

Performance Measures Tables

The following tables display our key and supporting measures both by strategic goal and objective, and by organization and program.

For each measure, we show available trend data for 5 years. The actual result is designated as follows:

- Target was met or exceeded (green or G).
- Target was not met, but the deviation did not significantly affect goal achievement (yellow or Y).
- Target was not met, and the difference significantly affected goal achievement (red or R).

For each "red" measure (in the table of measures by program), we provide a brief explanation of why there was a significant deviation between the actual and planned performance level, and we briefly identify the steps being taken to ensure goal achievement in the future. We will publish final data in the FY 2006 Congressional budget and/or the FY 2005 Performance and Accountability Report.

The table showing measures by organization and program includes the total amount of resources (FTE and obligations) for each program. 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 have been aligned with one or more of our programs to ensure all VA program activities are covered. The program costs (obligations) represent the estimated 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.

VA uses the balanced measures concept to monitor program and organizational performance. We examine and regularly monitor several different types of measures to provide a more comprehensive and balanced view of how well we are performing. Taken together, the measures demonstrate the balanced view of performance we use to assess how well we are doing in meeting our strategic goals, objectives, and performance targets.

VA continues working to ensure the quality and integrity of our data. The Key Measures Data Table starting on page 130 provides the definition, data source, frequency of collection, any data limitations, and the method of verification and validation for each key measure. The Assessment of Data Quality beginning on page 120 provides an overall view of how our programs verify and validate data for all of the measures. Definitions for the supporting measures are located in Part IV beginning on page 284.

Strategic Goals, Objectives, and Performance Measures
 (Explanations of performance are found in the Performance Measures by Program table)
 (Key Measures are in bold)
 (G = Green; Y = Yellow; R = Red)

Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
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Strategic Goal 1: Restore the capability of veterans with disabilities to the greatest extent possible and improve the quality of their lives and that of their families.

Objective 1.1: Maximize the physical, mental, and social functioning of veterans with disabilities and be recognized as a leader in the provision of specialized health care services.

Prevention Index II (Special Populations) (through June)	N/A	N/A	N/A	80%	* 86% G	80%
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 (through June)	N/A	N/A	65%	72%	* 79% G	67%

Objective 1.2: Provide timely and accurate decisions on disability compensation claims to improve the economic status and quality of life of service-disabled veterans.

Average number of days to obtain service medical records (Comp)	N/A	N/A	N/A	N/A	N/A	TBD
Percent of compensation recipients who were kept informed of the full range of available benefits (Comp) (a) Results will not be available until 2005	37%	39%	40%	42%	(a)	40%
Percent of compensation recipients who perceive that VA compensation redresses the effect of service-connected disability in diminishing the quality of life (Comp)	N/A	N/A	N/A	N/A	** TBD	50%
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans (Comp)	N/A	N/A	N/A	N/A	** TBD	TBD
National accuracy rate (core rating work) (Compensation & Pension) (through July)	N/A	89%	81%	86%	* 87% Y	90%
Overall satisfaction (Compensation & Pension) (a) Results will not be available until 2005	56%	56%	58%	59%	(a)	70%
Rating-related actions - average days to process (Compensation & Pension)	173	181	223	182	166 R	145
Rating-related actions - average days pending (Compensation & Pension)	138	182	174	111	118 R	80
Non-rating actions - average days to process (Compensation & Pension)	50	55	60	59	58 R	40
Non-rating actions - average days pending (Compensation & Pension)	84	117	96	108	102 R	62
National accuracy rate (authorization work) (Compensation & Pension) (through July)	51%	65%	80%	88%	* 91% G	87%

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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
National accuracy rate (fiduciary work) (Compensation & Pension) (through July) (1) Correction	(1) 59%	(1) 68%	(1) 84%	77%	* 81% Y	88%
Telephone activities - abandoned call rate (Compensation & Pension) (through August)	6%	6%	9%	9%	* 7% Y	3%
Telephone activities - blocked call rate (Compensation & Pension)	3%	3%	7%	3%	2% G	3%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (completed) (%) (Compensation & Pension) (1) Correction	(1) 6%	(1) 13%	(1) 9%	11%	12% Y	8%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (pending) (%) (Compensation & Pension)	N/A	N/A	16%	20%	14% Y	12%
Appeals resolution time (Days) (Joint measure with C&P) (BVA)	682	595	731	633	529 Y	520
Deficiency-free decision rate (BVA)	86%	87%	88%	89%	93% G	91%
BVA Cycle Time (Days)	172	182	86	135	98 G	155
Appeals decided per Veterans Law Judge (BVA)	594	561	321	604	691 G	619
Cost per case (BVA)	\$1,219	\$1,401	\$2,702	\$1,493	\$1,302 G	\$1,444
** Pending Program Outcome Study. Study was cancelled in 2004 because of the new Disability Compensation Commission. Study will be conducted in CY 2005. The Commission first met in August 2004 and the results are tentatively expected 15 months thereafter.						

Objective 1.3: Provide all service-disabled veterans with the opportunity to become employable and obtain and maintain suitable employment, while providing special support to veterans with serious employment handicaps.

Speed of entitlement decisions in average days (VR&E)	75	62	65	63	57 G	60
Accuracy of decisions (Services) (VR&E) (1) Correction	85%	79%	81%	(1) 82%	86% Y	90%
Accuracy of program outcome (VR&E)	N/A	N/A	81%	81%	94% G	92%
Rehabilitation rate (VR&E)	65%	65%	62%	59%	62% Y	67%
Customer satisfaction (Survey) (VR&E) (a) Results will not be available until 2005	74%	76%	77%	N/A	(a)	82%

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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Common Measures						
Percent of participants employed first quarter after program exit (VR&E)	N/A	N/A	N/A	N/A	N/A	TBD
Percent of participants still employed three quarters after program exit (VR&E)	N/A	N/A	N/A	N/A	N/A	TBD
Percent change in earnings from pre-application to post-program employment (VR&E)	N/A	N/A	N/A	N/A	N/A	TBD
Average cost of placing participant in employment (VR&E)	N/A	N/A	N/A	N/A	N/A	TBD

Objective 1.4: Improve the standard of living and income status of eligible survivors of service-disabled veterans through compensation, education, and insurance benefits.

Average days to process - DIC actions (Comp) (1) Correction	122	133	172	(1) 153	125 G	126
Percent of DIC recipients above the poverty level (Comp)	N/A	N/A	N/A	N/A	99% G	75%
Percent of DIC recipients who are satisfied that the VA recognized their sacrifice (Comp)	N/A	N/A	N/A	N/A	80% G	50%

Strategic Goal 2: Ensure a smooth transition for veterans from active military service to civilian life.

Objective 2.1: Ease the reentry of new veterans into civilian life by increasing awareness of, access to, and use of VA health care, benefits, and services.

Percent of claimants who are Benefits Delivery at Discharge (BDD) participants (Comp)	N/A	N/A	N/A	22%	20% Y	25%
Percent of VA medical centers that provide electronic access to health information provided by DoD on separated service persons (estimated actual)	N/A	N/A	0%	100%	* 100% G	100%

Objective 2.2: Provide timely and accurate decisions on education claims and continue payments at appropriate levels to enhance veterans' and servicemembers' ability to achieve educational and career goals.

Montgomery GI Bill usage rate: All program participants (Education)	57%	58%	56%	58%	59% Y	60%
Montgomery GI Bill usage rate: Veterans who have passed their 10-year eligibility period (Education)	N/A	N/A	N/A	66%	66% G	66%

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Compliance survey completion rate (Education) (1) Correction	94%	92%	93%	(1) 93%	94% G	90%
Customer satisfaction-high ratings (Education) (a) Results will not be available until 2005	82%	86%	87%	89%	(a)	87%
Telephone Activities - Blocked call rate (Education)	39%	45%	26%	13%	20% Y	18%
Telephone Activities - Abandoned call rate (Education)	17%	13%	11%	7%	10% Y	8%
Payment accuracy rate (Education)	96%	92%	93%	94%	94% G	94%
Average days to complete original education claims	36	50	34	23	26 Y	24
Average days to complete supplemental education claims	22	24	16	12	13 Y	12

Objective 2.3: Improve the ability of veterans to purchase and retain a home by meeting or exceeding lending industry standards for quality, timeliness, and foreclosure avoidance.

Veterans satisfaction (Housing) (1) Correction (a) Results will not be available until 2005	(1) 94%	(1) 94%	(1) 94%	(1) 95%	(a)	96%
Statistical quality index (Housing) (through August) (1) Correction	94%	96%	97%	(1) 98%	* 98% G	97%
Foreclosure avoidance through servicing (FATS) ratio (Housing) (1) Correction	30%	40%	43%	(1) 45%	44% Y	47%
Home Purchase - Percent of active duty personnel and veterans that could not have purchased a home without VA assistance (Housing)	N/A	N/A	N/A	N/A	N/A	N/A

Strategic Goal 3: Honor and serve veterans in life and memorialize them in death for their sacrifices on behalf of the Nation.

Objective 3.1: Provide high-quality, reliable, accessible, timely, and efficient health care that maximizes the health and functional status for all enrolled veterans, with special focus on veterans with service-connected conditions, those unable to defray the cost, and those statutorily eligible for care.

Percent of patients rating VA health care service as very good or excellent:						
Inpatient (through March)	66%	64%	70%	(1) 74%	* 74% G	70%
Outpatient (through March) (1) Correction	64%	65%	71%	(1) 73%	* 72% G	72%
Average waiting time for new patients seeking primary care clinic appointments (in days) (through June)	N/A	N/A	N/A	42	* 37 Y	30
Average waiting time for patients seeking a new specialty clinic appointment (in days) (through June)	N/A	N/A	N/A	45	* 41 Y	30

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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Percent of primary care appointments scheduled within 30 days of desired date (through June)	N/A	87%	89%	93%	* 94% G	93%
Percent of specialist appointments scheduled within 30 days of desired date (1) results as of 9/30, (2) reflects cum. for year, (3) 8 clinical areas now included instead of 5 (through June)	N/A	(1) 84%	(1) 86%	(2) 89%	* (3) 93% G	(3) 90%
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities (through March)	N/A	63%	65%	67%	* 69% G	65%
Average waiting time for next available appointment in primary care clinics (in days) (through June)	N/A	37.5	37	25	* 18 G	34
Average waiting time for next available appointment in specialty clinics (in days) (through June)	N/A	N/A	N/A	45	* 27 G	30
Percent of all patients evaluated for the risk factors for hepatitis C (through June)	N/A	51%	85%	95%	* 98% G	90%
Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening (through June)	N/A	48%	62%	84%	* 97% G	85%
Clinical Practice Guidelines Index (through June)	N/A	N/A	Baseline	70%	* 77% G	70%
Prevention Index II (through June)	N/A	80%	82%	83%	* 88% G	82%
Percent of clinical software patches installed on time:						
CPRS (through June)	N/A	67%	70%	96%	* 98% G	72%
BCMA (through June)	N/A	82%	85%	94%	* 96% G	87%
Imaging (through June)	N/A	57%	60%	88%	* 89% G	62%
Increase non-institutional long-term care as expressed by average daily census (estimated actual)	N/A	N/A	24,126	24,413	* 29,631 G	29,631
Percent of outpatient encounters that have electronic progress notes signed within 2 days (through June)	N/A	N/A	N/A	N/A	* 84%	Baseline
Quality - The percentage of diabetic patients taking the HbA1c blood test in the past year (through June)	N/A	N/A	93%	94%	* 95% G	93%

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Objective 3.2: Process pension claims in a timely and accurate manner to provide eligible veterans and their survivors a level of income that raises their standard of living and sense of dignity.

Percent of pension recipients who were informed of the full range of available benefits (Pension) (a) Results will not be available until 2005	39%	40%	38%	39%	(a)	40%
Percent of pension recipients who said their claim was very or somewhat fair (Pension) (a) Results will not be available until 2005	64%	63%	65%	62%	(a)	53%
National accuracy rate (core rating work) (Compensation & Pension) (through July)	N/A	89%	81%	86%	* 87% Y	90%
Overall satisfaction (Compensation & Pension) (a) Results will not be available until 2005	56%	56%	58%	59%	(a)	70%
Rating-related actions - average days to process (Compensation & Pension)	173	181	223	182	166 R	145
Rating-related actions - average days pending (Compensation & Pension)	138	182	174	111	118 R	80
Non-rating actions - average days to process (Compensation & Pension)	50	55	60	59	58 R	40
Non-rating actions - average days pending (Compensation & Pension)	84	117	96	108	102 R	62
National accuracy rate (authorization work) (Compensation & Pension) (through July)	51%	65%	80%	88%	* 91% G	87%
National accuracy rate (fiduciary work) (Compensation & Pension) (through July) (1) Correction	(1) 59%	(1) 68%	(1) 84%	77%	* 81% Y	88%
Telephone activities - abandoned call rate (Compensation & Pension) (through August)	6%	6%	9%	9%	* 7% Y	3%
Telephone activities - blocked call rate (Compensation & Pension)	3%	3%	7%	3%	2% G	3%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (completed) (%) (Compensation & Pension) (1) Correction	(1) 6%	(1) 13%	(1) 9%	11%	12% Y	8%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (pending) (%) (Compensation & Pension)	N/A	N/A	16%	20%	14% Y	12%

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Objective 3.3: Maintain a high level of service to insurance policy holders and their beneficiaries to enhance the financial security for veterans' families.

High customer ratings (Insurance)	96%	96%	95%	95%	96% G	95%
Low customer ratings (Insurance)	2%	2%	3%	3%	2% G	2%
Percentage of blocked calls (Insurance)	4%	3%	1%	0%	1% G	2%
Average hold time in seconds (Insurance)	20	17	18	17	17 G	20
Average days to process insurance disbursements	3.2	2.8	2.6	2.4	1.8 G	2.7

Objective 3.4: 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 (NCA)	72.6%	72.6%	73.9%	75.2%	75.3% G	75.3%
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence (NCA)	67.5%	66.0%	66.6%	66.6%	66.6% G	66.6%
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence (NCA)	5.1%	6.6%	7.3%	8.6%	8.7% G	8.7%
National Accuracy Rate for burial claims processed (Data tracked by VBA) (through July)	62%	72%	85%	92%	* 94% G	90%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent (NCA)	88%	92%	91%	94%	94% Y	95%
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours (NCA)	N/A	75%	73%	73%	73% Y	75%

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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Cumulative number of kiosks installed at national and state veterans cemeteries (NCA)	24	33	42	50	60 G	60
Average number of days to process a claim for reimbursement of burial expenses (Data tracked by VBA)	35	40	48	42	48 Y	40

Objective 3.5: 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 (NCA)	N/A	N/A	49%	72%	87% G	78%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete (NCA)	N/A	N/A	N/A	N/A	98%	Baseline
Percent of headstones and markers that are undamaged and correctly inscribed (NCA)	97%	97%	96%	97%	97% Y	98%
Percent of headstones and markers ordered online by other federal and state veterans cemeteries using BOSS (NCA)	87%	89%	89%	90%	91% G	90% G
Percent of individual headstone and marker orders transmitted electronically to contractors (NCA)	89%	92%	92%	95%	100% G	97%
Percent of Presidential Memorial Certificates that are accurately inscribed (NCA)	98%	98%	98%	99%	99% G	99%

Strategic Goal 4: Contribute to the public health, emergency management, socioeconomic well-being, and history of the Nation.

Objective 4.1: Improve the Nation's preparedness for response to war, terrorism, national emergencies, and natural disasters by developing plans and taking actions to ensure continued service to veterans as well as support to national, state, and local emergency management and homeland security efforts.

Percent of Group 1 emergency preparedness officials who receive training or, as applicable, who participate in exercises relevant to VA's COOP plan on the National level (OPP&P)	30%	60%	60%	75%	100% G	85%
Percent of Group 2 emergency preparedness officials who receive training or, as applicable, who participate in exercises relevant to VA's COOP plan on the National level (OPP&P)	N/A	N/A	60%	65%	42% R	75%

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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Objective 4.2: Advance VA medical research and development programs that address veterans' needs, with an emphasis on service-connected injuries and illnesses, and contribute to the Nation's knowledge of disease and disability.						
Number of Career Development Awardees	195	193	209	210	229 Y	237
Sustain 2002 level of partnering opportunities with: Veterans Service Organizations; other Federal Agencies; non-profit foundations, e.g., American Heart Association, American Cancer Society; and private industry, e.g., pharmaceutical companies (estimated actual)	137	139	139	139	* 139 G	139
Objective 4.3: Sustain partnerships with the academic community that enhance the quality of care to veterans and provide high-quality educational experiences for health care trainees.						
Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience (through June)	N/A	84	83	83	* 83 G	82
Objective 4.4: Enhance the socioeconomic well-being of veterans, and thereby the Nation and local communities, through veterans' benefits; assistance programs for small, disadvantaged, and veteran-owned businesses; and other community initiatives.						
Attainment of statutory minimum goals for small business concerns as a percent of total procurement (OSDBU) (1) Correction	33%	(1) 32.6%	(1) 31.2%	31.8%	N/A	23%
Objective 4.5: 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 (NCA)	82%	96%	97%	97%	98% G	98%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need (NCA)	N/A	97%	98%	97%	97% Y	98%
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment (NCA)	N/A	N/A	N/A	N/A	64%	Baseline
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations (NCA)	N/A	N/A	N/A	N/A	76%	Baseline

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Enabling Goal: Deliver world-class service to veterans and their families by applying sound business principles that result in effective management of people, communications, technology, and governance.

Objective E-1: Recruit, develop, and retain a competent, committed, and diverse workforce that provides high-quality service to veterans and their families.

Percent of cases using alternate dispute resolution (ADR) techniques (BCA)	13%	29%	54%	58%	60% Y	70%
Percent of employees who are aware that ADR is an option for addressing workplace disputes (BCA)	70%	75%	80%	85%	90% G	80%

Objective E-2: Improve communications with veterans, employees, and stakeholders about the Department's mission, goals, and current performance as well as the benefits and services VA provides.

Participation rate in the monthly Minority Veterans Program Coordinators (MVPC) conference call (Center for Minority Veterans) (1) Correction	27%	20%	30%	(1) 60%	70% Y	75%
Increase the percent of funded grants providing services to homeless veterans that are faith-based (OPIA)	N/A	N/A	N/A	30%	30% Y	33%

Objective E-3: 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.

Number of business lines transformed to achieve a secure veteran-centric delivery process that would enable veterans and their families to register and update information, submit claims or inquiries, and obtain status (IT)	N/A	N/A	N/A	N/A	0 R	2
Percent increase in the annual IT budget above the previous year's budget (excluding pay raise and inflation increases) (IT)	N/A	N/A	N/A	0%	3.1% Y	0%

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Percent decrease of annual IT budget spent on sustainment, shifting corresponding savings to modernization (zero sum gain) (IT)	N/A	N/A	N/A	5%	1.5% Y	5%

Objective E-4: Improve the overall governance and performance of VA by applying sound business principles, ensuring accountability, and enhancing our management of resources through improved capital asset management; acquisition and competitive sourcing; and linking strategic planning, budgeting, and performance planning.

Dollar value of 1st party and 3rd party collections:						
1st Party (\$ in millions)	\$176	\$231	\$486	\$685	\$742 Y	\$792
Dollar value of 1st party and 3rd party collections:						
3rd Party (\$ in millions) (1) (Correction)	\$397	\$540	(1) \$690	\$804	\$960 G	\$917
Acute Bed Days of Care (BDOC)/1000 (estimated actual)	1,002	895	900	1,000	* 1,000 G	1,000
Outpatient visits/1000:						
Med/Surg (estimated actual)	2.7	2.4	2.4	2.4	* 2.4 G	2.4
Mental Health (estimated actual)	8.4	8.1	8.1	8.1	* 8.1 G	8.1
Ratio of collections to billings (expressed as a percentage) (estimated actual)	28%	31%	37%	41%	* 41% G	41%
Cost - Obligations per unique patient user	N/A	N/A	\$4,928	\$5,202	\$5,562 Y	\$5,536
Efficiency - Average number of appointments per year per FTE	N/A	N/A	2,719	2,856	2,868 G	2,700
Dollar value of sharing agreements with DoD (Joint Measure with VBA) (\$ in millions)	N/A	\$58	\$83	\$105	\$120 G	\$116
Percent increase of EDI usage over base year of 1997 (OM)	86%	178%	235%	320%	884% G	245%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0
Number of material weaknesses identified during the Annual Financial Statement Audit or Identified by Management (OM)	11	12	6	5	4 G	4
Cumulative % of commercially eligible FTE on which competitive sourcing studies are completed (OPP&P)	N/A	N/A	5%	12%	0% R	53%

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

Strategic Goals, Objectives, and Performance Measures
(Explanations of performance are found in the Performance Measures by Program table)
(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Decrease underutilized space from FY 03 baseline of 19,930,244 sq ft (OAEM)	N/A	N/A	N/A	Baseline	28,994,639	TBD
Decrease vacant space from FY 03 baseline of 8,874,544 sq ft (OAEM)	N/A	N/A	N/A	Baseline	8,536,758	TBD
Reduce facility energy consumption relative to a 1985 baseline (OAEM)	N/A	N/A	N/A	N/A	TBD	TBD
(1) Number of indictments, arrests, convictions, administrative sanctions, and pretrial diversions:	1,361	1,655	1,621	1,894	2,016 G	1,950
Number of Arrests	338	401	452	624	741	493
Number of Indictments	280	376	357	349	397	460
Number of Convictions	247	337	331	417	332	422
Number of Administrative Sanctions	496	541	481	484	522	575
Number of Pretrial Diversions	N/A	N/A	N/A	20	24	Baseline
Number of Reports issued:	124	136	169	(2) 182	(3) 223 G	208
Combined Assessment Reviews (CAPs) - -Total	18	26	33	42	52	60
VHA CAPs	18	22	21	34	40	48
VBA CAPs	0	4	12	8	12	12
Audit Reports	35	26	26	24	24	29
Pre-and Post-Award Contract Reviews	40	48	60	65	105	62
Healthcare Inspection Reports	15	22	37	24	26	42
Administrative Investigations	16	14	12	21	11	15
Value of monetary benefits (\$ in millions) from:					(4) \$3,121 G	\$884
IG Investigations	\$28	\$52	\$85	\$64	\$301	\$45
IG audits	\$264	\$4,095	\$730	\$8	\$2,104	\$775
IG contract reviews	\$35	\$42	\$62	\$82	\$661	\$64
Customer Satisfaction:					4.6 Y	4.8
Combined Assessment Program Reviews	N/A	N/A	4.4	4.1	4.5	4.7
Investigations	4.6	4.8	4.8	4.9	4.9	5.0
Audit	4.4	4.2	4.3	4.2	4.6	4.5
Contract Reviews	4.9	4.7	4.9	4.5	4.6	4.9
Healthcare Inspections	4.4	4.2	4.7	4.4	4.4	4.9
<p>(1) In FY 2000, the cumulative figure for this category included the 85 administrative sanctions obtained by the OIG Hotline Division, while the individual figure for administrative sanctions showed only those obtained by the Office of Investigations. (Since FY 2001, the Hotline Division administrative sanctions have been included in both figures.)</p> <p>(2) Includes 5 CAP summary reports that are not counted in the CAP total and 1 joint review with DoD.</p> <p>(3) Includes 3 CAP summary reports that are not counted in the CAP total and 2 joint reviews completed by OIG Offices of Investigation, Audit, and Healthcare Inspections.</p> <p>(4) This figure includes monetary benefits produced by the OIG Office of Healthcare Inspections and OIG Hotline Division. The nature of the activity of these offices does not generally result in monetary benefits significant for separate performance reporting.</p>						

FY 2004 Performance Measures by Program

(Key Measures are in bold)

(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
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Veterans Health Administration

Medical Care

P&F ID Codes: 36-0160-0-1-703; 36-0152-0-1-703;
36-0162-0-1-703; 36-4537-0-4-705 36-8180-0-7-705;
36-4014-0-3-705

Resources	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
FTE	183,396	183,602	184,209	187,049	194,039	193,593
Medical care costs (\$ in millions)	\$20,318	\$22,553	\$24,368	\$27,654	\$30,773	\$30,841

Performance Measures

	Goal Achieved					
Percent of patients rating VA health care service as very good or excellent:						
Inpatient (through March)	66%	64%	70%	(1) 74%	* 74% G	70%
Outpatient (through March)	64%	65%	71%	(1) 73%	* 72% G	72%
(1) Correction						
Percent of primary care appointments scheduled within 30 days of desired date (through June)	N/A	87%	89%	93%	* 94% G	93%
Percent of specialist appointments scheduled within 30 days of desired date (1) results as of 9/30, (2) reflects cum. for year, (3) 8 clinical areas now included instead of 5 (through June)	N/A	(1) 84%	(1) 86%	(2) 89%	* (3) 93% G	(3) 90%
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities (through March)	N/A	63%	65%	67%	* 69% G	65%
Average waiting time for next available appointment in primary care clinics (in days) (through June)	N/A	37.5	37	25	* 18 G	34
Average waiting time for next available appointment in specialty clinics (in days) (through June)	N/A	N/A	N/A	45	* 27 G	30
Percent of all patients evaluated for the risk factors for hepatitis C (through June)	N/A	51%	85%	95%	* 98% G	90%
Percent of all patients tested for hepatitis C subsequent to a positive hepatitis C risk factor screening (through June)	N/A	48%	62%	84%	* 97% G	85%
Clinical Practice Guidelines Index (through June)	N/A	N/A	Baseline	70%	* 77% G	70%
Prevention Index II (through June)	N/A	80%	82%	83%	* 88% G	82%
Percent of clinical software patches installed on time:						
CPRS (through June)	N/A	67%	70%	96%	* 98% G	72%
BCMA (through June)	N/A	82%	85%	94%	* 96% G	87%
Imaging (through June)	N/A	57%	60%	88%	* 89% G	62%
Ratio of collections to billings (expressed as a percentage) (estimated actual)	28%	31%	37%	41%	* 41% G	41%
Acute Bed Days of Care (BDOC)/1000 (estimated actual)	1,002	895	900	1,000	* 1,000 G	1,000

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Outpatient visits/1000:						
Med/Surg (estimated actual)	2.7	2.4	2.4	2.4	* 2.4 G	2.4
Mental Health (estimated actual)	8.4	8.1	8.1	8.1	* 8.1 G	8.1
Percent of VA medical centers that provide electronic access to health information provided by DoD on separated service persons (estimated actual)	N/A	N/A	0%	100%	* 100% G	100%
Efficiency - Average number of appointments per year per FTE	N/A	N/A	2,719	2,856	2,868 G	2,700
Quality - The percentage of diabetic patients taking the HbA1c blood test in the past year (through June)	N/A	N/A	93%	94%	* 95% G	93%
Dollar value of sharing agreements with DoD (Joint Measure with VBA) (\$ in millions)	N/A	\$58	\$83	\$105	\$120 G	\$116
Dollar value of 1st party and 3rd party collections:						
3rd Party (\$ in millions)	\$397	\$540	(1) \$690	\$804	\$960 G	\$917
(1) Correction						
Percent of outpatient encounters that have electronic progress notes signed within 2 days (through June)	N/A	N/A	N/A	N/A	* 84%	Baseline

	Goal Not Achieved - - Minimal Difference					
Average waiting time for new patients seeking primary care clinic appointments (in days) (through June)	N/A	N/A	N/A	42	* 37 Y	30
Average waiting time for patients seeking a new specialty clinic appointment (in days) (through June)	N/A	N/A	N/A	45	* 41 Y	30
Dollar value of 1st party and 3rd party collections:						
1st Party (\$ in millions)	\$176	\$231	\$486	\$685	\$742 Y	\$792
Cost - Obligations per unique patient user	N/A	N/A	\$4,928	\$5,202	\$5,562 Y	\$5,536

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.

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)

(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
<i>Special Emphasis Programs</i>	Goal Achieved					
Increase non-institutional long-term care as expressed by average daily census (estimated actual)	N/A	N/A	24,126	24,413	* 29,631 G	29,631
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 (through June)	N/A	N/A	65%	72%	* 79% G	67%
Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience (through June)	N/A	84	83	83	* 83 G	82
Prevention Index II (Special Populations) (through June)	N/A	N/A	N/A	80%	* 86% G	80%

P&F ID Codes: 36-0161-0-1-703; 36-0160-0-1-703;
36-4026-0-3-703 36-0152-0-1-703; 36-0162-0-1-703

<i>Medical Research</i>						
Resources						
FTE	3,014	3,019	6,470	6,575	6,814	6,499
Research cost (\$ in millions)	\$830	\$877	\$964	\$1,022	\$1,067	\$1,068
Performance Measure						
	Goal Achieved					
Sustain 2002 level of partnering opportunities with: Veterans Service Organizations; other Federal Agencies; non-profit foundations, e.g., American Heart Association, American Cancer Society; and private industry, e.g., pharmaceutical companies (estimated actual)	137	139	139	139	* 139 G	139

Goal Not Achieved - - Minimal Difference						
Number of Career Development Awardees	195	193	209	210	229 Y	237

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.

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

Veterans Health Administration
Medical Care

Dropped Performance Measures ***

	FY 2000	FY 2001	FY 2002	FY 2003 Preliminary	FY 2003 Final	FY 2003 Plan
Chronic Disease Care Index	N/A	77%	80%	80%	81%	78%
Increase the aggregate of VA, state, and community nursing home and institutional LTC as expressed by ADC	N/A	N/A	31,636	33,031	33,408	32,429
Percent of patients with hepatitis C who have annual assessment of liver function	N/A	N/A	95%	96%	97%	92%
Percent of pharmacy orders entered into CPRS by the prescribing clinician	N/A	74%	91%	92%	92%	86%
Cost/patient	\$4,571	\$4,336	\$4,095	\$4,139	\$5,502	\$4,190
Waiting times for new primary care appointments, percent within 30 days	N/A	N/A	Baseline	76%	74%	23%
Waiting times for new specialty care appointments, percent within 30 days	N/A	N/A	Baseline	67%	71%	44%

*** Several of these measures had achieved a high level of success which was sustained for several years, indicating ongoing fulfillment of these requirements. Other measures were replaced with measures that more accurately targeted areas VA identified as needing improvement.

Veterans Benefits Administration

Compensation

P&F ID Codes:

36-0102-0-1-701

36-0134-0-1-701

Resources						
FTE	7,123	8,035	6,985	7,346	7,568	7,092
Benefits cost (\$ in millions)	\$22,035	\$20,255	\$22,453	\$24,822	\$26,472	\$27,205
Administrative cost (\$ in millions)	\$586	\$564	\$603	\$728	\$777	\$770

Performance Measures

	Goal Achieved					
Average days to process - DIC actions (1) Correction	122	133	172	(1) 153	125 G	126
Percent of DIC recipients above the poverty level	N/A	N/A	N/A	N/A	99% G	75%
Percent of DIC recipients who are satisfied that the VA recognized their sacrifice	N/A	N/A	N/A	N/A	80% G	50%
Average number of days to obtain service medical records	N/A	N/A	N/A	N/A	N/A	TBD
Percent of compensation recipients who were kept informed of the full range of available benefits (a) Results will not be available until 2005	37%	39%	40%	42%	(a)	40%

FY 2004 Performance Measures by Program

(Key Measures are in bold)

(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Percent of compensation recipients who perceive that VA compensation redresses the effect of service-connected disability in diminishing the quality of life	N/A	N/A	N/A	N/A	** TBD	50%
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans	N/A	N/A	N/A	N/A	** TBD	TBD
** Pending Program Outcome Study. Study was cancelled in 2004 because of the new Disability Compensation Commission. Study will be conducted in CY 2005. The Commission first met in August 2004 and the results are tentatively expected 15 months thereafter.						

Goal Not Achieved - - Minimal Difference

Percent of claimants who are Benefits Delivery at Discharge (BDD) participants	N/A	N/A	N/A	22%	20% Y	25%
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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.

Pension

P&F ID Codes: 36-0154-0-1-701; 36-0143-0-1-701

Resources						
FTE	N/A	N/A	1,791	1,827	1,535	1,699
Benefits cost (\$ in millions)	N/A	\$3,018	\$3,168	\$3,226	\$3,342	\$3,284
Administrative cost (\$ in millions)	N/A	\$142	\$155	\$152	\$153	\$163

Performance Measures

Percent of pension recipients who were informed of the full range of available benefits (a) Results will not be available until 2005	39%	40%	38%	39%	(a)	40%
Percent of pension recipients who said their claim was very or somewhat fair (a) Results will not be available until 2005	64%	63%	65%	62%	(a)	53%

Combined Compensation and Pension measures (These measures will be reported on separately in the 2005 PAR)

National accuracy rate (authorization work) (Compensation & Pension) (through July)	51%	65%	80%	88%	* 91% G	87%
Telephone activities - blocked call rate (Compensation & Pension)	3%	3%	7%	3%	2% G	3%
Overall satisfaction (Compensation & Pension) (a) Results will not be available until 2005	56%	56%	58%	59%	(a)	70%

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
	Goal Not Achieved - - Minimal Difference					
National accuracy rate (core rating work) (Compensation & Pension) (through July)	N/A	89%	81%	86%	* 87% Y	90%
National accuracy rate (fiduciary work) (Compensation & Pension) (through July) (1) Correction	(1) 59%	(1) 68%	(1) 84%	77%	* 81% Y	88%
Telephone activities - abandoned call rate (Compensation & Pension) (through August)	6%	6%	9%	9%	* 7% Y	3%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (completed) (%) (Compensation & Pension) (1) Correction	(1) 6%	(1) 13%	(1) 9%	11%	12% Y	8%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (pending) (%) (Compensation & Pension)	N/A	N/A	16%	20%	14% Y	12%

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					
Rating-related actions - average days to process (Compensation & Pension)	173	181	223	182	166 R	145
PVA v. Principi has had a dramatic impact on our ability to achieve this goal. However, since the final court decision, VBA has improved on its processing performance. From the monthly perspective, we have reduced the number of days by approximately 15% from the peak of 189 days in January 2004.						
Rating-related actions - average days pending (Compensation & Pension)	138	182	174	111	118 R	80
PVA v. Principi impacted our ability to achieve this goal. Since the final court decision, VBA improved on its processing performance. From the monthly perspective, we reduced the number of days by approximately 10% from the peak of 134 days in December 2003.						
Non-rating actions - average days to process (Compensation & Pension)	50	55	60	59	58 R	40
PVA v. Principi impacted our ability to achieve this goal. Since the final court decision, VBA improved on its processing performance. From the monthly perspective, we reduced the number of days by approximately 13% from the peak of 66 days in October 2003.						
Non-rating actions - average days pending (Compensation & Pension)	84	117	96	108	102 R	62
PVA v. Principi impacted our ability to achieve this goal. Since the final court decision, VBA improved on its processing performance. From the monthly perspective, we reduced the number of days by approximately 12% from the peak of 112 days in December 2003.						

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

FY 2000 FY 2001 FY 2002 FY 2003 FY 2004 Actual FY 2004 Plan

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 62-63.

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004	Claims Completed in FY 2004
Average days to process rating - related actions	173	181	223	182	166	703,254
Initial disability compensation	212	219	256	207	186	169,804
Initial death compensation/DIC	122	133	172	153	125	27,191
Reopened compensation	189	197	242	193	178	401,489
Initial disability pension	115	130	123	93	94	32,851
Reopened pension	111	126	128	101	101	51,446
Reviews, future exams	108	119	127	95	87	13,533
Reviews, hospital	78	91	74	54	54	6,940

P&F ID Codes: 36-0137-0-1-702; 36-8133-0-7-702;
36-0133-0-1-702

Education

Resources	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004	FY 2004
FTE	781	852	864	866	841	926
Benefits cost (\$ in millions)	\$1,238	\$1,425	\$1,756	\$2,120	\$2,417	\$2,391
Administrative costs (\$ in millions)	\$66	\$64	\$75	\$69	\$78	\$91

Performance Measures

	Goal Achieved					
Montgomery GI Bill usage rate: Veterans who have passed their 10-year eligibility period	N/A	N/A	N/A	66%	66% G	66%
Compliance survey completion rate (1) Correction	94%	92%	93%	(1) 93%	94% G	90%
Payment accuracy rate	96%	92%	93%	94%	94% G	94%
Customer satisfaction-high ratings (a) Results will not be available until 2005	82%	86%	87%	89%	(a)	87%

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
	Goal Not Achieved - - Minimal Difference					
Telephone Activities - Blocked call rate	39%	45%	26%	13%	20% Y	18%
Telephone Activities - Abandoned call rate	17%	13%	11%	7%	10% Y	8%
Average days to complete original education claims	36	50	34	23	26 Y	24
Average days to complete supplemental education claims	22	24	16	12	13 Y	12
Montgomery GI Bill usage rate: All program participants	57%	58%	56%	58%	59% Y	60%

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.

Vocational Rehabilitation and Employment

P&F ID Codes:

36-0135-0-1-702;

36-0132-0-1-702

Resources						
FTE	940	1,061	1,057	1,091	1,105	1,118
Benefits cost (\$ in millions)	\$439	\$427	\$487	\$515	\$552	\$550
Administrative costs (\$ in millions)	\$81	\$109	\$119	\$116	\$123	\$137

Performance Measures

	Goal Achieved					
Speed of entitlement decisions in average days	75	62	65	63	57 G	60
Accuracy of program outcome	N/A	N/A	81%	81%	94% G	92%
Customer satisfaction (Survey) (a) Results will not be available until 2005	74%	76%	77%	N/A	(a)	82%

	Goal Not Achieved - - Minimal Difference					
Accuracy of decisions (Services) (1) Correction	85%	79%	81%	(1) 82%	86% Y	90%
Rehabilitation rate	65%	65%	62%	59%	62% Y	67%

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.

Measures Under Development

Common Measures						
Percent of participants employed first quarter after program exit	N/A	N/A	N/A	N/A	N/A	TBD
Percent of participants still employed three quarters after program exit	N/A	N/A	N/A	N/A	N/A	TBD
Percent change in earnings from pre-application to post-program employment	N/A	N/A	N/A	N/A	N/A	TBD
Average cost of placing participant in employment	N/A	N/A	N/A	N/A	N/A	TBD

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
<i>Housing</i>						
	P&F ID Codes:			36-1119-0-1-704;	36-4025-0-3-704	
Resources						
FTE	2,057	1,759	1,718	1,404	1,256	1,390
Benefits cost (\$ in millions)	\$1,844	\$520	\$849	\$1,351	\$235	\$341
Administrative costs (\$ in millions)	\$157	\$162	\$168	\$169	\$158	\$157

Performance Measures

	Goal Achieved					
Statistical quality index (through August) (1) Correction	94%	96%	97%	(1) 98%	* 98% G	97%
Veterans satisfaction (1) Correction (a) Results will not be available until 2005	(1) 94%	(1) 94%	(1) 94%	(1) 95%	(a)	96%
Home Purchase - Percent of active duty personnel and veterans that could not have purchased a home without VA assistance	N/A	N/A	N/A	N/A	N/A	N/A

	Goal Not Achieved - - Minimal Difference					
Foreclosure avoidance through servicing (FATS) ratio (1) Correction	30%	40%	43%	(1) 45%	44% Y	47%

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.

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
<i>Insurance</i>						
	P&F ID Codes:			36-0120-0-1-701;	36-4012-0-3-701;	
				36-4010-0-3-701;	36-8132-0-7-701;	
				36-8150-0-7-701;	36-8455-0-8-701;	
					36-0141-0-1-701	
Resources						
FTE	525	507	479	493	490	513
Benefits cost (\$ in millions)	\$2,458	\$2,534	\$2,709	\$2,655	\$2,539	\$2,552
Administrative costs (\$ in millions)	\$40	\$41	\$40	\$40	\$42	\$46

Performance Measures

	Goal Achieved					
High customer ratings	96%	96%	95%	95%	96% G	95%
Low customer ratings	2%	2%	3%	3%	2% G	2%
Percentage of blocked calls	4%	3%	1%	0%	1% G	2%
Average hold time in seconds	20	17	18	17	17 G	20
Average days to process insurance disbursements	3.2	2.8	2.6	2.4	1.8 G	2.7

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

FY 2000 FY 2001 FY 2002 FY 2003 FY 2004 Actual FY 2004 Plan

National Cemetery Administration

P&F ID Codes: 36-0129-0-1-705; 36-0139-0-1-701

Resources	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
FTE	1,399	1,385	1,633	1,655	1,492	1,762
Benefits cost (\$ in millions)	\$109	\$111	\$135	\$143	\$153	\$166
Administrative cost (\$ in millions):						
Operating costs	\$103	\$116	\$137	\$143	\$156	\$157
State cemetery grants	\$19	\$24	\$41	\$26	\$34	\$33
Capital construction	\$30	\$33	\$61	\$36	\$63	\$117

Performance Measures

	Goal Achieved					
Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	72.6%	72.6%	73.9%	75.2%	75.3% G	75.3%
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence	67.5%	66.0%	66.6%	66.6%	66.6% G	66.6%
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence	5.1%	6.6%	7.3%	8.6%	8.7% G	8.7%
National Accuracy Rate for burial claims processed (Data tracked by VBA) (through July)	62%	72%	85%	92%	* 94% G	90%
Cumulative number of kiosks installed at national and state veterans cemeteries	24	33	42	50	60 G	60
Percent of graves in national cemeteries marked within 60 days of interment	N/A	N/A	49%	72%	87% G	78%
Percent of headstones and markers ordered online by other federal and state veterans cemeteries using BOSS	87%	89%	89%	90%	91% G	90% G
Percent of individual headstone and marker orders transmitted electronically to contractors	89%	92%	92%	95%	100% G	97%
Percent of Presidential Memorial Certificates that are accurately inscribed	98%	98%	98%	99%	99% G	99%
Percent of respondents who rate national cemetery appearance as excellent	82%	96%	97%	97%	98% G	98%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete	N/A	N/A	N/A	N/A	98%	Baseline

* These are preliminary or estimated actual data; final data will be published in the FY 2006 Congressional Budget and/or the FY 2005 Performance and Accountability Report.

FY 2004 Performance Measures by Program

(Key Measures are in bold)

(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment	N/A	N/A	N/A	N/A	64%	Baseline
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations	N/A	N/A	N/A	N/A	76%	Baseline

	Goal Not Achieved - - Minimal Difference					
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	88%	92%	91%	94%	94% Y	95%
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours	N/A	75%	73%	73%	73% Y	75%
Percent of headstones and markers that are undamaged and correctly inscribed	97%	97%	96%	97%	97% Y	98%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need	N/A	97%	98%	97%	97% Y	98%
Average number of days to process a claim for reimbursement of burial expenses (Data tracked by VBA)	35	40	48	42	48 Y	40

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

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

Resources						
FTE	468	455	448	451	440	448
Administrative cost (\$ in millions)	\$41	\$44	\$47	\$47	\$50	\$50

Performance Measures

	Goal Achieved					
Deficiency-free decision rate	86%	87%	88%	89%	93% G	91%
BVA Cycle Time (Days)	172	182	86	135	98 G	155
Appeals decided per Veterans Law Judge	594	561	321	604	691 G	619
Cost per case	\$1,219	\$1,401	\$2,702	\$1,493	\$1,302 G	\$1,444

	Goal Not Achieved - - Minimal Difference					
Appeals resolution time (Days) (Joint measure with C&P)	682	595	731	633	529 Y	520

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.

FY 2004 Performance Measures by Program

(Key Measures are in bold)

(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Percent increase in the annual IT budget above the previous year's budget (excluding pay raise and inflation increases) (IT)	N/A	N/A	N/A	0%	3.1% Y	0%
Percent decrease of annual IT budget spent on sustainment, shifting corresponding savings to modernization (zero sum gain) (IT)	N/A	N/A	N/A	5%	1.5% Y	5%
Percent of cases using alternate dispute resolution (ADR) techniques (BCA)	13%	29%	54%	58%	60% Y	70%

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					
Cumulative % of commercially eligible FTE on which competitive sourcing studies are completed (OPP&P)	N/A	N/A	5%	12%	0% R	53%
VA's entire OMB-approved Competitive Sourcing plan has been put on hold due to statutory prohibitions in Section 8110 (a) (5) of Title 38 U.S.C. VA senior management is currently discussing legislative strategies, but no imminent relief from the prohibition is anticipated.						
Percent of Group 2 emergency preparedness officials who receive training or, as applicable, who participate in exercises relevant to VA's COOP plan on the National level (OPP&P)	N/A	N/A	60%	65%	42% R	75%
A 42% training rate was achieved for Group 2 officials. An unusual turnover rate among senior officials responsible for emergency preparedness kept the Department from achieving its goal. Permanent replacements for these officials should be in place later in calendar year 2004. Certification and exercises are planned throughout calendar year 2004.						
Number of business lines transformed to achieve a secure veteran-centric delivery process that would enable veterans and their families to register and update information, submit claims or inquiries, and obtain status (IT)	N/A	N/A	N/A	N/A	0 R	2
VA re-baselined the Registration and Eligibility program. The rebaselined initiative seeks to develop a single authoritative source for veteran identification data which would then be used by all business lines. Once completely implemented, the need for a veteran to register in more than one place or for more than one business line will be eliminated. It will also ensure that identical values of the same data are in use across all VA business lines, eliminating considerable costs incurred in reconciling data differences. A one-year requirements determination, data analysis, and design specification phase began in September 2004 and is scheduled to conclude September 2005. The nature of the resulting business transformation is considerably different than the transformation contemplated in the original objective; the current transformation leaves the eligibility determination decision within the business lines. The need to include a requirements determination phase also causes this new transformation to occur in FY 2006 instead of FY 2004.						

FY 2004 Performance Measures by Program

(Key Measures are in bold)
(G = Green; Y = Yellow; R = Red)

	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
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Office of Inspector General

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

Resources						
FTE	354	370	393	399	434	442
Administrative cost (\$ in millions)	\$45	\$49	\$56	\$58	\$66	\$69

Performance Measures

	Goal Achieved					
(1) Number of indictments, arrests, convictions, administrative sanctions, and pretrial diversions:	1,361	1,655	1,621	1,894	2,016 G	1,950
Number of Arrests	338	401	452	624	741	493
Number of Indictments	280	376	357	349	397	460
Number of Convictions	247	337	331	417	332	422
Number of Administrative Sanctions	496	541	481	484	522	575
Number of Pretrial Diversions	N/A	N/A	N/A	20	24	Baseline
Number of Reports issued:	124	136	169	(2) 182	(3) 223 G	208
Combined Assessment Reviews (CAPs) -- Total	18	26	33	42	52	60
VHA CAPs	18	22	21	34	40	48
VBA CAPs	0	4	12	8	12	12
Audit Reports	35	26	26	24	24	29
Pre-and Post-Award Contract Reviews	40	48	60	65	105	62
Healthcare Inspection Reports	15	22	37	24	26	42
Administrative Investigations	16	14	12	21	11	15
Value of monetary benefits (\$ in millions) from:					(4) \$3,121 G	\$884
IG Investigations	\$28	\$52	\$85	\$64	\$301	\$45
IG audits	\$264	\$4,095	\$730	\$8	\$2,104	\$775
IG contract reviews	\$35	\$42	\$62	\$82	\$661	\$64

	Goal Not Achieved - - Minimal Difference					
Customer Satisfaction:					4.6 Y	4.8
Combined Assessment Program Reviews	N/A	N/A	4.4	4.1	4.5	4.7
Investigations	4.6	4.8	4.8	4.9	4.9	5.0
Audit	4.4	4.2	4.3	4.2	4.6	4.5
Contract Reviews	4.9	4.7	4.9	4.5	4.6	4.9
Healthcare Inspections	4.4	4.2	4.7	4.4	4.4	4.9

The performance goal for this group of 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.

(1) In FY 2000, the cumulative figure for this category included the 85 administrative sanctions obtained by the OIG Hotline Division, while the individual figure for administrative sanctions showed only those obtained by the Office of Investigations. (Since FY 2001, the Hotline Division administrative sanctions have been included in both figures.)

(2) Includes 5 CAP summary reports that are not counted in the CAP total and 1 joint review with DoD.

(3) Includes 3 CAP summary reports that are not counted in the CAP total and 2 joint reviews completed by OIG Offices of Investigation, Audit, and Healthcare Inspections.

(4) This figure includes monetary benefits produced by the OIG Office of Healthcare Inspections and OIG Hotline Division. The nature of the activity of these offices does not generally result in monetary benefits significant for separate performance reporting.