

D55P00
Department of Veterans Affairs

Operating Budget Data

(\$ in Thousands)

	<u>FY 08</u> <u>Actual</u>	<u>FY 09</u> <u>Working</u>	<u>FY 10</u> <u>Allowance</u>	<u>FY 09-10</u> <u>Change</u>	<u>% Change</u> <u>Prior Year</u>
General Fund	\$8,398	\$8,671	\$8,568	-\$102	-1.2%
Contingent & Back of Bill Reductions	0	0	-214	-214	
Adjusted General Fund	\$8,398	\$8,671	\$8,354	-\$316	-3.6%
Special Fund	738	604	851	247	40.9%
Adjusted Special Fund	\$738	\$604	\$851	\$247	40.9%
Federal Fund	7,379	8,848	9,828	980	11.1%
Adjusted Federal Fund	\$7,379	\$8,848	\$9,828	\$980	11.1%
Adjusted Grand Total	\$16,515	\$18,122	\$19,223	\$911	5.0%

- The proposed fiscal 2010 budget represents a \$0.9 million, or 5%, increase over the fiscal 2009 working appropriation. The Board of Public Works (BPW) reductions in June and October 2008 decreased the fiscal 2009 working appropriation by \$0.6 million.
- The fiscal 2010 general fund allowance decreases by \$0.3 million, or 3.6%. Increases occur in the special and federal fund allowance, which grows by a combined \$1.2 million.
- Contingent reductions eliminate the deferred compensation match for State employees, reducing the Maryland Department of Veterans Affairs (MDVA) fiscal 2010 budget by \$24,130 of general funds.
- Contingent reductions to contractual services for Executive Branch agencies reduce the MDVA budget by \$35,278 of general funds.
- Contingent reductions to personnel reduce the general fund allowance by \$140,356 for regular position abolitions and \$14,270 for contractual employees.

Note: Numbers may not sum to total due to rounding.

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Personnel Data

	<u>FY 08 Actual</u>	<u>FY 09 Working</u>	<u>FY 10 Allowance</u>	<u>FY 09-10 Change</u>
Regular Positions	66.00	73.00	70.00	-3.00
Contractual FTEs	<u>4.38</u>	<u>4.38</u>	<u>4.38</u>	<u>0.00</u>
Total Personnel	70.38	77.38	74.38	-3.00

Vacancy Data: Regular Positions

Turnover and Necessary Vacancies, Excluding New Positions	2.20	3.01%
Positions and Percentage Vacant as of 12/31/08	5.00	7.14%

- The fiscal 2009 working appropriation includes the creation of 3.0 full-time equivalent (FTE) positions for the Cemetery Program. The positions were approved by BPW and will float between all five veterans’ cemeteries. The positions are reserved for graduates of the pre-release program that employs incarcerated veterans and utilize special funds.
- Contingent language in the budget bill cuts 3.0 FTE positions in fiscal 2010.
- Contingent language in the budget bill also reduces general funds for contractual positions, although the exact number of FTE contractual positions lost is unknown at this time.

Analysis in Brief

Major Trends

Maryland Veteran Population Has Increased by an Estimated 27,381 Since Fiscal 2006: An increase in the number of veterans returning from combat in Iraq and Afghanistan, the Base Realignment and Closure (BRAC) Commission recommendations affecting Maryland, and greater outreach to veterans have resulted in an increased number of veterans identified in Maryland.

Garrison Forest Veterans Cemetery Is the Third Busiest in Nation: Maryland's veterans' cemeteries continue to experience growth in the number of burial sites; at the same time, the total number of complaints has decreased.

Incidences of Falls and Mobility Decline Continue to Improve at Charlotte Hall Veterans Home: While Charlotte Hall Veterans Home (Charlotte Hall) still lags behind the State average for incidence of falls and mobility decline, the home has made steady improvements to reduce the number of falls and mobility decline experienced by its residents.

Issues

Outreach, Advocacy, and Service to Maryland's Veterans: A surge in the population of veterans in Maryland due to an increased number of veterans returning from abroad as well as the BRAC base relocation has placed additional importance on the service coordination efforts offered at the State's Veterans Service Offices.

Pre-release Work Program for Incarcerated Veterans: MDVA entered into an agreement with the Department of Public Safety and Correctional Services to employ incarcerated veterans in a pre-release work program. Three roaming position identification numbers have been granted to the Cemetery Program to hire program participants once they are released from the correctional system.

Installation of Computerized Patient Record System: MDVA will be the first State agency to utilize the electronic health record system, Computerized Patient Record System (CPRS), owned and operated by U.S. Department of Veterans Affairs (USDVA). Charlotte Hall has entered into an agreement with USDVA to lease the CPRS software in order to tap into the award winning health information technology network.

Veterans Behavioral Health Initiative: Chapter 555 of 2008 created a Veterans Behavioral Health Initiative to bridge mental health services for veterans returning from Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF). The legislation intended for the State to supplement mental health treatment for OIF and OEF veterans until they can establish a mental health provider through the USDVA. The fiscal 2009 budget provided approximately \$2.8 million for the initiative; however, BPW later reduced that amount by \$552,000.

Recommended Actions

1. Adopt narrative requiring a written report on outreach and service efforts to veterans.

Updates

Performance Measures in Contract to Manage Charlotte Hall Veterans Home: The contract to manage Charlotte Hall will expire in June 2009. The Request for Proposal for the new contract was released in November 2008 and includes additional fiscal incentives tied to performance measures.

Task Force to Study State Assistance to Veterans: Chapter 290 of 2006 established the Task Force to Study State Assistance to Veterans to study the delivery system and make recommendations to improve the delivery of benefits for veterans. Chapter 198 of 2007 extended the termination date of the task force through May 31, 2009. The task force completed its work and submitted a dual interim and final report in December 2008.

D55P00
Department of Veterans Affairs

Operating Budget Analysis

Program Description

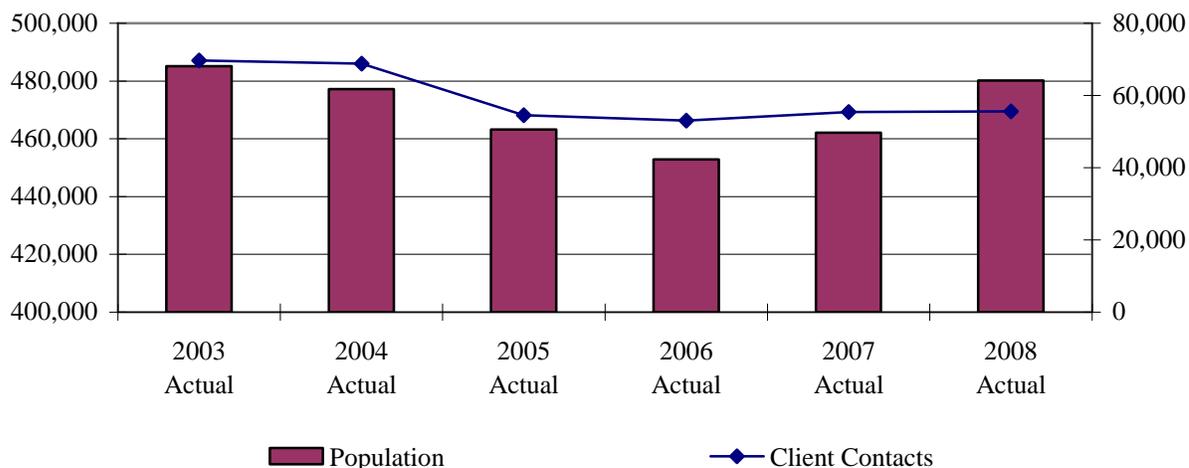
The Maryland Department of Veterans Affairs (MDVA) provides a variety of administrative, outreach, and support services to the State's veterans, their families, dependents, and survivors. The department also manages five veterans' cemeteries, maintains three veterans' war memorials in cooperation with local jurisdictions, and operates and manages Charlotte Hall Veterans Home (Charlotte Hall) in St. Mary's County. The department's goals are to:

- aid veterans in the preparation of claims for benefits to which they are entitled such as service-connected disability compensation, educational assistance, home loans, death benefits, and medical care;
- operate and maintain the five veterans' cemeteries to provide interment for eligible Maryland veterans and their dependents;
- provide upkeep and maintenance for Maryland's war memorials;
- provide and operate the State veterans' home at Charlotte Hall for Maryland veterans who are unable to take care of themselves due to disability, advancing age, or who are in need of nursing home care; and
- coordinate outreach and advocacy efforts to inform veterans, their dependents, and survivors of their benefits and entitlements granted by law.

Performance Analysis: Managing for Results

MDVA's Service Program provides information, guidance, and assistance to veterans, their dependents, and survivors in applying for and obtaining federal, State, and local benefits and entitlements granted by law. These benefits include disability compensation, pension, death benefits, educational assistance, home loans, and medical care. While the population of Maryland veterans was steadily decreasing through fiscal 2006, a number of factors have contributed to a reversal of that trend. As **Exhibit 1** illustrates, the total population of veterans in Maryland has increased from fiscal 2006 to 2008. The return of veterans serving in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) and the Base Realignment and Closure (BRAC) plans are the two biggest contributors to this change. In fiscal 2008, the population of Maryland veterans totaled 480,218. In addition to the new population of veterans entering the State, MDVA enacted new outreach programs in fiscal 2008 and hired 4.0 full-time equivalent (FTE) additional service officers that have caused the number of contacts to rise.

**Exhibit 1
Maryland Veteran Population and MDVA Client Contacts
Fiscal 2003-2008**



MDVA: Maryland Department of Veterans Affairs

Source: Department of Veterans Affairs

The increase in the number of veterans returning from combat in Iraq and Afghanistan spotlights the need for effective outreach and an efficient service delivery system for that particular population of veterans. While the number of returning OEF/OIF veterans are small in comparison to the total veteran population in Maryland, a significant portion of these returning veterans are facing challenges in successfully re-integrating into the community.

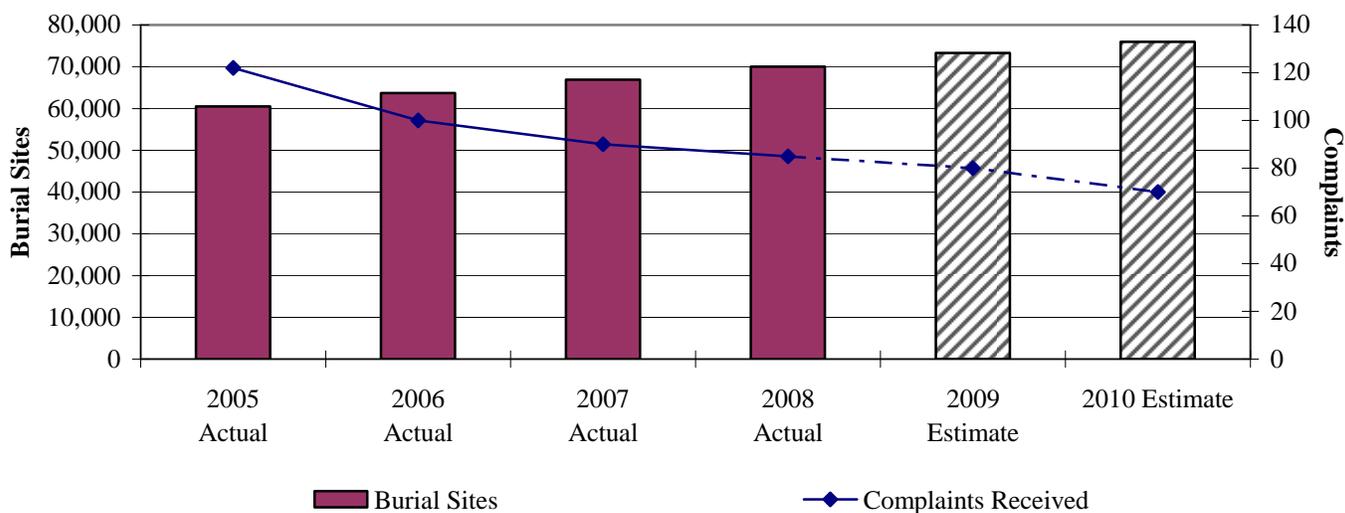
The BRAC Commission tasked with relocating bases around the country recommended changes to four local military bases: Aberdeen Proving Ground, Fort Meade, National Naval Medical Center, and Andrews Air Force Base. These changes will cause the number of veterans in Maryland to increase dramatically over the next five years. Some expect that Maryland will gain approximately 28,000 families by the time the BRAC process is complete.

Cemetery Program

MDVA continues to service Maryland veterans and their spouses at five cemeteries throughout the State: Cheltenham Veterans Cemetery, Crownsville Veterans Cemetery, Eastern Shore Veterans Cemetery, Garrison Forest Veterans Cemetery, and Rocky Gap Veterans Cemetery. These facilities provide interment services to eligible veterans and their dependents. Garrison Forest Veterans Cemetery is the third busiest veterans’ cemetery in the nation, according to the National Cemetery Administration.

The performance data relating to the MDVA’s Cemetery Program is included in **Exhibit 2**. The total number of burial sites in all five veterans’ cemeteries continues to increase, with the total reaching 70,049 in fiscal 2008. MDVA expects this trend to continue and has been working on capital projects at the cemeteries to accommodate the growing number.

Exhibit 2
Burial Sites and Complaints at Maryland’s Veterans’ Cemeteries
Fiscal 2005-2010



Source: Department of Veterans Affairs

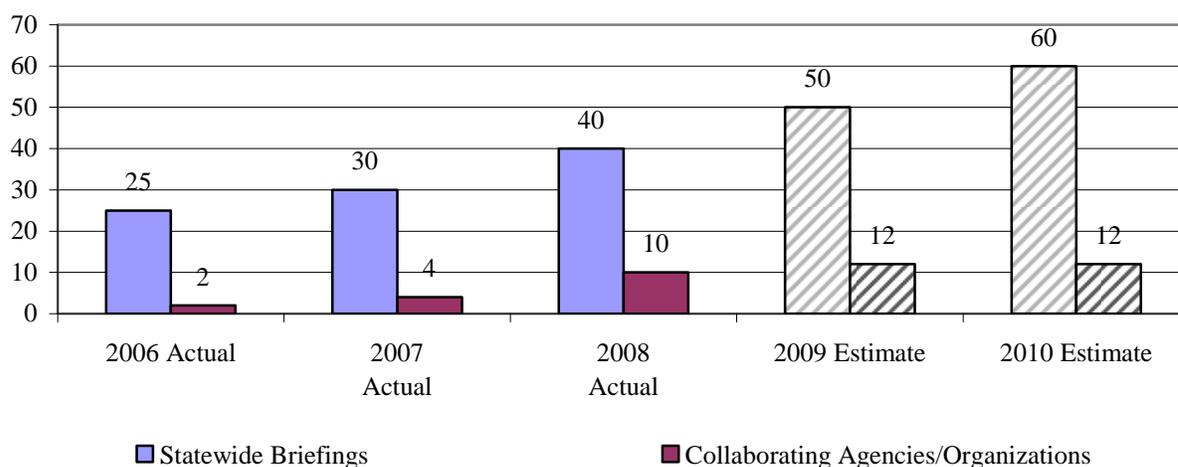
The maintenance of the burial sites and the services offered to families during the interment process are also of high priority to MDVA. Each cemetery must be maintained as a national shrine according to the National Cemetery Administration standards. Thus, one of the MDVA Cemetery Program goals is to maintain burial areas, surrounding lawn areas, buildings, and roads that fulfill the expectations of family members and members of the veterans’ community. As Exhibit 2 shows, the number of complaints has decreased, even as the total number of sites has increased. MDVA expects this trend to continue.

Outreach

The Outreach and Advocacy (OAA) Program was officially created in fiscal 2009 and actively seeks veterans, their dependents, and survivors to inform them of benefits granted to them by law. MDVA also uses the findings of the OAA Program to inform the State and federal governments so that veterans’ needs may be properly addressed.

The OAA Program provides direct marketing to veterans by distributing newsletters and pamphlets, processing requests submitted through the MDVA web site, conducting statewide information briefings, and working with other agencies throughout the State. **Exhibit 3** shows the OAA efforts in reaching veterans measured by the number of briefings conducted and the number of outside agencies with which MDVA has collaborated. In fiscal 2008, MDVA conducted 40 statewide briefings and expects to increase that number to 50 in fiscal 2009 and 60 in fiscal 2010.

Exhibit 3
Outreach and Advocacy
Fiscal 2006-2010



Source: Department of Veterans Affairs

Additionally, the number of agencies that MDVA works with has increased from 2 in fiscal 2006 to 10 in fiscal 2008. In fiscal 2009 MDVA plans to work with 12 organizations including the American Legion, Disabled American Veterans, Veterans of Foreign Wars, Maryland Military Department (Reintegration Program), Maryland Department of Business and Economic Development, Maryland Department of Aging, Maryland Employer Support of the Guard and Reserve, Maryland Veterans Commission, Charlotte Hall Veterans Home Commission, Maryland Department of Health and Mental Hygiene (DHMH), U.S. Department of Veterans Affairs (USDVA) Vocational Rehabilitation Services, and Department of Labor, Licensing, and Regulation.

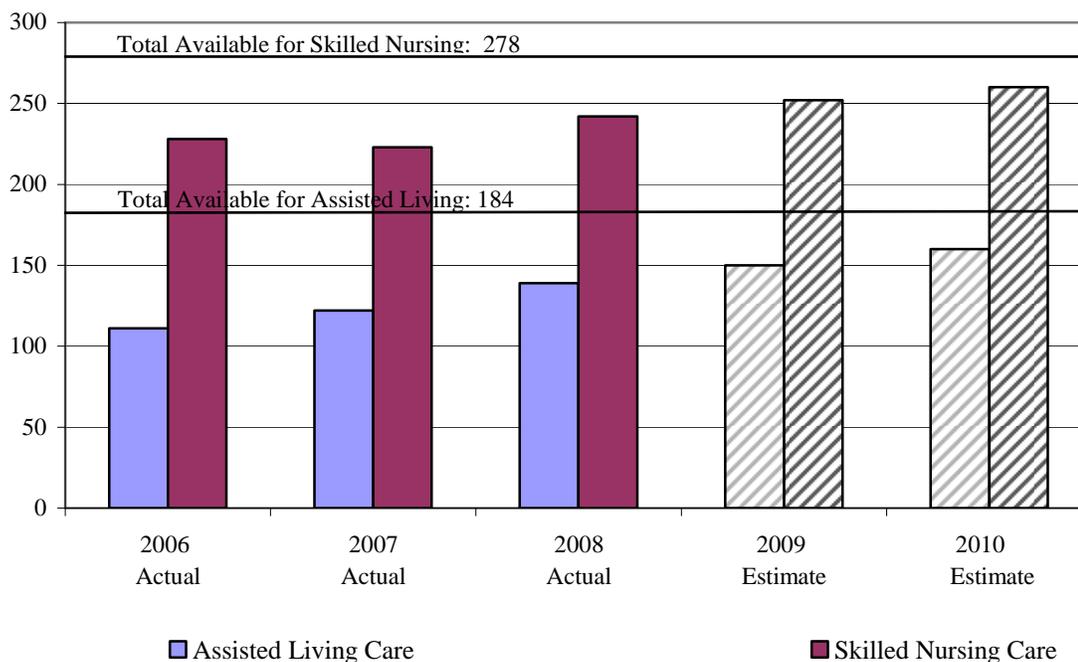
Charlotte Hall Veterans Home

Charlotte Hall, which opened in 1985, is a State long-term healthcare facility located on 126 acres in St. Mary's County. Clinical care and health care management at Charlotte Hall are provided by a private contractor but are overseen by the executive director and other State staff. Charlotte Hall currently has 462 beds designated for assisted living and skilled nursing long-term care for Maryland veterans and eligible spouses who are unable to take care of themselves due to age or disability. The

home provides support and services required for shelter, sustenance, medical care, and the social services necessary to maintain a resident’s quality of life. While Charlotte Hall is open to both men and women, the majority of residents are male.

Exhibit 4 shows the total licensed beds available at Charlotte Hall and the average daily patient population broken down by assisted living care beds and skilled nursing care beds. As the chart shows, the maximum number of beds for assisted living care and skilled nursing care beds is 184 and 278, respectively. The average daily population has been slowly increasing to 139 assisted living residents and 242 skilled nursing care residents in fiscal 2008. The department has a goal to increase the average occupancy to 160 assisted living residents and 260 skilled nursing residents.

Exhibit 4
Average Daily Population at Charlotte Hall
Fiscal 2006-2010



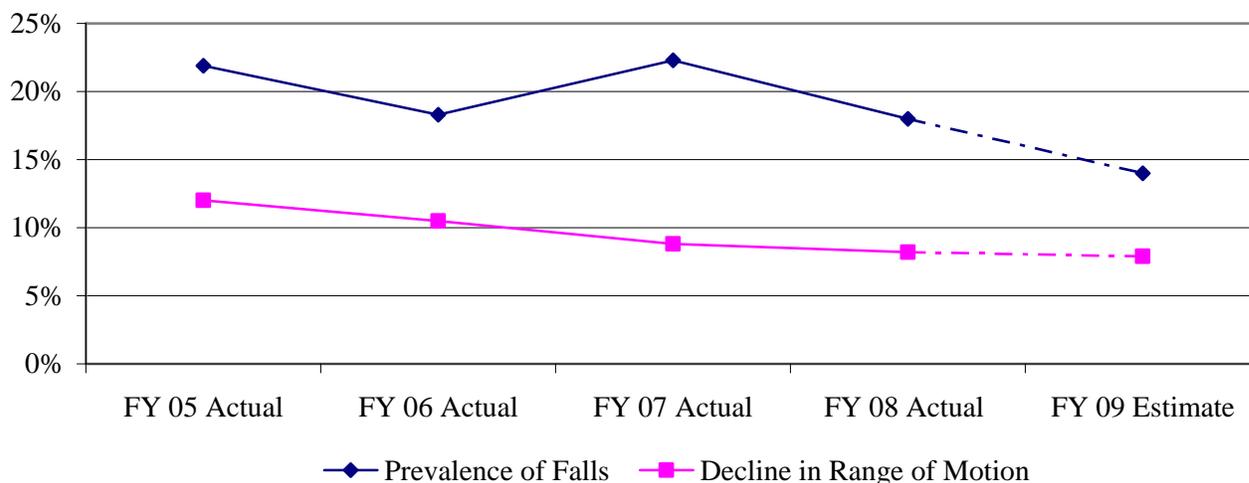
Source: Department of Veterans Affairs

The contract to manage Charlotte Hall will expire in June 2009. One of the goals of the new contractor will be to market the facility to increase the occupancy rate at Charlotte Hall. The contractor is also responsible for the daily operation of the facility. Payment on the contract depends on meeting certain performance and safety requirements, discussed in further detail in the Issues section of this document.

MDVA aims to provide an environment in which residents can maintain functional independence. Charlotte Hall residents consistently exhibit a lower incidence of decline in daily living skills, symptoms of depression, cognitive impairment, behavior symptoms affecting others, and antipsychotic drug use. Its residents also require physical restraints less often than residents in other State facilities, reflecting both the population and the facility’s commitment to maintaining resident dignity and quality of life. Charlotte Hall has a policy of not using restraints except in the most extreme cases; in fact, during fiscal 2008, virtually no residents were physically restrained.

Due to the make-up of the population of Charlotte Hall, different problems are present at Charlotte Hall than at other long-term care facilities, such as the prevalence of falls and a decline in range of motion. While Charlotte Hall still lags behind the State average on these two quality of life measures, **Exhibit 5** shows that the trend has continued to improve in fiscal 2008 and is expected to continue in the future.

Exhibit 5
Daily Living Improvements at Charlotte Hall
Fiscal 2005-2009



Source: Department of Veterans Affairs

When residents are more active, they have a greater chance for falls, especially if the patient demonstrates dementia. Charlotte Hall is also committed to maintaining resident dignity and quality of life, and accordingly, has adopted a policy of not using restraints except in the most extreme cases. While a lack of restraints may result in a greater potential for falls, Charlotte Hall also has a “Safe Fall” program that utilizes equipment such as low beds, protective equipment, and increased supervised recreational and therapeutic activities to reduce the probability of injury when a resident does fall.

Fiscal 2009 Actions

Impact of Cost Containment

The Board of Public Works (BPW) met twice during the interim to reduce funding for State agencies for fiscal 2009. In June 2008, actions taken by BPW reduced the MDVA budget by \$25,133 in general funds and \$718 in federal funds for personnel expenses.

In October 2008, actions taken by BPW reduced the budget by \$0.5 million (\$545,318) in general funds. The second round of cuts by BPW had more significant effects on the agency's services. The following reductions were made:

- \$392,347 reduction within the Cemetery Program resulting in the cancellation of a contract for grave marker installation and realignment as well as a contract for a grave marker grid system;
- \$45,000 reduction based on savings realized by the Service Program's document management system;
- \$6,652 reduction for building maintenance at Charlotte Hall, the balance of which would cover existing maintenance;
- \$3,510 reduction for out-of-state travel; and
- \$97,809 reductions due to statewide health insurance and Other Post Employment Benefits (OPEB) reductions. Fringe benefit appropriations were reduced as OPEB prefunding of \$76,777 was ceased and statewide employee health insurance balances of \$21,032 were used in lieu of budgeted funds.

Additionally, the Governor announced the implementation of a furlough plan for State employees for fiscal 2009 based on salary level, resulting in a \$36,965 general fund reduction for MDVA. While State employees have already taken two furlough days, the action has not yet been formally approved by BPW. There may still be other BPW actions that affect the fiscal 2009 working appropriation, such as abolishing vacant positions, but action has not been taken and the impact on MDVA is unknown.

Proposed Budget

As shown in **Exhibit 6**, the Governor's proposed allowance increases by \$0.9 million, or 5.0%, over the fiscal 2009 working appropriation. General fund support decreases by \$0.3 million, or -3.6%; special fund support increases by \$0.2 million, or 40.9%; and federal fund support increases by \$1.0 million, or 11.1%.

**Exhibit 6
Proposed Budget
Department of Veterans Affairs
(\$ in Thousands)**

How Much It Grows:	<u>General Fund</u>	<u>Special Fund</u>	<u>Federal Fund</u>	<u>Total</u>
2009 Working Appropriation	\$8,671	\$604	\$8,848	\$18,123
2010 Allowance	<u>8,568</u>	<u>851</u>	<u>9,828</u>	<u>19,247</u>
Amount Change	-\$102	\$247	\$980	\$1,125
Percent Change	-1.2%	40.9%	11.1%	6.2%
Contingent Reductions	-\$214	\$0	\$0	-\$214
Adjusted Change	-\$316	\$247	\$980	\$911
Adjusted Percent Change	-3.6%	40.9%	11.1%	5.0%

Where It Goes:

Personnel Expenses

\$141

Employee and retiree health insurance	\$140
Increments and other compensation	70
Other fringe benefit adjustments	60
Turnover adjustments	37
Workers' compensation premium assessment	31
Abolished 3.0 positions (Section 18 of HB 100)	-140
Elimination of Deferred Compensation Match (Contingent on enactment of HB 101) ..	-24
Elimination of Other Post Employment Benefits liability	-18
Reduction for contractual employment (Section 23 of HB 100)	-14

Charlotte Hall Veterans Home

\$733

Increase for contractual physicians including Medical Director, physician, psychiatrist, nurse practitioner, and therapeutic massage therapist	280
Computerized Patient Record System lease and annual costs	185
Free dental care for all residents	120
Free basic vision care for all residents	120
Salon services for all residents	57
Cable television installation	51
One-time equipment purchase of HVAC units	-47
Lower Maryland Environmental Service charge for Charlotte Hall	-33

Other Changes

\$37

Fuel and utility increases at cemeteries	120
Equipment repairs necessary for new trucks and burial equipment	94

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Where It Goes:

Laundry, housekeeping, and garbage removal services will use existing federal funds .	-55
One-time office equipment purchases to outfit three new Service Program offices	-46
Reduction in ground maintenance contracts due to cost containment.....	-43
Contract renegotiations (Section 24 of HB 100)	-35
Other	3
Total	\$911

Note: Numbers may not sum to total due to rounding.

Impact of Cost Containment

The fiscal 2009 working appropriation reflects cost containment actions taken by BPW some of which affect the fiscal 2010 budget moving forward. The cancellation of contracts within the Cemetery Program freed federal funds to pay for other services at the cemeteries that were previously intended to be paid with general funds. Grounds maintenance, laundry, housekeeping, and garbage services will now use the federal funds appropriated for the cancelled fiscal 2009 contract for those services provided in fiscal 2010.

Contingent across-the-board reductions included in the fiscal 2010 budget bill reduce several components of the MDVA budget including:

- \$140,356 of general funds associated with 3.0 FTE positions as part of the abolition of 1,000 positions statewide;
- \$14,270 of general funds to reduce full-time equivalent contractual positions;
- \$24,130 of general funds to eliminate the deferred compensation match; and
- \$35,278 of general funds in the expectation of savings in contracted services based on a favorable bidding climate.

Personnel

Personnel costs for MDVA increase by \$0.3 million, as shown in Exhibit 6. Costs associated with employee and retiree health insurance constitute the majority of the increase in personnel (\$140,000). Salary expenses for the employees of MDVA increased by approximately \$70,000 in the fiscal 2010 allowance. The turnover adjustment, usually an item that reduces personnel expenses due to anticipated vacancies, increases by approximately \$37,000 in fiscal 2010. The fiscal 2009 working appropriation includes a 25% turnover rate for the 4.0 new positions that were added to the Service Program. Now that the positions have been filled, the turnover rate for the agency is lowered dramatically resulting in an increase in the turnover allowance. Contingent on the enactment of legislation, \$24,130 will also be cut from the allowance for the elimination of deferred compensation match for State employees.

Operating Expenses

Charlotte Hall Veterans Home

Operating expenses for MDVA’s six program areas collectively increase by \$0.8 million in fiscal 2010. The driving factor in the budgetary changes occurs within Charlotte Hall. The allowance for the operation of Charlotte Hall increases by \$0.7 million; however, the funding increase occurs primarily in federal funds. **Exhibit 7** shows the fund split at Charlotte Hall. As indicated, the federal fund allowance increases by \$0.9 million, while the general fund allowance decreases by \$0.2 million.

Exhibit 7
Fund Split at Charlotte Hall Veterans Home
Fiscal 2009-2010

<u>Fund</u>	<u>Working Appropriation</u> <u>2009</u>	<u>Allowance</u> <u>2010</u>	<u>Change</u> <u>2009-2010</u>
General Fund	\$4,411,390	\$4,212,175	-\$199,215
Special Fund	118,800	139,300	20,500
Federal Fund	8,246,894	9,157,672	910,778
Total	\$12,777,084	\$13,509,147	\$732,063

Source: Department of Veterans Affairs

All residents at Charlotte Hall receive a per-diem subsidy from USDVA that is applied to the cost of their care. These federal funds are used to pay for the management of Charlotte Hall, contractual physicians, as well as services such as vision care, dental care, beauty salon, and ambulance services. The single largest increase in the budget for Charlotte Hall is for the use of contractual physicians.

Charlotte Hall has also recently entered into an agreement with USDVA to lease its award winning health information technology software, called Computerized Patient Record System (CPRS). The CPRS allows USDVA to provide better, safer, more consistent care. It permits health care professionals at each of the 1,400 locations where USDVA provides care to see the complete health records of any patient. Using an electronic system for records will enable doctors to more easily transfer files for patients and allow diagnoses to occur remotely without the patient having to leave the facility. The cost to lease the software is approximately \$185,000 and covers the annual lease, the cost of a full-time employee to maintain the system, annual utility costs, and a few one-time administrative costs. A more in-depth discussion of the system can be found in the Issue section of this document.

Other Changes

Other changes related to non-personnel operating expenses in the remaining five program areas – Service, Cemetery, Memorials and Monuments, OAA, and Executive Direction – account for only \$63,000 of the total increase. In fact, most of the costs in the other programs are offset by cost containment measures put into place by BPW.

Fuel and utility increases at the State veterans' cemeteries account for a \$120,000 increase in the fiscal 2010 allowance. The Cemetery Program has also budgeted \$94,000 in higher equipment repair costs for equipment that was bought last year. However, these increases are partially offset by reductions in ground maintenance (\$43,000) and laundry, housekeeping, and garbage removal services (\$55,000). Federal funds previously budgeted for the contracts cancelled during BPW reductions in October 2008 are now available to pay for grounds maintenance, laundry, housekeeping, and garbage removal services.

Possible Stimulus Package from Federal Government

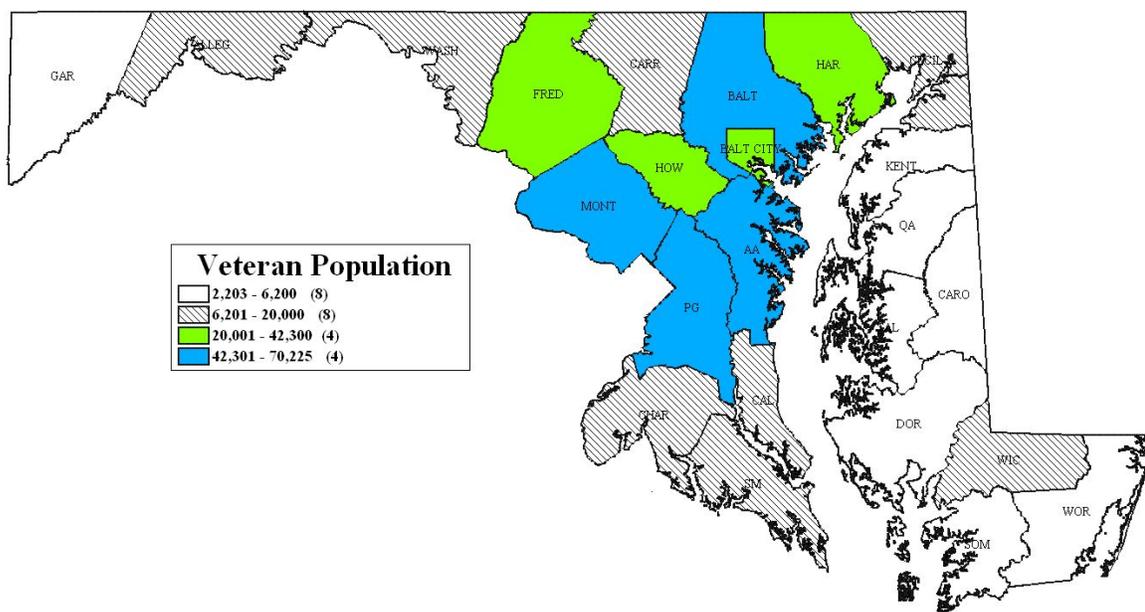
It is widely anticipated that a federal stimulus package containing subsidy funds for State governments will be available at some point in calendar 2009. Draft legislation from the U.S. House Appropriations Committee, entitled The American Recovery and Reinvestment Act of 2009, includes \$950 million for veterans' medical facilities as well as \$50 million for memorial and monument repairs at state veterans' cemeteries. The exact amount and allocation for the stimulus package has yet to be determined and will still need to pass through both chambers of Congress and be signed by the President. **The agency should comment on the latest information coming from the federal government on the details of the stimulus package as it pertains to funding for veterans issues and how the funds might be spent.**

Issues

1. Outreach, Advocacy, and Service to Maryland’s Veterans

MDVA’s Service Program and OAA Program work together to find veterans and their families, to inform them of benefits granted to them by law, and to assist them with obtaining the needed services and benefits. As previously mentioned, the population of veterans in Maryland has been increasing over the past three years. The rising number places an even greater emphasis on the need for an efficient system of outreach, advocacy, and service for Maryland’s veterans. **Exhibit 8** shows the distribution of veterans in each county. As the map illustrates, the population of veterans is highest in Prince George’s, Anne Arundel, Montgomery, and Baltimore counties.

Exhibit 8
Veteran Population in Maryland
2008



Source: United States Department of Veterans Affairs

The fiscal 2009 operating budget added 4.0 new positions to MDVA’s Service Program bringing the total number of veterans service officers up to 10.0 FTEs. The new service officers allowed MDVA to open additional service offices around the State. To date, MDVA has opened two new service offices in Bel Air and Charlotte Hall and plans to open one additional office by the end of January in Hagerstown. **Exhibit 9** lists the service offices and the counties in which they are located.

Exhibit 9
MDVA Service Office Locations

<u>Full-time Service Offices</u>	<u>Jurisdictions</u>
Cumberland	Allegany
Baltimore City	Baltimore City
Hurlock	Dorchester
Frederick	Frederick
Bel Air	Harford
Camp Springs (formerly Landover)	Prince George's
Charlotte Hall	St. Mary's
Hagerstown	Washington

MDVA: Maryland Department of Veterans Affairs

Note: The Hagerstown office is not yet operational. The Maryland Department of Veterans Affairs hopes to open the office in early 2009.

Source: Maryland Department of Veterans Affairs

Operation Enduring Freedom and Operation Iraqi Freedom Veterans

Approximately 1.6 million United States troops have served in Iraq or Afghanistan in the past five years. DHMH has estimated that there were approximately 15,000 OEF and OIF veterans residing in the State in 2008. Although the number of OEF/OIF veterans are small in comparison to the overall numbers of veterans in the State, a significant portion of these returning veterans are facing challenges in successfully reintegrating into their communities.

The agency is asked to submit a report that updates the committees on the services in place to successfully re-integrate OEF/OIF veterans back into civilian life. The report should also describe the additional veterans reached as a result of the new service offices and additional staff added in fiscal 2009.

2. Pre-release Work Program for Incarcerated Veterans

A new program instituted by MDVA and the Department of Public Safety and Correctional Services enlists incarcerated veterans to work in a pre-release work program at the State's veterans cemeteries. The program began in April 2008 and allows up to eight honorably discharged veterans to work at one of the State's veterans cemeteries performing grounds maintenance tasks. MDVA's Cemetery Program was granted 3.0 FTE special funded position identification numbers for the purpose of

employing those veterans once they are released from the correctional system. The source of the special fund is interment fees from the burial of veterans' dependents.

According to the Department of Public Safety and Correctional Services, approximately 420 veterans are in State jails and prisons. Of those, the department selects veterans who were honorably discharged and have the appropriate security clearance to work.

Currently, work crews operate at Garrison Forest Veterans Cemetery and Crownsville Veterans Cemetery. The work ranges from setting headstones, reseeding grass, blowing leaves, woodworking, and other ground maintenance work. Many of the inmates in the program are on the verge of release or parole, while others are in partial release programs. To ensure that inmates have a chance to use their new skills after they are released, MDVA uses the special funded positions to employ veterans that come through the program.

The agency should comment on the number of veterans that have utilized this partnership and the status of any employment that has resulted.

3. Installation of Computerized Patient Record System

The Computerized Patient Record System (CPRS) is a system for storing and using electronic health records for veterans currently used by USDVA. The system has garnered much attention and praise for its use of an electronic system to track health records, developed with extensive involvement of front-line health care providers. In fact, Harvard University recognized USDVA's computerized patient records as one of the top 50 government innovations of 2006. Subsequently, it won the prestigious "Innovations in American Government Award," presented by Harvard University's Ash Institute for Democratic Governance and Innovation at the Kennedy School of Government and administered in partnership with the Council for Excellence in Government and honors excellence and creativity in the public sector. The CPRS allows USDVA to provide better, safer, more consistent care. It permits health care professionals at each of the 1,400 locations where USDVA provides care to see the complete health records of any patient.

In September 2008, MDVA entered into an agreement with USDVA to share in USDVA's award winning electronic health record system, the CPRS. Maryland will be the first state to tap into the national system which will be implemented at Charlotte Hall. The use of CPRS will allow Charlotte Hall to efficiently track veterans' health records when they travel to outside medical providers for treatments and to allow diagnoses to occur remotely if the patient is unable to leave the facility. MDVA will leverage federal funds to cover the cost of the system.

Upfront Infrastructure Costs

Successfully installing the CPRS will require both initial set up costs for the computer infrastructure as well as ongoing annual costs to maintain the system. The upfront costs for installing the CPRS include cabling, equipment, server, data management, and contract management, as shown in **Exhibit 10**. The total cost to install the CPRS is estimated to be \$0.8 million. MDVA plans to use federal funds that were accrued for this purpose.

**Exhibit 10
Infrastructure Costs for Computerized Patient Record System**

<u>Project Component</u>	<u>Estimated Cost</u>
Network Cabling	\$25,500
Network Equipment	307,880
End-user Equipment	457,229
Vista Server	22,000
Pharmacy Data Management	3,825
Project Management	30,000
Total	\$846,434

Source: Maryland Department of Veterans Affairs

Annual Cost

The agreement with USDVA sets out specific costs that MDVA can expect to incur from year-to-year, shown in **Exhibit 11**. The one-time fees include administrative fees and staff training. A computer analyst is needed to maintain the system. The agreement specifies one full-time GS-12 level employee with annual overtime and leave projection. A 3% inflation factor is included in the out-years for salary and annual utility costs. The annual cost to lease the software itself is \$70,000 per year.

**Exhibit 11
Computerized Patient Record System Costs
Fiscal 2010-2012**

<u>Costs</u>	<u>Fiscal 2010</u>	<u>Fiscal 2011</u>	<u>Fiscal 2012</u>
Annual Server Fee	\$70,000	\$70,000	\$70,000
Annual Utility Cost	855	881	907
Annual Data Line Cost	6,000	6,000	6,000
Computer Analyst	101,484	104,528	107,664
One-time Administrative Fees	8,256	-	-
One-time Staff Training	2,122	-	-
Total	\$188,717	\$181,409	\$184,571

Source: Maryland Department of Veterans Affairs

The agency should comment on the status of the installation, the costs already incurred, and the estimated date of completion.

Analysis of the FY 2010 Maryland Executive Budget, 2009

4. Veterans Behavioral Health Initiative

Chapter 555 of 2008 created a Veterans Behavioral Health Initiative in the State to fund gap behavioral health services for underserved OEF/OIF veterans administered by the Mental Hygiene Administration (MHA) in conjunction with the MDVA Outreach and Advocacy Program. The legislation requires MHA to establish behavioral health service coordination for certain veterans for a three-year period. The intent of the program is two-fold: to link veterans to mental health services provided by USDVA and to provide gap services if there is a delay in services available for USDVA. The State will provide crisis intervention; individual, group, and family therapy; substance abuse early intervention and detoxification services; and medications until the veteran can access USDVA care. The legislation also established a Veterans Behavioral Health Advisory Board, chaired by the Lieutenant Governor, to examine and make recommendations on service gaps and opportunities for collaboration and coordination of services.

The legislation targets OEF/OIF veterans returning from combat in Iraq and Afghanistan. According to the USDVA, one-third of all combat veterans are diagnosed as having a mental disorder. Data indicates that 10 to 15% of combat veterans have post-traumatic stress disorder and another 10% have signs of the disorder, depression, or anxiety and may benefit from care. Co-occurring substance abuse problems are also common among this population as are high suicide rates and homelessness.

Funding for the Program

The fiscal 2009 budget provided approximately \$2.8 million for the initiative. However, actions taken by BPW in October 2008 reduced the funding for this program by \$552,000. The reduction will not impact service delivery but will only delay the implementation date of the program. MHA submitted a grant application to USDVA to receive federal funding for this program.

Service Coordination

Service coordination for the eligible veterans will be handled by regional resource coordinators in four regions of the State: Hagerstown, La Plata, Easton, and Baltimore City. The coordinators are responsible for linking an eligible veteran to services in the appropriate geographic region. The coordinators are currently being trained in the various crisis services available through the State as well as through the USDVA.

Eligibility and Medical Necessity Criteria

The population targeted under this program must meet three criteria:

- Individuals must be veterans of the Afghanistan and Iraqi conflicts.
- Individuals must meet the medical necessity criteria that are currently applicable under the public mental health system for the types of services being offered under the program (*i.e.*, outpatient services such as evaluation, medication, medication management, and group and

family therapy). These criteria include a DSM-IV-TR diagnosis (the DSM-IV-TR is the widely used standard diagnostic classification system of mental health disorders); a description of DSM-IV-TR symptoms consistent with the diagnosis; and at least mild symptomatic distress and/or impairment in functioning due to psychiatric symptoms.

- Individuals meeting the medical necessity criteria must have been unable to access USDVA services within two weeks of their contact with MHA.

Estimated Implementation Date

MHA has received federal funding for the program and will begin to offer services in early 2009. **The agency should comment on the progress of this initiative, the approximate date that services will be offered, and the extent of the partnership activities between MHA and MDVA.**

Recommended Actions

1. Adopt the following narrative:

Outreach and Service Efforts for Maryland Veterans: An increase in the number of veterans returning from combat in Iraq and Afghanistan as well as the Base Realignment and Closure Commission recommendations have produced a swell in the population of veterans living in Maryland. The fiscal 2009 budget included the addition of 4.0 positions in the Service Program to meet the demand of the surging population. Consequently, three new veterans' service offices were opened and staff members were added to existing offices. The committees request that the Maryland Department of Veterans Affairs (MDVA) report on the progress made in reaching the veteran community including an update on MDVA's participation in the Veterans Mental Health Initiative.

Information Request	Author	Due Date
Outreach and Service Efforts	MDVA	October 1, 2009

Updates

1. Performance Measures in Contract to Manage Charlotte Hall Veterans Home

The present contract for Charlotte Hall expires in June 2009. The 2008 *Joint Chairmen's Report* required MDVA to report on the specific performance measures, including any fiscal incentives, included in the Request for Proposal (RFP) for the new contract to manage Charlotte Hall. The RFP for the contract was released in November 2008 and will close on February 3, 2009. MDVA expects to have a contract in place by May 2009.

Per instructions contained in the RFP, the new contract will contain performance requirements and positive and negative fiscal incentives. Some of the performance requirements are already in place and others will be unique to this contract. The RFP statement of work contains the following sections that include contract performance requirements: general contract requirements; personnel and staffing; program management; transition planning and execution; retainage/deductions and invoices; insurance; and seven unique functional requirements. The functional requirements are administration, dietary/housekeeping/laundry, facility maintenance/plant operations/grounds, security, social services and counseling, transportation and fleet services, and miscellaneous services.

Positive and Negative Fiscal Incentives

Failure to meet any of the performance requirements listed above is grounds for corrective action. The contractual performance enforcement provisions in the new RFP include:

- payment deductions;
- performance guarantees;
- notification of failure to meet performance standards;
- full or partial payment withholding pending resolution of a performance issue;
- termination for convenience; and
- termination for cause.

Payment deductions and performance guarantees are both new additions for the current RFP. First, dollar amounts will be linked to specific commitments and obligations that the contractor will have to meet. Failure to meet MDVA specifications will result in a reduction of payment. Second, the contractor will report quarterly on performance guarantees contained in its technical proposal, which, if unmet, will have an associated cost to the contractor.

According to the RFP, the contract will also contain positive fiscal incentives as well. The RFP encourages the contractor to market the availability of Charlotte Hall to the public to increase residency rates. Since the contractor is paid partly on a unit rate per resident, the contractor stands to benefit if it is successful in its marketing efforts.

2. Task Force to Study State Assistance to Veterans

Chapter 290 of 2006 originally established the Task Force to Study State Assistance to Veterans to study the delivery system and make recommendations to improve the delivery of benefits for veterans. Chapter 198 of 2007 extended the termination date of the task force through May 31, 2009. The task force completed its work and submitted a dual interim and final report in December 2008.

The task force was charged with making recommendations on the availability and accessibility of services for veterans, the efficiency of existing services, the feasibility of establishing new services for veterans, and the potential impact of an increased number of veterans returning from military service.

Efficacy of Services and Benefits Provided to Veterans

In its report, the task force cited concerns about whether information is being expediently and adequately exchanged between the federal and State government, as well as how veterans receive information about services and benefits available to them.

Based on the testimony received and research performed, the task force recommended several practical changes to improve communication and service delivery. Recommendations include advocating for a change in the Certificate of Release or Discharge, known as DD-214, to allow a veteran to “opt-out” of enrollment in the State veterans’ database, rather than maintaining the current “opt-in” method. This would give MDVA a more accurate picture of the number of veterans in the State and their possible service needs. Another recommendation is for the federal government to give the MDVA medical staff access to the Armed Forces Health Longitudinal Technology Application, and electronic medical information system being developed by the federal Department of Defense. Improved information sharing between the State and federal government would allow MDVA to better diagnose and serve veterans.

Accessibility of Service Offices and Advocates

There are currently seven full-time service office locations in Maryland: Baltimore City; Bel Air; Cumberland; Hurlock; Frederick; Charlotte Hall; and Camp Springs. MDVA plans to open an additional office in Hagerstown in early 2009. There are also a number of itinerant service office locations throughout the State where a veteran may meet with a service officer.

The task force agreed that a veteran should be within a 40-mile or a 45-minute driving distance of the nearest full-time service office in the State. In order to accomplish this goal, the task

force recommended that the State plan to open additional full-time service offices, including one in Garrett County, the upper Eastern Shore, and the lower Eastern Shore.

The task force also recommended increasing awareness of existing programs and services while developing partnerships to expand opportunities for outreach and to expand the reach of mobile services offered by the Disabled American Veterans' Mobile Service Office Program. Additionally, the task force recommended that that State investigate the possibility of making National Guard Armories and Reserve centers available to assist in outreach. Lastly, the State should investigate the possibility of expanding the role of the Maryland Defense Force in a support role for administrative services.

Services Provided to Veterans Returning from Recent Conflicts

The task force explored several different benefits and services provided to veterans including federal medical, educational, and vocational benefits and State benefits such as the OAA Program, the Veterans Behavioral Health Initiative, the Maryland Army National Guard Reintegration Program, and educational benefits. These benefits are particularly important for veterans returning from combat abroad.

Based on services available to veterans and the unique characteristics of the population of veterans returning from combat, the task force made several recommendations to assist returning veterans' to access the care and services that are needed. Recommendations include identifying best practices for assisting veterans in need, such as the Illinois Warrior Assistance Program that provides traumatic brain injury screening and follow-up to returning OEF/OIF veterans; coordinating with colleges and universities to assist veterans in transitioning to the educational environments; providing training for private sector health care providers and local law enforcement officials with training on the issues facing veterans and their families; and studying the feasibility of implementing a Veterans Court, similar to the mental health and drug courts already established.

Possible Use of Crownsville Hospital Center

The task force discussed the possibility of using the abandoned Crownsville Hospital Center as an additional State-run home for veterans or for community-based services for homeless veterans. Possibilities to improve services to homeless veterans might include developing public-private partnerships, similar to the Maryland Center for Veterans Education and Training in Baltimore.

The task force had three main recommendations with regard to developing programs for homeless veterans:

- Should the State decide that an additional veterans' home is warranted, the State should investigate opportunities for public-private partnership to develop the facility.
- The State and federal government should work to improve access to services for Maryland's homeless veterans, including developing public-private partnerships.

- The Veterans Behavioral Health Advisory Board should identify ways to improve access to services for homeless veterans.

Identifying Ways to Make State and Federal Benefits and Services More Timely and Comprehensive

A top concern of the task force was veterans' timely access to services and examining ways to expedite the process. One example is the transfer of hard copy medical records that delays the transfer of information from agency to agency. The task force recommended the federal government to make greater use of computerized patient records to improve continuity of veteran care and expedite the disability determination process. The task force also recommended automatic enrollment for federal medical benefits for veterans. Lastly, MDVA and the Maryland Higher Education Commission should work collaboratively to maximize the outreach of educational benefits offered under the Post-9/11 Veterans Educational Assistance Act.

Improving Outreach to Female Veterans

The task force found the State to have not had great success in conducting outreach to female veterans. As of December 2007, MDVA had over 20,000 veterans in its database, but only 487 were women. Based on testimony about the problems facing female veterans, especially those that are homeless, the task force recommended that the State continue to work to improve outreach to women by providing information specific to female veterans at musters hosted by MDVA. The task force also recommended that the State provide medical providers and communities with training to address issues related to female veterans.

Other Issues

Transportation can be a critical obstacle to veterans in receiving proper treatment. Upon visiting Charlotte Hall, the task force heard of many instances in which the distance or difficulty in getting to a medical provider prevented veterans from regularly receiving care. Thus, the task force recommended that increased transportation option be a priority for federal and State agencies, with additional possibilities for public-private partnerships.

Recruiting and retaining health care professionals is another critical component of maintaining access to care. Health care shortages affect the ability to provide access to physicians, psychiatrists, and nurses. The task force found that recruiting retirees to work on a part-time basis may be one strategy to meet the demand for medical professionals.

Lastly, the task force found the Veterans Commission in Prince George's County to be an important step to improve outreach and services to veterans in a county with a significant veteran population. The task force recommended that other counties, particularly those with high veteran populations, consider creating a similar commission.

Conclusion

While many State and federal benefits are available to veterans in Maryland, fragmentation of services and inadequate communication among organizations may hamper the delivery of these benefits. Many of the recommendations contained in the task force's report do not advise creation of new benefits, but rather suggest improvements to benefits and services already available.

Current and Prior Year Budgets

Current and Prior Year Budgets Department of Veterans Affairs (\$ in Thousands)

	<u>General Fund</u>	<u>Special Fund</u>	<u>Federal Fund</u>	<u>Reimb. Fund</u>	<u>Total</u>
Fiscal 2008					
Legislative Appropriation	\$8,842	\$627	\$7,379	\$0	\$16,849
Deficiency Appropriation	0	0	0	0	0
Budget Amendments	56	180	0	0	236
Cost Containment	-500	0	0	0	-500
Reversions and Cancellations	0	-69	0	0	-69
Actual Expenditures	\$8,398	\$738	\$7,379	\$0	\$16,515
Fiscal 2009					
Legislative Appropriation	\$9,100	\$604	\$8,848	\$0	\$18,552
Cost Containment	-570	0	-1	0	-571
Budget Amendments	141	0	0	0	141
Working Appropriation	\$8,671	\$604	\$8,848	\$0	\$18,122

Note: Numbers may not sum to total due to rounding.

Fiscal 2008

In fiscal 2008, the budget for MDVA closed out at \$16.5 million, a decrease of \$0.3 million over the original legislative appropriation.

General fund appropriations for the agency decreased by approximately \$0.4 million due to cost containment by BPW to contractual services at Charlotte Hall (\$500,000) and cost-of-living increases for all subprograms within MDVA (\$55,672). The cost containment action is identified as a fund swap from general fund to federal funds based on the new per diem payments made by the USDVA that went into effect in the last part of fiscal 2008. There is no change in service at Charlotte Hall based on this reduction.

Special fund appropriations increased by \$180,000 in fiscal 2008 due to increased interment fees collected by the Cemetery Program. At the end of fiscal 2008, \$69,000 of the special fund appropriation was cancelled from the budget of Charlotte Hall.

Fiscal 2009

Budget amendments during fiscal 2009 have increased the general fund appropriation for MDVA by \$141,000. The two amendments include:

- \$59,802 increase for the fiscal 2009 cost-of-living adjustment for all subprograms within MDVA; and
- \$81,493 increase for annual salary review adjustments for veterans service officers and cemetery workers.

Cost containment actions approved by BPW in June 2008 reduced the general fund appropriation by \$141,295 and the federal fund appropriation by \$718 for fiscal 2009 for personnel expenses.

In October 2008, actions taken by BPW reduced the budget by an additional \$0.5 million in general funds. These actions had more significant effects on the agency's services. The following reductions were made:

- \$392,347 reduction within the Cemetery Program resulting in the cancellation of a contract for grave marker installation and realignment as well as a contract for a grave marker grid system;
- \$45,000 reduction based on savings realized by the Service Program's document management system;

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- \$6,652 reduction for building maintenance at Charlotte Hall, the balance of which would cover existing maintenance;
- \$3,510 reduction for out-of-state travel; and
- \$97,809 reduction due to statewide health insurance and OPEB changes. Fringe benefit appropriations were reduced as OPEB prefunding of \$76,777 was ceased and statewide employee health insurance balances of \$21,032 were used in lieu of budgeted funds.

**Object/Fund Difference Report
Department of Veterans Affairs**

<u>Object/Fund</u>	<u>FY08 Actual</u>	<u>FY09 Working Appropriation</u>	<u>FY10 Allowance</u>	<u>FY09 - FY10 Amount Change</u>	<u>Percent Change</u>
Positions					
01 Regular	66.00	73.00	73.00	0	0%
02 Contractual	4.38	4.38	4.38	0	0%
Total Positions	70.38	77.38	77.38	0	0%
Objects					
01 Salaries and Wages	\$ 3,412,928	\$ 3,765,278	\$ 4,087,477	\$ 322,199	8.6%
02 Technical and Spec. Fees	99,994	133,178	137,867	4,689	3.5%
03 Communication	70,503	81,408	83,582	2,174	2.7%
04 Travel	51,857	56,205	51,857	-4,348	-7.7%
06 Fuel and Utilities	419,189	428,899	511,172	82,273	19.2%
07 Motor Vehicles	193,451	4,039	104,892	100,853	2497.0%
08 Contractual Services	11,726,807	13,001,849	13,724,609	722,760	5.6%
09 Supplies and Materials	194,538	107,777	98,893	-8,884	-8.2%
10 Equipment – Replacement	67,465	113,660	62,873	-50,787	-44.7%
11 Equipment – Additional	35,992	137,230	91,303	-45,927	-33.5%
12 Grants, Subsidies, and Contributions	204,794	198,088	198,000	-88	0%
13 Fixed Charges	37,779	56,165	56,282	117	0.2%
14 Land and Structures	0	38,254	38,000	-254	-0.7%
Total Objects	\$ 16,515,297	\$ 18,122,030	\$ 19,246,807	\$ 1,124,777	6.2%
Funds					
01 General Fund	\$ 8,398,138	\$ 8,670,612	\$ 8,568,493	-\$ 102,119	-1.2%
03 Special Fund	737,984	603,800	850,606	246,806	40.9%
05 Federal Fund	7,379,175	8,847,618	9,827,708	980,090	11.1%
Total Funds	\$ 16,515,297	\$ 18,122,030	\$ 19,246,807	\$ 1,124,777	6.2%

Note: The fiscal 2009 appropriation does not include deficiencies. The fiscal 2010 allowance does not include contingent reductions.

**Fiscal Summary
Department of Veterans Affairs**

<u>Program/Unit</u>	<u>FY08 Actual</u>	<u>FY09 Wrk Approp</u>	<u>FY10 Allowance</u>	<u>Change</u>	<u>FY09 - FY10 % Change</u>
01 Service Program	\$ 807,017	\$ 1,087,252	\$ 1,121,154	\$ 33,902	3.1%
02 Cemetery Program	3,295,565	3,043,857	3,298,580	254,723	8.4%
03 Memorials and Monuments Program	402,450	405,982	401,097	-4,885	-1.2%
05 Veterans Home Program	11,182,207	12,777,084	13,509,147	732,063	5.7%
08 Executive Direction	660,758	600,891	704,525	103,634	17.2%
11 Outreach and Advocacy	167,300	206,964	212,304	5,340	2.6%
Total Expenditures	\$ 16,515,297	\$ 18,122,030	\$ 19,246,807	\$ 1,124,777	6.2%
General Fund	\$ 8,398,138	\$ 8,670,612	\$ 8,568,493	-\$ 102,119	-1.2%
Special Fund	737,984	603,800	850,606	246,806	40.9%
Federal Fund	7,379,175	8,847,618	9,827,708	980,090	11.1%
Total Appropriations	\$ 16,515,297	\$ 18,122,030	\$ 19,246,807	\$ 1,124,777	6.2%

Note: The fiscal 2009 appropriation does not include deficiencies. The fiscal 2010 allowance does not include contingent reductions.