

## **Performance Measures by Departmental Goals and Objectives and Performance Measures by Program**

The following two tables present the full set of performance measures by which VA evaluates its success. The first table identifies performance measures and associated target levels of performance according to the strategic goal and objective they support. The second table shows the same set of measures and targets grouped by program. The performance targets presented in these tables represent the basis upon which our Performance Report will be prepared.

VA uses the balanced measures concept to monitor program and organizational performance. Rather than focusing attention solely on one or two types of performance measures, we examine and regularly monitor several different types of measures to provide a more comprehensive and balanced view of how well we are performing. While each of our major program elements uses the balanced scorecard approach, the specific measures comprising the scorecard vary somewhat from organization to organization, and thus, from program to program. The components of the scorecard for each organization have been tailored to fit the strategic goals of the programs for which each organization is responsible.

The following tables demonstrate the balanced view of performance the Department uses to establish performance targets and to assess how well we are doing in meeting our strategic goals, objectives, and performance targets.

Performance Measure

FY 1999

FY 2000

FY 2001

FY 2002

FY 2003

Strategic Target

**Strategic Goal: Restore the capability of disabled veterans to the greatest extent possible, and improve the quality of their lives and that of their families.**

Interim Objective: Maximize the physical, mental, and social functioning of disabled veterans, including special populations of veterans, and be recognized as a leader in the provision of these specialized services.

Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) program, or (HCHV) community-based contract residential care program to an independent or a secured institutional living arrangement	50%	48%	75%	75%	75%	75%
Percent of veterans who obtained employment upon discharge from a DCHV program or (HCHV) community-based contract residential care program	55%	51%	51%	59%	59%	59%
Percent of homeless patients with mental illness who receive a follow-up mental health outpatient visit, admission to a CWT/TR or admission to a PRRTP within 30 days of discharge	65%	63%	63%	63%	63%	68%
Proportion of discharges from SCI center bed sections to non-institutional settings	93%	97%	98%	95%	95%	95%
Percent of patients in specialized substance abuse treatment settings who have an Addiction Severity Index (ASI) assessment:						
Initial ASI	56%	60%	77%	83%	84%	86%
Six-month follow-up ASI	N/A	N/A	23%	28%	29%	31%
Blind Rehabilitation - Percent change in functional status from admission to discharge from a blind rehabilitation program or unit	N/A	100%	108%	90%	90%	90%
Percent of prosthetics orders delayed	2%	1%	1%	2%	2%	2%
Percent of randomly selected admissions to SIPP's programs that are enrolled in the Outcomes Monitoring program	N/A	N/A	85%	85%	85%	85%
Percent of brain dysfunction patients undergoing rehabilitation whose discharge scores on the Functional Independence Measure (FIM) are in the expected or higher than expected performance categories	N/A	N/A	69%	71%	72%	75%
Percent of eligible patients undergoing rehabilitation for a lower extremity amputation whose efficiency scores using the Efficiency Pattern Analysis (EPA) is classified into one of the three highest efficiency categories	N/A	N/A	64% Baseline	65%	67%	70%

Interim Objective: Provide timely and accurate decisions on disability compensation claims, thereby improving the economic status and quality of life of service-disabled veterans.

National accuracy rate (core rating work)	68%	59%	78%	85%	88%	96%
Overall satisfaction	57%	56%	56%	62%	67%	90%
Rating-related actions - average days to process	166	173	181	208	165	74
Note: The Secretary has set an intermediate goal of 100 days during the summer of 2003.						
Rating-related actions - average days pending	144	138	182	186	100	78
Non-rating actions - average days to process	44	50	55	52	43	17
Non-rating actions - average days pending	94	84	117	82	66	44
National accuracy rate (authorization work)	63%	51%	62%	63%	70%	96%
National accuracy rate (fiduciary work)	48%	60%	68%	70%	74%	96%
Telephone activities - abandoned call rate	9%	6%	6%	4%	4%	3%
Telephone activities - blocked call rate	27%	3%	3%	4%	4%	2%
Fiduciary activities -Initial Appeals and Fiduciary Beneficiaries - percent of initial appointments > 45 days	N/A	6%	12%	10%	8%	1%
Deficiency free decision rate	84%	86%	87%	91%	92%	95%
Court remand rate	65%	61%	97%	80%	70%	33%
Appeals resolution time (Days)	745	682	595	590	520	365
BVA Cycle Time	140	172	182	125	180	150
Appeals decided per FTE	78.2	72.7	69.3	61.1	64.3	65.4
Cost per case (BVA)	\$1,062	\$1,219	\$1,401	\$1,666	\$1,767	\$1,922

Interim Objective: Enable service-disabled veterans, through vocational rehabilitation, to become employable, obtain and maintain suitable employment, and achieve independent living with special focus on seriously disabled veterans.

Speed of entitlement decisions in average days	88	75	62	60	60	60
Employment timeliness in average days	53	42	38	50	50	50
Accuracy of decisions (Entitlement)	86%	89%	93%	92%	94%	96%
Accuracy of decisions (Services)	87%	86%	79%	87%	90%	96%
Accuracy of decisions (Fiscal)	94%	94%	86%	92%	94%	99%
Rehabilitation rate	53%	65%	65%	67%	68%	70%
Serious Employment Handicap (SEH) rehabilitation rate	49%	62%	64%	64%	65%	65%
Customer satisfaction (Access)	N/A	76%	76%	79%	81%	92%
Customer satisfaction (Survey)	N/A	76%	74%	80%	81%	92%
Accuracy of program outcome	N/A	N/A	N/A	84%	90%	95%

**Strategic Goal: Ensure a smooth transition for veterans from active military service to civilian life.**

Interim Objective: Ease the reentry of new veterans into civilian life by increasing awareness, access to, and use of benefits and services, including readjustment counseling.

Percent of veterans using Vet Centers who report being satisfied with services and saying they would recommend the Vet Center to other veterans	100%	100%	99%	95%	95%	95%
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Interim Objective: Provide timely and accurate decisions on education claims, thereby enhancing veterans' and service-members' ability to achieve educational and career goals.

Montgomery GI Bill usage rate	56%	55%	56%	58%	61%	70%
Compliance survey completion rate	98%	94%	92%	90%	90%	90%
Customer satisfaction-high ratings (Education)	78%	78%	82%	82%	85%	95%
Telephone Activities - Blocked call rate (Education)	16%	39%	45%	20%	15%	10%
Telephone Activities - Abandoned call rate (Education)	N/A	17%	13%	11%	9%	5%
Payment accuracy rate	94%	96%	92%	94%	96%	97%
Average days to complete original education claims	26	36	50	38	30	10
Average days to complete supplemental education claims	16	22	24	21	17	7

Interim Objective: Improve the ability of veterans to purchase and retain a home by meeting or exceeding lending industry standards for quality and timely service, while minimizing VA loss on foreclosed properties.

Veterans satisfaction	93%	93%	93%	94%	95%	95%
Lender satisfaction	67%	74%	74%	76%	78%	80%
Return on sale	101%	N/A	108%	100%	100%	100%
Property holding time (months)	6.7	N/A	8.2	9.0	8.0	8.0
Statistical quality index	N/A	94%	96%	96%	97%	98%
Foreclosure avoidance through servicing (FATS) ratio	38%	30%	40%	39%	40%	40%

**Strategic Goal: Honor and serve veterans in life and memorialize them in death for their sacrifices on behalf of the Nation.**

Interim Objective: Provide consistently reliable, accessible, timely and efficient high quality care through a health care system that maximizes functional status, improves veteran satisfaction, and fosters healthy communities.

Percent of patients who use tobacco products	27%	25%	27%	27%	25%	16%
Percent of patients rating VA health care service as very good or excellent - Inpatient	65%	66%	64%	66%	68%	72%
Percent of patients rating VA health care service as very good or excellent - Outpatient	65%	64%	65%	67%	69%	72%
Percent of primary care appointments scheduled within 30 days of desired date	N/A	N/A	87%	88%	89%	90%
Percent of specialist appointments scheduled within 30 days of desired date	N/A	N/A	84%	85%	87%	90%
Percent of patients who report being seen within 20 minutes of scheduled appointment at VA health care facilities	N/A	N/A	63%	70%	72%	90%
Implement and maintain patient access to telephone care 7 days a week, 24 hours a day in all VISNs as follows: - Number of VISNs providing basic telephone service	N/A	N/A	21	22	22	22

- Number of VISNs fully compliant with VHA Directive 2000-035, except for accreditation and direct access by clinical staff to clinical medical records	N/A	N/A	N/A	22	<b>22</b>	22
- Number of VISNs providing direct access to clinical medical records and having applied for accreditation	N/A	N/A	N/A	N/A	<b>N/A</b>	22
Percent of all patients evaluated for the risk factors for Hepatitis C	N/A	N/A	Baseline = 51%	56%	<b>61%</b>	80%
Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening	N/A	N/A	Baseline = 48%	61%	<b>65%</b>	82%
Percent of patients with hepatitis C who have annual assessment of liver function	N/A	N/A	N/A	Baseline	<b>TBD</b>	TBD
Chronic Disease Care Index II	N/A	N/A	77%	78%	<b>79%</b>	82%
Prevention Index II	N/A	N/A	80%	80%	<b>80%</b>	85%
Percent of Veterans Service Standard (VSS) problems reported per patient (decrease is intended direction):						
Patient Education	31%	30%	30%	29%	<b>29%</b>	27%
Visit Coordination	16%	15%	16%	15%	<b>15%</b>	13%
Develop a Bar Code Medication Administration (BCMA) contingency plan and conduct test of the plan annually	N/A	N/A	N/A	100%	<b>100%</b>	100%
Percent of pharmacy orders entered into CPRS by the prescribing clinician	N/A	N/A	Baseline = 74%	85%	<b>86%</b>	90%
Percent cumulative reduction in excess capacity as a result of CARES. Total excess capacity will be identified by the CARES initiative.	N/A	N/A	N/A	10%	<b>30%</b>	TBD
Dollars derived from alternative revenue generated from health care cost recoveries	\$574 M	\$573M	\$771M	\$1,051M	<b>\$1,489M</b>	\$2,000M
Quality-Access-Satisfaction / Cost VALUE Index	5.12	5.36	6.31	6.91	<b>7.04</b>	N/A
Balanced Scorecard: Quality-Access-Satisfaction-Cost	88%	90%	98%	101%	<b>102%</b>	100%
Percent of spinal cord injury (SCI) respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent - Inpatient	55%	52%	53%	55%	<b>56%</b>	60%
Percent of SCI respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent - Outpatient	55%	57%	2001 data not available	55% (baseline)	<b>56%</b>	60%
Percent increase in number of enrolled veterans who have access to home and community-based care when clinically appropriate (2000 baseline = 14,111)	N/A	N/A	14%	50%	<b>72%</b>	144%

Interim Objective: Maintain the high level of service to insurance policy holders and their beneficiaries, thereby enhancing the financial security for veterans' families.

High customer ratings (Insurance)	96%	96%	95%	95%	95%	95%
Low customer ratings (Insurance)	1%	2%	2%	2%	2%	2%
Percentage of blocked calls (Insurance)	6%	4%	3%	4%	3%	1%
Average hold time in seconds	20	20	17	20	20	20
Percentage of insurance disbursements paid accurately	99%	99%	99%	99%	99%	99%
Average days to process insurance disbursements	3.2	3.2	2.8	3.2	3.2	3.0

Interim Objective: Ensure that the burial needs of veterans and eligible family members are met.

Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	67.0%	72.6%	72.6%	73.9%	76.2%	85.0%
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence	56.7%	67.5%	66.0%	66.7%	68.8%	75.4%
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence	10.3%	5.1%	6.6%	7.2%	7.4%	9.4%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	84%	88%	92%	93%	96%	100%
Cumulative number of kiosks installed at national and state veterans cemeteries	14	24	33	40	48	80

Interim Objective: Provide veterans and their families with timely and accurate symbolic expressions of remembrance.

Percent of graves in national cemeteries marked within 60 days of interment	N/A	N/A	N/A	Baseline	TBD	TBD
Percent of monuments ordered on-line by other federal and state veterans cemeteries using AMAS-R	65%	87%	89%	89%	90%	90%
Percent of individual headstone and marker orders transmitted electronically to contractors	88%	89%	92%	92%	93%	95%
Percent of Presidential Memorial Certificates that are accurately inscribed	98%	98%	98%	98%	98%	98%
Percent of headstones and markers that are undamaged and correctly inscribed	95%	97%	97%	97%	97%	98%

**Strategic Goal: Contribute to the public health, emergency preparedness, socioeconomic well being and history of the Nation.**

Interim Objective: Advance VA medical research and development programs that address veterans' needs, with an emphasis on service-connected injuries and illnesses, while contributing to the Nation's knowledge of disease and disability.

Institutional Review Board compliance with NCQA accreditation and maintenance, as appropriate, of AAALAC or NRC accreditation or certification	N/A	N/A	0%	10%	40%	100%
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Increase by 5% over the previous fiscal year the number of HSR&D funded research projects related to health systems and methodology to evaluate outcomes	N/A	N/A	14	15	15	19
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Interim Objective: Maintain sustained partnerships with the medical education community that maximize care to veterans and provide a high level of educational experience for health care providers.

Medical residents and other trainees' scores on a VHA Survey assessing their clinical training experience	N/A	N/A	84	81	82	85
Increase the number and dollar volume of sharing agreements by 10% over the previous year (Baseline = FY 2000):						
Non-DoD Agreements						
Number	N/A	1136	2506	1,373	1,510	3000
\$ Purchased	N/A	\$290M	\$379M	\$420M	\$460M	\$650M
\$ Sold	N/A	\$32M	\$49M	\$54M	\$59M	\$80M
DoD Agreements	0	0	0	0	0	0
Number	N/A	717	604	604	604	694
Revenue	N/A	\$37.1M	\$61M	\$63M	\$65M	\$78M

Interim Objective: Improve the Nation's response in the event of a national emergency or natural disaster by providing timely and effective contingency medical support and other services.

Percent of VA-managed Federal Coordinating Centers that complete at least one NDMS casualty reception exercise every three years	50%	66%	63%	75%	80%	100%
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Interim Objective: Enhance the socioeconomic well-being of the Nation and local communities through veterans' benefits, business assistance programs, and other community initiatives.

Percent of statutory minimum goals met for small business concerns	37%	33%	23%	23%	23%	23%
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Interim Objective: Ensure that national cemeteries are maintained as shrines dedicated to preserving our Nation's history, nurturing patriotism, and honoring the service and sacrifice veterans have made.

Percent of respondents who rate national cemetery appearance as excellent	79%	82%	96%	96%	98%	100%
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**Enabling Goal: Create an environment that fosters the delivery of One VA world-class service to veterans and their families by applying sound business principles that result in effective communication and management of people, technology, and governance.**

Interim Objective: Improve communications with veterans, employees, and stakeholders about the Department's mission, goals, and current performance and of the benefits and services VA provides.

Percent of stakeholders who are satisfied or very satisfied with their level of participation in VA's planning process	N/A	N/A	N/A	75%	80%	85%
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Percent of VA employees who indicate they understand VA's strategic goals	N/A	N/A	N/A	65%	<b>75%</b>	85%
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Interim Objective: Recruit, develop, and retain a competent, committed and diverse workforce that provides high quality service to veterans and their families.

Employee development (Voc Rehab)	N/A	N/A	N/A	67%	<b>67%</b>	95%
Employee satisfaction (Voc Rehab)	N/A	N/A	3.5	3.6	<b>3.7</b>	4.0
Employee skills matrix (Insurance)	N/A	N/A	88%	87%	<b>87%</b>	95%
Employee satisfaction (Insurance)	N/A	3.3	3.3	3.8	<b>3.9</b>	4.0
Employee job satisfaction (Education)	2.8	3.3	3.3	3.3	<b>3.4</b>	4.0
Percent of employees who are aware of ADR as an option to address workplace disputes	N/A	N/A	50%	60%	<b>70%</b>	100%

Interim Objective: Implement a *One VA* information technology framework that supports the integration of information across business lines and that provides a source of consistent, reliable, accurate, and secure information to veterans and their families, employees, and stakeholders.

Percent of CIO designated major IT systems that conform to the One VA Enterprise Architecture	N/A	N/A	N/A	25%	<b>100%</b>	100%
Percent of the Government Information Security Act reviews and reporting completed	N/A	N/A	80%	100%	<b>100%</b>	100%

Interim Objective: Improve the overall governance and performance of VA by applying sound business principles and ensuring accountability.

Favorable IG audit opinion (Insurance)	Y	Y	Y	Y	<b>Y</b>	Y
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements	0	0	0	0	<b>0</b>	0
Percent increase of EC/EDI usage over 1997 base year	48%	86%	178%	100%	<b>110%</b>	150%
Percent of cases using alternate dispute resolution (ADR) techniques	12%	13%	29%	15%	<b>16%</b>	20%
Number of indictments, arrests, convictions, and administrative sanctions	696	938	1,655	1,675	<b>1,675</b>	1,800
Number of reports issued	162	108	136	160	<b>160</b>	200
Value of monetary benefits (in millions) from:						
IG Investigations	\$24	\$28	\$52	\$30	<b>\$31</b>	\$35
IG audit and health care inspection reviews	\$610	\$254	\$4,088	\$643	<b>\$656</b>	\$696
IG contract reviews	\$47	\$35	\$42	\$48	<b>\$50</b>	\$60

## Performance Measures by Program

FY 1999      FY 2000      FY 2001      FY 2002      FY 2003

**Strategic  
Target**

### Veterans Health Administration

#### Medical Care

P&F ID Codes: 36-0160-0-1-703; 36-0160-0-2-703; 36-5287-0-1-703;  
36-5287-0-2-703; 36-2431-0-1-703; 36-5014-0-1-703;  
36-0152-0-1-703; 36-0163-0-1-703; 36-4014-0-3-705; 36-4048-0-3-703;  
36-4138-0-3-703; 36-8180-0-7-705; 36-0110-0-1-703; 36-0111-0-1-703;  
36-0181-0-1-703; 36-4538-0-3-703; 36-4018-0-3-705; 36-0144-0-1-703;  
36-4537-0-4-705; 36-4258-0-1-704

Resources						
FTE	186,595	183,396	186,832	185,587	185,397	
Medical care costs (\$ in millions)	\$17,859	\$19,434	\$21,653	\$23,531	\$25,995	
Performance Measures						
Percent of patients who use tobacco products	27%	25%	27%	27%	25%	16%
Percent of patients rating VA health care service as very good or excellent - Inpatient	65%	66%	64%	66%	68%	72%
Percent of patients rating VA health care service as very good or excellent - Outpatient	65%	64%	65%	67%	69%	72%
Percent of primary care appointments scheduled within 30 days of desired date	N/A	N/A	87%	88%	89%	90%
Percent of specialist appointments scheduled within 30 days of desired date	N/A	N/A	84%	85%	87%	90%
Percent of patients who report being seen within 20 minutes of scheduled appointment at VA health care facilities	N/A	N/A	63%	70%	72%	90%
Implement and maintain patient access to telephone care 7 days a week, 24 hours a day in all VISNs as follows:						
- Number of VISNs providing basic telephone service	N/A	N/A	21	22	22	22
- Number of VISNs fully compliant with VHA Directive 2000-035, except for accreditation and direct access by clinical staff to clinical medical records	N/A	N/A	N/A	22	22	22
- Number of VISNs providing direct access to clinical medical records and having applied for accreditation	N/A	N/A	N/A	N/A	N/A	22
Percent of VA-managed Federal Coordinating Centers that complete at least one NDMS casualty reception exercise every three years	50%	66%	63%	75%	80%	100%
Percent of all patients evaluated for the risk factors for Hepatitis C	N/A	N/A	Baseline = 51%	56%	61%	80%
Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening	N/A	N/A	Baseline = 48%	61%	65%	82%
Percent of patients with hepatitis C who have annual assessment of liver function	N/A	N/A	N/A	Baseline	TBD	TBD
Chronic Disease Care Index II	N/A	N/A	77%	78%	79%	82%
Prevention Index II	N/A	N/A	80%	80%	80%	85%

### Performance Measures by Program

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
Percent of Veterans Service Standard (VSS) problems reported per patient (decrease is intended direction):						
Patient Education	31%	30%	30%	29%	<b>29%</b>	27%
Visit Coordination	16%	15%	16%	15%	<b>15%</b>	13%
Develop a Bar Code Medication Administration (BCMA) contingency plan and conduct test of the plan annually	N/A	N/A	N/A	100%	<b>100%</b>	100%
Percent of pharmacy orders entered into CPRS by the prescribing clinician	N/A	N/A	Baseline = 74%	85%	<b>86%</b>	90%
Percent cumulative reduction in excess capacity as a result of CARES. Total excess capacity will be identified by the CARES initiative.	N/A	N/A	N/A	10%	<b>30%</b>	TBD
Dollars derived from alternative revenue generated from health care cost recoveries	\$574 M	\$573M	\$771M	\$1,051M	<b>\$1,489M</b>	\$2,000M
Quality-Access-Satisfaction / Cost VALUE Index	5.12	5.36	6.31	6.91	<b>7.04</b>	N/A
Balanced Scorecard: Quality-Access-Satisfaction-Cost	88%	90%	98%	101%	<b>102%</b>	100%
Increase the number and dollar volume of sharing agreements by 10% over the previous year (Baseline = FY 2000):						
Non-DoD Agreements						
Number	N/A	1,136	2,506	2,600	<b>2,600</b>	3,000
\$ Purchased	N/A	\$290M	\$379M	\$420M	<b>\$460M</b>	\$650M
\$ Sold	N/A	\$32M	\$49M	\$54M	<b>\$59M</b>	\$80M
DoD Agreements						
Number	N/A	717	604	604	<b>604</b>	694
Revenue	N/A	\$37.1M	\$61M	\$63M	<b>\$65M</b>	\$78M

#### *Special Emphasis Programs*

Percent increase in number of enrolled veterans who have access to home and community-based care when clinically appropriate (2000 baseline = 14,111)	N/A	N/A	14%	55%	<b>91%</b>	144%
Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) program, or (HCHV) community-based contract residential care program to an independent or a secured institutional living arrangement	50%	48%	75%	75%	<b>75%</b>	75%
Percent of veterans who obtained employment upon discharge from a DCHV program or (HCHV) community-based contract residential care program	55%	51%	51%	59%	<b>59%</b>	59%
Percent of homeless patients with mental illness who receive a follow-up mental health outpatient visit, admission to a CWT/TR or admission to a PRRTP within 30 days of discharge	65%	63%	63%	63%	<b>63%</b>	68%
Percent of veterans using Vet Centers who report being satisfied with services and saying they would recommend the Vet Center to other veterans	100%	100%	99%	95%	<b>95%</b>	95%

### Performance Measures by Program

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
Percent of spinal cord injury (SCI) respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent - Inpatient	55%	52%	53%	55%	56%	60%
Percent of SCI respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent - Outpatient	55%	57%	2001 data not available	55% (baseline)	56%	60%
Proportion of discharges from SCI center bed sections to non-institutional settings	93%	97%	98%	95%	95%	95%
Percent of patients in specialized substance abuse treatment settings who have an Addiction Severity Index (ASI) assessment:						
Initial ASI	56%	60%	77%	83%	84%	86%
Six-month follow-up ASI	N/A	N/A	23%	28%	29%	31%
Blind Rehabilitation - Percent change in functional status from admission to discharge from a blind rehabilitation program or unit	N/A	100%	108%	90%	90%	90%
Percent of prosthetics orders delayed	2%	1%	1%	2%	2%	2%
Percent of randomly selected admissions to SIPPs programs that are enrolled in the Outcomes Monitoring program	N/A	N/A	85%	85%	85%	85%
Percent of brain dysfunction patients undergoing rehabilitation whose discharge scores on the Functional Independence Measure (FIM) are in the expected or higher than expected performance categories	N/A	N/A	69%	71%	72%	75%
Percent of eligible patients undergoing rehabilitation for a lower extremity amputation whose efficiency scores using the Efficiency Pattern Analysis (EPA) is classified into one of the three highest efficiency categories	N/A	N/A	64% Baseline	65%	67%	70%

#### Medical Education

P&F ID Codes: 36-0160-0-1-703

<b>Resources</b>						
Education costs (\$ in millions)	\$902	\$884	\$898	\$953	\$979	
<b>Performance Measures</b>						
Medical residents and other trainees' scores on a VHA Survey assessing their clinical training experience	N/A	N/A	84	81	82	85

#### Medical Research

P&F ID Codes: 36-0160-0-1-703; 36-0161-0-1-703; 36-406-0-3-703

<b>Resources</b>						
FTE	2,974	3,014	3,019	2,983	3,167	
Research costs (\$ in millions)	\$779	\$830	\$877	\$969	\$1,008	
<b>Performance Measures</b>						
Institutional Review Board compliance with NCQA accreditation and maintenance, as appropriate, of AAALAC or NRC accreditation or certification	N/A	N/A	0%	10%	40%	100%
Increase by 5% over the previous fiscal year the number of HSR&D funded research projects related to health systems and methodology to evaluate outcomes	N/A	N/A	14	15	15	19

## Performance Measures by Program

FY 1999    FY 2000    FY 2001    FY 2002    FY 2003    Strategic Target

### Veterans Benefits Administration

#### Compensation and Pension

P&F ID Codes: 36-0153-0-1-701; 36-0153-2-1-701; 36-0153-4-1-701;  
36-0154-0-1-701; 36-0155-0-1-701; 36-0153-1-1-701; 36-0151-0-1-705; 36-0110-0-1-703;  
36-0111-0-1-703

<b>Resources</b>						
FTE	6,841	7,123	8,035	8,656	8,762	
Benefits cost (\$ in millions)	\$21,112	\$22,054	\$23,277	\$24,900	\$26,391	
Administrative costs (\$ in millions)	\$549	\$586	\$706	\$809	\$849	
<b>Performance Measures</b>						
National accuracy rate (core rating work)	68%	59%	78%	85%	88%	96%
Overall satisfaction	57%	56%	56%	62%	67%	90%
Rating-related actions - average days to process	166	173	181	208	165	74
Note: The Secretary has set an intermediate goal of 100 days during the summer of 2003.						
Rating-related actions - average days pending	144	138	182	186	100	78
Non-rating actions - average days to process	44	50	55	52	43	17
Non-rating actions - average days pending	94	84	117	82	66	44
National accuracy rate (authorization work)	63%	51%	62%	63%	70%	96%
National accuracy rate (fiduciary work)	48%	60%	68%	70%	74%	96%
Telephone activities - abandoned call rate	9%	6%	6%	4%	4%	3%
Telephone activities - blocked call rate	27%	3%	3%	4%	4%	2%
Fiduciary activities -Initial Appeals and Fiduciary Beneficiaries - percent of initial appointments > 45 days	N/A	6%	12%	10%	8%	1%

#### Education

P&F ID Codes: 36-0137-0-1-702; 36-0200-0-1-701; 36-8133-0-7-702;  
36-2473-0-0-702; 36-0140-0-3-702; 36-4259-0-3-702 (Off Budget);  
36-4260-0-3-702; 36-0151-0-1-705; 36-0111-0-1-703

<b>Resources</b>						
FTE	849	781	852	942	952	
Benefits cost (\$ in millions)	\$1,210	\$1,197	\$1,387	\$1,974	\$2,307	
Administrative costs (\$ in millions)	\$70	\$66	\$64	\$89	\$105	
<b>Performance Measures</b>						
Montgomery GI Bill usage rate	56%	55%	56%	58%	61%	70%
Compliance survey completion rate	98%	94%	92%	90%	90%	90%
Customer satisfaction-high ratings (Education)	78%	78%	82%	82%	85%	95%
Telephone Activities - Blocked call rate (Education)	16%	39%	45%	20%	15%	10%
Telephone Activities - Abandoned call rate (Education)	N/A	17%	13%	11%	9%	5%
Payment accuracy rate	94%	96%	92%	94%	96%	97%
Average days to complete original education claims	26	36	50	38	30	10
Average days to complete supplemental education claims	16	22	24	21	17	7
Employee job satisfaction (Education)	2.8	3.3	3.3	3.3	3.4	4.0

## Performance Measures by Program

FY 1999      FY 2000      FY 2001      FY 2002      FY 2003      Strategic  
Target

### *Vocational Rehabilitation and Employment*

P&F ID Codes: 36-0137-0-1-702; 36-0140-0-3-702; 36-4259-0-3-702 (Off Budget);  
36-4260-0-3-702; 36-0151-0-1-705; 36-0111-0-1-703

<b>Resources</b>						
FTE	972	940	1,061	1,178	1,404	
Benefits cost (\$ in millions)	\$412	\$439	\$427	\$441	\$629	
Administrative costs (\$ in millions)	\$72	\$81	\$109	\$127	\$154	
<b>Performance Measures</b>						
Speed of entitlement decisions in average days	88	75	62	60	60	60
Employment timeliness in average days	53	42	38	50	50	50
Accuracy of decisions (Entitlement)	86%	89%	93%	92%	94%	96%
Accuracy of decisions (Services)	87%	86%	79%	87%	90%	96%
Accuracy of decisions (Fiscal)	94%	94%	86%	92%	94%	99%
Rehabilitation rate	53%	65%	65%	67%	68%	70%
Serious Employment Handicap (SEH) rehabilitation rate	49%	62%	64%	64%	65%	65%
Customer satisfaction (Access)	N/A	76%	76%	79%	81%	92%
Customer satisfaction (Survey)	N/A	76%	74%	80%	81%	92%
Accuracy of program outcome	N/A	N/A	N/A	84%	90%	95%
Employee development (Voc Rehab)	N/A	N/A	N/A	0.67	0.67	0.95
Employee satisfaction (Voc Rehab)	N/A	N/A	3.5	3.6	3.7	4.0

P&F ID Codes: 36-0137-0-1-702; 36-1119-0-1-704; 36-1119-0-2-704;  
36-4127-0-3-704 (Off Budget); 36-4129-0-3-704 (Off Budget);  
36-4025-0-3-704; 36-0140-0-3-702; 36-4259-0-3-702 (Off Budget);  
36-0151-0-1-705; 36-0111-0-1-703; 36-1119-0-1-704

### *Housing*

<b>Resources</b>						
FTE	2,108	2,057	1,759	1,780	1,763	
Benefits cost (\$ in millions)	\$1,811	\$1,866	\$540	\$986	\$646	
Administrative costs (\$ in millions)	\$160	\$157	\$162	\$165	\$176	
<b>Performance Measures</b>						
Veterans satisfaction	93%	93%	93%	94%	95%	95%
Lender satisfaction	67%	74%	74%	76%	78%	80%
Return on sale	101%	N/A	108%	100%	100%	100%
Property holding time (months)	6.7	N/A	8.2	9	8	8
Statistical quality index	N/A	94%	96%	96%	97%	98%
Foreclosure avoidance through servicing (FATS) ratio	38%	30%	40%	39%	40%	40%

P&F ID Codes: 36-0120-0-1-701; 36-4012-0-3-701; 36-4010-0-3-701;  
36-4009-0-3-701; 36-8132-0-7-701; 36-8150-0-7-701; 36-8455-0-8-701;  
36-0151-0-1-705; 36-0111-0-1-703

### *Insurance*

<b>Resources</b>						
FTE	548	525	507	520	519	
Benefits cost (\$ in millions)	\$2,559	\$2,458	\$2,534	\$2,755	\$2,772	
Administrative costs (\$ in millions)	\$40	\$40	\$41	\$42	\$47	
<b>Performance Measures</b>						
High customer ratings (Insurance)	96%	96%	95%	95%	95%	95%
Low customer ratings (Insurance)	1%	2%	2%	2%	2%	2%
Percentage of blocked calls (Insurance)	6%	4%	3%	4%	3%	1%
Average hold time in seconds	20	20	17	20	20	20
Percentage of insurance disbursements paid accurately	99%	99%	99%	99%	99%	99%

## Performance Measures by Program

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
Average days to process insurance disbursements	3.2	3.2	2.8	3.2	3.2	3.0
Favorable IG audit opinion (Insurance)	Y	Y	Y	Y	Y	Y
Employee satisfaction (Insurance)	N/A	3.3	3.3	3.8	3.9	4.0
Employee skills matrix (Insurance)	N/A	N/A	88%	87%	87%	95%

### National Cemetery Administration

P&F ID Code: 36-0155-0-1-701; 36-0129-0-1-705; 36-8129-0-7-705;  
36-0183-0-1-705; 36-0110-0-1-703; 36-0111-0-1-703

<b>Resources</b>						
FTE	1,357	1,399	1,385	1,460	1,519	
Benefits cost (\$ in millions)	\$106	\$109	\$111	\$140	\$151	
<b>Administrative costs (\$ in millions):</b>						
Operating costs	\$92	\$103	\$116	\$130	\$147	
State cemetery grants	\$5	\$19	\$24	\$42	\$32	
Capital construction	\$21	\$30	\$33	\$109	\$109	
<b>Performance Measures</b>						
Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	67.0%	72.6%	72.6%	73.9%	76.2%	85.0%
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence	56.7%	67.5%	66.0%	66.7%	68.8%	75.4%
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence	10.3%	5.1%	6.6%	7.2%	7.4%	9.4%
Cumulative number of kiosks installed at national and state veterans cemeteries	14	24	33	40	48	80
Percent of graves in national cemeteries marked within 60 days of interment	N/A	N/A	N/A	Baseline	TBD	TBD
Percent of headstones and markers that are undamaged and correctly inscribed	95%	97%	97%	97%	97%	98%
Percent of monuments ordered on-line by other federal and state veterans cemeteries using AMAS-R	65%	87%	89%	89%	90%	90%
Percent of individual headstone and marker orders transmitted electronically to contractors	88%	89%	92%	92%	93%	95%
Percent of Presidential Memorial Certificates that are accurately inscribed	98%	98%	98%	98%	98%	98%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	84%	88%	92%	93%	96%	100%
Percent of respondents who rate national cemetery appearance as excellent	79%	82%	96%	96%	98%	100%

## Performance Measures by Program

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
<b>Board of Veterans' Appeals</b> P&F ID Code: 36-0151-0-1-705						
<b>Resources</b>						
FTE	478	468	455	464	451	
Administrative costs (\$ in millions)	\$40	\$41	\$44	\$47	\$51	
<b>Performance Measures</b>						
Deficiency free decision rate	84%	86%	87%	91%	92%	95%
Court remand rate	65%	61%	97%	80%	70%	33%
Appeals resolution time (Days)	745	682	595	590	520	365
BVA Cycle Time	140	172	182	125	180	150
Appeals decided per FTE	78.2	72.7	69.3	61.1	64.3	65.4
Cost per case (BVA)	\$1,062	\$1,219	\$1,401	\$1,666	\$1,767	\$1,922

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
<b>Departmental Management</b> P&F ID Codes: 36-0151-0-1-705; 36-4539-0-4-705; 36-0110-0-1-703; 36-0111-0-1-703						
<b>Resources</b>						
FTE	2,483	2,564	2,674	2,987	3,022	
Administrative costs (\$ in millions)	\$357	\$416	\$449	\$554	\$558	
<b>Performance Measures</b>						
Percent of stakeholders who are satisfied or very satisfied with their level of participation in VA's planning process	N/A	N/A	N/A	75%	80%	85%
Percent of VA employees who indicate they understand VA's strategic goals	N/A	N/A	N/A	65%	75%	85%
Percent of statutory minimum goals met for small business concerns	37%	33%	23%	23%	23%	23%
Percent of employees who are aware of ADR as an option to address workplace disputes	N/A	N/A	50%	60%	70%	100%
Percent of cases using alternate dispute resolution (ADR) techniques	12%	13%	29%	15%	16%	20%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements	0	0	0	0	0	0
Percent increase of EC/EDI usage over 1997 base year	48%	86%	178%	100%	110%	150%
Percent of CIO designated major IT systems that conform to the <i>One VA</i> Enterprise Architecture	N/A	N/A	N/A	25%	100%	100%
Percent of the Government Information Security Act reviews and reporting completed	N/A	N/A	80%	100%	100%	100%

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Strategic Target
<b>Office of Inspector General</b> P&F ID Code: 36-0170-0-1-705						
<b>Resources</b>						
FTE	342	354	370	429	426	
Administrative costs (\$ in millions)	\$38	\$45	\$48	\$55	\$61	
<b>Performance Measures</b>						
Number of indictments, arrests, convictions, and administrative sanctions	696	938	1,655	1,675	1,675	1,800
Number of reports issued	162	108	136	160	160	200
Value of monetary benefits (in millions) from:						
IG Investigations	\$24	\$28	\$52	\$30	\$31	\$35
IG audit and health care inspection reviews	\$610	\$254	\$4,088	\$643	\$656	\$696
IG contract reviews	\$47	\$35	\$42	\$48	\$50	\$60