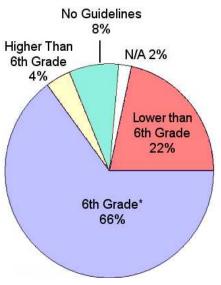


# National Survey of Medicaid Guidelines for Health Literacy

# State Reading Level Guidelines for Medicaid Materials



★ Or a range that includes 6th grade.

Total does not equal 100% due to rounding.

Materials written at a sixth grade reading level will meet more than two-thirds of state Medicaid guidelines

## Overview & Introduction

Many Americans cannot read or understand their health care information. In 2003, the National Assessment of Adult Literacy (NAAL) reported in the National Assessment of Literacy Survey (NALS) that nearly 93 million of U.S. adults are functioning at basic and below basic literacy levels or they could not do the most basic reading tasks needed to function in society<sup>1</sup>. This information was confirmed by a 2004 Institute of Medicine (IOM) report, "Health Literacy: A Prescription to end Confusion" which states that of these more than 90 million people, about 40 million read below the 5th grade<sup>2</sup>.

In spite of this alarming news, most of the health care industry still produces health information at 10th grade reading level or higher<sup>3</sup>. This gap – between what the health care industry produces and what many Americans understand -- leaves many Americans unable to follow or read their health care information. And when consumers cannot understand health care information – medication directions, package inserts, brochures or websites – mistakes happen and people can get hurt.

This health issue, known as health literacy, is defined as the degree to which individuals can obtain, process, and understand health information in order to have the ability to use it properly.<sup>4</sup>

While low health literacy affects consumers across all education levels, races, ethnicities, ages, and economic status, research confirms that low health literacy can be more dangerous for some types of health consumers than others. A study conducted with 400 Medicaid patients shows that patients with low reading skills had higher medical costs, more hospitalizations, fewer primary care physician visits, and poorer compliance with doctor's advice than those with higher reading ability. The 2004 IOM report also says that individuals considered at highest risk for low health literacy are the elderly and those with low incomes.

To assess states' commitment to health literacy and to share state health literacy standards nationwide, Health Literacy Innovations (HLI), a company that creates innovative tools to enhance health literacy, conducted the first national survey on Medicaid guidelines for health literacy.

### Medicaid Health Literacy Reading Level Guidelines By Grade

Grade	# Of	
Level	States*	States
No Guidelines	4 (8%)	Indiana Mississippi North Dakota South Dakota
6 <sup>th</sup> – 8 <sup>th</sup>	1 (2%)	North Carolina
$5^{th} - 7^{th}$	1 (2%)	Utah
7 <sup>th</sup>	2 (4%)	Connecticut Minnesota
6 <sup>th</sup>	28 (56%)	Alaska Arizona Colorado Delaware Georgia Hawaii Iowa Illinois Kentucky Louisiana Maine Maryland Massachusetts Michigan Missouri Montana Nevada New Hampshire New Mexico Oklahoma Oregon Rhode Island Tennessee Vermont Virginia Washington West Virginia Wisconsin
4 <sup>th</sup> - 6 <sup>th</sup>	3 (6%)	California New York Texas
5 <sup>th</sup>	3 (6%)	Washington DC Idaho New Jersey
4 <sup>th</sup>	7 (14%)	Florida Kansas Nebraska Ohio Pennsylvania South Carolina Wyoming
3 <sup>rd</sup>	1 (2%)	Arkansas
No Data	1 (2%)	Alabama

\* Total does not equal 100% due to rounding.

# Survey Methodology

In 2007, HLI contacted each Medicaid organization and the District of Columbia by telephone and email to determine specific state policy for health literacy standards for printed and web materials. A common script was used to direct the telephonic questions, and HLI supported its phone efforts with emails and internet research. Finally, HLI searched for national data, ultimately only finding one site that posted results of guidelines for most states, but not all. This site is the Georgetown Washington University School of Public Health Department of Policy (GWUSPH)<sup>6</sup>.

### Response Rate

By August 2007, HLI achieved a 94% survey response rate. Responses came from a variety of sources within the Medicaid agencies. Some of the staff had never heard of health literacy standards for Medicaid, and the responses came from a variety of personnel within the department, either a staff person in the program's directors office<sup>7</sup> (our original aim), the person in charge of communications or publications or policy and/or sometimes just by a staff person who took the time to find the information.

### **Notes**

- ★ Survey respondents offered general information on written materials instead of specific readability information for the web and for printed materials.
- Except for Texas and Virginia, all data for this survey came from phone interviews. Data used for these two states came from the GWUSPH website. Alabama did not respond to the survey.

# Survey Findings

The majority – 90% – of all states have specific readability guidelines for their Medicaid materials:

- ★ 56% call for a 6<sup>th</sup> grade reading level.
- ★ 66% call for a 6<sup>th</sup> grade reading level or a range that includes 6th grade.
- ★ 14% call for a 4<sup>th</sup> grade reading level.
- ★ 6% call for a reading level between 4<sup>th</sup> and 6<sup>th</sup> grade.
- ★ 2% call for a 3<sup>rd</sup> grade reading levels.
- ★ 14% offer providers some variance in readability guidelines, asking that materials be produced within a reading grade level range – between 6<sup>th</sup> and 8<sup>th</sup> grade, 5<sup>th</sup> and 7<sup>th</sup>, or 4<sup>th</sup> and 6<sup>th</sup>.
- ★ 8% of have no health literacy readability guidelines.

### Medicaid Health Literacy Reading Level Guidelines By State

Level Guideline	es By State
State	Grade
Alabama	No Data
Alaska	6 <sup>th</sup>
Arizona	6 <sup>th</sup>
Arkansas	3 <sup>rd</sup>
California	$4^{th} - 6^{th}$
Colorado	6 <sup>th</sup>
Connecticut	7 <sup>th</sup>
Delaware	6 <sup>th</sup>
Washington, DC	5 <sup>th</sup>
Florida	4 <sup>th</sup>
Georgia	6 <sup>th</sup>
Hawaii	6 <sup>th</sup>
Idaho	5 <sup>th</sup>
Illinois	6 <sup>th</sup>
Indiana	None
Iowa	6 <sup>th</sup>
Kansas	4 <sup>th</sup>
Kentucky	6 <sup>th</sup>
Louisiana	6 <sup>th</sup>
Maine	6 <sup>th</sup>
Maryland	6 <sup>th</sup>
Massachusetts	6 <sup>th</sup>
Michigan	6 <sup>th</sup>
Minnesota	7 <sup>th</sup>
Mississippi	None
Missouri	6 <sup>th</sup>
Montana	6 <sup>th</sup>
Nebraska	4 <sup>th</sup>
Nevada	6 <sup>th</sup>
New Hampshire	6 <sup>th</sup>
New Jersey	5 <sup>th</sup>
New Mexico	6 <sup>th</sup>
New York	$4^{th} - 6^{th}$
North Carolina	$6^{th} - 8^{th}$
North Dakota	None
Ohio	4 <sup>th</sup>
Oklahoma	6 <sup>th</sup>
Oregon	6 <sup>th</sup>
Pennsylvania	4 <sup>th</sup>
Rhode Island	6 <sup>th</sup>
South Carolina	4 <sup>th</sup>
South Dakota	None
Tennessee	6 <sup>th</sup>
Texas	4 <sup>th</sup> – 6 <sup>th</sup>
Utah	5 <sup>th</sup> – 7 <sup>th</sup>
Vermont	6 <sup>th</sup>
Virginia	4 <sup>th</sup>
Washington	6 <sup>th</sup>
West Virginia	6 <sup>th</sup>
Wisconsin	6 <sup>th</sup>
Wyoming	4 <sup>th</sup>
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# Summary

With 90% of all states requesting health literacy standards for printed material for their Medicaid population, HLl's Medicaid survey on health literacy guidelines reveals several trends:

- The majority of states have health literacy standards for their Medicaid programs.
- ★ Among states, there is not one specific department responsible for insuring that printed materials meet health literacy standards. Rather, the responsibility for compliance to health literacy standards varies from state to state.
- ★ The majority of states have set a goal to improve the health literacy level of their Medicaid population.<sup>8</sup>
- While most states request a 6th grade reading level, there is a range of different grade levels requested by other states.
- In spite of difference in readability indices, most Medicaid agencies are taking positive steps to provide reading level standards for their Medicaid members, making the long-term implications for health literacy at the state level encouraging.

# Conclusion

Based on this survey, HLI believes the following trends need to be explored:

- What training, if any, are state health departments providing to their personnel on health literacy?
- How are states evaluating their printed materials for health literacy?
- ★ What assessment tools, if any, are states using to insure that printed materials, whether created internally or externally, meet their specific health literacy guidelines?
- What other methods, if any, can states use to assess the health literacy of printed materials?
- ★ What other policies, if any, can states implement to improve the health literacy of printed materials?

Although reading level alone does not guarantee easy-toread materials, HLI believes that it is a great start. Also, given the availability of this data, HLI hopes that states not only continue to require a specific reading level, but also equip, train, and support their staff in expanding health literacy standards as one way to help all Americans read, understand, and follow their health care information. "The growing trend in the Medicaid program toward lower readability levels is encouraging. Although reading level is only one aspect of health literacy, this is still important news for states nationwide and for the healthcare community in general."

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<sup>1</sup> National Center for Education Statistics. <a href="http://nces.ed.gov/naal/health\_results.asp">http://nces.ed.gov/naal/health\_results.asp</a> Accessed August 15, 2007

<sup>2</sup> Health Literacy: A Prescription to End Confusion. Institute of Medicine, 2004. http://www.iom.edu/CMS/3775/3827.aspx Accessed August 15, 2007

<sup>3</sup> Rima E. Rudd, Barbara A. Moeykens, Tayla C. Colton. Health and Literacy A Review of Medical and Public Health Literature

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<sup>4</sup> American Medical Association Foundation. <a href="http://www.ama-assn.org/ama/pub/category/8115.html">http://www.ama-assn.org/ama/pub/category/8115.html</a> Accessed August 15, 2007.

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Accessed September 23, 2007.

<sup>6</sup> The Georgetown Washington University School of Public Health Department of Policy. Readability guidelines for 50 states.

 $\frac{http://www.gwumc.edu/sphhs/healthpolicy/nnhs4/GSA/Subh}{eads/gsa166a.html}$ 

Accessed September 23, 2007.

<sup>7</sup> National Association of State Medicaid Directors. http://www.nasmd.org/members/default.asp Accessed September 23, 2007.

<sup>8</sup> Carlos A. Estrada, MD, MS; Mary Martin Hryniewicz, RN, MSN; Vetta Barnes Higgs, MD; Cathy Collins James C. Byrd, MD, MPH. Anticoagulant Patient Information Material Is Written at High Readability Levels.