



# JERRY PETROWSKI

WISCONSIN STATE SENATOR

*Senate Bill 666*  
*Veterans Outreach and Recovery Program*  
*January 30, 2018*

Thank you, members of the committee, for the opportunity to testify today on Senate Bill 666, relating to: creating a pilot program to provide outreach, support, and mental health and substance abuse services for veterans.

Wisconsin Department of Veterans Affairs has operated the Veterans Outreach and Recovery Program since 2014, which has worked to address mental health issues in rural areas of the state. Under the program, the department works proactively with key stakeholders throughout the community, including County Veterans Service Officers, veteran service organizations, local governments, and nonprofit groups to identify at-risk veterans and connect them with vital services in their area.

Since implementation, the program has been a resounding success, allowing thousands of services to be provided to Wisconsin veterans. Representatives from the department are here today to speak more in-depth on the operational side of the program.

Unfortunately, this program was funded through a federal grant that was not renewable, and no additional federal funding is available to continue the program. This bill will provide the necessary appropriation – approximately \$1.2 million – to fund the program through June 30, 2019, until the Legislature takes up the next biennial budget bill. The bill also requires the department to regularly report the status and results of the program, so that we have the necessary information to evaluate the program in the next budget.

Thank you again for the opportunity to speak on this bill. I would be happy to answer any questions you may have.

29TH SENATE DISTRICT

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## Testimony on Senate Bill 666

Chairman Petrowski and Members of the Senate Committee on Transportation and Veterans Affairs:

Thank you for allowing me the opportunity to testify on Senate Bill 666, legislation our state desperately needs to provide urgent resources to those who have risked everything they have for our great nation.

In the fall of 2014, the Wisconsin Department of Health Services (DHS), in conjunction with the Wisconsin Department of Veteran's Affairs (DVA), was awarded a \$1.2 million, three year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide mental health and substance abuse services to homeless and/or chronic homeless veterans in Wisconsin.

In October of 2015, the departments were awarded a \$1.2 million, two year supplemental SAMHSA Enhancement Grant to provide additional resources and expand county participation in the program.

The Veterans Outreach and Recovery Program (VORP) has been implemented in 49 counties of northern and central Wisconsin as a comprehensive, coordinated, outreach, treatment and recovery support program for veterans who are homeless and have a behavioral health disorder.

The original SAMHSA grant has ended and cannot be renewed, making it imperative that we extend the Veterans Outreach and Recovery Program (VORP) as a state funded pilot to assure our veterans that they will have the support they desperately need.

At the beginning of January, local entities once again worked with the federal government to conduct a Point in Time homeless count for veterans in Wisconsin, with results showing 329 homeless veterans in our state. Out of those 329 homeless veterans, 219 are in transitional housing, 90 are in emergency shelter, and 20 are unsheltered.

While homelessness alone is a serious issue, many of the homeless veterans in our state must deal with the added stress of fighting a behavioral health disorder or multiple disorders. According to data from 2015-16 provided by DHS, 27% of Wisconsin veterans have been diagnosed with an anxiety disorder, 19% have moderate to severe depression symptoms, and 20% have frequent mental distress.



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The Veterans Outreach and Recovery Program (VORP) combats these issues by working with veterans to ensure they have stable housing, connecting them to proper treatment, and following-up to guarantee that the treatment is continual and effective.

While Wisconsin has come a long way in the fight to address behavioral health disorders in homeless veterans, we still have more work to do. Let's extend and expand VORP as a state funded pilot, and provide our veterans with the resources they need.



## Wisconsin Department of Veterans Affairs

Scott Walker, Governor | Daniel J. Zimmerman, Secretary

### Senate Committee on Transportation and Veterans Affairs Testimony on Senate Bill 666

January 30, 2018

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Chairman Petrowski and members of the committee,

Thank you for the opportunity to appear before you in support of Senate Bill 666. I am Kathy Still of the Wisconsin Department of Veterans Affairs. With me is Ken Grant, Administrator of the Division of Veterans Services, which oversees our current Veterans Outreach and Recovery Program.

The mental health and well-being of Veterans is a priority for our department and we thank Senator Petrowski and Representative Felzkowski, along with their bipartisan cosponsors, for introducing this legislation. We worked closely with the authors on this bill to provide state funding to continue our successful Veterans Outreach and Recovery Program.

The program, referred to as VORP, began in 2014 in partnership with the Wisconsin Department of Health Services, funded by a grant from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to improve the delivery of mental health services in rural areas. Our grant was the only one to focus the efforts entirely on Veterans. The initial grant award was \$1.2 million in 2015, which was then supplemented with a follow-on grant of \$1.2 million in 2016.

Unfortunately the SAMHSA grant was not renewable to state agencies and the department was not provided an opportunity to apply for continued federal funding. The funding provided by this bill will enable the WDVA to continue funding outreach, treatment, recovery, and other services for Veterans who may have a mental health condition.

Through the VORP, we've provided Veterans not only crisis services, but also on-the-street case management in order to get them treatment for mental health and/or substance abuse, including paying for private treatment. In addition, we work with our many partners to provide wrap-around services that a Veteran may need such as housing, food, clothing, furniture, education, and employment.

I'd like to share an example that highlights VORP's focus on development of personal relationships, which is a critical component to reaching this constituency. Two years ago, one of our outreach and recovery specialists met an Army Veteran of the Vietnam War. After the initial meeting the two met repeatedly over the course of several months, meeting at La Crosse's warming center in the winter months. Because of past experience, the Veteran was reluctant about any assistance. However, after several months of building trust and a relationship, the Veteran -- who was having trouble speaking due to a neurological issue -- told the specialist how much he wanted to get off the streets. With the assistance of Housing First in La Crosse he was housed within three days, and he still lives in that apartment while working to better his mental health and lifestyle.

As noted in the example, we are able to locate at-risk Veterans and connect them with services because of our partners -- County Veterans Service Officers, Veteran service organizations, local government agencies, community nonprofits, and others. This bill will enable us to build on our existing relationships with key local resources including county homeless programs, behavioral health services, Veteran groups, and housing services.

Of 282 VORP enrollees for whom we have housing data, just 25 were in permanent housing when they enrolled. At the most recent status review, 63 percent now reported being in permanent housing. That's a 149-percent increase in Veterans in permanent housing among VORP enrollees.

Within the department's VORP, recovery specialists have worked as case-managers, supported by a clinical coordinator, to ensure that homeless and chronically homeless Veterans have access to stable housing, connect them to proper medical and mental health treatment, and follow-up to ensure that the treatment is continual and effective.

Just this past August, an 86-year-old Korean War Veteran and his wife were facing eviction from their apartment because of its unlivable conditions. They missed their court appearance because their car broke down. Our outreach and recovery specialist contacted the Red Cross, which provided them and their dog a 7-night stay at a local motel. Our specialist also connected them to our Veterans Home to which they were admitted in the days that followed. They recently sent a message of gratitude to our staff saying, "Without any of your help, we would be homeless and helpless. Thank you so much."

Since VORP's inception we've connected with 822 Veterans of which 330 formally enrolled in the program to receive case management for mental health services. If a veteran chooses not to enroll we've provided individual wrap-around services by referring them to our partners.

All told we've provided nearly 3,000 services including mental health and substance abuse inpatient services, transportation, fuel, food, and case management. About 1,600 services were provided to Veterans referred to our partners for assistance related to housing, employment assistance, and mental health assessments, among others.

Thank you for your consideration of this important legislation that will allow the WDVA to continue this successful program.

We're happy to respond to any questions you may have.



# Fond du Lac County

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Public Hearing Regarding the VORP Program, 1/30/2018

Thank you Chairman Petrowski, and members of the Committee for allowing myself and fellow County Veteran Service Officers (CVSO's) the opportunity to testify you today.

I am Rick Patton, Fond du Lac County CVSO, and I would like to first tell you the challenges we face in our county helping veterans get timely access to care in the local community.

1. If we have a veteran who is enrolled in VA Healthcare, and the veteran wants the VA to be involved in treatment, we have to figure out a way to get them to either Milwaukee, Madison or Tomah VA Medical Centers if it is urgent and he/she needs to be screened for acute inpatient care. That is challenging when we only have two vehicles, which are currently being scheduled 4 weeks out because annually we transport over 300 veterans to any one of six different VA facilities.
2. If it is not an urgent situation, we can work with them to get to their scheduled appointments at the VA clinics and hospitals if they do not have transportation.

Why do I bring up transportation in the above two issues? This is to emphasize the issues of the rural veteran and how, even though we are fifty miles away from the closest VA Hospital, for many veterans, it may as well be a thousand miles away if they don't have access to transportation.

3. If it is emergent, then the veteran has a decision to make, because if the VA determines the trip to the emergency room is not life-threatening, they will not pay that bill. If the veteran doesn't have other health insurance, he/she may be responsible for that bill out of pocket and I can tell you that the majority of the veterans in this position don't have the funds available to pay these services and knowing that, may forego that much needed care. If that becomes the case, well, we all have seen the statistics on veteran suicide in our country. To bring it closer to home, I had 8 veterans take their own life in 2017. We haven't even touched on self-medication and addiction either.
4. For those not enrolled in VA Healthcare, whether by choice or eligibility, the options are few and far between. Many may also not be enrolled in ACA, in some cases because they don't understand ACA and believe they cannot afford it.
5. I am a member of Prevent Suicide Fond du Lac, which is a sub-committee of our county's Comprehensive Service Integration, or CSI. In talking with other committee members who are clinicians, the average time from initial request for appointment and the actual appointment date for a new patient is 4 to 6 weeks. That leaves a lot of time for someone, veteran or not to sit and think about their current situation and allows for poor life choices to manifest.

With that said, why VORP? For those of us out in the communities working with these veterans, the answer is simple. VORP helps to bridge that gap that we simply cannot fill. We are not clinicians, or counselors. I am probably the only CVSO in the state with a Master's degree in Counseling, but I am not licensed. The nature of our positions is not that of mental health counselors. I don't think there is a CVSO in the state that has the time to be a mental health counselor either. Everyone in our office is trained in QPR (Question, Persuade, Refer), a very useful tool for the layperson to do a simple suicide risk assessment. The VORP case workers help our veterans in two ways. First, they meet with the at-risk veterans and provide some peer-to-peer interactions and help them through the immediate issues. If that means determining the veteran needs to go to the local emergency room or county acute mental health unit, they take them. If they are not emergent, they network with local professionals to get the veteran into the appropriate treatment setting. Second, when funded, they can potentially pay for initial treatment, and in some cases ongoing treatment. For the veteran, this could help reduce some of the anxiety they feel in seeking help.

One other area the VORP case workers help when we are unable is for those veterans who cannot obtain services from the VA due to time-in-service issues or character of discharge not being honorable. Many times the reason for the short service or other than honorable discharge can be traced back to an incident in service that led to a change in performance, eventually leading to the discharge. Because of the environment in the military, many times the commanders are all-to-quick to just get rid of the service member rather than help them get the mental health or addiction treatment they need to get back to being a productive member of the force.

I do not have exact numbers of how many veterans the VORP case worker for our area has helped in Fond du Lac County but we have referred about seven or eight veterans over the last few years and the Center for Veterans Issues, which provides services for homeless and at-risk of homeless veterans, has referred at least three to VORP. That may not sound like a lot, but there are also some we find out have discovered the VORP case worker on their own. Also, every veteran helped is one that can potentially become healthy again and not a death statistic.

In that light, I would believe that in the absence of the federal grant WDVA had before, that the State of Wisconsin would continue this program as a state-funded program to help keep this veteran population from falling through the cracks and not become a statistic. Wisconsin has a history of providing quality services to our veterans and this program would only enhance our dedication to those who chose to put their lives on the line to defend our nation.

Thank you for allowing me to testify today in support of the VORP program.



Frederic "Rick" Patton  
Director of Veteran Services  
Fond du Lac County

## Veterans Outreach & Recovery Program (VORP) – Quick Facts

(Updated: 09/08/2017)

SAMHSA 3 year grants, totaling \$2.4 million, ends NLT December 2017:

Mental Health and Substance Abuse grant for homeless, chronic and at risk of homeless veterans. We take case management to the street and locate these veterans and services they need; to include all wrap-around services.

**Eligibility:** Only have served one day in the military to include Guard/Reserve. (Includes many who are not eligible for VA services based on discharge or no active duty for service other than training)

Currently serve 49 counties, 6 catchment areas with a total of 9 Federal Project staff and 1 DVA Program Manager: (Project staff: 6 Outreach, 1 Clinician, 1 SOAR, and 1 Admin Assistant)

777 veterans have reached out for services/assistance with 330 enrolled in VORP. Those that are not enrolled we then provide individual wrap-around services by referring them to our other partners. Since the program is ending we have not been able to enroll any new Veterans into the program since April 2017.

- 627 males (80%), 112 females (15%), 36 data not collected (5%), and 2 transgender
- 581 White (75%), 40 American Indian (5%), 58 African American (8%), 95 data not collected (11%) 2 Native Hawaiian or Pacific Islanders (1%) and 1 Asian

Ages: 30 and under: 66 (10%), 31-49: 236 (27%), 50-65: 352 (34%), 66-91: 62 (4%), data not collected: 61 (25%)

We have provided the following services (2,394) for the 330 veterans enrolled using VORP specific funding: (We pay for mental health/substance abuse inpatient services, transportation/fuel, food, case management and Social Security Disability sign-up)

- Case Management Services: 1,953
- Transportation: 297
- SOAR assistance: 68
- Mental Health assessments: 40
- Mental health/AODA in-patient treatment: 23
- Food assistance: 13

The following services (1,496) were provided to the 330 veterans referred to other agencies/partners/non-profits. Most veterans require more than one type of service.

- Housing/Shelter/Motels: 380
- Employment: 166 (74 obtaining employment as of this time)
- Food assistance: 148
- Mental Health Assessment and Treatment: 153
- Transportation: 116
- Case/Care Management: 126
- Health Care: 96
- Social Security Disability: 62
- Substance Use Disorder Intervention Programs: 63
- Social Development/Enrichment/Mentorship: 53
- Outreach Programs: 69
- Money Management: 28
- Legal Services: 20
- Educational Programs: 16

Types of Insurance veterans say they have at time of contact, 777 veterans:

USDVA: 351 (45%), Other: 5, None/Unknown 57 (7%) Medicaid-Medicare: 181 (23%), Employer: 11 (1%), Private Pay: 11, (2%) State Children's and Adults Health Insurance: 150 (20%), Indian Health Service Program 9 (2%), COBRA 2



**FACT SHEET**  
**Veteran Outreach and Recovery Program (VORP)**  
(As of 02/03/2017)

In the fall of 2014, the Wisconsin Department of Health Services (WDHS), partnering with the Wisconsin Department of Veterans Affairs (WDVA) applied for and was awarded a \$1.2 million dollar, three year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide mental health and substance abuse services to homeless and/or chronic homeless veterans in Wisconsin. Effective October 2015, the departments were awarded a supplemental SAMHSA Enhancement Grant of \$1.2 million dollars, for a two year period to provide additional resources and expand county participation in the program.

**Overview of VORP**

VORP is a comprehensive, coordinated outreach, treatment and recovery support program for veterans who are homeless and have a behavioral health disorder. VORP will support the existing treatment and homeless programs and provide services in the 49 counties of northern and central Wisconsin. This new program employs Outreach and Recovery Specialists (ORSs) working as case-managers, assigned to a region where veterans have difficulties accessing adequate housing and treatment services. Six regions will be established where ORSs will work with key local contacts including county homeless programs, behavioral health services, veteran organizations, and housing services to help provide the appropriate recovery supports so that veterans are successful in reaching their goals. The ORSs will use the evidence-based Motivational Interviewing method to work with the veterans to ensure that they have stable housing, connect them to proper treatment, and follow-up to ensure that the treatment is continual and effective.

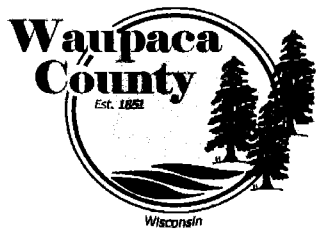
When the Program began in April 2015, three ORSs were hired and supported by a Clinical Coordinator and a Program Manager. In October 2015, under the supplemental grant, three additional ORSs and two supporting positions will be added. One position is an SSI/SSDI Outreach, Access and Recovery (SOAR) Specialist, who will assist veterans with signing up for Social Security and other available benefits. The other position is an Operations Program Associate (OPA), who will assist with administrative duties, special projects, and financial assistance.

**Goals**

- Establish partnerships with mental health and AODA providers in regions.
- Work with local shelters and others to find temporary, transitional and permanent housing.
- Establish a network that makes treatment options more accessible to rural veterans.
- Identify homeless veterans and define gaps in treatment.
- Provide information on housing and behavioral health treatment services to all homeless veterans contacted.
- Ensure that 90% of the enrollee target population is connected to either housing or behavioral health services at follow-up.
- Provide ongoing case management to a veteran client for the life of the grant.
- Provide transportation to connect the veteran to proper treatment and follow up to ensure that the treatment is continual and effective.

**Contact person:**

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1/29/2018

County Veterans Service Officers of Wisconsin  
President Tammy Walters  
Courthouse, P.O. Box 400  
Rhineland, WI 54501  
715-369-6127

Dear President Walters,

I write on behalf of the Waupaca County Veterans Service Office in support of funding for the Wisconsin Department of Veterans Affairs Veterans Outreach and Recovery Program (VORP). Specifically, I write in support of the 2017 Assembly Bill 732 as written.

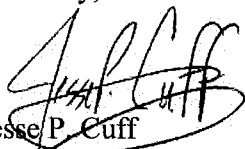
VORP is a valuable program providing outreach, support, mental health, and substance abuse services for a vulnerable segment of our veteran community. Continued support and funding for VORP is an asset to our local veteran community by providing our office a referral resource with the capacity for intensive homeless veteran case management.

Since 2015, our office has formed a robust partnership with the VORP specialists operating in Waupaca County recommending their services to Waupaca County veterans on over 20 occasions. The primary reason for referral is providing vulnerable veterans with transitional housing assistance.

Our office trusts the State of Wisconsin will continue to fund this important veteran centric program and we look forward to our continued work with the VORP specialists in offering relief to this vulnerable segment of our veteran community.

If you have any questions, please don't hesitate to contact me.

Sincerely,



Jesse P. Cuff  
Veterans Service Officer

Encl. (0): None