

# The Challenge of Communicating Health Care Information Effectively

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With health care, the challenge of communicating to patients is often that there is too much information rather than too little – and that health care information can be too complex, come from too many sources, and can appear contradictory. The deluge of health care information can be confusing even to well-educated health care professionals. Disadvantaged populations have slimmer odds of making sense of all the health care information they are expected to understand. As we ask patients to become more engaged and take more responsibility for their care, what is the answer? How do we change health care information from bewildering to empowering?

Funded by the **Robert Wood Johnson Foundation**, the *Right Place, Right Time* project aims to address the problem of confusing health care information by understanding how patients – and especially vulnerable patients – are using health care information to make decisions, and where improvements are needed most. This research is being conducted by Altarum Institute, focusing on the patients' perspective. In a related study, Oliver Wyman focuses on the perspectives of health care organizations.

In this research, the *Right Place, Right Time* team interviewed 100 health care professionals, 65 disadvantaged patients, and conducted a national survey of 4000 health care consumers. The full *Right Place, Right Time* report will be released this fall, but this brief recommends some of the top solutions to emerge from the research.

## Recommended solutions for improving health care information

- 1. Provide greater transparency for patient's costs.** In a national survey, the *Right Place, Right Time* team asked health care consumers about their satisfaction with 19 different kinds of health care information. Five of these 19 types of information related to patient's out-of-pocket costs – for example, knowing how much a hospital visit will cost or understanding medical billing. All five of these cost information types were rated as the five most challenging to find and understand out of all 19 information types. Patients with lower incomes and in poorer health reported even greater frustration with getting accurate information on health care costs. Although more health care costs have shifted to consumers through high-deductible health plans, patients have not been given the

tools to plan or understand the costs they must pay. Worryingly, research suggests this informational challenge leads patients to forgo needed care rather than shopping smarter<sup>1</sup>. Cost information is by far the most challenging information type patients face today; greater financial transparency will empower patients to get the care they need at a price they understand.

- 2. Communicate in plain language.** In the national survey, the *Right Place, Right Time* team asked consumers to rate the usefulness of eight different types of improvements to health care information. Consumers gave the highest rating to the idea that printed information from doctors, hospitals, and insurers should include a “translation” of all technical terms using simple, plain language, and pictures where appropriate. Health care is known for its jargon and complexity, from medical terminology to insurance benefits design. Given that 1 in 7 US adults are functionally illiterate<sup>2</sup>, when we do not provide plain language descriptions, we effectively keep health care information away from the disadvantaged patients who would benefit from this information the most and have the highest level of need. Technical terms can still be used, but they should be accompanied by large print summaries that drive home the most important points for consumers to understand. Where consumers need to make a choice, the pros and cons of each option should be laid out clearly. This approach is used effectively in many patient decision aides used for shared decision-making, but could be used much more widely.
- 3. Foster patient-provider trust and respect to improve health.** Across interviews with 65 disadvantaged patients, one issue emerged as being of special concern to disadvantaged patients: many felt providers did not respect them or take their concerns seriously. Consistent with prior research<sup>3</sup>, patients reported feeling they were treated as less important to providers because of their income, insurance status, and their race. Examples given include not making eye contact, not engaging in conversation with patients, expressing disgust when examining patients, and dismissing patient concerns, symptoms, and pain. In some cases, providers told patients directly that they were “worth less” because the patient had Medicaid. This is not just a matter of good manners; many patients reported they stopped taking medications and following medical guidelines because of perceived poor treatment from providers. The *Right Place, Right Time* survey results are consistent with this, showing lower adherence and more negative health outcomes for patients who report feeling disrespected by providers. Providers can help promote positive patient-provider relationships by making friendly eye contact with patients, asking about patient well-being, listening to patient concerns seriously, and inviting patients to engage in shared decision-making. The results may well pay off in better adherence and health outcomes.

**4. Make online resources mobile-friendly.** The internet is now accessible to nearly all segments of the population, including those on very low incomes, making the internet a great way to get health care information to a wide population. However, there are some key trends in how different kinds of people access the internet. People with lower incomes, especially those who are young and who are racial minorities tend to rely on mobile phones as their primary or sole source of internet access<sup>4</sup>. The *Right Place, Right Time* team consistently heard from patients that when online resources were not mobile friendly, patients would almost never seek out a computer to access the information; rather they would try to call a phone number, or simply give up looking. In contrast, older people are more likely to rely on a computer for internet access. To reach all patients, online information sources should be accessible through mobile devices as well as computers. There should also be an offline equivalent, such as phone number or printed materials, for the 15% of Americans who do not use the Internet.<sup>5</sup>

### Further Reading for “Right Place, Right Time” Study

- **Knowledge Is Power: Improving Health Care Information For The Most Vulnerable** at Health Affairs
- **Improving Access to Health Care Information for Lower-Income Patients** at Altarum Institute
- **Overcoming Lower-Income Patients’ Concerns About Trust And Respect From Providers** at Health Affairs
- **Right Place, Right Time Marketplace Perspectives** report from Oliver Wyman
- The *Right Place, Right Time* Consumer Perspectives report will be published online this fall.



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### References

1. **What Does a Deductible Do? The Impact of Cost-Sharing on Health Care Prices, Quantities, and Spending Dynamics**, The National Bureau of Economic Research
2. **Troubling Stats on Adult Literacy**, Insider Higher Ed
3. **Racial Disparities in Pain Management of Children With Appendicitis in Emergency Departments**, JAMA Pediatrics
4. **A Portrait of Smartphone Ownership**, Pew Research Center
5. **15% of Americans don’t use the internet. Who are they?**, Pew Research Center