Plain Writing at the Centers for Medicare & Medicaid Services: April 2020

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.

The Office of Communications also actively participates in Plainlanguage.gov's community of practice. We participated in an effort with other federal agency volunteers to research and update the site's agency contract list that wrapped up in July 2019.

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, HealthCare.gov, and Marketplace.cms.gov. Many are also available in print at Medicare.gov/publications and the CMS 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. In 2019, we improved our ability to send more targeted emails to people with Medicare largely based on their enrollment status with either Original Medicare or Medicare Advantage. During Open Enrollment 2019, we sent over 100 million email messages to over 10.8 million email subscribers (as of 12/7/2019). These messages helped increase awareness and use of the Medicare Plan Finder on Medicare.gov and encouraged people to explore their coverage options for the 2020 coverage year. Targeted email messages had an average open rate of about 29% compared to an open rate of about 25% for general email messages.

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

> **Redesigned Marketplace Appeals Forms** (Example):
> If you don't agree with a Health Insurance Marketplace decision, you may be able to file an appeal. The redesign and implementation of these appeals forms has made the process easier. The new forms are a big usability improvement, and we confirmed these improvements through consumer testing. Consumers are now also able to submit forms electronically which is a huge customer service win.

> **Medicare retro-enroll notice** (Example):
> This new notice is sent to people who qualified for Extra Help paying for Medicare prescription drug coverage and explains that Medicare will reimburse their covered prescription costs for a retroactive period of coverage and how to get paid back for their costs. Similar to other daily and annual notices related to the Extra Help program, this notice includes clear and action-oriented information to help people take the steps they need to get reimbursed.

Welcome to Medicare package (Example):
All people new to Medicare receive a welcome package. We conducted consumer testing and updated the package to make the actions people need to take more clear and understandable, so they can make health care decisions that meet their individual needs.

Medicare.gov content clean up:
In anticipation of future design improvements, we have embarked on a site wide content clean up by removing duplicative information and streamlining content to keep it concise and action oriented. Within the next year, we'll launch an effort to ensure consistency between Medicare.gov and the tools within it like Plan Finder to make sure people with Medicare have a consistent experience across the site. We've also implemented a process to ensure that all new web content and updates to existing web content (including blogs) include a key word analysis to ensure that the content we publish is using the terms that people search for the most to enable us to give them the content they need with the terminology they use.

CMS.gov content clean up:
With a recent content management system migration, content owners across the agency were asked to review their pages for outdated content. During this clean up, the Office of Communications took the opportunity to make plain language updates to its pages including the home page and strategic initiative pages.

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 91%.

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 2019, CMS launched a redesigned Medicare Plan Finder to make the process for comparing and enrolling in Medicare health and prescription drug plans easier. In addition to multiple rounds of consumer testing, we collaborated with Medicare advocates and State Health Insurance Assistance Program counselors and used their feedback to help drive usability improvements and decision making for the new Plan Finder. Many improvements directly address issues with the old Plan Finder. For example, we integrated information about Medicare coverage options, clarified cost savings benefits of the Extra Help program, added functionality to use actual claims data to help build more accurate and personalized drug lists, streamlined the end-to-end flow for users, and ensured that mobile optimization allows for easy use on the device the user prefers.

Through multiple rounds of testing, we also redesigned Medicare's online account to provide a streamlined experience where people with Medicare can get access to their personal information and track claims, get a listing of available preventive services, print a copy of their Medicare card, and even pay premiums online.