



A Strategic Roadmap to Enhance  
the Role and Impact of the

NEW YORK STATE  
DIVISION OF

# VETERANS' SERVICES



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## PROJECT OVERVIEW

New York State's Department of Veterans' Services (DVS) should play a critical role in providing services and care to New York's veterans. Working alongside local veteran serving organizations, county veteran service officers, the U.S. Department of Veterans Affairs (VA) and other federal agencies, the New York State DVS is positioned to connect providers and align efforts that serve and support veterans across the Empire State.



Across the nation, state-level departments of veterans affairs (DVAs) most often provide a specific set of services: benefits and claims assistance, cemetery and memorial services, and veteran homes administration for the elderly. However, each state government varies in what they can and should offer, in part, driven by the existing community-based services and supports already afforded to veterans locally. For example, many states offer a wide variety of services from employment to mental health programming. Others act as central navigators to the array of services other providers offer. To achieve the highest quality of life for New York State's veterans, the DVS should draw on these strategies and practices.

In our companion report, *Innovation in State Level Veteran Services*, we explore the conditions that enable DVA success, how innovative practices have been implemented, and which states serve as leaders in the field of state veteran service delivery. A common trend is that DVA leadership may not always be aware of policy or service delivery innovations occurring in other states. New York State is not immune to this challenge and will benefit from an understanding of what other states are doing that could be adapted for success in New York.

Accordingly, this report draws upon the learnings from our national, cross-state comparative study of state-level veterans agencies, and applies them within the context of New York State. Throughout this report we showcase what other states have done with the intent to arm NYS leaders with 'the art of the possible.' Each section provides an analysis of national trends and identifies how New York State compares to those trends. At the end of each section another state policy or practice is presented as a potential model for New York State's to emulate.

First, we assess New York State on a set of key organizational criteria that enable DVS success. Second, we compare NYS budget trends against national figures, highlighting opportunity for improvement in resource allocation towards veteran services. Third, New York State's veterans service delivery innovations, perceptions of veteran needs, and other service delivery trends are compared to national trends from a survey of state directors of DVAs. This offers several creative ideas for new programmatic alignment that could enhance New York State DVS's reach and impact across the state.

Our concluding strategic roadmap draws on multiple data sources. Major data collection and analysis efforts included the following:

- state-by-state review of public information and data on state veterans agencies
- national survey of state and territory directors
- in-depth analysis of 82 state-level innovative practices documented since 2014
- 10 case highlights of state veterans agencies—supported through in-depth interviews; and
- 2 public data visualizations representing operational trends

## KEY FINDINGS

This report analyzes New York’s Department of Veterans’ Services across three core areas critical to mission effectiveness: organizational structure, financial stability, and service delivery innovation. Below is a summary of our key findings within each category.

As a basis for comparison, ten high-performing state-level veterans agencies were identified through a national landscape assessment involving government data analysis, a survey of state agency leaders, and in-depth interviews with experts in the field and veterans community. Upon further examination of these leading agencies, we identified eight criteria related to organizational structure (including political standing) and financial stability contributing to their success. We then applied these criteria as a basis for further analysis within New York State.

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### ORGANIZATIONAL STRUCTURE AND POLITICAL STANDING

- **Leadership Continuity.** A majority of leading states DVAs had steady leadership with directors in place for three or more years. By comparison, New York State recently appointed a new agency director after more than a year of interim leadership.
- **Leadership Diversity of Work Experience.** In most leading states, the director had civilian work experience outside of the DVA and the military. New York State’s newly appointed director has diverse work experience beyond state government and the military.
- **Independence.** DVA independence as a standalone agency in state government—as opposed to being absorbed into a broader department such as Military Affairs—serves as a critical enabler to effectiveness. New York State DVS is an independent agency.
- **Political Standing (A).** Most leading states include a seat for the director in the Governor’s cabinet. So too, the Director of New York State holds a seat on the Governor’s cabinet.
- **Political Standing (B).** In addition, many DVA directors of leading states also report directly to the Governor. Here, New York State does not have such a reporting relationship.
- **Federal Funding Stability.** A majority of leading DVAs maintained steady streams of federal funding (<10% decline in four of the past five years). By comparison, New York State has not maintained such stability in recent years.
- **State General Funds Stability.** Similar to the federal funding category, all 10 leading DVAs have maintained stability of state general funds (<10% decrease each year four out of the past five years). New York State has not maintained such stability of state general funds.
- **State Special Fund Stability.** Most leading state DVAs have also maintained stability of special funds (<10% decrease each year four out of the past five years). Again, New York State has not maintained such stability of state specials funds.

**State Exemplar.** The State of Ohio is an exemplar case in organizational realignment. Ohio implemented a major DVA reorganization, which provided it greater influence and scope of responsibility in meeting the needs of its veterans.

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### FINANCIAL STABILITY

As the eight criteria above suggest, a DVA’s budget has an obvious impact on its effectiveness and potential for impact. National trends across state budgets showed:

- State spending per veteran varies greatly depending on a state’s size and veteran population. Even so, spending per veteran is not the only criteria that matters, as some highly effective states with more efficient programming spend less per veteran, despite larger populations.
- While states that combine their departments of veterans affairs and military affairs have larger budgets overall, it does not always follow that veteran services receive any more relative funding as a result.
- Diverse funding sources are crucial for DVA success; they enable reliability and consistency in programming.
- Reliable funding is equally important, as it allows leaders to conduct long-term planning and set priorities that align service delivery with other state service providers

New York State has opportunity to improve its financial stability consistent with the national exemplars:

- New York State spends much less per veteran (\$26) compared to the national average of independent DVAs (\$216).
- New York State’s veterans budget sources are not diversified. The bulk of its funding is sources from the general appropriation fund, with small amount of federal funds, suggesting opportunity for greater consistency, much less overall growth.

**State Exemplar.** Texas was identified as a model for New York state to adopt as it spends about the same per veteran while achieving a broad reach through innovative approaches to cost sharing for local services in the face of budget constraints.

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## SERVICE DELIVERY

Traditionally, DVAs exist to provide three core services: benefits and claims assistance, cemetery and memorial management, and veterans homes. New York State DVS only provides benefits and claims assistance, with cemeteries managed by the federal government and veterans homes managed by the New York State Department Of Health and Human Services. To expand these services, New York State can learn from national trends in DVA service delivery including:

- Greater coordination with other state government and nongovernmental service providers across the state to align service priorities and help veterans more efficiently navigate services as well as broaden the scope of services available
- Specialized and tailored communications and outreach strategies
- Strategic planning that engages other New York State service providers to develop a long-term strategy aligned with other stakeholders in the state
- Greater lesson drawing and adoption of innovative practices from other states by engaging nationally in conversations around best practices

**State Exemplar.** Michigan’s Military and Veterans Affairs Agency was proposed as an exemplar state of innovative service delivery for New York State to follow. Michigan’s strategy to become a coordinating body of services for the state allowed veterans to better navigate all benefits and programs.

# A SEVEN-POINT MANAGEMENT AGENDA FOR NEW YORK STATE

The final section of this roadmap summarizes a seven-point agenda providing the New York State DVS a path to even greater reach and impact on those they serve. The agenda reflects lessons drawn from across our assessment of the DVA landscape—the ways and means by which DVAs are organized, resourced, and positioned within their state’s system of veterans services and support—along with insights from our survey of DVA leaders and in-depth analysis of leading DVAs’ core attributes, enablers of success, and innovative practices. Each recommendation includes clear action steps and a state exemplar to look to for guidance.

**1. EMPOWER THE DIRECTOR OF THE DVS THROUGH ENGAGEMENT WITH THE GOVERNOR, STATE LEGISLATURE, AND POLICYMAKERS.** To enhance its effectiveness, the director of the New York State Division of Veterans' Services should have a direct reporting line to the governor and be afforded regular opportunities to engage the governor’s staff, state lawmakers, and other leaders on veterans’ policy and priorities. Subsequently, the state legislature can expect consistent guidance on effective policy strategy in governance from the Director of the DVS who is the state’s principal expert on state service delivery to veterans. The DVS can alert the legislature to problems and gaps in service delivery that can be solved through well-directed lawmaking. All the necessary steps should be taken to afford the director a direct reporting line to the governor, whether an executive order or an act of the state legislature. Leadership should remain consistent for a significant amount of time to allow for full policy implementation.

**2. PURSUE ADEQUATE, PREDICTABLE, AND DIVERSIFIED FUNDING SOURCES.** To enhance its effectiveness, the New York Division of Veterans' Services must receive adequate state funding and, where necessary, explore other funding opportunities (e.g., through philanthropic contributions or grants) to support new, expanded, or enhanced services alongside existing community-based services and care. Further, states with similarly sized veteran populations such as Ohio, Virginia, and Michigan have \$90 million budgets. The DVS should see an increase in resources to a range of \$40 to \$90 million to include funding for initiatives such as an updated veterans needs assessment, development of public-private partnerships in communities, adoption of programmatic enhancement and innovation, and the development of a tailored communications strategy. Currently, the New York State DVS budget is around \$20 million. Additionally—either through executive order or through legislative mandate—the DVS should have greater control of state funding and its operating budget. Currently much of funding administered by the DVS is pass-through aid to localities.

**3. ALIGN DVS ROLES, MISSIONS, AND RESPONSIBILITIES WITH STAKEHOLDERS ACROSS NEW YORK STATE.** To enhance its effectiveness, the New York State Division of Veterans' Services should conduct an immediate, comprehensive review of its roles, missions, and responsibilities vis-à-vis other actors across the state. Based on this review, it should take actions within its existing authority to more appropriately allocate its efforts in relation to its partners and where necessary, make recommendations to the governor and state legislature for any changes that would require an executive order or new legislation. More specifically, the state should relinquish control of benefits and claims assistance to county veteran service officers (CVSOs). The state should still maintain its presence at regional offices and work through CVSOs, but such a move to remove themselves from direct benefits advisory would reduce fragmentation. Finally, the DVS should improve its overall communication with CVSOs. CVSOs are often a point of contact for veterans asking about filed claims, even though the state takes over the case and has the needed information. Better communication between the parties will increase transparency about claims for the veteran filer.

**4. IMPROVED CROSS-SECTOR/AGENCY COLLABORATION AND COMMUNITY COORDINATION.** To enhance its effectiveness, the New York State Division of Veterans' Services should establish itself as a care coordinating body, potentially modeled after Michigan’s Veteran Community Action Team (VCAT) program. Enabled by a referral technology, New York State’s DVS would convene and train stakeholders and providers across the state to make and receive referrals. The DVS could serve as a statewide coordinator, in conjunction with regional and local network hubs of service providers, by staffing coordination centers to triage veteran needs, and supporting performance monitoring and analytic capability to ensure program effectiveness and efficiency.

**5. ACQUIRE A CURRENT UNDERSTANDING OF NEW YORK'S VETERANS' AND PROVIDERS' NEEDS.** To enhance its effectiveness, the New York State Division of Veterans' Services should devote resources to conduct an updated statewide needs assessment that covers the needs of the veteran and military connected community as well as community providers. Such a study could be jointly supported with philanthropy as a means to inform and align programmatic, resource allocation, and engagement strategies for not only New York State DVS, but also the full range of actors delivering services and care across the state.

**6. STRATEGIC PLANNING, IMPLEMENTATION, AND PERFORMANCE MANAGEMENT.** To enhance its impact, the New York State Division of Veterans' Services should prepare an updated strategic plan with goals, metrics, and specification of the parties that will be responsible for progress on these goals. This plan should look at least five years into the future and be informed by engagement with veteran-serving stakeholders in New York. The plan should be publicly accessible so that stakeholders across the state—from state and local partners to individual veterans—understand the division's activities and multi-year commitments.

**7. DEVELOP A TAILORED COMMUNICATIONS AND OUTREACH STRATEGY.** The New York State Division of Veterans' Services should revisit its communications and outreach activities, make adjustments where necessary to expand communications across additional platforms, and ensure its communication and outreach activities are tailored to the specific media channels and platforms that different demographic groups (e.g., older vs. younger veterans) are most likely to use.





## INTRODUCTION: A CASE FOR ACTION IN NEW YORK STATE



The U.S. states and territories play a critical role in caring for America’s veterans, transitioning service members, and their families. Every state, along with the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the Virgin Islands operates a veterans’ affairs agency, either as a stand-alone agency or as part of a larger organization (e.g., a department of military and veterans affairs). These agencies—hereafter referred to as state veteran agencies (or DVAs)—are dedicated to helping veterans access earned benefits and services, as well as operating state veterans’ cemeteries and veterans’ homes. In addition, they provide or act as navigators to an array of other services, including behavioral and mental health, educational support, employment and training, housing and homelessness, legal assistance, and opportunities for business ownership, among others.

While sharing a number of common responsibilities, DVAs vary considerably in their specific roles and missions, leadership arrangements, and levels of resources. Moreover, in their capacity as “laboratories of democracy,” the states have adopted a wide variety of strategies for programming, outreach, and coordination of their DVAs’ efforts with other state agencies, as well as with the U.S. Department of Veterans Affairs (VA) and other partners at the national and community level.

Such significant diversity across states creates many opportunities for experimentation and learning. However, state directors may not always be aware of policy and program innovations undertaken by their counterparts. These knowledge gaps threaten to inhibit the diffusion and uptake of promising new approaches to supporting the veteran and military-connected community. They may also impede collaboration between the states, detract from nationwide continuity and consistency in services, and hinder efforts to foster a vibrant community of practice where states can come together on issues of mutual concern.

New York State is not immune to these challenges. New York State is home to nearly 800,000 veterans—approximately five percent of all state residents.<sup>1</sup> Today, a key imperative to improve veteran and military family well-being lies within improving the timely access and navigation to existing services and care. State veterans agencies can play a central and impactful role in this regard. While this challenge traverses communities across the country, for New York veterans and family members specifically, a “shared perception that it is extremely difficult to navigate the existing system of benefits and services both VA and non-VA providers” remains.<sup>2</sup> At the same time, the New York State Division of Veterans’ Services (DVS) has also faced recent challenges with leadership continuity, performance measurement, and coordination with county veteran agencies.<sup>3</sup>

In light of this, the New York State DVS has an opportunity to play a leading and critical role to serve and influence positive outcomes for the long-term well-being of New York veterans and their families. This influence, however, is predicated on a robust DVS, well positioned and resourced, and led to promote greater alignment and coordination of services across sectors and in communities.

The first step toward realizing the full promise of New York State’s DVS is to understand its opportunities for improvement. To this end, this report lays out a comprehensive assessment of the New York State DVS, comparing it to peer state agencies, and drawing on other state models for ideas and motivation.

This report draws upon an extensive national, cross-state comparative study of state-level veterans agencies and service delivery innovations. This involved a multi-method approach to assemble diverse, independent sources of original and secondary data pertaining to state veterans agencies’ operations, budgets, and leading practices, as well as a national survey of state directors.<sup>4</sup>

From this research, the report focuses and is organized around three core factors contributing to state agency success: organizational structure, financial stability, and service delivery innovation. The sections that follow outline each contributing factor and provide examples from other states. Within each category, we identify areas of opportunity for improvement in New York State, and present a specific state as a potential model from which New York State leaders could explore further as a guide. The report concludes with a seven point management agenda for leaders to consider pursuing as a means of enhancing DVS’s statewide reach and impact.



JIM  
VETERAN

A note of clarification: the analysis in this report focuses solely on the activity for the state veteran agency in New York. It does not explore other state activity that may serve veterans carried out by other agencies or through the governor's office, for example, reduced fee hunting and fishing licenses carried out by the Department of Environmental Conservation. Centering our analysis on the New York State DVS alone was purposeful as they present the most logical answer to the question of which agency should serve a leading role in state-level veteran policy implementation.



# SNAPSHOT

## NEW YORK STATE DIVISION OF VETERANS' SERVICES (DVS)



YEAR ESTABLISHED<sup>5</sup>  
**1945**

DVS serves New York State veteran in seven service areas: benefits and claims assistance, education, employment, financial compensation, healthcare, honoring veterans, and housing. A majority of its activities are centered on providing New York veterans free benefits advising along with assistance to secure necessary documentation to file federal, state, and local benefits claims.

### NEW YORK STATE VETERAN POPULATION

TOTAL VETERANS → 776,522

A relatively large number (22%) live in rural areas.

► 91.8% MALE ► 8.2% FEMALE



### ERA OF SERVICE

73.8% OF NEW YORK'S VETERANS ARE FROM WARTIME ERAS

32.2% Vietnam

9.4% Korean War

29.2% Gulf War & Post 9/11

4.2% World War II

### AGE

18-34 YRS.

35-54 YRS.

55+ YRS.



### RACE



ETHNICITY: 8.4% HISPANIC/LATINO

### BUDGET AND FINANCES



New York State's DVS budget  
**\$19,281,000** (in 2015)  
**\$20,445,000** (in 2019)

Much of the funding comes from general funds and some federal funds.

### LEADERSHIP



### MEMBER OF GOVERNOR'S CABINET

The department is led by a recently appointed Director, James McDonough, (Colonel, U.S Army, Retired), and two deputies, after more than a year of operation under interim leadership.

DVS LEADERS DO NOT REPORT DIRECTLY TO GOVERNOR

Part of Another State Agency? → NO

### OTHER SERVICES OF DVS



- Employment related programs such as "Hire-a-Vet Credit," through which businesses can earn financial credits for hiring veterans
- Offers scholarships and tuition awards towards college and graduate degrees.
- Works with local VA centers to conduct outreach to promote healthcare delivery throughout communities across the state.

SOURCE: VA Veteran Population Projection Model, VA Geographic Distribution of Expenditures, VA Annual Benefits Report, U.S. Census Bureau, American Community Survey

# KEY FACTOR #1: ORGANIZATIONAL STRUCTURE

State DVAs vary considerably in size, complexity, and in their position within state government. These organizational structures ultimately matter because they can influence the DVA's service delivery, resource and budget allocations, and representation of veterans' issues to governors.

For the purposes of this study, organizational structures of DVAs can be broken down further along two dimensions: internal and external. Internal structure refers to the organizational structure of the DVA itself. How the agency structures its leadership hierarchy, whether it has a board of advisors, and how its service offerings are organized all matters of internal structure. Conversely, external structure pertains to where and how the DVA is situated within the broader bureaucracy of the state government. Both of these features, internal and external structure, shape how the DVA interacts with the governor and executive team, other state agencies, the legislature, as well as federal and local community stakeholders.

The figure below presents 10 high performing DVAs and New York State benchmarked by eight criteria critical to DVA success. These criteria are explored further in this section, but this table introduces an analytical framework for understanding conditions for success. The criteria are:

- **Leadership Continuity.** The Director has been in their position for three or more years.
- **Diversity of Work Experience.** The Director had civilian work experience outside of the DVA.
- **Independence.** The DVA is a standalone agency not absorbed into a broader department such as Military Affairs.
- **Political Engagement A.** The Director sits on the Governor's cabinet.
- **Political Engagement B.** The Director reports directly to the Governor.
- **Federal Funding Stability.** Federal funding to the DVA has decreased each year by no more than 10% in four of the past five years.
- **State General Funds Stability.** State General Funds received by the DVA have decreased by no more than 10% each year four out of the past five years.
- **State Special Fund Stability.** State Special Funds received by the DVA have decreased by no more than 10% each year four out of the past five years.

**FIGURE 1: NEW YORK STATE BENCHMARKED AGAINST SUCCESSFUL STATE DVAS BY ORGANIZATIONAL ATTRIBUTE**

	CONTINUITY	DIVERSITY OF WORK EXPERIENCE	FEDERAL FUNDING STABILITY	INDEPENDENCE DVA	POLITICAL ENGAGEMENT		STATE GENERAL FUND STABILITY	STATE SPECIAL FUND STABILITY
	Director Tenure 3 Years or More	Director Civilian Career Experience Outside DVA	Less than 10% Year-Over-Year Decline in Federal Funding in 4 of last 5 yrs.	Stand Alone Agency	Director in Governor's Cabinet	Director Reports to Governor	Growth or Less than 10% Year-Over-Year Decline in State General Funds in 4 of last 5 yrs.	Growth or Less than 10% Year-Over-Year Decline in State Special Funds in 4 of last 5 yrs.
New York	X	✓	X	✓	✓	X	X	X
Washington	✓	✓	✓	✓	✓	✓	✓	✓
Virginia	✓	✓	✓	X	X	X	✓	✓
Texas	✓	✓	✓	✓	X	X	✓	X
Tennessee	✓	✓	✓	✓	✓	✓	✓	✓
Ohio	✓	✓	✓	X	✓	✓	✓	✓
North Carolina	X	✓	X	✓	✓	X	✓	✓
Minnesota	✓	✓	X	✓	✓	✓	✓	✓
Michigan	X	✓	✓	X	✓	✓	✓	X
Florida	X	X	X	✓	✓	✓	✓	✓
Alaska	✓	✓	✓	X	X	✓	✓	X

Peers that are high performing have many of these characteristics while New York State possesses only three of them, which suggests potential areas for improvement. North Carolina has four criteria and no other state has less than five. Washington State meets all of the criteria. Each of the organizational attributes explored below are important pieces of high-performing DVAs and are often lacking in lower performing ones.

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## INTERNAL STRUCTURE

### Boards of Advisors

**New York State.** The New York State DVS has a board of advisors that works with the department. This positively affects the DVS's ability to leverage relationships with other veteran service leaders across the state and better coordinate programs and policy. Moreover, the board offers the DVS an opportunity to connect with VSOs, other nonprofits and even companies that play a role in improving the lives of veterans in the state. However, at this time, no information is available with regard to board's membership make-up, how often it meets, or how well it functions.

**National trends.** Advisory boards in both North Carolina (North Carolina State Veterans Commission) and Ohio (Ohio Department of Veterans Services Advisory Committee) represent a diverse set of veteran serving organizations (VSOs) like the American Legion and the Veterans of Foreign Wars to organizations representing female, African American, and religious veterans (e.g., Catholic War Veterans of the U.S.A.). Diverse boards like the three above can both solidify and engage veteran support through the public (via representation from VSOs) and leverage varying perspectives among veteran leaders within the state to improve the DVA's service delivery and operational effectiveness.

### Internal Leadership

**New York State.** New York State recently appointed its new Director after over a year of being without political leadership. With new DVS leadership in place, it has an opportunity to develop political support to carry out new and innovative programs. The department has two deputy directors, but it is not clear how they are aligned to programmatic or regional responsibilities. This will need closer examination if New York State plans to expand or refine its service offerings for veterans.

**National trends.** The more sophisticated and extensive the programming in a state, the more staff and directors typically exist to implement policy. For example, 16 directors manage dozens of programs and offices within Texas' Veterans Commission, below the executive and deputy directors. On the other hand, DVAs in Vermont and West Virginia have small staffs, thus reducing the need for multi-layered hierarchies. If New York State hopes to be a leader in offering robust state programs to their veterans, they should have a well-structured hierarchy of leadership with clearly aligned roles and responsibilities.

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## EXTERNAL STRUCTURE

Each state veterans agency fits differently within its broader state bureaucracy. Some are independent agencies, some combine with military affairs (i.e., adjacent to the state National Guard), and others rest under the umbrella of another agency altogether. This factor affects DVA operations within state government and their overall effectiveness.

### Agency Independence

**New York State.** The New York State DVS is a standalone agency with its own director. This is one criteria in which New York State has the potential to be on par with other high performing state veteran agencies. With a director recently appointed, the DVS is now a standalone agency with political authority to pursue decision-making consistent with other high performing state agencies.

**National trends.** Most DVAs (36) are stand-alone entities within their state governments with their own director or secretary providing leadership and decision-making authority for the entire department, including deputy directors and program directors. Agency independence has profound impacts on how DVAs deliver services and connect with veterans in their communities. During our study, one DVA director noted that in states where the DVA is a stand-alone agency, the DVA can

provide services in an “unfettered way.” If the DVA is combined under military affairs (e.g., Military and Veteran Affairs, or DMVA), the National Guard receives organizational priority. Under a DMVA, some DVA directors worry that priorities may not align between the state’s senior military commander (The Adjutant General, or TAG) and the DVA director. One DVA official from Tennessee noted in an interview that:

**“That distinction is important...a military affairs organization has an economic engine viewpoint, whereas a veterans affairs organization may take a benefits approach to how they do business. That’s where their goals are different.”<sup>6</sup>**

Even though multiple state directors reported cross-agency collaboration in their states, some noted that these relationships are more difficult to maintain when a DVA has limited decision making authority or resourcing discretion as a subordinate agency within a DMVA. But even for states whose DVA director reports to TAG, collaboration and goal alignment between leaders remain critical to maximize the DMVA’s impact on its veterans within the state, as a different DVA director recommended.

### **Membership on the Governor’s Cabinet**

**New York State.** New York State’s Governor’s cabinet is sometimes opaque. A New York State survey response to our national survey of state DVAs indicated that the Director of the DVS sits on the governor’s cabinet. Sitting on the Governor’s cabinet is a strategic advantage for the New York State DVS. On cabinets, DVAs frequently have the opportunity to be centrally engaged in the operations of the state government. The Governor’s cabinet will also provide New York State’s DVS the platform it needs to help inform legislation that improve services for veterans in New York State. Finally, it gives a unique opportunity to build momentum for cross-governmental initiatives by engaging with other state departmental directors.

**National trends.** Even though the majority of DVAs are standalone agencies (36), almost half (24) of all DVAs are not a part of the governor’s Cabinet. While some of these DVAs may be situated within a larger DMVA, thus seceding Cabinet representation to TAG or high-ranking DMVA official, representation in Cabinets may also reflect the policy areas that affect the most citizens residing in the state. For example, while the DVA is a stand-alone, state-level agency in Alabama, North Dakota, Oregon, South Carolina, and Texas, it is not included on the governor’s Cabinet. Nineteen states have this configuration, particularly Southeastern, Mountain West, and New England states.

Membership and representation in the governor’s Cabinet is an opportunity for DVAs to engage with high-level state leadership on veterans’ issues to secure financial, administrative, and executive support for their programs and services. DVA directors and program officials from Alaska and North Carolina noted that being members of the Cabinet enables them organizationally to be the primary player in state government on veterans’ issues.<sup>7</sup>

The benefits of membership do not only entail having the ear of the governor; DVAs can also use their presence within Cabinets to engage with other state agencies. As DVA officials from Virginia noted, being on the Cabinet can encourage cross-agency collaboration and veteran-centric programming in these other agencies, and build greater support within the executive branch for the DVA’s programs and services.<sup>8</sup> Adequate political buy-in is required in any state; however, New York State’s DVS has an opportunity to galvanize buy-in at the Governor’s level to promote more innovation in veteran service delivery across the state.

In addition to the benefits of being on the Governor’s cabinet, it is as important for DVAs to connect and work with state legislatures to share their mission and goals with those who will craft legislation and budgets. A DVA official from Washington State noted that having these productive and informed relations with state legislators increases the probability of support—legislative, budgetary, and publicity—and understanding of the DVA’s programs and services.<sup>9</sup>

### **Reporting Line to the Governor**

**New York State.** The New York State DVS sits on the Governor’s Cabinet, but they do not report directly to the Governor. This signifies a missed opportunity on behalf of the state to elevate the DVS’s position within the Governor’s slate of priorities. New York State reported that budget constraints was the main issue facing the department. Having a direct line to the Governor

will enhance the DVS's ability to fight for resources and call attention to their successes. While the DVS is moving in the right direction by appointing a director, paramount to having leadership is having leadership with political power with a direct line to the Governor.

**National trends.** Finally, accountability standards and reporting channels are critical to the success of DVAs around the country. Unlike cabinet membership and individual department characteristics, there is great variety in the accountability and reporting mechanisms for these agencies. Since most DVAs are standalone state agencies, they report directly to the governor and are held accountable within the executive branch (34). This largely follows the configuration of DVAs as independent departments or as agencies within parent agencies (e.g., DMVAs).

DVA officials remark that access to the governor through formal reporting channels helps ensure both accountability and awareness of DVA programs. DVA officials from Virginia indicate the importance of open communication, open trust, and ongoing commitment to the mission of the agency, both within the agency and in the wider state government. A DVA official from Virginia noted that to marshal support for the DVA's mission, programs, and services, it's critical that states bring the governor's team on board to provide executive support and ideally become a champion of the DVA's agenda and positive impacts on veterans' lives.<sup>10</sup>

Governors also use these reporting channels to ensure that their states' agencies utilize state resources in the most cost-effective ways. Given that many DVAs have small budgets compared to other state agencies, DVA staffs are particularly sensitive to using their limited resources to reach the most veterans possible in providing assistance, services, and connecting them to community organizations and the federal Department of Veterans Affairs. DVA staff and directors can use their reporting channels to build support for their programs and to highlight their cost-effective operating models.

Other states offer ways in which the DVS's impact can be improved. Georgia and Mississippi have unusual reporting and accountability hierarchies, in part because neither directors are accountable to the governor. Georgia's governor appoints seven members of the State Veterans Service Board (SVSB), subject to confirmation by the State Senate. The members of the SVSB then appoint the commissioner of the Department of Veterans Service, thereby exerting control over DVS policy. Through this hierarchical design, the commissioner reports to the board instead of the governor. Mississippi's State Veterans Affairs Board (MSVAB) is structured similarly to Georgia's SVSB, and the board appoints the executive director of the MSVAB. In states like these, DVA directors must develop other methods to work with members of the state legislature on appropriations and operational support for the programs and services they provide to their states' veteran population.

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## ORGANIZATIONAL MODEL FOR NEW YORK STATE: OHIO

Ohio offers a unique model around which New York State can tailor its organizational structure. This section outlines the key pieces of Ohio's model that are innovative and successful, and connects those pieces with opportunities for improvement on behalf of New York State.



### Ohio Department of Veterans Services

New York State has the potential to fully maximize the way they deliver services to veterans across the state. Looking to other states as a guide will help set the road map for improving how the organization of the DVA functions within the broader state government. One such state that will give serious insight into revitalizing the DVA's role in veteran service delivery is Ohio.

In 2008, the Ohio Legislature established the Ohio Department of Veterans Services (ODVS). This was a result of a 2006 study by the Institute for Defense Analyses (IDA) ranking Ohio 50th of 50 in per capita compensation the state's veterans received from the VA and recommendations from a panel of veteran service organizations that Governor Ted Strickland organized in response to the study. The ODVS replaced the Governor's Office of Veterans Affairs and assumed its responsibilities for assisting Ohio's veterans and their families in accessing benefits and services. ODVS also oversees the state's two veterans' homes and serves as the state approving agency evaluating education programs for GI Bill benefits.

Similar to departments of veterans' affairs in other exemplar states, ODVS has benefited from strong leadership from the highest levels of state government. Such is evident in the department's founding. In response to clear evidence of lagging state performance, Gov. Strickland, state lawmakers, and stakeholders in Ohio's veterans' services community responded decisively. IDA released the results of its study ranking Ohio last among the 50 states in per capita VA compensation in December 2006. In May 2007, Strickland signed an executive order creating a Veterans Study Council to develop recommendations for a new



state department of veterans' services. This action provided the political momentum necessary to bring the idea of a new state department—a policy for which Ohio's VSO community had been advocating for several years without action from state officials—to fruition.

The study council was organized in four working groups focused on reviewing current services provided to Ohio's veterans and their families; identifying areas to expand or remove services based on veterans' expected needs; determining ways to better utilize available VA resources and more effectively communicate with the VA; and evaluating how other states structured their departments of veterans affairs. The order council was comprised of a cross-section of stakeholders involved in serving veterans in Ohio, including members of both the Ohio Senate and Ohio House of Representatives, as well as representatives from veteran service organizations, the governor's office, the state adjutant general, other state agency partners, and county veteran service officers. The council included individuals representing diverse parts of the state veteran population, such as Jewish war veterans and women veterans. Efforts to achieve such broad representation contributed to consensus building and buy-in to the council's recommendations.

The council unanimously recommended the creation of a new department of veterans services. Critically, the council recommended the department be led by a cabinet-level director appointed by the governor with the advice and consent of the State Senate. The Legislature adopted this and other council recommendations in a bill Strickland signed in May 2008. The department's first director Strickland appointed Bill Hartnett, a Korean War veteran with experience as a teacher, school administrator, Chamber of Commerce leader, and representative in the state House of Representatives. Hartnett served for the duration of Strickland's term. After his election in 2011, Governor John Kasich appointed Air Force veteran and Vietnam POW Thomas Moe to succeed Hartnett. Moe served from 2011-2013, followed by Army veterans Timothy Gorrell (2013-2015) and Chip Tansill (2016-present).

### Lessons for New York State

In addition to establishing new state veterans agency, the Ohio law outlines new roles and responsibilities, and defines the scope of functions provided by the ODVS. A similar law in New York State may revitalize DVS's role in delivering services to veterans. It would elevate the Director's status to one of high-priority within the governor's cabinet. It would expand the otherwise limited scope of services the DVA currently offers to better reflect the needs of the veteran population. Many services are delivered to veterans on behalf of the state that are not administered by the DVS. A reorganization like this would centralize these services under the roof of one commissioner. Finally, it would establish a connection between legislative action and veteran service delivery. This connection, and the connection to the Governor, will give the New York State DVS a significant platform to inform policy decisions at the highest level.

This is especially relevant for New York State as there are a number of veteran-focused state programs that are delivered across different state agencies. For example, the state's veterans homes are administered by the Department of Health and Human Services. Further, there are a number of educational benefits that are administered through the Department of Education. A clear leader is required for proper coordination and alignment of veteran-focused policy. The state DVS presents the clear choice to be this leader. This type of legislation should be considered by the New York State Legislature as it could align all veteran services under one agency and improve service delivery across the state.

The Ohio law presents several potential reorganization options for New York State to consider in revamping how the DVS operates within the state government. Specifically, the law outlines the below key steps for redesigning the state's DVS:

- Creates the Department of Veterans Services and the Director of Veterans Services
- Transfers the duties of the Governor's Office of Veterans Affairs and the Director of the Governor's Office of Veterans Affairs to the Department and its Director.
- Transfers the duties of the Ohio Veterans' Home Agency and its Board of Trustees to the Department and its Director.
- Places the Ohio War Orphans Scholarship Board under the Department.
- Creates additional functions for the Department and the Director relating to various veterans' issues and to county veterans service commissions and county veterans service officers.
- Requires a state agency or instrumentality, an agency or instrumentality of a political subdivision, or a private entity to report a person's veteran status to the Director when the agency, instrumentality, or entity finds out this information.<sup>11</sup>

## KEY FACTOR #2: FINANCIAL STABILITY

The financial resource support that DVAs receive from state and federal sources are another critical factor to their overall success. Certainly, overall funding levels count. Yet, also important are aspects such as year-over-year stability and growth, diversity of funding sources, and how agencies maximize state resources vis-à-vis federal and local funding sources and initiatives in such that they align and complement to achieve greatest collective impact.

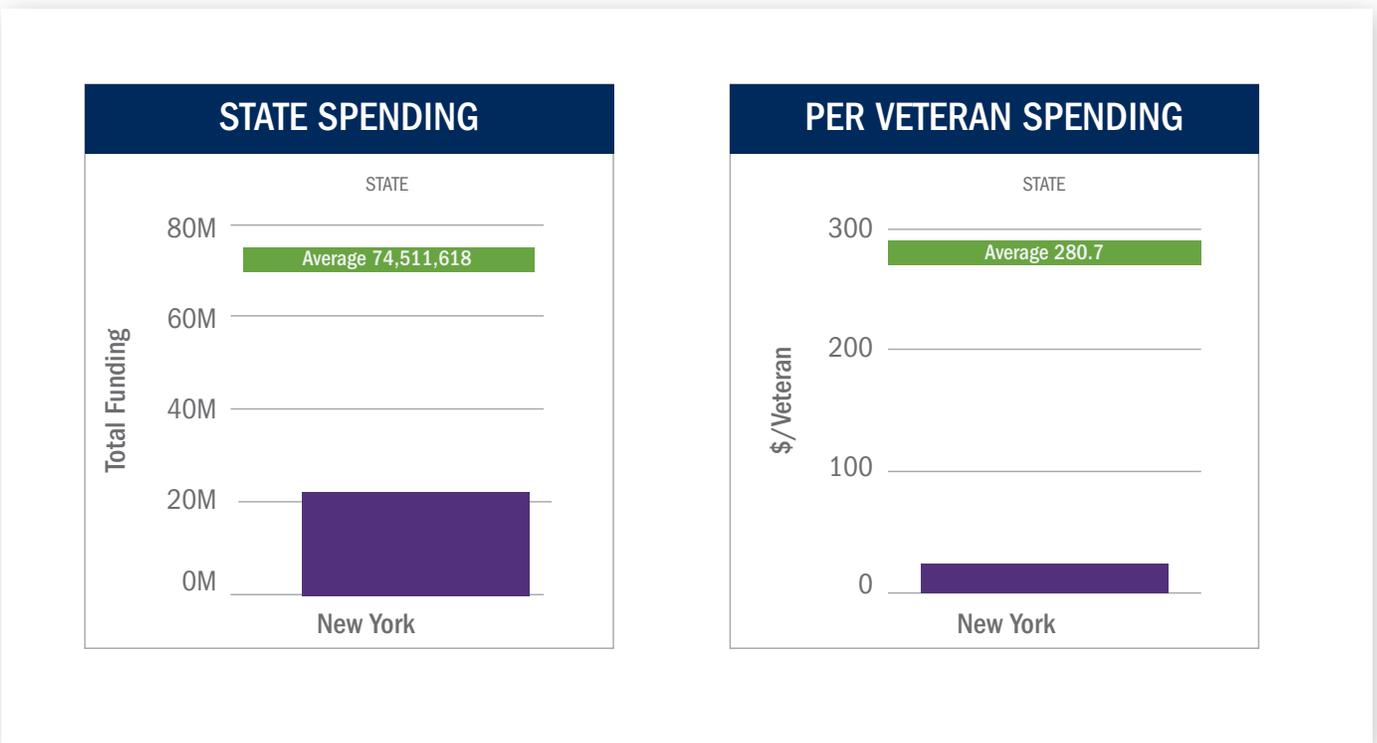
### STATE SPENDING LEVELS ON VETERANS

**New York State.** The New York State DVS budget sits at just over \$20 million for Fiscal Year (FY) 2019. This is well below the national average DVA budget of about \$74.5 million. Note that the average DVA budget includes some states whose budgets are combined with other state agencies such as military affairs (i.e., state National Guard). In many of these states, the reported budget figure does not adequately reflect the dollar figures spent on veteran-specific programming. However, this national average is still consistent for states with independent DVAs.

In addition, the chart in Figure 3 depicts New York's DVS spending per veteran compared to other high performing DVAs. While many of these DVAs spend below the national DVA average, nearly all spend more money per veteran than New York State. New York State spends less per veteran at about \$26 than the national average DVA at \$280, as well as the national average of independent DVAs at \$216.

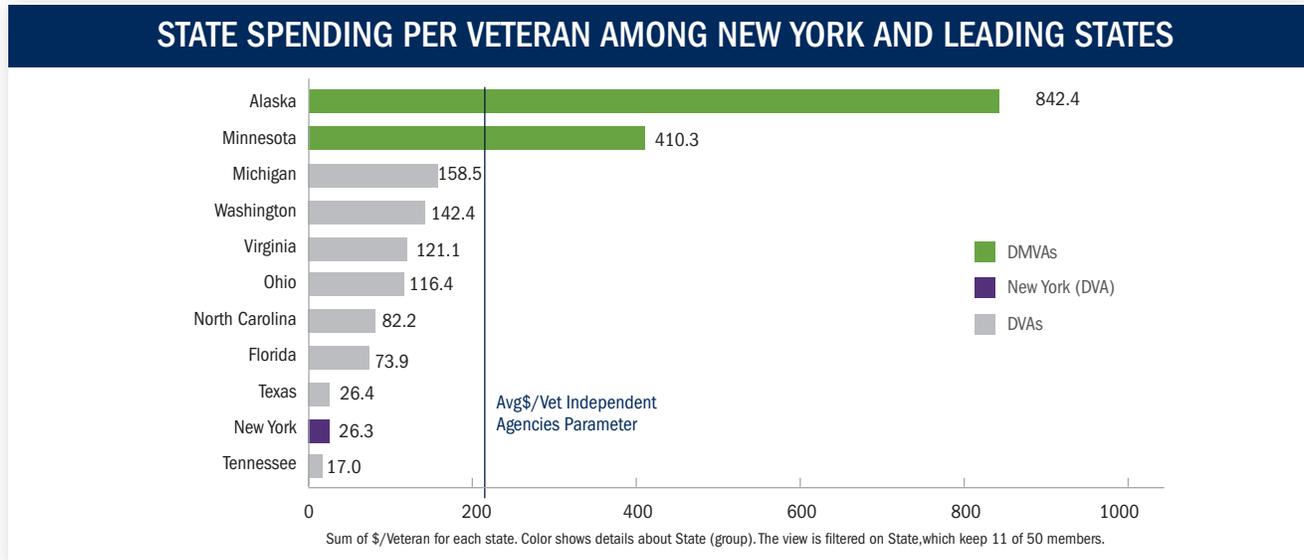
These figures clearly indicate that a budget increase is required to bring New York State on par with its leading peers. Even so, it also is important to recognize that many states provide high-level, innovative practices with budgets that fall below the national state average. State DVAs appear most effective when they combine and complement resources with federal and local actors supporting veterans across the state.

FIGURE 2: NEW YORK STATE DVS SPENDING OVERALL AND PER VETERAN (FY19)



**FIGURE 3: SPENDING PER VETERAN AMONG LEADING STATES\* IN FY19**

\*NOTE: ALASKA AND MINNESOTA OPERATE COMBINED DEPARTMENTS OF MILITARY AND VETERANS AFFAIRS (DMVAs)



**National Trends.** As states have expanded programs and engage more frequently in collaboration with local governments and community organizations, resource and budget constraints push DVAs to make choices around the cost-effectiveness and impact their of programming. We made every effort to assemble the most accurate data possible on DVA budgets, through our presentation of the financial picture on a state-to-state basis may not be fully complete, given limitations in some states' financial reporting. To understand how DVAs are resourced and their spending history, we analyzed each DVA's budget data and nationwide trends of DVA funding from FY 2015 to FY 2019.

Funding for state DVAs is diverse and complex, and comprised of dozens of state and federal sources to support DVA operations (which also vary in size and scope, state to state). Fiscal year 2018 saw an overall increase in total state budget allocations for DVAs from past years to \$3.3 billion across all states. Even so, a great disparity exists in the size of budgets across states. Oregon had the largest DVA budget, over \$524.5 million in fiscal year 2018, with California second at \$454.5 million. On the other hand, New Hampshire's DVA had \$637,868 in budget allocations for the same period. Like New York state, more than half (28) of states had DVA budgets under \$50 million; half of these DVAs operated on less than \$10 million in fiscal year 2018.<sup>12</sup>

The remaining states, whose DVAs' budgets exceeded \$50 million, were an equally diverse group by total veteran population and demographics. But many of these top 22 states have large veteran populations or expansive veterans' homes networks, like Wisconsin, Minnesota, and Oregon. This group of states also has had success in attracting federal dollars to DVA programs or has significant veteran trust funds accessible for program and service financing.

DVA budget allocation is also peculiar when analyzed at the per capita level because issues of size, scope of DVA programs, and access affect the costs per veteran. Alabama's DVA allocated \$2,034 per veteran in fiscal year 2019, the highest among all DVAs; Maine came in second at \$1,883 per veteran. On the other extreme, South Carolina's DVA was allocated \$4.23 per veteran in FY 2019.

The size of the states' veteran population and the scope of the DVA's mission and activities obviously impact these numbers, but spending per veteran also reveals two important caveats to the overall funding discussion.<sup>13</sup> Many DVAs report that engaging and connecting with rural veterans is expensive, sometimes with prohibitive travel costs (e.g., Alaska). These efforts to connect rural veterans with state and federal benefits they are eligible for increase the costs of DVA activities and require more state or federal budget support, even if their veteran populations are relatively small.<sup>14</sup>

Secondly, care per veteran by the DVA may be diffused through collaborations among the DVA, federal agencies, community organizations, and private sector businesses. The presence of community collaborative networks—helping to connect and improve care for veterans—may lead to smaller DVA allocations per veteran, particularly in states like South Carolina and Texas.



This is extremely relevant for states like New York State that perceive themselves as resource strapped. Despite below average funding levels, there are state high-impact state budget models that New York State could draw upon, discussed further below.

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## DIVERSITY OF FUNDING SOURCES

DVAs typically receive income from three sources: state general funds, federal funds (traditionally the VA or other federal agencies), and other state funds. Most DVAs use resources from a combination of these three sources, even though some states do not receive any federal funding for DVA programs. Figure 4 shows that among these combinations of funding sources, almost half use state general funds as their primary funding source (24) and over one-third use other state funds (18) as their primary source. This trend has largely held over the past five years (Figure 5).

**New York State.** New York State DVS receives most of its funding from the state's general fund (Figures 6 and 7). New York State differs from typical states in that it allocates no other state funding to the DVS. This demonstrates an opportunity to pursue, and creatively develop, supplemental funding streams for veterans in New York State. As the New York State DVS budget seems to stay relatively consistent, interagency and cross-sector cost sharing are also important strategies to consider to maximize the impact of a stagnant budget.

**National Trends.** States like New York, with DVAs primarily funded through general fund appropriations, typically have large veteran populations (California, Ohio, and Tennessee) or smaller veteran housing programs (Indiana, New Jersey). In contrast, states that leverage multiple sources, either establish new funding streams, such as Veteran Trust Funds, or find other ways to supplement veteran service funding. These states differ from those that primarily use other state funds; those states generally have both large veteran populations and large veteran home networks (Texas, Florida, Virginia, North Carolina, Minnesota, and Illinois). Such state funds come from a variety of sources—from veteran trust funds and state housing funds to state lottery funds. For example, Missouri's DVA received over \$23.6 million through transfers from the Missouri Gaming Commission in fiscal year 2017.<sup>15</sup>

States that receive mostly federal funds for their DVA are a diverse group. Some of these DVAs are situated within other state agencies (Maine, Michigan, and Utah), which could constrain the ability of the DVA to secure state funding outside of DMVA or other agency appropriations. These DVAs might pursue federal funding for their programs to compensate for smaller DVA budgets (as most DMVA funding is directed toward the National Guard).<sup>16</sup> Other DVAs that receive federal funding have pursued similar strategies; Washington State, for instance, secured more than \$93.7 million in federal funding in fiscal year 2018.<sup>17</sup>

As DVAs look forward to fiscal year 2020 and continued success of their programs, it is important to note that both state and federal governments are becoming more supportive financially of DVAs and their programs. DVAs were projected to receive almost \$3.4 billion in 2019.<sup>18</sup> However, budget allocation growth has been slowing since 2016, including a period of negative growth from fiscal year 2017 to fiscal year 2018. Over half (29) of DVA budgets increased from 2017 to 2018, with some increasing by over 70 percent (Indiana, North Dakota). Most budget increases ranged from 0.4 percent to 20 percent. States whose DVA budgets decreased (20) typically dropped between 1 percent and 15 percent, with a few large outliers (Oklahoma, Vermont, and Arkansas). Wyoming's DVA had the only level budget from fiscal year 2017 to fiscal year 2018.

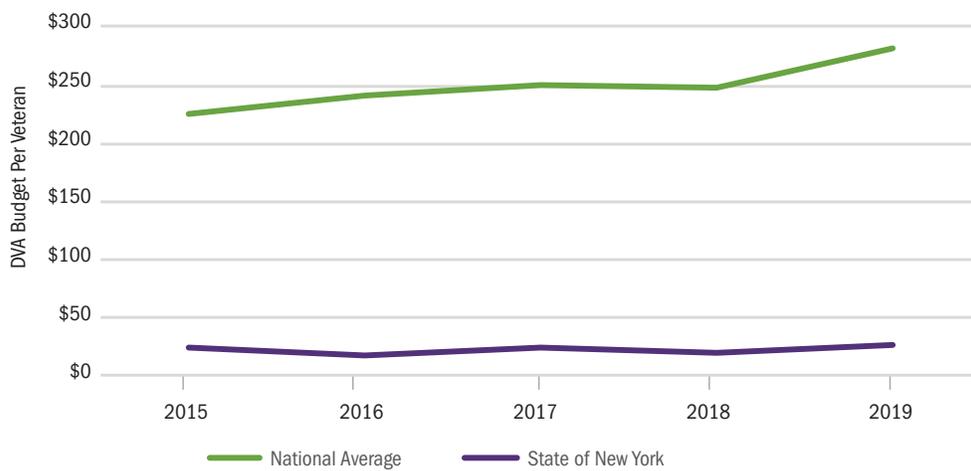
Three interpretations emerge from this data. First, DVAs may increase their programs, due to a growing understanding of the co-occurrence of veterans' needs, prompting greater budget allocation requests for 2019.<sup>19</sup> On the other hand, annual budget growth could be slowing because DVAs increasingly share the burden of service and engagement with community nonprofits, philanthropies, private sector organizations, and other state agencies. Moreover, as community collaboration, networks, and interagency relationships expand, multiple DVA officials from Nevada and Virginia noted, DVAs may find they can reduce direct expenses.<sup>20</sup>



**FIGURE 7. STATE DVA BUDGETS BY FUNDING TYPE (FY 2012-2019)**

STATE	FISCAL YEAR				
NEW YORK	2015	2016	2017	2018	2019
General Fund	\$16,815,000	\$13,612,000	\$17,161,000	\$13,791,000	\$16,028,000
Other State Funds	-	-	-	-	-
Federal Funds	\$2,466,000	\$690,000	\$1,738,000	\$903,000	\$4,417,000
Total Funds	\$19,281,000	\$14,302,000	\$18,899,000	\$14,694,000	\$20,445,000
Staffing	84	82	89	83	98

**FIGURE 8. NEW YORK STATE AND AVERAGE DVA BUDGET PER VETERAN (FY 2015-2019)**



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## BUDGET MODEL FOR NEW YORK STATE: TEXAS

Texas is a prime example of a state that takes full advantage of a relatively small budget. While the New York State DVS could benefit from more resources and funding, Texas offers a statewide strategy that capitalizes on every dollar spent serving veterans.



### Texas Veterans Commission

Formed in 1927 as the State Service Office, the Texas Veteran Commission (TVC) has a long tradition of serving state veterans and their families. Originally, it focused on federal and state veteran claims assistance. In 1947, the office became Veteran Affairs Commission, a state agency with regional offices and hospitals. During the 1970s, the Veteran Affairs Commission operated 14 regional offices and served over 1 million state veterans. It changed its name again in 1985 to become the Texas Veteran Commission.<sup>21</sup>

Today, the Texas Veteran Commission employs nearly 400 people and provides multiple services. Its claims assistance helps veterans secure over \$1.5 billion dollars in aid annually.<sup>22</sup> It runs programs that address veteran health care, mental health, education, and employment. TVC also provides grants to VSOs, government agencies, and charities to help care for veterans and their dependents, and offers tailored programs for veteran entrepreneurs and women veterans.<sup>23</sup>

The TVC remains a nationally recognized leader in state veterans' affairs. Dubbed the "Texas Model," the TVC approach integrates nine lines of effort ranging from benefits and claims assistance to employment, entrepreneurship, education, mental health, and women veterans' issues. It does all of this with a relatively small budget of roughly \$40 million every year, all while having one of the largest veteran populations in the country. The TVC is able to be on the leading innovators in delivering services to veterans on a small budget by leveraging its unique position as a convener. Rather than delivering all services itself, the TVC is strategic in aligning its efforts with federal, other state, and local stakeholders. It fills in gaps that make service delivery smoother and more effective, while providing leadership that coordinates effort and care.

Texas's budgetary execution starts with its governor. The state's current governor, Greg Abbott, featured veterans' issues in his first State of the State address in 2015, outlining proposals to exempt veteran businesses from select taxes and eligible veterans from state occupational licensing exams based on experience gained during military service. Abbott has also advocated for employer incentives for hiring veterans; expansions to mental health services; local public-private coordination in addressing veteran homelessness, substance abuse, and other challenges; and increases in the TVC budget to bolster the state's contribution to reducing the VA claims backlog. In its most recent session, the legislature passed law addressing veterans' legal issues, occupational licensing, greater flexibility in the TVC's training and provision of grant funds to county veteran service officers (CVSOs), and collaborative approaches to veteran suicide prevention.<sup>24</sup> While resources are somewhat limited, leadership from the top of the state is clear and strategic about how those resources will be best allocated to serve Texas veterans.

Also important in maintaining sustainable and consistent funding is TVC's continuity of leadership. Abbott appointed the current executive director, Thomas Palladino, and the appointed commission representatives have served since 2010. Others in TVC leadership bring significant experience, with a number having worked for a decade or more across different staff positions. Such experience can be key to achieving buy-in and building support for organizational change, programmatic expansion, and challenging decisions regarding resource allocation, strategic priorities, and other issues. Consistent leadership is a foundation of efficient budgeting, as leaders can plan resource allocation aligned with future strategy.

The strategy that underpins Texas's ability to deliver leading services on a relatively small budget is its focus on maintaining numerous partnerships with stakeholders across sectors and levels of government.

This theme is demonstrated by the ways in which the TVC engages with other state and local actors to share costs of service delivery. TVC trains county veterans service officers and plays a leading role in the operation of the Texas Military Veteran Peer Network (MVPN)—a partnership arrangement bringing together TVC, the Texas Department of State Health Services, and local government mental health providers to establish a peer support program where volunteers connect veterans with mental health resources. TVC has contributed to MVPN through training local volunteer coordinators, conducting local site visits, and providing information and resources to enable effective volunteer management. Involvement in MVPN is just one example of TVC's participation in state and local inter-agency partnerships. Others include participation in the Texas Coordinating Council for Veterans Services, an inter-agency body established by the Legislature in 2011 to promote coordination of resources



across state agencies. This body includes over 20 state government entities working on education, employment, health, housing, justice and public safety, occupational licensing, rehabilitation, and transportation. This willingness to partner with other organizations and deliver services in a cost effective way is key element of the TVC's high impact but relatively low budget.

### Lessons for New York State

The TVC's willingness to complement the services of other providers greatly enhances service delivery for veterans in Texas. New York State, even with limited financial resources, would be more effective with a more cohesive approach like Texas. Becoming more integrated with the ecosystem of community care would overhaul the role New York State plays in veteran service delivery. For example, the TVC does not staff full-time benefits providers, but instead takes advantage of the array of county service officers as a means of sharing costs and responsibilities.

Currently, New York State's DVS staffs state-level benefits advisors even despite an existing network of county veteran service officers. This is an example of opportunity for New York State to be more strategic about resource allocation and service delivery by instead letting county service offers take over the benefits and claims assistance responsibility completely. This would allow New York State to focus its resources towards more innovative and high impact initiatives.

Additionally, Texas is creative with consistent and reliable funding streams. Most of New York State's funding comes from the state's general funds with some from the federal government. A sizeable portion of funding in Texas comes from specialized funds specifically for veterans to ensure long-term fiscal stability.

Texas demonstrates that there is no "magic number" of funding in delivering the best quality services for veterans at the state level. Some states with budgets three times as large as the TVC are not as effective or innovative in service delivery. To best capitalize on limited resources, New York State could position itself to strategically fill needs and align effort where it is most needed.

Key action steps New York State could take to maximize its DVS budget include:

1. Collaborating with other organizations to help deliver services in a more cost effective way (i.e. working with County Veteran Service Officers to deliver most of the benefits and claims assistance).
2. Establishing special funds for veteran services to provide consistent and reliable funding streams for current and future veteran programs; and
3. Retaining continuous leadership of the DVS to allow for long-term strategic planning and resource allocation.

## KEY FACTOR #3: SERVICE DELIVERY AND INNOVATION

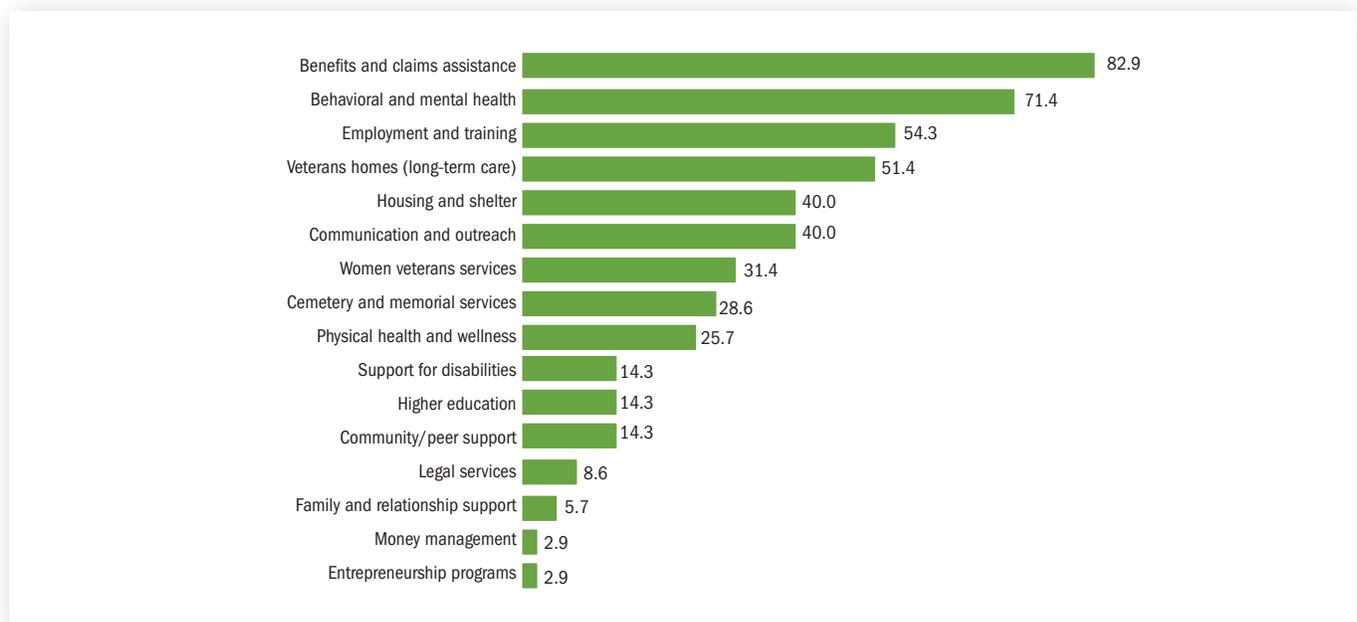
Finally, service delivery innovation marks the third contributing factor to DVA success. This section unpacks the ways in which New York State could improve the services it delivers to veterans across the state, by drawing upon insights from a national survey of state directors. Seventy percent of state and territory directors (39 of 56) completed a survey from November 2017 to June 2018, yielding critical insights into the operation of their respective DVA, their perceptions of need among their states' veterans, and states they look to as best practice leaders for veterans' issues and service delivery.<sup>25</sup> This section provides national insights from the survey and compares them against New York State responses.

### INSIGHTS ON SERVICE DELIVERY FROM THE NATIONAL SURVEY OF STATE DIRECTORS

#### Needs for Core Services

In part one of the survey, we asked DVA directors to list the top five needs of their states' veteran population from a list of 16 service and need areas. New York State identified Behavioral Health, Housing, Legal Services, Woman Veteran Services and Entrepreneurship programs as the top needs of veterans in the state. These results are consistent with other DVAs across the country (Figure 9). It is important to reiterate that these data reflect state directors' aggregated views on the service needs of veterans within their respective state or territory. This does not constitute a formal assessment of actual need.

FIGURE 9. DVA PERCEIVED NEEDS OF VETERANS BY SERVICE AREA



#### Non-Core, High Priority Needs: Behavioral and Mental Health and Employment Services

**New York State.** New York State indicated that it provides benefits and claims assistance, communications and outreach, and food and nutritional assistance. This response reports that the New York State DVS is more limited than other DVS's in the types of services it offers. As explored below, other states offer a wide variety of services both in terms of core functions such as benefits and claims, cemeteries and veterans homes, as well as beyond. Having a more limited scope of services delivered provides an opportunity to expand service delivery by partnering with other organizations and government agencies.

**National Trends.** Nationally, more than two-thirds of the respondents noted that veterans in their states have significant needs for behavioral and mental health and more than half for employment or vocational training, two need areas that are typically outside of the DVA's principal responsibilities. These are also frequently service areas that DVAs do not have

the resources or expertise to provide. To address these concerns, some DVAs—like those in Wisconsin, and Virginia—have partnered with other state agencies to refer veterans or coordinate service delivery for both behavioral and mental health and employment assistance.

### Communication and Outreach

**New York State.** New York State did not identify communication and outreach as a key issue for veterans in their state. However, communications and outreach is pivotal to any service delivery seeking to reach specific populations. Better connecting veterans to their own services and VA services is a key function of any DVA. If New York State hopes to take full advantage of a relatively small budget, adequate communications and outreach for veterans should be a top priority. Additionally, should New York State's DVS become a coordinating body of care, communication and outreach will remain central to ensuring veterans have timely access to services, resources, and care.

**National Trends.** DVA directors noted concern for communication and outreach in the survey, with half of respondents placing the service within the top-five service needs of their states' veterans. These responses could be interpreted two ways, depending on the perception of the directors. On one hand, directors may have noted this as a top-five need because DVAs want to engage more with their veterans, to help deliver greater levels of care to veterans with co-occurring needs. As DVA officials from Ohio noted, DVAs need to “attack it [communication] from a couple different places... [to] make sure they understand where they go to find resources.”<sup>26</sup>

They may also seek to increase DVA engagement and connection with veterans to provide a bridge between the veteran and the U.S. Department of Veterans Affairs (VA), potentially increasing the amount of VA funding flowing into the state, a valuable metric of performance for DVAs. On the other hand, directors could have referred to the desire of veterans within their states to engage with the DVAs but face barriers to access, such as transportation challenges in Alaska and North Dakota. Either way, communication and outreach was the fifth most needed service area from the perspective of state directors.

### Customary DVA Services

**New York State.** The big three service areas—benefits and claims assistance, cemetery and memorial services, and veterans homes—are among the most frequently delivered DVA services. New York State's DVS is more limited than other states, even in the core services it provides. While New York State provides benefits and claims assistance through state trained benefits providers at the state level, it does not manage cemeteries or veterans homes.

**National Trends.** Almost all DVAs provide benefits and claims assistance, often through the DVA directly or through a combination of county veteran service officers (CVSOs) and DVA assistance. States such as Minnesota's DVA, have been recognized as leaders in benefits and claims assistance for its Discharge Access Database System, which received a Pillar of Excellence award from the VA in 2018 for innovative use of technology to help CVSOs collaborate more efficiently to help veterans process their claims and benefits. In addition to these three services, 89 percent of DVAs engage in outreach efforts to connect with their veteran population and have responsibility for state military cemeteries or memorial services. Almost two-thirds of DVAs operate veterans' homes systems for long-term care solutions, typically under the direct authority of the DVA (e.g., Georgia, Oregon, Wisconsin).

### Coordinating with Federal, State, and Community Entities

**New York State.** In the survey, the only organization the New York State DVS indicated it works with “a great deal” is the VA. Other organizations such as other state agencies, VSOs, and other federal agencies, the New York State DVS “somewhat works with.” Like in Texas, New York State could get more out of its budget and be more effective in serving veterans by bolstering relationships with federal, state and community entities. This imperative is compounded by the fact that New York State indicated that the VA typically “tends to duplicate” the services offered by the New York State DVS. This is a concerning trend and an opportunity for better coordination. The DVS also indicated that local VSOs “duplicate” services. Better coordination and collaboration with other entities is critical for DVAs hoping to expand the scope of services they provide.

**National Trends.** About half of DVAs offer services for education, employment, and women veterans, which are often delivered directly by the DVA, like California DVA's Division for Women Veterans Affairs. The remaining service areas surveyed suggest overlap among the DVA, other state agencies, and federal agencies like the VA and the departments of Housing and Urban Development, Education, and Labor. Multiple DVA officials from Nevada, Alaska, and North Carolina noted that DVAs can often "provide leadership for all these groups, get them all under one umbrella," and ultimately act as "glue between all the departments" for coordinating and collaborating on service delivery.<sup>27</sup>

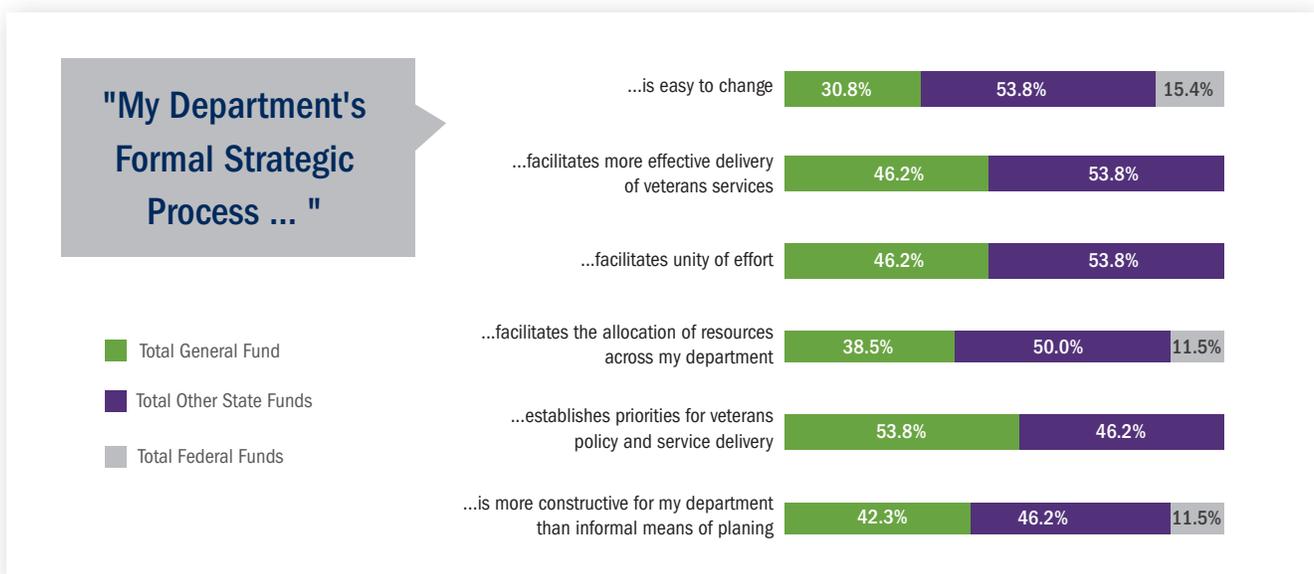
These survey results also indicate the presence of links between programs, with DVAs indirectly engaging in service areas. This is most commonly seen in education, employment, and entrepreneurship efforts, in which connecting with student veterans (e.g., Nevada and Washington) to increase their academic success may improve their employment opportunities post-graduation. However, some DVA directors noted that many state officials fail to recognize these links and co-occurring needs; an official from Tennessee noted that many states are often apathetic to the many issues associated with transition. However, some states have embraced these links in their programs. Virginia's Veterans Education Transition and Employment program helps student veterans' access GI Bill benefits and connects them with vocational training and career fairs. Utah's Veteran Owned Business Partnership—a consortium of state and local agencies, the Salt Lake City Chamber of Commerce and the U.S. Small Business Administration, and higher education, nonprofit, VSOs, and private organizations—helps Utah veterans start and grow their own businesses. Likewise, New York State serves veterans in a number of ways separate from the DVS, this presents an opportunity for the New York State DVS to be more involved with other state veteran initiatives.

### Sustainable, Consistent Funding Levels

**New York State.** New York State ranked budget shortfalls as their top challenge. This connects back to other points of opportunities for New York State to be more strategic about their efforts. Dealing with limited resources is a challenge for any public or social sector organization. This requires creativity in developing new and more effective ways to deliver services. This means a clearer strategic vision for the DVS, integrated service delivery with other providers in the state, as well as coordinated resource allocation with those other providers.

**National Trends.** Budget shortfalls were consistently ranked as a top challenges for DVAs. This finding is consistent with the fluctuating DVA budgetary trends, which included a drop in DVA funding for fiscal year 2017, as most DVA directors participated in the survey in the first quarter of fiscal year 2018. However, even though DVA budgets increased in 2018 and are projected to continue to increase in fiscal year 2019, according to state proposed and enacted budgets, DVA directors still

**FIGURE 10. DVA STRATEGIC PLANNING PROCESS AND OUTCOMES**



cite a lack of budget resources as their most significant barrier to serving veterans. When rated on a scale of 1 to 5, with 1 being the most difficult challenge, budgetary challenges received a 2.7, suggesting that this problem is significant but not dire.

This budgeting challenge spans both independent DVAs and DVAs that are under DMVAs or other state agencies. About one-fifth of respondents noted that resource navigability was the most significant challenge, supporting the earlier finding that all DVAs provided benefits and claims assistance. Some states—like Florida, Ohio, and South Dakota—have instituted Pillar of Excellence award-winning programs to use communication, technology, and outreach efforts to connect their veterans with the DVA and to help them navigate and access their eligible VA and state government benefits.

## Strategic Planning

**New York State.** The New York State DVS reported that it does conduct a formal strategic planning process along with about 81 percent of other DVA directors who said they conduct a formal strategic planning review. Of those with a strategic planning process, many affirmed the idea that their planning process supports a number of critical functions for the departmental success.

All respondents (100 percent) either “Strongly Agree” or “Agree” that formal strategic planning facilitates more effective service delivery, facilitates greater unity of effort within their department, and establishes priorities for veterans’ policy and service delivery within their department (See Figure 10).

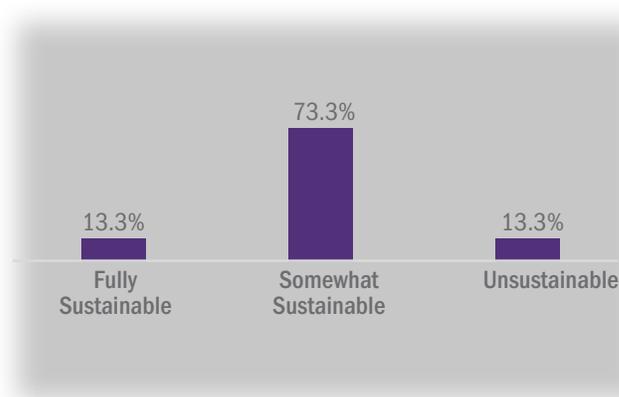
However, the New York State DVS disagreed with the statement that strategic planning facilitates unity of effort across the department. It also disagreed that strategic planning facilitates greater unity of effort across sectors. This signifies a major opportunity to improve coordination of effort across the state. If New York State were to incorporate other organizations and service providers into their strategic planning process, it may improve unity of effort in delivering services to veterans.

Effectively serving the nearly 20 million U.S. military veterans and their families is a serious task that is increasingly difficult for even large organizations like the VA to tackle on their own. State DVAs play a distinct role in serving military-connected individuals, working closely with the VA, but also having a more intimate connection with community-based organizations and local government. The degree to which a DVA’s services are impactful can depend on the effectiveness of their strategic planning process.

New York State responded similarly to the trends above. Responses from New York State also indicated that the DVS works with the VA “a great deal.” Additionally, the DVS indicated it is only “somewhat familiar” with the VA’s strategic planning process. This is relevant due to heightened questioning around the sustainability of public funding for veteran services. The DVS and 13.3 percent of respondents identified current public funding for veteran services as “unsustainable” (see Figure 11). With questions of sustainability in mind, veteran serving organizations, across all sectors, will have to re-examine how they coordinate services and align resources and priorities.

**National Trends.** The national responses demonstrate the value for a DVA to conduct formal strategic planning processes. However, their collaboration with similar organizations during the planning process is not extensive, even as many state department of veteran’s services work closely with other organizations to deliver services. The most obvious example is the relationship between state DVAs and the VA; 86.2 percent of respondents reported they work with the VA “a great deal” in delivering services to veterans. However, only 14.3 percent are “very familiar” with the VA’s strategic planning process, 50 percent are “somewhat familiar” and 35.7 percent are “not at all familiar.” The variance in familiarity with the VA’s strategic plan raises questions about the level of collaboration and engagement between organizations that work closely to deliver services.

**FIGURE 11. SUSTAINABILITY OF PUBLIC FUNDING FOR VETERAN SERVICES**



## Inter-State Adoption of Innovations

**New York State.** Part Three of the survey asked DVA directors about adoption of practices from other states through outside learning. New York State noted that it does not adopt innovative practices from other states. While New York State does not adopt innovative practices, it is useful to understand where other states seek to adopt ideas. This demonstrates that New York State could adopt practices in categories other states have had success. As seen in Figure 12, most respondents reported adoption of practices and innovation from other states in areas of common state responsibility: the “Big 3” (i.e., claims assistance, long-term care, and cemeteries), communication and outreach, and women veterans’ services. DVAs most often adopt practice innovations from other states to improve existing programs rather than to create new ones. This is driven, in part, by a desire among DVAs to get better at the core components of their mission, particularly in states where DVAs face finite human and budgetary resources.

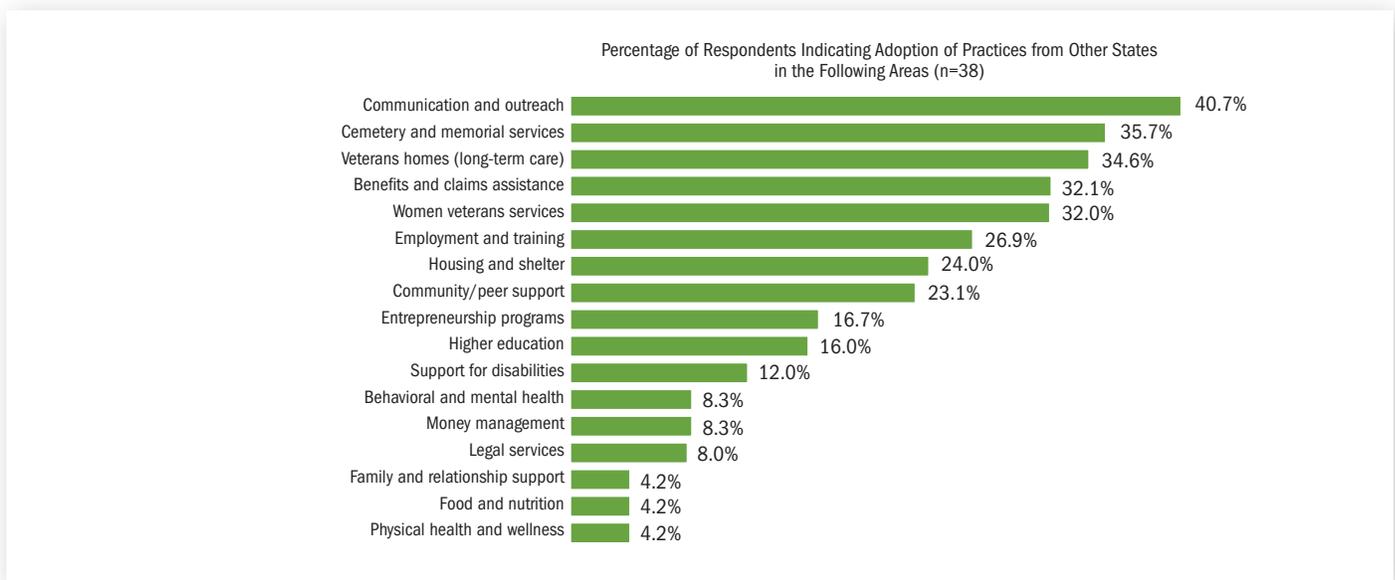
**National Trends.** Nationally, more than three-fourths of respondents noted that in their pursuit to improve veteran satisfaction, efficiency, and impact DVA’s programs and services, they adopt innovative practices successfully implemented in other state and territories; about 18 percent adopt practices that were commonly used across states. Some respondents also noted that they adopted innovative practices to increase the involvement of nongovernmental organizations and individual citizens in delivering services to veterans.

DVAs adopted fewer practices in the remaining service areas, particularly in areas that may lend more to collaborative efforts between DVAs and other public sector and community organizations (e.g., health, education, community/peer support). This is due to three potential ways DVAs are positioned within state governments: on the governor’s cabinet, not on the cabinet, or on a veteran council.

Less than half of director respondents stated that their DVA provides services like employment and training; higher education assistance; and physical, behavioral, and mental health (as shown in Figure 12). With fewer DVAs offering these services, there could have been lower levels of adoption across all DVAs.

Still, even for states that do offer these types of services, DVAs may choose to allocate their remaining available resources to support the most critical programs and services for the care and well-being of their population, given human and budgetary resource constraints. If adoption of other states’ practices was likely to include additional cost and time investments, DVA directors and staff may be more willing to use the money to strengthen their core-competency areas further, instead of spending on services outside the core mission. This tradeoff of investments and costs for new programs may lead to fewer states becoming innovative in these non-core-competency areas. Analysis from the Pillar of Excellence Award submissions from 2014 to 2018 shows that over half of all innovative program submissions addressed the Big 3 service areas, communication, and outreach.

**FIGURE 12. ADOPTION OF INNOVATIVE DVA PRACTICES BY SERVICE AREA**



## SERVICE DELIVERY INNOVATION MODEL FOR NEW YORK STATE: MICHIGAN

State veterans agencies are unique in their position within the larger ecosystem of veteran service delivery. They regularly work with the federal government in claims processing, but are also connected to counties and local VSOs. This position presents real potential for any DVA to positively influence the way services are delivered to veterans in their state. The ability to deliver not only the right services, but also leverage the capabilities of providers across the state is a central innovation that New York State must consider. Michigan offers a leading model for care coordination and referral making. Instead of attempting to deliver all the right services at the right time, Michigan embraced its connected position and made community care coordination the strategy that underpins all of their service delivery.



### Michigan Veterans Affairs Agency

The Michigan Veterans Affairs Agency (MVAA) originated with Executive Order 2013-2, signed by Governor Rick Snyder in January 2013. The order stemmed from what Snyder deemed urgently needed improvements in how the state cared for its veteran and military-connected population. Snyder pointed to data from 2011 showing that the state ranked 50th of 50 in per-capita benefits compensation from the VA, with many veterans either unaware of or not using benefits for which they were eligible. Snyder said, “Michigan’s veterans earned and deserve the best possible support, and we need to make sure they can get it.” Snyder declared that “Michigan’s current service delivery model is not structured to provide coordinated, high-quality services to help veterans recognize and access [benefits and services],” and that “such high-quality services can be best provided if a single entity coordinates the many efforts the state of Michigan makes to serve this population.” The order established the MVAA to serve in this role, under the leadership of a director appointed by the governor and reporting directly to them. The MVAA would, according to the order, “serve as the coordinating office for all agencies of the executive branch of government that are responsible for programs related to veterans” and as part of its charge “review, investigate, evaluate, and assess all programs within the executive branch of government related to services and benefits for veterans” in areas ranging from “health care [and] education [to] employment assistance and quality of life.” The agency director would serve as chief advisor on veterans’ affairs to the governor and the state adjutant general, Michigan’s ranking military officer and head of MVAA’s parent organization, the Michigan Department of Military and Veterans Affairs.

The agency and its director have pursued these missions with a particular focus on care and service coordination, aiming to connect people, resources, and organizations across state government, local government, VSOs and other community-based veteran serving nonprofits, and partners at the VA. Snyder and the state legislature have cooperated on veterans-related legislation. As one example, in March 2018, Snyder signed HB 5536, a bill to stimulate further creation of county veterans service offices and provide grants through the MVAA for county-level veterans services operations, programs, and other activities.<sup>28</sup> Support from this bill and others provides needed resources to Michigan’s counties, which, similar to counties in a number of other states with a significantly county-centric model of benefits assistance, originate a large number of veterans’ claims for benefits such as VA disability compensation. New Governor Gretchen Whitmer’s campaign agenda included a veterans’ plank putting further emphasis on benefits assistance and care, as well as on expanding employment and training opportunities and improving care at state veterans homes, after a state auditor’s report of abuse at the Grand Rapids Home for Veterans.<sup>29, 30</sup>

After resignation of its inaugural director, Jeff Barnes, in 2016, Snyder appointed James Redford director of MVAA. Working in conjunction with other leaders, Redford has addressed problems identified in the state auditor’s report. In 2018, MVAA reported that both of Michigan’s veterans homes—the home in Grand Rapids and the D.J. Jacobetti Home for Veterans in Marquette—earned perfect scores from a federal VA assessment showing each home met the VA’s 231 nursing and domiciliary care facility standards.<sup>31</sup> Also in 2018, MVAA announced a 55 percent increase from 2013 in Michigan veterans’ utilization of VA compensation and pension benefits.<sup>32</sup>

Given its charge to be the central coordinator of veterans’ services across Michigan, intergovernmental relations and partnerships are core to MVAA’s mission. MVAA continues to encourage development and expansion of county veteran service offices and veterans programming at the county level, and operates broader initiatives to adjoin the efforts of service providers across government, nonprofits, and the private sector. Some of these initiatives are more targeted,

featuring a greater degree of direct cooperation between MVAA and individual partners. A recent example—tracking nationwide trends in criminal justice reform and work on behalf of justice-involved veterans—involves a partnership among MVAA, the Michigan Department of Corrections (MDOC), and the VA to identify veterans in the state prison system and, provided they meet eligibility requirements, offer to move them to veteran housing units at a single facility (for men, Saginaw Correctional Facility; for women, Huron Valley Correctional Facility) so that they can be among peers and, importantly, so that the MVAA can better target assistance toward them. MVAA benefits officers aid incarcerated veterans in starting claims, and VA regional offices make arrangements with MDOC to transport veterans to VA medical centers for required benefits examinations. Provided their conditions make them benefits-eligible, MVAA will aid these veterans in completing and tracking claims, and MDOC will inform MVAA of their impending release. Thereafter, MVAA works with VA regional offices to ensure timely reinstatement of benefits upon an incarcerated veteran’s re-entry into the community.

Beyond these individual partnerships, two community-based initiatives—the Michigan Veterans Resource Center (MVRC) and the Michigan Veterans Community Action Teams (VCATs)—are increasingly the centerpiece of MVAA’s efforts to coordinate veterans’ services statewide.

Launched in 2014, the MVRC aims to provide Michigan’s veterans and their families with a single-stop source of information, resources, and referral assistance for veterans-related benefits and services throughout the state (whether from federal, state, or local government, VSOs, or other social and human services organizations). The center, located in Lansing, provides 24-hour support through its relationship with a 2-1-1 network, provides toll-free phone assistance, and works with veterans seeking in-person support. It does not limit its support based on a veteran’s service record (e.g., nature of their discharge), and follows a “Michigan citizens first” approach to connect veterans with services in a way that minimizes barriers posed by eligibility requirements or resource scarcity. Consequently, MVRC will in some circumstances direct veterans to services offered to the broader state population rather than veteran-specific types of support, thereby filling gaps with veteran-specific programs and preserving these programs’ limited resources.

Coupling this approach with around-the-clock engagement and availability, the MVRC has made a significant impact on the state veteran population, in its first year communicating with over 65,000 veterans and military family members, fulfilling document requests, making referrals, fielding after-hours calls, and connecting those it serves to numerous state resources. Based on this success, in 2016 VA Secretary Robert McDonald recognized the program with an Abraham Lincoln Pillar of Excellence award.

Related to the MVRC, Michigan’s VCAT program promotes local coordination of public, private, and nonprofit providers working with veterans and their families. These partners form coalitions supported by a technology platform called Podio—what one official called a “Facebook for service providers” (personal communication, July 10, 2018). Providers in a VCAT coalition enter an electronic database where they can share information with each other and make client referrals to one another’s organizations (what the official referred to as “crowd-sourced case management”). Such technology-enabled coordination of service delivery gives individual providers greater ability to connect veterans with programs and resources that meet their needs, thereby promoting a universal access approach that ensures veterans are continually supported throughout the service delivery process. Otherwise, they find themselves in a situation where they approach one provider, are told they need to go elsewhere, and must navigate the support system on their own. Each VCAT covers one of Michigan’s 10 Economic Prosperity Regions and is managed by a regional coordinator. The VCATs use the technology platform and periodic provider engagements involving the regional coordinator and individual providers to discuss needs, challenges, and means of further collaboration to serve their veteran and military family populations. Participating providers have reported significantly increases in the number of veterans with whom they have worked, as well as enhanced ability to deliver services and meet veterans’ needs more effectively. Based on its success, the VCAT program also received a Pillar of Excellence Award from Secretary McDonald in 2016.

## Lessons for New York State

Much like the State of Michigan, the New York State DVS could greatly improve veterans' access to services and care by playing a more active role in services and care coordination, in collaboration with local communities across the state. In an IVMF study, veterans cited navigating the many services and benefits the greatest challenge during their transition. New York is not immune to this challenge with a wide array of public and nonprofit providers that deliver services to veterans. Operating alone, all of these organizations are limited in the impact they can achieve. However, operating together under a set of unified goals, those seeking to serve veterans can achieve collective impact through more efficient and effective service delivery. Additionally, doing this would position the DVS as a central actor in helping veterans navigate resources and gain access to care and benefits. This would address key issues New York State deals with including program duplication, limited budget constraints and limited scope in services offered.

However, becoming statewide coordinating body for veteran services and care would not be an easy task. This requires buy-in from a diverse set of stakeholders. Additionally, it requires programmatic expertise necessary to establish networks of care with providers willing to work with the state as a leading body. Finally, it requires financial and technological resources to sustain programmatic work.

The Michigan model is an ideal path for the New York State DVS, which has the necessary position and convening power to become a leader in coordinated veteran service delivery across New York State. A key component of MVAA's story is the way in which state leadership embraced the philosophy that care coordination is the best model for veteran service delivery. State leadership could move towards this effort by looking to the DVS to lead more intergovernmental and cross-sectoral initiatives. The relationships with other organizations built through these initiatives will become the foundation of effective care coordination among providers in the future. Building on cross-governmental programmatic success will help develop the case for statewide veteran care coordination. A clear process for setting up networks of care is detailed in the recommendations section of this report.



# CONCLUSION

## CHARTING A PATH TO ENHANCED IMPACT OF VETERANS SERVICES IN NEW YORK STATE

This final section summarizes a seven-point agenda providing the New York State DVS a path to even greater reach and impact on those they serve. The agenda reflects lessons drawn from across our assessment of the national DVA landscape—the ways and means by which DVAs are organized, resourced, and positioned within their state’s system of veterans services and support—along with insights from our survey of DVA leaders and in-depth analysis of leading DVAs’ core attributes, enablers of success, and innovative practices.

### 1. EMPOWER THE DIRECTOR OF THE DVS THROUGH ENGAGEMENT WITH THE GOVERNOR, STATE LEGISLATURE, AND POLICYMAKERS

**Finding.** While the director of the New York State Division of Veterans' Services is part of the governor’s cabinet, the director does not report directly to the governor and is not well positioned to substantively engage with state political leaders at the highest level. Now that the New York State finally has appointed political leadership, it will be key to empower that leadership to effectively deliver services at the state level.

**Recommendation.** To enhance its effectiveness, the director of the New York State Division of Veterans' Services should have a direct reporting line to the governor and be afforded regular opportunities to meet with the governor’s staff, state lawmakers, and other leaders on veterans’ policy and priorities. Subsequently, the state legislature can expect consistent guidance on effective policy strategy in governance from the Director of the DVS who is the state’s principal expert on state service delivery to veterans. The DVS can alert the legislature to problems and gaps in service delivery that can be solved through well-directed lawmaking. All the necessary steps should be taken to afford the director a direct reporting line to the governor, whether an executive order or an act of the state legislature. Leadership should remain consistent for a significant amount of time to allow for full policy implementation.

#### Action Steps:

1. Establish direct line of report between the new director and Governor
2. Use the Governor’s platform to advocate for veteran-focused policy and legislation
  - a. Work through the Governor’s office to inform veteran-related legislation and affect future legislative agendas
  - b. Include veteran-related policy and initiatives within the Governor’s management agenda to drive inter-agency coordination on veteran policy
3. Create an Inter-agency Working Group Reporting to the Governor – Similar to the working group in North Carolina, establishing an inter-agency working group chaired by the DVS director would convene policymakers to drive veteran-focused policy backed by the credibility and power of the Governor’s office

#### State Model for this Recommendation: Ohio

After the 2009 study, Ohio’s governor called for an overhaul of the state’s veterans services. Working together with the legislature, the state created a new state veterans agency, and situated the broad array of veteran services under the direction of the DVA and its leadership.

### 2. PURSUE ADEQUATE, PREDICTABLE, AND DIVERSIFIED FUNDING SOURCES

**Finding.** The New York State Division of Veterans' Services has not benefited from funding stability, with large variations in state appropriations and, compared to other leading states, relatively little exploration of alternative financing mechanisms. Division leadership reports lack of budgetary resources as among its top challenges.

**Recommendation.** To enhance its effectiveness, the New York Division of Veterans' Services must receive adequate state funding and, where necessary, explore other funding opportunities (e.g., through philanthropic contributions or grants) to support new, expanded, or enhanced services alongside existing community-based services and care. Further, states with similarly sized veteran populations such as Ohio, Virginia and Michigan have \$90 million budgets. The DVS should see an increase in resources to a range of \$40 to \$90 million. Additionally—either through executive order or through legislative mandate—the DVS should have greater control of state funding and its operating budget. Currently much of funding administered by the DVS is pass-through aid to localities.

**Action Steps:**

1. Explore alternative funding mechanisms such as veterans legacy funds, philanthropic funding matching and federal grants that would enhance the DVS's budget
2. Work with the state legislature's appropriations and budget committees to continue to grow and diversify funding sources to grow the budget to a range of \$40 to \$90 million
  - An updated New York State veterans needs assessment (potential cost: \$500,000)
  - Pursuit of new public-private partnerships in communities across the state to increase veterans access to care and services through improved care coordination among human and social services providers (potential cost: \$3-5 million)
  - Adoption of new programmatic enhancements, innovations, and community engagement efforts on New York State benefits and services (potential cost: \$10 million or more)
  - Develop and implement a tailored communications and public relations strategy to reach a greater portion of New York State veterans and drive increases in utilization and overall well-being (potential cost: \$3-5 million)
3. Provide adequate and consistent annual funding to and allow for long term planning for consistent and innovative service delivery
4. Work closely with stakeholders in the federal government to expand the amount of federal money coming in to the state to serve veterans

**State Model for this Recommendation: Texas**

The Texas Veterans Commission's budget is comparatively small, but is adequate, diversified and dependable. The budget is comprised of multiple sources including general funds, other state funds, and federal funds. Additionally, the budget has grown steadily and consistently in the last five years. In part due to this consistency, TVC provides leading services to about 1.5 million veterans on a \$41 million budget.

**3. ALIGN DVS ROLES, MISSIONS, AND RESPONSIBILITIES WITH STAKEHOLDERS ACROSS NEW YORK STATE**

**Finding.** While the New York State Division of Veterans' Services also aims to support partners at the state and local level—including through training and information sessions for individuals at other agencies and organizations that work with veterans—in key areas its activities remain fragmented or unnecessarily duplicative. New York is among states with both state and county-level advisors providing benefits counseling to veterans. However, it is not clear that advisors at the state and county level are sufficiently coordinated nor that the division's state advisors are deployed to the areas where they are most needed, such as counties with too few CVSOs or a leadership vacancy at the CVSO agency or office.

**Recommendation.** To enhance its effectiveness, the New York State Division of Veterans' Services should conduct an immediate, comprehensive review of its roles, missions, and responsibilities vis-à-vis other actors across the state. Based on this review, it should take actions within its existing authority to more appropriately allocate its efforts in relation to its partners and where necessary, make recommendations to the governor and state legislature for any changes that would require an executive order or new legislation. More specifically, the state should hand complete control of benefits and claims assistance to county veteran service officers (CVSOs). The state should still maintain its presence at regional offices, but such a move to remove themselves from direct benefits advisory would reduce fragmentation. Finally, the DVS should improve its overall communication with CVSOs. CVSOs are often the point of contact for veterans asking about filed claims, even though the state takes over the case and has the needed information. Better communication between the parties will increase transparency about claims for the veteran filer.

**Action Steps:**

1. Conduct a comprehensive internal review of roles and responsibilities within the department and better align them with the insights from the needs assessment
2. Convene CSVOs to develop plan to transition claims filing responsibilities completely to the county level
3. Hire a CSVO liaison to improve communication and information requests about claims

**State Model for this Recommendation: Virginia**

Virginia consistently coordinates service delivery with other nonprofits and government agencies based on the distinct needs of its veteran population. While mental health services are in demand among Virginia veterans, the DVA does not deliver these services itself. Instead, it helps coordinate service delivery across a network of nonprofits and state agencies better equipped to handle these needs. This alignment of effort better serves veterans and reduces duplication of government services.

**4. IMPROVE INTER-SECTOR/AGENCY COLLABORATION AND COMMUNITY COORDINATION**

**Finding.** Top DVAs across the country used their unique position to become statewide care coordinators that drive service delivery across networks of providers. Playing this role improves service delivery and takes advantage of the leadership potential of DVAs within states.

**Recommendation.** To enhance its effectiveness, the New York State Division of Veterans' Services should establish itself as a care coordinating body modeled after Michigan's VCAT program. Enabled by a referral making technology, New York State's DVS would convene and train stakeholders and providers across the state to make and receive referrals. The DVS would act as the central body of care coordination by staffing coordination centers to triage veteran needs, and providing auditing and analytic capability to ensure program effectiveness and efficiency.

**Action Steps:**

1. Allocate necessary resources to stand up coordinated care networks across the state
2. Establish a team within the DVS focused on care coordination activities of the DVS made up of:
  - a. Senior Leadership – Galvanize buy-in from other political entities and powerful stakeholders
  - b. Program Leads – Works with communities and providers to understand and engage with the program. Provides training
  - c. Coordination Center Managers – Manages and oversees community coordination centers focused on triaging care
  - d. Data Analysts – Provide analytics and program evaluation to ensure program effectiveness

3. Select a technology platform to enable care coordination
4. Engage with other state service providers (i.e., Departments of Human Services, Military Affairs, or Labor) to establish initial pool of providers who deliver services to veterans
5. Engage with community of providers across state to achieve community buy-in to establish networks
6. Establish coordination centers or coordinating teams to work within communities

#### State Model for this Recommendation: Michigan

Michigan's Veteran Affairs Community Action Teams offer state- and community-based approaches to collaboration in delivering veterans care, services, and support. For more information on this leading practice.

### 5. ACQUIRE A CURRENT UNDERSTANDING OF NEW YORK VETERANS' NEEDS

**Finding.** New York State's last statewide study of this kind is nearly a decade old and in need of update. Such an update would apprise the New York State Division of Veterans' Services not only of changes in its state veteran population, but also in the population's needs, and potential gaps in services.

**Recommendation.** To enhance its effectiveness, the New York State Division of Veterans' Services should devote resources to conduct an updated statewide needs assessment that covers the needs of the veteran and military connected community as well as community providers. Such a study could be jointly supported with philanthropy as a means to inform and align programmatic, resource allocation, and engagement strategies for not only New York State DVS, but also the full range of actors delivering services and care across the state.

#### Action Steps:

1. Identify philanthropic partners invested in adequate and appropriate state service delivery for New York's veterans to pool resources for the study
2. Commission an updated study of veterans needs in New York State
3. Align resource allocation and service delivery along the findings of the study

#### State Model for this Recommendation: Tennessee

Tennessee relies on to needs assessments of both veterans' needs and provider needs to continuously prioritize service delivery and align the DVS strategy along those needs. Like New York, Tennessee has a large state university system and it relies on this system to carry out needs assessments.

### 6. STRATEGIC PLANNING, IMPLEMENTATION, AND PERFORMANCE MANAGEMENT

**Finding.** While the New York State Division of Veterans' Services provides periodic reports on its activities—numbers of types of veterans served, benefits garnered on account of advising services, and related indicators—and reports it has a formal strategic plan, the plan is not publicly accessible and it is unclear whether it adheres to best planning practices.

**Recommendation.** To enhance its impact, the New York State Division of Veterans' Services should prepare an updated strategic plan with goals, metrics, and specification of the parties that will be responsible for progress on these goals. This



plan should look at least five years into the future and be informed by engagement with veteran-serving stakeholders in New York. The plan should be publicly accessible so that stakeholders across the state—from state and local partners to individual veterans—understand the division’s activities and commitments.

**Action Steps:**

1. Host a series of convenings for other government agencies, VA stakeholders, and community providers to provide input on goals and DVS allocation of resources
2. Develop a series of priorities based on this input, and based on insights from the needs assessment
3. Develop metrics to measure goal success such as:
  - a. Number of claims processed
  - b. Time to process claims
  - c. Monitor veteran population change
  - d. If coordinating care: referral metrics around speed, accuracy and appropriateness

**State Model for this Recommendation: Washington State**

The State of Washington aligns its services with five, clearly outlined, strategic goals: outreach and access; quality health services; education and employment; continuous improvement; and exceptional customer service. These clear goals guide WDVA’s service delivery and partnerships, and promotes better unity of effort among stakeholders working towards common goals. These goals also provide benchmarks to which WDVA can evaluate its performance.

**7. DEVELOP A TAILORED COMMUNICATIONS AND OUTREACH STRATEGY.**

**Finding.** While the New York State Division of Veterans' Services makes significant efforts conducting veteran outreach, regularly revisiting communications and outreach strategies is crucial to ensure the division is reaching veterans in greatest need and connecting them with the appropriate services in a timely fashion.

**Recommendation.** The New York State Division of Veterans' Services should revisit its communications and outreach activities, make adjustments where necessary to expand communications across additional platforms, and ensure its communication and outreach activities are tailored to the specific platforms different demographic groups (e.g., older vs. younger veterans) are most likely to use in the least amount of time.

**Action Steps:**

1. Build off of needs assessment study and tailor needs based on population and high need characteristics
2. Fund innovative strategies of outreach including rural outreach methods, news station PSAs and social media engagement
3. Continually work with County VSOs and veteran serving organizations to connect veterans with state programming

**State Model for this Recommendation: Florida**

Florida makes intentional investment to engage with and tailor messages to veterans who are difficult to reach, such as those residing in rural locations. They maintain a strong online presence to engage with younger and middle age veterans, but at the same time, go as far as purchasing signage on top of gas pumps in rural counties to reach older rural veterans.

## ENDNOTES

1. U.S. Census Bureau. 2016 American Community Survey, 5-year Estimates. See also the “state report” visual dashboard on the Veterans Strategic Analysis and Research Tool (V-START), hosted by the Institute for Veterans and Military Families at Syracuse University at the following link: <https://ivmf.syracuse.edu/state-veterans-services-innovations/>
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3. Benjamin, G. & Toomey, T. (2018). State and local veteran’s agencies and returning veterans in new York. The Benjamin Center. Retrieved from [https://www.newpaltz.edu/media/the-benjamin-center/db19\\_vets.pdf](https://www.newpaltz.edu/media/the-benjamin-center/db19_vets.pdf)
4. Huitink, Z., Armstrong, N., Birnbaum, N., & Van Slyke, R. (2019). Innovation in State-Level Veterans Services: A Comprehensive Review, Case Highlights, and an Agenda for Enhanced State Impact. Syracuse, NY: Institute for Veterans at Military Families, Syracuse University.
5. Benjamin, G. & Toomey, T. (2018). State and local veteran’s agencies and returning veterans in new York. The Benjamin Center. Retrieved from [https://www.newpaltz.edu/media/the-benjamin-center/db19\\_vets.pdf](https://www.newpaltz.edu/media/the-benjamin-center/db19_vets.pdf)
6. Personal communication with authors, April 26, 2018.
7. Personal communication with authors, April 27, 2018; personal communication with authors, June 12, 2018.
8. Personal communication with authors, April 23, 2018; personal communication with authors, June 20, 2018.
9. Personal communication with authors, June 11, 2018.
10. Personal communication with authors, April 12, 2018
11. Legislative Service Commission. (August 22, 2008). Final Analysis. Am. Sub. S.B. 289
12. For states where only biennium data was available, like Oregon, their two-year DVA budgets were divided in half to get estimates for each year in the biennium. This pertains also to North Dakota, Washington, Wisconsin, and Wyoming.
13. There are three smaller states where only DMVA or affiliated department budget data is available, as opposed to specific DVA data: Alaska, Maine, and Utah. Alaska and Maine both have large rural veteran populations. These figures could include both National Guard and Reserve (for Alaska) and Emergency Management spending (Maine), thus potentially skewing the total funds oriented towards NG/R.
14. A DVA official from Washington said states need to approach engagement with rural veterans in a different manner, noting “In rural outreach, you don’t want to talk to veterans, you want to talk to providers, show what’s in it for them because now they have someone they can call upon.” Personal communication with authors, June 11, 2018.
15. Missouri Veterans Commission. (2017). *Annual Report FY 2016-2017*. Jefferson City, MO: Missouri Department of Public Safety. Retrieved at <https://mvc.dps.mo.gov/docs/commission/2017-annual-report.pdf>.
16. While these states reported significant resource allocations from the federal government, not every state fully reports (or reports at all) its federal funding, in aggregate or on a more detailed basis. These states may receive it to supplement their state funding, and thus it may not be presented in the governor’s proposed budgets or the enacted legislation for a given state. Federal funding may also not flow to DVAs until later in the year, which could create significant accounting issues if not reflected in the DVA budget for a given fiscal year. Minnesota’s Department of Veterans Affairs’ 2017 Annual Report does an excellent job at breaking down all sources of income, including federal funding, into categories within financial visuals. See Minnesota Department of Veterans Affairs. (2017). *Committed to Every One: 2017 Annual Report*. St. Paul, MN: Minnesota Department of Veterans Affairs. Retrieved at [https://mn.gov/mdva/assets/2017-mdva-annual-report-accessible\\_tcm1066-327252.pdf](https://mn.gov/mdva/assets/2017-mdva-annual-report-accessible_tcm1066-327252.pdf).
17. Personal communication with authors, June 11, 2018.
18. Fiscal year 2019 budget allocation figures reported are projections for many state legislatures, but many have not enacted state budgets at the time of publication of this report.
19. Multiple DVAs expanded their program and service offerings from fiscal year 2017 to fiscal year 2018 per their annual reports, including Maryland, Texas, and Rhode Island. States like Arizona, Florida, and Rhode Island used additional funding toward their veteran homes system for improvements and increasing the quality of care delivered to resident veterans. For excellent examples of annual reports, see Rhode Island Office of Veterans Affairs. (2017). *Annual Report 2017*. Providence, RI: Rhode Island Office of Veterans Affairs. Retrieved at <http://www.vets.ri.gov/Documents/RIOVA%20Annual%20Report%202017.pdf>. and Maryland Department of Veterans Affairs (2017, January). *Annual Report 2017*. Annapolis, MD: Maryland Department of Veterans Affairs. Retrieved at <http://veterans.maryland.gov/wp-content/uploads/sites/2/2017/01/2017-Annual-Report-FINAL.pdf>.
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26. Personal communication with authors, April 18, 2018.



## ABOUT THE INSTITUTE FOR VETERANS AND MILITARY FAMILIES (IVMF)

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