Washington Health Alliance Consumer Education Committee Meeting April 19, 2018

SUMMARY NOTES

Location: Webinar

Committee Members Attending: Michelle George, PEBB

Sarah Greene, Health Care Systems Research Network Carolyn Martin, National Libraries of Medicine, UW

Cameron Pelly, Arthur J. Gallagher & Co.

Andrew Radolf, retired, UNESCO

Sherry Reynolds, Center 4 Health Innovation

Committee Members Absent: Julie Bannester, CMS

Cynthia Eichner, Overlake Hospital

Janie Hanson, SEIU Michael Garrett, Mercer

Ellen Jensen, retired, UW Computing & Communications

Milana McLead, WSMA Stan Sorscher, SPEEA Janna Wilson, King County

Staff and Guests Present: Megan Aukema, *Aukema & Assoc.*

Casey Calamusa, Washington Health Alliance

Sally Collins, Premera

Elissa Director, Health Literacy Northwest Nancy Giunto, Washington Health Alliance Don Rubin, Health Literacy Northwest Tammy Wild, American Cancer Society

<u>Information & Discussion: Introduction to Health Literacy Northwest and Opportunities to Collaborate</u>

Elissa Director and Don Rubin, co-founders of Health Literacy Northwest (HLNW), joined us to share about the work they are doing and opportunities for collaboration with the Alliance and the CEC. Elissa noted that we have overlapping missions, and that it's important to remember that every health encounter is at risk for miscommunication or misunderstanding. The goal of HLNW is to generate interest in health literacy and build a community to share and exchange ideas and ways to improve patient-provider communication.

Don noted that health literacy needs to be addressed from all sides, including providers and patients. He led a discussion about "What does health literacy mean to you?" and members offered a variety of responses. They included helping people understand their health plan and what costs they are

responsible for; providing information that helps members pick a medical plan; and focusing not only on language but also the cultural context.

Don discussed why it is important to focus on health literacy, noting that low health literacy increases costs by about 10 percent. Elissa talked about the health outcomes case for health literacy, noting patients may receive lots of information, but if it's not communicated clearly they may not know what to do. In addition, for many people prevention is not even a concept.

A number of ways the Alliance and CEC can work with HLNW were discussed, including developing workshops to raise awareness of health literacy; hosting workplace lunch-and-learns; and planning an event for Health Literacy Month in Oct.