

NETWORK PROVIDER FAX BLAST

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

Only 12% of adults have proficient health literacy, according to the National Assessment of Adult Literacy. That means that nearly **nine out of ten adults** may lack the skills needed to manage their health and prevent disease.

Members with limited literacy skills have less understanding of medication instructions and less knowledge about their medical conditions and self-care instructions. One study found that among people with low health literacy skills: 26% did not understand when their next appointment was scheduled; 42% did not understand instructions to take medication on an empty stomach; and 86% could not understand the rights and responsibilities section of a Medicaid application.

Low literacy has been linked to poor health outcomes such as higher rates of hospitalization and less frequent use of preventive services. Both of these outcomes are associated with higher healthcare costs.

Low Health Literacy is More Common Among:

- Older adults
- Minority populations
- Those who have low socioeconomic status

Members with Low Health Literacy May Have Difficulty:

- Locating providers and services
- Filling out health forms such as a medical history or consent form
- Sharing their medical history with providers
- Seeking preventive health care
- Knowing the connection between risky behaviors and health
- Managing chronic health conditions
- Understanding directions on medicine

Members' Health Literacy May be Affected if They Have:

- Providers who use words they don't understand
- Low educational skills
- Cultural barriers
- Limited English Proficiency

How to Identify a Member with Low Health Literacy?

There are behaviors and reactions that may provide an indication that members have low health literacy. Those may include members' reaction to written information, non-compliance with self-care instructions, and responses to questions about health history or medications. Some behaviors that warrant attention include:

Member Behaviors at the Health Care Setting:

- Member registration forms are incomplete or inaccurately filled out.
- Members frequently miss appointments.
- Members are non-compliant with medication regimens.
- Members do not follow through with laboratory tests or referrals to specialists.
- A member says that he/she is taking medication, but lab tests or other parameters do not show expected changes.

Member Avoidance when Receiving Written Information:

- "I forgot my glasses. I'll read this when I get home."
- "I forgot my glasses. Can you read this to me?"
- "Let me bring this home so I can discuss it with my children."

Member Cannot:

- Name his or her medications.
- Explain why he or she is taking the medication.
- Explain how often the medication is taken.

How Providers Can Help:

- Identify members with limited literacy levels.
- Use simple language, short sentences and avoid technical terms.
- Provide appropriate educational materials (pamphlets, pictures, etc.)
- Use the 'Teach Back' method - Ask members to explain instructions to demonstrate their understanding.
- Avoid closed-ended questions that end with yes or no.
- Highlight and repeat the most important points.
- Consider the age, cultural, ethnic and racial diversity of members.
- For Limited English Proficiency members, provide information in their primary language
- Offer assistance with completing forms

Sources and Helpful Links:

- HRSA, About Health Literacy, <http://www.hrsa.gov/publichealth/healthliteracy/healthlitabout.html>
- Quick Guide to Health Literacy, <http://www.health.gov/communication/literacy/quickguide/factsbasic.htm>
- University of Washington Medical Center, UW Medicine, Patient Health Literacy For UWMC Clinicians, 06/2005, Rev. 09/2008, UH2232
- AHRQ, Health Literacy universal Precautions Toolkit, 2nd Edition