

# Definitions

## Definitions of Key Measures

**Please note:** Key Measures are also defined in the Key Measures Data Table (see page 154).

### **Average days to complete original and supplemental education claims**

Elapsed time, in days, from receipt of a claim in the regional processing office to closure of the case by issuing a decision. Original claims are those for first-time use of this benefit. Any subsequent school enrollment is considered a supplemental claim. (Education)

### **Average days to process – DIC actions**

The average length of time it takes to process a Dependency and Indemnity Compensation (DIC) claim from the date of receipt of claim in VA until the date of completion. (Compensation)

### **Average days to process insurance disbursements**

Insurance disbursements are death claims paid to beneficiaries, policy loans, and cash surrenders requested by policyholders. Average processing days are a weighted composite for all three types of disbursements based on the number of end products and timeliness for each category. Processing time begins when the veteran's application or beneficiary's fully completed claim is received and ends when the internal controls staff approves the disbursement. The average processing days for death claims is multiplied by the number of death claims processed. The same calculation is done for loans and cash surrenders. The sum of these calculations is divided by the sum of death claims, loans, and cash surrenders processed to arrive at the weighted average processing days for disbursements. (Insurance)

### **Clinical Practice Guidelines Index**

The Clinical Practice Guidelines Index is a composite measure comprised of the evidence and outcomes-based

measures for high-prevalence and high-risk diseases that have significant impact on overall health status. The indicators within the Index are comprised of several clinical practice guidelines in the areas of ischemic heart disease, hypertension, diabetes mellitus, major depressive disorder, schizophrenia, and tobacco use cessation. The percent compliance is an average of the separate indicators. (Medical Care)

### **Foreclosure avoidance through servicing (FATS) ratio**

The FATS ratio measures the effectiveness of VA supplemental servicing of defaulted guaranteed loans. The ratio measures the extent to which foreclosures would have been greater had VA not pursued alternatives to foreclosure. (Loan Guaranty)

### **Increase non-institutional long-term care as expressed by average daily census**

The number is the Average Daily Census (ADC) of veterans enrolled in Home and Community-Based Care programs (e.g., Home-Based Primary Care, Contract Home Health Care, Adult Day Health Care (VA and Contract), and Homemaker/Home Health Aide Services). (Medical Care)

### **National accuracy rate (Compensation core rating work)**

Claims processing accuracy for compensation claims that normally require a disability or death rating determination. The accuracy rate is captured after all processing actions are complete based on the following criteria: addressing all issues, Veterans Claims Assistance Act (VCAA)-compliant development, correct decision, correct effective date, and correct payment date if applicable. Accuracy rate is determined by dividing the total number of cases with no errors in any of these categories by the number of cases reviewed. (Compensation)

**National accuracy rate (Pension authorization work)**

Claims processing accuracy for pension claims that normally do not require rating decisions (i.e., determinations and verifications of income as well as dependency and relationship matters). The accuracy rate is captured after all processing actions are complete based on the following criteria: all pension authorization work such as correct decision, correct effective date, and correct payment date when applicable. It also includes Veterans Claims Assistance Act (VCAA)-compliant development. Accuracy rate is determined by dividing the total number of cases with no errors in any one category by the number of cases reviewed. (Pension)

**Non-rating pension actions - average days to process**

The average elapsed time (in days) it takes to complete claims is measured from the date the claim is received by VA to the date the decision is made. The measure is calculated by dividing the total number of days recorded from receipt to completion by the total number of cases completed. Pension Non-Rating claims include: Disability and death dependency claims (EP130); Income, Estate and Election Issues (EP150); Income Verification Match Cases (EP154); Eligibility Verification Report referrals (EP155); and Original Death Pension (EP190). (Pension)

**Number of peer-reviewed publications by VA investigators**

The number of peer-reviewed publications by VA investigators that show VA listed as the affiliated institution as determined by a PubMed search. (Medical Research)

**Percent of graves in national cemeteries marked within 60 days of interment**

The number of graves in national cemeteries for which a marker has been set at the grave or the reverse inscription completed within 60 days of the interment divided by the number of interments, expressed as a percentage. (Burial)

**Percent of patients rating VA health care service as very good or excellent: Inpatient and Outpatient**

Data are gathered for these measures via a VA survey that is applied to a representative sample of inpatients and a sample of outpatients. The denominator is the total number of patients sampled who answered the question, "Overall, how would you rate your quality of care?" The numerator is the number of patients who respond "very good" or "excellent." (Medical Care)

**Percent of primary care appointments scheduled within 30 days of desired date**

This measure tracks the time between when the primary care appointment request is made (entered into the computer) and the date for which the appointment is actually scheduled. The percent is calculated using the numerator, which is those scheduled within 30 days of desired date (includes both new and established patient experiences), and the denominator, which is all appointments in primary care clinics posted in the scheduling software during the review period. (Medical Care)

**Percent of respondents who rate national cemetery appearance as excellent**

The number of survey respondents who agree or strongly agree that the overall appearance of the national cemetery is excellent divided by the total number of survey respondents, expressed as a percentage. (Burial)

**Percent of respondents who rate the quality of service provided by the national cemeteries as excellent**

The number of survey respondents who agree or strongly agree that the quality of service received from national cemetery staff is excellent divided by the total number of survey respondents, expressed as a percentage. (Burial)

**Percent of specialty care appointments scheduled within 30 days of desired date**

This measure tracks the number of days between when the specialty appointment request is made (entered into the computer) and the date for which the appointment is actually scheduled. This includes both new and established specialty care patients. The percent is calculated using the numerator, which is all appointments scheduled within 30 days of desired date and the denominator, which is all appointments posted in the scheduling software during the review period in selected high volume/key specialty clinics. (Medical Care)

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

The measure is the number of veterans served by a burial option divided by the total number of veterans, expressed as a percentage. 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 or state veterans cemetery that is available within 75 miles of the veteran's place of residence. (Burial)

### Prevention Index II

The Prevention Index is an average of nationally recognized primary prevention and early detection interventions for nine diseases or health factors that significantly determine health outcomes. The nine diseases or health factors include: rate of immunizations for Influenza and Pneumococcal pneumonia; screening for tobacco consumption, alcohol abuse, breast cancer, cervical cancer, colorectal cancer, and cholesterol levels; and prostate cancer education. Each disease has an indicator. Each indicator's numerator is the number of patients in the random sample who actually received the intervention they were eligible to receive. The denominator is the number of patients in the random sample who were eligible to receive the intervention. (Medical Care)

### Rating-related actions - average days to process

The average elapsed time (in days) it takes to complete claims that require a disability decision is measured from the date the claim is received by VA to the date the decision is made. The measure is calculated by dividing the total number of days recorded from receipt to completion by the total number of cases completed. Includes the End Products (EP): Original Compensation, with 1-7 issues (EP110); Original Compensation, 8 or more issues (EP010); Original Service Connected Death Claim (EP140); Reopened Compensation Claims (EP020); Review Examination (EP310); and Hospitalization Adjustment (EP320). For Pension cases, the category includes original pension claims (EP180) and reopened pension claims (EP120). (Compensation and Pension)

### Rating-related compensation actions - average days pending

The measure is calculated by counting the number of days for all currently pending claims from the date each claim is received through the current reporting date. The total number of days is divided by the total number of pending claims. Compensation Rating includes all pending claims in the following categories: EPs 110, 010, 020, 140, 310, and 320. (Compensation)

### Ratio of collections to billings

The collections to billings ratio is a calculation based on the total cumulative fiscal year collections divided by the total cumulative billings. VA cannot collect from Medicare; however, 100 percent of the charges must be included to assert claims to Medicare supplemental carriers. The

resulting ratio is comparatively lower than the private sector standard. (Medical Care)

### Vocational Rehabilitation and Employment Rehabilitation rate

The number of veterans who acquire and maintain suitable employment and leave the program, divided by the total number leaving the program. For those veterans with disabilities that make employment unfeasible, Vocational Rehabilitation and Employment (VR&E) seeks to assist them on becoming independent in their daily living. (VR&E)

## Definitions of Supporting Measures

### 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 Veterans Law Judge

The total number of decisions, remands, dismissals, and vacatur issued by the Board of Veterans' Appeals, divided by the total number of Veterans Law Judges. (BVA)

### Appeals resolution time (in days)

The average length of time it takes the Department 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. (BVA and C&P)

### Attainment of statutory minimum goals for small business expressed as a percent of total procurement

This number represents the percentage of total dollars spent with small business concerns based on total dollars reported. Data are obtained from the Federal Procurement Data System—Next Generation (FPDS-NG), provided by the Federal Procurement Data Center (FPDC) at: <https://www.fpds.gov>. (Departmental Management)

**Average cost of placing participant in employment**

This performance measure is a Common Measure whose definition is under development with the Departments of Labor, Education, Health and Human Services, and Veterans Affairs and will go into effect in FY 2007. (VR&E)

**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)

**Average number of days to initiate development of remands at the Appeals Management Center**

The average length of time it takes to develop a remand from the date the case is received at the Appeals Management Center until the date development begins. (Compensation)

**Average number of days to process a claim for reimbursement of burial expenses**

Elapsed time, in days, from receipt of a claim in the regional office to closure of the case by issuing a decision by the regional office. (VBA/Burial)

**BVA cycle time**

BVA cycle time measures the time a case spends at the Board, other than the time the case file is in the possession of a veterans service organization. (BVA)

**Cost – Obligations per unique patient user**

The average cost of total obligations for medical care divided by unique patients served. (Medical Care)

**Cost per case**

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

Customer satisfaction scores (measured on a scale of one through five, with five being the highest possible score) are based on surveys returned to OIG by the principals impacted by audits, investigations, contract reviews, health care inspections, and Combined Assessment Program Reviews. In instances where customer surveys are returned with lower than anticipated ratings, management may follow up with survey participants to identify any issues that caused low ratings and possible solutions. (OIG)

**Customer satisfaction – high ratings**

Nationally, the percentage of respondents to the education customer satisfaction survey who were "very satisfied" or "somewhat satisfied" with the way VA handled their education benefits claim. (Education)

**Customer satisfaction (Survey)**

Percent of veterans who answered "very satisfied" or "somewhat satisfied" overall with the VR&E program (of those who completed or withdrew from the program). (VR&E)

**Decrease Non Mission Dependent assets from 2005 baseline**

Non mission dependent assets include owned and direct leased buildings that fall below 50 percent utilization, and land parcels specifically identified as not mission dependent. (Departmental Management)

**Decrease operating and maintenance costs adjusting for inflation from 2004 baseline**

Operating and maintenance costs are actual costs based on Budget Object Codes for Roads and Grounds Maintenance (2549); Utility Plant Operations (2548); Rent costs (2330, 2334); Energy costs (2390 – 2399, 2650); Cleaning and Janitorial Services (2542); and Recurring Maintenance and Repair Services (2543). (Departmental Management)

**Decrease underutilized space as compared to overall space to 30 percent or less**

Using an approved space model, underutilized space is the ratio of owned and direct leased square feet not needed to the owned and direct leased square feet available. (Departmental Management)

**Deficiency-free decision rate**

This goal is based on a random sampling of 5 percent of Board 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, and due process. (BVA)

**Documented increases in the use of joint procurement contracts**

Dollar increase in the amount of purchases made through joint procurement contracts with DoD. VA and DoD jointly negotiate procurement contracts to reduce procurement costs through bulk purchasing. (Medical Care)

**Dollar value of 1<sup>st</sup> and 3<sup>rd</sup> party collections**

Medical care received within VHA has a co-payment attached in some cases. This co-payment is referred to as 1<sup>st</sup> party collections. In addition, for veterans who have other insurance, as appropriate, those insurance companies are billed for services. Those collections are referred to as 3<sup>rd</sup> party collections. (Medical Care)

**Efficiency – Annual number of appointments per year per FTE**

The ratio of all outpatient visits against the number of clinical full-time equivalent employees. The measure has an indirect relationship to efficiency. (Medical Care)

**Fiduciary Activities – Initial Appointment & Fiduciary – Beneficiary Exams (completed) (%)**

This measure is the percentage of work products completed that exceeded the timeliness standard. It is obtained by dividing the sum of initial appointment (IA) and fiduciary beneficiary (FB) field examination work products completed untimely during a month by the total number of IAs and FBs completed during that month. A work product is considered overdue if it is completed in over 45 days for IAs and over 120 days for FBs. The FY measure is the total sum of each month's overdue completed cases divided by the total number of completed IAs + FBs. (C&P)

**Fiduciary Activities – Initial Appointment & Fiduciary – Beneficiary Exams (pending) (%)**

This measure is the percentage of pending field examinations that are already pending beyond the timeliness standard. The percentage is obtained by dividing the sum of initial appointment (IA) and fiduciary-beneficiary (FB) field examinations pending over standard by the total number of IAs

and FBs pending at the end of the month. IAs and FBs pending over 45 and 120 days, respectively, are untimely. (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)

**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)

**Home Purchase – Percent of active duty personnel and veterans that could not have purchased a home without VA assistance**

Comparison (ratio) of the median financial assets available to veterans at closing of a guaranteed loan versus the amount necessary to obtain an FHA loan. (Loan Guaranty)

**Implementation guides developed for those Consolidated Health Informatics Standards adopted by VA and DoD**

In order to fully implement the interoperable VA/DoD health information systems, VA and DoD must agree on consolidated standards for informatics to ensure compatibility of information. Implementation guides are developed to provide guidance on how these standards will be implemented. (Medical Care)

**Increase Annual Percent Condition Index from 2005 baseline**

The Condition Index is the ratio of repair needs to plant replacement value. The higher the Condition Index the better the condition of the constructed asset. Condition Index includes owned buildings and structures. (Departmental Management)

**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)

### **Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experience**

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 Care)

### **Montgomery GI Bill usage rate: All program participants**

The MGIB usage rate is derived by dividing the number of veterans who have received MGIB benefits by the number of all veterans who participated in the MGIB program and have separated from active military service. The usage rate includes those veterans who are still within their 10-year eligibility period but have not, as yet, applied for education benefits. (Education)

### **Montgomery GI Bill usage rate: Veterans who have passed their 10-year eligibility period**

The MGIB usage rate is derived by dividing the number of veterans who have received MGIB benefits by the number of all veterans who participated in the MGIB program, have separated from active military service, and are beyond their eligibility period, generally 10 years after they left active duty. (Education)

### **National accuracy rate (Compensation authorization work)**

Claims processing accuracy of compensation claims that do not require a rating decision. The accuracy rate is captured after all processing actions are complete based on the following criteria: addressing all issues, Veterans Claims Assistance Act (VCAA)-compliant development, correct decision, correct effective date, and correct payment date if applicable. Accuracy rate is determined by dividing the total number of cases with no errors in any of these categories by the number of cases reviewed. (Compensation)

### **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)

### **National accuracy rate (Pension core rating-related work)**

Claims processing accuracy for pension claims that normally require a disability or death rating determination. The accuracy rate is captured after all processing actions are complete based on the following criteria: addressing all issues, Veterans Claims Assistance Act (VCAA)-compliant development, correct decision, correct effective date, and correct payment date if applicable. Accuracy rate is determined by dividing the total number of cases with no errors in any of these categories by the number of cases reviewed. (Pension)

### **National Accuracy Rate for burial claims processed**

The percentage of burial claims (EP 160) completed and determined to be technically accurate. (VBA/Burial)

### **Non-rating compensation actions - average days pending**

The measure is calculated by counting the number of days for all currently pending claims from the date each claim is received through the current reporting date. The total number of days is divided by the total number of pending claims. Compensation Non-Rating includes: Disability and death dependency claims (EP130); Accrued Benefits (EP165); Burial (EP160); and other special eligibility determinations (EP290). (Compensation)

### **Non-rating compensation actions – average days to process**

The average elapsed time (in days) it takes to complete claims is measured from the date the claim is received by VA to the date the decision is made. The measure is calculated by dividing the total number of days from receipt to completion by the total number of cases completed. Compensation Non-Rating includes: Disability and death dependency claims (EP130); Accrued Benefits (EP165); Burial (EP160); and other special eligibility determinations (EP290). (Compensation)

**Non-rating pension actions – average days pending**

The measure is calculated by counting the number of days for all currently pending claims from the date each claim is received through the current reporting date. The total number of days is divided by the total number of pending claims. Pension Non-Rating claims include: Disability and death dependency claims (EP130); Income, Estate and Election Issues (EP150); Income Verification Match Cases (EP154); Eligibility Verification Report referrals (EP155); and Original Death Pension (EP190). (Pension)

**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," as amended. This measure reports how many audit qualifications are identified each year in VA's consolidated financial statements. (Departmental Management)

**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**

Maintain a *One VA* information technology framework that supports the integration of information across business lines and provides a course of consistent, reliable, accurate, and secure information to veterans and their families, employees, and stakeholders. (Departmental Management)

**Number of discovery disclosures by VA investigators**

Executive Order 10096 mandates that when inventions are made by VA-salaried employees with research responsibilities and there was a contribution by VA, then VA may assert an ownership right in the invention. Discovery disclosures are VA's assertion of ownership in an invention. (Medical Research)

**Number of indictments, arrests, convictions, administrative sanctions, and pretrial diversions**

Output measures resulting from the conduct of an OIG investigation into allegations of criminal activities related to programs and operations of VA or into allegations against senior VA officials and other high profile matters of interest to Congress and the Department. (OIG)

**Number of material weaknesses identified during the Annual Financial Statement Audit or identified by management**

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," as amended. This measure reports how many material weaknesses are identified each year in VA's consolidated financial statements. (Departmental Management)

**Number of reports issued**

An output measure resulting from the preparation and release of a formal document prepared and released by the OIG following the conduct of a Consolidated Assessment Program review, administrative investigation, audit, or health care inspection. (OIG)

**Out of all original claims filed within the first year of release from active duty, the percentage filed at a BDD site prior to a service member's discharge**

This is the percentage of original claims filed by separating service members during the first year following release from active duty through the Benefits Delivery Discharge (BDD) program. The percentage is determined by dividing the number of original claims filed at the BDD sites by the total number of original claims that are filed within 1 year of discharge from service. (Compensation)

**Overall satisfaction (Compensation)**

The percentage of respondents to the C&P customer satisfaction survey who were "very satisfied" or "somewhat satisfied" with the way VA handled/is handling their compensation claim. (Compensation)

**Overall satisfaction rate (Pension)**

The percentage of respondents to the C&P customer satisfaction survey who were "very satisfied" or "somewhat satisfied" with the way VA handled/is handling their pension claim. (Pension)

**Payment accuracy rate**

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

**Percentage of beneficiaries that believe their VA educational assistance has been either very helpful or helpful in the attainment of their educational or vocational goal**

This draft measure will determine the proportion of beneficiaries who report their VA educational benefits helped them accomplish their educational or vocational goal. (Education)

**Percentage of clinicians who remain in the VA health care system for at least three years after completion of their career development award period**

The objective of the award program is to build and maintain capacity for VA clinicians to conduct research in areas of high relevance to the health care of veterans. Providing a career development award to a clinician acts as an incentive for them to stay for a period of time after completion of their award. (Medical Research)

**Percentage of planned business process reengineering studies of non-core, commercial, competitive functions initiated (per annum)**

This performance measure tracks VA's progress in pursuing management analysis and business processing reengineering studies in order to meet savings and performance goals and better serve veterans. The measure is calculated by dividing the number of functions initiated for study by the total number of functions planned for study, expressed as a percentage. (Departmental Management)

**Percentage of tort claims settled administratively**

At the administrative level, fairly compensate veterans who have been injured by substandard medical treatment. Thus, the veterans will not have to file law suits in federal court. Administrative settlement of meritorious claims will reduce the cost of handling tort claims against the government. (Departmental Management)

**Percentage of VAMCs contracted to serve as TRICARE network providers**

VAMCs who contract to serve as TRICARE network providers facilitate the transfer of active duty patients to VA prior to discharge. This benefits servicemembers' transition to veteran status and provides continuity of care during the discharge process by ensuring VA facilities can care for and appropriately bill for services rendered. (Medical Care)

**Percent change in earnings from pre-application to post-program employment**

This performance measure is a Common Measure whose definition is under development with the Departments of Labor, Education, Health and Human Services, and Veterans Affairs and will go into effect in FY 2007. (VR&E)

**Percent increase of EDI usage over base year of 1997**

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

**Percent of admission notes by residents that have a note from attending physician within 1 day of admission: Medicine, Psychiatry, Surgery**

Attending physician notes that are entered within a day after admission notes by a resident attests to the supervision of residents and ensures a higher level of quality of care. (Medical Care)

**Percent of applications for headstones and markers for the graves of veterans who are not buried in national cemeteries processed within 20 days**

This measures the timeliness of processing applications for headstones and markers for the graves of veterans who are not buried in national cemeteries using NCA's Automated Monument Application System. This percentage represents the number of headstones and markers ordered within 20 days of the receipt of the application divided by the number of applications for headstones and markers received. (Burial)

**Percent of appointments for primary care scheduled within 30 days of desired date for veterans and service members returning from a combat zone**

This measure ensures veterans and service members returning from a combat zone have priority access to primary care appointments. (Medical Care)

**Percent of appointments for specialty health care services scheduled within 30 days of desired date for veterans and service members returning from a combat zone**

This measure ensures veterans and service members returning from a combat zone with an injury or illness have priority access to specialty care appointments. (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 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 compensation recipients who perceive that VA compensation redresses the effect of service-connected disability in diminishing the quality of life**

The percent of veterans in a Program Outcome Study of the compensation program who believe the compensation they are receiving is fair. (Compensation)

**Percent of compensation recipients who were kept informed of the full range of available benefits**

Nationally, the percentage of respondents to the C&P customer satisfaction survey who indicated that the VA kept them informed of the full range of VA benefits and services available, of those who needed that information. (Includes both persons applying for and receiving compensation.) (Compensation)

**Percent of DIC recipients above the poverty level**

The percent of DIC recipients as measured by the Spouse and Parents DIC Program Outcome Studies who are above the poverty level threshold for the year in which the study is done. (Compensation)

**Percent of DIC recipients who are satisfied that the VA recognized their sacrifice**

The percent of DIC recipients in a Program Outcome Study of the DIC program who believe the DIC benefits they are receiving are fair. (Compensation)

**Percent of Emergency Planners who have completed orientation**

This performance measure ensures that those in VA responsible for developing continuity of operations plans and guaranteeing VA will continue to provide essential functions understand their responsibilities for emergency

preparedness planning and the directives governing such planning. (Departmental Management)

**Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours**

The percent of funeral directors who respond that the amount of time it typically takes to confirm the scheduling of an interment is less than 2 hours. (Burial)

**Percent of gravesites that have grades that are level and blend with adjacent grade levels**

This percentage represents the number of gravesites that are level and blend with adjacent grade levels divided by the number of gravesites assessed. (Burial)

**Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete**

This percentage represents the number of headstone and marker inscriptions ordered by national cemeteries for which inscription information is correctly and accurately recorded by cemetery personnel divided by the total number of inscriptions ordered. (Burial)

**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 headstones and/or markers in national cemeteries that are at the proper height and alignment**

This percentage represents the number of headstones and markers in national cemeteries that are at the proper height and alignment divided by the total number assessed. (Burial)

**Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations**

This percentage represents the number of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations divided by the total number assessed. (Burial)

### **Percent of Montgomery GI Bill participants who successfully completed an education or training program**

This draft measure will determine the proportion of Montgomery GI Bill participants who accomplished their education or training program. (Education)

### **Percent of outpatient encounters that have electronic progress notes signed within 2 days**

The percent of all outpatient encounters that have progress notes entered into the electronic medical record within 2 days of the encounter. (Medical Care)

### **Percent of participants employed first quarter after program exit**

This performance measure is a Common Measure under development with the Departments of Labor, Education, Health and Human Services, and Veterans Affairs and will go into effect in FY 2007. (VR&E)

### **Percent of participants still employed three quarters after program exit**

This performance measure is a Common Measure under development with the Departments of Labor, Education, Health and Human Services, and Veterans Affairs and will go into effect in FY 2007. (VR&E)

### **Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities**

Percent of patients who report in the Survey of Health care Experiences of Patients (SHEP) that they were seen by the provider within 20 minutes or less of their scheduled appointment time. (Medical Care)

### **Percent of pension recipients who were informed of the full range of available benefits**

Nationally, the percentage of respondents to the C&P customer satisfaction survey who indicated that the VA kept them informed of the full range of VA benefits and services available, of those who needed that information. (Includes both persons applying for and receiving pension.) (Pension)

### **Percent of recipients who said their claim was "very" or "somewhat fair"**

Nationally, the percentage of respondents to the C&P customer satisfaction survey who indicated that VA's evaluation of their claim was "very" or "somewhat" fair.

(Includes both persons applying for and receiving pension.) (Pension)

### **Percent of respondents who would recommend the national cemetery to veteran families during their time of need**

The percent of survey respondents who agree or strongly agree that they would recommend the national cemetery to veteran families during their time of need. (Burial)

### **Percent of Under Secretaries, Assistant Secretaries, and other key officials who self-certify their teams "ready to deploy" to their COOP site**

This performance measure ensures that the highest levels of leadership within the Department know the requirements for maintaining continuity of operations and service to veterans and their organizations have plans in place and are ready to relocate to their alternate site if necessary. (Departmental Management)

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

VA seeks to foster a clear understanding of the Department's strategic goals among its employees. To this end, each employee receives a copy of the annual *VA Report to Employees*, which articulates our strategic goals. In addition, VA conducts periodic employee surveys to gain feedback, identify issues for management action, and ascertain employee understanding of VA's strategic goals. (Departmental Management)

### **Percent of veterans in receipt of compensation whose total income exceeds that of like-circumstanced veterans**

A figure derived from a Compensation Program Outcome Study measuring available income and other cash and non-cash resources for service-connected disabled veterans compared to nonservice-connected veterans. (Compensation)

### **Percent of veterans returning from a combat zone who respond "yes completely" to survey questions regarding how well they perceive that their VA provider listened to them and if they had trust and confidence in their VA provider**

The continual assessment of patient satisfaction tells VHA what patient expectations are and what dimensions of care concern veterans the most. This enables VHA to identify our

strengths and to quickly address areas where patients are less satisfied. VHA continues to be a leader in achieving a high level of patient satisfaction. (Medical Care)

**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**

This measure tracks the percentage of veterans discharged from a DCHV or HCHV program directly to independent living or secure housing in the community. Independent living is defined as residence in one's own apartment, room, or house. Secured living arrangement is defined as half-way house, transitional housing, or domiciliary. (Medical Care)

**Prevention Index II (Special Populations)**

The overall Prevention Index score is comprised of nine disease or health factors that measure how well VA follows nationally recognized primary prevention and early detection recommendations that significantly determine health outcomes. Indicators within the Index include: rate of immunizations for influenza and Pneumococcal pneumonia; screening for tobacco consumption, alcohol abuse, breast cancer, cervical cancer, and colorectal cancer; screening for prostate cancer education; and screening for cholesterol levels. The same overall index is then evaluated for those patients who meet the definition of a special population as a sub-group. (Medical Care)

**Rating-related pension actions – average days pending**

The measure is calculated by counting the number of days for all currently pending claims from the date each claim is received through the current reporting date. The total number of days is divided by the total number of pending claims. Pension Rating includes all pending claims in the following categories: EPs 180 and 120. (Pension)

**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)

**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. (Loan Guaranty)

**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**

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

**Value of monetary benefits from IG audits**

Funds put to better use and monetary recoveries associated with recommendations to enhance VA operations and correct operating efficiencies resulting from OIG audits. (OIG)

**Value of monetary benefits from IG contract reviews**

Funds put to better use and monetary recoveries resulting from preaward and postaward contract reviews. (OIG)

**Value of monetary benefits from IG investigations**

Funds, including fines, penalties, restitutions, civil judgments, recoveries, and efficiencies that result from criminal and administrative investigations. (OIG)

**Veterans satisfaction**

The percentage of veterans answering the Loan Guaranty customer satisfaction survey that were "very satisfied" or "somewhat satisfied" with the process of obtaining a VA home loan. (Loan Guaranty)

## Definitions of Financial and Other Terms

**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)

**Allowance**

The amounts included in the President's budget request or projections to cover possible additional proposals, such as statutory pay increases and contingencies for relatively uncontrollable programs and other requirements. As used by Congress in the concurrent resolutions on the budget, allowances represent a special functional classification designed to include amounts to cover possible requirements, such as civilian pay raises and contingencies. Allowances remain undistributed until they occur or become firm, then they are distributed to the appropriate functional classification(s). (Financial)

**Apportionment**

A distribution made by the Office of Management and Budget of amounts available for obligation in an appropriation or fund account. Apportionments divide amounts available for obligation by specific time periods (usually quarters), activities, projects, objects, or a combination thereof. The amounts so apportioned limit the amount of obligations that may be incurred. (Financial)

**Appropriation**

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

**Appropriation Authority**

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

**Average daily census**

The number is the Average Daily Census of veterans enrolled in Home and Community-Based Care programs (Home-Based Primary Care, Contract Home Health Care, Adult Day Health Care (VA and Contract), and Homemaker/Home Health Aide Services). (Medical Care)

**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)

**Budget Authority**

The authority provided by law to enter into obligations that will result in immediate or future outlays involving Federal Government funds, except that budget authority does not include authority to insure or guarantee the repayment of indebtedness incurred by another person or government. The basic forms of budget authority are appropriations, authority to borrow, and contract authority. Budget authority may be classified by the period of availability (1-year, multiple-year, no-year), by the timing of congressional action (current or permanent), or by the manner of determining the amount available (definite or indefinite). (Financial)

**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)

**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)

**Departmental Measure**

A staff office measure, which because of its importance and/or the extent to which it affects various organizations within VA, is considered significant.

**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)

**Federal Credit Reform Act of 1990**

Legislation enacted to improve the accounting for costs of federal credit programs. (Financial)

### **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)

### **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)

### **Government Management Reform Act of 1994**

Legislation enacted to provide more effective and efficient executive branch performance in reporting financial information to Congress and committees of Congress. (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)

### **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)

### **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)

### **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)

### **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)

**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)

**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**

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 order to liquidate obligations. (Financial)

**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, 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)

**Reportable Conditions**

Matters coming to the auditor's attention that, in the auditor's judgment, should be communicated because they represent significant deficiencies in the design or operation of internal control that could adversely affect the organization's ability to properly record, process, and summarize transactions and comply with applicable laws and regulations. (Financial)

### **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)

### **State Veterans Cemetery**

State veterans cemeteries, which complement VA's system of national cemeteries, provide burial options for eligible veterans and their family members. These cemeteries may be established by the States with the assistance of VA's State Cemetery Grants Program (SCGP). The SCGP provides grants to states of up to 100 percent of the cost of establishing, expanding, or improving state veterans cemeteries. (Burial)

### **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)

### **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)

**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 National Cemetery**

A VA national cemetery provides gravesites for the interment of deceased veterans and their eligible family members. VA's 121 national cemeteries are national shrines that are important sites for patriotic and commemorative events.

**VA Regional Office**

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

**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 health care and to maximize the use of resources. (Medical Care)