

PERFORMANCE MEASURES BY ORGANIZATION AND PROGRAM

In addition to VA's key performance goals, there are other supporting performance measures, identified and discussed in the following tables, by which VA evaluates its success. The tables show available trend data for a 5-year period and associated target levels of performance grouped by organization and program, including the total amount of resources (number of full-time equivalent employees and obligations) for each program. Within each group, the performance measures are structured as follows:

1. *Target was met or exceeded (green);*
2. *Target was not met, but the deviation did not significantly affect goal achievement (yellow);*
3. *Target was not met, and the difference significantly affected goal achievement (red).*

For each measure that resulted in non-achievement of a performance target (highlighted in red), we provide a brief explanation as to why there was a significant deviation between the actual and planned performance level, and identify what steps are being taken to ensure goal achievement in the future.

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 a balanced family of measures, the specific measures vary somewhat from organization to organization, and thus, from program to program. The performance measures for each

organization have been tailored to fit the strategic goals of the programs for which each organization is responsible.

For example, VHA has developed performance measures corresponding to their "6 for 2008" strategic goals:

- put quality first until first in quality;
- provide easy access to medical knowledge, expertise, and care;
- enhance, preserve, and restore patient function;
- exceed patients' expectations;
- maximize resource use to benefit veterans;
- build healthy communities.

VBA has implemented a system of balanced performance measures. This system contains the major service delivery performance measures that mean the most to the veterans we serve, our stakeholders, and our employees:

- timeliness of claims processing;
- accuracy;
- customer satisfaction;
- unit cost;
- employee development.

NCA evaluates its performance in those areas identified by veterans and their family members as being most important to service delivery:

- reasonable access to a burial option in a national or state veterans cemetery;

Performance Measures

- quality of service provided;
- satisfaction with the appearance of national cemeteries as national shrines;
- quality and accuracy of headstones, markers, and Presidential Memorial Certificates;
- access to information about burial benefits and services provided.

Taken together, the measures in the following tables and the Department's key measures demonstrate the balanced view of performance VA uses in assessing how well we are doing in meeting our strategic goals, objectives, and performance targets.

The GPRA program activity structure is somewhat different from the program activity structure shown in the program and financing (P&F) schedules of the President's Budget. However, all of the P&F schedules (budget accounts) have been aligned with one or more of our programs to ensure all VA program activities are covered. The program costs (obligations) represent the total resources available for each of the programs, regardless of which organizational element has operational control of the resources. The performance measures and associated data for each major program apply to the entire group of schedules listed for that program.

Veterans Health Administration Performance Measures

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; 36-5014-0-2-703; 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

FY 1998 FY 1999 FY 2000 FY 2001 FY 2002 Actual FY 2002 Plan

Resources

FTE	188,705	186,595	183,396	186,832	187,583	185,587
Medical care costs (\$ in millions)	\$17,623	\$17,859	\$19,434	\$21,653	\$23,445	\$23,531

Performance Measures

	Goal Achieved					
Percent of patients who use tobacco products	29%	27%	25%	27%	25%	27%
Dollars derived from alternative revenue generated from health care cost recoveries	\$560.1M	\$574M	\$573M	\$771M	\$1,176M	\$1,051M
Percent of all patients evaluated for the risk factors for hepatitis C	N/A	N/A	N/A	Baseline = 51%	85%	56%
Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening	N/A	N/A	N/A	Baseline = 48%	62%	61%
Percent of pharmacy orders entered into CPRS by the prescribing clinician	N/A	N/A	N/A	Baseline = 74%	91%	85%
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	N/A	10% see note	10%

Note - The cumulative amount of excess space eliminated for 2002 is 322,860 sq. ft. This number is expected to reflect at least 10 percent of the total cumulative space of VISN 12 and, hence, meet the goal for 2002. However, the total cumulative excess space for VISN 12 is currently undergoing validation before declaring a final percentage.

Percent of VA-managed Federal Coordinating Centers that complete at least one NDMS casualty reception exercise every three years	N/A	50%	66%	63%	76%	75%
Increase the number and dollar volume of sharing agreements by 10% over the previous year (Baseline = FY 2000):						
DoD Agreements						
Number	N/A	N/A	717	604	622	604
Revenue	N/A	N/A	\$37.1M	\$61M	\$83.4M	\$ 63M

Veterans Health Administration Performance Measures

Medical Care (Continued)	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
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 - indicates total number of VISNs in 2002 were 21)	N/A	N/A	N/A	21	21	21N
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	N/A	21	21N

(N - indicates total number of VISNs in 2002 were 21 due to consolidation of VISN 13 and VISN 14)

	Goal Not Achieved -- Minimal Difference					
Percent of Veterans Service Standard (VSS) problems reported per patient (decrease is intended direction):						
Patient Education	31%	31%	30%	30%	30%	29%
Visit Coordination	19%	16%	15%	16%	17%	15%
Quality-Access-Satisfaction / Cost VALUE Index	4.74	5.12	5.36	6.31	6.70	6.91

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved -- Significant Difference					
Increase the number and dollar volume of sharing agreements by 10% over the previous year (Baseline = FY 2000):						
Non-DoD Agreements						
Number	N/A	N/A	1,136	2,506	2,400	2,600
\$ Purchased	N/A	N/A	\$290M	\$379M	\$412M	\$420M
\$ Sold	N/A	N/A	\$32M	\$49M	\$48M	\$54M

Non-DoD sharing agreements occur when VA has excess capacity. This year, with the surge in increased enrollment, resources were not available to enter into the number of sharing agreements originally planned.

	Baseline Data for New Measure					
Percent of patients with hepatitis C who have annual assessment of liver function	N/A	N/A	N/A	N/A	95%	Baseline

Veterans Health Administration Performance Measures

<i>Special Emphasis Programs</i>	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
	Goal Achieved					
Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) program, or community-based contract residential care (HCHV) program to an independent or a secured institutional living arrangement	N/A	50%	48%	75%	78%	75%
Percent of veterans who obtained employment upon discharge from a (DCHV) program or community-based contract residential care (HCHV) program	54%	55%	51%	51%	64%	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 PR RTP within 30 days of discharge	64%	65%	63%	63%	63% (as of 8/30/02)	63%
Percent of veterans using Vet Centers who report being satisfied with services and say they would recommend the Vet Center to other veterans	N/A	100%	100%	99%	99.7%	95%
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%	55%	52%	53%	55%	55%
Percent of SCI respondents to the Performance Analysis Center of Excellence (PACE) Survey who rate their care as very good or excellent - Outpatient	55%	55%	57%	58%	65%	55% (baseline)
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	N/A	69%	77%	71%
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	N/A	N/A	N/A	64% Baseline	68%	65%
Blind Rehabilitation - Percent change in functional status from admission to discharge from a blind rehabilitation program or unit	N/A	N/A	100%	108%	101% (as of 6/30/02)	90%

Veterans Health Administration Performance Measures

<i>Special Emphasis Programs (continued)</i>	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
Percent of prosthetics orders delayed	2%	2%	1%	1%	1%	2%
Percent of randomly selected admissions to SIPP's programs that are enrolled in the Outcomes Monitoring program	N/A	N/A	N/A	85%	94%	85%

	Goal Not Achieved -- Significant Difference					
Percent of patients in specialized substance abuse treatment settings who have an Addiction Severity Index (ASI) assessment:						
Initial ASI	N/A	56%	60%	77%	75%	83%
Six-month follow-up ASI	N/A	N/A	N/A	23%	Data not available	28%

The target was not met because the ability to easily identify the patient where an initial Addiction Severity Index (ASI) is applicable was difficult for this patient population as there is movement within facilities and patients return to care at differing intervals after a relapse. An electronic 'patient locator' function was developed to assist with this problem but not until mid-year.

Percent increase in number of enrolled veterans who have access to home and community-based care when clinically appropriate (2000 baseline = ADC of 14,111)	N/A	N/A	N/A	14%	34%	55%
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Providing care in home- and community-based settings for veterans with complex, chronic diseases rather than institutions will reduce the total cost of care while honoring veteran preferences and improving quality of life. Despite a significant economic incentive for home-based primary care under the Veteran's Equitable Resource Allocation (VERA) system, the delay of 2 years in VERA funding and the uncertainty of future funding derivations under VERA made this area unclear during 2002 as to how best to proceed. The Office of Geriatrics and Extended Care has outlined an action plan to improve the incentives to expand home care and community based services in the future.

Veterans Health Administration Performance Measures

Medical Education

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

FY 1998 FY 1999 FY 2000 FY 2001 FY 2002 Actual FY 2002 Plan

Resources

Education costs (\$ in millions)	\$933	\$902	\$884	\$898	\$923	\$953
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Performance Measure

	Goal Achieved					
Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experiences	N/A	N/A	N/A	84	83	81

Medical Research

P&F ID Codes: 36-0160-0-1-703; 36-016-0-1-703; 36-406-0-3-703

FY 1998 FY 1999 FY 2000 FY 2001 FY 2002 Actual FY 2002 Plan

Resources

FTE	2,758	2,974	3,014	3,019	3,096	2,983
Research costs (\$ in millions)	\$725	\$779	\$830	\$877	\$963	\$969

Performance Measure

	Goal Achieved					
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	N/A	14	16	15

Veterans Benefits Administration Performance Measures

Compensation and Pension

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

FY 1998 FY 1999 FY 2000 FY 2001 FY 2002 Actual FY 2002 Plan

Resources

FTE	6,770	6,841	7,123	8,035	8,955	8,656
Benefits costs (\$ in millions)	\$20,242	\$21,112	\$22,054	\$23,277	\$25,665	\$24,900
Administrative costs (\$ in millions)	\$491	\$549	\$586	\$706	\$759	\$809

Performance Measures

	Goal Achieved					
Rating related actions - average days pending	119	144	138	182	174	186
National accuracy rate (authorization work)	70%	63%	51%	62%	79%	63%
National accuracy rate (fiduciary work)	51%	48%	60%	68%	82%	70%
Fiduciary Activities - Complete Initial Appointments & Fiduciary Exams (% not timely completed)	N/A	N/A	6%	12%	9%	9%

	Goal Not Achieved -- Significant Difference					
Overall satisfaction	57%	57%	56%	56%	56%	60%

* Survey data were collected in FY 2001, analyzed and available in FY 2002.

Customer satisfaction is a lagging indicator that reflects our level of timeliness and quality. Although quality improved this year, timeliness did not. We expect satisfaction to improve as we realize improvements from recently implemented initiatives (such as a new award processing system, a more manageable workflow process, and more "user friendly" letters for communicating with veterans). For additional information on timeliness and quality refer to pages 48-53.

Non-rating actions - average days to process	32	44	50	55	60	52
Non-rating actions - average days pending	74	94	84	117	96	82

For the two measures above, heavy emphasis was placed on processing rating claims and the reduction of the respective backlog during FY 2002. In so doing, resources that could have been focused solely on these issues were diverted to assist with the rating backlog. The pension centers and workload management structure under the Claims Processing Incentive should help to bring the figures to goal in FY 2003.

Veterans Benefits Administration Performance Measures

Compensation and Pension (Continued) FY 1998 FY 1999 FY 2000 FY 2001 FY 2002 Actual FY 2002 Plan

Telephone activities - abandoned call rate	13%	9%	6%	6%	9%	4%
Telephone activities - blocked call rate	52%	27%	3%	3%	7%	4%

For the two measures above, heavy emphasis was placed on processing rating claims and the reduction of the respective backlog during FY 2002. In so doing, resources that could have been focused solely on these issues were diverted to assist with the rating backlog. Thus, there were a reduced number of resources dedicated to the customer service aspect of the claims process.

Pending Initial Appointments & Fiduciary Exams (% not timely completed)	N/A	N/A	N/A	N/A	16%	11%
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The pending initial exams measure was added to the balanced scorecard for the first time in FY 2002 to ensure that stations worked their older cases. Prior to that time, there was no penalty for a station if they carried an abnormally large inventory of older cases. At the same time both pending and completed examinations have increased since the beginning of the fiscal year in part due to the repeal of the Estate Limitation Law. This change in law was not considered when determining the goal for 2002. Since the majority of these claims have now been worked, we expect that stations will be able to make their goals in the following fiscal year.

The indicators below are the component end-products for the measure on average days to complete rating-related actions. We do not establish separate performance goals for these indicators. For a detailed discussion of rating-related actions timeliness, see the narrative on pages 48 to 53.

	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002	Claims Completed in FY 2002
Average days to process rating-related actions	128	166	173	181	223	796,814
Initial disability compensation	168	205	212	219	253	172,922
Initial death compensation/ DIC	89	111	122	133	172	29,973
Reopened compensation	141	182	189	197	242	467,589
Initial disability pension	94	112	115	130	123	39,553
Reopened pension	88	113	111	126	128	63,998
Reviews, future exams	61	104	108	119	127	15,867
Reviews, hospital	52	73	78	91	74	6,912

Veterans Benefits Administration Performance Measures

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

Resources	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
FTE	927	849	781	852	864	942
Benefits costs (\$ in millions)	\$891	\$1,210	\$1,197	\$1,387	\$1,691	\$1,974
Administrative costs (\$ in millions)	\$66	\$70	\$66	\$64	\$75	\$89

Performance Measures

	Goal Achieved					
Compliance survey completion rate	80%	98%	94%	92%	93%	90%
Customer satisfaction-high ratings (Education)	76%	78%	78%	82%	86%	82%
Telephone Activities - Abandoned call rate (Education)	N/A	N/A	17%	13%	11%	11%
Employee job satisfaction (Education)	N/A	2.8	3.3	3.3	3.3	3.3

	Goal Not Achieved - - Minimal Difference					
Payment accuracy rate	94%	94%	96%	92%	93%	94%
Telephone Activities - Blocked call rate (Education)	60%	16%	39%	45%	26%	20%

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

Veterans Benefits Administration Performance Measures

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

	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
Resources						
FTE	919	972	940	1,061	1,057	1,178
Benefits costs (\$ in millions)	\$406	\$412	\$439	\$427	\$487	\$441
Administrative costs (\$ in millions)	\$68	\$72	\$81	\$109	\$119	\$127

Performance Measures

	Goal Achieved					
Employment timeliness in average days	83	53	42	38	41	50
Employee development (Voc Rehab)	N/A	N/A	N/A	N/A	74%	67%

	Goal Not Achieved -- Minimal Difference					
Speed of entitlement decisions in average days	88	88	75	62	65	60
Accuracy of decisions (entitlement)	N/A	86%	89%	93%	91%	92%
Accuracy of decisions (fiscal)	N/A	94%	94%	86%	88%	92%
Serious Employment Handicap (SEH) rehabilitation rate	N/A	49%	62%	64%	62%	64%
Customer satisfaction (Access)	N/A	N/A	76%	76%	77%	79%
Customer satisfaction (Survey)	N/A	N/A	76%	74%	76%	80%
Accuracy of program outcome	N/A	N/A	N/A	N/A	81%	84%
Employee satisfaction (Voc Rehab)	N/A	N/A	N/A	3.5	3.5	3.6

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved -- Significant Difference					
Accuracy of decisions (services)	85%	87%	86%	79%	81%	87%

The program initially set a very aggressive/stretch goal for this performance measure. While the program did not meet the FY 2002 goal, this measure did demonstrate improvement over FY 2001. The performance measure was impacted by the many improvements and initiatives, such as the first year of utilizing Corporate WINRS, Case Management, and Employment Specialist programs being deployed during the same time period as VR&E projected to reach this performance measure.

Veterans Benefits Administration Performance Measures

Housing

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

Resources	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
FTE	2,075	2,108	2,057	1,759	1,718	1,780
Benefits costs (\$ in millions)	\$1,676	\$1,811	\$1,866	\$540	\$874	\$986
Administrative costs (\$ in millions)	\$161	\$160	\$157	\$162	\$167	\$165

Performance Measures

	Goal Achieved					
Lender satisfaction	67%	67%	74%	74%	91%	76%
Property holding time (months)	N/A	6.7	N/A	8.2	8.5	9
Statistical quality index	N/A	N/A	94%	96%	97%	96%
Return on sale	99%	101%	N/A	108%	108%	100%

	Goal Not Achieved -- Minimal Difference					
Veterans satisfaction	90%	93%	93%	93%	93%	94%

The performance goal for this measure was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

Veterans Benefits Administration Performance Measures

Insurance

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

	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
Resources						
FTE	563	548	525	507	479	520
Benefits costs (\$ in millions)	\$2,687	\$2,559	\$2,458	\$2,534	\$2,709	\$2,755
Administrative costs (\$ in millions)	\$40	\$40	\$40	\$41	\$40	\$42

Performance Measures

	Goal Achieved					
High customer ratings (Insurance)	95%	96%	96%	96%	95%	95%
Percent of blocked calls (Insurance)	17%	6%	4%	3%	1%	4%
Average hold time in seconds	35	20	20	17	18	20
Employee skills matrix (Insurance)	N/A	N/A	N/A	88%	88%	87%
Favorable IG audit opinion (Insurance)	Y	Y	Y	Y	Y	Y

	Goal Not Achieved -- Minimal Difference					
Employee satisfaction (Insurance)	N/A	N/A	3.3	3.3	3.6	3.8
Low customer ratings (Insurance)	2%	1%	2%	2%	3%	2%
Percent of insurance disbursements paid accurately	99%	99%	99%	99%	98%	99%

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

National Cemetery Administration Performance Measures

Burial

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

Resources	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
FTE	1,328	1,357	1,399	1,385	1,454	1,460
Benefits costs (\$ in millions)	\$114	\$106	\$109	\$111	\$134	\$140

Administrative costs (\$ in millions):

Operating costs	\$84	\$92	\$103	\$116	137	\$130
State cemetery grants	\$6	\$5	\$19	\$24	41	\$42
Capital construction	\$79	\$21	\$30	\$33	61	\$109

Performance Measures

	Goal Achieved					
Cumulative number of kiosks installed at national and state veterans cemeteries	6	14	24	33	42	40
Percent of monuments ordered on-line by other federal and state veterans cemeteries using AMAS-R	N/A	65%	87%	89%	89%	89%
Percent of individual headstone and marker orders transmitted electronically to contractors	85%	88%	89%	92%	92%	92%
Percent of Presidential Memorial Certificates that are accurately inscribed	98%	98%	98%	98%	98%	98%
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence	N/A	10.3%	5.1%	6.6%	7.3%	7.2%

	Goal Not Achieved - - Minimal Difference					
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence	N/A	56.7%	67.5%	66.0%	66.6%	66.7%
Percent of headstones and markers that are undamaged and correctly inscribed	95%	95%	97%	97%	96%	97%

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

Board of Veterans' Appeals Performance Measures

P&F ID Code: 36-0151-0-1-705

Resources

	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
FTE	483	478	468	455	448	464
Administrative costs (\$ in millions)	\$38	\$40	\$41	\$44	\$47	\$47

Performance Measures

	Goal Achieved					
BVA Cycle Time	197	140	172	182	86	125

	Goal Not Achieved -- Minimal Difference					
Deficiency-free decision rate	89%	84%	86%	87%	88%	91%
Court remand rate	58%	65%	61%	97%	82%	80%

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved - - Significant Difference					
Appeals resolution time (days)	686	745	682	595	731	590

This measure begins with the receipt of the NOD and ends when a final decision has been rendered, it is not just a Board measure but a VA measure. The enactment of Public Law 106-475, the Veterans Claims Assistance Act of 2000 (VCAA) in November 2000, required the Board to remand almost half of its case dispositions to regional offices in order for the new law to be applied and ensure claimants' due process rights. Also, cases pending at the Court were remanded to the Board for further remand to the appropriate regional offices. Remands delay not only the individually affected cases, but, because by law we must process the oldest cases first, processing of newer appeals is delayed when remanded appeals are returned for readjudication. This large volume of additional remand caseload along with the expected increase in development time required for cases currently under consideration, resulted in an inevitable increase in the appeals resolution time. In February 2002, the Board began developing cases instead of remanding them to the regional offices. It is too early to tell how much time this will reduce the appeals resolution time but we believe it will have a positive impact.

Appeals decided per FTE	80.5	78.2	72.7	69.3	38.4	61.1
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As a result of enactment of the VCAA, regional offices readjudicated many cases and consumed additional time in development of current and new claims. Therefore, the number of appeals being forwarded to the Board was drastically reduced. A reduction in case receipts coupled with the startup of case development by the Board resulted in fewer decisions being produced. Neither of these occurrences was foreseen at the time of the Board's initial performance plan. The appeals receipts are now back to near historic rates.

Cost per case (BVA)	\$965	\$1,062	\$1,219	\$1,401	\$2,702	\$1,666
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The increase in the cost per case is attributable to the reduction in the number of decisions produced as explained under "Appeals decided per FTE."

Office of Inspector General Performance Measures

P&F ID Code: 36-0170-0-1-705

Resources	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002 Actual	FY 2002 Plan
	FTE	322	342	354	370	393
Administrative costs (\$ in millions)	\$33	\$38	\$45	\$48	\$56	\$55

Performance Measures

	Goal Achieved					
Number of reports issued	171	162	108	136	169	160
Value of monetary benefits (\$ in millions) from:						
- IG investigations	\$17	\$24	\$28	\$52	\$85	\$30
- IG audit and health care inspection reviews	\$468	\$610	\$254	\$4,088	\$730	\$643
- IG contract reviews	\$250	\$47	\$35	\$42	\$62	\$48

	Goal Not Achieved -- Significant Difference					
Number of indictments, arrests, convictions, and administrative sanctions	366	696	938	1,655	1,621	1,675

The reactive nature of investigative work also means that accomplishments are dependent not only on our efforts, but those of the Assistant U.S. Attorneys who decide whether or not to accept cases, and who work to indict and convict. Not all efforts result in indictments and convictions. Not all cases require similar amounts of work or yield similar results. As happened this year, some cases yield extremely large financial benefits. We have also had several lengthy, complex cases involving murder of veteran patients, which have no monetary impact, but, does have great priority for us.

