VA Mobile Discussion Series

May Webinar: A Day in the Life of a My HealtheVet Coordinator

VA's Mobile Discussion Series is a monthly webinar featuring a variety of topics focused around app development and mobile health at VA.

Micah Azzano: Hello, everyone. Welcome and thank you for attending the Connected Care Discussion Series webinar. This month's discussion is A Day in the Life of a My HealtheVet Coordinator. My name is Micah Azzano, and I'm going to run through a few brief technical reminders before we begin. Your phone lines are muted, so we'll be taking questions through the chat feature. The chat function is available to you at the right of your screen. If you are experiencing any technical difficulties, please use the chat and someone will be with you to assist. If you would like to download this presentation or other resources, you may do so by clicking on the file name below the chat screen. The full presentation will also be available at a later date on the Connected Care Discussion Series webpage.

Today, we welcome our presenters and My HealtheVet experts: Ron Grissett, My HealtheVet Program Manager, New Orleans, Louisiana; Debbie Russel, My HealtheVet Coordinator, Fayetteville, Arkansas; and Glen Massman, My HealtheVet Coordinator, Cheyenne, Wyoming. We'll be taking questions periodically throughout the webinar, so please type them into the chat at any time during the presentation. During the discussion today, our presenters will go over the hidden gems on My HealtheVet, how My HealtheVet can be used in a crisis, and what a day in the life of a My HealtheVet coordinator looks like. With that, I will hand it over to Ron to talk about some of those hidden gems.

Ron Grissett: Thank you, Micah. Good afternoon. Today, we're going to discuss the hidden gems and unknown paragons within the My HealtheVet website. My HealtheVet is the VA's online health record and tool used by the VA to streamline, organize, and optimize the health care of veterans, active duty soldiers, sailors, marines, and airmen, along with their dependents. Utilizing the Internet and other computer mechanisms, veterans can refill their medication, schedule and view appointments, send secure messages to their health care teams, and view and download their health record. On the following slides, we will take a look at some of the unknown sections within the My HealtheVet website that most veterans, family members, and even staff are unaware of.

In my six-year experiences as a My HealtheVet coordinator, I get countless questions from staff regarding the veteran perspective in My HealtheVet. When I say that, I mean, what does the veteran see when they go on to My HealtheVet website? The following few slides are from the veterans' viewpoint and from the different aspects and navigations in finding these hidden gems. This is the My HealtheVet login main landing page. It can be found by going to www.myhealth.va.gov. This is unsecure and open to the public. Basically, anyone can use it at this point.



At the bottom of the webpage, which is the Resource section in My HealtheVet, is one of these hidden gems within the webpage. Option one, which is the Benefit section, here, veterans can access the national va.gov website, check their disability claim status, view their payment history, upload evidence to support their disability claim, file for disability claim, and even file a claim for compensation. Additionally, veterans can check on their educational benefits and request their DD 214.

Option two is the Mental Health Resource section. This allows the veteran and the family members to identify and explore mental health problems. Within this section, there are links to check your mental health. There are screening tools, anger management tools, professional help tools, PTSD treatment tools before and after deployments. The third option is the Veterans Health Library. It is the VA's health encyclopedia, what I like to call the VA's version of WebMD.

The fourth option, which is the Healthy Living section, gives the veteran education and health information on healthy living and healthy behaviors. The fifth option is the Community section. Here, veterans can receive information about VA mobile applications, learn how to volunteer at their local facility, and even subscribe to the My HealtheVet biweekly newsletter. The sixth option is the Healthy Living Assessment section. Here, veterans can get a summary report that has their current health status, risks of developing major diseases, and their health aids.

Another one of my favorite hidden gems within the website is the About section at the top of the webpage. In this section, the veterans are offered tips designed to reinforce their experiences while assisting them with making uniform and informed health care choices. In this section, veterans and family members can learn about different My HealtheVet topics, learn how to use the online features, learn how to manage their VA health record and how to address website issues. A few of these examples will be how to reset their password, recover their user ID, register for an account, track medication delivery, access medical images, and even check to see if their web browser is compatible with the actual website.

A good example would be my role as a My HealtheVet coordinator. I get questions daily from veterans through secure messaging asking how to view their notes for their providers, how to view the images. I use the Quick section or the Quick Guide and the User Guide at least 5 to 10 times a day by responding to a veteran via secure messaging or email or even texting them over cellphone. Directing the veterans in this hidden section, it has a vast amount of information that can be used by veterans, dependents, coordinators. This is what I really believe makes My HealtheVet an unparalleled jewel for the veteran community.

Micah Azzano: Thanks, Ron, for that really great information on the hidden gems. I want to stop for a second and ask you a quick question. Can you provide a specific example of how some of these hidden gems have really helped you as a My HealtheVet coordinator connect a veteran or a caregiver to care?

Ron Grissett: Yes. Actually, connecting the veteran or health care provider ... Well, actually utilizing the hidden gem, this section, the About section, which is this section right here, the



Quick Guide. As I stated earlier, I have a lot of veterans that ask questions, they forget their username, they forget how to send secure messages, they forget how to communicate with their provider or download certain aspects of their health record. Instead of me typing everything out for them, I just send them a PDF file in this Quick Guide section, in this User Guide section, on these blue tiles, everything is already in a PDF format and I can just send it to them, and they could just follow and I can walk them through step by step possibly or they can just go ahead and take it and read it at their leisure.

Micah Azzano: Excellent. Thank you. As a reminder, we are taking questions periodically throughout the webinar and at the end of the presentation again, so please submit them at any point in the chat feature. With that, I will hand it over to Debbie to talk about crisis and disasters.

Debbie Russell: Thank you, Micah. I have to tell you, though, it is a tough act to follow anytime I follow Ron. Ron has been a big brother to me. He's somebody that I run to with ideas and issues and just to get his take. He is the king of outreach, I have to tell you that. But for talking about how My HealtheVet is a bonus during crisis and disaster, My HealtheVet is that perfect partner in veterans' care during times of crisis and emergency. Because each facility has unique challenges, My HealtheVet is just that superpower that provides service to both the veterans and to the VA staff.

My HealtheVet coordinators provide excellent customer service and care for our nation's heroes, especially during these times of crises and emergency. Ordering medications with My HealtheVet allows our premium account holders the ability not only to order medications, but track medications anywhere using computers, laptops, tablets, but more importantly, mobile phone devices. Tracking medications is key for veterans that may be unable to connect with the ordering provider, the pharmacy, also verify the delivery schedule.

The current pandemic is proof that My HealtheVet has been essential to provide continuity of care to our veterans. We teach our veterans to print their active medication list, and we recommend putting them in their wallet, as well as in their glove compartment of their vehicles. This is really important because first responders always look for patient information in both of these recommended areas during an emergency. My HealtheVet is just one simple key that can save time and save a life. Self-scheduling is key to access. Self-scheduling improves customer satisfaction and it's easy for patients to use on mobile devices.

Partnering with VA Video Connect, VA staff connects with our patients where they are. My HealtheVet breaks down that perceived barriers that our patients face and improves the veteran experience of access. Secure messaging, I have to tell you, is my favorite. They allow me only a certain amount of time to talk, so please know that I'll keep it short when it comes to secure messaging. But it is that non-face-to-face appointment opportunities that promote healthy communications, and healthy communications is essential during emergencies and great communication is vital foundation to patients and provider relationship.



Having medical records available to veterans during emergency times is very important, and it is a huge value to the veterans and to the caregivers. The blue button allows the veterans easy access to medical records and test results in an organized manner. Our Veterans Health Library, like Ron was talking about, is that trusted source of health information and education, it's available 24/7, and it is just one more key to mobile health education. Now, Ron did also cover the mental health hidden jewels, and Ron is correct. This hidden jewel needs to be highlighted, especially during times of crisis, emergency, and the pandemic time that we're now experiencing.

This time is an example of how My HealtheVet has provided quality mental health connection, trusted mental health education all at the fingertips of our veterans. Our mental health teams are finding unique ways of using secure messaging for group sessions, worksheet distributions, and pulling in those veterans that are feeling isolated and disconnected. Their creativity is amazing. Our va.gov link is simply that one-stop shopping that allows that support to our veterans, and our VA Facility Locator is critical for traveling veterans, displaced veterans, and connecting our veterans with the nation's largest team of health care providers.

Together, the My HealtheVet coordinators provide support to our veterans and to our staff to deliver patient education, access communication, and again, that connection that is so vital. A strong partnership between the Tele Health and My HealtheVet has been key in today's challenges. VA Video Connect and Video on Demand provide the My HealtheVet coordinators the ability with other mobile issues right now to connect with veterans anywhere they need help, whether it be registering, navigating the portal or identity proofing. The virtual convenience is not only vital during times of emergency, but during our normal business practices. This is just one more way that we serve our veterans where they are.

At the Veterans Health Care System of the Ozarks here in Fayetteville, we've endured electrical outages, clinic closures, and computer outages due to inclement weather, emergency, and disaster. During these times, the My HealtheVet office has been able to add local clinical and administrative staff to our community-based outreach clinic team during these events, and it's been immediate support and coverage to keep business as usual for our patients, for safety, and the best veterans experience.

Luckily, the Veterans Health Care System of the Ozarks have created a complete facility-wide secure messaging distribution teams, and these are to be used during times of emergency and disaster. Our Public Affairs Office is responsible for all message development and the continuity for all outgoing communications in situation updates. Only when activated are the facility secure messaging distribution team is utilized. We ensure that messaging does not become spam, and that's very important. Secure messaging is just designed for direct communications between the patient and the provider, so we protect our facilities teams by not making them public.

Emergency Management Tracking Report is solely the responsibility of the My HealtheVet coordinator and, in that, I include tracking numbers of inbound and outbound messages,



numbers of reassigned clinical messages, and messages completions for the emergency management sit reps. My HealtheVet is that trusted site and trusted communication. With our COVID-19 situation update replies from our patients, we've had about 90% of those replies, these simply replies of appreciation that don't require a response. Less than 10% had been reassigned to clinical services and for responses.

Veterans have responded overwhelmingly with appreciation messages. These messages have been messages of telling us how important the VA is to them and how it made them feel connected to the VA and how they feel the VA cares personally about the efforts that's going on through this pandemic on our population. Positive support and appreciation from the Director's Office has provided an incredible momentum for all areas to increase secure messaging usage and improve workload credit capture.

Again, I must repeat that the My HealtheVet office does not initiate any situation responses or notifications that are not scripted by the Public Affairs Office for emergency management. It is important that you know that these teams creating a facility-wide distribution group requires a huge amount of time investment, not only to build but to maintain. However, just for my facility, the payback has been great. It's been outstanding and valuable tool, and I've been very thankful and blessed to have this built before this pandemic. Do you have any questions for me?

Micah Azzano: Yeah. Thank you, Debbie. You had a lot of really helpful information in there and there are a couple questions that came in. I'll start with the first one. Is there a QRG for printing active medication list?

Debbie Russell: The QRCs, I believe, is in one of our brochures. I don't have that handy. I actually think I got that from Ron. But it makes it really easy. We do have a QRC that patients can hold up to their telephone, and when they're in the picture mode, it automatically links to My HealtheVet and then, of course, selecting Refill VA Medications is just quick and easy. When that comes up, it not only tells the veteran the name of every medication, it tells the last order date. It also tells them how many refills they have left, and that's really important. I teach my patients, when they only have one refill, please go ahead, order that medication, and then go directly to secure messaging and ask your provider to refill that medication.

Micah Azzano: I just saw that the link is provided to the Quick Reference Guide in the chat. If anyone's interested, it is now in there. Next question, really quick, Debbie, that I have just a quick follow up here. Do you have any success stories you can share about how My HealtheVet was used in a crisis, any specific examples? Then a follow-up question to that, what are some of the things that coordinators should think about to prepare for a potential crisis?

Debbie Russell: I think the most recent example, I have a new eye clinic provider in one of our Springfield CBOCs, and he Skyped me and said, "I need your help. I have a middle-age veteran that lives in a different town and he's having eye issues and I must see his eye. He's refusing to



come in because of COVID and the fear of getting out." He said, "I need you to contact this veteran and make it happen, Debbie. Make it happen." That's exactly what I did.

I'm working remote and I have a VA phone, and so I called that veteran and explained who I was, went through all of the identification process, told him what his provider was asking. The veteran, I asked him, I said, "Can you see enough to register?" He said, "Well, I can't see, my wife can." I stepped them through registering with My HealtheVet. I engaged FaceTime from our phone because he had an iPhone as well, and I was able to see the veteran's ID, compare it to his CPRS, and go ahead and do the identity proofing right there.

Then once I associate him, and I went ahead and associated him to that eye clinic team because I was afraid it wouldn't have that instant association. Sometimes it's a little bit of lag. I sent him a text message and kept him on the phone. I walked him through the portal, navigating to secure messaging, how to open a message. He was able to receive my message, and then I helped him step through, taking a picture of his eye and attaching it to the secure message to a new secure message and sending it to the eye clinic provider.

It was the most awesome feeling because this veteran was really concerned he was going to lose his eye, but he was so afraid of COVID that they were not going to leave. Before I could even go over to the portal to see if my eye doc had received the message, he had already opened it and was working on response to the patient. That's just one of them. I have one that a nurse saved a patient's life through assessing COVID and directing the patient to go to the closest emergency room. The letters that they write back of thankfulness and gratitude, I have to tell you, are emotional. They make me cry and make me so grateful every day for having the ability to help our veterans and be a part of My HealtheVet family.

Micah Azzano: Debbie, thank you, that's truly amazing and that's awesome to hear. Right now, we don't have any additional questions. But we are taking questions again at the end of this presentation, so please keep those questions coming in the chat feature. With that, I'm going to pass it over to Glen to talk about a day in the life of a My HealtheVet coordinator.

Glen Massman: All right. Hey, thanks, Micah, and thank you everybody for tuning in and listening to us. Next slide, please. Typically, what I do is I'm a dedicated My HealtheVet administrator, secure messaging administrator. That's normally what I do. I do that for the Tri-State area: Nebraska, Wyoming, and Northern Colorado. The way I make it successful is I have numerous champions throughout those different clinics and throughout our health care system to take in and make sure that our vets' needs are getting met. Right now, with the COVID response going on, I've been sucked into the Incident Command System team and I'm actually acting as the Deputy Incident Commander.

Micah, can you go ahead and advance the slide for me, please? All right. As you can see, our facility is not really that big and we've got less than 27,000 uniques. We've got less than 13,000 My HealtheVet users. But with that, we get between 5,000 and 6,000 secure messages a month for our facility and that's across not just primary care, but chaplain service, cardiology, mental



health, all those different areas. We've got about 120 different teams that are set up throughout our facility and throughout our health care system. A big chunk of what I do is I'm on all of those secure messaging teams. With me being on our secure messaging teams, that's what really helps with us keeping our escalated secure messaging rate less than 1%, and I've been told that that's a huge factor right there.

Next slide, please. Like I said, I'm on all the different secure messaging teams, which allows me to take and review all secure messages that come in. I look at pretty much every message that comes into the facility, and that allows me to take and answer those "Thank You" messages that our facility gets from our patients, from our clients, and I pass it on to supervisors. If it's a really good one, I'll pass it on to our facility director to let him know that, "Hey, our people are doing great things out there," because our folks are doing great things out there.

About three or four times a month, we'll get a suicidal or homicidal or urgent secure message that comes in and needs to be handled right away. That could be anything from, "Hey, I was trying to dig myself out of a snowdrift and I started having chest pains. What should I do?" I've gotten pictures of fingers. "Hey, I was sawing down a tree and I cut my finger off. What should I do?" Obviously, you should stop typing and probably go to the emergency room. What I do is I handle those messages. I get a mental health or our primary care or even our emergency department engaged, and then we take care of those messages.

I had a patient in Brazil one time, the only way that they can take and communicate with their mental health team was through secure messaging. He was having a crisis and we were able to get him hooked up and we were able to resolve it. That goes back to redirecting messages as needed. It can be anything from, "Hey, I need to get a message to my cardiologist in Denver," to, "I need to get a message to somebody in Compensated Work Therapy," and I help get those messages going in the right direction. That's a big part of what takes up my day.

Usually, my mornings start off with going into VSSC and pulling up the Manage Escalations Report. What I do is I pull up a report that tells us what messages are going to escalate within the next 24 hours, and then I just take and I send that out to the folks that can actually make that happen and make sure that those messages are getting completed in a timely manner and our veterans are getting the information that they're asking for.

Then later on in the afternoon, after I feed myself and take care of myself and take care of all these other tasks and stuff like that, in the afternoon what I'll do is I'll take and I'll send out an escalated message for the messages that haven't gotten taken care of. I'll send that to our key personnel like our administrative officers or service line chiefs or whoever it needs to take to get that escalated message taken care of and the information out to the folks who need it.

Big chunk of what I do is I'm out in the community. It's not uncommon to see me roll up on my Harley at a clinic or at an outreach event or something like that and be talking about My HealtheVet. I go out to the clinics probably at least once a week, I'm in each one of the different clinics. Again, that's based off of weather. Sometimes we're logged down and we don't travel



for two weeks and sometimes I'm out in the clinics two or three times a week. It all depends on what's going on. All right. Our Chief of Staff and our General Practice Manager, they're online and they support our program. I think having our executive leadership team behind it is a huge reason that our program is successful.

Next slide, please. All right. Like I said, I'm a member of all the different secure messaging teams, which allows me to take and know the different care teams, allows me to know a lot of the staff by name, sometimes I know them by face. Then I just try to be responsive to their needs, whether they hit me up on Skype or whether I'm in their clinic or something like that. I just try to help them out as much as I can. The way I make sure that our program gets promoted is I go to the New Employee Orientation program, which gives our folks a face to the program and then I also show folks, our new staff members what My HealtheVet looks like from a patient's perspective so that way they can see what capabilities are there and what our patients are asking them for, and then I show them how to use secure messaging.

Another thing that I do is I just go out and I just walk the halls, I walk the clinics, I walk the waiting rooms and stuff like that. I spend a lot of time at community outreach events. I've done stuff at Cabela's in Sidney, Nebraska. I've done motorcycle rallies in Northern Colorado. Just all kinds of different things. I'm out there not just promoting My HealtheVet, but promoting the VHA and trying to let people know that, "Hey, we do want to be your provider of choice." I try to stay active in the local veteran organizations and just promote My HealtheVet in the VA as much as I can. My dad is a veteran. My brother's a veteran. A lot of my friends are veterans and our veterans are national treasures so they deserve the best we can give them, and that's what I'm trying to do. That's all I got. Thank you for your time and I hope you all stay healthy.

Micah Azzano: Thanks, Glen, so much for giving us a glimpse into the daily life of a My HealtheVet coordinator. I've heard some great stories about how you've also gone out during your motorcycle out to Cabela's even to help promote My HealtheVet, so thank you for that. We are now taking questions for all of our presenters. Glen, I'm going to throw the first one to you. How did you get started as a coordinator and how has your role grown since you started?

Glen Massman: It started out that I came to the VA. I retired after 21 years in the service and my wife came home from work and I said, "Hey, I want to get a motorcycle," and she said, "I want you to get a job." I started out as a secretary for our associate director at the VA, and I fell in love with the mission. I fell in love with taking care of my brothers and sisters. The My HealtheVet program opened up and I jumped on it, and I've been doing that since about 2010, I guess, and it's grown so much.

When I first got into the program, secure messaging was just taking off, the medication refills were glitchy, and we were trying to work our way through it. Now, we've got people that are using secure messaging to send pictures of just all kinds of different lumps and bumps, and they're using it to take in some links for information, to get a hold of benefits questions. It's just amazing and it's a great program. It really is.



Micah Azzano: I couldn't agree more, Glen. We have another question that came in, but this one's for Ron. Ron, I'm going to pass it to you. Have you ever seen or dealt with the User Guide being unavailable or have stopped working or have had a PT state, it constantly isn't available, but that PT was the only one?

Ron Grissett: Yes, I've got that many times, Angela. I've got that many times, and my solution to that is to download the User Guides and the reference Quick Guides to your computer and store them in a file folder. That's what I do. That way, I will always have access to them in case the website is down or they're unavailable for whatever reason. But I created a folder on my shared drive, and whenever I need those, whenever someone wants to reset their password, I just go right in my folder, grab it, and send it to them by email, by phone, or what have you.

Micah Azzano: That's a great tip, Ron. Thank you. The next question that came in, and I'm going to pass it to Debbie, is being a My HealtheVet manager, should we have access to secure messaging?

Debbie Russell: I believe it's important for me, being a little bit of a control freak and patient safety is always an issue. I have my name in every single group and I have ... Gosh, last count was probably 320 or more secure messaging teams because I want to know when the messages come in, if they're being opened timely, and if they've hung out there a little bit what's going on. We also look for emergencies that although secure messaging is not designed for emergencies, we're looking at those subject lines. When it says, "I can't take it anymore, I'm saying goodbye," or, "My pain is a 10," we're always looking for those and managing it and partnering with our health teams to give them a heads up when something out there, because that partnership is what delivers excellent care for our veterans.

Micah Azzano: Thank you, Debbie. The next question that came in, I'm going to pass to Glen. When talking to other coordinators, how do you tie Office of Connected Care applications together, desktop, mobile telehealth? I'm passing it to you first, Glen, but then we'll go down to Ron and then Debbie afterwards for their answers as well.

Glen Massman: Okay. My HealtheVet and the eBenefits and va.gov are ... It's a layered approach to making sure that our veterans are getting the information and the health care that they need. The different connected care modalities, whether it's VA Video Connect or it's any of those different modalities, they're all working towards the same goal of providing the care to our veterans and the modality that our veterans feel the most comfortable with.

Sometimes that can be a secure message to, like Debbie said, "Hey, I need to get in to see somebody now because I'm really hurting bad," and it could be that personal crisis or it could be something where, "Hey, I just need to show you this lump or bump," and they can do it through VVC. We try to promote all those different programs, or I do when I'm out there in the public and stuff, because there's a lot of different ways that you can take and connect with our providers and our staff.



Micah Azzano: Thanks, Glen. Ron, I'll go to you next. When talking to the coordinators, how do you tie in the Office of Connected Care applications together, desktop, the mobile, and the telehealth pieces?

Ron Grissett: I'm blessed I have Ms. [Odama Johnson 00: 35: 51] who's working with Office of Connected Care. She's here in my office. We work together as a team. Whenever I go out to do outreach or I have an event that I am participating in, she is right there with me. Anything that we do, we do it together as a team, with the VA apps and the Office of Connected Care and VVC and Annie. I work really close in conjunction with Ms. Odama Johnson in putting that information out to our veterans and allowing them to utilize the Office of Connected Care services.

Micah Azzano: Okay. Thanks, Ron. Debbie, same question to you as well. How do you tie in all those different pieces together?

Debbie Russell: I have to say ditto to each one of the other comments because that's exactly what we do in patient education. I have a superhero, and her name is Brenda. We both have the same approach when we register a patient during non-COVID times, we are by their side and listening to what that patient's needs are and trying to help them find the avenues, whether it would be connecting with home telehealth VVC appointment, whether it might be an Annie app or also teaching many of the VA mobile apps. We really try to bring it in as one-stop shopping, like the Apple sales room floor. When you come into our area, we're going to listen to what you want and show you what the VA has to meet the needs and maybe teach them about something they didn't know.

Micah Azzano: Nice one. Thanks, Debbie. Some really great responses there. The next question that came in is, and I hope I say this right, why can't veterans secure message me directly as an ophthalmology health technician?

Ron Grissett: Would you like to answer that, Debbie?

Debbie Russell: You bet. I've been around a long time and we've tried a lot of things, because one of the things I taught with My HealtheVet secure messaging, it's like Burger King, we can have it our way. We tried lots of avenues. We found that we want patients to be associated appropriately to the right areas. Number two, we have to do it as a team effort, because if a veteran only had you to reach out to, just the provider and no one else on your team, you would not be allowed a day off to be sick because we're not going to let that veteran down.

It is really important. My Eye Clinic is set up by the CBOC or by the facility, and each one of the patients are associated to eye clinic now because all have access. Specific specialty clinics are only associated by the notes so they're not inappropriately reaching out without that appropriate connection. That's an excellent question. Thank you.



Micah Azzano: Yeah. Thank you for that question. The next question we have that came in is, have you encountered messages being completed without a response, and how do you handle it? Ron, I'll pass that one to you.

Ron Grissett: Without putting anyone on blast, I have encountered that, yes. When that happens, I'd speak with the team, the team and the individual that is completing the messages. But that does happen and it probably happens to most coordinators, and we probably all have had one point or another where a veteran has said that they haven't got a response but the message was already read because the veteran can actually see when they send a secure message. They can see whether or not it has been opened and read by us here at the facility.

Yes, I have encountered that and it was just a matter of me doing a more in-depth explanation to the team member and to the team on the importance of responding to the veteran. Here in New Orleans, we have a policy where we have to respond to the veteran within 24 hours, and it has to be a written response. That is part of our policy here. That was initiated maybe about four years ago, and we haven't had a problem or a pushback from any teams or any staff regarding that. But that happens a lot, probably to all coordinators.

Micah Azzano: Awesome. Really great advice if everyone has had that problem at some point. The next question that came in is, how has VVC changed your presenting of My HealtheVet features as opposed to in-person? I'm going to pass that one, Glen, to you.

Glen Massman: Okay. Pre-COVID, when I would go out on the road, a buddy of mine would go with me, his name's Eric Hart. He handles telehealth and does a bunch of different stuff with VVC and those technical pieces. What we would do is we would set up a couple of different iPads, and one of the iPads would have a VVC app running on it with them able to talk to somebody back at the facility. Then another one would have My HealtheVet on there so we could take and walk them through and show them the different parts of My HealtheVet. Then another one would have one of the apps that you can use to refill your medications.

Like what Debbie said about having gone to an Apple store, you get all the different options right there. Since COVID is happening and I've been in the Incident Commands team a lot more, I've had to take and do a lot more stuff whether it's over the phone and I just walk somebody through it, like Dell tech support or something like that. Then we've had a huge bump on our VVC usage and stuff like that, and it's just a lot easier for our patients to get that stuff in writing through secure messaging after they've had that VVC appointment.

You sit down with an appointment, whether it's in-person or VVC or something like that, and if you've got a TBI like I do, you take and forget stuff. That's one of the great things about secure messaging, is I can take and then send a message to my health care team and say, "Hey, why am I taking this pill instead of that pill," and then they can remind me. I guess that's how things have really changed it, and it hasn't changed.



Micah Azzano: Thanks, Glen. The next question, Ron, is specifically for you. Angela Tomlin says, "I'm in the process of creating a policy. Would you mind sharing portions of your policy?" Ron, I'm going to ask if you want to connect with Angela through the private chat on Adobe, you can connect with her on getting that started.

But the next question that I'm going to pass to all three of you, and we'll start, Debbie, with you, is at our facility, we have the MOVE program and dietitian groups open for any veteran to contact regardless of whether they have an appointment. There was concern about it overwhelming staff, but it's been manageable and veterans can now ask questions and learn about services they may not have known about. It's been great. They're now working to increase veterans signing up in My HealtheVet through working with the MOVE program and dieticians. I just want to see if you guys have tips that you use to help increase veterans signing up for My HealtheVet.

Debbie Russell: You are right on target with MOVE. I have to brag on my dieticians. They are opening their messages, they're working them. But I had one of them ill one day and it's unusual that her message would be out there for an hour or two. I opened up her message, I was going to get ahold of her chief to see what she wanted me to do, and it was the best message ever. It was a response. This dietitian in her MOVE group, she uses secure messaging as a part of their communication.

During the holidays, she sends out recipes in secure messaging because she can attach that recipe. She sends out tips and tricks for navigating the parties through the holidays. Then she reminds them that that next MOVE appointment or class is canceled due to Christmas. It was just well-written. I know that a lot of times, they will set up a template of some of the messages that they sent and then they copy-paste and personalize. It is definitely not a time sucker, it really is a time saver, and connecting these MOVE patients in all forms. They can send their literature, their exercise. It's just awesome.

Micah Azzano: Thanks, Debbie. What are some of your tips maybe for getting veterans to sign up in My HealtheVet through working with the MOVE program? You touched on a little bit.

Debbie Russell: Yeah. Some of the tips of doing that is some of the posters that we will make and send out. We put them in areas that the MOVE patients are going to see it, whether it be outside of our pharmacy, on an informational wall. We send out when patients come in for appointments, we send out notifications to the dieticians that, "We have a veteran coming in that's not registered, please send them by my office and I will help them." My dieticians walk them to my office and say, "I'm ready. I've got a veteran that's ready to sign up with My HealtheVet, will you help them?" We get the opportunity to register them and IPA them and then teach them how to use the system. Just the partnership is incredible.

Micah Azzano: That sounds amazing, Debbie. It sounds like the dietitians are really working hard to make sure that veterans have what they need. Ron, I'm going to pass it to you next to



answer that, and you could even expand it to just, in general, some of the tips you have for getting veterans to sign up and work through the different My HealtheVet programs.

Ron Grissett: A general aspect I'll speak on is my veterans as a whole and in the MOVE program. But as for the veterans as a whole, everywhere my director goes, I go. I'm on every committee, every team. Whenever my director goes out into the community, I have to assist him, and he allows me to plug and promote My HealtheVet. We used to have monthly town hall meetings at all our different CBOCs and areas throughout our facility, and I would assist him with those and set up a table. He is a very big proponent of My HealtheVet. He supports me going along with him at all of these town halls. Every town hall, every off-site visit that's not a town hall where he may do a special presentation or something at American Legion off-time, I assist them and I go with him to those functions.

As far as our MOVE program, I actually present. Twice a week, we have a MOVE program indoctrination here, and I work closely with our MOVE program coordinator, Ross Kennedy. He allows me 10 to 15 minutes at the end of the MOVE section, or the MOVE introduction, orientation to give my spiel on My HealtheVet. At that point, I bring a rolling computer on wheels to the orientation, and I immediately give it to the veterans and have them start signing up with My HealtheVet. As soon as they complete that, then I take them down to my office and authenticate them, and then I make sure that they have the MOVE program on their dropdown menu so they can start communicating with Ross.

We have about an 80% to 90% interest rate for veterans wanting to get involved with My HealtheVet and secure messaging, and being able to communicate with the health care teams. Believe it or not, a lot of veterans didn't want to use it. But once they hear it and see the different steps and see the ability and what secure messaging in My HealtheVet can do, they are very interested. They're very interested in the program, especially now with this pandemic that we've had. They are very interested where they don't have to call us at all. They could just send a secure message and it'd be addressed.

Micah Azzano: Thanks, Ron. You hit on something really important with the times that we're in right now, how My HealtheVet is an extra help to veterans. Glen, I'm going to pass the same question to you, increasing veteran signups for My HealtheVet.

Glen Massman: Okay. One of the big selling points that we have or that I use, both with MOVE and the mental health programs and just health care in general, a big part of that is goal setting and accountability. My HealtheVet has health journals that you can take and fill out in there. You can take and use My HealtheVet secure messaging to take and send messages to your health care team to let them know where you're at on your goal, and they can provide those reassuring motivational messages if they want to.

One of the biggest things that I do to sell it is I'm a customer. I think of it as, "How would I get my dad use it?" My dad uses it all the time. It's all about the marketing. You've got to take it and sell it to them the way they want it, how it's going to apply to them. If I live four hours away



in Sterling, Nebraska, I don't want to take and drive all the way into the clinic to take and get seen for something that I could send a picture over and they could say, "Go to the pharmacy and pick up the script that I just sent for you."

We could do that through VVC now, we can do that through secure messaging. It's a lot more convenient. It gives our veterans their time to take and ask questions on their time instead of playing phone tag, they just send a secure message and it's on its way. It's just a lot easier and more convenient. But for those folks that don't want to take and use secure messaging and they don't want to take and do that, then we help them get hooked up into the system, whether it's our mobile clinics or maybe a veteran service officer in that local community that will help them with getting set up with VVC or something like that.

Micah Azzano: Thanks, Glen. I don't see any additional questions coming in at this time. I'm just going to quickly ask you guys to share your like final thoughts or anything that you didn't share that you'd like to go ahead and share with the group. Debbie, we will start with you, and then we will go to Ron, and then Glen. Debbie, I think you might be on mute.

Debbie Russell: Oh, I'm so sorry. Can you hear me now?

Micah Azzano: Yes, we can hear you perfectly. Debbie, you went quiet again. I'm going to quickly hand it to Ron, and we'll come back to you.

Ron Grissett: Basically, as I tell all my veterans, all our new employees, and I was being sort of a clairvoyant in the past, but My HealtheVet is the future. What we're going through currently is proof of that. My HealtheVet has been around 16 years. We're the godfather, grandfather to every VA app online. Video Connect, My HealtheVet has been the only thing that has sustained longevity. My HealtheVet is definitely the future. The more veterans that we can get utilizing, and more staff that we can get interested in being parts of teams, it will definitely be better for the program, for the VA, for the entire veteran community.

Micah Azzano: Thanks, Ron. Glen, I'm going to go to you next, and then, Debbie, we'll come back to you.

Glen Massman: Okay. Like I said earlier, our veterans have put themselves on the line for us. They're national treasures and they deserve the best that we can provide for them. For us, in this age of the MISSION Act and of Choice and things like that, we want to be the provider of choice because we are uniquely situated as the VA to take care of our veterans. We've got to provide them those choices. My HealtheVet provides them those choices. It provides them the opportunity to refill their medications, whether they're on the road from a cell phone or from a desktop. It allows them to communicate with their health care team, whether they're 100 yards away or 100 miles away. It's just an awesome tool. Like I said, if it's good enough for my dad, I think it's good enough for everybody.

Micah Azzano: Thanks, Glen. Debbie, we'll try to go to you again.



Debbie Russell: Yes, thank you so much. I'm sorry, my phone was cutting out. How can I say more than what Glen and Ron have said, because they have hit it spot-on. My HealtheVet was four-sided. The way it was built, its dependability now, the leadership that structured it, and it becomes that virtual reality now in the days that we live for our veterans. It is a family and we are very blessed to be a part of that My HealtheVet family, connecting our veterans anytime anywhere and building those relationships that really make the difference and, like Glen said, make our patients want to choose VA, because it is our privilege to serve.

Micah Azzano: Thank you, Debbie. Thanks to all our presenters for the great information. I now want to hand it over to miss Theresa Hancock, Director of My HealtheVet to say a few closing words.

Theresa Hancock: First, I want to say thank you to everyone. Excellent job. It's just so impressive. I've said this, you live it, you breathe it every day, you're the feet on the street. The bottom line is My HealtheVet's a tool, right? It's a website. What makes it is the people behind it and, as some of you said, it's the relationships that connect you to the veteran. It's a way to understand their needs and be able to act on their needs and deliver what they need. It is so important because you are the face of My HealtheVet, you are the face of the organization. When they say, "I have a need," whether it's My HealtheVet mobile telehealth, where's the bathroom, as an employee of the organization, it is our obligation to help them.

My husband works for Walmart, and he says when somebody comes to his department, he works in the food department, and when they asked for something about clothes, they're told at Walmart to go walk over to clothes and help them even though they don't know a thing about clothes. It's customer service. VA is the same way. They're in the facility for a reason. They don't feel well most likely, or they're doing prevention so that they stay well. But for the most part, it's all surrounding health. Right off the bat, you're dealing with someone who doesn't feel well or about health and what they want to sustain that. That's an important job.

You were the one that makes or breaks that visit, or that encounter, or that relationship. My hat's off to you because you need to be sleuth in trying to figure out what is it they want that day, and somebody hit it on the nail when they said, "Today, I may want to use my smartphone, because it's convenient. I'm sitting in the lobby of the clinic. But tomorrow, I'm home at my desk and I want to use a desktop because it's easier to maneuver on the desktop to get around."

Today, this week actually, I just use video chat with my doctor and, boy, it was that easy. Why can't we make it that easy for every encounter that we have with the veteran? That's what our goal should be, is not that I have mobile or telehealth or My HealtheVet, it's what is the need that that veteran has at that moment that you're faced with them, and you're doing it. You're doing an exceptional job, and that's why My HealtheVet is still popular, why it's used. It's because of the people behind it. I can't thank you enough for everything that you're doing.



What I'm most impressed about is how you're interacting with each other. It's not an us versus them environment, and that's what can make or break it. I'm very impressed that you're open, you're sharing. You may not have done this before, just speaking in front of people, but you're giving a shot. I'm really proud of everyone who got on and talk and being able to answer the questions. Even if you can't answer questions, that's okay because the coordinators are behind you, whether you're in California, Florida, or in Maine. That's impressive. Across the United States, I would say the My HealtheVet team, the coordinators, are the most connected I've seen as a cohesive group. I'm very proud to be a part of your team. Thanks, and everyone have a wonderful Memorial weekend.

Micah Azzano: Thank you, Theresa, for your words of support and recognition. I want to go ahead and, again, thank all of our three presenters, Ron, Debbie, and Glen. On the screen right now, you will see a link to a short survey that gives us topics for the upcoming discussion series, as well as feedback to let us know how we're doing. We'll leave that up for just a few minutes after we end the presentation, just so you can provide feedback to those joining us today. We appreciate you participating. Again, thank you to all of our presenters. Please join us again next month when we'll be talking about sleep and revamp. With that, I hope everyone has a great rest of their day. Thanks, everyone.

Debbie Russell: Thank you.

Glen Massman: Thank you.