

Health Information Security and Privacy Collaboration (HISPC)

The Consumer Education and Engagement Collaborative

June 4, 2009

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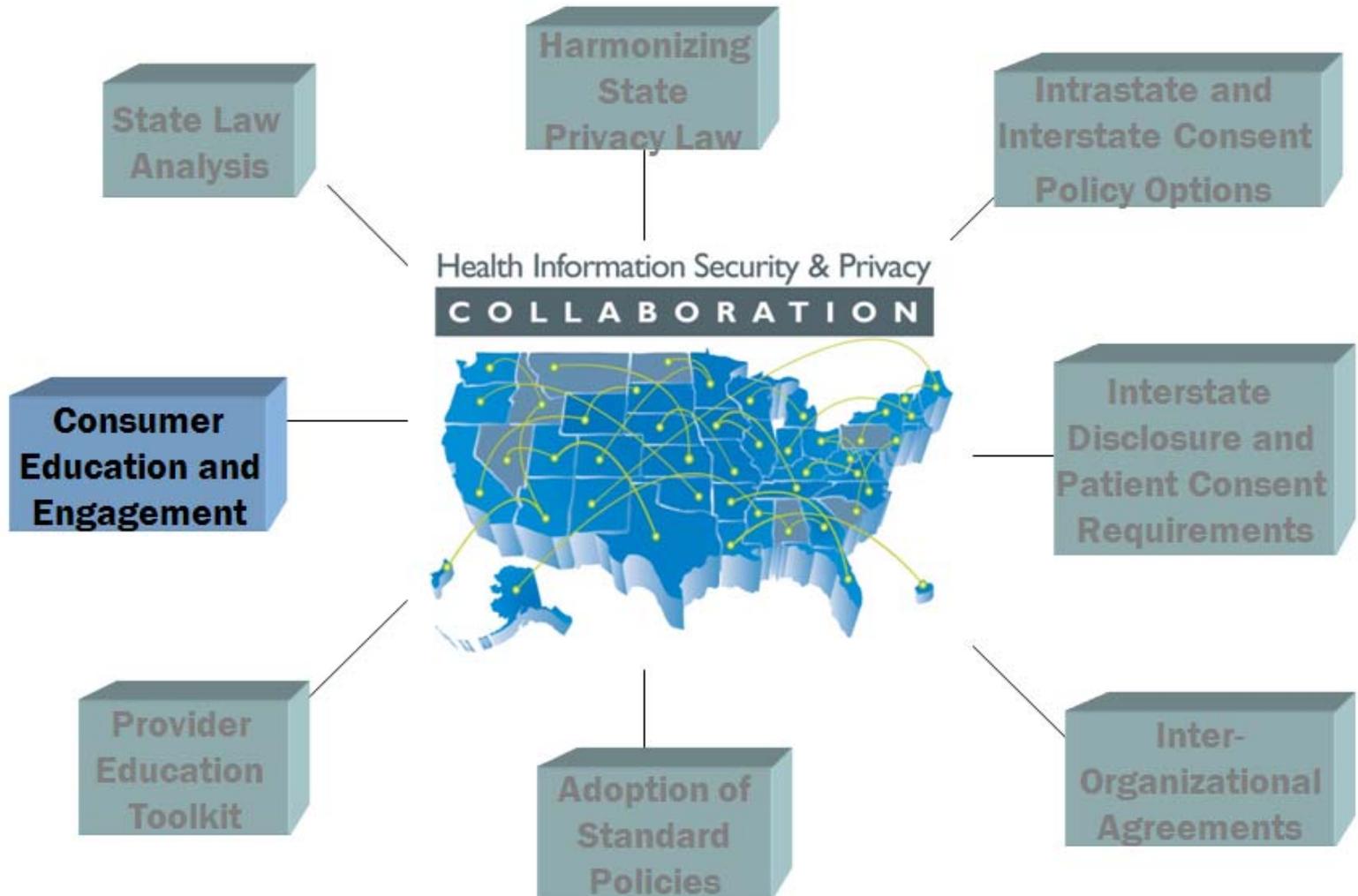


Before we begin...

- All participants are in audio broadcast mode—you must enable your computer speakers to listen to today's presentation.
- If you experience any difficulty with the audio, please notify the Webex producer.
- If you have a question during the presentation, please send it in the Q&A box in the bottom right corner. A question and answer period will follow the presentations.
- Please e-mail privacy.security@rti.org if you have any questions following this presentation.
- All HISPC materials can be found on the Web: <http://healthit.hhs.gov/HISPC>

HISPC Phase 3

HEALTH INFORMATION SECURITY & PRIVACY
COLLABORATION



Learning Objectives of this Webex

- Review the resources that the Consumer Education and Engagement multistate collaborative created.
- Provide examples highlighting use of these resources in the states.
- Discuss availability of additional resources for use by other entities.
- Outline the overarching lessons learned for implementing a consumer education and engagement project within states/locations.

Philosophy of the Collaborative

The use and sharing of protected health information is largely based on consumer trust and understanding.

Goal: We sought to improve trust and understanding.

How? By increasing awareness and understanding of privacy and security challenges, requirements, and patient rights.

Strategy? Multimodal educational approaches, targeted audiences, and literacy and language considerations.

We Learned:

- The need for, and use of, targeted audiences
- The importance of literacy control
- To avoid re-inventing the wheel using
 - templates,
 - strategies, and
 - guidelines
- The importance of collaborative/multistate views
- The importance of iterative looping for
 - content ,
 - legal and literacy expertise, and
 - consumer testing and feedback
- The importance of central or easily available repository for resources/tools

Collaborative Structure

Major focus on the following:

- Libraries/inventories/glossaries
- Developing policy
- Targeted populations: chronic care, rural/urban, behavioral health, ethnic groups
- Website creation and design
- Communication and outreach via media
- Video

Inventory Matrix

- Purpose:
 - Aggregate consumer materials from various sources into one place so that interested organizations and individuals have a quick look-up resource.
- Goals:
 - Reduce the amount of time organizations need to look up information.
 - Reduce incidences of recreating the wheel.

Inventory Matrix: Successes and Barriers

- **Successes:**
 - Captured consumer resources from all HISPC states and all major national health IT websites.
- **Barriers:**
 - Static document makes it difficult to have the most updated information.
 - Inventory has not been updated since its creation in fall 2008.

Tips for State Adaptation and Examples: Washington

	Brief Description of Resource	Key Word(s)	Targeted Audience	Resource Creator	Description of Resource Creator	Subject area	Media Type
3	Provides an overview of HIT	HIT, health plan	consumers, health plan members, providers, health plans	Aetna	Aetna is a health care benefits company serving members with information and resources to help them make better informed decisions about their health care.	HIT	Website

Website Link	Last Updated	Tools found in the resource
http://www.aetna.com/about/aoti/aetna_perspective/health_information_technology.html	2008	consumer health care tools, survey results, brief paragraphs on : FAQs, background and why HIT is necessary

Tips for State Adaptation and Examples: Kansas

KU E-Health Toolkit for Consumers

KU MEDICAL CENTER
The University of Kansas

Center for Healthcare Informatics

Center for Healthcare Informatics home

What's going on in Kansas?

Toolkit on HIT and HIE
Privacy and Security Issues

For Consumers/Patients

For Consumer/Patient Educators

For Healthcare Providers

For Policymakers, RHIOS or HIEs

Glossary

Contact Us

HEALTH INFORMATION SECURITY & PRIVACY TOOLKIT

Transforming Health & Health Care with Information Technology

For consumer/patient educators

General Resources

- Videos
- Presentations
- Reports
- Other state's resources
- Inventory
 - Educational Materials
 - PHR Inventory
 - Inventory of MA laws for Sensitive Information

Glossary

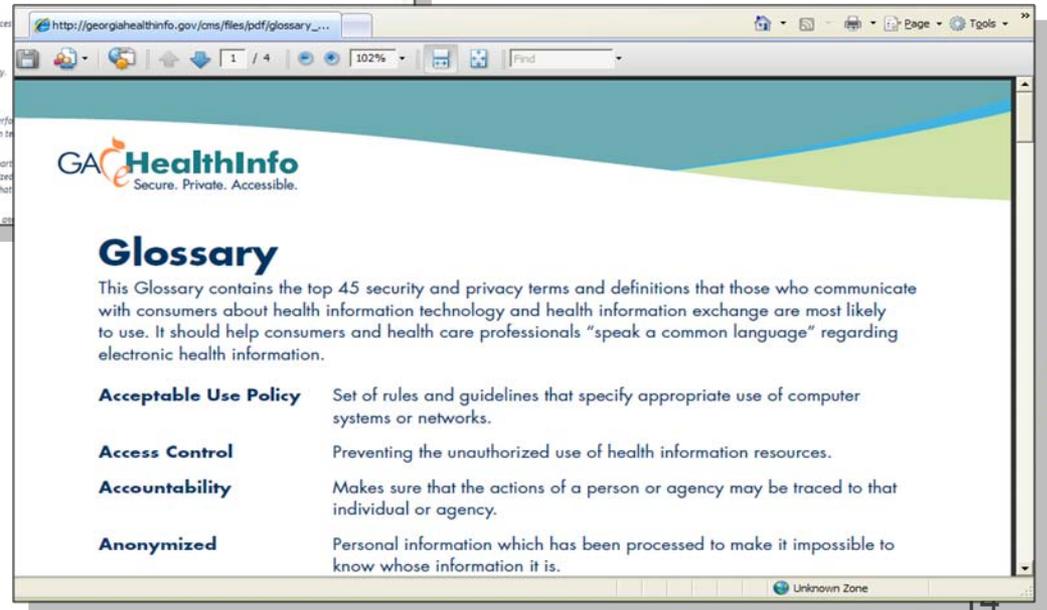
- The glossary was developed as a reference document for consumers who need to know the definition of health IT and HIE-related privacy and security terms.
- The glossary can be used in a variety of ways: embedded in other documents, used on Web portals, used as a stand-alone document.

Tips for State Adaptation and Examples: Kansas and Georgia

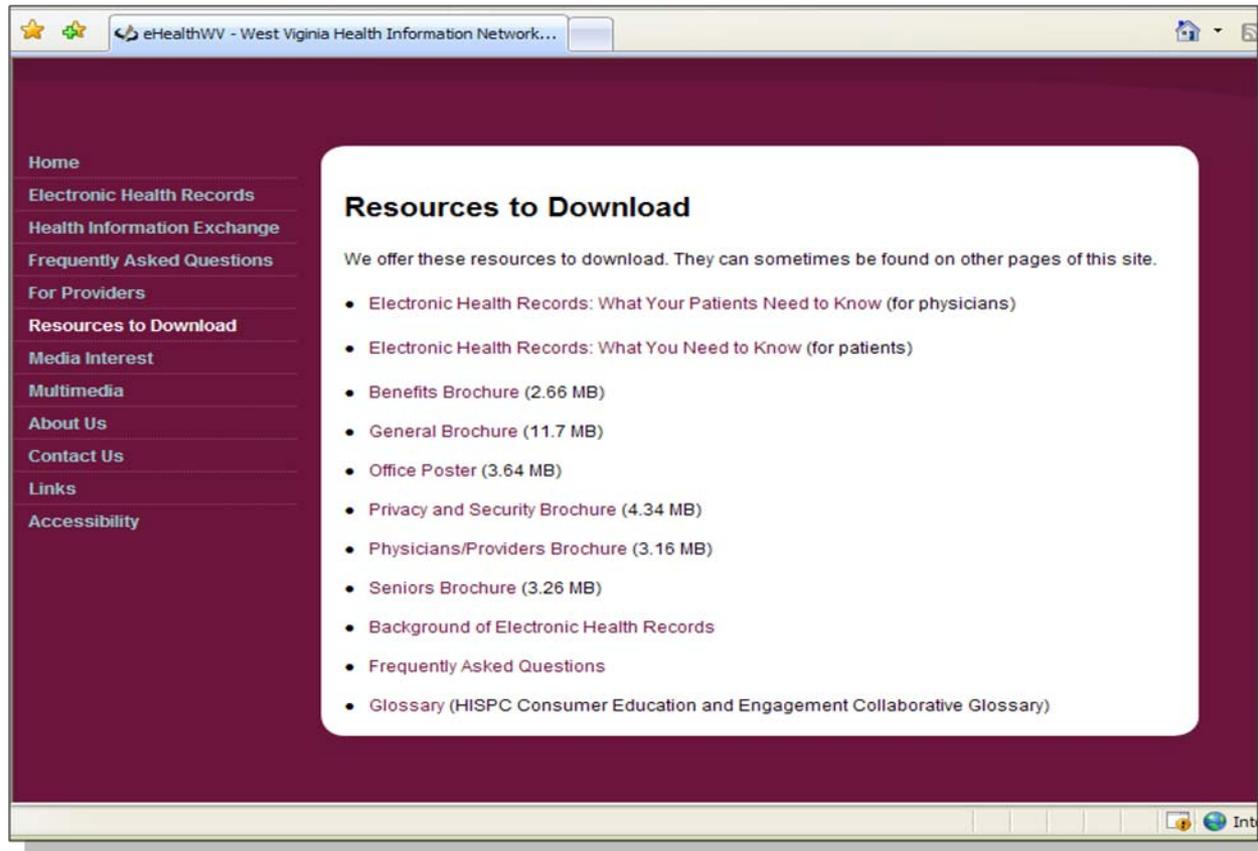


A key component of Georgia's Consumer Outreach Education Forums

Reformatted for Kansas State Consumer Health Portal for use by consumers across the state



Tips for State Adaptation and Examples: West Virginia



The screenshot shows a web browser window with the address bar displaying "eHealthWV - West Virginia Health Information Network...". The website has a dark red background. On the left side, there is a vertical navigation menu with the following items: Home, Electronic Health Records, Health Information Exchange, Frequently Asked Questions, For Providers, Resources to Download, Media Interest, Multimedia, About Us, Contact Us, Links, and Accessibility. The "Resources to Download" section is highlighted in the menu. The main content area features a white box with the heading "Resources to Download". Below the heading, there is a paragraph: "We offer these resources to download. They can sometimes be found on other pages of this site." This is followed by a bulleted list of resources:

- Electronic Health Records: What Your Patients Need to Know (for physicians)
- Electronic Health Records: What You Need to Know (for patients)
- Benefits Brochure (2.66 MB)
- General Brochure (11.7 MB)
- Office Poster (3.64 MB)
- Privacy and Security Brochure (4.34 MB)
- Physicians/Providers Brochure (3.16 MB)
- Seniors Brochure (3.26 MB)
- Background of Electronic Health Records
- Frequently Asked Questions
- Glossary (HISPC Consumer Education and Engagement Collaborative Glossary)

Website Creation and Design



Consumer Toolkit Materials Online



Provides easy access to HISPC resources from landing page of <http://georgiahealthinfo.gov/cms/>

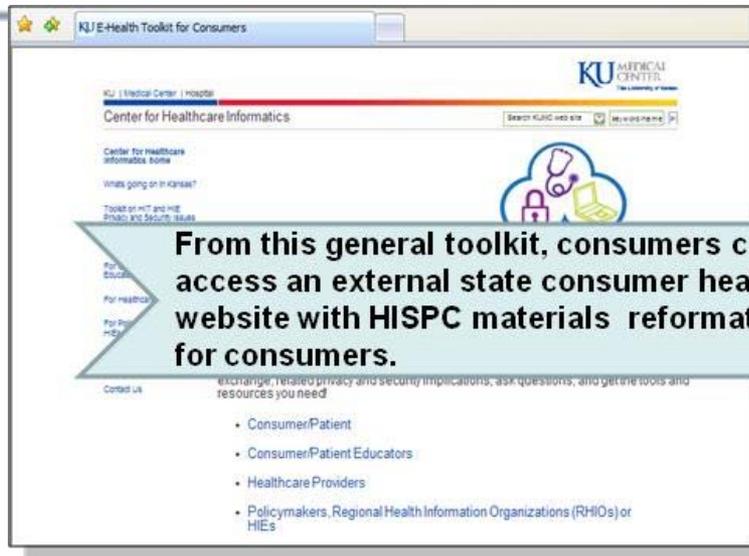


Washington's website: <http://www.accessmyhealth.org/>



New York's website home page: <http://ehealth4ny.org/>

Consumer Toolkit Materials Online



<http://www2.kumc.edu/healthinformatics/HISPC/Toolkit.htm>

- 7,370 page views; 1,751 visits to <http://ehealthwv.org/eh/>
- Media releases, educational tools for both providers and consumers
- Targeted rural population, seniors, and chronic disease



e-HealthWV
Your care. Your future. Learn more.

Press Room | Multimedia | Search

Electronic Health Records
Private. Secure. Practical.

Health Care Consumers:
Learn more about electronic health records

Increasing numbers of physicians and health care providers are using electronic health records to store your medical information, such as test results and medical history. These records replace the paper chart you are probably used to seeing in your doctor's office.

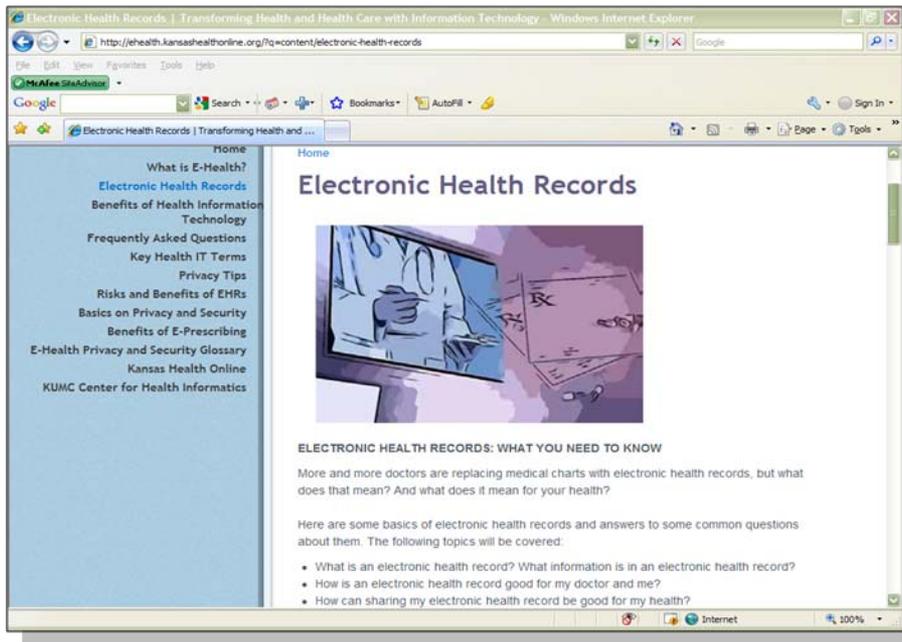
In the future, electronic health records will allow your doctor and health care providers to

Physicians:
Download free information

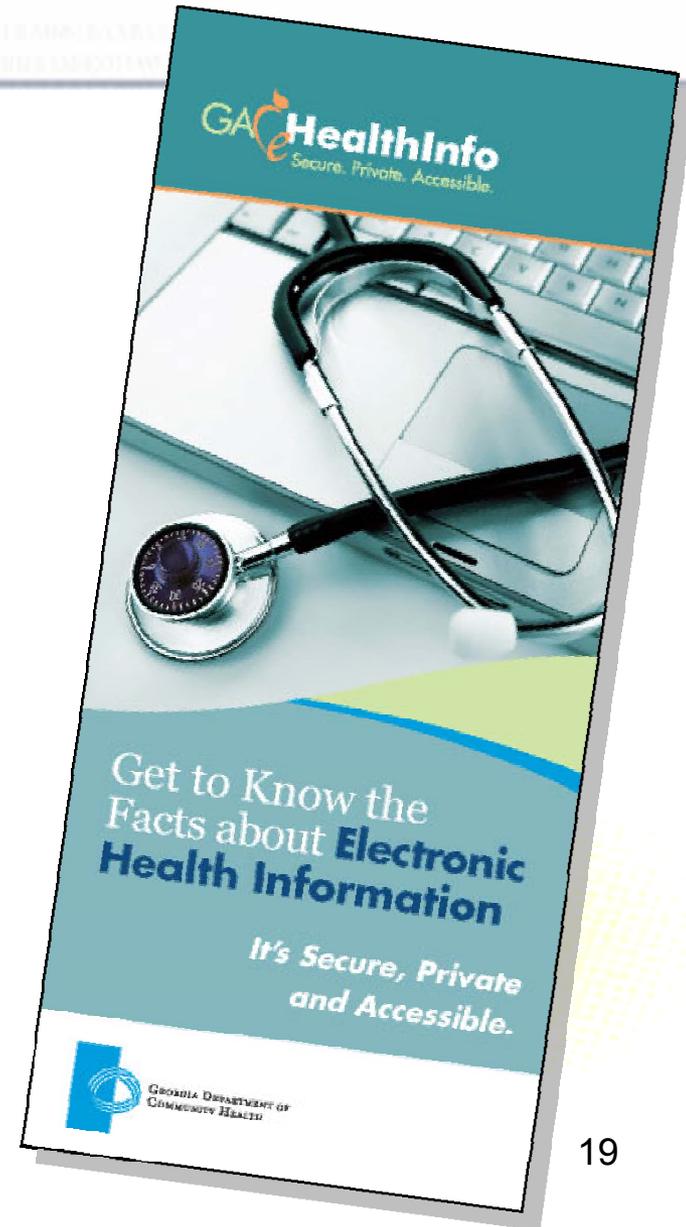
If your practice is considering switching to electronic health records or if you have already done so, it is important to keep patients informed. This may include discussing how your system works and the privacy and security of health information. We have developed a wide range of tools to help. In addition to using the information on this site, we encourage you to download the brochures, posters and fact sheets available

Tips for State Adaptation and Examples: Georgia and Kansas

- Introduces electronic health information to health care consumers.



Reformatted West Virginia brochure for Kansas consumers



Tips for State Adaptation and Examples: Kansas

The screenshot shows a web browser window with the address bar displaying <http://health.kansas.gov/healthcare/transforming-health-and-health-care-with-information-technology/frequently-asked-questions-faqs>. The page features a header with the title "Transforming Health & Health Care with Information Technology" and a sub-header "Frequently Asked Questions (FAQs)". The main content area is titled "What is 'consent?'" and includes a definition: "Consent means permission. In health care, this is permission that is given by an authorized person to use information about a patient. In most cases, the authorized person is also the person whose information is being shared. In some cases, the person authorized might be a representative, such as a parent, guardian, or person holding a health care proxy." Below this, it lists "State or federal law may decide:" followed by several bullet points regarding consent requirements. A section titled "What are patient preferences?" explains that "Patient Preferences" are requests made by the patient to the holder of the information regarding its use, sharing, sending, or storage.

The screenshot shows a web browser window with the address bar displaying <http://health.kansas.gov/healthcare/transforming-health-and-health-care-with-information-technology/benefits-of-health-information-technology>. The page features a header with the title "Transforming Health & Health Care with Information Technology" and a sub-header "Benefits of Health Information Technology". The main content area is titled "Benefits of Health Information Technology" and lists several key benefits: "You get higher quality care", "They improve your safety", "You will save money on healthcare", "They improve the health of Kansas", and "It's easier to talk to your doctor". Each benefit is accompanied by a brief description of how health information technology can improve the patient experience and healthcare system efficiency.

Communication and Outreach via Media



Fact Sheets/Brochures/Posters

- Washington
 - Posters/brochures for health record banking model
- Colorado
 - Language and literacy in fact sheets
- West Virginia
 - Content developed through partnership with WVHIN
 - Tested with collaborative, consumers, and literacy expert
 - Physician champions use posters/brochures
- Georgia
 - Pharmacy bag Insert for provider champions
 - HTML e-mail for consumers
- New York
 - Posters/brochure/radio PSAs

Tips for State Adaptation and Examples

Washington
Posters and
brochures for health
record banking
model

***PHRs: Better information means better patient conversations.**

Better data, better knowledge, better diagnosis, better efficiency. It's better when you get your patients online.



PHR



HRB
Health Record Bank

***Access Health Records**

Access Health

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Tips for State Adaptation and Examples

Colorado

Language and literacy in fact sheets

The image shows a stack of overlapping fact sheets for the Colorado Regional Health Information Organization (CORHIO) in various languages. The visible titles include:

- ИНФОРМАЦИОННЫЙ ЛИСТОК (Russian)
- DAIM NTAWV QHIA (Vietnamese)
- XAASHIDA XAQIIQADA (FACT SHEET) (Somali)
- Maxay Tahay CORHIO? (Somali)
- BẢN THÔNG TIN (Vietnamese)
- HOJA DE INFORMACIÓN (Spanish)
- Những Tổ Chức (Vietnamese)
- Tại Sao Tôi (Vietnamese)

FACT SHEET

What is CORHIO?

The Colorado Regional Health Information Organization (CORHIO) is a nonprofit organization of members whose mission is to improve your health care and health care for all Coloradans. CORHIO helps organizations share patients' health information electronically. This organization takes part in the CORHIO System. For more information about CORHIO, visit <http://www.corhio.org/>.

Which Organizations are in the System?

The following organizations are a part of the CORHIO System:

- Denver Health and Hospital Authority
- Kaiser Permanente
- The Children's Hospital
- The University of Colorado Hospital Authority

Why Does My Health Information Need to be Shared?

Currently, your health information may be at many different locations. If you have a treatment or test at one location, information about it may not be in the health information the doctor has. Doctors can make better decisions when they know as much as they can about your medical history. Information like lab test results, medicines, and other reports are important in an emergency. Also, not having all your health information may mean a repeated test which costs you time and money.

Is My Shared Health Information Kept Safe and Private?

Yes. CORHIO and its members obey all federal and state laws about medical information privacy. Organizations participating in the CORHIO system follow strict rules to protect the safety and privacy of your health information. CORHIO and organizations participating in the CORHIO system will not share your health information with anyone not involved in your care.

What Are My Rights? Can I Say No?

You have the right to decide whether your information is shared through the CORHIO system. You can choose to share your health information. This is called "Opting In." By making this choice, your information may not be directly available during an emergency for treatment. If you choose to "Opt Out," it will take 2 work days for your choice to be updated in the CORHIO system. change your mind, you may "Opt In" to the CORHIO system. You will have to call the health care provider you saw when you "Opted Out" of sharing your health information.

If you have questions regarding your privacy rights, please refer to your health care provider's Notice of Privacy Practices. This fact sheet is meant to explain CORHIO in an understandable way. This is not a legal document.

Tips for State Adaptation and Examples

West Virginia

- Provider Guidelines for Engaging Consumers in Electronic Health Records and Health Information Exchange: What Your Patients Need to Know
 - Outlines main points for physicians to keep in mind when discussing topic with patients.
- Electronic Health Records: What You Need to Know
 - Takes physician guidelines and transfers them into language and graphics that can be directly provided to patients.
- Both can be
 - Copied and pasted into physician educational materials.
 - Used as a discussion guide.
 - Presented in their entirety, in graphic form.



Electronic Health Records: What Your Patients Need to Know

More and more doctors are replacing medical charts with electronic health records, but what does that mean? And what does it mean for your health?

In this handout, we will explain the basics of electronic health records and answer some common questions about them. We will cover the following topics:

- What is an electronic health record?
- What information is in an electronic health record?
- How is an electronic health record good for my doctor and me?
- How can sharing my electronic health record be good for my health?
- How could an electronic health record help me in an emergency?
- What does it mean if my doctor participates in electronic health information exchange?
- What does the future hold for electronic health record systems?
- What laws help protect my medical record?
- What is HIPAA, and how does it help protect my medical record?
- How can I help protect my privacy?

What is an electronic health record?

An electronic health record is when your medical record is in a digital format. That means a computer is used to record, store and review your medical information.

There's an easy way to tell if your doctor uses an electronic health record system. Does the nurse or doctor bring a medical chart into the exam room? Or does the nurse or doctor use a computer or small hand-held device to enter information into your record?



What information is in an electronic

West Virginia HISPC III Highlights

PSA campaign: November 2008–February 2009



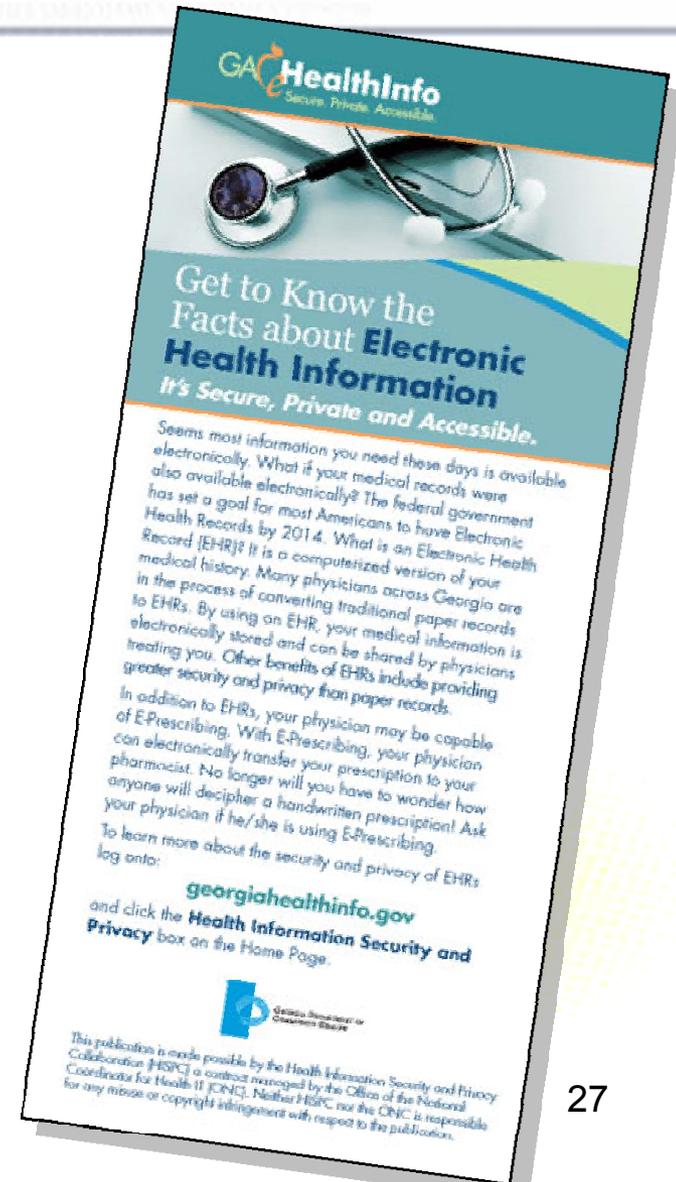
e+HealthWV
Your care. Your future. Learn more.
www.ehealthwv.org

Sponsored by the West Virginia Medical Institute and aired in cooperation
with the West Virginia Broadcasters Association and this station

Tips for State Adaptation and Examples

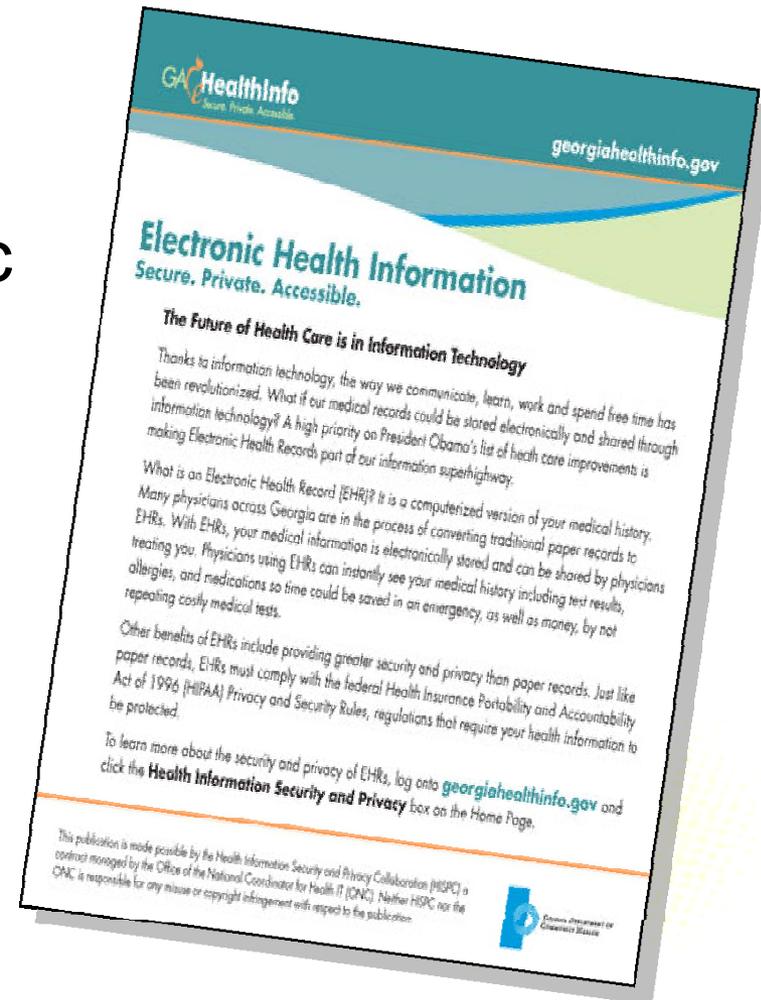
Georgia

Pharmacy bag insert brings awareness of security and privacy of electronic health information to a broader audience of health care consumers.



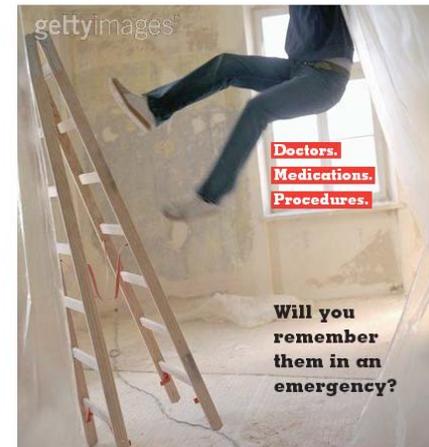
Tips for State Adaptation and Examples

HTML e-mail introduces consumers to security and privacy of electronic health information and directs them to <http://georgiahealthinfo.gov/cms/> for additional information

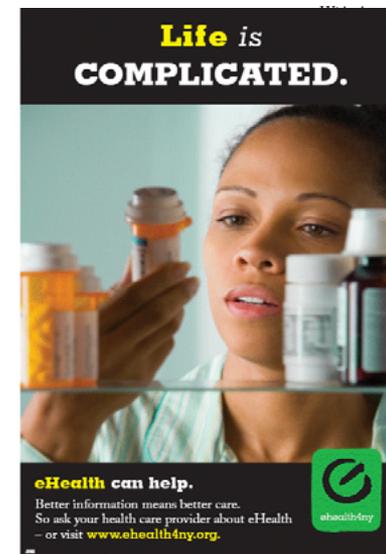


Tips for State Adaptation and Examples

- Messages based on two themes:
 - Emergency
 - Convenience
- Both can be used as:
 - Print ads
 - Posters
 - Radio messages
 - For consumers and providers



Better information means better care.



With your electronic health records, your doctors can see your medical history when it matters most. So ask your health care provider about eHealth, or visit www.ehealth4ny.org



NY Brochure: Better Information Means Better Care

ABOUT YOUR PRIVACY

Many people are worried about privacy and security when it comes to eHealth. Information can never be completely secure. This is true whether it's on paper or in a computer. But New York State is doing everything it can to make eHealth private and secure:

- Federal and state laws strictly protect the privacy and confidentiality of health information about you. New York State is requiring eHealth networks and everyone who uses them to follow the same rules to protect the privacy and security of records shared through this system.
- Only the people (such as doctors, nurses, and their staff) who are involved in your health care are allowed to access your health records using eHealth, and only if you sign a consent form. Others, such as employers and immigration agencies, won't have access to your information.
- Safeguards like passwords and other protections keep your records from being accessed without proper permission.
- You can request a list of everyone who has accessed your records using eHealth.
- If improper access does occur, you will be told, and New York State will make sure steps are taken to correct the problem so it won't happen again.

Q: Can I get access to my own medical records through eHealth?

A: By law you already have the right to get a copy of your medical records from the healthcare organizations that made them. Some doctors, hospitals, and other healthcare organizations in New York can give you access to your medical records online or on a computer, not just on paper – but not all of them have that capability today. New York State is working to make it possible for everyone to get access to their medical records through eHealth networks.

In addition, many public and private organizations are developing eHealth tools that you may be able to use to keep and share your health information on a computer.

Q: Where can I get more information about eHealth in New York?

A: www.ehealth4ny.org
A web site developed for the public by the Legal Action Center
www.health.state.ny.us/technology
The New York State Department of Health's Office of Health Information Technology Transformation
www.nyehhealth.org
The New York eHealth Collaborative
Or call:
877-690-2211



www.ehealth4ny.org

Produced with HISP/C funding through a federal contract managed by ONC.



State of New York
Department of Health

Better Information means Better Care

A guide to eHealth for New Yorkers



Frequently Asked Questions (FAQs)

- FAQs are part of “just-in-time’ training.
- When consumers need information fast, check FAQs first to see if their question has already been asked and answered.
- FAQs were chosen by the Collaborative participants after a ranking process.

Tips for State Adaptation and Examples

- Colorado
 - Part of Communications Kit
 - Vetted by public relations and consumer teams to assure relevance.
- West Virginia
 - Look at needs of consumers, vet with consumers as well as professionals, and make tools easy to read for population you intend to target.

Benefits and Risks

- Inventory as baseline information
- Most common questions and concerns
- Replicable, scalable based on local needs

This document was created using considerations for low literacy consumers. It is intended to promote simple ideas in an easy to read format.

Health Information Exchange and Health Information Technology Benefits & Risks

Health Information Exchange and Health Information Technology are tools that health care providers and consumers can use to improve health care. As in any other industry, the ability to exchange information electronically comes with benefits and risks. Here are some benefits and risks for you to consider.

Benefits

Available in Emergency: If you are in an accident and are unable to explain your health history to a health care provider, they can find the information about your medications, health issues, and tests and make informed decisions about your emergency care faster.

Protected in Disasters: If you are in an area affected by a disaster, like Hurricane Katrina, your health information can be stored safely in electronic form.

Improved Care/Reduced Medical Errors: Access to information about care you receive elsewhere gives your health care provider a better, more complete picture of your health. That means your health care provider can make sure the care he or she provides doesn't interact badly with other treatment you may be receiving. For example, when you can't remember what medications you are taking, health information

This document was created using considerations for low literacy consumers. It is intended to promote simple ideas in an easy to read format.

Risks

Identity Theft: Although health information benefits from all the security measures developed in other economic sectors such as defense and finance, it bears the same risks these other sectors have experienced. Identity theft occurs with both paper files and electronic files, but a breach of electronic files may affect more records than a breach of paper files.

Errors: Health Information Exchange is a tool to improve care. Just like a paper health record, if the health care provider does not enter the correct information, that information remains in the health record until it is corrected. However, electronic information can provide checks and balances that paper health records cannot.

Hackers: As long as information technology has existed, there have been efforts to try and break into records of all kinds. Electronic health care information benefits from the security measure developed by other industries. Being the last frontier of information technology, so anti-hacking security measures from other economic sectors are already used. However, hackers will continue to try to break security codes just like they do in other electronic systems.

There are Benefits and Risks associated with Health Information Technology and Health Information Exchange. Ask your health care providers if they use Health Information Technology or participate in Health Information Exchange. If you have questions, make sure that you have a conversation about how your doctor protects your health data.

Tips to Protect Your Privacy

- Intended to cultivate and increase consumer confidence
- Modeled on information that HHS is already using
- Easily replicable and adapted to individual state campaigns

What Information Is Protected?

- Information your doctors, nurses, and other health care providers put in your medical record.
- Conversations your doctor has about your care or treatment with nurses and others.
- Information about you in your health insurer's computer system.
- Billing information about you at your clinic.
- Most other health information about you held by those who

What Should I Do If My Rights Are Denied or I Don't Believe My Health Information Is Being Protected Properly?

- Contact a privacy officer.

Every health care provider and health plan covered by the federal health privacy law must appoint someone on their staff as a privacy officer. If you experience a problem related to the privacy of your medical records or access to them, you might want to contact this individual in an effort to resolve the problem.

- File a federal complaint.

You may also choose to file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights, the federal agency charged with enforcing the federal health privacy law. This office has the authority to impose civil and criminal penalties if they find a violation of the law. Your complaint must be filed within 180 days of the incident. You can also go directly to <http://www.hhs.gov/ocr/privacy/index.html>

- Seek state-level recourse.

There are officials in your state who may be willing to help you address violations of the

Tips for State Adaptation and Examples: Kansas

Privacy and your health information | Transforming Health and Health Care with Information Tech - Windows Internet Explorer

http://ehealth.kansashealthonline.org/?q=content/privacy-and-your-health-information

File Edit View Favorites Tools Help

Google 5600 and shawnee and milridge Search 5600 shawnee milridge

Privacy and your health information | Tra...

Home

What is E-Health?

Electronic Health Records

Benefits of Health Information Technology

Frequently Asked Questions

Key Health IT Terms

Privacy Tips

Risks and Benefits of EHRs

Basics on Privacy and Security

Benefits of E-Prescribing

E-Health Privacy and Security Glossary

Kansas Health Online

KUMC Center for Health Informatics

11:04 AM

Tuesday

5/26/2009

Transforming Health & Health Care with Information Technology

Home

Privacy and your health information

The Privacy of Your Health Information is Protected By Federal Law

Most of us believe that our medical and other health information is private and should be protected, and we want to know who has or can see this information. The Health Insurance Portability and Accountability⁷ Act of 1996 (HIPAA⁷) Privacy Rule, a federal law, gives you rights to your health information and sets rules and limits on who can look at and receive your health information.

Who Must Follow This Law?

We call the providers, businesses, and organizations that must follow the HIPAA Privacy Rule covered entities.

Covered entities include:

- Health plans, including health insurance companies, HMOs, company health plans, and certain government programs that pay for health care, such as Medicare and Medicaid.
- Most health care providers—those that conduct certain business electronically, such as electronically billing your health insurance—including most doctors, clinics, hospitals, psychologists, chiropractors, nursing homes, pharmacies, and dentists.
- Health care clearinghouses—entities that process nonstandard health information they receive from another entity into a standard (i.e., standard electronic format or data content), or vice versa.

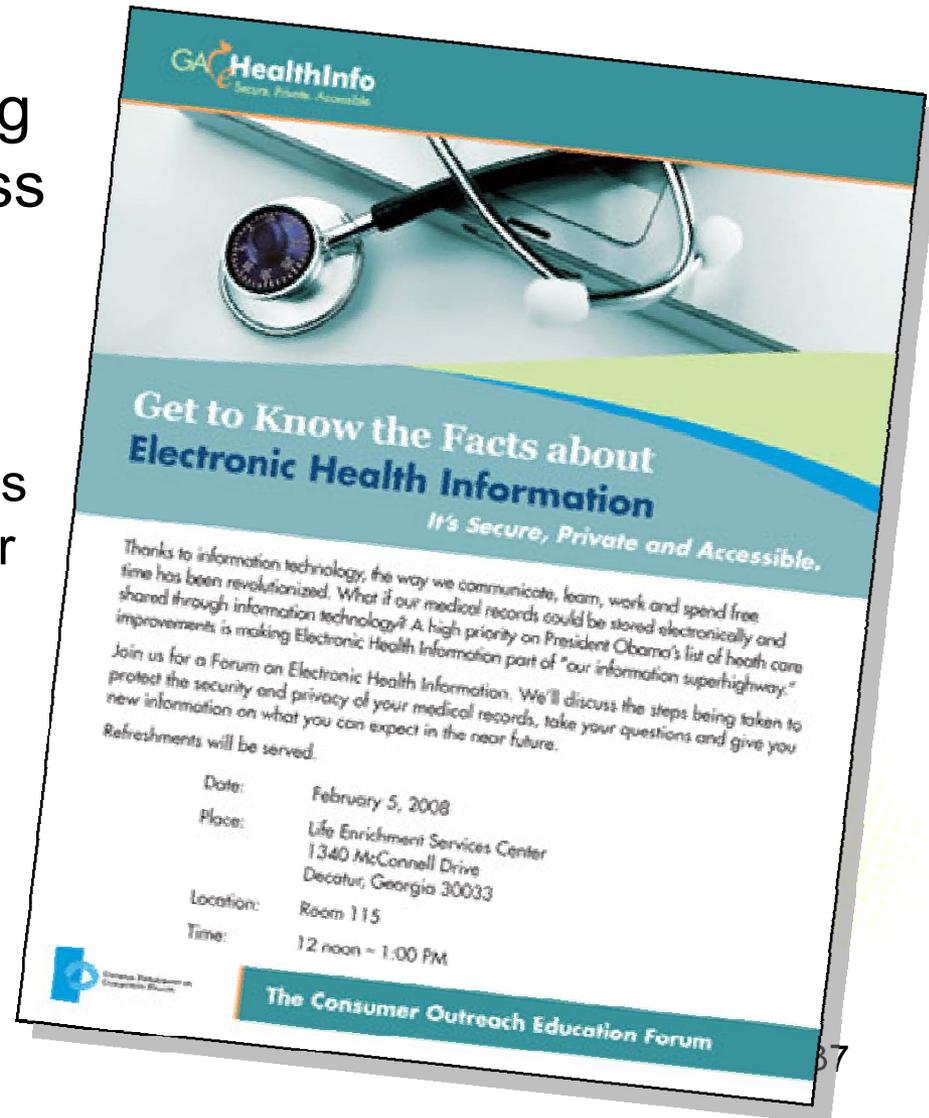
Covered entities routinely establish relationships, typically through contracts, with other businesses to help them with particular programs or services. These businesses are commonly referred to as a covered entity's *business associate*.

Town Hall Meetings/Forums

- Oregon
 - Used documentary to establish baseline of knowledge for informed discussion on privacy concerns.
- Georgia
 - Facilitated sessions on the security and privacy of electronic health information.
- West Virginia
 - Consumers interested in learning about privacy and security in plain language.
 - Trusted their physician (the most) to give them the facts about EHRs/HIE.

Consumer Awareness Forum Flyer

- Announces upcoming Consumer Awareness Forums
 - Held in rural and metropolitan areas
 - Provides opportunities for ongoing consumer input and evaluation



Developing Policy



Guide to Common Projects: Developing Consent Policy

- Overview
 - How health IT affects consumer consent
 - Consent as part of a bigger policy picture
- Key considerations for states in crafting consent policy
 - Existing health IT model/infrastructure
 - Legal and regulatory landscape
 - Overarching governance structure
- The consent policy-making process
 - Recognizing diverse stakeholder perspectives
 - Establishing core principles
 - Holding stakeholder meetings
 - Structured analysis

Guide to Common Projects: Implementing Consent Policy

- Model consent form
 - How health IT affects consumer consent
 - Education process
- Key considerations for states in implementing consent policy
 - Consent to access vs. consent to disclose
 - Sensitive health information
 - Consent issues for/with minors
 - Converting or uploading data without consent
 - Legal and regulatory landscape
 - Overarching governance structure
- How the information is used
 - Treatment, quality improvement, and care management
 - Payment
 - Other uses such as research, marketing, etc.

Video



Sharing Health Information Nationwide...and Doing it Right

- A *How to Guide* has been developed that uses the Oregon HISPC documentary on privacy, security and use of health information to engage and educate consumers.
- Footage has been used by other states to create videos for local initiatives.



Screenshot of Oregon video, *Sharing Health Information Nationwide . . . and Doing it Right*.

Tips for State Adaptation and Examples



WELCOME TO CORHIO
Health Information Exchange: The Most Important Tool

CORHIO
Colorado Regional
Health Information
Organization

ABOUT
SERVICES & PROJECTS
NEWS & EVENTS
HIT RESOURCES

To view the informational video, click the play button.

If you are in an emergency room, how long do you want it to take for your clinician to find medical history on you? Days? Hours? What about when you are in the emergency room and other offices are closed? By using CORHIO, clinicians can find medical information about you in minutes so that they can make better, informed choices of how to serve your needs.

- 3-minute intro video
- Local experts

Better Information Means Better Health
adapted Oregon State's by adding footage
of the New York State Health
Commissioner, Richard F. Daines, MD.



Tips for State Adaptation and Examples

Massachusetts focus on behavioral health and sensitive information: *Balancing Risks and Benefits: The Sharing of Sensitive Health Information*

- Includes conversations with national and local experts in health IT, mental health, consumer advocacy, and privacy law
- Two themes:
 - Knowledge leads to good analysis and assessment of personal risk/benefit.
 - Trust health care providers and ask questions.
- Strategy: Begin with the concept of electronic health information and work down to the specifics of what consumers should know and how they can begin to learn it.

Targeted Populations:

Chronic Care, Rural/Urban,
Behavioral Health, Ethnic Groups



Additional Resources and Lessons from the States: Tailoring to Specific Needs/Populations

- Massachusetts
 - Developed a set of resources that focus on *behavioral and sensitive health information*
- Colorado
 - Latino population
 - Chronic care population
- Kansas
 - Rural and frontier population
- New York
 - eHealth brochure and consent form translated into 14 languages to meet diverse population needs
- West Virginia
 - Rural, seniors, and chronic disease

Massachusetts: Focus on Sensitive Health Information Populations

We learned:

A multimodal approach is important—people have different learning styles: logical, auditory, kinesthetic, and visual learners, to name a few.

Literacy control is key—people can't learn what they don't understand!
Language translation alone doesn't ensure understanding.

Massachusetts: A Multimodal Approach to Learning About Sensitive Health Information

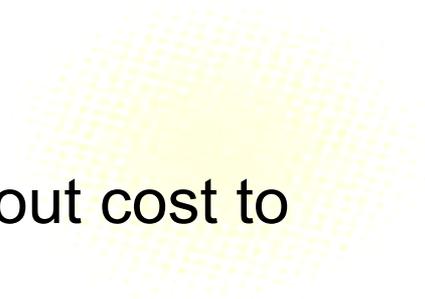
- Self-directed electronic tutorial
- FAQs
- Legal rights of Massachusetts' consumers with behavioral health/sensitive information health issues
- Documentary: *Balancing the Risks and Benefits: the Sharing of Sensitive Health Information*
- Personal Health Record (PHR) Inventory and companion Consumer Guide for PHR Choice

Note: All literacy-controlled

Colorado

HEALTH INFORMATION TECHNOLOGY
SUPPORT CENTER

- We learned:
 - Similarities
 - Providers need to share health information electronically.
 - Consumers would like to have electronic access to their information.
 - Very concerned about employers and insurers misusing information.
 - Differences
 - Latino community concerned about cost to consumer.



A Few Key Lessons from New York

- An inclusive process takes time
- No one deliverable can fit all needs: need different kinds of media and customizable templates.
- Direct consumer testing is essential.
- It's hard to find a balance on extent of detail (and it varies by medium).
- There are limits on lowering literacy levels—especially for a patient consent form to exchange electronic health information.

Guide to Common Projects: Translating for Literacy

- The two golden rules of communicating in plain language are:
 - Know your audience—who are you writing for? Take into consideration age, gender, ethnic background, education, etc.
 - Identify your main message and key points—and stick to them!
- *Writing in Plain Language*—20 Quick Tips.
- **SMOG** readability formula (**S**imple **M**easure of **G**obbledygook).

We Want You to Know...

- The general public assumes we share information and that there will be a breach.
- They are okay with this reality, but want to know we are doing our best to protect them.
- Different conversations with different audiences require different tools and processes.
- Templates only take you so far, but they are a great start!
- Literacy and language matter.

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*Thank you for
listening!*

Questions?



Thank You for Attending

- Please visit <http://healthit.hhs.gov/HISPC> for full access to all of the products discussed today as well as information about the other HISPC collaborative products.
- Additional materials are being posted as they become available throughout the month of June.