

CACVSO recommendation to CSAC for Legislative Platform

1. Coordinated service delivery

Counties support coordinated, veteran-centered service delivery through collaboration among federal, state, local, nonprofit, community, and private-sector partners. Priorities include peer support, benefit establishment, housing, mental health and substance use treatment, suicide prevention, and employment training. Counties also call for federal data-sharing and funding that let local systems reach veterans who are not enrolled in or eligible for VA care.

2. Strengthening CVSOs

Counties support policies and investments that strengthen County Veterans Service Officers as trusted, accredited, community-based resources. These include dedicated state and federal funding, adding peer support outreach as a standard service in each CVSO office, standardized training and accreditation, and a statewide study of CVSO effectiveness. Such investments would expand CVSOs' ability to connect veterans, survivors, and their families with the federal, state, and local benefits and services they have earned.

- Counties support the county veterans service officer system established in Military and Veterans Code sections 970 through 974 as the local office through which veterans, service members, and survivors obtain earned federal and state benefits at no cost. State policy, regulation, and budget action should reinforce that office and should not bypass, duplicate, or contract around it.
- Counties support stable and predictable state funding sufficient to reflect actual county cost, workload, and the federal benefits returned to California residents. The current partnership leaves most CVSO operating cost on county general funds. New duties, outreach standards, accreditation requirements, or on-base presence should carry ongoing state funding and should not be imposed as unfunded mandates.
- Counties oppose fee-based, unaccredited claims practices that divert veterans from no-cost accredited representation.

Why the changes: alignment with the Governor's Challenge and CVHI

These changes tie the platform to California's Governor's Challenge and the California Veterans Health Initiative (CVHI), which takes a coordinated statewide approach to ending veteran suicide.

- **Suicide prevention added to statement 1.** VA's 2026 report found 62% of veterans who died by suicide in 2024 had not received VA health care that year or the year before. Suicide rates for veterans not enrolled in VA care rose 70.8% from 2001 to 2024, while rates for enrollees fell 2.2%. California lost 410 veterans to suicide in 2024. Counties are often the most consistent local point of contact for veterans outside VA care.
- **"Benefit establishment" added to statement 1.** It names the CVSO's core role in the coordinated system. Establishing benefits is often the step that connects a veteran to VA health care and other earned services.

- **"Not enrolled in or eligible for" added to statement 1.** It covers a gap VA could not measure: veterans denied or found ineligible for VA homeless programs, who often end up in county systems.
- **Peer support outreach added to statement 2.** Peer outreach reaches veterans not connected to VA care. Making it a standard CVSO service builds on county peer models such as LA County's Veteran Peer Access Network.
- **"Accredited," funding, training, and a statewide effectiveness study added to statement 2.** These turn "strengthen" into concrete asks and match CVSO priorities. A statewide study gives the Legislature an evidence base for funding decisions.
- **"Survivors" added to statement 2.** It broadens the population to match CHAMPVA and Dependency and Indemnity Compensation (DIC) advocacy.
- **Statutory CVSO system bullet.** It anchors the platform in Military and Veterans Code sections 970–974 and guards against new state programs duplicating or bypassing CVSOs.
- **State funding bullet.** It prevents new outreach, accreditation, and on-base duties from becoming unfunded mandates on county general funds.
- **Fee-based claims bullet.** It protects veterans from paying for help they can get at no cost from accredited representatives.

References

- [VA 2026 National Veteran Suicide Prevention Annual Report](#)
- [CalVet: California Veterans Health Initiative to Combat Suicide and Address Mental Health](#)
- [SAMHSA: Governor's and Mayor's Challenges](#)