

MHV on VA.gov

Round 1 Usability Research Findings



U.S. Department
of Veterans Affairs

Background and goals

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Our project is part of the Digital Health Modernization strategy, which aims to create a centralized place for Participants to access their health information. As part of this effort, MyHealtheVet (MHV) will be replatformed to VA.gov.

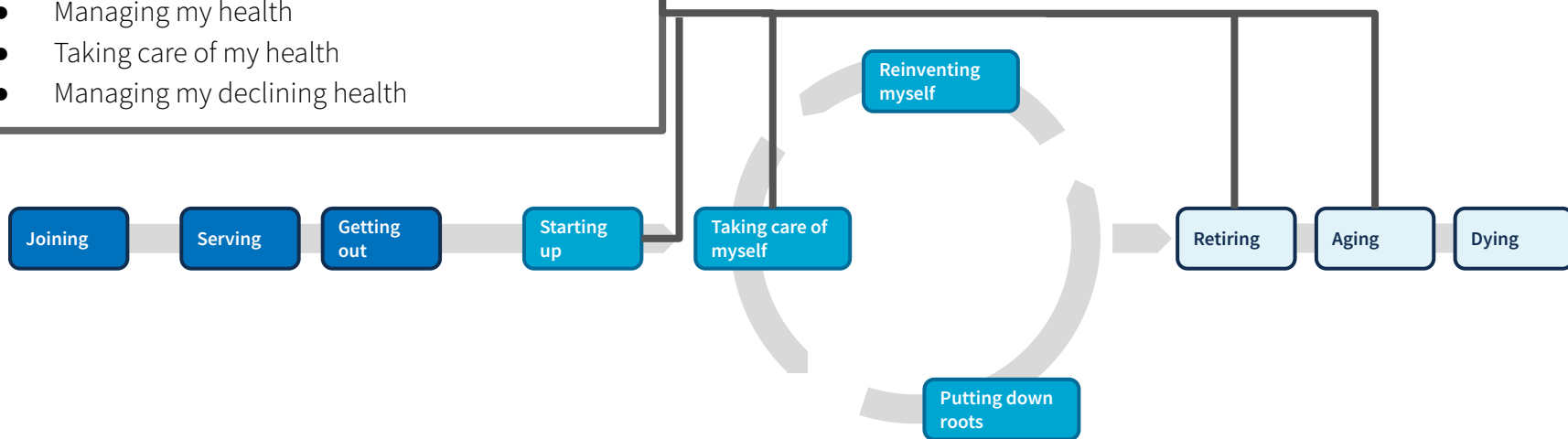
Goals:

- Determine if Participants understand the concept of MHV on VA.gov as a centralized place to access healthcare
- Identify major usability or content issues with our current concept of replatforming MHV on VA.gov

How this research maps to the Veteran journey

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- Attending to health needs
- Managing primary care and chronic health issues
- Seeking support for an acute health event
- Managing my health
- Taking care of my health
- Managing my declining health



For a fully detailed Veteran journey, go to

<https://github.com/departement-of-veterans-affairs/va.gov-team/blob/master/platform/design/va-product-journey-maps/Veteran%20Journey%20Map.pdf>

Serving and separation

Living civilian life

Retiring and aging

VA



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OCTO-DE goals that this research supports

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Supported

Not supported

Veterans and their families can apply for all benefits online

Veterans and their families can find a single, authoritative source of information

Veterans and their families trust the security, accuracy, and relevancy of VA.gov

Veterans can manage their health services online

VFS teams can build and deploy high-quality products for Veterans on the Platform

Logged-in users have a personalized experience, with relevant and time-saving features

Logged-in users can update their personal information easily and instantly

Logged-in users can easily track applications, claims, or appeals online

Measures to increase

Completion rate of online transactions

Percent of applications submitted online (vs. paper)

Veteran satisfaction with VA.gov Benefit use and enrollment, across all business lines

Benefit value (in \$) delivered from online applications or transactions

Number of VA.gov users as a function of total Veteran population

Usage of digital, self-service tools

Measures to decrease

Time to successful complete and submit online transactions

Time to process online applications (vs. paper)

Call center volume, wait time, and time to resolution

Time from online benefit discovery to benefit delivery

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Participant Demographics

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All participants (except pilot session) had some degree of cognitive disability

Findings may not include the range of perspectives of the following underserved Veteran groups:

- Are above the age of 55
- Have other than honorable discharge
- Are of immigrant origin
- Identify as a woman
- Identify as Latinx, Asian, or LGBTQ+
- Use assistive technology

We recommend studies with these underserved groups in the future.

[Participant Tracker on Google Sheets](#)

MHV on VA.gov Round 1 Usability																				
final # of participants		11	# of AT users 6							# of no shows 05										
Category	%	Target	Study	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Veterans																				
Based on current VA statistics																				
Age 55-64+	50.00%	6	3	0	0	0	0	0	N	0	0	1	0	0	0	0	1	1	0	0
Cognitive Disability	50.00%	6	10	N	1	1	N	N	1	1	1	1	1	N	1	1	1	N	0	0
Mobile user	50.00%	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rural	25.00%	3	6	0	1	0	0	0	1	0	0	0	1	N	1	1	1	0	0	0
No degree	25.00%	3	2	N	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
Other than honorable	21.00%	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Immigrant origin	17.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Women	10.00%	2	1	N	0	0	0	0	0	0	0	0	1	0	0	0	0	N	0	0
Expat (living abroad)	0.40%	1	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Race																				
Based on VA's projected statistics																				
Black	15.00%	2	6	0	1	1	1	0	1	0	1	0	1	0	0	0	0	0	0	0
Hispanic	12.00%	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Biracial	3.00%	1	2	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0
Asian	3.00%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Native	0.30%	1	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
LGBTQ+																				
LGBTQ+ Veterans are 5 times as likely to have PTSD																				
Gay, lesbian, or bisexual	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Transgender	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nonbinary, gender fluid, ge	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Assistive Tech (AT)																				
Ask an a11y specialist to help you complete this. Targets are for a general AT study.																				
Beginner AT User	50.00%	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Experienced AT User	50.00%	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Desktop Screen Reader (SF	20.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mobile Screen Reader (SR)	20.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Magnification/Zoom	20.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Speech Input Tech (Siri, Dr	20.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hearing Aids	20.00%	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sighted Keyboard	10.00%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Captions	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Switch Device	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Braille Reader	--%	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0



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Key findings

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1. Users were confused about the navigation breadcrumbs, and where this prototype would live within the IA of VA.gov.
2. Most users (6/11) were unsuccessful in finding the “Search messages” link in the Messages tool.
3. The Pharmacy tool performed well, but additional iteration on language could improve understandability.
4. Users expected the various healthcare tools to link to each other.
5. Almost all users (10/11) noticed and had positive comments about seeing their disability ratings information alongside their health information.

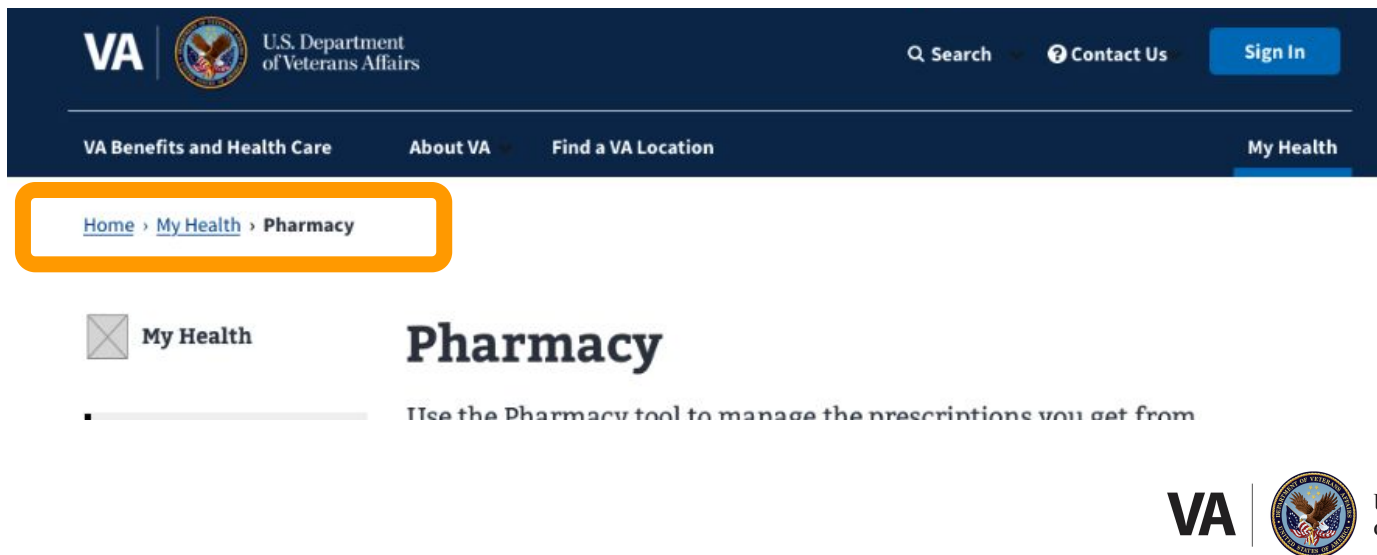


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Key findings + screenshots

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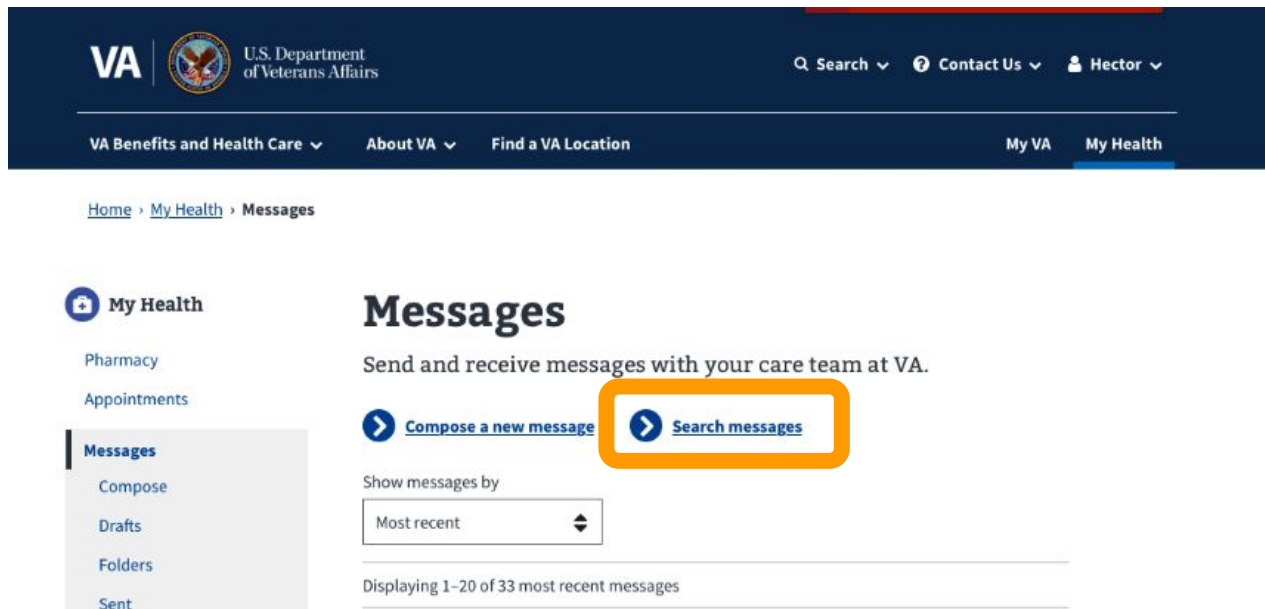
Users were confused about the navigation breadcrumbs, and where this prototype would live within the IA of VA.gov. 7/11 thought understood where My Health would take you, but Home was confusing to most participants



Key findings + screenshots

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Most users (6/11) were unsuccessful in finding the “Search messages” link in the Messages tool.



Key findings + screenshots

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The Pharmacy tool performed well, but additional iteration on language could improve understandability.

 Expiring soon

[Alprazolam 0.5mg](#)
Prescription # 14004705

Delivered January 1, 2022


[Amlodipine Besylate 10mg](#)
Prescription # 101434278

 In progress

[Sildenafil 50mg](#)
Prescription # 11337692

→ In transit

[Simvastatin 80mg](#)
Prescription # 11337692

 Renew soon

[Tamoxifen Citrate 20mg](#)
Prescription # 14344102

Pharmacy

Use the Pharmacy tool to manage the prescriptions you get from VA by mail.

Which prescriptions can I manage online?

Types of prescriptions you can't view or manage here

VA



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Key findings + screenshots

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Users expected the various healthcare tools to link to each other.

Renew soon
Tamoxifen Citrate 10mg
Prescription # 14344102

Take one tablet by mouth as soon as possible.

[Contact your doctor to renew this prescription](#)

[Home](#) > [My Health](#) > **Messages**

My Health

- Pharmacy
- Appointments
- Messages**
 - Compose
 - Drafts
 - Folders

November

Wednesday, November 25
10:00 a.m. ET
Pittsburgh VA Medical Center

[Details](#) >

Messages

Send and receive messages with your care team at VA.

[Compose a new message](#) [Search messages](#)

Show messages by
Most recent

VA



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Recommendations

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1. Iterate on the breadcrumb design by changing “Home” text to “VA.gov Home” for upcoming mobile testing study
2. Iterate on the design of the search messages functionality to make it more obvious to Participants
3. Assess feasibility and iterate on prescription status details for the Pharmacy Tool
4. Iterate on explanatory text of the Pharmacy Tool to clarify that this is mail only prescriptions
5. Explore technical and UX options for including linking functionality across the MHV tools as they move to VA.gov