

Guerrilla testing of homepage concepts for the “health apartment”

December 2021

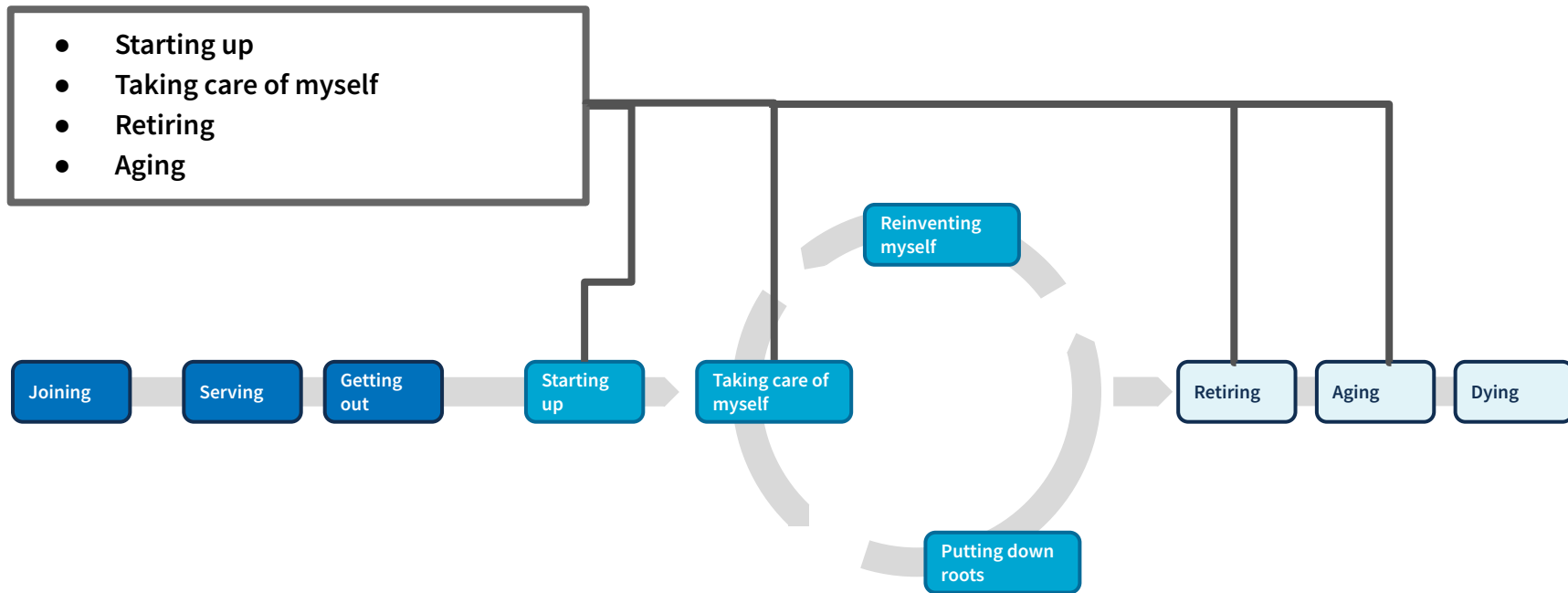
VA



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How this research maps to the Veteran journey

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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

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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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We're testing our homepage concepts for the "Health Apartment"

What we were looking for:

- How Veterans currently manage their health care
- First impressions of the homepage concept
- What actions would Veterans expect to take in each of the "Big Four" boxes – Appointments, Messages, Pharmacy, Medical Records
- What information would they expect in each section
- Are the links in each section clear

Resources:

- [Research Plan](#)
- [Conversation Guide](#)
- [Research Report](#)



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Demographics: Who we talked to

Tested with 6 participants

- 4 male; 2 female
- 1 over the age of 55

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

- Don't have a degree
- Identify as Latinx, Biracial, Native
- Use of assistive technology (AT)

We recommend studies with these underserved groups in the future

Methodology:

Observational usability testing

Duration

- 30-45 minutes

One concept for mobile, one for desktop

- 3 participants were shown mobile
- 3 participants were shown desktop

Tools

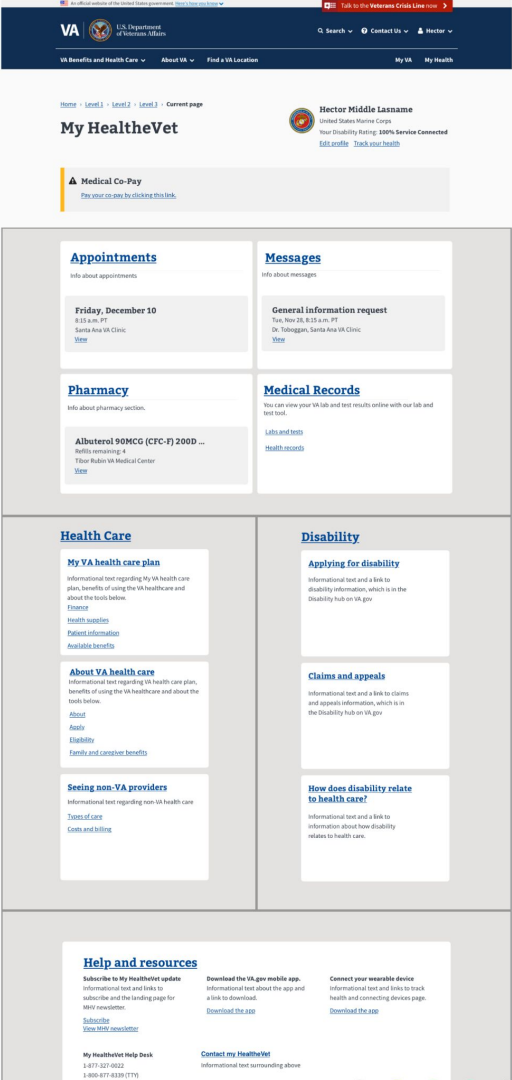
- Zoom
- Mural



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Tested Concepts

- [Mural link](#)



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Quotes of Note - Appointments

"I think the ability to cancel or modify appointment from here might be helpful as well. If you're putting this upfront and center, then maybe adding the ability to cancel or modify here, to save a step, might be helpful."

"I live an hour and a half from the nearest VA hospital, so sometimes they send me to (another hospital) that's 45 minutes away, so I need to see there where exactly I'm being sent."



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Quotes of Note - Messaging

"I'd expect to see a message about my next appointment, or 'make sure to start my fasting for labs.' As a patient, I would probably message the nurse on call or the medical assistant that works with the physician."

"Messages that I've sent have usually been a question to the provider. Do you want me to make an appointment? Do you want me to go to the acute care through the VA benefits? Are you going to give me a course of action? I've found it very helpful."



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Quotes of Note - Non-VA Providers and Disability

"I would like to see who the providers are in my area, what the copay is, and what I'm eligible for. Like the name, address, and what my coverage would be."

"How does disability relate to healthcare? That question is a little bit... what does that mean? With my disability, how that relates to my healthcare or what's covered? That's a little, not very intuitive of what that means."

Key findings

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1. All participants wanted more specific actions in the “Big Four” cards
2. Most (4) participants expected some form of personalization
3. All participants gave a different answer for what they expected in “Messages”
4. Most (4) participants wanted more resources and definition in the “Non-VA Provider” section
5. All participants were confused about the purpose of the disability section

Secondary findings

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1. The term “Health Supplies” continues to be a tricky one, as there was no consensus on what the link should do.
2. The “Finance” link surfaced similar confusion.

Recommendations

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1. “Big Four” cards – Appointments, Messages, Medical Records, Pharmacy – should have task-specific action links.
 - a. Example: “Pharmacy” card should have a “refill” link.
2. Redesign “Health Care” and “Disability” sections so that tasks and actions are clear and separate from information links
3. Personalize “Health Care” and “Disability” content (to the individual Veteran)
4. Clarify “Health Supplies” - Find a better term and consider adding a descriptor (“Medical Supplies,” “Medical Care Supplies,” for example)
5. Clarify “Finance” - Find a better label (perhaps “copays and travel pay”) or add a descriptor



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Questions?

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