

Agenda

Pennsylvania State Veterans Commission

02 April 2021 at 10:00 AM

Virtual Meeting

1000 (5)	CALL TO ORDER	Chairman Sam Petrovich
	Moment of Silence	Vice-Chairman Nick Taylor
	Pledge of Allegiance	Chairman Sam Petrovich
1005 (5)	Commission Introduction	Chairman Sam Petrovich
1010 (3)	Oath of Office	MG Mark Schindler
	James Hogan-TAL	
1013 (3)	Approval of 5 February meeting minutes	REQUIRES A VOTE
1016 (10)	DMVA Military Update	MG Mark Schindler
1026 (15)	VISN 4	Mr. Tim Liezert
	OLD BUSINESS	
	NEW BUSINESS	
1041 (5)	DMVA, Policy, Planning & Legislative Affairs	Mr. Seth Bengé
1046 (10)	DMVA, Bureau of Veterans Homes	Mr. Rich Adams
1056 (10)	DMVA, Bureau of Programs, Initiatives, Reintegration and Outreach (PIRO)	Mr. Joel Mutschler
1106 (4)	Approval of Programs Report (Report provided by DMVA)	REQUIRES A VOTE
1110 (5)	Act 66 Committee report	Mr. Richard Hudzinski
1115 (5)	RETX Committee report	Mr. Justin Slep
1120 (5)	Legislative Committee report	Mr. Charles Jackson
1125 (5)	Pensions & Relief/Grave markings Committee report	Ms. Connie Snavelly
1135 (10)	Member-at-Large Committee	Chairman Sam Petrovich
1145 (10)	Good of the Order	Chairman Sam Petrovich
1155 (5)	Next Meeting:	
	June 4, 2021	
	Webex Virtual	
1200	ADJOURNMENT	Chairman Sam Petrovich
	RETIRING OF COLORS	Chairman Sam Petrovich

State Veterans Commission

Meeting Minutes

February 5, 2021
10:00 AM to 11:57 AM
Webex Video Teleconference

Call to Order **Chairman Samuel Petrovich**

The Pennsylvania State Veterans Commission (SVC) meeting was called to order at 10:00 AM by Chairman Samuel Petrovich.

Moment of Silence and Pledge of Allegiance

Vice Chairman Nicholas Taylor opened the meeting with a moment of silence and remembrance dedicated to the start of Operations Desert Shield and Desert Storm 30 years ago and to all Veterans who lost their lives in all wars, and Chairman Samuel Petrovich led a recitation of the Pledge of Allegiance.

Commission Introductions

MG Mark Schindler	The Adjutant General (Acting)
Maj Gen (Ret) Eric Weller	Deputy Adjutant General for Veterans Affairs
Mr. Marc Ferraro	Interim Lead Deputy-DMVA
Mr. Samuel Petrovich	Chairman, SVC
Mr. Nicholas Taylor	Vice Chairman, SVC / Catholic War Veterans
Mr. Robert Forbes	Executive Director, AMVETS
Mr. John Pliska	Commander-designee, AMVETS
Mr. Ronald Peters	Commander, Veterans of Foreign Wars
Mr. John Getz	Adjutant, Veterans of Foreign Wars
Mr. Leonard Johnson	Commander, Disabled American Veterans
Mr. William Scott	President, Blinded Veterans Association
Mr. Justin Slep	President, PA State Association of County Directors
Mr. Keith Beebe	President, Military Officers Association of America
Mr. Larry Googins	Commander, Vietnam Veterans of America
Mr. Christopher Fidler	Representative, Keystone Paralyzed Veterans of America
Mr. Robert Ziltz	Commandant, Marine Corps League
Mr. Richard Fine	Designee, Jewish War Veterans
Mr. James Hogan	Adjutant, The American Legion
Mr. Robert John	Commander, The American Legion
Ms. Constance Snavelly	Member-at-Large
Mr. John Cyprian	Member-at-Large
Mr. Charles Jackson	Member at Large
Mr. Michael Brooker	Member-at-Large
Mr. Tim Liezert	VISN 4

Others Present

Mr. Nathan Silcox	Office of Sen. Mike Regan
Ms. Patricia Derry	DMVA-OA
Ms. Elizabeth Pettis	DMVA-OCC
Ms. Joan Nissley	DMVA-OVA

Mr. Jeffrey Wallitsch	DMVA-OCC
Mr. Phillip Arnold	Adjutant, MOPH
Mr. Gilbert Durand	DMVA-PPL
Mr. Seth Benge	DMVA-PPL
Mr. Rick Hamp	DMVA-OVA
Mr. Rich Adams	DMVA-BVH / SWVC
Ms. Jennifer Spitler	DMVA-PIRO (Outreach and Reintegration)
Ms. Samantha Crossman	DMVA-PIRO (Outreach and Reintegration)
Mr. Joel Mutschler	DMVA-PIRO
Ms. Michelle Garrison	DMVA-PIRO (Programs and Services)
Mr. Chip Gilliland	DMVA-PIRO (Outreach and Reintegration)
Mr. Gregory Holler	DMVA-PIRO (Programs and Services)
Mr. Paul DeVincenzo	DMVA-PIRO (Outreach and Reintegration)
Ms. Erica Moore	DMVA-PIRO (Outreach and Reintegration)
Mr. Greg Holler	DMVA-PIRO (Programs and Services)
Ms. Catherine Reibsane	DMVA-PIRO (Programs and Services)
Mr. Brian Natali	DMVA-PIRO (Programs and Services)
Mr. Jeffery King	DMVA-PIRO (Programs and Services)
Ms. Brett Anne Beatty	DMVA-PIRO (Programs and Services – Phila.)
Mr. Aaron Rieber	DMVA-PIRO (Programs and Services – Pitt.)
Mr. Anthony Digiacomio	PSACDVA-Crawford County
Ms. Lisa Kaye	PSACDVA-Monroe County
Mr. David Eisele	PSACDVA-Lackawanna County
Mr. Tony DiFrancesco	PSACDVA-Dauphin County
Ms. Jennifer Hagaman	PSACDVA-Clinton County
Mr. Eric Cepek	PSACDVA-Forest County
Mr. David Cowgill	VISN 4
Mr. James “Woody” Hogan	TAL
Mr. Robert Gray	Keystone Paralyzed Veterans of America
Mr. Richard Hudzinski	Vietnam Veterans of America
Mr. Bryan McCrickerd	VFW
Oath of Office	MG Schindler
General Schindler administered the oath of office to Mr. Robert Forbes (AMVETS), Mr. Charles Jackson (Member-at-Large – Vietnam), and Mr. Michael Brooker (Member-at-Large) as new members of the State Veterans Commission.	
Approval of the December 4, 2020 Meeting Minutes	
Motion: Mr. Peters, VFW, made a motion to approve the minutes.	
Second: Mr. Pliska, AMVETS, seconded the motion.	
The body agreed; motion carried.	
Military Update	MG Schindler
Referencing the slides, you can see the PA Army and Air National Guard commitments. Currently, we have just over 1,000 mobilized in federal service. Slide 2 shows a continuation of Air National Guard missions throughout the year. And, slide 3 takes us through the current deployments. We look to average approximately 1,000 between individual and unit mobilizations from the Army and Air National Guard. Of significance, since early January, we have had requests and a build of forces to support local and federal law	

enforcement in Washington DC. We had a build of 1,000 initially, up to approximately 2,400 Soldiers and Airmen supporting law enforcement agencies in DC. They started to come back to PA about seven days after the Inauguration. That was the first 1,000. The next 1,000, who arrived later, started to come back ten days after the Inauguration. So, 2,000 came back to PA by the end of January. There was an initial request for 4,000 more to continue supporting law enforcement in the DC region. We decided we could support 400 from PA, so 400 Soldiers and Airmen who had come back from DC regrouped for a couple days and went back to continue to support those agencies. Right now, it looks like that support will continue until early March. Obviously, the mission and the agencies requesting that support will dictate if it ends sooner. These were Soldiers and Airmen that leadership asked, “Are you willing to continue supporting this mission?” And, they said, “Yes,” they were willing to continue to support the mission.

The PA National Guard (PANG) has been involved with Operation Warp Speed also, which is currently administering COVID-19 vaccinations to all eligible within the PANG. That is under Department of Defense guidance. The vaccine was made available to PANG members beginning January 4th, on a voluntary basis, with priority given to Soldiers and Airmen actively supporting our COVID-19 missions. Medical specialists are administrating the program at several facilities across the Commonwealth, including Ft Indiantown Gap. The initial doses we have received are relatively small, but I think we have close to 800 currently vaccinated and most of the other vaccinations are coming in as we speak – we are working to get it out to our frontline workers within the National Guard as we speak. That will continue to move forward at a pretty rapid pace as more vaccines come available.

Of course, our COVID response to the state of Pennsylvania continues. We have approximately 275 Soldiers and Airmen currently on orders supporting long-term care facilities across the state, aiding with evaluations, PPE, site assessments etc., depending on the particular mission requested of them. So, we continue to provide that support across the Commonwealth. We are currently also working with the PA Emergency Management Agency (PEMA), looking at what type and where any needs may fit for PANG in support of long-term vaccination programs throughout the Commonwealth. We are working with PEMA to determine if there will be a need, where will it be, and how PANG will fit into those needs across the state.

Pending any questions, that concludes my briefing on PANG mobilizations.

Questions/Discussion

Mr. John, American Legion: I know there have been some calls by legislators for investigation into the movement of Guardsmen from the Capitol to the parking garage on January 21st. Have you received any information on that? Is that investigation ongoing?

MG Schindler: I believe it is ongoing. I can tell you that it did not involve PANG Soldiers or Airmen. There were a lot of questions from legislators about when they were moved. In fact, I was on a call with our own state legislators, assuring them that no PA Guardsmen were forced to sleep in a garage. The pictures and videos taken of folks sleeping in the Capitol were those Soldiers on break from 12-hour shifts. So, they could keep them from being out in the elements for 12 hours, they were just taking them into places where they could take a break. Of course, people are going to take and post photos saying, “look how these folks are being mistreated.” But they were not PA Soldiers; there were some from the MD National Guard and some other states. As far as the investigation, my assumption is that it is still ongoing. But, again, we did not have any PA Guardsmen involved. Does that help?

Mr. John: It does, sir. Thank you very much.

Good morning and Happy New Year, everybody.

You have received our slides with updated access, wait time, and care in the community data as a read ahead. Please let me know if you have any questions.

1. Leadership Update

Jaconda Lightburn, Ph.D., has been appointed as the associate director/chief operating officer at Lebanon VA Medical Center effective January 17, 2021. Lightburn is currently the assistant medical center director at the Veterans Health System of the Ozarks in Fayetteville, Arkansas and led the health care system's response to the national pandemic. Prior to this role, she has had multiple senior leadership experiences at several VA healthcare facilities including acting assistant director at the Washington DC Veterans Affairs Medical Center and acting assistant/associate director at the Charleston VA Medical Center, South Carolina. She began her VA career as the chief of safety, and green environmental management system manager at the Charleston VA Medical Center. Lightburn is a retired Veteran with over 24 years of honorable and distinguished service.

Barb Forsha, Deputy Director of the VA Pittsburgh began serving as the Acting Director of the Clarksburg VA on January 4. William Shaughnessy, VA Pittsburgh Administrative Services Officer for Surgery is currently serving as the Deputy Director in Pittsburgh.

We are currently searching for new chiefs of staff for our Medical Center's in Butler and Erie.

2. VISN 4 Mental Health Update

Two strategic goals for FY21:

Increase use of VVC at all facilities: Build upon successes in offering video care for mental health services to maintain access, particularly in the provision of individual and group psychotherapy; having VVC be an option for all clinicians to use when clinically appropriate and acceptable to a Veteran; rates of VVC utilization in mental health programs increased monthly since the start of the pandemic response, with December showing 27.1% of all MH workload done by VVC (inclusive of Homeless Programs).

Expansion of Substance Abuse Disorder care at all facilities: Re-establish in-person care whenever safe to do so while taking necessary precautions; establish or expand virtual groups; expand prescribing efforts beyond mental health programs; expand and maximize residential program bed access.

Suicide Prevention Update:

- Key suicide prevention initiatives across VISN 4 included further expansion of efforts with community and state partners. VA's public health strategy combines partnerships with communities to implement tailored, local prevention plans while also focusing on evidence based clinical strategies for intervention.
- The goals of VA's suicide prevention efforts are not to get every Veteran enrolled in VA care, but rather to equip communities to help Veterans get the right care, whenever and wherever they need it. Put simply, VA must ensure suicide prevention is part of every aspect of Veterans' lives, just not their interaction with VA.
- In support of this model, VISN 4 has hired a Community Engagement and Partnership Coordinator (CEPC) at each of our nine medical centers. Their work will focus on Community Coalition Building.

- We continue to emphasize outreach to our vulnerable populations and to assure that Veterans have access to MH care during the pandemic.
- VISN 4 has also selected Pete Albert as our new VISN 4 Suicide Prevention Program Manager. He will assist with the roll-out of this new public-health approach, assist facilities with implementation of suicide prevention strategies, and will serve as a point of contact and subject matter expert. Mr. Albert has a wealth of experience within the suicide prevention realm that he brings to the position.

3. COVID-19 Vaccine – Update

During the week of December 14th, our Pittsburgh and Philadelphia VAs began receiving and administering the Pfizer-BioNTech COVID-19 vaccine.

During the week of December 21st, the seven other VISN 4 facilities began receiving and administering the Moderna COVID-19 vaccine.

Some community-based outpatient clinics have already begun administering the vaccine, and some parent facilities are still working out logistics for offering vaccines there. We are working hard and carefully to ensure strict adherence to storage and preparation guidelines and timeframes as well as zero waste results.

VA worked with the CDC to develop a phased distribution plan to maximize the benefit of COVID-19 vaccine. In these first weeks, there is limited vaccine available. As production increases, our goal is to offer a COVID-19 vaccine to all Veterans and health care workers who choose to be vaccinated. The different VISN 4 facilities are at different stages in the distribution plan.

VA has set up a website, which includes a Keep Me Informed tool, to help keep Veterans updated regarding vaccine distribution. While Veterans don't need to sign up for this (or anywhere) to receive the COVID-19 vaccine, it may be helpful for both them and their local facility for planning purposes if they do.

As vaccine supply increases and we move through the distribution plan, care teams and local facilities will contact Veterans to let them know of their options.

VA announced earlier this month that it had administered initial COVID-19 vaccine doses to more than 14,000 Veterans at high risk of getting COVID-19 infection, and more than 132,000 health care employees as of Jan. 4.

In the meeting minutes we will share VA's main COVID-19 COVID vaccine webpage (www.va.gov/health-care/covid-19-vaccine/).

4. Caregiver Support Update

On Oct. 1, VA's Program of Comprehensive Assistance for Family Caregivers expanded eligibility to include Veterans who incurred or aggravated a serious injury or illness in the line of duty on or before May 7, 1975 (WWII, Korean War and Vietnam Veterans). It previously served only post-9/11 Veterans. The final phase of expansion will occur two years from the expansion date and will expand PCAFC to include eligible Veterans from all eras who have a serious injury incurred or aggravated in the line of duty in the active military, naval, or air service.

The program provides family caregivers of eligible Veterans with benefits that include training, enhanced respite care, counseling, technical support, beneficiary travel, a monthly stipend payment and access to health care (if qualified) through the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA).

Both the VISN Centralized Eligibility and Appeals team and each facility have been hiring additional staff and working very hard to manage the expansion.

In addition, all caregivers who provide personal care services to Veterans enrolled in Veterans Affairs (VA) health care have access to the Program of General Caregiver Support Services. Every site is working on continuing to expand the PGCSS this fiscal year by offering groups, individual interventions, staff training, community outreach, and many other activities.

For more information on either program, and other VA services for caregivers, visit www.caregiver.va.gov.

During the first 90 days of the program expansion, VISN 4 received approximately 1,137 applications. During the same time frame about 35,168 applications were received nationwide.

More than 59% of the VISN 4 applications are for Veterans who are more than 70 years old. As of January 11, 78 applications have been approved.

5. Customer Service Update

Nationally, VA's trust score over the last 90 days was 89.6. In VISN 4, our trust score over the last 90 days was 92, which remains the third highest VISN in the nation. The top 5 compliment themes over the last 90 days were quality of care, interactions with staff, satisfaction with specialty care, ear clinic services, and podiatry services.

6. Connected Care Update

VA launched the new "VA Video Connect Now" application which allows providers and patients to meet through video quickly and efficiently. A provider can initiate a video visit on-demand to ensure they provide the best care possible even when the visit began as a phone call. This new application can send the video link to the patient's email or text it to their smartphone in a couple of minutes. Veterans are no longer required to download an app to join video sessions. We encourage Veterans to try video appointments to minimize their need to travel to VA facilities and to reduce their risk of exposure.

To help prevent the spread of COVID-19, Veterans are encouraged to register for a My HealthVet Premium account to access tools that let them manage their VA care remotely. With a My HealthVet Premium Account, Veterans can:

- Contact their VA Care Team through Secure Messaging
- Manage their VA Appointments and join VA Video Connect appointments
- Order VA Prescription Refills

My HealthVet Coordinators at VISN 4 medical centers are assisting Veterans with this process through VA Video Connect. Veterans wishing to register for a My HealthVet account should visit www.myhealth.va.gov, then contact their local Coordinator to upgrade their account through video. Veterans with a My HealthVet account who need assistance or have questions may contact their local My HealthVet Coordinator to set up a video link. For those Veterans who need an upgraded account to Premium so they may communicate with their VA care teams through Secure Messaging, the local My HealthVet Coordinator can complete the necessary Identity Verification process through video.

In closing, I would like to thank you for your continued support of VISN 4. Please let me know if you have any questions for me.

Questions/Discussion

Mr. Hudzinski, VVA: You mentioned the Community Partnership Engagement Coordinators. Is their primary function the development of community resources for mental health? You talked a lot about suicide prevention.

Mr. Liezert: Yes, I can get more info, but the intent is understanding that suicide is multi-factorial. It is mental health as well as other factors like employment, housing, and other stressors. So, it is to help wrap around those type services for Veterans.

Mr. Slep PSACDVA: We received confirmation from the James E. Van Zandt VAMC in Altoona that they are providing COVID vaccines to Veterans regardless of enrollment in VA healthcare as long as a DD-214 is provided. They are asking and encouraging Veterans to fill out a 10-10EZ (enrollment form) but stated that would not be a requirement. Are other hospitals in the VISN operating this way? Is this a stand-alone event, and, if so, why can't we get other hospitals on board to do this?

Mr. Liezert: I'll have to check what Altoona is doing. In other parts of the country, the question of 8G priority Veterans has come up, and we are looking at the national level at that issue. But, for right now, only enrolled eligible Veterans should be eligible for the vaccine. We are noticing a lot of people applying for VA benefits. There is an adjudication spot often with these mass vaccination clinics where we can enroll Veterans on the spot with the information, we have available. So, there are several new Veterans coming into the system, but they must meet eligibility criteria. Hopefully that answers the question.

Mr. Slep: I can understand enrolling with information available on site, but at the same time we know that this is operating and effective for people in that catchment area around Altoona. So, I'd just like to know how that's being administered. If one hospital is doing it, I can't stress enough the need for other hospitals to get on board and provide this resource to Veterans around the Commonwealth.

Mr. Liezert: There is enrollment eligibility staff attached to most of our mass vaccination events, but by law we can only use medical care appropriations for those eligible for the VA. That is the rub in other parts of the country as we see the 8G issue come up particularly. We are going to need Congressional relief to lawfully expand medical care operations for that category of Veterans.

Mr. Johnson, DAV: Has anything been done for Veterans' wives to get vaccinated?

Mr. Liezert: Great question. This is an issue that I raised on a national call. From a population health perspective, we should be vaccinating the entire family unit. We fell into an eligibility/appropriation law issue. What we were able to find is that those who are currently beneficiaries of caregiver support can get vaccinated in accordance with the law, but unfortunately, we do not currently have authority to vaccinate those who are not enrolled caregivers.

Mr. Peters, VFW: With the lockdown for COVID, what kind of influence has that had with Veteran suicide?

Mr. Liezert: I don't have that information. I know it is a concern and our research arms in VA are researching the impacts of the pandemic, but I don't have any information.

Mr. Petrovich, Chairman: If anybody else has any other questions, please get them to Greg Holler and he will pass them on to Mr. Liezert and we will get back to you.

OLD BUSINESS

None.

NEW BUSINESS

The slides you will see are slightly different than the slides in the read-ahead. Legislatively, things are moving very quickly. We just had co-sponsorship memos when we put the read-ahead together, now we actually have legislation introduced. So, we updated the slides.

[Referring to the slides] This is the new Senate VAP Committee. You can see we have a new Majority Chair, Sen. Stefano, and a new Minority Chair, Sen. Muth. In the House VAP Committee, the Minority Chair, Rep. Sainato, stays the same, but Rep. Boback is now the Majority Chair. If you look at the overall committees, there are some familiar faces and some changes. We have already started working with the new representatives and senators, and we are looking forward to working closely with the committees to maintain our relationship.

As far as Veterans legislation, nothing has moved out of committee yet. You will see that there are two bills with the National Guard that have moved. There are also still a lot of co-sponsorship memos that will become legislation in the coming weeks. These are basically the senators' and representatives' way of saying they plan to introduce legislation. Since last year was the end of the session and there was an election, this year starts the new session. Everything that was introduced prior went away and everything that is coming on is new. So, if you had previous legislation you were tracking, the numbers will even be different.

You see some of the same ones we have seen in the past.... Removing federal and state Veterans benefits from income. There are several of those sorts of bills out there. There are two bills relating to the National Guard similar to bills that were previously introduced. There are some that deal with running of the DMVA. There were some last year dealing with elections and voter registration, and we expect to see the same this year. HB 336 is elevating the Boards to Departmental level. HB 326 and 196 are pertaining mostly to the National Guard and are the two that have moved. HB 326 has turned into a plan to provide vaccinations; 196 extends protections to National Guardsmen residing in PA but serving in the National Guard of another state.

There are three RETX co-sponsorship memos introduced. We have a draft constitutional amendment for RETX and look forward to hearing from the SVC Legislative Committee. We ran out of time last year. This year, if we can get the constitutional amendment through this session, then it must go through a separate session, and then to the voters. So, we need to get this process started and make sure we have what we want in it since it is a constitutional amendment.

You will see a lot of previously introduced material in the co-sponsorship memos. You'll see similar ones here about increasing the VTF. There are some that were not previously introduced. I am not going to go through each one individually. As you look through the slides, if you have any questions, even about the co-sponsorship memos, you can contact Greg Holler or e-mail me directly at sbenge@pa.gov and I will be happy to look into it and get back to you.

Questions/Discussion

Mr. Hudzinski, VVA: What does the HCO/SCO stand for?

Mr. Benge: "H" is for "House," so "House Co-sponsorship." "S" is for "Senate." It's just how they designate it.

Mr. Hudzinski: Ok. You also mentioned the constitutional amendment. I assume that's the amendment on survivors of KIA and POW. Who is going to sponsor that, and do we have a number?

Mr. Benge: No, we don't. This is where we would like to get some feedback from the SVC Legislative Committee before we move that down and work with the legislators. So, we'll probably look at one that already exists and try to get them to gut it and replace it with our language. Part of it is the KIA/MIA survivors, that's one of the elements.

Mr. Jackson, Member-at-Large: Request. If you put the KIA onto another bill, it doesn't do it quite right. We need KIA on a single bill with no riders, so nobody objects to it in the House or Senate. Consider doing that.

Mr. Bengel: I understand the concern. The problem is it's not just a bill, it's a constitutional amendment. So, we are only going to get one shot at an amendment versus three or four. That's why we're trying to be careful and ensure we get it right before we start circulating any language.

DMVA Bureau of Veterans Homes

Mr. Rich Adams

I was thrust into a new position here over the last month. One of the big things going on here with Homes is the vaccination process. Every home has been through at least the first and second clinics with some third clinics coming up this week. We're having great success with the vaccinations for our Veterans and spouses in each facility, and we're having mixed results with staff. We're ranging from 45% to 70% of staff. We have a lot of staff that are playing "I want to wait and see how everybody else does with it" before they commit to doing it. But on the resident side we're in the 90th percentile in every home. We're very excited and families are very excited that that has been completed. We look for our numbers to start dwindling. We're seeing numbers dwindle in the local communities. All the hubs in the not-too-distant past were all above 10% positive COVID. All but maybe one right now are under 10%, and that affects how we go about testing. A couple facilities, including Southwestern in Pittsburgh where I am also the Commandant, and Erie are getting close to starting admissions again. We are working with our VA to get that started again. We have a few things to clear up this week, and I anticipate that Pittsburgh will be admitting residents the following week.

So, the big thing is we are very happy with the vaccination process. We got in very early. A lot of the facilities have already gotten their second shots and a few weeks have gone by, so they are at full potential of the vaccine protection. We still have a few clinics to go; there were some Veterans and staff that were not able to get vaccinated at the first clinic. I know our Holidaysburg facility is having its third clinic and they will actually have a fourth clinic to follow that up. We are very excited with that process.

For right now, that's about all I have for you. Any questions?

Questions/Discussions

None.

DMVA Bureau of PIRO

Mr. Joel Mutschler

Just to touch on a couple things we have done since your last meeting.

We did have listening sessions with the SVC's VSO Grant Programs Committee, Act 66, to talk through how we can work better together. All those meetings went very well. Bottom line up front, we are going to take a phased approach to lay in the VSOs from those organizations into what we have been doing with PA VETConnect. For this year, Phase 1 will be voluntary, and we do have seven VSOs from your organizations doing that. The door is open to any VSO working for the recipients of that grant program, if they want to get plugged into PA VETConnect, we can get them plugged in now. Additionally, we will be forming a working group around our strategic planning initiatives and bringing folks from this body in for your thoughts and input. Again, we greatly appreciate the thoughts and input your committee gave to us during those listening sessions. It was huge.

Suicide prevention: We continue our work with UMPC PERU (Program, Evaluation, and Research Unit) in developing a northwest PA suicide prevention program. The working groups associated with that include stakeholders from VISN-4, community partners, and DMVA. Our RPOC (Regional Program Outreach Coordinator) is fully integrated into that conversation as well. Additionally, Together With Veterans – we still are working that initiative in Carbon County, and I will touch on that momentarily.

The Veteran Centric Fairweather Lodges – there has been a reboot with that program through the Office of Mental Health and Substance Abuse (OMHSA). I have had the pleasure of working with OMHSA and community providers as we reengage in that conversation. Currently, we have one Fairweather Lodge in operation in the Commonwealth, in Venango County. The hope is to have more come online soon.

With the Pension Poaching Awareness Campaign, Mr. Chairman, I will provide an information paper on that to you so you can get that out to the Commission. We are working on a campaign to provide awareness on this issue. We have seen an increase in pension poaching activity, so we are going to work to educate providers working with Veterans around the state on this issue. More to come on that.

On the Veterans Registry, we have a little over 34,000 at the time of this report. We are now at 36,737 on the Registry. I am working with my counterpart at PennDOT to see if we can get information from the PA drivers' license designation and how we can collaborate in that space. We are helping PennDOT to get some limited information they have on other initiatives and I am looking forward to our continued efforts with PennDOT.

The GAC-VS did meet this week. The meeting minutes and slide deck will be produced soon and provided to this body. There are a lot of great collaborative efforts going on with the GAC-VS, from the mental health space in the mental health committee to the Governor's Challenge to Reduce Veteran Suicide perspective, to what we have been doing with the homeless community in engaging the continuums of care and SSVF providers and looking at providing suicide prevention training to those who are working with the homeless community and every space in between. The GAC-VS is really making a difference in breaking down silos and opening lines of communication among government entities.

Regarding the PA VETConnect journey map. I am very excited about where we are at with this program. We launched this program back in November. Our RPOCs are making a difference each day and building relationships. In this journey (referring to the slide), we have done "Organized Known Resource Information." We have over 1,500 resources in that tool. We will be migrating that tool to RISE PA which is the enterprise-level solution for the I&R tool that will provide all human services access to similar information. The vendor for that will be Aunt Bertha, selected by DHS. That does not take away from what we have been doing with our SharePoint site and Veteran advocates. Moving on to "Create, Enhance and Educate Networks," there are currently 250 Veteran advocates with access to PA VETConnect, including those VSOs from the service organizations previously mentioned, social workers at the VMACs, and county directors of veterans affairs who are our tip of the spear, engaging with it every day. The Community Engagement Program Coordinators (CEPCs) are engaging with our RPOCs daily. It is interesting that the two job descriptions are very similar. The big difference is that the CEPCs' focus is in the suicide prevention space. Additionally, we have been communicating with the AAAs (Area Agencies on Aging) and working with other stakeholders in the community to build out those relationships. Then the journey map goes on to "Identify Individual Veteran Needs and Systemic Veteran Community Trends." Working alongside local and regional behavioral health professionals, veteran advocates, local government, as well as VA staff on developing this grassroots, rural, public health initiative to address Veteran suicide prevention in communities, starting out in Carbon County and expanding across the northeast region. This is where we face some of the highest rates for Veteran suicide and we are bringing in resources and doing what we can to address that need. Additionally, the Northwest Suicide Prevention program as well... We are very happy with the efforts of UPMC PERU, University of Pittsburgh, and other stakeholders as we continue to build that out. Moving onto the next part of the journey, "Identify Appropriate Resources and Referral Mechanism." That goes to how we are doing the issue resolution, or the warm hand-off, really engaging with other advocates to break down silos and increase awareness of services and educate our frontline staff. This is a very people-centered approach. The Veteran advocate with the county directors for veterans' affairs engaging with the Veteran – that is the center of everything we are doing. Finally, "Improve Essential Services for the Veterans Community." As you know, we are in a financially austere environment and we are not going to see more money coming into the budget, so we need to find other ways to leverage resources to meet the needs and challenges across the

Commonwealth. We have had over \$7M in grant funding coming in over last year as we have been building this out and identifying needs across the Commonwealth.

We have over 14,000 RPOC contacts since program implementation back in December 2019. You can see this explosion of contacts as they have been working diligently over 2020. Once we went from initial phase into a program of record, it continues to grow. We are excited about what the future holds as we continue to build relationships and partnerships. The following slides give you an idea of the collaboration in 2020, and the resources in the database, over 1,500. Again, this will change as we move into RISE PA, but they continue to provide the update to our I&R tool as we build it out. I mentioned that we are looking at how we are doing in the key areas, so we conducted a survey with the county directors, and you can see the top issues: transportation, homeless/housing, funding, mental health, and employment. We have been building out a great partnership with PA Career Links, as well as working with L&I to continue to meet employment needs in the Veterans community.

Sharing a few testimonials: “PA VETConnect is a best practice for other states to follow.” -Former Under Secretary of Benefits, Dr. Paul Lawrence. We did five tele-townhalls with Dr. Lawrence in 2020 where we touched over 267,000 Veterans and family members. We are looking at developing similar engagements moving forward. If any of your organizations would like us to come alongside in similar engagements like tele-townhalls and the VEACs, please reach out.

Before we get into the reports, Mr. Chairman, I am open to any questions.

Questions/Discussion

Mr. Jackson: Three comments. You mentioned you had 267,000 contacts and DMVA got 33 direct referrals. That’s comparing apples and volleyballs. It’s a terrible ratio. Secondly, on PA Veterans Registry, you have 35,000 or so on the Registry out of 800,000 or so veterans in PA. What is the cost to taxpayers? Is it a cost-effective program? Thirdly, you mentioned the CDVAs are the “tip of the spear” for PA VETConnect. If they’re the tip of the spear, where do the Act 66 people and other VSOs fit? How should, could, and will you use Act 66 officers to help carry the spear?

Mr. Mutschler: “Touched” means that allowed us to get the word out. Anecdotally, call volume increased afterwards. Those 33 are Veterans that physically called in and were on the air with Dr. Lawrence and were later referred to us. Why is that important? Because three of those Veterans were in crisis at that moment. So, we came alongside to assist those Veterans and make a difference in their lives. One Veteran at a time is how we’re approaching this. I hear what you’re saying, sir, but I respectfully disagree with your comment. With relation to cost of PA Veterans Registry – this is a Program of Record, codified in Title 51. Yes, there is a delta in the numbers registered. It allows Veterans to have another location to save their discharge documents if they so choose. You don’t have to be a Veteran to sign up. It is an information system. It allows them to get our weekly Digest. To your point, sir, I agree the number is low. If you have ideas on how we can do that, we continue to work hard toward getting everybody we come across to sign up. In relation to PA VETConnect and the county directors as tip of the spear, as we have previously discussed, the Act 66 VSOs really are a force-multiplier. Wouldn’t it be great if we were all working together toward that common goal of serving Veterans? I think we are, but we can’t do this alone. We have nearly 800,000 veterans in the Commonwealth. CDVA is tip of the spear because they are statutorily required to support veterans around the Commonwealth. But, as we start rolling through the program and getting those VSOs fully onboard, they will be able to engage in the full range of support with some accreditation training. I greatly appreciate your feedback and hopefully I answered your questions.

Mr. Jackson: Thank you, Joel.

Mr. Petrovich: How long has the Registry been around?

Mr. Mutschler: In concept about six years. We had it in place prior to codification. It was codified in 2017. We created the Registry on October 1, 2015.

Mr. Petrovich: As of today, we still have not received money for Veterans transportation network. How many vans we have awarded and what it will cost. Money was appropriated in July; here we are in February with nothing. I got paperwork from DHS in October. I know wheels don't turn as quickly as we want but this is ridiculous.

Mr. Mutschler: I understand your frustration. I did check on this for you. The payment is at the last step in the process before payment can be assigned at DHS. After this cycle, this program will be back at DMVA and we will manage it. We will provide an update to you. I apologize for your frustration.

Mr. Petrovich: We did receive notification from your Grant office, that we were going to get this quarter's outreach check also. We haven't gotten anything yet. When it comes to these distributions, DHS gives you the whole grant at one time. Are there any way you guys can do the same thing? We get three payments from the outreach grant now – is there any way to get one payment?

Mr. Mutschler: I unfortunately do not know the answer to that, but I will provide an update to you next week. I did just get an update on payment status while we were talking. As for VFW and DAV, the grant agreements have been fully executed. It's with Treasury. When we get a payment date, Jen from Grants team will be in touch. AMVETS is good. So, American Legion has a pay date of 19 February, and VVA's grant agreement is still being routed for signature.

Mr. Petrovich: Why are they all different days?

Mr. Mutschler: It's just how they circulated through the staffing process. Again, as soon as we get those solidified, I'll make sure you're notified.

Mr. Petrovich: So that notification that payment was coming on the 5th was premature then?

Mr. Mutschler: I have a feeling they were checking on it, but I would say payment is imminent.

Programs Report

Mr. Joel Mutschler

With respect to the OVA/VSO Grant Program summary, we are showing the two-year fiscal period. The 11-year ROI, as noted before, is 77 to 1.

Veterans Trust Fund balance: \$2,658,613.27.

Veterans Temporary Assistance: We have had 152 approved claims this FY. Program remains on track.

Blind Veterans Pension: 102 Claimants currently on the program. Program is on target

Amputee & Paralyzed Veterans Pension: 2,040 Claimants currently on the program.

Educational Gratuity: 114 claimants currently on program.

Military Family Relief Assistance Program balance: \$1,045,242.73. Just to note, if we receive applications for MFRAP that may not be eligible, we will adjudicate them as VTA, and vice versa. We do that commonly.

Disabled Veterans Real Estate Tax Exemption: 14,395 currently on the program. 871 applications adjudicated since your last meeting. Ineligibility reasons are broken down on the slide for you.

That is our Programs Report, pending Commission approval.

Questions/Discussion

None.

Approval of Programs Reports

Motion: Mr. Peters, VFW, made a motion to approve the programs report.

Second: Mr. Taylor, Vice Chair, seconded the motion.

The body agreed; motion carried.

SVC Act 66 Committee

Mr. Sam Petrovich

The Committee met with DMVA at our second listening/talk session. We were presented with DMVA's 3-year plan and we are looking at that. We have a few questions and we will meet with them to get clarification and move on. As you all know, the Governor proposed his budget and there was an increase of \$140,000 for Act 66.

Questions/Discussion

Mr. Petrovich: Joel, is that \$140,000 solely for outreach or is it earmarked for something else?

Mr. Mutschler: It is for the VSO Grant Program, sir.

SVC RETX Committee

Mr. Justin Slep

Seth mentioned some things earlier. We have not had a committee meeting yet. I did receive a 4-page draft of the proposed constitutional amendment. I bulleted the changes, which I will highlight: The first change was to remove the armed conflict or wartime service requirement. The second was to extend RETX to surviving spouses of KIA/MIA and those determined posthumously to be 100% P&T disabled. Third would allow Veterans in a long-term care facility to still receive the exemption. The fourth would require SVC to determine guidelines for determination of need, but compensation for injuries cannot be counted as income for eligibility. Some comments/goals: I feel that language focused on "killed in line of duty" or "line of duty death" is better than KIA to ensure that we encompass all individuals killed on duty and not specifically just killed in action. The 100% P&T that was put back in the draft should remain in place as eligibility criteria. With wartime service and armed conflict, I just don't feel that we as a body should focus on that only. There are Veterans that have incidents happen during active duty service while they're on duty and they should not be exempt from a benefit if they meet all the other criteria. The purpose also to extend RETX to the surviving spouse of KIA/MIA has been out there for a long time and I think as a body we should push for this. And, for those Veterans living in long-term care facilities, we should not create any more of a burden for the spouse if they are trying to remain in the home while incurring astronomical costs for a long-term facility or nursing home. We want to promote a strong home environment and by increasing their taxes, I feel we would not be keeping the best interest of the spouse. There are many House co-sponsor memorandums regarding removing VA compensation as income for eligibility. Many people see the need for that across all state criteria. I fully support that as well and that should be something to push forward. My major goal would be to come together as a unified body to come together and represent Veterans across Pennsylvania as best we can. For too long, this program has not been updated. It needs to be brought up to date, and we need to focus on the needs of Veterans and their spouses and widows. And, we need to focus on the need to make these changes as soon as possible.

Questions/Discussion

Mr. Jackson: Great report, I couldn't have written it better. I would like Greg Holler to make sure the SVC Legislative Committee as well as the Legislative Committee of the PWVC gets to hear a transcript of Justin's remarks. They're great.

Mr. Petrovich: Greg, I believe the committee appointments were at the tail end of the read-ahead.

Mr. Holler: Yes, the committee reports were sent out at the end of the read-ahead, but I believe Justin was referring to getting them late in the period prior to coming on board. We will certainly take care of what Mr. Jackson requested.

Mr. Jackson: Thank you. There are some things in here that must be looked at with respect to what the Commonwealth's original concept was for RETX. This is a deep thing we should look at.

Mr. Hudzinski: I second what Mr. Jackson said. Justin, can we get a copy of what you're seeing? Earlier, we were told that didn't exist right now. Where is that coming from, PPL?

Mr. Slep: The draft hasn't gone anywhere yet. This is a document in the works that was passed to me. I can work with Greg, Sam, and Seth and then he can distribute that if that's good with him.

Mr. Durand, DMVA PPL: This is a compilation of everything we worked on last session that didn't get introduced because of all the changes. So, we took the recommendations from the House bill, recommendations from the SVC RETX Committee and combined them. We're looking for a full review before we action anything.

Mr. Hudzinski: Ok, it's not at the stage yet where it's ready for DMVA to refer it to us, but it's coming from DMVA. Ok, thank you.

SVC Legislative Committee

Mr. Samuel Petrovich

The Committee did come together, and you received in the read-ahead packet a list of issues to be pursued this legislative cycle. I'm not going to read them to you; I will go by the assumption that you read them. So, at this time I would like to entertain a motion to approve the issues to be pursued during this legislative cycle by the Legislative Committee.

Approval of Legislative Committee Agenda

Motion: Mr. Jackson, Member-at-Large, made a motion to approve the agenda.

Second: Mr. Peters, VFW, seconded the motion.

The body agreed; motion carried.

SVC Pensions, Relief/Grave Marking/State Military Cemetery Committee

Ms. Constance Snavelly

Our committee is hoping that the bill increasing the blind, paralyzed, and amputee pensions will be enacted this year. Afterwards, the committee will start pressing for a COLA to be added to the pensions. As the committee is also responsible for state veterans' cemeteries, the committee will continue to follow status of federal HR 5487, short title "Veterans Cemetery Grants Improvement Act." The bill proposes doubling the VA grant amount to \$10M. We will continue to follow up on our approved proposals for additional flag holders in local cemeteries, the proposed update to the County Code, and examples of approved flag holders posted on the DMVA website to ensure consistency across the counties.

Questions/Discussions

None.

Member-at-Large Committee

Mr. Sam Petrovich

As you saw, we swore in two new Members-at-Large for the Committee. What we discovered during the process.... General Carrelli, I thought, came up with a great plan, but it was shot down by the Governor's Office. Now what we are looking at is this: the Vietnam Veteran position that Mr. Jackson is filling, that term will expire in 2022. Connie Snavelly's term expired July 27, 2020. That term will last until July 27, 2024. Mr.

Ed Burris's term expired July 27, 2017, so the clock on the new term started July 28, 2017. So, that term will expire July 27, 2021 – that is the position Mr. Michael Brooker just took. John Cyprian's term expired July 27, 2020, which means that four-year term will expire July 27, 2024. So, we need to fill three positions. The committee will have to get together very shortly and start the process again.

Questions/Discussion

Mr. Petrovich: Dusty, did I say anything incorrectly?

Mr. Durand: No, that's correct. The terms are fixed by legislation, so that's why the term won't change but the membership during that term can.

Mr. Petrovich: The process has always been in the past, and I will continue to do this.... It's just like guard duty. You're on guard duty until you're relieved. So, John and Connie, you're still on guard duty until you leave or reapply.

Good of The Order/Announcements

Mr. Petrovich: Two things. When it comes to SVC committees, if any committee is proposing legislative changes, please run it through the legislative committee. Then it will be their duty to run it through the full Commission for final approval. Secondly, I'd be remiss if I didn't thank Maj Gen Weller for his service to Veterans in the Commonwealth of Pennsylvania and to this Commission. Today is his final day in this position. We want to wish him the best. Again, thank you for your service to us and the Veterans of the Commonwealth.

Mr. Hudzinski: We have an interest in employment. Could we as the SVC have the GAC-VS Employment Committee come brief us on what they're doing?

Mr. Petrovich: Good idea. They have multiple committees on GAC-VS and they're out there doing a lot of things. I think it would be good for them to come bring the Commission up to date on things they're doing. I'll see what I can do.

Mr. Hudzinski: Thanks. We had talked about some initiatives with Mr. Liezert for point of contact information, etc., and this could tie into that.

Mr. Jackson: Two things... I think the SVC ought to be looking at housing. Employment is critical and housing is not far behind. You can't have a good life if you don't have good housing. So, expanding on what Rich said, I think we should expand into that. The other thing I would like to say is very self-serving. I'd like to thank Ron Peters, VFW Commander, Department of Pennsylvania, for nominating me. And, in District 8, Peter Walter, and my Post Commander Tom Applebach. I'd also like to thank the Military Order of the Purple Heart five-year State Commander Mike Miscavage. I'd like to thank Keith Beebe in the Military Officers Association of America for his recommendation. I'm a member of Lehigh Valley Military Affairs Counsel. So, I'd like to thank Maj Gen Terry Still, USAF (Ret.) for his endorsement. My plan is to live up to their endorsements and support because those are the members of the associations I live with, but also to the rest of the Veterans of Pennsylvania.

Mr. Petrovich: You forgot Ms. Jackson, for allowing you to do this.

Mr. Slep: I just want to echo a big thank you to Gen Weller. We've gotten outstanding support at the County Directors from him. It's been a pleasure to work alongside him and with him on initiatives to serve the Commonwealth. We wish him the best of luck from the County Directors in his future endeavors.

Mr. Pliska: I'd like to recognize the 300th Field Hospital, an Army Reserve unit out of Ashley, PA, who 30 years ago today opened up 100 beds of a 416-bed facility in Saudi Arabia, supporting the EPW effort which

eventually serviced two Prisoner of War camps with 44,000 prisoners. We also took care of the Allied soldiers and local population in Saudi Arabia.

Next Meeting

April 2, 2021
Forum: TBD

Adjournment

Chairman Petrovich retired the colors and adjourned the meeting at 11:57 a.m.

The minutes of this meeting are respectfully submitted by:

Mr. Marc Ferraro
Interim Lead Deputy
Veterans Affairs

DRAFT



**STATE VETERANS COMMISSION MEETING
APRIL 2, 2021**





DMVA MILITARY UPDATE



CURRENT MOBILIZATIONS & TOTAL DEPLOYMENTS



PAARNG Current Deployments

MDATE	MSAD	UNIT	OPN	PAX	MISSION	Projected Return Date
11&18 JUN 20	06 JUL 20	28 th ECAB	OSS 19-21	852	Aviation Support	31 MAY 2021
18 FEB 21	21 FEB 21	108 ASMC	EDI 20-22	68	T10, 12304B	18 DEC 2021
ARNG Soldiers at MOB/DEMOB Sites				12	Various Missions	Various based on tour
Various Individual MOB Soldiers				18	Various Missions	Various based on tour
Total PAARNG Deployed: 950						

PAANG Current Deployments

Unit	Opn	Pax
193 SOW	OIR	191
111 ATKW	IPR (HS)/Various	36/12
171 ARW	Alert Status (HS)/OIR	37/31
Total PAANG Deployed		307

Total PANG Deployed 1,257

VISN 4 Access – Fiscal Year 2021 Wait Times



Clinics FY21 thru Nov. 11	Number of Appointments	Wait <30 Days	% Wait <30 Days	Average Wait
Mental Health	93,955	91,835	98.0%	3.0
Primary Care	279,192	273,146	97.8%	3.2
Specialty Care	310,587	280,564	90.8%	11.5
ALL	1,042,726	986,651	94.8%	6.7

Data updated 3/17/2021 with appointment info as of 3/15/2021.

VISN 4 Access – Current Average Wait Times



VISN 4 Facility	Primary Care		Mental Health Care	
	New Patients	Returning Patients	New Patients	Returning Patients
James E. Van Zandt VAMC	15	1	10	3
Abie Abraham HCC	20	1	10	3
Coatesville VAMC	11	1	11	4
Erie VAMC	17	3	8	2
Lebanon VAMC	13	1	5	4
Corporal Michael J. Crescenz VAMC	9	5	19	1
VA Pittsburgh Healthcare System	17 (Hz) 20 (UD)	4 (Hz) 3 (UD)	8 (Hz) 11 (UD)	2 (Hz) 3 (UD)
Wilkes-Barre VAMC	6	1	5	3
Wilmington VAMC	10	3	3	4

NOTE: The facility wait times on the public facing Access to Care site seem to be normalizing. However, some sites are still showing higher than normal wait times for new patients, and the data should be used with caution when reporting.

Data updated 3/17/2021 with wait times as of 3/8/21 for last 30 days.

accesstocare.va.gov

VISN 4 Care in the Community



	Care in the Community Consults (Scheduled and Completed)	Non-VA Unique Patients*
FY 17	74,568	58,699
FY 18	87,706	62,428
FY 19	101,068	70,376
FY 20	153,510	87,042
FY 21 (as of 3/16/21)	74,116	55,851

*Number of unique enrolled Veterans who receive community care at VA expense

Data updated 3/17/2021 with consult info as of 3/16/21.

Policy, Planning, and Legislative Affairs

Legislation Under Review

SB 96 (Robinson) PN 75) Amends Title 75 (Vehicles), in registration of vehicles, increasing optional contributions to the Veterans' Trust Fund during driver's license issue and renewal from \$3 to \$5. For vehicle registration, increases VTF contribution from \$6 to \$10. **Final passage in Senate 46-0; 2/24/21.** H Trans. 2/26/21. Comp HB 556 (O'Mara) Identical

HB 491 (Boback) Amends Title 51 (Military Affairs) establishing Chapter 99 regarding Veterans' Benefit Payment Exclusion. One hundred percent of a veterans' benefit payment may not be included as income for any commonwealth program. The exclusion shall also apply to an unmarried surviving spouse upon the death of a veteran for any compensation or payment the unmarried surviving spouse is entitled to receive. H VAEP 2/9/21. **Mtg. H VAEP 3/16/21.**

SB 155 (Mastriano) Amends Title 12 (Commerce and Trade), in Pennsylvania Military Community Enhancement Commission, providing that appointed commission members will be appointed to a three-year term with an opportunity for additional terms and that they serve until their successor is appointed. The act provides that members appointed by the governor will serve at the determination of the governor. This act applies to members appointed or reappointed after the date of passage. **Final Passage in Senate 46-0. 2/24/21.** H VAEP 2/26/21.

Legislation Under Review

HB 196 (Day) Amends Title 51 (Military Affairs), in military leave of absence, further providing for employment discrimination for military membership or duty. Awaiting Second Consideration. **Final passage in House 201-0; 3/17/21.**

SB 274 (Fontana) Act authorizing the Dept. of General Services, with the approval of the Dept. of Military and Veterans Affairs and the Governor, to grant and convey, certain lands, buildings and improvements situate in (Coraopolis Maintenance Facility) Allegheny County. S SGOVT 2/21/21.
Mtg. SSGOVT 3/17/21.

HB 803 (O'Neal) Establishes the Keystone State Challenge Academy Special Fund for the PA National Guard Youth Challenge Program. **H VAEP Committee 3/8/21. Mtg. H VAEP. 3/16/21**

RETX Legislation

SB 244 (Pittman) Amends Title 51 (Military Affairs), in disabled veterans' real estate tax exemption, providing compensation received by an individual for an injury due to service may not be considered by the commission for determining the need for exemption from payment of real estate taxes granted under this act. S VAEP. 2/18/21.

SB 253 (Tartaglione) Amends Title 51 (Military Affairs), in disabled veterans' real estate tax exemption, further providing for definitions and for duty of commission. The bill establishes that the State Veterans' Commission shall fix uniform and equitable standards for determining the need for exemption from the payment of real estate taxes. In fixing such uniform and equitable standards, an applicant with annual income of \$75,000 or less shall be deemed to be in need of the exemption. For applicants with an annual income that exceeds \$75,000, the commission shall determine the need of the applicant after submission of proof of need by the applicant for exemption from payment of real estate taxes. S VAEP. 2/22/21.

HB 910 (Mackenzie) Joint Resolution proposing an amendment to the Constitution of the Commonwealth of Pennsylvania providing for exemptions and special provisions exempting from the payment of all real property taxes all citizens and residents who were honorably discharged, released under honorable circumstances from active military service, or have a service-connected disability rated by the United States Department of Veterans Affairs to be 100 percent. The exemption shall also apply to the surviving spouse of any member of the Armed Forces of the United States who was killed in action in any war of armed conflict or who died as a result of injuries in any war or armed conflict. Constitutional amendments require approval in two consecutive legislative sessions and then approval by the voters through a referendum. H VAEP 3/15/21

Co-sponsorship Memos Circulated

SCO 266 (Sabatina) Expands the Disabled Veterans' Real Estate Tax Exemption program.

SCO 270 (Bartolotta) Expands the Property Tax Exemption Program for disabled veterans.

HCO 1245 (Sappey) Extends a full property tax exemption to disabled veterans regardless of wartime service.

Legislation Enacted/Vetoed

HB 326 (O'Neal) Amends Titles 35 (Health & Safety) and 51 (Military Affairs), in COVID-19 disaster emergency, providing that within 45 days of the effective date, the National Guard shall establish and operate in each county a site for the mass distribution and administration of any vaccine for COVID-19; in the governor as commander-in-chief, limiting the powers of the governor related to public health duties; and, in Pennsylvania National Guard, providing that the guard shall perform the duties relating to COVID-19 vaccine. Active Duty for Emergency. New language adds C.) Distribution and administration of items for a virus; D – Report (45 day window for NG to report to GA) Defines "Region" and "Virus." **Final Passage in House 202-0; 2/5/21. Final Passage in the Senate 46-0; 2/21/21. Approved by Governor (ACT 4) 3/3/21. Earliest Effective Date: 3/3/21**

Federal Legislation

H.R. 1276

Introduced in House (02/24/2021). **Passed House and Senate - Currently Resolving differences.**

Rep. Mark Takano (D-CA) 41

Department of Veterans Affairs Veterans' and Caregivers' COVID-19 Immunizations Now Expanded Act of 2021 or the VA VACCINE Act of 2021

This bill authorizes the Department of Veterans Affairs (VA) to furnish a COVID-19 (i.e., coronavirus disease 2019) vaccine to covered individuals during the COVID-19 public health emergency.

Under the bill, covered individuals are

- veterans who are not eligible to enroll in the VA health care system;
- specified veterans who are eligible for hospital care, medical services, and nursing home care abroad;
- family caregivers of veterans participating in the VA's Program of Comprehensive Assistance for Family Caregivers;
- caregivers of veterans participating in the VA's Program of General Caregiver Support Services; and
- caregivers of veterans participating in the VA's Medical Foster Home Program, Bowel and Bladder Program, Home Based Primary Care Program, or Veteran Directed Care Program.

The VA must prioritize the vaccination of veterans who are enrolled in the VA health care system. Additionally, vaccines furnished abroad are authorized regardless of whether vaccines are needed for the treatment of veterans with a service-connected disability (including those participating in a VA rehabilitation program).

Current Licensure Status

Regulatory Agency	DVVH	GMVC	HVH	PSSH	SEVC	SWVC
Date of Last Inspection - Status						
PA Department of Health	02/18 Full Standard Licensure Status	12/18 Full Standard Licensure Status	10/18 Full Standard Licensure Status	11/18 Full Standard Licensure Status	09/18 Full Standard Licensure Status	08/18 Full Standard Licensure Status
PA Department of Human Services	N/A	N/A	11/18 Full Standard Licensure Status	08/18 Full Standard Licensure Status	10/18 Full Standard Licensure Status	N/A
US Department of Veterans Affairs	04/18 Full Standard Licensure Status	02/19 Full Standard Licensure Status	03/18 Full Standard Licensure Status	02/19 Full Standard Licensure Status	02/19 Full Standard Licensure Status	05/18 Full Standard Licensure Status

Timetable for Reopening the Pennsylvania Veterans Homes Skilled Nursing

Reopening time frames for the Skilled nursing units of the PVHs			
Home	Date of Last Positive Test Result for Resident or Staff (day zero, date of test)	Date Outbreak Testing is Estimated to be Completed or was Completed	Date Estimated to Begin Lifting Restrictions
DVVH	3/15/2021	3/30/2021	3/31/2021
GMVC	3/18/2021	3/23/2021	4/2/2021
HVH	3/15/2021	3/29/2021	4/12/2021
PSSH	3/8/2021	3/29/2021	3/29/2021
SEVC	3/16/2021	4/5/2021	4/5/2021
SWVC	3/19/2021	1/1/1900	1/1/1900

Timetable for Reopening the Pennsylvania Veterans Homes Personal Care

Reopening time frames for the Personal Care Units at HVH/PSSH/SEVC

Home	Date of Last Positive Test Result for Resident or Staff (day zero, date of test)	Date Outbreak Testing is Estimated to be Completed or was Completed	Estimated Date to Enter Step 1	Estimated Date to Enter Step 2	Estimated Date to Enter Step 3
HVH	2/7/2021	2/21/2021	2/21/2021	3/7/2021	3/21/2021
PSSH	3/4/2021	4/1/2021	4/15/2021	4/29/2021	5/13/2021
SEVC	3/16/2021	4/5/2021	3/16/2021	4/5/2021	4/19/2021

BUREAU OF VETERANS' HOMES



Resident COVID-19 Update

Residents		01	02	03	04	05	06	07	09	10
Home	Data Date	# of Residents with S/S of COVID-19	# of Residents Currently Positive in Facility	# of Residents Waiting Test Results	# of Residents in Hospital for COVID-19 Reasons	# of Total Residents Tested	General Resident Population Testing, Enter round # and S-Started C-Complete	# of Residents Positive for COVID-19 Cumulative	# of Residents Recovered	# of Residents That Expired with a Positive COVID-19 Status.
DVVH	3/22/2021	0	0	1	0	2473	37-C	75	57	18
GMVC	3/22/2021	0	0	0	0	5386	36-C	61	42	19
HVH	3/22/2021	0	0	0	0	5063	25-C	123	107	20
PSSH	3/22/2021	0	0	0	0	3346	45-C	132	102	18
SEVC	3/22/2021	0	0	166	0	6589	36-C	122	63	42
SWVC	3/22/2021	1	0	0	0	5629	32-C	19	16	3
Total:		1	0	167	0	28486		532	387	120

As of 22 Mar 21

> community > commonwealth

> country

BUREAU OF VETERANS' HOMES



Staff COVID-19 Update

Staff		01	02	03	04	06	07
Home	Data Date	# of Staff Currently Out for COVID-19 Reasons	# of Staff Currently Positive	# of Staff Waiting Test Results	# of Total Staff Tested	# of Staff Tested Positive for COVID-19 Cumulative	# of Staff Returned to Work Cumulative
DVVH	3/22/2021	4	2	9	6490	76	173
GMVC	3/22/2021	1	1	0	9859	64	95
HVH	3/22/2021	8	4	4	17034	148	961
PSSH	3/22/2021	2	0	68	6586	84	251
SEVC	3/22/2021	8	4	0	9896	127	292
SWVC	3/22/2021	11	6	2	12541	58	301
Total:		34	17	83	62406	557	2073

As of 22 Mar 21

> community > commonwealth

> country

Pennsylvania Veterans Homes COVID-19 Update

Reopening plans for the Personal Care Homes are posted on the DMVA web site and are updated weekly as conditions and plans change due to the current COVID-19 status in each Veterans Home.

Go to: <https://www.dmva.pa.gov/Pages/default.aspx>

- Click on Veterans Homes top right
- Click on Veterans Homes COVID-19 Updates tab
- The following items are located on this page
 - FAQ's
 - Status report link for DOH statistics
 - Admissions information
 - Contact information
 - Reopening plans BVH /PVH's

Pennsylvania Veterans Homes COVID-19 Update

COVID-19 links for information related to the Veterans Homes and skilled nursing facilities.

- <https://www.dmva.pa.gov/Pages/default.aspx>
- <https://www.health.pa.gov/topics/disease/coronavirus/Pages/LTCF-Data.aspx>
- <https://www.health.pa.gov/topics/disease/coronavirus/Pages/Monitoring-Dashboard.aspx>
- <https://www.health.pa.gov/topics/disease/coronavirus/Pages/Guidance/SNF-Guidance.aspx>
- <https://docs.google.com/spreadsheets/d/19MpLoPxayE1MDwQJYCZxISN64V4FJSJPGzfvVBb5Mw/edit#gid=1511961664>



- **Suicide Prevention** – Collaborating with DDAP and the UPMC Program, Evaluation and Research Unit (PERU) awarded over \$7M grant. In process of implementing the NW PA Suicide Prevention Program that will serve Veterans in 15 counties in the PA VETConnect Region 1. Engaged with Together with Veterans in NE PA (Carbon County).
- **Veterans Centric Fairweather Lodges** - We continue to work with the PA Office of Mental Health and Substance Abuse and the Coalition for Community Living in revitalizing this initiative. DMVA provides referrals and support, as well as system linkages and knowledge of the veteran culture.
- **Pension Poaching Awareness Campaign** - Cross-system cooperative effort to raise awareness among mainstream human service and healthcare providers about the issue of veteran pension poaching and the importance of referring Veterans and their families to an accredited VSO. Sister state agencies, trade organizations and state-level oversight groups are collaborating with us to send this important information out to the local levels via their communication avenues.
- **VSO Stakeholder Engagement** - We continue to encourage members of the Veteran Service Organizations to join in our outgoing efforts to serve the veterans community through PA VETConnect and the Governor's Advisory Council on Veterans Services. For example, the Marine Corps League Chaplain has been participating with the GAC-VS Homeless Committee over the past several months and is adding perspective in this space. We also have members of the veterans' services organizations engaged with the working group to update regulatory guidance and with our strategic planning.
- **PA State Association of County Directors of Veterans Affairs** – Continuing to work with the association to foster a stronger bond between DMVA and the county veterans' affairs staff across all 67 counties.
- **SVC VSO Grant Program (Act 66 of 2007) Committee Listening Session** – Conducted listening sessions on 17 Nov 20 , 12 Jan 21, and 11 Mar 21.
- **GAC-VS Quarterly Meeting**- 3 Feb 21. 84 attendees
 - Committees are starting to meet during the first quarter of 2021
 - VTF Juror Donation Initiative: 5 counties and continuing to outreach.

Organizational Interactions



We realize that there is no way we can successfully serve veterans without the cooperation of our community partners, especially those who are on the ground level and work every day to improve the lives of veterans.

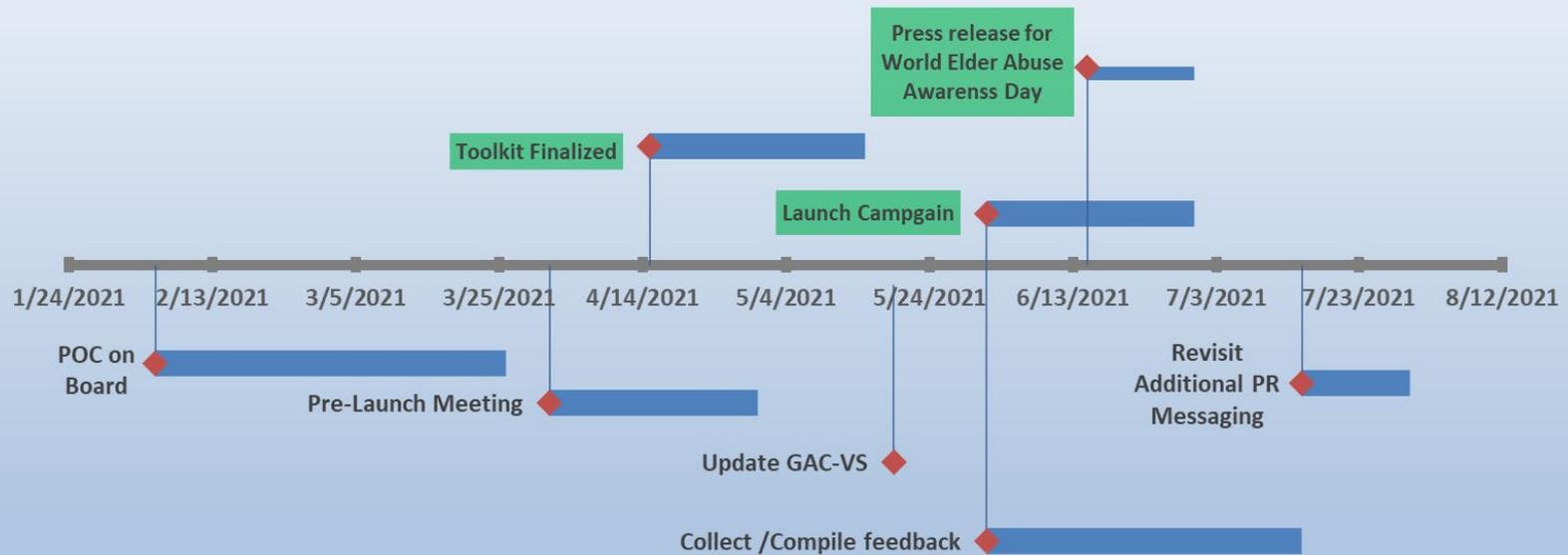
We are taking a positive and collaborative approach in all we do. As veteran advocates we are holistically connecting Pennsylvania's service members, veterans, and their families to local, state, and federal benefits, programs, and recognition they have earned.

Examples of this collaboration with the member organizations of the SVC are as follows:

- Pa Governor's Challenge to end Veterans Suicide – SVC Vice Chair
- NW PA Suicide Prevention Program and Together With Veterans (Carbon County)
- Cross Accreditation Agreement
 - The American Legion- we are working on a cross accreditation agreement to better serve our Veterans' community
- Burial Payments
 - PA War Veterans Council
- 43 Pa Code Chapter 5 Update Working Group
 - MOAA- RETX
 - PSACDVA- RETX, Burial, Pension, EG
 - Member at Large - Burial
 - KPVA- Pension
 - VFW-Burial
- Transportation
 - DAV- improving the process of the transportation grants
- PA VETConnect Pilot- 7 VSOS from TAL, VFW, AMVETS, DAV, VVA
- GAC-VS
 - MCL interaction on Homeless
 - VFW interaction on Judiciary



Veterans Pension Poaching Awareness Campaign



Systems Serving Veterans



Federal

State

Local



VA

- Veterans Health Administration (VHA)
- Veterans Benefits Administration (VBA)
- National Cemetery Administration (NCA)

DMVA

- Office of Veterans Affairs (OVA)
- Services and Programs
- Reintegration and Outreach / PA VETConnect
- Bureau of Veterans Homes (BVH)
- PA National Guard

County Veterans Affairs Offices

- Other Veteran Service Organizations
- Non-profits and other community-based programs and groups



Improve Essential Services for the Veterans Community

Understanding thematic community needs, DMVA applies for funding to assist targeted areas and provides assistance with regional challenges through the cross-agency collaboration of the Governor's Advisory Council on Veterans Services (GAC-VS).



Identify Appropriate Resources and Referral Mechanism

CDVA/VSO directs veteran to potential resources, ensuring issue resolution. Federal, state, and local veteran advocates are helping to break down silos, increase awareness of services, and educate front-line staff on resources that can address the unmet needs of our service members, veterans and their families.

PAVETCONNECT

dmva.pa.gov/VetConnect



Identify Individual Veteran Needs and Systemic Veteran Community Trends

County Directors for Veterans Affairs (CDVA)/ Accredited Veteran Service Officer (VSO) assesses veteran's critical needs, and provides area data and trends back to DMVA for analysis.



Organize Known Resource Information

The Pennsylvania Department of Military and Veterans Affairs (DMVA) continually researches, verifies and categorizes resources for more efficient use.



Create, Enhance and Educate Networks

Regional Program Outreach Coordinators (RPOCs) outreach and build relationships with veteran advocates in their regions, providing assistance, cultural competency, education and awareness of veterans issues and benefits where possible.



FASTER RESULTS

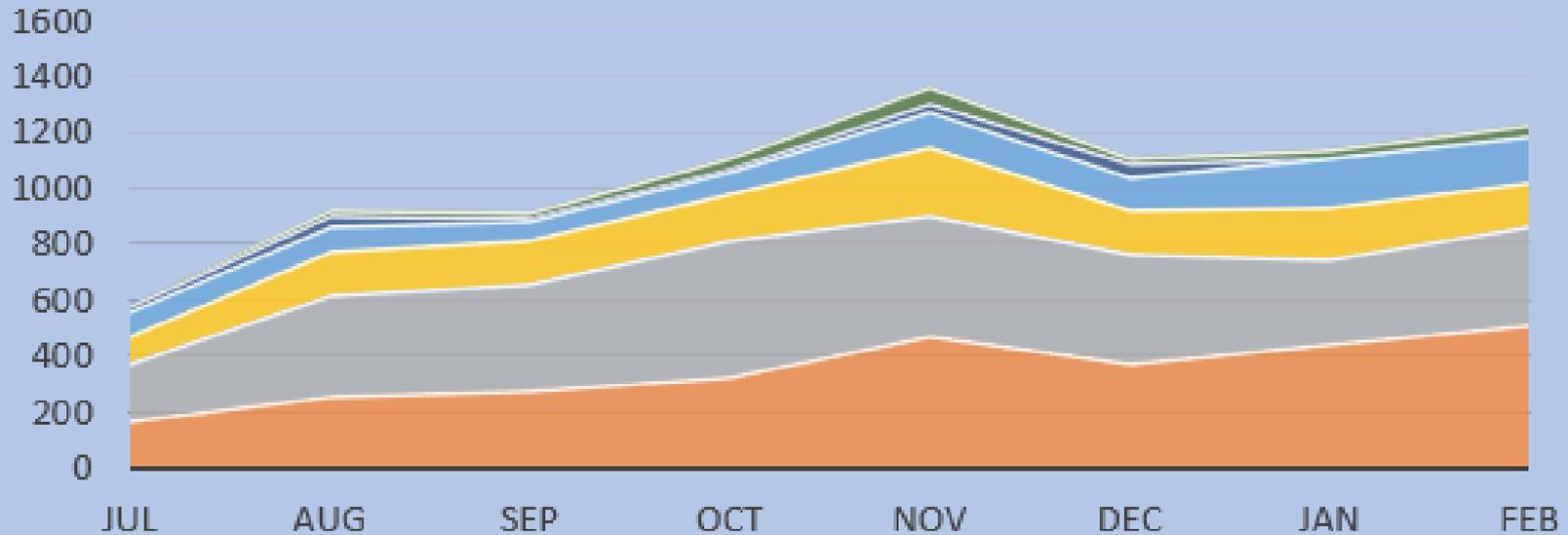


WIDER NETWORK OF RESOURCES



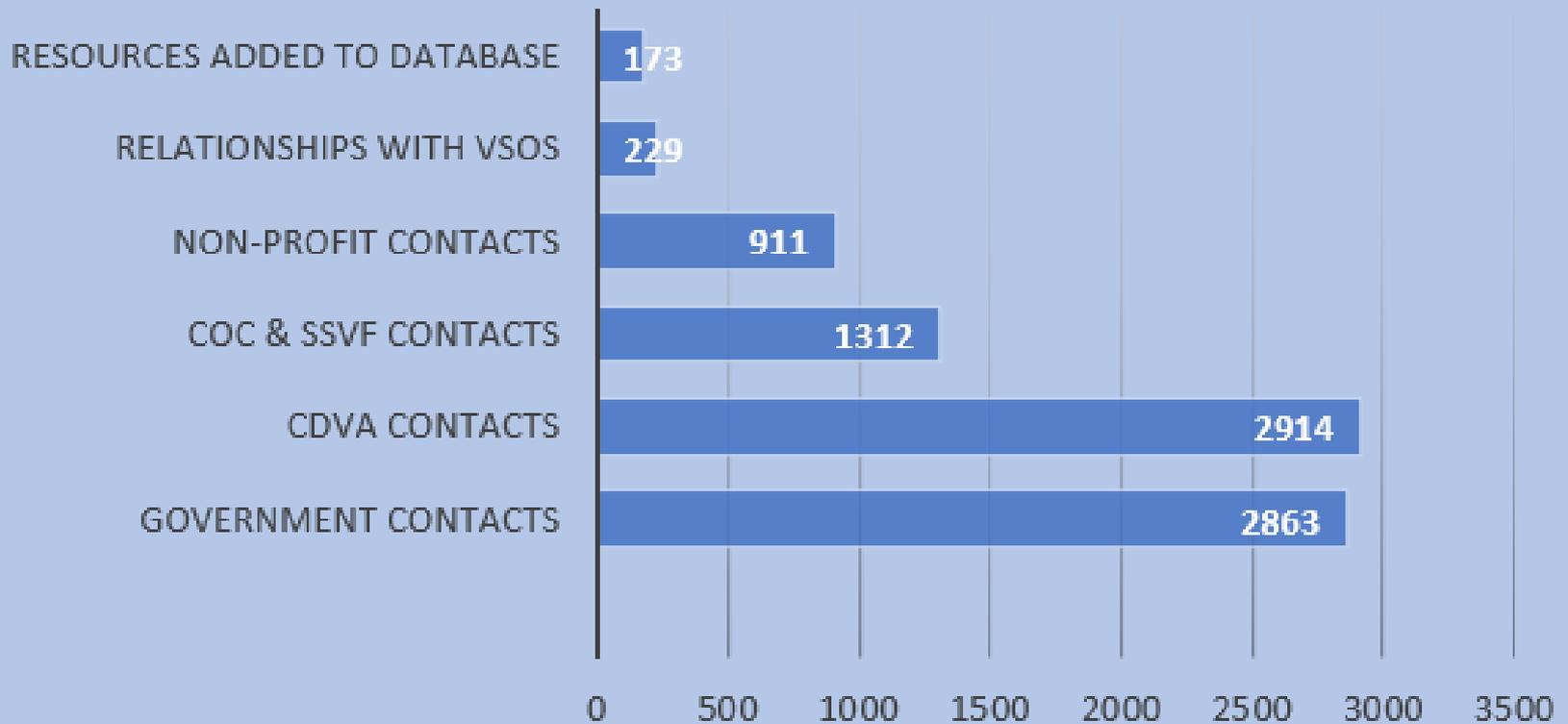
BETTER SERVICE

RPOC Contacts



- Government Contacts
- CDVA Contacts
- COC & SSVF Contacts
- Non-Profit Contacts
- Resources added to Database
- Relationships with VSOs

RPOC Collaboration 2020 - 2021



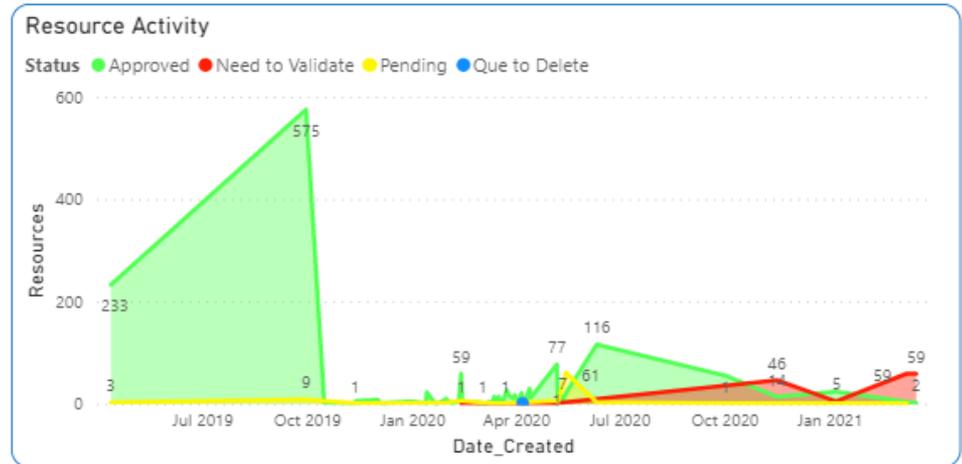
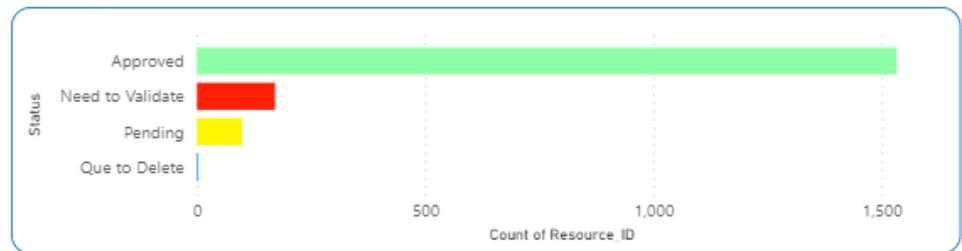


RESOURCES WITHIN DATABASE

Totals / Regional Totals

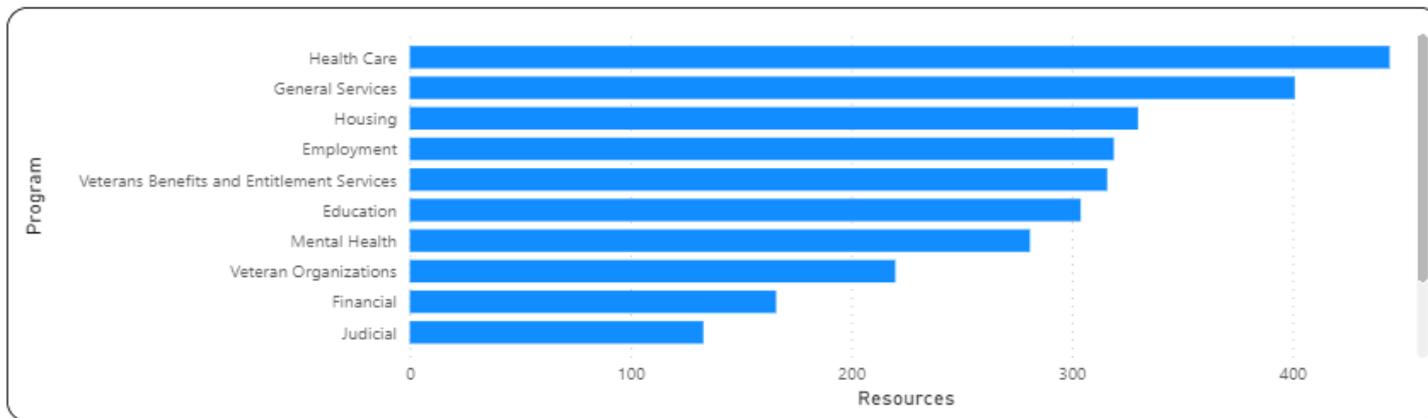


Resource Data Entry Activity

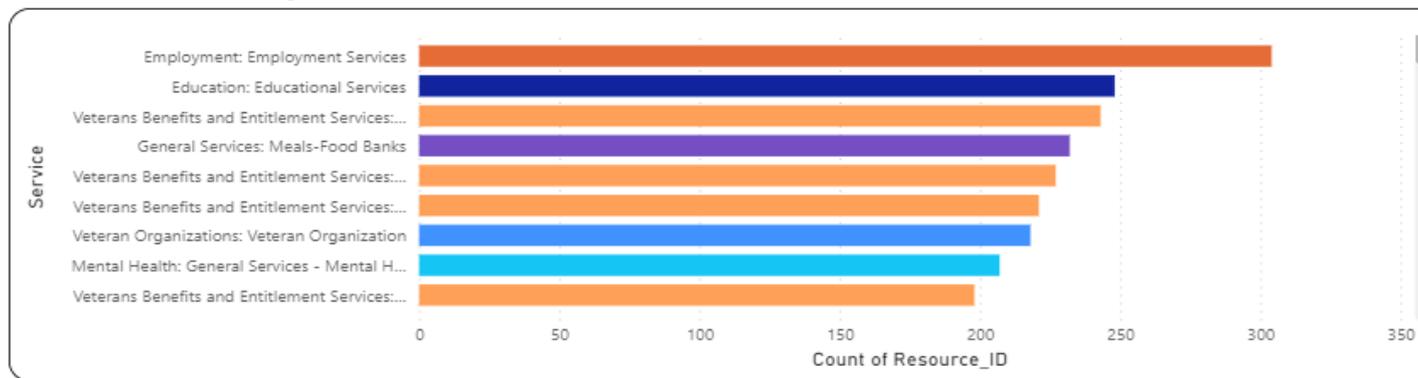




Top Ten Programs With Resources In Database



Top Nine Services With Resources In Database



OVA / VSO GRANT PROGRAM SUMMARY



FY 20 - 21 Claims, Compensation and Pension Summary	
Year to Date Claims Submitted	Year to Date Value of Awards
6,783	\$57,825,733.00
Year to Date Claims Submitted Previous Year 19 - 20	Year to Date Value of Awards Previous Year 19 - 20
15,731	\$124,266,767.00

FY 19 - 20 Claims, Compensation and Pension Summary	
Year to Date Claims Submitted	Year to Date Value of Awards
15,731	\$124,266,767.00
Year to Date Claims Submitted Previous Year 18 - 19	Year to Date Value of Awards Previous Year 18 - 19
16,944	\$173,160,940.00

Note: Organization specific reporting under the VSO Grant Program website page found on the DMVA website or by [clicking here](#)

VSO Grant Program —11 Year ROI



Fiscal Year	Number of Processed Claims	DMVA Grant Expenditures	Federal Award Totals	ROI (for \$1: ROI) Or Express as %
FY 08-09	9,782	\$1,612,698	\$207,152,605	\$1: \$127
FY 09-10	22,133	\$1,600,156	\$351,575,352	\$1: \$219
FY 10-11	26,675	\$1,568,871	\$315,006,318	\$1: \$200
FY 11-12	14,312	\$1,614,656	\$166,784,422	\$1: \$102
FY 12-13	12,927	\$1,606,926	\$168,506,244	\$1: \$104
FY 13-14	14,125	\$2,324,335	\$155,355,988	\$1: \$66
FY 14-15	14,891	\$2,432,000	\$108,525,112	\$1: \$44
FY 15-16	18,371	\$2,332,000	\$123,739,236	\$1: \$52
FY 16-17	32,756	\$2,326,111	\$81,888,628	\$1: \$34
FY 17-18	27,733	\$2,332,000	\$75,621,230	\$1: \$31
FY 18-19	18,299	\$2,832,000	\$164,325,655	\$1: \$57
FY 19-20	14,589	\$3,139,000	\$93,521,296	\$1: \$29
TOTAL	226,593	\$25,720,753	\$2,012,002,086	\$1: \$77

**ROI is \$1/\$77
over the life of the program**

- FY 07-08 was a partial year of data and is not included in this return on investment projection.
- The 6 organizations involved in this program employ an average of 60 employees.

VETERANS' TRUST FUND



VTF Report

Source	Week	Month to Date	Fiscal Year Total		Total	# HOV Sold
Appropriation Transfer to VTF	\$0.00	\$0.00	\$0.00		\$1,700,000.00	
HOV License Plate	\$15.00	-\$38.00	\$1,065.00	71	\$51,045.00	3,403
PA Monuments LP	\$0.00	\$0.00	\$0.00	0	\$0.00	0
HOV Motorcycle License Plate	\$0.00	\$45.00	\$255.00	17	\$3,255.00	217
HOV Women's License Plate	\$0.00	\$15.00	\$75.00	5	\$720.00	48
Checkoff & Donations	\$26,814.00	\$85,456.00	\$897,441.48		\$11,440,168.50	
Veterans Trust Fund Online Donations	\$0.00	\$0.00	\$120.00		\$5,198.00	
SECA Donations	\$0.00	\$0.00	\$1,639.64		\$10,123.00	
Interest	\$219.29	\$219.29	\$4,236.06		\$178,044.33	
VSO	\$0.00	\$0.00	\$0.00		\$700,000.00	
PENNDOT Costs (SFY 16-17)	\$0.00	\$0.00	\$0.00		\$194,000.00	
PENNDOT Costs (SFY 15-16)	\$0.00	\$0.00	\$0.00		\$194,000.00	
PENNDOT Costs (SFY 14-15)	\$0.00	\$0.00	\$0.00		\$194,000.00	
PENNDOT Costs (SFY 13-14)	\$0.00	\$0.00	\$0.00		\$194,000.00	
VTF Grant NOFA (SFY 19-20)	\$0.00	\$0.00	\$78,985.89		\$779,469.89	
VTF Grant NOFA (SFY 18-19)	\$0.00	\$0.00	\$0.00		\$800,000.00	
VTF Grant NOFA (SFY 17-18)	\$0.00	\$0.00	\$0.00		\$777,909.21	
VTF Grant NOFA (SFY 16-17)	\$0.00	\$0.00	\$0.00		\$641,329.75	
VTF Grant NOFA (SFY 15-16)	\$0.00	\$0.00	\$0.00		\$502,126.03	
VTF Grant NOFA (SFY 14-15)	\$0.00	\$0.00	\$0.00		\$472,473.67	
VTF Grant NOFA (SFY 13-14)	\$0.00	\$0.00	\$0.00		\$442,020.00	
Veteran Programs Training	\$0.00	\$0.00	\$0.00		\$8,700.00	
Veterans Assistance	\$0.00	\$0.00	\$0.00		\$22,901.34	
VTA	\$14,397.00	\$32,493.00	\$338,098.00		4,655,247.32	
Working Balance	\$12,651.29	\$53,204.29	\$487,748.29		\$2,810,376.62	3,668

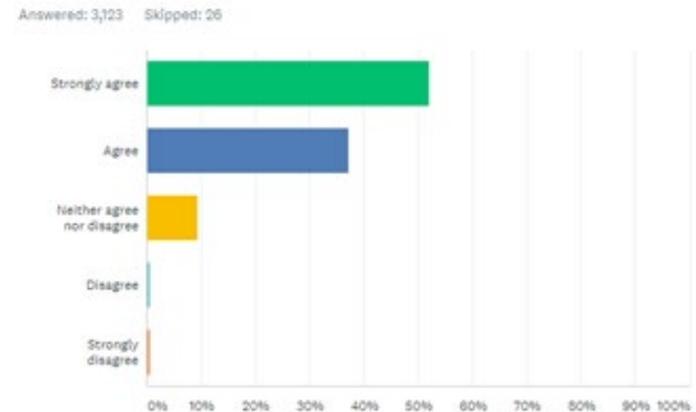
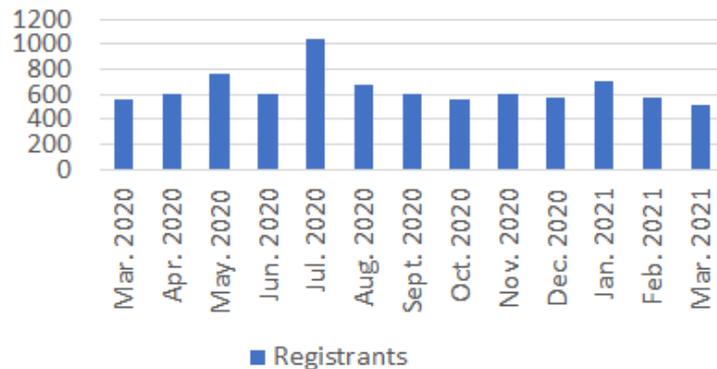
As of 17 March 2021

> community > commonwealth > country

PENNSYLVANIA VETERANS REGISTRY



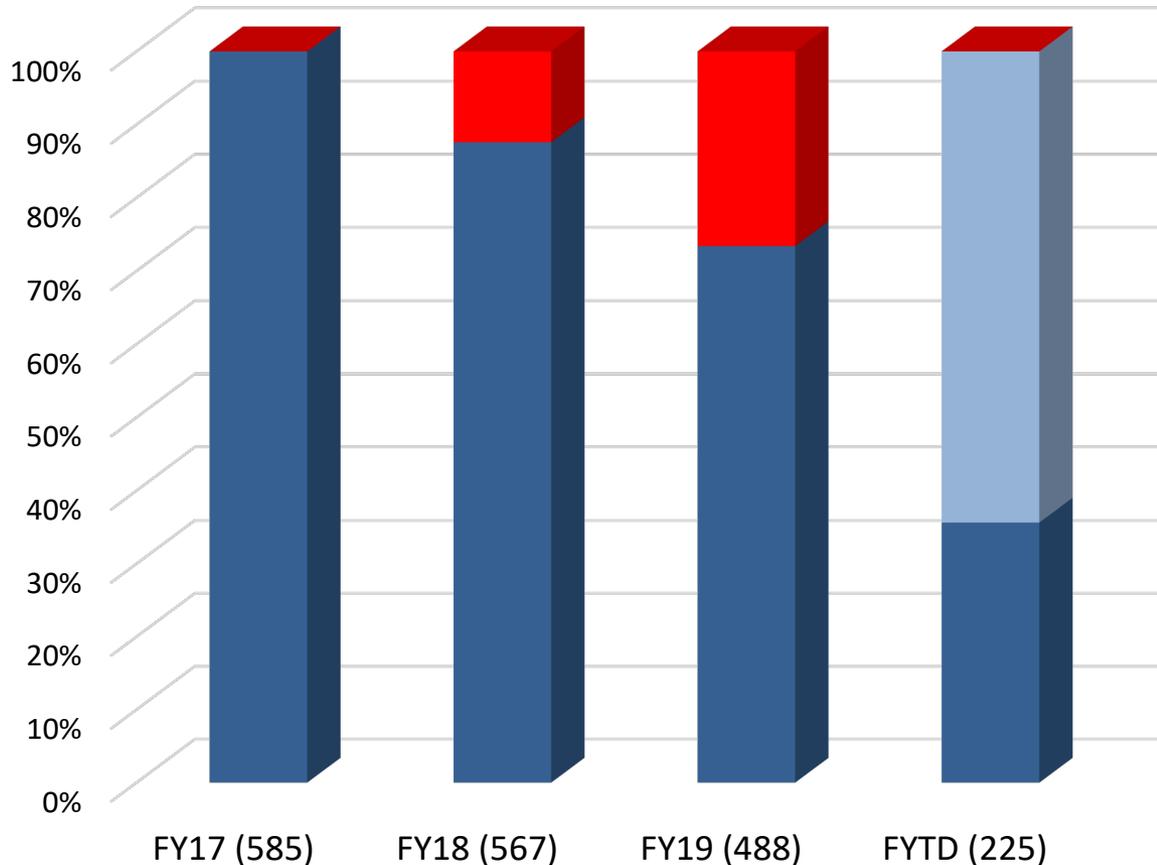
We have a total as 37,299 Veterans in the PA Veteran Registry and 1,237 of Non-Veterans. The registry has about 1,200 records that are duplicated emails and names. DMVA is currently working with PA Interactive to address duplicate records and have restrictions on entry fields within Veteran Registry to prevent future duplicate records.



VETERANS TEMPORARY ASSISTANCE



\$900,000



Expended \$320,735

Projected \$579,265

Lapsed \$0

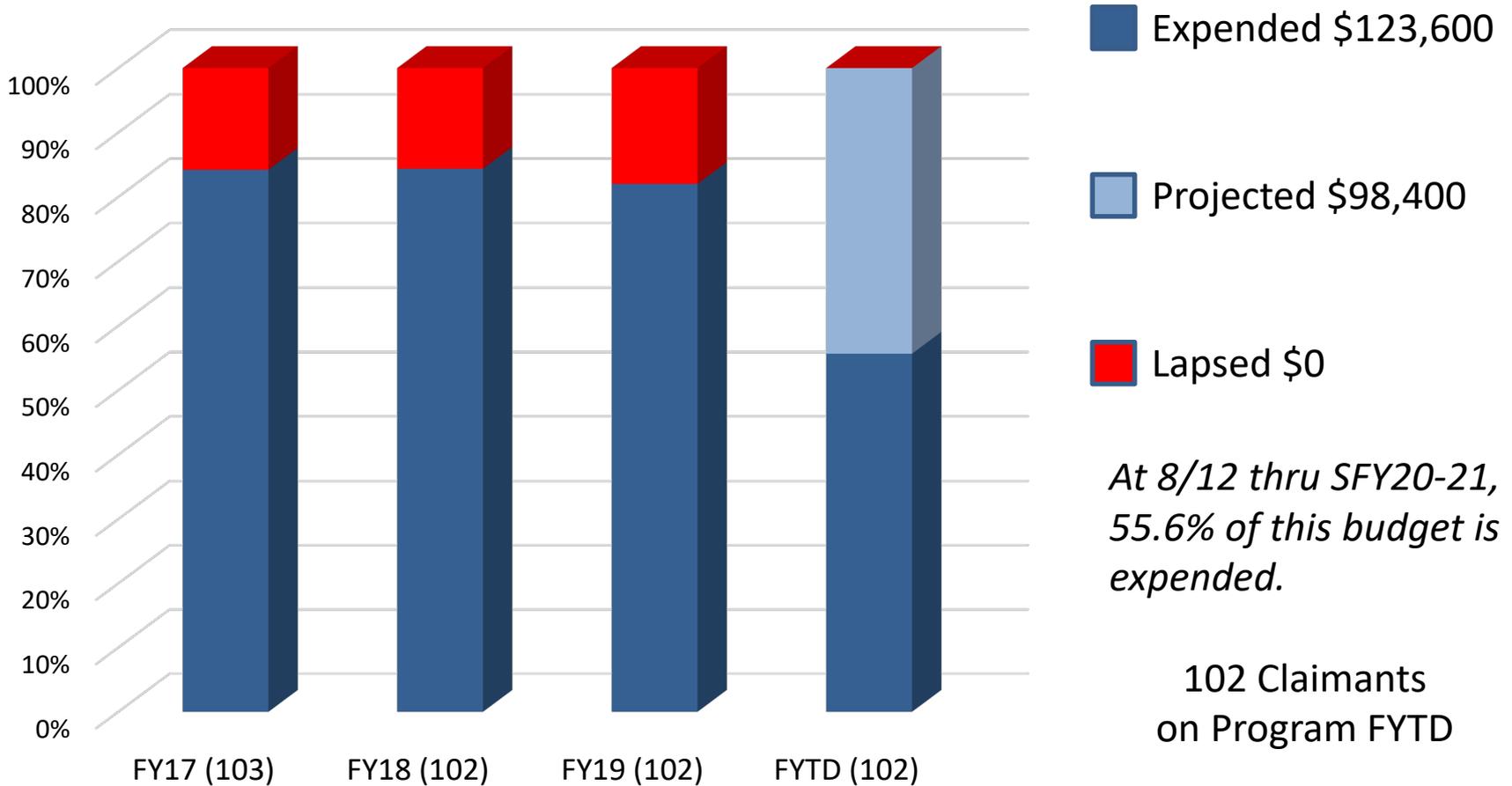
*At 8/12 thru SFY20-21,
35.6% of this budget is
expended.*

225 Claims
approved FYTD

BLIND VETERANS' PENSION



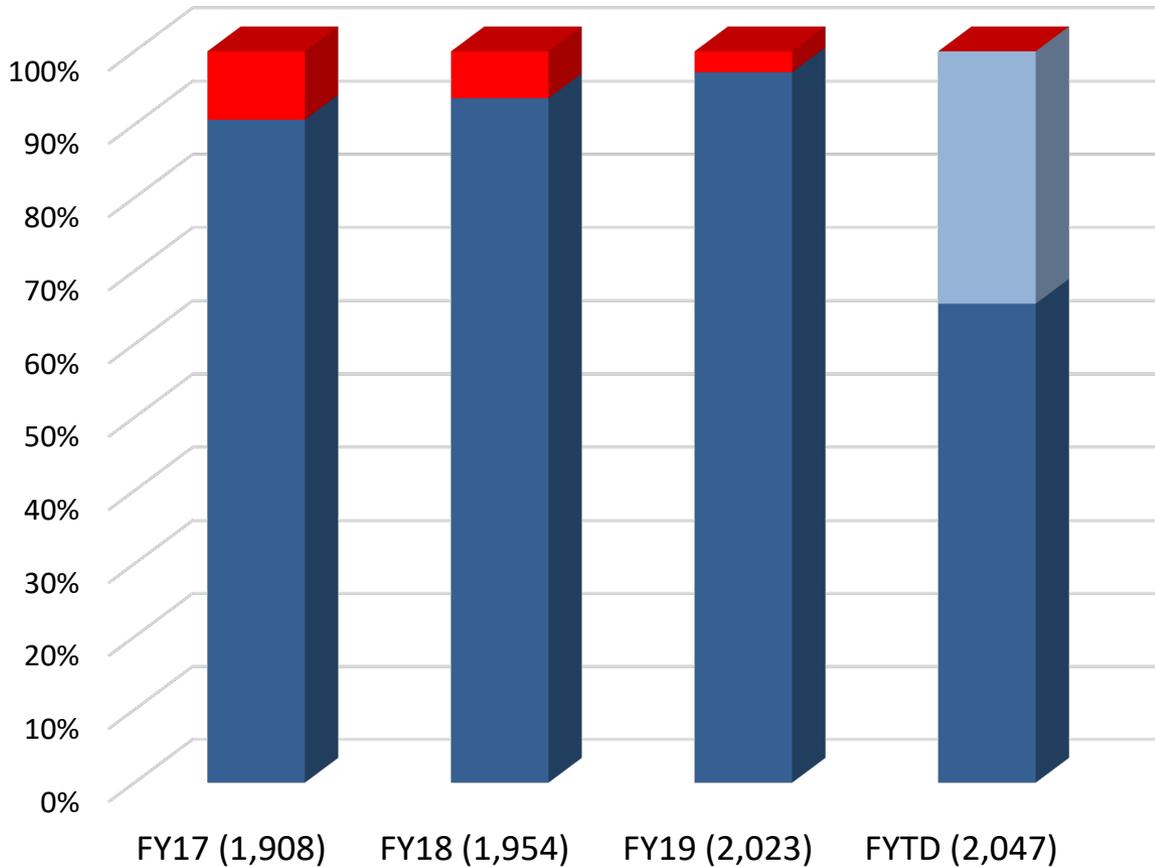
\$222,000



AMPUTEE & PARALYZED VETERANS' PENSION



\$3,714,000



Expended \$2,433,750

Projected \$1,280,250

Lapsed \$0

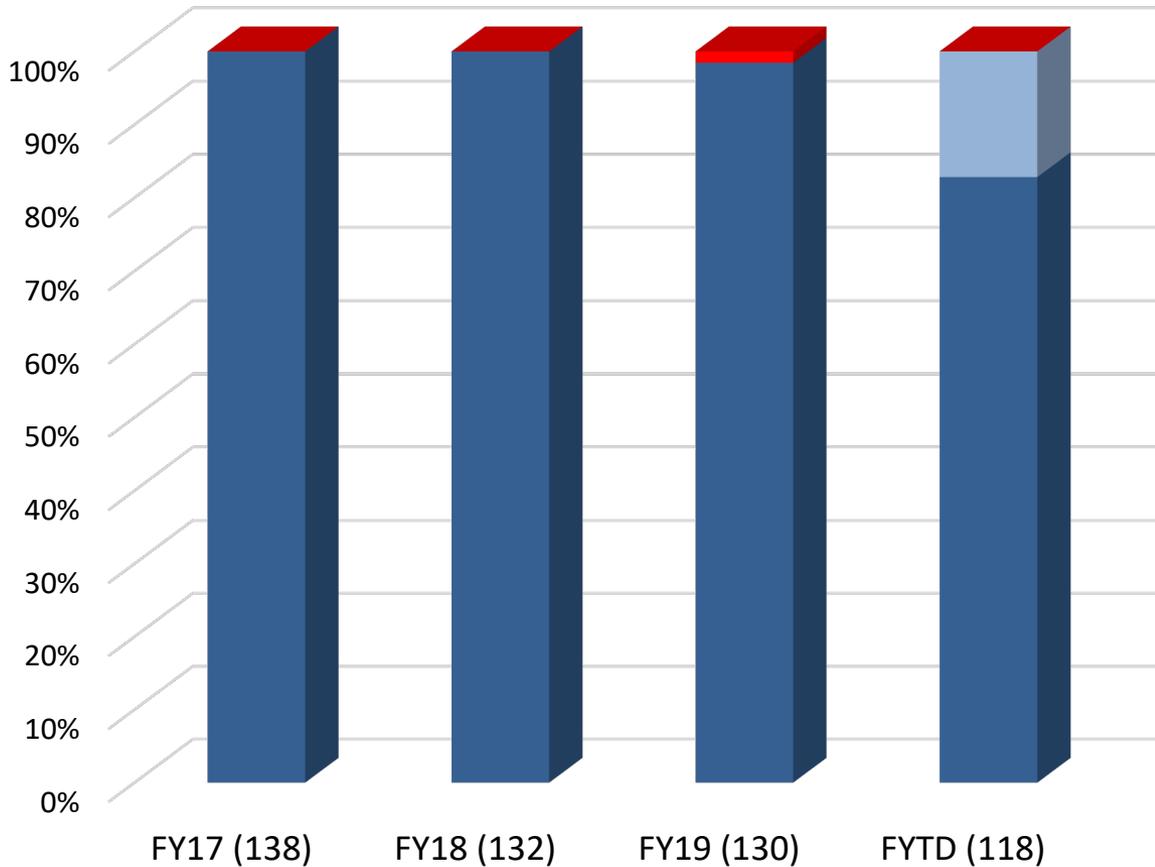
*At 8/12 thru SFY20-21,
65.5% of this budget is
expended.*

2,047 Claimants
on Program FYTD

EDUCATIONAL GRATUITY



\$125,000



Expended \$103,536

Projected \$21,464

Lapsed \$0

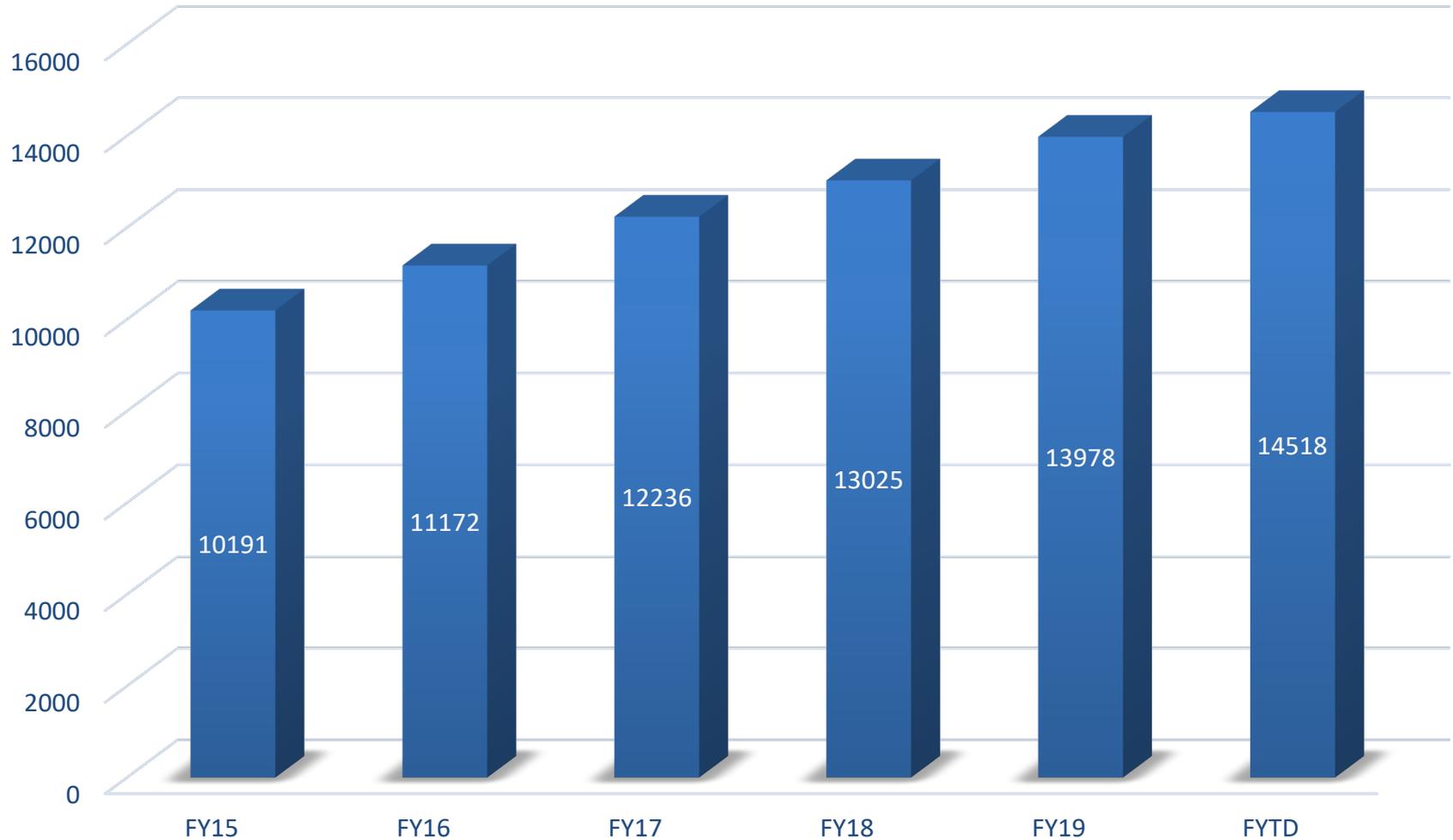
*At 8/12 thru SFY20-21,
82.8% of this budget is
expended.*

212 Claims Paid
on Program FYTD

OVERALL MFRAP CONTRIBUTIONS AND PAYMENTS: FY 2005 – FY 2020
(PROGRAM REAUTHORIZED 29 OCT 2020)

Total Private Donations.....	\$136,747.69
Total Department of Revenue, PIT Donations.....	\$1,807,253.90
Total All Contributions: Private and PIT Donations.....	\$1,944,001.59
Approved Grant Application Payments.....	\$901,421.86
Approved Grant Application Payments FYTD.....	
\$7,000	
Account Balance.....	\$1,042,579.73

DISABLED VETERANS' REAL ESTATE TAX EXEMPTION



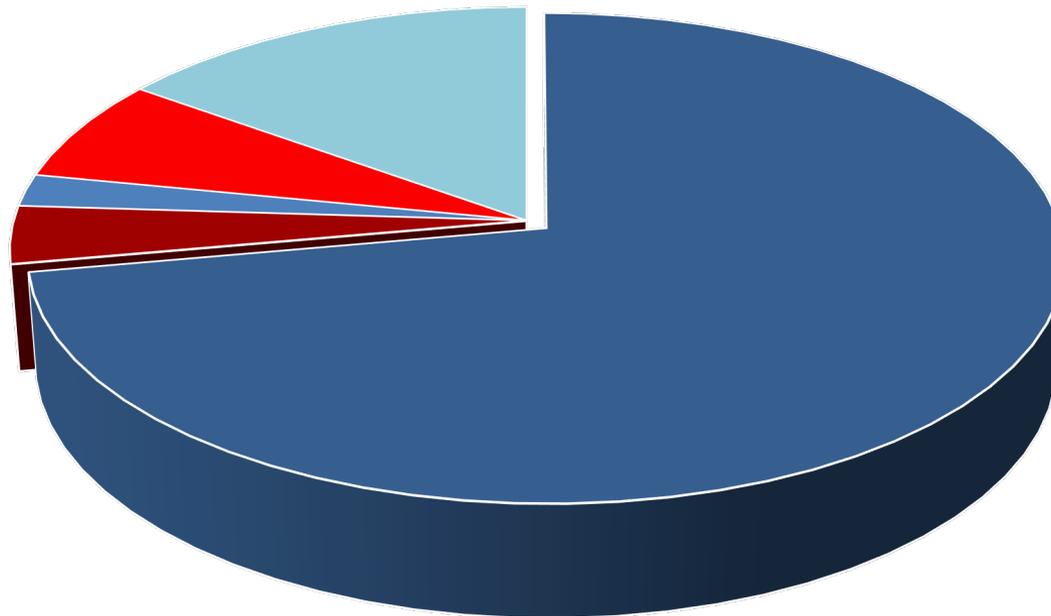
As of 17 Mar 2021

[> community](#) [> commonwealth](#) [> country](#)

DISABLED VETERANS' REAL ESTATE TAX EXEMPTION



887 Adjudications
between January 20 and March 17, 2021



72.1% Approval

- 640 Approved
- 34 Denied: Financial Need
- 19 Denied: Ineligible*
- 61 Removed: No Response
- 133 Removed: Eligibility Change

*** 19 Applications Ineligible by Reason:**

- 2 – Property sold
- 1 – Veteran not rated total and permanent 100% during lifetime
- 6 – Property not owned solely by Veteran or as estate by the entirety with spouse
- 5 – Veteran did not serve during a period of war or armed conflict
- 4 – Veteran did not have a 100% permanent disability due to a future exam.
- 1 – Veteran does not occupy property as a principle dwelling

NEXT MEETING



JUNE 4, 2021

WEBEX VIRTUAL

Fort Indiantown Gap

Annville, PA

Visit www.svc.pa.gov for all SVC info.

Pennsylvania State Veterans Commission

April 2, 2021

VISN 4 Update

Good morning, everyone! This is Tim Liezert, VISN 4 network director.

You have received our slides with updated access, wait time, and care in the community data as a read ahead. Please let me know if you have any questions.

1. Leadership Update

Dr. Borys Loza, MD has been appointed Chief of Staff at the Erie VAMC effective March 14, 2021. He has been the Acting Chief of Staff since October 1, 2020. Dr. Loza began his VA career at the North Florida South Georgia VA Health Care System as a Staff Physician in Primary Care at the Villages, Florida CBOC.

George Tzanis, former Wilmington Chief of Staff was appointed VISN 4 Clinical Resource Hub Director.

Barb Forsha, Deputy Director of the VA Pittsburgh continues to serve as the Acting Director of the Clarksburg VA.

Nancy Schmid, Associate Director for Patient Care Services, at Coatesville is retiring on March 26.

We are currently recruiting for a new Chief of Staff for Wilmington and Butler.

2. New Beneficiary Travel Self-Service System (BTSSS)

I am pleased to announce another option for eligible Veterans and their caregivers to submit claims for mileage reimbursement and other travel related expenses. The new system, called the Beneficiary Travel Self-Service System (BTSSS), offers many benefits:

- Access 24/7/365 from your PC, tablet or smart phone;
- Faster payments and direct deposit;
- Ability to check the status of your claim anytime, anywhere;
- Prefilled appointments, mileage, and other information that make filing a claim easier than ever.

Eligible Veterans and caregivers are encouraged to submit claims and supporting documentation for reimbursement of costs incurred for use of a personally-owned vehicle and other travel-related expenses such as tolls and parking. Find out if you are eligible for beneficiary travel benefits at the [VA Travel Pay Reimbursement](#) webpage.

Web links for easy filing and faster payments were included in your read ahead material: [file your claims using BTSSS](#) at <https://access.va.gov>.

Step by Step instructions were also provided in the read aheads.

Step 1: Start direct deposit if you do not have it already. Complete and return [VA Form 10091](#).

Step 2: Create a DS Logon Level 2 (Premium) Account. If you do not have a DS Logon, or you are not sure, you can register, verify or update your DS Logon account from the [DoD DS Logon Access Center](#).

Step 3: Create a [BTSSS Profile](#) and choose "Proceed to Profile Review." Enter or save any updates to your personal, contact, or banking information and select "Request Profile Updates." A check will be mailed if no banking information is provided.

Step 4: File or Track a Claim

For help filing a claim with BTSSS:

- Download the [User Guide](#)
- Contact a travel clerk at your local VA medical facility
- Call the Beneficiary Travel Help Desk at 1-855-574-7292

For help with a DS

Logon, visit <https://www.dmdc.osd.mil/identitymanagement>, or call the DS Logon Support Center at 1-800-477-8227 (select option 2, and then option 2 again).

Additional log-in options are also being implemented. ID.me and MyHealthyVet options are on the way and will make it even easier to access the new BTSSS portal. ID.Me began rolling out on March 18, 2021 and MyHealthyVet sign-on is slated for April 2021.

2. COVID-19 Vaccine – Update

The number of doses administered to Veterans at each facility is now updated daily on the [VA COVID-19 National Summary website](#). This link was provided in your read ahead material.

For Veterans who are wondering how to get a COVID-19 vaccine, please encourage them to visit VA's COVID-19 vaccine website, which includes a Keep Me Informed tool, to help keep Veterans updated regarding vaccine distribution. While Veterans don't need to sign up for this (or anywhere) to receive the COVID-19 vaccine, it may be helpful for both them and their local facility for planning purposes if they do.

As vaccine supply increases and we move through the distribution plan, care teams and local facilities will contact Veterans to let them know of their options. A link to the VA's main COVID-19 COVID vaccine webpage was provided in your read aheads. . Please share this link as widely as possible. (www.va.gov/health-care/covid-19-vaccine/).

3. Caregiver Support Update

The Program of Comprehensive Assistance for Family Caregivers (PCAFC) was created in 2011 and was previously open only to post-9/11 Veterans and their families. Under the MISSION Act of 2018, VA made changes to criteria for who qualifies for the program effective Oct. 1, 2020. These changes included expanded eligibility beyond post-9/11 Veterans, as well as targeting Veterans with moderate to severe health care needs.

Applications to the program are reviewed at the facility and VISN levels, with a level 1 and level 2 appeals process in place for denials. Staff from multiple VISNs work together to review appeals.

Since Oct. 1, 2020, VISN 4 has received 2,403 (as of Mar. 11) applications. 195 of the POST EXPANSION applications have been approved; 1,446 applications have been denied; and 762 are still being processed. Between both LEGACY PARTICIPANTS(approved before 10/1/20) and POST EXPANSION Participants, there are 698 Veterans with a total of 780 Caregivers in VISN 4 currently enrolled in the Program of Comprehensive Assistance for Family Caregivers(PCAFC)(Some Veterans have Primary Caregivers and up to two additional Secondary Caregivers).

PCAFC COVID Status for VISN 4:

127(16.28%) of our 780 Caregivers have received a COVID vaccine as of 3/10/21.(Some of those may include Caregivers who are also Veterans)

Currently staff are processing applications in a timely manner or quicker. 95% or more applications are adjudicated within 90 days in VISN 4 with the benchmark being 90%.

In addition to the PCAFC, is the Program of General Caregiver Support Services (PGCSS). VA has taken steps to enhance those resources for Veterans and caregivers, including adding dedicated staff at each facility. Veterans in this program don't have to meet the requirements for the comprehensive program and will meet with staff for an introductory appointment.

Enhanced services in the PGCSS include:

- Group and individual interventions
- Suicide prevention training for caregivers
- Annual Caregiver Summit and Resource Fair
- Whole Health Coaching will be expanded to caregivers starting at the pilot site of Philadelphia VAMC in VISN 4
- Staff training on the Campaign for Inclusive Care

Staff regularly use technology and have capacity to reach out to Veterans over video or phone to provide care. Staff also provide education about safety and suicide prevention for caregivers to help them understand and increase safety in households. Last year the annual summits and resource fairs for caregivers were mainly held virtually but had tremendous response and great community participation.

Each VISN will have one pilot site offering whole health coaching for caregivers. In VISN 4, Philadelphia VA Medical Center will be a pilot site. As expansion rolls out, there will be more opportunities for other facilities. Staff are encouraging and empowering caregivers to have goals and be active members of the treatment process, as well as including providers to help everyone work together.

The national VA caregiver website is: www.Caregiver.va.gov

4. Customer Service Update

Nationally, VA's trust score over the last 90 days was 90.1. In VISN 4, our trust score over the last 90 days was 92, which is the fourth highest VISN in the nation. The top 5 compliment themes over the last 90 days were quality of care, interactions with staff, satisfaction with specialty care, ear clinic services, and podiatry services.

5. Connected Care Update

With March being National Nutrition Month, Veterans can now take part in nutritional programs offered via VA Video Connect keeping them safe during the COVID pandemic. VISN 4 Nutrition Programs offered via Video to Home include MOVE!, Healthy Teaching Kitchen, Diabetes Management and other collaborations with the Whole Health Program. Veterans who are interested in participating with the Nutrition Programs should contact their Primary Care Team at their local VA Facility for further information.

The Veterans Health Library has a new and improved look! <http://www.veteranshealthlibrary.va.gov/>

- New Medication Education Material
 - Concise, easy-to-understand instructions
 - Content written to activate patients at lower health literacy levels
 - QR code enabling patients to access more in-depth content
- Improved print functions

- New Wallet Card

Migrating eBenefits to VA.gov began in FY2017 so that users can visit one site instead of multiple sites. The majority of Veteran Benefits Administration (VBA) features in eBenefits have been moved to VA.gov with the final features transitioning by the end of April 2021. Most key features are currently only available at VA.gov, to include: filing a claim, claims status, Chapter 36, direct deposit, payment history, and uploading evidence. VBA is working with their partners and stakeholders, such as Veteran Service Officers (VSOs), to communicate the eBenefits migration to VA.gov to their members, customers and clients. VBA will provide guidance to all eBenefits users (Veterans, service members, spouses, care givers and other stakeholders) to visit www.va.gov and the option to create a new credential using the ID.me site provided on VA.gov.

Closing

In closing, I'd like to thank you for your continued support of VISN 4. Please let me know if you have any questions for me.

Veteran Pension Poaching Awareness Campaign

The Problem



- One veteran or beneficiary scammed out of money is one too many!
- Many veterans and families do not know that free help exists and therefore fall prey to scammers and unscrupulous players in their attempt to find assistance in applying for benefits.
- Many veterans are still not yet connected to VA for care or engaged with an accredited VSO.
- Veterans who do not obtain their healthcare or social service supports through the VA or another Veteran-centric provider are receiving them elsewhere in the community.
- Therefore, many mainstream human service and healthcare providers encounter Veterans or their family members and caregivers daily. But do these providers and their staff know that free and safe assistance exists?

The Plan



- Collaboration and communication
- Educate the staff of mainstream healthcare and human service providers
- Well-informed professionals and staff can more easily and routinely guide the Veterans they serve to free and safe assistance in the form of accredited VSOs
- Subsequently reduce the frequency of Veteran pension poaching

The Plan: Who



- Sister state agencies
- Trade and membership organizations
- Statewide systems for human service provision
- Traditional Veteran advocates and organizations

**Participating organizations have identified a point of contact to:*

- *receive updates from DMVA on this effort*
- *participate in the pre-launch meeting*
- *receive the electronic toolkit on behalf of their organization/dept*
- *ensure materials are pushed out via all possible communication channels at launch*

The Plan: What



- Materials are being generated and will comprise an electronic toolkit that will eliminate printing and mailing costs.
- Primary intent is to educate staff, but materials can also be used at the discretion of the recipient organization to educate clientele.
- Toolkit will include ideas for how the materials can be used to educate both staff and clientele.
- Striving for diversity in materials to promote greatest use.

The Plan: How



- Toolkit will be pushed out electronically to primary points of contact for entities that have agreed to participate.
- They will send it electronically via their respective communication channels which might include a listserv or may include social media or website posts, message boards, closed-circuit television, newsletters, etc.
- The manner and frequency in which the electronic materials are shared will be up to each participating entity; one may send via a listserv only while others may use it in multiple ways.
- Each participating sister-state agency will be asked to push the materials far and wide within their department to all bureaus, offices and applicable councils, which in turn will be asked to send the materials through their respective communication channels.

The Plan: How



- A pre-launch meeting with POCs for all participating entities is planned for late April.
- A time to review materials, discuss roles, request the completion and return of a simple feedback form, address any questions, and ensure that all participants understand the timeline for launch.
- Also a time to ask all participants to revisit this important message each June to keep the information disseminated on an annual basis.
- Finally, will allow DMVA the opportunity to ask these entities if they could be called upon in the future to share other messaging that the department may wish to distribute at the community-level across the commonwealth.

The Plan: When



- Launch 1 Jun (the date that all participating entities would start sending out the electronic materials via their communication channels)
- Each participating entity can push the materials out as often as they like thereafter
- Revisit annually each June
- June is Elder Abuse Awareness Month; pension poaching is a form of financial exploitation and abuse.
- June 15th is World Elder Abuse Awareness Day
- Opportunity for press releases



**DELAWARE VALLEY VETERANS HOME
ADVISORY COUNCIL MEETING MINUTES
November 4, 2020
Conference Call**

Present:

Advisory Council Members

Allan Abramson, Jewish War Veterans
Douglas Craig, Military Officers Association
Larry Holman, Jewish War Veterans
Samuel Huhn, Blinded Veterans Association
Benjamin Mastridge, Vietnam Veterans
Daniel Murray, Marine Corps League
John O'Donnell, American Legion
Kerry Judge, for Senator Robert Tomlinson

**Department of Military and Veterans Affairs and
Delaware Valley Veterans Home**

Eric Weller, DAG
Andrew Ruscavage, Director State Veterans' Homes
Peter Ojeda, Commandant
Deborah Olivieri, Director of Nursing
Rita Yeung, Business Manager
Violetta Berdichevskaya, Medical Director
Jack Thompson, ADON
Susan Riever, Adm. Asst.

Absent

Bruce Boice, Disabled American Veterans
Richard Fine, Jewish War Veterans
Daniel McCollum, American Legion
Charles Petronis, Catholic War Veterans
James Ritchie, Veterans of Foreign Wars
Martina White, PA House of Representatives
Yahvae Jones, Admissions

Residents

No Residents attended due to quarantine.

Visitors

No visitors due to Covid.

- Moment of Silence
- Pledge of Allegiance
- Introduction of Attendees
- Approval of Minutes from August 12, 2020

Report from Violetta Berdichevskaya, Medical Director

- We are presently in the YELLOW phase. We have 1 staff member who tested positive and is now on a 14-day quarantine. Family members can meet with their loved ones in a specified area outside of the building.
- Flu - all residents' and staff have been given the flu shot. We are ready for flu season and as in previous years, visitors will not be permitted in the building.
As you all know, this is a pain free building.
- Wounds – 2 residents sent out to the hospital developed pressure wounds while hospitalized.
- PPE Equipment - Andrew stated that we are getting all PPE equipment needed from the state. We have a stockpile at Hollidaysburg and headquarters at the GAP.

Report from Yahvae Jones, Admissions/Marketing

- Yahvae did not attend the meeting.
Andrew stated we have 1 staff who is positive. Indoor visitation is not permitted.
We have no admissions as we have no beds. 1 unit is under construction. We have part of a unit specified YELLOW zone for isolation and RED zone for any positive resident's that may arise. There is an extended wait time for all our homes.

Report from Eric Weller, Deputy Adjutant General

- We received ½ of our budget in July and should receive the balance sometime this month.
- 3rd wave of Covid is coming. CDC state that most positives are asymptomatic. We are presently doing weekly and monthly testing.
- PPE – we had a shortage of PPE supplies in March and April, but we now have plenty on hand. We would like to have a 6-month stockpile of this equipment and we are working on this. We are testing more frequently than any outside nursing homes. DVVH (Delaware, Lancaster & Philadelphia counties) have 60% of most cases and 50% of deaths in the state. Southeast (Berks, Chester & Montgomery counties) have 20% of cases and 20% deaths in the state. Hopefully, we have a vaccine coming soon.

Report from Andrew Ruscavage, Director of Veterans Homes

- DVVH is doing a great job.
- Vaccine – all homes have opted into a National Program for vaccine. We are not sure at this time if it will be a 1 or 2 dose vaccine. Every resident and staff will complete a consent form regarding the side effects of the vaccine. Covid is far from over and 1 positive is considered an outbreak. After the 14-day quarantine we will consider bringing in some volunteers.
- This year trees will be put up outside along the driveway and in the front of the building.
Unfortunately, there will be no family Thanksgiving or Christmas dinner.
- Frequency of Testing – 0-5% or below monthly – 5-10% - weekly testing and 10% or higher every 2 weeks.
- Veterans Homes - Newspapers are not always true with information. We are doing everything we can in the homes to address the Covid problems. An outbreak in one of our homes has been contained and we are continuing to work hard to keep it that way. Private care facility statistics look about the same as our homes. Many of our employees who tested positive were asymptomatic. We work hard every day to keep our homes safe.

Report from Peter Ojeda, Commandant

Volunteer Jack O' Donnell was here for about 1-1/2 weeks, but due to the 1 positive he cannot come back into the building for 14 days.

Over the past 3 months we had 0 admissions and 3 discharges.

Donations for the past 3 months totaled \$2265.00

We had some great activities over the past 3 months.

- Sept. - Outdoor Walks, gardening, trivia, music & dancing, unit bingo, Eagles Football on the big screen, order in food, movies and current events.
- Oct. - Order in food, bingo, sing a longs, movies, exercise and birthday celebrations. We also celebrated the Navy Birthday and the 102nd birthday of one of our residents. Trunk or Treat Halloween was held on October 28th with tables set up on Main Street for the residents with all kinds of goodies, singing and dancing. On October 31st we had our Annual Halloween Costume Parade.
- Nov. – Annual thanksgiving dinner will not be held this year, but we will have a Thanksgiving luncheon with all the trimmings on November 25th.
- Dec. – **Christmas** - Talent Show, Cookie Baking & Christmas Carols and Staff Fashion Show. On December 21st will have Christmas Dinner for the residents and a Christmas Luncheon on December 23rd.

Old Business:

New Business:

Good of the Counsel: Dan Murray stated he is looking forward to our face to face Advisory Council Meetings. Allan Abramson wished everyone a Happy Thanksgiving and Happy Holiday.

Adjourned: 11:00AM

Next Meeting: February 10, 2021

HOLLIDAYSBURG VETERANS' HOME (HVH)

**HOLLIDAYSBURG VETERANS' HOME (HVH) ADVISORY COUNCIL MEETING MINUTES
TELEPHONIC MEETING
THURSDAY, October 15, 2019
10:00 A.M.**

Joe Patterson conducted a telephonic rollcall with the below findings:

ADVISORY COUNCIL MEMBERS PRESENT:

Tim Susengill (Council Present), Vietnam Veterans Association
Raymond Lenz, American Legion Department of PA
Joe Rodkey, Blinded Veterans
Brian Querry, Centre County, Director of VA
Goose Marin, Catholic War Vets
David Wagner, DAV
Duffy Hines, Marine Corps League Department of PA
John Gority, Military Order of the Purple Heart
Henry Gaunt, AMVETS
Richard Orłowski, Resident Representative

OTHERS PRESENT:

State Senator Judy Ward
State Representative Louis Schmitt Jr.
Major General (Ret.) Eric Weller, The Deputy Adjutant General of Veteran Affairs
Director of Bureau of Veterans Homes, Andrew Ruscavage
Dr. Reinhardt, Medical Director
Deborah Nesbella, Commandant
Sam Dunkle, Deputy Commandant
Samantha Cossman, Regional Program Outreach Coordinator
Joe Patterson, Assistant to the Commandant, Recorder

ADVISORY COUNCIL MEMBERS & OTHERS ABSENT:

Robert "Hank" Sembower, Military Officers Association of America
Stanley Rolnik, Jewish War Veterans
Dwayne Anders, VFW Department of PA
Kelly Smith, Director of Nursing

Called to Order

Tim Susengill called the meeting to order at 1000hrs and asked everyone to stand for a moment of silence to honor our deceased veterans and residents; and afterwards everyone joined-in reciting the Pledge of Allegiance to the United States of America.

REVIEW OF MINUTES FROM PREVIOUS MEETING

Mr. Susengill asked council members to take a few minutes to review. Afterwards, he asked council members if they had any questions, comments, or concerns to declare? None were received and he stated the minutes would be accepted as published.

Swearing-In New Members

Major General (Ret.) Weller read the oath of office and sworn-in John "Goose" Marin, Catholic War Veterans; Henry Gaunt, AMVETS; and John Gority, Military Order of the Purple Heart.

Medical Director, John Reinhard

Dr. Reinhardt provided his Medical Team update, with them being in Phase II – four (4) physicians assigned to HVH. He said, Phase I was having a single medical provider, Dr. Francillo, assigned and now four (4) are rotating. Dr. Reinhardt said his team is being very careful due-to fact they are serving the community, VA hospital, and the HVH. Dr. Reinhardt gave kudos to the VA hospital for providing Cepheid Rapid Tests to the HVH. He said, HVH is currently waiting to have their own ability to give Raid Tests at the home. Dr. Reinhart said, at the present time and for the past seven (7) months, HVH has zero (0) positive COVID-19 cases [for resident]; and staff have done a fantastic job abiding by all the PPE requirements and protocols.

QUESTIONS, COMMENTS or CONCERNS:

Duff Hines echoed Dr. Reinhardt's statement saying, HVH Staff [and Dr. Reinhardt's Team] has done a fantastic job; compared to national and other local Nursing Homes that have positive COVID-19 cases and are not doing so well. Dr. Reinhardt said the credit goes to the Commandant and the Director of Nursing for standing-up, training and managing isolation units; coordinating testing and ensuring staff are following PPE protocols.

Tim Susengill asked Dr. Reinhart if HVH could start accepting new residents if the applicate has a negative COVID-19 test result [prior to admission] and then were isolated? Dr. Reinhardt said, HVH is very familiar with this process because every resident that is sent to the hospital are tested prior to their return [at the hospital] and are assigned to a Yellow Zone/ isolation unit at HVH. Dr. Reinhardt continued by noting, that resident is then tested twice while they are in the Yellow Zone and after 14 days [with negative test results] the resident can be cleared to enter the general population. Director Ruscavage said he would address Tim's question during his section of the meeting and present BVH's guidance on our Veterans Homes accepting new admissions.

Major General (Ret.) Eric Weller, The Adjutant General of Veterans Affairs

COVID-19

The General said across the state there is currently two (2) residents and four (4) staff members that have tested positive for COVID-19. He said, from the beginning it has been challenging because nobody knew what this virus was about and there was a lot of conflicting information coming from The Centers for Disease Control and Prevention, Center for Medicare & Medicaid Services (CMS), and the PA Department of Health. The General said, with all these challenges, the Newsweek Magazine posted an article and named HVH and SEVC as one (1) of the best Nursing Homes in the state of Pennsylvania.

Personal Protective Equipment (PPE)

The General said his goal is to have a six (6) months of supply for all the homes.

Major General (Ret.) Eric Weller, The Adjutant General of Veterans Affairs (Cont.)

Budget & VA Programs.

The General said with the current pandemic the Veteran Affairs will not know the status of the rest of our budget until sometime in November 2020. The General said all the state programs e.g. PA Paralyzed Veterans, the Veteran's Trust Fund, Veterans Outreach and Veterans Connect remain "up and running".

The General said the Veterans Connect Data Base is complete, was done completely in-house and saved millions of dollars, and an official roll-out of the data base will be in November 2020. The General said, the data base is not the only part of the Veterans Connect program, being that there are Veterans Connect Regional Program Coordinators assigned throughout the state. He introduced Samantha Cossman as the local Veterans Connect Regional Program Coordinator for Centre County.

The General said his VSO team is involved in a pilot program with County and Service VSOs – for veterans to call and discuss benefits. He said this will happen in late October 2020.

QUESTIONS, COMMENTS or CONCERNS:

None

Director Andrew Ruscavage, Bureau of Veterans Homes

CMS Guidance:

Andrew discussed the new guidance was received from the Department of Health (DOH) for Skilled Nursing facilities. He said the guidance received effects BVH's Policy & Procedures for its reopening plans, time-tables and phases – have now all been taken-away. Andrew explained, all State Veteran Homes (SVH) have been directed by the DOH, that SVHs must follow CMS guidelines – for reopening or losing restrictions on Veterans Homes to include New Admissions. Andrew said [just as Dr. Reinhart and the General said] HVH's management team and staff have done an outstanding job getting through the COVID-19 pandemic so far, with zero (0) outbreaks in the facility. He continued by noting HVH has the lowest number of positive cases compared to the other five (5) SVHs across the state.

Andrew said the BVHs are updating Policies and Guidance for the SVHs.

Visitations:

Andrew said, Family Members/ Next of Kin are asking – when can they see their "love ones"? He said the current BVH policy for SVHs Reopening Plan is that they needed to be in Phase Bravo of the plan. He explained the visitation would need to take place outside. Andrew explained new BVH guidance is forthcoming [based on CMS guidance] within the month, and under this SVHs, as long as the SVH hasn't had a positive COVID-19 case [resident or staff] for fourteen (14) days and their County Positivity Rate is below the high category rate – they then can conduct visitation. Andrew said the BVHs encourages outside visitation [weather permitting] with Universal Source Control Measures e.g. covered visitation booths/ partitions, mask, hand sanitizing, Social Distancing. Andrew said, the HVH is prepared to conduct resident visitations next week based on CMS guidance, the County Positivity Rate, and Universal Source Control Measures.

Director Andrew Ruscavage, Bureau of Veterans Homes (Cont.)

Admission:

Andrew said, following the guidelines of CMS and with approval of the BVHs and DMVA Chain of Command, the SVHs can take admissions as long as the home hasn't had a resident or staff positive case for fourteen (14) day and their County Positivity Rate is not over the high category rate – 10 percent currently.

Testing:

Andrew said HVH will soon receive the resources and have the ability to conduct their own Rapid COVID-19 tests within the facility – called Point of Care Testing. He said this will enable HVH to identify resident or staff that maybe having sign or symptoms more quickly. Andrew said, the SVH [to include HVH] currently have the tools and the ability to test, at their facility, for the flu. He said this is important because a lot of the signs and systems for COVID-19 are similar to the flu.

Andrew said, the current Positivity Rate in Blair County is 4.2%, which is considered to be low; thus, HVH is testing monthly.

Andrew said that Commandant Nesbella has reached-out to several outside agencies to receive testing e.g. Cepheid/ Rapid Test at the James E. VanZandt Medical Center (VZMC) and PA DOH Department Laboratory. He said the BVHs is now working with PA DOH to transition the SVH testing on a contract under an agency called Eurphines. Andrew explained it's imperative that all test results are obtain within 48 hours. He explained [currently] in many cases SVHs are receiving test results within 3, 4, 5, or even 10 days later from the laboratory and these test results are useless.

Activities:

Andrew said the holidays with Service Organizations, family members and schools etc. visiting our veterans [holiday meal and caroling in the hallways] – will not happen this year; therefore, the homes will become creative to ensure the holidays are as pleasant as possible. Andrew said the pandemic is far from being over, with positive cases, hospitalizations and deaths on-the-rise in Pennsylvania. He said the wearing of masks/ PPE, being screened at the Checkpoint Security and Isolation Units etc. is not going to end any time soon.

QUESTIONS, COMMENTS or CONCERNS

Dave Wagner stated he represents the DAV a lot of veterans are driven to their medical appoint by the DAV. Dave said he knows two (2) WWII veterans that have bad health and he encouraged them to submit an Admissions Packet. Dave asked will the veterans be evaluated based on their medical needs?

Andrew said make sure their application is submitted and if they need help have them contact the SVH. Andrew said, Admissions priority is based on a first-come-first-served bases.

DEBORAH NESBELLA, Commandant

The Commandant (CMD) opened by welcoming all the Council Members. The CMD said that Dr. Reinhardt, General Weller and Andrew covered a lot to information regarding COVID-19 and HVHs Staff. The CMD said, she is so proud of the 563 staff members that care for the residents and have kept the residents safe. She said a testament of their care for residents is that within three (3) days all 563 staff were COVID-19 test and not one (1) staff member refused to be tested.

DEBORAH NESBELLA, Commandant (Cont.)

The CMD explained there were two (2) residents that tested positive in June, but when they were retested their test results were negative. She said [to date] there were three (3) staff that tested positive and kudos to them because they had direct contact with the residents – PPE works!

UNIT ZONES:

She explained the zones to the council.

Red Zone – positive case

Yellow Zone – suspected (hospital returns for 14 days)

Green Zone – general population and no issue

Staffing:

The CMD explained that HVH obtained the approval through the BVHs to hire nine (9) additional Security Officers and Activity Staff. She explained the Security Officers are to sustain the Checkpoint, as it will not be going away anytime soon, and the additional Activity Staff are for the residents. The CMD explained the additional Activity Staff will assist with 1 to 1 activities e.g. card games, trivia and iPad video chats with family members.

The CMD said the BVH approved the hiring of two (2) new Infection Control RNs.

HVH Fire:

The CMD said there was a single room fire in AH West 2 and the Fire Marshal was called to assess. The Fire Marshall's report has the fire considered not electrical [bed switch or light over the bed] and considered not intentional but accidental. She said the Fire Marshal found a cigarette in the room and it's determined to be the source of the fire – and an investigation continues. The CMD gave kudos to the quick response of the staff and use of a fire extinguisher that helped put the fire out.

QUESTIONS, COMMENTS or CONCERNS:

None

Tim Susengill asked State Senator Judy Ward and State Representative Louis Schmitt Jr. if they have any comments. Additionally, Tim asked if either would comment on the budget?

SENATOR JUDY WARD

The Senator explained the House is scheduled to be in next week and at this point – no definite updates with the budget and the House is scheduled to be back in early November to possibly finalize.

REPRESENTATIVE LOUIS SCHMITT Jr.

Representative Schmitt explained the House is only scheduled to be in one (1) day in November; and he believes there will be a need to schedule more days. He explained that he will advocate for the DMVA during the budget process.

Review of Council Member Status:

John Gority welcomed John "Goose" Marin to the HVH Advisory Council, and he explained the Catholic War Vets could not have selected a better individual to represent.

Old Business:

Tim said, over the past few months he has expressed his desire to step-down as the Council President after have serving many years. Tim explained that Duffy Hines has expressed his willingness to become the President.

Tim asked the council to submit their nomination for President and that his is for Duffy. John Gority agree with (2nd) Duffy Hines for President. Tim asked the council if they have any other council members for nomination for the HVH Council President? Tim said, hearing NONE he closed the nomination process. Tim asked Joe to conduct a roll-call of the Council Members and asked them to submit a vote of "yes" or "no" for the support Duffy Hines as the President. All Council Members voted "yes" and supported Duffy as their President.

Senator Judy Ward asked if she could receive an update on the American Legion Post on HVH grounds? Andrew said after multiple meetings with the DAG, HVH Commandant, local Post, Regional, District and State Commander and referencing the Memorandum of Understanding (MOU) that the DMVA/HVV had with the American Legion. Andrew explained the DMVA Legal Team express concerns/ issues with having alcohol on state property and how the American Legion should handle back utility bills. They [American Legion] were given instructions on-how-to continue operations under a new MOU. They were also given instructions on writing a new MOU based the DMVA's concerns – based on the fact they could not serve alcohol, they were not interested and decided not to reopen.

New Business

None

Announcements/ Good of The Council:

None

Tim reminded everyone the next Advisory Council Meeting will be on Thursday, January 21, 2021 and most likely will be telephonic.

Meeting was adjourned.

Duffy Hines, Secretary

Tim Susengill (Council Present)

**Bureau of Veterans' Homes
Available Beds Monthly Status Report
from February 1 to 28, 2021**

Delaware Valley Veterans' Home, Philadelphia PA - Peter Ojeda - Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care*	90	52	38		58%	67
Memory Care	30	20	10		67%	33
Placing						0
Totals Less Wait List Placing	120	72	48	48	60%	100
Non-Veteran Census Percent				48	5%	
Gino J. Merli Veterans' Center, Scranton PA - James Miller - Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	156	103	53		66%	28
Memory Care	40	18	22		45%	12
Placing						0
Totals Less Wait List Placing	196	121	75	73	62%	40
Non-Veteran Census Percent				74	11%	
Hollidaysburg Veterans' Home, Hollidaysburg PA - Deborah Nesbella - Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	231	134	97		58%	20
Memory Care	26	13	13		50%	4
Personal Care	167	80	87		48%	3
Placing						0
Totals Less Wait List Placing	424	227	197	196	54%	27
Non-Veteran Census Percent				197	14%	
Pennsylvania Soldiers' & Sailors Home, Erie PA - Barbara Raymond - Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	75	46	29		61%	17
Memory Care	32	18	14		56%	7
Personal Care	100	55	45		55%	5
Placing						0
Totals Less Wait List Placing	207	119	88	87	57%	29
Non-Veteran Census Percent				88	15%	
Southeastern Veterans' Center, Spring City PA - Barry Lowan - Acting Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	208	115	93		55%	67
Memory Care	30	24	6		80%	33
Personal Care	54	32	22		59%	17
Placing						1
Totals Less Wait List Placing	292	171	121	120	59%	116
Non-Veteran Census Percent				121	9%	
Southwestern Veterans' Center, Pittsburgh PA - Richard Adams - Commandant						
Level of Care	Available Beds	Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	196	129	67		66%	38
Memory Care	40	36	4		90%	5
Placing						0
Totals Less Wait List Placing	236	165	71	70	70%	43
Non-Veteran Census Percent				71	17%	
Recapitulation / Pennsylvania Bureau of Veterans' Homes						
Level of Care	Available Beds	*Beds Assigned	Beds Vacant	Average Beds Vacant	Percentage Filled	Waiting List Veteran / Placing
Nursing Care	956	579	377		61%	237
Memory Care	198	129	69		65%	94
Personal Care	321	167	154		52%	25
Placing Total						1
Totals Less Wait List Placing	1,475	875	600	598	59%	355
				599		
Non-Veteran Census Number						
DVVH	3				4%	
GJMVC	13				11%	
HVH	31				14%	
PSSH	17				14%	
SEVC	15				9%	
SWVC	27				16%	
TOTAL	106				12%	

Summary of Current Applications (Exempt)

Count	No Activity	Review Process Started	Review App Received	New Apps Pending
14518	13807	615	96	142

Summary of Activity from 01/20/2021 to 03/17/2021

Apps Created : 500	
New	226
Review:	274
Apps Approved :640	
New	323
Review	317
Apps Denied Fin:	34
Apps Denied (Ineligible):	19
Apps Removed from Exempt List (No Response):	61
Apps Removed from Exempt List(Eligibility Changed):	133

Summary of Ineligible Reason

Reason	Count
	1
Property Sold	1
The property for which you claim exemption is not owned solely by you, or as an estate by the entirety with your spouse.	6
The U.S. Department of Veterans Affairs has determined that the veteran did not have a total and/or 100% permanent disability during their lifetime.	1
The U.S. Department of Veterans Affairs has determined that the veteran did not serve during a period of war or armed conflict.	5
The U.S. Department of Veterans Affairs stated that you have a future exam , therefore, your disability has not been rated as total or 100% permanent.	4
You do not occupy the property for which you have claimed exemption as your principal dwelling.	1

Summary of Activity from 1/20/2021 to 3/17/2021

APPS APPROVED	640
NEW	323
REVIEW	317

APPS DENIED	247
Financial Need	34
Ineligible	19
No Response	61
Change of Eligibility	133

HH OVER INCOME	59	9%
NEW	30	9%
REVIEW	29	9%

APPS CREATED 500
TOTAL ADJUDICATED 887