

DEFINITIONS

Please note: Key Measures are defined within the narrative.

AAALAC – Association for Assessment and Accreditation of Laboratory Animal Care

An accrediting body that provides oversight for research programs that include animal research. (Medical Research)

Accounts payable

The money VA owes to vendors and other Federal entities for products and services purchased. This is treated as a liability on the balance sheet. (Financial)

Accounts receivable

The amount of money that is owed to VA by a customer (including other Federal entities) for products and services provided on credit. This is treated as a current asset on the balance sheet and includes such items as amounts due from third-party insurers for veterans' health care and from individuals for compensation, pension, and readjustment benefit overpayments. (Financial)

Accuracy of decisions (entitlement)

Percent of entitlement determinations completed accurately. Accuracy is determined through case reviews. (VR&E)

Accuracy of decisions (fiscal)

Percent of vendor fiscal transactions and subsistence award transactions that are accurate and consistent with laws and regulations. The measure, calculated by determining the number of completed cases reviewed that were correct compared to the total number of cases reviewed, is expressed as a ratio. (VR&E)

Accuracy of decisions (services)

Percent of cases completed accurately for veterans who receive Chapter 31 (disabled veterans receiving vocational rehabilitation) services and/or educational/vocational counseling benefits under several other benefit chapters. Accuracy of service delivery is expressed as a percent of the highest possible score (100) on cases reviewed. (VR&E)

Accuracy of program outcome

This measure seeks to ensure the accuracy of decisions made to declare a veteran rehabilitated or discontinued from a program of services. (VR&E)

Appeals decided per FTE

A basic measure of efficiency determined by dividing the number of appeals decided by the total Board of Veterans' Appeals full-time equivalent (FTE) staff. (BVA)

Appeals resolution time (in days)

The average length of time the Department takes to process an appeal from the date a claimant files a Notice of Disagreement (NOD) until a case is *finally* resolved, including resolution at a regional office or by a final decision by the Board of Veterans' Appeals. (BVA)

Appropriation

The specific amount of money authorized by Congress for approved work, programs, or individual projects.

Appropriation Authority

The authority granted by Congress for the agency to spend government funds.

Average days to process insurance disbursements

The number of days (taken as a weighted composite average) it takes to process all disbursements, including death claims and applications for policy loans and cash surrenders. (Insurance)

Average hold time in seconds

The average length of time (in seconds) that a caller using the toll-free service number waits before being connected to an insurance representative. (Insurance)

Balance sheet

A summary of all the assets the agency owns and the liabilities owed against those assets as of a point in time (the end of the fiscal year for VA is

September 30). This statement always shows two consecutive fiscal year snapshots so the reader can compare the information. There is no “owners’ equity” in a federal agency, as there is in a non-government company. However, we instead report our “net position,” which is the amount of unexpended appropriation authority. (Financial)

Blind Rehabilitation - Percent change in functional status from admission to discharge from a blind rehabilitation program or unit

The goal of the Blind Rehabilitation Service is to help veterans develop the skills and capabilities that they need to improve the quality of their lives and attain personal independence and emotional stability. The performance index, which measures the change in their functional ability, is based on the Historical National Benchmark (HNB) of functional change indicated by the 13 items in the survey instrument. The index reflects the functional change from pre- to post-rehabilitation. (Medical Care)

Budgetary resources

Budgetary resources are forms of authority given to an agency allowing it to incur obligations. Budgetary resources include new budget authority, unobligated balances, direct spending authority, and obligation limitations. (Financial)

BVA cycle time

BVA cycle time measures the time from receipt of a case at the Board of Veterans’ Appeals until a decision is dispatched minus the time the case file is in the possession of a veterans service organization representative. (BVA)

CARES – Capital Asset Realignment for Enhanced Services

The program to assess veteran health care needs in VHA Networks, identify service delivery options to meet those needs in the future, and guide the realignment and allocation of capital assets to support the delivery of health care services. (Medical Care)

Chief Financial Officers Act of 1990

Legislation enacted to improve the financial management practices of the Federal government and to ensure the production of reliable and timely

financial information for use in the management and evaluation of Federal programs. (Financial)

Compliance survey completion rate

The percentage of compliance surveys completed compared with the number of surveys scheduled at the beginning of the fiscal year. (Education)

Cost per case

A unit decision cost derived by dividing BVA’s total obligational authority by the number of decisions produced. (BVA)

Cost per death award

The average cost of processing a death claim, including appropriate support costs. (Insurance)

Cost per policy maintained

The average cost of maintaining an insurance policy, including all appropriate support costs. (Insurance)

Court remand rate

Percent of decisions entered by the U. S. Court of Appeals for Veterans Claims (CAVC) that are remanded to the Board of Veterans’ Appeals. (BVA)

Cumulative number of kiosks installed at national and state veterans cemeteries

The total number of kiosk information centers installed at national and state veterans cemeteries to assist visitors in finding the exact gravesite locations of individuals buried there. In addition to providing the visitor with a cemetery map for use in locating the gravesite, the kiosk information center provides such general information as the cemetery’s burial schedule, cemetery history, burial eligibility, and facts about the National Cemetery Administration. (Burial)

Customer satisfaction (Access)

Percent of veterans who answered “very satisfied” or “somewhat satisfied” when asked about their ability to conveniently contact VR&E, receive counseling, be placed in a rehabilitation plan, and have their questions resolved. (VR&E)

Customer satisfaction (Survey)

Percent of veterans who answered “very satisfied” or “somewhat satisfied” when asked about their

level of overall satisfaction with vocational rehabilitation and employment services. (VR&E)

Customer satisfaction – high ratings

Nationally, the percentage of respondents to the education customer satisfaction survey who rated their interactions with VA as “very satisfied” or “somewhat satisfied.” (Education)

Deficiency free decision rate

This goal is based on a random sampling of approximately 5 percent of the Board of Veterans’ Appeals decisions. Decisions are checked for deficiencies in the following categories: identification of issues, findings of fact, conclusions of law, reasons and bases/rationale for preliminary orders, due process, and format. (BVA)

Dollars derived from alternate revenue generated from health care cost recoveries

A generic description of revenue over and above VA’s yearly Congressional budget appropriation. Examples of these revenues include medical cost recoveries, Medicare, and other sharing revenues including income from fee-for-service payments or third-party payments for care received by veterans covered by a medical insurance policy. (Medical Care)

Employee development

This measurement is the results of assessments for each VR&E employee in a work unit, team, or division that are combined to provide a snapshot of current skills and of the skills still needed. The assessment is derived from a Technical Skills Matrix tool that measures the extent to which an employee has, or is learning, the skills needed to provide complete customer service to veterans. (VR&E)

Employee job satisfaction

The overall level of job satisfaction, on a five-point scale, expressed by education employees. (Education)

Employee satisfaction

The Insurance Service uses the national *One VA* survey for the purpose of measuring employee satisfaction. The survey, consisting of 100 questions, uses a 5-point scale to measure

satisfaction. We include the top three levels as a favorable measure. (Insurance)

Employee satisfaction

Vocational Rehabilitation and Employment Service uses the national *One VA* survey for the purpose of measuring employee satisfaction. The survey consists of two questions using a 5-point scale to measure satisfaction. (VR&E)

Employee skills matrix

The matrix is a tool that focuses on the skill acquisition and skill development of employees. The basis of the measure is the “Ideal Team State,” which is the proper mix of skills needed to successfully provide service to veterans and their families. The score is the percentage of the skills identified in the Ideal Team State measured against the skill that each work unit possesses. The results of the assessment for each employee in a work unit are combined to provide the total score for Insurance. (Insurance)

Employment timeliness in average days

The average number of days taken from the date the veteran begins Employment Services (job ready) to the date the veteran enters suitable employment. (VR&E)

Exchange Revenue

Exchange revenues arise when a Federal entity provides goods and services to the public or to another government entity for a price. (Financial)

Favorable IG audit opinion

Each year, the IG conducts an audit of each Insurance program to determine if assets, liabilities, income, and expenses are reported properly in the CFO statements. This measure indicates whether the Insurance Program receives a favorable opinion on the audit. (Insurance)

Federal Financial Management Improvement Act (FFMIA)

The FFMIA requires agencies to produce timely and reliable financial statements that demonstrate their compliance with Federal financial management systems requirements, Federal accounting standards, and the U.S. government standard general ledger. If an agency believes its

systems are not FFMIA-compliant, it must develop a remediation plan to achieve compliance within 3 years. (Financial)

Federal Managers' Financial Integrity Act (FMFIA) of 1982

Legislation that requires Federal agencies to establish processes for the evaluation and improvement of financial and internal control systems in order to ensure that management control objectives are being met. (Financial)

Fiduciary activities – Initial Appeals and Fiduciary Beneficiaries – percent of initial appointments > 45 days

Nationwide, the percentage of fiduciary initial appointments that require more than 45 days to complete. (C&P)

Franchise Fund

VA's fund is comprised of six enterprise centers that competitively sell common administrative services and products throughout the Federal Government. The funds are deposited into the Franchise Fund. The Centers' operations are funded solely on a fee-for-service basis. Full cost recovery ensures they are self-sustaining. (Departmental Management)

Fund Balance with the Treasury

The aggregate amount of funds in VA's accounts with the Department of the Treasury for which we are authorized to make expenditures and pay liabilities. This account includes clearing account balances and the dollar equivalent of foreign currency account balances. (Financial)

Heritage Assets

Heritage Assets are unique and are generally expected to be preserved indefinitely. Heritage assets may have historical or natural significance; be of cultural, educational, or artistic importance; or have significant architectural characteristics. (Financial)

High customer ratings

The percent of insurance customers who rate different aspects of insurance services in the highest two categories, based on a 5-point scale, using data from the insurance customer survey. (Insurance)

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: This measure identifies the number of VISNs that give veterans access to telephone care 7 days a week, 24 hours a day for triage, care, and consultation. The purpose is to provide personalized care when and where it is needed, within certain parameters, and in ways that are creative, innovative, and cost-effective.

Number of VISNs fully compliant with VHA Directive 2000-035, except for accreditation and direct access by clinical staff to clinical medical records. Each VISN is to have patient access to telephone care that includes approved medical algorithms enabling proper disposition of a patient who calls for care and the ability to record the telephone interaction in the medical record for the team to follow up on as necessary. (Medical Care)

Increase by 5 percent over the previous fiscal year the number of Health Services Research & Development (HSR&D) funded research projects related to health systems and methodology to evaluate outcomes

HSR&D supports projects in the area of evaluating health systems outcomes by focusing on the health care being provided rather than the condition for which it is provided. (Medical Research)

Increase the number and dollar volume of sharing agreements by 10 percent over the previous year (Non-DoD and DoD agreements)

VA enters into sharing agreements with other government agencies and the private sector to share healthcare resources. We also engage in joint ventures including direct medical care, joint purchasing, and other services. Improving coordination of VA and DoD programs and systems is an important part of improving the use of resources. In December 1999, VA and DoD agreed in a memorandum of agreement (MOA) to combine their purchasing power to eliminate redundancies. In May 2001, the President established a task force to improve health care delivery to our Nation's veterans through better coordination between VA and DoD. Significant progress has since been made

related to achieving discounts in addition to the lowest VA Federal Supply Schedule (FSS) prices, converting DoD's Distribution and Purchasing Agreements to FSS for medical/surgical products, and working with DoD counterparts to facilitate shared acquisition strategies through product standardization committees. VA and DoD use other contracting authority to jointly procure pharmaceuticals, medical/surgical supplies, and equipment. (Medical Care)

Intragovernmental assets

These assets arise from transactions among Federal entities. These assets are claims of the reporting entity against other Federal entities. (Financial)

Intragovernmental liabilities

These liabilities are claims against the reporting entity by other Federal entities. (Financial)

Inventory

An inventory is a tangible personal property that is (i) held for sale, including raw materials and work in process, (ii) in the process of production for sale, or (iii) to be consumed in the production of goods for sale or in the provision of services for a fee. (Financial)

Lender satisfaction

The percentage of lenders answering the survey that were very satisfied or somewhat satisfied with the VA Loan Guaranty Program. (Housing)

Low customer ratings

The percent of insurance customers who rate different aspects of insurance services in the lowest two categories, based on a 5-point scale, using data from the insurance customer survey. (Insurance)

Management (or internal) controls

Safeguards (organization, policies, and procedures) used by agencies to reasonably ensure that (i) programs achieve their intended results; (ii) resources are used consistent with agency mission; (iii) programs and resources are protected from waste, fraud, and mismanagement; (iv) laws and regulations are followed; and (v) reliable and timely information is obtained, maintained, reported, and used for decision making. (Financial)

Material weakness

A reportable condition in which the design or operation of the specific internal control does not reduce to a relatively low level the risk that errors or irregularities in amounts that would be material to the consolidated financial statements being audited. This condition may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. (Financial)

Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experiences

The satisfaction survey for residents and other medical trainees assists VHA in determining how well we are achieving VA's academic mission of providing innovative and high-quality health care training for VA and the Nation. The survey results are used to learn what satisfies medical trainees and to improve the clinical training experience. The sources of this data are the responses to a summary question from the Learners' Perceptions Survey. (Medical Education)

Memorial Service Network

NCA's field structure is geographically organized into five Memorial Service Networks (MSNs). The national cemeteries in each MSN are supervised by the MSN Director and staff. The MSN offices are located in Philadelphia, Pennsylvania; Atlanta, Georgia; Indianapolis, Indiana; Denver, Colorado; and Oakland, California. The MSN Directors and staff provide direction, operational oversight, and engineering assistance to the cemeteries located in their geographic areas. (Burial)

National accuracy rate (authorization work)

Nationwide, the percentage of original death pension claims, dependency issues, income issues, income verification matches, income verification reports, burial and plot allowances, claims for accrued benefits, and special eligibility determinations completed and determined to be technically accurate. The accuracy rate for the Nation is a compilation of the C&P Service's review of the 57 regional offices. (C&P)

National accuracy rate (fiduciary work)

Nationwide, the percentage of field examinations and account audits completed and determined to be technically accurate. The accuracy rate for the Nation is a compilation of the C&P Service's review of the 57 regional offices. (C&P)

NCQA–National Committee for Quality Assurance

An accrediting body that provides oversight for research programs that include human research. (Medical Research)

Net cost of operations

Net cost of operations is the gross cost incurred by VA less any exchange revenue earned from its activities. The gross cost of a program consists of the full cost of the outputs produced by that program plus any non-production costs that can be assigned to the program. (Financial)

Net position

Net position comprises the portion of VA's appropriations represented by undelivered orders and unobligated balances (unexpended appropriations) and the net results of the reporting entity's operations since inception, plus the cumulative amount of prior period adjustments (cumulative results of operations). (Financial)

Net program cost

Net program cost is the difference between a program's gross cost and its related exchange revenues. If a program does not earn any exchange revenue, there is no netting and the term used might be total program cost. (Financial)

Non-rating actions - average days pending

Elapsed time, in days, from date of receipt of a claim (for which work has not been completed) in the regional office to current date. Non-rating actions include the following types of claims: original death pension, dependency issues, income issues, income verification matches, income verification reports, burial and plot allowances, claims for accrued benefits, and special eligibility determinations. (C&P)

Non-rating actions - average days to process

Elapsed time, in days, from receipt of a claim

in the regional office to closure of the case by issuing a decision by a regional office. Non-rating actions include the following types of claims: original death pension, dependency issues, income issues, income verification matches, income verification reports, burial and plot allowances, claims for accrued benefits, and special eligibility determinations. (C&P)

Notes to the Consolidated Financial Statements

The notes provide additional disclosures that are necessary to make the financial statements more informative and not misleading. The notes are an integral part of the financial statements. (Financial)

NRC – Nuclear Regulatory Commission

A federally sponsored organization responsible for management of radiation hazards, which has oversight in medical center services or research programs that include radioactive materials. (Medical Research)

Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements

Audits are performed in accordance with Government Auditing Standards issued by the Comptroller General of the United States and the requirements of the Office of Management and Budget (OMB) Bulletin No. 01-02, "Audit Requirements for Federal Financial Statements." This measure reports how many audit qualifications are identified each year in VA's consolidated financial statements. (Departmental Management)

Number of indictments, arrests, convictions, and administrative sanctions

The number of indictments, arrests, convictions, and administrative sanctions achieved measures investigative performance. (OIG)

Number of reports issued

The OIG conducts Combined Assessment Program (CAP) reviews to evaluate the quality, efficiency, and effectiveness of VA facilities and issues reports to highlight the opportunities for improvement in quality of care, management controls, and fraud prevention. (OIG)

Obligations

Obligations represent the amount of orders placed, contracts awarded, services received, and other transactions occurring during a given period that would require payments during the same or future period. (Financial)

OMB Circular No. A-123

The Office of Management and Budget (OMB) issued Circular No. A-123 to provide guidance to Federal managers on improving the accountability and effectiveness of Federal programs and operations by establishing, assessing, correcting, and reporting on management controls. (Financial)

OMB Circular No. A-127

The Office of Management and Budget (OMB) issued Circular No. A-127 to prescribe policies and standards for executive departments and agencies to follow in developing, operating, evaluating, and reporting on financial management systems. (Financial)

Outlay

Outlay is the amount of checks, disbursement of cash, or electronic transfer of funds made to liquidate a Federal obligation. Outlays also occur when interest on the Treasury debt held by the public accrues and when the Government issues bonds, notes, debentures, monetary credits, or other cash-equivalent instruments in other to liquidate obligations. (Financial)

Overall satisfaction

This is an index of answers from the annual customer satisfaction survey. The survey assesses the level of satisfaction veterans have with the way their claim is handled by VA and with the service they receive when they contact VA for information. (C&P)

Payment accuracy rate

Measures how well decisions reflect payment at the proper rate for the correct period of time. (Education)

Percent cumulative reduction in excess capacity as a result of CARES. Total excess capacity will be identified by the CARES initiative.

The CARES strategic planning process identifies excess capacity by VISN and then outlines an action plan each year on what will be addressed the following year. (Medical Care)

Percent increase in number of enrolled veterans who have access to home and community-based care when clinically appropriate (2000 baseline = Average Daily Census of 14,111)

The numerator is the census of enrolled veterans who utilized home and community-based care. The denominator is all enrolled veterans. (Medical Care)

Percent increase of EC/EDI usage over 1997 base year

The percent increase in the number of line items ordered through Electronic Data Interchange (EDI) by fiscal year. (Departmental Management)

Percent of all patients evaluated for the risk factors for hepatitis C

Hepatitis C is a major public health problem, and there is a concern that this disease occurs more frequently among veterans than the rest of the population. From a patient and public health perspective, all patients should be screened for high risk factors. If patients are at high risk for being exposed to hepatitis C, then they should be tested and evaluated for possible drug therapy. Regardless of whether they elect to initiate drug therapy or are candidates for current treatments, they need to receive information about disease transmission, the benefits of avoiding hepatotoxins such as alcohol, and the current recommendations regarding vaccination against other types of viral hepatitis. The numerator is the number of patients ever screened for risk factors, tested, and/or diagnosed for hepatitis C. The denominator is all patients in the sample.

(Medical Care)

Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening

The number of patients who are ever tested or diagnosed for hepatitis C divided by the number of patients in the sample ever tested, diagnosed, or screened with a positive risk factor.

(Medical Care)

Percent of blocked calls

The percentage of call attempts for which callers receive a busy signal because all circuits were in use for the insurance toll-free service number. (Insurance)

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

The goal of rehabilitation units is to maintain or improve function. The FIM tool allows for an in-depth evaluation of current status and potential for improvement. Rehabilitation goals are then set. The numerator is all Traumatic Brain Injury (TBI) patients who meet or exceed expected outcomes. The denominator is all TBI patients enrolled in a rehabilitation program. (Medical Care)

Percent of cases using alternate dispute resolution (ADR) techniques

The percent of contract dispute matters electing to use Alternate Dispute Resolution (ADR) techniques. ADR techniques refer generally to several formal and informal processes for resolving disputes that do not entail courtroom litigation. (Departmental Management)

Percent of CIO-designated major IT systems that conform to the *One VA Enterprise Architecture*

The number of all CIO-designated major IT systems project submissions that conform to the *One VA Enterprise Architecture* divided by the total number of projects submitted. (Departmental Management)

Percent of eligible patients undergoing rehabilitation for a lower extremity amputation whose efficiency scores using the Efficiency Pattern Analysis is classified into one of the three highest efficiency categories

Lower extremity amputations produce significant life changes for a veteran's functional status, and effective rehabilitation intervention represents an opportunity to achieve maximal benefit for the patient. This measure is part of the evaluation of rehabilitative interventions. In the FY 2001

baseline, this measure was based on inpatient medical rehabilitation beds. In FY 2002, the measure has changed slightly and is based on the full continuum of rehabilitative care. The measure expands the patient cohort to include amputees at all facilities, both inpatient and outpatient, across the continuum of care (includes care outside of a medical care rehabilitation unit). (Medical Care)

Percent of employees who are aware of alternate dispute resolution (ADR) as an option to address workplace disputes

The percent of employees who are made aware of ADR through a variety of mechanisms, such as increased training opportunities, mediation satellite broadcast programs, and promotion of videotape examples on mediation. (Departmental Management)

Percent of headstones and markers that are undamaged and correctly inscribed

This percentage represents the number of headstones and markers that are undamaged and correctly inscribed, divided by the number of headstones and markers ordered. (Burial)

Percent of homeless patients with mental illness who receive a follow-up mental health outpatient visit, admission to a Compensated Work Therapy/Transitional Residence (CWT/TR), or admission to a Psychiatric Residential Rehabilitation Treatment Program (PRRTP) within 30 days of discharge

VA provides state-of-the-art diagnosis and treatment to improve the mental and physical functioning of veterans in need of mental health treatment across a broad continuum of inpatient, partial-hospitalization, outpatient, and community facilities. This performance measure tracks the percent of homeless patients with mental health disorders who received follow-up outpatient care related to mental health, admission to a CWT/TR, or admission to a PRRTP within 30 days following discharge from Domiciliary Care for Homeless Veterans (DCHV) or Health Care for Homeless Veterans (HCHV) contract care. (Medical Care)

Percent of individual headstone and marker orders transmitted electronically to contractors

The percent of individual headstone and marker orders that were transmitted to contractors via communication software or Internet e-mail. (Burial)

Percent of insurance disbursements paid accurately

The weighted composite accuracy rate for all disbursements, including death claims, policy loans, and cash surrenders. (Insurance)

Percent of monuments ordered on-line by other federal and state veterans cemeteries using AMAS-R

The percentage represents the number of headstones and markers ordered through NCA's Automated Monument Application System-Redesign (AMAS-R) by other federal (for example, Arlington National Cemetery) and state veterans cemeteries, divided by the total number of headstones and markers ordered by other federal and state veterans cemeteries. (Burial)

Percent of patients in specialized substance abuse treatment settings who have an Addiction Severity Index (ASI) assessment

Substance use disorders are among the VHA's most frequent diagnoses. The ASI is a national and international tool to measure severity of substance use disorders.

Initial ASI: The numerator is the number of eligible patients that have an initial ASI within the acceptable time frame. The denominator is the eligible patients in a designated substance abuse program.

Six-month follow-up ASI: Due to data methodology issues, this information is unavailable. (Medical Care)

Percent of patients who use tobacco products

The smoking program in VHA's Office of Public Health and Environmental Hazards and the National Center for Health Promotion and Disease Prevention is responsible for policy development relating to smoking by patients, employees, and visitors at VA facilities. Activities revolve around developing and disseminating clinical guidelines for smoking cessation and implementing a joint VA-DoD National Smoking Cessation Program. Data obtained through a random sample of the

records of patients seen at least once within the past 12-24 months and again within the current year (to determine the veteran is an established patient) at one of eight ambulatory care clinics are used to assess the effectiveness of the program.

(Medical Care)

Percent of patients with hepatitis C who have annual assessment of liver function

The number of patients who are determined to have hepatitis C who have an annual blood test to assess their liver function divided by the number of patients who have tested positive for having hepatitis C. (Medical Care)

Percent of pharmacy orders entered into the Computerized Patient Record System (CPRS) by the prescribing clinician

The risk of error in processing prescriptions is reduced when orders are entered directly into a computer. This performance measure is intended to reduce risk to patients and reduce variation in the clinical use of CPRS across the system. The numerator is the number of pharmacy orders entered into CPRS by the prescribing clinician. The denominator is the applicable inpatient and outpatient pharmacy orders entered into *VistA*. (Exclusions include those required by DEA to have a written copy, orders entered by medical students that require a co-signature, and protocol or standing orders.) (Medical Care)

Percent of Presidential Memorial Certificates that are accurately inscribed

A Presidential Memorial Certificate (PMC) conveys to the family of the veteran the gratitude of the Nation for the veteran's service. To convey this gratitude, each certificate must be accurately inscribed. This measure represents the number of PMCs initially sent to the families of deceased veterans that are accurately inscribed, divided by the number of PMCs issued. (Burial)

Percent of prosthetics orders delayed

Enactment of the Veterans Health Care Eligibility Reform Act of 1996, Public Law 104-262, Section 104, eliminated the prohibition on providing prosthetic devices in an ambulatory setting and increased the number of veterans who are eligible

for prosthetic devices. This measure evaluates timeliness by determining the rate of delayed prosthetics orders (that is, orders not placed in five workdays). The current standard is to not exceed 2 percent of the total workload per month. This 2-percent standard will be maintained despite an expanding workload in FY 2002-2006. The source of the data is the National Prosthetic Delayed Order Report. The data are collected manually on a quarterly basis. The numerator for this target is the total number of delayed prosthetic orders. The denominator is the total number of prosthetic orders received. (Medical Care)

Percent of randomly selected admissions to Special Intensive PTSD Programs (SIPPs) that are enrolled in the Outcomes Monitoring program

Patients enrolled in the National PTSD Outcomes Monitoring System are those registered with VHA's Mental Health and Behavioral Sciences Strategic Health Care Group and admitted to the following specialized intensive PTSD programs: Evaluation Brief Treatment PTSD unit, Specialized Inpatient PTSD Program (SIPPS), PTSD Residential program, or a PTSD Day Hospital program. Patients with successful follow-up are those who have completed a follow-up assessment form, as required for the outcome-monitoring program. (Medical Care)

Percent of spinal cord injury respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent – Inpatient/Outpatient

The Spinal Cord Injury and Disorders (SCI&D) program assists veterans with SCI&D to develop the capacities needed to maintain independence, health, and well-being. To accomplish this, the SCI&D program provides rehabilitation, preventive care, sustaining care, and extended care across a continuum. These measures indicate VA's ability to maintain a viable spinal cord injury system providing health care that will receive positive patient evaluations. (Medical Care)

Percent of stakeholders who are satisfied or very satisfied with their level of participation in VA's planning process

VA stakeholders include Congressional leaders and staff, Office of Management and Budget staff, representatives of Veterans Service Organizations and others involved in the strategic planning process. The data is gathered from surveys of participants in VA's Four Corners strategic planning meetings. (Departmental Management)

Percent of statutory minimum goals met for small business concerns

The Office of Small and Disadvantaged Business Utilization (OSBDU) ensures maximum opportunities for all small businesses as directed by Public Law 106-50, the Veterans Entrepreneurship and Small Business Development Act of 1999. (Departmental Management)

Percent of the Government Information Security Reform Act (GISRA) reviews and reporting completed

The GISRA requires an annual security review of all information technology (IT) systems. IT system owners complete an on-line survey that asks for detailed information about the security of their system. This information is reported to OMB annually and updated quarterly. (Departmental Management)

Percent of VA employees who indicate they understand VA's strategic goals

This measure is based upon a nationwide survey of VA employees and indicates the percentage who agree or strongly agree that VA employees have an understanding of the mission and strategic goals of VA as stated in the VA Strategic Plan. (Departmental Management)

Percent of VA-managed Federal Coordinating Centers that complete at least one National Disaster Medical System (NDMS) casualty reception exercise every three years

Since disasters are commonplace in today's world, prompt, coordinated response and relief efforts are necessary to reduce morbidity and mortality. As a large integrated health care system with a presence in every state, VA operates a national emergency management program that includes NDMS Federal Coordinating Centers strategically located throughout the country. Emergency preparedness

drills and related activities test the effectiveness of existing training programs and capabilities, and keep skills honed for real-life emergency events. This measure provides the percent of VA-managed NDMS Federal Coordinating Centers that complete at least one casualty reception exercise every three years. (Medical Care)

Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence

NCA determines the percentage of veterans served by a burial option in existing national cemeteries within a reasonable distance of their residence by analyzing census data on the veteran population. A burial option is defined as a first family member interment option (whether for casketed remains or cremated remains, either in-ground or in columbaria) in a national cemetery that is available within 75 miles of the veteran's place of residence. Since FY 2000, actual performance has been based on the VetPop2000 model developed by the Office of the Actuary. (Burial)

Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence

NCA determines the percentage of veterans served by a burial option only in a state veterans cemetery within a reasonable distance of their residence by analyzing census data on the veteran population. A burial option is defined as a first family member interment option (whether for casketed remains or cremated remains, either in-ground or in columbaria) in a state veterans cemetery that is available within 75 miles of the veteran's place of residence. Since FY 2000, actual performance has been based on the VetPop2000 model developed by the Office of the Actuary. (Burial)

Percent of Veterans Service Standard (VSS) problems reported per patient in the areas of patient education and visit coordination

Patient satisfaction with health care services is measured through the Survey of Health Expectations of Patients (SHEP). The survey involves patient perceptions of patient education and visit coordination. Patient education pertains to whether VA healthcare provides patients with

understandable answers to their questions and furnishes patients with clear explanations of why tests are needed, what the results are, the purpose and side effects of any prescribed medicines, and what to do if problems or symptoms continue or get worse. Visit coordination deals with whether patients are informed of how and when they would find out the results of any test conducted. (Medical Care)

Percent of veterans using Vet Centers who report being satisfied with services and say they would recommend the Vet Center to other veterans

Since 1979, VA has provided counseling services to assist veterans in readjusting to civilian life through a nationwide system of 206 community-based counseling facilities known as Vet Centers. The Vet Centers were the first VA service program to treat PTSD systematically in returning war veterans. Vet Centers now provide, in a non-hospital community setting, a variety of social services, extensive community outreach and referral activities, psychological assessment, psychological counseling for war-related experiences (including PTSD) and sexual trauma, and family counseling when needed. Initially restricted to Vietnam veterans, current law has extended eligibility for Vet Center services to any veteran who has served in the military in a theater of combat operations or in any area where armed hostility was occurring at the time of the veteran's service. This performance measure tracks the percentage of veterans who respond on the *Vet Center Veteran Satisfaction Survey* that they are satisfied with services and would recommend the Vet Center to other veterans. (Medical Care)

Percent of veterans who obtained employment upon discharge from a Domiciliary Care for Homeless Veterans (DCHV) program or Health Care for Homeless Veterans (HCHV) community-based contract residential care program

VA administers two special programs for homeless veterans: Domiciliary Care for Homeless Veterans (DCHV) and Health Care for Homeless Veterans (HCHV). These programs provide outreach, psychosocial assessments, referrals, residential treatments, and follow-up case management

to homeless veterans. This measure tracks the percentage of discharged veterans who obtain full-time employment, part-time employment, or therapeutic work opportunities in Veterans Industries at discharge. (Medical Care)

Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) program or Health Care for Homeless Veterans (HCHV) community-based contract residential care program to an independent or a secured institutional living arrangement

VA administers two special programs for homeless veterans: Domiciliary Care for Homeless Veterans (DCHV) and Health Care for Homeless Veterans (HCHV). These programs provide outreach, psychosocial assessments, referrals, residential treatments, and follow-up case management to homeless veterans. This measure tracks the percentage of these veterans who are discharged directly to independent living or secure housing in the community. Independent living is defined as residence in one's own apartment, rooms, or house. Secured living arrangement is defined as half-way house, transitional housing, or domiciliary. (Medical Care)

Program evaluation

An assessment, through objective measurement and systematic analysis, of the manner and extent to which Federal programs achieve intended outcomes. (Departmental Management)

Prompt Payment Act

The Prompt Payment Final Rule (formerly OMB Circular No. A-125, "Prompt Payment") requires Executive departments and agencies to pay commercial obligations within certain time periods and to pay interest penalties when payments are late. (Financial)

Property holding time (months)

The average number of months from date of custody of a property to the date of sale of a property acquired due to defaults on VA-guaranteed loans. (Housing)

Property, Plant, and Equipment

Property, plant, and equipment consist of tangible assets, including land, that have estimated useful

lives of 2 years or more, not intended for sale in the ordinary course of operations, and have been acquired or constructed with the intention of being used, or being available for use, by the reporting entity. (Financial)

PTSD – Post Traumatic Stress Disorder

PTSD is an anxiety disorder that can occur following the experience or witnessing of life-threatening events, such as military combat, natural disasters, terrorist incidents, serious accidents, or violent personal assaults such as rape. People who suffer from PTSD often relive the experience through nightmares and flashbacks, have difficulty sleeping, and feel detached or estranged. These symptoms can be severe enough and last long enough to significantly impair the person's daily life. Common PTSD stressors in veterans include war zone stress (e.g., combat and exposure to mass casualty situations), the crash of a military aircraft, or sexual assault. VA is committed to providing an integrated, comprehensive, and cost-effective continuum of care for veterans with PTSD. (Medical Care)

Quality-Access-Satisfaction/Cost VALUE Index

The QAS/Cost VALUE Index includes both cost and other domains of value such as quality, access, and satisfaction that express meaningful outcomes for VA's resource investments. Unlike a simple cost measure that can lead to false impressions of efficiency, the VALUE measure demonstrates a balanced perspective of cost efficiency along with desired outcomes. The measure simply portrays the desired outcomes (as percentage of goals) that VA achieves with its budgeted resources by establishing a value relationship of Quality-Access-Satisfaction to dollars (QAS/cost). (Medical Care)

Rating-related actions - average days pending

Elapsed time, in days, from date of receipt of a claim (for which work has not been completed) in the regional office to current date. Rating actions include the following types of claims: original compensation, original disability pension, original DIC, reopened compensation, reopened pension, routine examinations, and reviews due to hospitalization. (C&P)

Research and Development

Research and development investments are expenses included in the calculation of net costs to support the search for new or refined knowledge and ideas and for the application or use of such knowledge and ideas for the development of new and improved products and processes, with the expectation of maintaining or increasing national economic productivity capacity or yielding other future benefits. (Financial)

Return on sale

The national average on the return on investment (percentage) on properties sold that were acquired due to defaults on a VA-guaranteed loan. It is the amount received for the property (selling price) divided by the acquisition cost and all subsequent expenditures for improvements, operating, management, and sales expenses. (Housing)

Serious Employment Handicap (SEH) rehabilitation rate

Proportion of all veterans with an SEH who are rehabilitated, compared to all veterans with an SEH who exit a program of services (discontinued or rehabilitated) during the fiscal year. These veterans are also included in the rehabilitation rate. The SEH rehabilitation rate provides additional credit for success in rehabilitating veterans with serious employment handicaps. VR&E Service is targeting veterans with SEH for increased attention and services. (VR&E)

Speed of entitlement decisions in average days

Average number of days from the time the application is received until the veteran is notified of the entitlement decision. (VR&E)

Statement of Budgetary Resources

A financial statement that provides assurance that the amounts obligated or spent did not exceed the available budget authority, obligations and outlays were for the purposes intended in the appropriations and authorizing legislation, other legal requirements pertaining to the account have been met, and the amounts are properly classified and accurately reported. (Financial)

Statement of Changes in Net Position

A financial statement that provides the manner in

which VA’s net costs were financed and the resulting effect on the Department’s net position. (Financial)

Statement of Financing

A financial statement that explains how budgetary resources obligated during the period relate to the net cost of operations. It also provides information necessary to understand how the budgetary resources finance the cost of operations and affect the assets and liabilities of the Department. (Financial)

Statement of Net Costs

A financial statement that provides information to help the reader understand the net costs of providing specific programs and activities, and the composition of and changes in these costs. (Financial)

Statement of Written Assurance

A statement of written assurance is required by the Federal Managers’ Financial Integrity Act. Each year, the head of each executive agency must prepare a statement that the agency’s systems of internal accounting and administrative control fully comply with the requirements of the law, or that they do not comply. In the latter case, the head of the agency must include a report in which (a) material weaknesses in the agency’s system of internal accounting and administrative controls are identified, and (b) the plans and schedules for correcting any such weaknesses. (Financial)

Statistical quality index

A quality index that reflects the number of correct actions found in Statistical Quality Control reviews, measured as a percentage of total actions reviewed. (Housing)

Status of Budgetary Resources

Obligations incurred, the unobligated balances at the end of the period that remain available, and unobligated balances at the end of the period that are unavailable except to adjust or liquidate prior year obligations. (Financial)

Stewardship Land

Land not acquired for or in connection with

items of general property, plant, and equipment. (Financial)

Stewardship Property, Plant, and Equipment

Assets whose physical properties resemble those of general PP&E that are traditionally capitalized in financial statements. However, due to the nature of these assets, (1) valuation would be difficult and (2) matching costs with specific periods would not be meaningful. Stewardship PP&E consists of heritage assets, national defense PP&E, and Stewardship Land. (Financial)

Telehealth

The use of electronic communications and information technology to provide and support health care when distance separates the participants. It includes health care practitioners interacting with patients, and patients interacting with other patients. (Medical Care)

Telemedicine

The provision of care by a licensed independent health care provider that directs, diagnoses, or otherwise provides clinical treatment delivered using electronic communications and information technology when distance separates the provider and the patient. (Medical Care)

Telephone activities - abandoned call rate

Nationwide, the percentage of call attempts for which the caller gets through, but hangs up before talking to a VA representative. (C&P, Education)

Telephone activities - blocked call rate

Nationwide, the percentage of call attempts for which callers receive a busy signal because all circuits were in use. (C&P, Education)

Unobligated Balances

Balances of budgetary resources that have not yet been obligated. (Financial)

VA Domiciliary

A VA domiciliary provides comprehensive health and social services in a VA facility for eligible veterans who are ambulatory and do not require the level of care provided in nursing homes. (Medical Care)

VA Hospital

A VA hospital is an institution that is owned, staffed, and operated by VA and whose primary function is to provide inpatient services. Note: Each division of an integrated medical center is counted as a separate hospital. (Medical Care)

VA Regional Office

A VA Regional Office is a VBA office located in each state that receives and processes claims for VA benefits. (VBA)

Value of monetary benefits from IG audit and health care inspection reviews

A quantification of funds that could be used more efficiently if management took actions to complete recommendations pertaining to deobligating funds, costs not incurred by implementing recommended improvements, and other savings identified in audit reports and health care inspection reviews. (OIG)

Value of monetary benefits from IG contract reviews

The sum of the questioned and unsupported costs, identified in pre-award contract reviews, that the IG recommends be disallowed in negotiations unless additional evidence supporting the costs is provided. (OIG)

Value of monetary benefits from IG investigations

Includes court fines, penalties, restitution, civil judgments, and investigative recoveries and savings. (OIG)

Veterans Integrated Service Network (VISN)

The 21 VISNs are integrated networks of health care facilities that provide coordinated services to veterans to facilitate continuity through all phases of healthcare and to maximize the use of resources. (Medical Care)

Veterans satisfaction

The percentage of veterans answering the survey that were very satisfied or somewhat satisfied with the process of obtaining a VA home loan. (Housing)

LIST OF ABBREVIATIONS AND ACRONYMS

AAALAC

Association for the Assessment and Accreditation of Laboratory Animal Care

AAC

Austin Automation Center

ADE

Awards Data Entry

ADHC

Adult Day Health Care

ADR

Alternate Dispute Resolution

AFGE

American Federation of Government Employees

AICPA

American Institute of Certified Public Accountants

AMAS-R

Automated Monument Application System
– Redesign

ARC

Allocation Resources Center

ASI

Addiction Severity Index

B&O

Beneficiary and Option

BCMA

Bar Code Medication Administration

BDC

Benefits Delivery Center

BOP

Federal Bureau of Prisons

BOSS

Burial Operations Support System

BPA

Blanket Purchase Agreement

BRFSS

Behavioral Risk Factor Surveillance System

BVA

Board of Veterans' Appeals

C&P

Compensation and Pension

C&V

Construction and Valuation

CAP

Combined Assessment Program

CAPRI

Compensation and Pension Records Interchange

CARES

Capital Asset Realignment for Enhanced Services

CARF

Commission on Accreditation of Rehabilitation Facilities

CBO

Congressional Budget Office

CBOC

Community-based Outpatient Clinic

CDC

Centers for Disease Control and Prevention

CDCI II

Chronic Disease Care Index II

CDRH

Center for Devices and Radiological Health

CFO

Chief Financial Officer

CFR

Code of Federal Regulations

CFS

Consolidated Financial Statements

CIO

Chief Information Officer

CMS

Centers for Medicare and Medicaid Services

CNH

Contract Nursing Homes

COLAs

Cost of Living Adjustments

COOP

Continuity of Operations Plan

CoreFLS

Core Financial & Logistics System

COTS

Commercial Off-the-Shelf

CPEP

Compensation and Pension Examination Project

CPRS

Computerized Patient Record System

CPT

Current Procedural Terminology

CPTS

Centralized Property Tracking System

CSO

Commissioners Standard Ordinary

CSRS

Civil Service Retirement System

CY

Calendar Year

CWT/TR

Compensated Work Therapy/Transitional Residence

CWT/VI

Compensated Work Therapy/Veterans Industries

D&IS

Data and Information Service

DCHV

Domiciliary Care for Homeless Veterans

DEERS

Defense Eligibility and Entitlement Records System

DFAS

Defense Finance and Accounting Service

DIC

Dependency and Indemnity Compensation

DMC

Debt Management Center

DMDC

Defense Manpower Data Center

DoD

Department of Defense

DOL

Department of Labor

DOOR

Distribution of Operational Resources

DSCP

Defense Supply Center Philadelphia

DSS	FISCAM
Decision Support System	Federal Information System Controls Audit Manual
EA	FMFIA
Enterprise Architecture	Federal Managers' Financial Integrity Act
EC/EDI	FMS
Electronic Commerce/Electronic Data Interchange	Financial Management System
ECAP	FOIA
Enrollment Certification Automated Processing	Freedom of Information Act
EPA	FRP
Environmental Protection Agency	Federal Response Plan
EPRP	FSC
External Peer Review Program	Financial Services Center
FAIR Act	FSQAS
Federal Activities Inventory Reform Act	Financial & Systems Quality Assurance Service
FASAB	FSS
Federal Accounting Standards Advisory Board	Federal Supply Schedule
FASB	FTE
Financial Accounting Standards Board	Full-time Equivalent
FATS	FY
Foreclosure Avoidance Through Servicing	Fiscal Year
FDA	G2B
Food and Drug Administration	Government to Business
FPDS	G2C
Federal Procurement Data System	Government to Citizen
FECA	G2G
Federal Employees' Compensation Act	Government to Government
FERS	GAAP
Federal Employees' Retirement System	Generally Accepted Accounting Principles
FFMIA	GAO
Federal Financial Management Improvement Act	General Accounting Office
FIFO	GISRA
First In-First Out	Government Information Security Reform Act

GMRA

Government Management Reform Act

GPEA

Government Paperwork Elimination Act

GPO

Government Printing Office

GPRA

Government Performance and Results Act

GSA

General Services Administration

HCHV

Health Care for Homeless Veterans

HCM

Human Capital Management

HCPCS

Health Care Financing Procedure Code System

HEC

Health Eligibility Center

HEDIS

Health Plan Employer Data Information Set

HFMEA

Healthcare Failure Modes and Effects Analysis

HHS

Department of Health and Human Services

HIM

Health Information Management

HIPAA

Health Information Portability and Accountability Act

HRM

Human Resources Management

HSIF

Health Services Improvement Fund

HSR&D

Health Services Research and Development Service

IDS

Intrusion Detection System

IEE

Internal Effectiveness and Efficiency

IFCAP

Integrated Funds Distribution, Control Point Activity, Accounting and Procurement

IG

Inspector General

IL

Information Letter

IOM

Institute of Medicine

IRB

Institutional Review Board

ISMP

Institute for Safe Medication Practices

IT

Information Technology

IVM

Income Verification Match

JCAHO

Joint Commission for the Accreditation of Healthcare Organizations

LDLC

Low Density Lipid Cholesterol

LS&C

Loan Service & Claims

MCCF

Medical Care Collections Fund

MDR	NHPP
Meta Data Repository	National Health Physics Program
MGIB	NIH
Montgomery GI Bill	National Institutes of Health
MMCP	NOD
Medicare Managed Care Plans	Notice of Disagreement
MOA	NRC
Memorandum of Agreement	Nuclear Regulatory Commission
MOU	NSLI
Memorandum of Understanding	National Service Life Insurance
MPI	OA&MM
Master Patient Index	Office of Acquisition and Materiel Management
MSN	OCS
Memorial Service Network	Office of Cyber Security
MVHCB	OED
Military and Veterans Health Coordinating Board	Online Eligibility Determination
NAGE	OGC
National Association of Government Employees	Office of General Counsel
NARS	OHRP
National Automated Response System	Office of Human Research Protections
NCA	OIG
National Cemetery Administration	Office of Inspector General
NCHS	OMB
National Center for Health Statistics	Office of Management and Budget
NCPS	OPI
National Center for Patient Safety	Office of Program Integrity
NCQA	OPM
National Committee for Quality Assurance	Office of Personnel Management
NDMS	OQP
National Disaster Medical System	Office of Quality Performance
NHIS	ORCA
National Health Interview Survey	Office of Research Compliance and Assurance

ORD

Office of Research and Development

OSGLI

Office of Servicemembers' Group Life Insurance

OSHA

Occupational Safety and Health Administration

OWCP

Office of Workers' Compensation Program

P&F

Program and Financing

PACE

Performance Analysis Center for Excellence

PACT

Preservation/Amputation Care and Treatment Program

PAID

Personnel Accounting Integrated Data

PCGL

Personal Computer Generated Letter

PI II

Prevention Index II

PIR

Project Initiation Request

PKI

Public Key Infrastructure

PLAN

Property Management Local Area Network

PLOU

Portfolio Loan Oversight Unit

PMC

Presidential Memorial Certificate

PP&E

Property, Plant & Equipment

PRRTP

Psychiatric Residential Rehabilitation Treatment Program

PTF

Patient Treatment File

PTSD

Post Traumatic Stress Disorder

PULSE

Patient User Local Survey Evaluator

PVA

Paralyzed Veterans of America

QA

Quality Assurance

QAS

Quality-Access-Satisfaction

QuIC

Quality Interagency Coordination Taskforce

R&D

Research and Development

RCA

Root Cause Analysis

REPS

Restored Entitlement Program for Survivors

RLC

Regional Loan Centers

RO

Regional Office

RPO

Regional Processing Office

SCGP

State Cemetery Grants Program

SCI

Spinal Cord Injury

SCI&D

Spinal Cord Injury and Disorders

S-DVI

Service-Disabled Veterans Insurance

SGLI

Servicemembers' Group Life Insurance

SHEP

Survey of Healthcare Experience of Patients

SIPO

Security Infrastructure Protection Office

SIPPs

Special Intensive PTSD Programs

SKIPPES

Skills, Knowledge, and Insurance Practices and Procedures Embedded in Systems

SLMP

Service Loss Mitigation Program

SMC

Strategic Management Council

SQC

Statistical Quality Control

SSA

Social Security Administration

SSN

Social Security Number

STAR

Statistical Technical Accuracy Review

SVES

State Verification and Exchange System

TAP

Transition Assistance Program

TBI

Traumatic Brain Injury

TIMS

The Imaging Management System

TMC

Travel Management Center

TOP

Treasury Offset Program

TPSS

Training and Performance Support Systems

TREASURY

Department of the Treasury (U.S. Treasury)

TRICARE

DoD-Managed Care Support Contract

U.S.C.

United States Code

USGLI

United States Government Life Insurance

USMS

U.S. Marshals Service

VA

Department of Veterans Affairs

VACERT

VA Electronic Education Certification Program

VACOLS

Veterans Appeals Control and Locator System

VAEB

VA Executive Board

VAMC

VA Medical Center

VARO

VA Regional Office

VBA

Veterans Benefits Administration

Acronyms

VCAA

Veterans Claims Assistance Act

VEAP

Veterans Educational Assistance Program

VERA

Veterans Equitable Resource Allocation

VGLI

Veterans' Group Life Insurance

VHA

Veterans Health Administration

VHI

Veterans Health Initiative

VI&I

Veterans' Insurance and Indemnities

VICTARS

Veterans Insurance Claims Tracking and Response System

Vinnie MAC

VA Loan Sales Program

VISN

Veterans Integrated Service Network

VistA

Veterans Health Information Systems & Technology Architecture

VMLI

Veterans' Mortgage Life Insurance

VR&E

Vocational Rehabilitation and Employment

VRI

Veterans' Reopened Insurance

VSLI

Veterans' Special Life Insurance

VSO

Veterans Service Organization

VSR

Veterans Service Representative

VSS

Veterans Service Standard

WAVE

Web Automated Verification of Enrollment

WCP

Workers' Compensation Program

WINRS

Waco, Indianapolis, Newark, Roanoke, Seattle
VR&E Case Management System