

Plain Writing at the Centers for Medicare & Medicaid Services: April 2018

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 are substantially revising and updating the CMS plain writing training that exists on the HHS Learning Management System to better reflect the communication challenges facing CMS staff. The updated training will be implemented within the next few months. We have also increased outreach to other CMS components, including the Center for Program Integrity and the Center for Medicare, with presentations on plain writing and user-centered communication design tailored to the specific needs of these offices.

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, HealthCare.gov, and Marketplace.cms.gov. Many are also available in print at Medicare.gov/publications and the [CMS partner product ordering website](http://CMS.partner.product.ordering.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 over the past year have increased our email outreach to people with Medicare. Over recent months, we've been working more closely with components across CMS to help ensure that communication pieces developed for specialized and non-public audiences – including providers, contractors, states and partners – also incorporate plain writing principles. Below are other specific examples of our recent plain writing efforts:

- **Marketplace eligibility fact sheet:** “Understanding Your Eligibility Results” is a fact sheet that explains coverage and financial help options for people who apply for Marketplace health coverage. The goal of the fact sheet is to reduce informational barriers posed by complex policy requirements and systems limitations and encourage consumers to complete the Marketplace health coverage enrollment process.

“Understanding Your Eligibility Results” is a companion fact sheet to the Marketplace Eligibility Notice that we revised with plain language and improved layout to expand on information in the notice in a way that’s much more user-friendly. We worked within significant operational constraints to provide more digestible information about actions the applicant and family must take to enroll in insurance, answer commonly asked questions, and ultimately encourage consumers to complete health insurance enrollment.

Since the revised fact sheet launched in November 2017, there have been fewer complaints about the Eligibility Notice received on HealthCare.gov and fewer questions about the Eligibility Notice asked through the Marketplace call center.

- **The [employer coverage page](#) on Medicare.gov:** The page provides information to people who are becoming eligible for Medicare who have employer health coverage and want to understand their options. Millions of people who are turning 65 and still working (37%) don’t get enrolled in Medicare automatically. That means they may not enroll when they’re first eligible and face late enrollment penalties. We’ve made this content more accessible to help people enrolling in Medicare who have employer health coverage understand when they need to enroll.

The content management system we use to create Medicare.gov has significant, dated formatting and functionality issues. It was an information design challenge to find a way in the existing system to create a “personalized” experience. The policy is also complicated because people can fall into many nuanced scenarios. We worked hard to boil down the information to what is critical and to make the calls to action as clear as possible. We worked closely with policy experts as well as with Foresee data to analyze consumer concerns and trends. The result was including another persona selection from the homepage of Medicare.gov called “I have employer coverage” that leads to a comprehensive page of content where users can self-select their situation for a “customized” response.

Data suggest that users were able to find the employer coverage page and content related to employer coverage more easily after we made these enhancements. Before these enhancements, users looking for employer content viewed an average of 11.3 pages per session compared to an average of 8 pages per session after the enhancements. Users can now more easily find the information they need thereby avoiding unnecessary calls to 1-800-MEDICARE.

- **[A quick guide to the Health Insurance Marketplace:](#)** The Quick Guide serves as a high level overview of the Health Insurance Marketplace for both new and returning consumers. It’s updated several times a year, highlighting tips and key information about Marketplace enrollment, eligibility, and deadlines. The Guide was optimized in 2017 for mobile use, making it to-the-point and easy to understand and scan. Through bolded text,

font size differentiation, and arranging the content numerically in order of importance (the information consumers most desire), the page is more effective.

As [HealthCare.gov](https://www.healthcare.gov) consumers increasingly use their phones and tablets to seek enrollment information and ultimately enroll in Marketplace insurance, we optimized the Quick Guide – one of our most highly visited pages – so it's easy to digest. [HealthCare.gov](https://www.healthcare.gov) users are also able to provide feedback about any page at the bottom of each page, and we used this feedback to revise the content.

Consumers responded very well to our fall 2017 Quick Guide changes. During Open Enrollment 2017, the page received nearly 500,000 unique page views, making it one of our most popular pages. The Quick Guide also reported a 59% increase in weekly page visitors when compared to Open Enrollment for the previous 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 info 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.

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. Below are examples of content we intend to improve this coming year:

- **Medicare Advantage and other plan choices booklet:** Using knowledge from recent research on Medicare plan choice, we will draft a booklet that includes options for Medicare coverage including the types of Medicare Advantage Plans. This comprehensive guide will allow beneficiaries to learn about and compare plans using one easy-to-read resource.
- **Medicare coverage choices:** In 2017, we launched a way to help beneficiaries consider their choices for Medicare coverage by having them answer a series of questions on Medicare.gov and providing tailored information based on their responses. This year we will improve the experience by incorporating more consumer testing feedback and Foresee data to refine our responses.