Physicians Are No. 1 Source for Drug Law Info

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WASHINGTON — Older patients are choosing their physician over the phone or using electronic resources to help them understand the complexities of the new prescription drug law.

Many beneficiaries don't understand what the new law does, and many are not comfortable looking for information online, Drew Altman, president and CEO of the Kaiser Family Foundation, said during the annual conference of the National Academy of Social Insurance.

In a Kaiser Family Foundation poll of more than 1,200 adults, only 13% said they understood the new law very well. More than half (53%) said they didn't have enough information about the law to understand how it would impact them personally.

The poll was conducted in December 2004 and included responses from 237 adults aged 65 years and older and 953 adults aged 18-64.

In a question specifically addressed to seniors, respondents were asked what sources they would turn to for help. The majority (38%) said they'd ask for their physician's counsel when deciding whether or not to enroll in a Medicare drug plan, Mr. Altman said.

Seniors also cited Medicare offices, Web sites, or phone number (31%); pharmacists (30%); and health insurance companies (25%) as consultation sources for the new drug benefit.

Upon closer look, however, it doesn't seem as if the Internet or the phone are popular venues to get information. Forty-three percent of the seniors who responded to the poll said they'd never heard of the 1-800 Medicare number, and 42% were aware of it but have never used it.

Only 6% of the respondents said they had heard of Medicare.gov, and 39% said they'd never heard of the Web site. For those aged 65 and older, 73% said they have never gone online, and 85% said they've never gotten assistance from a friend or family member to visit an Internet site on their behalf to get information about Medicare.

Most of the information isn't access friendly to the average beneficiary, Roslyn Taylor, M.D., a family physician in Savannah, Ga., said in an interview. "Many of the seniors do not have or know how to use computers." Those patients who did "told me that even if they went on the Web site they still were confused."

Thirty-seven percent of the seniors who responded to the survey said they would prefer to get their Medicare information from mailings, and 25% said they would not mind obtaining the information in person from Medicare or Social Security offices. Only 18% cited toll-free telephone hotlines as a preferred method.

Physicians themselves may need a quick tutorial on the new benefits. "I think that a lot of physicians are not aware of the details regarding what new things Medicare is covering—and under what specific rules," said Colette Willins, M.D., a professor at Case Western Reserve University in Westlake, Ohio.

Older beneficiaries seemed more aware of specific benefits. Respectively, 86% and 67% of beneficiaries aged 65 and older knew about the discount drug card and a $600 subsidy on the costs of drugs for low-income people. Only 27% of beneficiaries aged 18-64 were aware of the subsidy.

Senior respondents seemed divided on their reported plans to enroll in the drug benefit in 2006. Nineteen percent said they would, 37% said they would not, and another 37% said they hadn't heard enough about the new benefit to decide.

Seniors who responded to the Kaiser survey thought low-income people on Medicare would benefit the most from the new law, although fewer respondents thought it would help the typical Medicare beneficiary. Only 34% thought it would be very or somewhat helpful to them, personally. "It does seem like a pretty difficult program to explain," Dr. Farley said. ■

Tackling Health Illiteracy Key in Managing Chronic Disease Patients

WASHINGTON — Physicians are experimenting with better ways to communicate with patients with low health literacy, Joanne Schwartzberg, M.D., said at a conference on health literacy sponsored by the American College of Physicians.

"It's right in the lap of every physician," said Dr. Schwartzberg, director of aging and community health at the American Medical Association. "Physicians can't say it's someone else's problem."

Using simple language, distributing patient education materials, speaking slowly, reading instructions aloud, using teach-back techniques, and drawing pictures are some of the ways health care providers say they are trying to do a better job of reaching out to patients with low health literacy, Dr. Schwartzberg said.

The AMA has developed a health literacy kit with a video and manual for clinicians. The group has also started a train-the-trainer program. To date, the group has trained 11 teams from state and specialty societies. In 6 months, the first 5 teams have conducted 57 trainings and reached more than 1,500 physicians, she said.

Preliminary results show that after the training, a majority of the physicians changed their communication with patients.

For example, many reported that they were more often asking patients to repeat back instructions.

Reaching out to patients with low health literacy is especially important in managing chronic disease because there is a "mismatch" between the capabilities of individuals and the demands of their diseases, said Dean Schillinger, M.D., associate professor of medicine at the University of California, San Francisco.

In examining the interactions between physicians and patients with type 2 diabetes, Dr. Schillinger found that physicians used a lot of medical jargon when providing recommendations or education to patients. Patients with low health literacy were confused by terms that physicians might expect a person with chronic diabetes to know, such as "glucometer," or by hearing that their weight is "stable."

But simply raising awareness may not be enough, Dr. Schillinger said. Physicians say they need more systematic support, such as appropriate educational materials.

And more research is still needed on what interventions work, especially if the medical community is going to ask insurers and other payers to offer financial incentives in this area, said David Kindig, M.D., chair of the Institute of Medicine Committee on Health Literacy.

—Mary Ellen Schneider