		Policies and	d Procedures	
Section (Primary Department) Health Education			SUBJECT (Document Title)	
			Readability and Suitability of Written Health	
			Education Materials	- CA
Effective Date	Date of Last	Review	Date of Last Revision	Dept. Approval Date
02/21/2012	12/18/2023		01/13/2023	12/18/2023
Department Approval/Signature:				
Policy applies to heal	th plans operating in the foll	lowing State(s)	. Applicable products noted l	pelow.
Products	Arkansas	🗆 Iowa	🗌 Nevada	Tennessee
Medicaid/CHIP	🛛 California	🗌 Kentuck	ky 🗌 New Jersey	Texas
□ Medicare/SNP	🗆 Colorado	🗌 Louisiar	na 🛛 🗌 New York	🗆 Virginia
□ MMP/Duals	District of Columbia	🗌 Marylar	nd 🛛 🗌 New York (WN)	() 🗌 Washington
	🗆 Florida	Minnes	ota 🛛 North Carolina	🗌 West Virginia
	🗆 Georgia	🗆 Missou	ri 🗌 Ohio	
	🗆 Indiana	Nebrasl	ka 🛛 South Carolina	

POLICY:

Anthem Blue Cross Medicaid (Plan) provides Medi-Cal managed care beneficiaries, including seniors and persons with disabilities, with written health education materials that are designed to assist in modifying personal health behaviors, achieving and maintaining healthy lifestyles, and promoting positive health outcomes. The Plan's written health education materials also assist in providing current information on self-care and management of health conditions. Topics include primary wellness, preventive care, health promotion, interventional care, screenings, disease management, healthy living, and health communications.

Internal development, adaptation, and design of written health education is a multidepartmental and collaborative process. Drafts of written health education materials are further developed and assessed in the Medicaid Marketing Strategy and Planning (MSP) and GBD Creative Studio (ACS) department and approved through the Collateral Materials Approval Process (CMAP). The Plan's Health Promotion Consultant(s), who meet the qualified health educator requirement (see definition below), is responsible for oversight of the review and approval process, which must comply with requirements set forth in the State of California Department of Health Care Services, All Plan Letter (APL) 18-016.

Assessment of written health education is facilitated using The Health Literacy Advisor software tool, which offers a full array of readability formulas to determine reading level. The Readability and Suitability Checklist for Written Health Education Materials (Document BB) is used to systematically evaluate and approve all written health education materials before they are distributed to Medicaid populations to ensure material is understood, accessible, culturally appropriate, and inclusive.

The Plan may approve written health education materials for members without obtaining DHCS approval as long as all criteria below are met:

1. A health educator who has at least one of the following qualifications assesses and approves written health education materials for members:

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- a. Master of Public Health (MPH) degree with a specialization in health education or health promotion from a program of study accredited by the Council on Education for Public Health, sanctioned by the American Public Health Association.
- b. Master Certified Health Education Specialist (MCHES) awarded by the National Commission for Health Education Credentialing, Inc.
- 2. Materials are assessed and approved using the Readability and Suitability Checklist (Attached Document B).
- 3. Signed/approved copies of the Readability and Suitability Checklist and approved material are kept on file for the life of the approved written health education materials.
- 4. Approved material is reviewed and approved every five years or when updates are needed.

All other written member information about access to and use of benefits and services must be reviewed by the plan's Medicaid Compliance Manager and submitted to DHCS for approval, followed by review and approval by LA Care Health Plan when applicable.

DEFINITIONS:

None

PROCEDURE:

Materials Development

- The written health education material business owner will submit a project request to MSP.
- The MSP project manager reviews the request for completeness and approves the request to be assigned to a writer.
- The GBD Creative Studio (ACS) writer compiles the ideas provided in the job request and writes the content for the first draft following cultural and linguistic guidelines.

Material Organization

- Use simple language to present topics.
- Use topic sentences and bullet points (where applicable).

Writing Style

- Write in the active voice (instead of passive).
 - Active: We write simple sentences.
 - Passive: Simple sentences are written by us.

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- Write in a positive tone.
- Use familiar words, not technical jargon (with the exception of medical terminology).
- Define technical words.
- Use definite, concrete, specific language.
- Keep sentences short.
- Be consistent use simple words and structures and the same tense.

Reading Level

- Write or edit copy at or below a sixth-grade reading level using Flesch-Kincaid and Fry software. If neither Fry nor Flesch-Kincaid can measure the message, use the Gunning's Fog Index (FOG) or Simple Measure of Gobbledygook (SMOG) scale. Keep copies of Reading Level Assessments.
- ACS further enhances the writing style, organizes the material, and develops the appearance and appeal of the material.

Appearance

- Keep the layout simple and clean.
- Use ample white space in the layout.
- Use realistic pictures or illustrations (line drawings or photos).
- Make sure the text is easily readable.
- Use a standard font, such as Arial or Times New Roman, that is at least 12-point font size. If sans serif font is used, an exemption letter must be completed and kept on file with the material.
- Keep pages uncluttered and well-organized.

Appeal

- Use appropriate material for the cultural/ethnic group.
- Use visual aids to assist in making information understandable.
- Keep the information interactive so it invites the reader to participate, use questions, suggestions, page layout, headings, subheads, callout boxes, sidebars, and graphics.

Suitability

- Evaluate materials to ensure they are easily understood and culturally and linguistically appropriate for members.
- Identify and correct deficiencies that effect readability, understandability, and cultural and linguistic appropriateness.

Approval Process

• After ASC development and enhancement, the material is submitted to CMAP for inter-disciplinary content review for accuracy.

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- The material is routed to the Medicaid Legal Department for review and approval through CMAP, if necessary.
- A qualified health educator, typically a Health Promotion Consultant on the plan's Quality Management team, is a required reviewer and complies with requirements set forth in the State of California Department of Health Care Services, All Plan Letter (APL) 18-016 as follows:
 - Assessment and approval of materials using the Readability and Suitability Checklist, ensuring all required elements on the checklist are met and documented for content, layout, visual, and cultural appropriateness.
 - Determination of whether material requires field testing or not by notation in the CMAP comment box. A comment requiring field testing triggers the task to be completed by the health education/cultural linguistic team before approval (see Field Testing).
 - Inclusion of a medical director for a review of material when medical content is included to ensure clinical accuracy.
 - That translation of material is reviewed by at least one other person, besides the translator (see Translation).
 - Indication of whether the material is an Initial Review or Subsequent (5 years or less) Review.
 - Signed certification that the material meets DHCS criteria for approval and is ready to process for distribution to members.
- If the majority of the checklist provisions are not met, the material is not approved for distribution to members. This is documented as "Not Approved" in both the CMAP comment box and the Readability and Suitability Checklist.
- Material not approved by the qualified health educator must be returned to the submitter for additional edits before re-opening the review.

Field Testing

- The Plan's qualified health educator provides oversight of field testing for all health education materials.
- If the qualified health educator determines that field testing is required, the Operational Coordinator will send the material from CMAP to <u>health ed materialreview ca medicaid@anthem.com</u> for completion of field testing.
- Field testing is facilitated by a member of the health education/cultural linguistic team and may include but is not limited to the following:
 - Simple review of health education materials during a Community Advisory Committee (CAC) meeting, health education class or other member event.
 - Key informant interviews/surveys with members and/or community informants and/or internally qualified reviewers regarding the written health education materials in person or an online setting.

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- Focus groups with targeted members to determine relevance and effectiveness of more complex education materials.
- Results of the field test are documented on the Readability and Suitability Checklist.
- Examples of health education materials that do not require field testing include but are not limited to the following:
 - Brief updates on preventing colds and the availability of seasonal flu vaccinations.
 - Newsletters (Plans are not required to complete a Readability and Suitability Checklist to assess and approve health education-related newsletter articles but are encouraged to use readability/suitability guidelines to develop these articles whenever possible.)
 - Fliers, handouts or posters about a new program or service available to members or instructions on how to access and use services, such as a prenatal class, new asthma management class, etc.
 - Health education materials developed by local county/city health departments, California state governmental organizations or the federal government.
- Dependent upon the discretion of the Health Promotion Consultant, the Plan may accept the field-testing results provided by a vendor or outside organization when using purchased materials or those obtained from public domain. The determination is dependent upon the participants representing a population similar to the targeted members.

Translation

- Once the material is approved by all CMAP reviewers, MSP submits the material for translation when requested.
- Once translated, the material will undergo final review and certification by the qualified health educator to ensure all provisions are met.

Miscellaneous

- Electronic files or hard copies of signed and approved Readability and Suitability Checklists along with their approved correlating health education materials are on file in CMAP for review at any time by auditors, DHCS, MMCD or L.A. Care Health Plan staff.
- Health education materials that are on the DHCS-approved list are exempt from DHCS approval and field testing.
- If the Plan does not have a qualified health educator on staff to assess and approve health education materials at any time, the Plan must submit health education materials to DHCS for review and approval prior to distribution (See APL 18-016).

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Alternative Formats

- The Plan provides members with Plan-produced educational materials in alternative formats upon request by members, family caregivers or providers. Written health education material alternative formats include Braille, large-size print, audio and video.
- Whenever possible, the Plan provides vendor-produced educational materials to members in alternative formats.
 - The Readability and Suitability Checklist is used to assess and approve written health education materials before they are converted to alternative formats.

Oversight

- Periodic monitoring of Readability and Suitability Checklists to ensure compliance with Plan and DHCS criteria will be done to ensure that the approved health education materials have all required documentation and approvals.
- All previously approved health education materials will be re-reviewed every five years to ensure that health and medical information as well as visual images, remain current and up-to-date.

Staff Training

- All associates involved in the development and distribution of health education material will undergo a refresher on the process outlined in this policy at least annually:
 - Mandated elements per APL 18-016.
 - Material development and approval process.

REFERENCES:

• California Medi-Cal Managed Care Division All Plan Letter 18-016 Readability and Suitability of Written Health Education Materials

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RESPONSIBLE DEPARTMENTS:

Primary Department: Health Education



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Secondary Department(s):

Enterprise Marketing Operations (EMO) GBD Creative Studio (ACS) Medicaid Compliance Medicaid Marketing Strategy and Planning Medicaid Plan Culture and Linguistics Medicaid Plan Marketing Multicultural Health Programs team

EXCEPTIONS:

None

REVISION HISTORY:

Review Date	Changes
12/18/23	Annual Review – no changes
01/13/23	Annual Review
	Updated Policy and Procedure sections
	Updated and alphabetized Secondary Departments
08/08/22	Off-Cycle Review
	Updated policy and procedure
	Removed Qualified Health Educator definition
	Updated policy to reflect internal changes to the written member
	material review process
	Wordsmithing throughout document
	Added Cultural and Linguistics to Secondary Department
01/18/22	Annual review. No changes
01/29/21	Annual review
	Policy and procedure updated
	Edits to update new department names and structures
	Added Anthem Creative Studio (ACS) & Enterprise Marketing
	Operations (EMO) as secondary departments
	Updated the secondary department MAMCOM to Medicaid
	Marketing Strategy and Planning
02/10/20	Annual review
	Edits to policy and procedure sections
	Updates to secondary departments
01/11/19	Updated policy to reflect the changes in the new APL 18-016

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Review Date	Changes
04/23/18	Early Annual review
	Revised Staff Training and Field Testing sections
07/18/17	Annual review
	Updated references to Manager of Health Education to Health
	Promotion Consultant
	Wordsmithing to Approval Process section
07/25/16	Annual review. Minor grammatical edits
	Updated Multicultural health program to cultural and linguistic
	team
07/16/13	Added language on staff training procedures
02/21/12	n/a – new policy

