



**STATE OF MAINE  
127th LEGISLATURE  
SECOND REGULAR SESSION**

**Commission to Strengthen and Align the Services  
Provided to Maine's Veterans**

**January 2016**

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## Executive Summary

The Commission to Strengthen and Align Services Provided to Maine’s Veterans as established by Resolve 2015, chapter 48, held five meetings during the fall and winter of 2015 and 2016. The commission was charged with identifying gaps in the provision of benefits and services to which veterans are entitled and making recommendations to improve access and delivery of those benefits and services. Recommendations made in this report are intended to support current, as well as future, improvements by providing necessary data to inform the implementation of future programs, establishing ways to bridge gaps in delivery of existing benefits and simply increasing awareness of the services and benefits that are available to Maine’s veterans. Rather than beginning this report with a list of the commission’s numerous findings and the identification of inadequacies in services and their delivery, this report presents recommendations at the outset. With this proposed blueprint of initiatives, the report identifies the problems, gaps and inadequacies which we believe they will help to resolve.

In large part, the commission’s recommendations will include:

1. Making enhancements to the state agency charged with the responsibility to assist those who have served: the Bureau of Veterans Services within the Department of Defense, Veterans and Emergency Management;
2. Improving administration of services to address homelessness among veterans in Maine through coordination and oversight;
3. Improving transportation for veterans to allow for better access to services and benefits; and
4. Supporting methods to ensure the success of veterans enrolled in postsecondary education, resulting in immediate and longer term benefits to veterans, their families and the communities in which they work and live.

The initiatives we recommend establish a foundation which will provide support for continued necessary improvements. We view our recommendations as reasonable to implement with manageable costs that are far outweighed by the benefits. Below is a chart summarizing the commission’s findings and recommendations made in sections III and IV of the report.

<b>RECOMMENDATIONS</b>	
<b>ESTABLISHING A FOUNDATION TO SUPPORT ONGOING IMPROVEMENTS</b>	
<b>A. Enhancements to the Bureau of Veterans Services</b>	
<b>Commission Finding</b>	<b>Corresponding Recommendation</b>
<b>1. Marketing and outreach</b>	
There are an estimated 140,000 veterans in Maine; less than half are enrolled with the U.S. Department of Veterans Affairs. The number of veterans who are unknown to the Bureau of Veterans Services (BVS) is too great.	<p>Make permanent and provide ongoing funding for existing outreach coordinator.</p> <p>Require specific, purpose-driven marketing and outreach duties within the bureau’s statutory charge.</p>

There is a lack of awareness of the BVS among Maine's veterans, which means that veterans in need are not getting the services they have earned.	Develop a statutory framework that requires the bureau to implement a purpose-driven marketing and outreach strategy.  Structure veteran service officer (VSO) positions within BVS so that they may attend events outside the hours of a standard work day and receive compensation for that time.
The need for outreach and marketing functions within the bureau will exceed the 24-month period for which BVS has been authorized to employ an outreach coordinator (contract position).	Establish the position of outreach coordinator as a permanent position within the bureau.
Family members and loved ones play a significant role in connecting veterans with services, because veterans can be reluctant to seek help due to shame, lack of trust and other issues.	Require the marketing and outreach functions of the bureau to target family members of veterans in addition to veterans.
<b>2. Case management system</b>	
BVS is crippled by the lack of a modern case management system. Efficiency and veteran customer service suffer without this tool. A case management system will also provide accurate tracking of veteran data and necessary marketing and outreach functions.	Provide funding for acquisition and implementation of a case management system for BVS.
<b>3. Data collection and statistics</b>	
Military retirees and members of the Maine National Guard who completed service but were never called to active duty are not tracked by either the BVS or the Department of Defense, Veterans and Emergency Management (DVEM).	Direct DVEM to track military retirees and members of the Maine National Guard who are not otherwise tracked as veterans.
<b>4. Veterans service officers</b>	
VSOs had approximately 41,000 active cases in 2015.  In October 2015, each VSO was handling an estimated 2,200 cases.	The number and location of VSOs should be evaluated and amended if an analysis of the veteran population and distribution call for a change of locations or an increase in the number of VSOs. The Legislature should consider establishing a ratio (one VSO/ number of veterans) to ensure that there are enough VSOs to provide adequate service to veterans.
BVS offices that are co-located with a VA community based outpatient clinic see highest number of visits from veterans and are subject to a reasonable rental fee.	Encourage continued partnership with VA to allow for co-location of BVS offices with community-based outpatient clinics.

<b>B. Veterans Service Organizations</b>	
The state provides \$129,000 annually to support two service officers at Togus, who are not under BVS supervision. The state has little information to determine if the funds are being used as intended. Service officers receiving these funds are tasked by the VA to assist with claims of out-of-state veterans under the VA's "it's the nation not the station" policy.	Service officers not under the supervision of BVS but who receive state dollars (casino revenue) should be assisting Maine veterans and be subject to reporting and accountability requirements.
The VA has no deadline for resolving appeals of denied claims. Appeals often drag out for months. If an appeal is successful, the claim award is not applied retroactively to when the veteran submitted the request to the VA.	Encourage proper training and provide appropriate oversight for service officers (not employed the bureau) who assist veterans in making claims with the VA.
<b>C. Transportation</b>	
Access to jobs, social services, medical appointments, mental health services and community activities are crucial to veterans because they have greater risk than the general population of experiencing unemployment, homelessness, PTSD and suicide.  Maine's aging veteran population, the number of post 9/11 veterans with traumatic brain injury and the insufficiency of VA and volunteer ride programs demonstrate the need for a state transportation policy that includes a veteran-specific component.	Develop long-term transportation policy using existing regional provider networks that includes veterans as targeted constituency in need of services.
Transportation services exist but are not accessible to some veterans due to minor administrative or policy hurdles.  Veterans eligible for MaineCare are prohibited from using MaineCare transportation services to deliver them to VA health care services.	Amend MaineCare rules to allow for enrollees to receive transportation to VA administered services.  Encourage change to the agreement between Disabled American Veterans Organization (van program) and the VA to allow for transportation to community based outpatient clinics, not just Togus.
<b>D. Veterans experiencing homelessness</b>	
Maine has been allocated 196 vouchers from the Housing and Urban Development Veterans	If receipt of a HUD VASH voucher is contingent upon completion of an intake

<p>Affairs Supportive Housing initiative (HUD VASH). Fifty-three of those vouchers are unassigned. One barrier to providing all available vouchers is failure of the VA to provide staff to conduct mandated intake processes which align veterans with supportive services required to be accessed to maintain the voucher.</p>	<p>process and administration of VA support services, the VA should ensure that staff and resources are available.</p>
<p>The Point-in-time (PIT) count administered by HUD and the VA is a required component of the HUD VASH voucher program. It is conducted annually in January by various agencies and providers but not with funding or resources from HUD or the VA. The PIT count is not the best method for providing an accurate picture of the problem of veteran homelessness.</p>	<p>The PIT count should be conducted more than once per year, including a warmer time of year when more veterans are likely on the streets. HUD and the VA should provide funding an resources for the mandated survey to ensure the count is conducted properly and reaches rural areas of Maine.</p> <p>BVS should be supported as a participant in the PIT count.</p>
<p>The federal government states that the problem of chronic veteran homelessness is eliminated when a state (or region) reaches “functional zero.” Functional zero means there is capacity to provide housing for the number of homeless veterans as determined by the PIT count.</p>	<p>Success at resolving chronic homelessness among veterans should be determined by actually placing veterans in stable housing, not just creating the capacity to do so.</p>
<p>Addressing homelessness among Maine veterans requires more than vouchers. Maine must work to facilitate communication among all providers and coordinate efforts to maximize available resources.</p> <p>Voucher programs do not solve the need for emergency housing for veterans within the criminal justice system who have the opportunity to go through Veterans Court programs. Release on bail is prohibited unless the veteran has a supervised address to which the veteran is released.</p>	<p>Create an interagency council to facilitate communication and coordination with regard to efforts aimed at eliminating homelessness among Maine veterans.</p> <p>Establish a position within the BVS to serve as staff to the council and promote the implementation of the council’s recommendations.</p>
<p><b>E. Postsecondary education and supporting successes achieved through the GI Bill</b></p>	
<p>Successful completion of postsecondary education is enhanced when institutions provide dedicated services to assist veterans with transition from military life and provide training to faculty, staff and student colleagues about veteran issues, military culture and the</p>	<p>Require each campus within the University of Maine System with a significant enrollment of veterans to provide transition assistance, orientation and coordination of resources based on the model employed at the University of Southern Maine.</p>



emotional cycle of deployment.	
Federal benefits align with postsecondary institution's academic class schedules too strictly imposing hardships on student veterans during school breaks and between semesters.	GI Bill benefits should not be withheld during short-term breaks at postsecondary educational institutions.
The VA demands reimbursement for overpayment of educational benefits made in error by the VA (at no fault of the veteran) while the veteran is a full-time student living on GI bill benefits.	The VA should be prohibited from collecting a debt from a student veteran incurred when the VA mistakenly made an overpayment while the veteran is still enrolled in postsecondary education program.

**RECOMMENDATIONS  
BUILDING ON THE FOUNDATION**

**A. Improving access to mental health treatment**

<b>Commission Finding</b>	<b>Corresponding Recommendation</b>
<p>35-40% of Maine's veterans are seeking mental health services through the VA. There are long waiting lists for these services.</p> <p>The VA does not operate a comprehensive inpatient treatment facility in Maine. The closest facility is in western Massachusetts (North Hampton).</p> <p>When a veteran is willing to seek out mental health care services it is often at a time of crisis. The need to access those services quickly is critical and failure to do so leads to tragic consequences.</p> <p>The number of mental health care providers available to veterans enrolled with the VA is in jeopardy because of low reimbursement rates and untimeliness of payment from VA contracted entity.</p>	<p>The commission did not have time to make specific recommendations to address the findings which demonstrate there is a need to increase access to mental health care services.</p>

**B. Veterans court and pretrial services**

<p>There is a lack of inpatient treatment for both long-term and short-term mental health and substance abuse treatment in Maine. This leads to a significant disconnect between veterans and the supports the Co-occurring Disorder and Veterans Court (CODVC) has to offer.</p>	<p>The commission applauds the success of the Veterans Court program and recognizes the value of the contribution of volunteers like those from Veteran Mentors of Maine. Although the commission did not have adequate time to make specific recommendations to support the work of the</p>
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There is only one Veterans Justice Outreach worker in the state responsible for the referral of services to all veteran clients and the connection to services for all justice-involved veterans in the state.

There is no program to provide home support or daily living skills staff in the veteran community. The VA reports having these services available but the COVDC has not been able to access them for veterans in need of those services. Because they claim to provide them, the VA will not reimburse community program providers who are able to deliver those services.

Peer mentorship programs require support and expansion.

Access to same-day emergency services such as housing, transportation and funding for basic necessities is lacking. Veterans often have to wait days, weeks and even months for such assistance.

court and the programs associated with it, we hope that this report creates a greater awareness and fosters continued discussion.

## I. INTRODUCTION

The Commission to Strengthen and Align the Services Provided to Maine's Veterans was established by Resolve 2015, chapter 48 (Appendix A). Pursuant to the resolve, the commission consisted of 11 members:

- Two members of the Maine Senate, who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs (VLA Committee), were appointed by the President of the Senate;
- Three members of the Maine House of Representatives, who are either veterans of military service or members of the VLA Committee, were appointed by the Speaker of the House;
- The Commissioner of Defense, Veterans and Emergency Management or the commissioner's designee also served on the commission. The Director of the Bureau of Veterans' Services served as the commissioner's designee;
- Three members representing both genders, including a member who is 30 years of age or younger and a member who is 65 years of age or older, with experience in developing, implementing or advising on veterans' affairs policy; representing a veterans' service organization; or providing services to veterans as part of a nonprofit organization were appointed by the President of the Senate; and
- Two members, including a member who is between 30 and 40 years of age or younger and a member who is between 40 and 64 years of age, with experience in developing, implementing or advising on veterans' affairs policy or providing services to veterans as part of a nonprofit organization.

A list of commission members can be found in Appendix B.

The duties of the commission are set forth in Resolve 2015, chapter 48 (Appendix A) and are as follows:

- Review the services provided by the State to veterans for the purpose of identifying gaps, duplications and inefficiencies;
- Consider methods and strategies for improving the State's engagement and communication with veterans of the conflicts in Afghanistan and Iraq;
- Identify gaps and insufficiencies in the provision of health care and mental health care services to veterans through both state and federal programs and consider ways in which the State can improve health care and mental health care services for veterans where insufficiencies or gaps in federal resources or state services exist;
- Study how to better align community, state and federal services and resources for veterans who are facing the problem of homelessness;
- Study how the State can develop and implement a campaign and marketing strategy to better communicate with veterans and military retirees regarding attending colleges in the State and to better attract veterans and military retirees to live and work in the State;
- Study how the State can encourage partnerships with businesses, industry groups and nonprofit organizations to improve veterans' employment, career and volunteer opportunities;

- Make recommendations to the Commission of Defense, Veterans and Emergency Management concerning practices or rules regarding services and programs for veterans;
- Work with the Commissioner of Defense, Veterans and Emergency Management to develop a multiyear plan that identifies priorities and suggests initiatives to strengthen and align services provided to veterans in the State;
- Make recommendations to the VLA Committee concerning changes to services and programs for veterans; and
- Study other critical veterans' issues that arise as agreed upon by the commission.

The commission was directed to submit a report, with findings and recommendations, including suggested legislation, to the VLA Committee in January of 2016. The VLA Committee may report out legislation to the Second Regular Session of the 127<sup>th</sup> Legislature based upon the report.

## II. COMMISSION PROCESS

The commission held five meetings on the following dates: October 7, October 28, November 4 and December 2, 2015 and January 11, 2016. All meetings were open to the public and were broadcast by audio transmission over the internet. One member of the commission, former Maine Adjutant General Bill Libby, participated in the meetings by telephone. Agendas of commission meetings and other information relating to the commission can be found online at:

<http://legislature.maine.gov/legis/opla/veteransservices.htm>.

At the first meeting on October 7, 2015, commission staff reviewed the legislation, Resolve 2015, chapter 48, including the duties of the commission. The meeting also included the following.

- Adria Horn, Director of the Maine Bureau of Veterans' Services (BVS) and a member of the Commission, provided an overview of the Bureau, including veteran statistics and the Bureau's mission and future goals.
- Julie Rabinowitz, Director of Communications with the Maine Department of Labor (MDOL), provided an overview of services provided by MDOL's CareerCenter, including Maine's Hire-A-Vet Campaign.
- James Doherty from the Veterans Health Administration (VHA) spoke about the Veterans Administration's (VA's) mission and efforts to provide health care to Maine's veterans.
- Philip Black from the Veterans Benefits Administration (VBA) presented information about the VA's mission and efforts to assist veterans in accessing benefits, such as, disability, education and employment.

The second meeting of the commission took place on October 28, 2015. The meeting included the following.

- Commission staff explained to commission members the procedure for developing findings and recommendations for the final report and facilitated a work session on potential findings and recommendations.
- Chaplain (Colonel) Andrew Gibson, who is a Senior Army Chaplain at the Army National Guard and a founding member of the Maine Military and Community Network, provided an overview of MMCN.
- Lorraine Spaulding, Coordinator of Veterans services at the University of Southern Maine's (USM's) Veterans Resource Center, provided information about the center and its mission which is to help veterans transition from military service to successful completion of a college degree. USM Student Oren Palmer, an active duty U.S. Air Force service member and president of a veteran student organization at USM, also participated in the presentation.
- Jerry Dewitt and Tom Morrison of Tri-County Mental Health Services (TCMHS) presented information about their organization, which provides mental health services to veterans in their community.

The third meeting of the commission took place on November 4, 2015. The meeting included the following.

- Commission member Alley Smith, who is a Universal Services Advocate at Veterans, Inc., along with her colleagues, Ray Michaud and Mike Hein provided an overview of the organization, which is the largest provider of services for veterans and their families across New England.
- Commission staff facilitated a work session on potential findings and recommendations.
- Amedeo "Deo" Lauria, Department of Maine Service Officer, with the American Legion and James Bachelder with Maine VFW spoke about their experiences working on behalf of veterans' services organizations.

The fourth meeting of the commission took place on December 2, 2015. The meeting included the following.

- Craig Zurhorst, community relations director, and Sandy Buchanan, general manager, with Western Maine Transportation Services (WMTS) spoke about their organization, which is a nonprofit public transportation corporation serving Androscoggin, Franklin and Oxford Counties.
- Commission staff presented a "Report Development worksheet" and facilitated another work session.

The commission was budgeted to hold four meetings; however, the chairs of the commission requested permission from the Presiding Officers to hold a fifth meeting and permission was granted.

The fifth and final meeting of the commission was held on January 11, 2016. The meeting included the following.

- Peter Merrill, Deputy Director of Maine State Housing Authority (MSHA), spoke about programs administered by the Authority that are targeted to assist veterans and MSHA's role in addressing veteran homelessness.
- Attorneys Joe Hahn, Jack Richards and Norman "Ziggy" Lawrence spoke about their efforts as members and officers of the recently incorporated non-profit, Veteran Mentors of Maine, which provides services to veterans enrolled (or seeking enrollment) in the Maine Veterans Court. They also presented written comments on behalf of T. Jay Wheeler, a case manager who provides pre-trial services to veterans enrolled in the Veterans Court.
- Commission staff presented a draft report representing the commission's work and recommendations as of the fourth meeting.

Throughout the course of the commission's work, members reviewed a worksheet that listed what members had identified as potential findings and recommendations to date and served as a framework for discussion in developing this report. This report represents the commission's work and the following recommendations have the support of each member.

### **III. RECOMMENDATIONS ESTABLISHING A FOUNDATION TO SUPPORT ONGOING IMPROVEMENTS**

In the process of listening to presentations and discussing the diverse and numerous issues related to strengthening and aligning services provided to Maine's veterans, the commission recognized that a comprehensive set of recommendations to address all needs and bridge all gaps would be too great a task in the time allotted. Time is not the only barrier, however. Many of the needs and gaps the commission identified deal with benefits administered by the federal government, over which the Maine Legislature has no jurisdiction. As a result, the commission decided to focus on recommendations that are feasible and upon which ongoing improvements to veterans' services may be realized. The commission believes that some of the recommendations made by this report could ultimately have an impact on access to and delivery of benefits administered by the United States Department of Veterans Affairs (VA).

Like the foundation to a house under construction, these recommendations will support continued improvements by providing necessary data; informing the implementation of future programs, establishing ways to bridge gaps in delivery of existing benefits; and simply increasing awareness of the services and benefits that are available to Maine's veterans. Rather than beginning this report with a list of the commission's numerous findings, including the identification of inadequacies in services and their delivery, the report begins with the commission's recommendations. With this proposed blueprint of initiatives, the report identifies the problems, gaps and inadequacies which we believe the initiatives will help to resolve.

The foundation, in large part, will include enhancements to the state agency charged with providing assistance to those who have served: the Bureau of Veterans Services within the Department of Defense, Veterans and Emergency Management. Another key element is improved administration of services to address homelessness among veterans in Maine through coordination and oversight. The lack of adequate transportation was identified as a barrier to accessing numerous and varied services and benefits by veterans. Increasing access to

transportation is a recommendation that will have wide ranging positive impacts. Providing additional strength to the foundation, are recommendations to support and ensure the success of veterans enrolled in postsecondary education, resulting in immediate and longer term benefits to veterans, their families and the communities in which they work and live. The initiatives we recommend to construct the foundation are reasonable with manageable costs that are far outweighed by the benefits.

#### **A. Enhancements to the Bureau of Veterans Services**

Established in 1947, the mission of the Bureau of Veterans Services (BVS) is to serve as the primary public advocate for Maine veterans. Utilizing its modest staff of service officers and seven regional bureau service offices, BVS works to assist veterans in obtaining state and federal benefits. This often means a BVS veteran service officer (VSO) is granted power of attorney to deal directly with the VA in securing pensions and health benefits to which the veteran is entitled. This representation of veterans with the VA is provided at no cost to a veteran. Currently, bureau VSOs handle about 41,000 cases. BVS also serves as a repository for DD-214 forms. These forms are a seminal record for a veteran. Received upon discharge, these forms include information about a veteran which is required as official documentation to prove eligibility for nearly all veterans' services and benefits. These forms are received at BVS when Maine is listed as the home state of record upon discharge. DD-214 forms are also placed on record when a veteran seeks to enroll in services through the VA at the Maine VA Medical Center, more commonly known as Togus. In addition to this crucial task, the bureau also operates the Maine Veterans' Memorial Cemetery System (four locations) and works to officially recognize the service and sacrifices of Maine veterans. The bureau also either directly provides, or assists with, the administration of a variety of services for Maine's veterans, such as dependent educational benefits, recreational licenses, state park passes, tax exemptions, and specialty license plates.

Considering the population of veterans in Maine, BVS accomplishes a great deal with a relatively small team of VSOs and staff. While we commend them for the difficult and highly-skilled work that they do, it is important to recognize that this is the only agency in the state dedicated to veterans' services. Thus, the commission supports the following purpose-driven changes and targeted enhancements regarding the bureau.

**1. Marketing and outreach:** BVS recognizes the need for marketing and outreach to be part of the core functions of the bureau. In fact, this session, the bureau requested and the Legislature approved funding for a two-year contracted outreach coordinator position within the bureau. We recommend going further, by establishing this as a permanent position within the bureau. The outreach and marketing needs identified by this commission and BVS, go far beyond the next 24 months. Along with this position, we recommend creating a defined, statutory framework outlining the objectives of marketing and outreach functions and the specific duties required to achieve them.

**Establish the position of outreach coordinator as a permanent full-time position within the Bureau of Veterans Services.**

**Establish a statutory framework of duties requiring the Bureau of Veterans Services to conduct purpose-driven marketing and outreach functions.**

The objectives of marketing and outreach functions should be as follows.

- **Identify veterans in the state.** In federal fiscal year 2015, it was estimated that approximately 140,000 veterans reside in Maine. Of those, it is estimated that 76,500 are NOT enrolled with the VA. This means these veterans are not receiving federal health benefits and pensions to which they are entitled. If not enrolled in the VA, it's likely that BVS does not have a DD-214 for that veteran. Thus, there is no way for the state to reach this veteran to ensure the veteran is receiving services dedicated to that veteran and that the veteran is being honored for the veteran's sacrifices. Even when the bureau has received a DD-214 because the service member listed Maine as home state of record, 60% of the "welcome home" letters mailed by BVS are returned because they do not reach the veteran.
- **Increase awareness of the Bureau of Veterans Services and establish it as a single point of entry for Maine veterans, family members, veterans groups and veteran stakeholders seeking services and information.** In her presentation to the commission, BVS director Adria Horn reported that too often when encountering veterans at events she hears, "I didn't know you existed." BVS does not provide for every service need, but it can serve as an access point for BVS administered services and those provided by other state agencies and non-governmental organizations, according to Director Horn. The bureau's web page should serve as a portal, linking veterans to legitimate providers and important, trustworthy information.

Upon separation from the military, veterans go through a Transition Assistance Program (TAPS) where they are provided with an overwhelming amount of information intended to connect them to available services as they work to assimilate back into civilian life. This is often done in a single day and is facilitated via countless brochures and informational flyers. It is a lot to take in for a veteran who may be laser-focused on simply returning home to family. BVS can connect the veteran with the services and benefits listed in those brochures, but if the veteran doesn't know BVS exists, receipt of the necessary services may never happen.

A point that will be repeated in this report is that, while the number and quality of many programs and services appears to be adequate, the onus is often on the veteran to know what he or she is entitled to and where to find them. Even just a few dead-ends or transferred calls can be discouraging enough for veterans to give up and go without benefits that they have earned and deserve. We learned that this is especially the case with veterans struggling to transition from military life to civilian life with family and work. Rather than conducting an internet search, aimlessly navigating pages of sometimes less-than-trustworthy links to services, benefits, assistance or providers, a veteran should be able to rely on and easily access a reputable source of information. We believe that the Bureau of Veterans Services should be the central source of information upon which Maine's veterans can rely.



- **Utilize media and technology to encourage veterans to self-identify, inform them about available services, and communicate to family members and loved ones.** Even with a well-designed Bureau of Veterans Services webpage, some veterans simply do not seek assistance. The commission strongly supports ensuring that our Maine citizens who courageously served in the military are provided all of the services and benefits they have earned. Achieving that means we cannot rely just on a veteran to find or seek out programs administered by the state, the federal government or other service providers. We believe it is the state's duty to reach out to them. In particular, it is critical that veterans know that there is no weakness in seeking assistance and that they can trust that the state has their best interests in mind. It is especially important that this message be conveyed to and heard by veterans in crisis. Based on the thoughtful and often emotional presentations this commission heard from providers and veterans themselves, communicating directly to a veteran's family members and loved ones is viewed as the most effective way to link veterans with services if they are ashamed that they need help, or simply reluctant to seek it.

Changing the mindset of veterans who have lost trust in a system that is designed to care for them is a challenging task, particularly recognizing that there have been well-publicized reports of those systems letting them down. Communicating that there is no shame in seeking help, especially pertaining to mental health, will be equally challenging and needs to be handled in a sensitive manner. Thus, this commission supports the implementation and funding of a marketing strategy to be executed by the Bureau of Veterans Services. This component of their mission to serve veterans should employ broadcast (radio/television), social media, live events and other efforts the bureau thinks will achieve the stated purposes. Additionally, the presence of BVS veterans' service officers at functions held by other veterans groups and service providers should be part of the overall marketing strategy. Events like these are often held during non-business hours and will necessitate covering the costs of travel expenses and additional VSO work hours.

This commission has heard that the VA is required to and should be engaging in the sorts of marketing efforts we support, but that does not appear to be happening. At least it is not happening in a way that is successfully reaching veterans and their loved ones in Maine. This report does not recite every instance the commission heard that the VA is not meeting its obligations, as there is little that can be done at the state-level to change that. However, when there are repeated failures or consistent inadequacies at the federal level, we believe the state has a duty to step in where it can, rather than sit back and just point out that it is someone else's legal responsibility. Unfortunately, this sentiment will be repeated in other areas of this report.

As stated previously, in addition to making the two-year contracted position of outreach coordinator within the bureau permanent, we recommend statutory changes to the duties of the Bureau of Veterans Services to require clearly defined marketing and outreach responsibilities. These improvements will mean additional funding needs for the bureau, which are yet to be

determined. Furthermore, the statutory changes should include requiring the bureau to establish benchmarks upon which the success of marketing and outreach efforts can be assessed and reporting regularly to the committee of the Legislature having jurisdiction over veteran services.

**Direct the Bureau of Veterans Services to establish benchmarks upon which the impacts of the implementation of a purpose-driven marketing and outreach strategy can be measured.**

2. **Case management system:** Enhancing the function of the Bureau of Veterans Services must include the acquisition and implementation of a modern, electronic case management system. Many on the commission were surprised to learn how the current paper-heavy system works. Simply stated, the current system is inefficient, makes very poor use of VSOs valuable time and provides less than ideal customer service to a veteran. The use of a case management system will provide holistic and seamless services to veterans and allow the bureau to track administered services, past and ongoing requests for services and to maintain a record of communication with that veteran (and family members). In response to questions from commission members, Director of the Bureau of Veterans Services, Adria Horn stated that the lack of a case management system is crippling the agency and the use of such a system is critical to the bureau's mission. The efficiencies to be realized and the benefits to using a case management system are many. VSOs, who cover broad geographic territories, will be able to resolve cases more quickly with access to this system. Information which would normally be acquired by driving to the office or waiting for forms in the mail, would instead be at a VSO's fingertips with access to this important tool. They will be able to spend more time in their assigned regions assisting with claims rather than travelling back and forth to the office to process paper claim forms. The system will also include a wealth of information that can be analyzed to inform how the bureau can prioritize and refine the services it provides. The data will show which services are sought most, which are being successfully provided and which are not.

The commission learned from Director Horn, that systems are available that would meet the needs of the bureau. She reviewed off-the-shelf platforms and state-designed systems through InforMe. The initial cost of acquiring a system is \$60,000 for the first year. After that, ongoing costs are expected to be \$30,000 annually. The commission supports the acquisition and implementation of a case management system that would serve the functions described above. A system that is compatible with the system used at the federal level would be ideal. We believe the benefits of this system are well worth, and likely exceed, the costs of this critical tool.

**Provide funding which requires the Bureau of Veterans Services to acquire and implement an electronic case management system.**

3. **Data collection and statistics:** As noted earlier, BVS is the only state agency dedicated to veterans' service. There are many local, community-based service providers and of course, the VA who also dedicates its efforts to veterans. Because of the numerous and disparate variety of providers, the data and statistics they accumulate and provide can be inconsistent. Demographic information and other statistics are the basis on which resources are allocated, grants are awarded and service priorities are established.

Outreach and marketing efforts recommended in this report, coupled with the implementation of a case management system by BVS will generate better statistics and help provide more accurate and consistent data. In the future, when these functions are producing the intended results, we believe that BVS will be the agency of record with regard to state veteran data. This will also necessitate coordination between and require reporting from other agencies and service providers.

Most of the data presented to the commission dealt specifically with veterans and did not include military retirees in the state or members of the Maine National Guard who have successfully completed service but do not meet the definition of veteran. The commission believes that the bureau should be charged with establishing methods to count and maintain contact with this important population.

**4. Veterans Service Officers:** The bureau currently has a staff of seven veterans' service officers (VSO) who currently handle approximately 41,000 cases assisting veterans. Based on October 2015 figures, there were about 2,200 active cases for each VSO within the bureau. The bureau operates eight regional offices (plus the main office) spread out geographically across the state (see chart following). VSOs work with veterans seeking assistance through state, local and other available programs. Primarily though, they work with veterans to process claims with the Veterans Administration seeking pension benefits, assignment of a disability rating to qualify for compensation or other VA benefits and enrollment in the VA health benefits system. To work on the veteran's behalf with the VA, a VSO is often granted a limited power of attorney. Although the commission believes that the implementation of a case management system will greatly improve the efficiency with which VSOs can do their jobs, we recommend that the bureau consider the geographic location and overall number of VSOs working in the state. That consideration should include an examination of up-to-date demographic data and geographic needs rather than using the current number of VSOs and existing locations as a benchmark. We suggest looking at the statewide need as if the bureau were starting from scratch. Where would we locate offices and how many VSOs are required to provide timely, quality service? According to a member of the commission, the state of Massachusetts has established a ratio of one VSO per 12,000 veterans. If Maine were to adopt a similar ratio, the number of VSOs would necessitate an increase from seven VSOs to 12.

According to Director Horn, the BVS offices which receive the greatest traffic of veterans are those which are co-located with another office that provides services to veterans, particularly the office in Bangor. The Bangor office is located at the site of a VA community based outpatient clinic (CBOC). The VA has worked with the bureau to provide space at the CBOC at a reasonable rent, according to Director Horn who reports that the arrangement has worked well. Other service office locations are not as ideal. The office in Caribou is located on the grounds of the Veterans Cemetery, which has obvious downsides from a perception and customer service standpoint. The Portland regional service office is located within the new state office building near the Portland Jetport. While we understand that the facility provides new and well-appointed space, the commission does not necessarily view it as the best location to serve veterans in an urban location with a substantive concentration of veterans in its population. Also, the commission learned that agencies with offices in that building pay rent for the space

out of their general operating budgets and that rent is expensive. Unfortunately, there is no guarantee that the arrangement that allows for sharing space with or near a VA CBOC will continue. The commission recommends encouraging the VA, through Maine's Congressional delegation, to make this option available at all CBOCs.

**The number and distribution of regional veterans service offices should be aligned based on determined need and co-location of the offices with other agencies that provide services to veterans (like VA community based outpatient clinics) should be established wherever possible.**

Following is a list of the Bureau of Veterans' Services offices and the staff positioned at those locations. In addition to these locations, the bureau also holds office hours at itinerant locations on a regular basis.

Bureau Office – Location	Staff
<b>Caribou</b> – Northern Maine Veterans' Cemetery	VSO VSA
<b>Bangor</b> – Veterans Administration Community Based Outpatient Clinic	VSO VSA
<b>Machias</b> – Machias Town Office	VSO* VSA
<b>Waterville</b> – National Guard Armory	VSO VSA
<b>Augusta</b> – Camp Keyes Main Office	Director Office Manager Office Assistant RVCP (Rural Veterans Coordination Pilot) Peer Support Manager Veterans Outreach Specialist (contract)
<b>Lewiston</b> – Lewiston VetCenter	VSO VSA
<b>Portland</b> – State Office Building (at Jetport with DHHS)	VSO VSA RVCP Peer Support Coordinator
<b>Springvale</b> – Sanford VetCenter (expected to relocate by 9/16 due to VetCenter staffing requirements)	VSO VSA
<b>Togus</b> – Veterans Administration Medical Center	Claims supervisor VSO (*borrowed from Machias office as needed) Office Manager VSA

Veterans' service officers provide face-to-face service to a majority of the veterans they serve. In addition to assisting a veteran with a VA claim or accessing a state service, the VSO hears

directly about the struggles encountered by veterans. The commission appreciates and is grateful for this personal contact provided to those to whom we owe so much. We support increasing the opportunities for this to happen, by ensuring that the VSO position is structured in a way that appropriately compensates for the extensive travel required and the off-hours demands of the job. There are countless events and meetings at which a VSO could connect with a veteran in need, but if those events are after 5pm or on a Saturday morning, that opportunity may be lost.

**The position of veteran service officer within the Bureau of Veterans Services should be structured to allow the VSO to provide face-to-face services and assistance to veterans outside the 9 to 5 work day.**

## **B. Veteran service organizations**

It is not only VSOs under BVS who are authorized to work with the VA (via limited power of attorney) on behalf of a veteran pursuing a claim. Veterans service organizations like the American Legion, Veterans of Foreign Wars (VFW) and Disabled American Veterans (DAV), to name a few, also make service officers available to assist veterans. This assistance occurs at the local post level. Two organizations at the national level, the American Legion and the VFW, have historically provided for two service officers to be located at Togus. These officers provide assistance with claims sought by veterans seeking services at the veterans' hospital or to clients reaching out by phone. With the understanding that national veteran organization funding of those positions was in jeopardy, the Legislature dedicated a portion of revenues from table game wagers at the casino located in Bangor to cover the costs of those service officers. Public Law 2013, chapter 128 established the Coordinated Veterans Assistance Fund which receives two percent of net table game revenue from the casino operated in Bangor (37-B MRSA §514). After a \$15,000 annual distribution for transportation of veterans receiving medical services at Togus or outreach facilities, the fund provides \$64,500 each to two veteran service organizations (VFW and American Legion) with the purpose of supporting their VSO efforts at Togus.

The commission heard testimony from an American Legion service officer stationed at Togus at its third meeting. The assistance provided to veterans by service officers stationed at Togus is immensely helpful. The service officer's knowledge of the intricacies of the VA health benefits system and the ability to support a veteran navigating the often overwhelming process of making a claim with the VA is invaluable. The presentation received by the commission affirmed this as we were walked through an example of a claim typically handled by the officers at Togus. Two issues were raised that generated some concern among commission members.

First, service officers supported by \$129,000 annually by casino revenue are subject to the VA policy of "it's the nation - not the station," which means that they are assigned cases (by phone) of non-Maine veterans who assist those veterans with claims. This policy was described to the commission by VA representatives at the first meeting. The commission takes issue with this VA policy generally, where we believe that a facility in Maine should be dedicated to meeting the needs of Maine veterans seeking assistance, before taking on claims from out of state or sending Maine veterans to a service officer who is not positioned here.

Second, these service officers are not subject to any oversight or review by the bureau to ensure that they are successfully serving Maine veterans. The commission received no information nor has any reason to believe that the work done by state-supported service officers who work at Togus on behalf of national veteran organizations is insufficient. However, there is no mechanism for accountability. Processing a claim thoroughly and correctly is critical based on our understanding of what happens when a claim is incomplete or contains inadvertent errors. If a claim (a disability rating or pension application, for example) is denied by the VA, a veteran may appeal. Alarming, there is no deadline or timeframe that governs when that claim appeal must be resolved. The length of time for a claim to be resolved can exceed many months and even years. A veteran who is unable to maintain employment because of a service-connected disability, who has had a legitimate claim denied, is put in the position trying to survive without income or seek work despite the limits of the disability and the risk of making the disability worse. If the veteran, who is rightfully entitled to a disability rating and compensation due to a service connected-disability shows that he or she has a job, it puts the claim with the VA in jeopardy. Furthermore, if an appeal is approved, the claim award is not applied retroactively. Thus, it is crucial that a claim be accurate and thorough and that an officer assisting a veteran is well-trained in processing claims.

We recognize that the problems relative to claim processing, and in particular, the frustration when a claim is denied, are mostly due to flaws and inefficient processes at the federal level. Again, there is little that can be done at the state level to change that. The fact remains that denial of a claim, due to an error in filing, comes at a great cost to the veteran. The commission supports efforts to provide oversight of officers supported by state funds. We understand there are privacy policies and other jurisdictional concerns that need to be addressed, but we encourage the VA and the bureau to find a way to ensure accountability.

**Veterans' service officers stationed at Togus and supported by the Veterans Coordinated Assistance Fund (casino revenue) should be dedicated to assisting Maine veterans with VA claims and not subject to the VA policy, "it's the nation - not the station."**

Veteran service organizations like the VFW, Disabled American Veterans (DAV) and American Legion also provide claim assistance to veterans at the post level. Some of this assistance is provided by organization officers who have been certified by the VA while others have not. The commission recognizes the need and value of post-level assistance for veterans, but as stated above, failure to file a VA claim properly, causes significant hardship to a veteran. The commission did not have the time to develop a specific process, but we support efforts to incentivize post-level service officers to become certified and well-trained to ensure that veterans are receiving assistance which will connect them with VA benefits as quickly and efficiently as possible.

**Service officers working on behalf of veteran service organizations stationed at Togus or assisting veterans at the local post, should be well-trained and subject to oversight and accountability to ensure that VA claims are filed properly.**

## C. Transportation

Among presentations received by the commission, transportation was cited repeatedly as a challenge for veterans when seeking any number of services. Access to jobs, training, social services, mental-health care and community activities are critical to veterans because veterans are at greater risk than the general population for homelessness, unemployment, post-traumatic stress disorder and suicide. A significant portion of Maine's veterans live in areas which make access to those services a challenge.

The first of our two-tier recommendations regarding transportation are proposals that can be initiated in the very near future. The second tier recommendations take a longer-term approach. The commission spent a great deal of time discussing the fact that many veterans cannot get to appointments at community-based outpatient clinics (CBOCs), which by their name alone, are intended to provide greater access to veterans across the state. A point of frustration for members of the commission and for service providers providing testimony at meetings, is that there are systems in place which could provide transportation to health care services administered at CBOCs, but for a few seemingly minor administrative or policy hurdles, that transportation is just out of reach.

Tier-one: Commission members learned about an ongoing transportation service provided to veterans across the state provided by veterans' service organizations, Disabled American Veterans (DAV). The DAV has an agreement with the VA to provide rides to veterans needing health care services at Togus. Responding to concerns from the organization that this valuable service could not be sustained due to an aging fleet of vans and other costs, in 2013 the Legislature dedicated a portion of the Veterans Coordinated Assistance Fund (37-B MRSA §514) to this program. This fund receives money from table games operated at the casino in Bangor. The DAV receives \$15,000 annually. Although the law provides that the funds are to support the organization in providing rides to veterans for medical care services at Togus and outreach facilities, the DAV provides rides only to Togus. The commission heard comment that routes taken by DAV vans travel right by CBOCs. However, due to the agreement between the DAV and the VA, it was reported to the commission that the ride program precludes drivers from transporting veterans to the community based clinics operated by the VA. The commission is not privy to the elements of the agreement that outline this prohibition, but we believe that if common sense were applied, this agreement would be changed to allow for transportation services to CBOCs.

**Amend the current agreement between the VA and the Disabled American Veterans to allow for the ride program to transport veterans to VA community-based outpatient clinics.**

Another element of the tier-one transportation approach is to find a way to utilize existing services provided to MaineCare recipients who require rides to medical appointments. Some veterans who receive health care through the VA also qualify for MaineCare coverage. However, it is the commission's understanding that policies governing MaineCare do not allow for or pay reimbursement for transportation to medical appointments not covered by MaineCare (specifically medical appointments at Togus or a CBOC). So, if a veteran, who would otherwise

qualify for MaineCare is receiving medical treatment from the VA, MaineCare will not cover the costs of transporting the veteran to those appointments. This is an example of a gap in care for veterans for which a bridge could be constructed using systems and services that are already in place. This commission supports co-using MaineCare and VA health benefits in ways that best serve veterans' individual needs and in ways that the commission believes will be cost effective. The commission recommends changes to MaineCare rules with regard to transportation services to allow a veteran, who is MaineCare eligible, to receive a "partial" benefit or "partial" coverage to facilitate transportation to VA-provided medical appointments.

**Amend MaineCare rules to allow for MaineCare-eligible veterans to receive transportation services to VA-provided medical treatment and services.**

The VA does provide reimbursement for transportation expenses incurred by veterans travelling to Togus for medical appointments. This reimbursement is available to veterans who are at least 30% disabled. The commission learned that the way this reimbursement is provided has changed. Until recently, travel costs were reimbursed via cash or a gas card that would actually cover the expense to the veteran that day. Now, the VA apparently provides reimbursement electronically on some future date. For some veterans, the upfront transportation costs are large enough that a veteran is unable to travel to Togus for an appointment. So, this system has some significant gaps which should be addressed. Information provided to the commission by Director Horn, indicated that the VA is currently considering changes to an existing supplemental VA benefit called the ChoiceCard. The ChoiceCard benefit allows a veteran to receive services provided by approved non-VA partners when the veteran is unable to receive a VA appointment within 30 days or the VA service is provided at a location (Togus/CBOC) more than 40 miles from where the veteran resides. The commission looks forward to hearing about these changes which will reportedly expand the ChoiceCard option. We understand the expansion of the program may include changes to the 40-mile provision and other enrollment criteria that will result in increased access to necessary health care services for veterans. Improved transportation coverage under the Choice Card program will reach those veterans who are ineligible to receive transportation under MaineCare and those who are resistant to enrolling in MaineCare.

Tier-two: The commission identified longer term goals with regard to transportation needs of veterans. Expanding access to public transportation services will be a necessary initiative in the face of Maine's aging veteran population. More and more veterans will need assistance with transportation as aging impacts their independence. The corps of volunteers who currently provide rides are also typically of post-retirement age. We recognize that work will be required to assess the transportation needs of veterans, and Maine's population generally, before specific public transportation recommendations can move forward. This report does not provide a detailed outline of a policy initiative which is that broad. However, it is clear that other states have determined a need and found methods to provide transportation to veterans. According to information compiled by the National Conference of State Legislatures (NCSL) in 2012:

- Of the 1.8 million people who served in Iraq or Afghanistan, 360,000 have traumatic brain injuries;



- The ratio of injuries to fatalities is 16 to 1 – five times greater than during the Vietnam war;
- 26% of those who have served since 2001 have a service-connected disability, compared with 14% of all veterans;
- 40% of veterans live in rural areas where both community services and transportation are less available; and
- The VA and volunteer ride programs **do not** meet all of the transportation needs of veterans.

To address transportation needs of veterans, 27 states have intra-agency councils that work to coordinate diverse programs across different agencies. According to NCSL, at least 12 of these councils include veterans' representatives. Colorado, Massachusetts and Oregon have separate interagency task forces to address veteran transportation needs exclusively. Other states, like North Dakota, provide at least five vans that have scheduled routes to the VA hospital in Fargo. These vans are paid for from a state post-war veteran trust fund according to NCSL. New Jersey provides a coordinator in each county who arranges free rides for veterans to multiple services.

The commission envisions an effort in the future that will use or expand upon existing regional transportation networks to coordinate rides for veterans to services they require or even to their places of employment. This system should be based upon a determined need and be spearheaded by a single agency, like the Department of Transportation, who has experience working with regional providers and understands how to measure the needs and the most efficient way to meet them. The commission recommends implementing a pilot program in a location already served by a regional transportation agency, where a reasonable number of veteran service providers can assist with determining the transportation needs of veterans in the region and how the pilot program should meet the need.

**Expansion of existing regional transportation networks and coordination with VA facilities to increase veteran access to services should be part of the state's long-term transportation policy objectives. Implementation of a pilot program will inform the development of an effective and efficient policy that will meet veteran transportation needs.**

Additionally, the commission understands that VA hospitals in some states work to schedule veterans' appointments on days when transportation services in their region are available. They maintain open communication with providers and find ways to coordinate transportation access with the veteran in mind. This certainly seems to be an achievable goal that should be incorporated into Maine's transportation policy.

#### **D. Veterans experiencing homelessness**

There is no lack of programs, grants and agencies that contribute to the efforts to alleviate the tragedy of homelessness among Maine's veterans. However, there is no one agency or position in state government dedicated to working on this issue. Although estimates identifying the number of veterans experiencing homelessness varies, depending on whom is asked, any

number is too many. Based on presentations made during the course of our work, the commission understands that the primary barrier to resolving the issue is not necessarily a lack of resources, but rather the lack of coordination of resources and efforts by those working to find veterans homes. The Maine State Housing Authority (MSHA) works with local community homelessness service providers as a co-applicant for federal grants and funding for programs. MSHA administers a veterans' first-time homebuyers program and the distribution of low income rent vouchers for which veterans receive a preference. It was noted that the first-time homebuyer program is actually made available to all veterans even if they have previously owned a home. Peter Merrill, Deputy Director of MSHA reported that additional improvements to programs that benefit veterans are being developed.

There are currently 39 independently-operated homeless shelters statewide that receive MSHA funds. As part of these shelters' intake process, clients are asked if they are a veteran. Veterans served at these shelters are also connected with the VA's Supportive Services for Veteran Families (SSVF) program. Supportive services grants through this program assist low-income veterans in shelters by providing transitional and permanent housing and additional wide-ranging services designed to promote housing stability.

MSHA is also an administrative partner with the VA and the United States Department of Housing and Urban Development with regard to housing vouchers available exclusively to veterans, known as HUD-VASH (Veterans Affairs Supportive Housing) vouchers. This voucher is an ongoing benefit providing veterans with permanent housing by covering rental costs. HUD-VASH vouchers come with the requirement that veterans also receive services from the VA that address issues that contribute to housing instability, such as lack of employment, mental health problems and substance abuse. Vouchers are issued for tenancies that are within a 60-mile radius of VA supportive services provided in Portland, Lewiston, Bangor or Augusta (Togus). These vouchers are an integral part of a federal policy to end chronic homelessness among veterans across the country. Vouchers received in this state are administered through the Maine Continuum of Care (COC). The COC consists of groups of providers who serve different geographic areas in the state who work together in a collaborative planning process to develop programs addressing the problem of homelessness. Maine has two COCs, one serving greater Portland and another serving the balance of the state under the administration of MSHA. Currently, Maine has been issued 196 HUD-VASH vouchers, of which there are still 53 available. The commission does not believe that the underutilized vouchers are by any means a function of the lack of need for them. On the contrary, we believe that the need certainly exceeds what is available in terms of the number of vouchers. Some barriers to making good use of all the vouchers available are understandable. It can be a challenge for a veteran to find a landlord willing to overlook a poor credit rating or some other background blemish. It is also possible that the residence for which the veteran wishes to apply the voucher may not be located within 60 miles of a VA facility at which the voucher-user is required to use services. However, failure of the VA to provide adequate staff to conduct the required intake interviews for the voucher program is unacceptable. This failure to complete intake procedures means the veteran is not accessing and receiving credit for the mandatory services upon which receipt of the voucher is contingent. If the VA insists that these functions be conducted in-house by VA staff, in order for a veteran to receive a housing voucher, then the VA should ensure adequate staff for that intake process - and in a timely manner.

**The VA should provide adequate staff resources to conduct veteran intake interviews upon which the granting of HUD Veterans Affairs Supporting Housing Assistance vouchers are contingent.**

The number of vouchers allocated to each state from the federal government is partly determined based on the reported number of veterans experiencing homelessness. That number is reported based on an annual count mandated by HUD, referred to as the point-in-time (PIT) count. This survey is conducted nationwide. In Maine, the VA, MSHA and other agencies that provide services to the homeless, canvass shelters, encampments and the streets generally, to get a count of the number of people who are homeless statewide. The Bureau of Veterans Services does not participate in this survey. However, HUD does not provide any funding or support of the effort. The PIT count is conducted annually during the latter half of January, in accordance with HUD requirements. According to the VA, the number of homeless veterans in the state who sought services from non-private shelters was 438 based on the January, 2015 PIT count. MSHA reported that in January 2016, non-private shelters in the state were serving 33 veterans who are considered long-term stayers. Of those 33, 14 veterans were in the process of securing more stable housing.

The allocation of vouchers, the mandated services and the estimates of homeless veterans determined by the PIT count are some of the elements of federal initiative to end veteran homelessness by 2015. Reaching the goal of ending veterans' homelessness is considered successful when the measure of "functional zero" is achieved in a state. Functional zero means the availability of housing meets or exceeds the number of veterans experiencing sheltered or unsheltered homelessness (as determined by PIT count).

Arriving at an estimated number of homeless veterans using the PIT count and the use of the functional zero measure raise concerns for the commission. While we understand that these measures are intended to determine need for services and establish an identifiable goal with regard to ending the problem of veteran homelessness, we fear they place greater emphasis on hitting a point on a chart rather than measuring actual outcomes. Rather than declaring success upon reaching functional zero (the *capacity* to house veterans) we see success as actually ensuring veterans are connected with long-term, stable housing. The PIT count, conducted annually in January, may not be the best way to find veterans without places to call home. Clearly, January is one of the coldest months of the year in Maine, which makes it likely that the many homeless veterans who are "couch-surfing" or stringing together a few days of shelter provided through the kindness of others will not be included in the count. The rural nature of our state also makes it likely that the survey does not reach every geographic location where there is need. We believe the PIT count should be conducted at least twice a year in a state like Maine to allow for the counting of veterans experiencing homelessness when the weather is warmer. We recommend that the Bureau of Veterans Services be included as a participating agency for the count. Finally, we encourage HUD and the VA to provide support and funding to ensure the PIT count provides a good representation of the number of homeless veterans in Maine.

**The Department of Housing and Urban Development and the VA should conduct the point-in-time count at least twice per year, including during warm weather to**

**best estimate the number of homeless veterans in the state. HUD and the VA should provide funding and support for this mandated survey and include the Bureau of Veterans Services as a participating agency.**

Vouchers provided through the HUD-VASH program are one component of the effort to address and end homelessness among veterans. With less than 200 allocated to Maine and the stated barriers which prevent some from being used, additional tools and services must be applied to provide veterans with housing. For example, vouchers do not address the need for emergency housing for veterans released on bail awaiting enrollment in the veterans' court program. Without a supervised address to which to be released, these veterans stay in jail even when bail can be paid. Vouchers do not address the need for transitional housing for veterans unable to find work and unable to find a landlord willing to rent to them. Yet, these veterans do regularly find their way to a state agency to seek help gaining employment or applying for supplemental nutrition benefits (food stamps). Veterans in crisis may reach out to a counselor at a local non-profit mental health agency or a local veterans' organization post to connect with a comrade when they feel they have nowhere to turn and have no place to call home.

We believe it is important to coordinate the efforts of and facilitate communication between these agencies, non-profit providers and other organizations to whom veterans turn when they are homeless and in need. There is no dedicated entity at the state-level tasked with the single focus of addressing homelessness among veterans and their families. We recommend the formation of an interagency council that meets regularly to identify gaps in services to provide veterans with housing, facilitates communication between agencies and other providers and recommends ways in which services and resources can be coordinated and maximized.

The council should be tasked with developing methods to get an accurate count of the number of homeless veterans in Maine in addition to identifying gaps in the current network of services. It should make recommendations for the coordination of services among multiple providers. The commission also feels strongly that among the duties of this council, one is to make recommendations to address the need for emergency shelter, particularly for those being processed through the criminal justice system. We recognize that similar efforts at coordination and communication have been launched in the past, with the best of intentions. What those past efforts lacked was a dedicated staff person charged with recording their work and seeing the recommendations through to implementation. The commission believes a dedicated staff person, employed and supervised by the Director of the Bureau of Veterans Services and tasked with working with the interagency council is critical to meeting these worthy objectives.

**Create an interagency council to facilitate communication and coordination with regard to efforts aimed at eliminating homelessness among Maine veterans.  
Establish a position within the Bureau of Veterans Services to serve as staff to the council and promote the implementation of the council's recommendations.**

We recommend that the interagency council meet at least four times per year and consist of members representing the following:

- Maine State Housing Authority
- Veterans Service Organizations such as

- Maine Department of Health and Human Services
- Maine Department of Transportation
- Maine Department of Corrections
- United States Department of Veterans Affairs
- United States Department of Housing and Urban Development
- United States Department of Veterans Affairs Supportive Services for Veteran Families
- American Legion, Disabled American Veterans, Veterans of Foreign Wars (rotating membership)
- Non-profit providers of homelessness services to veterans
- A member of the Joint Standing Committee of the Legislature having jurisdiction over veterans affairs
- Other members as determined by the council (such as Maine Military and Community Network)

#### **E. Postsecondary education and supporting successes achieved through GI Bill**

The commission identified education as one of the key building blocks in establishing a strong foundation for the future of Maine's veterans. Access to postsecondary education through the GI bill has provided life-changing opportunities to veterans for decades and continues to do so today. Ensuring that a community college classroom or a university campus is a welcoming place for veterans is a way to ensure veterans complete their educational pursuits and makes the most of this valuable benefit. At the commission's second meeting, we received a presentation from Lorraine Spaulding, Coordinator of Veterans Services at the University of Southern Maine's Veterans Resource Center. The Center's mission is to help veterans transition from military service to successful completion of a college degree. It provides assistance to veterans on many topics ranging from financial issues, mental health problems, housing and military sexual trauma. In addition to helping a veteran navigate some of the administrative processes, like submitting applications and reviewing joint services transcripts, the Center provides transition orientation for incoming student veterans and collaborates with campus and community resources to meet their needs. Green zone training for faculty, staff and even student colleagues is another function of the center. Through this cross cultural learning, faculty, staff and students gain a better understanding of military life experience and the emotional cycle of deployment. This sort of training, educating those who will teach, serve and work alongside of the student veteran is a great example of providing assistance without the onus always being on the veteran to seek it out or demonstrate a need.

The commission commends this program at USM, which proactively assists the veteran and works to create an environment where they are understood and thus, more likely to find success in their educational pursuits. Although the Veterans Resource Center does a superior job in assisting veterans, its limited resources allow it to do only so much. USM is the only campus within the University system with a dedicated office and full-time coordinator. We support implementation of this model at each campus with a substantial veteran student enrollment. Ms. Spaulding indicated that USM is the campus with the greatest number of veterans, but expects that enrollment at the Augusta campus is growing and could soon surpass that of USM.

**Require each campus within the University of Maine System with a significant enrollment of veterans to provide transition assistance, orientation and coordination of resources based on the model employed at the University of Southern Maine**

Two issues were presented to the commission with regard to federal educational benefits to veterans that we believe deserve attention. Unfortunately, the issues stem from federal policies pertaining to the GI Bill and other post 9/11 educational benefits, over which the state has no direct jurisdiction.

First, the structure of payments to veterans for housing and expenses under the GI Bill is aligned strictly with the veteran's academic schedule. On its face, this policy seems reasonable. However, this means that there is no money provided for rent, food and other expenses during school breaks (which during the holidays can be 3-weeks long or more). It is a challenge to secure employment for that short a period of time and the veteran will likely struggle to cover housing costs and other family needs. We encourage the Veterans and Legal Affairs Committee to bring this issue to the attention of Maine's Congressional Delegation and urge them to take action to amend this policy.

**GI Bill benefits should not be withheld during short-term breaks at postsecondary educational institutions.**

Second, there is another policy executed at the federal level that is unfair and inconsistent with the way most student debts are handled when a student is still actively taking classes. If the VA accidentally makes an overpayment of education-related benefits to a student veteran they often demand reimbursement as soon as the error is caught. Unfortunately, these overpayments happen, but at no fault of the veteran. The VA expects reimbursement for their mistake while the veteran is still a full-time student and living only on the dollars provided by the VA through the GI Bill. This is often an impossible demand for the student veteran to meet, yet penalties accumulate and threats of debt collection efforts hang over the veteran's head. Typically, payments on a standard student loan are deferred as long as the student is enrolled in postsecondary education and taking a significant number of credits. A similar policy should be applied to payments to reimburse overpayments by the VA. We believe the VA should be prohibited from collecting an overpayment debt from a student veteran while the veteran is still a student. So again, we urge the Veterans and Legal Affairs Committee to bring this issue to the attention of Maine's Congressional delegation and request that this prohibition be enacted.

**The VA should be prohibited from collecting a debt from a student veteran incurred when the VA mistakenly made an overpayment while the veteran is still enrolled in postsecondary education program.**

#### **IV. BUILDING ON THE FOUNDATION**

The commission believes that implementation of the recommendations made thus far in our report establish a strong foundation which will facilitate a multi-year, multi-faceted plan to continue efforts to meet the needs of Maine veterans. We have identified additional areas where we believe future efforts at strengthening and aligning services provided to Maine's veterans should be focused. It should be noted that the omission of any particular subject on which the commission received presentation, does not mean that the commission did not consider it worthy of inclusion in this report. Rather, the limited time in which the commission had to complete its

work did not allow for the development of findings and recommendations on all topics, including issues related to enhancing employment opportunities and easing the requirements of professional licensing.

#### **A. Improving access to mental health treatment**

The need for improved access to mental health care services by veterans is a topic that justifies a separate report. Unfortunately, this commission did not have adequate time to give this topic the attention it requires. Additionally, many of the challenges in improving access to mental health treatment exist at the federal level. We believe the VA needs to do more in this state to ensure that Maine veterans are able to receive appropriate and comprehensive mental health treatment. Such treatment is often sought at critical moments of crisis for a veteran. Failure to get help in these moments of crisis can have devastating effects where the veteran gets in trouble with the law, hurts someone else or engages in self-harm or suicide. Overcoming the barrier of simply getting a veteran who is experiencing mental health difficulties to accept or seek out treatment is a tremendous challenge. If that barrier is broken down, failure to provide services in a timely way may close that precious window of opportunity. Future efforts to ensure that veterans are receiving the services they are entitled to must consider the following:

- According to the VA, 35-40% of veterans in Maine are seeking mental health care services. Too many veterans sit on a waiting list for treatment;
- The VA does not operate a comprehensive, inpatient treatment facility in Maine. The closest facility is in western Massachusetts (North Hampton), which provides a 4-6 week program; and
- The number of providers available to provide mental health treatment to veterans is in jeopardy because of low reimbursement rates and timeliness of payments for services administered by a VA-contracted agency.

#### **B. Veterans court and pre-trial services**

At its final meeting, the commission received a presentation from members of a recently formed organization called Veteran Mentors of Maine. This group consists of veterans who volunteer their time and expertise connecting with veterans who are transitioning through the criminal justices system. Mentors with this group work closely with veterans who are criminal defendants enrolled with the Co-occurring Disorders and Veterans Court (CODVC). CODVC is a special docket for criminal cases which aims to provide judicial monitoring, case management specialized treatment to defendants with the goal of promoting public safety, prosocial behaviors, reduction of criminal activity and recovery from substance abuse and mental health issues. With regard to veterans specifically, the alternative sentencing program recognizes that criminal conduct and behavioral disorders may be attributable to the veteran's service.

Currently, the CODVC is serving 14 veterans with six pending admission. Thirty-six veterans have been served by the court since the docket was established under Justice Nancy Mills in 2011. The program length is a minimum of one year. The court is located in Kennebec County, but will accept referrals for cases statewide. Veterans enrolled in the program must comply with the terms of the program as prescribed. Failure to comply may result in the veteran

being sentenced to jail time. The mentors who presented to the commission spoke in detail about the value of the personal connection they provide to veterans and how it contributes to the excellent success rate of the veterans court program. We asked representatives of the Veteran Mentors of Maine organization to identify current issues being faced by veterans in the CODVC. Some of those issues include:

- The lack of inpatient treatment for both long-term and short-term mental health and substance abuse treatment in Maine. This leads to a significant disconnect between veterans and the supports the CODVC has to offer;
- There is only one Veterans Justice Outreach worker in the state responsible for the referral of services to all veteran clients and the connection to services for all justice-involved veterans in the state;
- There is no program to provide home support or daily living skills staff in the veteran community. The VA reports to have these services available but the COVDC has not been able to access them for veterans in need of those services. Because they claim to provide them, the VA will not reimburse community program providers who are able to deliver those services;
- Peer mentorship programs require support and expansion; and
- Access to same-day emergency services such as housing, transportation and funding for basic necessities is lacking. Veterans often have to wait days, weeks and even months for such assistance.

The commission applauds the success of the veterans court program and recognizes the value of the contribution of volunteers like those from Veteran Mentors of Maine. Although the commission did not have adequate time to make specific recommendations to support the work of the court and the programs associated with it, we hope that this report creates a greater awareness and fosters continued discussion.

## V. SUMMARY OF FINDINGS AND RECOMMENDATIONS

The following is a summary chart of the commission’s findings and recommendations which are discussed in sections III and IV of this report.

<b>SECTION III. RECOMMENDATIONS ESTABLISHING A FOUNDATION TO SUPPORT ONGOING IMPROVEMENTS</b>	
<b>A. Enhancements to the Bureau of Veterans Services</b>	
<b>Commission Finding</b>	<b>Corresponding Recommendation</b>
<b>1. Marketing and Outreach</b>	
There are an estimated 140,000 veterans in Maine; less than half are enrolled with the US Department of Veterans Affairs (VA). The number of veterans who are unknown to the Bureau of Veterans Services (BVS) is too great.	Make permanent and provide ongoing funding for existing outreach coordinator.  Require specific, purpose-driven marketing and outreach duties within the bureau’s statutory charge.



There is a lack of awareness of the BVS among Maine's veterans, which means that veterans in need are not getting the services they have earned.	Develop a statutory framework that requires the bureau to implement a purpose-driven marketing and outreach strategy.  Structure veteran service officer (VSO) positions within BVS so that they may attend events outside the hours of a standard work day and receive compensation for that time.
The need for outreach and marketing functions within the bureau will exceed the 24-month period for which BVS has been authorized to employ an outreach coordinator (contract position).	Establish the position of outreach coordinator as a permanent position within the bureau.
Family members and loved ones play a significant role in connecting veterans connected with services, because veterans can be reluctant to seek help due to shame, lack of trust and other issues.	Require the marketing and outreach functions of the bureau to target family members of veterans in addition to veterans.
<b>2. Case management system</b>	
BVS is crippled by the lack of a modern case management system. Efficiency and veteran customer service suffer without this tool. A case management system will provide accurate tracking veteran of data and necessary marketing and outreach functions.	Provide funding for acquisition and implementation of a case management system for BVS.
<b>3. Data collection and statistics</b>	
Military retirees and members of the Maine National Guard who completed service but were never called to active duty are not tracked by either the BVS or the Department of Defense, Veterans and Emergency Management (DVEM).	Direct DVEM to track military retirees and members of the Maine National Guard who are not otherwise tracked as veterans.
<b>4. Veterans service officers</b>	
VSOs had approximately 41,000 active cases in 2015.  In October 2015, each VSO was handling an estimated 2,200 cases.	The number and location of VSOs should be evaluated and amended if an analysis of the veteran population and distribution call for a change of locations or an increase in the number of VSOs. The Legislature should consider establishing a ratio (one VSO/ number of veterans) to ensure that there are enough VSOs to provide adequate service to veterans.
BVS offices that are co-located with a VA community based outpatient clinic see highest number of visits from veterans and are subject to a reasonable rental fee.	Encourage continued partnership with VA to allow for co-location of BVS offices with community-based outpatient clinics (CBOCs).

<b>B. Veterans Service Organizations</b>	
The state provides \$129,000 annually to support two service officers at Togus, who are not under BVS supervision. The state has little information to determine if the funds are being used as intended. Service officers receiving these funds are tasked by the VA to assist with claims of out-of-state veterans under the VA's "it's the nation not the station" policy.	Service officers not under the supervision of BVS but who receive state dollars (casino revenue) should be assisting Maine veterans and be subject to reporting and accountability requirements.
The VA has no deadline for resolving appeals of denied claims. Appeals often drag out for months. If an appeal is successful, the claim award is not applied retroactively to when the veteran submitted the request to the VA.	Encourage proper training and provide appropriate oversight for service officers (not employed the bureau) who assist veterans in making claims with the VA.
<b>C. Transportation</b>	
<p>Access to jobs, social services, medical appointments, mental health services and community activities are crucial to veterans, because they have greater risk than the general population of experiencing unemployment, homelessness, PTSD and suicide.</p> <p>Maine's aging veteran population, the number of post 9/11 veterans with traumatic brain injury and the insufficiency of VA and volunteer ride programs demonstrate the need for a state transportation policy that includes a veteran-specific component.</p>	Develop long-term transportation policy using existing regional provider networks that includes veterans as targeted constituency in need of services.
<p>Transportation services exist but are not accessible to some veterans due to minor administrative or policy hurdles.</p> <p>Veterans eligible for MaineCare are prohibited from using MaineCare transportation services to deliver them to VA health care services.</p>	<p>Amend MaineCare rules to allow for enrollees to receive transportation to VA administered services.</p> <p>Encourage change to the agreement between Disabled American Veterans Organization (van program) and the VA to allow for transportation to community based outpatient clinics, not just Togus.</p>
<b>D. Veterans experiencing homelessness</b>	
Maine has been allocated 196 vouchers from	If receipt of a HUD VASH voucher is

<p>the Housing and Urban Development Veterans Affairs Supportive Housing initiative (HUD VASH). Fifty-three of those vouchers are unassigned. One barrier to providing all available vouchers is failure of the VA to provide staff to conduct mandated intake processes which align veterans with supportive services required to be accessed to maintain the voucher.</p>	<p>contingent upon completion of an intake process and administration of VA support services, the VA should ensure that staff and resources are available.</p>
<p>The Point-in-time (PIT) count administered by HUD and the VA is a required component of the HUD VASH voucher program. It is conducted annually in January by various agencies and providers but not with funding or resources from HUD or the VA. The PIT count is not the best method for providing an accurate picture of the problem of veteran homelessness.</p>	<p>The PIT count should be conducted more than once per year, including a warmer time of year when more veterans are likely on the streets. HUD and the VA should provide funding an resources for the mandated survey to ensure the count is conducted properly and reaches rural areas of Maine.</p> <p>BVS should be supported as a participant in the PIT count.</p>
<p>The federal government states that the problem of chronic veteran homelessness is eliminated when a state (or region) reaches “functional zero.” Functional zero means there is capacity to provide housing for the number of homeless veterans as determined by the PIT count.</p>	<p>Success at resolving chronic homelessness among veterans should be determined by actually placing veterans in stable housing, not just creating the capacity to do so.</p>
<p>Addressing homelessness among Maine veterans requires more than vouchers. Maine must work to facilitate communication among all providers and coordinate efforts to maximize available resources.</p> <p>Voucher programs do not solve the need for emergency housing for veterans within the criminal justice system who have the opportunity to go through Veterans Court programs. Release on bail is prohibited unless the veteran has a supervised address to which the veteran is released.</p>	<p>Create an interagency council to facilitate communication and coordination with regard to efforts aimed at eliminating homelessness among Maine veterans.</p> <p>Establish a position within the BVS to serve as staff to the council and promote the implementation of the council’s recommendations.</p>
<p><b>E. Postsecondary education and supporting successes achieved through the GI Bill</b></p>	
<p>Successful completion of postsecondary education is enhanced when institutions provide dedicated services to assist veterans with transition from military life and provide training to faculty, staff and student colleagues</p>	<p>Require each campus within the University of Maine System with a significant enrollment of veterans to provide transition assistance, orientation and coordination of resources based on the model employed at the University of</p>

about veteran issues, military culture and the emotional cycle of deployment.	Southern Maine.
Federal benefits align with postsecondary institution's academic class schedules too strictly imposing hardships on student veterans during school breaks and between semesters.	GI Bill benefits should not be withheld during short-term breaks at postsecondary educational institutions.
The VA demands reimbursement for overpayment of educational benefits made in error by the VA (at no fault of the veteran) while the veteran is a full-time student living on GI bill benefits.	The VA should be prohibited from collecting a debt from a student veteran incurred when the VA mistakenly made an overpayment while the veteran is still enrolled in postsecondary education program.

**SECTION IV.  
RECOMMENDATIONS  
BUILDING ON THE FOUNDATION**

**A. Improving access to mental health treatment**

<b>Commission Finding</b>	<b>Corresponding Recommendation</b>
<p>35-40% of Maine's veterans are seeking mental health services through the VA. There are long waiting lists for these services.</p> <p>The VA does not operate a comprehensive inpatient treatment facility in Maine. The closest facility is in western Massachusetts (North Hampton).</p> <p>When a veteran is willing to seek out mental health care services it is often at a time of crisis. The need to access those services quickly is critical and failure to do so leads to tragic consequences.</p> <p>The number of mental health care providers available to veterans enrolled with the VA is in jeopardy because of low reimbursement rates and untimeliness of payment from VA contracted entity.</p>	<p>The commission did not have time to make specific recommendations to address the findings which demonstrate there is a need to increase access to mental health care services.</p>

**B. Veterans court and pretrial services**

<p>There is a lack of inpatient treatment for both long-term and short-term mental health and substance abuse treatment in Maine. This leads to a significant disconnect between veterans and the supports the Co-occurring</p>	<p>The commission applauds the success of the Veterans Court program and recognizes the value of the contributions of volunteers like those from Veteran Mentors of Maine. Although the commission did not have</p>
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<p>Disorder and Veterans Court (CODVC) has to offer.</p> <p>There is only one Veterans Justice Outreach worker in the state responsible for the referral of services to all veteran clients and the connection to services for all justice-involved veterans in the state.</p> <p>There is no program to provide home support or daily living skills staff in the veteran community. The VA reports having these services available but the COVDC has not been able to access them for veterans in need of those services. Because they claim to provide them, the VA will not reimburse community program providers who are able to deliver those services.</p> <p>Peer mentorship programs require support and expansion.</p> <p>Access to same-day emergency services such as housing, transportation and funding for basic necessities is lacking. Veterans often have to wait days, weeks and even months for such assistance.</p>	<p>adequate time to make specific recommendations to support the work of the court and the programs associated with it, we hope that this report creates a greater awareness and fosters continued discussion.</p>
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**APPENDIX A**

**Authorizing Legislation, Resolve 2015, chapter 48**





STATE OF MAINE

—  
IN THE YEAR OF OUR LORD  
TWO THOUSAND AND FIFTEEN

—  
H.P. 497 - L.D. 721

**Resolve, To Establish the Commission To Strengthen and Align the Services  
Provided to Maine's Veterans**

**Emergency preamble.** Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

**Whereas,** a legislative study by a study commission needs sufficient time for the commission to properly do its work; and

**Whereas,** there is insufficient time after the 90-day period for a study commission to properly do its work before reporting to the Legislature; and

**Whereas,** in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore, be it

**Sec. 1. Commission To Strengthen and Align the Services Provided to Maine's Veterans established. Resolved:** That, notwithstanding Joint Rule 353, the Commission To Strengthen and Align the Services Provided to Maine's Veterans, referred to in this resolve as "the commission," is established; and be it further

**Sec. 2. Commission membership. Resolved:** That the commission consists of 11 members appointed as follows:

1. Two members of the Senate appointed by the President of the Senate who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs;
2. Three members of the House of Representatives appointed by the Speaker of the House of Representatives who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs;
3. The Commissioner of Defense, Veterans and Emergency Management or the commissioner's designee;

4. Three members appointed by the President of the Senate, representing both genders, including a member who is 30 years of age or younger and a member who is 65 years of age or older. Members appointed under this subsection must have experience in:

- A. Developing, implementing or advising on veterans' affairs policy;
- B. Representing a veterans' service organization; or
- C. Providing services to veterans as part of a nonprofit organization; and

5. Two members appointed by the Speaker of the House of Representatives, including a member who is between 30 and 40 years of age and a member who is between 41 and 64 years of age. Members appointed under this subsection must have experience in:

- A. Developing, implementing or advising on veterans' affairs policy; or
- B. Providing services to veterans as part of a nonprofit organization; and be it further

**Sec. 3. Chairs. Resolved:** That the Senate member is the Senate chair and the House of Representatives member is the House chair of the commission; and be it further

**Sec. 4. Appointments; convening of commission. Resolved:** That all appointments must be made no later than 30 days following the effective date of this resolve. The appointing authorities shall notify the Executive Director of the Legislative Council once all appointments have been completed. The first meeting date must be set within 15 days after and be held within 30 days after all appointments have been made; and be it further

**Sec. 5. Duties. Resolved:** That the commission shall:

1. Review the services provided by the State to veterans for the purpose of identifying gaps, duplications and inefficiencies;
2. Consider methods and strategies for improving the State's engagement and communication with veterans of the conflicts in Afghanistan and Iraq;
3. Identify gaps and insufficiencies in the provision of health care and mental health care services to veterans through both state and federal programs and consider ways in which the State can improve health care and mental health care services for veterans where insufficiencies or gaps in federal resources or state services exist;
4. Study how to better align community, state and federal services and resources for veterans who are facing the problem of homelessness;
5. Study how the State can develop and implement a campaign and marketing strategy to better communicate with veterans and military retirees regarding attending colleges in the State and to better attract veterans and military retirees to live and work in the State;

6. Study how the State can encourage partnerships with businesses, industry groups and nonprofit organizations to improve veterans' employment, career and volunteer opportunities;

7. Make recommendations to the Commissioner of Defense, Veterans and Emergency Management concerning practices or rules regarding services and programs for veterans;

8. Work with the Commissioner of Defense, Veterans and Emergency Management to develop a multiyear plan that identifies priorities and suggests initiatives to strengthen and align services provided to veterans in the State;

9. Make recommendations to the Joint Standing Committee on Veterans and Legal Affairs concerning changes to services and programs for veterans; and

10. Study other critical veterans' issues that arise as agreed upon by the commission; and be it further

**Sec. 6. Staff assistance. Resolved:** That the Office of Policy and Legal Analysis shall provide necessary staffing services to the commission as approved by the Legislative Council; and be it further

**Sec. 7. Report. Resolved:** That, no later than January 15, 2016, the commission shall submit a report that includes its findings and recommendations, including suggested legislation, to the Joint Standing Committee on Veterans and Legal Affairs. The Joint Standing Committee on Veterans and Legal Affairs may report out legislation to the Second Regular Session of the 127th Legislature based upon the report.

**Emergency clause.** In view of the emergency cited in the preamble, this legislation takes effect when approved.



**APPENDIX B**

**Membership list, Commission to Strengthen and Align the Services  
Provided to Maine's Veterans**



# Commission to Strengthen and Align the Services Provided to Maine's Veterans

Resolve 2015, c. 49

## Appointment(s) by the President

**Sen. Ronald F. Collins - Chair**  
401 Harriseckett Road  
Wells, ME 04090

Members of Senate who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs

**Sen. Earl L. McCormick**  
633 Hallowell Litchfield Rd  
West Gardiner, ME 04345

Members of Senate who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs

**John W. Libby**  
5 LaCosta Drive  
Old Orchard Beach, ME 04064

Members representing both genders, including a member who is 30 years of age or younger and a member who is 65 years of age or older

**Matthew Murphy**  
26 Melody Lane  
Herman, ME 04401

Members representing both genders, including a member who is 30 years of age or younger and a member who is 65 years of age or older

**Alley Smith**  
580 Pleasant Street  
Lewiston, ME 04240

Members representing both genders, including a member who is 30 years of age or younger and a member who is 65 years of age or older.

## Appointment(s) by the Speaker

**Rep. Jared F. Golden - Chair**  
47 Nichols Street, Apt. 1F  
Lewiston, ME 04240

Members of the House of Representatives who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs

**Rep. Jonathan L. Kinney**  
179 Beaver Berry Road  
Limington, ME 04049

Members of the House of Representatives who are either veterans of military service or members of them Joint Standing Committee on Veterans and Legal Affairs

**Rep. Louis Luchini**  
P.O. Box01311  
Ellsworth, ME 04605

Members of the House of Representatives who are either veterans of military service or members of the Joint Standing Committee on Veterans and Legal Affairs

**Adrian Cole**  
6 Sunward Lane  
Topsham, ME 04086

Members including a member who is between 30 and 40 years of age and a member who is between 41 and 64 years of age

**Randall Liberty**  
18 Holt Road  
Clinton, ME 04927

Members including a member who is between 30 and 40 years of age and a member who is between 41 and 64 years of age

**Adria Horn**  
117 State House Station  
Augusta, ME 04333

The Commissioner of Defense, Veterans and Emergency Management or the Commissioner's Designee

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## Staff:

Danielle Fox  
Karen Nadeau-Drillen  
Office of Policy and Legal Analysis

