



# Telephone Survey on Veteran Satisfaction with the Authorization process for the Virtual Electronic Health Data Exchange Service (VLER)

OMB 2900-0770  
Estimated burden: 15 minutes  
Expiration Date xx/xx/xxxx

**The Paperwork Reduction Act of 1995:** This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average fifteen (15) minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this telephone/mail survey will lead to improvements in the quality of service delivery by helping to achieve services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

## VLER Health Performance Evaluation

### Undecided Veteran Interview Guide, VLER Health Exchange

#### Introduction

Thank you for taking the time to speak with me today. My name is \_\_\_\_\_, and I am here with \_\_\_\_\_. We are part of a team that is assessing the impact of a new service at the Department of Veterans Affairs. I am contacting you because your local VA Medical Center is one of the locations where the new service is available.

I am interested in hearing about your experiences related to the new service offered by VA. The entire telephone interview should take about 10-15 minutes. All responses will be reported anonymously. You can choose to skip any question or stop at any time. Your responses will be used to improve the new service offered by VA.

Are you willing to participate in this telephone survey?

To ensure that my interview notes are complete and accurate, I'd like your consent to audio record our conversation. Only project team members will have access to the recording. We will destroy the recording at the end of the project. You may still participate in the interview if it is not recorded. Are you willing to be recorded?

*[Notetaker starts recorder]*

I'm going to ask again to get your responses on the recording. Are you willing to participate in this telephone survey? Are you willing to be recorded?

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#### QUESTIONS

- 1) Have you ever heard of the VA program that allows Veterans to electronically share certain parts of their health care record among the Department of Veterans Affairs (VA) and selected private healthcare providers? This program is called the Virtual Lifetime Electronic Record Health Exchange or VLER Health Exchange.
  - a. If YES, proceed to Q2.
  - b. If NO:
    - i. When was the last time you visited a VA health care facility?
    - ii. When was the last time you saw a VA clinician?
    - iii. Thank the Veteran for his/her time and end the interview. If the Veteran wants to sign up for VLER Health Exchange, refer them to eBenefits ([www.ebenefits.va.gov](http://www.ebenefits.va.gov); search for VLER) or call their local VAMC.

- 2) How did you learn about VLER Health Exchange?
- 3) In your own words, describe what VLER Health Exchange is intended to do for Veterans.
  - a. If the Veteran is not familiar with the term VLER Health Exchange or makes an incorrect statement, provide the following prompts as needed:
    - i. Shares certain parts of your medical record, not the entire record
    - ii. Between VA and <local private sector partner(s)>
    - iii. Different than My HealtheVet, which is the personal health record
- 4) Thinking back to when you first learned about VLER Health Exchange, what information was the most important to you?
- 5) If VA were to do more advertising about VLER Health Exchange, what is a good way to reach someone like you?
  - a. Mail
  - b. Email
  - c. Television
  - d. Radio
- 6) Do you feel that VLER Health Exchange is relevant to your health care needs?
- 7) Do you receive care from a non-VA health care provider?
- 8) Do your VA benefits cover only certain aspects of your medical care – for example, medications only?
- 9) If you wanted to participate in VLER Health, how confident are you that you know how to sign up?
- 10) Has anyone from the VA ever offered you an authorization form to participate in VLER Health Exchange?
- 11) Have you ever spoken with anyone else about participating in VLER Health Exchange?
  - a. Who did you talk to?
  - b. What did you discuss?
- 12) Do you have any unresolved concerns about participating in VLER Health Exchange? Please describe. What is your biggest hesitation
  - a. What would be necessary to resolve your concerns?
- 13) How frequently do you use a computer?
- 14) Are you aware of My HealtheVet, which is VA's online personal health record?

### Wrap-up

- 15) Is there anything else about VLER Health Exchange that you'd like to share with us before we end the call?

Thank you for your time and participation in this important survey. Your answers to our questions will help to improve VLER Health program service delivery.