



TOOL/UTILITY

11 Ways to Bolster Efforts to Engage Consumers

Public Reporting of Cost & Resource Use Information to Consumers

December 2011

- 1. Encourage employers, purchasers and plans to provide incentives to consumers for making higher value choices.** Aligning incentives so consumers are encouraged to consider cost in their decision making is the most critical opportunity to engage consumers with your reports and make care more efficient. Work with employers, plans, and purchasers in your community to make sure your consumers have “skin in the game” of increasing the value of care.¹
- 2. Invest in broad educational and motivational efforts directed at consumers to counter ingrained beliefs and behaviors.** Anticipating and addressing ingrained beliefs and behaviors through educational efforts and properly-aligned incentives can help prevent consumers from misusing the information you are presenting. Remember, consumers who believe “more is better” are likely to use cost and resource use reports to select providers who offer more care or who are more expensive – unless they are given reason or incentive to believe otherwise.
- 3. Provide consumers with compelling reasons in your report to care about and use cost and resource use information.** Traditionally, consumers have had little reason to care about the cost of health care. In addition to ensuring consumers have an incentive to look at your report, seek guidance on how to communicate the benefits of engaging with this information.²
- 4. Be careful when choosing which existing measures to report.** Pick measures that are the most relevant to your community and easiest for consumers to understand.

About Aligning Forces for Quality

Aligning Forces for Quality (AF4Q) is the Robert Wood Johnson Foundation’s signature effort to lift the overall quality of health care in targeted communities, as well as reduce racial and ethnic disparities and provide real models for national reform. The Foundation’s commitment to improve health care in 16 AF4Q communities is the largest effort of its kind ever undertaken by a U.S. philanthropy. AF4Q asks the people who get care, give care and pay for care to work together to improve the quality and value of care delivered locally. The Center for Health Care Quality in the Department of Health Policy at George Washington University School of Public Health and Health Services serves as the national program office. Learn more about AF4Q at www.forces4quality.org. Learn more about RWJF’s efforts to improve quality and equality of care at www.rwjf.org/qualityequality/af4q/.

About the Author

American Institutes for Research (AIR) provides technical assistance for the Robert Wood Johnson Foundation’s *Aligning Forces for Quality* initiative. AIR is working with Aligning Forces communities to support effective public reporting of cost and resource use information that encourages higher-quality health care at lower cost and authored this publication.

¹ Please see the Communications Toolkit for guidance on this topic (<http://communicationtoolkit.airprojects.org/>).

² AIR will be conducting research and providing guidance to Alliances on how to display, frame and label cost and resource use information in a forthcoming product. GYMR and MS&L will be providing general guidance on messaging.

5. **Establish proper context for each of your measures.** Without proper context, current measures can mislead consumers. For example, “average length of stay”—a common measure of hospital resource use—could be interpreted different ways by different consumers. Some consumers may regard longer stays as reassurance that they can stay in the hospital as long as they need care; others may interpret shorter stays as better because they understand the risks associated with longer stays at the hospital or simply do not like being at the hospital.
6. **Foster trust with consumers and minimize confusion by writing in clear, plain language.** Research has found that consumers are not only more likely to understand, but trust, materials that are plainly-written and transparent.³ Keep explanations and displays simple, but offer consumers the option to dig deeper if they would like to see more information.
7. **Seek guidance on displaying cost and resource use information.**⁴ Consumers may have a difficult time interpreting measures of cost and resource use since they do not have an “ideal” score the way quality measures do (e.g., in an ideal world, everyone gets appropriate immunizations and no one suffers from complications of medical care). In many cases, it may be unclear to consumers whether a higher score or a lower score is better. These aspects make it difficult to establish performance benchmarks that can help them make comparisons between providers.
8. **When possible, display cost and quality information together.** Displaying cost and quality information together can educate consumers that choosing lower cost providers does not mean sacrificing quality. Early efforts at combining cost and quality information have been successful at driving consumers to choose low-cost, high-quality health systems.⁵
9. **Advocate for measures that are more consumer-friendly.** Alliances can play an important part in developing more consumer-friendly cost and resource use measures by advocating for measures that capture consumers’ out-of-pocket costs and take into account variations in provider cost (when appropriate), rather than the costs borne by purchasers and payers. Remember: consumers find information on out-of-pocket cost to be more compelling and actionable than information on the total cost of care.
10. **Test language and displays with potential users.** Information on costs and resource use is neither easy to explain nor easy for consumers to understand. It is critical to test language and displays with potential users to learn whether they are interpreting them the way you intended.⁶
11. **Disseminate your findings.** Finally, Alliances can help develop a store of knowledge in this new area not only by testing strategies for educating, explaining and displaying existing cost and resource use measures to consumers, but by sharing the findings with others.

³ Quincy, Lynn. Making Health Insurance Cost Sharing Clear to Consumers: Challenges in Implementing Health Reform’s Insurance Disclosure Requirements, Commonwealth Fund, February 2011. pub. 1480, Vol. 2

⁴ AIR will be providing guidance to Alliances on how to display cost and resource use information and on communicating the underlying benefits to consumers in plain language. GYMR and MS&L will be working on general messaging.

⁵ Christianson J, Feldman R, Weiner JP, Drury P. Early experience with a new model of employer group purchasing in Minnesota. *Health Affairs*. November 1999. 18(6):100-114.

⁶ For more information on testing displays with consumers, please see [How to Get Consumer Feedback and Input into Websites](#).