

Plain Writing at the Centers for Medicare & Medicaid Services: April 2021

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 (LMS) 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 started another update of the CMS Plain Writing training to improve the functionality on the HHS LMS.

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.

The Office of Communications also actively participates in [Plainlanguage.gov](https://www.plainlanguage.gov)'s community of practice. This year we volunteered to participate in an effort to review government websites for the federal plain writing report card.

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.
- **User Interface (UI) Guidelines:** We've implemented guidelines across Medicare.gov to help staff creating content across the site to use consistent terminology, content and design based on best practices and research.

On CMS.gov, we've also posted tools to help people clearly communicate about our programs:

- [Writing for the Web](#) slides with & without notes
- [Toolkit](#) for making written material about health care clear and effective

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](https://www.Medicare.gov), [HealthCare.gov](https://www.HealthCare.gov), and [Marketplace.cms.gov](https://www.Marketplace.cms.gov). Many are also available in print at [Medicare.gov/publications](https://www.Medicare.gov/publications) and the [CMS partner product ordering website](https://www.CMS.gov/partner-product-ordering-website).

Every consumer product that the Office of Communications creates is developed using plain writing principles. Our print products are updated on a yearly cycle for content accuracy and other improvements. We also track web page metrics using Qualtrics and Google analytics, so we can monitor pain points and update pages early and as often as possible when points of confusion are identified to meet user needs. We've also used A/B testing on the web prior to and during Open Enrollment to test terminology on buttons, etc to gauge what best invites a desired action.

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. We disseminate clear messaging about the Health Insurance Marketplace to 33.4 million consumers, and Medicare Open Enrollment to 13 million. In 2020 and early 2021, we shared timely and important information about the COVID-19 pandemic across our social media and email channels to help improve public health outcomes.

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

Get Started with Medicare: We've revised and reorganized pages on Medicare.gov for people who are new to Medicare. These pages have been through extensive rounds of consumer testing and plain language review and will continue to be updated to improve the experience for new enrollees and help them make the most of their choices and benefits. Within these pages, we've also included the new "Welcome to Medicare" pages from the handbook as a [tip sheet](#) for people to use to get the most out of their new Medicare coverage.

End-Stage Renal Disease (ESRD) Content: We re-wrote and re-designed our ESRD [booklet](#) and ESRD [Medicare.gov content](#) to streamline the information, make policy-related changes, and improve search engine optimization (SEO). We also created a new conference card to highlight a policy change and meet partner needs. Before the web content updates went into effect, this main ESRD page averaged around 75-80 weekly pageviews coming from organic traffic (users who arrived at this page from a search engine results page). After the mid-May update, we now see approximately 275 pageviews on an average weekly basis coming from organic search traffic. It's clear that users now are more than ever before reaching this content.

Redesigned CMS-500 Medicare Premium Bill: This form is mailed to about 2.2 million people with Original Medicare each month who don't have their premiums deducted from their Social Security benefits. We're implementing a redesign later this year that will help people better understand the actions they should take to pay their premiums. We

implemented plain language and information design best practices throughout and conducted consumer testing to assess effectiveness. Overall, participants responded positively to the redesign. Most participants stated that the materials were generally written in a way they could understand, provided the information that was most important for them (e.g., amount due, due dates, and consequences of nonpayment), and explained actions they should take paying their Medicare premium.

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 93.6%, and our content freshness score is 98.5%. Our overall content quality score is 95.8% (and the industry benchmark for government is 78.2%).

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. Over the past 12 months, we've made a variety of improvements to Medicare.gov.

In August 2020, we launched an improved way to find care and providers. [Care Compare](#) standardizes our 8 original compare sites, giving you one place to start finding the doctors, hospitals, nursing homes, and other care you need. We also launched a redesigned way to find [Medigap plans](#) with enhancements based on user feedback, and connected to new backend data source to display more accurate and updated plan data. We also launched some additional planned enhancements to the pharmacy information and functionality in the [Medicare Plan Finder](#) we redesigned last year to better help people compare their Medicare coverage options.

In December 2020, we launched more Medicare.gov improvements. We launched an easier way to [find medical equipment and supplies](#) through our updated supplier directory. The improved directory includes new features and improved functionality to compare 3 suppliers at a time and find suppliers using an interactive map. We also launched a convenient online way for people to sign up to make payments that was once a strictly paper process. People can now sign up for Medicare Easy Pay that deducts their Medicare Part A and Part B premiums from a user's bank account online through their [Medicare account](#).

In January 2021, we continued to improve the online experience for people with Medicare. We launched several redesigned tools including a way for people to find [Programs of All-Inclusive Care for the Elderly](#) (PACE) in their area, [pharmaceutical assistance programs](#) to help people find pharmaceutical companies that will help pay for their Medicare Part D drugs, and [state programs](#) that can help pay for prescriptions.