DENISE KENNEDY: Hello everyone. Welcome, and thank you for attending our VA mobile health discussion series webinar. My name is Denise Kennedy, and I'm going to run through a few brief reminders before we begin the discussion. Your phone lines are muted. We will be taking questions throughout the presentation through the chat feature. If you're experiencing any technical difficulties, please use the chat function that is available to you at the bottom left of your screen. To respect everyone's schedules we'll keep this moving so the session ends on time.

Today we welcome Dr. Eric Spahn, Program Analyst for VHA Pharmacy Benefits Management, and Damien Sharp, Manager for MBL Technologies. Dr. Spahn will kick us off with an introduction of the Ask a Pharmacist app. As I mentioned before, if you have any questions for our presenters, please use the chat feature. We will stop the presentation intermittently to answer those questions. If we don't get to your question, we'll send out an email following this webinar with any relevant answers. To download the presentation, please click on the paper clip at the top right of the chat screen. And with that, I'll turn this over to our presenter. Dr. Spahn, over to you.

ERIC SPAHN: Hi, thank you. And thank you all for attending. This is the first presentation for this series for Ask a Pharmacist mobile app, the project that we're happy to announce has gone into production, I believe, week before last. And we are currently working on marketing tools to send out to some pilot sites for testing so that we can get those out to all the sites to introduce this app and its features and how it could benefit not just pharmacy but [INAUDIBLE] users, the Veterans, but also maybe even the staff help with some of the workflow processes. The project we finished is online. [AUDIO OUT]

DENISE KENNEDY: --load this up again. Hi, everyone. Thank you for sticking with us. It looks like we had a phone glitch and lost audio. We are going to take a three minute break here and let some people sign back on and get resituated. Just give us a second, and again, thanks for being with us, and we'll be sure to end on time.

ERIC SPAHN: OK. And please interrupt me if it cuts in and out. It seems like it's a little bit choppy even when I disconnected.

DENISE KENNEDY: Absolutely.

ERIC SPAHN: We're OK now?

DENISE KENNEDY: Yeah you sound really clear now. Thank you for that.

ERIC SPAHN: OK, great. I meant to tell you too, while we're going through this presentation, this is in production. So you can even do a Google search right now for Ask a Pharmacist VA app. And you can actually go to the web page and launch the app. It's not something you have to
download. It's, of course, web based, so you can just launch the app and then be able to follow along as we're presenting slides.

Again, I don't know where I cut out previously, but this project initiated with My HealtheVet then it merged over to the mobile platform when the mobile came along. So we're excited to offer this desktop mobile version that can be used from any device as long as the browser is supported. I think the technical folks could probably mention which one they supported through the model feature. But essentially, Ask a Pharmacist app is a place for Veterans to go and find as much pharmacy information that we can provide as far as VA specific pharmacy information, stuff on My HealtheVet which is sort of scattered through the site, putting that all in one area, and also educating the Veterans on resources that are available, even some external resources that we think would help Veterans look at their medication list, and determine what medication information is important to share and learn about, and how to read a label and how to identify medication. Just anything that they ask pharmacists on a daily basis.

Not just pharmacists, but pharmacy technicians. And then connecting the great feature of secure messaging in My HealtheVet. Since we've been working on a project for Ask a Pharmacist secure messaging ever since about 2009. And merging that, the setup for secure messaging, with this mobile app. So it's a really unique app that connects users not only to resources, but also to secure messaging and helping sites get that set up for the communication.

So we can go to the next slide. I think, Alan, are you running it? OK. So from the launch pad, if you haven't seen the launch pad before, this is the VA mobile launch pad where the current apps are being stored. So you can see Ask a Pharmacist is added to the lower right portion of this. It has a small introduction to the app. And this is where if you were visiting the launch pad you could go to now.

If you do the Google search like we mentioned before, you can actually launch it after going through the end user licensing agreement and go straight to the app as a standalone app. But it is available in the launch pad. Next slide. So here's the landing page for Ask a Pharmacist.

So we started with requirements. We had a big group, and I see some of you on the call who actually participated in the requirements for Ask a Pharmacist. What we did with our requirements, is we asked for essentially everything under the hood, as far as generating requirements. And then with any development, you have to consider your scope, especially for a version one release of an app. That way you can get something out the door and you're not restricted from funding and timelines and resources that prevent these sort of features for coming out. So this is essentially version one based on the requirements we had and the funding of the scope of the app.

So we have these five main categories, prescription refill, pharmacy services, and these are specific to My HealtheVet, also some trusted medication resources that are both internal and external to the VA, and also been vetted by pharmacy subject matter experts, pill and bottle information, and about the VA pharmacies, which is generally, what are the standard operating procedures of the VA pharmacy and what to expect when you use a VA pharmacy, and of course a link to secure messaging. You can't have an Ask a Pharmacist app without some sort of link to
how to communicate with Veterans using the secure messaging feature. So we're going to take a walk through some of these screenshots to go over some of the features.

Again this is the home page and you can access this page by selecting home no matter where you are in the app. Next slide, please OK so you can see from above the top here, we actually came from the prescription refill pharmacy service, button on the homepage. And this is a list of different things we have such as prescription history for My HealtheVet, Rx refill, the Rx refill guide, track my medications, and frequently asked questions on My HealtheVet, as well as information from the Veterans Health Library, such as the medical library.

A lot of these services require you to authenticate. The one thing the first version of this app does not do is require authentication. So anyone going to Ask a Pharmacist can use these links. Once you get to My HealtheVet, you would have to authenticate from that point in order to actually go into Rx refill or to track your medications. And that's because it's the first version of the app, and we hope to incorporate authentication once additional enhancements are done with mobile features in general. But to get it out there first it's just links to My HealtheVet and these specific modules that are already available.

Next slide. OK so if we were on that page we saw before, we selected track my medication. And if you notice, a lot of these links have descriptions underneath each of them. Now the descriptions are there to help the Veteran or end user or caregiver to see where they're sort of headed when they select one of these links. That way it gives them an insight before they actually have to exit the app and go to the external site.

So here you have prescription tracker FAQs. You also have links to UPS My Choice and USPS. The reason we included those two links is, the tracking feature My HealtheVet is tracking the US Postal Service, and notifications can be set on that side. There's some stuff sent locally, and it cannot be tracked from the My HealtheVet tracking features. So for those local sites, those local pills, you want to get notification, you can go the UPS My Choice and set up notifications from there. That way you can be notified no matter whether it's sent from a local VA facility, or maybe from a mail order facility. It helps the users set those accounts up.

Next slide. Now this is a great feature I think will be very popular with the Veterans. This is the pill and bottle information. We didn't just take a standard label out there off the internet, this is actually the patient safety-- patient centric label that was created by a patient safety office. So it includes the, basically, annotations to the label to show where your directions on your medication or where your name would be, where the prescription is. How to read a label. Because many times Veterans are looking for this information when they're trying to talk about their medications. They just don't know where to look on the label. And this helps to point that out and show there's additional information for safety tips.

Next slide. Now under the trusted medication resources tab, you can see there's a variety of links here. Many of these are going to FDA websites. There's also a pill identification link you can see on multiple tabs throughout this app. And there's a disposal-- for medication disposal that links you to the PBM site about that as a popular feature that we have currently with disposing medications. How to properly administer medication. That's the safe med site created by ASHP.
It's a very popular pharmacy site that helps them with how to use an inhaler, how to do an injection, those sort of things.

There's a lot of good information on drug interactions too. We get a lot of requests on My HealtheVet to provide a search tool for drug interactions. And this app actually takes users to drugs.com to utilize that sort of feature since we don't have that currently on My HealtheVet. This app really tries to pull in pharmacy resources for My HealtheVet, it also tries to pull in some resources that are not available that Veterans have been asking for. And the sources that we provide are vetted. So it's better than them going to Google and utilizing some sort of website that maybe is not very well trusted. These are resources that we've vetted through our subject matter experts that work on this app.

Next slide please. So if you select the consumer drug interval supplement information, it takes you to another-- little further down the breadcrumb trail where you can get latest safety articles, information about medications from FDA.gov, safety practices, even reporting medication errors. If there's a site for it on FDA.gov and we think it's useful for a patient, we put it in here.

One of the great features of any sort of reporting they did on FDA.gov is an alert, I don't know if we have a screen shot of that, but when you select the link and it takes you to an external site to report something like a med error, it notifies the user that this information is not being stored in the electronic health record, and anything they report needs to also be communicated to their health care team. That's a safety feature we have an the app so that they understand that they have to also report to the team so that can be documented. And it's a hard stop, so they can't actually go to the site until they acknowledge that.

Next screen. So this is one of the popular features I think we'll make for the app as well. The Veterans Affairs National Formulary, and when you say formulary, many Veterans don't know what that is, so we provided some questions and answers to frequently asked questions to what a formulary is, what's the purpose of it, [INAUDIBLE] listed in a national formulary. The other question [INAUDIBLE] there's an actual hyperlink there to PBM.gov where there's a new search tool that was just created where you can search the national formulary search engine that was developed by PBM, and I think this will be a great source for those VA choice patients to present to their provider with this app when their provider's trying to determine what they can prescribe because it's non VA providers prescribing to VA patients are not as familiar with the formulary. And so this resource will allow those Veterans to share that with their provider and be able to search through that before they write a script and bring it back to the VA.

Next slide. Here's an example of that hyperlink that takes you to the pharmacy benefits management page from the formulary search. So you can see there's a search box. It's a great source, newly developed. I think we're going to be promoting this on My HealtheVet soon as well, and it actually gives you formulary alternatives. If you do search for a med, it'll tell you not only is it formulary or not, but what alternatives you can prescribe as far of the drug class goes that would be an alternative since we're bringing it back to the VA. And allow them to not only see that and get better approval rates with whatever they're bringing from the non-VA health care system.
Next slide. OK, this is a general-- this is actually an article we have on My HealtheVet. We actually helped draft the article on how VA pharmacies operate. It's a summary from our outpatient pharmacy handbook on how prescriptions are requested, how they're put into the system, what to expect as far as how long it'll take to mail to the system. If you're going to submit a refill, how long they need to submit that in advance so that they get the medicine on time before they run out, House source or do they supply we use with medication.

It even has a link to the FDA to define what DEA controlled substance schedules are. We get that a lot, a lot of those questions come through for pharmacy in general. So it's nice to provide these answers to general questions that come through. It can actually save on quite a bit of the call traffic when these questions are answered for the Veterans on the app. But we always want to default to allow them to use secure messaging if needed.

Next slide. So that sort of summarizes. Now we didn't show every screenshot of the app, just some of the main features. One of the ones we didn't show was actually a pill identification screen that the National Library of Medicine used to allow Veterans to search through their image library that the VA actually created, and the National Library of Medicine has a search tool for that, so this will help Veterans actually identify medications they're taking using the images and the input. We left that off because we just have a missing screen shot. Any additional questions I'd be happy to answer at this point.

DENISE KENNEDY: Yeah, Thanks Dr. Spahn. We have four questions and I see there's some others chiming in. But the first question is from Donald, and he wants to know, "who be available to assist patients with installing and using the app?"

ERIC SPAHN: You're kind of cutting out. Let me see. Is this one of the IM questions here?

DENISE KENNEDY: Yes. Can you hear me now?

ERIC SPAHN: I can hear you now.

DENISE KENNEDY: OK the question is who will be available to assist patients with installing and using the app?

ERIC SPAHN: I'm going to have to read the question up here, because I'm still having trouble hearing you.

DAMIEN SHARP: I think the question is, this is Damien, Dr. Spahn, who will be able to assist vets with installing and using the application?

ERIC SPAHN: OK I see up there. So who will be able to help? I assume that there's a lot of this effort, just like with the My HealtheVet effort, will be the My HealtheVet coordinators. It'll be promoted on the My HealtheVet site, so that's something that would be shown on My HealtheVet as well as the marketing materials that are being sent out are going to be going through a lot of the dispensing packages from pharmacies. So they'll get an extra pamphlet in the package they receive in the mail helping them to understand how to not only download-- access
the app through the launch pad, but also provide them with information on what the app is. That would be more informational.

But My Health\textsuperscript{e}Vet coordinators, we are also sending training materials for My Health\textsuperscript{e}Vet coordinators. As you can see there's a question here about how this app assumes each facility has a secure message team with pharmacy. What it does, it actually sends a message directed to the health care team. It would be most beneficial if they have a triage group for pharmacy at the location that the Veteran's using.

And we've had marketing material, not only how to set that up, but even used some nomenclature that will help with keeping those triage groups consistent and helping put those triage groups up so they work most efficiently, because that's been our effort since 2009, is just the setting up of triage groups called Ask a Pharmacist. And all that work, as we'll show you some slides later that will actually benefit the use of this app.

DENISE KENNEDY: Great, and, can you hear me Dr. Spahn?

ERIC SPAHN: Yes.

DENISE KENNEDY: OK, the next question is, is any of the info able to print and use by providers for patient education.

ERIC SPAHN: I guess you kind of cut out again. If you tell me the name of the person asking the question, if it's in the IM, I can try to look it up here.

DENISE KENNEDY: Kathleen asked the question early on, and she wanted to know if any of the information is able to print or use by providers.

ERIC SPAHN: Oh yes, definitely. I mean this is a feature. As far as being able to print from a mobile app, it's the same ability as you have now. So as far as printing the URL to an email device from the app or trying to do a print screen, this can be used as the Desktop version. So if you're using it as a Desktop version, you'll be able to print it just as you would any web page. And so all the resources that we link you to, if they have the printable outputs, you can utilize this as well. It's really a resource of links to provide that are pharmacy related. So when you go to that external site, as long as you print from there, you can print for education.

DENISE KENNEDY: And we're going to try this one more time. Diana asks, "is there any pull in from the Veteran health library either as part of My Health\textsuperscript{e}Vet or directly?"

ERIC SPAHN: Let's see, is there any pull in from the Veteran's Health library either as part of My Health\textsuperscript{e}Vet or directly. So we definitely link, under the trusted medication resources, to both components of the Veteran Health Library which is the MedlinePlus and the library itself. So we have a link to those resources. Again, this is the version one of this application, and it's not authenticating the patient, so it's not displaying a med list unless they actually go to My Health\textsuperscript{e}Vet and authenticate from there. And since that's not a functionality of My Health\textsuperscript{e}Vet to link the med to the Health Library then of course, this can't improve on that. It will send you to
the Veteran Health Library directly, so you'll be able to access that. They won't have to search for that link. It's basically directing them where to go to look up drug information using the Veteran Health library and providing a link.

DENISE KENNEDY: Excellent, and can you hear me any better Dr. Spahn?

ERIC SPAHN: Yeah, that's better

DENISE KENNEDY: We switched phones here. We're very fluid today with all this technology transfer. Diana asked, "Is there any plan to encourage pharmacy to develop an SM team just for pharmacy? Secure message team just for pharmacy."

ERIC SPAHN: Yes exactly. There's a lot of efforts out there. In fact, there's a draft currently, I believe, for any sort of direct patient care services to establish a secure messaging triage group for that service. So this is essentially getting pharmacy ahead of the game and other than our encouragement, as well to say, if a Veteran's using this app, it would be encouraging to have a secure messaging team set up in pharmacy so that if they do go in to send a secure message, and they authenticate themselves on My HealthVet, then when they go to send a message they can actually drop down and see something pharmacy related. And it would be even better if that team is called Ask a Pharmacist. And maybe include the site name such as Ask a Pharmacist or Ask a Pharmacist Portland so that the Veteran using multiple sites will be able to tell which center they're sending the message to.

So it definitely is encouraged, and we are actually working on marketing materials that are going to the pilot site to provide that sort of encouragement and setup instruction. Not only setup instructions, but also the workflow considerations when it comes to sending messages to a triage group. Which, all that is current practice. This basically will be reminding sites on how to best utilize secure messaging, and this app will basically just been promoting the use of secure messaging even more than it is now because we're providing a link there.

DENISE KENNEDY: Great thank you. And there's a lot of discussion on the chat around this being a web app versus a native app. Maybe a little bit of a misunderstanding here that it's not an app that you download through the Apple store or the Google Play. Can you talk a little bit about the technology side of the app?

ERIC SPAHN: Yeah this is a web based mobile application. So there won't be any downloading of an app, it'll be launching an app just like you're going to a website. There'll be an end user license agreement once you select the launch either from the launch pad, or if you're already in there, you'll just go straight to the app. But there won't be an app, on your phone that you'll see when click on it, it'll be a Launch Pad. So this could be used on a Desktop, it could be used on a tablet, on an iPhone, on an Android. As long as the browser's supported, any of those devices. There won't be-- as far as downloading, you won't have any issues. Which some folks have issues downloading apps. I think going this route as far as mobile apps go, it's a little bit less complicated when you have to utilize those sign-ons and passwords for mobile apps.
DAMIEN SHARP: This is Damien. It's also accessible through the VA app store. Again that's going to the URL from the VA app store, searching for the VA app store. It's accessible there. Also training materials on that site, once you click on Ask a Pharmacist to give [AUDIO OUT] on there. But like Dr. Spahn says, this is not a mobile app in the true sense of a mobile app. This is a web app, so it will not be on the Play Store or in the Apple Store.

DENISE KENNEDY: Excellent. Thank you. And I know you have some additional slides for your presentation. I have one last question for you, and then you can jump right in. Regina asks, "Will medication copay changes be available for the Veterans to see?"

ERIC SPAHN: I'm sorry, I'm switching to the handset. I think it was actually my speaker that was cutting out. You said Regina?

DENISE KENNEDY: Yes she wanted to know will medication copay changes be available for the Veterans to see.

ERIC SPAHN: Well that's going to be something that would require authentication to see. Now this does link Veterans to PBM.gov so they could see any updates on information to copay changes there if they search through that site. And that copay change occurred, actually after we'd already established requirements for this application. It would have to be, if we want to provide a link to just general information on that, it would have to be an enhancement for the next version, which we'd love to incorporate. But currently there's no link directly to that, or any information, because as I mentioned that was something that happened after we already gathered requirements and were in development that we couldn't just add on later.

DENISE KENNEDY: Excellent. And I know that there's a few other questions popping in, but we think we'll let you continue on with the presentation and come to this after you're done with your slides.

ERIC SPAHN: So we talked a lot about secure messaging. I'm going to go into secure messaging, because although it's not something you have to have to utilize this [AUDIO OUT]. It's nice to have if you're promoting Ask a Pharmacist, and essentially a new way to communicate with pharmacy versus a phone call. And as you can imagine, there's a lot of phone calls, we even have call centers to handle many calls coming through to the VA pharmacies. But currently, to send a secure message to a pharmacy, you have to know the name of the pharmacy staff, or you have send it through primary care, and they have to triage it to the pharmacy staff and have them read and reply back to you.

So this essentially, by creating a triage group called Ask a Pharmacist, gives that contact name that a Veteran can use, and if that's available they know this is going to pharmacy. They don't have to know who exactly it goes to. And plus, it also allows the triage set up which means you can set it to where messages coming through the Ask a Pharmacist group, the first person to see it is the triage staff and if they can answer the question they can answer it. That could be a pharmacy technician, it doesn't interfere with the pharmacist working with patients directly.
For those that need the pharmacist's attention, they can be reassigned. And these messages have a three day response as secure messaging does. But it also allows for documentation of that conversation. And you don't have to listen to the voice mails and go back through the conversation when you call the patient back. It has it in black and white and documentation and there's actually some work, if it's not out already, on workload capture for this conversation. So a lot of great features with secure messaging that are just external to this app, that make this app even more useful.

And just one more thing before we actually go into the statistics on secure messaging a pharmacy. It's really a unique way of taking a mobile app and connecting electronically to a messaging system in which the user of the app is likely to know or have worked with the person responding on the other end. Many of these Ask a Pharmacist things are available on other sites, other pharmacies, major retail pharmacies online, but you don't know the person you're sending the message to. VA is unique, in that, the staff answering these questions are local to that medical center, or maybe that local CBOC And so if a patient's submitting a question, they're likely to have worked with or know the staff. And the staff know their profile very well because they're processing that patient's prescriptions. So it's very unique to use a national tool for local implementation, and that's one of the things we've promoted for secure messaging throughout the year.

If you go to the next slide, we'll just talk about that feature and how it can improve the use of this app. When you select the button, you actually just go to the secure messaging homepage. And here a patient would have to authenticate. There is work being developed that's creating a secure messaging mobile app, and once that functionality is available, if we have the funds for additional versions of this app we can actually link to the secure messaging mobile apps so that we can provide a better user usability for the user of the app. They don't have to go to My HealtheVet. They can use the mobile version.

The next page. So how's pharmacy utilizing secure messaging? So right now, I think this report is maybe a month old, but 21 VISNs have a triage group containing the term pharm. 15 of those have a triage group containing ask and pharm. And so this is a search total that I used to SQL query into the central data warehouse, to determine utilization of secure messaging triage groups using these search terms. So there's 108 primary stations with the group containing pharm, and of those, 44 are ask and pharm, as far as the way that the data's coming back.

Next slide, please. OK so of the 108 primary stations, now these are primary stations, which means the station that's primary is the main VA medical center, so there could be multiple CBOCs, outpatient clinics that come off that primary station, but this is a search that we're using specific to those stations and secure messaging. We have, of these primary stations, we have 522 secure messaging groups that contain pharm. And so, when you think about that, you try to think, OK what sort of scope are these triage groups being used for? And after you actually look through all 522, you find about 266 for general pharmacy services. Now of those general pharmacy services, there's an additional 67 for Ask a Pharmacist which is really a general pharmacy inquiry. It's not very clinically specific, it's more for general pharmacy questions. But those actually have the term "ask a pharmacist," and so the others are more clinically based for either PACT or HBPC or even clinical specialty services like anticoag or lipid management.
On the next slide, I'll break it down to you how this site utilization can be achieved. Next slide. OK so here's the same information but more of a percentage, a little pie graph for you. So as we can see, a majority of the secure messaging for pharmacy is for general pharmacy purposes. That's the 51 group. We have also 13% actually have the term Ask a Pharmacist. So based on our communication to the field, we can see that 13% have adopted the nomenclature we're suggesting for Ask a Pharmacist, and the 51%, they haven't adopted the nomenclature, but they are using it for the same purpose, which is pharmacy, general pharmacy. And all the others is specialty care and PACT and HBPC.

So on the next slide, if you think about that, you take out the specialty care, you can see that the total of 64% of secure message triage groups are for general pharmacy purposes, and if we educate the sites to switch the names of their general pharmacies to Ask a Pharmacist, you could see that it would be the majority of messaging. And that's because this is for those general questions such as, I'm tracking a med I can't find it in My HealthVet, or can you tell me when it's going to be here, or how many refills do I have left, or this drug looks different than what I've been taking.

Those general things that come through the phone system are coming through the secure messaging system. So you can see it's a majority of the usage of secure messaging. Next slide please. Now this basically breaks down, of the percentage of specialty clinics, what are specialty clinics being used for. So anticoag is a heavy user of secure messaging triage groups, diabetes, oncology are towards the lower end, and then you have a combination of women's health and endo as the other majority. But anticoagulation is highly used for this. And this is just a subset of the specialty groups to give you an idea of how this is being used.

Next slide. So as I mentioned earlier, marketing materials are already on the website, or on the web for Ask a Pharmacist. I have a user manual, a quick start guide, there's a slide show, and FAQs, and even some feedback that Veterans are able to give feedback on the app itself. And I think product effectiveness is actually reviewing that since we just released the app. And so you can actually go to the site. Once you're at the site and read through these guides, you can actually launch it to the app from there. But it's some really good information to get started on learning about the app.

Slide. OK so marketing sites, now what this is, is this is apps in production but what we're doing is drafting some marketing materials. Boston, Portland, and Little Rock, Arkansas all offered to test our materials for dispersion at these sites over the next few weeks, and they'll be inserting them into pharmacy packages, they'll be posting things at the site, they'll be communicating a lot of this information, then once they've determined that the information they're dispensing is efficiently working and getting good feedback, then we'll start sending the same materials out to all the sites to start incorporating just to let Veterans and caregivers know this app is out there and what it's about, and how to get access to it, as well as the internal marketing with the secure messaging. Slide. So this is the next question slide, so some of the questions we had earlier may have been covered by the material I just went over, but if there's additional questions, we can go ahead and walk through those now.
DENISE KENNEDY: So there is some conversation on the chat, and a couple of things we want to address. One, in our follow up, we'll get some technology specifications for those of you asking what operating systems the launch pad supports. We don't have that, but we are gathering that as we speak. So if you didn't get your question answered there, we will get back to you. Also there's been some conversation about the downloading of the app on the phone, and some concern from some of a My HealtheVet coordinators about doing that. I think Alan, here, wanted to chime in and see if he can help with that question as well. Alan.

ALAN GREILSAMER: This app is a web app, and that's been explained by Dr. Spahn a little bit. So it functions much like a website. And what the user would be doing is actually browsing to the web application, rather than actually downloading more traditionally like a standalone native web app that you would download from the Apple App Store or Google Play app Store.

DENISE KENNEDY: Excellent. Thanks, Alan. And then there is a question from Diana who wants to know if the marketing materials have been evaluated for health literacy.

ALAN GREILSAMER: We're just in the beginning stages of developing them and we will go through the typical process of vetting them through various different organizations but we can definitely make sure that health literacy is on the list. We typically do plain language, we run the materials by 50A, and also run them by human factors as well. So we can add health literacy to that as well.

DENISE KENNEDY: Excellent. And I just want to give one more minute, as I see a couple of people typing. So I'm watching that. We'll just stay on the line for one more second. Lots of people thanking you Dr. Spahn for the useful information. If for some reason we missed your question in this Q&A, we will go back through it. We have been having some various technology challenges. Regina has asked Dr. Spahn, is each local-- if each local VA is responsible for manning the app?

ERIC SPAHN: So what we have as part of that is this setup for secure messaging. And it's currently, the current functionality, this app isn't changing that. But if the site decides to create Ask a Pharmacist triage group for their Veterans, the initial approach is to have one for the primary station. And if the patient sending the message is part of any CBOC or outpatient clinic that is attached to that primary station, you can create additional Ask a Pharmacist groups for that station.

So if you had, I came from Fayetteville, Arkansas, that would be the main primary station is Ask a Pharmacist Fayetteville, Arkansas. There's CBOCs for Harrison, so you could also create one for Ask a Pharmacist Harrison, and any messages coming into the main primary station can be reassigned to the CBOC where the patient actually goes to see either the primary care doctor or even the pharmacist if they're there. And after that assignment is made, that alerts the My HealtheVet coordinator to add that patient to that group. So initially, it would be the primary station's responsibility to handle these questions, but as they reassign them to a different clinic, different CBOC or different outpatient clinics under that main station, those patients will then be reassigned to those groups as well. So it would be the responsibility of the staff to do the initial
set up, and as they sort of reassign their patients to the appropriate clinic they see, that would be a responsibility.

One of the things that has to do with this too, is there are pharmacy care centers under the health resource center that man phone calls for sites, and they have a memorandum of understanding and get actually reimbursement for answering calls from the site because the call volume is so extreme, it would be a constant interruption at the site. So we cannot with the current understanding between the site and that center they would have to actually create a new MOU if they want to start reimbursing them for answering any questions coming through instant messaging since that's a different form of communication.

The other alternative is to just continue to use that call center for calls and the site established for secure messaging. Again, this is a triage group, it's not an email. So the only way, if you set it up correctly, and we're providing the guidance on that in the marketing materials, is that the only time you get a message in your inbox if it's been assigned specifically to you. And that's the responsibility of the triage staff.

So if you have messages coming in to Ask a Pharmacist at the primary station, and the triage staff reassigned it to a pharmacist, then you will see a notification in your inbox to go log into secure messaging and respond. If not, the triage staff will be able to answer the question. And we've seen, a majority of the time, these general pharmacy questions can be answered by the triage staff, which is usually a pharmacy technician which is also working calls. And we found that by setting this up, your call volume decreases quite a bit. There's different sites have different statistics. I'm sure the ones of the best practices could share those, but in general you will see it reduce phone call volume because these users who are savvy with secure messaging, they would prefer to send it through that and be able to actually document their request. So that's sort of, when it comes to manning it, how that sort of setup would occur.

DENISE KENNEDY: Excellent. And a few other questions that have come in. One is, my facility won't use secure messaging because they don't have the manpower or time needed. Can this be nationally mandated to implement Ask a Pharmacist as a secure messaging team?

ERIC SPAHN: So the two things. Number one is, the Veteran's trying to contact you. They're going to attempt a secure message, or they're going to attempt a phone call, or just show up in person. So having the manpower needed-- if you utilize a call center, yeah it might increase some workload with messages coming in since you didn't have that before. We hope that many of these messages are replacing phone calls that are coming through, so it'll actually reduce the time needed and the ability to respond within three days versus immediately.

Having to go through all the voice mails and answer all the calls and then go back to the story takes much more time than a secure message. And even trying to get the point of what the question is sometimes takes a lot of calls back and forth. So we're hoping that utilizing secure messaging helps that. Now the mandate of secure messaging goes back to discussions on a draft that triage groups and secure messaging be created for any line of service that works directly with patients. Because essentially we have this communication device. And if you have a
service, just like you have a number for that service that you show on your web page, you would also think you would need a contact and secure messaging for that service as well.

So that's essentially what this is doing, is adding another line of communication for the Veteran to the pharmacy and not just the Veteran to the pharmacy but also the primary care team to the pharmacy because general questions don't just come from Veterans. They come from nurses, providers. And there's a very high clinical impact secure messaging with appointments and such, but there's also a high need for just general questions to come through. And some sites even add administrators on there for the administrative questions, so that if the general pharmacist gets it, they can either reassign it to an administrator, they can reassign it to the clinical staff, maybe the patient's in a PACT team, and it's a specific anticoag question and it's not within that pharmacist's scope, they can reassign it to that level of expertise, or they can respond on their own. So it really opens up many more ways in which communication can streamline, not only between the Veteran, but between the pharmacy and the provider.

DENISE KENNEDY: Excellent. Thanks for that, and there's lots of people chiming in about how much time secure messaging saves them, so your point is definitely being validated. Two last questions. The first is, how are facilities associating their Ask a Pharmacist team, OE/RR or PACT team?

ERIC SPAHN: I think they're doing both ways, and there's benefits to each. I believe the way we initially were talking about reassignment was using the PCMM panels and I think that with the ability to use OE/RR it allows you more flexibility on reassigning from one triage group to another, because that was a new enhancement that came out not too long ago where a message to one triage group could be reassigned to another triage group. And I'm not even sure yet if there may be a way in which if it's not already here, you can reassign the message from a triage group at your local facility to one at a different facility which would really benefit some communication with Veterans using multiple facilities, requesting remote medications be cancelled, we do a lot of that in pharmacy. So I see a lot of future use for this with that functionality.

DENISE KENNEDY: Excellent. And, one last question before we wrap up here today. How do you envision the typical My HealtheVet user interacting with the app? There was a question about what's the benefit of the app versus using the traditional My HealtheVet website.

ERIC SPAHN: Correct. Well and My HealtheVet's going through redesign which is going to be improving a lot of features. You can ask a lot of the folks in My HealtheVet, and I work with them directly, the main thing they're trying to reduce is users, especially with a feature that is highly used which pharmacy [INAUDIBLE] of it is a huge utilization. But a lot of the resources that are medication specific are sort of scattered throughout the site. And this app really utilizes a lot of resources on My HealtheVet. There's an archive of articles that are contained in My HealtheVet. Many people don't realize they're there, but have been created and added to the site over the years. But you have to search the archive and have to just find the archive to find that information.
Ask a Pharmacist brings all those articles back within a few clicks of opening the app. It also brings all the pharmacy information, VA information, plus My HealthVet pharmacy information within a few clicks. And they really count those clicks when they look at utilization of My HealthVet. Like how many clicks does it take me to get to where I need to be. So this sort of points them in the right direction. It also allows them to have trusted resources versus going to Google, and doing just a free text search for medication information and getting a variety of topics.

This is information that VA pharmacists and pharmacy staff and technicians and coordinators have actually provided to the Veteran to say, we've looked at the resources and these are the ones we suggest you use, because they're using trusted resources that are .gov sites. They're using the National Library of Medicine for a search tool that uses images that the VA actually vetted, we actually helped create the images that you're seeing on this app from this external site.

So the main thing is to help take these resources that we have and provide education to a heavily used service, and put into a mobile app so that users can access those quickly and share that information with their caregivers, with their providers outside the VA, so those providers can help them provide better care and just bridge that gap of communication with the secure messaging feature. Because that's where, you have secure messaging but how are you promoting it for your service? The app promotes it for your service. This app tells Veterans, instead of calling, here's an option to send a secure message and use this form of communication you may actually enjoy much better than being stuck on hold and listening to the music on a phone all day. I guess in summary--

DENISE KENNEDY: Excellent. So I want to end on a high note here. We're getting a lot of really positive feedback. One of the comments was that the patients Google so much information related to medication so having all this in one and the trusted resources in one spot is a win for all. I think that really summarizes, and thanks Tracy for your comments on that. I think that really summarizes the Ask a Pharmacist app today. I want to thank everyone for sticking with us in the beginning through our technology challenges, and for participating today.

We are going to end this session now. We're going to follow up with you with any questions we didn't get to and the slides, as a reminder are at the top right of the chat screen on the paper clip, and please fill out the questionnaire link that we'll send you following the presentation. Let us know how we're doing and any additional topics you'd like to hear about. And just an extra special thanks today to Dr. Spahn and Damien Sharp for your participation. We really appreciate it. And with that, we'll let everyone hopefully get to their weekend. Have a good one.

DAMIEN SHARP: This is Damien

DENISE KENNEDY: Oh Damien go ahead

DAMIEN SHARP: This is Damien. Can you go to the next slide please? The very last slide. And this is-- I wanted to point out the URL for providing feedback. That's all I wanted to do.

DENISE KENNEDY: Excellent. Thank you. We'll send that as an email as well.
ALAN GREILSAMER: Yeah, just so everybody knows I'll be sending out an email to everybody who we've pestered and that Survey Monkey will be going to everybody. So we'll collect that and share the results, Damien, with you and Dr. Spahn.

DAMIEN SHARP: Thank you. I appreciate it.

ERIC SPAHN: Thank you.

DENISE KENNEDY: Thanks all and have a good weekend.

DAMIEN SHARP: Thank you all. Thank you Dr. Spahn.

ERIC SPAHN: Thank you. Bye.