



Performance Measures Tables

By Strategic Goal and by Program

The following tables display our key and supporting measures both by strategic goal and objective (see [Table 1](#)), and by organization and program (see [Table 2](#)). 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 program performance (yellow or Y).
- Target was not met, and the difference significantly affected program performance (red or R).

For each “red” measure, we provide a brief explanation of why there was a significant deviation between the actual and planned performance level and briefly identify the steps being taken to ensure goal achievement in the future. (Please see the Performance Shortfalls tables beginning on page 71 for this information.)

For those measures where 2006 results are partial or estimated, we will publish final data in the FY 2008 Congressional Budget and/or the FY 2007 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 178 provides the definition, data source, frequency of collection, any data limitations, and data verification and measure validation for each of VA’s 23 key measures. The Assessment of Data Quality beginning on page 166 provides an overall view of how our programs verify and validate data for all of the measures. Definitions for the key as well as supporting measures are located in Part IV beginning on page 370.



**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
(G=Green; Y=Yellow; R=Red)**

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	

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 a leader in providing specialized health care services.

Prevention Index II (Special Populations) (through May)	N/A	80%	86%	87%	* 86% G	86%	86%
Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) or Healthcare for Homeless Veterans (HCHV) Community-based Contract Residential Care Program to an independent or a secured institutional living arrangement (1) This measure should not have been included in the final FY 2006 performance plan (that is, the FY 2007 budget submission).	65%	72%	79%	83%	(1)	(1)	(1)
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 with an injury or illness	N/A	N/A	N/A	N/A	Baseline	Baseline	90%

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.

National accuracy rate (core rating work) % (Compensation) (through July)	80%	86%	87%	84%	* 88% G	87%	98%
Rating-related compensation actions - average days pending	179	114	120	122	130 G	150	78
Compensation & Pension rating-related actions - average days to process	223	182	166	167	177 G	185	125
Overall satisfaction rate % (Compensation)	55%	58%	59%	Available 2007	TBD	58%	90%
Non-rating compensation actions - average days to process	57	49	50	59	76 R	58	40
Non-rating compensation actions - average days pending	93	95	94	98	116 R	95	60
National accuracy rate (compensation authorization work) (through July)	83%	88%	90%	90%	* 91% Y	93%	98%
Average number of days to initiate development of remands at the Appeals Management Center (Compensation)	N/A	N/A	N/A	28	32 R	16	15

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**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
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Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans	N/A	N/A	N/A	TBD **	TBD **	TBD **	50%
Percent of compensation recipients who were kept informed of the full range of available benefits	40%	42%	43%	Available 2007	TBD	45%	60%
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	TBD **	TBD **	TBD **	70%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	84%	77%	81%	85%	* 83% Y	90%	98%
Telephone activities - abandoned call rate % (Compensation & Pension)	9%	9%	7%	8%	8% Y	7%	3%
Telephone activities - blocked call rate % (Compensation & Pension)	7%	3%	2%	3%	4% Y	2%	2%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (percent completed untimely) (Compensation & Pension)	9%	11%	12%	11%	9% Y	8%	4%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (percent of total pending overdue) (Compensation & Pension)	16%	20%	14%	12%	12% G	12%	4%
Productivity Index (Compensation and Pension)	N/A	N/A	N/A	N/A	90% Y	96%	100%
Deficiency-free decision rate (BVA)	87.6%	89.0%	93.0%	89.0%	93.0% G	92.0%	95.0%
Appeals resolution time (Days) (Joint measure with VBA) (BVA)	731	633	529	622	657 R	600	365
BVA Cycle Time (Days)	86	135	98	104	148 R	105	104
Appeals decided per Veterans Law Judge (BVA)	321	604	691	621	698 G	625	732
Cost per case (BVA)	\$2,702	\$1,493	\$1,302	\$1,453	\$1,381 G	\$1,552	\$1,443
** Pending results of the Veterans' Disability Benefits Commission that began work in May 2005 and will conclude its work in October 2007.							

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Strategic Goal/Measure (Key Measures in Bold)	Results				Target		Strategic Target
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Objective 1.3: Provide eligible service-connected disabled veterans with the opportunity to become employable and obtain and maintain employment, while delivering special support to veterans with serious employment handicaps.

Rehabilitation rate % (VR&E)	62%	59%	62%	63%	73% G	69%	70%
Speed of entitlement decisions in average days (VR&E)	65	63	57	62	60 Y	58	60
Accuracy of decisions (Services) % (VR&E)	81%	82%	86%	87%	82% Y	90%	96%
Customer satisfaction (Survey) % (VR&E)	77%	N/A **	79%	N/A **	TBD	82%	92%
Accuracy of Vocational Rehabilitation program completion decisions % (VR&E)	81%	81%	94%	97%	95% Y	96%	95%
Serious Employment Handicap (SEH) Rehabilitation Rate % (VR&E) ***	62%	58%	N/A	N/A	73% G	65%	66%
Common Measures****							
Percent of participants employed first quarter after program exit (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Percent of participants still employed three quarters after program exit (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Percent change in earnings from pre-application to post-program employment (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Average cost of placing participant in employment (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
** No customer satisfaction survey was performed in 2003 or 2005. *** VR&E identified a potential weakness in the program because it had only one outcome measure. Therefore, the SEH Rehab. Rate measure was reinstated. This measure had been used until 2004. **** These Common Measures are in support of the President's Management Agenda to integrate budget and performance. Targets for these measures are being developed.							

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 (Compensation)	172	153	125	124	136 R	120	90
Percent of DIC recipients above the poverty level (Compensation)	N/A	N/A	99%	TBD **	TBD **	TBD **	100%
Percent of DIC recipients who are satisfied that VA recognized their sacrifice (Compensation)	N/A	N/A	80%	TBD **	TBD **	TBD **	90%
** Pending results of the Veterans' Disability Benefits Commission that began work in May 2005 and will conclude its work in October 2007.							

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**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
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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 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	N/A	N/A	N/A	N/A	Baseline	Baseline	72%
Percent of appointments for primary care scheduled within 30 days of desired date for veterans and service members returning from a combat zone	N/A	N/A	N/A	N/A	Baseline	Baseline	94%
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 (Compensation) (1) The FY 2006 result is a more accurate depiction of BDD participation as VBA moved to a new automated BDN data collection methodology.	N/A	N/A	N/A	55%	(1) 44% Y	53%	65%
Number of implementation guides developed for those Consolidated Health Informatics Standards adopted by VA and DoD	N/A	N/A	N/A	2	3 G	3	9
Number of inpatient admissions and outpatient visits at Joint Ventures and significant sites (Facilities providing 500 or more outpatient visits and/or admissions per year) (1) Includes data for outpatient visits only. A way of collecting data on inpatient admissions has not yet been established.	N/A	N/A	N/A	N/A	(1) * 121,229	Baseline	TBD

Objective 2.2: Enhance the ability of veterans and servicemembers to achieve educational and career goals by providing timely and accurate decisions on education claims and continuing payments at appropriate levels.

Average days to complete original education claims	34	23	26	33	40 R	27	10
Average days to complete supplemental education claims	16	12	13	19	20 R	13	7
Montgomery GI Bill usage rate (%): All program participants (Education)	56%	58%	65%	67%	69% G	67%	75%
Montgomery GI Bill usage rate (%): Veterans who have passed their 10-year eligibility period (Education)	N/A	66%	71%	70%	71% Y	72%	80%

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Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Percent of Montgomery GI Bill participants who successfully completed an education or training program (1) Measure under development	N/A	N/A	N/A	N/A	(1) TBD	TBD	TBD
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 (1) Measure under development	N/A	N/A	N/A	N/A	(1) TBD	TBD	TBD
Customer satisfaction-high rating (Education) % (1) Corrected (2) No customer satisfaction survey was performed in 2005	87%	89%	(1) 86%	(2) N/A	TBD	87%	95%
Telephone Activities - Blocked call rate (Education) %	26%	13%	20%	38%	38% Y	29%	10%
Telephone Activities - Abandoned call rate (Education) %	11%	7%	10%	17%	19% Y	13%	5%
Payment accuracy rate (Education) %	93%	94%	94%	96%	95% G	95%	97%

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.

Foreclosure avoidance through servicing (FATS) ratio % (Housing)	43%	45%	44%	48%	54% G	47%	47%
Veterans satisfaction level % (Housing) (1) No Housing survey was completed in 2004 and 2005.	94%	95%	(1) N/A	(1) N/A	TBD	96%	95%
Statistical quality index % (Housing) (through August)	97%	98%	98%	98%	* 99% G	97%	98%
Percent of active duty personnel and veterans who could not have purchased a home without VA assistance (Housing) (Measure under development)	N/A	N/A	N/A	N/A	TBD	TBD	TBD

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Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	

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 of enrolled veterans, with special focus on veterans with service-connected conditions, those unable to defray the costs, and those statutorily eligible for care.

Percent of patients rating VA health care service as very good or excellent: Inpatient (through May) Outpatient (through May)	70%	74%	74%	77%	* 78% G	74%	74%
	71%	73%	72%	77%	* 78% G	73%	73%
	89%	93%	94%	96%	* 96% G	96%	94%
Percent of specialty care appointments scheduled within 30 days of desired date (1) results as of 9/30, (2) reflects cum. for year, (3) henceforth, eight clinical areas now included instead of five (through May)	(1) 86%	(2) 89%	(3) 93%	93%	* 95% G	93%	93%
Clinical Practice Guidelines Index (through May)	Baseline	70%	77%	87%	* 87% G	77%	80%
Prevention Index II (through May)	82%	83%	88%	90%	* 90% G	88%	88%
Number of patients under non-institutional long-term care as expressed by average daily census	24,126	24,413	25,523	27,469	* 29,496 Y	32,105	49,486
Percent of appointments scheduled within 30 days of desired appointment date (through May)	N/A	N/A	N/A	93.7%	* 95% G	93.7%	93%
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities (through May)	65%	67%	69%	73%	* 74% G	68%	90%
Percent of outpatient encounters that have electronic progress notes signed within 2 days (through May)	N/A	N/A	84%	85%	* 86% G	86%	87%
Percent of admission notes by residents that have a note from attending physician within one day of admission: Medicine (through May) Psychiatry (through May) Surgery (through May)							
	N/A	N/A	N/A	95%	* 96% G	85%	95%
	N/A	N/A	N/A	95%	* 98% G	85%	95%
	N/A	N/A	N/A	75%	* 86% G	85%	95%

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

Non-rating pension actions - average days to process	65	67	58	68	92 R	66	60
National accuracy rate (authorization pension work) % (through July)	76%	81%	84%	86%	* 88% G	88%	98%
Compensation & Pension rating-related actions - average days to process	223	182	166	167	177 G	185	125

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**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
(G=Green; Y=Yellow; R=Red)**

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
National accuracy rate (core rating-related pension work) % (through July)	80%	91%	93%	90%	* 90% Y	93%	98%
Rating-related pension actions - average days pending	100	98	77	83	90 R	69	65
Overall satisfaction rate % (Pension)	65%	66%	66%	Available 2007	TBD	66%	90%
Non-rating pension actions - average days pending	90	61	102	111	161 R	73	50
Percent of pension recipients who were informed of the full range of available benefits	38%	39%	40%	Available 2007	TBD	40%	60%
Percent of pension recipients who said their claim determination was very or somewhat fair	65%	62%	64%	Available 2007	TBD	65%	75%
** Percent of VA beneficiaries receiving financial assistance for medical expenses (Pension)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
** Percent of pension recipients who believe that the processing of their claim reflects the courtesy, compassion, and respect due to a veteran	N/A	N/A	N/A	N/A	TBD	TBD	TBD
National accuracy rate (fiduciary work) (%) (Compensation & Pension) (through July)	84%	77%	81%	85%	* 83% Y	90%	98%
Telephone activities - abandoned call rate (Compensation & Pension)	9%	9%	7%	8%	8% Y	7%	3%
Telephone activities - blocked call rate (Compensation & Pension)	7%	3%	2%	3%	4% Y	2%	2%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary exams (percent completed untimely) (Compensation & Pension)	9%	11%	12%	11%	9% Y	8%	4%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary exams (percent of total pending overdue) (Compensation & Pension)	16%	20%	14%	12%	12% G	12%	4%
Productivity Index (Compensation and Pension)	N/A	N/A	N/A	N/A	90% Y	96%	100%
** New measures added during Pensions PART review.							

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

Average number of days to process insurance disbursements (Insurance)	2.6	2.4	1.8	1.8	1.8 G	2.7	2.7
Percent of servicemembers covered by SGLI (Insurance)	N/A	N/A	N/A	98%	99% G	98%	98%
Conversion rate of disabled SGLI members to VGLI (Insurance)	N/A	N/A	N/A	35%	41% Y	53%	65%

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Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average enlisted service member (Insurance)	N/A	N/A	N/A	1.9	1.8 G	1.8	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average officer (Insurance)	N/A	N/A	N/A	1.0	0.9 G	0.9	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average service member (Insurance)	N/A	N/A	N/A	1.6	1.6 G	1.6	1.0
Ratio of SGLI premium rates charged per \$1,000 compared to the premium rates charged by other organizations per \$1,000 for similar coverage (Insurance)	N/A	N/A	N/A	1.4	1.3 G	1.0	1.0
Ratio of VGLI premium rates charged per \$1,000 compared to the premium rates charged by other organizations per \$1,000 for similar coverage (Insurance)	N/A	N/A	N/A	0.9	0.9 Y	1.0	1.0
Rate of high veterans' satisfaction ratings on services delivered % (Insurance)	95%	95%	96%	96%	96% G	95%	95%
Rate of low veterans' satisfaction ratings on services delivered % (Insurance)	3%	3%	2%	2%	1% G	2%	2%
Toll-free telephone blockage (busy signals) rate % (Insurance)	1%	0%	1%	0%	0% G	2%	1%
Average caller hold time (caller wait time) in seconds (Insurance)	18	17	17	11	11 G	20	20
Number of disbursements (death claims, loans, and cash surrenders) per FTE (Insurance)	N/A	N/A	N/A	1,692	1,697 G	1,684	TBD

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	73.9%	75.2%	75.3%	77.1%	80.2% Y	81.6%	90.0%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	91%	94%	94%	94%	94% Y	96%	100%
Average number of days to process a claim for reimbursement of burial expenses	48	42	48	57	72 R	48	21
National Accuracy Rate for burial claims processed % (through July)	85%	92%	94%	93%	* 94% G	94%	98%

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Strategic Goal/Measure (Key Measures in Bold)	Results				FY 2006 Result	Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Target		
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours	73%	73%	73%	73%	74% Y	76%	93%
Cumulative number of kiosks installed at national and state veterans cemeteries	42	50	60	69	80 G	76	108

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	49%	72%	87%	94%	95% G	90%	90%
Percent of applications for headstones and markers for the graves of veterans who are not buried in national cemeteries processed within 20 days	N/A	N/A	N/A	13%	62% Y	70%	90%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete	N/A	N/A	98%	99%	99% G	99%	99%
Percent of headstones and markers that are undamaged and correctly inscribed	96%	97%	97%	96%	96% Y	97%	98%

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 to support national, state, and local emergency management and homeland security efforts.

Percent of Emergency Planners who have completed orientation (OS&P)	N/A	N/A	N/A	100%	90% Y	100%	100%
Percent of Under Secretaries, Assistant Secretaries, and Other Key Officials who self-certify their teams "ready to deploy" to their COOP site (OS&P)	N/A	N/A	N/A	85%	85% Y	100%	100%

Objective 4.2: Advance VA medical research and develop 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 peer-reviewed publications authored by VA investigators within the fiscal year	N/A	N/A	2,557	2,793	* 2,897 G	2,655	3,000
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Strategic Goal/Measure (Key Measures in Bold)	Results				Target	Strategic Target	
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result		
Progress towards development of one new treatment for post-traumatic stress disorder (PTSD) (through August) (Five milestones to be achieved over 5 years)	N/A	N/A	33%	40%	* 47% Y	60%	100%
Progress towards development of a standard clinical practice for pressure ulcers (Six milestones to be achieved over 6 years)	N/A	N/A	43%	52%	61% Y	65%	100%

Objective 4.3: Enhance the quality of care to veterans and provide high-quality educational experiences for health profession trainees, created internally in VA and via partnerships with the academic community.

Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience	83	83	84	84	85 G	85	85
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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 service-disabled veteran-owned small businesses expressed as a percent of total procurement dollars (OSDBU) (through July) (1) Corrected	0.61%	0.49%	1.25%	(1) 2.15%	* 3.68% G	3.00%	3.00%
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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	97%	97%	98%	98%	97% Y	99%	100%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need	98%	97%	97%	98%	98% Y	99%	100%
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment	N/A	N/A	64%	70%	67% Y	72%	90%
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations	N/A	N/A	76%	72%	77% G	74%	90%
Percent of gravesites that have grades that are level and blend with adjacent grade levels	N/A	N/A	79%	84%	86% G	84%	95%

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	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	

Enabling Goal: Deliver world-class service to veterans and their families through effective communication and management of people, technology, business processes, and financial resources.

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

Percentage of VA employees who are veterans (HR&A)	N/A	24%	26%	28%	30.6% G	30%	36%
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Objective E-2: Improve communication with veterans, employees, and stakeholders about VA's mission, goals, and current performance, as well as benefits and services that the Department provides.

Percentage of statutory reports that are submitted to Congress within the required timeframe (OCLA)	59% w/i 45 days	70% w/i 30 days	54% w/i 15 days	21% by due date	13% by due date R	35% by due date	100%
Percent of newly elected/appointed state officials briefed within 60 days of taking office regarding VA programs and services (OPIA)	75%	80%	90%	100%	100% G	100%	100%

Objective E-3: Implement a One-VA information technology framework that enables the consolidation of IT solutions and the creation of cross-cutting common services to support the integration of information across business lines and provides secure, consistent, reliable, and accurate information to all interested parties.

Number of distinct data exchanges between VA and DoD (OI&T) DMDC is Defense Manpower Data Center	N/A	N/A	N/A	N/A	20 from DMDC to VA; 8 from VA to DMDC G	20 from DMDC to VA; 10 from VA to DMDC	1 from DMDC to VA; 1 from VA to DMDC
Number of business lines that are able to access a One VA Enterprise Data Service (OI&T) (1) This measure should not have been included in the final FY 2006 performance plan (that is, the FY 2007 budget submission).	(1)	(1)	(1)	(1)	(1)	(1)	(1)

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

Percent of cases using alternate dispute resolution (ADR) techniques (BCA) (1) Corrected	43%	20%	9%	(1) 6%	53% G	15%	25%
Gross Days Revenue Outstanding (GDRO) for third party collections	N/A	N/A	N/A	Baseline	54 G	70	60

* These are partial or estimated data; final data will be published in the FY 2008 Congressional Budget and/or the FY 2007 Performance and Accountability Report.



**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
(G=Green; Y=Yellow; R=Red)**

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Dollar value of 1st party and 3rd party collections:							
1st Party (\$ in millions)	\$486	\$685	\$742	\$772	\$863 G	\$827	\$1,019
3rd Party (\$ in millions)	\$690	\$804	\$960	\$1,056	\$1,096 Y	\$1,178	\$1,695
Total annual value of joint VA/DoD procurement contracts for high-cost medical equipment Measure description changed for clarification purposes only	N/A	N/A	N/A	Baseline	\$150M G	\$150M	\$200M
Obligations per unique patient user (VHA) (1) Corrected	\$4,928	\$5,202	(1) \$5,493	(1) \$5,597	* \$5,804 G	\$5,880	TBD
Average number of appointments per year per FTE (VHA) (1) Corrected	2,719	2,856	(1) 2,356	2,533	* 2,644 Y	2,678	TBD
Study subject accrual rate for multi-site clinical trials (through August)	N/A	N/A	N/A	29%	* 40% G	32%	50%
Percent of tort claims decided accurately at the administrative stage (OGC) Measure description changed for clarification purposes only	86.0%	86.0%	89.0%	88.4%	92.2% G	89.0%	90.0%
Cumulative % of FTEs (compared to total planned) covered by initiated Management Analysis/Business Process Reengineering studies of non-core commercial functions (OP&P)	N/A	N/A	N/A	N/A	0% R	33%	100%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0	0
Number of material weaknesses identified during the annual financial statement audit or identified by management (OM)	6	5	4	4	3 G	4	0
Percent of space utilization as compared to overall space (owned and direct-leased) (OAEM) (through August)	N/A	N/A	80% Baseline	98%	* 103% G	95%	95%
Percent Condition Index (owned buildings) (OAEM) (through August)	N/A	N/A	N/A	82% Baseline	* 80% Y	83%	87%
Ratio of non-mission dependent assets to total assets (OAEM) (through August)	N/A	N/A	N/A	22% Baseline	* 17% G	19%	10%
Ratio of operating costs per gross square foot (GSF) (OAEM) (through August) Targets and results have been adjusted to reflect Federal Real Property Council Tier 1 definitions and no longer include an inflation factor.	N/A	N/A	\$4.52	\$4.85	* \$4.83 Y	\$4.52	\$4.52

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**Table 1 - FY 2006 Performance Measures by Strategic Goal and Objective
(G=Green; Y=Yellow; R=Red)**

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Cumulative percentage decrease in facility traditional energy consumption per gross square foot from the 2003 baseline (OAEM)	N/A	Baseline	N/A	N/A	* 2% G	2%	20%
Number of arrests, indictments, convictions, administrative sanctions, and pretrial diversions	N/A	N/A	N/A	N/A	2,241	N/A	2,204
Percentage of successful prosecutions	N/A	N/A	N/A	N/A	96%	N/A	87%
Number of reports issued that identify opportunities for improvement and provide recommendations for corrective action	N/A	N/A	N/A	N/A	150	N/A	160
Number of CAP reports issued that include relevant health care delivery and benefits processing pulse points	N/A	N/A	N/A	N/A	64	N/A	76
Monetary benefits (dollars in millions)	N/A	N/A	N/A	N/A	\$900	N/A	\$1,033
Number of international benefit reviews conducted to determine the appropriateness of benefits processing for claimants living outside the 50 states	N/A	N/A	N/A	N/A	0	N/A	3
Maintain unqualified audit opinion of financial statements containing no material weaknesses or reportable conditions (Yes/No)	N/A	N/A	N/A	N/A	Yes	N/A	Yes
Percentage of recommendations implemented to improve efficiencies in operations through legislative, regulatory, policy, practices, and procedural change in VA	N/A	N/A	N/A	N/A	55%	N/A	90% ¹
Percentage of preaward recommendations sustained during contract negotiations	N/A	N/A	N/A	N/A	70%	N/A	65%
Achieve adoption of recommendations relative to IT systems in compliance with FISMA, regulations, and policies within one year from issuance of a report	N/A	N/A	N/A	N/A	0%	N/A	100%
Achieve a professional, competent, and credible reputation as a result of work performed (based on a scale of 0 to 5, where 5 is high):							
Investigations	N/A	N/A	N/A	N/A	4.9	N/A	5.0
Audit	N/A	N/A	N/A	N/A	4.3	N/A	5.0
Healthcare Inspections	N/A	N/A	N/A	N/A	4.6	N/A	5.0
CAP	N/A	N/A	N/A	N/A	4.7	N/A	5.0
¹ VA OIG intends that VA will implement all recommendations. This goal recognizes that some complex implementation actions may go beyond 2010, which is the out-year for OIG's Strategic Plan.							

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Veterans Health Administration							
	P&F ID Codes:		36-0152-0-1-703	36-0160-0-1-703;			
			36-0162-0-1-703	36-0181-0-1-703		36-5358-0-1-703	
			36-4014-0-3-705;	36-8180-0-7-705;		36-0165-0-1-703	
Medical Care Programs							
Resources							
FTE	183,712	186,553	194,272	197,650	197,902		
Total Program Costs (\$ in millions)	\$24,368	\$27,654	\$30,772	\$31,668	\$33,468		
Performance Measures							
Percent of patients rating VA health care service as very good or excellent:							
Inpatient (through May)	70%	74%	74%	77%	* 78% G	74%	74%
Outpatient (through May)	71%	73%	72%	77%	* 78% G	73%	73%
Percent of primary care appointments scheduled within 30 days of desired date (through May)	89%	93%	94%	96%	* 96% G	96%	94%
Percent of specialty care appointments scheduled within 30 days of desired date (1) results as of 9/30, (2) reflects cum. for year, (3) henceforth, eight clinical areas now included instead of five (through May)	(1) 86%	(2) 89%	(3) 93%	93%	* 95% G	93%	93%
Clinical Practice Guidelines Index (through May)	Baseline	70%	77%	87%	* 87% G	77%	80%
Prevention Index II (through May)	82%	83%	88%	90%	* 90% G	88%	88%
Percent of appointments scheduled within 30 days of desired appointment date (through May)	N/A	N/A	N/A	93.7%	* 95% G	93.7%	93%
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities (through May)	65%	67%	69%	73%	* 74% G	68%	90%
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	N/A	N/A	N/A	N/A	Baseline	Baseline	72%
Percent of outpatient encounters that have electronic progress notes signed within 2 days (through May)	N/A	N/A	84%	85%	* 86% G	86%	87%
Gross Days Revenue Outstanding (GDRO) for third party collections	N/A	N/A	N/A	Baseline	54 G	70	60
Dollar value of 1st party and 3rd party collections:							
1st Party (\$ in millions)	\$486	\$685	\$742	\$772	\$863 G	\$827	\$1,019
3rd Party (\$ in millions)	\$690	\$804	\$960	\$1,056	\$1,096 Y	\$1,178	\$1,695
Total annual value of joint VA/DoD procurement contracts for high-cost medical equipment <small>Measure description changed for clarification purposes only</small>	N/A	N/A	N/A	Baseline	\$150M G	\$150M	\$200M

* These are partial or estimated data; final data will be published in the FY 2008 Congressional Budget and/or the FY 2007 Performance and Accountability Report.



Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Number of implementation guides developed for those Consolidated Health Informatics Standards adopted by VA and DoD	N/A	N/A	N/A	2	3 G	3	9
Number of inpatient admissions and outpatient visits at Joint Ventures and significant sites (Facilities providing 500 or more outpatient visits and/or admissions per year) (1) Includes data for outpatient visits only. A way of collecting data on inpatient admissions has not yet been established.	N/A	N/A	N/A	N/A	(1) * 121,229	Baseline	TBD
Common Measures							
Obligations per unique patient user (VHA) (1) Corrected	\$4,928	\$5,202	(1) \$5,493	(1) \$5,597	* \$5,804 G	\$5,880	TBD
Average number of appointments per year per FTE (VHA) (1) Corrected	2,719	2,856	(1) 2,356	2,533	* 2,644 Y	2,678	TBD
Special Emphasis Programs							
Number of patients under non-institutional long-term care as expressed by average daily census	24,126	24,413	25,523	27,469	* 29,496 Y	32,105	49,486
Prevention Index II (Special Populations) (through May)	N/A	80%	86%	87%	* 86% G	86%	86%
Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) or Healthcare for Homeless Veterans (HCHV) Community-based Contract Residential Care Program to an independent or a secured institutional living arrangement (1) This measure should not have been included in the final FY 2006 performance plan (that is, the FY 2007 budget submission).	65%	72%	79%	83%	(1)	(1)	(1)
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 with an injury or illness	N/A	N/A	N/A	N/A	Baseline	Baseline	90%
Percent of appointments for primary care scheduled within 30 days of desired date for veterans and service members returning from a combat zone	N/A	N/A	N/A	N/A	Baseline	Baseline	94%
Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience	83	83	84	84	85 G	85	85
Percent of admission notes by residents that have a note from attending physician within one day of admission:							
Medicine (through May)	N/A	N/A	N/A	95%	* 96% G	85%	95%
Psychiatry (through May)	N/A	N/A	N/A	95%	* 98% G	85%	95%
Surgery (through May)	N/A	N/A	N/A	75%	* 86% G	85%	95%

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Medical Research		P&F ID Codes:		36-0161-0-1-703; 36-4026-0-3-703	36-0160-0-1-703;		
Resources							
FTE	3,096	3,217	3,234	3,206	3,195		
Total Program Costs (\$ in Millions)	\$964	\$1,022	\$1,067	\$851	\$831		
Performance Measures							
Number of peer-reviewed publications authored by VA investigators within the fiscal year	N/A	N/A	2,557	2,793	* 2,897 G	2,655	3,000
Progress towards development of one new treatment for post-traumatic stress disorder (PTSD) (through August) (Five milestones to be achieved over 5 years)	N/A	N/A	33%	40%	* 47% Y	60%	100%
Progress towards development of a standard clinical practice for pressure ulcers (Six milestones to be achieved over 6 years)	N/A	N/A	43%	52%	61% Y	65%	100%
Study subject accrual rate for multi-site clinical trials (through August)	N/A	N/A	N/A	29%	* 40% G	32%	50%

Veterans Benefits Administration

Compensation		P&F ID Codes:		36-0102-0-1-701	36-0151-0-1-705		
Resources							
FTE	7,164	7,525	7,568	7,538	7,772		
Total Program Costs (\$ in millions)	\$23,056	\$25,550	\$27,261	\$29,601	\$31,903		
Performance Measures							
National accuracy rate (core rating work) % (Compensation) (through July)	80%	86%	87%	84%	* 88% G	87%	98%
Compensation & Pension rating-related actions - average days to process	223	182	166	167	177 G	185	125
Rating-related compensation actions - average days pending	179	114	120	122	130 G	150	78
Average days to process - DIC actions (Compensation)	172	153	125	124	136 R	120	90
Overall satisfaction rate % (Compensation)	55%	58%	59%	Available 2007	TBD	58%	90%
Non-rating compensation actions - average days to process	57	49	50	59	76 R	58	40
Non-rating compensation actions - average days pending	93	95	94	98	116 R	95	60

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
National accuracy rate (compensation authorization work) (through July)	83%	88%	90%	90%	* 91% Y	93%	98%
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 (Compensation) (1) The FY 2006 result is a more accurate depiction of BDD participation as VBA moved to a new automated BDN data collection methodology.	N/A	N/A	N/A	55%	(1) 44% Y	53%	65%
Average number of days to initiate development of remands at the Appeals Management Center (Compensation)	N/A	N/A	N/A	28	32 R	16	15
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans	N/A	N/A	N/A	TBD **	TBD **	TBD **	50%
Percent of compensation recipients who were kept informed of the full range of available benefits	40%	42%	43%	Available 2007	TBD	45%	60%
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	TBD **	TBD **	TBD **	70%
Percent of DIC recipients above the poverty level (Compensation)	N/A	N/A	99%	TBD **	TBD **	TBD **	100%
Percent of DIC recipients who are satisfied that VA recognized their sacrifice (Compensation)	N/A	N/A	80%	TBD **	TBD **	TBD **	90%
Productivity Index (Compensation and Pension)	N/A	N/A	N/A	N/A	90% Y	96%	100%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	84%	77%	81%	85%	* 83% Y	90%	98%
Telephone activities - abandoned call rate % (Compensation & Pension)	9%	9%	7%	8%	8% Y	7%	3%
Telephone activities - blocked call rate % (Compensation & Pension)	7%	3%	2%	3%	4% Y	2%	2%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (percent completed untimely) (Compensation & Pension)	9%	11%	12%	11%	9% Y	8%	4%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary Exams (percent of total pending overdue) (Compensation & Pension)	16%	20%	14%	12%	12% G	12%	4%

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**Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)**

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Average number of days to process a claim for reimbursement of burial expenses	48	42	48	57	72 R	48	21
National Accuracy Rate for burial claims processed % (through July)	85%	92%	94%	93%	* 94% G	94%	98%
** Pending results of the Veterans' Disability Benefits Commission that began work in May 2005 and will conclude its work in October 2007.							

<i>Pension</i>		P&F ID Codes:			36-0151-0-1-705	36-0200-0-1-701	
Resources							
FTE	1,791	1,827	1,535	1,540	1,495		
Total Program Costs (\$ in millions)	\$3,328	\$3,378	\$3,495	\$3,569	\$3,872		
Performance Measures							
Non-rating pension actions - average days to process	65	67	58	68	92 R	66	60
National accuracy rate (authorization pension work) % (through July)	76%	81%	84%	86%	* 88% G	88%	98%
Compensation & Pension rating-related actions - average days to process	223	182	166	167	177 G	185	125
National accuracy rate (core rating-related pension work) % (through July)	80%	91%	93%	90%	* 90% Y	93%	98%
Rating-related pension actions - average days pending	100	98	77	83	90 R	69	65
Overall satisfaction rate % (Pension)	65%	66%	66%	Available 2007	TBD	66%	90%
Non-rating pension actions - average days pending	90	61	102	111	161 R	73	50
Percent of pension recipients who were informed of the full range of available benefits	38%	39%	40%	Available 2007	TBD	40%	60%
Percent of pension recipients who said their claim determination was very or somewhat fair	65%	62%	64%	Available 2007	TBD	65%	75%
** Percent of VA beneficiaries receiving financial assistance for medical expenses (Pension)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
** Percent of pension recipients who believe that the processing of their claim reflects the courtesy, compassion, and respect due to a veteran	N/A	N/A	N/A	N/A	TBD	TBD	TBD

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Productivity Index (Compensation and Pension)	N/A	N/A	N/A	N/A	90% Y	96%	100%
National accuracy rate (fiduciary work) (%) (Compensation & Pension) (through July)	84%	77%	81%	85%	* 83% Y	90%	98%
Telephone activities - abandoned call rate (Compensation & Pension)	9%	9%	7%	8%	8% Y	7%	3%
Telephone activities - blocked call rate (Compensation & Pension)	7%	3%	2%	3%	4% Y	2%	2%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary exams (percent completed untimely) (Compensation & Pension)	9%	11%	12%	11%	9% Y	8%	4%
Fiduciary Activities - Initial Appt. & Fiduciary - Beneficiary exams (percent of total pending overdue) (Compensation & Pension)	16%	20%	14%	12%	12% G	12%	4%
** New measures added during Pensions PART review.							

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 101-103.

	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006	Claims Completed in FY 2006
Average days to process rating-related actions	223	182	166	167	177	774,378
Initial disability compensation	256	207	186	185	196	210,662
Initial death compensation/DIC	172	153	125	124	136	27,567
Reopened compensation	242	193	178	179	191	417,738
Initial disability pension	123	93	94	98	113	34,251
Reopened pension	128	101	101	103	120	49,222
Reviews, future exams	127	95	87	95	79	27,788
Reviews, hospital	74	54	54	55	53	7,130

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
P&F ID Codes: 36-0137-0-1-702; 36-0151-0-1-705 36-8133-0-7-702;							
<i>Education</i>							
Resources							
FTE	864	866	841	852	884		
Total Program Costs (\$ in millions)	\$1,831	\$2,189	\$2,495	\$2,690	\$2,838		
Performance Measures							
Average days to complete original education claims	34	23	26	33	40 R	27	10
Average days to complete supplemental education claims	16	12	13	19	20 R	13	7
Montgomery GI Bill usage rate (%): All program participants (Education)	56%	58%	65%	67%	69% G	67%	75%
Montgomery GI Bill usage rate (%): Veterans who have passed their 10-year eligibility period (Education)	N/A	66%	71%	70%	71% Y	72%	80%
Percent of Montgomery GI Bill participants who successfully completed an education or training program (1) Measure under development	N/A	N/A	N/A	N/A	(1) TBD	TBD	TBD
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 (1) Measure under development	N/A	N/A	N/A	N/A	(1) TBD	TBD	TBD
Customer satisfaction-high rating (Education) % (1) Corrected (2) No customer satisfaction survey was performed in 2005	87%	89%	(1) 86%	(2) N/A	TBD	87%	95%
Telephone Activities - Blocked call rate (Education) %	26%	13%	20%	38%	38% Y	29%	10%
Telephone Activities - Abandoned call rate (Education) %	11%	7%	10%	17%	19% Y	13%	5%
Payment accuracy rate (Education) %	93%	94%	94%	96%	95% G	95%	97%

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	

Vocational Rehabilitation and Employment

P&F ID Codes: 36-0135-0-1-702;
36-0151-0-1-705

Resources							
FTE	1,057	1,091	1,105	1,112	1,125		
Total Program Costs (\$ in millions)	\$606	\$631	\$676	\$741	\$700		
Performance Measures							
Rehabilitation rate % (VR&E)	62%	59%	62%	63%	73% G	69%	70%
Speed of entitlement decisions in average days (VR&E)	65	63	57	62	60 Y	58	60
Accuracy of decisions (Services) % (VR&E)	81%	82%	86%	87%	82% Y	90%	96%
Customer satisfaction (Survey) % (VR&E)	77%	N/A **	79%	N/A **	TBD	82%	92%
Accuracy of Vocational Rehabilitation program completion decisions % (VR&E)	81%	81%	94%	97%	95% Y	96%	95%
Serious Employment Handicap (SEH) Rehabilitation Rate % (VR&E) ***	62%	58%	N/A	N/A	73% G	65%	66%
Common Measures ****							
Percent of participants employed first quarter after program exit (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Percent of participants still employed three quarters after program exit (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Percent change in earnings from pre-application to post-program employment (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
Average cost of placing participant in employment (VR&E)	N/A	N/A	N/A	N/A	TBD	TBD	TBD
** No customer satisfaction survey was performed in 2003 or 2005. *** VR&E identified a potential weakness in the program because it had only one outcome measure. Therefore, the SEH Rehab. Rate measure was reinstated. This measure had been used until 2004. **** These Common Measures are in support of the President's Management Agenda to integrate budget and performance. Targets for these measures are being developed.							

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
<i>Housing</i>	P&F ID Codes: 36-1119-0-1-704; 36-4025-0-3-704 36-0128-0-1-704; 36-4127-0-3-704 36-4130-0-3-704 36-0151-0-1-705						
Resources							
FTE	1,718	1,404	1,256	1,052	988		
Total Program Costs (\$ in millions)	\$1,017	\$1,520	\$393	\$2,068 ^(a)	\$210 ^(b)		
Performance Measures							
Foreclosure avoidance through servicing (FATS) ratio % (Housing)	43%	45%	44%	48%	54% G	47%	47%
Veterans satisfaction level % (Housing) (1) No Housing survey was completed in 2004 and 2005.	94%	95%	(1) N/A	(1) N/A	TBD	96%	95%
Statistical quality index % (Housing) (through August)	97%	98%	98%	98%	* 99% G	97%	98%
Percent of active duty personnel and veterans who could not have purchased a home without VA assistance (Housing) (Measure under development)	N/A	N/A	N/A	N/A	TBD	TBD	TBD

^(a)Includes \$1,886 in one-time re-estimates executed in FY 20005 for prior year loan cohorts. Re-estimation is a mandatory process conducted annually to comply with Credit Reform Act guidelines.

^(b)This is the total of administrative costs only. The total benefits program costs are \$0. This is due to negative subsidy of the Loan Guaranty program.

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**Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)**

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
<i>Insurance</i>	P&F ID Codes:		36-0120-0-1-701;		36-4012-0-3-701;		
	36-4010-0-3-701;		36-4009-0-3-701;		36-8132-0-7-701;		
	36-8150-0-7-701;		36-8455-0-8-701;		36-0151-0-1-705		
Resources							
FTE	479	493	490	488	503		
Total Program Costs (\$ in millions)	\$2,749	\$2,695	\$2,581	\$2,537	\$3,343		
Performance Measures							
Average number of days to process insurance disbursements (Insurance)	2.6	2.4	1.8	1.8	1.8 G	2.7	2.7
Percent of servicemembers covered by SGLI (Insurance)	N/A	N/A	N/A	98%	99% G	98%	98%
Conversion rate of disabled SGLI members to VGLI (Insurance)	N/A	N/A	N/A	35%	41% Y	53%	65%
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average enlisted service member (Insurance)	N/A	N/A	N/A	1.9	1.8 G	1.8	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average officer (Insurance)	N/A	N/A	N/A	1.0	0.9 G	0.9	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average service member (Insurance)	N/A	N/A	N/A	1.6	1.6 G	1.6	1.0
Ratio of SGLI premium rates charged per \$1,000 compared to the premium rates charged by other organizations per \$1,000 for similar coverage (Insurance)	N/A	N/A	N/A	1.4	1.3 G	1.0	1.0
Ratio of VGLI premium rates charged per \$1,000 compared to the premium rates charged by other organizations per \$1,000 for similar coverage (Insurance)	N/A	N/A	N/A	0.9	0.9 Y	1.0	1.0
Rate of high veterans' satisfaction ratings on services delivered % (Insurance)	95%	95%	96%	96%	96% G	95%	95%
Rate of low veterans' satisfaction ratings on services delivered % (Insurance)	3%	3%	2%	2%	1% G	2%	2%
Toll-free telephone blockage (busy signals) rate % (Insurance)	1%	0%	1%	0%	0% G	2%	1%
Average caller hold time (caller wait time) in seconds (Insurance)	18	17	17	11	11 G	20	20
Number of disbursements (death claims, loans, and cash surrenders) per FTE (Insurance)	N/A	N/A	N/A	1,692	1,697 G	1,684	TBD

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
National Cemetery Administration							
<i>Burial Program</i>	P&F Codes: 36-0129-0-1-705;		36-0183-0-1-705				
	36-5392-0-1-705		36-0151-0-1-705				
Resources							
FTE	1,454	1,476	1,492	1,523	1,566		
Total Program Costs (\$ in millions)	\$374	\$348	\$406	\$403	\$397		
Performance Measures							
Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	73.9%	75.2%	75.3%	77.1%	80.2% Y	81.6%	90.0%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	91%	94%	94%	94%	94% Y	96%	100%
Percent of graves in national cemeteries marked within 60 days of interment	49%	72%	87%	94%	95% G	90%	90%
Percent of respondents who rate national cemetery appearance as excellent	97%	97%	98%	98%	97% Y	99%	100%
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours	73%	73%	73%	73%	74% Y	76%	93%
Cumulative number of kiosks installed at national and state veterans cemeteries	42	50	60	69	80 G	76	108
Percent of applications for headstones and markers for the graves of veterans who are not buried in national cemeteries processed within 20 days	N/A	N/A	N/A	13%	62% Y	70%	90%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete	N/A	N/A	98%	99%	99% G	99%	99%
Percent of headstones and markers that are undamaged and correctly inscribed	96%	97%	97%	96%	96% Y	97%	98%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need	98%	97%	97%	98%	98% Y	99%	100%
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment	N/A	N/A	64%	70%	67% Y	72%	90%
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations	N/A	N/A	76%	72%	77% G	74%	90%
Percent of gravesites that have grades that are level and blend with adjacent grade levels	N/A	N/A	79%	84%	86% G	84%	95%

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	

Board of Veterans' Appeals

P&F ID Code: 36-0151-0-1-700

Resources							
FTE	448	451	440	433	436		
Administrative costs only (\$ in millions)	\$47	\$47	\$50	\$50	\$54		
Performance Measures							
Deficiency-free decision rate (BVA)	87.6%	89.0%	93.0%	89.0%	93.0% G	92.0%	95.0%
Appeals resolution time (Days) (Joint measure with VBA) (BVA)	731	633	529	622	657 R	600	365
BVA Cycle Time (Days)	86	135	98	104	148 R	105	104
Appeals decided per Veterans Law Judge (BVA)	321	604	691	621	698 G	625	732
Cost per case (BVA)	\$2,702	\$1,493	\$1,302	\$1,453	\$1,381 G	\$1,552	\$1,443

Departmental Management

P&F ID Codes 36-0151-0-1-705; 36-0110-0-1-703
36-0111-0-1-703 36-4537-0-4-705
36-4539-0-4-705

Total Program Costs (less BVA and OIG costs, which are identified separately)							
FTE	2,825	2,597	2,697	3,167	2,162		
Total Program Costs (\$ in millions)	\$515	\$617	\$718	\$762	\$928		
Performance Measures							
Attainment of statutory minimum goals for service-disabled veteran-owned small businesses expressed as a percent of total procurement dollars (OSDBU) (through July) (1) Corrected	0.61%	0.49%	1.25%	(1) 2.15%	* 3.68% G	3.00%	3.00%
Percentage of VA employees who are veterans (HR&A)	N/A	24%	26%	28%	30.6% G	30%	36%
Percent of Emergency Planners who have completed orientation (OS&P)	N/A	N/A	N/A	100%	90% Y	100%	100%
Percent of Under Secretaries, Assistant Secretaries, and Other Key Officials who self-certify their teams "ready to deploy" to their COOP site (OS&P)	N/A	N/A	N/A	85%	85% Y	100%	100%
Cumulative % of FTEs (compared to total planned) covered by initiated Management Analysis/Business Process Reengineering studies of non-core commercial functions (OP&P)	N/A	N/A	N/A	N/A	0% R	33%	100%

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Percent of cases using alternate dispute resolution (ADR) techniques (BCA) (1) Corrected	43%	20%	9%	(1) 6%	53% G	15%	25%
Percent of tort claims decided accurately at the administrative stage (OGC) Measure description changed for clarification purposes only	86.0%	86.0%	89.0%	88.4%	92.2% G	89.0%	90.0%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0	0
Number of material weaknesses identified during the annual financial statement audit or identified by management (OM)	6	5	4	4	3 G	4	0
Number of distinct data exchanges between VA and DoD (OI&T) DMDC is Defense Manpower Data Center	N/A	N/A	N/A	N/A	20 from DMDC to VA; 8 from VA to DMDC G	20 from DMDC to VA; 10 from VA to DMDC	1 from DMDC to VA; 1 from VA to DMDC
Number of business lines that are able to access a One VA Enterprise Data Service (OI&T) (1) This measure should not have been included in the final FY 2006 performance plan (that is, the FY 2007 budget submission).	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Percentage of statutory reports that are submitted to Congress within the required timeframe (OCLA)	59% w/i 45 days	70% w/i 30 days	54% w/i 15 days	21% by due date	13% by due date R	35% by due date	100%
Percent of newly elected/appointed state officials briefed within 60 days of taking office regarding VA programs and services (OPIA)	75%	80%	90%	100%	100% G	100%	100%
Percent of space utilization as compared to overall space (owned and direct-leased) (OAEM) (through August)	N/A	N/A	80% Baseline	98%	* 103% G	95%	95%
Percent Condition Index (owned buildings) (OAEM) (through August)	N/A	N/A	N/A	82% Baseline	* 80% Y	83%	87%
Ratio of non-mission dependent assets to total assets (OAEM) (through August)	N/A	N/A	N/A	22% Baseline	* 17% G	19%	10%
Ratio of operating costs per gross square foot (GSF) (OAEM) (through August) Targets and results have been adjusted to reflect Federal Real Property Council Tier 1 definitions and no longer include an inflation factor.	N/A	N/A	\$4.52	\$4.85	* \$4.83 Y	\$4.52	\$4.52
Cumulative percentage decrease in facility traditional energy consumption per gross square foot from the 2003 baseline (OAEM)	N/A	Baseline	N/A	N/A	* 2% G	2%	20%

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Table 2 - FY 2006 Performance Measures by Program
(G=Green; Y=Yellow; R=Red)

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Result	FY 2006 Target	
Office of Inspector General							
	P&F ID Code: 36-0170-0-1-705						
Resources							
FTE	393	399	434	454	510		
Administrative costs only (\$ in millions)	\$56	\$58	\$66	\$70	\$74		
Performance Measures							
Number of arrests, indictments, convictions, administrative sanctions, and pretrial diversions	N/A	N/A	N/A	N/A	2,241	N/A	2,204
Percentage of successful prosecutions	N/A	N/A	N/A	N/A	96%	N/A	87%
Number of reports issued that identify opportunities for improvement and provide recommendations for corrective action	N/A	N/A	N/A	N/A	150	N/A	160
Number of CAP reports issued that include relevant health care delivery and benefits processing pulse points	N/A	N/A	N/A	N/A	64	N/A	76
Monetary benefits (dollars in millions)	N/A	N/A	N/A	N/A	\$900	N/A	\$1,033
Number of international benefit reviews conducted to determine the appropriateness of benefits processing for claimants living outside the 50 states	N/A	N/A	N/A	N/A	0	N/A	3
Maintain unqualified audit opinion of financial statements containing no material weaknesses or reportable conditions (Yes/No)	N/A	N/A	N/A	N/A	Yes	N/A	Yes
Percentage of recommendations implemented to improve efficiencies in operations through legislative, regulatory, policy, practices, and procedural change in VA	N/A	N/A	N/A	N/A	55%	N/A	90% ¹
Percentage of preaward recommendations sustained during contract negotiations	N/A	N/A	N/A	N/A	70%	N/A	65%
Achieve adoption of recommendations relative to IT systems in compliance with FISMA, regulations, and policies within one year from issuance of a report	N/A	N/A	N/A	N/A	0%	N/A	100%
Achieve a professional, competent, and credible reputation as a result of work performed (based on a scale of 0 to 5, where 5 is high):							
Investigations	N/A	N/A	N/A	N/A	4.9	N/A	5.0
Audit	N/A	N/A	N/A	N/A	4.3	N/A	5.0
Healthcare Inspections	N/A	N/A	N/A	N/A	4.6	N/A	5.0
CAP	N/A	N/A	N/A	N/A	4.7	N/A	5.0
¹ VA OIG intends that VA will implement all recommendations. This goal recognizes that some complex implementation actions may go beyond 2010, which is the out-year for OIG's Strategic Plan.							

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Dropped Performance Measures That did not Report Final Results in The FY 2005 PAR

<i>Veterans Health Administration</i>	FY 2002	FY 2003	FY 2004	FY 2005 Final	FY 2005 Target
Ratio of collections to billings (expressed as a percentage)*	37%	41%	41%	41%	41%
Percentage of VAMCs contracted to serve as TRICARE network providers**	N/A	N/A	N/A	87%	Baseline
Percentage of clinicians who remain in the VA health care system for at least three years after completion of their career development award period***	N/A	N/A	N/A	69%	63%
Number of discovery disclosures by VA investigators***	N/A	N/A	N/A	165	188
<p>* The ratio of collections to billings was dropped as a measure because it did not accurately portray the performance of the VHA revenue cycle. The ratio of collections to billings measure is not a key standard in the private sector due to the different strategic positions that health care systems adopt related to pricing and contracting. Collections are considered the best key measure to evaluate overall improvement in collection performance in the private sector.</p> <p>** This measure was dropped because OMB wanted the measure replaced with a measure that better represented the level of sharing between VA and DoD.</p> <p>*** These measures were dropped because they are no longer PART performance measures (as of the 2005 PART for R & D).</p>					

<i>Departmental Management****</i>	FY 2002	FY 2003	FY 2004	FY 2005 Final	FY 2005 Target
Attainment of statutory minimum goals for small business expressed as a percent of total procurement (OSDBU)	31.2%	31.8%	28.5%	27.8%	23%
<p>**** Measure dropped due to VA consistently exceeding minimum statutory goal since being increased to 23% by Congress in 1997.</p>					