

One Team, One Fight

Serving Veteran Families in a Post-COVID-19 Era – A New Model Emerges

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Colonel (Ret., U.S. Army) Jim McDonough is Director of the New York State Division of Veterans' Services. Since retiring from the Army, he has held key leadership positions throughout the veterans' sector following a distinguished 26-year active Army career. Mr. Benjamin Pomerance, Esq., is Deputy Director of Programs and Learning within the New York State Division of Veterans' Services. Ms. Danielle Applegate is Vice President of VetsFirst, a 75-year old veteran service organization within United Spinal Association, and an Army veteran.

“Offices Closed, Do Not Report.”

So read the initial guidance from the U.S. Department of Veterans Affairs (VA) to employees announcing all 57 of their Regional Offices would close to the public and non-essential personnel on March 24th, 2020. With this directive in-place, the dilemma for accredited veterans' advocates became one of choice: *adapt your business models or halt delivery of vital veterans benefits at a time when they may be needed most.* With the global reach of COVID-19, the speedy delivery of veterans' benefits could not be more important to America's veteran families than now.

Long before COVID-19, New York State recognized the strains confronting our partners in government and the reduced funding streams trickling into the nonprofit sector. In response, New York took active measures to unify and enhance the delivery of veterans' advocacy services statewide, partnering with County Veterans Service Agencies and Veteran Service Organizations (VSOs) like VetsFirst, Vietnam Veterans of America (VVA), and the American Legion to improve upon the sharing of service delivery and resources serving New York's veteran families.

These measures include lowering barriers to access, improving service protocols, adapting to changing veteran demographic patterns, addressing shrinking (and aging) membership rolls in longstanding VSOs, ramping up educational opportunities, increasing technologically enabled approaches, and creating more mobile service delivery models.

The COVID-19 outbreak highlighted the value of this progress and underscored the need for further advances. Statewide office closures and the ensuing transition to a remote work environment took a toll on the delivery of services to clients who typically visited our field offices. From March 16th, 2019 through April 16th, 2019 the New York State Division of Veterans' Services filed 932 applications for veterans' benefits. One year later, using the same timeframe, the agency filed 316 applications for veterans' benefits, a precipitous 66% drop in applications submitted to the VA.

However, while claims submission has slowed, outreach to resource and call centers has hit an all-time high, up roughly 35% for VetsFirst, and even higher within New York State's Call Centers supporting COVID-19 response operations. Additionally, more than 20 percent of all COVID-19 positive cases among veterans have occurred in New York State, with most arising in and around Westchester County, New York City, and Long Island. At the pandemic's apex, Calverton National Cemetery provided as many as 50 dignified burials a day for veterans – what they normally might perform in a week. Several of our employees have already lost parents and in-laws to COVID-19

So, there's no question that the pandemic has taken a toll on the lives of our veteran families.

But the pandemic has also impacted the health of the nation's veterans' benefits delivery system. For many veterans' advocates, the preparation, presentation, and prosecution of claims and appeals has declined – and for some, even halted. While the VA recently relaxed certain timeliness requirements, an obvious gap remains. It's safe to say veterans' benefits service delivery has been disrupted – not just temporarily, but likely forever.

What then, should the future of veterans' benefits delivery look like?

Historically, Veteran Service Organizations formed to represent the views of specific cohorts of veterans. For veterans from World War I to present, each of 'their' wars presented distinct challenges, signature wounds, and disagreements over the manner of the federal government's handling of the needs of their members. In the last 100 years, Congress has recognized only forty of these organizations as qualified to represent veterans, service members and their families in claims and appeals for VA benefits. States hold a separate, but similar, standing before the VA.

Today, by contrast, the operating environment reflects more of a bazaar-like setting, with stakeholders of all shapes and sizes - local community advocates, for-profit entities, government agencies at the state, county and municipal levels, and nonprofit organizations and more - representing service members, veterans, and their families in applications for VA benefits. And while options vary, so too do levels of competency and quality across the spectrum of veterans' benefits delivery.

Primarily nonprofit in nature, the independent financial statuses of Veterans Service Organizations allowed these groups to operate largely outside government funding streams, lending a certain nonpartisan and trusted standing among military-connected populations. This model raised money from philanthropy and private donations to operate, and in a time of broad public support and attention, many flourished. Some strived for national reach by establishing replicable models in every state, with accompanying headquarters in Washington, D.C. These arrangements auspiciously served their veteran members' interests well, as many returned from war with deep suspicions and mistrust of the government's track record and valued having an autonomous 'voice' to speak on their behalf.

While their unique position and stance has been admirable, many challenges have emerged, leaving VSOs at a distinct operating disadvantage, exacerbated by economic conditions and pandemic. Today, most, if not all find themselves with out-of-date technology and customer service methodologies, but with the same mission: to provide a first-class advocacy and benefits experience. These intense challenges, and the need to respond to them, are hitting at the same time they're being asked to create a 'new normal.'

Additionally, since the end of World War II, each state built their own Departments or Divisions of Veterans' Services - partly to resolve the disparities on behalf of their residents, and partly because states, recognizing the value of caring for their veterans and families, developed programs and benefits of their own. This effort filled in the gaps in services created between the federal and state offerings, but also created another layer of administration.

The overcrowded waters of veterans' benefits delivery two months ago seemed to be 'manageable.' But recent and rapid operating changes in response to COVID-19 has highlighted the inconsistencies and lack of sustainability that exist between the training, technology, and capacity of these organizations. Most importantly, physical co-location strategies between state government, local governments, and the VA, once thought of as an advantage, now appear to be anything but, given the many logistical problems that have arisen from the VA's nationwide Regional Office closures.

In response, we believe the time has arrived to create more streamlined, unified, and tailored relationships between the VA and its state partners. These state agencies are now more capable than ever of implementing consolidated service delivery models that afford continuity, access, and quality across the veterans' benefits delivery landscape. Leveraging what each party does best becomes the coin of the new realm in supporting the future delivery of veterans' benefits and services. We believe current models, already in decline for many reasons, are now being rendered obsolete by this global public health crisis.

How we respond and emerge on the other side of this pandemic needs to include new standards and benchmarks around the delivery, timeliness, efficacy, and impact of veterans' benefits delivery in this country.

We don't take these requirements lightly; we work 'inside' the veterans' benefits delivery system and see the fragmented and ungoverned approach every day. Today, in the middle of this global health crisis, many Congressionally Chartered, third-party advocacy groups representing the interests of their members see their services disrupted, unable to perform their mission in a world of shelter-in-place.

So, what should the future of veterans' benefits delivery look like?

From our combined foxholes, hunkered down in the most-impacted COVID-19 state in the country, it begins with:

- Developing of a true, 'Public-Public Partnership' model between the Department of Veterans Affairs (VA) and all 50 states and territories. While the VA represents the 'back-of-the-house' side of the partnership, adjudicating claims and appeals for benefits, the states represent the 'front-end' of the partnership model, representing the interests of service members, veterans, and their families in their home territory.
- 'Virtual' veterans' benefits advising services for clients capable of interacting with accredited representatives digitally. States, and counties to a certain extent, are the only entities capable of completing large-scale, interoperable technology buys – and keeping them refreshed on an ongoing basis, due to long-term planning and budget cycles not dependent on the vagaries of private giving.
- New, digitally enabled tools and practices supporting cloud-based application submission, following the customer all the way through receipt and confirmation by the VA, including appellate work. Camera-enabled laptops, cellphones, portable scanners and printers with WIFI capacity comprise the new "kit" of our trade. A 100% mobile work force is *our* new normal.
- The designation of conjoined essential functions and personnel that keeps benefits

delivery up and running, no matter the operating environment.

- Flexible telework and work-from-home standards that empower staff to serve clients' needs on their terms, be it from appropriate coffee houses, to traditional offices, to flex-work spaces as utilized in New York City.
- Access to high-speed internet in all locations, to include rural areas.
- Personally Identifiable Information (PII)/ Individually Identifiable Health Information (IIHI) protections throughout all phases (development, submission, and adjudication) of benefits application.
- Virtual 'Help Desks' staffed by individuals who can address both technical and functional questions and issues.
- Expanded co-location strategies in VA Regional Offices between the states and the VA to encourage coordination, best practices, and efficient space utilization.
- Robust training and continuous education strategies that support the Public-Public Partnership model, capitalizing upon deep benches of subject matter expertise.
- All-purpose, or universal accreditation opportunities to encourage a more unified approach to veterans' benefits representation, without quotas or other territorial barriers that historically prevented cross-accreditation among veterans' advocates.
- The development of minimally acceptable performance measures, or benchmarks, by which all third-party advocates operating within the Public-Public Partnership model are held accountable for outcomes associated with their efforts.

As former service members and professionals, the concept of *One Team, One Fight* is near-and-dear to our ethos. We rely upon an unspoken understanding between us, one that unifies our purpose and identities. We are only as good a unit as our weakest teammate and we live in a constant state of improvement and preparedness so that when called upon, we are ready to fight and win – completing the mission no matter what obstacles the operating environment poses.

As we work our way through to the other side of this global health crisis, we must act differently and push for more effective, efficient, and comprehensive models of care and services capable of withstanding incredible pressure and constraint upon them.

Nothing less will be acceptable. Nothing less is owed to the veterans, service members, and families whom we serve.