude
- + Comfortable body language and eye contact
- + Plain language
- + Ask patient to explain back, using their own words
- + Use non-shaming, open-ended questions
- + Strive for open-ended questions
- + Motivational Interviewing

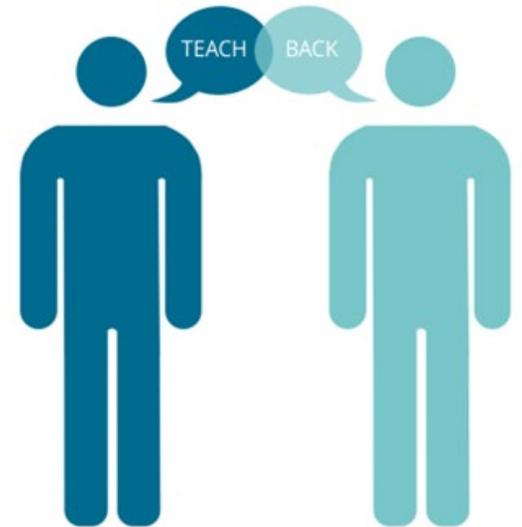
www.teachbacktraining.org



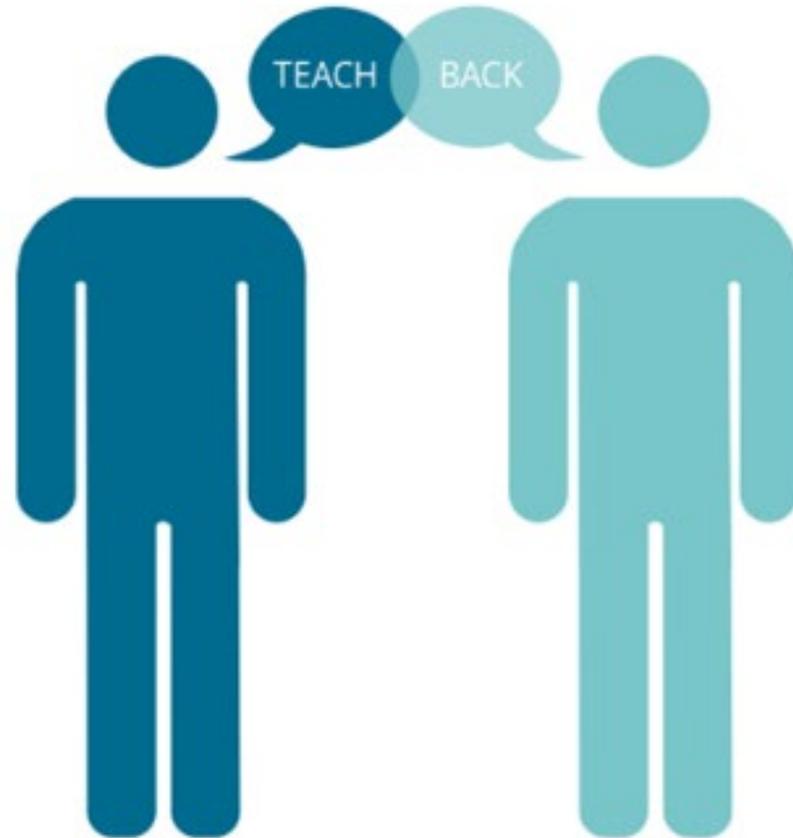
■ THE SKILLS OF TEACH-BACK

- + Emphasize that the responsibility to explain clearly is on you, the provider
- + If the patient is not able to teach back correctly, explain again and re-check
- + Use reader-friendly print materials to support learning
- + Document use of and patient response to teach-back.

www.teachbacktraining.org



TEACH-BACK PRACTICE: AN EXERCISE PLAN



How would you explain this in plain language?

Your BMI is 40, which may contribute to health problems.

How would you explain this in plain language?

Your BMI, or body mass index measures body fat stored in your body. If you have a high BMI (over 30) your extra body fat may cause health problems. Your BMI is 40 which is higher than 30 and something that I would like to talk with you about, if that is OK.

How would you explain this in plain language?

Your HbA-1c is at 9, indicating that your diabetes is not well controlled.

How would you explain this in plain language?

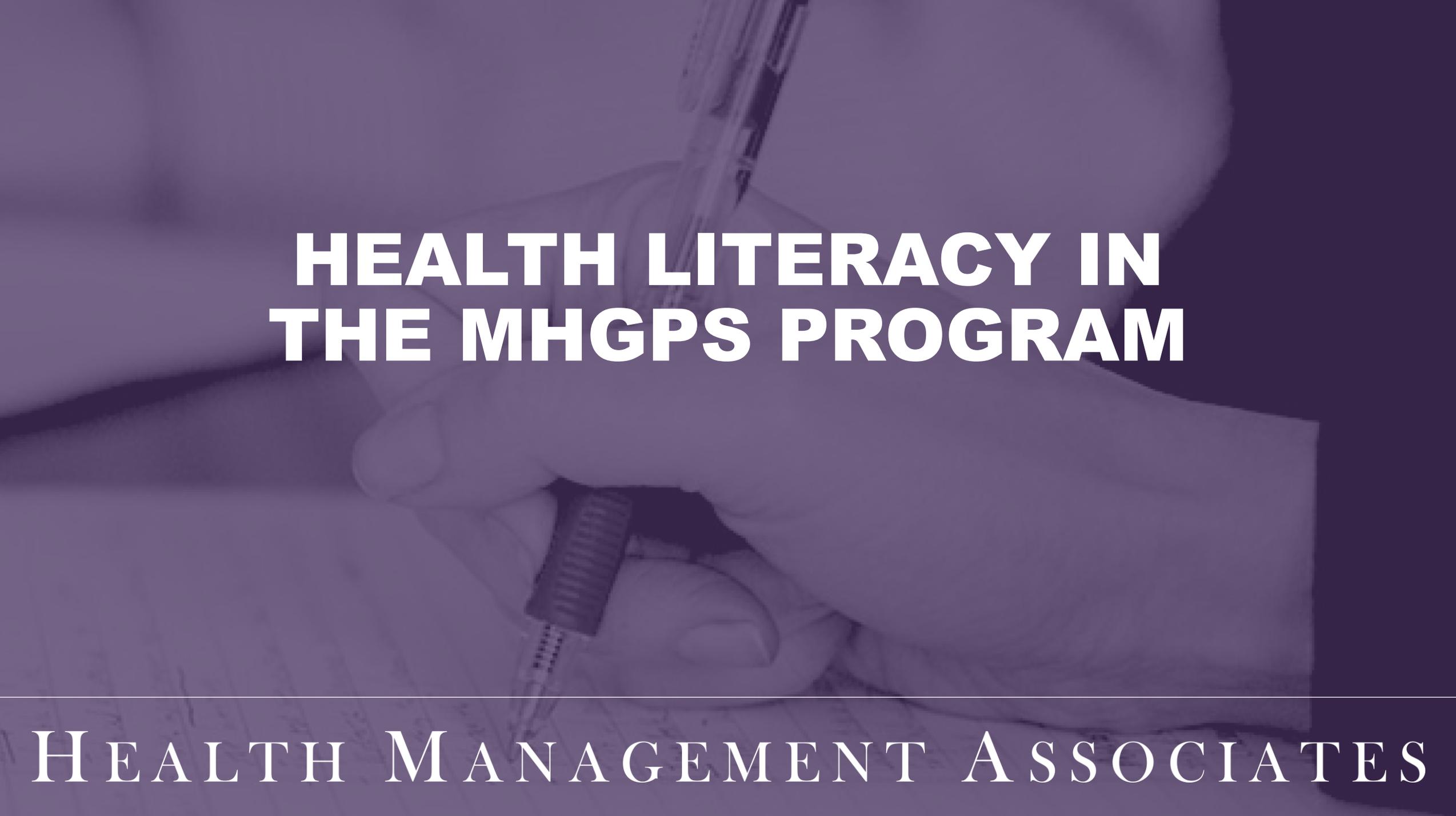
I have the results of your HbA1c blood sugar test. Diabetes is a disease where you have too much sugar in the blood. Less than 6 is a good blood sugar level. Your blood sugar test came back higher at 9 so let's work together to get your blood sugar at a good level if OK with you.

How would you explain this in plain language?

Your PHQ-9 of 20 indicates that your depression has not resolved.

How would you explain this in plain language?

Thank you for completing the Patient Health Questionnaire (PHQ-9) today. Your score of 20 makes me concerned about your depression-- your feelings of sadness, less joy in life, and low energy. Are your feelings of depression continuing or getting worse?

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HEALTH LITERACY IN THE MHGPS PROGRAM

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HEALTH LITERACY AND MHGPS SERVICES

My Health GPS Services

MHGPS
Enrollment,
Biopsychosocial
Assessment,
and Care Plan

Comprehensive
Care
Management
(U1 and U8)

Care
Coordination
(U2)

Health
Promotion
(U3)

Comprehensive
Transitional
Care
(U4)

Individual and
Family Support
Services
(U5)

Referral to
Community and
Social Support
Services
(U6)

Health Literacy

10 ATTRIBUTES OF A HEALTH LITERATE HEALTH CARE ORGANIZATION:

1. Has leadership that makes health literacy integral to its mission, structure, and operations.

2. Integrates health literacy into planning, evaluation measures, patient safety, and quality improvement.

3. Prepares the workforce to be health literate and monitors progress.

4. Includes populations served in the design, implementation, and evaluation of health information and services.

5. Meets the needs of populations with a range of health literacy skills while avoiding stigmatization.

[Source: Brach, Cindy et al. "Ten Attributes of Health Literate Health Care Organizations." Institute of Medicine, June 2012.](#)

10 ATTRIBUTES OF A HEALTH LITERATE HEALTH CARE ORGANIZATION:

6. Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact.

7. Provides easy access to health information and services and navigation assistance.

8. Designs and distributes print, audiovisual, and social media content that is easy to understand and act on.

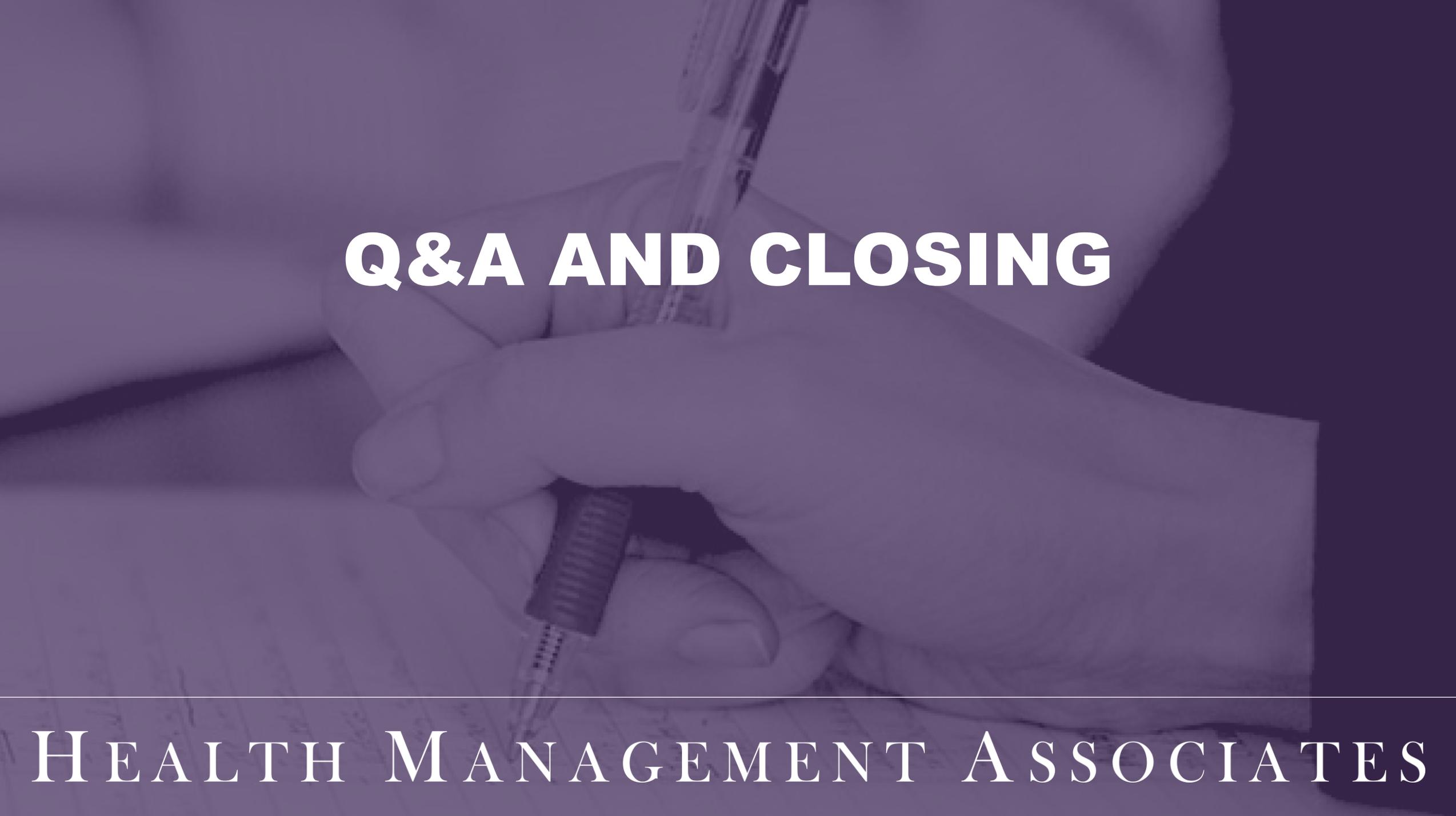
9. Addresses health literacy in high-risk situations, including care transitions and communications about medicines.

10. Communicates clearly what health plans cover and what individuals will have to pay for services.

[Source: Brach, Cindy et al. "Ten Attributes of Health Literate Health Care Organizations." Institute of Medicine, June 2012.](#)

RESOURCES

- + AHRQ Health Literacy Universal Precautions Toolkit: <https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/index.html>
- + National Academies Roundtable on Health Literacy: <http://nationalacademies.org/HMD/Activities/PublicHealth/HealthLiteracy.aspx>
- + [A Review and Report of Community-based Health Literacy Interventions](#)
- + [Integrating Oral Health, Primary Care, and Health Literacy: Considerations for Health Professional Practice, Education and Policy](#)
- + [Improving Health and the Bottom Line: The Case for Health Literacy](#)
- + [Health Literacy: A Prescription to End Confusion](#)
- + Video - Are you confused about health information? You're not alone | Lisa Fitzpatrick | TEDxMidAtlantic: <https://www.youtube.com/watch?v=-x6DLqtaK2g>
- + Health Literacy Toolshed, a database of health literacy measures: <https://healthliteracy.bu.edu/>

A close-up photograph of a hand holding a pen, poised to sign a document. The image is overlaid with a semi-transparent purple filter. The text 'Q&A AND CLOSING' is centered in white, bold, sans-serif font.

Q&A AND CLOSING

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