

# Plain Writing at the Centers for Medicare & Medicaid Services: April 2019

CMS continues to help our consumers, providers and the public navigate a complex health care system by communicating as clearly, plainly and transparently as possible.

## We continue to train CMS employees

The Office of Communications continues to train CMS employees through new employee orientation. We substantially revised and updated the training living on the HHS Learning Management System to better reflect the communication challenges facing CMS staff. This updated training was posted in February 2019 and includes a more attractive interface, more relevant examples and interactive exercises.

We have also increased outreach to other CMS components with tailored in-person training on plain writing and user-centered communication design upon request for the specific needs of these offices. CMS components are increasingly reaching out to Office of Communications staff for plain language reviews of countless letters, web content, emails, reports, etc recognizing the value of clear communication. This past year, the agency also established a cross-component workgroup to improve agency communications and broadcast messaging to make communications to employees clearer and actionable.

We have developed tools to help staff integrate plain writing into their work. We've included these documents on the intranet and in our plain writing training:

- **Plain Writing Style Guide:** This guide includes plain writing tips, terms to use in place of other terms (both general and program specific), and other guidance.
- **Web Writing Style Guide:** This guide includes tips for writing meaningful and user focused content like writing links, headlines, and content that's easy to scan.
- **7 Plain Writing Basics:** These tips help keep writing direct and focused on the user.
- **CMS Tone of Voice Checklist:** This checklist is a series of questions a writer should answer about their document to make sure it complies with CMS Tone of Voice. Communications from CMS should always sound the same across our communication channels. Users should have the same CMS experience whether they're visiting our websites, reading a publication or calling our call centers.

## Plain writing in consumer products

The Office of Communications is a longtime proponent of plain writing, and we've been incorporating plain writing principles into every public-facing product we create for years. Most of these products and content are available online at [Medicare.gov](http://Medicare.gov), [HealthCare.gov](http://HealthCare.gov), and [Marketplace.cms.gov](http://Marketplace.cms.gov). Many are also available in print at [Medicare.gov/publications](http://Medicare.gov/publications) and the [CMS partner product ordering website](http://CMS.partnerproductordering.website).

We're also reaching out to consumers with plain language messaging through social media channels like Facebook, Twitter and YouTube. We continue to use email campaigns to disseminate plain language messages about the Health Insurance Marketplace and continue to increase our email

outreach to people with Medicare. In fact, we had a robust email campaign with plain language messaging around the mailing of new Medicare cards. Emails were sent prior to and during the card mailings to an email subscriber list that grew to about 7.6 million over the course of the outreach. Messages helped increase awareness of the mailings, encourage people to verify their mailing address was accurate, educate about how to check card mailing status and what to do if you didn't get a card. The average open rate was about 37% for those sent to all subscribers with general messaging and 37.5% for those sent to subscribers where and when specific wave mailings occurred.

Below are other specific examples of our recent plain writing efforts:

**Medicare & You** handbook coverage choices charts: The charts on pages 4-7 in the 2019 version of the handbook were substantially revised from previous handbooks based on feedback and multiple rounds of consumer testing. The revisions help to clarify the differences between the two main Medicare coverage options – Original Medicare and Medicare Advantage.

**Understanding Medicare Advantage Plans**: Recent consumer research indicates that there still is overwhelming confusion among Medicare beneficiaries about their coverage choices, and we are committed to improving our content to help bring clarity to these decisions. One way we're addressing that confusion is through the creation of this new booklet for Open Enrollment 2018. The booklet uses knowledge from recent plan choice research to explain the options for Medicare coverage. The comprehensive guide allows beneficiaries to learn about and compare Medicare Advantage Plans in one easy-to-read booklet.

**Low-income subsidy notices**: People with Medicare with limited income and resources who qualify for help paying their Medicare prescription drug costs receive several notices from CMS. A majority of these notices were revised for 2018 Open Enrollment to improve clarity and usability.

**Welcome to Medicare cover letter and booklet**: for people who aren't automatically enrolled in Medicare: Starting August 2018, we began mailing a letter and booklet along with their Medicare card to people who enroll themselves in Medicare Part A and/or Part B. These packages are mailed weekly to people newly enrolled and make up about 40% of all new enrollees each year.

## **Understanding our audiences**

As our resources allow, we consumer test our messaging and products with our target audiences. Social marketing principles have informed the Office of Communications' product and message development for many years. By understanding our target audiences' health literacy, culture, language, attitudes, perceptions and identifying barriers, we have improved our products and therefore our audience's ability to understand our programs. This knowledge also helps us keep our products person-centered.

We don't routinely perform readability tests like the Fry, SMOG, FOG or Flesch-Kincaid on completed content. These kinds of tests rely largely on counting syllables per word, words per sentence, and sentences per paragraph to determine the grade level. With Medicare and Marketplace materials, there are terms (like "formulary") that are unfamiliar, but necessary, to introduce to our audience. We go to great lengths to explain these terms and concepts that aren't readily understood and incorporate features like navigational cues and graphic elements. But readability tests don't take into account these types of efforts. We focus our attention on making sure readability (Do they know the terms we use and is information organized effectively?), usability (Can they easily find the answers they are looking for?), and understandability (Can they accurately explain the meaning or concept after reading?) are successfully achieved, and do this by following industry best practices and iterative testing with our target audiences whenever possible.

While we don't routinely perform readability tests, we do regularly monitor a digital quality management tool on Medicare.gov called SiteImprove. We made numerous edits to pages this past year to improve the site quality by looking at things like long sentences. To date, our content quality score is a 93%, and our content freshness score is 99%.

## Feedback opportunities

To provide an opportunity for public feedback, we created the CMS Plain Language [webpage](#) to explain the importance of the Plain Writing Act and outline CMS' commitment to full compliance with the Act. The public can contact CMS and send comments about our plain writing efforts via the [feedback form](#) posted on the page.

## Looking ahead

We continue to employ the plain writing and web optimization principles we've been using as part of our plain language strategy. We're testing these products with our consumer audiences as resources allow to ensure content and messaging is understandable so that consumers take advantage of coverage opportunities.

The Office of Communications has embarked on a multi-year initiative to update Medicare resources to meet the expectations of people with Medicare for a more personalized experience. The eMedicare initiative is modernizing the way people get information about Medicare through data integration and web development to create new ways to help people make informed health care choices. For Open Enrollment 2018, CMS launched a simplified log in for [comparing plans](#) along with the availability of web chat while logged in, improved "[Help with Your Medicare Choices](#)" to help people find the right type of Medicare coverage, a way to see how your Medicare coverage choices [affect your costs](#), and help comparing national average [prices for procedures](#) in certain facilities. In January 2019, we also launched "What's covered" our first mobile application in the App Store and Google Play that lets you search Medicare Part A and Part B covered items and services anywhere you use your mobile device. Finally, in February 2019 we added [apps for people to use with Medicare's Blue Button 2.0 data](#) to [organize and share medical information](#), find plans, check symptoms, contact providers, and connect to research. We will continue these eMedicare efforts for the next Open Enrollment and beyond.