

# VA Mobile Discussion Series

## Learn more about the MyVA Health Journal App

VA's Mobile Discussion Series is a monthly webinar featuring a variety of topics focused around app development and mobile health at VA. This discussion covers VA's MyVA Health Journal App

*Micah Azzano:* Hello everyone and welcome to the VA Mobile Discussion Series webinar. My name is Micah Azzano, and I'm going to run through a few brief technical reminders before we begin the discussion about MyVA Health Journal today.

Your phone lines are going to be muted throughout the call, and we will be taking questions through the chat feature, available to you at the right of your screen. If you're experiencing technical difficulties, please use the chat and someone will be in touch to offer you assistance.

Today, we welcome Dr. John Hixson, clinical lead for MyVA Health Journal, and as I mentioned before, if you have any questions during the presentation for Dr. Hixson, please use the chat feature. We're going to stop the presentation intermittently to answer those questions. And if you need to download the presentation, please click on the file name below the chat screen. The presentation will be available later for download through the Mobile Discussion Series web page.

With that I'll turn it over to you, Dr. Hixson.

*Dr. John Hixson:* Okay, thanks so much for that kind introduction. Can everyone hear me okay? I'm also hearing a little clicking noise. I'm not sure if everyone else is getting that as well. Is that just me?

*Micah Azzano:* Yeah, there's a little clicking and we're working on it right now, but it shouldn't be in the recording.

*Dr. John Hixson:* Okay. Alright, well, I'll proceed. So, I was invited to talk today about the MyVA Health Journal, which is one of the mobile applications that been developed under the Office of Connected Care suite of applications. This is one of the main applications that is a so-called patient-facing application, and that basically means that it was developed solely with the purpose of being something that the patient or a caregiver would use to assist in a Veteran's health care longitudinally. There's a whole other suite of applications that you may have seen on this series that are called provider-facing applications, and those are basically complementary to this type of application in that they allow a health care team or a provider to access various data elements that are important for ongoing care. So today we're going to focus on MyVA Health Journal, and you may be wondering from the outset: is there going to ever be a nexus of these two types of applications, the provider-facing and the patient-facing? And we'll talk about that a little bit at the end of the presentation. I'd be happy to address any questions about that.



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So, this is a basic agenda. I think there's something like 20 slides, just to give you an idea. It probably will take me about 30 minutes to go through them. We'll stop at one point for questions. I'll basically go through a little overview of the application itself and talk about some of the key benefits. Then I'll demonstrate a couple of the specific features that are in the application. Then we'll talk about two very specific use cases which I personally feel are a potential value add for this application. Those will be the medical visit questionnaire, which is a part of the application, and then family history inputting. Then we'll wrap up with some greater detail about the planned field testing for this application, next steps and then, as we mentioned before, we'll field your questions.

Okay, so what is MyVA Health Journal app? The name is relatively generic and that's because it's a massive application. Compared to some mobile applications which have a very discreet or specific intent, this one basically allows a Veteran to enter a variety of health metrics that may be valuable to them, and there a lot of them. So, this includes things like a patient's military or family history, their reflections, some subjective assessments of their values, goals and overall wellness. There's also an area where you can enter formal health assessments – basically you can respond to questionnaires. A patient or a caregiver could enter and track health measures, like glucose, exercise, weight data – this includes things that you may get from connected devices like scales or a Fitbit. You can set a reminder within the application, which then can communicate with the patient over email reminding them to enter this data if they've forgotten to do it. You can create appointment plans. You can upload actual files that may be related to your health – that would include any type of outside information from another hospital. Then, finally, you can create reports that you can visualize for all of the data that you may be tracking. To be perfectly clear, this is not even an exhaustive assessment of everything that's available within the application. So, I would urge you to look through it and potentially participate in the pilot testing if you're interested.

So just in terms of the basic kind of flow, I guess, a Veteran would input this information into the application, and again, there's a large number of variables that can be tailored for an individual. Then you can send reminders to enter these measures, and this can be something that you either send a reminder back to yourself, or you send a reminder to a caregiver. Then if you reliably put that data in, then you can create a table or a graph that allows you to track that over time and filter the entries to review data from a certain period. Then we'll talk about later how you can use that data either for your own personal use or review it with a health care team at a visit. That would include even sending this digitally over, say, a Secure Message potentially.

In terms of the potential benefits, you know, there's benefits for both Veterans and potentially for care teams. This already starts to get to this idea of kind of bringing together the patient-facing applications with the provider-facing applications. For Veterans, hopefully this is already obvious, this would be a central home for them to put in their data, if they're interested. Admittedly, this would potentially be more valuable for people who are so-called “quantified selfers” and are very interested in keeping close tabs on this information. Some other people may decide that they don't find utility for the entire application and they only want to use it for one particular purpose, and that's totally fine. For patients who are interested in tracking, they



can view the self-entered data in table and graph format, and then they can filter past entries to look at very specific periods. So, for instance, if there's a six-month gap that you feel is a time that you were really having difficulties, you can look at that data period specifically. Then, again, if there's information that they want to review with their VA care team, they can upload that and then send it either electronically or print it or bring in the device with them to a visit.

For care teams, they can use this as a method of giving patients an additional tool that could be useful for self-managing their care. As I mentioned, if they were interested in reviewing patient progress in-between visits, they technically can do this. We will talk about a companion application towards the end of the presentation that would allow them to do that. Then, again, this could serve as a kind of a central platform repository for a patient health history that would be kind of in our archive of ground truth as to a person's history. That could be their family history or their own personal health history.

I think we're all hearing the clicking. I'm still getting it, too, so if can get that fixed that would be great. Maybe I'll pause here just one second, so, I know someone said that it "sounds like the same stuff already in My HealthVet." That is true. That is absolutely true, and so, this actually has been promoted in companion with My HealthVet. I would say that we have been in talks for a while now about overlapping interests and the potential to merge these particular applications, which that has not occurred yet, but that's a very fair observation. The overlap isn't perfect, however. There are a variety of things that are available in the journal app that aren't available in My HealthVet. Although you could offer a rebuttal that there are things that are in My HealthVet that aren't offered here, and that is true.

Okay, I'll go through the features in a little bit more detail. So, to log in or create an account you need a device with internet access obviously. This can be any type of device, mobile or desktop, laptop format. You need one of three credentials to sign in. That would be a My HealthVet premium account, an ID.me account or a DS logon level 2 authenticated account. Those three options pop up on the initial screen when you're asked to log in and create an account.

This is actually the home screen. So, after logging in, the home screen shows you all of the various options on the left there. The home screen itself provides a welcome page with your name, the date and then notifications. These notifications are things that you may have set up yourself in terms of reminders about entering health data or taking a medication or an upcoming appointment. Then if you look at the menu options — the hamburger there where you see four bars orientated horizontally, pancake or hamburger, however you want to refer to it — if you hit that you'll get an expanded menu which shows all the various options. If you look on the left there, you'll see that there's a variety of different categories, including My Profile, My Story, My Medical. Each of those also expands. So just to give you a sense, there's something like 10 categories there. There's also nested categories in each of those. So, this is a very large application in terms of the amount of data that it is able to contain. You could view that positively or you could view that negatively. It's comprehensive; however, I don't think that we necessarily feel that a patient or a caregiver is going to exhaustively use every bit of feature



that we have here. I would hope that people would find the features that are the most useful for them and then use those.

So, in My Profile, you can go in and set up your profile. This is just one screen again, so as an example, military occupational history. You can put in your entire history to your heart's content. This isn't the entire profile; this is just one example of everything that you could add.

I'm just going to try and address a couple questions as we go, if that's okay. So, this is a static presentation, so I'm not showing the log in process. We might be able to address that later. It can be managed on a smartphone, so basically these screenshots were taken on a laptop of a desktop. However, they're modifiable so the format that they're written in allows anytime you go to a mobile device or a tablet device, they will auto present in a screen resolution and a format that's appropriate for the mobile.

The second section was My Story. So, this is a part that we added a couple of years back in association with the Office of Patient Centered Care. This allows Veterans to add reflections on things, like personal values, health goals and then progress towards those goals. This gives you a little sense, so again My Story, if you recall, was just one category of that original menu, but if you click on it, you would get this expanded menu which allows you to fill out these other fields, like personal values, reflections and goals.

Just quickly in terms of the data. So, this is stored on a patient-generated database, which is a non-system of record database that is separate from VistA, and that's where the data is stored permanently. This is the My Medical section. This allows you to enter things related directly to your My Medical care. That would be again, just as listed here, symptoms, upcoming appointments, the medications that you're taking, any allergies you may have, diagnoses, recent surgeries, hospitalization and then your family health history. Just as a preview, you can see here that if you're looking at the appointment plan here, you can put in details about your provider, the clinic, the reason you're going to the appointment, items to discuss, which is potentially a valuable item because, as we all know when patients go to their doctors, they often either don't have time or don't recall all of the items that they wanted to discuss, say, a week or two before the appointment. You can put that in here where it's stored, and then you can create a PDF, which could be electronically sent to the health care team or printed and brought with you to the visit. Or, on your device, you could just show them this application. That works, too.

In terms of personal trackers, I want to be very careful about this. This application does not have the level of functionality that would allow you to automatically look at your Fitbit data, automatically. However, you can input certain health measures, like from a glucometer, or manually enter anything related to sleep tracking or exercise. Then, as mentioned earlier, you can filter and view created data over a specific timeframe to graph your activity. Then you can set notifications to be reminded to enter this information. Trust me, I wish that this was automated, but it's not currently.



In terms of the settings for notifications, you can personalize this a little bit, so you can adjust settings to display only the trackers that are important to you. So, as I mentioned earlier, there's a ton of data elements here, and we really don't expect patients to use all of them. If a person wanted to go in and say, you know I was mostly interested in managing my blood pressure for the next two months and I wanted to correlate that with my glucose and my mood, then you could select those three items and you would get notifications about those things only.

“Import/export from My HealthVet?” Manually but not automatically. “Track medication use?” Yes, that can be done, but again manually. We don't have any type of, you know ... If you're aware, there's electronic pill caps that can track pill bottle opening and whatnot. This isn't sophisticated enough to automatically detect that activity.

So, the Health Report is one of the last categories. Again, I'm not going to go through this exhaustively, but it allows you to create and print tailored reports from any of the data that you've entered into the application. Essentially this allows you to go through and click any of the major categories that you're interested in putting into a report. So, you can include a little bit, just a summary, or you can include very detailed information, and then you can create a date range and then generate a report which could then be used to bring to an appointment. Again, you can either create a PDF and send that through a Secure Message, or you can bring it on your device, or you could print it out and bring it physically.

Okay, so just a few additional features which I didn't demonstrate. So, My Reminders. Again, these will be reminders that you can set manually about upcoming medical appointments, medications, which we somewhat referenced in the question, and preventative services. Notifications can be created either through an email, which is separate from the application, or within the application itself. So, if you'll recall, whenever you open up the welcome screen, you see a notification. So if an individual decides that they don't want to receive emails from the application, they would rather just open the application on a daily basis and look at their notifications, that works too. You might argue that if they're doing that, they probably don't need to be reminded. That's fair. But for those who do want to use an email reminder system, that can be done. There's a Contact section. As I mentioned before, there are formal health assessment questionnaires, which include the three that are listed there, and then there's the capability to upload and save images and documents, related not to just your health and military service, but really anything. There is a limit on the amount of content that can be added, just in terms of a file size, and I don't remember off the top of my head what that is, but there is a limit. But you can save any image or document that you think is relevant to your health care.

Okay, I think we're going to stop there and address any questions. Let me make sure, let's see.

*Micah Azzano:* So, Dr. Hixson you've done a great job of answering a lot of the questions as we've been going, and I just wanted to jump in and let people know that we do have training





materials available on the Beta App Store, and I'm going to post that link shortly to the chat feature too.

*Dr. John Hixson:* A question about file formats. I do know that I just said PDFs because that's what we typically talk about generating. I do believe that other file formats can be saved. I don't know the answer about XML. If anyone else on the call knows already, you can feel free to chime in.

*Micah Azzano:* Dr. Hixson I know you can do other file formats, and you can do text files, but I can check on XML and reach out to you, Dawn, with the answer there.

*Dr. John Hixson:* Okay. If we could also get the details on the file size limits. I know there are, and they're relatively generous as I recall, but I don't know exactly what they are off the top of my head. It was a great question.

“Training available to Veterans?” Well, I think we're hopeful that folks would ... we've been working really closely with the My HealthVet group, as I mentioned earlier, because there is a fairly tremendous amount of overlap here, which is obvious. You hear me chuckling, but I do think that we would be hopeful that that group would help us both on a national and on a local level to get some word out about this application and potentially train Veterans. I think the second thing I would say is that there are patient-facing training materials that are available. Those are self-guided, admittedly. Then the final thing I would say, and we're going to get into this as we go through some of the use cases, you know I personally feel, and I've said this several times now, that we don't expect Veterans to come in and exhaustively fill out this data. That's just not realistic. We know from 10 years now of the "digital health" revolution that even the most motivated patients don't do that, and you're talking about less than a percent of people who are willing to do that.

But I do think that there are some specific features about the application that are compelling, and we would hope that the health care teams would potentially train the Veterans and their caregivers at least in a limited fashion about these features, and I'll show you what I mean by that in a second. But let me see if there's any other questions here. I'm just looking back. Okay, I guess, so, I'll go ahead. I don't see any other questions. I think I addressed them all.

So, I mentioned earlier, I'm going to go through this concept of Patient Viewer, and then we're going to go through a couple of use cases where I'll come back around to how health care teams might, I guess, encourage Veterans and caregivers to use this application. First, I want to address another application called Patient Viewer. So, if you recall at the very beginning, I said that this was a patient-facing application, and then there are a whole cadre of provider-facing applications. So, the Patient Viewer is a provider-facing application that is directly linked to VistA, and pulls data from VistA, and is essentially a mobile platform for read-only access to CPRS. So that's how it's being promoted. That application allows a physician or a nurse to look at clinical notes, medications that have been ordered, lab results, radiology, including imaging, and that's really going to be kind of as the flagship provider-facing application. Now, there's



currently an applet in that called the Custom Data View that technically has been created to allow providers to view some of the information that is entered by patients in MyVA Health Journal.

Alright, now this is not currently a live link, and we're not promoting it that way for a variety of both programmatic- and policy-related reasons. However, that Custom Data View does allow a provider to look at some things, like a patient's medications that they've self-entered, all of the content in the My Story area – that would include the goals, the personal values, the patient's agenda for an appointment. I'm going to go through that during one of the potential use cases. Then patients' responses to the three health assessments. As you can imagine, there's concern about a provider's obligation and responsiveness to a patient entering some type of medical variable that may not be seen immediately or may not even be accurate. So, there's been a very high degree of thought given into which of these applications could potentially be viewed by the health care team. But if you go the Patient Viewer app and you open up that Custom Data View, and you have a patient open and they've used MyVA Journal and they enter this information, once this feature would be turned on, the provider would be able to see some of these data elements.

Now, providers would not receive a notification, and the Veterans would be warned in the app that this is not currently designed for synchronous communication between patients and care teams. But as a future state, that possibility does exist in the beta testing. So, I just wanted everybody to know that. I'd be happy to talk more about that.

Okay, two use cases I'm going to talk about. I'm getting feedback from somebody who has a mic open over there.

Okay. So, one use case which I alluded to earlier is called the Medical Visit Questionnaire. If you recall during the menu, there was one section about upcoming appointments, right? So I think everyone on this call could probably appreciate that VA care teams in outpatient setting, a patient is coming in, oftentimes an administrator or a nurse may have called the patient in advance to confirm that they were coming to the appointment, but it's pretty rare that you get information, exhaustive information at least, from a patient before the appointment. Right? Whether you get your care through the VA or not through the VA, we're all probably accustomed to sitting down with a clipboard and a form that asks you to fill out information before you go to a visit. So, that could essentially be done in MyVA Health Journal, and that could be either for a new visit or it could be for a follow up visit. Then you could have this information available to the patient's care team even before a person ever came to a visit, which would speed the efficiency of the clinic, and I would argue provide better information.

So, for instance, depending on your clinic, you may have specific questions. So, I am a neurologist and I mostly see epilepsy patients. I may ask the patient in advance of the clinic to please update your medical visit questionnaire to report on your seizure frequency, your medication intake and any refills that you need, and then the person could report that before their visit and then they could create a generated health report and either print it out to bring it



to the appointment or send it through a Secure Message prior to the visit, so that we plan for the day to know how people are doing and who's going to need more attention.

Another example would be for, say, a new patient appointment. So, during a new patient appointment, we typically spend a lot of time asking patients exhaustive questions about their health history, their medication history, their allergy history. These are all things that currently, if you think about it, we ask a patient who's sitting there in the room and then they answer off the top of their head, and sometimes it may not even be an accurate recollection of what happened, and then we type it in the record and then it becomes, basically, a permanent part of the record. I often say that people have a lot of issues with “patient-generated data” and “patient-reported data,” but there's no fairy dust or anything that gets sprinkled on my fingers as I type what the patient tells me into the computer. But once I've done that, then it becomes a part of the record, and it often is not correct. Right? You might argue that I am able to interpret what the patient is saying, but that doesn't mean that I'm interpreting it correctly, and it doesn't mean that the information is totally accurate.

So, this, in my opinion, actually gives the patient an opportunity to spend some time before a visit to get all of the information and put it in a single repository that then doesn't disappear. Right? It can be then given to the care team before the visit or at the visit, and it would be superior to the way we're doing it now. So that's just one example, and in a clinic, if they kind of bought into this, they would potentially educate the patient themselves about whenever the administrator or the scheduler calls a patient to say, “you have an upcoming appointment on Wednesday, October 31st, you're supposed to be here at 1:00, here's the directions, oh, and please go to your application, MyVA Health Journal, and answer these questions.” Right? I mean it's literally an extra 15 second request that a scheduler could do for a patient.

Okay so somewhat of a corollary to that, I would say, is family history. Family history is the perfect example of what I was just saying. Right? So, whenever we do a new visit intake, every medical student was taught that at a certain point in the history taking, you get family history. Who knows their entire family history? Very few people do off the top of their head. It's usually given maybe 30 seconds in a clinic visit, and it's written into the chart and then there it is. Right? You know if someone says, “oh my father had a heart attack at the age of 55,” we type in their “father had heart attack at 55,” with absolutely no supportive evidence of that. Then it gets, as we all know, copy and pasted forever, and then that's in the record. So I just think that with this particular data element, we're just not doing this as well as we could, and using something like this application, again, allows the patient to go and get a true representation of their full family history, put it in a record which isn't going to disappear, and then give that to your health care team before you go to a visit or at the time of the visit in an electronic format.

So, these are just two quick use cases that I think if people adopted those, it could be really useful in terms of providing more accurate data that's comprehensive, and it potentially makes the clinic visit more efficient because you already have the data – you don't need to go through it again necessarily.





So alright, let me look through your questions here. That's the bulk of my presentation; I know it's only 30 minutes. So, just to clarify, a provider has to use Patient Viewer app – yes, that's true. It would just be in the Patient Viewer app, not in JLV or CPRS, that is correct, yes. Again, I'll reiterate that the Custom Data View feature, which would allow you to see this information, isn't live yet, okay. This is in beta testing. If there was someone who wanted to use this in a very specific clinical scenario, we would be very interested in that because we're essentially looking for these pilot cases to show that this is effective.

*Micah Azzano:* Dr. Hixson, I have one question that came in earlier. Will anything import or export into My HealthVet?

*Dr. John Hixson:* Not automatically, no. But you could take a report generated, create a document and then put that in My HealthVet or use that through Secure Messaging. I agree there would be use for this incorporated within My HealthVet. I agree.

*Micah Azzano:* I think we're still seeing some more questions coming, but just real quick wanted to get your thoughts on, what are some common questions you get regarding MyVA Health Journal?

*Dr. John Hixson:* Well, I think a number of the questions that have already been brought up people have asked here, so that's been great. I think the number one has been “Will this information be accessible and viewable in a ‘system of record’?” Which is really a policy issue, and as I mentioned earlier, this gets to a bigger question, which goes well beyond the VA, and that is “what is the providence of patient-generated data,” right? Historically we've by default used the medical record as the gold standard for truth, which is totally incorrect. Right? We know that the current EMR data is often inaccurate, and many times doctors and nurses are just transcriptionists for what the patient said. So, I personally feel that patient-generated data should have an equally valid place to an EMR, but currently that's not how the system is set up. So, this data goes into a separate database called a PGD, patient-generated database, and currently that does not interact with the system of record, legacy VistA system. So, going forward, there will be continued discussions about how that's not very efficient and how we need to deal with that.

Some suggestions have been that you could envision a day wherein your EMR data that comes from a patient has a different little flag, so you can very quickly identify that this came from a patient and was never reviewed by a physician or a nurse. I think that that's a potential workaround, though that's very technically challenging. So that's one question we get. The training questions are always good ones.

*Micah Azzano:* We've talked a lot about patient-entered data, but you also mentioned earlier the notifications and reminders. How would you like to see users using those and setting those up?



*Dr. John Hixson:* Well I think the system is relatively robust in allowing for people to do that in an individualized way. So, some people may find that the reminders don't really benefit them; I think that's totally fair. However, if someone has a very specific health condition that they need to receive a reminder to say check their blood glucose at a certain time each day, then that could be potentially useful for them. I wouldn't expect anyone to go in and exhaustively set up all the reminders. But for a person's individual situation, I think that there's a fair bit of customization that can be beneficial.

*Micah Azzano:* Okay, it looks like we might have a couple more questions coming in. Is there anything else that we didn't cover that you want to mention or specifically highlight?

*Dr. John Hixson:* Well, just, I'd be interested in anybody's feedback, and you know, if you're interested in helping with the testing that would be great. If you're interested in promoting this with patients that would be even better.

So, Annie does cover reminders. You know Annie's a very specific application, so this has a lot more flexibility. Annie effectively is kind of a scripted text, for people who don't know, it's a text-based system that allows the health care team to develop a protocol that they can then send out to a patient or a group of patients, that would accomplish some of these features; that's totally true. However, this application, as a whole, has a far greater amount of robustness.

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