

What Shashank heard: Danielle

- Pilot phase: Is that question about the resources and support pilot. I can give you more information of that. Resources and support was created at an MVP product to house targeted content. A lot of people would get there through resources and support. You'd get that piece of content. Have a strong CTA to next action. The product itself has limitations. Lots of figure out with tagging. We don't know how it will work yet.
- One of the things we want to do is lighten the cognitive load on hub pages. We want to streamline the hub. The idea with R+S. We've only migrated the tip of the ice berg. WE are looking at how we use resources and support to start migrating more of this deeper content without blowing up the hubs. Keeping it targeted. Keeping it findable. As we grow that content. Is it tagging, is it hierarchy? One of our biggest questions now is how do we get people from a hub page to resources and support (and back again). If they come in through search, we can have a strong call to action. But if we're on a hub page, for example on eligibility. We want to take some of the deeper questions you might have. Do we lose people when we take them over there? Can they get back. The other side of resources and support. As we're migrating this content, we need to bring content authors with it. Can't just be our tiny little content team. We should not own the content for va.gov. We also need to govern it. Resources and support has not structure. It could become then wild west.
- Pilot
 - Testing out MVP governance. Creating a process. I can send you a link to that. How do I figure out if it even needs an article in resources and support.
 - How do we use it effectively as part of the ecosystem on [VA.gov](https://va.gov).
 - If a chat bot (way down the road) might need to pull r+s content.
- If we move some content around can do that without causing chaos?
- We know that a lot of Veterans use the homepage, or go back to home as way to reset.
- The overall learn structure. When does learn transition into manage.
 - I think that is a question we're also going to try and answer with this. This project could really help that. I think it depend on the person. WE see that in the research. Some people read all the content. I saw three bullets and I want to apply and I don't care about anything else. One of the things we are working on, on the content criteria.
 - We looked at where people were going in the navigation path. They really weren't going past. Going to main page, eligibility, apply. Disability rates is highest.
 - Reserach would help to determine how much of that is in the learn. Maybe I want to know my copay rates. You're also maybe coming back to that often once you're managing. Definitely see that in both area.s
 - With criteria, really looking at those patterns. Top high level about. General idea of what you're going to get with your healthcare. Am I eligible? Beyond healthcare, eligibility can go deep – such as disability.

- We're leaning towards R+S.
- My instinct, it's relatively light towards what I need to learn before I apply. Know that I have the benefit, what are the different services. I guess you'd put that more in the manage bucket, Right now we'd put that in R+S.

- I would say it's pretty light on the learn front.
- WE have those after you apply pages. We can give people links to all the deeper information.
- I think that we have. Our main goal is to figure out if learn and apply should be it's own thing. Here's my view of R+S. It's an MVP product. Using what we have to get to a better place. I see it evolving in all kinds of ways. Use it as a ways to target out content.
- If that means that targeted content should live in a health portal, or a disability portal. It'll be in these targeted pieces.
- I do think that the navigational path would be a good thing to understand. Do people get lost. Are people going to link over to the deeper information? Does it mess them up? Does it make sneezes?
- Or is there something in learn that could come from R+S.
- One of the things that we talked about. We could look at that data, and monitor that. What evidence do I need, for example. That content could also show on the eligibility page.
- Disability rating directly affects copay.

- I don't know we can break it down by task. Meds by mail with community care. Does VA have mail order prescriptions? Can I get my medicine through mail order is a personalized question?
- Co-pay rate. We could tell what their copay rate is. That's where would the learn would be different. You don't have a priority group yet.

- How much are people digging into disability ratings?
- I'm not always monitoring the reddit threads for veterans. I don't think my disability rating is accurate. That would be worth testing. Really good example of this. Recently put an article in resources and support. Really common question. Difference between disability compensation and pension. That's a simple question that's coming up a lot. That's the kind of thing that somebody might have that question before they apply for one or the other.
- What's the difference between ChampVA and Tricare?
- When you get into the tasks. We could eventually personalize content.
- As we figure out pathways, learn/apply/manage. I think this is something that's going to be interesting to look at. There's a difference in healthcare. Interaction is likely to be much more regular. Regular appointments and prescriptions. You might not be interaction with other hubs.
- With education, verify enrollment for that semester.
- Some of them are different. Burials and memorials have a different structure. It may not scale to all the hubs. I could see disability and education potentially having a similar. Housing is structured differently. One of the interesting things there to, is that some of those manage tasks are cross benefits. Check your

claim status (across a few benefits). This would give us information that would be very valuable in the hubs