



Veterans
Administration

1980 Annual Report

Our 50th Anniversary



Administrator of
Veterans Affairs

1980 Annual Report

Our 50th Anniversary



Letter of Transmittal



To the President of the Senate and the Speaker of the House of Representatives of the 98th Congress:

In accordance with the provisions of 38, U.S.C., 214, I have the honor of submitting a report on the activities of the Veterans Administration for the fiscal year ending September 30, 1980.

The year 1980 marked the fiftieth year of this agency's service to the nation's veterans and their families. Over these 50 years, this service has grown to include:

The GI bills to educate and train veterans and their families . . . outpatient care where hospitalization is not needed . . . readjustment counseling in inner city settings . . . GI loans as vital factors in financing homes . . . toll-free telephone service . . . insurance to meet the needs of veterans and their survivors . . . separate appeals procedures to assure fairness.

While we are proud of the achievements of the past, we also look forward to further achievement as VA's mission of service continues into the next 50 years.

RUFUS H. WILSON
Acting Administrator of Veterans Affairs

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The Veteran

Comparative Highlights

Period of Service	Veteran Population Sept. 30, 1979	Net Separations from Armed Forces	Deaths in Civil Life	Veteran Population Sept. 30, 1980	Percent Change
Total veterans ¹	30,072,000	428,000	382,000	30,118,000	+ 0.2
War veterans ¹	26,310,000	126,000	371,000	26,065,000	- 0.9
Vietnam era-Total	8,910,000	126,000	21,000	9,015,000	+ 1.2
With no Korean conflict service	8,363,000	116,000	16,000	8,463,000	+ 1.2
With Korean conflict service	547,000	10,000	5,000	552,000	+ 0.9
Korean conflict-Total	5,866,000	10,000	50,000	5,826,000	- 0.7
With no World War II service	4,679,000	10,000	30,000	4,659,000	- 0.4
With World War II service	1,187,000	-	20,000	1,167,000	- 1.7
World War II-Total	12,674,000	-	252,000	12,422,000	- 2.0
With no Korean conflict service	11,487,000	-	232,000	11,255,000	- 2.0
With Korean conflict service	1,187,000	-	20,000	1,167,000	- 1.7
World War I	594,000	-	73,000	521,000	- 12.3
Service between Korean conflict and Vietnam era only	3,059,000	-	9,000	3,050,000	- 0.3
Post-Vietnam era	703,000	302,000	2,000	1,003,000	+ 42.7

Not included are Spanish-American War veterans who numbered 209 on September 30, 1979 and 147 on September 30, 1980; 62 died during FY 1980.

Summary

Throughout the more than 200 years of United States history, nearly 39 million men and women have served in the armed forces; over 90 percent of them have participated in conflicts during the 20th century. More than a million persons have sacrificed their lives in defense of this nation during periods of war. The total number of veterans in civilian life at the close of FY 1980 was in excess of 30 million, about 26 million of whom were veterans of

America's wars. The remaining 4 million served during peacetime periods only.

Number of Veterans and Period of Service

The estimated number of veterans in civilian life on September 30, 1980 reached 30,118,000, an all-time high. This total was 46,000 greater than the previous year's estimate and was the net result of the 448,000 service personnel discharged from the armed forces, the return from civilian life of

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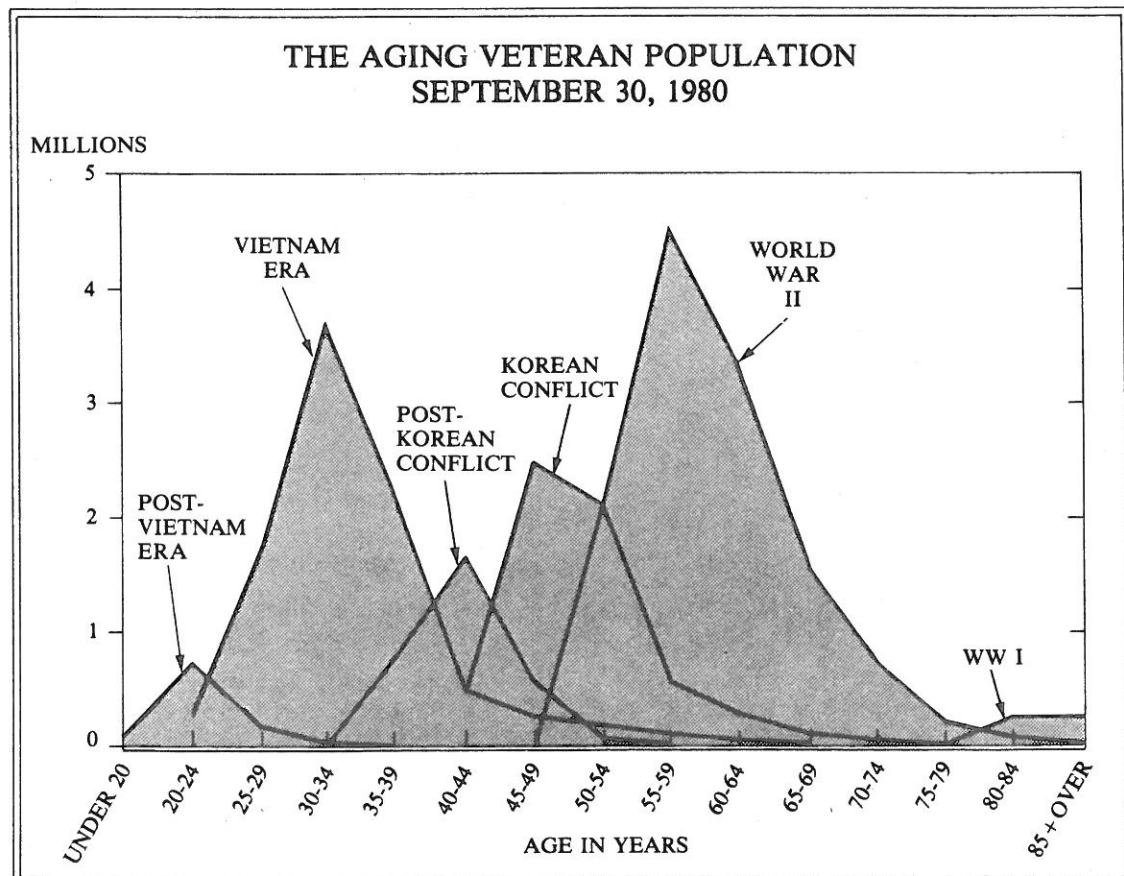
20,000 who reenlisted, plus 382,000 veterans who died during FY 1980.

The small rise in the veteran population during FY 1980 was due to increases in the number of Vietnam era and post-Vietnam era veterans. Living ex-service personnel from the Vietnam era numbered 9,015,000 at the end of September 1980, 1.2 percent more than at the close of FY 1979. The post-Vietnam era veteran population grew by 300,000 during the same period, an increase of nearly 43 percent. Living veterans from all other periods of service continued to decline in number. World War II veterans still made up the single largest share (41 percent) of the total veteran population on September 30, 1980, despite sustaining over a quarter of a million deaths during FY 1980. Veterans whose only wartime service occurred during the Vietnam era constituted 28 percent of the aggregate count while veteran survivors of the Korean conflict (with no service in World War II) totaled 4,659,000, or 15 percent of the total. The number of World War I veterans in civil life

at the end of September 1980 amounted to 521,000, a figure some 12 percent smaller than reported a year earlier. Peacetime veterans who served only between the Korean conflict and the Vietnam era declined marginally to a total of 3,050,000 at the end of FY 1980, while veterans serving only after May 7, 1975 (post-Vietnam era) numbered 1,003,000.

Age of Veterans

The average age of veterans in civil life on September 30, 1980 was 48.0 years, or a half-year greater than the average at the end of FY 1979. The increase in the average age was held down somewhat by the fact that the 428,000 persons who entered the veteran population (net separatees) during FY 1980 were considerably younger, on the whole, than those who were already veterans at the beginning of the 12-month period or those who died during this time period.



As might be expected, the average ages of veterans of each period of service fall into order according to the chronological sequence in which the periods of service occurred. There were only 147 Spanish-American War veterans in civil life on September 30, 1980, and their average age was 100.0 years. World War I veterans were the next oldest group averaging 84.9 years of age, and all were at least 75 years old. Veteran survivors of World War II were next with an average age of 60.0 years. At the opposite end of the age spectrum, ex-service personnel who entered the armed forces after May 7, 1975 (i.e., post-Vietnam era veterans) were the youngest, their ages averaging only 23.0 years. The next oldest veterans were those who served during the Vietnam era only (32.6 years). Veterans who served only during the peacetime period between the Korean conflict and the Vietnam era had an average age of 41.7. Korean conflict (no World War II service) veterans had an average age of 48.8 years on September 30, 1980.

As the veteran population continues to age, the percentage of veterans at least 65 years old is also on the rise. One of every ten veterans in civil life (more than 3 million) at the close of FY 1980 had attained the age of 65 years or more. On the other hand, during FY 1980 the number of veterans under 30 years of age decreased by 209,000, falling, for the first time in 15 years, below the number of veterans 65 and over.

Female Veterans

The estimated number of female veterans at the end of September 1980 was 713,000, or 2.4 percent of the total

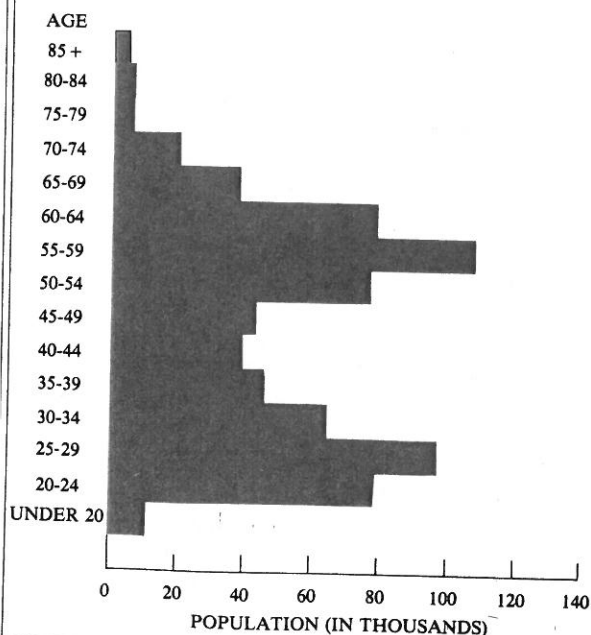
veteran population. Female veterans of World War II were the largest group (286,000), followed by those whose war service was during the Vietnam era only (193,000). Women who are veterans of World War I constituted the smallest sector, totaling only 8,000 at the end of FY 1980. While the number of living females who served only between the Korean conflict and the Vietnam era remained unchanged during FY 1980 at 56,000, the post-Vietnam era female veteran population increased by 33,000 to 96,000.

The average age (45.1 years) of female veterans at the end of September 1980 was slightly below that of the male veteran population. This was largely due to the substantial influx of females who served only during the post-Vietnam era, a group whose age structure is much younger than that for any other period of service. The female veteran population is expected to grow markedly in the years to come as women continue to play a bigger role in the armed forces.

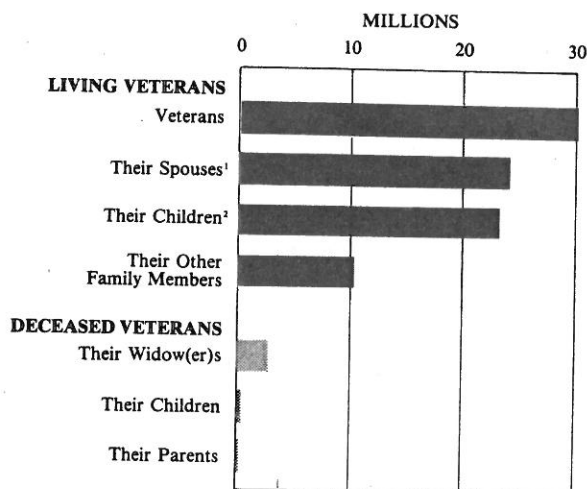
Veterans and Their Families

Veterans in civilian life account for only about one of three individuals who may become recipients of VA benefits and services. In addition to the 30.1 million living veterans on September 30, 1980, there were 24.2 million spouses of veterans, 23.3 million dependent children under 18 years of age, and 10.3 million other family members (including children 18 years of age and older). Although only a small proportion of these dependents are likely to seek benefits directly from the VA at any time in the future, benefits paid to veterans indirectly affect the socioeconomic well-being of a great number of them. In addition to the dependents of living veterans, there were 3.4 million survivors of deceased ex-service personnel at the close of FY 1980. This group was made up of 2.8 million widows and widowers, 0.5 million surviving children, and between 0.1

TOTAL FEMALE VETERAN POPULATION BY AGE: SEPTEMBER 30, 1980



**VETERANS AND THEIR FAMILIES
SEPTEMBER 30, 1980**



¹ 485,000 married female veterans are counted as veterans, but not as spouses.

² Number of own children under age 18.

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and 0.2 million dependent parents. Consequently, about 91.3 million people, or approximately 42 percent of the total population of the U.S., are potentially benefitted by VA programs.

Characteristics of Veterans

The VA obtains data on various socioeconomic characteristics of male¹ veterans and nonveterans from the Current Population Survey (CPS) through a contract agreement with the Bureau of the Census and approval of the Department of Labor, the survey's sponsor. Data from the CPS includes educational attainment, income, work experience, school enrollment, and employment status.

Differences between veterans and nonveterans in median income may be largely explained by variances in their age distributions. If the nonveterans' age distribution is made to conform to that of veterans, differences in income are reduced considerably.

Educational Attainment and Income

All Veterans.

In March 1980 there were 69.3 million male veterans and nonveterans, aged 20 years and over, in the civilian noninstitutional population of the United States. Veterans, who constitute 28.8 million of this number, had a median education level of 12.6 years, the same as for their 40.5 million nonveteran male counterparts.

Population Group	Noninstitutional Population (In Thousands)	Percent of Total
War veterans	25,149	36.3
Peacetime veterans (Post-Vietnam era and service between Korean conflict and Vietnam era only)	3,641	5.3
Nonveterans	40,497	58.4
Total	69,287	100.0

Seventy-four percent of the war veterans over 20 years of age had completed the requirements for a high school diploma or its equivalent, as had 83 percent of peacetime

¹The Current Population Survey asks only males if they have ever served in the armed forces. If data on female veterans were collected in that survey, the sample would be so small that any data on characteristics of female veterans would be considered unreliable or unrepresentative of the population. Data on female veterans was collected on the long form of the 1980 Decennial Census distributed to about 20 percent of U.S. households, but the data will not be available until sometime in 1982.

veterans and 61 percent of nonveteran males. The percentages of each group who had college degrees were: war veterans, 19 percent; peacetime veterans, 20 percent; and nonveterans, 16 percent.

Greater educational attainment almost invariably results in increased earnings, and this held true during calendar year 1979. The differences were substantial; individuals with four or more years of college had a median income nearly three times as large as those with eight years of education or less. The median income for veterans ranged from a low of \$8,610 for veterans who had less than a high school education, to a high of \$24,660 for those veterans who had received college degrees. Nonveteran males with less than a high school education had a median income of \$5,990, but those who were college graduates had a median income of \$18,370. The increment in income which accrues to those who complete college, whether veterans or nonveterans, is considerable.

An exception to the rule that more education results in more income occurs among nonveterans with one to three years of college. Their median income was nearly \$1,400 less than that of nonveteran high school graduates who had *not* gone on to college. This difference may be traced to the fact that the average age of nonveterans with some college is much lower than the average age of nonveteran high school graduates; these younger nonveterans have less work experience and less job seniority. In addition, there is a much greater chance that they have been in school during most of the year. The median income of veterans was higher than that of nonveterans at every level of educational attainment, as the accompanying table shows.

Attained Level of Education	Median Income in 1979	
	Veterans	Nonveterans
No high school	\$8,610	\$5,990
Some high school	11,490	9,200
High school graduate	16,220	12,420
Some college	18,190	11,030
College graduate	24,660	18,370

Vietnam Era Veterans.

Vietnam era veterans under 40 years of age had a median educational level of 13 years and a median income of \$16,490 in 1979. Similar-aged nonveterans had 12.9 years of education but a personal income of \$11,830. However, 9 of 10 Vietnam era veterans were high school graduates, compared with 8 of 10 nonveterans aged 20-39 years. Despite the greater proportion of high school graduates among veterans, the percentage who had completed a college degree was about the same as for nonveterans -- 22.1 percent of Vietnam era veterans and 22.5 percent of nonveterans under 40 years old.

Work Experience

All Veterans.

About 84.8 percent of male veterans in the civilian noninstitutional population worked at some time during calendar year 1979, compared with 80.9 percent of nonveteran males. Eighty percent of the 24.4 million working veterans and 72 percent of the 32.7 million working nonveterans worked throughout the year, either full-time or part-time. Ninety-seven percent of the veteran year-round workers and 94 percent of the nonveteran year-round workers held full-time jobs for all or part of the year.

Vietnam Era Veterans.

Ninety-six percent of all noninstitutional male Vietnam era veterans under 40 years old worked during calendar year 1979. Seventy-seven percent of the 7.4 million Vietnam era veterans who worked year-round employment. Ninety-four percent of the nonveteran males under 40 years old worked during the year and about 70 percent of these nonveterans worked year-round.

Employment Status

War Veterans.

The unemployment rate for all male war veterans in FY 1980 rose 0.8 percentage points from FY 1979 to 4.0 percent. The unemployment rate for male nonveterans increased 1.6 percentage points to 7.8 percent.

Vietnam Era Veterans.

There were 8.2 million Vietnam era veterans in the civilian labor force on the average during FY 1980. Of this number, 457,000 were unemployed, which resulted in an annual unemployment rate of 5.6 percent.

Family Income

War Veterans.

The median income of the 19.7 million families headed by male war veterans was \$23,810 in calendar year 1979, compared with \$19,460 for families headed by nonveterans. Wives worked in 54 of 100 families headed by war veterans and in 53 of 100 families headed by nonveterans. Among families headed by veterans, the wife's earnings increased the median family income to \$26,750, compared with \$23,000 when the wife did not work. Median family income ranged from a high of \$29,000 for families headed by veterans 45-49 years old, to a low of \$10,920 for families whose veteran head was 70 or more years old. Total income declines rapidly for families whose veteran head reaches the age of retirement, from a median of \$25,820 when the veteran family head is 55-59 years old, to \$22,400 when the family head is 60-64 years old, to \$14,450 when he is 65-69 years old. Taking all 19.7 million veteran families into consideration,

one of 18 had a family income below \$7,000, the approximate poverty level for a family of four in 1979.

Vietnam Era Veterans.

There were 5.4 million U.S. families headed by male Vietnam era veterans from 20 to 39 years old in March 1980. Four percent had incomes below \$7,000, but the median family income in 1980 was \$22,290 compared with \$20,970 for families headed by similar-aged male nonveterans. In 66 of 100 families headed by Vietnam era veterans the wife worked, increasing the median income to \$23,780 compared with \$22,260 for those young veterans' families in which the wife did not work.

Survey of Veterans

A nationwide survey of veterans (SOV) was conducted during FY 1979 under a contract with the Bureau of the Census. A sample was drawn from households previously included in the Current Population Survey but which had now been retired from the survey. In this Survey of Veterans (the second conducted by the Veterans Administration, hence called SOV-II), 11,230 persons were initially chosen, of which 9,929 veterans were identified and interviewed. The remaining 1,301 persons were identified as nonveterans (492), noninterviews (803), or those considered "out of scope", i.e., women or children (6). Some of the preliminary findings from the survey are:

- Two-thirds of the living veteran population have used at least one veterans benefit at some time since leaving the armed forces.
- Approximately 20 percent of veterans had contacted the VA during the 12 months prior to the survey.
- About 89 percent of veterans have health insurance.
- Fifty-five percent of veterans who used the GI bill did so for college level training.
- About 68 percent of all compensation claims and 75 percent of all pension claims have been allowed.
- Forty percent of veterans buying homes have used a VA loan guaranty for financing.
- Four million veterans may desire burial in a national cemetery.
- A larger percentage of Vietnam theater veterans have had mental or emotional problems than Vietnam era veterans as a total group.

New Legislation

The following laws of particular interest to the VA, veterans, and their families and survivors were enacted in FY 1980.

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Public Law 96-103 - HUD - Independent Agencies Appropriations, 1980

An appropriation of \$20,281,652,000 was enacted for VA benefits, grants, and services for the fiscal year ending September 30, 1980.

Public Law 96-128 - Veterans' Survivors Benefits Adjustment Act of 1979

This act increased compensation, DIC, and clothing allowances and expanded eligibility for aid-and-attendance allowance. The law also amends certain provisions of the VA insurance program, exempts VA home loans from certain state anti-usury provisions and authorizes VA to obtain from the Internal Revenue Service the addresses of veterans who may have been exposed to occupational hazards during active service.

Public Law 96-151- Veterans' Health Programs Extension and Improvement Act of 1979

This law extends, modifies and improves certain VA health care programs, amends the existing law concerning VA health care personnel, revises beneficiary travel reimbursements, and revises the Civilian Health and Medical Program of VA (CHAMPVA). It also authorizes outpatient medical care for veterans of WW I and the Mexican border period, provides home health care to housebound veterans or veterans in need of regular aid and attendance, and requires that membership of the Special Medical Advisory Group include a disabled veteran. Finally, the law requires OMB to provide VA with appropriated medical care staffing positions, and it requires VA to conduct an epidemiological study of Vietnam veterans exposed to dioxins, produced during the manufacture of various phenoxy herbicides, including "Agent Orange."

Public Law 96-155 - The American Legion

Public Law 96-155 expands the membership in the Federal charter of the American Legion by changing the enlistment date for Vietnam war veterans to December 22, 1961.

Public Law 96-173 - Veterans Benefits/CHAMPUS

The law amends title 10, United States Code, to provide that any service connected disabled veteran eligible for medical care under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) may not be denied care and treatment for such disability under CHAMPUS solely because the veteran is eligible for care and treatment for such disability in VA facilities.

Public Law 96-181 - Drug Abuse Prevention, Treatment, and Rehabilitation Act of 1979

This law amends the Drug Abuse Office and Treatment Act of 1972 to authorize the President to appoint a special representative to coordinate Federal actions toward achieving the goal of drug abuse prevention. Section 4 provides

that nothing in this Act limits the VA's authority to furnish health care and related services to veterans. Section 6 directs state agencies to inventory other drug programs funded under state and local laws, occupational programs, VA resources, and others.

Public Law 96-297 - Vietnam Veterans Memorial Fund

This law authorizes the Vietnam Veterans Memorial Fund Inc., a private nonprofit, nonpartisan organization, to erect a memorial honoring Vietnam veterans on public grounds in Constitution Gardens in West Potomac Park in the District of Columbia.

Public Law 96-307 - National POW-MIA Recognition Day

July 18, 1980, was designated as "National POW-MIA Recognition Day" to commemorate those who have been prisoners of war and those who have been missing in action.

Public Law 96-330 - VA Health Care Amendments of 1980

Among other things, this law provides (1) permanent special pay authority for compensation of health care professionals who are employed by VA; (2) establishes a scholarship program for individuals wishing to attend medical school; (3) establishes 15 geriatric research, education, and clinical centers at VA health care facilities; (4) modifies VA's standards for presumption of inability to pay medical expenses; (5) amends the provisions pertaining to the revolving supply fund; and (6) provides for the availability of funds for beneficiary travel.

Public Law 96-351 - Northern Mariana Islands Enlistment

This law authorizes citizens of the Northern Mariana Islands to enlist in the United States Armed Forces.

Public Law 96-352 - Urgent VA Supplemental Appropriation, 1980

This provides a supplemental appropriation for FY 1980 of \$40 million for the Readjustment Benefits Account. These funds were required because, due to the economic situation, an unexpectedly large number of veterans applied for readjustment benefits.

Public Law 96-369 - Continuing Appropriations, 1981

This act provides appropriations for the Federal government through December 15, 1980.

Public Law 96-374 - Education Amendments of 1980

Some provisions of this law made several modifications to the Veterans' Cost-of-Instruction Program (VCIP). The changes made include: (1) extending the VCIP through fiscal year 1985; (2) reducing the maximum VCI award from \$135,000 to \$75,000; (3) providing special incentive

awards for efforts to aid service connected disabled veteran students by allowing an additional amount equal to one-half the base award; (4) allowing renewed eligibility for certain educational institutions previously eligible for VCIP

grants; (5) removing the three-awards-per-year payment basis in certain cases; and (6) including new provisions requiring the schools to carry out an active outreach effort targeted at service connected and incarcerated veterans.



Comparative Highlights

Item	FY 1980	FY 1979	Percent Change
Facilities operating at end of year			
Medical centers	172	172	
Hospital care	(172)	(172)	
Outpatient care	(172)	(172)	
Nursing home care	92	92	
Domiciliary care	15	15	
Independent or satellite clinics	50	49	
Independent domiciliaries	1	1	
Employment (net full-time equivalent)	194,331	190,468	+2.0
Operating costs (in millions)	\$6,157.8	\$5,438.0	+13.2
Medical care	5,971.8	5,274.8	+13.2
Research in health care	137.7	116.3	+18.4
Other	48.3	46.9	+3.0
Inpatients treated	1,359,271	1,342,161	+1.3
VA facilities	1,275,446	1,259,076	+1.3
Other facilities	83,825	83,085	+0.9
Average daily inpatient census	105,085	106,816	-1.6
VA facilities	83,836	86,029	-2.4
Other facilities	21,149	20,787	+1.7
Outpatient medical visits	17,971,407	17,262,408	+4.1
VA staff	15,751,890	15,053,332	+4.6
Fee-basis	2,219,717	2,209,076	+0.5
Outpatient dental care			
VA staff			
Examinations	157,701	128,195	+23.0
Treatment cases completed	149,594	134,769	+11.0
Cases completed on fee-basis	71,550	67,809	+5.4
Prescriptions dispensed	36,687,165	35,821,814	+2.4
Lab procedures (unit count)	214,818,805	203,242,806	+5.7
Radiology examinations	5,707,369	5,799,495	-1.6

¹ Does not include supply fund

Summary

At the end of FY 1980, the VA health care system was providing care in 172 medical centers, 226 outpatient clinics, 92 nursing homes, and 16 domiciliaries. New facilities included outpatient clinics in Baton Rouge, Louisiana; Canton, Ohio; Peoria, Illinois; Fort Myers, Florida; and Santa Barbara, California. The VA also opened 91 Vet Centers to assist Vietnam era veterans with special problems

related to that war. New and larger facilities replaced nursing home care units in Columbia, South Carolina; Hampton, Virginia and Miami, Florida. A replacement domiciliary was also activated in FY 1980 at Wood, Wisconsin. During the year the VA treated approximately 1.25 million hospital inpatients, 12,750 nursing home patients and 15,180 domiciliary patients. Outpatient medical care visits totaled 18 million: 15.8 million to VA staff and 2.2 million to non-VA physicians authorized by the VA to render care on a fee-for-service basis. Dental care also continued to play a major role in the delivery of health care to veterans.

The VA continued to help support veterans receiving hospital, nursing home, and domiciliary care in 41 state homes. In addition, under an agreement with the Department of Defense, nearly 224,000 dependents of veterans were eligible to receive medical care under the Civilian Health and Medical Program of the Veterans Administration (CHAMPVA). This care, which cost the VA over \$44 million, was administered in non-VA facilities.

In FY 1980, the VA's Department of Medicine and Surgery operated with a budget of \$6.02 billion and employed 194,331 (full-time equivalent) persons. The VA continued its strong research efforts and provided education and training in the health care field to 96,670 persons, including physician residents and interns.

Public Law 96-330, "The Veterans Administration Health Care Amendments Act of 1980" was enacted by the Congress on August 26, 1980. The special pay provisions of this legislation should have a favorable impact on the Department's ability to recruit and retain high quality physicians and dentists to support the VA medical care system.

Types of Care

Hospital Care

At the end of the fiscal year, VA medical centers were operating 82,960 hospital beds—40,815 in medical bed sections (including extended hospital care beds), 17,823 in surgical bed sections, and 24,322 in psychiatric bed sections. During the year, the average bed occupancy rate was 80.9 percent.

The number of hospital patients treated in VA medical centers and in non-VA hospitals during FY 1980 (i.e., the number of discharges and deaths during the year plus the

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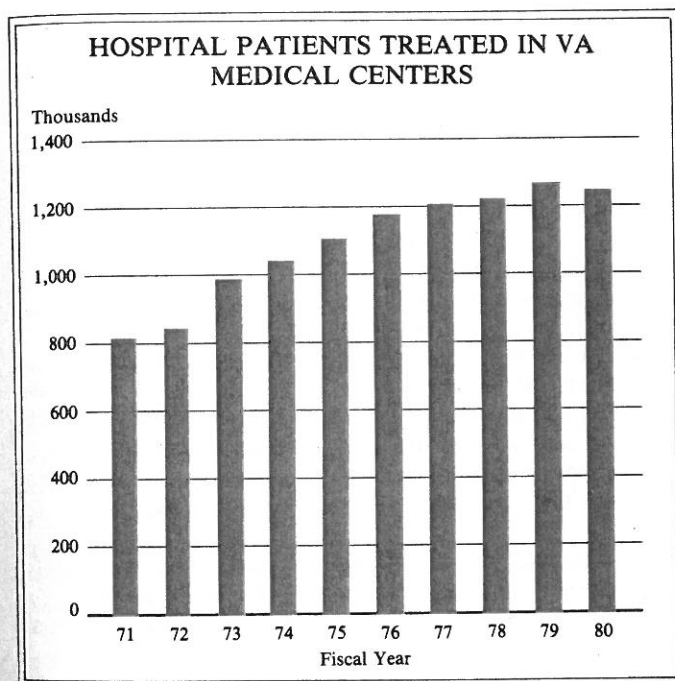
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number on the hospital rolls at the end of the year) totaled 1,282,966. Of this number, 1,247,516 were treated in VA medical centers. The increase in the number of hospital patients treated was accomplished largely by reducing the length of time patients spent in the hospital during an episode of care.



Ambulatory Care

Ambulatory care activities continued to play a central role during FY 1980 in the delivery of health care to VA patients, while expanding into new areas. Services delivered in the outpatient area now include complex diagnostic procedures such as endoscopy of the respiratory and gastrointestinal tracts. An increasing number of therapeutic procedures also are performed in ambulatory settings, including moderately complex surgery, cancer chemotherapy, and the treatment of mental illness. There were 15.8 million outpatient medical visits provided by VA staff at 226 VA clinics, and 2.2 million visits made to private physicians authorized on a fee-for-service basis. These statistics represent a record volume and reflect the importance of this level of care.

An increase in outpatient dental care also was noted during the year; VA dental services treated 149,594 or 11 percent

more outpatients than during the previous year. In addition, 71,550 cases were completed by private dentists on a fee basis.

A system for provision of routine outpatient services on a priority basis to service connected veterans initiated during FY 1979 continued. This program is achieving its goal of utilizing available ambulatory care resources in a way that will most successfully fulfill the VA mission.

Improvement of the physical facilities of VA outpatient clinics continued with the completion of construction, renovation, and improvement projects costing over \$50 million. These involved expansion of available outpatient space and improvement of the flow of patient care services.

Extended Care

The VA program for extended care for veterans makes a major contribution to the national effort to meet the health care needs of increasing numbers of older Americans. The number of veterans age 65 and older has increased significantly during the last 10 years and this trend will continue. From now until the year 2000, a principal focus of the VA will be on health care for aging veterans. The following table dramatically shows the expected aging trend, barring a new armed conflict.

	1970	1980	1990	2000
Total number of veterans (000)	27,647	30,118	28,497	25,317
Number of veterans 65 years and older (000)	1,996	3,011	7,327	7,988
Percent of total	7.2	10.0	25.7	31.6

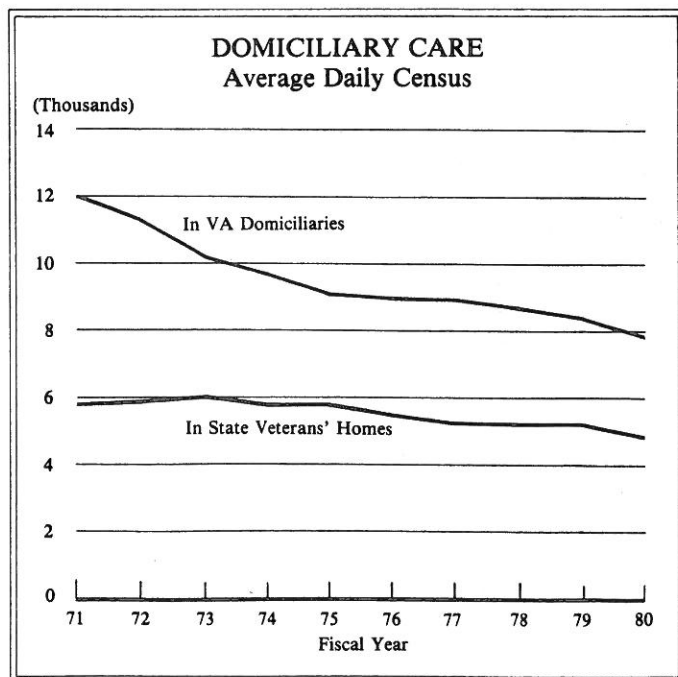
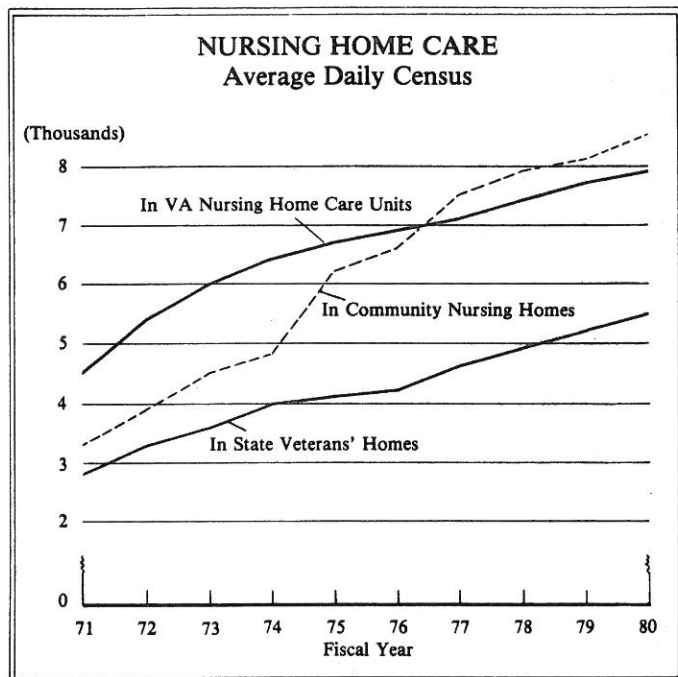
The 65-years-and-older age group has increased 50.9 percent during the past 10 years. In the next 10 years, the number of veterans in this group is expected to increase 143.3 percent over the number today.

The mission of VA's Office of Extended Care is to provide professional expertise and leadership for the following long-term care programs; VA Nursing Home Care, Community Nursing Home Care, Domiciliary Care, State Home Care (Nursing Home, Domiciliary and Hospital), Hospital-Based Home Care, and Residential Care (formerly Personal Care Home). The Office also has primary responsibility for the Geriatric Research, Education and Clinical Centers program.

Extended care programs are intended to improve the quality of care for long-term patients, broaden the scope of services, and make more effective use of manpower and resources. Program efforts are designed to deemphasize institutional living and emphasize a more humanistic approach.

The Office works closely with the Administration on Aging (AoA) to initiate specialized services for elderly veterans. The VA is involved in the implementation of a working agreement with 13 other Federal agencies and AoA to improve information and referral services to older Americans.

The extended care programs administered by the VA are described below.



VA Nursing Home Care. The nursing home care units located in VA medical centers provided skilled nursing care and related medical services, as well as opportunities for social, diversional, recreational, and spiritual activities. Nursing home patients typically require a prolonged period of nursing supervision and rehabilitation to attain and maintain optimal function.

In FY 1980, 12,750 veterans were treated in VA nursing homes which had an average daily census of 7,933. The average age of the veterans treated during the year was 69.7 years, 61.3 percent were 65 or over, and their average attained length of stay was 3.11 years. Approximately 25.9 percent were receiving compensation for service connected conditions and 39.8 percent were receiving VA pension. The trend toward increased provision of nursing home care by the VA is shown in the accompanying chart.

The nursing home care units at VA medical centers in Columbia, South Carolina; Hampton, Virginia; and Miami, Florida, were replaced by new and larger facilities during FY 1980. These and other changes resulted in a net increase of 139 operating beds for a total of 8,496 beds at the end of the year at 92 VA medical centers.

Community Nursing Home Care. This is a contract program to aid veterans who require skilled or intermediate nursing care in making the transition from a hospital to the community. Veterans requiring nursing home care for a service connected condition may be placed at VA expense for as long as the nursing care need exists, while non-service connected veterans may be placed in community facilities at VA expense for a period not to exceed six months. The program requires assessment of participating facilities and follow-up visits to veterans by teams from the VA medical centers.

In FY 1980, 28,536 veterans were treated in approximately 2,900 community nursing homes in the 50 states and Puerto Rico. These facilities had an average daily census of 8,529. The average age of these veterans was 67.8 years; 56.5 percent were 65 or over, and their average attained length of stay was 1.03 years. Approximately 46.8 percent were receiving compensation for service connected conditions and 28.0 percent were receiving VA pension. As with VA nursing home care, there has been an upward trend in the provision of community nursing home care.

VA Domiciliary Care. Domiciliary care in VA facilities provides necessary medical and other professional care for eligible ambulatory veterans who are disabled by age, disease, or injury and are in need of care but do not require hospitalization or the skilled services of a nursing home.

New program directions during the year created a better quality of life for veterans requiring prolonged domiciliary care and prepared veterans returning to community living for active participation in various community resources. A survey to obtain information about the personal

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characteristics of domiciliary patients was initiated in FY 1980 to further develop and refine domiciliary policies and program directives.

In FY 1980, 15,180 veterans were treated in VA domiciliaries which had an average daily census of 7,894. The average age of the veterans treated during the year was 59.8 years, 29.9 percent were 65 or over, and their average attained length of stay was 3.98 years. Approximately 27.5 percent were receiving compensation for service connected conditions and 44.3 percent were receiving VA pension. The decline in domiciliary census continues as shown in the accompanying chart.

The replacement domiciliary at the VA medical center in Wood, Wisconsin, the first new domiciliary facility since 1953, was activated during FY 1980.

Construction is in progress on replacement domiciliary facilities at the VA medical centers in Dayton, Ohio; Bay Pines, Florida; and Martinsburg, West Virginia. Activation of these facilities is expected during FY 1981.

State Veterans' Homes. The VA's relationship to state veterans' homes is based on two grant programs. One is a per diem program which enables the VA to assist the state in providing care to veterans eligible for VA care and who are furnished domiciliary, nursing home, or hospital care in state home facilities. The other grant program provides VA assistance with up to 65 percent Federal funding in the construction of new domiciliary and nursing home care facilities, and the expansion, remodeling, or alteration of existing facilities.

During FY 1980 the state veterans' homes maintained an average daily census of 5,586 nursing home, 4,892 domiciliary, and 929 hospital patients. The average age of veterans treated during the year in state veterans' nursing homes and domiciliaries was approximately four years older than those in VA facilities. A greater proportion was 65 or over than in VA facilities.

In FY 1980, new construction resulted in the addition of a 250-bed nursing home at Minneapolis, Minnesota; a 75-bed nursing home at Erie, Pennsylvania; and a 51-bed domiciliary at Lisbon, North Dakota. In addition, the VA obligated funds for additional nursing home care and domiciliary beds, and life safety renovations. Arkansas, the newest state to establish a state home, activated a 150-bed domiciliary in a remodeled facility.

The trends in state nursing home and domiciliary care follow those of the VA programs. The states differ greatly in the availability of facilities they operate for veterans, and therefore can supplement but not substitute for other VA extended care programs.

Hospital-Based Home Care. This newest VA extended care program provides chronically ill veterans with care services in their own homes. A hospital-based treatment team provides medical, nursing, social, dietetic, and rehabilitation regimens, and trains family members in the ongoing care of the patient. Thirty VA medical centers

now can provide home health care services. In FY 1980, 157,000 home visits were made by health professionals, and 5,454 patients were treated.

Residential Care (formerly Personal Care Home Program). This program provides residential care, including room, board, personal care, and general health care supervision to veterans who do not require hospital or nursing home care but who, because of health conditions, are not able to resume independent living and have no suitable family resources to provide the needed care. All homes are inspected by a VA multidisciplinary team prior to incorporation into the program and annually thereafter. Care is provided in private homes selected by the VA, at a veteran's own expense. Veterans receive monthly follow-up visits from VA social workers and other health care professionals, and are outpatients of the local VA facilities.

Geriatric Research, Education and Clinical Centers (GRECCs). The GRECC Program consists of eight centers and represents an important aspect of the response to the health care needs of aging veterans. It serves to attract and develop superior staff in the field of gerontology and geriatrics, utilizing and redirecting resources for geriatric care, and to advance and integrate research and educational achievement in geriatrics and gerontology into the VA clinical system.

Geriatric evaluation units and geriatric rehabilitation units consisting of from 10 to 30 beds have been activated at most of the GRECCs for intensive diagnosis and therapy. The clinical focuses include team care, medical evaluation and rehabilitation, cardiopulmonary rehabilitation, endocrinology, and various dementias.

The research and education efforts of the GRECCs concentrate in related areas such as neurobiology, connective tissue and metabolism, cardiac arrhythmics, immunology, and neuroendocrinology.

The eight existing GRECCs were evaluated during FY 1980. The site visit team concluded that "the GRECCs are at a critical stage of development. Additional resources are crucial to achieving their full potential and maintaining the momentum and enthusiasm of the staff." Congress recognized the need to improve the existing GRECCs and stipulated in Title III of Public Law 96-330 that prior to funding new centers, the existing centers should receive adequate funding to enable them to function effectively.

Title III of the law provides for the designation of up to 15 health care facilities as locations for GRECCs, including the existing centers. Also, Title III includes the criteria for selection of existing and new GRECC sites and establishes a new Geriatrics and Gerontology Advisory Committee within DM&S.

Medical Care for Dependents

By the end of FY 1980 there were approximately 224,000 individuals (124,000 adults and 100,000 children), in

134,000 family groups who had established entitlement for medical care under CHAMPVA (Civilian Health and Medical Program of the VA) authorized by Public Law 93-82. The law authorizes VA to furnish medical care to the spouse or child of a veteran who has a total disability, permanent in nature, resulting from a service connected disability, and to the surviving spouse or child of a veteran who died as a result of a service connected disability, or who at the time of death had a total disability, permanent in nature, resulting from a service connected disability. Effective January 1, 1980, eligibility was extended to the surviving spouse or child of a person who died while on active duty. CHAMPVA care may be furnished to these eligible dependents provided they are not eligible for CHAMPUS or Medicare. Since the program began in September 1973, \$131.2 million has been expended for hospital care, physician visits and prescriptions, about \$44 million of it in FY 1980.

Services

Medicine

VA medical services continued a strong emphasis in the areas of hypertension, sickle cell anemia, dialysis, rheumatology-immunology, cardiology, pulmonary disease, intensive care, and pacemakers.

Thirty-two VA medical centers were involved in a pilot hypertension screening and treatment program in which approximately 29 percent of the veterans screened showed elevated blood pressures. There were 35,000 veterans receiving therapeutic intervention in these special clinics and another 25,000 were followed at intervals of three weeks to 12 months through this program. Eighty-five percent of the primary care of these veterans is provided by allied health professionals (RNs or Physician Assistants) under the supervision of a physician. A continued decline in the number of strokes and the incidence of heart disease among these patients is believed to be due to the increased control of the hypertensive population. An in-depth study to determine the quality of care in these clinics is presently underway. The cost effectiveness of these discrete clinics is also being addressed.

Forty VA medical centers were participating in a sickle cell screening and education program. During the year, 49,305 patients were identified and screened, 65,581 persons attended education sessions, and 3,519 people were counseled. The VA film "A Matter of Chance" continued to be shown in various community sickle cell programs as well as in VA medical centers.

The number of patients in the VA dialysis program (including patients dialyzed in non-VA units at VA expense) remained at about 4,100 during FY 1980.

During FY 1980 development of the large scale Rheumatology-Immunology Center at the Philadelphia VA Medical Center continued with construction of a new inpatient unit. Along with a smaller program previously

begun at the Wood, Wisconsin VA Medical Center, these centers provide comprehensive, multidisciplinary care to patients suffering from arthritis, rheumatism, connective-tissue diseases, and related disorders.

The program of establishing respiratory care centers at all VA medical centers has essentially been completed. There are now over 3,000 designated beds in 163 centers. During 1980 nearly 63,744 veterans received care in these units.

Almost all VA medical centers now have pulmonary function laboratories and 597,567 veterans underwent tests during 1980. Many of the laboratories are currently undergoing modernization which will greatly expand their diagnostic capabilities.

During FY 1980 cardiac catheterizations were performed on 19,150 veterans. The VA collaborated with other Federal agencies in reviewing the regional potentials for sharing cardiac catheterization laboratory (CCL) resources and for achieving uniform standards. Significant replacement or upgrading of worn or antiquated equipment of CCLs took place during this year. Diagnostic techniques, such as echocardiography, nuclear cardiology, stress testing, and arrhythmia monitoring as an alternative to invasive diagnosis, have been emphasized. To facilitate this expansion of cardio-diagnosis, new construction criteria for clinical cardiovascular laboratories were developed and considerable new non-invasive equipment authorized at many VA medical centers which do not now have CCLs.

Further progress has been made toward establishing networks of automated electrocardiographic interpretive services in the VA medical districts. The first district-based system has been administratively and technologically evaluated and determined to be cost-effective. Arrangements are in progress to coordinate VA systems and services with those provided by the Department of Defense system.

During FY 1980 the VA developed a formal policy relating to the acquisition and clinical management of cardiac pacemakers. Cardiac Pacemaker Prosthesis Referral Centers have been formally established at 96 VA medical centers. Contracts have been negotiated with seven private sector surveillance companies to provide surveillance care to veterans via telephone, if it is not able to be provided in-house. A computer-based registry has been developed to provide detailed reports on patients who are recipients of pacemakers, specifying the manufacturers, models, serial numbers, and operational life of pacemakers, patient survival data, and the mode of follow-up.

All VA medical centers now have been provided with coronary care or medical intensive care units, either as separate or combined nursing units. During FY 1980, more than 120,000 veterans were treated in these units. New construction criteria have been developed to modernize the intensive care units and to make provision for step-down units. Many of the older ICUs have recently

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Surgery

During FY 1980, there were 358,545 surgical procedures performed in 140 VA medical centers, with 736 full-time and 1,389 part-time surgeons assigned.

Auditing of the supervision of surgical residents and the degree of participation in the care of surgical patients by staff supervisors continues on a periodic basis and is reported to VA Central Office annually. Minor surgery under local anesthesia is done on an ambulatory basis rather than as an inpatient, and the completion of pre-admission screening and workup for elective cases on an outpatient basis is also encouraged. These practices have already been responsible for a reduction in the average length of stay of surgical patients.

Professional input by surgical services continues to assure not only that modern surgical facilities are being included in new hospital construction, but also that modernization of surgical suites and intensive care units are included in the renovation projects of older hospitals. Required changes in criteria are constantly monitored and recommended; for example, new criteria for eye and otolaryngology clinics were approved in FY 1980.

Continuing education of professional personnel has been encouraged. Workshops in micro-neurosurgery were conducted, and participation in VA and other professional meetings was accomplished to the extent possible.

Surveillance of special programs continued with a review of the cardiac surgery program by the consulting committee. Statistics indicate that the volume of cardiac surgery is increasing, while mortality continues to decrease. The goal of establishing at least one program in each District has been attained. The Renal Transplantation Program is evaluated annually by the consulting committee, and statistics indicate little change of volume.

Advances in several areas brought about a new concept in the total care of patients requiring lower extremity amputation for peripheral vascular disease. The team approach for selecting the optimal level for amputation, the immediate fitting of appropriate prostheses, and early ambulation have been shown to reduce the hospital stay, improve morale, and hasten total functional rehabilitation.

A limited number of heart transplants has been approved. Consideration is now being given to establishing an in-house heart transplant program; however, it is anticipated that, according to present criteria, the number of patients to benefit by cardiac transplantation will be very small.

Mental Health and Behavioral Sciences

On any given day in FY 1980, 21,019 inpatients received mental health care in VA medical centers. Services are chemotherapy and psychotherapies; group, individual and family therapy; and treatments such as behavior

modification, biofeedback, neuropsychological evaluations, halfway programs for alcohol dependence, incentive work programs, and vocational appraisal for training and education.

There are now 129 VA medical centers with psychiatric bed services. Outpatient services include 102 alcohol dependence treatment programs, 52 drug dependence treatment programs, 40 day hospital programs, 55 day treatment centers, 144 mental hygiene clinics, and 91 outreach centers for Vietnam era veterans.

One hundred and fifty-five psychology services in VA medical centers and outpatient clinics provide clinical and psychological readjustment counseling, and many centers provide services through biofeedback and relaxation methods for long-term pain problems. During the year, a major professional journal devoted an entire issue to the VA's pain management program.

The accompanying table reflects the effort to maintain the number of patients treated while decreasing the number of psychiatric beds.

VA Psychiatric Bed Sections	Total	
	FY 1980	FY 1975
Operating beds at end of fiscal year	24,322	30,183
Average daily census	21,018	26,059
Admissions	160,417	162,078
Turnover rate	66.0	51.8
Patients treated	187,805	188,268

Since FY 1975, the VA has reduced its psychiatric beds by 5,861 or 19 percent, while inpatient workloads (patients treated) showed no significant change. Outpatient mental health program visits numbered 3,117,912 in FY 1980.

Mental Hygiene Clinics, Day Hospitals and Day Treatment Centers—Continued emphasis on outpatient care and rapid intensive treatment, with shorter periods of hospital stay, has resulted in an increase in the number of veterans treated by the VA's 144 mental hygiene clinics, 55 day treatment centers and 40 day hospitals. The psychiatric ambulatory care program provides quality treatment for veterans without undue separation from the family, job, or community.

Mental hygiene clinics serve as the basic units in the delivery of ambulatory mental health care. All modalities of sound mental health treatment which might be implemented on an ambulatory basis are utilized in these programs. During FY 1980, 1,164,075 visits were made to Mental Hygiene Clinics.

Day treatment centers provide supportive, maintenance and learning environments for patients experiencing long-term difficulties with community adjustment, interpersonal relations, and vocational, educational, emotional, or behavioral problems. These centers received 526,265 visits from long-term psychiatric patients in FY 1980.

The day hospital programs are ambulatory care programs for patients able and willing to come on a daily basis, to receive intensive individual and group therapy. These veterans' problems are of an acute, intensive, or situational nature and can be resolved within a short period of time. During FY 1980, 162,019 day hospital visits were made.

Alcohol and Drug Dependence Treatment—One new specialized medical program for alcoholism treatment located at the VA medical center in Charleston, South Carolina, was activated in FY 1980. The VA's alcohol dependence treatment programs emphasize relatively short hospitalization during which comprehensive health and vocational assessments are accomplished and a treatment plan for chronic alcoholism is developed by the patient and hospital staff working together. The outpatient clinic continues the veteran's rehabilitation, during which such treatment as group therapy, family therapy, and vocational services are provided. Many veterans are admitted directly to ambulatory care, to obviate the need for hospitalization. A close collaboration with Alcoholics Anonymous is central to all programs.

Legislation to provide halfway house care to alcohol and drug dependent veterans was implemented during FY 1980 and 18 contracts were approved and became operational during the year. Approximately 80 medical centers will sponsor contracts during FY 1981. The first of several on-campus, VA-operated halfway house programs was activated in September 1980 at the VA Medical Center in Murfreesboro, Tennessee.

During FY 1980 inpatients treated for alcoholism numbered 100,938; 50,037 of these were in Alcohol Dependence Treatment Program (ADTP) beds. The average monthly turnover rate in ADTP beds increased from 127.9 percent in FY 1979 to 131.7 percent in FY 1980. There was an increase in the number of outpatient visits for alcohol dependence treatment, rising from 340,187 last year to 476,800 outpatient visits in FY 1980. Follow-up contacts of former patients for therapeutic/counseling purposes or for assistance with social/economic problems increased by 9.9 percent.

In drug dependence treatment programs, the total number of inpatients treated was 20,866, about 5,200 of whom were in Drug Dependence Treatment Program (DDTP) beds. The average monthly turnover rate in DDTP beds increased from 106.1 percent in FY 1979 to 110.4 percent in FY 1980. The number of outpatient visits to DDTP, as well as the total number of outpatient visits for drug treatment, was 920,439 in FY 1980.

Vietnam Veteran Readjustment Counseling Program—The "outreach program" was established by Public Law 96-22, which was signed on June 13, 1979. In the first year of operation, 91 counseling centers (called Vet Centers) were established in the United States, Puerto Rico, and the Virgin Islands. They served 27,850 Vietnam era veterans during the year, for a total of 63,405 visits. The

law provided for counseling of family members of Vietnam era veterans, resulting in another 15,377 visits. The cost of outfitting and operating the Vet Centers in FY 1980 was \$9.5 million.

Study of Vietnam Era Veterans—A major study is underway to determine the number of Vietnam era veterans with unresolved personal, social, and psychological readjustment problems, including those in which excessive or inappropriate use of alcohol, drugs, or other substances present symptoms requiring medical intervention. The study also seeks to identify the nature of these problems and the comparative frequency of their occurrence among the Vietnam era veterans and a matched sample of non-veterans.

The need for study is based on limited research findings, general consensus of experts, professional staff of VA medical centers, and considerable direct feedback from Vietnam era veterans, their families, and other concerned groups of citizens. These sources indicate that approximately 20 percent of Vietnam era veterans continue to have readjustment problems. A preliminary report of findings has been submitted to the Congress and the final report will be submitted in FY 1981.

POW Study—The Mental Health and Behavioral Sciences Service (MH&BSS) has taken the leading role in the review and assessment of current health and adjustment problems of former POWs. In coordination with the study of POWs mandated by PL 95-479, all available research reports were reviewed and evaluated, and a systematic analysis of the adequacy of medical records of 300 randomly selected POWs from WWII-Europe, WWII-Japan, and the Korean Conflict was conducted. A blue-ribbon panel of experts is being assembled to assist DM&S health care professionals to assess the long-range impact of the POW experience on later health and psychological adjustments. In cooperation with other VA programs, MH&BSS has taken the initiative to accomplish the following: the medical application form has been revised to identify specific POW status, the Patient Treatment File has been programmed to permit detailed data on POW health problems, the medical charts will have a special green symbol, and an autopsy register has been established in conjunction with the Armed Forces Institute of Pathology.

Involuntary Commitment—Involuntary commitment of psychiatric patients to VA medical centers is guided as a matter of policy by the commitment laws of the states in which these centers are located. There are wide variations in commitment laws, leading to uncertainties which require legal interpretation as to what indicated therapeutic measures can be carried out without violating the rights of patients.

Approximately 2,100 psychiatric patients are under commitment within the VA medical centers on any one day during the year. The monitoring system to assure that patients are not being retained involuntarily when reasons for their commitment cease to exist, indicates excellent compliance.

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Rehabilitation Services

During FY 1980, the position of Deputy Assistant Chief Medical Director for Rehabilitation Services was established to coordinate activities of Spinal Cord Injury, Prosthetic and Sensory Aids, Rehabilitation Medicine, Blind Rehabilitation, and Audiology and Speech Pathology Services. The office is charged with developing better liaison among all Services involved in any rehabilitation effort.

FY 1980 marked the adoption of an agency plan for rehabilitation which incorporated issues from the Administrator's Rehabilitation Conference of 1979, studies on vocational rehabilitation, and analyses of rehabilitation needs by VA medical centers and regional offices. Many of the recommendations will have a major impact on agency budgetary resources.

Foremost on the list of new initiatives is the concept of Regional Comprehensive Rehabilitation Centers. Tentative plans call for 12 centers located throughout the U.S. which will provide the total rehabilitation approach in the care of any disability, ranging from acute treatment to long-range vocational planning for eligible veterans. Special emphasis is also directed toward additional programs for staff development, including the veteran as a co-manager of his rehabilitation process and new ways of instituting rehabilitation research.

Rehabilitation Medicine—During the last two years, two Regional Comprehensive Rehabilitation Centers have been designated at the Hines, Illinois and Palo Alto, California, VA medical centers. Both have rehabilitation programs which emphasize a broad base of rehabilitation. Rehabilitation Medicine Service will serve as one of the major areas in staffing, patient care, patient and in-service education and rehabilitation research. In addition, there are significant support programs to provide a comprehensive approach to rehabilitation.

The case management program, developed jointly between the Departments of Veterans Benefits and Medicine and Surgery, has been implemented in all VA medical centers and regional offices. This program brings the full resources of the VA and the community to bear on the rehabilitation of service disabled veterans receiving or eligible for VA vocational rehabilitation, and non-service connected veterans who have potential for employment. The VA medical centers have established the case management process to ensure that all potentially eligible veterans are being identified and provided services.

The Rehabilitation Medicine Service in VA Central Office has completed a reorganization which has served to initiate a programmatic and team approach to rehabilitation instead of the traditional individual therapeutic discipline approach. The designated program areas are: physical rehabilitation, psycho-social rehabilitation, vocational rehabilitation/work restoration, and independent living. The programs of physical, psycho-social, and vocational rehabilitation have been

implemented and are fully operational; it is anticipated that the independent living program will be operational in the near future. The new approach will be gradually implemented in the VA medical centers in the months to come, and will be the basic organizational element in future Regional Comprehensive Rehabilitation Centers.

The Rehabilitation Medicine Service continues its involvement with specialized rehabilitation programs in such areas as cardio-pulmonary rehabilitation and driver training for handicapped veterans.

A new emphasis in Rehabilitation Medicine Service is on the aging veteran and more specifically geriatric rehabilitation. Planning between Rehabilitation Medicine Service and the Office of Extended Care is ongoing and the initial development of a plan to expand rehabilitation in the Geriatric Research and Education Center is expected soon. A concerted effort is also underway to provide a more viable rehabilitation component to the domiciliary program.

Rehabilitation Medicine Service space criteria have been approved and will be utilized in new construction and renovation projects. These criteria will enable Rehabilitation Medicine Service to more efficiently and effectively provide quality care to the veteran patient. A plan to determine staffing and workload patterns is being developed. This guideline will delineate staffing requirements in Rehabilitation Medicine Service at all levels of care and in different clinical areas.

Spinal Cord Injury—The VA system of specialized care for spinal cord injured (SCI) veterans is the largest of its kind in the U.S. There are 18 Spinal Cord Injury Centers operating a total of 1,386 beds. Sixty beds will be opened at the Augusta, Georgia VAMC in early 1981 and plans are underway to create two additional centers at San Diego and Seattle. During FY 1980, 7,000 SCI patients were treated in VA hospitals. There were 30,000 outpatient visits and 15,725 outpatient home visits made by the SCI Home Care Unit (Hospital-Based Home Care) program team members. There were 943 SCI patients admitted to VA medical centers for the first time.

Early transfer and treatment of acute spinal cord injury patients continues to be encouraged. The Armed Services Medical Regulating Office assisted in transferring 146 patients with spinal cord injuries to the VA. Fourteen non-veterans were admitted to VA medical centers within three days of injury. Care of non-veterans is authorized as a humanitarian service for spinal cord injury patients who cannot obtain similar care elsewhere. The cost of transportation is borne by non-VA sources.

A special instructional training program for nurse practitioners was provided by the California State University at Long Beach, California VAMC. Twelve nurses from eight different SCI centers received this training and training for an additional 12 nurses is planned for 1981.

The spinal cord injury Physician Fellowship program is operating at VA medical centers in Long Beach; West Roxbury, Massachusetts; Richmond; Palo Alto, California; and Wood, Wisconsin. It will provide the agency with qualified physicians trained in the needs of spinal cord injury patients. Eight Fellows are now in training.

A spinal cord injury physician conference was held in Anaheim, California, in September 1980. There were over 115 attendees from all 18 centers, representing all disciplines in the care of spinal cord injury.

Special spinal cord injury Home Care Units teams based at 11 VA medical centers are serving veterans in their homes; 1,740 individual patients were visited by such teams. Thirteen spinal cord injury services have apartments (home environment clinics) or available areas which permit experience in the activities of daily living, prior to discharge from the hospital. The VA medical center in Long Beach has activated a hyperbaric chamber for the use of spinal cord injury patients, and 15 of the 18 SCI centers now have urodynamic laboratories, which assist in decreasing urinary tract complications and greatly enhance rehabilitation.

Audiology and Speech Pathology—During the past year, there were approximately 528,000 audiology and/or speech pathology patient visits in the 91 VA programs throughout the nation. This was more than a 5 percent increase from the previous year.

An inexpensive, replaceable prosthesis to allow the majority of laryngectomized patients an effective speaking mechanism has been co-developed by Dr. Eric Blom, Chief of Audiology and Speech Pathology at VAMC Indianapolis. Although the prosthesis is relatively new, it has been internationally heralded as a significant contribution.

There has been a significant increase in the demand for audiology and speech pathology services. It is estimated that 85 to 90 percent of the more than 600,000 WW I veterans will need hearing aids, auditory training, and speech pathology services. In addition, it has been shown that approximately 16 percent of the veterans in medical centers, domiciliaries, and nursing homes are in need of speech pathology services.

Blind Rehabilitation—The three Blind Rehabilitation Centers and three Blind Rehabilitation Clinics provided rehabilitation, low vision services, electronic travel, and electronic reading aid training to approximately 650 blinded veterans during FY 1980. In addition, 76 visual impairment services teams continued assisting blinded veterans in their home communities by providing services to over 6,000 blinded veterans.

Construction began July 21, 1980, on the fourth Blind Rehabilitation Center located in the Birmingham, Alabama VAMC.

Work continued on identifying the incidence rate of vision impairments. A one-day census of over 80,000 veterans

who were patients at VA medical centers indicated that the numbers of veterans with serious vision defects not correctable with ordinary eyeglasses was approximately 10 times higher than among a group of civilian men of the same age range studied by the National Eye Institute. This finding supported earlier, smaller studies that also found that veterans had a higher than average incidence of not only routine vision problems but of the serious type requiring low vision care and treatment. It was further noted that this incidence rate was for veterans who had come to the medical center for conditions other than visual.

The pilot VICTORS (Vision Impairment Center To Optimize Remaining Sight) program at the Kansas City VAMC continued to provide rehabilitative optometric care to veterans with low vision or partial sight. The number of veterans with such sight losses known to the medical center was increased five times due to a public educational program in the catchment area.

Prosthetic and Sensory Aids—The growth in prosthetics programs has been rapid over the past five years. The cost of new items has increased from approximately \$35 million in FY 1975 to over \$69 million in FY 1980. The main reasons for this increase have been the liberalization of eligibility for services, and the rapidly advancing



VA provides veterans with nearly a million prosthetic appliances each year. Services include individual development of the devices and assistance in adapting to them.

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technology which produces more sophisticated and expensive items.

The Prosthetic and Sensory Aids Service provides appliances and services to about 950,000 veterans per year.

Environmental Medicine (Agent Orange)

Since the problem of Agent Orange first surfaced in 1978, the VA has taken a lead role in initiating activities to deal with the complex health care issues generated by this defoliant. The Office of Special Assistant to the Chief Medical Director for Herbicide Orange Affairs was established in 1980 to serve as an agency focal point for the coordination of all Agent Orange-related activities. This office performs several important functions: prepares policy recommendations for the Policy Coordinating Committee which is responsible for advising the Administrator; directs the activities of VA's Advisory Committee on the Health-Related Effects of Herbicides; establishes liaison with other Federal and non-Federal agencies and institutions; oversees the Agent Orange functions of the 180 Environmental Physicians serving as coordinators in the 172 VA medical centers and eight independent outpatient clinics; administers the Agent Orange register of exposed veterans; coordinates the conduct of special Agent Orange studies; responds to congressional and other inquiries; and keeps the Chief Medical Director duly advised on all related matters. The Special Assistant serves as a member of the Interagency Work Group on the Possible Adverse Effects of Phenoxy Herbicides and Other Contaminants and is a member of its subgroup, the scientific panel which provides recommendations on Agent Orange to the White House.

The long-range epidemiological study mandated by Public Law 96-151 will assist in providing verifiable scientific answers to the possible adverse health impact of Agent Orange on Vietnam veterans. A special Chloracne Task Force was also established for the purpose of preparing educational materials to assist dermatologists and other VA physicians in the diagnosis of this Agent Orange-related skin condition. Also, the VA, in conjunction with the Department of Health and Human Services, is jointly sponsoring a special genetic study which will be conducted by the Communicable Disease Center in the Atlanta area. The study will focus on the offspring of veterans who may have been exposed to Agent Orange.

Agent Orange examinations are being provided to Vietnam veterans at each major VA health care facility. By the end of FY 1980, approximately 30,000 veterans had participated in VA's Agent Orange registry program. The VA plans to utilize the registry as a mechanism for follow-up assistance in keeping veterans advised of significant developments. Outreach efforts designed to inform Vietnam veterans about Agent Orange and related VA activities have included the preparation of a special

training film and the creation of a pamphlet entitled "Worried About Agent Orange?" In recognition of the need to train environmental physicians to more effectively serve Vietnam veterans regarding Agent Orange, two major educational conferences were held during the past year in the Washington, D.C. area. In addition, a special periodic "Agent Orange Bulletin" provides Environmental Physicians a professional training newsletter concerning scientific and other developments. The VA is continuing to pursue vigorously answers to the complex issues generated by this defoliant.

Neurology

The major concern of the Neurology Service this year has been the distribution of available resources to provide the best care to the most veterans. Toward this end, one of the seven epilepsy centers was relocated, thereby providing without additional cost, a more equitable geographic distribution, making this specialized comprehensive care available to more patients.

A new concept in continuing medical education has been developed that promises to be more effective than traditional didactic programs in improving VA physicians' ability to manage complicated neurological problems. Key staff from VA medical centers lacking the scarce resources and expertise will participate in brief "hands-on" mini-fellowships with staff at VA medical centers that have the needed resources. The first actual program will take place in FY 1981 and focuses on epilepsy. A similar program for neuromuscular disease (including amyotrophic lateral sclerosis) is planned.

Radiology

Fiscal year 1980 has continued to be another progressive and professionally stimulating year in the field of radiology, which encompasses the specialties of diagnostic radiology, ultrasound, radiation therapy and the newly important computerized tomographic (CAT) scanners. Extensive planning went into the development of modern and technologically advanced X-ray departments for the newly planned medical centers and also into the updating of X-ray departments at New Orleans; Oklahoma City; Denver; Providence, Rhode Island; Kansas City, Missouri; and several other VA medical centers. During FY 1980, plans to improve space and equipment of many other X-ray departments continued.

Radiology continued to be a major supportive and consultative service to other specialties, performing 5,707,389 examinations of inpatients and outpatients, and processing 17,081,087 X-ray films during FY 1980.

In the field of radiation therapy, 24 medical centers offered Cobalt 60, linear accelerator, and betatron supervoltage radiotherapy to patients with deep-seated malignancies. A total of 14,449 patients received 157,413 such treatments. At other VA medical centers, patients were treated by transfer to the nearest VA radiotherapy center, or through contractual sharing agreements with a

community or university radiotherapy center. Plans were developed for adding a supervoltage radiotherapy center at the VA Medical Center, Albany. Updating and modernization of radiation therapy service through planning and replacement of equipment continues.

Radiology Service is a strong advocate of an active quality assurance program and received active support in this endeavor from the Bureau of Radiological Health. Through this joint effort, advances have been made in radiation control and safety.

Progress has continued in closely integrated and affiliated programs in X-ray residencies between the VA medical centers and over 100 university medical schools. Strong efforts are being made to keep VA medical centers current, and operating according to the latest concepts in the art and practice of radiology.

Nuclear Medicine

The patient care activities of the nuclear medicine service continue to expand, and the use of radioindicators to identify diseases throughout the body has extended to larger numbers of inpatient and ambulatory veterans than ever before. More than 3 million nuclear medicine procedures were done in the past year at a unit cost of \$13.39, a figure far below that in the private sector.

Nuclear medicine services are now available in 128 VA medical centers, and the network system of bringing such

services to remote areas now incorporates the VA medical centers at Grand Junction, Colorado, and Cheyenne, Wyoming.

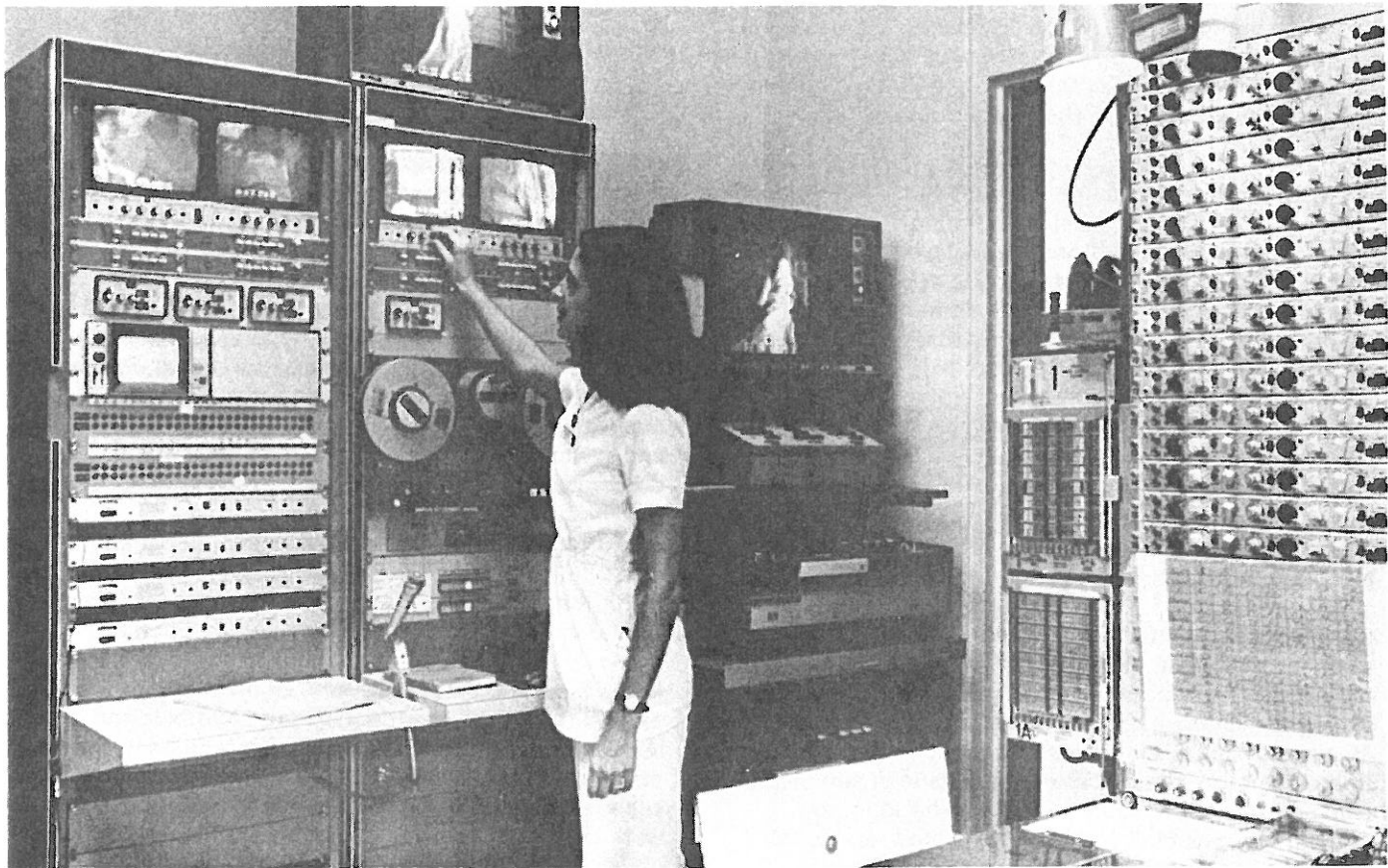
There has been close cooperation with the Nuclear Regulatory Commission in developing a program by which radiation exposure as low as reasonably achievable is attained. There has been specific attention to the matter of radiation exposure to patients and personnel and nuclear medicine now uses 10 to 20 times less radiation to accomplish its diagnostic work than other modalities employing radiation.

To emphasize the importance of curtailing the use of radiation to necessary diagnostic procedures, and to alert the nuclear medicine community to the necessity to control radiation meticulously, a conference on quality control in nuclear medicine was held in Washington, D.C., for VA nuclear medicine physicians.

A manual on the handling of victims of nuclear disasters, to be used throughout the VA, is being prepared in cooperation with the Federal Emergency Management Agency, the nuclear groups at Oak Ridge and Brookhaven National Laboratories, as well as numerous consultants.

The advance of the functioning of a positron imaging system at the Madison, Wisconsin VA Medical Center, with which the chemistry of the brain can be seen as

Epilepsy Monitoring Unit VAMC, West Haven, Connecticut



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pictures, has been amplified by the acquisition, in collaboration with the National Cancer Institute, of a cyclotron at the Wadsworth (Los Angeles) VA Medical Center. With this device, short-lived radioindicators can be produced on site for the important studies that reveal brain functions hitherto impossible to explore. The importance of these studies in alcoholism, psychiatry (schizophrenia) and rehabilitation cannot be over-emphasized.

In alcoholism, the work done by the Nuclear Medicine Service at the Manhattan VA Medical Center is the most promising being done in the world today. This work, together with that done at the Bronx VA Medical Center, may give the answer to the etiology of alcoholism.

Work continues on the feasibility of applying the principles of Nuclear Magnetic Resonance (NUMAR) to patient care in the diagnosis of disease states by delineation of organ abnormalities and disturbances in blood chemistry. The latter studies are already being done at such VA medical centers as Gainesville, Florida, and imaging devices are expected to be available within the year. In addition, the promising field of microwave imaging is being explored with the group doing this work at the Walter Reed Army Hospital. One of the major advantages of NUMAR and microwave diagnosis is that no ionizing radiation is used.

The nuclear medicine service is involved in managing matters pertaining to veteran participation in nuclear device activities between 1945 and 1962. This work, involving cooperation with many other Federal agencies, has done much to allay public anxiety on this subject.

Examination of new techniques in ultrasound, such as laser-ultrasound and microwave-ultrasound methods, have been made. Again, the lack of ionizing radiation for diagnosis makes these new modalities attractive in terms of patient care.

Work continues on the development of diagnostic algorithms, with which overlapping and unnecessary diagnostic tests can be eliminated. Not only are great savings in hospital costs to be thus achieved, but patient care and comfort will be enhanced.

Dentistry

The VA continues to be the leading hospital-based dental care system in the U.S., operating dental facilities and providing a full-time staff at all VA medical centers and at a number of outpatient clinics.

During the fiscal year, dental service personnel responded to the challenge of increased numbers of eligible veterans requiring dental care. The most significant impact came from the enactment of Public Law 96-22, which resulted in more than 35,000 additional veterans receiving treatment under VA auspices. This legislation created new categories of dental beneficiaries, specifically ex-prisoners of war incarcerated for more than 180 days, and veterans with service connected disabilities rated as total

(including those deemed 100 percent service connected by virtue of their unemployment).

With virtually no additional personnel, more than 80,000 outpatients were treated by staff, a 34 percent increase over FY 1979. This increase in staff productivity is a result of a concerted effort by the VA to treat more beneficiaries "in-house" since this can be done on a more cost-effective basis. In addition to this outpatient workload, data from the 1980 inpatient census revealed that 65 percent of the patients in VA medical centers and 93 percent of all patients in nursing homes and domiciliaries received an oral examination to identify dental needs and to apprise the physician and dentist of the patients' oral condition. Dental treatment was provided to 38 percent of the hospital patients examined, 54 percent of the nursing home patients, and 62 percent of the domiciliary patients.

VA dentists recognized a total of 1,001 malignancies, representing a 17 percent increase compared to FY 1979. Early recognition and diagnosis of an oral malignancy can be a lifesaving measure and illustrates one important aspect of an oral examination program.

A model program has been initiated to evaluate the merits and applicability to VA operations of increased use of expanded function dental auxiliaries (EFDA's), a concept originally begun in the VA in FY 1977. EFDA's are specially trained to perform certain procedures traditionally performed by the dentist, enabling the dentist to devote greater attention to more highly skilled procedures. To implement this program the VA is virtually doubling the number of EFDAs currently employed, and providing sufficient support personnel for a proper evaluation of their contribution. The employment of more EFDAs may follow, if the evaluation shows the program to be advantageous.

The VA dental program is involved in educational and research activities which contribute significantly to health manpower training and to enhanced patient care.

Optometry

The number of teaching affiliations with schools and colleges continued to grow and by the end of 1980, 15 VA medical centers had established residency programs in optometry and were training 20 residents. These programs were accredited by the American Optometric Association's Council on Optometric Education. In addition, approximately 23 medical centers were affiliated with schools and colleges of optometry for the purpose of training student interns.

Plans continued on a cooperative VA-Army-Navy joint procurement of ophthalmic supplies so that a pilot program could be established. It is believed this interagency sharing will allow the VA to secure filled ophthalmic prescriptions in a more timely and cost effective manner.

A Central Office survey of those stations that had started optometry services in the last three years indicated satisfaction with these services and the observation was

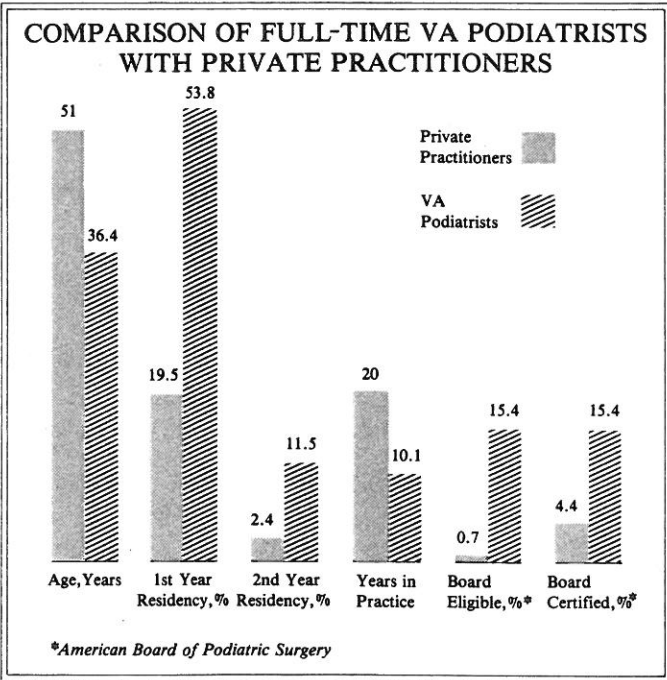
made that improvements in both eye and vision care had resulted. The key to these improvements appeared to be the close cooperation and support between these new optometry services and the medical and surgical services.

Podiatry

The VA Podiatric Service continued to provide assistance to VA medical centers in the establishment and development of new podiatric medical care programs during FY 1980. Since the establishment of the VA Podiatric Service there has been a significant advancement in the comprehensive care of the aging veteran by addressing their podiatric health care needs. The primary focus on the delivery of podiatric care has been in the ambulatory setting. Over 70 percent of patients seen by the Podiatric Service are in outpatient clinics.

Major in-service programs have been conducted during FY 1980 to assist the VA podiatrist in promoting rehabilitation as an elemental portion of the foot care services provided to the veteran patient. In addition, in August 1980, the VA Podiatric Service was honored by the Journal of the American Podiatry Association which published a special issue dedicated to the podiatric education and research programs in the VA.

The quality of the podiatric physician attracted and recruited to the VA has remained high. The accompanying table reflects those significant factors that make the VA podiatric medical care system the finest in the U.S.



Pathology

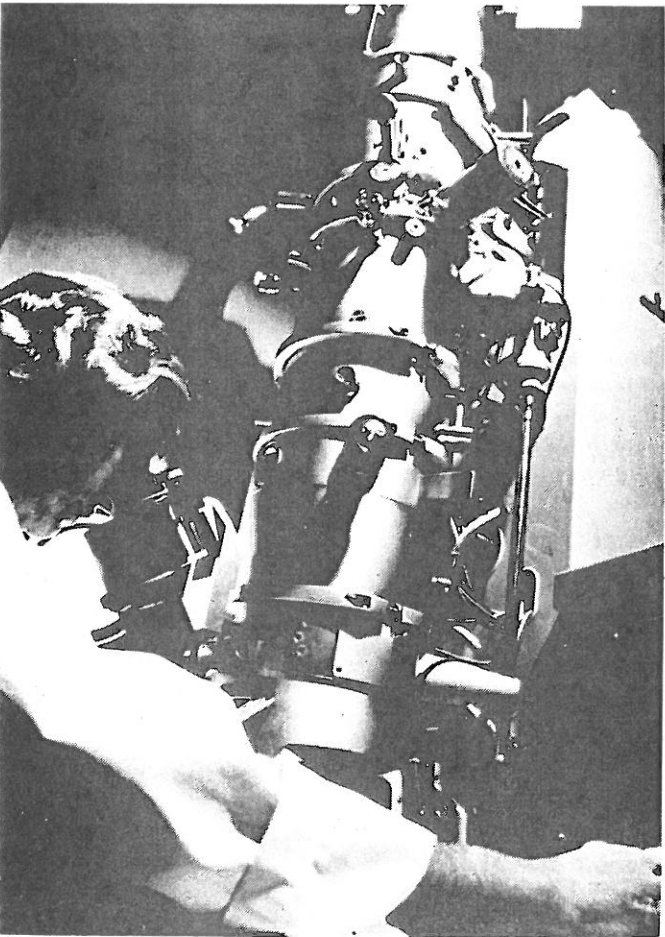
VA laboratory services in FY 1980 continued to review laboratory utilization with emphasis on increasing capability to monitor blood levels of certain therapeutic

drugs, laboratory assessment of immunological problems, and strengthening of microbiological capability. Selected laboratory data are shown in the accompanying table.

	FY 1980	FY 1979	FY 1978
Procedures (unit count)	214,818,805	203,242,806	193,623,053
Workload (unit values)	685,205,320	670,053,272	621,018,860
Deaths	46,413	46,048	47,932
Autopsies	16,732	15,975	18,023
Surgical accessions	381,883	376,899	388,412
Cytological accessions	197,024	206,449	221,111

As of October 30, 1980, all but one of the 174 VA Laboratory Services enrolled in the College of American Pathologists Laboratory Inspection and Accreditation Program were accredited.

All VA laboratories continue to participate in survey programs provided by the College of American Pathologists. Those performing tests for syphilis participate in the Special Comprehensive Syphilis Serology Survey and those performing tests for therapeutic drugs participate in the Special Therapeutic



Electron microscope VAMC San Diego

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Drug Monitoring Survey. Selected VA laboratories also participate in the Center for Disease Control Proficiency Survey for Drugs of Abuse. The program of the systematic external review of VA autopsies and surgical tissues was in its third year in FY 1980, providing additional continuing education for VA pathologists.

During FY 1980, a special registry was continued at the Armed Forces Institute of Pathology (AFIP) for pathological material from veterans with possible exposure to herbicides during the Vietnam era. This registry permits study of materials which may be integrated with other types of studies, such as clinical laboratory, statistical and epidemiologic, to assist in ascertaining possible long-term effects.

A special registry was also established in FY 1980 at the AFIP for pathological materials from former prisoners of war to aid studies of the long-term consequences of the prisoner of war experience.

During FY 1980 blood transfusion services in the VA continued to maintain high standards; 500,963 units were transfused with 98 percent of the blood coming from voluntary donors. Packed red cells accounted for 54 percent of all VA transfusions with whole blood accounting for 10 percent, and the remaining 36 percent consisting of other components. Outdated blood continued to remain at less than three percent, a considerable accomplishment.

Nursing

A new position, Deputy Assistant Chief Medical Director for Professional Services for Nursing Programs was established during the year. This organizational change reflects the VA's appreciation of the growing complexities and professionalism in the realm of nursing. The VA has long been cognizant of the importance of nursing in delivery of health care, and the evolving needs and capacities of this profession. Expansion of specialized medical programs demands greater use of Registered Nurses, and rapid technological advances are continually making nursing more complex. The newly elevated status of nursing programs in the VA is just one initiative in the agency's continuing efforts to address these issues.

The VA continued to react positively to the challenge of critical nationwide nurse shortages. In order to become competitive, approximately 50 medical centers had salary entrance rates adjusted. These efforts, as well as increased employment of part-time nurses and nurse recruiters, have aided medical centers experiencing extreme recruitment difficulties. Recruitment and retention efforts in FY 1980 were intensified by the passage of VA Health Care Amendments of 1980, Public Law 96-330. Several provisions in the bill hold significant promise for improvement of nurse shortages in the VA.

Nursing's involvement in the clinical practice of rehabilitation, gerontology, acute and long-term care is

receiving continued emphasis. Critical components of rehabilitation nursing have been identified and will be incorporated in a teaching program.

Twelve VA nurses have completed the Nurse Practitioner Program in Spinal Cord Injury through collaborative efforts of the Long Beach VAMC and California State University at Long Beach. The program was initiated by Nursing Service and the nurse practitioners are providing leadership in spinal cord injury nursing practice and education.

Recreation

Recreation was realigned in 1980 as an independent Service in CO under Professional Services to emphasize recreational programs as a therapeutic benefit to veterans and to strengthen recreation's role as a part of the VA clinical team.

In order to meet the management needs of this new Service a Recreation Service Management Training Program was initiated to insure a high degree of professional and managerial knowledge and skills. This program will offer extensive review of Recreation Service operations and an understanding of the role of the recreation manager in the VA health care delivery system.

A task force of representatives from 10 non-VA organizations such as the American Red Cross and the National Endowment for the Arts met with chiefs of Recreation Service from the six medical regions in VACO to discuss service delivery to patients. These discussions centered around supplemental resources used to meet the recreation needs of the hospitalized veterans. Such organizations contribute over \$3 million in monies and services to the VA medical centers each year.

Emphasis was on creative arts approaches in recreation. These approaches include the specialized areas of art, music, recreation, psychodrama and dance. They are directed toward achieving such therapeutic objectives as diminishing emotional stress, providing a sense of achievement, channeling energies and interests into acceptable forms of behavior, aiding physical and mental rehabilitation, and promoting successful community reentry.

A training program "Bridge to the Community" was conducted for recreation therapists to help increase knowledge and skills in their relationships with interdisciplinary management and coordination of community resources. This effort is expected to be particularly useful in developing programs for nursing home and substance abuse patients.

Pharmacy

Pharmacy Service continues to be committed to providing safe and effective drugs to the veteran patients and to assuring appropriate drug utilization in the VA health care system. Recognizing the complexities and sophistication

of drugs and drug technologies, and the narrowing of the benefit-risk ratio; more patient-care-oriented pharmacy services are being implemented.

During FY 1980, approximately 36 million prescriptions for ambulatory patients were dispensed from 220 VA pharmacies. High priority is placed on the continued development of the automated outpatient pharmacy system to include inpatient and inventory control modules. The total automated system, when completed, will process the flow of medications more efficiently and provide for effective clinical and administrative decision making.

The VA continues to support the combined Federal procurement directives in an effort to standardize drug procurement, nomenclature, products description, drug selection, and elimination of duplicate stocked drug items. These procedures are expected to be cost-effective and to reduce the total cost of medications to the VA and other Federal agencies.

The Pharmacy and Therapeutic Agents Committees and the Infectious Disease Committees at VA medical centers implemented criteria for the rational use of anti-infective agents, thereby monitoring the use of all such agents. While improving patient care, it has been cost-effective as well. Special packaged drugs are purchased to provide the patient with a ready-to-use prescription container, providing quality assurance and saving labor.

Pharmacy training activities are directed toward improving the clinical skills in VA pharmacists to provide more patient-oriented and veteran-centered pharmacy services. Pharmacists from over 100 medical centers have participated in Clinical Functions Skills Seminars, a program which will continue through FY 1981.

VA's efforts toward conversion to the medication management dispensing system (unit dose) has resulted in the completion of 46 programs. This represents over 22,000 beds on the unit dose system with anticipation of more facilities and additional operational beds being converted in the next fiscal year. Those medical centers where the program has been completed realize a reduction in medication losses, less probability of medication errors, less diversion of drugs to street traffic, savings in nursing time devoted to medication activities and a total medication profile on patients. Pharmacy Service is developing a meaningful evaluation system to measure the quality of care provided from the various pharmacy program activities.

Dietetics

During FY 1980, nearly 92 million meals were served in VA health care facilities at a raw food cost of \$88 million or 95 cents per meal (up from 88 cents in FY 1979).

An increasing number of clinical dietitians have expanded their role in providing nutritional care to veteran beneficiaries. Approximately 70 percent of the VA professional dietetic staff are clinical dietitians who, in

coordination with physicians and other health care disciplines, assess nutritional status, prepare nutritional care plans, and implement and evaluate nutritional care. Limited studies of veteran patients have revealed between 20-25 percent at nutritional risk, which coincides with statistics presented for patients in non-VA health care institutions. These figures support the need for intensifying the nutritional care component in the total treatment program. Recommendations to stimulate an active clinical nutrition program were disseminated to all VA medical centers, and the need for continuing nutrition education of dietitians and other health care professionals was emphasized.

Social Work

Over the past year, Social Work Service concentrated on formulating, testing, and implementing administrative measures to assess program effectiveness. The Social Work Service Automated Management Information System (AMIS) was revised and activated on April 1, 1980. This new AMIS provides productivity data in terms of hours worked and cases served by identified program categories. Outcomes for social problems treated and placement data are also reported.

New program evaluation criteria have been developed for Social Work Service for inclusion in the VA Health Systems Review Organization program. Some of the areas to be reviewed include leadership, staff utilization, patient care services, service goals, continuing education, research, policies and procedures, and utilization of community resources.

Ambulatory care has continued to be a major area of focus for Social Work Service. Approximately 47 percent of direct care staff time was allocated to outpatients. Of a representative sample of outpatients treated by social workers, 54 percent were service connected (over a third of whom had disabilities rated at 50 percent or higher). Approximately 39 percent of the outpatient visits provided by social workers were away from the facility.

To strengthen communications and working relationships between the Central Office and the field, the Social Work Service Field Advisory Committee was activated. Six Social Work Service chiefs were appointed to represent the six DM&S regions. The committee members canvassed the chiefs in their regions and developed an agenda incorporating the concerns of the Social Work Service in Central Office and those of the Social Work Service departments in 172 medical centers. The committee, in addition to its consultative role, has served as a focal point to address regional issues and to obtain input from the field on planned Central Office actions.

In response to major advances in health care, the need for social workers educated and trained in health care delivery was a major issue requiring action. With cooperation from the VA's Office of Academic Affairs, the Council on Social Work Education and affiliated graduate schools of social work, health care curricula have been

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developed by more than half of the affiliated schools. A Field Student Curriculum Guide has been published, and action taken to phase out the undergraduate training program and concentrate educational resources at the graduate level.

Significant actions in recruitment and staffing included updating and revision of the Office of Personnel Management social worker applicant rating system, and upgrading the education and experience requirements for VA employment. The revisions were correlated with policy and program changes in the Social Work Graduate Student Education program, accenting health care curriculum in affiliated graduate schools of social work. These actions have resulted in more expeditious processing of requests from a pool of candidates with education and training in health care. The net effect of the past year's activities has been to improve the effectiveness and efficiency of program operations.

Chaplain Service

The mission of the VA Chaplain Service, an integral part of the health care team, is to provide a spiritual and religious ministry to patients in all VA medical centers. The Chaplain Service represents all major faith groups and denominations and is dedicated to the spiritual, physical, and emotional welfare of the veteran and his family.

As part of this program, each chaplain's capabilities are enhanced through educational workshops. Workshops conducted this year focused on dealing with the orthopedic patient, the patient suffering from substance abuse, the aging patient, and the terminally ill patient and his family. In addition, a study was conducted of medical center staffs and their needs as related to Chaplain Service. Through these workshops and studies, chaplains have gained deeper insights into patients' needs and lives and have learned how to deal more effectively in those areas.

The Chaplain Service is continuing to work with the Church Ecclesiastical Endorsing Agencies of all faith groups to establish guidelines for bringing new chaplains into the VA.

Canteens

The Veterans Canteen Service (VCS), a self-supporting, independent organization, operates retail stores and provides food and other services at each VA medical center and domiciliary. Canteen retail stores, offer a wide range of products for personal hygiene and grooming, as well as for entertainment, recreation and leisure time activities. Food service provides complete meals or snacks for patients' families, medical center employees, volunteers, and visitors.

Barber and beauty shops, alterations, dry cleaning, laundry, magazines, newspapers, and flowers are among the services offered. A vending machine area is available for quick snacks or when food service is closed.

The canteens provide patients with a change from hospital routine, allowing them to browse or buy. For patients unable to come to the canteens, services are provided in the wards.

Revenues generated from sales finance the VCS. Net income for FY 1980 was \$4,062,214; this money will be used in FY 1981 to pay for increased salary costs, planned canteen improvements, and to offset the impact of inflation on inventories. Inflation was a major force in 1980. Even so, with few exceptions, the VCS gave the patient a break by not raising prices of merchandise on hand when cost increases were received. Results of a 1980 selling price survey showed that items sold in canteens were available at reasonable cost, often lower than national retail outlet prices.

VCS joined in VA's 50th Anniversary celebration by rolling back prices to 1930 levels. In three days, VCS served over 57,000 complete meals for 50¢ each and 800,000 hot and cold drinks for 5¢ each. Each inpatient and member received an anniversary gift from VCS, a \$5.00 coupon book redeemable for canteen merchandise and services.

In its continuing desire to serve patients and staff as efficiently as possible, VCS introduced system-wide a gratuitous meal ticket for those qualified to have them, such as volunteers and hospital staff. This reduced serving time as customers no longer had to wait while names were checked against the list of persons authorized to eat in the canteen.

The consolidation of five separate VCS accounting offices into a Finance Center located in St. Louis was completed in 1980. The center will utilize fewer employees while improving the timeliness and scope of financial information available.

Twenty-eight canteen areas (17 food service, seven dining rooms, and four retail stores) were remodeled in FY 1980. These remodelings increased accessibility for wheelchair and spinal cord injury patients through the removal of architectural barriers, and improved service by providing space for new equipment and merchandise.

VCS has numerous goals, among which are the eventual use of a system-wide computer allowing fund reporting and improved managerial policies. VCS also hopes to eliminate the last of its quonset hut buildings (there are three left) and go to pre-engineered ones, further updating its facilities.

Monitored Professional Services Programs

Specific standards of productivity or utilization are applied to selected Professional Services programs which provide modern care techniques that may require a combination of uniquely trained professionals, special facility capabilities, and sophisticated medical equipment. These programs emphasize satisfying the medical needs of service connected veterans in such vital areas as psychiatric care, rehabilitation, alcohol and drug

dependency treatment, aging, and readjustment programs for younger veterans. Quality review of each program is performed on an ongoing basis. The accompanying table shows the number of units in each monitored program at the end of FY 1980.

Program	End of FY 1980	Program	End of FY 1980
Alcohol dependency treatment units	100	Hospital-based home care	10
Blind rehabilitation centers	3	Hypertension screening and treatment program	32
Blind clinics	3	Mental hygiene clinics	137
Cardiac catheterization laboratories	67	Nuclear medicine	128
Cardiopulmonary bypass surgery	41	Renal transplant centers	16
Cardiopulmonary rehabilitation centers	1	Satellite (self) dialysis	25
Computed tomography	16	Sickle cell program	40
Day hospitals	40	Speech pathology units	90
Day treatment centers	55	Spinal cord injury centers	18
Drug dependency treatment units	52	SCI home care units	11
Electron microscopy unit	45	Supervoltage therapy units	24
Epilepsy centers	7		
Hemodialysis centers and home dialysis	55		

Research and Development

The VA Research and Development program, including medical, rehabilitative engineering, and health services research, continues to make significant contributions to the quality of health care provided in VA medical centers throughout the country.

Medical Research

The Medical Research Service offers the opportunity for clinician-researchers to study problems of importance to the veteran population and the nation as a whole. These include alcoholism, schizophrenia, delayed stress disorders of Vietnam era veterans, aging, and spinal cord injury/regeneration. Additional foci are injuries related to wartime experience and other prevalent health problems of veterans, such as cancer, diabetes, chronic heart disease, and chronic pulmonary disease. Opportunities that link clinical and research investigations with the challenges of health care delivery to the veteran population enhance the recruitment and retention of high quality health care providers. During this year, two hundred clinician-researchers participated in the Medical Research Career Development Program. This program offers exceptionally promising clinical health professionals a career progression from beginning research assignment to a full career in academic medicine and research.

Awards and Honors. During the fiscal year, VA researchers were recognized at the national and international level with many awards, including the following:

International Awards. Dr. Andrew V. Schally, Senior Medical Investigator, VA Medical Center, New Orleans,

received Brazil's highest decoration, the National Order of the Southern Cross, for his basic research in hypothalamic hormones. Dr. Juan del Regato, Distinguished Physician, VA Medical Center, Tampa, Florida was awarded the Prix Bruninghaus by the National Academy of Medicine in Paris, France, for his cancer research. Dr. Betty G. Uzman, Director, Medical Research Service, VA Central Office received the insignia of the Order of Andres Bello, First Class, from the government of Venezuela in recognition of her contributions to medical science and research in the fields of pathology and neuroscience. Dr. Hubert Pipberger, Chief of VA Research Center for Cardiovascular Data Processing at the VA Medical Center, Washington, D.C., was recognized by the International Federation for Information Processing with its First Award of Distinction.

Middleton Award. The VA's highest honor for medical research, the William S. Middleton Award, was given to Dr. Edward D. Freis, VA Medical Center, Washington, D.C., for his work in cardiovascular hemodynamics and transcapillary movement of fluids and solutes, and for major contributions to the understanding of the pathophysiology of essential hypertension.

American Podiatry Association. Dr. Daniel McCarthy of the VA Medical Center, Perry Point, Maryland, received the William J. Stickel Silver Award for research presented by the American Podiatry Association.

Honorary Degree. Dr. Abba J. Kastin, Chief of Endocrinology at the VA Medical Center, New Orleans, received the highest honorary degree (Honoris Causa) from the National University Federico Villarreal in Lima, Peru, for his application of brain hormone research to the clinical setting.

Research Career Scientists. Seven scientists were recognized in FY 1980, bringing to 52 the number of VA scientists who have been awarded the title of Research Career Scientist. This recognition is based on their national and international contributions to medical science as well as their roles in support of the clinical and research programs in their local VA medical centers.

Cooperative Studies. The VA cooperative studies are programs in which investigators at a number of VA medical centers study a medical problem in a uniform manner under a common protocol. The cooperative studies mechanism is available to VA investigators to answer pertinent clinical questions, effectively utilizing the nation's largest health care system.

By the end of the year, 26 studies were in progress, four of which were initiated in FY 1980. Another 20 studies were being planned and the results of nine were being analyzed. Five cooperative studies were completed within the year and 18 manuscripts were submitted to leading medical journals. The following examples illustrate the effectiveness of the cooperative study approach:

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A cooperative study comparing low-cost base metal alloys with gold alloy for use in fabrication of dental restoration has been initiated in six medical centers. If this study demonstrates that base metal alloys can be used effectively in place of gold, it will result in major cost savings.

A study to establish whether vasodilator therapy has long-term efficacy with chronic congestive heart failure is being conducted in 10 medical centers. The impact of demonstrating the effectiveness of this new form of therapy will be considerable since many veterans receive treatment for this condition in VA medical centers.

A study was initiated to evaluate the efficacy and safety of a new drug, acetohydroxamic acid, in the management of chronic urinary infection and infection-induced urinary stones in veterans with spinal cord injury. Chronic renal failure is the number one cause of death in this group of veterans. Six VA medical centers are participating in a four-year study.

Another study compares the relative effectiveness of counseling alone or counseling plus disulfiram (antabuse) therapy in the treatment of veterans addicted to alcohol. This study is being carried out in 10 VA medical centers.

A study being conducted at eight medical centers contrasts treatment in community nursing homes, VA nursing care units, continued psychiatric care on the same ward, or continued psychiatric care on another ward for psychiatric patients referred for nursing home placement.

Health Services Research and Development

Health Services Research and Development (HSR&D) seeks solutions to problems of the organization, effectiveness, economy, and accessibility of health care services.

The pilot program of preventive health care,¹ designed to test the feasibility and cost effectiveness of selected preventive health care services for certain veterans, remains a priority for Health Services Research. The program is being conducted in collaboration with Professional Services. In February 1980, the Chief Medical Director solicited letters of intent to develop proposals. Of the twenty proposals finally developed, six were approved as scientifically meritorious. They encompassed projects in schizophrenia, hypertension (cardiovascular risk and compliance monitoring), psychiatric screening, and dentistry. In addition, three major studies, including one random controlled trial, were developed to test the cost effectiveness of selected prevention service packages. In FY 1980 no resources were appropriated for this research; however, funds are being sought in future budget years to implement these projects.

A research strategy is currently being developed for improving the provision of rehabilitation services. Toward

¹This information is included in compliance with Section 105, Public Law 96-22.

this end, the HSR&D Service and the Rehabilitative Engineering R&D Service jointly sponsored a conference to identify priority issues in delivering rehabilitation services. Long-term care for the aging veteran is also being addressed through research strategy development, and planning was initiated for a cooperative study of Hospital Based Home Care.

Forty-two intramural studies received HSR&D support during FY 1980 at 35 medical centers. The projects address many areas of health care delivery, with emphasis on areas of high VA priority such as rehabilitation, alcohol and drug abuse, ambulatory care, and the special problems of the aged. Completed projects have contributed knowledge about measuring the quality of nursing care; developed a mechanism for expanding the role of physician extenders to increase efficiency without sacrificing quality; improved methods for measuring the physical and psychosocial environments of geriatric treatment settings as a first step toward controlling variables that affect the health and well being of the aging veteran; and improved methods for assigning substance abusers to treatment modality.

The affiliation program continues to support projects and field training in health services R&D. This program establishes complementary relationships between VA facilities and academic health services research programs. Fourteen VA medical centers actively affiliated with university-based health services research programs were supported during FY 1980.

Rehabilitative Engineering Research and Development

The VA continues to expand its program of research and development in devices, techniques and concepts in rehabilitation to improve the quality of life of physically disabled veterans.

The research program includes efforts to develop new prosthetic devices, as well as new diagnostic instruments and techniques to reduce the need for amputation in patients with diabetes. The RER&D Service also supports studies in biomechanics and material analyses for the purpose of developing new devices to restore or replace lost limb function. Another area of research includes efforts to develop improved maxillofacial prostheses for those patients who have suffered disfiguring injuries or surgical resections. The RER&D Service established two special resource centers which are affiliated with engineering schools. These centers are staffed with engineers, scientists, and technicians who, when combined with the medical center staff, form a unique multi-disciplinary team. One RER&D center is developing in-house expertise in robotics and artificial intelligence, functional electrostimulation, sensory aids, biomaterials/biomechanics, recreational devices, and mobility. The other RER&D Center is developing in-house expertise in applied neuro-physiology, biomechanics and kinesiology, communication and sensory aids, and system evaluation.

The problems of the spinal cord injured veteran continue to receive special emphasis. Twenty projects addressed

their needs, covering such topics as improved automobile adaptive equipment for the paralyzed, new control systems for powered wheelchairs, and remote medical manipulators called robotics. Robotic devices under computer control allow the paralyzed patient to feed himself, answer the telephone, fetch books from a rack, load paper into a typewriter, or use a computer terminal. These systems are intended to give the patient a greater degree of freedom in the tasks of daily living.

The sensory aids program received continued emphasis during this year. In addition, the RER&D Service entered into an interagency agreement with the Department of Education for the development of a portable reading machine for the blind. The first prototypes are expected to be delivered in the fall of 1980 and a comprehensive design evaluation will be conducted. The VA continued its interagency agreements with the National Aeronautics and Space Administration. One of these interagency projects was to develop wearable devices for automatic cued speech. The cued speech devices bridge the gap between lip-reading and sign language.

Academic Affairs

The VA conducts the largest coordinated health professions education and training effort of its kind in the country. Its purpose is twofold:

- Assuring the highest quality of veteran's health care by educating and training professionals within the VA's health care delivery system, and providing continuing education and career development for the personnel who manage and direct the operations of VA health care facilities.
- Developing sufficient numbers of all categories of professional and other health personnel to meet the needs of the VA system and, simultaneously, contribute to the health manpower needs of the nation.

In all, the Department is affiliated with over 1,000 educational institutions and nearly 100,000 students each year receive some or all of their clinical training in VA facilities. Continuing education for the employees who directly or indirectly affect the delivery of health care to patients is provided through a network of VA-directed Regional Medical Education Centers and other related activities.

An integral part of this effort is training relationships between VA health care facilities and schools of medicine, dentistry, nursing, pharmacy, social work, and other associated health professions and occupations at the graduate and undergraduate levels. More than 90 physicians and other senior health professionals are working at the hospital, local community, and regional levels as Associate Chiefs of Staff for Education, Directors of Regional Medical Education Centers, Directors of Dental Education Centers, Directors of Cooperative Health Manpower Education Programs, and Patient Health Education Coordinators. These centrally approved representatives are responsible for monitoring

existing education and training programs, developing new activities consistent with the needs of their institutions and those in their region, and coordinating these programs with the academically affiliated health professions schools and colleges and in the communities they jointly serve.

VA Facilities - School Affiliations

The fundamental consideration in the affiliation of VA health care facilities with educational institutions rests on the willingness of all parties to cooperate in education and training programs of mutual benefit. Each local VA facility brings its own substantial resources as well as its own expert and extensive staff to this cooperative endeavor. At the national level, the Office of Academic Affairs coordinates local and regional affiliation activities with the accrediting agencies and the national organizations that represent the various affiliated institutions and professions.

During the year, 137 VA health care facilities and 41 outpatient clinics were affiliated with 104 medical schools, and 92 of these same facilities and three outpatient clinics were affiliated with 59 schools of dental medicine. All 172 VA health care facilities were engaged in the education and training of students of all other health care professions and occupations in affiliation with at least one university, school or college.

The accompanying table reflects the status of VA's health care training efforts by the major areas involved.

Discipline	FY 1980	FY 1979	FY 1978
Total	96,670	96,583	97,272
Medical house staff	24,286	23,393	22,561
Medical students	20,427	19,392	19,550
Dental house staff	706	609	693
Dental students	1,216	1,085	1,031
Nursing	27,699	29,968	29,540
Other associated health professions & occupations	21,548	22,300	23,090
Administrative	788	836	807

An Affiliation Assessment Project was launched in 1977, to create more effective management of educational program relationships, both centrally and at the facility level. The project, which is being carried out in cooperation with schools of health professions, consists of the creation of a computer-based descriptive, analytic model that will identify, define, characterize, and measure the aims, outputs, processes and outcomes of VA-school relationships. The work of developing this model began at Richmond, and is currently being tested, validated, and established at 19 sites throughout the VA health care system, with more to be added.

VA Professional Staff as Academic Faculty

As affiliations with academic health sciences schools and colleges develop and expand, recognition of the academic

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stature of VA staff is demonstrated in the increased number of faculty appointments. As shown in the accompanying table, the number was 8,857 at mid-FY 1980; a year earlier the figure was 8,508.

**VA Physicians, Dentists, and Other Staff
(Full-time and Part-time)
With Faculty Appointments**

March 31, 1980

Academic Title	Total	Physicians	Dentists	Other Staff
Total	8,857	6,819	416	1,622
Professors	1,138	1,050	12	76
Clinical professors	165	138	12	15
Associate professors	1,276	1,102	43	131
Associate clinical professors	504	382	57	65
Assistant professors	2,632	2,304	74	254
Assistant clinical professors	1,046	802	91	153
Instructors	691	438	20	233
Clinical instructors	774	393	79	302
Lecturers	128	65	9	54
Other titles	503	145	19	339

Graduate and Undergraduate Medical and Dental Education

During 1980, a total of 125 VA health care facilities participated in 1,568 specialty and subspecialty programs for physicians. Of these, 1,494 were cooperative arrangements between VA facilities and medical schools. Accreditation for 74 other residency programs conducted in VA health care facilities was given in the name of 53 VA facilities and 21 community teaching hospitals with which they are associated, but where there is no medical school affiliation. The majority of these latter programs are sponsored in relatively remote VA facilities.

The VA supported approximately 7,500 full-time residency positions. That total represents about a sixth of the nation's total number of residents in training. By cooperative affiliation arrangements, about three resident physicians are rotated through each supported position in the course of the academic year. VA medical centers are involved in the education and training of all medical specialties except preventive medicine, obstetrics/gynecology, and pediatrics. Special emphasis is given to supporting programs in primary care, and physical medicine and rehabilitation. Through affiliations with medical schools, VA facilities provide clinical education experiences for undergraduate medical students in increasing numbers.

The VA also contributes significantly to dental education with 95 VA health care facilities involved in either undergraduate or graduate residency positions. Although 312 dental positions were allocated for all dental specialties, the thrust of the advanced program is in primary care with 70 facilities conducting dental general practice residency programs. This represents 24 percent of all general practice programs in the country.

Fellowship Programs

The Geriatric Fellowship Program for physicians completed its first two-year cycle in June 1980, and certificates of training were awarded to eight Fellows. Thirteen physicians advanced to the second year and 19 became first-year participants in this clinical/educational program in Geriatric Medicine and Gerontology at 12 VA training sites.

Three more training sites (in addition to Long Beach and Palo Alto, California) for the Physician Fellowship Program in Spinal Cord Injury were designated for the Richmond; West Roxbury, Massachusetts; and Wood, Wisconsin VA Medical Centers. Eight Fellows began the first year of this two-year training program.

A new Fellowship Program in Substance Abuse was initiated at five sites: Bronx, New York; Coatesville, Pennsylvania; West Haven, Connecticut; San Francisco, and Palo Alto, California. Six Fellows were selected for first-year appointments in this special two-year training program for the treatment of alcohol and drug dependent patients.

Health Professional Scholarship Program

Title II of the VA Health Care Amendments of 1980, Public Law 96-330, enacted on August 26, 1980, authorized a VA Health Professional Scholarship Program. The purpose of the program will be to assist in providing an adequate supply of trained physicians and nurses for the VA and the nation and, if needed by the VA, other health care professionals. Appropriations are not yet available to activate the program, but implementation plans are being developed, including preparation of regulations, a program guide, and other information for potential applicants. Medical, osteopathic, and nursing students who receive scholarships would incur an obligatory period of service in the VA equal to the period of support or two years, whichever is greater.

Graduate and Undergraduate Education in Nursing and Other Associated Health Professions and Occupations

During 1980, the VA health care system contributed significantly to the education and training of personnel in nearly 50 recognized associated health professions and occupations. The term "associated health" includes all personnel other than physicians, dentists, nurses, and medical or dental students, engaged in providing direct services to patients. The table on the next page shows the extent of supervised clinical instruction provided in VA facilities to nursing and selected other health professions students.

Three facilities were designated for training geriatric teams (Salt Lake City; Little Rock, Arkansas; and Palo Alto, California), in addition to the two designated in 1979 (Portland, Oregon, and Sepulveda, California). These sites were chosen in conjunction with the geriatric programs

located at these medical centers. When health professionals function as an interdisciplinary team, there is a greater likelihood that elderly veterans will receive coordinated and comprehensive care.

	Participating VA Health Care Facilities	Students Receiving Training
Nursing	154	27,699
Social Work	151	1,029
Psychology	123	1,164
Rehabilitation medicine	108	1,861
Audiology and speech pathology	90	689
Dietetics	76	1,112
Physician's assistant	33	709

A new program was developed for 1981 implementation involving clinical nurse specialist students who receive their clinical training at VA medical centers. Sixty-four trainee positions are approved at 27 medical centers in the VA priority areas of geriatrics, rehabilitation, and mental health, through 24 academic affiliations with accredited schools of nursing.

For the first time, 260 summer traineeships were awarded to assist those VA medical centers which had difficulty recruiting students during the academic year.

Continuing Education and Staff Development

The VA coordinates a systemwide continuing education and staff development program to bring the latest in scientific, medical, and management knowledge to DM&S employees. The ultimate goal is to enhance the health status of veteran beneficiaries by assisting employees in maintaining current levels of competence and keeping them informed of the latest advances in health care administration knowledge and skills. Programming includes workshops, seminars, and individual training, and all forms of audiovisual, print, and transmission media. This continuing education and staff development program consists of three components:

- Instructional design and educational development for all DM&S activities.
- Management training.
- Coordination and funding support to the three units of the program: field facility activities, Office of Academic Affairs supported field units, and Central Office directed activities.

Instructional Design and Educational Development—Major emphasis is placed on developing and conducting quality continuing education programs in areas of national interest and agency priorities. An example is an education conference for 180 environmental physicians and 54 Department of Veterans Benefits adjudication officers on current VA policy and scientific findings relative to the issues of Agent Orange.

The first phase of the comprehensive rehabilitation education plan for training case managers was launched

with an orientation package consisting of a videotape and manual for all VA health care facilities and regional offices. The objective is to enhance the quality of rehabilitation services by coordinating the program from health care delivery to eventual employment.

Continued emphasis was placed on education programs designed to strengthen the skills of health professionals caring for the aging veteran. The Fifth Annual National Project on Aging Conference was held in Salt Lake City. The purpose of this conference was to assist in planning local and district continuing education activities.

Management Training—In 1980, over 2,500 DM&S entry and mid-level managerial staff attended programs designed to increase management competency, knowledge, and skills needed to deal with local management issues. These ranged from university health care training specifically developed for 200 VA employees to 70 local seminars for 2,100 VA health care facility staff. About 250 administrative career entry-level trainees received skills training in their career fields of accounting, building management, engineering, fiscal, management analysis, medical administration, personnel, and supply. Thirty-three service chiefs participated in preceptor training to enhance their teaching skills as these relate to guiding on-the-job training. In addition, an experimental program in Organizational Effectiveness has been implemented at two VA health care facilities (Ann Arbor, Michigan, and Grand Island, Nebraska) with special staffs trained at the Army Organizational Effectiveness Center and School, Ft. Ord, California.

Other Staff Development Activities—VA health care facilities are allocated Postgraduate and Inservice Training (PIT) program funds to provide continuing education and staff development opportunities for DM&S employees. Assistance is available to field facilities from Regional Medical Education Centers to plan and conduct continuing education activities. Activities include workshops, seminars, grand rounds, independent study, and intra- and extra-VA educational details.

Field education units supported by the Office of Academic Affairs conduct programs to assist facilities in meeting demonstrated training needs. Each of the field units has particular strengths and expertise which complement and supplement a medical center's continuing education program.

Regional Medical Education Centers (RMECs) are central to the DM&S continuing education program. Located at seven sites (Northport, New York; Birmingham, Alabama; Cleveland; Minneapolis; St. Louis; Salt Lake City; and Long Beach, California), each RMEC has a concentration of educational expertise available to the facilities. RMECs provide general educational planning services as well as specifically planned educational activities, and operate at three levels:

- locally, in collaboration with individual facilities;
- regionally, to address identified regional needs;
- nationally, to address systemwide needs with VA Central Office and other RMECs.

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During 1980, a total of 359 training activities were offered by the RMECs involving 11,237 DM&S employees. A wide range of topics were covered, including general medicine and surgery issues, management and administration, geriatrics, rehabilitation, pharmacy, patient education, psychiatry, and quality assurance. RMECs have also devoted considerable effort this year to assessment centers, community relations seminars, and Operation Outreach.

A Continuing Education Center, located at the VA medical center in Washington, D.C., was established in 1980 to assist in developing and coordinating continuing education programs of national scope and as a direct provider for Central Office staff.

The Dental Education Center (DEC) at Washington, D.C. provided specialized continuing education activities for dental employees. The DEC offered traditional short courses and wet labs, and produced single-concept films in such areas as geriatric dentistry, hospital periodontics, and dental assistant utilization. In 1980, the DEC conducted 19 programs involving 122 VA employees. In 1981, a DEC in Los Angeles (Wadsworth) will begin programming.

The Engineering Training Center (ETC) at the Little Rock, Arkansas, VA medical center planned and conducted educational activities for DM&S engineering personnel with emphasis on biomedical engineering. Topics included operating room equipment, physiological monitoring, clinical lab equipment, and hemodialysis. In 1980, the ETC offered 22 activities involving 168 VA employees. In addition, the ETC has developed and administers a wide variety of correspondence courses which were made available to over 200 Engineering Service personnel. A new program was initiated to upgrade skills of technical equipment repairers to work on electronic systems not covered by biomedical engineering. One individual from a VA health care facility is trained at the ETC in teaching other technicians. The trainer then trains other individuals at the facility, using materials provided by the ETC.

The Rehabilitation Engineering Education Program (REEP) provided continuing education opportunities for prosthetics and orthotics personnel. In 1980, REEP staff conducted short courses, coordinated apprentice and driver training programs, evaluated prosthetic devices, and worked with several universities to provide additional continuing education opportunities for VA staff. Last year REEP offered 30 activities for 500 VA employees. In addition, 118 employees attended the university short course and 59 participated in the driver training program.

The Physician- and Dentist-In-Residence Program provides remote VA health care facilities with access to distinguished physicians in academia and at other VA health care facilities for the purpose of continuing education. In 1980, 77 visits were made to 42 medical centers.

Cooperative Health Manpower Education Programs (CHEP) provided educational programs in remote areas

served by VA health care facilities. Currently, the VA supports six programs at Togus, Maine; Saginaw, Michigan; Erie, Pennsylvania; Tuskegee, Alabama; Lincoln, Nebraska; and Boise, Idaho. Working through consortia with education and health care institutions in their geographical areas, CHEPs participated in the training of between 5,000 and 6,000 health professionals in 1980. Topics included intensive care, coronary care, gerontology, dental care and dental education, alcoholism, and leadership development.

The Patient Health Education Program was expanded in 1980 to include a coordinator at each RMEC. Also, five new Patient Health Education Coordinator positions were allocated on the basis of competitive proposals to Little Rock, Arkansas; Buffalo, New York; Tuskegee, Alabama; Boise, Idaho; and Portland/Vancouver, Oregon. Coordinators assist VA health care facilities in identifying patient health education needs, planning patient education programs, evaluating these programs, and coordinating the efforts of members of various medical center services who are involved in the direct provision of patient health education.

DM&S Central Office directed activities included rehabilitation, procurement, asbestos monitoring, geriatrics/gerontology, International Classification of Diseases, critical care nursing, completion of the Medical Administration Service National Training Project, substance abuse, management, ambulatory care, and hypertension. In FY 1980, 138 activities were offered for VA employees.

Medical Media

Two new Medical Media Production Services were activated in 1980, bringing the current total of VA health care facilities with this specialized activity to 105. Demand for all types of audiovisual aids continued to increase.

Medical Media Production Services are closely monitored to assure that the needs of clinical care, education, and research missions are met at facilities with established programs. The diversity of products presently offered and the need to manage the costs of these products led to a study of management and cost data collection. As a result of this study, a new reporting system has been designed for implementation in 1981. This systemwide program of uniform data collection will permit a more accurate reflection of audiovisual production activities and their associated costs.

During 1980, plans were developed for the redistribution and concentration of educational television production capabilities at the fewest sites necessary. This process contributes to the management of this capability as a Department-wide resource and will continue in the coming years. The year also saw additional programs to evaluate the roles and effectiveness of closed circuit television networks as interactive links with schools of health professions. These activities will change substantially the VA's use of television and will improve

programming in support of house staff training, nursing and associated health professions education, and continuing education programs.

Twenty-one new scientific exhibits and 28 existing exhibits were approved for display at major conferences. In addition, three motion pictures and 15 videotapes were approved for VA-wide distribution. Of note is the recent award of an Emmy to the Learning Resources Services at VAMC St. Louis for the production of 15 videotapes used in training over 17,000 medical administration employees.

Library

The scope of collections held by the VA Library Network (VALNET) covers the totality of the medical center world with its many disciplines, professions, and health care services.

The 175 VALNET libraries are encouraged to establish themselves as the major component of a Learning Resources Center, serving as the information and distribution resource supportive of continuing education, and patient education and training activities. New hospital library space criteria were implemented to reflect this orientation and resource persons in each district have been trained. Computerized bibliographic data bases are providing the foundation for significant advances in the network's ability to provide agency health care professionals with the most current information possible for use in caring for the veteran patient. In 1980, 90 VA hospital libraries had direct access to the National Library of Medicine's Medical Literature Analysis and Retrieval System (MEDLARS) data bases—seven more than in 1979. Continuing access to the DIALOG system, which provides over 100 separate data bases covering numerous aspects of the physical, life, and behavioral sciences, was furnished to the network through the libraries at facilities hosting Regional Medical Education Centers.

Increased efficiency and cost effectiveness in document delivery is being provided through continuing development of union catalogs listing the holdings and location of print and nonprint materials held by the network libraries. During 1980, work continued on a project to provide a VA Union List of Audiovisuals which will contain up to 10,000 separate program titles. In addition, projects to update the 1978 VA Union List of Periodicals and to begin production of a new union list of books held by VA libraries continued. The materials listed in these catalogs are available for sharing throughout the VA and to outside organizations. The catalogs will be produced on microfiche.

An Exchange of Medical Information grant was awarded for a test of the conversion of card-based catalogs to microfilm catalogs at 76 VA medical center libraries. The five-year pilot period will begin in 1981.

Educational Space

Approximately 25 projects to either provide new educational facilities or upgrade or equip facilities were

approved and funded in 1980. Facilities include conference/classrooms, libraries, medical media production areas, and other space which will enhance the ability to provide patient education and continuing education and training of VA staff as well as house staff and students of affiliated academic institutions. Included were renovations to an existing structure at the VAMC Long Beach, California, to create educational and administrative space for programs of the Southwest Regional Medical Education Center.

During the year, assistance was provided in the revision and final approval of space planning criteria for educational facilities. These criteria had not been revised since 1970 and were outdated. The new criteria will provide a more realistic and functional distribution of education space for new and renovated VA health care facilities.

Exchange of Medical Information

Public Law 89-785 charges the VA with the responsibility to strengthen those VA medical facilities located remote from teaching centers, as well as promote consultation and cooperation among clinicians and other members of the medical and health related professions either within or outside of the VA. Pursuit of these goals obliges the VA to seek out and adapt the latest advances in biomedical communications and educational modalities which will help maintain the highest standards of patient care.

The Exchange of Medical Information (EMI) program is one vehicle through which this is accomplished. EMI activities enhance educational, diagnostic, therapeutic, and administrative activities at medical centers and help reduce professional isolation at relatively remote VA facilities.

The pilot activities conducted under the EMI program are supported by providing grants to medical schools, hospitals, and research centers, and through direct funding to VA medical centers. As projects become fully developed and operational, continuing support is provided from other funding, freeing EMI funds for support of new projects. Hence, the most effective utilization of the limited funds is achieved.

During 1980, 11 EMI projects were supported covering a wide range of activities and regions. Examples include utilization of closed circuit television for visualization and documentation of endoscopic findings for educational and diagnostic purposes, application of adult learning principles to continuing education of health professionals, and clinical application of chromosome analysis to the diagnosis, prognosis and treatment of leukemia and cancer.

Assistance for Health Manpower Training Institutions

Public Law 92-541 authorizes a program of grants to academic institutions which, in affiliation with VA facilities, conduct programs of education and training in the health professions and occupations. Funds may also

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be allocated for modifying and equipping VA-owned facilities which are shared for educational purposes by the VA and the affiliated academic institution to help accommodate the educational programs in which they are participating. The appropriation authority of this law expired in 1979.

Since 1974, when the program was implemented, the VA has provided essential resources for the creation of five new state medical schools to be operated in affiliation with VA facilities and community hospitals, and for major expansion of 18 medical schools with established VA affiliations. These 23 grants involved 32 VA facilities, 19 of which are actively participating in teaching programs for the first time. The 32 VA health care facilities are also principally responsible for the appointment of as many as 550 highly qualified full- or part-time physicians, and many other health professionals who can combine the challenge and stimulation of teaching with their service to veteran patients. In addition, the VA has made 135 grants expanding and strengthening education and training for other professional and technical personnel in academic programs affiliated with VA facilities.

Funds were provided a number of VA health care facilities for projects associated with approved and funded grants. Projects include major building additions as well as alteration of existing space to provide classrooms, teaching laboratories, clinical training facilities, and offices. Educational equipment also has been provided.

All five of the new state medical schools are now accredited and have initiated their educational programs with classes of from 24 to 48 students. The 18 other medical schools with established VA affiliations have been assisted in increasing undergraduate enrollments through the grant-supported projects designed to strengthen faculty and curriculum, developing new areas of emphasis such as primary care outreach, establishing new clinical campuses, or converting from two- to four-year degree-granting programs. One of these grants came to completion during FY 1980, leaving 17 active grants.

The 135 grants that have been made to other health manpower institutions are for one to seven years, and have initiated or enhanced clinical affiliations with 97 VA facilities. Programs in nursing, pharmacy, optometry, social services, and the traditional associated health professions have been funded. Many institutions build programs on resources unique to VA health care facilities, to produce manpower especially prepared to meet needs common to the VA and to the community. Since the program for grants was implemented in 1974, the number of students enrolled in programs receiving grant assistance has increased greatly, and VA health care facilities as well as other health care institutions have been able to hire graduates of these training programs. Of the 135 grants initiated, 69 have come to completion, leaving 66 active grants.

The authority for these programs, which is provided in Title 38, U.S.C., Chapter 82, expired at the end of FY 1979. In recognition of its significant contribution toward

maintaining an adequate supply of health manpower for the VA and for the nation, Congress extended the authority through 1982, omitting the provision of assistance in the establishment of new medical schools and eliminating institutional enrollment increases as a basic requirement for eligibility.

VA Administrative Scholars Program

The VA Administrative Scholars Program was established in 1976 to respond to the increasing size, cost, and complexity of the U.S. health system, by developing leaders who could shape the system's future. Those selected for the 2-year period of executive development are mid-career health professionals whose past achievements and apparent potential suggest that they will have major leadership positions. The program is sponsored by the VA with contractual assistance from the George Washington University.

A Board of Governance, composed of nationally known experts in the U.S. health system, works with the program and the individual Scholars to provide policy direction advice and expertise. The Board makes recommendations on policy as well as on the selection of Scholars to the Chief Medical Director. Board members are encouraged to interact closely with the Scholars.

Five Scholars were selected initially and began in September 1977, followed in the next two years by two more groups of five. By September 1980, eight Scholars had graduated and with the addition of three new Scholars, there are currently 10.

Scholars are expected to devote one-third of their time to issues related to the VA, that could result in meaningful contributions to the agency. Individual Scholar interests have ranged widely on issues varying from technology assessment to critical manpower considerations. Some graduates have accepted positions in the VA.

Resources and Facilities

Costs

The costs of VA's Department of Medicine and Surgery during FY 1980 were \$6,214,737, an increase of 13.0

Activity	Costs (In Thousands)	
	FY 1980	FY 1979
Total DM&S	\$6,214,737	\$5,500,736
Medical care	5,971,778	5,274,756
Miscellaneous operating expenses	48,320	46,877
Medical and prosthetic research	137,665	126,325
Other medical programs*	56,974	52,778

*Does not include Revolving or Trust Funds

percent over FY 1979. The accompanying table summarizes the distribution of these costs by major program.

Inflation and increased usage are the major factors in the growth of operating costs. Other contributing factors are the higher costs associated with efforts to improve the quality of care by procuring and maintaining innovative medical equipment and systems, and providing the trained work force to utilize these innovations effectively.

The VA strives to deliver the highest quality of care possible and at the same time contain costs by assuring delivery of services through the most appropriate type of care and the most cost efficient mode. The success of these efforts is evident in the increase in the number of inpatients treated with fewer days of care per patient (with a resultant decrease in the patient census) and in the growth of the ambulatory mode of treatment. The accompanying tables demonstrate these points.

Workload

Fiscal Year	Inpatient				Outpatient	
	Average Daily Patient Census		Patients Treated		Staff Visits	
	Number	Index (1970=100)	Number	Index (1970=100)	Number (in Thous.)	Index (1970=100)
1971	84,002	98	818,579	104	6,798	111
1972	80,971	95	846,298	107	7,930	129
1973	82,479	96	985,862	125	9,165	149
1974	81,453	95	1,043,293	133	10,458	170
1975	79,973	93	1,113,873	141	12,596	205
1976	78,264	91	1,178,894	150	14,223	232
1977	75,285	88	1,209,763	154	14,675	239
1978	73,008	85	1,228,755	156	15,070	246
1979	69,821	82	1,230,252	156	15,053	245
1980	68,109	80	1,247,516	158	15,752	257

Cost Effectiveness of Increased Turnover

Fiscal Year	Per Diem Cost		Cost Per Inpatient Treated	
	Amount	Index (1970=100)	Amount	Index (1970=100)
1971	\$ 43.41	113	\$1,626	107
1972	52.61	137	1,851	121
1973	57.92	151	1,769	116
1974	65.08	169	1,855	122
1975	75.71	197	1,984	130
1976	87.86	229	2,135	140
1977	103.27	269	2,346	154
1978	119.10	310	2,583	169
1979	133.82	348	2,772	182
1980	154.00	401	3,077	202

The impacts of inflation and technological innovation are difficult to partition, but their combined effect on per diem costs for major medical care activities are shown in the next table.

A project to develop a program for measuring and comparing the costs of delivering health care services through the VA system with the costs of delivering similar services through other programs or systems was initiated during the year. The ultimate goal of the program is to be able to cost and compare any segment of the VA health care delivery system with any counterpart system segment. Among those areas under active consideration for initial implementation are nursing home care, ambulatory care, short-term inpatient hospital care, and specialized hospital care such as spinal cord injury care.

Type of Care	Unit Costs		Percent Increase
	FY 1980	FY 1979	
Medical care in VA medical centers			
Cost per pat. per day	\$ 154.00	\$ 133.82	15.1
Total costs (000)	3,838,951	3,410,449	12.6
Personal services	2,755,769	2,498,924	10.3
Other	1,083,182	911,526	18.8
Visits to VA staff			
Cost per visit	\$ 61.60	\$ 56.21	9.6
Total costs (000)	970,331	846,116	14.7
Personal services	599,725	520,180	15.3
Other	370,606	325,936	13.7
Domiciliary care in VA facilities			
Cost per pat. per day	\$ 29.39	\$ 25.64	14.6
Total costs (000)	84,923	79,064	7.4
Personal services	53,697	51,561	4.1
Other	31,226	27,504	13.5
Nursing home care in VA facilities			
Cost per pat. per day	\$ 75.39	\$ 65.65	14.9
Total costs (000)	218,906	185,965	17.7
Personal services	161,794	139,096	16.3
Other	57,112	46,870	15.2

The VA has recently completed the developmental and operational testing of a new system of patient, resource, and financial management known as the Multi-Level Care (MLC) System. Under the MLC System (1) patients' medical resource needs are identified and patients are placed in the most appropriate setting (level of care) for those needs; (2) medical care costs associated with levels of care are identified; and (3) clinical and administrative managers are provided with information generated by these two processes, identifying the expenditure of the appropriate resources, based on patients' needs.

In accordance with these operational objectives, the process of installing, refining and evaluating MLC System elements in the test medical centers over the past two and a half years has yielded a system comprising five components: patient classification, data support, patient and resource tracking, financial management, and educational training.

Employment

VA Employees—The net full-time equivalent employment (FTEE) in VA's Department of Medicine and Surgery (DM&S) increased from 190,468 in FY 1979 to 194,333 in FY 1980. The largest increase occurred in VA hospital and outpatient activities, where FTEE increased from FY 1979 by 1,436 and 2,044 respectively.

Total Health Care: Net Full-Time Equivalent Employment

Appropriation/Fund	FY 1980	FY 1979
Total	194,333	190,468
Medical care	185,698	181,742
Inpatient care	155,131	153,281
Hospitals	143,651	142,215
Nursing homes	8,666	8,150
Domiciliaries	2,814	2,916
Outpatient care	29,026	26,982
All other	1,541	1,478
Medical administration and miscellaneous operating expenses	831	781
Research	4,360	4,416
Medical	4,164	4,218
Rehabilitative	91	93
Health Services	105	105
Canteen Service	3,442	3,529

The trend in staffing ratios for major health care activities in VA facilities is shown in the table below.

Fiscal Year	Hospital Care (FTEE/Census)	Outpatient Care (FTEE/1000 Visits)	Nursing Home Care (FTEE/Census)	Domiciliary Care (FTEE/Census)
1971	1.32	1.93	0.86	0.26
1972	1.46	1.92	0.89	0.28
1973	1.51	1.83	0.90	0.30
1974	1.57	1.73	0.92	0.30
1975	1.65	1.61	0.97	0.30
1976	1.75	1.56	1.00	0.32
1977	1.85	1.63	1.02	0.33
1978	1.99	1.75	1.08	0.35
1979	2.04	1.79	1.05	0.35
1980	2.11	1.84	1.09	0.36

The Civil Service Reform Act and the Veterans Administration Health Care Amendments of 1980 provided substantial changes in management of the executive workforce. The Department has in place an effective performance planning and evaluation system for mid- and senior-level managers. Assessment centers have been introduced and are proving to be an effective tool for top management selection. An executive development program has been planned and is being implemented. These initiatives are aimed at providing sustained, high quality leadership in DM&S.

In an effort to eliminate manpower shortages in critical health care positions, the Department of Medicine and Surgery has contracted with a private corporation to develop a recruitment and referral system for physicians, nurses, and allied health care positions. This system will include automated physician referral, marketing analysis, and an advertising campaign. This effort, along with passage of the Physicians' Special Pay Act, will help staffing deficiencies in these important occupations.

A project was initiated to adapt and test existing staffing methodologies to provide guidelines usable at any level of management for planning, budgeting, and allocating health-related manpower.

The variety of health skills prevents standards development for every job. Therefore, work measurement standards and methodologies will be adapted and tested for only 70 to 85 percent of all DM&S personnel engaged in medical center activities. These standards, however, are the prime building blocks for a DM&S productivity measurement system and an essential element of staffing methodologies.

The development of a Health Manpower Resource Management System (HMRM) involves three phases: system design and development, system test, and implementation.

The first phase involves selection and evaluation of available staffing methodologies for possible application within the VA and the design of the system. Where existing staffing methodologies are not available or are inadequate for the purpose, new methodologies will be developed. During the test phase, methodologies selected for VA use will be adapted and tested at selected VA medical centers to objectively determine staffing requirements. The implementation phase will involve the application, installation, and evaluation of staffing methodologies at additional VA facilities. Based on this experience, a staffing model will be validated and used to predict staffing requirements systemwide. Staffing standards for most VA Services will be published and data from the HMRM System will be used in the preparation of a systemwide productivity management report.

VA Volunteers—In 1980, the Federal government's oldest volunteer program placed emphasis on becoming more visible, more inviting, and more widely involved in its community. This response to the increasing competition for volunteers among agencies and institutions was based firmly on a Voluntary Service program which for over 30 years has been a leader and innovator in its field.

Among the most visible volunteer highlights of VA's fiftieth year:

- The recognition by the President of 12 VA volunteers, each of whom had served over half a century. Their combined service totaled nearly 700 years.
- The involvement at VA medical facilities of nearly 79,000 men, women, and teenagers who gave over 10 million hours of volunteer time.
- The most successful February 14 "National Salute to Hospitalized Veterans" ever conducted. This year the Salute, with the First Lady as its Honorary Chairman, involved hundreds of celebrities, athletes, airline crews, entertainers, local and state government officials, military and community groups in day-long visitations to patients. Every VA medical facility participated.

- The first presentations of the new Administrator's Volunteer Service Award for exceptional service. Forty volunteers qualified for this special recognition.
- Field-testing of volunteer uniforms designed to give greater visibility and recognition to volunteers.
- Continued successful recruitment of youth volunteers through high school career exploration programs.
- The addition of the Polish Legion of American Veterans and the Women's Army Corps Veterans Association to the Voluntary Service National Advisory Committee as associate members.

Important training activities in FY 1980 included representation of Voluntary Service staff at 17 national or regional volunteer conferences of participating organizations, extensive assistance to two major veterans' organizations in design of volunteer training programs, and the contribution made by the Director of Voluntary Service, through his membership on a national committee of educators, to the development of a model university-level curriculum for administrators of volunteer programs.

A new and minimally structured volunteer program was begun in the Vietnam Veterans Outreach Centers. Numbers of volunteers in each center were kept small, volunteer selection and training requirements were very flexible, recordkeeping was minimal where used, and the degree of involvement in the established Voluntary Service program was made optional. In this program, as in others, the focus remained on giving the best service to the veteran.

Community Coordination and Sharing

Coordination of VA Planning—As required by law, VA planning and development of health resources for the care of eligible veterans is coordinated with community planning efforts. The Regional Medical Program and Comprehensive Health Planning were early parts of this effort, enacted into law by the 89th Congress. With the expiration of these authorities and that of the Hill-Burton Program in 1974, the Congress enacted Public Law 93-641 to replace and expand these programs. Congress recognized the important national role that the VA plays in the delivery of health services. Provisions were made in Public Law 93-641, the National Health Planning and Resource Development Act, for involving the VA in community and national health planning efforts. The VA participates in the Federal administrative review process which requires that the VA notify appropriate state and local agencies about plans for construction and major investments in equipment. These agencies review and comment upon the appropriateness of these resource development plans in their communities. This mechanism enables the VA to include the interests of the non-Federal community in its planning process.

Sharing of Specialized Medical Resources—The basic authority for the VA to share specialized medical

resources was granted in 1966 to permit VA medical centers with underutilized, specialized, scarce, and costly resources to share these with medical centers, community hospitals, Federal and state hospitals, clinics and blood and organ banks, and thereby, eliminate the need for these institutions to develop duplicate resources. Conversely, the law permitted the VA to utilize similar types of community resources for the care of veterans. It is a basic requirement, however, that the sharing of these resources cause no reduction in service to the veteran and that provision be made for reciprocal reimbursement.

The VA and the health care community at large have reaped substantial benefit from sharing agreements, most of which have been renewed annually with new items and services added each year. During FY 1980, 102 VA medical centers entered into 316 sharing agreements with community health care facilities with the annual cost of services amounting to over \$26 million. Also, during the year, DM&S representatives on the Federal Health Resources Sharing Committee developed agency positions on proposed legislation that would encourage Federal agencies to develop administrative solutions to sharing obstacles and to address certain incentive provisions proposed.

Facilities

Facility Planning—The VA's "Five-Year Medical Facility Construction Plan," which will be updated on an annual basis, supports the agency's construction goals and its implementation will enhance the delivery of quality health care. The FY 1980 submission represents all major construction in the planning period (FY 1981-85), and includes 247 projects with a combined estimated construction cost in excess of \$4 billion. In addition, this plan includes a list of the 10 medical centers most in need of construction, replacement or major modernization, along with accompanying justification. The agency plan is a product of individual medical center plans.

The goals of the facility planning process are to maximize the benefit of the construction activity, to have an up-to-date inventory of medical center deficiencies and facility improvement needs, and to have a fiscal year plan with projected accomplishments.

An approach to ascertaining the bed sizing of VA replacement hospitals was developed jointly by the VA and the General Accounting Office. The bed sizing model in its modified form now more accurately accounts for the VA hospital and user population characteristics. Another major advance was made in developing the mechanism that will make DM&S and other VA data readily accessible to all components of DM&S for use in the analysis of issues in the medical care system. This was accomplished by placing VA data files in a time-share environment at the National Institutes of Health and employing software for data file manipulation that is readily learned by interested users. An extensive study of about 10,000 applicants for medical care was undertaken which demonstrated that with rare exceptions, those who apply for medical care receive what is necessary to meet their

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needs. The service also was involved in analytical efforts related to the Veterans Administration Health Care Amendments of 1980 in the area of physician and dentist special pay.

Another model, the Space and Functional Deficiency Identification system (SFDI) provides details regarding facility deficiencies, characteristics, and planned construction projects—including systemwide rankings to help target the VA's facility construction planning and budgeting processes. The SFDI system also assists in determining which of the deficient VA medical centers should be considered for possible replacement or comprehensive modernization by comparing the existing facilities' space allocations against VA space planning criteria.

Seismic Correction—Seismic correction projects for VA facilities in the highest seismicity areas in California have all been completed or are identified in the five-year plan. Seismic correction projects in other geographic areas will be programmed through 1989 to permit structural corrections to be coordinated with other modernization activities. Recent geologic evidence anticipates the probability of a major earthquake in California within the next decade. The VA has begun programs at facilities there to anchor major mechanical and electrical equipment to prevent their disruption during an earthquake and to install an emergency radio network to facilitate direct communication between VA facilities in California and Reno, Nevada, and any other VA facility in the United States. Other undertakings in this area include efforts to provide for emergency utilities; provide heliports for emergency use; install special earthquake provisions for equipment, furniture, and supplies; and to conduct semi-annual earthquake drills at each facility. These activities will assure that VA medical centers continue to function as a community resource in a post-earthquake period.

Engineering—The mission of Engineering Service at each health care facility is to provide the necessary support in areas of minor construction, maintenance, repair, and plant operations. Toward these ends, \$246 million was expended on recurring maintenance and repair; \$115 million on nonrecurring maintenance and repair; \$314 million on plant operations, and \$60 million on capital improvements. This total of \$735 million represents almost 13 percent of health care expenditures for FY 1980. The table provides a breakdown of nonrecurring maintenance and repair projects by primary category.

Top priority for funding was given to projects for correction of deficiencies identified by the Joint Commission on Accreditation of Hospitals (JCAH) and fire and safety surveys. Energy conservation projects were also given high priority.

Occupational Safety and Health—Several significant developments occurred in the Occupational Safety and

Category	Number of Projects	Cost of Projects (Millions)
Electrical	95	\$ 9.5
Fire and safety	172	14.0
JCAH deficiencies	163	13.0
Heating, ventilation and air conditioning	110	8.0
Boiler plants	50	13.0
Elevators	28	6.5
Exterior maintenance	165	17.0
Exterior utilities	15	1.0
Interior building maintenance	12	0.5
Interior utilities	23	1.5
Quarters	6	0.5
Architectural barriers	47	3.0
Energy conservation	121	12.5
Renovations	169	12.0
Education	12	1.5
Research	25	1.5
Total	1,213	\$115.0

Health Program during 1980. Most significant is the agency's response to Executive Order 12196, "Occupational Safety and Health Programs for Federal Employees." The VA is currently revising its procedures to allow increased employee involvement in the program. Patient safety is being improved through extensive use of the Fire Safety Evaluation System, which permits the agency to attain a level of safety equivalent to that required by the Life Safety Code, but without complying with the specific provisions of that code.

An effort is also being made to provide greater patient fire safety and comfort by replacement of linens and wearing apparel with newly marketed products which are inherently flame retardant as well as moisture absorbent. An evaluation of the Safety and Fire Protection Engineering Program was also completed with program changes now being implemented.

Building Management—The Building Management Service of DM&S is responsible for Environmental Care, Textile Care and Interior Design. In the latter area, a program was implemented during the past year that will have a major impact on VA operations in years to come.

The Interior Design Division was charged with the responsibility for an efficient signage/directional graphics system for all VA facilities. In order to meet this challenge, the Interior Design Division composed a Signage System Standards Manual which provides guidance in the procurement, preparation, and display of signs at VA facilities.

Immediately following publication of the signage manual, a contract was negotiated for manufacture and shipment of 50 main entrance signs bearing the VA logo to be installed at selected VA medical centers. The first medical

centers to receive the signs are in Illinois, at North Chicago and Hines.

Energy Conservation—The VA, through its intensive Energy Conservation Program is determined to exceed its long-range goals of cost-effective energy conservation without reduction in high quality standards for health care and services. Due to continued success, the VA is now recognized as a leader in this field.

In 1975 and 1976 the VA continued its planned expansion and modernization program without an increase in energy consumption. In 1977, the agency developed a long-range plan to continue with modernization of facilities and exceed the conservation goals set for the Federal government. For the past three years, actual measured results indicate that we have met or exceeded each interim goal.

The basic plan provides for research to stay current with modern technology, a study of each facility's specific requirements, education of facility personnel, a specific plan for each facility, plans for funding, and a central review to insure that each action, or retrofit, will save more than its cost.

With low-cost operational changes and carefully planned retrofit expenditures which have steadily increased from \$5 million to \$12 million per year, the VA is currently saving 8.9 billion BTUs and \$32 million per year.

Quality of Care

Health Services Review

During FY 1980, vigorous activity has continued throughout the Evaluation and Analysis Office dealing with the Health Services Review Organization (HSRO). This Office is responsible for DM&S coordination with internal and external evaluation agencies, such as the Joint Commission on Accreditation of Hospitals, the VA Inspector General, General Accounting Office, and veterans' organizations. It has served to enhance prompt and efficient communication of evaluation findings and to improve the overall cost effectiveness of VA health care evaluation.

The HSRO, consisting of the Systematic Internal Review (SIR) activity and the Systematic External Review Program (SERP), continues to show improved performance and effectiveness.

There were 53 SERP surveys completed in FY 1980. The number of experienced, highly skilled physicians and administrative participants conducting the surveys continues to grow, and their services and expertise are utilized to the fullest extent possible. In addition, SERP

participants are utilized as advisors regarding external review program developments as the need arises.

These participants in conjunction with other field and CO program officials have been instrumental in the development of Standards, Criteria, Evaluative Algorithms and Measuring Instruments (SCEM). The SCEM are being developed to provide uniform, valid, objective criteria for the external surveyors to use in measuring and judging the quality of health care (direct or indirect) rendered by a particular Service. In addition, they are used by VA medical centers in development of Systematic Internal Review activities. Eleven of these SCEM's are now in the field and are being utilized operationally. An additional eight are in a draft stage and are planned to be published by the spring of 1981.

This Office has worked closely with the Office of Academic Affairs in presenting five major conferences for staff from each VA medical center on the development of a quality assurance program. This effort represents the culmination of a series of pilot programs and task force meetings conducted over the past five years to develop major components of the medical quality assurance program, including a problem-focused health care evaluation methodology, utilization review policy draft, Systematic Internal Review policy components, and concepts for program integration.

The SERP data available from all health care facilities has considerable potential for program planning and for monitoring activities on the part of the Medical Districts and Regional Directors' offices. To utilize the information as a component in the Departmental Health Care Management Information System, a project titled Quality Assurance Information System (QAIS) is being developed. QAIS will utilize information from both SIR and SERP to improve the validity, reliability, and usefulness of information concerning evaluation of health care.

Patient Satisfaction Survey

The Patient Satisfaction Survey (PSS) has now been established as an annual survey. It continues to be structured to provide not only systemwide information, but also to provide individual facilities with extensive feedback about their performance, including comparisons of similar patients in similar facilities. Participating this fiscal year were more than 22,000 hospitalized patients and 52,000 clinic patients selected to be a valid representation of the veteran population for whom the VA provides health care. This information can serve as a management tool useful for local allocation of resources and for taking corrective actions where reasonable consumer expectations are not being met.

For the VA system as a whole, satisfaction with services is very high. For most aspects of satisfaction the percentages of favorable responses are in the 80s, and for some in the 90s. Satisfaction with waiting for care and with the amount of time physicians and nurses spend listening to and talking with patients were at lower levels,

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and these problems are shared in common with other health care providers.

When compared with surveys of satisfaction with health care in the general population, conducted by others, it is found that VA patients are generally more satisfied with their nursing care and food, and somewhat more satisfied with the care provided by physicians, than are other-than-VA patients. VA outpatients are somewhat more satisfied with the time they have to spend waiting for treatment and the courtesy of employees than are those in the other-than-VA sector. We have not found any areas where VA patients are significantly less satisfied than are those who receive their care from other sources.

Medical-Legal Affairs

During FY 1980, there was a significant increase (to a high of 643) in new claims filed seeking compensation for patient injuries allegedly caused by medical negligence. This now represents 3.49 claims for every 100 physicians in DM&S and 5.19 new claims for every 10,000 inpatients treated. Although this incidence continues to compare favorably with similar figures reported from the non-Federal sector, this 21 percent increase over FY 1979 is a cause of concern.

Effort continues to be expended in the education of physicians, nurses, and allied health care personnel with regard to the constantly expanding interface between law and medicine. In addition, three medical orientation programs for VA attorneys were held in Birmingham, Alabama; Salt Lake City; and Washington, D.C. A similar program is planned for 1981 in Long Beach, California.

A "mini-text" on legal medicine has been published and distributed for use with the videotapes entitled, "Current Problems in Medicine and the Law." This material has been sufficiently well received to justify planning additional parts for the future.

Characteristics of VA Patients

The demographic and medical characteristics of VA patients are derived from the Patient Treatment File (discharges occurring during FY 1980) and the Annual Patient Census (taken on September 24, 1980). The data on discharges during FY 1980 excludes approximately 232,161 one-day hemodialysis discharges. Census figures for hospital and domiciliary patients in VA facilities are based on a 20 percent sample; figures for nursing home patients in VA and community facilities are based on a 100 percent survey.

Age

As the veteran's age increases so does the utilization of VA medical centers. This phenomenon is demonstrated in the accompanying table which shows the number of hospital, domiciliary, and nursing home patients discharged during FY 1980 from VA facilities and from community nursing homes.

Age	Veteran Population on 3/31/80 (Thousands)	Hospital Patients Discharged From VA Facilities		Domiciliary Patients Discharged From VA Facilities		Nursing Home Patients Discharged From VA and Community Facilities			
		Number	Rate Per 1,000 Veterans	Number	Rate Per 1,000 Veterans	VA Nursing Home Care Units	Community Nursing Homes	Total	Rate Per 1,000 Veterans
Total	30,118	933,636	31.0	6,657	0.2	4,146	16,971	21,117	0.7
Under 25	1,082	24,780	22.9	33	1	10	36	46	1
25-44	11,052	186,763	16.9	733	0.1	126	475	601	0.1
45-54	6,984	179,251	25.7	1,546	0.2	399	1,416	1,815	0.3
55-64	7,989	320,992	40.2	2,743	0.3	1,186	4,460	5,646	0.7
65-74	2,245	142,141	63.3	1,108	0.5	974	4,366	5,340	2.4
75-84	501	48,066	95.9	345	0.7	759	3,359	4,118	8.2
85 and over	265	31,136	117.5	149	0.6	692	2,859	3,551	13.4
Unavailable ²		507		—		—			
Under 65	27,107	711,786	26.3	5,055	0.2	1,721	6,387	8,108	0.3
65 and over	3,011	221,850	73.7	1,602	0.5	2,425	10,584	13,009	4.3

¹Less than 0.1

²Records for which required data is not available.

Census Date	Age Distribution of Hospital Patients Remaining in VA Medical Centers					
	Total ¹	Under 35	35-44	45-54	55-64	65 & Over
September 24, 1980	69,290	8,841	5,339	13,611	23,319	18,183
September 26, 1979	69,995	8,871	5,465	14,438	22,754	18,466
October 4, 1978	72,037	8,680	5,887	16,404	22,352	18,714
September 28, 1977	75,057	8,813	6,542	17,970	22,766	18,966
September 29, 1976	76,890	9,421	7,274	19,413	21,804	18,986
October 1, 1975	78,830	9,053	8,446	21,576	20,444	19,311
October 2, 1974	80,715	9,435	8,992	23,689	19,383	19,216
October 3, 1973	82,485	9,679	9,978	24,738	18,377	19,710
October 18, 1972	83,425	9,618	11,006	25,954	17,500	19,345
October 20, 1971	81,150	8,813	10,502	24,802	16,834	20,196
October 14, 1970	85,550	9,018	12,728	27,533	16,038	20,247

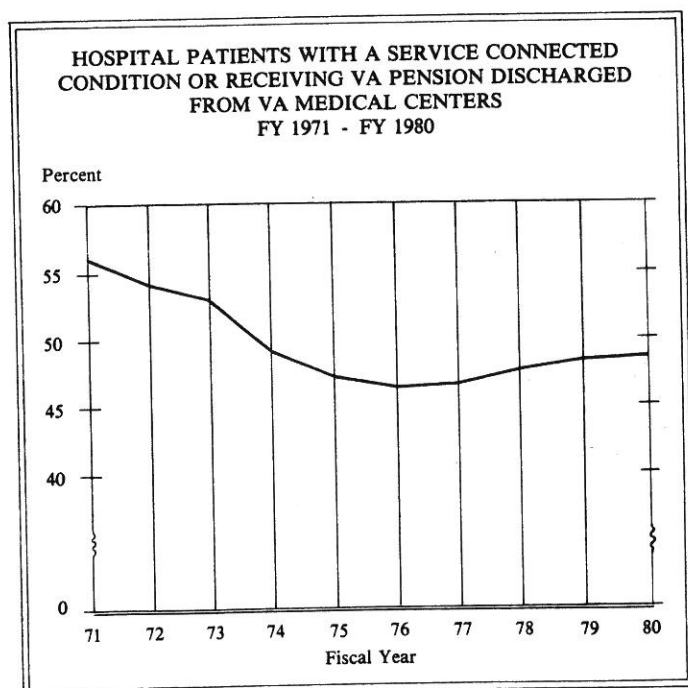
¹Totals may not equal sum of parts due to rounding

A 10-year trend in the age distribution of hospital patients remaining in VA medical centers near the end of the fiscal year is shown in the table above.

Service Connected and VA Pensioners

Of the hospital discharges from VA medical centers 48.7 percent were veterans who had a service connected disability or who were in receipt of a VA pension. In FY 1980, the VA health care system continued a leveling off in the proportion of hospital discharges involving veterans who have a service connected condition or who receive a VA pension. A trend for the last 10 years is shown in the chart.

Of the 69,290 hospital patients in VA medical centers on September 24, 1980, 54.0 percent had a service connected disability or were receiving a VA pension. The fact that



this is five percent higher than their proportion among discharges illustrates the longer term nature of the service connected patient. The table below indicates the percentage distributions of hospital patients in VA medical centers on the census days of 1976 through 1980, according to their compensation and pension status.

Compensation and Pension Status	Percent Distribution of Hospital Patients in VA Medical Centers on Census Day				
	1980	1979	1978	1977	1976
Receiving care for a service connected disability	16.2	17.5	17.0	16.9	16.8
Receiving care for a non-service connected disability and has a service connected disability which does not require medical care	13.2	12.1	11.6	12.4	10.4
Total service connected	29.4	29.6	28.6	29.3	27.2
Receiving care for a non-service connected disability and on VA pension rolls	24.6	26.6	26.5	26.5	27.0
Receiving care for a non-service connected disability and not on VA compensation or pension rolls	45.5	43.4	44.4	43.8	45.3
Non-veterans	0.4	0.4	0.5	0.4	0.5

Diagnoses

Diagnoses are classified by the VA as either principal or associated. The principal diagnosis is the one that the discharging physician considers to be responsible for the major part of the patient's length of stay. Associated diagnoses are all others for which the patient has been treated up to the time of discharge. The VA statistical system permits the reporting of a maximum of eight diagnoses per patient discharge. Thus, a count of total diagnoses includes the principal diagnosis and up to seven associated diagnoses. As shown on the next table, five major categories accounted for the majority of principal diagnoses among hospital patients discharged from VA medical centers during the past five fiscal years. When both principal and associated diagnoses are considered, and attention is focused on more specific diagnostic categories, the two most common are heart disease and alcoholism, accounting for 24 and 17 percent of the total diagnoses, respectively.

Major categories of principal diagnosis ICDA ¹	Percent by Diagnosis of Hospital Patients Discharged from VA Medical Centers				
	FY 1980	FY 1979	FY 1978	FY 1977	FY 1976
Mental disorder	22.7	22.9	22.7	22.8	24.0
Circulatory	15.5	15.3	15.3	15.2	15.1
Neoplasms	10.3	10.1	10.0	9.7	9.0
Digestive	9.1	9.2	9.3	9.4	9.5
Respiratory	6.4	6.3	6.5	6.2	6.6

¹International Classification of Diseases, Adapted.

The number of hospital patients in VA medical centers on the September 24, 1980 census day, by age and major diagnostic category, are shown in the following table. As in previous years, general medical and surgical patients tend to be older (32.2 percent over 65 years of age), and patients with psychoses tend to be younger (18.8 percent over 65).

Type of Patient	Age Distribution of Hospital Patients in VA Medical Centers on September 24, 1980				
	Total	Under 45	45-54	55-64	65 & Over
All patients ¹	69,290	14,180	13,611	23,319	18,183
General medical & surgical	31,998	3,106	6,031	12,554	10,309
Psychoses	17,409	5,601	3,543	4,988	3,277
Psychiatric	12,088	4,124	2,553	2,964	2,445
Neurological	7,361	1,296	1,329	2,665	2,071
Tuberculosis	436	53	155	149	80

¹Figures may not equal sum of component parts due to machine rounding of sample data.

Duration of Stay

There has been a steady decline in the average length of stay of patients discharged from VA hospitals over the past several years; FY 1980 continued that trend with an average length of stay of 28.0 days, down from 29.5 days in FY 1979. Similarly, the median length of stay has decreased from 10.9 days in FY 1979 to 10.7 days in FY 1980. The most notable change was among psychotic patients, where the average length of stay dropped from 99.1 days to 92.2 days in the same time period. Among general medical and surgical patients, who accounted for 69.8 percent of all the FY 1980 discharges, the average length of stay, 18.7 days was only slightly less than the FY 1979 average of 19.0 days. The accompanying table shows the median length of stay of patients discharged, by type of patient during FY 1978, 1979, and 1980.

Type of Patient	Median Length of Stay of Hospital Patients Discharged From VA Medical Centers (In Days)		
	FY 1980	FY 1979	FY 1978
All patients	10.7	10.9	11.3
General medical & surgical	9.3	9.6	10.0
Psychoses	21.9	22.0	23.8
Other psychiatric	13.5	13.5	13.8
Neurological	13.3	13.7	14.2
Tuberculosis	18.8	20.1	21.1

The complex combination of long- and short-term and acute and chronically ill patients who received VA hospital care means that a single measure of duration of stay, such as average or median, may obscure as well as explain the process. The following observations about length of stay in VA hospital beds illustrate the point.

During FY 1980, 83.0 percent of the 933,636 hospital patients discharged from VA medical centers spent 30 days or less in a hospitalized status. Though this group comprised the majority of the discharges, they accounted for only 29.7 percent of the 26.1 million days of care received since admission by all the discharges. These short-term patients had an average length of hospital stay of less than 10 days. At the other extreme, 0.6 percent of discharges had stays of more than one year and had received 30.0 percent of all the days of care. Their average length of stay was 1,352 days.

The table below indicates that, of the hospital patients remaining in VA medical centers on the census days for the past five years, there has been a gradual increase in the number who have been hospitalized less than 90 days.

Type of Patient	Percent of Hospital Patients in VA Medical Centers With Less Than 90 Days of Attained Stay on Census Day				
	1980	1979	1978	1977	1976
All patients	70.2	70.1	69.3	66.9	65.0
Psychotic	39.4	40.2	39.4	36.4	32.6
General medical & surgical	90.4	90.0	89.5	87.5	87.7

Disposition Status

Of the hospital discharges from VA medical centers in FY 1980 for whom disposition data are available, 89 percent returned to the community. Although this overall percentage has changed little over the past five fiscal years, two of its components have changed considerably. The percentage of patients discharged for further care as VA outpatients has increased progressively from 61 percent in FY 1976 to 68 percent in FY 1980. Correspondingly, the percent discharged for no further care has decreased from 21.7 to 15.4 in the same period. As shown in the accompanying table, 7 percent of hospital patients were discharged from VA medical centers for further inpatient care (hospital, domiciliary, or nursing home care) in another VA facility or a community nursing home. Deaths accounted for 5 percent of discharges.

Manner of Disposition	Hospital Discharges from VA Medical Center During FY 1980	
	Number	Percent of Total
Total	924,917	100.0
To community	821,061	88.8
Further care as VA outpatients	629,083	68.0
No further care	142,300	15.4
Irregular, refuse care, neglect or obstruct treatment, AWOL, regulatory offense, etc.	49,678	5.4
To further VA inpatient care	61,420	6.6
Another VA medical center for hospital care	31,024	3.4
Another VA medical center or community nursing home for nursing home care	23,106	2.5
VA facility for domiciliary care	7,290	0.8
Deaths	42,436	4.6

¹The total number of discharges excludes 8,719 cases with missing data on manner of disposition. Data varies slightly from reports based on all discharges.

Compensation and Pension

Comparative Highlights

	FY 1980	FY 1979	Percent Change
Cost (billions)	\$11.3	\$10.5	+ 7.6
Disability cases			
on rolls	3,195,395	3,240,283	- 1.4
Service			
connected	2,273,589	2,266,243	+ 0.3
Non-service			
connected	921,602	973,813	- 5.4
Special acts and			
retired officers	204	227	- 10.1
Death cases			
on rolls	1,450,785	1,529,206	- 5.1
Service			
connected	357,971	360,688	- 0.7
Non-service			
connected	1,092,797	1,168,499	- 6.5
Special acts	17	19	- 10.5

Summary

Compensation and pension programs administered by the VA fall into five broad categories:

1. *Disability Compensation* - A veteran is entitled to compensation for disability incurred or aggravated while on active duty. The amount of compensation is based on the degree of disability.

2. *DIC and Death Compensation* - Dependents of a veteran who died of service connected causes on or after January 1, 1957 are entitled to dependency and indemnity compensation (DIC). Dependents of veterans who died before that date are entitled to death compensation, or may elect to receive DIC.

3. *Disability Pension* - Veterans who served in time of war are eligible for pension benefits for non-service connected disabilities. The veteran must either be permanently and totally disabled or age 65 or older, and meet specific income limitations. Spanish-American War veterans are entitled to a pension on the basis of their service.

4. *Death Pension* - The surviving spouse and children of a war veteran who died of non-service connected causes are eligible for death pension benefits, subject to specific income limitations.

5. *Burial Allowances* - These benefits include a burial allowance, a burial plot allowance, and a flag to drape the casket of a deceased veteran. All benefits require separation from the armed service under other than dishonorable conditions. A plot allowance is available in the case of veterans who die of non-service connected disabilities and are not buried in a national cemetery. An award of \$1,100 in lieu of basic burial and plot allowances is payable for veterans who die of a service connected disability.

During FY 1980 the cost of compensation and pension benefits continued to rise, reaching \$11.3 billion in FY 1980, an increase of \$718 million from last fiscal year. This increased cost is primarily attributable to new legislation which granted cost of living increases.

Public Law 96-128 increased the rates of disability and dependency and indemnity compensation for disabled veterans and their survivors by 9.9 percent. This law also resulted in the following changes:

- A 9.9 percent increase in allowances for dependents, and in benefits for housebound, and aid and attendance.
- An increase in the annual clothing allowance from \$218 to \$240.

Compensation

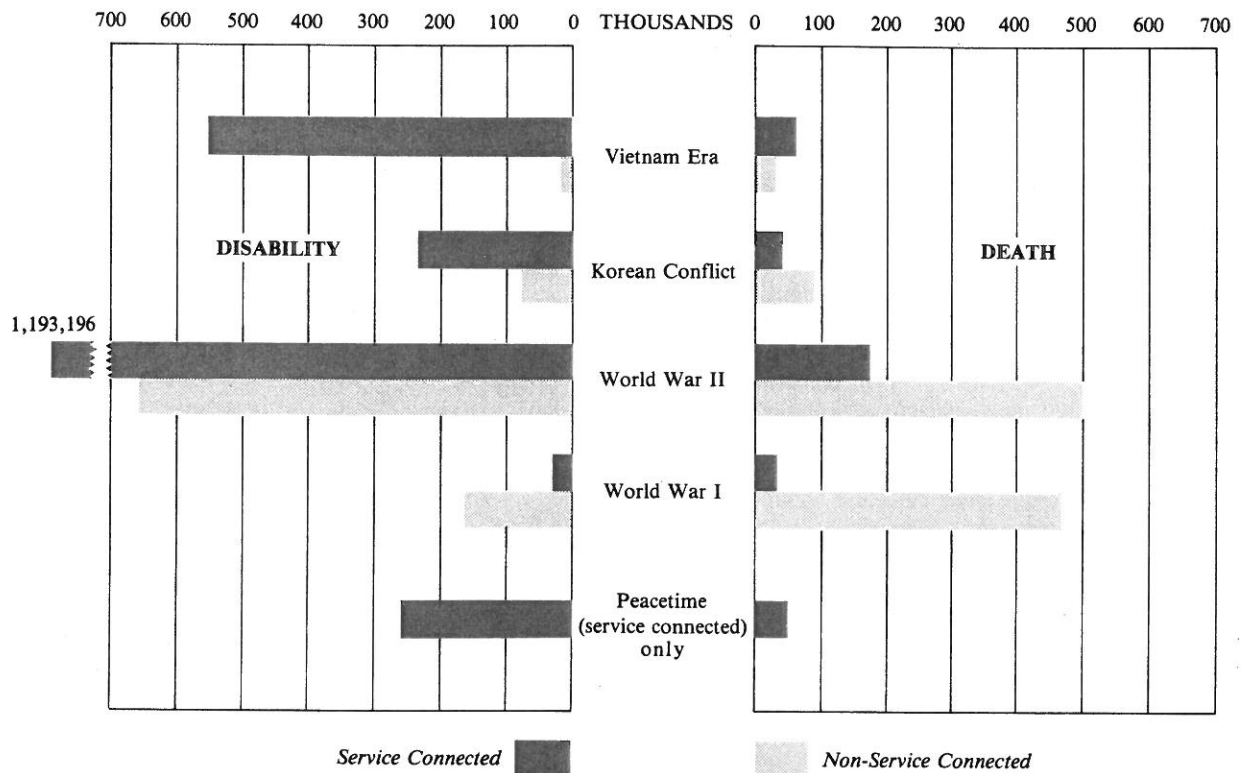
As shown in the accompanying chart, the number of veterans receiving compensation for service connected disabilities increased slightly during FY 1980, despite declines among World War I, World War II, and Korean con-

Period of Service	Disability Compensation Cases					
	FY 1980		FY 1979		Change	
	Cases	Percent of Total	Cases	Percent of Total	Number	Percent
World War I	29,720	1.3	34,217	1.5	- 4,497	- 13.1
World War II	1,193,196	52.5	1,217,522	53.7	- 24,326	- 2.0
Korean conflict	235,654	10.4	237,102	10.5	- 1,448	- 0.6
Vietnam era	553,326	24.3	537,208	23.7	+ 16,118	+ 3.0
Peacetime	261,685	11.5	240,186	10.6	+ 21,499	+ 8.9
Spanish-American	3	*	3	*	0	0
Mexican Border	5	*	5	*	0	0
Total	2,273,589	100.0	2,266,243	100.0	+ 7,346	+ 0.3

*Less than 0.1 percent



COMPENSATION AND PENSION CASES AS OF SEPTEMBER 1980



Period of Service	Service Connected Death Cases					
	FY 1980		FY 1979		Change	
	Cases	Percent of Total	Cases	Percent of Total	Number	Percent
World War I	30,128	8.4	31,284	8.7	-1,156	- 3.7
World War II	173,286	48.4	176,742	49.0	-3,456	- 2.0
Korean conflict	39,186	10.9	39,237	10.9	- 51	- 0.1
Vietnam era	65,284	18.2	64,076	17.7	+1,208	+ 1.9
Peacetime	49,943	13.9	49,188	13.6	+755	+ 1.5
Spanish-American	137	*	151	*	-14	- 9.3
Mexican Border	2	*	3	*	-1	- 33.3
Indian War	0	*	1	*	-1	-100.0
Civil War	5	*	6	*	-1	- 16.7
Total	357,971	100.0	360,688	100.0	-2,717	- 0.7

*Less than 0.1 percent

flict cases. The overall increase recorded in FY 1980 was 107 below the increase in FY 1979.

For the fourth straight year there has been a decline in the number of service connected death cases for which payments are made to dependents of deceased veterans. Like the previous year, the overall decline was less than 1 percent. Only Vietnam era and peacetime cases showed an increase from FY 1979.

Pension

Effective June 1, 1980, pension rates under the improved pension program were increased by 14.3 percent simultaneously with social security rates. The maximum annual rate of pension payable is shown in the accompanying table.

	Effective Date	
	June 1980	June 1979
Veteran		
Alone	\$ 4,460	\$ 3,902
One dependent	5,844	5,112
Alone, A&A allowance	7,136	6,243
One dependent, A&A allowance	8,519	7,453
Alone, housebound	5,453	4,770
One dependent, housebound	6,836	5,980
Surviving spouse		
Alone	\$ 2,989	\$ 2,615
One child	3,915	3,425
Alone, A&A allowance	4,782	4,183
One child, A&A allowance	5,707	4,993
Alone, housebound	3,654	3,196
One child, housebound	4,579	4,006

The decrease of about 5 percent in the disability pension rolls during FY 1980 is similar to that experienced during the previous year. Two periods of service showed increases during the year - the Korean conflict and the Vietnam era.

Period of Service	Disability Pension Cases					
	FY 1980		FY 1979		Change	
	Cases	Percent of Total	Cases	Percent of Total	Number	Percent
World War I	167,808	18.2	196,423	20.2	-28,615	-14.6
World War II	656,401	71.2	681,493	70.0	-25,092	-3.7
Korean conflict	81,018	8.8	80,266	8.2	+752	+0.9
Vietnam era	16,049	1.7	15,210	1.6	+839	+5.5
Spanish-American	135	*	206	*	-71	-34.5
Mexican Border	191	*	215	*	-24	-11.2
Total	921,602	100.0	973,813	100.0	-52,211	-5.4

*Less than 0.1 percent

The following table shows that for the second year in a row the number of death pension cases decreased in all eight periods of service. The overall decrease of 6.5 percent is a smaller decline than that recorded during the previous fiscal year (7.3 percent).

Period of Service	Death Pension Cases					
	FY 1980		FY 1979		Change	
	Cases	Percent of Total	Cases	Percent of Total	Number	Percent
World War I	464,327	42.5	493,171	42.2	-28,844	-5.8
World War II	497,073	45.5	531,716	45.5	-34,643	-6.5
Korean conflict	89,753	8.2	99,113	8.5	-9,360	-9.4
Vietnam era	27,861	2.6	28,891	2.5	-1,030	-3.6
Spanish-American	13,027	1.2	14,786	1.3	-1,759	-11.9
Mexican Border	527	*	560	*	-33	-5.9
Indian War	45	*	48	*	-3	-6.2
Civil War	184	*	214	*	-30	-14.0
Total	1,092,797	100.0	1,168,499	100.0	-75,702	-6.5

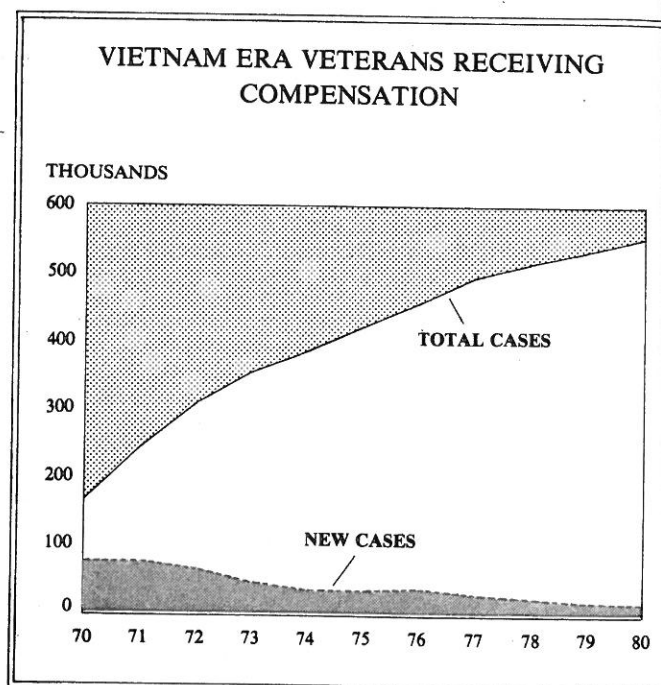
*Less than 0.1 percent

Period of Service

Vietnam Era

There were 16,118 more Vietnam veterans receiving compensation at the end of FY 1980 than at the end of the previous year. The accompanying chart shows the general trend in new Vietnam era compensation cases since 1970. The total number of Vietnam era veterans receiving compensation continues to increase and, with new cases exceeding losses, this trend is expected to continue.

A total of 16,049 Vietnam era veterans were receiving disability pension at the end of the fiscal year, an increase of 839 or 5.5 percent over a year ago. Since the average age of these veterans is 33 years, no appreciable increase in those applying for disability pension is expected in the near future. The number of service connected death cases increased by nearly 2 percent to 65,284. The non-service connected death pension cases numbered 27,861 at the end of the fiscal year, a decrease of 1,030 cases or almost 4 percent.



Korean Conflict

The number of Korean conflict veterans receiving compensation decreased to 235,654 during FY 1980, the seventh consecutive drop in that figure. The high mark on the rolls (240,765) was reached in June 1973, 18 years after that conflict ended. For comparison, the highest number of World War II veterans receiving compensation was reached in FY 1953, only 8 years after the end of that war.

In contrast to compensation, the number of Korean conflict veterans receiving pension continues to rise. At the end of the fiscal year there were 81,018 Korean conflict veterans on the pension rolls, nearly a 1 percent increase over FY 1979. As this group grows older the number on the pension rolls can be expected to increase.

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The number of service connected death cases remained virtually the same at the end of the fiscal year, and the number of death pension cases decreased 9 percent to 89,753.

World War II

Veterans of World War II still constitute the largest single group receiving compensation for service connected disabilities, although their numbers continued to decline in FY 1980. Non-service connected pension showed a decrease of nearly 4 percent to 656,401. Service connected death cases declined by 3,456 cases or about 2 percent in FY 1980. The non-service connected death pension caseload decreased 34,643 to 497,073 or 6.5 percent in FY 1980.

World War I

The number of World War I veterans receiving disability compensation declined during the past fiscal year, about 13 percent. World War I disability pension also decreased (nearly 15 percent in the past fiscal year). The advanced age of this group of veterans will accelerate these decreases in the next few years. Decreases were also recorded for service connected death cases (about 4 percent) and death pension cases (almost 6 percent).

Other Periods

In addition to the recipients of disability compensation and pension payments from the wars and armed conflicts cited above, there were three veterans of the Spanish-American War receiving disability compensation as of September 30, 1980, and 135 were receiving disability pension in FY 1980, a decline of nearly 34 percent. The service connected death and death pension caseloads were 137 and 13,027 respectively. There were 5 veterans of the Mexican Border service receiving disability compensation. Disability pensioners totaled 191 in FY 1980, down 24 from last fiscal year. There were two service connected death cases while the death pension cases decreased 6 percent to

527. Although there are no living veterans of the Indian Wars and the Civil War, 36 widows and nine helpless children are receiving death pension benefits based on service in those periods. There are two widows and three helpless children receiving service connected death benefits with Civil War entitlement and 64 widows and 121 helpless children receiving death pension. There are 261,685 peacetime veterans receiving compensation as of September 30, 1980, an increase of about 9 percent over the previous year. Beneficiaries of deceased peacetime veterans increased 755 to 49,943 in FY 1980.

Burial Allowance

Statutory burial allowances are designed to assist in providing a respectable burial for deceased veterans separated from the armed service under other than dishonorable conditions. The allowance is payable for a veteran who was separated from wartime service. It is also payable in the case of a peacetime veteran discharged or retired for a disability incurred in or aggravated by service in line of duty or a veteran who was in receipt of compensation for a service connected disability.

Generally the VA will pay a sum not exceeding \$300 (plus transportation charges when death occurs while the veteran is under VA care or entitled to disability compensation) to help cover burial and funeral expenses. An additional allowance of \$150 for a burial plot when a veteran is not buried in a national cemetery is also payable. An award of \$1,100 in lieu of these basic allowances is authorized for an eligible veteran who died of a service connected disability.

In FY 1980 basic burial allowance was paid for 324,033 claims in an amount in excess of \$101 million. Cemetery plot allowances amounting to over \$42.8 million were paid to 293,245 claimants; service connected burial benefits amounting to \$9.3 million were paid to 10,083 claimants. This year a total of 272,743 burial flags were issued, a decrease of 7.9 percent from FY 1979. The cost of each flag was \$17.95, making a total of \$4.9 million.

Education Benefits

Comparative Highlights

Item	FY 1980	FY 1979	Percent Change
Education benefit costs (millions)	\$2,350	\$2,751	- 14.6
Post-Korean trainees	1,106,889	1,278,538	- 13.4
Post-Vietnam trainees	1,947	456	+ 327.0
Sons and daughters	82,632	85,696	- 3.6
Spouses	12,952	17,260	- 25.0

Summary

Education benefits administered by DVB Education Service include:

- Educational assistance for veterans and service personnel, commonly termed the "GI Bill;"
- Dependents' educational assistance for eligible spouses and children of veterans who died of service connected causes, whose service connected disability is rated permanent and total, or who are missing in action or prisoners of war for more than 90 days; and
- Post-Vietnam era veterans' educational assistance for veterans and servicepersons entering active duty after December 31, 1976.

Other education benefits administered include payments to eligible veterans to aid in defraying expenses of tutoring, and an education loan program for veterans or other eligible persons enrolled in approved educational institutions at least half-time. The education loan program is also available to those pursuing flight training; these students are reimbursed at the 60 percent level. A work-study program permits eligible veterans to perform services for the VA in return for a monetary allowance.

Education and Training

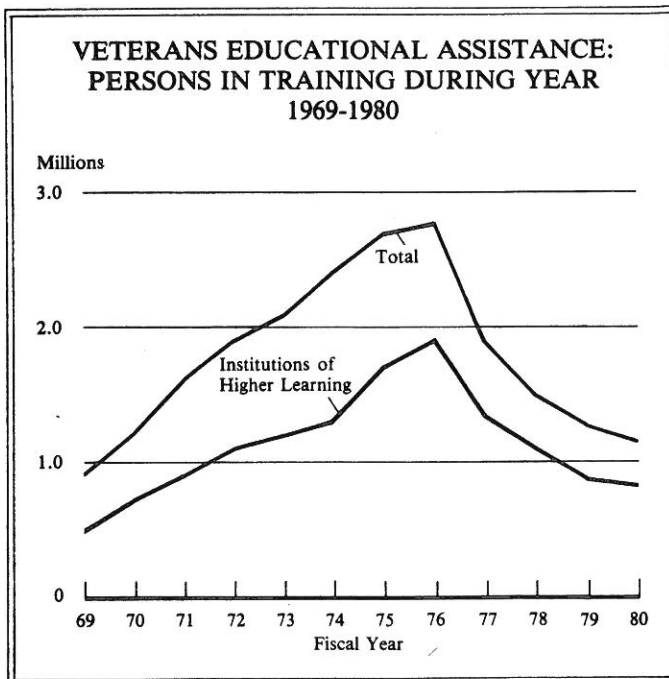
Veterans Educational Assistance (GI Bill)

Over 1.1 million veterans and active duty personnel received educational benefits in FY 1980 under the post-Korean GI bill. This figure is down 13 percent from FY 1979 and is expected to continue its decline in coming years.

Veterans and service personnel who have not completed high school nor received an equivalency certificate are considered to be educationally disadvantaged. These veterans may, without charge to their basic entitlement, receive training to overcome their educational handicaps. At the end of September 1980, over 857,000 veterans and servicepersons had participated in these "free entitlement" programs.

Through September 1980, the total number of veterans trained under the current GI bill topped 7.6 million, of whom 72 percent have been Vietnam era veterans. More than half have trained at the college level (excluding correspondence); the remainder are divided among vocational and technical training, correspondence training, flight training, and cooperative and on-the-job training.

VETERANS EDUCATIONAL ASSISTANCE:
PERSONS IN TRAINING DURING YEAR
1969-1980



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At year's end the participation rate was 65 percent among Vietnam era veterans and servicepersons, and nearly 58 percent for Vietnam era veterans only. This compares to 51 percent for veterans who trained under the World War II program.

At the end of FY 1980, cumulative expenditures on veterans educational assistance for post-Korean conflict trainees exceeded \$32 billion, compared to \$4.5 billion for the Korean conflict program and \$14.5 billion for the World War II program.

Through the veteran student services program (work-study) in FY 1980, the VA paid for nearly 6 million hours of work by veterans enrolled under veterans' educational assistance or vocational rehabilitation. Services were performed at VA regional offices, schools, hospitals, cemeteries, or other designated sites.

More than 7,800 education loans were granted, compared to about 11,000 the year before. Costs declined from \$8 million to approximately \$6.7 million due to more stringent eligibility requirements. Public Law 95-476 limits the program to loans for attendance at high-cost schools and shortens the repayment period. Public Law 96-466 authorizes the VA to grant education loans for enrollments in flight training for eligible veterans who will be reimbursed at 60 percent of the approved course charges. The high rate of defaults (over 50 percent at year's end) continues to be a problem as an increasing number of loans granted earlier in the program reach maturity.

Post-Vietnam Era Veterans' Educational Assistance

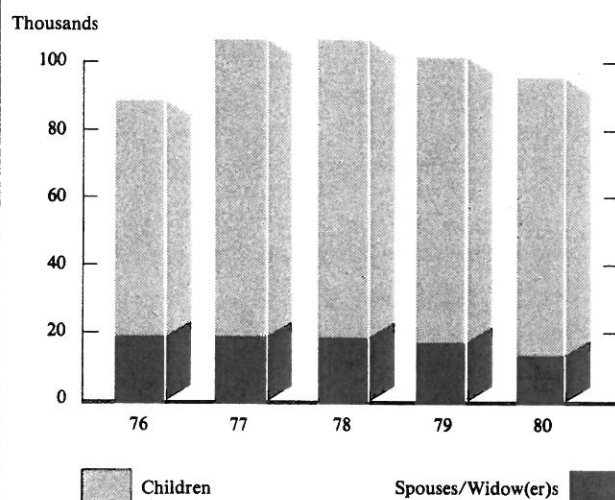
At the end of FY 1980 there were over 160,000 active participants (in-service contributors) in the post-Vietnam era veterans' assistance fund. The number of trainees during FY 1980 continued to be lower than estimated at the beginning of the program. The program is under continuing review by both the VA and the Department of Defense who prepare a joint annual progress report.

Dependents' Educational Assistance

This program provides educational assistance for survivors of veterans who died from service connected causes and for dependents of veterans whose service connected disabilities are rated total and permanent. Spouses and children of

service personnel who are prisoners of war, missing in action, or interned by a foreign government for more than 90 days are also eligible under this program. Up to 45 months of full-time training is provided in approved schools. Nearly 83,000 children and 13,000 spouses took advantage of the program during FY 1980; nearly 90 percent used their entitlement to acquire college level training.

DEPENDENTS EDUCATIONAL ASSISTANCE: BENEFICIARIES IN TRAINING DURING YEAR 1976-1980



State Approving Agencies

State approving agencies were created originally to meet requirements of the World War II programs. Courses offered for training veterans and other eligible persons must be approved by the approving agency of the state where the training facility is located, or by the Administrator. A number of states have designated two or more agencies to carry out the approval function and to provide continuing supervision of educational institutions and vocational/technical training establishments having veterans and other eligible persons enrolled in approved courses. The VA negotiated contracts with state approving agencies for these services at a cost to the agency of about \$16 million in FY 1980.

School Liability

A school may be held liable for overpayment to a veteran or eligible person when the overpayment was a result of willful or negligent false certification or willful or negligent failure of the school to report excessive absences, discontinuance, or interruption of a course. Each regional office has a Com-

mittee on School Liability for hearings prior to liability determinations. Appeals are forwarded to the Central Office School Liability Appeals Board in the Department of Veterans Benefits. Since the moratorium on processing of school liability cases was lifted in March 1979, outright recoveries have exceeded \$184,000 and compromises have resulted in collection of over \$25,000.

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Housing Assistance

Housing Assistance

Comparative Highlights

Item	Fiscal Year		Percent Change
	1980	1979	
Number of loans			
Guaranteed home	289,164	357,850	-19.2
Guaranteed mobile home	8,283	6,728	+23.1
Direct	1,160	1,419	-18.3
Average loan amount			
GI primary home ¹	\$50,511	\$44,505	+13.5
Mobile home	\$19,576	\$17,339	+12.9
Direct	\$26,576	\$26,299	+1.1
Maximum interest rate ²			
GI and direct home	14.0%	10.5%	---
Mobile home unit	17.5%	12.0%	---
GI home loans outstanding ³	4,100,165	4,040,006	+1.5
GI home loans in default ³	60,062	48,118	+24.8
As a percent of loans outstanding	1.46	1.19	+22.7
Substitutions of entitlement	9,097	6,925	+31.4
Properties on hand ³	9,023	9,450	-4.5

¹Includes condominiums

²During year

³End of year

Summary

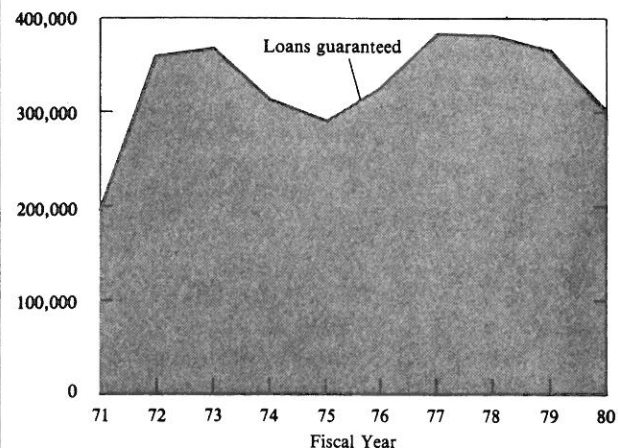
Fiscal year 1980 was probably the most turbulent year in the history of the VA housing program, which, like the housing industry in general, experienced disrupted money markets, the highest interest rates in history, a high inflation rate, and a recession. GI home loans were subject to eight interest rate changes — the greatest number of rate changes experienced in any one year since the inception of the program.

In spite of the negative forces prevailing during the year, the program maintained a relatively high volume of activity. Over 308,000 veterans were assisted with home ownership during this period. The VA guaranteed over 297,400 home loans in the amount of \$14.8 billion; disbursed 1,160 direct loans amounting to nearly \$31 million; made 664 grants for specially adapted housing totaling more than

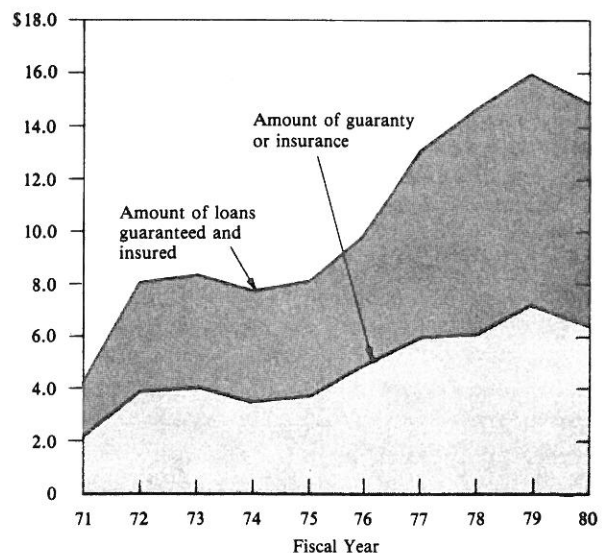
\$19.4 million; and approved 9,097 substitutions of entitlement.

Even though the negative conditions in the housing market during FY 1980 were worse than those of the previous recession period in 1975, the level of activity was higher. This was primarily a result of legislative changes in the program during the previous decade. These legislative

VA GUARANTEED AND INSURED LOANS
1971-1980



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initiatives enabled the program to meet the housing needs of veterans under adverse economic conditions in a market that became one of dynamic change.

Mobile Home Loans¹

Since the inception of the mobile home loan program in February 1971, the VA has guaranteed 42,206 mobile home loans, thereby assisting lenders in providing over \$562 million in loans to veterans who probably would have been unable to afford a home in the conventional market.

During the year, 8,104 applications were received, and 8,283 mobile home loans amounting to more than \$162 million were guaranteed. The number of loans guaranteed during the year represents an increase of over 23 percent from FY 1979. Of these, almost 67 percent were made by non-supervised lenders approved for automatic processing as provided by the Veterans' Housing Act of 1974.

Of the loans guaranteed during the fiscal year, 7,843 were for the purchase of new mobile homes while 440 were for used units. Loans for the purchase of single-wide mobile homes accounted for more than 65 percent of the FY 1980 total. The average loan amount for single-wides was \$17,114 while for double-wides it was \$24,267. These amounts are higher than previous years partially because the Veterans' Housing Benefits Act of 1978 removed the statutory loan maximums for mobile home units and lots.

Plant Inspections

Each plant producing mobile home units to be sold to veterans is inspected quarterly to see that the units produced and the manufacturing processes are in compliance with Federal Mobile Home Construction and Safety Standards.

The inspection of the manufacturing process in mobile home plants involves observing the handling of materials and the assembly operation at all stages of construction. In addition, the quality control program is checked, including the type of materials used and the provisions for protecting materials during storage.

A total of 417 mobile home plant inspections were made by VA during FY 1980, and an additional 1,033 inspections by third party inspectors were accepted by VA as meeting agency requirements. No evidence of non-compliance with the Federal standards was noted. The enforcement of inspection requirements set forth in the National Mobile Home Construction and Safety Standards Act of 1974, as implemented by the Department of Housing and Urban Development, has had the effect of improving the performance of manufacturers. The VA inspections showed a high degree of conformity with Federal requirements.

Mobile home manufacturers cooperate with VA by permitting inspectors to view plant operations and by responding to questions about operations, marketing areas, and other matters related to plant operations. Experience with the mobile home industry in general has been good.

Mobile Home Onsite Inspections

During FY 1980, 1,840 mobile homes secured by guaranteed loans were randomly selected for inspection. Each inspection covered the home and its site, and included, where possible, an interview with the veteran owner or spouse, or both.

In some cases the inspectors were unable to check some of the items and, therefore, total responses relating to a particular item do not always equal the total number of inspections. The percentage figures given below relate to the total number of responses for a particular item.

The inspectors found that 76 percent of the mobile homes were located in mobile home parks and 24 percent on individual sites. These are essentially the same percentages reported during previous years. Nearly all sites were judged to be adequate and many inspectors reported exceptionally attractive sites. This may correlate with the fact that 95 percent of the units were at the locations named in the original loan applications and that only 5 percent had been moved from the locations specified in the applications. This continues a trend of decreased movement of mobile homes that began in FY 1979. For the five fiscal years prior to that time, the average percentage of units moved from original locations was 15 percent.

During FY 1980 the average size of the units continued to increase dramatically from 1,047 to 1,250 square feet, an increase of 203 square feet during the year. A greater number of double-wide units was the primary reason for the increase.

¹ This information is included in compliance with Section 1819, Title 38, U.S.C.

Although the size of the mobile home units and their sites have increased, other factors have shown little change. Community or public water facilities were connected to 68 percent of the homes, while in FY 1979 the figure was 69 percent. Sewage was disposed of through public or community disposal systems in 62 percent of the homes as opposed to 61 percent in FY 1979.

At the time of the inspections, 74 percent of the units had skirting and 70 percent had tiedowns installed which were adequate to withstand hurricane-force winds, as opposed to 73 percent and 71 percent respectively, during FY 1979.

Interviews were conducted with occupants of 76 percent of the units inspected. Their units had been occupied an average of 6 months at the time of the interviews. Some of the results of the interviews were:

99 percent were satisfied with the treatment received from VA;

94 percent were satisfied with their lenders;

80 percent of those located in a mobile home park were satisfied with their park operators;

66 percent were satisfied with their dealers.

As to future housing plans, 63 percent planned to remain in their mobile homes at the current site, 15 percent wanted to move into conventional housing, and 22 percent wanted to move their homes to other sites.

Compliance With Warranty

Every new mobile home financed by a GI loan must have a written warranty from the manufacturer to the purchaser, which includes a specific statement that the mobile home meets the standards prescribed by the VA.

During FY 1980, VA field stations reported 258 complaints from veterans expressing dissatisfaction in some manner with their mobile home unit. Of these complaints 252 were considered justified and six were determined to be unjustified. By the end of the fiscal year, 211 (84 percent) of the justified complaints had been resolved and 41 (16 percent) were pending resolution. Of these complaints, 211 (84 percent) were under warranty; seven (3 percent) were due to faulty setup; and 34 (13 percent) were attributed to both warranty and faulty setup.

The nature of the complaints covered under warranty varied from minor defects to severely defective items to be repaired. A total of 110 justified (43.6 percent) complaints were reported because of flawed construction of the unit; both construction and furnishings accounted for 131 (52 percent) of the complaints; nine (3.6 percent) expressed dissatisfaction with only the furniture and appliances; and two (0.8 percent) had other complaints.

VA field stations are continuing to act promptly in determining the validity of the complaints received. Complaints are widely distributed among manufacturers and models, with no single manufacturer accounting for a significant percentage of total complaints.

Profile of Mobile Home Market vs. GI Home Market

The primary beneficiaries of the VA mobile home program are, for the most part, the younger, lower income veterans and servicepersons who cannot afford conventional housing.

Although the number of mobile home loans guaranteed represents only a small percentage of loans guaranteed, it is evident that veterans obtaining mobile home loans are those for whom the program is intended. The table below compares selected characteristics of mobile home loans to those of GI loans on conventional homes. Income, housing expense, and asset figures shown are based only on loans submitted for VA approval prior to disbursement. Condominium loans are not included with home loans.

Characteristics	Mobile Home Loans	Home Loans
Average maturity (months)	182	357
Average loan amount	\$19,573	\$50,337
Average purchase price	\$20,620	\$53,490
Average gross monthly income	\$ 1,490	\$ 2,041
Average net monthly income	\$ 1,005	\$ 1,370
Average monthly housing expense	\$ 404	\$ 665
Average assets	\$ 2,247	\$7,453
Housing expense as a percent of gross monthly income	27.2	32.6
Housing expense as a percent of net monthly income	40.2	48.6

In addition, the mobile home buyers were somewhat younger. Nearly 31 percent were 28 years old or less, compared to only 19 percent of conventional home purchasers. Fifty-seven percent were Vietnam era veterans.

Defaults

When the VA mobile home loan program was established, it was anticipated that the incidence of defaults and claims would be greater than that experienced for loans on conventional homes. During FY 1980, claims paid, as a percent of the average number of outstanding mobile home loans, dropped to 2.7 percent from 3.4 percent during FY 1979. The rate for guaranteed loans on conventional homes was 0.25 percent during FY 1980.

Direct Loans

The purpose of the direct loan program, as provided in the Housing Act of 1950, was to give all veterans an equal opportunity to purchase homes even though they lived in areas where private lenders were not interested in the loan guaranty program or had insufficient funds to make such mortgages. VA is authorized to designate such rural areas, small cities and towns as "housing credit shortage areas." These direct loans can be used for the purchase, construction, repair and alteration of homes and farm houses.

In the VA direct loan program, veterans apply directly to the VA, and the terms are the same as those in effect for guaranteed loans.

To date, the VA has made 332,997 direct loans in an aggregate amount of \$3.4 billion. Because of the general availability of private funds for guaranteed loans, only 1,160 direct loans were made in FY 1980.

The average amount of a direct loan made in FY 1980 was \$26,576, a 1 percent increase over the FY 1979 average.

GI Home Loans

During FY 1980, 289,164 home loans were guaranteed. This total includes refinancing loans, condominium loans, alteration and repair loans, and direct loans sold and guaranteed, in addition to loans for the purchase of the traditional single-family home.

Almost 66 percent of the veterans purchasing a home with a guaranteed loan were able to obtain no downpayment loans. Loans to finance the purchase of previously occupied housing accounted for 76 percent of the primary home loans guaranteed during the fiscal year. These loans averaged \$48,433 and financed homes with an average purchase price of \$51,210. On newly constructed homes, the average loan was \$57,024 and the average purchase price was \$61,307.

Of the total home loans guaranteed during FY 1980, slightly over 70 percent went to Vietnam and post-Vietnam era veterans and servicepersons, 11 percent to veterans whose entitlement was restored, 10 percent to post-Korean veterans, 5 percent to World War II veterans and 3 percent to Korean veterans. Veterans whose period of service was between World War II and the Korean conflict became eligible for loan benefits October 1, 1976 but accounted for only 0.2 percent of the total volume. Unmarried surviving spouses also accounted for 0.2 percent of the loans guaranteed during the year. Ten loans were guaranteed for spouses of service personnel classified as prisoners of war or missing in action. These percentages were virtually unchanged from FY 1979.

Between June 22, 1944 and September 30, 1980, veterans obtained nearly 10.7 million home loans totaling over \$185 billion under the GI home loan program.

Credit Market Developments

During most of FY 1980, the VA home loan program operated under very restrictive credit market conditions. As a result of restrictive monetary policy and concern over inflation, interest rates moved sharply higher in the first half of FY 1980, exceeding previous record levels. These increases were largely reversed in the second half of the fiscal year amid a substantial downslide in economic activity and less demand for money and credit. The decrease in interest rates did not erase all of the increases recorded earlier, and interest rates at the end of FY 1980 were still higher than at the beginning of the fiscal year.

As a result of these conditions, activity in the mortgage market contracted sharply during FY 1980. In April 1980 the average interest rate on new conventional home mortgages rose to more than 16 percent and the VA home loan interest rate ceiling to 14 percent; moreover, loan terms and lending standards became more stringent. Many would-be homebuyers who satisfied eligibility criteria were deterred by high interest costs. Consequently, net mortgage lending came to a virtual standstill in the second and third quarters of the fiscal year.

FY 1980 ended as it had begun, with a limited supply of funds available for mortgages and interest rates on the rise. The conventional home loan mortgage interest rate had returned to around 14 percent and the VA interest rate ceiling was 13 percent, or 1 percent less than its historical high level.

Funding Operations

No appropriations are required to pay claims and fund property management operations. Both the guaranteed loan and direct loan programs are financed from revolving funds derived from principal and interest payments made to VA and proceeds of VA loan sales.

During FY 1980 VA collected \$258 million in principal and interest payments, with the interest portion amounting to \$135 million.

Specially Adapted Housing Assistance

Severely disabled veterans declared eligible for grants for specially adapted housing have distinctive housing needs such as wide doorways to accommodate wheelchairs, ramps instead of steps, oversized and specially equipped bathrooms, etc. VA extends whatever help is required, as determined on an individual basis. Assuring that structural requirements are met is only one aspect of the specially adapted housing program.

The lack of mobility and the psychological problems associated with paraplegia often impose tremendous burdens on its victims. The most simple tasks become difficult, and complex activities and some procedures, such as acquiring a suitable home, are almost impossible without

assistance. Frequently VA representatives escort the veteran or take his place during contacts with builders, lenders and architects.

Because of the difficulty such veterans experience in obtaining loans from private lenders on some occasions, the VA is authorized to make direct loans for specially adapted housing without regard to geographic location. Since this authorization was granted in the Veterans' Housing Act of 1970, direct loans for specially adapted housing have been made to 322 disabled veterans for \$6.9 million.

During FY 1980, 664 severely disabled veterans received grants totaling \$19.4 million to buy, build or modify homes specially adapted for their use. Since these grants were first authorized, 17,276 veterans have been aided by grants amounting to over \$248 million.

Fair Housing Program

A significant part of VA's Equal Housing Opportunity Program is the statistical monitoring of minority participation in the VA guaranteed home loan program. This monitoring includes both quantitative and qualitative analysis.

Quantitatively, minority veterans continued to obtain a significant share of VA guaranteed loans during FY 1980. While constituting 11 percent of the veteran population, minority veterans obtained over 16 percent of the home loans closed. Black veterans obtained 11 percent, Hispanics 4 percent, Asian/Pacific Island veterans 1 percent, and American Indian/Alaskan natives 0.5 percent of the total loans.

Qualitative indicators point to significant and increasing reliance of veterans on spouses' income in order to qualify for home loans. Over 44 percent of the VA-guaranteed loans closed in FY 1980 were approved because of the supplemental income of the spouse. This compares with 43 percent a year earlier and 39 percent two years earlier.

Spouses' income was even more important for minority buyers; 64 percent of the Asian/Pacific Islanders, 55 percent of the black, 52 percent of the Hispanic, and 47 percent of the American Indian/Alaskan natives who obtained VA guaranteed home loans relied upon spouses' income.

As shown in the following table, average annual incomes ranged from a high of \$25,700 for Asian/Pacific Islanders to a low of \$22,600 for Hispanic home buyers using VA financing in FY 1980.

	Average Income
Asian/Pacific Islanders	\$25,700
White	\$24,700
American Indian/Alaskan Native	\$24,300
Black	\$22,900
Hispanic	\$22,600

VA guaranteed home loans covering the full purchase price of the home (no downpayment) were obtained by 82 percent of black, 74 percent of Hispanic, 73 percent of American Indian/Alaskan native, 67 percent of white, and 55 percent of Asian/Pacific Islander participants in FY 1980.

During FY 1980, minority businesses received a greater share of all commissions, fees and assignments made by VA for work related to the guaranteed loan program (\$11.7 million compared to \$11.1 million the previous year). The minority business portion of the total increased from 12.5 percent in FY 1979 to 15.1 percent in FY 1980. Minority participants include sales brokers, fee appraisers, compliance inspectors, repair and maintenance contractors, and management brokers.

The VA maintains a home counseling service in 23 cities to provide prospective home buying veterans advice and assistance in practical aspects of home buying and home-ownership. Over 6,600 minority veterans were counseled during FY 1980.

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Life Insurance

Comparative Highlights

Program (in thousands)	Fiscal Year		Percent Change
	1980	1979	
USGLI			
Policies	99	108	- 8.3
Amount	\$404,926	\$441,520	- 8.3
Death benefits	\$32,910	\$34,555	- 4.8
NSLI¹			
Policies	3,579	3,669	- 2.5
Amount	\$24,596,423	\$25,069,543	- 1.9
Death benefits	\$336,636	\$313,770	+ 7.9
VSLI¹			
Policies	533	547	- 2.6
Amount	\$4,682,545	\$4,792,296	- 2.3
Death benefits	\$18,525	\$18,067	+ 2.5
SDVI			
Policies	189	186	+ 1.6
Amount	\$1,711,415	\$1,684,684	+ 1.6
Death benefits	\$17,774	\$16,682	+ 6.5
VRI¹			
Policies	167	171	- 2.3
Amount	\$1,161,020	\$1,184,488	- 1.9
Death benefits	\$14,282	\$12,941	+ 10.4
SGLI			
Policies	3,178	3,142	+ 1.1
Amount	\$63,341,689	\$62,606,808	+ 1.2
Death benefits	\$86,634	\$94,767	- 6.5
VGLI			
Policies	484	487	- 0.6
Amount	\$9,541,195	\$9,528,386	+ 0.1
Death benefits	\$27,938	\$25,666	+ 8.9
VMLI			
Policies	6	6	0.0
Amount	\$152,880	\$142,261	+ 7.5
Death benefits	\$4,398	\$3,702	+ 18.8

¹Includes paid-up additional insurance purchased by dividends.

Summary

Life insurance protection for the nation's service personnel and veterans is provided under five separate programs administered by the VA and three programs supervised by the VA.

The first five programs shown in the accompanying table are entirely VA administered and the latter three are super-

Program	Abbreviated Reference	Policy Prefix Letter	Program Beginning	Ending Date Of New Issues
U.S. Government Life Insurance	(USGLI)	K	01-01-19	04-24-51
National Service Life Insurance	(NSLI)	V H	10-08-40 08-01-46	04-24-51 12-31-49
Veterans Special Life Insurance	(VSLI)	RS, W	04-25-51	12-31-56
Service Disabled Veterans Insurance	(SDVI)	RH	04-25-51	Open
Veterans Reopened Insurance	(VRI)	J, JR, JS	05-01-65	05-02-66
Servicemen's Group Life Insurance	(SGLI)	---	09-29-65	Open
Veterans Mortgage Life Insurance	(VMLI)	---	08-11-71	Open
Veterans Group Life Insurance	(VGLI)	---	08-01-74	Open

vised through a contractual relationship with private companies. The SGLI and VGLI programs are administered by the Prudential Insurance Company of America, Newark, New Jersey, and the VMLI program by the Bankers Life Insurance Company of Lincoln, Nebraska.

At the end of FY 1980 these eight programs provided coverage exceeding \$105 billion to nearly 8 million insureds.

Government Administered Programs

United States Government Life Insurance (USGLI)

This is the oldest government administered insurance program, established in 1919 to handle the conversion of World War I Risk Term Insurance. At the end of FY 1980, 99,000 of these policies remained in force, a decline of approximately 8 percent from the previous year. The program is self-supporting except for administrative expenses and claims traceable to the extra hazards of military service, which are paid by the government. There has been a steady decline in the number of policyholders which will continue to accelerate as the average age of these insureds is now over 76 years. Dividends are paid to USGLI policyholders from excess earnings of the Trust Fund. The 1980 dividend

payment: \$256 in

National

This program insurance end of FY force with self-supportable traceable paid by the excess \$149 per

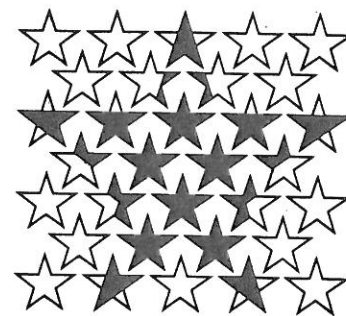
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NSLI policies as paid-up to have force. A with a five cent over

Veterans

This insurance days following on or 1956. Veterans' life there were government Servicer policies September



payments will average \$298 per insured, compared to \$256 in 1979.

National Service Life Insurance (NSLI)

This program was established October 8, 1940 to serve the insurance needs of World War II service personnel. By the end of FY 1980, 3.6 million of these policies remained in force with a face value of \$24.6 billion. The program is also self-supporting except for administrative expense and claims traceable to the extra hazards of military service, which are paid by the government. The 1980 dividend payments from the excess earnings of the Trust Fund averaged nearly \$149 per insured compared to \$128 last year.

Approximately a third of the NSLI policies are term insurance renewed every five years at the current attained age; premiums increase with each renewal. As the policyholders grow older, the premiums can become prohibitive, causing many to reduce the face amount of their policies. The VA makes continuous efforts to alert term policyholders about the high premium rates if they retain these policies to the older ages and encourages them to convert to a permanent plan of insurance.

Legislation establishing the Modified Life Age 65 and Age 70 plans of insurance has been beneficial to term policyholders since the premium rates are lower than for any previous plans in existence. As of September 30, 1980, there were over 450,000 Modified Life policies in force with a face value of over \$3 billion.

NSLI policyholders may use dividends to buy more insurance as paid-up additions to their policy, permitting policyholders to have more than \$10,000 government life insurance in force. A total of 820,000 policies have paid-up additions with a face value over \$1.3 billion, an increase of 17 percent over 1979.

Veterans Special Life Insurance (VSLI)

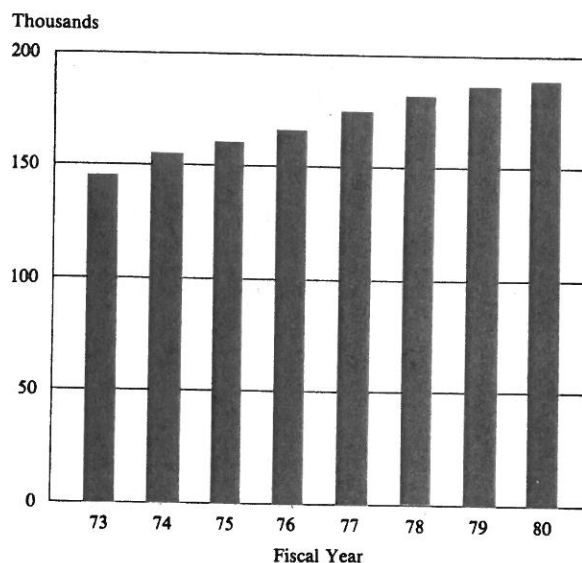
This insurance program was made available within 120 days following separation to veterans separated from service on or after April 25, 1951 through December 31, 1956. VSLI was a means of providing post-service government life insurance for Korean conflict veterans for whom there was no premium paying insurance during service. The government provided insurance protection with a \$10,000 Servicemen's Indemnity. During this period about 800,000 policies were issued of which 533,000 remained in force on September 30, 1980, with a face value of \$4.7 billion.

Initially, only renewable term insurance was available. Effective January 1, 1959, legislation modified this program to permit exchange to a lower cost term policy which was nonrenewable after age 50, or to permit conversion to a permanent plan of insurance. This program was originally nonparticipating (no dividends payable), but Public Law 93-289, effective May 24, 1974, changed this insurance to participating. The 1980 dividend payments will amount to \$32 million, an average of \$62 per insured compared to \$48 in 1979. A total of 102,000 policies have paid-up additions with a face value of over \$40 million.

Service Disabled Veterans Insurance (SDVI)

The only government administered insurance program remaining open to new issues, SDVI was designed to assure that service disabled veterans could obtain life insurance at standard rates. Every veteran separated from service on or after April 25, 1951, who receives a service connected disability rating for which compensation would be payable if 10 percent or more in degree, and who is otherwise insurable, has one year from the date of notice of the VA rating to apply for this coverage. The VA makes a special effort to assure that all eligible veterans are made aware of this coverage by issuing a notice of eligibility at the time a VA service connected rating is granted; a reminder notice is

NUMBER OF SDVI POLICIES



sent about six months later. In addition, the program is publicized through veterans' organizations and periodic information releases to the press, and radio and television stations. Since the program insures substandard risks at standard premium rates, it is not self-supporting and requires periodic appropriations to meet the costs. At the end of FY 1980 there were 189,000 policies in force with a face value over \$1.7 billion.

Veterans Reopened Insurance (VRI)

This program was a limited reopening of National Service Life Insurance for certain disabled World War II and Korean conflict veterans who, because of their disability, would be unable to obtain commercial life insurance or could not obtain it at a reasonable cost. Applications for this insurance were accepted from May 1, 1965 through May 2, 1966. About 210,000 policies were issued of which 167,000 remained in force at the end of FY 1980 with a face value over \$1 billion. The Administrator may adjust premium rates up or down at intervals of not less than two years to keep the program self-supporting.

Public Law 96-128, enacted in 1979, made all Veterans Reopened Insurance policies participating, with dividends payable for the first time in 1980. Dividends are paid to VRI policyholders from excess earnings of the Trust Fund. The 1980 dividend payments will average \$94 per insured.

Total Disability Income Provision (TDIP)

This is an optional rider that an insured may add to the basic policy to provide a monthly income in case of disability. By paying an extra premium and meeting the age and good health requirements, this rider may be added to any government administered policy except SDVI.

TDIP provides a monthly benefit of \$5.75 per \$1,000 of USGLI insurance for total disability, and as of September 30, 1980, over 2,000 riders were in force with a face value of \$16 million. TDIP riders have been issued on NSLI policies under three different versions of the law. Under the original provisions, these riders paid \$5 per \$1,000 of insurance with coverage to age 60. Subsequent changes first increased the payment to \$10 per \$1,000 of insurance with coverage up to age 60 and later extended the coverage to age 65. The accompanying table shows the modifications to the law affecting NSLI policies and the current status of these three different riders.

Effective Date of Modification	Monthly Income per \$1,000 of Insurance	Coverage to Age	In Force as of Sept. 30, 1980	
			No. of Policies	Amount of Insurance (in Thousands)
Aug. 1, 1946	\$ 5.00	60	8,859	\$ 65,111
Nov. 1, 1958	10.00	60	105,540	770,976
Jan. 1, 1965	10.00	65	427,908	3,415,506

Death Claim Settlement Under Option 2

Under this option the insurance proceeds are paid to the beneficiary in a specified number of equal monthly in-

stallments, ranging in number from 36 to 240. As a result of Public Law 96-128, the Administrator has the authority to adjust the amount of monthly income paid to beneficiaries under Settlement Option 2. These adjustments will be made based on the investment earnings on the reserve held to make future payments. Beginning in December 1979, these monthly payments were increased for the first time. The payments will never be lower than the guaranteed payments shown in the life insurance policy.

Government Supervised Programs

Servicemen's Group Life Insurance (SGLI)

This program, which provides insurance coverage for members of the uniformed services, is supervised by the VA, but administered by the Prudential Insurance Company of America as primary insurer through the Office of Servicemen's Group Life Insurance, Newark, New Jersey. During FY 1980, 383 other commercial companies also participated in the SGLI program on a reinsurer/converter or converter only basis. By the end of FY 1980, over 3 million active duty service personnel and reservists were insured in the amount of \$63 billion, and death benefits paid during the year amounted to \$89 million compared to \$95 million for FY 1979.

The maximum coverage is \$20,000, and the serviceperson is automatically insured for this amount in the absence of a written request for less (\$15,000; \$10,000; or \$5,000) or no coverage. Full-time or part-time SGLI coverage has also been extended to certain members of the Reserve, National Guard, and ROTC. Members in the four service academies (U.S. Military Academy, U.S. Naval Academy, U.S. Air Force Academy, and U.S. Coast Guard Academy) are entitled to full-time coverage.

Veterans Group Life Insurance (VGLI)

This program, which provides for the conversion of SGLI to a 5-year nonrenewable term policy, was designed to provide low-cost government supervised insurance to the veteran immediately following separation or release from service. Prior to establishment of the VGLI program, SGLI could be converted directly to an individual policy with one of the participating commercial companies immediately upon separation from service. Studies had shown that very few veterans were taking advantage of the conversion privilege, possibly due to limited income immediately after service, completion of schooling, or lack of family responsibility. VGLI was therefore designed to provide low-cost protection during the period of transition into civilian life.

This group coverage was effective August 1, 1974 and is available in amounts of \$20,000, \$15,000, \$10,000, or \$5,000 but for not more than the amount of SGLI which was in force at the time of separation. VGLI has no cash, loan, paid-up, or extended insurance values, but can be converted to a permanent policy with one of the participating companies at the end of the five-year term period. As of September 30, 1980, 484,000 veterans were insured for nearly \$10 billion.

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Shortly following release from duty, the VA mails to all eligible veterans an informational pamphlet and an application for VGLI.

This program is also available to reservists who, while performing active or inactive duty for training under a call or order specifying a period of less than 31 days, suffer an injury or disability which renders them uninsurable at standard premium rates.

Veterans Mortgage Life Insurance (VMLI)

This program is supervised by the VA, administered by the Bankers Life Insurance Company of Lincoln, Nebraska and provides mortgage protection life insurance to a maximum of \$40,000 for any veteran who receives a VA grant for specially adapted housing, unless he or she declines, fails to

furnish information to establish the premium, or does not pay the premium. Any unused portion is transferable to a subsequent home mortgage after the preceding one is disposed of, and coverage ceases when the mortgage is paid off, the home is sold, or the veteran reaches age 70.

The monthly premium paid by the disabled veteran is the same as that charged for standard lives, with the government paying the extra mortality costs and administrative expenses. The premiums collected under this program are not sufficient to pay claims and the deficit is made up by transfers from the Compensation and Pension appropriation.

As of September 30, 1980 there were over 5,900 VMLI policyholders; death benefits paid during the fiscal year totaled over \$4 million.

Veterans Assistance

Comparative Highlights

	FY 1980	FY 1979	Percent Change
Public telephone calls - toll-free	5,017,377	4,782,046	+ 4.9
Public telephone calls - other	9,722,875	10,378,631	- 6.3
Interviews away from office	127,921	157,327	- 18.7
Interviews at office	2,287,362	2,974,739	- 23.1
Patient interviews	537,589	481,669	+ 11.6
Correspondence	2,503,018	2,768,577	- 9.6

Summary

Veterans assistance personnel in Veterans Services Divisions in field stations conducted almost 15 million telephone interviews during FY 1980. The toll-free telephone service continued to increase with over 235,000 more calls than the preceding year. Correspondence declined approximately ten percent. The declines in various actions result largely from fewer persons in education and training programs and the phasing out of the Vet Rep program.

Compliance surveys of establishments approved for the education or training of veterans totaled 11,350, a small decrease from FY 1979.

Fiscal year 1980 saw more than 40 Central Office staff visits conducted at field stations to improve management practices, and to appraise local compliance with current requirements and directives in an effort to improve service to veterans and their dependents.

Outreach

The Veterans Administration conducts an outreach program to inform veterans of the benefits and services to which they may be entitled. This outreach program places a high priority on reaching certain categories of veterans, including those who are service disabled or recently separated, as well as the educationally disadvantaged, the aging, and the incarcerated.

Toll-free telephone service makes outreach services available in all 50 states. The use of toll-free lines has been increasing and increased 4.9 percent in FY 1980. The 930 local, Foreign Exchange (FX), and Wide Area Telephone Service (WATS or "800 service") lines provide fast, easy, inexpensive access to the VA for veterans' benefits information and assistance. Enterprise Service is provided in Hawaii and Rhode Island, and Zenith Service in Alaska. The availability of the VA through toll-free numbers is widely publicized in commercial telephone directories and in newspaper, radio, and TV announcements. Toll-free telephone service is also advertised by posters displayed in appropriate locations or by enclosures inserted in outgoing mail. Several members of Congress have assisted in publicizing toll-free telephone service and VA pamphlets encourage the use of this service.

VA is participating in the White House Veterans Federal Coordinating Committee in establishing Veterans Outreach and Community Services (VOCS) programs in 11 cities selected for initial implementation of pilot programs.

The VA, with safeguards to assure proper use, also provides lists of names and addresses of veterans to local governments wishing to notify them of benefits being made available to veterans by local governments.

Elderly Beneficiaries

Our concentration on improving services to elderly veterans and their families grew out of the VA's participation in the Working Agreement on I&R (Information and Referral) Services for Older People Among Federal Departments and Agencies. Information on VA services has been provided to over 600 AAA's (Area Agencies on Aging). Dozens of benefit presentations have been conducted by VA personnel at senior centers, nursing homes, and congregate meal sites.

Incarcerated Veterans

Service to incarcerated veterans began soon after World War II and has received new emphasis since April 1975. Since then over 10,200 scheduled visits have been made to correctional facilities. Regularly scheduled visits or "on-call" service is provided to 585 Federal and state prisons and to 73 city or county jails in all 50 states. Information about VA benefits has been provided in group sessions to over

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47,200 incarcerated veterans. More than 101,000 incarcerated veterans have been counseled individually. Additionally, almost 5,000 briefings have been held for over 10,600 correctional facility officials to acquaint them with available veterans' benefits and services.

The Presidential Review Memorandum of October 1978 charged the Law Enforcement Assistance Administration (LEAA) and the Bureau of Prisons with the responsibility for developing reliable statistics regarding the numbers and characteristics of Vietnam era veterans in prisons and jails. Both agencies were directed to launch a massive information dissemination program aimed at informing personnel and inmates in the criminal justice system about veterans' benefits and services and how they can be used effectively to help in the prisoners' rehabilitation programs. VA representatives have worked closely with representatives of the LEAA, the Bureau of Prisons, the American Correctional Association (ACA), and the National Institute of Corrections (NIC) to launch and perpetuate this major outreach effort. Along with this effort, over 300,000 copies of the informational pamphlet entitled, "Veterans Benefits - Inside. . . Outside," designed specifically for incarcerated veterans and those on probation or parole, have been distributed nationally.

During FY 1980 the VA's Department of Veterans Benefits and Department of Medicine and Surgery shared resources in a cooperative effort to produce a videocassette presentation for use in supplementing the counseling of incarcerated veterans, those on probation or parole, and correctional facility officials, about available veterans' benefits and services. Plans are being made to have the videocassette available for distribution to VA field stations and for purchase by correctional facilities early in FY 1981. The videocassette, entitled "The First Step," will also be available in 16mm format to allow wider distribution.

Recommendations for Improvement of Outreach During FY 1981¹

The Veterans Outreach Services Program as specified in Title 38, U.S.C. charges VA with seeking out veterans and dependents and providing them with the services described. The categories of veterans identified as most in need of outreach services are the disabled, the recently separated,

the educationally disadvantaged, the incarcerated, and the elderly. However, because the program is related to educational benefits and was inaugurated to deal with an emergency, it has been reduced every year by budget cuts and thereby the effectiveness of the outreach program has been impaired. VA is proposing legislation to provide for stationing VA employees in locations remote from VA regional offices where they can, with minimal travel expenditures, provide service and assistance to veterans and dependents in the area. With this legislative change and with the needed funds provided in appropriation channels, VA proposes an intensive program to reach the categories of veterans in need of outreach to provide them with information and assistance to obtain maximum benefits.

U.S. Veterans Assistance Centers

The mission of these Centers called USVACs has been to provide an integrated program of assistance for recently separated veterans, particularly the educationally disadvantaged. Although the mission has not changed through the years, techniques for accomplishing it have. Most USVACs operate referral systems to offer additional services not provided by VA, and toll-free telephone service has greatly enhanced their outreach capabilities. The Centers are located with VA regional offices or subsidiary VA offices, and in some cases a Veterans' Employment Representative from the Department of Labor is present full- or part-time. All incoming veterans making a first visit are referred to an experienced VA employee who discusses all available benefits and provides assistance in applying for those in which the veteran displays an interest. The employee also follows up with those veterans who are identified from their service records as being educationally disadvantaged (10,175 in FY 1980). Follow-ups are made by phone and, where that is not possible, by correspondence. Every effort is made to get such veterans to visit or otherwise communicate with the VA installations.

Employment Assistance

Although the principal responsibility for employment assistance to veterans belongs to the DOL (U.S. Department of Labor), the overall system for delivery of services requires close interagency cooperation. The VA has continued to work closely with DOL to improve the coordination of job and on-the-job (OJT/apprenticeship) training programs, and other employment services. Veterans with employment pro-

¹ This information is included in compliance with section 245, Title 38, U.S.C.

blems are given counseling and job assistance at the USVACs (United States Veterans Assistance Centers) and Career Development Centers at VA regional offices; they are also encouraged to register at the State Employment Security Agency (SESA) Job Service Office in their community. The VA cooperates in the DOL's Disabled Vietnam Era Veterans Outreach Program (DVOP) and the Comprehensive Employment and Training Act (CETA) program, by providing names and addresses and veterans' benefits training. VA also provides lists of names and addresses of on-the-job training employers to be used by the SESAs in developing job opportunities. Also, local Veterans Employment Representatives and DVOP representatives are stationed in some VA regional offices. In FY 1980, 58,477 veterans requested that VA provide employment assistance, and through various referrals, 12,193 obtained employment. Of this total 855 obtained employment through the Office of Personnel Management; 8,245 through SESAs; 1,772 obtained employment through VA contacts; and 1,321 were placed through other contacts.

Veterans Education and Training Representatives

Reduction in this staff continued throughout the year. By the end of FY 1980 there were fewer than 34 Vet Reps compared to the original staff of 1,327, and the 300 at the end of FY 1979. During the year they conducted over 380,000 interviews, and completed nearly 328,000 certifications needed for payment purposes. They also assisted in resolving many inquiries dealing with educational assistance payments.

Fiduciary and Field Examination Activity

The Fiduciary and Field Examination (F&FE) Activity of Veterans Services Division supervised the payment of benefits to fiduciaries on behalf of nearly 115,000 adult beneficiaries who were incompetent or under some other legal disability during FY 1980. In addition, the activity

supervised the payment of benefits to 23,892 minor beneficiaries. This supervision translated into 92,214 fiduciary program field examinations, 47,212 fiduciary account audits, 23,702 legal actions prepared, 4,932 court appearances, and 4,705,611 miles traveled. The F&FE Activity was also responsible for performing 11,319 non-fiduciary program field examinations, and 1,371 special investigations.

It is projected that the rise in the average age of the veteran population will cause the number of adults under supervision to grow.

Equal Opportunity Compliance

VA field station personnel conducted an equal opportunity compliance program to ensure that education and training offered to VA beneficiaries were provided without discrimination on the grounds of race, color, national origin, or sex, in enforcement of Title VI of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972. On September 24, 1980, Federal regulations were published defining VA responsibility for implementation of Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of handicap in programs receiving Federal financial assistance. As of September 1980 there were approximately 201 field station employees assigned to share the equal opportunity compliance responsibility along with their education compliance functions. They conducted 5,525 on-site equal opportunity compliance reviews in FY 1980 in proprietary schools below college level, apprenticeship programs, and other job training programs. This represents a decrease of 1.5 percent from FY 1979. The compliance specialists found two instances of noncompliance during the on-site compliance reviews. They conducted 15 investigations of complaints of discrimination, of which three were determined to be valid. Eight other complaints, against institutions of higher learning, were referred to the Department of Education which, under an agreement with the VA, has jurisdiction over such schools.

Vocational Rehabilitation and Counseling

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Vocational Rehabilitation and Counseling

Comparative Highlights

Item	FY 1980	FY 1979	Percent Change
Vocational rehabilitation trainees	28,666	29,470	-2.7
Beneficiaries counseled	117,030	119,840	-2.3

Summary

Through the end of FY 1980 the responsibility for counseling and rehabilitation activities¹ was assigned to the Education and Rehabilitation Service in Central Office and to the Veterans Services Division in regional offices. Beginning with FY 1981 the counseling and rehabilitation activity will be officially reorganized into a separate Vocational Rehabilitation and Counseling organization.

During FY 1980, considerable effort was devoted to planning the reorganization and to assisting in the development of Public Law 96-466, Veterans' Rehabilitation and Education Amendments of 1980, the first comprehensive restructuring of the vocational rehabilitation program since its inception in 1943. During the year, the Agency Task Force on Rehabilitation considered the findings of the Rehabilitation Conference of July 1979, and made further recommendations to the Administrator for improvement of the agency's rehabilitation effort. Both the Department of Veterans Benefits (DVB) and the Department of Medicine and Surgery (DM&S) implemented many of the recommendations either singly or through cooperative efforts. The General Accounting Office completed a study of the rehabilitation program and reported to the Congress making recommendations including improved outreach, coordinated service delivery, centralized management control, and better program accountability.

Case manager policies were established and communicated to both DVB and DM&S staff during the fiscal year. A cooperative effort to design a common training program resulted in a multi-media instructional package for use throughout the agency to implement the case manager concept.

¹Information on these activities for prior years can be found in the "Education Benefits" chapter of past VA Annual Reports.

Both counseling and training caseloads decreased from the previous year, although vocational rehabilitation counseling increased slightly. Emphasis on the seriously disabled veteran continued including outreach, motivation, and employment assistance. For the first time, post-Vietnam era participants appeared in counts of counseling cases as their number in training increased and they came under mandatory counseling provisions.

A six-member committee of field staff was established to improve VA services by assuring more effective communication between VA Central Office and field stations. The committee members, a Vocational Rehabilitation and Counseling Officer and a Vocational Rehabilitation Consultant from each of the Department of Veterans Benefits' three regions, are assigned a special responsibility to formulate and help carry out recommendations for the improvement of the overall rehabilitation process.

Vocational Rehabilitation

The vocational rehabilitation program, authorized under Chapter 31, Title 38, U.S.C., seeks to restore employability lost by virtue of handicap due to service connected disability. Each eligible veteran must be found in need of rehabilitation by a VA counseling psychologist to enter training. Counseling assists the veteran in self-appraisal; aptitudes, interests, abilities, physical or mental limitations, and residual capacities are appraised to select an objective and a course of training that will result in rehabilitation and eventual employment. While in training, a veteran may receive subsistence allowance, interest-free loans, tuition, supplies, tools, equipment, reader or tutorial services, medical, dental or psychological services, and other assistance to assure satisfactory progress and adjustment to training. Following training, a veteran is assisted in securing and maintaining satisfactory employment. Handicapped persons eligible for specialized vocational training or special restorative training under Chapter 35, Title 38, U.S.C., may also receive certain similar services and assistance.

Vocational rehabilitation training was provided to 28,666 veterans during FY 1980, continuing a slight downward trend (31,018 in FY 1978, 29,470 in FY 1979).

Significant accomplishments during FY 1980 in the vocational rehabilitation program include development of more intensive outreach, motivation and employment assistance policies and procedures, and a new job description and staff development program for the vocational rehabilitation specialist.



A series of three Central Office directed staff training sessions were conducted during FY 1980. Approximately 120 counseling psychologists and vocational rehabilitation specialists participated in the training which focused on current techniques of evaluation, counseling, and rehabilitation of seriously disabled veterans.

Case Management

During the year, the agency instituted a case management program to insure a continuous, coordinated, and comprehensive rehabilitation program in both medical centers and regional offices. The case management program identifies members of a core team who can best deliver comprehensive rehabilitation services. The team, with flexible membership to meet the veteran's needs, serves as the primary means to monitor and direct the integrated rehabilitation process. The veteran participates as a team member in establishing a goal and a plan to achieve it. This coordinated, multi-disciplinary approach will assure use of all applicable VA and community resources in the delivery of rehabilitative services to veterans.

Task Force on Rehabilitation

In January 1980 the VA Rehabilitation Task Force Report was transmitted to the Administrator. After considering the findings and conclusions of the July 1979 VA Rehabilitation Conference regarding improvements in the VA's program, the Task Force developed an agency-wide plan for implementation of the VA's concept of comprehensive rehabilitation by integrating conference conclusions, ongoing efforts, and recommendations from previous studies into a comprehensive plan for rehabilitation. This plan systematically outlines implementation strategies, timetables, budgetary projects, and impact analysis.

Career Development Centers

Increased employment assistance is being provided through the VA Career Development Centers (CDCs). The CDCs are designed to be vital links in expanding personalized career and job assistance service to Vietnam era veterans who are disabled, educationally disadvantaged, or in need of readjustment counseling, and other veterans and beneficiaries in need of such help. Expanding upon an initiative begun in FY 1978, CDCs are now operational in regional offices in 21 major cities and authorized centers will expand to an additional 16 locations during the coming year.

New Legislation

Public Law 96-466 updates and expands the vocational rehabilitation program by significantly amending Title 38, U.S.C. Beginning in FY 1981, the purpose of the program will be expanded to provide services and assistance which will enable service disabled veterans to achieve maximum independence in daily living, to become employable, and to obtain and maintain suitable employment. While services currently provided during training are retained, significant changes lengthen the basic period of eligibility from nine to 12 years, liberalize conditions for extension of eligibility, provide a 17 percent increase in subsistence allowance, require a finding of employment handicap as a condition of basic entitlement, and increase the limit for a no-interest revolving fund loan.

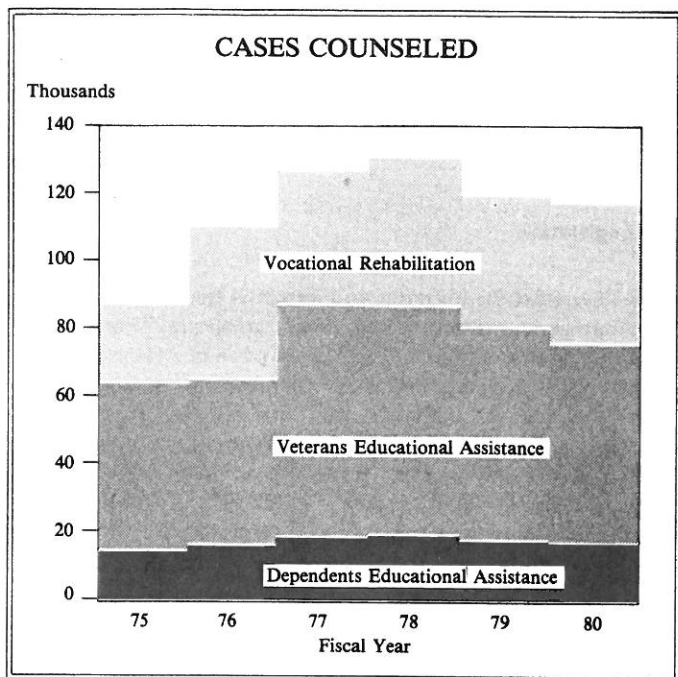
In addition the VA will provide, when necessary, a period of extended evaluation to determine potential for rehabilitation, to determine the existence of a serious employment handicap, and to improve the veteran's ability to pursue a vocational rehabilitation program. The VA and the veteran will develop a written individualized rehabilitation plan which describes the rehabilitation objectives and the means by which to achieve them. The VA will also provide employment assistance for service disabled veterans who have participated in rehabilitation programs under VA auspices or under the Rehabilitation Act of 1973 and will cooperate with the Department of Labor in promotion of employment and job training opportunities. A program of independent living services and assistance for the severely disabled veteran will be possible under the new law when a vocational goal is not reasonably feasible. Planning will begin during FY 1981 for such a pilot program.

Counseling

The educational and vocational counseling program, authorized under Chapters 32, 34, 35 and 36, Title 38, U.S.C., assists veterans, servicepersons, and other eligible persons to select and plan programs of education or training. Counseling services may be requested or, under certain conditions, required prior to initiation or continuation of benefits. Counseling was provided primarily by VA counseling psychologists, supplemented by fee-basis contract guidance center personnel.

In FY 1980, 117,030 beneficiaries were counseled under all programs. This 2.5 percent decrease from the previous year was the second consecutive year of decline following

four years of growth. The trend in counseling cases over the past six years is shown in the accompanying chart. The vocational rehabilitation program accounted for 41,099, or over 35 percent of all counseling cases during FY 1980.



**Note: Only seven post-Vietnam era veterans educational assistance trainees were counseled during FY 1980.*

Under the GI Bill program, 59,200 veterans were counseled, 51 percent of all cases. Counseling is available to eligible veterans and servicepersons upon request and, in FY 1980, was generally required prior to reentrance following unsatisfactory progress or conduct, and prior to a second or subsequent change of program. These provisions for mandatory counseling are eliminated effective the beginning of FY 1981. Post-Vietnam era (Chapter 32) veterans and servicepersons could not request counseling during FY 1980, but counseling was required in circumstances similar to the GI Bill program. As relatively few of these veterans were in training, only seven Chapter 32 counseling cases were seen during the year.

Counseling requested under the GI Bill increased in the latter half of FY 1979 as a result of a direct mailing campaign to recently discharged veterans, but the increase was not sustained through FY 1980. Although the first half of FY

1980 showed a marked increase in cases counseled over a similar period in FY 1979, the last two quarters showed an equally dramatic decrease. The accompanying chart clearly shows the success of the campaign, which began in May 1979 and continued through a final mailing in November 1979.

GI Bill Counseling Requested			
	FY 1980	FY 1979	Percent Change
October	4586	2923	+57
November	3482	2163	+61
December	2640	2491	+6
January	3866	2116	+83
February	3702	2402	+54
March	3388	2636	+29
April	2209	2113	+5
May	2132	3376	-37
June	2105	4278	-50
July	2285	4254	-46
August	2626	4735	-45
September	2514	4104	-39
Totals	35,533	37,591	-5

Under the survivors' and dependents' educational assistance program, 16,724 dependents were counseled, decreasing approximately 5 percent from the previous year, while accounting for 14 percent of all cases seen. Counseling is provided upon request from any eligible dependent (child, spouse, widow, or widower). In FY 1980 counseling was required for dependent sons and daughters prior to training, unless they had been accepted for or were pursuing a college-level program at an approved institution, and under certain other circumstances. Mandatory counseling for dependents will be terminated at the beginning of FY 1981.

Counseling services were available at over 300 locations including 58 VA regional offices, 45 decentralized VA offices, and 209 contract guidance centers. The number and geographical dispersion of guidance centers and VA counseling offices make counseling more readily available and accessible to eligible veterans and dependents. Approximately 63 percent of all counseling cases during FY 1980 were completed by VA counseling psychologists. Over 90 percent of those provided counseling for vocational rehabilitation in FY 1980 were seen by VA staff. Only limited funds will be available in FY 1981 for fee-basis contract guidance center services. Some additional decentralized VA counseling offices may be established, if needed, to provide continuity of necessary services.

National Cemetery System

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National Cemetery System

Comparative Highlights

	FY 1980	FY 1979	Percent Change
Interments in national cemeteries	41,120	39,248	+ 4.8
Applications for headstone/markers	274,235	254,833	+ 7.6
Canceled	37,352	24,212	+ 54.3
Headstones/markers ordered	230,703	230,600	---
National cemeteries	51,973	42,800	+ 21.4
Private cemeteries	178,730	187,800	- 4.8
Replacement headstones/markers	13,058	6,838	+ 91.0

Summary

The Department of Memorial Affairs (DMA) is responsible for the National Cemetery program, the Headstone and Marker program, the Memorial Marker and Plot program, and the State Cemetery Grants program.

In FY 1980, DMA accomplished over 41,000 interments and ordered nearly 231,000 headstones and markers for the unmarked gravesites of eligible persons. Applications totaling \$2 million were submitted by four states for grant assistance and two grants were awarded. Among the other significant events that took place during the year were the following:

- Completion of the initial phase of construction at the Massachusetts National Cemetery. Interments will commence in early FY 1981.
- Completion of an in-depth study evaluating alternative interment methods for national cemeteries.
- The beginning of negotiations with the Department of the Army to transfer responsibility for the post cemetery at Fort Richardson, Alaska, to the VA.
- Transferred responsibility for Perryville National Cemetery to the State of Kentucky.

At the end of FY 1980, the National Cemetery System consisted of 107 cemeteries totaling over 8,200 acres, two tentative regional sites, and 33 soldiers' lots and plots total-

ing 20 acres. Nearly 3,000 acres of land have been developed for burials, with gravesites available in 57 national cemeteries. There were approximately 148,000 gravesites available for burials in existing cemeteries, and 72,000 reserved gravesites. Potential gravesites, including undeveloped acreage in five cemeteries not yet open for interments, totaled over two million.

Construction Projects

The FY 1980 construction program included five major and three minor construction or development projects at eight national cemeteries, as shown in the accompanying table.

National Cemetery	Project	Cost (In thousands)
Region IV	Develop 50 acres for interments and administration and service buildings (Phase I)	\$3,385
Region V	Develop 11.5 acres for interments and administration and service buildings (Phase I)	4,000
Riverside	Develop 45 acres and first unit of columbarium	2,570
Fort Sam Houston	Design and develop 31 acres and relocate utilities	1,832
Jefferson Barracks	Design and develop 40 acres (Phase II)	775
Fort Gibson	Design and develop 5 acres	270
Lebanon	Design and develop 2 acres	80
Biloxi	Design and develop 4 acres	186
		<u>\$13,098</u>

The first phase of a three-year project to provide barrier-free access to public buildings in existing cemeteries was completed during FY 1980. Design criteria and directives have been established to provide barrier-free access in all new cemetery design and construction. The conceptual approach is to omit barriers by design rather than to make special adaptations to overcome them.

During FY 1980, the Department of Memorial Affairs initiated surveys to evaluate the energy efficiency of all structures within the national cemetery system. These

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studies will result in modifications to existing structures and systems to enhance fossil fuel efficiency. Presently in the design stage are passive solar heating and cooling systems which will be installed at Leavenworth National Cemetery. Energy conservation continues to be a prime consideration in the design of all new structures.

Headstones and Markers

The VA administers the largest program of its kind in the issuance of government headstones and markers for the graves of eligible veterans and their dependents. Of the monuments distributed this fiscal year, 77 percent were shipped for placement in private cemeteries in the U.S. The remainder were placed in VA national cemeteries, Department of Defense cemeteries, and private overseas cemeteries.

The Quality Assurance Activity in the Monument Service assured that government monuments conform to strict standards. Inspectors look at all headstones and markers and reject approximately 10 percent for inscription errors. This practice not only saves money but also avoids many complaints.

During the past fiscal year, 274,235 original applications were received. Of this number, 37,352 were canceled either for ineligibility or for duplicate applications; 230,703 resulted in orders placed with nine contractors. Replacement orders showed a significant increase (91 percent) as a result of a program of upgrading illegible and damaged markers in the National Cemetery System.

The total cost, including shipping charges, of the headstones and markers ordered during FY 1980, was \$11,306,596. The average cost per monument was \$49. There were 118,861 bronze markers cast and 111,842 stone headstones and markers manufactured. There were

Type Headstone/Marker	Number Ordered	
	FY 1980	FY 1979
Total	230,703	230,600
Upright marble	44,821	39,668
Fiat marble	8,056	9,544
Fiat granite	58,661	64,972
Fiat bronze	118,861	116,342
Niche covers	200	--
Special purchase orders	104	74

also 104 special purchase orders which represent commemorative bronze plaques for various sites in national cemeteries. During recent years, there has been an increasing demand for bronze markers over marble and granite. This trend is illustrated in the accompanying table which shows orders for the last two fiscal years.

The past fiscal year saw over 2,400 markers shipped to destinations outside the continental U.S. The accompanying table shows these overseas destinations. Each such shipment requires complicated transportation arrangements often made through embassy offices.

Destination	Number	Destination	Number
Alaska	87	Hawaii	324
American Samoa	7	Ireland	9
Australia	1	Italy	3
Guyana	1	Jamaica	1
British West Indies	2	Japan	3
Canada	29	Mexico	4
Canal Zone	5	Norway	2
Central America	1	Philippines	786
Costa Rica	1	Puerto Rico	1,083
Cuba	31	Virgin Islands	15
England	2	Yugoslavia	1
France	1		
Germany	10		
Guam	20	TOTAL	2,429

Two major events affected the processing of headstones and markers during fiscal year 1980.

- VA is now providing niche markers for Arlington National Cemetery, where a new 5000-niche columbarium section was recently opened. This is the first section of what will eventually be 50,000 niches.

- An on-line visual display terminal (Target) is being used in Central Office to speed up inquiries concerning eligibility and to supply information omitted from application forms. Prior to installation of this terminal, a much slower teletype was relied upon.

State Cemetery Grants Program

The VA's relationship to state veterans' cemeteries is based on a Federal assistance program to aid any state in establishing, expanding, or improving veterans' cemeteries owned by it. In FY 1980, the VA received five applications

totaling \$2 million from four states; two grants were awarded. The accompanying table provides details on these applications.

Location	Project	Grant (Thousands)	
		Request	Award
Illinois Quincy	Construct roadway	\$ 60	\$ 60 ¹
Maine Augusta	Cemetery improvement/ expansion	330	
Maryland Cheltenham	Construct admin. bldg. and chapel	402	
Crownsville	Site development; construct admin. bldg.	593	
Eastern Shore	Construct chapel and storm drainage system	163 ²	163
Rocky Gap	Construct admin. bldg. and chapel; repair drainage	277 ²	277
Rhode Island Exeter	Cemetery improvement/ expansion	600	

¹Conditional approval

²Request made in FY 1979



*Dedication of VIETNAM TABLETS OF THE MISSING
at the National Cemetery of the Pacific, Honolulu,
Hawaii, May 30, 1980.*

Administration and Management

Administration and Management

Comparative Highlights

Item	FY 1980	FY 1979	Percent Change
Total appropriations (millions)	\$ 20,552	\$ 19,901	+ 3.3
General Operating Expenses	612	632	- 3.2
Benefit programs	13,531	13,158	+ 2.8
Medical programs	6,015	5,660	+ 6.3
Construction programs	395	452	-12.6
Total Employment	228,285	226,084	+ 0.1
Minority (full-time) ¹	63,096	59,694	+ 5.7
Women	119,823	116,654	+ 2.7
Veterans' preference	85,164	87,130	- 2.3
Vietnam era veterans	41,091	38,805	+ 5.9
Disabled veterans	13,697	13,601	+ 0.7
Records holdings (thousands of cubic feet)	1,449	1,487	- 2.6
Forms and form letters	11,516	12,177	- 5.4
Appeals filed	63,700	61,097	+ 4.3
Appeals disposed of	56,790	55,127 ¹	+ 6.6
Appeals allowed	13,418	13,921	- 3.6

¹Adjusted from figure reported last year due to change in counting method.

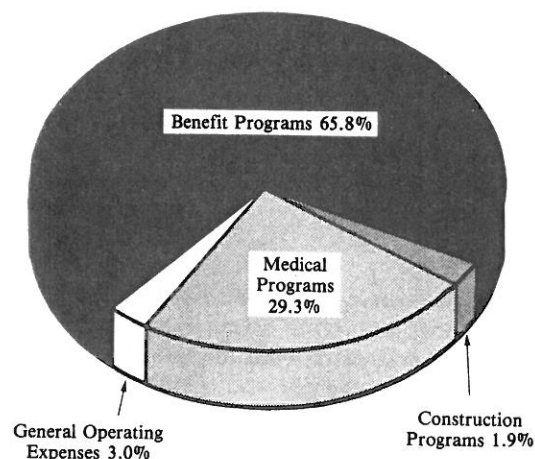
Agency Funding

Congress appropriated \$20.6 billion in FY 1980 to fund benefits and services administered by the VA. This represents an increase over FY 1979 of more than \$650 million. Most of this increase was for medical programs. While new budget authority for construction decreased in FY 1980, construction obligations increased over the previous year by \$144.8 million, or 46 percent.

Monthly compensation and pension benefits paid to some 5 million veterans and survivors in FY 1980 totaled \$11.2 billion, an increase of \$700 million over FY 1979. During FY 1980, a rate increase of 9.9 percent was provided under both the compensation and pension programs, and 146,100 cases were transferred to the improved pension program.

More than \$6 billion was appropriated for medical care and treatment of veterans in 1980, an increase of \$356 million over 1979. Medical and prosthetic research efforts to improve the delivery of health care to veterans and to improve the treatment of the disabilities and diseases most common to veterans were funded by a \$126 million appropriation in 1980. Inpatient care and treatment were provided to over 1.3 million veterans in 1980 and over 17

VA FY 1980 APPROPRIATIONS



million outpatient care visits were made. The increased medical workloads were manageable due to a reduced average inpatient census as VA hospital turnover rates increased and lengths of stay became shorter in 1980.

Staffing Management

The VA continued during FY 1980 to improve methods for relating staffing, workloads, and program impacts in the budget process. Highlights included establishment of manpower offices in major VA activities, further refinement of a medical manpower tracking system, and effective utilization during the year of an agency-wide full-time equivalent employment (FTEE) ceiling management system for monitoring staffing levels.

Analyses of staffing requirements were strengthened through the development by the Office of Manpower Programs of methodologies to assist departments and staff offices in determining personnel resource requirements in the budget development process. In addition, forecasts of workloads and staffing were improved through integration of budget information with data used in the Federal Productivity Management Project (FPMP). Revised productivity indicators for several major VA activities were incorporated into FPMP reports, and



for the first time, regular reporting of productivity results were included in ongoing top management reports.

Manpower offices were established in the Departments of Medicine and Surgery (DM&S), Veterans Benefits, and Memorial Affairs, and in the Office of Data Management and Telecommunications, to design and operate staffing management systems which facilitate the distribution of staffing among shifting workloads. These offices also assist in the management of employment ceilings.

Funding was obtained to continue development of the DM&S manpower tracking system. This project entails development of an automated system to relate workloads to personnel levels, and to provide comparative hospital data which can be used by resource managers. Various tests support the feasibility of designing a usable staffing management tool. Primary emphasis during the year was on identification of workload indicators for the various hospital activities which could be productively incorporated into the system.

During the last two years, the VA was one of five agencies testing the use of FTEE ceilings. A government-wide decision was made to convert all agencies to FTEE ceilings in FY 1982. The VA has been successful in applying FTEE ceilings, and during the year, provided assistance to other agencies preparing to make a transition to the new ceiling system.

Personnel Management

During FY 1980, the VA's Office of Personnel continued giving priority attention to effective and timely implementation of the letter and spirit of the Civil Service Reform Act. A significant portion of this activity concerned the Senior Executive Service (SES).

It was during FY 1980 that many individual components of SES were implemented, and the potential of the new system began to be realized. Among the most important accomplishments was strengthening the role of program managers in executive personnel management. This was achieved by actively involving the Executive Resources and Performance Review Boards in policy development and in cases involving individual SES positions and incumbents. Other achievements included:

- Refinement of SES staffing procedures and appointment of over 50 new career senior executives.

- Implementation of a comprehensive performance appraisal system and completion of individual performance evaluations for 205 senior executives.
- Granting SES bonuses to 41 career executives for superior performance as documented through the performance appraisal system.
- Presidential recognition of one VA employee as a Distinguished Executive and of six others as Meritorious Executives.
- Development of the SES Candidate Development Program and selection of participants.

Revised incentive awards policies and procedures were established in FY 1980 to support the Civil Service Reform Act. For example:

- Awards for sustained superior performance are linked to performance appraisal systems.
- Proper use of the incentive awards program must be considered when supervisors and managers are nominated for a superior performance award.
- Correlation has been established between the awards program and achievement of national and agency goals and objectives.

Other significant related actions taken during 1980 included:

- Identifying merit pay employees.
- Holding orientation sessions on the merit pay system for field personnel officers.
- Negotiating agreements with the Office of Personnel Management (OPM) for the delegation of a variety of personnel management authorities to the VA and then redelegating a number of authorities to lower level management.

FY 1980 saw the enactment on August 26, 1980, of Public Law 96-330, the VA Health Care Amendments Act. This new law contains major changes affecting pay and other personnel authorities under the Title 38 personnel system for physicians, dentists, nurses, and certain others in VA health care occupations. It also establishes a VA Health Care Scholarship program and places increased emphasis

accompanying table shows the numbers of various health care professionals on the rolls at the end of the two fiscal years.

The VA continues to make full use of the Veterans Readjustment Appointment (VRA) extension provisions of Public Law 95-520 which gave greater flexibility in hiring VRA eligibles. The VRA authority allows eligible Vietnam era veterans to be hired directly, then serve a two-year period during which they also pursue training or education. Following successful completion of these requirements, VRA appointees may be converted to competitive civil service status. The 59,073 Vietnam era veterans hired by the VA under this authority since it was established in April 1970 represent more than a third of

Phasing in continued development levels regarding organizational structure. 1,062 man year. In accordance with the Guide was assist individual approaches needs. All incumbents

1979
Part-Time
4,162
32
55
40
2,063
57
50
-

the VRA appointments made throughout the Federal government.

By hiring over 7,500 under this authority during the past year, the VA exceeded the FY 1979 total by more than 1,200 hires. The VA ranks first among Federal agencies in the use of the VRA authority. Those converted to competitive status in this fiscal year numbered 1,836, for an overall total of nearly 17,500 conversions since the program began. To help meet short-term staffing needs, the VA temporarily employed 4,515 Vietnam era veterans in FY 1980.

The Civil Service Reform Act authorizes Federal agencies to employ veterans with service connected disabilities of 30 percent or more noncompetitively in positions for which they qualify. Although this authority is still relatively new, the VA has hired 403 veterans under this program. Training and work experience were also provided to 78 disabled veterans and 15 were converted noncompetitively to career-conditional appointments under civil service regulations during the fiscal year.

Because of the nature of VA's mission in serving veterans, a sizable number of Vietnam era veterans serve in VA jobs where they meet, work closely with, and provide services to other Vietnam era veterans and their families. About 62 percent of veterans benefits counselors are Vietnam era veterans, as are 42 percent of the veterans claims examiners. Vietnam era veterans also account for over half of all prosthetics representatives, 42 percent of the vocational rehabilitation specialists, and 21 percent of the medical technicians. Among the first VA representatives a patient encounters are the medical administrative assistants serving in medical center admission areas, 27 percent of whom are Vietnam era veterans.

Executive Development and Training

Initiatives for meeting Civil Service Reform Act requirements for executive development continued with the selection of 37 men and women for the VA's first Senior Executive Service Candidate Development Program (SESCDP) class. After completion of this intensive part-time program these individuals will form a cadre from which selections for future agency leadership positions can be made. Although the Health Care Amendments Act removed medical center directors from the SES, an administrative decision was made to employ the SESCO in the identification and preparation of high potential aspirants for these positions as well.

Phasing in of other elements of the Four-Tier System continued during FY 1980. This system addresses the developmental needs for managers and executives at all levels regardless of occupational specialty or organization. A total of 31 training programs, reaching 1,062 management officials, were conducted during the year. In addition, an Individual Development Planning Guide was prepared for distribution within the agency to assist individual employees to identify and map out approaches for meeting their unique developmental needs. Although directed mainly at SES candidates and incumbents and others who are required by OPM or VA

policy to have individual development plans, the use of IDP's is encouraged for other employees motivated toward self-development.

Labor Management Relations

Approximately 165,000 VA employees are represented by unions. During FY 1980 there was an increased movement toward the consolidation of local units by several unions holding exclusive recognition with the VA.

VA has concluded bargaining with the National Association of Government Employees (NAGE) on a master agreement which covers a consolidated unit of over 10,000 nonprofessional employees and provides for supplemental agreements addressing local issues. We expect to begin negotiations in FY 1981 for a second master agreement covering the approximately 600 professional employees who comprise the other NAGE consolidated unit.

Negotiations with the American Federation of Government Employees (AFGE) for a master agreement covering consolidated units of approximately 119,000 employees are also scheduled to begin in FY 1981. The AFGE consolidation subsumed approximately 260 local units; the non-professional AFGE unit is now the largest single unit in the Federal government.

Two other labor organizations, the National Federation of Federal Employees (NFFE) and the Service Employees International Union (SEIU), have petitioned the Federal Labor Relations Authority for consolidation of their local units of recognition into national bargaining units.

Twelve additional labor organizations represent other VA employees at local field facilities and nearly all unionized VA employees are covered by negotiated agreements.

Employee Recognition

Extraordinary service to veterans and reduction in the cost of government operations were recognized through VA's incentive awards program.

The Administrator's "Hands and Heart" award was established to honor the outstanding employee in each VA medical facility exemplifying sustained and compassionate direct patient care. A specially designed name bar with a sterling silver symbol was awarded to 152 individuals chosen by their facilities for providing the best in patient care.

The second annual Olin E. Teague Award for achievement in the rehabilitation of war-injured veterans was presented to Leigh A. Wilson, Chief, Orthotic Laboratory, VAMC San Francisco. Mr. Wilson received the award for the design and development of devices for veterans with unusual orthopedic or prosthetic disabilities.

The VA's annual Sam Rose Awards are presented to recognize exemplary assistance to veterans and their beneficiaries in obtaining veterans benefits. Chris Willis,

Technical Assistant, Medical Administration Service, VAMC Sepulveda, whose job is investigating and resolving patient complaints, was honored for her great concern, excellent judgment, integrity, and deep compassion in helping veterans and their families. John V. Wilkes, Assistant Veterans' Services Officer, VARO Cleveland, was recognized for developing a special program to bring VA benefits to the attention of older veterans and their dependents.

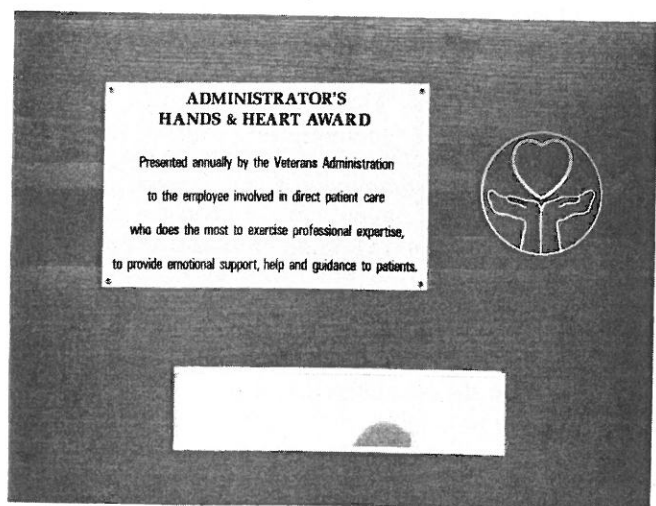
The Air Force Association Award to a VA employee for significant contributions to the mission of the agency, was received by Chief Benefits Director Dorothy Starbuck. Carol Roy, Social Worker, VAMC Iowa City, received the Excalibur Award given by Representative Michael Barnes for establishing innovative model programs to improve the quality of life of renal patients. Both women are veterans.

Dr. Yeongchi Wu, Assistant Chief, Rehabilitation Medicine Service and Harold J. Krick, Corrective Therapist, VAMC, Chicago (Lakeside), who received the largest agency award for an employee suggestion last fiscal year, were further honored for their improvements in treating below-the-knee amputations, when they were chosen to receive Presidential Management Improvement Awards.

Suggestions and achievements by VA employees saved the Federal Government more than \$4.2 million. Awards for these contributions totaled more than \$200,000.

Personal letters from the President were received by 56 employees for achievements which saved \$5,000 or more. Of the more than 11,000 suggestions received, 3,770 were adopted.

Top performance and special contributions were also recognized when 6,000 employees received quality increases and 8,900 others were awarded special achievement awards.



Equal Employment Opportunity

Confirming the agency's support for the principles of equal opportunity, the VA's Statement on Human Goals

declares, "We of the VA must continually strive to serve our veterans and their dependents and survivors with compassion, competence, and sensitivity; and to pledge fair and equitable treatment for our employees and volunteers."

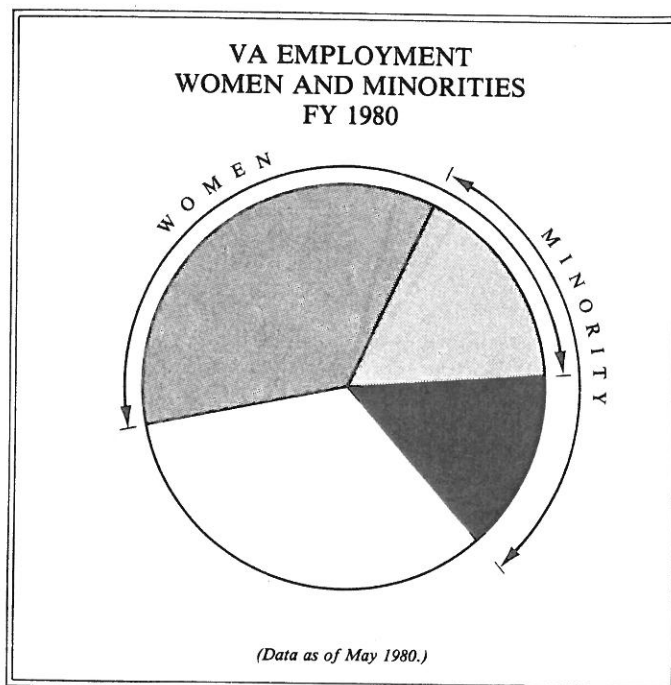
Minority Employment

During FY 1980, the total full-time employment of minorities in the VA increased from 30.3 percent to 30.9 percent. Blacks made up 25.8 percent of the work force; Hispanics, 3.1 percent; American Indians, 0.2 percent; and Orientals, 1.8 percent. Total full-time employment throughout the VA increased by 3.6 percent, while employment of minorities increased by 5.7 percent. Minority women constituted 16.6 percent of the work force; minority men, 14.3 percent.

In the VA minorities accounted for 27.5 percent of all employees in General Schedule and equivalent positions in FY 1980. Minorities were generally well represented among Title 38 positions with 19.7 percent of the nurses, 19.2 percent of the physicians, and 3.5 percent of the dentists. In all instances, these figures represent increases from the previous year except dentists which remained the same. Minority employment under the wage system increased from 46.2 percent to 46.4 percent.

Agencywide, minorities accounted for 32.4 percent of the accessions, 29.2 percent of the promotions, and 31.6 percent of the separations during the past year.

Advances were realized by minorities at all except the highest grade levels (GS-16-18). At the GS-9 level and above, 16.8 percent of the work force were minority employees, up 1.0 percent from the previous year. At GS-15 and equivalent, 16.1 percent were minorities, up 0.6 percent from FY 1979.



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Minorities held 20.7 percent of all VA supervisory positions and their average grade remained 6.0 in FY 1980. Minorities were represented in several top policy-making and managerial positions in the VA. For example, a minority member served as Assistant Administrator for Human Goals and later as Assistant Administrator for Personnel. A total of 12 minority members served as directors of field facilities and 4 were assistant directors.

As of May 1980, 31.1 percent of veterans employed by the VA were minorities: 26.1 percent black, 3.9 Hispanic, 0.3 American Indian, and 0.8 Oriental. Among the Vietnam era veterans, 32.8 percent were minorities: 26.5 percent black, 5.0 Hispanic, 0.3 American Indian, and 1.0 Oriental.

Employment of Women

The VA is a leader in government in providing equal employment opportunity for women. As of June 30, 1980, total employment of women in the VA was 124,707 or 52.0 percent. Total part-time employment was 29,286 of which 12,295 or 41.9 percent were women.

At higher grade levels, GS-12 and equivalent and above, 3,855, or 19.4 percent of these positions were occupied by women. Latest available statistics show women in 8.7 percent of these positions throughout government. Women occupy 1,674 or 13.1 percent of all full-time positions in grades GS-13 through 15 and equivalent. The government-wide figure is 6.4 percent.

Two major CO staff offices are headed by women, and during FY 1980, a woman was chosen to head the newly created Consumer Affairs Staff. Currently, VA's Federal Women's Program Manager has been chosen to be a member of the Interdepartmental Task Force on Women which advises the President and Cabinet members of the impact on women of Federal policy decisions, legislation, and programs.

A variety of high-level and policymaking positions are occupied by women in the Departments of Medicine and Surgery and Veterans Benefits. Women constitute 7 percent of VA's total employment of physicians. The Chief Benefits Director is a woman, as is the Director of the Washington Regional Office. In addition, five women serve in the Senior Executive Service (SES), and 21 as personnel directors at VA field stations.

Part-time employment of women continued at a high rate in a wide range of professional, administrative, and technical positions in various occupational specialties and at many grade levels.

Employment of Disabled Veterans and Handicapped Individuals

The VA is strongly committed to the hiring, placement, training, and advancement of disabled veterans and other handicapped persons. In addition to internal program initiatives, the VA also participates in and actively supports the employment-related activities of state, county and municipal organizations to broaden and

strengthen the agency's efforts toward full employment for disabled veterans and handicapped individuals. VA's FY 1980 affirmative action efforts emphasized employment of severely disabled individuals.

As of September 30, 1980, handicapped employees made up 10.9 percent (25,023) of the VA's total work force; 5.7 percent of those handicapped were disabled veterans. During FY 1980, handicapped VA employees received over 2,400 promotions, 579 quality increases, more than 100 outstanding performance awards, and over 100 other special advancements. A VA employee was honored as one of the ten Outstanding Handicapped Federal Employees of the Year.

One of the agency's priority projects is the removal of architectural barriers from VA buildings. Primary projects undertaken during FY 1980 included establishment of appropriate parking areas for handicapped individuals, installation of curb cuts and ramps, modification of entrance doors and rest rooms, and installation of directional signs. Other projects included the installation of non-skid surfaces on stairs and floors, modification of water fountains, and modification of elevators for handicapped individuals.

The VA maintains active liaison with veterans' organizations in the rehabilitation and employment of disabled veterans, and maintains membership on the Interagency Committee on Handicapped Employees, providing full support for the achievement of their objectives. VA also maintains contact with state rehabilitation agencies, state employment services, Selective Placement Specialists in the Office of Personnel Management's area offices, schools for disabled persons, campus organizations of disabled students, and other organizations of and for disabled persons.

Automatic Data Processing

Virtually all VA beneficiaries are affected by the agency's extensive computer network and related facilities. To improve timeliness and accuracy of service, efforts are continuing to replace older computer systems with newer equipment and methods. Most prominent is the continued development of the VA's Target system and an upgrade of the Beneficiary Identification and Records Locator System (BIRLS).

During FY 1980, the second phase of Target implementation was completed, giving all regional offices (except Manila) the capability to process original and supplemental awards for compensation, pension, and education (CP&E) claims. The implementation of this phase will greatly expedite claims processing. During FY 1981 the capability to process Chapter 32 education claims will be added. Work is continuing to reduce the amount of information an operator must input to complete an award action.

The Beneficiary Identification and Records Locator System (BIRLS) located at the Austin DPC is interfaced with the Target system for on-line inquiry purposes. Because of projected increases in the nationwide workload for

BIRLS, an upgrade of computer equipment on an interim basis was completed in FY 1980. The redesign of BIRLS will continue through 1984.

The preliminary study for conversion of the insurance system for processing on Target equipment was completed in FY 1980. The redesigned system is scheduled for installation in FY 1984.

A facility for centralized systems development, close to the Austin DPC, was approved in 1980. This facility, which will be known as the Central Development Center, will allow maximum use of personnel resources for the development of redesigned and new systems. It will permit an accurate assessment of the relationship among VA systems and information resources as a primary step toward the development of an agency-wide data base.

The VA operates data processing centers in processing financial, CP&E, insurance, construction, medical, and other applications. By closing the Washington DPC in 1980, the VA reduced the number of such facilities from six to five. Systems processed at Washington were transferred to the Austin DPC.

Computer System Improvements

Efforts continued through FY 1980 to increase the effectiveness of the VA's data processing centers through additions, enhancements and hardware changes. The most significant of these efforts was closing the Washington DPC and the transfer of its functions to the Austin DPC. This was accomplished by the end of FY 1980 and represented a cost-effective consolidation measure. The medium-scale computer at the Washington DPC was moved to Philadelphia to support insurance processing. Also in FY 1980, a large-scale computer was transferred from the Hines DPC to Austin to support BIRLS.

The replacement of old data storage equipment with modern cost-effective devices at the Austin and Hines DPCs was started in late FY 1980. Significant performance improvements and cost savings are expected.

A second successful Computer Systems Analyst Trainee Program was conducted during the early part of FY 1980. After a five-month training period, the trainees were placed within Central Office as entry level computer systems analysts.

Procurement and installation of Uninterruptible Power Supply systems continued at VA computer sites to protect against electrical damage and to minimize computer disruptions. The Austin, Hines, and Philadelphia DPCs have full-scale systems in operation, with diesel generators included at Austin to supply electricity during commercial failures. Design efforts are underway to upgrade the system at Hines by including back-up diesel generators. In addition, procurement activities have been initiated to improve the existing system at the Los Angeles DPC.

In the continuing effort to improve project management capabilities, senior and mid-level VA project managers

were trained in the use of the System Development Methodology/70. Trainees included both ODM&T and user project managers.

Medical Applications

Fiscal year 1980 has been one of significant increases in use of ADP technology at VA medical centers to support health care programs.

The Automated Clinical Laboratory System is installed at eight VA medical centers throughout the nation. All laboratory test results are entered on the patient's clinic profile, providing a history which is accurate, complete, and readily available for physician use. Four of these systems are also used to control scheduling of patient visits to clinics and admissions. During FY 1980, equipment was acquired for upgrading these sites; installation should be completed in FY 1981. The upgrades will permit four facilities to utilize automated clinic scheduling in addition to the clinical laboratory and admissions/dispositions capabilities.

The Automated Prescription Processing, Labeling, Editing, and Storage (APPLES) System is an on-line outpatient prescription processing system which has successfully eliminated large backlogs and significantly reduced patient waiting time at pharmacies in VA medical centers in the southern California region. During FY 1980, equipment was purchased to extend this capability to 18 medical districts which include over 150 VA medical facilities, and action was initiated to convert and enhance existing APPLES programs to run on this more modern computer equipment. Plans for FY 1981 call for initial implementation of the enhanced automated pharmacy system in two medical districts.

The Fee-Basis Medical and Pharmacy Program allows authorized veterans to receive medical services from non-VA individuals or organizations. The VA compensates participating members for services performed, and pays the veteran for travel expenses incurred for the visit. Fee-basis processing for 77 VA medical centers is centralized at the Austin DPC, where about 13,500 fee-basis transactions are processed daily.

Veterans Benefits Applications

The Department of Veterans Benefits also has many systems, both nationwide and local, many of which were improved during FY 1980 through redesign, reprogramming, and faster processing in third-generation computers.

The Centralized Accounts Receivable System (CARS) provides information on the status of compensation, pension, education, and loan guaranty accounts receivable. The system processes on a daily basis, and maintains data on over 500,000 accounts with a value in excess of \$500 million. Recent legislation could increase the size and scope of CARS, and interest charging, reactivation of uncollectible debts, increased litigation, and referral to commercial credit bureaus will necessitate

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program changes. Action is being taken to secure the increased computer capacity.

Other Applications

In order to deal with VA's growing construction program, greater emphasis has been placed on improved program/project scheduling and cost control. The Distributed Data Processing Systems installed for the Office of Construction's Management Information System (CMIS) supplies timely data from the CMIS data base, helping to control project schedules effectively and to alleviate cost overruns resulting from schedule changes. The capabilities of this system were evaluated during FY 1980 together with Office of Construction's ADP requirements as reflected in their five-year ADP plan. As a result of this evaluation, an upgraded distributed data processor was procured during FY 1980. The expanded processing and communications capability of this processor will permit accomplishment of an integrated cost-effective applications environment.

The Complaint/Compliment Reporting System was installed during the last quarter of 1980. This system provided the VA Consumer Affairs Staff with a mechanism for collecting, categorizing, and reporting on complaints and compliments received from VA's consumers (veterans, their dependents, and their families).

A computer system was procured for the Department of Memorial Affairs (DMA) Monument Service. The system will be developed to operate on a pilot basis in FY 1981, automating certain claims evaluation and procurement functions. It will also provide a cost/benefit base for determining whether a total Monument Service automation effort should be initiated in FY 1982. The computer will significantly reduce the time it takes to install a headstone/marker and to answer inquiries.

A micrographic application was initiated early in FY 1980 in the DMA Cemetery Service. Over one million records of interment have been microfilmed for security and locator purposes. The integrated use of micrographics and automation will provide better and faster service.

To implement the provisions of the Civil Service Reform Act (CSRA), the PAID System was modified to create a Senior Executive Service (SES) file. This file includes all information on the status of SES positions in the VA. It is used to create required reports, generate statistical information, and establish and update a continuing history record. Further systems modifications resulting from CSRA identify employees in a retained grade status. Modifications also included monitoring of time in a retained grade, and production of output documents which reflect payable grade, plan, and salary. These efforts include development of performance rating codes which will be used to determine the individual amount of the merit payment.

A Merit Pay Modeling Program was acquired from the Office of Personnel Management (OPM). The program, tailored to process on-line at the Austin DPC, creates a

Merit Pool and distributes it to the Merit Pay employees according to their status as to grade, step, and supervisory appraisal. It also compares these newly calculated pay rates to the pay increases that would have been received under the old system. By adjusting the numbers of employees, their placement by step, their supervisory appraisal, the point values of each rating, and the limit factor for an increase, different models can be produced.

The Race and Ethnic Data System (REDS) is being designed to comply with the Uniform Guidelines on Employee Selection Procedures and to implement and evaluate agency Federal Equal Opportunity Recruitment Program activities. The REDS will also be used as a tool to evaluate station and agency affirmative action programs, conduct research on personnel measurement and selection methods, and provide the basis for a legal defense of the above procedures should they be challenged in court.

Utilizing an enhanced ADP system, all critical Zero Base Budget (ZBB) ranking functions for FY 1982 were processed in the VA budget conference room in Washington by use of communication lines to computers. Magnetic tape was used to input the final results of the VA ranking sessions to the Office of Management and Budget (OMB) automated budget system. Magnetic tape was also used to input VA supplementary budget preparation schedules to OMB.

A terminal-oriented minicomputer system was installed at the Austin DPC to automate the input functions of the Centralized Accounting for Local Management system. This system has improved the efficiency and accuracy of financial information provided for monitoring station fiscal operations.

Telecommunications

Telecommunications play a vital role in VA and have become essential to carry out administrative and medical responsibilities. Areas such as telephone, nurse call communications, radio, and video systems already play a major role for the VA. In the future, communications specialists will have to increase their expertise in such area as laser and fiberoptic transmission, and active satellite systems.

Data Transmission

During FY 1980, the use of modern data communications facilities continued to play a vital role in providing expeditious service to veterans.

The VA is developing specifications for terminal systems and telecommunications facilities to support an automated pharmacy system in selected VA medical districts throughout the country. Each district pharmacy system will support local and remote VA medical centers and outpatient clinics with on-line medication information, prescription filling, and drug inventory.

Technical proposals from industry are being evaluated jointly by GSA and VA for replace-terminal system equipment and network facilities at all VA stations on the Advanced Records System which will greatly enhance transmission of data from VA facilities to data processing centers.

A computerized electrocardiogram (ECG) network was implemented in Medical District 20. This involves rapid transmission of ECGs from three VAMCs located in Texas to the computer base at VAMC Houston. This provides required analyses and diagnostic data and the compilation of cardiovascular statistics for medical research from nine other VAMCs located in eight states.

The VA Enrollment Program for patients was automated in Medical District 1. Minicomputers at six VAMCs have been interfaced by high speed data transmission circuits and have improved management and control of the Enrollment Program at the VAMCs.

A remote data communications network with its computer base at the VAMC Miami, involving three remote clinics, was installed in Medical District 12 to support the automated clinical laboratory system for outpatients. The use of visual display and printer terminals at outpatient clinics has expedited delivery of blood test results.

Data terminal systems were installed at 11 additional VAMCs during the year, allowing access to the computerized National Library of Medicine (MEDLINE) System. Through use of these terminals, which are interfaced with the MEDLINE data base at Bethesda, Maryland, VA physicians have immediate access to biomedical bibliographic citations necessary in the treatment of patients.

Telephone Service

Extensive efforts have continued to upgrade service and modernize obsolete telephone systems at VA facilities. Thirteen private branch exchange telephone systems were purchased, installed, and activated in VA medical centers during FY 1980. Contracts for replacement telephone systems were awarded for installation at an additional 13 VAMCs. Also, functional specifications were prepared to upgrade telephone systems and service at other VA locations.

Additional telephone facilities were installed to improve toll-free telephone service which enables veterans to call veterans benefits counselors located at VA regional offices for benefit information and assistance. These improvements involved both installation and changes of special telephone line terminal equipment. In addition, local foreign exchange lines and toll-free Wide Area Telephone Service (WATS) were instituted.

Telephone communications have provided for use of facsimile (FAX) equipment to reduce message delivery time and costs.

Broadband Integrated Telecommunications System (BITS)

To determine its applicability to the VA, considerable research and study was devoted to broadband telecommunication during the past year. Implementation of BITS will eliminate the need for dedicated cable and conduit networks for each separate telecommunications system, allowing equipment to be relocated simply by disconnecting a plug at one location and reinserting it elsewhere. Efforts in this new technological field will be intensified in the coming year.

Closed Circuit Television

VA has increased its use of closed circuit television for surveillance of all kinds, from security to observation of intensive care patients. With new lower cost and more sensitive television cameras and video recorders these systems are economical, making it likely that their use will continue to increase over the next few years. In a Central Office test facility the latest state-of-the-art television and other communications equipment are evaluated to meet VA needs at the lowest possible cost.

Radio

The popularity and demand for two-way radio systems has continued to increase during the past year. Of great significance has been the requirement for extended range.

In California an Emergency Command and Control Radio Network has been installed, providing all VA facilities there with a means of emergency communications outside the state in the event of a disaster. Similar systems are being considered for the Gulf Coast area, and another for the central part of the country from the Mexican to Canadian border. Both of these areas are subject to severe weather conditions that can disrupt normal means of communications.

Efforts are also underway to reduce the number of radio frequency allocations needed to meet our expanding radio requirements. This is being accomplished through careful planning for reuse of radio frequencies on a regional basis. This effort is also intended to provide maximum radio interact capability between VA facilities within a reasonable geographical area. Implementation of these plans will be accomplished through the normal equipment replacement cycle.

Nurse Call Communications

Nurse call systems installed in VA facilities are state-of-the-art audio-visual types which provide two-way voice communications between nurse and patient, and allow patients to receive and control television and radio entertainment through their pillow speaker/microphone. In each case, the nurse call system is designed to meet the special needs of the specific facility, assuring that all necessary features are provided, but saving the cost of unneeded options. Investigation of innovative ways to provide necessary nurse call service at reduced cost is continuing.

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Satellites

During the past year a study of satellites as a potential telecommunications medium for the VA was initiated. While results have been inconclusive, it was determined that an effective VA satellite system must have two-way capability, and carry more than just television broadcasts. Such a two-way system has great potential for data, television, facsimile, and semi-dedicated voice circuits. Our investigative efforts will continue in this area.

Supplies and Equipment

The VA Office of Supply Services renders supply support to the most extensive medical program in the Federal government. A marketing center, three supply depots and 172 supply services in VA medical centers furnish support to 300 VA and 700 other government installations throughout the U.S., the Republic of the Philippines, and the Commonwealth of Puerto Rico. The annual supply workload for FY 1980 is estimated at \$1.6 billion. About \$1.1 billion was expended for supplies and equipment for VA activities; \$429 million for utilities, equipment rental, and other contractual services; and \$33 million for supplies and equipment for other government agencies.

The Office of Supply Services operates a self-sustaining revolving fund without fiscal year limitation. This fund finances the depot and medical center inventories which, in major part, are purchased centrally at volume discounts. During FY 1980, the VA Marketing Center participated in procurements of \$522 million, resulting in an annual savings of \$114 million to serviced appropriations. Since FY 1975, total supply fund sales have risen 63 percent, an increase of \$166 million. Presently, the supply fund is operating with a net worth of \$188 million, supporting an average inventory of \$100 million at three depots and 160 medical center

warehouses. It also financed direct delivery purchases of \$73 million in FY 1980, including \$12 million for other government agencies. Yearly sales from FY 1975 through FY 1980 are shown on the accompanying chart. Support to other government agencies both in numbers of customers serviced and amount of stock sales, increased in FY 1980.

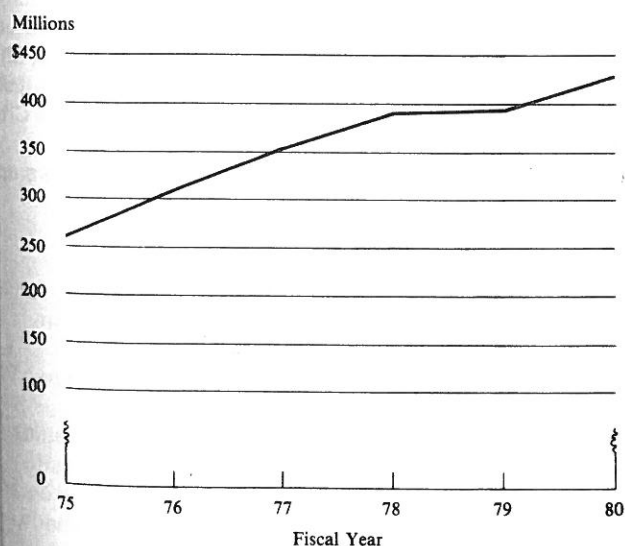
VA's equipment assets continued to increase dramatically in FY 1980 to a new high of \$1.3 billion. This increase of \$180 million during the year was due to continued requirements for state-of-the-art equipment, activation of new medical centers, and inflation.

VA Equipment Assets
September 30, 1980

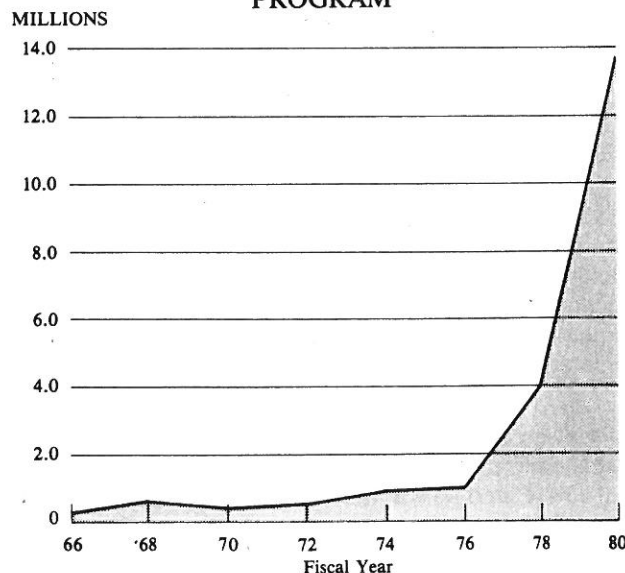
Equipment on Hand	Value (Millions)	Percent of Total
Laboratory	\$ 262.0	19.1
Dietetics, housekeeping, and laundry	76.8	5.6
X-Ray	278.4	20.3
Hospital furnishings and equipment	128.0	9.3
Medical, surgical, dental, and optical	253.6	18.5
Office machines	76.4	5.6
Furniture	15.7	1.2
Motor vehicles, tractors, firefighting, etc.	40.5	2.9
Communications	62.7	4.6
Recreational and athletic equipment	14.4	1.1
Maintenance and repair-tools and hardware	5.3	0.4
Refrigeration	18.0	1.3
All other	139.1	10.1
Total	\$1,370.9	100.0

The VA's precious metals recovery program continues to be effective in saving government money while conserving valuable natural resources. Silver is collected from x-ray processing solutions and scrap medical x-ray film used in VA medical centers. The program reached a

SUPPLY FUND SALES



INCOME FROM VA SILVER RECOVERY PROGRAM



high point in FY 1980, receiving nearly \$13.7 million from the sale of 209,000 troy ounces of silver bullion and 975,000 pounds of scrap medical film. This money was used to offset increased costs of inventory supplies.

The VA-Department of Defense (DOD) Shared Procurement Program is gaining momentum. Joint procurement of drugs and medical devices is already being accomplished with over \$119 million in contracts awarded to single-source firms to date. Although full implementation of the program is not yet a reality, both agencies have benefited by savings and cost avoidance of more than \$7 million.

The Council for the Uniform Procurement System, on which the VA serves, is assisting the Office of Federal Procurement Policy in developing a plan for the Uniform Procurement System. One element of the plan is the creation of a Federal Supply Management Council to be chaired by GSA with high level participation from DOD, the VA, and other agencies. The mission of this council is to implement the supply support and property management aspects of the Uniform Procurement System and to maintain the Federal Supply Management Regulation.

With the close of FY 1980, the Federal Procurement Data System (FPDS) completed its second year of existence. The VA automated system of data collection for the FPDS is now established and satisfying reporting requirements. When the FPDS becomes an integral part of a uniform government procurement system, it has the potential of surpassing the accuracy of all previous reporting systems, thus becoming a reliable tool for monitoring exceptions, analyzing trends, and projecting budgetary requirements.

The Office of Supply Services, which provides staff support to the Assistant Deputy Administrator in implementing OMB Circular A-76, is in the active process of identifying commercial and industrial activities which must be retained in-house for reasons other than cost. A schedule of these reviews is planned to be published in the *Federal Register* around the end of calendar year 1980.

Construction

The Office of Construction is responsible for the planning, design, and construction of new buildings, additions, and alterations, and for major repairs of existing buildings and structures at nearly 280 medical centers, domiciliaries, nursing homes, and over 100 cemeteries located throughout the U.S.

This office also is responsible for real property management which includes acquisition and disposal of real estate, and space management in VA facilities and those GSA facilities occupied by VA in either government-owned buildings or government-leased space.

Contracts

The VA's total construction obligations for FY 1980 amounted to \$461 million, the highest level in one fiscal year in VA history. Major construction projects, valued at \$253.6 million, were obligated as follows: phase II at the Bay Pines, Florida, replacement medical center; phase IV at the Martinsburg, West Virginia, replacement medical center; phase II at the Richmond replacement medical center; 120-bed nursing homes at Wilkes-Barre, Pennsylvania, and Atlanta; an ambulatory care project at Dallas; and an outpatient renovation at Washington, D.C.



Replacement Hospital, VAMC Bronx, New York

Five major architectural and engineering contracts amounting to \$6.2 million were awarded: the clinical support and improvements at Gainesville, Florida, and Denver; a spinal cord injury project at West Roxbury, Massachusetts; demolition at the Bronx; and an ambulatory care project at Amarillo, Texas.

Some of the major construction projects completed in FY 1980 are the Augusta, Georgia, and Columbia, South Carolina, replacement medical centers; the nursing home care projects at Columbia, South Carolina, and Hampton, Virginia; the air conditioning projects at Indianapolis, and Lebanon, Pennsylvania; the outpatient projects at Buffalo and Providence; and the seismic project at Salt Lake City. In addition, design work has begun on the Portland, Oregon, and Vancouver, Washington, medical centers and nursing home care projects.

Construction Research

The construction research and development program encompasses a wide range of architectural and engineering research and development projects in health care building technology. These projects are accomplished by contracts with private firms, educational institutions, other Federal agencies, or by the VA staff. Findings are incorporated in the VA construction program when appropriate, and reports are published and made available to the public.

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The 26 projects underway during FY 1980 involved fire safety design, electrical energy conservation, sound control, smoke control techniques, solar energy applications, and evaluation of new building materials and products.

Major research study projects completed during the year included test installations of boiler exhaust waste heat recovery systems, evaluation of pre-engineered metal partitions, test installation of a combined pollution control and heat recovery system, and evaluation of alternative interment methods for national cemeteries.

Energy Engineering

During FY 1980 the VA put seven new solar energy systems into operation. The 11 systems now operating achieve an estimated annual energy savings equivalent to 125,000 gallons of oil. This program will help us achieve the goals of Executive Order 12003, which calls for a 45 percent reduction in energy usage. The VA computerized building energy consumption program is indicating an average energy reduction of 35-40 percent nationally, using 1975 as a base year. This information indicates that we are on schedule toward meeting the 45 percent reduction goal.

The solar steam generation project at Albuquerque is nearing completion. Solar collectors that track the sun each day and concentrate its energy are producing steam to supplement that normally produced by gas-fired boilers.

A boiler stack gas heat recovery device is currently being installed on many existing boilers as the result of a successful research project at Albany VAMC. This device will also be used on all new boiler plants whenever feasible since it offers substantial energy savings.

We are continuing to address the energy situation through both conservation and the use of renewable energy resources, helping ensure that new VA facilities will be able to function effectively, regardless of our nation's future energy mix.

Real Estate and Space Management

The VA acquired 2.2 additional acres of land, known as the Yeatman property, in St. Louis during FY 1980. Sites for two new replacement medical centers were also acquired: 2.8 acres of land in Baltimore, and 23.2 acres in Little Rock, Arkansas. The VA also acquired 31.9 acres of land at Fort Sam Houston, Texas, for expansion of the existing cemetery. At Battle Creek, Michigan, 499.9 acres, acquired by transfer from GSA, were added to 203 acres of land, resulting in a 703-acre site for the new Region V National Cemetery.

There were more than 144 outgrants such as leases, licenses, permits, and easements authorizing use of VA real property by individuals, organizations, and Federal and local governmental agencies during the fiscal year.

The VA paid \$56.1 million for the rental of 9.7 million square feet of space during FY 1980. Seven outpatient facilities containing a total of 190,000 square feet were completed, and one relocation outpatient clinic project containing 39,000 square feet was initiated during FY 1980. One drug center facility was activated, with a total of 22,000 square feet. At the end of the fiscal year there were three outpatient clinic buildings under construction, involving a total of 120,000 square feet.

Barrier-Free Design

In keeping with the barrier-free design program that was established in 1959, the VA has continued to meet

CONSTRUCTION STATUS 1980

DESCRIPTION	TOTAL		COMPLETED		UNDER CONSTRUCTION		AUTHORIZED BUT NOT UNDER CONSTRUCTION	
	NUMBER	ESTIMATED CONSTRUCTION COST (millions)	NUMBER	ESTIMATED CONSTRUCTION COST (millions)	NUMBER	ESTIMATED CONSTRUCTION COST (millions)	NUMBER	ESTIMATED CONSTRUCTION COST (millions)
TOTALS - *	779	\$2,079.72	180	\$171.54	380	\$1,027.31	219	\$880.87
Replacement & relocation hospital	11	\$1,015.12	2	\$ 62.55	6	\$ 629.20	3	\$323.37
Modernization	6	41.95	1	6.30	2	1.87	3	33.78
Cemeteries	45	55.76	5	1.74	14	15.76	26	38.26
Nursing home care units	15	84.59	2	8.32	9	41.74	4	34.53
Research & education	16	37.39	2	2.12	7	7.03	7	28.24
Domiciliaries	3	24.49	0	0	1	7.17	2	17.32
Other improvements	683	820.42	168	90.51	341	324.54	174	405.37
Air conditioning	11	\$ 89.21	4	\$ 11.94	6	\$ 45.61	1	\$ 31.66
Other	672	731.21	164	78.57	335	278.93	173	373.71

*Totals not exact due to rounding

requirements for making buildings and facilities accessible to the physically handicapped. The Architectural Barriers Compliance Office has assisted in plan reviews, site visits, training and evaluation, and establishing implementation procedures to assure barrier-free design of all construction projects. Priorities were established for 58 nonrecurring maintenance projects at a cost of \$4.1 million during FY 1980.

A status report has been received from GSA on leased facilities that now have projects for removal of architectural barriers. In addition, all leased regional office and outpatient clinic spaces are being surveyed for deficiencies requiring renovations to assure accommodations for the physically handicapped. After this survey is completed, these deficiencies will be assigned a priority level which will serve as the basis for an ongoing program with GSA for removal of barriers in all leased buildings.

State Veterans' Homes

The Office of Construction provides technical assistance to the Office of the Assistant Chief Medical Director for Extended Care for state domiciliary, nursing home, and hospital facilities in 34 states. During FY 1980, 12 projects were approved at an obligated cost of \$8.1 million. As of September 30, 1980, 36 state home projects had been received for review and evaluation at an estimated total cost of \$52.1 million. These projects are being held pending Federal funding in future years.

Management Improvement

During FY 1980, the VA continued to refine the agency planning process introduced in FY 1978. The process has four objectives:

- (1) development of long-range planning assumptions and trends for major programs;
- (2) formulation of agency goals, objectives, and priorities,
- (3) identification of planning issues and formulation of the Administrator's priorities and guidance, and
- (4) development of an agency five-year plan.

The planning process is designed to meet the needs of top management by placing emphasis on selected priorities. The following areas were emphasized in agency planning and budgeting during FY 1980: Vietnam era veterans, aging veterans, spinal cord injuries, consumer affairs, ambulatory care, alcohol and drug abuse, comprehensive rehabilitation, provision of burial sites, manpower planning, and medical and rehabilitative research. This approach provides management oversight of all efforts affecting these priority areas regardless of the functional programs or budget decision units involved.

To assure that VA program goals and objectives are met efficiently and effectively, the agency regularly conducts program evaluations, special studies, and management reviews. Issues identified in these efforts, together with recommendations for corrective action, relate to and support the planning process.

During FY 1980, two major studies begun in FY 1979 were completed. One of these, a study of former prisoners of war mandated by Public Law 95-479, reports on long-term disabilities attributable to being held prisoner of war. It makes several recommendations for administrative and legislative change to improve medical care and benefits for former POWs. The other study, requested by the President, was conducted by Louis Harris and Associates for the VA. This report examines public attitudes toward Vietnam era veterans and provides information obtained from surveys of the general public, educators, Vietnam era veterans, and employers. It shows strong public respect and support for programs for Vietnam veterans.

Several other studies of significance were completed during FY 1980. These included cost/benefit analyses of a computerized hospital information system and a mini-computer system for automation of pharmacy activities. Additionally, a special study involving the VA's telephone accessibility to the veteran is scheduled for completion in December 1980.

Thirteen program evaluations were completed in FY 1980 pursuant to Section 219, Title 38, U.S.C. These reports addressed the following VA programs: Mortgage Credit Assistance - Home, Prosthetics and Orthotics, Ambulatory Care, Service-Connected Outpatient Dental Treatment, Medical Research, Health Services Research and Development, Rehabilitative Engineering Research and Development, Burial - National Cemeteries, Headstones and Markers, Memorial Markers and Memorial Plots, Mobile Homes, Condominiums, and Hemodialysis. At the close of the fiscal year, 17 other program evaluations were in progress. Under the law, evaluation of agency programs for their impact, effectiveness, and efficiency is to be accomplished on a continuing basis. As programs are re-evaluated, data describing the impact of delivery of services to beneficiaries will be updated and made available to managers for use in administering VA programs. These data will also provide feedback for the agency planning process and will pinpoint areas needing special studies.

The ADP Review Group, chaired by the Administrator and composed of department and selected staff office heads, has taken a more active role in the planning and control of VA's ADP resources. Initiatives of various ADP users in the VA were assigned priorities by the Review Group in the budget process to ensure consistency with agency priorities for mission accomplishment. A significantly improved ADP planning effort is now in progress under the direction of the ADP Review Group.

Significant actions regarding the agency's emergency preparedness activities during FY 1980 include: participating in the joint civilian/military readiness exercise REX 80 ALPHA/PRIZE GAUNTLET; recommending changes to clarify Executive Order 11490 as to VA's emergency preparedness functions, designating a VA Central Office Control Center and Disaster Coordinating Team to be activated in the event of a catastrophic event at a field station; participating in establishing an Ad Hoc Committee on Health, Medical,

and Welfare Emergency Preparedness with representatives from the Departments of Defense and Health and Human Services, the Federal Emergency Management Agency, and the VA; and increasing interagency coordination to develop plans to continue essential functions and execute emergency responsibilities in time of major natural disaster or national emergency.

The Consumer Affairs Program was published in the *Federal Register* in its final form on June 9, 1980. Written to comply with Executive Order 12160 entitled "Providing for Enhancement and Coordination of Federal Consumer Programs," the program pulls together various established agency activities directed at increasing the VA's sensitivity to veterans' needs and interests. In addition, new consumer-oriented initiatives are being developed at both the agency and department level to improve service to the veteran. The consumer programs have been developed around the five major requirements of the Executive Order. These deal with perspective (organizational structure of agency and department consumer programs), consumer participation, education and training, informational materials, and complaint handling. The VA has designated an agency Consumer Affairs Coordinator and staff to ensure that consumer issues and concerns are addressed and considered wherever appropriate. At the department level, senior executives have been designated as Department Consumer Coordinators with similar responsibilities with respect to their programs. At field facilities, consumer representatives have been appointed to assist veterans in resolving problems or answering questions. These representatives can identify problems which can be resolved at an early stage and thus improve VA's service to veterans.

Records and Information Management

The moratorium on the destruction of veterans' medical records imposed during July 1979 remains in effect. The Medical Administration Service task force continued to review retention standards to develop options regarding these sensitive records. No inactive medical records housed in Federal Archives and Records Centers can be destroyed until new disposal instructions have been developed.

During the period October 1, 1979, through September 30, 1980, VA's year-end records holdings decreased by 37,918 cubic feet or 2.6 percent for a total of 1,449,456 cubic feet. The volume of new records created during the year increased slightly by 11,129 cubic feet or approximately 9 percent when compared to FY 1979. A total of 1,587,607 inactive claims folders representing approximately 46,140 cubic feet were transferred to low-cost storage within VA and an additional 37,292 cubic feet of records were retired to Federal Archives and Records Centers. The volume of records destroyed under authority of the National Archives and Records Service (NARS) amounted to 138,884 cubic feet, an increase of 3 percent over FY 1979.

One significant accomplishment during FY 1980 was approval of a 75-year retention period for inactive XC-folders (claims folders of deceased veterans). As a result, approximately 10,000 inactive XC-folders which were retired in 1951 will become eligible for disposal during the year 2026. This represents a major breakthrough in records management by striking a balance between protecting and satisfying the rights of veterans and their beneficiaries, while containing spiraling costs of maintaining massive records holdings.

Other initiatives on the part of the Department of Veterans Benefits resulted in retirement of 20,563 cubic feet of benefits folders to Federal Archives and Records Centers and destruction of approximately 72,268 cubic feet of record and nonrecord material. These actions produced an estimated cost avoidance/savings of over \$2.5 million in space and equipment costs.

Approximately 1.6 million inactive claims folders from VA regional offices were relocated to the VA Records Processing Center. This action resulted in freeing over 43,000 square feet of office space and 6,152 file cabinets. Estimated savings (less the relocation costs) amounted to nearly \$1 million.

On September 30, 1980, there were 11,516 different VA forms and form letters in use, of which 37.8 percent were standardized for agency-wide use. During the year, 302 standardized forms and form letters were eliminated as no longer necessary, 171 were created to meet new requirements, and 889 were updated and improved. The overall decrease in the number of standardized items resulted from a reduction drive conducted in FY 1980.

In cooperation with the General Services Administration, a six-month trial program for obtaining reduced fare airline transportation under several government contracts was instituted in July 1980. Reduced fare airline tickets could be obtained under these contracts for official government business travel between selected cities. Total VA savings realized during the first three months of the trial period amounted to over \$33,000. Because of the potential savings, plans have been initiated to expand this program from the original 11 to approximately 100 city-pair air routes.

The Office of Management Services sends copies of approved proposed and final VA regulations simultaneously with their publication in the *Federal Register* to service organizations with a strong interest in veterans' affairs. Copies of these documents are also forwarded to the congressional veterans' affairs committees for their immediate information.

Because of an increase in the volume of VA regulations, this office has initiated a thorough analysis of regulation writing and *Federal Register* submission procedures in the VA. The purpose is to define ways to improve the quality of regulations and submissions while reducing the time necessary for their preparation. New procedures, which will include appropriate office system support, will increase the productivity of this function considerably.

Reports Management

During the fiscal year, 87 new reports plans were approved and 67 were eliminated for a net increase of 20. The inventory of reports consists of 520 approved internal VA plans and 123 approved interagency plans for a total of 643. A study of the total information needs of DM&S Engineering Service was completed, and similar studies for DM&S Building Management Service and the Department of Memorial Affairs were in progress at the close of the year.

The Patient Treatment File is an automated system providing data on inpatient treatment under VA auspices. Four new recurring reports were approved and four were placed on an "as required" production schedule. One report was canceled. Output for five reports was changed from paper to microfiche and the number of copies made was reduced for 15 reports. Accuracy and timeliness of the system's reports continued to improve.

The Automated Management Information System (AMIS) is an agencywide system designed to meet the statistical reporting needs of Central Office management. Approximately 995 requests for new reports or changes to existing reports were accommodated by AMIS during the year. Accomplishments during the fiscal year included:

- Revision of the Medical Care Distribution Cost Reports;
- Completed development of a comparison of planned and actual obligations by program and appropriation; and
- Revision of and addition to Office of Data Management and Telecommunications reports.

Title 38 authorizes the Administrator to release names and addresses of recently discharged veterans, and veterans in receipt of compensation, pension, or education benefits to nonprofit organizations provided the intended use is directly connected to programs and benefits in Title 38. Approximately 128 such requests were processed during the fiscal year.

Financial Management

The VA cash management policy, implemented in line with the President's Reorganization Project, produced savings of \$1.8 million, an increase of \$0.2 million over the previous year.

The Direct Deposit/Electronic Funds Transfer program for recurring compensation and pension payments increased to 929,346 participants during FY 1980. This represents a participation rate of nearly 20 percent at the end of the third full year of the program. Participation is increasing at an average of 17,000 accounts per month. Also included in the program are VA employee salaries which at the end of the first full year represent more than 57,000 payments, or over 25 percent of all VA employees. The Direct Deposit/Electronic Funds Transfer program ensures that a benefit or salary payment is deposited in a checking or savings account at a designated financial

organization automatically. This eliminates government checks being late, lost, or stolen. The government realizes considerable monetary savings, and both the government and the payees benefit from a reduction in the number of replacement checks.

Audits and Investigations

The Office of Inspector General has statutory responsibility to promote the economy, efficiency, and effectiveness of VA programs and to prevent and detect fraud and abuse in such programs and operations. During FY 1980 the Office conducted a number of activities to accomplish this statutory responsibility.

Vulnerability assessments were made of several existing VA systems and programs to determine primary weaknesses permitting fraud, waste or abuse or impacting on efficiency and effectiveness. Vulnerability assessments were completed in three areas; drug losses and accountability, time accounting for part-time physicians, and pension accuracy. It was concluded that drug stockage and distribution systems within medical centers were vulnerable to \$17.4 million in losses due to theft, record keeping errors, and other causes and that the accounting for work hours of part-time physicians is ineffective and has permitted abuse. In the case of the drug problem, interim measures are being adopted to strengthen controls, seek resources to obtain superior systems, provide better accountability, and reduce the potential for medication error. A new timekeeping system has been installed for part-time physicians.

About 140 legislative and regulatory proposals were reviewed to identify and seek improvements of potential control weaknesses and other problems which might affect the future integrity, efficiency, economy, or effectiveness of programs and systems. Comments were made on 37 of these proposals. For essentially similar preventive purposes, eight pre-installation reviews were conducted of major new ADP systems, including Target and selected aspects of the health care information system.

Special initiatives, consisting of 33 audits and 129 investigations, were undertaken to identify fraud, waste, and mismanagement in VA programs. These special initiatives covered such areas as overpayments and accounts receivable, eligibility for non-service connected treatment, multiple education benefits, selected aspects of procurement, patient abuse, and loan guaranty fraud by beneficiaries, brokers, and lenders.

Cyclical audits were conducted of 111 VA facilities, programs, and activities. Such audits, originally planned for a three-year cycle, slipped to a five-year frequency because of other workload priorities. The purpose of these audits is to oversee VA activities with sufficient frequency to encourage quality management and operations, and to assure that out-of-line situations are identified and corrected. These audits produced estimated savings, primarily in terms of cost avoidance, of \$10 million. Audits were also conducted of 221 contractors and grantees, resulting in recommended cost adjustments

of \$6.5 million and identifying an additional \$9.9 million of proposed costs that were not adequately supported.

Sixty-seven investigations were made of complaints of serious criminal or administrative irregularities. The employee hotline received and processed 490 complaints.

Two organizational changes were made. The headquarters of the Office of Audit was reorganized to streamline staff and line relationships and to shift responsibility to audit field offices for conducting most of the audits. The Office of Investigations decentralized most responsibility for conducting investigations to newly established field offices. These investigative field offices are co-located with audit field offices in Atlanta, Chicago, and Los Angeles, and additional offices were established in Washington, D.C. and New York, with a suboffice in Puerto Rico.

Audiovisuals

The VA began production of two new motion picture films during the fiscal year. The film, "Development of Quantico National Cemetery" will portray its subject from conception, design, and phased construction to completion. It will be used to train architects, designers, and engineers, and for the orientation and information of veterans' organizations, VA employees, and the general public. "Ridesharing" is being produced to stimulate and encourage employees to carpool, vanpool, and utilize public transportation. It will emphasize the need to conserve energy and lessen traffic and air pollution.

Production was completed on an historical documentation of the 1979 National Veterans' Day Ceremonies at Arlington National Cemetery. Titled "A National Remembrance," it features the placing of the Presidential Wreath at the Tomb of the Unknowns and the Veterans Day address to the nation by the Administrator of Veterans Affairs, as personal representative of the President of the United States. Ceremonies in the amphitheater included presentation of the Vietnam Veteran's Postage Stamp by the Postmaster General of the United States to the Administrator.

In November 1979, the VA was awarded a Golden Eagle certificate by the Council on International Nontheatrical Events for the film "Wherever We Find Them," thus certifying its selection to represent the U.S. in international picture events. The film emphasizes the value of handicapped individuals' participation in physical recreational athletic activities and demonstrates VA programs available for training and improvement of athletic skills.

Four television spot announcements were produced during the year and distributed nationwide to inform veterans, their dependents, and the public of entitlements under laws administered by the VA. A spot titled, "Vet Centers," was produced in three phases: the first phase for the Hispanic population, the second for national distribution, and a special production for the Los Angeles area. "Texas Vet



The Postmaster General of the U.S. presents the Administrator with the Vietnam Veterans Stamp at Arlington National Cemetery, November 11, 1979

Center" featured former Dallas Cowboy football star Roger Staubach informing veterans of the assistance provided by Texas Vet Centers. "Year of the Disabled" shows in a series of vignettes that the disabled have an enthusiastic outlook on life despite their handicaps, and observes "The International Year of the Handicapped." "Salute to Hospitalized Veterans" informs volunteers of the value of their services in the care of veteran patients.

The audiovisual activity maintains VA's centralized motion picture film library consisting of 808 titles and 3,949 prints for use in medical and scientific research, orientation, training, and information and rehabilitation programs. During FY 1980, 4,310 distributions were made to VA stations, other Federal and state agencies, veterans' organizations, educational institutions, and professional and scientific groups.

The exhibits activity produced 14 new exhibits and 190 new and existing exhibits were presented for a total of 1,151 presentation days at VA facilities; national veterans' organization conventions; state conventions; educational institutions; and professional, medical, scientific, and minority group meetings.

The Central Office audiovisuals activity holds membership on the Federal Audiovisuals Committee whose objective is the improvement of audiovisuals management in the Federal government. Proven policies are implemented to improve and refine the quality of support services provided to the programs and mission of the VA.

Presidential Memorial Certificate Program

The Presidential Memorial Certificate Program honors the memory of honorably discharged deceased veterans. Statutory authority for the program is contained in Section 112, Title 38, U.S.C.; the President approved continuation on March 28, 1977. The VA issues to the next of kin, certificates which bear the President's signature and express the country's grateful recognition of the veteran's service in the armed forces. Eligibility for the certificate is determined by the VA when notice of the veteran's death is received and next of kin information is available. Certificates may also be issued upon request to other relatives and friends of the deceased veteran.

Over 3.8 million certificates have been issued since the program was initiated in March 1962. The VA now issues an average of 1,000 certificates daily. A total of 244,300 were issued during FY 1980.

Legal Matters

The Office of the General Counsel has experienced a continued increase in demand for legal advice and assistance in recent years. In FY 1980, legal workloads increased 16 percent, and the number of attorneys increased 4 percent.

On November 20, 1979, the VA embarked on a three-phase test for one year to determine the cost-effectiveness of transferring, from the General Accounting Office (GAO) and the Department of Justice to the VA, responsibility for all collection actions, including litigation, on all debts owed the VA. The first part of the program involved six VA stations and 1,000 cases provided by GAO, all of which were education overpayments. Many of these cases were quite old and although recent credit reports were obtained in every case, many veterans could not be located. However, when veterans were located, a high rate (75 percent) of collection, repayment agreement, or some other resolution was achieved. The second phase of this program involved 10 stations and action on active cases in which veterans had failed to respond to administrative collection efforts. These cases showed much better results in locating debtors and obtaining some form of resolution of debts, suggesting that the VA can conduct a successful and cost-effective collection program. The program will be expanded nationwide in 1981.

Medical malpractice claims under the Federal Tort Claims Act increased 21 percent in FY 1980, while funds paid out in settlement of administrative tort claims under \$2,500 decreased 19 percent to \$190,620 in FY 1980.

Collection of reimbursements for medical care increased to \$9,081,479 in FY 1980. Of that total, \$4,244,977 was collected from third-party tortfeasors, \$292,660 under medical insurance policies, and \$4,543,842 for treatment of industrial injuries. These collections are often impeded by some laws and practices, such as state no-fault statutes which preclude payment of hospital costs to the Federal government. Similarly, numerous insurance companies have drafted their health insurance policies to preclude payment to the Federal government for these

costs. Legislation would be necessary to preclude exclusion of the Federal government as a claimant.

In the area of education litigation, the VA was successful in obtaining favorable court decisions in four major cases. One of these actions involved school liability while the other three concerned the issue of class sessions or so-called "seat time."

In the school liability case, the U.S. Supreme Court left standing the favorable decision of the Court of Appeals which upheld the constitutionality of the VA school liability statute and affirmed the legality of VA reporting and waiver requirements.

In the other three cases, the courts rejected constitutional challenges to the VA's class session or "seat time" requirements and upheld the Administrator's statutory authority to promulgate, implement, and enforce such regulations.

There has been a substantial increase in litigation seeking to require VA to take a more active role to prevent foreclosure of guaranteed loans and to provide defaulting borrowers hearings on the question of VA's taking assignments of such loans. Of three cases decided to date, two have been favorable to the agency and one unfavorable. All three cases are currently on appeal. In the past year VA also received favorable rulings from appellate courts on the agency's right to deny liability on a guaranty where loan papers have been forged, and the right to adjust liability where misrepresentation in the origination of a loan can be traced to a lender's employee.

In the medical area, litigation was filed challenging the constitutionality of a VA regulation which provides that women veterans will not be entitled to hospital care for pregnancy. The basis for that regulation lies in Title 38, U.S.C., which includes a provision which limits scope of medical care eligibility to care and treatment of veterans' disabilities, a narrowly defined term. Court decision of this issue is still pending.

The VA this year published draft regulations to set forth specific substantive and procedural rights to be uniformly afforded both involuntary and voluntary patients undergoing treatment in VA medical centers. Included are provisions which define and protect patients' rights in the areas of privacy, least restrictive treatment, exercise of legal rights, visitation, communication, restraint, medication, dress, fund handling, general medical and psychiatric treatment, social interaction, exercise, and religion. Comments received from the public are being considered before publication of final regulations. Proposed regulations addressing the VA's role in treatment of civilly committed patients are nearing completion.

The agency continued its policy on judicial review which, briefly stated, is that court review of all constitutional questions arising under its administration of veterans' programs should be permitted. The VA also does not object to court review in cases involving claims for benefits if Congress desires such review. The agency

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strongly recommends, however, that the extent of any court review be provided in legislation specifically designed for the VA and codified in Title 38, U.S.C. Proposed legislation on this subject was considered by Congress. Legislation to change VA adjudication procedures, provide judicial review of VA benefit decisions, and allow reasonable attorney fees was passed by the Senate in September 1979 but not acted upon by the House during FY 1980.

Despite the finality statute proscribing judicial review of VA benefit decisions, there was considerable litigation to challenge internal VA procedures. Significant cases in this regard involve the VA's handling of claims for benefits based upon disabilities allegedly caused by exposure to herbicides and to ionizing radiation, and procedures for recoupment of erroneously overpaid benefits by offset from future benefit payments.

Considerable attention continued to be focused on the matter of long-term effects of exposure to toxic substances, principally Agent Orange with its contaminant, dioxin, and to radiation resulting from nuclear weapons testing. There are many unresolved questions concerning increased risk of leukemia or other cancers as a result of exposure to low-level ionizing radiation. Agency-wide adjudication instructions issued in 1979, regarding disability compensation claims by veterans who claim exposure to radiation at atmospheric testing of atomic weapons during the period 1945-1962, were updated and amended. An interagency work group, composed of representatives of various Federal agencies concerned with Agent Orange problems, was established by the White House. Several congressional hearings were conducted on the response of the Federal government, the VA in particular, to these issues.

The VA is conducting a review of its policies regarding eligibility for benefits based upon alcoholism-related disability. Recognition of alcoholism as a "disease" in some quarters has called into question VA's rule that, in most cases, alcohol abuse is due to "willful misconduct" and therefore proscriptive of eligibility.

Regulatory standards for recognizing veterans' service organizations for purposes of presenting claims for benefits before the VA were liberalized in 1978. In order to allow a broader spectrum of organizations to supplement the older, established organizations, 11 new groups have been formally recognized by the VA. During FY 1980, three new organizations were added to that list.

An important decision was issued by a U.S. Court of Appeals in a matter involving garnishment of VA compensation. Ruling adversely to the Government's position on the issue, the Court of Appeals determined that Federal courts do not have authority to order removal of state court actions for garnishment of VA disability compensation. This opens up the possibility of conflicting interpretations of Federal statutes concerning this subject by various state courts.

The American Federation of Government Employees was certified in March 1980 as exclusive representative for

approximately 119,000 VA employees. Collective bargaining is now conducted at the national level. Administrative litigation of unfair labor practice cases was decentralized and representation of local management is now being provided by VA District Counsels.

The Office of Inspector General expanded its investigative operation and undertook to develop policy guidelines and proposed modifications to VA regulations pertaining to investigative authority, policy, and operations. The General Counsel provides legal assistance to the Inspector General as requested and has provided guidance in a number of areas. To enhance its ability to assist the Inspector General, the General Counsel is represented on an interagency organization of Counsels to the Inspector General which was created as a forum to discuss and resolve issues of mutual concern.

The VA's congressional liaison offices, located in the Senate, House of Representatives, and Central Office, maintained close working relationships with congressional members, committees, caucuses, and their respective staffs. During FY 1980, the liaison offices responded to 16,700 pieces of correspondence, approximately 48,000 telephone calls, and 6,000 walk-in visits, an increase in workload of 8 percent. Congressional members were informed of VA budgetary, legislative, and program initiatives; changes in personnel at VA medical centers and regional offices; and new developments in the VA construction program. The liaison offices also provided congressional offices with information and advice regarding the rights and benefits of their veteran constituency. Highlighting the FY 1980 agenda were issues involving Agent Orange, the agency's debt collection program, elimination of flight and correspondence training, construction of the Camden, New Jersey, VA Medical Center and the Broward County Outpatient Clinic in Florida, and the status of the VA health care system.

Considerable activity continued regarding the Privacy Act, Freedom of Information Act, and VA information provisions. Questions of disclosure of information continued to generate a high volume of legal and administrative issues. Legislation was enacted to secure confidentiality for sensitive records of medical professional treatment review. Disclosure of these records appeared to be required under the Freedom of Information Act, but would have threatened continuation of medical quality assurance in the VA. In *Miller v. Administrator of Veterans Affairs*, the Federal district court held that the amendment of records provision in the Privacy Act was not available to change the decision reflected in a VA adjudication record. Several additional cases in regard to VA disclosures were resolved in favor of the VA. The Freedom of Information/Privacy Act Office, in the Office of the General Counsel, has continued to train agency personnel in the provisions of these Acts.

There was an increased demand on the General Counsel in FY 1980 to handle legal actions relating to procurement of construction, supplies, and services. Legal review of proposed contracts and other aspects pertaining to the

award of contracts has continued to expand in recent years because of increased agency budgets in these program areas and the greater responsibility placed upon the General Counsel. Disputes with contractors have resulted in a substantial increase in the number and complexity of cases appealed to the VA Contract Appeals Board. A significant reason for the increase in such appeals is the Contract Disputes Act of 1978, effective March 1, 1979, which greatly expanded the rights, both substantive and procedural, available to contractors in their appeal of disputes arising from their performance of Government contracts. As a result, the General Counsel's participation as the Government's legal representative in these administrative proceedings also has increased and, in many cases, requires substantial travel to various cities throughout the country.

A significant responsibility of the General Counsel involves review of environmental assessments and environmental impact statements in order to insure that the VA's construction projects comply with all Federal, state, and local environmental laws. VA policies and procedures were implemented to provide guidance to agency officials in authorizing or approving action that affects the environment. During FY 1980, the General Counsel was involved in review and analysis of two draft and four final environmental impact statements, and has provided day-to-day legal environmental advice concerning, among other things, floodplain management and preservation of historic sites.

Appellate Review

Veterans and other claimants for VA benefits who are not satisfied with determinations made by field offices may file a written notice of disagreement with the office taking the action. If after reviewing the case in light of the claimant's disagreement the field office is not able to grant the benefits sought, it sends the appellant a statement of the case. This statement outlines the issue, evidence of record, pertinent laws and regulations, and the reason for the decision. If the appellant, after reading the statement of the case, still disagrees with the field office, he or she submits an appeal to the Board of Veterans Appeals (BVA). Again the field office reviews the case. If still unable to resolve it to the satisfaction of the claimant, the field office sends the case to BVA for review and final decision.

There was a sizable increase in new appeals filed by claimants in 1980—more than 4 percent greater than a year earlier. Coupled with the number of appeals pending at the beginning of the year, the total appellate workload was 122,800. About 30,000 appeals were resolved in field offices—another 34,000 were decided by the Board. As shown on the accompanying chart, there were 58,790 final dispositions—nearly 23 percent of which were allowances of benefits sought by claimants.

In fiscal year 1980 both the BVA and the Department of Veterans Benefits (DVB) used computer systems to track and control appeals—from filing notices of disagreement until final dispositions. Using these systems, the VA

Appellate Processing	FY 1980	FY 1979*
Appeals pending, start of period	59,131	57,922
Undocketed, in field offices	47,495	45,438
Docketed, in BVA	11,636	12,484
Filed during period	63,700	61,097
Settled in field offices	29,652	24,916
Allowed	9,192	9,494
Closed	14,142	9,664
Withdrawn	6,318	5,758
Submitted to BVA	30,206	34,124
Decided by BVA	34,030	34,972
Allowed	4,226	4,431
Remanded for further action	4,892	4,761
Withdrawn	282	217
Denied	24,630	25,563
Appeals pending, end of period	59,149	59,131
Undocketed, in field offices	51,337	47,495
Docketed, in BVA	7,812	11,636
Summary		
Final dispositions	58,790	55,127
Allowed	22.8%	25.3%
Closed	24.1%	17.5%
Withdrawn	11.2%	10.8%
Denied	41.9%	46.4%

*Some figures differ from those reported last year to adjust for the change in counting method instituted in FY 1980.

controls the flow of appeals to the Board. Formerly, each station sent cases to the BVA as soon as all field actions were completed. This resulted in a large backlog of pending appeals at the Board and a related increase in processing time. Under the new method of positive case management, the BVA estimates the number of appeals needed each month to keep caseload at the best level of operations. Then the Board asks DVB to send that number of appeals. Through its computer, DVB selects cases, oldest first, and sends them to Washington. These call-up procedures have reduced average processing time at the BVA and improved operations. In addition, by holding records until the Board calls for them, local offices are better able to serve veterans by responding to their inquiries and by assisting them in developing their appeals.

The accompanying chart shows appellate workloads for fiscal year 1980 as carried in the computer systems. We have revised certain FY 1979 figures to align with these counts.

Appellants continued, in fact they increased, their interest in having personal hearings before the Board. In FY 1980 the BVA held 1,791 such hearings—1,306 in Washington and 485 in field offices before traveling sections of the Board. This represents an increase of nearly 18 percent over FY 1979.

The BVA made procedural changes to permit this large increase in hearings. First, the hearings schedule was increased from 30 to 40 per week. (About 70 percent of appellants scheduled for hearings show up for them.) Second, appellants are now provided a copy of tape recordings of hearings—transcribing is done only when specifically requested. However, we continued to transcribe all travel board hearings. This proved

satisfactory in nearly 40 percent of the hearings held in Washington. These procedures reduced the time between hearings and decisions, and permitted more hearings without an increase in the BVA staff.

At the end of FY 1980, waiting time on the hearing docket was about 11 weeks. This compares very favorably with a waiting time of 5 months a year earlier.

The percentage of appellants who chose to be represented by a veterans' service organization continued to mount. In FY 1980 more than 85 percent selected one of the accredited organizations; just over 2 percent used attorneys or agents; and about one-eighth chose to pursue their appeals without representation. Appellants handling their appeals without representation have declined steadily from about 25 percent to less than 13 percent over the past decade.

The Board of Veterans Appeals had an average employment of 329 during the year. Headed by a Chairman, the Board had 16 sections with 33 legal and 15 medical members. Supporting the sections were 2 medical advisers, 102 staff attorneys, and an administrative service. Other professional support available within the VA included advisory medical opinions from the Chief Medical Director and legal opinions from the General Counsel. In addition, under authority of Title 38, U.S.C., the Board requested 211 opinions from independent medical experts who were not VA employees. An accompanying chart shows a breakout of the medical specialties covered by these opinions.

At year's end there were more than 51,300 appeals in process in VA field stations. These were evenly split between those in the initial (notice of disagreement) stage, and those in the final stages of field processing. With 7,812 cases on the BVA docket, the total number of appeals pending at the end of FY 1980 was 59,149. This is more than 1,200 greater than the previous peak of 57,915 reached in FY 1978.

The Appellate Index and Retrieval System (AIRS) was in full operation in FY 1980. By the end of the year, indexes covered the period from July 1, 1977 through December 31, 1979—well over 85,000 BVA decisions. Developed in compliance with the Freedom of Information Act, AIRS includes quarter and cumulative annual subject indexes on microfiche, and BVA decisions stripped of personal identifiers on microfilm. Appellants and others interested in decisions of the Board are able to check these indexes to locate specific types of cases. They can then request copies of decisions they want.

Medical Specialty	Number of Advisory Opinions Requested	
	Fiscal year 1980	Fiscal year 1979
All specialties	211	225
Number requested in connection with:		
Appellate consideration	199	210
Reconsideration	12	15
Internal medicine:		
General	7	8
Cardiovascular	20	27
Gastroenterology	4	8
Pulmonary diseases	10	8
Surgery:		
General	0	2
Orthopedic	17	11
Thoracic	0	0
Otolaryngology & ophthalmology ..	8	9
Psychiatry	68	73
Neurology - medical/surgical	16	20
Pathology - medical/surgical	51	42
Other	10	17

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Total . . .
State Total . . .
Alabama
Alaska
Arizona
Arkansas
California
Colorado
Connecticut
Delaware
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Florida
Georgia
Hawaii
Idaho
Illinois
Indiana
Iowa
Kansas
Kentucky
Louisiana
Maine
Maryland
Massachusetts
Michigan
Minnesota
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Missouri
Montana
Nebraska
Nevada
New Hampshire
New Jersey
New Mexico
New York
North Carolina
North Dakota
Ohio
Oklahoma
Oregon
Pennsylvania
Rhode Island
South Carolina
South Dakota
Tennessee
Texas
Utah
Vermont
Virginia
Washington
West Virginia
Wisconsin
Wyoming
Outside U.S. —

NOTE: These figures are for the states as of residence, except state migration of 1970-71 net No. 468, October Current Population

TABLE 1

VETERAN POPULATION

Estimated Number, State, Period of Service—September 30, 1980

(In Thousands)

State	Total Veterans	Veterans per 1,000 Civilian Population ¹	War Veterans							Post-Vietnam Era ⁵	Service Between Korean Conflict and Vietnam Era Only
			Total ²	Vietnam Era		Korean Conflict		World War II ⁴	World War I		
				Total ³	No Service in Korean Conflict	Total ^{3,4}	No Service in World War II				
Total	30,118#	X	26,065#	9,015	8,463	5,826	4,659	12,422	521	1,003	3,050
State Total	29,869	136.7	25,861	8,913	8,364	5,767	4,607	12,376	514	991	3,017
Alabama	422	112.7	365	126	118	91	74	166	7	13	44
Alaska	40	104.4	33	15	15	7	6	12	(8)	2	5
Arizona	339	139.9	295	106	100	67	50	139	6	11	33
Arkansas	274	126.3	241	81	76	49	38	121	6	8	25
California	3,350	149.4	2,914	1,001	929	726	521	1,415	49	112	324
Colorado	379	138.8	324	132	125	71	54	139	6	14	41
Connecticut	464	149.6	403	132	123	99	82	191	7	15	46
Delaware	79	136.9	64	24	23	11	9	31	1	4	11
District of Columbia	99	152.8	85	21	19	27	21	43	2	4	10
Florida	1,358	154.9	1,203	364	337	276	189	641	36	37	118
Georgia	640	126.6	547	218	206	133	107	226	8	23	70
Hawaii	93	108.5	77	32	30	20	16	30	1	3	13
Idaho	105	116.8	90	33	32	17	14	42	2	3	12
Illinois	1,535	137.1	1,327	431	403	305	266	632	26	52	156
Indiana	728	134.9	623	233	219	131	112	280	12	28	77
Iowa	377	129.9	323	115	109	63	55	150	9	13	41
Kansas	312	133.2	272	94	89	54	43	133	7	9	31
Kentucky	414	118.6	359	124	117	78	62	172	8	13	42
Louisiana	451	113.1	392	131	123	93	78	183	8	14	45
Maine	155	142.6	133	46	44	26	21	65	3	5	17
Maryland	629	153.2	543	197	185	136	103	247	8	22	64
Massachusetts	872	151.5	757	258	243	172	142	356	16	29	86
Michigan	1,186	129.0	1,012	370	350	214	187	456	19	46	128
Minnesota	560	138.0	476	192	183	86	72	210	11	24	60
Mississippi	242	100.5	212	66	62	46	38	107	5	6	24
Missouri	710	146.5	617	211	198	133	111	294	14	23	70
Montana	99	126.8	83	30	28	15	12	41	2	3	13
Nebraska	202	129.3	173	65	62	33	28	79	4	7	22
Nevada	95	137.3	83	28	27	20	15	40	1	3	9
New Hampshire	127	143.8	107	37	35	21	16	54	2	4	16
New Jersey	1,106	151.4	963	302	281	225	186	478	18	32	111
New Mexico	137	111.8	118	42	39	27	20	57	2	4	15
New York	2,453	139.2	2,155	610	567	501	434	1,110	44	72	226
North Carolina	620	112.5	534	205	193	113	93	239	9	18	68
North Dakota	60	92.9	50	17	16	7	6	26	2	2	8
Ohio	1,476	137.7	1,267	449	422	258	219	602	24	55	154
Oklahoma	414	144.7	360	129	122	77	59	171	8	13	41
Oregon	389	154.1	337	122	115	65	48	166	8	14	38
Pennsylvania	1,740	148.5	1,513	492	460	315	261	762	30	57	170
Rhode Island	152	164.5	129	42	39	28	21	67	2	6	17
South Carolina	336	117.2	291	117	112	66	54	121	4	11	34
South Dakota	74	108.3	62	18	17	12	10	33	2	2	10
Tennessee	542	124.3	468	168	159	105	90	210	9	18	56
Texas	1,668	126.0	1,444	523	491	313	239	688	26	55	169
Utah	152	111.6	129	59	56	25	19	52	2	6	17
Vermont	64	129.8	54	21	20	9	7	26	1	3	7
Virginia	664	131.6	574	215	202	140	97	266	9	20	70
Washington	615	158.7	529	203	192	117	80	248	9	22	64
West Virginia	234	124.7	205	64	60	40	34	106	5	7	22
Wisconsin	592	125.5	507	189	178	97	83	233	13	22	63
Wyoming	45	100.9	39	13	13	7	5	20	1	2	4
Outside U.S. — Total ⁶	249	X	204	102	99	59	52	46	7	12	33

NOTE: These estimates have been developed from "benchmark" veteran population statistics for the states as of June 30, 1970, based on 1970 Census of Population data on veterans' place of residence, extended to September 30, 1980, on the basis of (1) 1965-1970 veteran interstate migration statistics from the 1970 Census; (2) Bureau of the Census provisional estimates of 1970-71 net civilian migration of the states, Current Population Reports, Series P-25, No. 468, October 5, 1971; and (3) mobility of the United States population, 1975-1976, Current Population Reports, Series P-20, No. 305, January 1977. They are independent of,

and therefore not directly comparable with, estimates for June 30, 1970 through June 30, 1974, previously published. Excluded are an estimated 147 thousand who served only between World War I and World War II, and 240 thousand who served only between World War II and the Korean conflict.

See footnotes at end of Table 3.

VETERAN POPULATION

Estimated Number, Regional Office, Period of Service — September 30, 1980

(In Thousands)

TABLE 2

Regional Office		Total Veterans	War Veterans						Post-Vietnam Era ⁵	Service Between Korean Conflict and Vietnam Era Only		
			(in thousands)		Vietnam Era		Korean Conflict				World War II ⁴	World War I
			Total ²	Total ³	No Service in Korean Conflict	Total ^{3 4}	No Service in World War II					
Total		30,118#	26,065#	9,015	8,463	5,826	4,659	12,422	521	1,003	3,050	
Alabama	Montgomery	422	365	126	118	91	74	166	7	13	44	
Alaska	Anchorage	40	33	15	15	7	6	12	(⁸)	2	5	
Arizona	Phoenix	339	295	106	100	67	50	139	6	11	33	
Arkansas	Little Rock	278	245	82	77	50	39	123	6	8	25	
California	Los Angeles	1,728	1,505	502	468	369	277	736	24	56	167	
	San Diego	312	270	106	96	76	40	128	6	12	30	
	San Francisco	1,305	1,135	391	364	280	203	549	19	44	126	
Colorado	Denver	379	324	132	125	71	54	139	6	14	41	
Connecticut	Hartford	464	403	132	123	99	82	191	7	15	46	
Delaware	Wilmington	79	64	24	23	11	9	31	1	4	11	
District of Columbia	Washington	450	386	144	133	107	72	176	5	17	47	
Florida	St. Petersburg	1,358	1,203	364	337	276	189	641	36	37	118	
Georgia	Atlanta	640	547	218	206	133	107	226	8	23	70	
Hawaii	Honolulu	93	77	32	30	20	16	30	1	3	13	
Idaho	Boise	105	90	33	32	17	14	42	2	3	12	
Illinois	Chicago	1,535	1,327	431	403	305	266	632	26	52	156	
Indiana	Indianapolis	728	623	233	219	131	112	280	12	28	77	
Iowa	Des Moines	377	323	115	109	63	55	150	9	13	41	
Kansas	Wichita	312	272	94	89	54	43	133	7	9	31	
Kentucky	Louisville	414	359	124	117	78	62	172	8	13	42	
Louisiana	New Orleans	451	392	131	123	93	78	183	8	14	45	
Maine	Togus	155	133	46	44	26	21	65	3	5	17	
Maryland	Baltimore	420	364	126	119	89	70	169	6	14	42	
Massachusetts	Boston	788	684	235	221	156	128	321	14	26	78	
Michigan	Detroit	1,186	1,012	370	350	214	187	456	19	46	128	
Minnesota	St. Paul	528	448	182	173	81	68	197	10	23	57	
Mississippi	Jackson	242	212	66	62	46	38	107	5	6	24	
Missouri	St. Louis	710	617	211	198	133	111	294	14	23	70	
Montana	Ft. Harrison	99	83	30	28	15	12	41	2	3	13	
Nebraska	Lincoln	202	173	65	62	33	28	79	4	7	22	
Nevada	Reno	100	87	30	28	21	16	42	1	3	10	
New Hampshire	Manchester	127	107	37	35	21	16	54	2	4	16	
New Jersey	Newark	1,106	963	302	281	225	186	478	18	32	111	
New Mexico	Albuquerque	137	118	42	39	27	20	57	2	4	15	
New York	Buffalo	643	562	171	160	131	113	278	11	20	61	
	New York	1,810	1,593	439	407	370	321	832	33	52	165	
North Carolina	Winston-Salem	620	534	205	193	113	93	239	9	18	68	
North Dakota	Fargo	92	78	27	26	12	10	39	3	3	11	
Ohio	Cleveland	1,476	1,267	449	422	258	219	602	24	55	154	
Oklahoma	Muskogee	414	360	129	122	77	59	171	8	13	41	
Oregon	Portland	389	337	122	115	65	48	166	8	14	38	
Pennsylvania	Philadelphia	1,108	961	321	300	203	167	475	19	37	110	
	Pittsburgh	658	575	178	166	117	98	300	11	21	62	
Puerto Rico	San Juan	175	144	49	47	58	52	42	3	8	23	
Rhode Island	Providence	236	202	65	61	44	35	102	4	9	25	
South Carolina	Columbia	336	291	117	112	66	54	121	4	11	34	
South Dakota	Sioux Falls	74	62	18	17	12	10	33	2	2	10	
Tennessee	Nashville	542	468	168	159	105	90	210	9	18	56	
Texas	Houston	743	642	233	218	142	108	305	11	25	76	
	Waco	921	798	289	272	170	130	381	15	30	93	
Utah	Salt Lake City	152	129	59	56	25	19	52	2	6	17	
Vermont	White River Jct.	84	54	21	20	9	7	26	1	3	7	
Virginia	Roanoke	522	452	163	154	107	79	211	8	15	55	
Washington	Seattle	615	529	203	192	117	80	248	9	22	64	
West Virginia	Huntington	208	182	57	54	35	30	93	5	6	20	
Wisconsin	Milwaukee	592	507	189	178	97	83	233	13	22	63	
Wyoming	Cheyenne	45	39	13	13	7	5	20	1	2	4	
Philippines	Manila	8	4	(⁸)	(⁸)	(⁸)	(⁸)	3	1	1	3	
Outside Regional Office Areas		66	56	53	52	1	(⁸)	1	3	3	7	

NOTE: For all regional offices whose jurisdiction includes only part of a state or extends into another state, the estimates of veterans are computed by applying the most recent veteran population ratio factors for the counties or urban places involved. These factors

were developed from county veteran population estimates as of June 30, 1970 based on the 1970 Census of Population. Refer to general note below Table 1.

See footnotes at end of Table 3.

TABLE 3

All Ages
Under 20 yrs
20-24 yrs
25-29 yrs
30-34 yrs
35-39 yrs
40-44 yrs
45-49 yrs
50-54 yrs
55-59 yrs
60-64 yrs
65-69 yrs
70-74 yrs
75-79 yrs
80-84 yrs
85 yrs & over
Average Age

NOTE: E
World War
between
¹ Based on
Departm
No. 876.
² Veteran
conflict

TABLE 3

Estimated Age, Period of Service—September 30, 1980
(In Thousands)

TABLE 3

Estimated Age, Period of Service

(In Thousands)

Age	Total Veterans	War Veterans						World War II ⁴	World War I	Post-Vietnam Era ⁵	Service Between Korean Conflict and Vietnam Era Only				
		Total ²	Vietnam Era		Korean Conflict										
			Total ³	No Service in Korean Conflict	Total ^{3,4}	No Service in World War II									
All Ages	30,118#	26,065#	9,015	8,463	5,826	4,659	12,422	521	1,003	3,050					
Under 20 yrs	58								58						
20-24 yrs	1,024	290	290	290					734						
25-29 yrs	1,925	1,745	1,745	1,745					180	19					
30-34 yrs	3,743	3,698	3,698	3,698					26	783					
35-39 yrs	2,984	2,196	2,196	2,196					5	1,646					
40-44 yrs	2,400	754	486	454	300	300	(⁸)		(⁸)	561					
45-49 yrs	3,110	2,549	241	62	2,487	2,482	5		(⁸)	35					
50-54 yrs	3,874	3,839	188	13	2,105	1,747	2,079			6					
55-59 yrs	4,630	4,624	98	4	521	104	4,516								
60-64 yrs	3,359	3,359	53	1	266	19	3,339								
65-69 yrs	1,524	1,524	17	(⁸)	100	7	1,517								
70-74 yrs	721	721	3	(⁸)	35	(⁸)	721								
75-79 yrs	190	190	(⁸)		10	(⁸)	185	5							
80-84 yrs	311	311			2		55	256							
85 yrs & Over	265	265			(⁸)		5	260							
Average Age ⁷	48.0	49.6	33.8	32.6	50.7	48.8	60.0	84.9	23.0	41.7					

³Includes 552 (thousand) who served in both the Korean conflict and the Vietnam era.
⁴Includes 11 (thousand) who served in both World War II and the Korean conflict.

NOTE: Excludes an estimated 147 (thousand) who served only between World War I and World War II, all of whom are 65 years of age or older, and 240 (thousand) who served only between World War II and the Korean conflict who are 45-59 years of age.

¹ Based on civilian population estimates (provisional) for July 1, 1979 extracted from the U.S. Department of Commerce, Bureau of the Census, *Current Population Reports*, Series P-25, No. 876.

² Veterans who served in both World War II and the Korean conflict, and in both the Korean conflict and the Vietnam era are counted once.

³ Includes 552 (thousand) who served in both the Korean conflict and the Vietnam era.

⁴ Includes 1,167 (thousand) who served in both World War II and the Korean conflict.

⁵ Service only after May 7, 1975.

⁶ Includes Commonwealth of Puerto Rico, U.S. possessions and outlying areas, and foreign countries.

⁷ Computed from data by single years of age.

⁸ Less than 0.5 (thousand).

#There are also 147 living Spanish-American War veterans whose average age is 100.0 years.

X Not applicable.

Hospital Care and Extended Care: Average Daily Census¹
Fiscal Years 1971-1980

Fiscal Years	Total	Hospitals				Domiciliaries			Nursing Homes			
		Total	VA Medical Centers—Hospital Care Component ³	Non-VA	State	Total	VA Medical Centers—Domiciliary Care Component ²	State	Total	VA Medical Centers—Nursing Home Care Component	Community	State
1980 ...	105,085	70,251	68,109	1,213	929	12,786	7,894	4,892	22,048	7,933	8,529	5,586
1979 ...	106,816	71,983	69,821	1,182	980	13,744	8,448	5,296	21,089	7,760	8,126	5,203
1978 ...	109,769	75,390	73,008	1,378	1,004	13,957	8,721	5,236	20,422	7,480	7,997	4,945
1977 ...	111,164	77,671	75,285	1,344	1,042	14,214	8,933	5,281	19,279	7,166	7,507	4,606
1976 ...	113,055	80,519	78,264	1,233	1,022	14,652	9,090	5,562	17,884	6,993	6,646	4,245
1975 ...	114,384	82,253	79,973	1,267	1,013	15,030	9,181	5,849	17,101	6,739	6,239	4,123
1974 ...	114,426	83,534	81,453	1,053	1,028	15,584	9,723	5,861	15,308	6,418	4,885	4,005
1973 ...	115,170	84,556	82,479	1,031	1,046	16,286	10,261	6,025	14,328	6,094	4,572	3,662
1972 ...	113,907	83,185	80,971	1,154	1,060	17,957	11,988	5,969	12,765	5,440	3,990	3,335
1971 ...	115,758	86,319	84,002	1,251	1,066	18,565	12,685	5,880	10,874	4,599	3,377	2,898

¹ Fiscal year averages based on total patient bed days during year divided by the number of days in year.

² Includes restoration center program data for fiscal years 1971 through 1972.

³ Beginning with FY 1973, patients coming to VA hospitals for chronic dialysis are considered inpatients; there was an average daily patient census of 634 with one day duration of stay during FY 1980.

Hospital Care and Extended Care: Admissions¹
Fiscal Years 1971-1980

Fiscal Years	Total	Hospitals				Domiciliaries			Nursing Homes			
		Total	VA Medical Centers—Hospital Care Component ^{1 3}	Non-VA	State	Total	VA Medical Centers—Domiciliary Care Component ²	State	Total	VA Medical Centers—Nursing Home Care Component	Community	State
1980 ...	1,256,186	1,216,367	1,182,603	28,760	5,004	10,746	6,115	4,631	29,073	4,666	19,610	4,797
1979 ...	1,236,987	1,196,169	1,162,566	28,403	5,200	12,278	6,920	5,358	28,540	4,428	19,925	4,187
1978 ...	1,233,818	1,193,613	1,157,787	30,369	5,457	12,382	7,230	5,152	27,823	4,157	19,314	4,352
1977 ...	1,211,029	1,170,563	1,133,380	31,449	5,734	12,998	7,755	5,243	27,468	3,966	19,340	4,162
1976 ...	1,175,148	1,136,285	1,102,271	28,238	5,776	14,134	8,169	5,965	24,729	4,023	16,553	4,153
1975 ...	1,107,808	1,069,757	1,036,101	27,710	5,946	14,478	7,831	6,647	23,573	3,767	16,056	3,750
1974 ...	1,028,502	991,473	964,466	21,091	5,916	15,558	8,522	7,036	21,471	3,834	13,598	4,039
1973 ...	968,203	932,481	905,545	20,816	6,120	17,459	10,365	7,094	18,263	4,002	10,774	3,487
1972 ...	829,305	793,538	765,786	21,578	6,174	18,712	12,103	6,609	17,055	3,785	10,135	3,135
1971 ...	783,956	750,546	723,907	20,952	5,687	18,599	13,627	4,972	14,811	3,549	8,407	2,855

¹ Interhospital transfer data are excluded.

² Includes restoration center program data for fiscal years 1971-1972.

³ Beginning with FY 1973, patients admitted to VA hospitals for chronic dialysis

are considered inpatients; there were 232,161 admissions for one day duration of stay during FY 1980.

VA Medical Centers: Average Operating Beds¹
Fiscal Years 1971-1980

Fiscal Years	All VA Facilities	Hospital Care Component				Domiciliary Care Component ²	Nursing Home Care Component
		Total	Bed Section				
			Medical	Surgical	Psychiatric		
1980	101,056	84,129	41,203	18,040	24,886	8,431	8,496
1979	105,469	87,713	42,772	18,542	26,402	9,389	8,357
1978	108,891	91,215	44,372	19,175	27,669	9,792	7,884
1977	109,879	92,370	44,587	19,610	28,173	9,936	7,573
1976	111,574	94,075	44,943	19,854	29,278	10,101	7,398
1975	112,143	94,801	44,893	19,725	30,183	10,310	7,032
1974	113,714	96,106	45,331	19,597	31,178	10,839	6,769
1973	115,369	97,689	45,261	19,640	32,788	11,172	6,508
1972	115,268	96,352	40,003	19,212	37,137	13,097	5,819
1971	117,640	98,956	35,733	19,366	43,857	13,632	5,052

¹ Fiscal year averages are based on the number of operating beds at the end of each month for 13 consecutive months, beginning with June of the prior year and ending with June of the indicated fiscal year. Beginning with FY 1977 averages are based on the number of operating beds at the end of each month for 13

consecutive months, beginning with September of the prior year and ending with September of the indicated fiscal year.

² Includes restoration center program data for fiscal years 1971-1972.

TABLE 7

**Hospital Care and Extended Care: Patients Remaining (On Rolls)
At End of Period¹—Fiscal Years 1971–1980**

Fiscal Years	Total	Hospitals							Domiciliaries			Nursing Homes				
		Total	VA Medical Centers— Hospital Care Component			Non-VA			State	Total	VA Medical Centers— Domiciliary Care Component ³	State	Total	VA Medical Centers— Nursing Home Care Component	Com- munity	State
			Total	Bed Occu- pants	ABO ²	Total	Bed Occu- pants	ABO ²								
1980	105,831	70,519	68,626	67,862	764	999	996	3	894	12,986	8,306	4,680	22,326	8,289	8,330	5,707
1979	106,349	69,828	67,897	66,914	983	945	923	22	986	14,245	9,061	5,184	22,276	8,092	8,836	5,348
1978	108,529	72,283	70,134	69,062	1,072	1,164	1,162	2	985	14,858	9,595	5,263	21,388	7,893	8,336	5,159
1977	111,267	75,271	73,116	72,010	1,106	1,138	1,123	15	1,017	15,282	9,902	5,380	20,714	7,603	8,310	4,801
1976	112,114	77,750	75,786	74,413	1,373	957	942	15	1,007	15,317	10,120	5,197	19,047	7,419	7,196	4,432
1975	113,422	79,499	77,432	76,007	1,425	1,031	1,008	23	1,036	15,882	10,226	5,656	18,041	7,075	6,869	4,097
1974	114,174	80,526	78,640	76,847	1,793	852	811	41	1,034	16,415	10,653	5,762	17,233	6,828	6,287	4,118
1973	113,496	81,146	79,336	77,356	1,980	793	762	31	1,017	17,322	11,373	5,949	15,028	6,526	4,695	3,807
1972	113,492	81,489	79,406	77,344	2,062	1,053	820	233	1,030	18,107	12,235	5,872	13,896	5,627	4,740	3,529
1971	114,179	82,207	79,985	78,453	1,532	1,146	952	194	1,076	20,041	14,310	5,731	11,931	4,936	3,848	3,147

¹ Patients remaining (on rolls) on: June 30 of each fiscal year 1971 through 1976 and September 30 of FY 1977-1980.

² Denotes absent bed occupants, i.e., patients on authorized absence.

³ Includes restoration center program data for fiscal years 1971-1972.

TABLE 8

**Hospital Care and Extended Care: Total Discharges¹—
Fiscal Years 1971–1980**

Fiscal Years	Total	Hospitals				Domiciliaries			Nursing Homes			
		Total	VA Medical Centers— Hospital Care Component ²	Non-VA	State	Total	VA Medical Centers— Domiciliary Care Component ³	State	Total	VA Medical Centers— Nursing Home Care Component	Community	State
1980	1,253,429	1,212,447	1,178,890	28,457	5,100	11,969	6,874	5,095	29,013	4,461 ¹	20,206	4,346 ¹
1979	1,235,811	1,195,884	1,162,355	28,323	5,206	12,832	7,480	5,352	27,095	4,190	18,971	3,934
1978	1,233,634	1,194,367	1,158,621	30,253	5,493	12,914	7,680	5,234	26,353	3,778	18,680	3,915
1977	1,211,506	1,173,740	1,136,647	31,378	5,715	13,173	8,103	5,070	24,593	3,714	17,048	3,831
1976	1,174,973	1,137,231	1,103,108	28,316	5,807	14,635	8,288	6,347	23,107	3,522	15,802	3,783
1975	1,106,685	1,069,945	1,036,441	27,573	5,931	14,668	8,262	6,406	22,072	3,457	14,880	3,735
1974	1,026,576	991,599	964,653	21,047	5,899	15,959	9,269	6,690	19,018	3,496	11,850	3,672
1973	968,469	933,237	906,015	21,084	6,138	17,471	10,721	6,750	17,761	3,009	11,592	3,160
1972	830,697	794,785	766,892	21,682	6,211	20,215	14,201	6,014	15,697	2,959	10,049	2,689
1971	798,163	765,268	738,594	21,022	5,652	19,221	13,823	5,398	13,674	2,453	8,955	2,266

¹ Includes deaths.

² Interhospital transfer data are excluded.

³ Includes restoration center program data for fiscal years 1971-1972.

⁴ Beginning with FY 1973, patients coming to VA hospitals for chronic dialysis are considered inpatients. There were 232,161 patients treated for one day during fiscal year 1980.

TABLE 9

**Hospital Care and Extended Care: Patients Treated¹—
Fiscal Years 1971–1980**

Fiscal Years	Total	Hospitals				Domiciliaries			Nursing Homes			
		Total	VA Medical Centers— Hospital Care Component ²	Non-VA	State	Total	VA Medical Centers— Domiciliary Care Component ³	State	Total	VA Medical Centers— Nursing Home Care Component	Community	State
1980	1,359,271	1,282,966	1,247,516	29,456	5,994	24,966	15,180	9,786	51,339	12,750	28,536	10,053
1979	1,342,161	1,265,712	1,230,252	29,268	6,192	27,077	16,541	10,536	49,372	12,283	27,807	9,282
1978	1,342,164	1,266,650	1,228,755	31,418	6,478	27,772	17,275	10,497	47,741	11,671	26,966	9,074
1977	1,322,773	1,249,011	1,209,763	32,516	6,732	28,455	18,005	10,450	45,307	11,317	25,358	8,632
1976	1,287,087	1,214,981	1,178,894	29,273	6,814	29,952	18,408	11,544	42,154	10,941	22,998	8,215
1975	1,220,107	1,149,444	1,113,873	28,604	6,967	30,550	18,488	12,062	40,113	10,532	21,749	7,832
1974	1,140,750	1,072,125	1,043,293	21,899	6,933	32,374	19,922	12,452	36,251	10,324	18,137	7,790
1973	1,081,965	1,014,383	985,351	21,877	7,155	34,793	22,094	12,699	32,789	9,535	16,287	6,967
1972	944,189	876,274	846,298	22,735	7,241	38,322	26,436	11,886	29,593	8,586	14,789	6,218
1971	912,342	847,475	818,579	22,168	6,728	39,262	28,133	11,129	25,605	7,389	12,803	5,413

¹ Fiscal year data based on number of discharges and deaths during year plus number of patients on the rolls at the end of the year.

² Includes restoration center program data.

³ Beginning with FY 1973, patients coming to VA hospitals for chronic dialysis are considered inpatients. There were 232,161 patients treated for one day during fiscal year 1980.

Inpatient and Ambulatory Care: Program Summary—Fiscal Year 1980

Location and Type of VA Facility	Inpatient Care — Patients Treated						Ambulatory Care						
	Hospitals			Nursing Homes			Domiciliaries		Medical Visits		Dental Care		
	VA Medical Centers— Hospital Care Compo- nent	Non-VA 1 2	State Home 1 3	VA Medical Centers— Nursing Home Care Compo- nent	Communi- ty 1 2	State Home 1 3	VA Medical Centers— Domicili- ary Care Compo- nent	State Home 1 3	VA Staff	Fee Basis 1 4	VA Staff		Net Cases Author- ized 1 5
											Exami- nations	Treat- ment Cases Com- pleted	
All facilities — Total	1,247,516	29,456	5,994	12,750	28,536	10,053	15,180	9,786	15,751,690	2,219,717	88,775	74,067	109,801
Alabama:													
Birmingham	12,937				258				116,620		1,950	2,008	
Montgomery	2,928	309			48				43,431	35,903	491	379	1,408
Montgomery Mobile	2,928	309			48				36,975	35,903	491	379	1,408
Tuscaloosa	5,047	3		151	120				6,456				
Tuskegee	7,147			139	50				53,059		379	387	
Alaska: Anchorage		3,229			37				39,001		134	186	
Arizona:										21,564			287
Phoenix	9,631	247		175	440				111,384	20,503	959	1,298	1,845
Prescott	3,901				24		413		30,263		176	158	
Tucson	9,714	84		52	228				118,840		284	260	
Arkansas:													
Fayetteville	4,812				70				26,547		280	233	
Little Rock	18,463	264		239	272			19	160,433	40,029	587	717	
Little Rock	18,463	264		239	272			19	95,539	40,029	587	717	
No. Little Rock									64,894				
California:													
Fresno	5,009				141				61,377		250	209	10
Livermore	2,704				69				30,490		213	200	
Loma Linda	9,482	87		242	165				146,968		969	1,012	
Long Beach	20,025			382	585				338,475		492	211	
Los Angeles — Brentwood	3,496				126				162,142		72	60	
Los Angeles — Wadsworth	15,100				420		628		174,534		468	416	
Los Angeles — Wadsworth Santa Barbara									171,749				
Los Angeles		744							2,785				
Martinez	7,050	10			101				173,625	84,236	346	879	6,088
Martinez	7,050	10			101				156,393	1,014	926		
Oakland									84,075		199	163	
Sacramento									29,099				
Palo Alto	12,793	1		379	191				43,219		815	763	
Palo Alto Div	12,793	1		379	191				198,562		507	492	
Menlo Park Div									115,960		444	447	
San Diego	15,086	232		151	90				82,602		63	45	
San Diego (La Jolla Village Dr.)	15,086	232		151	90				203,853	9,692	2,746	1,450	2,379
San Diego (Camino Del Rio No.)									145,778	9,692	1,566	1,250	
San Francisco	10,664	996	1,326		199	771		1,313	58,075		1,180	200	
Sepulveda	11,266			251	153				206,713	153,806	528	404	7,369
Colorado:									200,798		932	900	
Denver	12,186	153			215	195		91	139,858	16,558	768	546	2,335
Ft. Lyon	1,336	15		48	66				21,612		38	37	
Grand Junction	2,307			51	92				17,369		53	39	
Connecticut:													
	3,821	74	854		123			946	57,959	37,597	550	486	420
									115,128		756	553	

Inpatients and Ambulatory Care: Program Summary—Fiscal Year 1980

[illegible]

Biloxi	6,811	37	225	827	35,037	294	234	1,851
Biloxi Div	14,103	152	124		80,499	359	318	
Gulfport Div								
Jackson								
Alabama								
Columbia	7,398	94	158		60,462	179	90	
Kansas City	12,593	196	305		109,879	583	529	
Poplar Bluff	3,965	109	109		31,793	196	173	
St. Louis	15,740	63	302		235,769	597	340	
John Cochran Div	15,740	63	302		194,653	464	244	
Jefferson Barracks Div					41,116	133	96	
Montana								
Ft. Harrison	3,074	247	88		12,725	77	77	865
Miles City	2,054		56		11,227	16	17	
Nebraska								
Grand Island	2,550		12		17,356	101	94	
Lincoln	4,141	86	72		35,578	227	210	
Omaha	8,468		233		77,692	338	381	504
Nevada								
Las Vegas					45,574	433	375	
Reno	4,262	215	55		48,004	327	315	325
New Hampshire: Manchester	3,871	122	115		59,297	614	354	700
New Jersey								
East Orange	16,199	197	343		186,534	1,139	853	822
East Orange	16,199	197	343		117,698	1,139	853	822
Newark					68,836			
Lyons	4,255		79		45,808	184	161	
New Mexico: Albuquerque	8,851	199	320		107,273	946	663	1,075
New York								
Albany	9,157	64	82		110,885	496	423	1,051
Batavia	2,132		8		72,868	160	159	
Batavia	2,132		8		26,567	160	159	
Rochester					46,301			
Bath	1,525	6	37		15,910	121	100	16
Bronx	15,210		73		164,599	343	284	
Brooklyn	18,509	101	111		198,859	403	427	
Brooklyn Div	18,509	101	111		173,049	304	316	
St. Albans Div					25,810	99	111	
Brooklyn		84			109,988	960	1,022	98
Buffalo	15,239	150	102		156,300	716	736	470
Canandaigua	3,421		6		36,631	190	191	
Castle Point	2,868		11		26,706	155	167	
Montrose	4,421		19		73,222	526	390	
New York	14,186	345	45		293,093	1,042	1,584	996
New York (First Ave.)	14,186	345	45		136,263	1,042	1,584	996
New York					156,830			
Northport	11,923		53		198,369	752	644	
Syracuse	5,944	184	34		86,558	963	529	827
North Carolina								
Asheville	8,473	25	179		70,691	408	231	
Durham	10,158		183		94,958	299	197	
Fayetteville	5,452		142		53,737	301	374	
Salisbury	6,166	222	108		80,970	841	488	2,338
Salisbury	6,166	222	108		56,611	421	313	2,338
Winston-Salem					24,359	420	175	
North Dakota: Fargo	4,498	359	85		25,712	205	186	907
Ohio								
Chillicothe	4,844		392		46,616	323	133	
Cincinnati	10,545	105	211		15,430	325	275	1,362
Cleveland	16,012	170	407		204,419	1,068	809	1,121
Wade Park Div	16,012	170	407		136,257	610	521	
Brecksville					67,522	458	288	
Canton					640			
Columbus		118			47,816			1,231
Columbus (Clinic Dr.)		118			25,196			1,231
Columbus					40,603			
Dayton	6,980		167		7,213			
		376			52,410	367	317	

See footnotes at end of table.

TABLE IV...Continued

[illegible]

Columbia	8,371	316	244	179	100	828	780
Greenville
South Dakota:							
Ft. Meade
Hot Springs	3,039	8	24	105	113
Sioux Falls	3,865	23	45	29
Tennessee:	4,136	32	100	124	113	111
Memphis
Mountain Home	15,695	130	766	682
Murfreesboro	5,977	69	326	302	282
Nashville	2,074	54	59	210	199
Nashville	14,456	389	202	562	550
Nashville	14,456	389	202	562	550
Chattanooga
Knoxville
Texas:							
Amarillo	3,412	4	82	140	125
Big Spring	3,912	154	149	90	79
Bonham	2,030	128	124	284	273
Dallas	18,026	162	546	1,029	899
El Paso	860	681	803
Houston	19,512	105	121	491	707	643
Houston	19,512	105	121	491	541	483
Beaumont	166	160
Kerrville	4,555	44	151	66	56
Lubbock	514	266
Marlin	2,128	174	17,321	47
San Antonio	19,458	263	125	56	63	1,456
San Antonio (Merton Minter Blvd.)	19,458	263	125	423	1,882	927
Corpus Christi	423	1,252	927
McAllen
San Antonio (Dwyer Ave.)
Temple	12,228
Waco	5,520	100	125	239	1,075	430	348
Waco (Memorial Dr.)	5,520	100	125	150	587	584
Waco (No. Valley Mills Dr.)	412	430
Utah: Salt Lake City	12,004	30	168	163	412	430
Vermont: White River Junction	4,257	82	148	73	300	527	499
Virginia:						211	211
Hampton	5,313	12	125	129	875	583
Richmond	14,868	7	180	886	762
Salem	8,231	445	158	172	486	338
Washington:							
American Lake (Tacoma)	2,634	103	90	57	327	372
Seattle	8,491	452	396	555	304
Spokane	3,995	165	360	36,208	350
Vancouver	4,653	205	39,769	151
Walla Walla	2,044	68	83	71
West Virginia:							
Beckley	5,161	62	73	160	156
Clarksburg	5,776	172	197	165
Huntington	3,021	144	237	159	209
Martinsburg	6,217	2	234	850	130	159
Wisconsin:							
Madison	9,333	191	87	48	39
Tomah	3,072	124	65	711	4	4
Wood	13,396	467	250	366	2,469	296
Wyoming:							
Cheyenne	3,006	25	60	73	139	148
Sheridan	1,844	41	65	2	42	13

¹ As reported by VA authorizing facility.
² Authorized and paid for by VA.
³ Supported by VA.
⁴ Medical visits to private physicians authorized by VA on a fee-for-service basis.
⁵ Net number of dental cases authorized by VA to private dentists on a fee-for-service basis.

Applications For Medical Care—Fiscal Years 1979–1980

TABLE 11

Item	FY 1980	FY 1979
Total applications		
Pending determination of need at beginning of period	2,744,861	2,509,983
Received during period	2,762	2,716
	2,742,099	2,507,267
Processed — Total		
In need of care	2,671,089	2,436,202
Hospital care	2,298,880	2,052,601
Ambulatory care	898,849	920,042
Nursing home care	1,391,052	1,122,658
Domiciliary care	4,241	4,049
Not in need of care	4,738	5,852
	372,209	383,601
Cancelled	71,260	69,768
Pending determination of need at end of period	3,788	2,748
Acceptance rate	86.1%	84.3%

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Total Health Care: Operating Costs by Program

TABLE 12

	Cost (000)
Total Operating Costs	\$6,157,763
Medical Care	
Inpatient Care	5,971,778
Hospitals	4,372,261
VA hospitals	3,916,938
Contract hospitals	3,838,951
State home hospitals	73,841
Nursing homes	4,146
VA nursing homes	358,727
Community nursing homes	218,906
State nursing homes	118,089
Domiciliaries	21,732
VA domiciliaries	96,596
State domiciliaries	84,923
Outpatient care	11,673
CHAMPVA	1,139,345
Education and training	36,308
Miscellaneous benefits and services	301,888
	121,978
Miscellaneous Operating Expenses	
Medical administration	48,320
Post graduate & inservice training	35,062
Exchange of medical information	10,505
	2,753
Medical & Prosthetic Research	
Medical research	137,665
Rehabilitative research	127,030
Health services research	7,554
	3,081

VA and Non-VA Facilities: Average Costs—Fiscal Years 1979–1980

Type of Facility	Average Cost per Patient Treated		Average Cost per Patient Day	
	FY 1980	FY 1979	FY 1980	FY 1979
VA Hospitals				
All Bed Sections	\$3,077	\$2,772	\$154.00	\$133.82
Medical Bed Sections	2,688	2,466	159.10	139.44
Surgical Bed Sections	3,101	2,718	208.65	179.25
Psychiatric Bed Sections	4,548	4,018	111.03	95.87
Non-VA (Contract) Hospitals	2,412	2,156	160.05	146.27
VA Nursing Home Care Units	17,169	15,140	75.39	65.65
Community Nursing Homes	4,043	3,490	36.96	32.72
VA Domiciliaries	5,594	4,780	29.39	25.64
State Homes				
Hospital Care	597	765	10.52	11.50 ¹
Nursing Home Care	2,067	2,073	10.16	10.13
Domiciliary Care	1,098	1,022	5.50 ¹	5.50 ¹

¹ Per diems reflect statutory limitations.

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**VA Medical Centers—Hospital Care Component, Non-VA (Contract), and State Home Hospitals:
Admissions, Discharges, and Remaining by Type of Hospital and Bed Section—Fiscal Year 1980**

Type of Facility	Type of Bed Section			
	Total	Medical	Surgical	Psychiatric
ADMISSIONS¹				
All hospitals	1,216,367	735,874 ²	307,145 ²	168,344 ²
VA Medical Centers — Total	1,182,603	718,218	303,968	160,417
Non-VA (contract) hospitals — Total	28,760	17,656	3,177	7,927
Federal Government Hospitals — Total	2,389	1,521	676	192
Army	1,886	1,071	646	169
Air Force	317	294	22	1
Navy	64	56	7	1
Public Health Service	119	97	1	21
Other ³	3	3		
State and local government hospitals	7,285	4,142	681	2,462
Non-Public hospitals	18,153	11,323	1,643	5,187
Foreign government hospital ⁴	933	670	177	86
State home hospitals	5,004	(⁵)	(⁵)	(⁵)
DISCHARGES^{1 6}				
All hospitals	1,212,447	714,435 ²	318,616 ²	174,296 ²
VA Medical Centers — Total	1,178,890	696,862	315,453	166,575
Non-VA (contract) hospitals — Total	28,457	17,573	3,163	7,721
Federal Government Hospitals — Total	2,356	1,502	671	183
Army	1,853	1,055	641	157
Air Force	320	297	22	1
Navy	63	55	7	1
Public Health Service	114	91	1	22
Other ³	6	4		2
State and local government hospitals	7,296	4,139	690	2,467
Non-Public hospitals	17,855	11,256	1,620	4,979
Foreign government hospitals ⁴	950	676	182	92
State home hospitals	5,100	(⁵)	(⁵)	(⁵)
BED OCCUPANTS REMAINING				
Total occupants remaining on September 30, 1980	70,516	33,621 ²	14,039 ²	21,962 ²
VA Medical Centers — Total	68,626	33,421	13,975	21,230
Non-VA (contract) hospitals — Total	996	200	64	732
Federal Government Hospitals — Total	93	49	28	16
Army	89	45	28	16
Air Force	3	3		
Navy	1	1		
Public Health Service				
Other ³				
State and local government hospitals	67	24	1	42
Non-Public hospitals	802	99	31	672
Foreign government hospital ⁴	34	28	4	2
State home hospitals	894	(⁵)	(⁵)	(⁵)
ABSENT BED OCCUPANTS REMAINING				
Total absent bed occupants (i.e., patients on leave absence) remaining on September 30, 1980	767	134	176	457
VA Medical Centers — Total	764	134	174	456
All other hospitals	3		2	1

¹ Excludes interhospital transfers for VA medical centers; includes transfers for all other hospitals.

² Excludes State Home Hospitals; data by bed section not reported.

³ U.S. health care facilities in the Canal Zone area; and St. Elizabeth Hospital, Washington, D.C., which is operated by the Department of Health Education and Welfare.

⁴ Veterans Memorial Medical Center, Manila, Republic of the Philippines.

⁵ Data not available.

⁶ Includes deaths.

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TABLE 15

*VA Medical Centers—Hospital Care Component and Non-VA Hospitals: Patient Movement
By Type of Bed Section—Fiscal Year 1980*

INPATIENT CARE

Item	VA Medical Centers				Non-VA Hospitals			
	Total Patients	Type of Bed Section ¹			Total Patients	Type of Bed Section		
		Medical ²	Surgical	Psychiatric		Medical	Surgical	Psychiatric
Total on rolls (bed occupants and patients on leave of absence) remaining on September 30, 1979	67,884	32,688	13,467	21,729	926	260	70	596
Gains during Fiscal Year 1980 — Total	1,359,263	807,600	364,078	187,585	28,873	17,680	3,207	7,986
Admissions	1,182,603	718,218	303,968	160,417	28,760	17,656	3,177	7,927
Transfers in from other hospitals ³	29,436	12,693	9,320	7,423	(⁴)	(⁴)	(⁴)	(⁴)
Changes in bed sections (+)	147,224	76,689	50,790	19,745	113	24	30	59
Losses during Fiscal Year 1980 — Total	1,358,362	806,714	363,563	188,085	28,613	17,633	3,188	7,792
Regular discharges — Total	1,178,890	696,862	315,453	166,575	28,457	17,573	3,163	7,721
To Ambulatory Care	774,324	476,124	241,304	56,896	(⁵)	(⁵)	(⁵)	(⁵)
Other	358,958	183,713	65,886	109,359	27,745	16,976	3,093	7,676
Deaths	45,608	37,025	8,263	320	712	624	70	18
Transfers out to other hospitals ³	32,218	17,729	8,767	5,722	(⁵)	(⁵)	(⁵)	(⁵)
Changes in bed sections (—)	147,254	92,123	39,343	15,788	156	33	25	98
Remaining on September 30, 1980 — Total	68,626	33,421	13,975	21,230	999	200	66	733
Bed occupants	67,862	33,287	13,801	20,774	996	200	64	732
On leave of absence	764	134	174	456	3	2	1
Patients treated during the Fiscal Year 1980 ^{6 7} ..	1,247,516	730,283	329,428	187,805	29,456	17,773	3,229	8,454
Episodes of care during Fiscal Year 1980 ⁸	1,394,770	822,406	368,771	203,593	29,612	17,833	3,254	8,525
Average daily census during Fiscal Year 1980 ⁹
Total	68,109	33,712	13,379	21,018	1,213	402	104	707
Excluding days while patients on authorized leave of absence of 96 hours or less	66,718	33,258	13,078	20,382

¹Beds are classified according to their intended use; patients are classified according to the classification of the beds they occupy, rather than on a diagnostic basis.

²Medical bed sections include medicine, neurology, intermediate care, spinal cord injury, medical rehabilitation, and blind rehabilitation.

³Include only patients transferred as VA beneficiaries.

⁴Included with the data on admissions.

⁵Included with the data on "other" regular discharges.

⁶Based on the number of discharges and deaths during FY 1980, plus the number remaining on the rolls on September 30, 1980. Interhospital and intrahospital transfers are excluded.

⁷Patients coming to VA hospitals for chronic dialysis are considered to be inpatients; there were 232,161 such patients with one day duration of stay treated during the fiscal year.

⁸Based on the number of discharges and deaths during FY 1980, plus the number remaining on the rolls on September 30, 1980. Interhospital transfers are excluded but intrahospital transfers are included.

⁹Based on the number of patient days divided by the number of days in the fiscal year.

INPATIENT CARE

TABLE 10

**VA Medical Centers—Hospital Care Component and Non-VA Hospitals: Patient Movement
By Type of Hospital—Fiscal Year 1980**

Item	VA Medical Centers- Hospital Care Component	Non-VA (Contract) Hospitals				
		Total	Type of Hospital			
			Federal Government ¹	State and Local Government	Non- Public	Foreign Government ²
Total on rolls (bed occupants and patients on leave of absence) remaining on September 30, 1979	67,884	926	90	85	699	52
Gains during Fiscal Year 1980 — Total	1,359,263	28,873	2,418	7,288	18,201	966
Admissions	1,182,603	28,760	2,389	7,285	18,153	933
Transfers in from other medical centers ³	29,436	(⁴)	(⁴)	(⁴)	(⁴)	(⁴)
Changes in bed sections (+)	147,224	113	29	3	48	33
Losses during Fiscal Year 1980 — Total	1,358,362	28,613	2,385	7,296	17,949	983
Regular discharges — Total	1,178,890	28,457	2,356	7,296	17,855	950
To Ambulatory Care	774,324	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)
Other	358,958	27,745	2,232	7,152	17,438	923
Deaths	45,608	712	124	144	417	27
Transfers out to other medical centers ³	32,218	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)
Changes in bed sections (—)	147,254	156	29	94	33
Remaining on September 30, 1980 — Total	68,626	999	93	68	803	35
Bed occupants	67,862	996	93	67	802	34
On leave of absence	764	3	1	1	1
Patients treated during the fiscal year ^{6 7}	1,247,516	29,456	2,449	7,364	18,658	985
Episodes of care during the fiscal year ⁸	1,394,770	29,612	2,478	7,364	18,752	1,018
Average daily census during the fiscal year ⁹
Total	68,109	1,213	90	187	889	47
Excluding days while patients on authorized leave of absence of 96 hours or less	66,718

¹ Includes Department of Defense and Public Health Service hospitals, U.S. health care facilities in the Canal Zone area; and St. Elizabeths Hospital, Washington, D.C., which is operated by the Department of Health, Education and Welfare.

² Veterans Memorial Medical Center, Manila, Republic of the Philippines.

³ Includes only patients transferred as VA beneficiaries.

⁴ Included with the data on admissions.

⁵ Included with the data on "other" regular discharges.

⁶ Based on the number of discharges and deaths during the fiscal year, plus the number on the rolls on September 30, 1980.

⁷ Patients coming to VA medical centers for chronic dialysis are considered to be inpatients; there were 232,161 such patients with one day duration of stay treated during the fiscal year.

⁸ Based on the number of discharges and deaths during FY 1980, plus the number remaining on the rolls on September 30, 1980. Interhospital transfers are excluded but intrahospital transfers (i.e., changes in bed sections) are included.

⁹ Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

TABLE 11

All hospitals:

Alabama:

Birmingham

Montgomery

Tuskegee

Tuscaloosa

Arizona:

Phoenix

Prescott

Tucson

Arkansas:

Fayetteville

Little Rock

California:

Fresno

Livermore

Loma Linda

Long Beach

Los Angeles

Los Angeles

Martinez

Palo Alto

San Diego

San Francisco

Sepulveda

Colorado:

Denver

Ft. Lyon

Grand Junction

Connecticut:

Newington

West Hartford

Delaware:

District of Columbia

Florida:

Bay Pines

Gainesville

Lake City

Miami

Tampa

Georgia:

Atlanta

Augusta

Dublin

Idaho: Boise

Illinois:

Chicago

Chicago

Danville

Hines

Marion

North Chicago

Indiana:

Ft. Wayne

Indianapolis

Marion

Iowa:

Des Moines

Iowa City

Knoxville

Kansas:

Leavenworth

Topeka

Wichita

Kentucky:

Lexington

Louisville

Louisiana:

Alexandria

New Orleans

Shreveport

Maine: Trenton

Maryland:

Baltimore

Ft. Hood

Perryville

Massachusetts:

Bedford

Boston

Brockton

See footnotes

TABLE 17

VA Medical Centers—Hospital Care Component: Selected Data—Fiscal Year 1980

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(⁵)
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Location	Average Operating Beds ¹				Patients Treated Total 2 3	Episodes of Care ⁴			Average Daily Census 5
	Total	Bed Section ⁶				Bed Section ⁶			
		Medical 7	Surgical	Psychiatric		Medical 7	Surgical	Psychiatric	
All hospitals ⁸	84,129	41,203	18,040	24,886	1,247,516	822,406	368,771	203,593	68,109
Alabama:									
Birmingham	419	191	228	12,937	8,513	5,912	301
Montgomery	157	137	20	2,928	2,659	529	127
Tuskegee	977	481	95	401	7,147	4,349	1,779	2,589	786
Tuscaloosa	568	139	429	5,047	1,250	4,324	494
Arizona:									
Phoenix	470	220	114	136	9,631	5,260	2,992	2,060	365
Prescott	212	135	50	27	3,901	2,536	1,247	403	163
Tucson	325	157	120	48	9,714	6,080	3,410	793	253
Arkansas:									
Fayetteville	197	134	63	4,812	3,419	1,687	166
Little Rock	1,365	532	277	556	18,463	10,347	7,549	3,578	1,049
California:									
Fresno	255	122	107	26	5,009	2,681	2,041	547	195
Livermore	181	105	65	12	2,704	1,853	807	220	129
Loma Linda	432	199	173	60	9,482	6,094	3,343	790	329
Long Beach	1,188	777	261	150	20,025	13,684	5,173	2,182	903
Los Angeles (Brentwood)	450	30	420	3,496	369	3,410	395
Los Angeles (Wadsworth)	754	511	243	15,100	12,120	5,172	511
Martinez	402	197	143	62	7,050	3,537	3,077	1,058	299
Palo Alto	1,283	233	137	913	12,793	6,617	2,645	4,874	1,037
San Diego	573	268	202	104	15,086	10,173	4,857	1,474	426
San Francisco	357	134	173	50	10,664	6,254	4,352	804	275
Sepulveda	677	321	131	226	11,266	8,129	2,168	1,814	478
Colorado:									
Denver	421	148	180	92	12,186	7,120	4,153	1,711	304
Ft. Lyon	404	172	232	1,336	787	943	337
Grand Junction	112	62	26	24	2,307	1,479	679	410	88
Connecticut:									
Newington	185	68	81	35	3,821	2,213	1,436	414	132
West Haven	640	351	155	134	12,057	9,460	2,735	964	466
Delaware: Wilmington	321	171	150	4,198	2,396	2,264	249
District of Columbia: Washington	708	327	201	180	17,110	13,993	3,335	1,636	608
Florida:									
Bay Pines	673	396	151	126	8,469	5,626	3,066	1,459	600
Gainesville	480	164	226	90	12,757	5,912	6,388	1,108	386
Lake City	341	256	85	7,354	5,699	2,026	257
Miami	716	345	202	169	17,305	12,431	5,102	2,552	572
Tampa	697	299	236	162	21,176	14,908	5,776	2,037	563
Georgia:									
Atlanta	493	208	189	96	12,930	8,073	4,005	1,521	406
Augusta	973	407	155	412	10,304	5,255	2,998	3,641	784
Dublin	357	321	36	5,033	5,048	744	270
Idaho: Boise	155	90	65	3,406	2,910	1,515	116
Illinois:									
Chicago (Lakeside)	452	259	175	18	11,514	9,442	2,671	252	371
Chicago (West Side)	489	230	175	84	7,932	4,191	3,079	1,550	443
Danville	948	517	86	345	4,740	2,611	1,441	1,999	682
Hines	1,286	728	318	240	22,589	16,433	4,812	3,434	995
Marion	171	126	45	3,605	2,604	1,261	137
North Chicago	1,179	391	81	706	6,342	4,235	1,192	2,945	991
Indiana:									
Ft. Wayne	154	99	55	2,693	2,835	922	110
Indianapolis ⁹	526	231	200	96	12,031	7,428	4,613	1,145	398
Marion	865	613	252	3,177	2,624	1,805	756
Iowa:									
Des Moines	275	146	129	6,025	3,544	2,845	190
Iowa City	329	142	137	50	12,014	8,035	3,945	815	260
Knoxville	453	128	325	1,820	626	1,657	391
Kansas:									
Leavenworth	449	186	113	150	6,083	3,047	1,804	1,970	325
Topeka	872	332	57	483	5,639	2,912	1,388	2,337	730
Wichita	148	80	67	4,148	2,991	1,392	122
Kentucky:									
Lexington ¹⁰	862	436	130	296	12,693	8,387	4,194	2,283	725
Louisville	423	192	182	49	8,045	4,337	3,370	978	306
Louisiana:									
Alexandria	357	216	106	35	5,656	4,271	2,214	596	297
New Orleans	527	240	208	79	12,632	8,467	3,897	975	405
Shreveport	413	189	150	74	9,156	4,726	3,498	1,386	301
Maine: Togus	563	207	78	278	7,557	4,084	1,569	2,783	481
Maryland:									
Baltimore	279	130	109	40	6,746	3,753	2,509	1,278	218
Ft. Howard	231	214	17	2,149	2,073	214	199
Perry Point	784	398	386	2,850	2,309	1,463	722
Massachusetts:									
Bedford	752	320	43	389	3,337	1,726	435	2,055	700
Boston	800	427	287	86	14,451	10,558	6,212	1,065	603
Brockton	812	337	15	460	4,188	1,756	213	2,826	740

See footnotes at end of table.

VA Medical Centers—Hospital Care Component: Selected Data—Fiscal Year 1980

Location	Average Operating Beds ¹				Patients Treated Total 2 3	Episodes of Care ⁴			Average Daily Census 5
	Total	Bed Section ⁶				Bed Section ⁶			
		Medical 7	Surgical	Psychiatric		Medical 7	Surgical	Psychiatric	
Northampton	594	238	356	2,689	1,543	1,923	530
West Roxbury	272	193	79	4,566	2,856	2,183	282
Michigan:									
Allen Park	542	273	149	120	12,489	8,892	2,908	1,756	439
Ann Arbor	327	142	85	100	12,055	9,647	2,973	1,174	281
Battle Creek	922	386	537	4,287	1,550	3,717	781
Iron Mountain	213	126	87	4,106	3,121	1,107	140
Saginaw	158	112	46	4,184	3,264	1,007	111
Minnesota:									
Minneapolis	738	319	319	100	19,627	12,449	7,382	1,459	573
St. Cloud	845	423	422	3,040	1,452	2,233	708
Mississippi:									
Biloxi	824	261	73	490	6,811	2,283	2,239	3,096	731
Jackson	468	222	176	70	14,103	9,317	4,131	1,206	386
Missouri:									
Columbia	374	170	144	60	7,398	4,556	3,795	580	267
Kansas City	416	191	159	65	12,593	8,739	3,961	1,002	376
Poplar Bluff	176	97	69	10	3,965	2,327	1,599	352	148
St. Louis	892	397	213	282	15,740	10,459	4,392	3,091	712
Montana:									
Ft. Harrison	154	99	55	3,074	2,158	1,097	107
Miles City	94	64	30	2,054	1,594	499	61
Nebraska:									
Grand Island	151	114	37	2,550	2,081	612	98
Lincoln	186	57	76	53	4,141	2,183	1,439	1,119	141
Omaha	383	191	125	67	8,468	5,997	2,749	969	314
Nevada: Reno	168	90	56	22	4,262	2,725	1,558	369	127
New Hampshire: Manchester	154	93	61	3,871	2,404	1,617	133
New Jersey:									
East Orange	977	543	243	191	16,199	12,600	3,602	1,504	768
Lyons	1,240	529	27	684	4,255	2,037	528	3,126	1,063
New Mexico: Albuquerque	341	156	137	48	8,851	6,509	3,893	761	247
New York:									
Albany	697	366	200	131	9,157	5,006	3,271	1,899	578
Batavia	239	209	30	2,132	2,086	599	198
Bath	208	197	11	1,525	1,450	224	198
Bronx	700	388	250	62	15,210	11,819	3,448	850	544
Brooklyn ¹¹	1,037	628	293	116	18,509	14,281	3,628	1,880	817
Buffalo	785	452	199	134	15,239	10,557	3,829	2,192	689
Canandaigua	1,004	540	464	3,421	1,891	2,349	889
Castle Point	254	187	67	2,868	2,016	1,146	195
Montrose	1,273	453	2	818	4,421	1,814	51	3,819	1,097
New York	885	387	351	147	14,186	7,771	5,336	1,794	714
Northport	919	366	160	393	11,923	9,764	3,188	2,221	815
Syracuse	364	139	166	59	5,944	2,893	3,030	462	267
North Carolina:									
Asheville	527	347	149	30	8,473	5,582	3,186	571	429
Durham	483	186	215	82	10,158	5,666	4,213	968	369
Fayetteville	302	202	69	31	5,452	4,116	1,330	368	253
Salisbury	859	318	40	501	6,166	2,770	849	3,540	749
North Dakota: Fargo	214	146	69	4,498	3,605	1,199	155
Ohio:									
Chillicothe	887	465	423	4,644	3,911	2,641	724
Cincinnati	375	120	177	78	10,545	6,644	3,986	916	306
Cleveland	1,354	507	252	595	16,012	10,268	3,537	4,243	1,033
Dayton	601	352	193	57	6,980	4,201	2,460	1,126	484
Oklahoma:									
Muskogee	230	136	94	4,898	3,183	1,942	152
Oklahoma City	426	169	154	103	14,178	11,077	4,939	1,841	333
Oregon:									
Portland	449	246	173	30	12,530	9,128	3,778	557	336
Roseburg	342	161	22	159	3,779	2,433	681	1,462	273
Pennsylvania:									
Altoona	136	97	39	1,983	1,460	654	117
Butler	320	320	3,197	3,304	248
Coatsville	1,275	383	892	4,180	1,114	3,795	1,069
Erie	138	98	40	2,803	1,885	1,241	121
Lebanon	843	396	29	417	3,150	2,229	607	1,189	789
Philadelphia	451	221	187	44	8,864	5,752	3,172	662	366
Pittsburgh (Highland Drive)	783	308	475	3,056	1,106	2,634	655
Pittsburgh (University Drive) ¹²	661	435	195	31	11,431	8,450	3,768	452	504
Wilkes-Barre	462	229	121	112	6,050	3,308	1,524	1,642	385
Puerto Rico: San Juan	692	279	173	240	16,650	9,727	3,944	3,735	605
Rhode Island: Providence	351	230	82	39	7,916	6,518	1,690	503	258
South Carolina:									
Charleston	404	204	146	53	7,702	4,194	3,185	841	311
Columbia	457	229	168	60	8,371	5,065	3,125	998	368
South Dakota:									
Ft. Meade	379	212	17	150	3,039	1,274	669	1,468	325
Hot Springs	232	149	41	42	3,865	3,533	853	719	185
Sioux Falls	249	126	84	39	4,136	2,278	1,621	506	175

See footnotes at end of table.

Tennessee:
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Dallas
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Marlin
San An
Temple
Waco
Utah: Salt
Vermont:
Virginia:
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VA Medical Centers—Hospital Care Components: Selected Data—Fiscal Year 1980

Location		Average Operating Beds ¹			Patients Treated Total 2 3	Episodes of Care ⁴			Average Daily Census 5	
		Total	Bed Section ⁶			Bed Section ⁵				
			Medical 7	Surgical		Psychiatric	Medical 7	Surgical		Psychiatric
536	Tennessee:									
203	Memphis	870	499	203	168	15,695	9,740	5,270	1,768	681
439	Mountain Home	510	295	142	73	5,977	3,476	1,886	1,460	422
261	Murfreesboro	678	370	308	2,074	589	1,652	550
781	Nashville	485	233	206	46	14,456	11,250	4,130	708	385
140	Texas:									
111	Amarillo	139	76	63	3,412	2,325	1,334	115
573	Big Spring	223	119	65	40	3,912	2,718	1,831	780	155
708	Bonham	78	39	24	15	2,030	1,367	926	218	71
731	Dallas	720	308	254	158	18,026	11,163	6,262	2,088	560
385	Houston	1,039	433	252	354	19,512	11,597	6,703	3,582	896
267	Kerrville	306	247	59	4,555	3,794	1,057	221
376	Marlin	222	222	2,128	2,209	153
149	San Antonio	670	286	204	180	19,458	13,995	5,267	1,859	559
712	Temple	601	317	196	88	12,228	7,962	3,730	1,415	494
107	Waco	990	400	590	5,520	1,801	4,422	888
61	Utah: Salt Lake City	454	229	115	110	12,004	7,741	3,574	1,615	338
98	Vermont: White River Junction	188	89	79	20	4,257	2,401	1,748	306	152
141	Virginia:									
314	Hampton	442	272	96	74	5,313	3,561	1,476	885	331
127	Richmond	756	503	188	65	14,868	11,666	3,820	947	605
133	Salem	753	293	76	384	8,231	4,209	2,091	4,276	633
768	Washington:									
1,063	American Lake	410	119	291	2,634	1,248	1,663	364
247	Seattle	295	138	90	66	8,491	5,826	2,304	932	251
579	Spokane	211	116	95	3,995	2,614	1,804	167
198	Vancouver	330	176	106	48	4,653	2,957	1,715	676	248
198	Walla Walla	149	116	33	2,044	1,623	560	115
544	West Virginia:									
817	Beckley	173	113	60	5,161	4,037	1,622	133
689	Clarksburg	211	88	86	37	5,776	3,390	1,931	718	177
889	Huntington	144	84	60	3,021	1,895	1,474	110
195	Martinsburg	513	421	70	22	6,217	4,963	1,538	376	458
1,097	Wisconsin:									
714	Madison	376	198	158	20	9,333	6,724	3,339	264	260
	Tomah	798	445	353	3,072	1,610	1,985	709
	Wood	785	355	238	191	13,396	8,895	4,151	2,010	620
	Wyoming:									
	Cheyenne	129	84	45	3,006	2,545	607	112
	Sheridan	307	127	180	1,844	1,133	1,079	251

¹Based on the number of operating beds at the end of each month or 13 consecutive months (September 1979 – September 1980).

²Based on the number of discharges and deaths during FY 1980, plus the number on the rolls (bed occupants and patients on authorized leave of absence) on September 30, 1980. Inter-hospital transfers are excluded from the overall total but are included in the individual hospital totals.

³Beginning with FY 1973, patients coming to VA hospitals for chronic dialysis are considered to be inpatients; there were 232,161 such patients during FY 1980.

⁴Based on the number of discharges and deaths during FY 1980, plus the number on the rolls (bed occupants and patients on authorized leave of absence) on September 30, 1980. Inter-hospital transfers are excluded from the overall totals but are included in the individual bed section totals. Intrahospital transfers (i.e., movement of patients from one type of bed section to another) are included in both the overall bed section totals and in the individual hospital bed section totals.

⁵Based on total patient days during FY 1980 divided by the number of days in the fiscal year.

⁶Beds are classified according to their intended use; patients are classified according to the classification of the beds they occupy, rather than on diagnostic basis.

⁷Medical bed sections include medicine, neurology, intermediate care, spinal cord injury, medical rehabilitation, and blind rehabilitation.

⁸Data for the VA Medical Centers at Augusta (Lenwood), GA; Brecksville, OH; Gulfport, MS; Jefferson Barracks, MO; North Little Rock, AR; and Palo Alto (Menlo Park), CA are included, respectively, with the data for the VA Medical Centers at Augusta, Cleveland, Biloxi, St. Louis, Little Rock, and Palo Alto.

⁹Includes data for the two VA Medical Centers at Indianapolis, IN, (Cold Spring Road and West 10th Street).

¹⁰Includes data for the two VA Medical Centers at Lexington, KY, (Cooper Drive and Leestown).

¹¹Includes data for the VA Medical Centers at Brooklyn and St. Albans, NY.

¹²Includes data for the VA Medical Centers at Pittsburgh (University Drive) and Aspinwall, PA.

Non-VA Hospitals¹: Selected Data—Fiscal Year 1980

Location of Authorizing VA Facility	Average Daily Census 2	Admissions	Discharges 3	Patients Treated ⁴				Remaining on Sept. 30, 1980 5
				Total	Federal Hospitals	State and Local Government Hospitals 1	Non-Public Hospitals	
Total	1,212	28,760	28,457	29,456	3,434	7,364	18,658	988
Medical Bed Sections	402	17,656	17,573	17,773	2,255	4,163	11,355	200
Surgical Bed Sections	104	3,177	3,163	3,229	886	691	1,652	66
Psychiatric Bed Sections	707	7,927	7,721	8,454	293	2,510	5,651	733
Alabama:								
Montgomery	7	306	304	309	2	175	132	5
Tuscaloosa	3	3	3	3		3		
Alaska: Anchorage (RO)	88	3,338	3,164	3,229	128	143	2,958	66
Arizona:								
Phoenix	8	235	244	247		40	207	3
Tucson	1	79	84	84		84		
Arkansas: Little Rock	3	264	264	264			264	
California:								
Loma Linda	3	87	82	87		86	1	5
Los Angeles (OPC)	14	744	744	744	1	347	396	
Martinez		10	8	10			10	2
Palo Alto	1	1		1		1		1
San Diego	2	231	232	232		44	188	
San Francisco	10	996	996	996	4	612	380	
Colorado:								
Denver	1	153	153	153	2	51	100	
Ft. Lyon		15	14	15		15		1
Connecticut: Newington	4	70	72	74	1	63	10	2
Delaware: Wilmington	1	15	15	15			15	
District of Columbia: Washington	2	20	23	23	14		9	
Florida:								
Bay Pines	32	2,241	2,247	2,268	11	911	1,346	21
Gainesville	1	22	22	22			22	
Lake City		7	7	7			7	
Miami	9	748	751	752		752		1
Tampa	1	61	59	61			61	2
Georgia:								
Atlanta	6	417	419	420		420		1
Augusta		18	18	18		18		
Hawaii: Honolulu (RO)	93	1,874	1,850	1,945	1,153	423	369	95
Idaho: Boise	4	276	276	276		172	104	
Illinois:								
Chicago (L.S.)								
Chicago (W.S.)	12	252	252	252		82	170	
Marion		17	17	17		17		
Indiana: Indianapolis	9	297	297	299		68	231	2
Iowa:								
Des Moines	1	48	48	48		22	26	
Iowa City	1	185	185	185		154	31	
Kansas: Wichita	2	66	65	66			66	1
Kentucky:								
Lexington								
Louisville	2	136	136	136		49	87	
Louisiana:								
Alexandria		5	5	5			5	
New Orleans	6	90	90	93		14	79	3
Shreveport	2	74	74	74	2		72	
Maine: Togus	3	196	196	196			196	
Maryland: Baltimore	6	81	84	85		5	80	1
Massachusetts:								
Bedford		4	4	4			4	
Boston (OPC)	7	333	334	334		13	321	
Northampton	1	31	31	31		31		
Michigan:								
Allen Park	8	296	296	296		156	140	
Iron Mountain	1	42	42	42		42		
Minnesota: Minneapolis	6	383	384	384		133	251	
Mississippi: Jackson	2	95	95	95		78	17	
Missouri:								
Columbia	1	93	94	94		94		
Kansas City	3	196	196	196			196	
St. Louis	3	63	63	63	8		55	
Montana: Ft. Harrison	4	252	246	247			247	1
Nebraska: Lincoln	2	85	85	86		26	60	1
Nevada: Reno	5	208	215	215		15	200	
New Hampshire: Manchester	2	122	121	122		34	88	1
New Jersey: East Orange	6	194	196	197		46	151	1
New Mexico: Albuquerque	2	199	198	199			199	1
New York:								
Albany	3	64	64	64		12	52	
Bath		6	6	6			6	
Brooklyn	1	101	101	101	101			
Brooklyn (OPC)	3	84	84	84		75	9	

See footnotes at end of table.

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Non-VA Hospitals¹: Selected Data—Fiscal Year 1980

Location of Authorizing VA Facility	Average Daily Census ²	Admissions	Discharges ³	Patients Treated ⁴				Remaining on Sept. 30, 1980 ⁵
				Total	Federal Hospitals	State and Local Government Hospitals ¹	Non-Public Hospitals	
999 Buffalo	3	149	142	150	28	122	8
200 New York	24	337	342	345	238	107	3
66 Syracuse	2	183	182	184	184	2
733 North Carolina:								
Asheville	24	24	25	25	1
Salisbury	6	222	222	222	65	157
North Dakota: Fargo	7	350	356	359	235	124	3
5 Ohio:								
Cincinnati	2	105	105	105	52	53
65 Cleveland	3	171	170	170	4	166
Columbus (OPC)	6	117	117	118	36	82	1
Oklahoma:								
Muskogee	8	90	90	90	90
Oklahoma City	10	10	10	10
5 Oregon:								
Portland	8	474	474	474	39	435
Roseburg	1	1	1
2 White City (DOM)	2	122	125	126	126	1
1 Pennsylvania:								
Altoona	4	135	145	148	148	3
Butler	6	6	6	6
Coatesville	11	11	11	11
1 Erie	1	52	51	51	51
2 Lebanon	1	112	113	113	6	107
Philadelphia	9	485	484	488	14	62	412	4
Pittsburgh (GEN)	1	53	53	53	53
Pittsburgh (PSY)	1	23	22	23	23	1
Wilkes-Barre	9	151	152	152	16	136
21 Philippines: Manila (RO) ⁶	53	944	963	1,002	985	17	39
Puerto Rico: San Juan	561	3,549	3,388	4,048	42	4,006	660
1 Rhode Island: Providence	4	186	180	186	28	158	6
2 South Carolina: Columbia	8	314	311	316	162	154	5
South Dakota:								
Ft. Meade	8	8	8	8
1 Sioux Falls	2	32	32	32	4	28
95 Tennessee: Nashville	6	387	388	389	180	209	1
Texas:								
Amarillo	4	4	4	2	2
Dallas	3	161	161	162	74	88	1
El Paso (OPC)	25	843	833	860	596	105	159	27
Houston	2	105	105	105	15	90
2 Lubbock (OPC)	3	174	174	174	174
Marlin	2	2	2	2
San Antonio	11	249	257	263	77	40	146	6
Waco	4	100	100	100	58	42
1 Utah: Salt Lake City	30	30	30	30
Vermont: White River Junction	2	81	80	82	1	81	2
Virginia:								
Hampton	11	12	12	12
Richmond	7	7	7	7
Salem	13	439	440	445	11	434	5
3 Washington:								
American Lake	2	98	101	103	100	3	2
1 Seattle	7	446	450	452	185	267	2
West Virginia:								
Huntington	2	144	144	144	144
Martinsburg	2	2	2	2
Wisconsin: Wood	10	467	467	467	27	440
Wyoming:								
Cheyenne	25	25	25	25
Sheridan	41	41	41	41

¹Excludes State Home hospitals.²Based on the number of patient days during the fiscal year divided by the number of days in the year.³Includes deaths.⁴Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.⁵Total on rolls (bed occupants and patients on authorized leave of absence).⁶985 patients (704 in medical bed section, 187 in surgical bed section, 94 in psychiatric bed section) treated in non-Federal hospital.

VA Medical Centers—Hospital Care Component: Patients Remaining, Type of Patient, Percent Hospitalized in Reported State of Residence¹—September 24, 1980

Reported State of Residence	All Patients			Type of Patient									
				General Medical and Surgical		Tuberculosis		Psychotic		Other Psychiatric		Neurological	
	Total	Hospitalized in Same State		Total	Percent Hospitalized in Same State	Total	Percent Hospitalized in Same State	Total	Percent Hospitalized in Same State	Total	Percent Hospitalized in Same State		
Number		Percent											
Total	69,289	59,759	86.2	31,997	87.6	436	86.2	17,408	84.7	12,087	85.3	7,361	85.6
United States	68,611	59,122	86.2	31,596	87.6	431	86.1	17,236	84.5	12,027	85.2	7,321	85.5
Alabama	1,530	1,311	85.7	635	85.5		0.0	456	85.7	295	87.8	144	82.6
Alaska	4		0.0		0.0		0.0	4	0.0		0.0		0.0
Arizona	837	771	92.1	547	96.0	10	100.0	104	78.8	81	100.0	95	76.8
Arkansas	1,098	959	87.3	607	82.4		0.0	190	94.7	192	91.1	109	95.4
California	4,855	4,743	97.7	2,523	98.5	23	100.0	844	96.8	909	96.5	556	97.5
Colorado	562	528	94.0	241	95.9		0.0	145	96.6	106	88.7	70	90.0
Connecticut	735	578	78.6	379	94.5	6	100.0	221	47.5	74	86.5	55	81.8
Delaware	207	120	58.0	101	96.0		0.0	63	0.0	25	20.0	18	100.0
District of Columbia	420	343	81.7	218	92.7	6	100.0	77	40.3	84	83.3	35	100.0
Florida	2,751	2,371	86.2	1,656	94.9	30	86.7	408	58.6	401	74.6	256	92.2
Georgia	1,611	1,229	76.3	783	78.7	25	64.0	332	68.4	317	77.6	154	80.5
Hawaii	5		0.0		0.0		0.0	5	0.0		0.0		0.0
Idaho	210	116	55.2	149	61.1		0.0	22	18.2	28	60.7	11	36.4
Illinois	3,710	3,229	87.0	1,789	84.0	50	100.0	958	91.0	620	89.5	293	85.3
Indiana	1,477	1,150	77.9	465	70.1	4	100.0	596	83.7	271	80.4	141	73.0
Iowa	784	663	84.6	338	79.6		0.0	271	89.3	93	86.0	82	87.8
Kansas	1,127	695	61.7	421	47.3		0.0	339	77.3	248	62.9	119	66.4
Kentucky	1,138	902	79.3	611	73.5		0.0	190	84.2	240	89.6	97	79.4
Louisiana	1,155	930	80.5	648	95.7	20	75.0	202	29.7	169	73.4	116	95.7
Maine	504	443	87.9	185	84.9		0.0	116	94.8	146	89.7	57	77.2
Maryland	1,233	862	69.9	466	63.9	10	0.0	223	87.0	292	72.9	242	64.5
Massachusetts	2,641	2,505	94.9	740	85.5	5	100.0	1,069	99.5	481	98.1	346	95.7
Michigan	1,785	1,692	94.8	714	95.4	5	100.0	628	97.6	308	90.6	130	86.9
Minnesota	1,251	1,106	88.4	437	79.6		0.0	452	89.6	215	95.8	147	100.0
Mississippi	969	705	72.8	486	74.1	9	100.0	231	75.8	138	84.1	105	41.9
Missouri	1,515	1,164	76.8	936	84.6	14	100.0	228	52.6	174	62.1	163	79.8
Montana	357	181	50.7	186	73.1		0.0	36	16.7	107	26.2	28	39.3
Nebraska	641	424	66.1	354	87.0	5	100.0	131	11.5	100	68.0	51	54.9
Nevada	289	112	38.8	220	38.2		0.0	17	17.6	23	56.5	29	41.4
New Hampshire	268	122	45.5	179	62.0		0.0	27	0.0	31	0.0	31	35.5
New Jersey	2,066	1,726	83.5	673	82.0	18	77.8	787	90.3	333	75.7	255	77.6
New Mexico	277	214	77.3	146	89.7		0.0	38	57.9	57	63.2	36	69.4
New York	6,866	6,703	97.6	2,830	98.7	50	100.0	1,882	95.8	1,150	97.7	954	97.8
North Carolina	1,802	1,657	92.0	826	93.1	4	100.0	408	91.9	377	90.7	187	89.3
North Dakota	138	63	45.7	62	90.3		0.0	24	0.0	52	13.5		0.0
Ohio	2,703	2,399	88.8	1,080	86.8	6	100.0	823	91.9	448	85.5	346	91.3
Oklahoma	711	500	70.3	453	86.1	5	100.0	124	23.4	93	64.5	36	44.4
Oregon	733	555	75.7	418	81.6	11	0.0	110	70.9	137	68.6	57	73.7
Pennsylvania	4,187	3,852	92.0	1,427	91.0	13	30.8	1,570	93.7	662	93.4	515	89.5
Rhode Island	247	179	72.5	145	93.8		0.0	66	36.4	5	0.0	31	64.5
South Carolina	1,114	678	60.9	659	75.9	15	100.0	204	27.9	165	41.8	71	52.1
South Dakota	558	473	84.8	225	84.9		0.0	156	81.4	138	94.9	39	61.5
Tennessee	1,576	1,518	96.3	702	98.6	23	100.0	423	92.0	295	96.6	133	96.2
Texas	4,316	4,080	94.5	2,322	95.3	39	84.6	878	92.7	797	94.2	280	96.4
Utah	292	245	83.9	109	100.0		0.0	78	53.8	68	100.0	37	70.3
Vermont	109	68	62.4	62	85.5		0.0	10	0.0	16	68.8	21	23.8
Virginia	1,789	1,386	77.5	846	79.6	16	100.0	350	82.3	305	66.6	272	75.7
Washington	957	906	94.7	406	93.1	6	100.0	257	97.7	186	97.3	102	89.2
West Virginia	755	488	64.6	448	82.1		0.0	91	23.1	136	45.6	80	47.5
Wisconsin	1,477	1,274	86.3	620	81.1		0.0	322	79.8	356	96.9	179	94.4
Wyoming	269	202	75.1	122	75.4		0.0	48	81.3	87	74.7	12	50.0
Outside United States	678	637	94.0	401	93.5	5	100.0	172	97.1	60	93.3	40	87.5
Canal Zone	0		0.0		0.0		0.0		0.0		0.0		0.0
Philippines, Republic of	0		0.0		0.0		0.0		0.0		0.0		0.0
Puerto Rico	653		0.0	381	0.0	5	0.0	172	0.0	60	0.0	35	0.0
Others	25		0.0	20	0.0		0.0		0.0		0.0	5	0.0

¹ Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records for patients remaining on September 24, 1980. The figures shown in the column

for all patients do not necessarily equal the sum of the component parts due to machine rounding of sample data.

**VA Medical Centers—Hospital Care Component: Patients Remaining, Percent By Attained Stay,
Diagnostic Grouping¹—September 24, 1980**

Diagnostic Composition of Patients	Percent in Each Diagnostic Category for Specified Length of Stay							
	Number of Patients	90 Days or Less	91 Days or More	Inpatient Stay More Than (Years)				
				1	2	5	10	20
All patients	69,290	70.2	29.8	17.1	12.2	5.8	2.6	1.4
Tuberculosis	436	79.8	20.0	.0	.0	.0	.0	.0
Pulmonary tuberculosis	373	76.7	23.3	.0	.0	.0	.0	.0
Other tuberculosis	63	100.0	.0	.0	.0	.0	.0	.0
Psychoses	17,409	39.4	60.6	40.4	30.9	16.3	8.4	4.9
Other psychiatric	12,087	69.2	30.8	18.2	12.5	4.6	1.3	.4
Neurological	7,361	56.4	43.6	24.4	16.7	6.5	2.1	.6
Vascular lesions affecting central nervous system	2,586	57.9	42.1	20.4	13.5	3.5	.4	.2
Other neurological	4,728	55.1	44.9	26.8	18.6	8.2	3.0	.9
Neurological diseases of the sense organs	47	100.0	.0	.0	.0	.0	.0	.0
General medical and surgical	31,998	90.4	9.6	2.5	1.2	.5	.1	.0
Infective and parasitic diseases	335	90.7	9.3	1.8	1.8	.0	.0	.0
Malignant neoplasms	5,698	90.6	9.3	1.3	.4	.2	.0	.0
Benign and unspecified neoplasms	489	96.7	3.3	1.0	1.0	.0	.0	.0
Allergic and endocrine system	1,772	78.4	21.6	6.4	3.5	1.2	.3	.0
Heart diseases and symptoms	3,283	90.8	9.2	5.0	2.1	.5	.0	.0
Vascular diseases	2,459	87.6	12.4	2.1	1.1	.6	.2	.2
Acute respiratory diseases	539	95.4	4.8	.9	.0	.0	.0	.0
Other respiratory diseases with asthma and symptoms	2,898	84.4	15.6	5.2	2.5	.9	.4	.0
Diseases of the digestive system and symptoms	4,223	96.8	3.2	.4	.4	.4	.0	.0
Diseases of the genitourinary system and symptoms	2,304	91.9	8.0	3.2	.9	.7	.5	.2
Diseases of skin and cellular tissue	1,254	86.4	13.6	1.6	.8	.4	.4	.4
Diseases of bones and organs of movement and symptoms	2,246	90.9	9.1	2.5	1.6	.4	.0	.0
Accidents, poisonings and violence	2,157	90.6	9.4	1.2	.6	.6	.0	.0
All other	2,341	94.5	5.5	1.1	.5	.0	.0	.0

¹ Figures shown are estimates based on tabulations of a 20 percent random sample of records for patients remaining on September 24, 1980. The figures shown in

the column for "number of patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

VA Medical Centers—Hospital Care Component: Patients Remaining, Diagnostic Category, Period of Service,
Average Age and Age Group¹—September 24, 1980

Principal Diagnosis ²	All Patients	Period of Service					Aver- age Age 6	Age Group						
		Viet- nam Era	Post Korea 3	Korean Con- flict 4	WW II	WW I		All Others 5	Under 35	35-44	45-54	55-64	65-74	75-84
All diseases and conditions	69,290	9,765	4,465	8,001	38,160	5,279	3,619	56.0	8,841	13,610	23,318	10,730	4,776	2,676
I. Infective and parasitic diseases	800	79	41	138	427	53	61	57.3	69	30	239	244	119	36
Pulmonary tuberculosis (011)	373	36	21	63	213	6	35	54.3	36	16	134	127	35	5
Tuberculosis, late effects (019)	10	5	5	5	5	5	5	(6)	10	10	10	10	10	5
Tuberculosis, other (010, 012-018)	53	5	5	11	37	5	5	(6)	11	11	21	10	5	5
Cardiovascular syphilis (093)	25	5	5	5	5	5	5	(6)	5	5	5	5	5	5
Syphilis of central nervous system (094)	15	9	9	9	9	9	9	(6)	4	5	6	6	6	9
Other forms of late syphilis, latent, or unspecified (095-097)	6	6	6	6	6	6	6	(6)	6	6	6	6	6	6
All other venereal diseases (090-092, 098-099)	15	9	9	9	9	9	9	(6)	4	5	6	6	6	9
Infectious hepatitis (070)	6	6	6	6	6	6	6	(6)	6	6	6	6	6	6
Malaria (084)	6	6	6	6	6	6	6	(6)	6	6	6	6	6	6
All other infective and parasitic diseases (000-009, 020-027, 030-039, 040-046, 050-057, 060-068, 071-079, 080-083, 085-089, 100-104, 110-117, 120-129, 130-136)	319	30	16	64	166	28	16	59.3	23	9	84	90	74	16
II. Neoplasms	6,433	283	268	605	4,583	533	161	61.4	126	202	1,125	2,906	1,319	253
Malignancy of buccal cavity and pharynx (140-149)	740	41	35	116	518	16	15	58.0	15	19	218	331	136	5
Malignancy of digestive organs and peritoneum (150-159)	877	29	20	92	630	101	4	62.8	9	17	142	420	157	70
Malignancy of respiratory system (160, 162-163)	1,445	45	71	108	1,116	67	38	61.0	10	32	249	752	295	80
Malignancy of larynx (161)	351	5	5	45	283	9	9	61.7	10	10	49	199	78	20
Malignancy of lymphatic and hematopoietic tissue (200-209)	479	9	29	42	337	36	25	62.6	22	22	69	215	116	39
Malignancy of genitourinary organs (180-189)	994	30	31	66	645	202	21	66.7	10	31	115	299	283	157
Malignancies of all other systems (170-174, 190-199)	934	48	43	100	654	67	22	60.7	21	37	171	430	161	99
Neoplasms, benign (210-228)	249	50	16	9	142	16	15	55.7	29	26	48	81	39	21
Neoplasms, of unspecified nature (230-239)	364	32	17	26	257	20	12	56.7	33	17	64	179	53	20
III. Endocrine, nutritional, and metabolic diseases	1,802	81	70	232	1,209	191	20	61.0	52	80	369	699	346	152
Diabetes mellitus (250)	1,384	43	50	192	950	133	15	61.3	20	54	288	548	281	114
Diseases of thyroid and other endocrine glands (240-246, 251-258)	158	11	5	5	111	25	5	63.5	11	5	17	53	46	10
Avitaminosis and other nutritional deficiency (260-269)	108	5	5	14	62	27	5	62.9	5	5	31	35	4	23
Obesity not specified as of endocrine origin (277)	49	11	5	5	24	5	5	(6)	11	5	19	15	6	5
Other metabolic diseases (270-276, 278-279)	104	10	11	16	62	5	5	56.8	5	17	15	48	14	5
IV. Diseases of blood and blood-forming organs	268	5	16	46	138	59	4	64.6	9	5	56	79	48	21
Anemia, iron deficiency (280)	49	5	5	4	33	13	5	(6)	5	5	4	17	10	6
Pernicious anemia (281.0)	5	5	5	5	5	5	5	(6)	5	5	5	5	5	5
Anemia, other (281.1-285)	173	5	16	21	95	36	5	64.6	5	5	37	52	32	10
All other diseases of blood and blood-forming organs (286-289)	41	5	5	21	11	5	4	(6)	4	5	15	11	6	5
V. Mental disorders	29,496	6,618	2,457	3,624	12,882	1,845	2,068	51.4	6,406	3,318	6,096	7,952	3,154	1,030
Alcohol psychosis (291)	826	36	29	90	631	10	30	58.6	11	33	207	377	161	36
Psychosis associated with drug dependence (294.34)	5	5	5	5	5	5	5	(6)	5	5	5	5	5	5
Psychosis associated with organic brain syndrome, excluding alcohol and drug dependence (290, 292-294.30, 294.4-294.9)	2,788	137	104	152	1,741	595	59	68.1	93	86	258	958	457	301
Psychosis not attributed to physical conditions (295-299)	13,794	3,454	1,257	1,898	5,597	408	1,180	48.1	3,587	1,810	3,079	3,853	1,072	179
Alcoholism (303)	5,426	1,519	690	956	1,970	20	280	46.9	1,233	893	1,662	1,323	276	11
	397	6	14	16	335	20	5	61.5	16	16	52	176	123	5

Alcohol psychosis (291)	826	36	29	90	631	10	30	58.6	11	33	207	656	457	301
Psychosis associated with drug dependence (294.34)														
Psychosis associated with organic brain syndrome, excluding alcohol and drug dependence (290, 292-293.30, 294.4-294.9)	2,788	137	104	152	1,741	595	59	66.1	93	66	258	958	656	457
<i>Psychosis not attributed to physical conditions (295-299)</i>														
Alcoholism (303)	13,794	3,454	1,257	1,898	5,597	408	1,180	48.1	3,587	1,810	3,079	3,653	1,072	415
Non-psychotic organic brain syndrome associated with alcoholism (309.13)	5,426	1,519	690	956	1,970	11	280	46.9	1,233	893	1,662	1,323	276	27
Drug dependence (304)	397	6	14	16	335	20	5	61.5		16	52	176	123	25
Non-psychotic organic brain syndrome associated with drug dependence (309.14)	796	506	65	45	26		154	31.2	619	96	51	30		5
Non-psychotic organic brain syndrome associated with other physical conditions (309.0, 309.2-309.9)	17	12			5			(6)	5		6	5		
Mental retardation (310-315)	3,104	118	95	165	1,814	769	143	67.7	92	96	276	859	711	567
All other non-psychotic mental disorders (Y00.1, Y03.4, 300-302, 305-307, 316, 318, 793.0)	35		4	16	11		5	(6)		9	5	16	6	
VI. Diseases of nervous system and sense organs														
Inflammatory diseases of central nervous system (320-324)	2,311	829	200	285	752	32	213	45.3	766	300	500	554	149	11
Epilepsy (345)	4,012	481	296	506	2,382	170	178	55.4	393	412	828	1,460	659	195
Amyotrophic lateral sclerosis (348.0)	43	32		11				(6)	27	5	11			
Paraplegia, cerebral or spinal (344.2, 349.3)	96	22	6	15	42		11	(6)	24	19	16	26	11	
Quadruplegia, cerebral or spinal (344.3, 349.4)	295	88	36	21	93	6	50	45.2	95	57	54	21	14	
Other diseases of central nervous system, including hereditary and familial disease of nervous system (330-333, 340-344.1, 344.9, 346-347, 348.1-349.2, 349.5-349.9)	485	129	52	61	176	5	61	46.4	122	115	76	107	54	12
Diseases of nerves and peripheral ganglia (350-358)	2,065	155	145	270	1,386	79	30	57.4	90	172	454	851	380	97
Inflammatory diseases of the eye and other conditions of the eye, except blindness, (360-369, 370-378)	239	22	20	36	141	5	15	55.5	15	22	45	107	44	
Blindness (379)	530	11	25	59	376	49	10	62.9	5	10	120	195	113	62
Disease of ear and mastoid process (380-389)	120		12	18	73	16		60.8		6	28	56	6	18
	90	21		4	55	10		(6)	16	5	9	39	11	10
VII. Diseases of the circulatory system														
Chronic rheumatic heart disease (393-398)	8,321	315	289	729	5,863	923	203	63.1	103	161	1,356	3,497	1,873	928
Hypertensive heart disease, exclusive of ischemic heart disease (400.1, 402, 404)	128		5	11	89	5	18	58.3	6		28	59	30	5
Hypertensive disease without heart involvement (400.0, 400.2, 400.3)	21				21			(6)			5	11	4	
Acute myocardial infarction (410)	318	15	25	30	223	15	10	59.3	4	30	55	137	71	15
Chronic ischemic heart disease (412)	447	15	24	57	297	50	5	62.6		19	82	187	84	51
Other ischemic heart disease, with or without hypertensive disease (411, 413-414)	1,246	43	56	92	829	197	28	64.2	8	15	223	541	214	127
Other forms of heart disease (391, 392.0, 420-429)	409	10	10	55	318	10	5	58.2	5		89	266	32	17
Cerebral hemorrhage (431)	1,027	54	28	105	647	177	16	65.0	10	19	167	362	236	148
Cerebral thrombosis (433)	64	11	8		41	4		(6)	11	4	14	15	16	4
Cerebral embolism (434)	256	21	5	24	189	17		64.1		5	34	99	91	16
Generalized ischemic cerebrovascular disease (437)	91				52	33	6	(6)			10	16	10	48
All other cerebrovascular disease (430, 432, 435, 436, 438)	2,175	56	78	161	1,642	186	53	63.9	19	24	281	920	578	309
Arteriosclerosis (440)	285	6		27	178	61	12	67.0			19	132	64	30
All other diseases of arteries, arterioles and capillaries (441-448)	1,279	55	17	101	954	125	27	63.3	5	26	207	502	356	136
Varicose veins lower extremities (454)	111	10	11	25	55	5	5	52.8	14	6	49	22	14	5
Hemorrhoids (455)	53			5	43	5		(6)			16	32		5
All other diseases of veins and lymphatics, and other diseases of circulatory system (390, 392.9, 450-453, 456-458)	414	20	23	36	285	31	19	59.7	19	13	76	196	74	16
VIII. Diseases of the respiratory system														
Acute respiratory infections including influenza (460-466, 470-474)	3,115	198	45	242	2,203	322	106	62.5	129	64	480	1,125	842	338
Pneumonia (480-486)	58	21			25	7	5	(6)	15		10	16	11	7
Bronchitis, unqualified and chronic (490-491)	456	11	5	21	274	128	17	67.1	12	5	67	130	82	94
Emphysema (492)	234	20	5	14	179	11	5	61.7		5	51	69	88	21
Asthma (493)	926	29	6	67	671	117	47	66.0		12	98	329	314	133
All other diseases of upper respiratory tract and respiratory system (500-508, 510-519)	136	20		32	83			55.3	15	10	34	42	30	5
	1,306	98	29	108	971	59	41	59.5	88	31	221	539	318	78

VA Medical Centers—Hospital Care Component: Patients Remaining, Diagnostic Category, Period of Service, Average Age and Age Group¹—September 24, 1980

Principal Diagnosis ²	All Patients	Period of Service						Aver- age Age ⁶	Age Group						
		Viet- nam Era	Post Korea ³	Korean Con- flict ⁴	WW II	WW I	All Others ⁵		Under 35	35-44	45-54	55-64	65-74	75-84	85 and Over
IX. Diseases of the digestive system	3,806	329	285	456	2,290	300	145	58.2	229	263	845	1,455	602	226	185
Diseases of oral cavity, salivary glands, and jaws (520-529)	99	20	9	17	44	9	(⁶)	15	14	26	29	16
Ulcers digestive system (stomach, duodenum, peptic, gastrojejunal) (531-534)	313	33	21	13	196	45	6	59.7	33	9	40	135	47	19	31
All other diseases esophagus, stomach, and duodenum (except ulcers) (530, 535-537)	305	10	16	30	208	20	23	59.7	16	15	35	143	72	4	20
Hernia of abdominal cavity (550-553)	649	43	40	43	439	69	15	61.7	22	43	63	290	141	54	35
Other diseases of intestine and peritoneum (540-543, 560-569)	1,050	74	51	113	660	114	38	60.4	51	48	235	378	172	91	75
Alcoholic cirrhosis of liver (571.0)	427	25	47	101	233	10	11	53.6	5	43	207	148	14	5	5
Other diseases of liver, gallbladder and pancreas (570, 571.8, 571.9, 572-577)	962	124	102	139	510	43	43	55.4	87	91	238	333	141	52	19
X. Diseases of the genitourinary system	2,093	130	87	238	1,259	282	97	61.6	131	75	332	714	460	244	136
Nephritis and Nephrosis (580-584)	409	21	25	61	243	27	32	57.3	22	35	84	192	38	27	11
Other diseases of urinary system (590-599)	880	54	39	111	515	115	46	61.2	55	20	194	265	185	92	69
Diseases of the prostate (600-602)	532	9	39	359	115	10	69.0	9	15	154	203	100	51
Other diseases of male genital organs (603-607)	246	45	22	27	127	20	5	54.9	40	20	40	93	29	20	5
Diseases of the breast, gynecological conditions (610-616, 620-629)	26	16	5	5	(⁶)	5	11	5
XI. Deliveries and complications of pregnancy, childbirth and the puerperium (630-678)	5	5	(⁶)	5
XII. Diseases of skin and subcutaneous tissue	1,254	134	103	175	718	73	52	56.4	129	83	248	482	220	59	33
Infections of skin and subcutaneous tissue (680-686, 694-698)	535	53	73	62	298	28	21	55.6	54	41	132	182	84	27	15
All other diseases of skin and subcutaneous tissue (690-693, 700-709)	719	81	30	113	420	45	31	57.1	76	42	116	300	136	31	19
XIII. Diseases of the musculoskeletal system and connective tissue	2,185	213	181	293	1,282	122	93	56.7	142	197	475	892	328	83	68
Arthritis and rheumatism, except rheumatic fever (710-718)	858	46	32	118	591	53	18	60.1	20	36	171	397	164	28	41
Displacement of intervertebral disc (725)	190	42	42	36	55	5	11	48.5	36	31	64	45	4	5	4
Osteomyelitis and other diseases of bone and joint (720-724, 726-729)	757	89	72	106	406	40	45	54.8	60	92	187	269	106	25	19
Other diseases of musculoskeletal system (730-738)	379	37	35	34	230	24	19	56.8	25	37	53	182	53	24	4
XIV. Congenital deformities (741-759)	120	31	29	16	45	48.6	34	12	30	26	20
XVI.a Symptoms and ill defined conditions	2,423	292	143	310	1,383	186	110	57.2	224	198	487	846	387	200	81
Senility without mention of psychosis (794)	19	19	(⁶)	10	9
Symptoms and all other ill-defined conditions (780-792, 795-796)	2,404	292	143	310	1,383	167	110	57.0	224	198	487	846	387	190	72
XVI.b Observation and examination cases, follow-up and special admissions	456	59	38	58	220	51	30	57.0	58	34	90	126	93	41	15
Tuberculosis (Y03.01, Y03.02, Y10.61-Y10.63)
Malignancy (793.1, Y03.3)	82	5	16	51	6	4	(⁶)	20	44	12	6
All other admissions (793.8, 793.9, Y00.0, Y00.01, Y00.09, Y00.2-Y01, Y03.02, Y03.91-Y03.94, Y04-Y06, Y10.0-Y10.6, Y10.60, Y10.64-Y10.69, Y10.9, Y11-Y12, Y20-29)	367	54	32	41	169	45	25	56.5	58	27	69	82	81	35	15
Diagnosis deferred, mental observation (319.0 APA code)	7	7	(⁶)	7
XVII. Accidents, poisonings, and nature of injury	2,700	511	116	334	1,278	170	291	52.1	601	204	555	814	261	185	79
Exclusion of skull and facial bones (800-804)	80	32	16	15	17	(⁶)	37	12	16	10	5

XVII. Accidents, poisonings, and nature of injury

	2,700	511	116	334	1,278	170	291	52.1	601	204	555	814	261	185	79
Fracture of skull and facial bones (800-804)	80	32	15	16	15	17	(⁶)		37	12	16	10		5	
Fracture of skull and facial bones, late effects (800-804) ⁷															
Fracture of spine and trunk (805-809)	141	24	15	5	72	10	15	50.4	35	5	34	53	4	4	5
Fracture of spine and trunk, late effects (805-809) ⁷	95	21	11	21	26		16	(⁶)	21	22	26	16	5	4	
Fracture of upper limb (810-819)	134	32	20	20	58	14	10	55.3	20	5	19	65	11		14
Fracture of upper limb, late effects (810-819) ⁷	10	5				4		(⁶)		5				4	
Fracture of lower limb (820-829)	717	97	25	95	362	93	45	56.6	116	27	159	225	64	100	26
Fracture of lower limb, late effects (820-829) ⁷	56	15	4	4	19	8	10	(⁶)	10	10	4	9	9	9	5
Dislocation without fracture (830-839)	147	25	20	5	65	6	26	48.1	40	9	30	56	6		6
Dislocation without fracture, late effects (830-839) ⁷	6							(⁶)	6						
Intracranial injury without skull fracture (850-854)	190	52	14	14	67	57	42.1		88	16	36	30	10	10	
Intracranial injury without skull fracture, late effects (850-854) ⁷	142	44	4	31	55	9	45.1		38	24	35	45			
Internal injury of chest, abdomen and pelvis (860-869)	35	5		5	25			(⁶)	5		16	9	4		
Internal injury of chest, abdomen and pelvis, late effects (860-869) ⁷															
Traumatic amputation of arm and hand-complete/partial (887)															
Traumatic amputation of arm and hand-complete/partial, late effects (887) ⁷															
Traumatic amputation of foot and leg(s)-complete/partial (896-897)	10				10			(⁶)				4	6		
Traumatic amputation of foot and leg(s)-complete/partial, late effects (896-897) ⁷															
Burns (940-949)	57			5	36	5	12	(⁶)	12		10	25	5		5
Burns, late effects (940-949) ⁷	12				12			(⁶)							
Injury to nerves and spinal cord (950-959)	70	20		20	31			(⁶)	10	15	16	20	11		
Injury to nerves and spinal cord, late effects (950-959) ⁷	16		6	4			6	(⁶)	6	6	4				
Adverse effect of medicinal agents and other complications of surgical and medical care (960-979, 997-999)															
All other accidents, poisonings and violence (840-848, 870-879, 880-886, 890-895, 900-907, 910-918, 920-929, 930-939, 980-996)	379	30	11	48	237	29	24	60.1	29	26	71	118	81	39	15
All other accidents, poisonings and violence, late effects (870-879, 880-886, 890-895, 900-907, 910-918, 920-929) ⁷	381	97	20	42	185		38	48.5	117	17	78	123	37	9	
	22	12	6		5			(⁶)	12	6		5			

¹ Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records of patients remaining on September 24, 1980. The figures shown in the column for "All Patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

² The diagnostic categories and selected diagnoses included in this table are based on the "International Classification of Diseases Adapted for Indexing of Hospital Records," USPHS Pub. No. 1693. The numbers following the diagnoses are the identifying code numbers of this diagnostic classification. Category XV, "Certain Causes of Perinatal Morbidity and Mortality," in which no cases occurred, is not included in this table.

³ Service between February 1, 1955 and August 4, 1964.

⁴ Service between June 22, 1950 and January 31, 1955.

⁵ Consists of 1,300 peacetime, 1,997 post Vietnam, 228 active military and 94 non-veterans.

⁶ Average age not calculated for totals less than 100 cases.

⁷ All late effect codes are differentiated from other codes by being uniformly .9 in the fourth digit position.

VA Medical Centers—Hospital Care Component: Patients Remaining, Age, Diagnostic Grouping¹
September 24, 1980

Diagnostic Composition of Patients	All Patients		Age Distribution							
			Under 55		55-64		65-74		75 and Over	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
All patients	69,290	100.0	27,789	100.0	23,318	100.0	10,730	100.0	7,453	100.0
Tuberculosis	436	.6	207	.7	148	.6	45	.4	35	.5
Pulmonary tuberculosis	373	.5	186	.7	127	.5	35	.3	25	.3
Other tuberculosis	63	.1	21	.1	21	.1	10	.1	11	.1
Psychoses	17,409	25.1	9,143	32.9	4,988	21.4	1,890	17.6	1,388	18.6
Other psychiatric	12,087	17.4	6,678	24.0	2,965	12.7	1,264	11.8	1,180	15.8
Neurological	7,361	10.6	2,626	9.4	2,664	11.4	1,390	13.0	681	9.1
Vascular lesions affecting central nervous system	2,586	3.7	402	1.4	1,051	4.5	695	6.5	438	5.9
Other neurological	4,728	6.8	2,203	7.9	1,603	6.9	685	6.4	237	3.2
Neurological diseases of the sense organs	47	.1	21	.1	10	.0	10	.1	6	.1
General medical and surgical	31,998	46.2	9,135	32.9	12,553	53.8	6,141	57.2	4,168	55.9
Infective and parasitic diseases	335	.5	126	.5	96	.4	74	.7	39	.5
Malignant neoplasms	5,698	8.2	1,200	4.3	2,581	11.1	1,211	11.3	706	9.5
Benign and unspecified neoplasms	489	.7	141	.5	231	1.0	76	.7	41	.6
Allergic and endocrine system	1,772	2.6	492	1.8	699	3.0	330	3.1	251	3.4
Heart diseases and symptoms	3,283	4.7	683	2.5	1,426	6.1	600	5.6	574	7.7
Vascular diseases	2,459	3.5	541	1.9	1,020	4.4	578	5.4	320	4.3
Acute respiratory diseases	539	.8	123	.4	150	.6	99	.9	167	2.2
Other respiratory diseases with asthma and symptoms	2,898	4.2	681	2.5	1,115	4.8	783	7.3	319	4.3
Diseases of the digestive system and symptoms	4,223	6.1	1,491	5.4	1,593	6.8	672	6.3	466	6.3
Diseases of the genitourinary system and symptoms	2,304	3.3	565	2.0	794	3.4	514	4.8	431	5.8
Diseases of skin and cellular tissue	1,254	1.8	460	1.7	482	2.1	220	2.1	92	1.2
Diseases of bones and organs of movement and symptoms	2,246	3.2	863	3.1	892	3.8	345	3.2	147	2.0
Accidents, poisonings and violence	2,157	3.1	975	3.5	692	3.0	234	2.2	255	3.4
All other	2,341	3.4	794	2.9	782	3.4	403	3.8	362	4.9

¹ Figures shown are estimates based on tabulations of a 20 percent random sample of records for patients remaining on September 24, 1980. The figures shown in

the column for "number of patients" do not necessarily equal the sum of the component parts due to machine rounding of sample data.

All

Alabama:

Birmir

Montg

Tuscal

Tuske

Arizona:

Phoen

Presco

Tucso

Arkansas:

Fayet

Little

Little

Californi

Fresno

Liverr

Loma

Long

Los A

Los A

Mart

Palo /

San D

San F

Sepul

Colorad

Denv

Fort

Gran

Connect

Newi

West

Delawar

District

Florida:

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TABLE 23

INPATIENT CARE

VA Medical Centers—Hospital Care Component: Patients Remaining, Age Groups By State¹
September 24, 1980

Percent	VA Medical Center and State	Total all Patients	Age Group					
			Under 25	25-34	35-44	45-54	55-64	65 and Over
100.0	All VA medical centers	69,294	1,788	7,053	5,338	13,615	23,314	18,186
.5	Alabama:							
	Birmingham	276	19	6	26	180	45
	Montgomery	130	6	12	18	41	53
.3	Tuscaloosa	468	6	56	48	155	134	69
.1	Tuskegee	815	31	75	66	178	263	202
18.6	Arizona:							
	Phoenix	376	5	43	11	72	163	82
	Prescott	164	2	2	29	54	77
15.8	Tucson	261	13	4	39	113	92
	Arkansas:							
	Fayetteville	141	5	36	50	50
9.1	Little Rock	372	10	30	25	84	129	94
	Little Rock (North)	678	24	81	80	109	226	158
	California:							
5.9	Fresno	192	9	18	5	45	51	64
3.2	Livermore	109	7	14	34	54
.1	Loma Linda	369	5	52	20	71	146	75
	Long Beach	881	36	83	78	185	278	221
55.9	Los Angeles (Brentwood)	390	126	59	104	59	42
	Los Angeles (Wadsworth)	535	6	43	6	117	166	197
.5	Martinez	281	19	38	45	81	98
9.5	Palo Alto	582	24	68	66	66	218	140
.6	Palo Alto (Menlo Park)	481	15	164	90	90	102	20
3.4	San Diego	424	9	56	20	66	160	113
7.7	San Francisco	293	6	31	19	50	106	81
4.3	Sepulveda	444	32	50	42	64	121	135
2.2	Colorado:							
	Denver	289	19	27	30	62	93	58
4.3	Fort Lyon	344	5	56	37	89	87	70
	Grand Junction	93	4	4	4	22	59
6.3	Connecticut:							
	Newington	129	7	11	29	37	45
	West Haven	490	34	45	27	102	172	110
5.8	Delaware: Wilmington	236	5	37	97	97
1.2	District of Columbia: Washington	588	17	63	63	183	152	110
	Florida:							
2.0	Bay Pines	596	5	72	15	102	168	234
3.4	Gainesville	428	23	52	60	73	173	47
4.9	Lake City	289	18	9	40	142	80
	Miami	622	12	85	48	150	195	132
	Tampa	557	12	63	40	125	197	120
	Georgia:							
	Augusta (Forest Hills)	303	33	62	142	66
	Augusta (Lenwood)	573	14	76	28	178	191	86
	Decatur	428	6	24	54	83	171	90
	Dublin	246	15	46	82	103
	Idaho: Boise	125	9	34	26	56
	Illinois:							
	Chicago (Lakeside)	383	21	15	51	149	147
	Chicago (Westside)	429	5	47	15	97	156	109
	Danville	697	26	69	22	86	220	274
	Hines	991	33	109	124	175	378	172
	Marion	131	4	9	13	22	48	35
	North Chicago	956	48	116	106	190	322	174
	Indiana:							
	Fort Wayne	121	11	5	37	47	21
	Indianapolis	294	25	30	65	114	60
	Indianapolis (Cold Spr. Rd.)	135	17	38	8	13	38	21
	Marion	719	11	39	79	194	206	190
	Iowa:							
	Des Moines	191	19	5	38	62	67
	Iowa City	296	6	32	16	60	99	83
	Knoxville	399	14	71	40	98	88	88
	Kansas:							
	Leavenworth	346	11	11	28	46	120	130
	Topeka	729	14	125	95	137	186	172
	Wichita	137	25	6	12	50	44
	Kentucky:							
	Lexington	450	8	26	46	64	171	135
	Lexington (Cooper Drive)	288	4	13	25	80	102	64
	Louisville	322	8	28	17	41	140	88
	Louisiana:							
	Alexandria	304	12	8	71	113	100
	New Orleans	433	9	83	33	80	147	81
	Shreveport	354	5	20	16	54	186	73

See footnotes at end of table.

VA Medical Centers—Hospital Care Component: Patients Remaining, Age Groups By State¹
September 24, 1980

VA Medical Center and State	Total all Patients	Age Group					
		Under 25	25-34	35-44	45-54	55-64	65 and Over
Maine: Togus	482	25	60	36	90	186	85
Maryland:							
Baltimore	241	3	15	16	66	73	68
Fort Howard	204	26	11	39	57	71
Perry Point	733	12	35	64	171	246	205
Massachusetts:							
Bedford	710	26	62	36	119	206	281
Boston	645	14	96	66	116	201	152
Brockton	728	19	79	85	155	204	186
Northampton	535	26	32	69	98	220	90
West Roxbury	201	24	6	37	30	67	37
Michigan:							
Allen Park	447	14	49	49	95	171	69
Ann Arbor	265	9	34	5	56	92	69
Battle Creek	791	44	151	63	176	230	127
Iron Mountain	151	6	28	61	56
Saginaw	127	49	39	39
Minnesota:							
Minneapolis	607	25	65	29	97	242	149
St. Cloud	710	34	90	90	142	142	212
Mississippi:							
Biloxi	185	10	45	85	45
Biloxi (Gulfport)	573	5	101	41	174	168	84
Jackson	398	33	34	88	125	118
Missouri:							
Columbia	299	5	5	9	76	97	107
Kansas City	382	19	14	32	91	150	76
Poplar Bluff	129	45	39	45
St. Louis (John J. Cochran)	314	16	16	49	125	108
St. Louis (Jefferson Barracks)	415	25	50	75	99	80	86
Montana:							
Fort Harrison	124	6	34	39	45
Miles City	62	11	11	23	17
Nebraska:							
Grand Island	128	17	60	51
Lincoln	140	6	6	6	6	45	71
Omaha	298	11	40	10	59	74	104
Nevada: Reno	133	19	3	18	42	51
New Hampshire: Manchester	128	22	45	61
New Jersey:							
East Orange	781	33	73	38	153	282	202
Lyons	1,093	9	127	65	243	359	290
New Mexico: Albuquerque	244	4	22	34	40	88	56
New York:							
Albany	565	9	23	28	111	170	224
Batavia	202	5	5	14	19	70	89
Bath	199	5	5	27	54	108
Bronx	528	15	65	33	139	178	98
Brooklyn	684	9	67	31	138	280	159
Brooklyn (St. Albans)	118	20	34	64
Buffalo	685	17	45	50	102	258	213
Canandaigua	898	10	48	71	176	269	324
Castle Point	203	15	5	10	94	79
Montrose	1,113	31	134	132	254	386	176
New York	770	17	76	76	130	218	253
Northport	830	16	98	77	140	304	195
Syracuse	294	6	24	19	71	77	97
North Carolina:							
Asheville	478	20	33	91	165	169
Durham	384	4	38	27	78	137	100
Fayetteville	245	13	43	96	93
Salisbury	788	5	67	48	185	265	218
North Dakota: Fargo	140	7	14	42	49	28
Ohio:							
Chillicothe	746	19	81	60	162	266	158
Cincinnati	290	19	35	11	72	107	46
Cleveland (Wade Park)	499	25	22	34	127	149	142
Cleveland (Brecksville)	633	24	124	95	118	189	83
Dayton	474	17	23	33	65	176	160
Oklahoma:							
Muskogee	155	5	10	5	30	75	30
Oklahoma City	359	8	27	31	84	137	72
Oregon:							
Portland	342	5	5	15	49	128	140
Roseburg	268	13	36	27	49	67	76

See footnotes at end of table.

TABLE

Pennsylvania:
 Altoona
 Butler
 Coatesville
 Erie
 Lebanon
 Philadelphia
 Pittsburgh
 Pittsburgh
 Pittsburgh
 Wilkes-Barre
 Puerto Rico
 Rhode Island
 South Carolina
 Charleston
 Columbia
 South Dakota
 Fort Lincoln
 Hot Springs
 Sioux Falls
 Tennessee:
 Memphis
 Mount Airy
 Murfreesboro
 Nashville
 Texas:
 Amarillo
 Big Spring
 Bonham
 Dallas
 Houston
 Kern
 Marlin
 San Antonio
 Temple
 Waco
 Utah: Salt Lake City
 Vermont:
 Virginia:
 Hampton
 Richmond
 Salem
 Washington:
 Annapolis
 Port of Spain
 Seatons
 Spotsylvania
 Wall
 West Virginia:
 Beckley
 Clarksburg
 Huntington
 Marlinton
 Wisconsin:
 Madison
 Tonawanda
 Wyoming:
 Cheyenne
 Sheridan

¹ Figures rounded

TABLE 23—Continued

INPATIENT CARE

VA Medical Centers—Hospital Care Component: Patients Remaining, Age Groups By State¹
September 24, 1980

VA Medical Center and State	Total all Patients	Age Group					
		Under 25	25-34	35-44	45-54	55-64	65 and Over
Pennsylvania:							
Altoona	127	6	6	46	69
Butler	260	5	20	15	88	132
Coatesville	1,019	30	140	125	197	349	178
Erie	120	5	5	9	55	46
Lebanon	806	12	63	29	190	259	253
Philadelphia	371	9	13	18	89	130	112
Pittsburgh (Highland Drive)	679	30	112	47	138	231	121
Pittsburgh (University Drive)	374	5	26	10	56	183	94
Pittsburgh (U. Dr. Aspinwall)	147	14	32	101
Wilkes-Barre	408	14	33	75	145	141
Puerto Rico: San Juan	637	42	142	72	161	156	64
Rhode Island: Providence	261	10	5	16	58	97	75
South Carolina:							
Charleston	333	11	28	28	70	92	104
Columbia	366	6	31	43	109	94	83
South Dakota:							
Fort Meade	339	4	61	13	44	111	106
Hot Springs	185	8	23	50	48	56
Sioux Falls	177	16	36	25	45	55
Tennessee:							
Memphis	728	40	100	61	127	299	101
Mountain Home	443	9	13	21	103	161	136
Murfreesboro	511	5	48	33	79	189	157
Nashville	368	21	26	97	169	55
Texas:							
Amarillo	132	7	13	13	33	66
Big Spring	155	17	12	53	36	37
Bonham	79	8	4	11	33	23
Dallas	576	42	57	30	106	231	110
Houston	909	45	148	114	187	294	121
Kerrville	240	4	8	12	45	73	98
Marlin	158	10	5	19	38	86
San Antonio	623	21	110	37	95	241	119
Temple	538	15	46	21	92	215	149
Waco	903	17	122	61	248	258	197
Utah: Salt Lake City	323	81	19	82	58	83
Vermont: White River Junction	142	5	16	5	37	63	16
Virginia:							
Hampton	313	16	22	11	47	111	106
Richmond	626	11	50	31	100	228	206
Salem	642	13	73	86	114	202	154
Washington:							
American Lake	361	13	87	60	56	73	72
Portland (Vancouver)	253	6	25	36	24	77	85
Seattle	263	33	31	43	93	63
Spokane	160	6	12	31	49	62
Walla Walla	96	14	18	41	23
West Virginia:							
Beckley	144	4	12	4	20	48	56
Clarksburg	177	6	6	11	22	77	55
Huntington	110	8	17	68	17
Martinsburg	438	17	23	58	161	179
Wisconsin:							
Madison	255	14	10	48	106	77
Tomah	694	10	60	55	114	213	242
Wood	580	23	61	48	69	170	209
Wyoming:							
Cheyenne	96	6	6	12	12	42	18
Sheridan	253	6	26	39	26	78	78

¹ Figures shown are estimates based on a tabulation of a 20 percent systematic random sample of records for patients remaining on September 24, 1980.

The figures shown in the column for 'All Patients' do not necessarily equal the sum of the component parts due to machine rounding of sample data.

INPATIENT CARE

TABLE 24

**VA Medical Centers—Hospital Care Component: Patients Remaining, Compensation and Pension Status,
Type of Patient, Age¹—September 24, 1980**

Type of Patient and Age Group	Total All Patients	Service Connected Veterans				Non-Service Connected			Non- Veterans ³
		Total	10% or More	Less than 10%	NSC with SC ²	Total	Pension	Other	
All patients	69,290	20,369	10,608	635	9,126	48,621	17,079	31,542	300
Under 25	1,790	563	426	19	118	1,039	59	980	188
25-34	7,051	2,624	2,022	54	548	4,410	442	3,968	17
35-44	5,339	1,744	1,257	35	452	3,549	447	3,102	48
45-54	13,611	3,467	1,948	119	1,400	10,133	3,355	6,778	11
55-64	23,319	7,599	3,326	248	4,025	15,703	5,837	9,866	17
65 and over	18,183	4,374	1,630	161	2,583	13,787	6,939	6,848	22
Tuberculosis	436	84	19	9	56	347	117	230	5
Under 25	0	0	0	0	0	0	0	0	0
25-34	36	0	0	0	0	36	0	36	0
35-44	17	12	0	0	12	5	5	0	0
45-54	155	23	5	9	9	132	37	95	0
55-64	149	36	14	0	22	113	52	61	0
65 and over	80	14	0	0	14	61	24	37	5
Psychotic	17,409	7,535	6,380	293	862	9,815	3,709	6,106	59
Under 25	733	352	309	14	29	322	27	295	59
25-34	2,959	1,661	1,512	42	107	1,298	198	1,100	0
35-44	1,909	911	853	17	41	998	182	816	0
45-54	3,543	1,359	1,121	59	179	2,184	1,113	1,071	0
55-64	4,988	2,163	1,799	103	261	2,825	1,245	1,580	0
65 and over	3,277	1,091	787	59	245	2,186	943	1,243	0
Other psychiatric	12,088	2,745	1,163	105	1,477	9,337	2,392	6,945	6
Under 25	506	72	37	0	35	428	23	405	6
25-34	2,209	428	196	12	220	1,781	77	1,704	0
35-44	1,409	302	131	7	164	1,107	67	1,040	0
45-54	2,553	492	238	15	239	2,061	473	1,588	0
55-64	2,964	915	382	53	480	2,049	679	1,370	0
65 and over	2,445	535	179	17	339	1,910	1,073	837	0
Neurological	7,361	1,766	770	26	970	5,477	2,078	3,399	118
Under 25	215	33	24	0	9	103	0	103	79
25-34	482	155	121	0	34	322	67	255	5
35-44	599	147	109	0	38	441	111	330	11
45-54	1,329	268	144	0	124	1,061	355	706	0
55-64	2,665	749	251	15	483	1,904	756	1,148	12
65 and over	2,071	413	120	12	281	1,647	790	857	11
General medical and surgical	31,998	8,239	2,276	202	5,761	23,646	8,783	14,863	113
Under 25	335	105	55	5	45	185	9	176	45
25-34	1,365	381	194	0	187	973	100	873	11
35-44	1,406	373	164	11	198	998	82	916	36
45-54	6,031	1,325	440	36	849	4,695	1,378	3,317	11
55-64	12,554	3,736	880	77	2,779	8,813	3,106	5,707	5
65 and over	10,309	2,321	544	73	1,704	7,982	4,108	3,874	0

¹ Figures shown are estimates based on tabulations of a 20 percent systematic random sample of records of patients remaining on September 24, 1980. The figures shown in the column for 'All Patients' do not necessarily equal the sum of the component parts due to the machine rounding of sample data.

² Veterans with compensable SC disabilities but treated for non-service connected disabilities only.

³ This group includes all patients other than veterans, such as active military, humanitarian emergencies, reimbursable cases, allied beneficiaries, donors, etc. If a veteran is admitted as an Office of Workers Compensation Case, he is coded as a non-veteran.

**VA Medical Centers—Hospital Care Component: Patients Discharged, Manner of Disposition,
Diagnostic Grouping¹—Fiscal Year 1980**

Type of Patient	Total All Discharges	Regular	Type of Disposition			Unavailable ²
			Irregular	Total Deaths	Transfers to Further VA Inpatient Care at VA or Non-VA Hospital	
All discharges	933,636	811,303	47,784	42,986	31,184	379
Tuberculosis	3,599	3,120	141	163	168	7
Pulmonary tuberculosis	2,467	2,097	115	123	126	6
Other tuberculosis	1,132	1,023	26	40	42	1
Psychoses	75,851	55,434	14,031	1,059	5,301	26
Other psychiatric	136,016	109,421	21,914	1,065	3,566	50
Neurological	58,946	51,155	1,123	3,551	3,078	39
Vascular lesions affecting central nervous system	18,588	15,537	196	2,072	768	15
Other neurological	39,451	34,755	920	1,479	2,273	24
Neurological diseases of the sense organs	907	863	7	37
General medical and surgical	651,428	585,377	10,257	36,624	18,925	245
Infective and parasitic diseases	9,247	8,071	159	865	144	8
Malignant neoplasms	83,216	65,027	710	14,194	3,255	30
Benign and unspecified neoplasms	11,293	10,682	128	84	399
Allergic and endocrine system	28,103	26,279	509	737	566	12
Heart diseases and symptoms	87,098	74,895	1,269	7,099	3,804	31
Vascular diseases	39,753	36,295	539	1,744	1,164	11
Acute respiratory diseases	16,053	13,127	212	2,489	218	7
Other respiratory diseases with asthma and symptoms	55,187	50,921	1,110	2,148	986	22
Diseases of the digestive system and symptoms	94,871	87,105	2,041	3,670	2,024	31
Diseases of the genitourinary system and symptoms	47,074	44,501	372	940	1,245	16
Diseases of skin and cellular tissue	20,846	19,888	360	172	420	6
Diseases of bones and organs of movement and symptoms	39,896	38,077	562	210	1,035	12
Accidents, poisonings, and violence	46,227	42,443	1,118	593	2,042	31
All others	72,564	68,066	1,168	1,679	1,623	28
Unavailable ²	7,796	6,796	318	524	146	12

¹ Patient treatment file. This table, as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.

² This column/line includes all records for which required data is unavailable.

VA Medical Centers—Hospital Care Component: Patients Discharged, Age, Diagnostic Category¹—Fiscal Year 1980

Diagnostic Category and ICDA Codes ²	Total Diagnoses	Principal Diagnosis ³	Associated Diagnoses ⁴	Average Age	Age Group of Principal Diagnosis						85 and Over	Unavail-able ⁵
					Under 35	35-44	45-54	55-64	65-74	75-84		
All diseases and conditions	2,165,585	933,636	1,231,949	55.0	135,638	75,905	179,251	320,992	142,141	48,066	31,136	507
I. Infective and parasitic diseases	37,700	12,942	24,758	53.2	2,650	1,079	2,429	3,750	1,743	716	564	11
Pulmonary tuberculosis (011)	4,594	2,467	2,127	56.1	141	203	713	953	312	82	62	1
Tuberculosis, late effects (019)	478	81	397	(⁶)	3	4	26	42	3	3
Tuberculosis, other (010, 012-018)	3,278	862	2,416	59.0	65	59	172	291	161	54	60
Cardiovascular syphilis (093)	67	19	48	(⁶)	3	6	5	4	1
Syphilis of central nervous system (094)	250	99	151	(⁶)	3	3	29	34	19	5	6
Other forms of late syphilis, latent, or unspecified (095-097)	2,067	89	1,978	(⁶)	12	6	15	28	13	6	9
All other venereal diseases (090-092, 098-099)	1,739	814	925	36.3	515	88	80	87	29	8	5	2
Infectious hepatitis (070)	691	460	231	37.2	280	43	57	57	18	3	1	1
Malaria (084)	36	14	22	(⁶)	6	1	2	4	1
All other infective and parasitic diseases (000-009, 020-027, 030-039, 040-046, 050-057, 060-068, 071-079, 080-083, 085-089, 100-104, 110-117, 120-129, 130-136)	24,500	8,037	16,463	54.2	1,625	672	1,332	2,248	1,183	550	420	7
II. Neoplasms	160,899	96,137	64,762	61.6	3,273	2,652	14,518	41,626	22,789	7,041	4,198	40
Malignancy of buccal cavity and pharynx (140-149)	8,273	6,413	1,860	59.7	69	149	1,414	3,177	1,286	231	86	1
Malignancy of digestive organs and peritoneum (150-159)	14,909	12,236	2,673	63.7	123	231	1,606	5,325	3,146	1,094	704	7
Malignancy of respiratory system (160, 162-163)	26,821	22,622	4,199	61.4	78	362	3,791	11,401	5,505	1,095	382	8
Malignancy of larynx (161)	3,173	2,543	630	60.7	2	39	487	1,318	563	97	36	1
Malignancy of lymphatic & hematopoietic tissue (200-209)	13,123	9,347	3,776	58.9	796	392	1,494	3,791	1,982	535	363	4
Malignancy of genito-urinary organs (180-189)	22,218	16,147	3,666	66.7	366	219	1,093	5,705	4,931	2,256	1,569	8
Malignancies of all other systems (170-174, 190-199)	50,408	14,751	35,657	60.9	638	596	2,401	6,133	3,139	1,114	722	8
Neoplasms, benign (210-228)	17,734	9,759	7,975	56.5	1,050	551	1,868	3,855	1,766	453	213	3
Neoplasms, of unspecified nature (230-239)	4,240	2,319	1,921	60.1	151	113	364	931	471	166	123
III. Endocrine, nutritional, and metabolic diseases	124,050	28,533	95,517	57.4	1,608	1,934	6,538	11,734	4,801	1,214	696	8
Diabetes mellitus (250)	74,663	20,946	53,717	57.8	948	1,354	4,827	8,858	3,619	881	452	7
Diseases of thyroid and other endocrine glands (240-246, 251-258)	9,213	2,892	6,321	55.0	383	202	593	1,070	454	110	79	1
Avitaminosis and other nutritional deficiency (260-269)	6,929	974	5,955	62.5	31	189	189	345	200	96	82
Obesity not specified as of endocrine origin (277)	16,980	1,242	15,738	52.9	103	136	377	500	109	13	4
Other metabolic diseases (270-276, 278-279)	16,265	2,479	13,786	57.3	143	211	552	961	419	114	79
IV. Diseases of blood and blood-forming organs	43,079	5,446	37,633	61.3	482	238	790	1,810	1,061	549	515	1
Anemia, iron deficiency (280)	9,376	1,322	8,054	64.8	23	43	182	458	332	166	117	1
Pericious anemia (281.0)	650	196	454	67.6	1	1	19	74	40	33	28
Anemia, other (281.1-285)	23,810	2,738	21,072	61.3	300	128	380	844	480	284	322
All other diseases of blood and blood-forming organs (286-289)	9,243	1,190	8,053	56.4	158	66	209	434	209	66	48
V. Mental disorders	322,497	211,867	110,630	45.1	68,974	32,669	47,694	45,760	11,262	3,180	2,210	118
Alcoholic psychosis (291)	7,126	4,539	2,587	51.8	533	565	1,329	1,594	455	48	14	1
Psychosis associated with drug dependence (294.34)	228	194	34	29.7	156	21	8	8	1
Psychosis associated with organic brain syndrome, excluding alcohol and drug dependence (290, 292-294.30, 294.39-294.9)	7,615	4,481	3,134	64.2	482	141	380	1,127	987	769	591	4
Psychosis not attributed to physical conditions (295-299)	79,290	66,637	12,653	40.4	31,029	10,655	11,716	10,169	2,216	487	321	44
Alcoholism (303)	132,650	89,984	42,666	47.8	16,912	15,444	27,813	24,797	4,506	337	136	39

Non-psychoactive organic brain syndrome associated with alcoholism

1,996

1,109

887

57.6

43

252

502

217

35

7

14

Non-psychotic organic brain syndrome associated with alcoholism (309.13)	1,996	66,637	12,653	40.4	31,029	10,655	11,716	10,109	4,506	337	136	7
Drug dependence (304)	20,872	89,984	42,666	47.8	16,912	15,444	27,813	24,797	4,506	337	136	13
Non-psychotic organic brain syndrome associated with drug dependence (309.14)	156			(⁶)	33		10	17	19	6	2	2
Non-psychotic organic brain syndrome associated with other physical conditions (309.0, 309.2-309.9)	15,795			67.0	336	240	240	624	1,543	1,233	1,000	3
Mental retardation (310-315)	382			45.3	45	8	8	30	35	1	2	1
All other non-psychotic mental disorders (Y00.1, Y03.4, 300-302, 305-307, 316, 318, 793.0)	56,387			42.5	11,794	4,185	4,185	4,927	5,691	258	124	12
VI. Diseases of nervous system & sense organs.	107,768			57.2	4,580	3,102	3,102	7,969	16,180	2,767	1,545	31
Inflammatory diseases of central nervous system (320-324)												
Epilepsy (345)	1,024			51.4	81	61	61	107	163	11	9	1
Amorphous lateral sclerosis (348.0)	7,701			47.6	819	377	377	668	805	53	36	4
Paraplegia, cerebral or spinal (344.2, 349.3)	538			59.3	9	13	13	86	185	20	2	
Quadriplegia, cerebral or spinal (344.3, 349.4)	4,757			45.9	534	307	307	413	461	15	6	3
Other diseases of central nervous system, including hereditary and familial disease of nervous system (330-333, 340-344.1, 344.9, 346-347, 348.1-349.2, 349.5-349.9)	3,371			44.0	535	243	243	378	302	11	5	1
Diseases of nerves and peripheral ganglia (350-358)	24,076			56.6	876	785	785	1,723	3,119	515	239	7
Inflammatory diseases of the eye and other diseases and conditions of the eye, except blindness, (360-369, 370-378)	14,667			55.2	566	431	431	1,221	2,313	188	82	6
Blindness (379)	36,685			63.1	551	491	491	2,347	7,059	1,807	1,072	5
Diseases of ear and mastoid process (380-389)	3,075			58.2	68	63	63	161	347	60	34	
VII. Diseases of the circulatory system.	11,874			53.3	541	331	331	865	1,426	87	60	4
Chronic rheumatic heart disease (393-398)	390,535			61.3	3,268	5,764	5,764	26,627	61,873	10,888	7,411	60
Hypertensive heart disease, exclusive of ischemic heart disease (400.1, 402, 404)	9,683			58.4	139	201	201	801	1,671	164	79	
Hypertensive disease without heart involvement (400.0, 400.2, 400.3, 400.9, 401, 403)	6,763			62.1	29	96	96	644	1,622	284	146	1
Acute myocardial infarction (410)	59,575			56.7	510	837	837	2,621	4,398	349	149	8
Chronic ischemic heart disease (412)	11,211			60.9	71	313	313	1,675	3,733	517	339	6
Other ischemic heart disease, with or without hypertensive disease (411, 413, 414)	86,374			61.5	250	1,396	1,396	8,020	18,043	2,826	2,125	14
Other forms of heart disease (391, 392.0, 420-429)	23,053			58.8	64	365	365	1,984	3,741	337	149	1
Cerebral hemorrhage (431)	86,346			63.9	544	718	718	3,193	8,803	2,577	2,002	13
Cerebral thrombosis (433)	1,254			61.6	21	29	29	160	347	74	38	1
Cerebral embolism (434)	3,800			63.2	25	38	38	390	1,051	215	149	2
Generalized ischemic cerebrovascular disease (437)	239			(⁶)	1	4	4	5	35	5	9	
All other cerebrovascular disease (430, 432, 436, 438)	3,436			68.5	6	12	12	117	384	198	176	1
Arteriosclerosis (440)	27,237			64.0	109	242	242	1,805	6,081	1,385	823	2
All other diseases of arteries, arterioles and capillaries (441-448)	9,680			65.0	6	38	38	441	1,470	349	275	7
Varicose veins lower extremities (454)	28,518			62.3	209	298	298	1,885	5,402	920	555	
Hemorrhoids (455)	5,044			58.9	126	127	127	420	857	144	99	
All other diseases of veins and lymphatics, and other diseases of circulatory system (390, 392.9, 450-453, 456-458)	8,433			51.5	581	508	508	989	1,253	78	47	1
VIII. Diseases of the respiratory system.	19,889			57.7	577	542	542	1,467	2,982	466	251	2
Acute respiratory infections including influenza (460-466, 470-474) ..	166,966			60.6	3,860	2,276	2,276	8,772	23,595	4,974	2,922	19
Pneumonia (480-486)	8,331			55.8	581	193	193	467	1,016	252	162	
Bronchitis, unqualified and chronic (490-491)	26,875			64.2	627	457	457	1,630	3,686	1,620	1,464	2
Emphysema (492)	21,342			62.3	120	120	120	851	2,682	505	200	1
Asthma (493)	48,522			63.9	53	144	144	1,663	6,592	1,317	469	4
All other diseases of upper respiratory tract and respiratory system (500-508, 510-519)	6,658			54.4	355	271	271	639	1,192	98	37	2
	55,238			57.5	2,124	1,091	1,091	3,522	8,427	1,182	590	10

See footnotes at end of table.

VA Medical Centers—Hospital Care Component: Patients Discharged, Age, Diagnostic Category¹—Fiscal Year 1980

Diagnostic Category and ICDA Codes ²	Total Diagnoses	Principal Diagnosis ³	Associated Diagnoses ⁴	Average Age	Age Group of Principal Diagnosis							Unavail-able ⁵
					Under 35	35-44	45-54	55-64	65-74	75-84	85 and Over	
IX. Diseases of the digestive system	225,965	84,962	141,003	55.7	8,981	6,800	18,565	31,406	12,885	3,892	2,389	44
Diseases of oral cavity, salivary glands, and jaws (520-529)	62,961	5,271	57,690	50.4	1,213	415	1,024	1,804	631	108	72	4
Ulcers digestive system (stomach, duodenum, peptic, gastrojejunal) (531-534)	17,349	8,708	8,641	56.8	696	620	1,900	3,454	1,388	418	225	7
All other diseases esophagus, stomach, and duodenum (except ulcers) (530, 535-537)	21,206	7,981	13,225	57.0	633	557	1,671	3,160	1,326	411	220	3
Hernia of abdominal cavity (550-553)	31,658	19,114	12,544	57.9	1,654	1,091	3,479	7,532	3,652	1,109	589	8
Other diseases of intestine and peritoneum (540-543, 560-569)	43,656	20,501	23,155	56.1	2,705	1,616	3,832	6,890	3,205	1,310	932	11
Alcoholic cirrhosis of liver (571.0)	20,572	9,394	11,178	53.7	486	983	3,173	3,737	913	68	26	8
Other diseases of liver, gallbladder and pancreas (570, 571.8, 571.9, 572-577)	28,563	13,993	14,570	54.0	1,594	1,518	3,486	4,829	1,770	468	325	3
X. Diseases of the genitourinary system	112,709	42,627	70,082	60.1	3,421	2,043	6,049	15,774	9,622	3,437	2,241	40
Nephritis and nephrosis (580-584)	11,189	4,751	6,438	56.2	378	353	1,092	1,866	750	190	113	9
Other diseases of urinary system (590-599)	59,063	16,953	42,110	60.0	1,453	1,016	2,650	5,642	3,452	1,535	1,189	16
Diseases of the prostate (600-602)	28,398	13,661	14,737	65.5	151	123	984	5,718	4,417	1,463	797	8
Other diseases of male genital organs (603-607)	11,417	5,707	5,710	53.5	973	417	1,090	2,074	823	207	118	5
Diseases of breast, gynecological conditions (610-616, 620-629)	2,642	1,555	1,087	48.5	466	134	233	474	180	42	24	2
XI. Deliveries and complications of pregnancy, childbirth and the puerperium (630-678)	79	41	38	(⁶)	39	1	1
XII. Diseases of skin and subcutaneous tissue	53,860	20,846	33,014	52.6	3,867	1,800	4,376	6,771	2,680	809	536	7
Infections of skin and subcutaneous tissue (680-686, 694-698)	21,091	9,846	11,245	51.7	1,976	873	2,154	3,178	1,092	348	222	3
All other diseases of skin and subcutaneous tissue (690-693, 700-709)	32,769	11,000	21,769	53.5	1,891	927	2,222	3,593	1,588	461	314	4
XIII. Diseases of the musculoskeletal system and connective tissue	91,726	38,021	53,705	52.9	6,138	3,656	7,854	13,670	4,736	1,223	720	24
Arthritis and rheumatism, except rheumatic fever (710-718)	42,685	13,404	29,281	58.7	741	726	2,533	5,945	2,313	716	424	6
Displacement of intervertebral disc (725)	3,685	2,481	1,204	48.3	449	430	720	711	145	17	9
Osteomyelitis and other diseases of bone and joint (720-724, 726-729)	28,595	14,261	14,334	48.5	3,603	1,784	3,015	4,149	1,219	317	161	13
Other diseases of musculoskeletal system (730-738)	16,761	7,875	8,886	52.5	1,345	716	1,586	2,865	1,059	173	126	5
XIV. Congenital deformities (741-759)	8,143	3,068	5,075	52.2	544	291	612	1,066	409	107	36	3
XVI.A Symptoms and ill-defined conditions	146,122	52,841	93,281	56.0	6,330	4,373	10,808	18,230	7,767	3,005	2,301	27
Senility without mention of psychosis (794)	676	166	510	84.0	1	3	15	49	98
Symptoms and all other ill-defined conditions (780-792, 795-796)	145,446	52,675	92,771	55.9	6,330	4,373	10,807	18,227	7,752	2,956	2,203	27
XVI.B Observation and examination cases, follow-up and special admissions	61,407	28,838	32,569	57.7	2,592	1,673	5,064	11,394	5,577	1,702	817	19
Tuberculosis (Y03.01, Y03.2, Y10.61-Y10.63)	1,877	250	1,627	59.5	5	9	57	121	35	19	4
Malignancy (793.1, Y03.3)	14,990	8,269	6,721	62.9	152	169	1,130	3,550	2,211	697	356	4
All other admissions (793.8, 793.9, Y00.0, Y00.01, Y00.09, Y00.2-Y01, Y03.02, Y03.91-Y03.94, Y04-Y06, Y10.0-Y10.6, Y10.60, Y10.64-Y10.69, Y10.9, Y11-Y12, Y20-Y29)	44,289	20,072	24,217	55.8	2,296	1,460	3,846	7,690	3,324	985	456	15
Diagnosis deferred, mental observation (319.0, APA Code)	251	247	4	37.8	139	35	31	33	7	1	1
XVII. Accidents, poisonings, and nature of injury	104,284	50,893	53,391	49.9	13,970	4,942	9,182	13,552	5,238	2,227	1,738	43
				44.0	955	297	391	368	75	30	10	2

XVII. Accidents, poisonings, and nature of injury	104,284	50,893	53,391	49.9	13,970	4,942	9,182	13,552	5,238	2,227	1,739	43
Fracture of skull and facial bones (800-804)	3,133	2,128	1,005	41.0	955	297	391	368	75	30	10	2
Fracture of skull and facial bones, late effects (800-804) ⁷	599	330	269	40.8	141	53	75	49	6	3	3	4
Fracture of spine and trunk (805-809)	5,014	2,505	2,509	55.0	418	191	451	827	318	156	140	1
Fracture of spine and trunk, late effects (805-809) ⁷	4,897	1,064	3,833	45.9	325	154	254	235	66	19	10	2
Fracture of upper limb (810-819)	5,077	2,979	2,098	48.8	891	251	527	827	303	104	74	1
Fracture of upper limb, late effects (810-819) ⁷	1,248	727	521	43.7	295	73	135	145	60	14	5	2
Fracture of lower limb (820-829)	10,670	7,813	2,857	57.0	1,253	549	1,297	2,247	1,137	668	661	1
Fracture of lower limb, late effects (820-829) ⁷	2,673	1,618	1,055	47.7	537	166	296	365	131	76	46	1
Dislocation without fracture (830-839)	2,163	1,565	598	41.6	739	173	225	295	90	26	15	2
Dislocation without fracture, late effects (830-839) ⁷	567	417	150	38.4	231	47	50	69	15	5	5	4
Intracranial injury—without skull fracture (850-854)	3,252	2,280	972	48.2	700	221	430	577	188	96	64	1
Intracranial injury—without skull fracture, late effects (850-854) ⁷	1,622	816	806	44.2	316	107	149	155	60	15	14	1
Internal injury of chest, abdomen and pelvis (860-869)	1,140	550	590	47.1	175	64	98	146	41	15	11	1
Internal injury of chest, abdomen and pelvis, late effects (860-869) ⁷	139	63	76	(⁶)	19	8	14	18	2	2	2	1
Traumatic amputation of arm and hand—complete/partial (887)	10	8	2	(⁶)	2	2	2	2	2	2	2	1
Traumatic amputation of arm and hand—complete/partial, late effects (887) ⁷	18	8	10	(⁶)	3	1	2	2	2	2	2	1
Traumatic amputation of foot and leg(s)—complete/partial (896-897)	96	40	56	(⁶)	9	5	8	14	1	1	2	1
Traumatic amputation of foot and leg(s)—complete/partial, late effects (896-897) ⁷	90	25	65	(⁶)	3	5	5	5	3	2	2	1
Burns (940-949)	2,105	1,242	863	51.2	236	127	303	384	129	37	25	1
Burns, late effects (940-949) ⁷	235	122	113	48.7	29	15	19	46	9	3	1	1
Injury to nerves and spinal cord (950-959)	660	314	346	43.0	131	35	55	67	20	5	5	1
Injury to nerves and spinal cord, late effects (950-959) ⁷	985	422	563	44.8	141	68	84	104	20	2	3	1
Adverse effect of medicinal agents and other complications of surgical and medical care (960-979, 997-999)	30,077	10,607	19,470	54.5	1,781	833	1,925	3,511	1,552	599	394	12
All other accidents, poisonings and violence (840-848, 870-879, 880-886, 890-895, 900-907, 910-918, 920-929, 930-939, 980-996)	25,970	12,368	13,602	46.2	4,311	1,390	2,223	2,888	956	340	249	11
All other accidents, poisonings and violence, late effects (870-879, 880-886, 890-895, 900-907, 910-918, 920-929) ⁷	1,844	882	962	44.6	329	107	164	206	56	9	10	1
Unavailable ⁵	7,796	7,796	55.5	1,061	612	1,404	2,801	1,276	335	296	11

¹ Patient treatment file. This table as well as all others in this discharge series, excludes approximately 232,161 one-day diagnosis discharges.

² The diagnostic categories and selected diagnoses included in this table are based on the "International Classification of Diseases Adapted for Indexing of Hospital Records", USPHS Publication No. 1693. The numbers following the diagnoses are the identifying code numbers of this diagnostic classification. Category XV, "Certain Causes of Perinatal Morbidity and Mortality", in which no cases occurred, is not included in this table.

³ Principal diagnosis is that diagnosis designated by the discharge physician as responsible for the major portion of the patient's length of stay.

⁴ Associated diagnoses are established diagnoses for which treatment was given, other than the principal diagnosis.

⁵ This column/line includes all records for which required data is unavailable.

⁶ Average age not calculated for totals of less than 100 cases.

⁷ All late effect codes are differentiated from other codes by being uniformly .9 in the fourth digit position.

VA Medical Centers—Hospital Care Component: Patients Discharged, Type of Patient, Age, Length of Stay¹—Fiscal Year 1980

Type of Patient and Age Group		Total Patients	Average Days	Median Days ²	Length of Stay Distribution (Days)										731 Plus	Unavail-able ³	Total days ⁴	
					1 Day	2-3	4-7	8-14	15-21	22-30	31-60	61-90	91-180	181-270				271-365
All patients		933,636	28.0	10.7	92,854	128,612	167,776	200,320	104,596	81,210	98,117	26,908	20,372	4,911	2,072	2,970	2,839	26,143,843
Under 20		1,272	16.7	7.4	178	219	280	221	95	91	112	36	32	6	58	51	5	21,148
20-24		23,508	19.4	7.4	3,601	4,115	4,722	3,802	1,755	1,662	2,241	1,112	646	130	130	51	2	455,664
25-29		46,267	20.7	8.1	6,715	7,407	8,819	7,772	3,828	3,674	4,866	1,514	1,170	260	93	111	32	959,058
30-34		64,591	21.7	9.0	8,574	10,025	12,119	11,069	5,566	5,626	7,344	1,997	1,549	342	131	171	69	1,399,986
35-39		38,232	22.4	9.6	4,638	5,779	7,062	6,983	3,494	3,431	4,410	1,135	865	182	91	94	53	857,892
40-44		37,673	25.2	9.8	4,122	5,849	6,922	7,372	3,638	3,215	4,220	1,083	743	194	87	127	96	949,354
45-49		69,829	25.2	10.2	7,037	10,399	12,910	14,476	7,417	5,942	7,526	1,922	1,393	322	118	192	171	1,762,904
50-54		109,422	26.4	10.6	10,314	15,358	20,117	23,779	12,298	9,385	11,605	3,029	2,196	525	201	317	289	2,888,695
55-59		166,400	27.1	10.7	15,572	22,907	30,117	37,463	19,279	14,403	16,797	4,584	3,291	729	320	460	464	4,512,283
60-64		154,592	26.2	11.0	13,849	20,407	27,607	35,727	18,942	13,504	15,504	4,119	3,045	733	318	419	409	4,045,061
65-69		90,767	28.8	11.4	7,992	11,596	15,637	20,995	11,292	8,050	9,179	2,623	2,043	506	223	310	316	2,613,383
70-74		51,374	33.1	11.9	4,313	6,011	8,665	11,941	6,546	4,675	5,464	1,575	1,240	338	152	216	236	1,700,526
75-79		18,164	40.4	12.7	1,415	2,056	2,783	4,216	2,343	1,739	2,015	621	542	146	59	111	118	734,431
80-84		29,902	49.9	12.4	2,289	3,245	4,940	7,037	3,906	2,728	3,271	927	770	239	99	186	263	1,491,243
85 and over		31,136	55.9	13.0	2,182	3,165	4,980	7,361	4,146	3,041	3,516	1,007	839	255	120	204	317	1,740,758
Unavailable ³		507	Not computed	Not computed	63	74	96	96	51	44	47	19	8	4	2	1	1	11,458
Tuberculous		3,599	40.8	18.8	155	215	409	732	534	410	587	216	215	70	27	20	9	146,682
Under 20		25	12.4	12.9	1	2	6	5	9	1	1	3	4	1	1	1	1	311
20-24		63	23.6	12.4	3	3	14	18	8	3	7	6	4	1	1	1	1	1,484
25-29		119	24.6	15.5	9	5	21	25	15	11	20	6	4	1	1	1	1	2,928
30-34		161	41.8	22.6	10	2	15	26	26	21	32	10	14	1	2	2	1	6,736
35-39		350	45.5	18.8	11	29	52	59	44	33	50	25	30	10	3	3	1	15,921
40-44		606	47.8	19.6	27	40	66	108	95	60	99	42	42	16	5	4	2	28,986
45-49		743	38.4	19.5	32	38	66	172	98	87	134	46	43	17	6	3	1	28,552
50-54		637	42.2	19.9	31	36	56	119	109	84	109	33	34	15	6	3	2	26,891
55-59		323	34.5	18.9	5	19	43	74	37	40	59	19	20	3	3	1	1	11,145
60-64		180	32.8	17.0	10	11	25	37	25	27	20	11	9	3	1	1	1	5,908
65-69		53	27.2	17.9	2	4	5	10	13	4	10	5	2	2	1	1	1	1,442
70-74		102	29.1	18.0	3	8	12	21	16	12	15	5	3	2	2	3	3	10,036
75-79		125	29.1	16.5	3	9	13	33	20	14	17	8	6	1	1	1	1	3,641
80-84		1	Not computed	Not computed	1	1	1	1	1	1	1	1	1	1	1	1	1	29
85 and over		75,851	92.2	21.9	5,220	5,575	7,796	11,159	8,226	8,568	13,985	5,462	5,166	1,520	692	1,116	1,349	6,995,015
Unavailable ³		295	31.1	17.0	21	26	31	61	30	32	52	18	18	5	34	24	2	9,142
Psychotic		5,885	34.6	18.6	526	468	731	885	641	668	1,058	405	376	67	55	59	21	203,492
Under 20		11,983	35.2	17.1	1,100	1,124	1,502	1,886	1,247	1,311	2,087	796	643	148	55	59	21	421,590
20-24		14,037	38.7	18.3	1,247	1,171	1,686	2,179	1,538	1,627	2,529	893	776	179	61	105	44	543,607
25-29		6,694	45.9	19.6	523	488	788	1,043	763	809	1,170	469	393	106	51	59	31	307,210
30-34		4,688	65.7	21.7	330	333	486	692	528	549	882	344	279	96	35	72	60	307,803
35-39		6,350	89.5	23.5	357	438	603	927	725	715	1,262	462	452	148	51	102	107	568,347
40-44		7,083	104.4	26.2	324	470	595	1,002	778	787	1,428	558	575	196	83	130	156	739,011
45-49		5,215	160.3	29.4	199	279	355	707	553	621	1,013	413	467	166	90	141	210	1,124,436
50-54		2,461	212.2	34.3	97	112	153	286	260	270	451	214	245	96	53	75	148	835,722
55-59		1,198	298.1	38.5	29	48	75	160	111	118	226	102	124	41	28	47	89	521,910
60-64		477	301.7	28.5	22	25	38	72	51	42	65	33	50	15	6	18	40	143,915
65-69		827	517.0	31.0	29	37	66	122	78	81	120	49	47	26	15	15	112	427,530
70-74		926	519.1	28.4	31	37	93	133	107	87	160	50	68	28	12	33	87	480,724
75-79		49	Not computed	Not computed	5	5	4	9	1	4	12	4	4	2	1	1	1	3,424
80-84		136,016	30.7	13.5	11,841	17,505	21,615	21,493	12,313	16,329	23,815	5,313	3,691	824	365	498	397	4,169,622
85 and over		265	17.4	10.0	26	42	53	40	27	30	37	3	6	1	1	1	1	4,584
Unavailable ³		4,934	24.2	12.7	626	554	784	749	420	588	807	195	159	24	11	15	4	119,496
Other psychiatric		12,361	24.1	12.7	1,572	1,492	1,831	1,891	1,121	1,506	1,971	487	362	72	20	32	4	297,550
Under 20																		
20-24																		
25-29																		

30-34	19,214	24.0	13.1	2,323	2,356	2,931	2,725	1,724	2,469	3,285	736	479	97	40	35	9	5	460,573
35-39	11,203	23.2	12.6	1,194	1,506	1,776	1,578	874	1,459	2,074	400	255	46	20	13	6	2	259,850
40-44	10,084	24.2	12.5	1,085	1,457	1,660	1,420	827	1,206	1,878	377	187	36	22	11	8	1	243,781
45-49	15,354	23.3	12.7	1,284	2,212	2,610	2,342	1,273	1,838	2,610	542	328	54	23	20	11	2	358,109
50-54	18,907	25.8	13.0	1,384	2,643	3,243	3,035	1,610	2,240	3,404	734	417	86	31	50	28	2	488,363
55-59	20,199	31.1	13.9	1,225	2,648	3,256	3,500	1,916	2,391	3,614	803	555	115	50	71	55	1	628,571
60-64	12,863	36.0	14.2	715	1,547	2,025	2,292	1,312	1,448	2,180	387	214	91	41	70	50	1	455,804
65-69	5,416	46.4	15.1	279	601	819	993	596	598	874	247	214	73	32	47	42	1	251,237
70-74	2,187	69.6	17.5	86	213	293	408	261	222	351	93	125	43	22	31	27	1	152,195
75-79	747	121.2	20.9	28	67	78	123	92	66	123	41	42	20	16	24	39	1	90,525
80-84	1,129	125.3	23.4	47	76	105	185	132	116	183	67	82	29	21	28	48	1	141,421
85 and over	1,284	168.3	24.2	53	83	146	204	123	137	212	77	93	38	18	40	70	1	216,139
Unavailable ³	69	Not computed	14	8	5	5	8	5	15	7	7	7	7	7	7	7	1	1,424
Neurological	58,946	41.1	13.3	4,445	6,803	8,606	12,688	7,469	5,419	6,986	2,401	2,397	680	299	401	348	4	2,421,451
Under 20	127	15.5	6.0	16	27	40	17	8	3	4	7	5	5	9	10	10	1	1,974
20-24	1,251	29.9	7.7	215	204	220	205	95	61	79	53	68	32	14	11	4	1	37,355
25-29	2,200	25.7	7.9	322	397	389	423	196	140	123	80	75	25	14	11	4	1	56,581
30-34	3,552	25.2	8.8	441	605	650	685	351	259	271	58	76	18	13	9	11	1	89,458
35-39	2,247	29.8	10.5	253	355	347	465	261	171	210	84	130	38	17	14	7	1	66,951
40-44	2,209	41.3	11.2	194	339	335	506	235	162	209	76	83	29	12	16	13	1	91,332
45-49	4,283	35.0	12.0	353	581	683	912	572	374	430	140	140	29	17	28	23	1	149,732
50-54	6,858	43.5	12.8	536	778	1,049	1,560	863	610	778	255	249	58	28	42	52	1	298,404
55-59	10,828	42.9	13.7	712	1,231	1,577	2,337	1,470	1,037	1,334	435	422	104	45	63	61	1	464,482
60-64	10,192	38.0	14.4	642	1,019	1,377	2,256	1,401	1,053	1,315	427	424	129	51	53	45	1	387,251
65-69	6,221	44.4	15.1	348	544	775	1,420	846	610	864	307	296	79	34	59	39	1	275,975
70-74	3,606	54.3	16.7	159	300	440	791	466	384	552	187	183	59	20	39	30	1	195,780
75-79	1,308	60.9	18.6	62	88	161	247	178	132	213	93	65	16	9	18	16	1	79,605
80-84	2,068	55.8	16.0	95	161	282	455	274	216	305	100	91	32	14	23	19	1	115,424
85 and over	1,956	56.2	16.2	91	167	276	401	245	206	295	97	87	30	16	16	28	1	109,817
Unavailable ³	40	Not computed	6	7	5	5	8	2	1	4	4	3	2	2	2	2	1	1,330
General medical and surgical	651,428	18.7	9.3	70,488	97,575	127,907	152,505	75,127	49,832	51,901	13,280	8,728	1,771	670	911	715	38	12,206,861
Under 20	574	9.0	5.3	114	123	153	101	29	24	19	8	2	1	4	2	3	1	5,168
20-24	11,249	8.2	4.7	2,205	2,862	2,946	1,932	571	334	283	62	38	6	4	2	3	1	92,297
25-29	19,305	9.1	5.3	3,672	4,329	5,005	3,491	1,226	697	632	141	84	11	4	9	3	1	175,978
30-34	27,138	10.7	5.9	4,498	5,791	6,730	5,342	1,897	1,222	1,181	266	150	26	10	15	8	2	291,552
35-39	17,670	11.8	6.8	2,622	3,386	4,065	3,819	1,551	954	910	135	95	7	11	14	4	2	208,134
40-44	20,226	14.5	7.5	2,564	3,683	4,362	4,657	1,991	1,252	1,193	272	176	29	16	14	15	2	293,498
45-49	42,946	15.2	8.4	4,974	7,076	8,861	10,103	4,745	2,936	2,914	741	433	77	24	35	27	2	654,880
50-54	75,110	17.4	9.3	7,956	11,330	15,010	17,887	8,849	5,605	5,805	1,417	893	165	53	88	47	5	1,310,002
55-59	125,520	17.8	9.6	13,097	18,314	24,363	30,117	14,798	9,934	10,098	2,601	1,590	282	96	117	103	9	2,232,661
60-64	124,511	18.5	10.1	12,143	17,350	23,568	30,063	15,402	10,179	10,721	2,694	1,699	325	127	150	96	7	2,297,808
65-69	75,526	20.3	10.5	7,209	10,234	13,689	18,038	9,438	5,451	6,847	1,807	1,247	252	100	127	84	3	1,533,969
70-74	43,747	22.3	11.2	3,996	5,400	7,754	10,429	5,630	3,880	4,272	1,159	781	192	79	96	77	2	977,373
75-79	15,435	26.9	11.9	1,294	1,860	2,480	3,729	1,982	1,470	1,585	449	380	94	28	49	35	1	415,171
80-84	25,585	30.9	11.7	2,103	2,941	4,442	6,216	3,373	2,292	2,623	688	544	148	48	85	81	1	791,551
85 and over	26,549	34.7	12.3	1,983	2,842	4,402	6,525	3,603	2,579	2,796	774	573	153	72	113	132	2	921,738
Unavailable ³	337	Not computed	38	54	80	80	66	41	23	22	6	3	1	2	2	2	1	5,081
Unavailable ³	7,796	26.2	11.2	725	939	1,443	1,743	927	652	843	236	175	46	19	24	21	3	204,212
Under 20	11	25.5	9.8	1	1	3	2	1	2	13	2	5	1	1	1	1	1	280
20-24	164	16.5	7.3	28	25	35	26	19	10	13	2	2	4	1	1	1	1	2,713
25-29	355	16.5	7.6	46	62	78	63	30	17	46	7	2	4	1	1	1	1	5,875
30-34	531	22.4	8.6	56	93	107	113	37	38	58	12	10	1	3	2	1	1	11,868
35-39	307	42.6	9.3	38	39	65	63	30	26	32	7	2	2	2	2	1	1	13,085
40-44	305	29.1	9.4	39	35	64	71	31	25	26	4	4	3	2	1	1	1	6,204
45-49	546	20.3	10.7	58	63	101	133	58	46	55	12	10	4	4	4	2	1	15,915
50-54	858	27.9	11.4	87	97	154	187	103	83	91	23	20	4	1	3	4	1	23,919
55-59	1,427	23.6	11.2	126	162	269	342	161	107	147	47	30	9	5	1	3	2	33,580
60-64	1,374	30.3	11.8	119	176	229	300	165	119	166	48	34	7	3	2	6	1	41,585
65-69	820	23.4	12.2	54	86	158	184	115	81	84	29	21	3	1	1	1	1	19,147
70-74	456	26.6	12.7	33	39	78	116	57	44	43	23	18	1	2	2	1	1	12,118
75-79	144	26.2	14.4	7	12	21	35	17	25	19	3	2	1	1	1	1	1	3,773
80-84	191	27.6	13.3	12	22	33	38	33	11	25	8	4	2	1	2	2	1	5,281
85 and over	296	29.4	13.3	21	27	50	65	48	18	36	11	12	5	1	2	2	1	8,699
Unavailable ³	11	Not computed	13	2	2	2	5	2	2	2	2	2	2	2	2	2	1	170

¹ Patient treatment file. This table, as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.
² One-half of the discharges in the given category have length of stay greater than the median; the other half, less than the median.
³ This column/line includes all records for which required data is unavailable.
⁴ This column excludes those cases for which the number of days is unavailable.

**VA Medical Centers—Hospital Care Component: Patients Discharged, Age, Marital Status,
Diagnostic Grouping¹—Fiscal Year 1980**

Diagnostic Composition of Patients	Total Discharged	Age Group						Marital Status				
		Under 45	45-54	55-64	65-74	75 and Over	Unavail-able ²	Never Married	Married	Separated	Widowed	Divorced
All discharges	933,636	211,543	179,251	320,992	142,141	79,202	507	135,695	502,979	46,638	59,367	161,384
Tuberculosis	3,599	479	956	1,380	503	280	1	563	1,488	316	275	808
Pulmonary tuberculosis	2,467	344	713	953	312	144	1	409	893	241	190	624
Other tuberculosis	1,132	135	243	427	191	136	154	595	75	85	184
Psychoses	75,851	43,582	13,433	12,898	3,659	2,230	49	31,686	20,569	4,634	2,077	13,710
Other psychiatric	136,016	58,061	34,261	32,862	7,603	3,160	69	24,735	49,993	11,745	6,426	39,484
Neurological	58,946	11,586	11,141	21,020	9,827	5,332	40	7,047	35,132	2,490	3,746	8,668
Vascular lesions affecting central nervous system	18,588	487	2,487	7,898	4,638	3,072	6	1,439	11,918	662	1,741	2,312
Other neurological	39,451	10,919	8,448	12,777	5,065	2,209	33	5,525	22,618	1,800	1,964	6,221
Neurological diseases of the sense organs	907	180	206	345	124	51	1	83	596	28	41	135
General medical and surgical	651,428	96,162	118,056	250,031	119,273	67,569	337	70,524	391,713	27,058	46,346	97,456
Infective and parasitic diseases	9,247	3,170	1,446	2,384	1,237	1,001	9	1,606	4,954	439	554	1,402
Malignant neoplasms	83,216	3,917	12,082	36,488	20,427	10,265	37	7,557	52,342	2,891	7,036	11,158
Benign and unspecified neoplasms	11,293	1,718	2,066	4,480	2,116	912	1	1,162	7,275	474	638	1,477
Allergic and endocrine system	28,103	3,443	6,450	11,572	4,738	1,892	8	2,935	17,263	1,248	1,803	4,144
Heart diseases and symptoms	87,098	4,269	16,475	37,844	16,852	11,623	35	5,982	58,492	2,919	6,646	10,719
Vascular diseases	39,753	4,346	7,815	16,333	7,560	3,680	19	3,900	23,933	1,792	2,873	6,218
Acute respiratory diseases	16,053	1,958	2,264	5,118	3,101	3,610	2	1,954	8,508	762	1,846	2,527
Other respiratory diseases with asthma and symptoms	55,187	6,009	9,559	23,157	11,508	4,927	27	5,177	32,968	2,356	4,092	9,167
Diseases of the digestive system and symptoms	94,871	17,970	20,498	34,781	14,344	7,228	50	11,420	53,829	4,545	6,124	16,430
Diseases of the genitourinary system and symptoms	47,074	6,183	6,704	17,211	10,537	6,397	42	4,945	29,875	1,694	3,532	5,607
Diseases of skin and cellular tissue	20,846	5,667	4,376	6,771	2,680	1,345	7	3,339	11,014	977	1,191	3,683
Diseases of bones and organs of movement and symptoms	39,896	10,368	8,165	14,310	4,977	2,052	24	4,100	25,922	1,610	1,799	5,543
Accidents, poisonings and violence	46,227	16,817	8,246	12,458	4,911	3,756	39	8,534	21,455	2,594	2,801	9,123
All others	72,564	10,327	11,910	27,124	14,285	8,881	37	7,913	43,883	2,757	5,411	10,258
Unavailable ²	7,796	1,673	1,404	2,801	1,276	631	11	1,140	4,084	395	497	1,258

¹ Patient treatment file. This table, as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.

² This column/line includes all records for which required data is unavailable.

Under 25
25-34 . . .
35-44 . . .
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TABLE 29

INPATIENT CARE

**VA Medical Centers—Hospital Care Component: Patients Discharged, Compensation and Pension Status,
Type of Patient, Age¹—Fiscal Year 1980**

Type of Patient and Age Group	Total All Patients	Service-Connected Veterans				Non-Service-Connected			Non Veterans³	Un-available⁴
		Total	10% or more	Less Than 10%	NSC With SC²	Total	Pension	Other		
All patients	933,636	263,438	100,850	3,606	158,982	657,111	191,345	465,766	5,891	7,196
Under 25	24,780	5,765	4,201	94	1,470	16,728	710	16,018	2,124	163
25-34	110,858	38,747	24,439	488	13,820	69,937	5,356	64,581	1,380	794
35-44	75,905	22,003	12,285	257	9,461	52,606	4,423	48,183	737	559
45-54	179,251	43,826	17,950	574	25,302	133,495	32,415	101,080	631	1,299
55-64	320,992	97,253	28,427	1,399	67,427	220,627	71,669	148,958	518	2,594
65 and over	221,343	55,718	13,490	793	41,435	163,391	76,726	86,665	453	1,781
Unavailable⁴	507	126	58	1	67	327	46	281	48	6
Tuberculosis	3,599	692	222	14	456	2,901	876	2,025	5	1
Under 25	25	2	2	0	0	22	1	21	1	0
25-34	182	27	11	0	16	155	7	148	0	0
35-44	272	39	15	1	23	232	34	198	1	0
45-54	956	128	51	4	73	827	166	661	1	0
55-64	1,380	314	93	3	218	1,064	364	700	1	1
65 and over	783	182	50	6	126	600	304	296	1	0
Unavailable⁴	1	0	0	0	0	1	0	1	0	0
Psychotic	75,851	36,255	30,446	367	5,442	38,733	10,560	28,173	840	23
Under 25	6,180	2,590	2,351	26	213	3,023	149	2,874	561	6
25-34	26,020	14,811	13,196	121	1,494	10,986	1,519	9,467	216	7
35-44	11,382	5,590	4,854	50	686	5,763	854	4,909	25	4
45-54	13,433	5,387	4,419	78	890	8,028	3,222	4,806	18	0
55-64	12,898	5,950	4,422	65	1,463	6,934	2,964	3,970	11	3
65 and over	5,889	1,909	1,191	27	691	3,973	1,845	2,128	4	3
Unavailable⁴	49	18	13	0	5	26	7	19	5	0
Other Psychiatric	136,016	30,749	11,516	465	18,768	104,604	18,857	85,747	636	27
Under 25	5,199	718	409	14	295	4,187	108	4,079	293	1
25-34	31,575	7,466	3,294	111	4,061	23,943	1,107	22,836	162	4
35-44	21,287	3,936	1,553	49	2,334	17,263	864	16,399	82	6
45-54	34,261	6,541	2,244	100	4,197	27,664	5,264	22,400	49	7
55-64	32,862	9,505	3,191	145	6,169	23,320	7,442	15,878	30	7
65 and over	10,763	2,569	816	46	1,707	8,173	4,067	4,106	19	2
Unavailable⁴	69	14	9	0	5	54	5	49	1	0
Neurological	58,946	16,542	6,606	219	9,717	41,736	13,140	28,596	638	30
Under 25	1,378	352	267	2	83	741	36	705	282	3
25-34	5,752	2,077	1,349	22	706	3,514	497	3,017	159	2
35-44	4,456	1,463	921	10	532	2,907	368	2,539	82	4
45-54	11,141	2,874	1,340	37	1,497	8,210	2,318	5,892	52	5
55-64	21,020	6,140	1,823	92	4,225	14,838	4,803	10,035	31	11
65 and over	15,159	3,626	902	56	2,668	11,497	5,116	6,381	31	5
Unavailable⁴	40	10	4	0	6	29	2	27	1	0
General medical and surgical	651,428	178,950	51,953	2,539	124,458	468,466	147,769	320,697	3,767	245
Under 25	11,823	2,096	1,168	52	876	8,731	416	8,315	985	11
25-34	46,443	14,325	6,563	234	7,528	31,247	2,223	29,024	841	30
35-44	37,896	10,953	4,928	147	5,878	26,375	2,296	24,079	547	21
45-54	118,056	28,860	9,881	353	18,626	88,646	21,428	67,218	511	39
55-64	250,031	75,251	18,870	1,094	55,287	174,260	56,037	118,223	444	76
65 and over	186,842	47,383	10,513	658	36,212	138,996	65,339	73,657	398	65
Unavailable⁴	337	82	30	1	51	211	30	181	41	3
Unavailable⁴	7,796	250	107	2	141	671	143	528	5	6,870
Under 25	175	7	4	0	3	24	0	24	2	142
25-34	886	41	26	0	15	92	3	89	2	751
35-44	612	22	14	0	8	66	7	59	0	524
45-54	1,404	36	15	2	19	120	17	103	0	1,248
55-64	2,801	93	28	0	65	211	59	152	1	2,496
65 and over	1,907	49	18	0	31	152	55	97	0	1,706
Unavailable⁴	11	2	2	0	0	6	2	4	0	3

¹Patient treatment file. This table as well as all others in this hospital discharge series excludes approximately 232,161 one-day dialysis discharges.

²Veterans with compensable service-connected disabilities but treated for non-service connected disability only.

³This group includes all patients other than veterans, such as active military, humanitarian emergencies, reimbursable cases, allied beneficiaries, donors, etc. If a veteran is admitted as an Office of Workers Compensation Program case, he is coded as a non-veteran.

⁴This column/line includes all records for which required data is unavailable.

VA Medical Centers-Hospital Care Component: Patients Discharged, Compensation and Pension Status,
Type of Patient, Sex¹—Fiscal Year 1980

Compensation and Pension Status	All Patients							Female ⁴							Male ⁴						
	Total	Tuber- culous	Psy- chotic	Other Psychi- atric	Neuro- logical	GM&S	Un- avail- able ²	Total	Tuber- culous	Psy- chotic	Other Psychi- atric	Neuro- logical	GM&S	Un- avail- able ²	Total	Tuber- culous	Psy- chotic	Other Psychi- atric	Neuro- logical	GM&S	Un- avail- able ²
VA hospitals—total . . .	933,636	3,599	75,851	136,016	58,946	651,428	7,796	16,013	14	2,043	1,676	1,125	11,027	128	917,527	3,585	73,799	134,329	57,812	640,335	7,667
Service-connected	104,456	236	30,813	11,981	6,825	54,492	109	2,158	3	729	273	132	1,021	0	102,283	233	30,080	11,705	6,693	53,463	109
10% or more	100,850	222	30,446	11,516	6,606	51,953	107	2,083	3	719	266	131	964	0	98,752	219	29,723	11,247	6,475	50,981	107
Less than 10%	3,606	14	367	465	219	2,539	2	75	0	10	7	1	57	0	3,531	14	357	458	218	2,482	2
Non-service connected	158,982	456	5,442	18,768	9,717	124,458	141	2,219	2	98	186	166	1,764	3	156,749	454	5,343	18,581	9,549	122,684	138
with SC	191,345	876	10,560	18,857	13,140	147,769	143	2,767	2	366	202	160	2,032	5	188,566	874	10,194	18,655	12,978	145,727	138
NSC with pension	465,766	2,025	28,173	85,747	28,596	320,697	528	7,621	6	770	959	512	5,361	13	458,094	2,019	27,400	84,781	28,080	315,299	515
NSC no claim pending	5,891	5	840	636	638	3,767	5	1,119	1	80	56	151	831	0	4,769	4	759	580	486	2,935	5
Non-veterans ³	7,196	1	23	27	30	245	6,870	129	0	0	0	4	18	107	7,066	1	23	27	26	227	6,762
Unavailable ²																					

¹ Patient treatment file. This table as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.

² This column/line includes all records for which required data is unavailable.

³ This group includes all patients other than veterans, such as active military, humanitarian emergencies, reim-

bursable cases, allied beneficiaries, donors, etc. If a veteran is admitted as an office of workers compensation program case, he is coded as a non-veteran.

⁴ The total female and male discharges will not equal the total discharges since 96 records did not have sex data available.

Total
United States

Alabama
Alaska
Arizona

Arkansas

California

Colorado

Connecticut

Delaware

District of Columbia

Florida

Georgia

Hawaii

Idaho

Illinois

Indiana

Iowa

Kansas

Kentucky

Louisiana

Maine

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Missouri

Montana

Nebraska

Nevada

New Hampshire

New Jersey

New Mexico

New York

North Carolina

North Dakota

Ohio

Oklahoma

Oregon

Pennsylvania

Rhode Island

South Carolina

South Dakota

Tennessee

Texas

Utah

Vermont

Virginia

Washington

West Virginia

Wisconsin

Wyoming

Other

Canada

Guam

Philippines

Puerto Rico

Other

¹ Patient
excluded

**VA Medical Centers—Hospital Care Component: Patients Discharged, Type of Patient, Percent Hospitalized in
Reported State of Residence^{1 3}—Fiscal Year 1980**

Reported State of Residence	All Discharges			Type of Patient											
	Total ²	Hospitalized in Same State		General Medical And Surgical		Tuberculous		Psychotic		Other Psychiatric		Neurological		Unavailable	
		Number	Percent	Total	Percent Hospital- ized In Same State	Total	Percent Hospital- ized In Same State	Total	Percent Hospital- ized In Same State	Total	Percent Hospital- ized In Same State	Total	Percent Hospital- ized In Same State	Total	Percent Hospital- ized In Same State
Total	933,416	819,070	87.7	651,289	88.1	3,598	89.3	75,834	88.1	135,978	86.5	58,930	86.0	7,787	91.6
United States	922,049	808,084	87.6	643,909	88.0	3,562	89.2	73,214	87.7	135,137	86.4	58,450	85.9	7,777	91.6
Alabama	21,500	19,445	90.4	13,583	91.3	96	90.6	2,254	90.6	4,310	88.8	1,206	86.7	51	86.3
Alaska	178	0.0	110	0.0	1	0.0	18	0.0	27	0.0	22	0.0	0.0
Arizona	18,631	17,995	96.6	13,953	96.7	47	97.9	1,151	95.1	2,320	95.9	1,130	97.7	30	96.7
Arkansas	20,249	16,896	83.4	15,401	83.2	88	81.8	732	84.8	2,665	89.0	1,292	77.9	71	11.3
California	77,691	75,771	97.5	56,240	97.8	203	99.0	6,752	96.4	9,377	96.6	5,052	97.8	67	95.5
Colorado	10,526	9,677	91.9	7,031	93.7	13	84.6	920	91.4	1,954	87.3	549	86.7	59	98.3
Connecticut	9,064	8,481	93.6	6,652	96.2	26	100.0	650	74.6	1,031	87.4	693	94.7	12	91.7
Delaware	1,993	1,681	84.3	1,482	95.9	5	80.0	125	26.4	248	41.5	117	88.9	16	100.0
District of Columbia	4,456	4,257	95.5	3,196	97.4	34	100.0	329	82.4	578	92.9	307	94.1	12	100.0
Florida	49,588	47,081	94.9	37,581	96.3	237	94.9	3,601	86.5	5,016	90.7	3,128	95.1	25	44.0
Georgia	24,464	19,070	78.0	17,114	78.2	153	79.7	1,792	70.1	3,837	80.4	1,496	77.7	72	90.3
Hawaii	50	0.0	27	0.0	0.0	6	0.0	10	0.0	7	0.0	0.0
Idaho	4,962	2,923	58.9	3,677	59.0	9	44.4	218	65.1	732	56.6	324	59.3	2	50.0
Illinois	40,562	32,921	81.2	26,888	78.8	330	90.3	3,617	85.1	6,858	90.0	2,571	76.5	298	75.8
Indiana	16,317	12,229	74.9	10,931	73.9	63	57.1	1,539	77.8	2,664	77.6	1,042	76.4	78	75.6
Iowa	14,724	12,199	82.9	11,246	83.0	56	83.9	899	88.9	1,411	80.7	1,105	79.5	7	0.0
Kansas	12,907	7,485	58.0	9,085	57.8	29	69.0	783	66.0	2,170	55.7	832	59.0	8	12.5
Kentucky	19,788	15,560	78.6	13,941	76.8	69	63.8	1,228	79.5	2,034	82.3	1,291	73.9	1,225	98.4
Louisiana	19,493	17,954	92.1	14,704	95.5	141	95.7	1,171	66.5	2,347	83.4	1,120	92.0	10	80.0
Maine	5,491	5,056	92.1	2,937	89.1	5	100.0	600	96.3	1,669	98.3	269	77.3	11	81.8
Maryland	12,916	8,684	67.2	8,754	67.0	51	60.8	902	70.1	2,331	68.0	796	63.8	82	80.5
Massachusetts	20,532	18,217	88.7	13,014	86.2	32	68.8	2,259	93.9	4,037	94.9	1,133	85.1	57	98.2
Michigan	25,538	24,195	94.7	16,435	95.6	71	95.8	2,960	95.0	4,344	94.4	1,447	88.5	281	79.0
Minnesota	17,091	14,279	83.5	12,096	82.0	27	59.3	1,374	91.0	2,049	86.8	1,231	82.7	314	94.9
Mississippi	16,097	12,702	78.9	12,018	79.6	71	78.9	1,046	79.3	1,834	81.7	1,022	72.5	106	8.5
Missouri	27,779	22,966	82.7	21,024	84.9	80	82.5	1,515	83.1	3,164	66.9	1,839	84.0	157	86.6
Montana	6,336	4,465	70.5	4,658	73.6	16	87.5	243	36.6	1,052	65.7	359	67.7	8	25.0
Nebraska	11,232	9,719	86.5	7,811	89.2	23	91.3	649	81.7	2,058	79.3	684	82.7	7	0.0
Nevada	4,843	3,047	62.9	3,764	64.0	28	82.1	210	50.5	518	57.5	318	65.7	5	60.0
New Hampshire	5,688	3,187	56.0	4,459	57.6	14	50.0	164	17.7	695	59.7	349	47.3	7	28.6
New Jersey	15,654	12,871	82.2	8,936	80.0	65	84.6	2,265	86.4	3,290	85.8	891	78.5	207	93.2
New Mexico	6,092	5,445	89.4	4,637	92.3	26	100.0	412	78.4	586	74.2	431	88.2	0.0
New York	58,825	57,820	98.3	39,418	98.7	238	99.2	5,456	96.3	9,508	97.9	3,400	97.9	805	99.0
North Carolina	24,220	22,667	93.6	16,720	94.8	100	95.0	1,849	94.0	3,894	91.3	1,648	85.8	9	88.9
North Dakota	2,784	2,089	75.0	1,912	83.4	9	66.7	166	33.7	504	56.5	176	77.8	17	64.7
Ohio	26,360	22,415	85.0	15,395	81.6	83	80.7	3,338	92.2	4,351	88.2	1,597	81.9	1,596	97.9
Oklahoma	15,246	13,243	86.9	11,217	89.9	79	91.1	682	69.9	2,294	76.2	969	88.3	5	80.0
Oregon	14,040	12,938	92.2	10,318	91.9	53	100.0	794	94.2	1,794	92.1	1,059	92.5	22	100.0
Pennsylvania	31,728	29,377	92.6	20,692	92.4	90	90.0	3,765	94.3	4,994	93.5	2,008	89.8	179	90.5
Rhode Island	3,583	3,133	87.4	2,645	91.6	9	100.0	281	71.9	375	69.3	267	87.6	6	100.0
South Carolina	18,404	13,373	72.7	13,812	77.0	84	85.7	1,048	63.4	2,271	50.3	1,164	72.5	25	60.0
South Dakota	7,949	6,958	87.5	5,013	85.4	14	85.7	426	90.8	2,003	94.5	478	80.1	15	26.7
Tennessee	22,183	21,332	96.2	15,469	96.8	136	97.8	1,654	95.0	3,010	93.5	1,585	95.8	329	98.5
Texas	71,668	67,365	94.0	52,343	94.2	329	96.7	5,224	95.1	9,268	92.6	4,296	92.8	208	95.7
Utah	6,333	6,130	96.8	4,332	97.1	6	100.0	447	91.5	1,134	97.8	412	96.4	2	100.0
Vermont	2,581	2,361	91.5	2,069	93.5	4	100.0	94	75.5	257	81.7	156	90.4	1	100.0
Virginia	22,241	18,339	82.5	14,219	82.0	79	91.1	2,065	88.5	4,133	79.4	1,714	86.5	31	74.2
Washington	15,544	12,104	77.9	10,941	76.7	41	85.4	1,112	88.2	2,334	79.7	1,107	75.2	9	33.3
West Virginia	13,488	11,302	83.8	9,720	88.6	39	84.6	689	58.6	2,253	73.3	745	79.5	42	23.8
Wisconsin	18,918	16,144	85.3	12,015	82.4	56	87.5	1,554	89.8	2,715	89.0	1,392	88.0	1,186	97.6
Wyoming	3,522	2,536	72.0	2,274	66.6	4	50.0	186	85.5	829	84.1	224	71.9	5	60.0
Outside United States	11,367	10,986	96.6	7,380	96.1	36	97.2	2,620	98.6	841	95.8	480	95.2	10	90.0
Canal Zone	1	0.0	0.0	0.0	1	0.0	0.0	0.0	0.0
Guam	2	0.0	1	0.0	0.0	1	0.0	0.0	0.0	0.0
Philippines, Republic of	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Puerto Rico	11,023	10,986	99.7	7,112	99.8	35	100.0	2,594	99.6	814	99.0	459	99.6	9	100.0
Others	341	0.0	267	0.0	1	0.0	24	0.0	27	0.0	21	0.0	1	0.0

¹ Patient treatment file. This table, as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.

² This column includes all records for which required data is unavailable.

³ This table excludes 220 cases for which residence data is unavailable.

TABLE 32

TABLE 32

Anemia, iron deficiency (280)	1,322	16.8	12.7	80	163	176	365	231	154	122	18	7	2	1	3	22,224
Pernicious anemia (281.0)	196	17.0	13.7	13	22	26	46	36	22	26	4	1	3,333
V. Mental disorders																	
Alcoholic psychosis (291)	2,738	14.6	6.8	565	521	408	511	279	191	177	43	23	8	4	4	2	39,829
Psychosis associated with drug dependence (294.34)	1,190	14.3	8.4	155	206	220	259	154	83	82	18	9	2	1	1	16,991
Psychosis associated with organic brain syndrome, excluding alcohol and drug dependence (290, 292-294.30, 294.39-294.9)	211,867	52.7	16.3	17,061	23,080	29,411	32,652	20,539	24,897	37,800	10,775	8,857	2,344	1,057	1,614	1,746	11,164,637
Psychosis not attributed to physical conditions (295-299)	4,539	69.9	13.3	341	563	717	858	495	376	569	186	176	64	40	66	87	317,061
Alcoholism (303)	194	27.3	15.3	22	20	20	34	28	18	34	8	8	1	1	5,291
Non-psychotic organic brain syndrome associated with alcoholism (309.13)	4,481	225.2	29.5	152	200	345	684	485	454	759	312	351	151	88	161	338	1,009,057
Drug dependence (304)	66,637	85.0	22.4	4,705	4,792	6,714	9,583	7,218	7,720	12,623	4,956	4,631	1,304	564	888	924	5,663,606
Non-psychotic organic brain syndrome associated with drug dependence (309.14)	89,984	22.5	12.8	7,097	12,993	15,567	13,754	7,331	11,287	16,894	2,994	1,540	257	108	105	44	2,020,741
Non-psychotic organic brain syndrome associated with other physical conditions (309.0, 309.2-309.9)	1,109	127.4	26.9	55	101	109	134	99	105	185	73	90	41	36	43	38	141,276
Mental retardation (310-315)	9,907	26.2	12.1	1,343	1,042	1,520	1,791	1,049	1,070	1,177	356	385	94	27	47	6	259,995
All other non-psychotic mental disorders (Y00.1, Y03.4, 300-302, 305-307, 316, 318, 793.0)	97	78.1	19.3	4	11	12	13	14	13	19	4	1	1	1	4	7,574
VI. Diseases of nervous system and sense organs																	
Inflammatory diseases of central nervous system (320-324)	6,388	141.0	27.2	235	349	496	990	728	692	1,094	444	583	197	102	207	269	900,553
Epilepsy (345)	129	210.7	18.1	7	10	24	17	15	13	14	7	8	6	1	3	4	27,186
Myotrophic lateral sclerosis (348.0)	28,402	28.6	14.2	3,100	2,999	3,887	4,794	3,077	3,149	4,432	1,435	1,084	229	90	92	32	812,297
Paraplegia, cerebral or spinal (344.2, 349.3)	44,403	28.8	8.0	4,086	6,824	11,440	9,482	3,914	2,643	3,047	1,057	1,089	318	125	190	186	1,280,690
Quadriplegia, cerebral or spinal (344.3, 349.4)	475	43.6	18.2	29	45	49	84	67	59	73	28	25	8	1	5	2	20,729
Other diseases of central nervous system, including hereditary and familial disease of nervous system (330-333, 340-344.1, 344.9, 346-347, 348.1-349.2, 349.5-349.9)	3,022	16.7	8.8	304	480	645	794	336	184	186	32	36	6	7	8	4	50,431
Diseases of nerves and peripheral ganglia (350-358)	411	27.0	13.0	38	47	60	85	53	48	44	15	9	7	3	2	11,084
Inflammatory diseases of the eye and other diseases and conditions of the eye, except blindness (360-369, 370-378)	1,865	54.5	21.3	105	185	186	270	208	168	306	141	188	59	25	17	7	101,558
Blindness (379)	1,560	101.5	24.3	87	142	146	236	135	133	229	122	182	62	16	38	31	158,297
Diseases of ear and mastoid process (380-389)	8,900	65.5	17.0	492	716	1,044	1,859	1,222	924	1,310	461	441	145	56	103	126	583,120
Diseases of the circulatory system	5,624	15.4	7.8	506	1,156	1,215	1,194	573	426	373	74	68	16	11	10	2	86,834
Chronic rheumatic heart disease (393-398)	17,835	11.3	6.4	1,950	2,856	6,822	4,178	1,051	525	300	75	50	8	4	4	12	201,608
Hypertensive heart disease, exclusive of ischemic heart disease (400.1, 402, 404)	889	35.1	17.5	58	107	119	138	65	59	155	97	85	4	1	1	31,221
Hypertensive disease without heart involvement (400.0, 400.2, 400.3, 400.9, 401, 403)	3,822	9.4	5.1	517	1,090	1,154	644	204	117	71	12	5	3	1	2	2	35,808
Acute myocardial infarction (410)	144,839	23.0	11.3	9,453	17,925	27,205	38,274	20,406	12,513	11,998	2,957	2,479	653	299	378	292	3,334,866
Chronic ischemic heart disease (412)	3,678	16.0	10.5	206	601	713	919	529	327	296	50	21	9	1	2	3	58,700
Other ischemic heart disease, with or without hypertensive disease (411, 413, 414)	3,641	16.1	10.2	140	425	900	1,121	443	288	234	43	29	9	5	1	3	58,782
	10,549	13.1	7.4	1,488	1,822	2,307	2,495	1,083	609	517	109	72	16	14	12	5	138,191
	8,230	19.7	13.0	619	502	969	2,862	1,836	782	500	71	39	11	6	15	18	161,874
	39,936	19.4	10.2	2,057	5,768	8,683	11,258	5,596	3,104	2,385	434	339	113	41	81	74	776,359
	7,844	9.5	7.4	493	1,425	2,339	2,354	729	286	181	20	8	4	1	2	1	74,612

See footnotes at end of table.

INPATIENT CARE

TABLE 32-Continued

VA Medical Centers—Hospital Care Component: Patients Discharged, Diagnostic Grouping, Average and Median Length of Stay, Length of Stay Distribution¹—Fiscal Year 1980

Principal Diagnoses ²	Total Patients	Average Length of Stay	Median Length of Stay ³	Length of Stay Distribution (Days)												731 Plus	Un-known ⁵	Total Days ⁶
				1 Day	2-3	4-7	8-14	15-21	22-30	31-60	61-90	91-180	181-270	271-365	366-730			
Other forms of heart disease (391, 392.0, 420-429)	23,110	18.2	9.7	1,777	3,143	5,158	6,223	2,826	1,731	1,589	331	194	49	21	34	34	420,607	
Cerebral hemorrhage (431)	852	30.5	15.6	107	69	104	136	118	74	142	42	46	9	5	5	5	25,999	
Cerebral thrombosis (433)	2,433	53.3	21.0	70	109	241	483	367	302	442	160	173	32	16	22	16	129,656	
Cerebral embolism (434)	94	63.0	20.6	5	1	7	22	15	12	14	9	5	3	1	1	1	5,921	
Generalized ischemic cerebrovascular disease (437)	1,207	56.6	16.2	41	86	150	294	195	145	157	59	32	14	7	14	13	68,267	
All other cerebrovascular disease (430, 432, 435, 436, 438)	14,002	44.8	17.1	510	989	1,740	3,153	2,041	1,532	2,072	758	750	182	91	103	80	626,707	
Arteriosclerosis (440)	3,454	42.5	18.6	112	311	328	683	578	467	543	156	154	53	30	22	16	146,913	
All other diseases of arteries, arterioles and capillaries (441-448)	12,253	32.5	17.6	661	1,101	1,269	2,365	2,018	1,633	1,964	517	486	114	52	50	23	397,695	
Varicose veins lower extremities (454)	2,109	33.1	13.5	146	212	315	495	286	238	266	79	51	12	3	5	1	69,726	
Hemorrhoids (455)	3,859	9.1	7.3	548	637	918	1,096	356	187	103	10	2	1	1	2	1	35,267	
All other diseases of veins and lymphatics, and other diseases of circulatory system (390, 392.9, 450-453, 456-458)	7,588	18.4	12.7	473	724	1,064	2,315	1,390	796	593	109	78	23	11	8	4	139,590	
VIII. Diseases of the respiratory system	59,536	22.3	10.0	2,861	8,277	13,882	16,402	7,071	4,463	4,271	977	759	173	85	148	163	1,327,262	
Acute respiratory infections including influenza (460-466, 470-474)	3,224	9.5	6.8	226	745	941	786	264	133	104	13	5	4	1	1	1	30,614	
Pneumonia (480-486)	11,837	38.7	12.3	451	868	2,425	3,605	1,755	1,044	1,004	245	207	40	32	58	103	458,423	
Bronchitis, unqualified and chronic (490-491)	5,941	16.9	9.9	305	709	1,479	1,797	691	385	385	88	61	17	5	11	7	100,326	
Emphysema (492)	14,522	23.7	11.6	575	1,491	3,042	4,282	1,951	1,264	1,204	302	249	63	32	43	23	343,971	
Asthma (493)	3,012	10.2	7.4	181	517	956	899	212	120	101	12	9	2	2	1	1	30,712	
All other diseases of upper respiratory tract and respiratory system (500-508, 510-519)	21,000	17.3	8.6	1,123	3,947	5,039	5,033	2,198	1,517	1,473	317	228	47	13	35	29	363,216	
IX. Diseases of the digestive system	84,962	16.5	10.0	6,728	10,806	18,350	23,349	10,431	6,568	6,435	1,292	710	104	49	80	58	1,403,575	
Diseases of oral cavity, salivary glands, and jaws (520-529)	5,271	7.5	3.7	1,435	1,316	1,251	769	221	109	126	26	13	1	1	2	2	39,311	
Ulcers, digestive system (stomach, duodenum, peptic, gastrojejunal) (531-534)	8,708	14.8	10.4	776	1,027	1,714	2,500	1,164	744	615	100	50	5	5	4	4	128,456	
All other diseases esophagus, stomach, and duodenum (except ulcers) (530, 535-537)	7,981	12.7	7.4	1,117	1,539	1,558	1,853	807	471	461	105	44	12	4	7	3	101,583	
Hernia of abdominal cavity (550-553)	19,114	13.4	9.3	667	1,793	5,914	6,838	2,160	948	610	93	49	11	3	18	9	255,545	
Other diseases of intestine and peritoneum (540-543, 560-569)	20,501	17.7	9.1	1,912	3,154	4,443	5,286	2,380	1,498	1,345	228	164	29	11	20	31	363,496	
Alcoholic cirrhosis of liver (571.0)	9,394	25.2	16.8	299	700	1,162	2,165	1,472	1,247	1,691	385	208	25	18	16	6	236,985	
Other diseases of liver, gallbladder and pancreas (570, 571.8, 571.9, 572-577)	13,993	19.9	13.2	522	1,277	2,308	3,938	2,227	1,551	1,587	355	182	22	8	13	3	278,199	
X. Diseases of the genitourinary system	42,627	15.1	8.8	4,433	7,338	8,244	11,079	5,052	2,865	2,618	542	297	62	24	40	28	5	645,326
Nephritis and nephrosis (580-584)	4,751	19.5	9.3	579	839	785	927	512	386	467	139	84	15	7	6	5	92,547	
Other diseases of urinary system (590-599)	16,953	16.9	9.2	1,653	2,854	3,258	4,332	2,020	1,186	1,152	262	149	31	13	26	15	286,062	
Diseases of the prostate (600-602)	13,661	14.6	10.5	1,339	1,839	2,216	4,188	1,981	1,065	838	117	50	12	4	7	4	198,894	
Other diseases of male genital organs (603-607)	5,707	10.1	6.4	568	1,362	1,590	1,364	450	194	138	21	12	4	1	1	4	57,362	
Diseases of the breast, gynecological conditions (610-616, 620-629)	1,555	6.7	4.4	294	444	395	268	89	34	23	3	2	1	1	1	2	10,441	

XI. Deliveries and complications of pregnancy, childbirth and puerperium

U.S. Diseases of the Musculoskeletal System	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014	1015	1016	1017	1018	1019	1020	1021	1022	1023	1024	1025	1026	1027	1028	1029	1030	1031	1032	1033	1034	1035	1036	1037	1038	1039	1040	1041	1042	1043	1044	1045	1046	1047	1048	1049	1050	1051	1052	1053	1054	1055	1056	1057	1058	1059	1060	1061	1062	1063	1064	1065	1066	1067	1068	1069	1070	1071	1072	1073	1074	1075	1076	1077	1078	1079	1080	1081	1082	1083	1084	1085	1086	1087	1088	1089	1090	1091	1092	1093	1094	1095	1096	1097	1098	1099	1100	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	1114	1115	1116	1117	1118	1119	1120	1121	1122	1123	1124	1125	1126	1127	1128	1129	1130	1131	1132	1133	1134	1135	1136	1137	1138	1139	1140	1141	1142	1143	1144	1145	1146	1147	1148	1149	1150	1151	1152	1153	1154	1155	1156	1157	1158	1159	1160	1161	1162	1163	1164	1165	1166	1167	1168	1169	1170	1171	1172	1173	1174	1175	1176	1177	1178	1179	1180	1181	1182	1183	1184	1185	1186	1187	1188	1189	1190	1191	1192	1193	1194	1195	1196	1197	1198	1199	1200	1201	1202	1203	1204	1205	1206	1207	1208	1209	1210	1211	1212	1213	1214	1215	1216	1217	1218	1219	1220	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VA Medical Centers—Hospital Care Component: Patients Discharged, Diagnostic Grouping, Average and Median Length of Stay, Length of Stay Distribution¹—Fiscal Year 1980

Principal Diagnoses ²	Total Patients	Average Length of Stay	Median Length of Stay ³	Length of Stay Distribution (Days)												731 Plus	Un- known ⁵	Total Days ⁶
				1 Day	2-3	4-7	8-14	15-21	22-30	31-60	61-90	91-180	181-270	271-365	366-730			
Intracranial injury — without skull fracture (850-854)	2,280	25.0	6.5	533	413	312	299	209	133	214	61	69	15	8	5	9	56,989	
Intracranial injury — without skull fracture, late effects (850-854) ⁷	816	65.0	13.5	77	92	125	146	64	54	97	52	56	21	4	14	14	53,048	
Internal injury of chest, abdomen and pelvis (860-869)	550	14.6	9.1	41	60	150	159	51	29	45	11	2	1	1	8,013	
Internal injury of chest, abdomen and pelvis, late effects (860-869) ⁷	63	26.3	11.8	5	10	9	14	6	2	10	3	3	1	1,657	
Traumatic amputation of arm and hand — complete/partial (887)	8	52.8	46.0	1	1	4	2	422	
Traumatic amputation of arm and hand — complete/partial, late effects (887) ⁷	8	5.4	4.0	1	3	1	2	1	43	
Traumatic amputation of foot and leg(s) — complete/partial (896-897)	40	77.2	55.0	1	3	2	2	4	10	3	12	2	1	3,088	
Traumatic amputation of foot and leg(s) — complete/partial, late effects (896-897) ⁷	25	67.3	20.9	2	4	2	2	3	7	2	2	1	1,682	
Burns (940-949)	1,242	34.2	14.7	97	117	164	256	145	140	208	74	32	6	1	1	1	42,447	
Burns, late effects (940-949) ⁷	122	32.8	15.0	7	18	12	24	21	12	13	4	8	1	1	1	4,003	
Injury to nerves and spinal cord (950-959)	314	59.6	9.2	30	53	65	54	26	9	36	9	20	4	3	2	3	18,722	
Injury to nerves and spinal cord, late effects (950-959) ⁷	422	42.6	12.8	25	52	74	87	50	28	51	17	24	9	3	2	17,991	
Adverse effect of medicinal agents and other complications of surgical and medical care (960-979, 997-999)	10,607	15.7	8.1	1,112	1,913	2,262	2,297	1,084	735	824	202	137	10	11	12	7	166,567	
All other accidents, poisonings and violence (840-848, 870-879, 880-886, 890-895, 900-907, 910-918, 920-929, 930-939, 980-996)	12,368	14.3	4.8	3,106	2,587	2,542	1,997	831	534	497	138	86	18	9	10	13	176,633	
All other accidents, poisonings and violence, late effects (870-879, 880-886, 890-895, 900-907, 910-918, 920-929) ⁷	882	16.5	6.7	124	185	197	191	71	44	50	9	7	2	1	1	14,595	
Unavailable ⁵	7,796	26.2	11.2	725	939	1,443	1,743	927	652	843	236	175	46	19	24	21	204,212	

¹ Patient treatment file. This table as well as all others in this hospital discharge series, excludes approximately 232,161 one-day dialysis discharges.

² The diagnostic categories and selected diagnoses included in this table are based on the "International Classification of Diseases adapted for Indexing of Hospital Records", USPHS Publication No. 1693. The numbers following the diagnosis are the identifying code numbers of this diagnostic classification. Category XV, "Certain Causes of Prenatal Morbidity and Mortality", in which no cases occurred, is not included in this table.

³ One-half of the discharges in the given category have length of stay greater than the median; the other half, less than the median.

⁴ No median computed since more than one-half of the cases had one day of stay.

⁵ This column/line includes records for which required data is unavailable.

⁶ In excess of 731 days and over.

⁷ All late effect codes are differentiated from other codes by being uniformly .9 in the fourth digit.

⁸ This column excludes those cases for which the number of days is unavailable.

TABLE 33

INPATIENT CARE

Surgical Procedures Performed in VA Medical Centers-Hospital Care Component¹-Fiscal Year 1980

Operations and ICDA Codes	All Hospitals	Affiliated Hospitals	Non-Affiliated Hospitals
Surgical procedures (01-98) ²	256,619	238,904	17,715
Neurosurgery (01-05)	7,838	7,593	245
Incision and excision of skull and intracranial structure (01)	1,675	1,670	5
Other operations on brain and cerebral meninges (02)	886	879	7
Operations on spinal cord structures (03)	1,292	1,286	6
Operations on peripheral nerves (04)	3,362	3,227	135
Operations on sympathetic nerves or ganglia (05)	623	531	92
Ophthalmology (06-14)	19,607	18,999	608
Operations on lacrimal apparatus (06)	150	147	3
Operations on eyelids (07)	3,064	2,903	161
Operations on conjunctiva (08)	719	680	39
Operations on orbit (09)	353	345	8
Operations on eyeball and muscles (10)	619	610	9
Operations on cornea and sclera (11)	605	596	9
Operations on iris and ciliary body (12)	1,120	1,101	19
Operations on choroid, anterior chamber and retina (13)	1,723	1,708	15
Operations on lens and vitreous (14)	11,254	10,909	345
Otorhinolaryngology (16-21)	15,698	15,150	548
Operations on external ear (16)	1,325	1,202	123
Operations on middle ear (17)	2,894	2,874	20
Operations on inner ear (18)	66	64	2
Operations on nose and accessory sinuses (19)	6,740	6,438	302
Operations on larynx and trachea (20)	3,775	3,711	64
Operations on pharynx, tonsils and adenoids (21)	898	861	37
Operations on thyroid, parathyroid, thymus, and adrenals (22-23)	922	870	52
Operations on thyroid and parathyroid (22)	852	803	49
Operations on thymus and adrenals (23)	70	67	3
Vascular and cardiac surgery (24-30)	33,730	32,744	986
Operations on peripheral blood vessels (24)	9,614	9,120	494
Operations on lymphatic system (25)	2,832	2,751	81
Operations on blood vessels of head, neck and base of brain (26)	2,766	2,701	65
Operations on intra-abdominal blood vessels (27)	4,191	3,984	207
Operations on intrathoracic vessels (28)	381	366	15
Operations on heart and pericardium (29)	4,733	4,733
Other heart procedures (30)	9,213	9,089	124
Thoracic surgery (32-35)	6,689	6,252	437
Operations on chest wall, pleura, and mediastinum (32)	2,559	2,405	154
Operations on bronchus (33)	52	51	1
Operations on lung (34)	2,394	2,242	152
Operations on esophagus (35)	1,684	1,554	130
Abdominal surgery (38-48)	50,484	45,858	4,626
Repair of Hernia (38)	17,912	15,723	2,189
Incision and excision of abdominal wall region (39)	6,409	5,960	449
Other operations on region of abdomen and peritoneum (40)	1,988	1,856	132
Operations on appendix (41)	2,217	2,004	213
Operations on liver (42)	139	133	6
Operations on biliary tract (43)	6,159	5,632	527
Operations on pancreas (44)	512	482	30
Operations on spleen (45)	652	631	21
Operations on stomach (46)	5,922	5,499	423
Incision, excision, resection and enterostomy of intestines (47)	6,215	5,743	472
Anastomosis, repair and other operations on the intestines (48)	2,359	2,195	164
Proctological surgery (50-52)	7,399	6,324	1,075
Operations on rectum (50)	2,009	1,803	206
Operations on anus (51)	4,772	3,970	802
Operations on pilonidal sinus or cyst (52)	618	551	67

See footnotes at end of table.

**Surgical Procedures Performed in VA Medical Centers—Hospital Care Component¹—
Fiscal Year 1980**

Operations and ICDA Codes	All Hospitals	Affiliated Hospitals	Non-Affiliated Hospitals
Urological surgery (54-61)	35,977	32,997	2,980
Operations on kidney (54)	2,004	1,910	94
Operations on ureter (55)	1,821	1,735	86
Operations on urinary bladder (56)	6,413	5,908	506
Operations on urethra (57)	4,222	3,895	327
Operations on prostate and seminal vesicles (58)	12,883	11,680	1,203
Operations on scrotum and contents and spermatic cord (59)	4,014	3,669	345
Operations on epididymis and vas deferens (60)	1,244	1,048	196
Operations on penis (61)	3,376	3,152	224
Breast surgery (65)	834	749	85
Gynecological surgery (67-72)	652	567	85
Operations on ovary (67)	132	117	15
Operations on fallopian tubes (68)	38	28	10
Hysterectomy (69)	136	119	17
Other operations on uterus and supporting structures (70)	261	227	34
Operations on vagina (71)	63	57	6
Operations on vulva and perineum (72)	22	19	3
Obstetrical procedures (74-78)	11	11
Antepartum obstetrical operations (74)	2	2
Operations inducing or assisting delivery (75)
Operations inducing or assisting delivery (cont'd) (76)	1	1
Cesarean section (77)
Operations after delivery or abortion (78)	8	8
Orthopedic surgery (80-90)	40,597	38,028	2,569
Incision and excision of bones (80)	6,132	5,758	374
Repair and plastic operations on bone (81)	2,749	2,565	184
Reduction of fracture and fracture-dislocation of hip (82)	2,288	2,124	164
Reduction of fracture and fracture-dislocation of ankle and wrist (83)	1,298	1,203	95
Reduction of other fracture and fracture-dislocation (84)	2,305	2,177	128
Amputation and disarticulation of extremities (85)	6,075	5,619	456
Incision and excision of joint structures (86)	6,247	5,885	362
Other operations on joint structures (87)	7,846	7,497	349
Operations on muscles, tendons, fascia and bursa except of hand (88)	3,519	3,210	309
Operations on muscles, tendon and fascia of hand (89)	2,134	1,986	148
Reattachment of extremities (90)	4	4
Plastic surgery (92-94)	31,392	28,112	3,280
Operations on skin and subcutaneous tissue (92)	23,305	20,406	2,899
Reparative and reconstructive surgery (93)	7,312	6,944	368
Reparative and reconstructive surgery (cont'd) (94)	775	762	13
Oral and maxillofacial surgery (95-98)	4,789	4,650	139
Operations on salivary glands and ducts (95)	748	708	4
Operations on buccal cavity, tongue and palate (96)	1,385	1,343	42
Operations on jaws (bone and joint) (97)	1,465	1,433	32
Reduction of fracture and fracture-dislocation of jawbone (98)	1,191	1,166	25

¹Patient treatment file. The procedures included in this table are grouped on the "International Classification of Diseases Adapted for Indexing of Hospital Records", USPHS Publication No. 1693. The numbers following the operations are the identifying code numbers of this operation classification.

²For purposes of this table, dental, diagnostic and therapeutic procedures are excluded.

TABLE 34

INPATIENT CARE

**Cost of Operation of Medical Inpatient Facilities—
Fiscal Year 1980**

(Dollars in Thousands)						
Activity	Total	VA Hospital Care			VA Nursing Care	VA Domiciliaries
		Medical Bed Section	Surgical Bed Section	Psychiatric Bed Section		
Total Costs	\$4,404,941	\$2,099,936	\$1,106,467	\$889,877	\$222,017	\$86,645
Professional and ancillary:						
Medical Services ¹	1,063,913	532,144	304,939	188,030	26,057	12,743
Nursing Services	1,048,527	497,053	265,059	218,485	65,174	2,756
Chaplin Services	19,722	8,509	3,536	4,846	1,525	1,306
Dietetics Services	335,115	141,743	60,442	81,440	29,741	21,749
Dental Services	40,199	17,442	8,480	10,783	1,806	1,688
Audiology & Speech Pathology	5,320	3,262	1,064	381	439	174
Direct Care, Total	2,512,796	1,200,153	643,520	503,965	124,742	40,416
Administrative Support	491,543	237,807	117,331	103,037	23,305	10,063
Engineering Support	530,732	224,336	111,454	131,878	40,259	22,805
Building Management ²	258,335	115,780	56,076	62,911	18,032	5,536
Research Support	86,138	52,175	23,339	9,938	544	142
Education & Training Support	262,162	136,839	84,748	35,742	3,111	1,722
Asset Acquisitions	263,235	132,846	69,999	42,405	12,024	5,961
Support, Total	1,892,145	899,783	462,947	385,911	97,275	46,229

¹ Professional medical services include laboratory, pharmacy, blind rehabilitation, clinical nuclear medicine, rehabilitation medicine, social service, clinical psychology, radiology, medical illustration and library.

² Includes operation of laundry.

TABLE 35

EXTENDED CARE

**VA Nursing Homes, Community Nursing Homes, and VA Domiciliaries:
Patient Movement Fiscal Year 1980**

Item	VA Nursing Homes	Community Nursing Homes	VA Domiciliaries
Total on rolls (bed occupants and in absent status) remaining on September 30, 1979	8,093	8,830	8,306
Gains during Fiscal Year 1980 — Total	8,687	23,838	11,043
Direct gains — Total	4,666	19,610	6,115
Admissions after rehospitalization	602 ¹	2,003 ²	778 ²
Other Admissions	4,064	17,607	5,337
Transfers in from similar facilities ³	47	776	52
Returns from absent sick in hospital status	3,974	3,452	4,876
Losses during Fiscal Year 1980 — Total	8,543	24,310	11,791
Discharges and deaths while in bed occupant or authorized leave of absence status — Total	2,939	15,043	4,818
Discharges	2,226	12,093	4,720
Deaths	713	2,950	98
Discharges and deaths while in absent sick in hospital status—Total	1,522	5,163	2,056
Discharges	965	4,049	1,937
Deaths	557	1,114	119
Transfers out to similar facilities ³	85	610	57
Losses to absent sick in hospital status	5,519	8,657	6,916
Remaining on September 30, 1980 — Total	8,289	8,330	8,306
Bed occupants	8,040	8,082	7,595
On authorized leave of absence	44	41	435
Absent sick in hospital	205	207	276
Patients treated during Fiscal Year 1980 ⁴	12,750	28,536	15,180
Average daily census during Fiscal Year 1980 ⁵	7,933	8,529	7,894

¹ Admissions after rehospitalization of more than 30 days.

² Admissions after rehospitalization of more than 15 days.

³ Includes only patients transferred as VA beneficiaries.

⁴ Discharges and deaths during Fiscal Year 1980 plus the number remaining on the rolls on September 30, 1980.

⁵ Based on the number of patients days during the fiscal year divided by the number of days in the fiscal year.

EXTENDED CARE

TABLE 36

TABLE

**State Home Hospitals, State Nursing Homes, and State Domiciliary Homes:
Patient Movement¹—Fiscal Year 1980**

	State Home Hospitals	State Nursing Homes	State Domiciliary Homes
Bed occupants remaining on September 30, 1979	982	5,322	5,154
Gains during Fiscal Year 1980 — Total	5,439	9,175	11,895
Direct gains — Total	5,004	4,797	4,831
Admissions from State Facilities	2,302	2,324	1,671
Other admissions	2,702	2,473	2,960
Returns from leave of absence status	435	4,378	7,264
Losses during Fiscal Year 1980 — Total	5,527	8,801	12,399
Discharges and deaths — Total	5,100	4,344	5,085
Discharges to State Facilities	2,301	1,870	2,064
Other discharges	2,367	1,398	2,842
Deaths	432	1,076	189
Losses to leave of absence status	427	4,457	7,304
Bed occupants remaining on September 30, 1980	894	5,707	4,680
Patients treated during Fiscal Year 1980 ²	5,994	10,051	9,775
Average daily census during Fiscal Year 1980 ³	929	5,586	4,892

¹ Data include only patients supported by VA.² Based on discharges and deaths during Fiscal Year 1980, plus the number on the rolls on September 30, 1980.³ Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

EXTENDED CARE

TABLE 37

**VA Medical Centers—Domiciliary Care Component: Selected Data
Fiscal Year 1980**

Location	Average Operating Beds 1	Bed Occupancy Rate (%) 2	Average Daily Census 3	Admissions 4	Discharges 4 5	Patients Treated 4 6	Remaining on Sept. 30, 1980 7
Total	9,217	85.6	7,894	6,115	6,874	15,180	8,306
Arizona:							
Prescott	237	89.9	213	144	174	413	239
California: Los Angeles	446	74.4	332	259	297	628	331
Florida: Bay Pines	306	78.4	240	46	180	364	184
Georgia: Dublin	352	94.9	334	173	208	548	340
Kansas: Leavenworth	771	88.2	680	965	996	1,765	769
Mississippi: Biloxi	439	92.5	406	352	376	827	451
New York: Bath	650	79.8	519	196	346	861	515
Ohio: Dayton	835	89.2	745	546	512	1,317	805
Oregon: White City	1,155	82.4	952	775	912	1,923	1,011
South Dakota: Hot Springs	484	86.4	418	472	496	939	443
Tennessee: Mountain Home	796	77.9	620	493	617	1,267	650
Texas:							
Bonham	230	93.5	215	209	211	458	247
Temple	547	80.6	441	584	620	1,075	455
Virginia: Hampton	631	91.0	574	194	287	873	586
West Virginia: Martinsburg	550	90.9	500	301	295	850	555
Wisconsin: Wood	789	89.5	706	406	404	1,129	725

¹ Based on the number of operating beds at the end of each month of 13 consecutive months (September 1979 — September 1980).² Average daily census as a percent of the average operating beds.³ Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.⁴ Transfers included in individual facility totals; excluded from overall total.⁵ Includes deaths.⁶ Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.⁷ Total on rolls (bed occupants, patients on authorized leave of absence, and patients absent sick in hospital).

*VA Medical Centers—Nursing Home Care Component:
Selected Data—Fiscal Year 1980*

Location	Average Operating Beds 1	Bed Occupancy Rate (%) 2	Average Daily Census 3	Admissions 4	Discharges 4 5	Patients Treated 4 6	Remaining on Sept. 30, 1980 7
Total	8,394	94.5	7,933	4,666	4,461	12,750	8,289
Alabama:							
Tuscaloosa	120	94.2	113	35	31	151	120
Tuskegee	112	95.5	107	27	27	139	112
Arizona:							
Phoenix	120	93.3	112	64	56	175	119
Tucson	41	95.1	39	11	11	52	41
Arkansas: Little Rock	200	96.0	192	42	43	239	196
California:							
Loma Linda	60	93.3	56	184	183	242	59
Long Beach	180	94.4	170	212	200	382	182
Palo Alto	150	92.7	139	252	233	379	146
San Diego	60	91.7	55	94	93	151	58
Sepulveda	200	81.0	162	98	75	251	176
Colorado:							
Ft. Lyon	37	94.6	35	13	11	48	37
Grand Junction	42	95.2	40	10	12	51	39
Connecticut: West Haven	90	97.8	88	13	16	106	90
Delaware: Wilmington	60	95.0	57	45	47	104	57
Florida:							
Bay Pines	120	96.7	116	61	62	181	119
Lake City	40	95.0	38	8	9	47	38
Miami	97	84.5	82	115	120	202	82
Georgia:							
Augusta	40	92.5	37	12	12	49	37
Dublin	86	94.2	81	33	36	120	84
Illinois:							
Danville	120	95.0	114	54	50	169	119
North Chicago	190	94.2	179	63	70	260	190
Indiana:							
Ft. Wayne	54	96.3	52	12	12	66	54
Indianapolis	60	95.0	57	56	51	111	60
Marion	69	95.7	66	32	30	100	70
Iowa: Knoxville	200	97.0	194	40	41	238	197
Kansas:							
Leavenworth	45	95.6	43	12	11	56	45
Topeka	79	93.7	74	22	21	94	73
Kentucky: Lexington	100	98.0	98	100	99	200	101
Louisiana: Alexandria	93	86.0	80	31	28	118	90
Maine: Togus	60	96.7	58	17	17	77	60
Maryland:							
Ft. Howard	47	93.6	44	11	12	58	46
Perry Point	80	95.0	76	35	29	106	77
Massachusetts:							
Bedford	162	95.7	155	34	52	213	161
Brockton	100	96.0	96	37	39	137	98
Northampton	50	96.0	48	20	20	70	50
Michigan:							
Allen Park	72	97.2	70	52	52	124	72
Battle Creek	205	94.1	193	50	47	245	198
Iron Mountain	40	95.0	38	25	27	66	39
Minnesota: St. Cloud	44	95.5	42	11	11	55	44
Mississippi:							
Biloxi	35	97.1	34	2	3	37	34
Jackson	120	94.2	113	38	32	152	120
Missouri:							
Columbia	54	96.3	52	15	17	70	53
Poplar Bluff	49	95.9	47	77	78	127	49
St. Louis	93	96.8	90	18	19	112	93
Montana: Miles City	24	104.2	25	10	10	36	26
Nebraska: Grand Island	42	88.1	37	25	20	62	42
Nevada: Reno	22	95.5	21	7	7	29	22
New Hampshire: Manchester	120	95.8	115	205	204	323	119
New Jersey:							
East Orange	60	96.7	58	38	34	94	60
Lyons	90	97.8	88	22	24	114	90
New Mexico: Albuquerque	47	95.7	45	75	71	117	46

See footnotes at end of table.

**VA Medical Centers—Nursing Home Care Component:
Selected Data—Fiscal Year 1980**

Location	Average Operating Beds 1	Bed Occupancy Rate (%) 2	Average Daily Census 3	Admissions 4	Discharges 4 5	Patients Treated 4 6	Remaining on Sept. 30, 1980 7
New York:							
Albany	66	103.0	68	34	34	100	66
Bath	180	85.6	154	158	152	326	174
Brooklyn	300	97.0	291	164	153	452	298
Buffalo	36	100.0	36	10	9	45	36
Canandaigua	100	98.0	98	23	22	122	100
Castle Point	148	96.6	143	26	27	174	147
Montrose	122	94.3	115	31	28	144	116
Syracuse	37	91.9	34	13	17	50	33
North Carolina:							
Asheville	82	92.7	76	28	25	106	81
Fayetteville	39	97.4	38	13	12	51	39
Salisbury	93	96.8	90	70	70	163	93
North Dakota: Fargo	54	85.2	46	55	55	104	49
Ohio:							
Chillicothe	99	96.0	95	52	51	150	99
Cincinnati	206	87.9	181	118	120	309	189
Cleveland	100	97.0	97	53	51	153	102
Dayton	285	95.8	273	63	104	376	272
Oregon: Roseburg	75	96.0	72	31	31	105	74
Pennsylvania:							
Altoona	33	90.9	30	38	31	64	33
Butler	104	94.2	98	34	33	136	103
Coatesville	50	96.0	48	21	21	71	50
Erie	40	95.0	38	14	10	50	40
Lebanon	120	98.3	118	20	20	139	119
Pittsburgh (Gen.)	228	93.4	213	81	100	318	218
South Carolina: Columbia	102	96.1	98	171	115	242	127
South Dakota: Sioux Falls	75	96.0	72	29	27	100	73
Tennessee:							
Mountain Home	58	94.8	55	11	11	69	58
Murfreesboro	48	97.9	47	6	6	54	48
Texas:							
Big Spring	40	100.0	40	115	112	154	42
Bonham	100	97.0	97	29	28	128	100
Houston	78	96.2	75	42	43	121	78
Kerrville	35	94.3	33	9	9	44	35
Waco	84	98.8	83	41	41	125	84
Utah: Salt Lake City	46	87.0	40	133	124	168	44
Vermont: White River Junction	30	96.7	29	121	120	148	28
Virginia:							
Hampton	58	75.9	44	89	31	125	94
Salem	100	96.0	96	60	60	158	98
Washington: American Lake	76	94.7	72	15	19	90	71
West Virginia: Beckley	40	92.5	37	28	21	62	41
Wisconsin:							
Tomah	100	97.0	97	25	24	124	100
Wood	200	97.5	195	51	51	250	199
Wyoming: Cheyenne	47	97.9	46	13	13	60	47

¹Based on the number of operating beds at the end of September 1980.

²Average daily census as a percent of the average operating beds.

³Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

⁴Transfers included in individual facility totals excluded from overall total.

⁵Includes deaths.

⁶Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.

⁷Total on rolls (bed occupants, patients on authorized leave of absence, and patients sick in hospital).

State Nursing Care Homes: Selected Data—Fiscal Year 1980

Location of State Home Hospital	Location of Authorizing VA Facility	Average Daily Census ¹	Admissions	Discharges ²	Patients Treated ³	Remaining on September 30, 1980 ⁴
Total		5,586	4,797	4,344	10,051	5,707
California: Yountville	San Francisco, CA	323	487	458	771	313
Colorado:						
Forence	Denver, CO	110	65	66	176	110
Homelake	Denver, CO	16	5	3	19	16
Georgia:						
Augusta	Augusta, GA	177	168	169	344	175
Milledgeville	Dublin, GA	149	147	64	261	197
Illinois: Quincy	Iowa City, IA	302	609	585	882	297
Indiana: Lafayette	Indianapolis, IN	160	96	63	244	181
Iowa: Marshalltown	Des Moines, IA	276	232	193	486	293
Kansas: Fort Dodge	Wichita, KS	52	16	20	73	53
Massachusetts:						
Chelsea	Boston, MA (OPC)	54	219	220	275	55
Holyoke	Northampton, MA	235	161	162	400	238
Michigan: Grand Rapids	Allen Park, MI	522	239	220	747	527
Minnesota: Minneapolis	Minneapolis, MN	83	56	56	139	83
Missouri: St. James	St. Louis, MO	101	137	140	241	101
Montana: Columbia Falls	Ft. Harrison, MT	38	35	35	74	39
Nebraska: Grand Island	Grand Island, NE	361	121	158	487	329
New Hampshire: Tilton	Manchester, NH	91	26	22	112	90
New Jersey:						
Menlo Park	East Orange, NJ	254	61	74	318	244
Vineland	Wilmington, DE	243	106	73	321	248
New York: Oxford	Syracuse, NY	45	52	41	92	51
Ohio: Sandusky	Cleveland, OH	243	287	96	372	276
Oklahoma:						
Ardmore	Oklahoma City, OK	78	58	53	133	80
Clinton	Oklahoma City, OK	150	168	173	320	147
Norman	Oklahoma City, OK	45	34	32	80	48
Sulphur	Oklahoma City, OK	130	135	137	266	129
Talihina	Oklahoma City, OK	149	163	172	315	143
Pennsylvania:						
Hollidaysburg	Altoona, PA	69	48	52	119	67
Erie	Erie, PA	37	47	41	79	38
Rhode Island: Bristol	Providence, RI	233	79	74	318	244
South Carolina: Columbia	Columbia, SC	109	70	70	180	110
South Dakota: Hot Springs	Hot Springs, SD	29	12	10	36	26
Vermont: Bennington	White River Junction, VT	123	175	172	300	128
Washington:						
Orting	Seattle, WA	83	77	70	155	85
Retsil	Seattle, WA	76	137	111	205	94
Wisconsin: King	Madison, WI	439	269	259	711	452

¹Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

²Includes deaths.

³Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.

⁴Total on rolls (bed occupants, patients on leave of absence, and patients absent sick in hospital).

Community Nursing Homes: Selected Data—Fiscal Year 1980

Location of Authorizing VA Facility	Average Daily Census 1	Admissions 2	Discharges 2 3	Patients Treated 2 4	Remaining on September 30, 1980 5
Total	8,529	19,610	20,206	28,536	8,330
Alabama:					
Birmingham	64	192	196	258	62
Montgomery	16	30	30	48	18
Tuscaloosa	50	69	67	120	53
Tuskegee	14	36	30	50	20
Alaska: Anchorage	7	27	34	37	3
Arizona:					
Phoenix	146	310	287	440	153
Prescott	9	18	15	24	9
Tucson	56	162	178	228	50
Arkansas:					
Fayetteville	15	58	60	70	10
Little Rock	100	259	179	272	93
California:					
Fresno	31	111	112	141	29
Livermore	25	45	45	69	24
Loma Linda	49	175	118	165	47
Long Beach	135	432	476	585	109
Los Angeles (Brentwood)	59	54	63	126	63
Los Angeles (Wadsworth)	104	308	316	420	104
Martinez	31	56	67	101	34
Palo Alto	71	162	129	191	62
San Diego	38	62	47	90	43
San Francisco	43	162	151	199	48
Sepulveda	83	92	66	153	87
Colorado:					
Denver	53	155	155	215	60
Ft. Lyon	35	39	31	66	35
Grand Junction	23	67	66	92	26
Connecticut:					
Newington	33	96	93	123	30
West Haven	33	99	95	123	28
Delaware: Wilmington	87	167	153	233	80
District of Columbia: Washington	56	114	118	172	54
Florida:					
Bay Pines	178	414	370	555	185
Gainesville	67	181	198	254	56
Lake City	19	58	56	74	18
Miami	112	250	381	505	124
Tampa	147	482	487	642	155
Georgia:					
Atlanta	94	276	253	364	111
Augusta	90	161	159	255	96
Dublin	41	102	109	141	32
Hawaii: Honolulu	10	22	23	34	11
Idaho: Boise	32	91	96	129	33
Illinois:					
Chicago (Lakeside)	89	244	273	339	66
Chicago (West Side)	101	219	187	292	105
Danville	42	100	107	148	41
Hines	147	528	556	701	145
Marion	51	120	114	162	48
North Chicago	132	94	103	225	122
Indiana:					
Ft. Wayne	24	84	68	97	29
Indianapolis	45	153	153	197	44
Marion	66	56	63	127	64
Iowa:					
Des Moines	62	173	180	235	55
Iowa City	68	241	242	308	66
Knoxville	46	56	64	107	43
Kansas:					
Leavenworth	41	129	137	173	36
Topeka	49	84	98	138	40
Wichita	13	42	37	54	17
Kentucky:					
Lexington	64	159	169	227	58
Louisville	49	219	201	245	44

See footnotes at end of table.

See J

Community Nursing Homes: Selected Data—Fiscal Year 1980

n 1980	Location of Authorizing VA Facility	Average Daily Census 1	Admissions 2	Discharges 2 3	Patients Treated 2 4	Remaining on September 30, 1980 5
8,330	Louisiana:					
	Alexandria	19	91	88	106	18
62	New Orleans	53	163	163	213	50
18	Shreveport	51	185	170	229	59
53	Maine: Togus	47	85	86	128	42
20	Maryland:					
3	Baltimore	31	65	81	107	26
	Ft. Howard	22	39	39	61	22
153	Perry Point	25	25	25	47	22
9	Massachusetts:					
50	Bedford	67	52	56	123	67
	Boston	72	158	383	435	52
10	Brockton	45	58	63	103	40
93	Northampton	55	43	43	97	54
	West Roxbury	6	7	8	14	6
29	Michigan:					
24	Allen Park	75	187	183	245	62
47	Ann Arbor	50	148	131	181	50
109	Battle Creek	58	52	51	109	58
63	Iron Mountain	9	21	23	31	8
104	Saginaw	51	158	174	215	41
34	Minnesota:					
62	Minneapolis	181	499	500	676	176
43	St. Cloud	57	89	82	140	58
48	Mississippi:					
87	Biloxi	76	137	143	225	82
	Jackson	32	92	91	124	33
60	Missouri:					
35	Columbia	36	111	123	158	35
26	Kansas City	74	192	224	305	81
	Poplar Bluff	31	87	79	109	30
30	St. Louis	87	213	220	302	82
28	Montana:					
80	Ft. Harrison	28	51	58	88	30
54	Miles City	15	39	40	56	16
185	Nebraska:					
56	Grand Island	4	7	7	12	5
18	Lincoln	19	54	61	72	11
124	Omaha	39	187	199	233	34
155	Nevada: Reno	12	45	35	55	20
	New Hampshire: Manchester	34	71	82	115	33
111	New Jersey:					
96	East Orange	133	222	191	343	152
32	Lyons	35	46	45	79	34
11	New Mexico: Albuquerque	48	160	272	320	48
33	New York:					
68	Albany	23	47	53	82	29
105	Batavia	2	5	7	8	1
41	Bath	11	28	28	37	9
145	Bronx	28	45	53	73	20
48	Brooklyn	32	86	86	111	25
122	Buffalo	27	57	67	102	35
	Canandaigua	3	3	4	6	2
29	Castle Point	4	6	8	11	3
44	Montrose	12	13	8	19	11
64	New York	14	32	33	45	12
	Northport	30	30	20	53	33
	Syracuse	15	21	19	34	15
55	North Carolina:					
88	Asheville	59	138	124	179	55
43	Durham	50	135	146	183	37
	Fayetteville	43	103	104	142	38
36	Salisbury	42	56	70	108	38
40	North Dakota: Fargo	25	62	58	85	27
17	Ohio:					
58	Chillicothe	148	222	231	392	161
44	Cincinnati	39	170	174	211	37
	Cleveland	141	270	259	407	148
	Dayton	62	109	106	167	61

See footnotes at end of table.

Community Nursing Homes: Selected Data—Fiscal Year 1980

Location of Authorizing VA Facility	Average Daily Census 1	Admissions 2	Discharges 2 3	Patients Treated 2 4	Remaining on September 30, 1980 5
Oklahoma:					
Muskogee	43	151	154	197	
Oklahoma City	56	294	318	386	43
Oregon:					68
Portland	84	224	243	319	
Roseburg	70	185	176	246	76
Pennsylvania:					70
Altoona	24	41	42	65	
Butler	18	34	30	49	23
Coatesville	141	93	89	235	19
Erie	16	35	58	70	146
Lebanon	35	35	39	71	12
Philadelphia	73	161	173	242	32
Pittsburgh (University Dr)	73	207	229	299	60
Pittsburgh (Highland Dr)	54	35	32	85	70
Wilkes-Barre	51	98	88	146	53
Puerto Rico: San Juan	47	118	123	170	58
Rhode Island: Providence	39	97	85	120	47
South Carolina:					36
Charleston	35	112	105	138	
Columbia	57	109	130	179	33
South Dakota:					48
Ft. Meade	5	17	18	24	
Hot Springs	8	19	15	23	6
Sioux Falls	25	101	97	124	8
Tennessee:					27
Memphis	34	96	92	130	
Mountain Home	96	233	240	326	38
Murfreesboro	23	43	41	59	86
Nashville	61	157	135	202	18
Texas:					67
Amarillo	22	63	63	82	
Big Spring	48	106	100	149	19
Bonham	27	92	89	124	49
Dallas	118	444	433	546	35
Houston	113	380	390	491	113
Kerrville	41	112	115	151	101
Marlin	15	39	44	56	36
San Antonio	106	338	328	423	12
Temple	74	143	166	239	95
Waco	75	70	81	150	73
Utah: Salt Lake City	39	119	110	163	69
Vermont: White River Junction	18	58	58	73	53
Virginia:					15
Hampton	41	85	98	129	
Richmond	56	127	139	180	31
Salem	77	154	98	172	41
Washington:					74
American Lake	25	30	31	57	
Seattle	101	288	290	396	26
Spokane	35	108	130	165	106
Vancouver	54	143	148	205	35
Walla Walla	17	51	53	68	57
West Virginia:					15
Beckley	15	67	56	73	
Clarksburg	53	113	126	172	17
Huntington	64	180	181	237	46
Martinsburg	89	153	151	234	56
Wisconsin:					83
Madison	28	74	60	87	
Tomah	34	17	46	65	27
Wood	105	269	246	366	19
Wyoming:					120
Cheyenne	12	53	60	73	
Sheridan	26	43	36	65	13

¹Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

²Transfers included in individual facility totals; excluded from overall total.

³Includes deaths.

⁴Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.

⁵Total on rolls (bed occupants, patients on authorized leave of absence, and patients absent sick in hospital).

TABLE 41

State Domiciliary Homes: Selected Data—Fiscal Year 1980

Location of State Home Domiciliary	Location of Authorizing VA Facility	Average Daily Census ¹	Admissions	Discharges ²	Patients Treated ³	Remaining on September 30, 1980 ⁴
Total		4,892	4,631	5,095	9,786	4,691
Arkansas: Little Rock	Little Rock, AR	2	19	8	19	11
California: Yountville	San Francisco, CA	591	628	747	1,313	566
Colorado: Homelake	Denver, CO	68	24	31	91	60
Connecticut: Rocky Hill	Newington, CT	418	535	544	946	402
Georgia: Milledgeville	Dublin, GA	240	324	367	583	216
Idaho: Boise	Boise, ID	114	139	130	243	113
Illinois: Quincy	Iowa City, IA	91	122	117	205	88
Indiana: Lafayette	Indianapolis, IN	83	38	61	113	89
Iowa: Marshalltown	Des Moines, IA	98	82	19	74	55
Kansas: Fort Dodge	Wichita, KS	55	13	81	191	110
Louisiana: Jackson	New Orleans, LA	109	105			
Massachusetts:		261	330	316	580	264
Chelsea	Boston, MA (OPC)	34	34	37	74	37
Holyoke	Northampton, MA	155	75	76	229	153
Michigan: Grand Rapids	Allen Park, MI					
Minnesota:		134	134	128	270	142
Hastings	Minneapolis, MN	334	244	292	592	300
Minneapolis	Minneapolis, MN	57	86	72	142	70
Missouri: St. James	St. Louis, MO	68	37	57	119	62
Montana: Columbia Falls	Ft. Harrison, MT	138	70	84	214	130
Nebraska: Grand Island	Grand Island, NE					
New Jersey:		86	21	50	122	72
Menlo Park	East Orange, NJ	34	26	30	59	29
Vineland	Wilmington, DE	43	39	28	73	45
New York: Oxford	Syracuse, NY	103	20	26	127	101
North Dakota: Lisbon	Fargo, ND	501	213	410	847	437
Ohio: Sandusky	Cleveland, OH					
Oklahoma:		98	261	249	349	100
Ardmore	Oklahoma City, OK	28	69	76	101	25
Clinton	Oklahoma City, OK	174	40	56	225	169
Norman	Oklahoma City, OK	28	58	60	84	24
Sulphur	Oklahoma City, OK					
Pennsylvania:		64	77	63	130	67
Hollidaysburg	Altoona, PA	71	51	35	116	81
Erie	Erie, PA	90	46	50	141	91
Rhode Island: Bristol	Providence, RI	85	10	32	103	71
South Dakota: Hot Springs	Hot Springs, SD	13	24	22	36	14
Vermont: Bennington	White River Jct., VT	139	410	477	576	99
Virginia: Occoquan ⁵	Washington, DC					
Washington:		73	73	64	145	81
Orting	Seattle, WA	139	117	136	262	126
Retsil	Seattle, WA	30	20	24	54	30
Wisconsin: King	Madison, WI	45	17	16	65	49
Wyoming: Buffalo	Sheridan, WY					

¹ Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

² Includes deaths.

³ Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.

⁴ Total on rolls (bed occupants, patients on leave of absence, and patients absent sick in hospital).

⁵ Operated by the government of the District of Columbia.

EXTENDED CARE

TABLE 42

State Home Hospitals: Selected Data—Fiscal Year 1980

Location of State Home Hospitals	Location of Authorizing VA Facility	Average Daily Census ¹	Admissions	Discharges ²	Patients Treated ³	Remaining on September 30, 1980 ⁴
Total		929	5,004	5,100	5,994	894
California: Yountville	San Francisco, CA	331	954	1,011	1,326	315
Connecticut: Rocky Hill	Newington, CT	319	526	535	854	319
Illinois: Quincy	Iowa City, IA	25	458	463	487	24
Iowa: Marshalltown	Des Moines, IA	110	171	194	284	90
Massachusetts:		113	1,824	1,821	1,937	116
Chelsea	Boston, MA (OPC)	8	248	248	257	9
Holyoke	Northampton, MA	20	637	637	658	21
Oklahoma: Sulphur	Oklahoma City, OK	3	186	191	191	
Wisconsin: King	Madison, WI					

¹ Based on the number of patient days during the fiscal year divided by the number of days in the fiscal year.

² Includes deaths.

³ Discharges and deaths during the fiscal year plus the number of patients on the rolls at the end of the fiscal year.

⁴ Total on rolls (bed occupants and patients on leave of absence.)

**Outpatient Medical Program:
Visits to VA Staff and Private Physicians on a Fee-For-Service Basis—
Fiscal Years 1971–1980**

Fiscal Year	Purpose of Visit											
	All Purposes			Examinations for Compensation for Pension Purposes			Examinations to Determine Need for Medical Care			All Other Purposes		
	Total	Staff	Fee	Total	Staff	Fee	Total	Staff	Fee	Total	Staff	Fee
1980 ..	17,971,407	15,751,690	2,219,717	373,300	287,724	85,576	2,435,856	2,403,684	32,172	15,162,251	13,060,282	2,101,969
1979 ..	17,262,408	15,053,332	2,209,076	372,077	290,695	81,382	2,239,313	2,213,770	25,543	14,651,058	12,548,867	2,102,151
1978 ..	17,416,275	15,069,573	2,346,702	405,301	321,372	83,929	2,244,929	2,227,915	17,014	14,766,045	12,520,286	2,245,759
1977 ..	17,045,079	14,675,284	2,369,795	421,425	337,252	84,173	2,205,165	2,193,258	11,907	14,418,489	12,144,774	2,273,715
1976 ..	16,409,850	14,222,804	2,187,046	388,674	345,152	43,522	2,126,614	2,124,362	2,252	13,894,452	11,753,290	2,141,272
1975 ..	14,629,517	12,595,514	2,034,003	353,590	323,085	30,505	1,951,618	1,948,907	2,711	12,324,309	10,323,522	2,000,787
1974 ..	12,266,476	10,457,830	1,808,646	316,359	290,728	25,631	1,692,876	1,691,695	1,181	10,257,241	8,475,407	1,781,834
1973 ..	10,858,491	9,165,094	1,693,397	339,557	310,686	28,871	1,577,282	1,576,143	1,139	8,941,652	7,278,265	1,663,387
1972 ..	9,526,881	7,930,080	1,596,801	406,065	342,035	64,030	1,494,491	1,492,548	1,943	7,626,325	6,095,497	1,530,828
1971 ..	8,064,092	6,798,146	1,265,946	456,302	369,911	86,391	1,373,368	1,371,340	2,028	6,234,422	5,056,895	1,177,527

**Outpatient Dental Care: Applications for Care (Eligibility Classes I-VI) ¹
Fiscal Years 1970–1980**

Fiscal Year	Pending Fee Case Load Beginning of Year	Received During The Year	Total	Dispositions During The Year	Pending Fee Case Load At End of Year
1980	37,281	243,277	280,558	233,917	46,641
1979	40,751	191,308	232,059	194,778	37,281
1978	36,096	197,338	233,434	192,683	40,751
1977	38,299	218,818	257,117	221,021	36,096
1976	45,910	233,392	279,302	241,003	38,299
1975	41,611	239,182	280,793	234,883	45,910

¹ As provided for in Title 38 USC, Sec. 612, and VA Regulations 6120-6129.

**Outpatient Dental Care: Workload by VA Staff and on a Fee-For-Service Basis—
Fiscal Years 1971–1980**

Fiscal Year	VA Staff		Non-VA Dentists on a Fee-for-Service Basis		
	Examinations Completed	Treatment Cases Completed	Examinations Completed	Treatment Cases Completed	Net Cases Authorized
1980	138,104	143,345	109,801
1979	128,195	134,769	89,848
1978	127,278	127,167	110,081
1977	107,987	100,305	107,265
1976	93,230	94,097	121,956
1975	85,802	83,670	130,891
1974	79,674	79,498	(¹)	(¹)	156,467
1973	114,199	82,916	113,578	165,472
1972	142,919	82,873	113,819	165,819
1971	147,794	82,724	91,560	145,664

¹ Reporting of fee-basis workload changed to the net number of cases authorized by VA.

Pharmacy Activity—Fiscal Years 1979–1980

Activity	FY 1980	FY 1979
VA Pharmacies		
Prescriptions dispensed — Total	36,687,165	35,821,814
Inpatient	1,426,484	1,991,569
Ambulatory — Total	35,260,681	33,830,245
Methadone	1,027,760	1,129,648
All other	34,232,921	32,700,597
Investigational drugs dispensed	(¹)	71,692
Doses dispensed		
Ward stock system	(¹)	174,557,989
Automatic replenishment system	(¹)	124,693,851
External medications	(¹)	94,578,887
Orders for substances controlled by the Drug Enforcement Administration	(¹)	37,870,091
Unit doses	62,481,309	67,646,143
Primary intravenous admixtures	1,310,494	1,117,887
Secondary intravenous admixtures ("piggy backs")	3,695,973	2,833,531
Hyperalimentation	353,974	328,956
Fluids and sets	8,505,031	5,987,143
Blood and blood products	(N/A)	184,652
Fee-Basis		
Prescriptions filled by participating pharmacies	1,018,537	1,057,358

¹ Changes in format either eliminated or altered the methodology utilized in the past.

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CONSTRUCTION

TABLE 47

**Replacement and Relocation Hospital Construction Projects, Fiscal Year 1980—Completions
And Year End Status**

Location	Total Number of Beds and Hospital Type ¹	Estimated Construction Cost ²	Value of Work in Place	Percent Com- plete ³	Date Construction Completed (C) ⁴ or Contract Awarded (A)
TOTAL 11 Projects	6092	1,015,121,648	216,392,998	21	
A. Projects Completed in Fiscal Year 1980					
Total 2 Projects	820	62,553,048	62,553,048	100	
Georgia : Augusta	420	38,359,548	(⁵)	100	December 1979 (C)
South Carolina : Columbia	400	24,193,500	(⁵)	100	May 1980 (C)
B. Projects Under Construction					
Total 6 Projects	4018	629,199,600	153,839,850	24	
Arkansas : Little Rock	505	130,601,000	5,998,760	5	July 1980 (A)
Florida : Bay Pines	830	102,045,300	19,372,419	19	August 1978 (A)
New York : Bronx	702	107,047,500	82,226,149	77	June 1974 (A)
Virginia : Richmond	814	114,094,800	25,476,344	22	November 1976 (A)
Washington : Seattle	490	106,679,000	19,170,419	28	July 1977 (A)
West Virginia : Martinsburg	677	88,732,000			
C. Projects Authorized — Not Under Construction					
Total 3 Projects	1254	323,369,000			
Maryland : Baltimore	400 (General)				
New Jersey : Camden	244 (General)				
Oregon : Portland/Vancouver	610 (General)				

¹ Included receiving, recovery and Nursing Home Care Beds, Domiciliaries and injury beds.² Construction anticipated, issued, awarded, including contingencies.³ Based on general construction only.⁴ Major general construction contract completed, Minor construction and landscaping may remain to be accomplished.⁵ Same as value of construction issued or awarded when project is financially complete.⁶ Under construction when major general construction contract has been awarded.⁷ Authorized when funds are appropriated for construction, technical services, or site acquisition.

CONSTRUCTION

TABLE 48

**Modernization Construction Projects,¹—Fiscal Year 1980—
Completions and Year End Status**

Location	Description	Estimated Construction Cost	Value of Work in Place	Percent Com- plete	Date Construction Complete (C) or Contract Awarded (A)
TOTAL	6 Projects	41,946,946	8,024,152	19	
A. Projects Completed, Total	1 Project	6,295,149	6,295,149	100	
Ohio : Chillicothe	Modernization of Buildings #7, 26 & 27	6,295,149	(²)	100	November 1979 (C)
B. Projects Under Construction, Total	2 Projects	1,871,797	1,729,003	92	
Projects \$1,000,000 and Over, Total	1 Project	1,016,993	881,290	87	
New York : St. Albans	Modernization Out Patient Clinic (west)	1,016,993	881,290	87	June 1979 (A)
Projects Under \$1,000,000, Total	1 Project	854,804	847,713	99	
C. Projects Not Under Construction, Total	3 Projects	33,780,000			
Projects \$1,000,000 and Over, Total	3 Projects	33,780,000			
Kansas : Wichita	Modernization-Alters & Addition (Phase 1)	5,784,000			
Massachusetts : West Roxbury	SCI Center & Modernize Bldg. #1 (Ph-2)	15,252,000			
Ohio : Chillicothe	Modernize Phase 2 — Bldgs. #24, 31 & 35	12,744,000			
Projects Under \$1,000,000, Total	0 Project	0			

¹ Projects included in table if approved for development by Administrator's Office or if there has been an appropriation of funds available for financing all or part of the project.² Same as value of construction issued or awarded when project is financially complete.³ For Purchase & Hire Projects, the date the station reports construction started.

TABLE 49

*Nursing Home Care Units Construction Projects,¹—Fiscal Year 1980—
Completions and Year End Status*

CONSTRUCTION

Location	Projects	Number of Nursing Home Care Beds	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A) ³
TOTAL	15 Projects	1,490	84,588,655	28,846,986	34	
A. Projects Completed, Total	2 Projects	240	8,321,701	8,321,701	...	
Virginia : Hampton		120	4,745,966	(²)	100	February 1980 (C)
South Carolina : Columbia		120	3,575,735	(²)	100	December 1979 (C)
B. Projects Under Construction, Total	9 Projects	950	41,735,154	20,525,285	49	
Projects \$1,000,000 and Over, Total	8 Projects	920	41,150,319	19,980,009	48	
California : Livermore		120	7,003,734	2,401,386	34	September 1979 (A)
Florida : Gainesville		120	4,736,800	1,967,955	42	September 1979 (A)
: Miami		120	5,044,953	4,891,447	97	May 1978 (A)
Georgia : Atlanta		120	7,334,179	366,759	5	June 1980 (A)
Maryland : Perry Point		120	2,495,402	2,360,720	95	October 1978 (A)
Pennsylvania : Wilkes Barre		120	5,315,512	149,837	3	June 1980 (A)
Tennessee : Memphis		120	5,101,877	4,776,164	94	October 1978 (A)
Texas : Temple		120	4,117,862	3,065,741	74	September 1979 (A)
Projects Under \$1,000,000, Total	1 Project	30	584,835	545,276	93	
C. Projects Not Under Construction, Total	4 Projects	300	34,531,800			
Projects \$1,000,000 and Over, Total	3 Projects	300	33,717,000			
Dist. of Columbia: Washington		120	21,368,000			
Kansas : Wichita		60	5,752,000			
Pennsylvania : Coatesville		120	6,597,000			
Projects Under \$1,000,000, Total	1 Project	N/S	814,800			

¹ Projects included in table if approved for development by Administrator's Office or if there has been an appropriation of funds available for financing all or part of the project.

² Same as value of construction issued or awarded when project is financially complete.

³ For Purchase & Hire projects, the date the station reports construction started.

TABLE 50

Research and Education Construction Projects,¹—Fiscal Year 1980
Completions and Year End Status

CONSTRUCTION

Location	Type	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Complete (C) or Contract Awarded (A)
TOTAL	16 Projects	37,386,305	5,421,720	15	
A. Projects Completed, Total	2 Projects	2,118,137	2,118,137	100	
Arizona : Tucson	Animal Res. Facil. (Energy Conservation)	1,218,129	(²)	100	January 1980 (C)
New Mexico : Albuquerque	Education Building	900,008	(²)	100	May 1980 (C)
B. Projects Under Construction, Total	7 Projects	7,031,168	3,303,583	47	
Projects \$1,000,000 and Over, Total	3 Projects	3,781,246	1,881,740	50	
California : Fresno	Area Health Education Center	1,192,847	711,414	60	September 1979 (A)
: Palo Alto	Animal Research Facility	1,006,208	998,836	99	September 1979 (A)
Illinois : Chicago	Renovate Med. Sci. Bldg.	1,582,191	171,490	11	May 1979 (A)
Projects Under \$1,000,000, Total	4 Projects	3,249,922	1,421,843	44	
C. Projects Not Under Construction, Total	7 Projects	28,237,000			
Projects \$1,000,000 and Over, Total	7 Projects	28,237,000			
California : Long Beach	Research & Education Addition	12,600,000			
: Martinez	Education Building	1,880,000			
: San Francisco	Animal Research	1,491,000			
Florida : Miami	Research & Education Bldg. & Psych. Addn.	7,280,000			
Louisiana : Shreveport	Alterations for Research & Education	1,200,000			
Pennsylvania : Philadelphia	Adm/Educ. Relocation for Clinical Improve	1,976,000			
Wisconsin : Wood	Renovate Bldg. #7C	1,810,000			
Projects Under \$1,000,000, Total	0 Projects	0			

Projects included in table if approved for development by Administrator's Office or if there has been an appropriation of funds financing all or part of the project.

² Same as value of construction issued or awarded when project is financially completed.

³For Purchase & Hire Projects, the date the station reports construction started.

**Other Improvement Construction Projects,¹ Fiscal Year 1980—Completions
And Year End Status**

Location	Description	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A)
1. AIR CONDITIONING CONSTRUCTION PROJECTS					
TOTAL	11 Projects	89,213,911	36,095,136	40	
A. Projects Completed, Total	4 Projects	11,935,970	11,935,970	100	
Illinois : Marion		739,823	(²)	100	December 1979 (C)
Indiana : Indianapolis		3,726,065	(²)	100	January 1980 (C)
Iowa : Des Moines		258,957	(²)	100	October 1979 (C)
Pennsylvania : Lebanon		7,211,125	(²)	100	February 1980 (C)
B. Projects Under Construction, Total	6 Projects	45,608,941	24,159,166	53	
Projects \$1,000,000 and Over, Total	5 Projects	44,980,497	23,533,364	52	
Arkansas : Fayetteville		4,083,795	2,270,416	56	September 1979 (A)
Iowa : Knoxville		9,096,576	5,105,307	56	May 1979 (A)
Maryland : Perry Point		9,916,950	9,859,195	99	May 1977 (A)
New York : Castle Point		7,584,000	0	0	September 1980 (A)
Pennsylvania : Coatesville		14,299,176	6,298,446	44	December 1978 (A)
Projects Under \$1,000,000, Total	1 Project	628,444	625,802	99	
C. Projects Not Under Construction, Total	1 Project	31,669,000			
Projects \$1,000,000 and Over, Total	1 Project	31,669,000			
New Jersey : East Orange		31,669,000			
2. OTHER IMPROVEMENT -- CONSTRUCTION PROJECTS					
TOTAL	672 Projects	731,207,789	216,800,527	30	
A. Projects Completed, Total	164 Projects	78,570,419	78,570,419	100	
Alabama : Birmingham	Upgrade Ward 8-S Open Heart Surgery	292,740	(²)	100	January 1980 (C)
Alabama : Birmingham	Renovate for Outpatient Sat. Lab	129,683	(²)	100	October 1979 (C)
Alabama : Montgomery	Upgrade Electrical System	736,631	(²)	100	April 1980 (C)
Alabama : Tuskegee	Correct Safety Defic	212,220	(²)	100	March 1980 (C)
Alabama : Tuskegee	Deadend Corridor Stairs, Bldgs. #4A&44	299,559	(²)	100	April 1980 (C)
Arkansas : Little Rock	Isolation ICU - Two Beds	90,382	(²)	100	May 1980 (C)
Arizona : Phoenix	Radiology Expansion	115,820	(²)	100	November 1979 (C)
Arizona : Tucson	Relocate OP/Ent/Eye/Speech & Audio Clinic	127,015	(²)	100	May 1980 (C)
California : Fresno	Alcohol Treatment Unit	236,106	(²)	100	August 1980 (C)
California : Fresno	Update and Expand Radiology	337,161	(²)	100	March 1980 (C)
California : Long Beach	Emergency Generator	1,338,870	(²)	100	July 1980 (C)
California : Long Beach	Pharmacy Expansions, Bldg. #2	606,779	(²)	100	March 1980 (C)
California : Los Angeles	Dental Training Center	312,451	(²)	100	November 1979 (C)
California : Los Angeles	Education Bldg. #158	329,605	(²)	100	July 1980 (C)
California : Palo Alto	Rehab. Research Center	397,609	(²)	100	March 1980 (C)
California : San Diego	Waste Heat Recovery & 3 Economizers	82,167	(²)	100	November 1979 (C)
California : San Diego	Non Structural Seismic Corrections	704,218	(²)	100	July 1980 (C)
California : San Diego	Alterations to Outpatient Ph-2	267,687	(²)	100	October 1979 (C)
California : Sepulveda	4 Bed Coronary Care Unit	148,001	(²)	100	March 1980 (C)
California : Sepulveda	Psy. Ward Redesign	290,611	(²)	100	February 1980 (C)
California : Sepulveda	Sprinkler System	194,854	(²)	100	October 1979 (C)
California : Sepulveda	Research Expansion Bldg. #7	223,969	(²)	100	July 1980 (C)
Colorado : Ft. Lyon	Water Treatment	194,105	(²)	100	December 1979 (C)
Colorado : Ft. Lyon	Modify Sewage Treatment Plant & Sewer	884,577	(²)	100	May 1980 (C)
Colorado : Ft. Lyon	Renovate Patient Care Areas, Bldg. #7	367,300	(²)	100	May 1980 (C)
Colorado : Grand Junction	Electrical Defic.	673,487	(²)	100	June 1980 (C)
Dist. of Columbia : Washington	Electrical Defic.	679,496	(²)	100	June 1980 (C)
Florida : Miami	Centralized Respiratory Care	132,423	(²)	100	April 1980 (C)
Florida : Tampa	Incinerator Bldg.	81,348	(²)	100	November 1979 (C)
Florida : Tampa	Operating Rooms & Staff Rooms	199,375	(²)	100	September 1980 (C)
Florida : Tampa	Install Heat Recovery System	242,217	(²)	100	December 1979 (C)
Florida : Tampa	Outpatient Clinic Improvements	621,356	(²)	100	February 1980 (C)
Georgia : Dublin	Emergency Power	136,057	(²)	100	December 1979 (C)
Iowa : Des Moines	Relocate Pad to Basement of Bldg. #2	242,391	(²)	100	April 1980 (C)
Iowa : Iowa City	Research 4th Floor Bldg. #1	135,668	(²)	100	November 1979 (C)
Iowa : Knoxville	Relocate Admin. Offices to Bldg. #3	279,129	(²)	100	November 1979 (C)
Iowa : Knoxville	Relocate Dental Service to Bldg. #1	244,564	(²)	100	June 1980 (C)
Illinois : Chicago	Remodel Surgical Area	1,747,399	(²)	100	February 1980 (C)
Illinois : Danville	Provide Center Tray 7 Dishwash Svc. B104	250,611	(²)	100	September 1980 (C)
Illinois : Hines	Acute Care Animal Facility	321,620	(²)	100	November 1979 (C)
Illinois : Hines	Research-Rehab	371,305	(²)	100	September 1980 (C)
Illinois : North Chicago	Relocate Pad	245,041	(²)	100	January 1980 (C)
Illinois : North Chicago	4 Bed Surgical Intensive Care Unit	327,800	(²)	100	May 1980 (C)
Illinois : North Chicago	Install Heat Recovery System	166,376	(²)	100	February 1980 (C)
Indiana : Indianapolis	Modernize Pad	251,062	(²)	100	February 1980 (C)
Indiana : Indianapolis	Emergency Gen. & Electrical Defic.	1,294,533	(²)	100	January 1980 (C)
Indiana : Indianapolis	Smoke Barriers	433,266	(²)	100	February 1980 (C)
Indiana : Marion	Correct Electrical Defic.	1,461,067	(²)	100	May 1980 (C)

See footnotes at end of table.

See ft.

TABLE 51—Continued

**Other Improvement Construction Projects,¹ Fiscal Year 1980—Completions
And Year End Status—Continued**

ion or d (A)	Location		Description	Estimated Construction Cost	Value of Work in Place	Percent Com- plete	Date Construction Completed (C) or Contract Awarded (A)	
	Kansas	Wichita	Emergency Gen. & Corr. of Elect. Defic	783,125	(²)	100	July	1980 (C)
	Kentucky	Lexington	Renovate First Floor Bldg. #2	258,486	(²)	100	July	1980 (C)
		Louisville	Remodel Clinical Lab	577,712	(²)	100	October	1979 (C)
	Louisiana	New Orleans	Temporary Space for Research	20,540	(²)	100	January	1980 (C)
		Shreveport	Research Exp. B16 Animal Research Fac.	222,849	(²)	100	October	1979 (C)
	Massachusetts	Bedford	Supply Pad Area - Bldg. #78	227,268	(²)	100	March	1980 (C)
		Bedford	Extend Laundry Bldg.	80,993	(²)	100	November	1979 (C)
		Bedford	Relace Water Distribution System	526,382	(²)	100	December	1979 (C)
		Brockton	Modernize Patient Areas 2nd Floor B-4	280,322	(²)	100	March	1980 (C)
		Brockton	Modernize Patient Rooms, Bldgs. #3&5	1,041,000	(²)	100	March	1980 (C)
		Northampton	Emergency Ltr. Circuits	268,453	(²)	100	January	1980 (C)
	Maryland	Baltimore	Emergency Generator	437,329	(²)	100	July	1980 (C)
		Perry Point	Additional Fuel Storage Tanks	326,911	(²)	100	August	1980 (C)
	Maine	Togus	Modernization of Bldg. #207 2nd Floor	759,494	(²)	100	May	1980 (C)
		Togus	Clinical Improvements	1,177,322	(²)	100	February	1980 (C)
	Michigan	Allen Park	Convert Auditorium to Educational Space	298,660	(²)	100	October	1979 (C)
		Allen Park	Renovate OP Pharmacy	99,359	(²)	100	October	1979 (C)
		Allen Park	Upgrade Surgical ICU	596,020	(²)	100	May	1980 (C)
		Allen Park	Expand Outpatient	355,584	(²)	100	September	1980 (C)
		Allen Park	Eliminate Architectural Barriers	65,761	(²)	100	October	1979 (C)
	Minnesota	Minneapolis	Cardio-Vascular Diagnostic Train. Cntr.	765,238	(²)	100	February	1980 (C)
		Minneapolis	Diagnostic Radiology Expansion	717,765	(²)	100	January	1980 (C)
		Minneapolis	Replace Modular Bldg.	227,969	(²)	100	June	1980 (C)
	Missouri	Kansas City	Renovate Psy. Wards 9&10th Floors, B#1	257,786	(²)	100	December	1979 (C)
		Kansas City	Relocate Rehab. Medicine Svc.	293,638	(²)	100	January	1980 (C)
		St. Louis	Remodel Ward 1-W-1 for Clinical	65,875	(²)	100	April	1980 (C)
		St. Louis	Remodel Ward 1-W2 North	287,202	(²)	100	March	1980 (C)
		St. Louis	Medical Clinical Support Area	61,519	(²)	100	April	1980 (C)
		St. Louis	Research Reloc. Bldg. #1	200,588	(²)	100	August	1980 (C)
		St. Louis	Remodel Ward 1-W3	408,598	(²)	100	March	1980 (C)
		St. Louis	Relocate Rehab. Medicine Svc.	303,939	(²)	100	July	1980 (C)
		St. Louis	Renovate Out Patient Pharmacy	109,079	(²)	100	December	1979 (C)
	Mississippi	Biloxi (BD)	Emergency Generator & Electrical Defic.	1,254,134	(²)	100	April	1980 (C)
		Biloxi (GD)	One Additional Elevator Bldg. #3&4	260,793	(²)	100	June	1980 (C)
		Jackson	Renovate 16 Bed Wards	110,230	(²)	100	March	1980 (C)
	Montana	Ft. Harrison	Seismic Corrections	688,964	(²)	100	April	1980 (C)
	North Carolina	Asheville	Expand & Modify OP Admission & Amb Care	437,327	(²)	100	April	1980 (C)
		Asheville	Emergency Generator & Electrical Defic.	306,980	(²)	100	November	1979 (C)
		Durham	Electrical Deficiencies	1,172,687	(²)	100	February	1980 (C)
		Fayetteville	Relocation of Pharmacy	47,600	(²)	100	November	1979 (C)
	Nebraska	Salisbury	Expand X-Ray and Medical Service	184,724	(²)	100	October	1979 (C)
		Omaha	Two Additional Elevators	885,723	(²)	100	February	1980 (C)
	New Hampshire	Manchester	Upgrade & Extend Fire Alarm System	228,956	(²)	100	April	1980 (C)
	New Mexico	Albuquerque	Patient Elevator B-3	204,067	(²)	100	October	1979 (C)
		Albuquerque	Ward 5 Modernization	292,960	(²)	100	April	1980 (C)
		Albuquerque	Ward Alterations (Wards 7 and 7A)	886,262	(²)	100	September	1980 (C)
	Nevada	Reno	Emergency Generator & Electrical Defic.	584,792	(²)	100	April	1980 (C)
		Reno	Remove Architectural Barriers (Ph-1)	119,976	(²)	100	November	1979 (C)
	New York	Albany	Smoke Door Holders	129,420	(²)	100	January	1980 (C)
		Albany	Renovate Ward 4C (NHC)	210,143	(²)	100	February	1980 (C)
		Albany	Emergency Gen. & Corr. of Elect. Defic.	497,716	(²)	100	October	1979 (C)
		Bath	Install Thermal Insulation in Bldgs. #9 & 18	132,354	(²)	100	September	1980 (C)
		Brooklyn	Install X-Ray Units	210,972	(²)	100	December	1979 (C)
		Buffalo	6 Bed MICU & 4 Bed CCU Ward 8C	252,881	(²)	100	April	1980 (C)
		Buffalo	Outpatient Clinic Expansion	5,717,326	(²)	100	November	1979 (C)
		Buffalo	Additional Parking	74,331	(²)	100	May	1980 (C)
		Buffalo	Sub-Divide 16 Bed Ward Rooms	312,521	(²)	100	October	1979 (C)
		Buffalo	Renovate Surgery	159,991	(²)	100	February	1980 (C)
		Buffalo	Smoke Barriers	411,549	(²)	100	May	1980 (C)
		Buffalo	Reverse Door Swings	187,045	(²)	100	October	1979 (C)
		Canandaigua	Deadend Corridor Stairs	409,860	(²)	100	March	1980 (C)
		Montrose	Emergency Gen. & Corr. or Elect. Defic.	908,468	(²)	100	October	1979 (C)
		Montrose	Storm Windows	119,118	(²)	100	February	1980 (C)
		New York	Relocate Medical ICU and Coronary Care Unit	491,627	(²)	100	December	1979 (C)
		Syracuse	Research Consolidation	230,468	(²)	100	January	1980 (C)
		Syracuse	Smoke Barriers	231,970	(²)	100	March	1980 (C)
	Ohio	Chillicothe	Emergency Power Distribution	488,267	(²)	100	September	1980 (C)
		Cincinnati	Remodel Main Kitchen	388,099	(²)	100	March	1980 (C)
		Cleveland	Sprinkler System	324,761	(²)	100	July	1980 (C)
		Cleveland	Expand Radiology	304,446	(²)	100	September	1980 (C)
		Dayton	Emerg. Gen. B-409 & 410	159,197	(²)	100	April	1980 (C)
	Oklahoma	Muskogee	Upgrade Electrical System	743,252	(²)	100	July	1980 (C)
	Oregon	Portland	Upgrade Hemodialysis	189,042	(²)	100	May	1980 (C)
		Roseburg	Remodel Ward #4N - Bldg. 1	404,494	(²)	100	June	1980 (C)
		Roseburg	Emergency Generator & Electrical Defic.	1,009,613	(²)	100	May	1980 (C)
		White City	Renovate Bldg. 214 North	287,791	(²)	100	May	1980 (C)
	Pennsylvania	Erie	Emergency Generator System	435,357	(²)	100	October	1979 (C)
		Philadelphia	10 Bed Surgical Intensive Care Unit	329,767	(²)	100	August	1980 (C)
		Pittsburgh	Install Load Mgt. & Temp. Control (Ph-2)	193,949	(²)	100	October	1979 (C)
		Wilkes Barre	Expand & Modernize Dental	423,671	(²)	100	October	1979 (C)
	Rhode Island	Providence	OPC/Admission Consolidation & Pathology	3,071,815	(²)	100	March	1980 (C)
	South Carolina	Charleston	Renovate Radiology	78,000	(²)	100	March	1980 (C)

See footnotes at end of table.

**Other Improvement Construction Projects,¹ Fiscal Year 1980 - Completions
And Year End Status-Continued**

Location		Description	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A)	
South Dakota	Ft. Meade	Relocate Pad	184,384	(²)	100	January 1980	(C)
	Hot Springs	New Passenger Elevator, Bldg. #2	443,575	(²)	100	October 1979	(C)
	Sioux Falls	Expand Radiology Phase 1	69,000	(²)	100	March 1980	(C)
Tennessee	Mountain Home	Emergency Generator & Corr. of Elect. Def.	129,956	(²)	100	October 1979	(C)
	Mountain Home	Excavate Basement Building #34	422,656	(²)	100	June 1980	(C)
	Murfreesboro	Relocation of SPD	172,042	(²)	100	March 1980	(C)
Texas	Murfreesboro	Fire Alarm System and Smoke Doors	394,671	(²)	100	July 1980	(C)
	Murfreesboro	Ward Partitions	342,172	(²)	100	November 1979	(C)
	Dallas	Emergency Power	399,263	(²)	100	February 1980	(C)
	Kerrville	Additional Exits for Surgery	246,194	(²)	100	January 1980	(C)
	Kerrville	Emergency Generator & Electrical Defic.	620,618	(²)	100	June 1980	(C)
	Marlin	Student Quarters	175,983	(²)	100	June 1980	(C)
	San Antonio	Connecting Passageway	390,631	(²)	100	September 1980	(C)
	San Antonio	Expand Outpatient	203,488	(²)	100	February 1980	(C)
	Temple	10 Bed Coronary Care Unit	592,137	(²)	100	May 1980	(C)
	Waco	Deadend Corridor Stairs Bldgs. #9,90&91	5,028	(²)	100	May 1980	(C)
	Waco	Boiler Plant Replacement	1,406,363	(²)	100	December 1979	(C)
	Waco	Deadend Corridor Stairs Bldg. #9,90&91	447,608	(²)	100	April 1980	(C)
Utah	Waco	Deadend Corridor Stairs Bldg. #9,90&91	5,322	(²)	100	April 1980	(C)
	Salt Lake	Deadend Corridor Stairs	98,787	(²)	100	March 1980	(C)
	Salt Lake	Seismic Corrections Bldgs. #1 thru 5	5,846,107	(²)	100	October 1979	(C)
Virginia	Salem	New Clinical Building	2,602,729	(²)	100	November 1979	(C)
Vermont	White River	Pre-Engineered Engineering Building	566,454	(²)	100	March 1980	(C)
	White River	Expand Surgical ICU & Recovery Unit	597,138	(²)	100	September 1980	(C)
	White River	Sanitary Sewage Treatment Facilities	170,616	(²)	100	March 1980	(C)
Washington	American Lake	Additional Exits	1,024,985	(²)	100	June 1980	(C)
	Seattle	Research - Bldg #8	214,500	(²)	100	December 1979	(C)
	Spokane	Deadend Corridor Stairs	285,410	(²)	100	July 1980	(C)
Wisconsin	Madison	Install Windows Building	122,500	(²)	100	April 1980	(C)
	Wood	Relocate Clinic Files	346,994	(²)	100	August 1980	(C)
West Virginia	Clarksburg	Educ./Trng. Classroom	109,570	(²)	100	March 1980	(C)
Wyoming	Clarksburg	Renov. Wd. 8-Patient Privacy	357,856	(²)	100	January 1980	(C)
	Sheridan	Temporary Laboratory	166,244	(²)	100	March 1980	(C)
	Sheridan	Emergency Generator & Electrical Defic.	663,443	(²)	100	April 1980	(C)
B. Projects Under Construction, Total			335 Projects	278,929,840	138,230,108	50	
Projects \$1,000,000 and Over, Total			36 Projects	167,663,254	77,020,228	46	
Alabama	Birmingham	Blind & Low Vision Center & Eye Clinic	4,209,000			June 1980	(A)
	Tuscaloosa	Safety & Fire Deficiencies	1,520,635			September 1980	(A)
	Tuskegee	Ambulatory Care Addition	2,918,536			September 1980	(A)
California	Fresno	Outpatient Clinic Addition	3,716,252	2,796,226		September 1980	(A)
	Palo Alto	Emergency Generator & Update Power Sys.	1,500,171	1,353,443	90	June 1979	(A)
	Palo Alto	Update Electrical Power Sys.	1,003,520	755,162	75	June 1979	(A)
Dist. of Columbia	Washington	Ambulatory Care Addition & Renovation	3,925,923			August 1980	(A)
Georgia	Augusta	Dining and Food Preparation Facility	3,496,089	3,139,089	90	December 1978	(A)
	Augusta	New Boiler and Steam Distribution	3,049,625	2,612,027	86	February 1979	(A)
	Knoxville	Emergency Gen. & Electrical Defic.	1,211,413	1,137,484	94	September 1979	(A)
Illinois	Chicago	Correction of Electrical Defic.	1,180,000			September 1980	(A)
	North Chicago	Electrical Distribution	2,644,219	1,843,197	70	September 1979	(A)
	Indianapolis	Clinical Improvements & Education	9,563,999	9,422,353	98	July 1978	(A)
Kentucky	Louisville	Renovate OR Rooms	1,584,520			July 1980	(A)
Maryland	Perry Point	Correction of Electrical Defic.	9,916,950	9,859,195	99	May 1977	(A)
Mississippi	Biloxi	Renovation of Building #2	4,349,000	353,009	8	June 1980	(A)
	Jackson	Update RO Space for OPC	3,381,674	2,930,140	87	January 1979	(A)
	Grand Island	Emergency Gen. & Electrical Defic.	1,017,993	365,043	36	September 1979	(A)
New Jersey	East Orange	Emergency Gen. & Corr. Elect. Defic.	2,010,153	1,999,271	98	March 1977	(A)
Nevada	Reno	Clinical Addn.; Utility Improv. Boiler Pt.	12,255,315	9,749,944	80	November 1978	(A)
New York	Canandaigua	Safety & Fire Defic	7,294,400			September 1980	(A)
	Castle Point	Upgrade Primary Distr. Sys.	7,584,000			September 1980	(A)
	New York	Safety & Fire Defic.	4,314,000			September 1980	(A)
Ohio	Syracuse	Correction of Electrical Defic.	1,019,673	781,435	77	November 1978	(A)
	Dayton	Clinical Addition	9,074,775	8,104,143	89	April 1978	(A)
	Charleston	Correction of Seismic Defic.	8,584,000			September 1980	(A)
South Carolina	Sioux Falls	New Boiler Plant	2,180,694	1,236,969	57	September 1979	(A)
South Dakota	Murfreesboro	Remodel Ward 5A and 5B	1,332,321			September 1980	(A)
Tennessee	Nashville	Ambulatory Care, Research & Educ. Addn.	11,681,536	5,797,094	49	January 1979	(A)
	Dallas	Ambulatory Care Addn. & Renovation	5,697,821	290,934	5	July 1980	(A)
	Salt Lake	Clinic & Amb. Care, Addn. Lab Addn & R&E	20,868,233	5,645,617	27	September 1979	(A)
Virginia	Salem	Emergency Electrical Power Sys.	1,412,622	807,580	57	September 1979	(A)
Vermont	White River Jct.	Ambulatory Care Addition	3,292,005	1,013,005	31	September 1979	(A)
Wisconsin	Madison	2nd Emergency Distr. & Generator	1,017,900			September 1980	(A)
	Wood	Emergency Generator & Electrical Defic.	1,228,816	1,150,600	94	September 1979	(A)
	Huntington	Addition to Bldg. #1 (Ph 1)	6,625,471	3,877,268	58	March 1978	(A)
Projects Under \$1,000,000, Total			299 Projects	111,266,586	61,209,880	55	

See footnotes at end of table.

**Other Improvement Construction Projects,¹ Fiscal Year 1980—Completions
And Year End Status**

Location	Description	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A)
C. Projects Not Under Construction, Total	173 Projects	373,707,530			
Projects \$1,000,000 and Over, Total	74 Projects	328,538,660			
Alabama : Tuskegee	Primary Distr. & 2nd Distr. Sys.	1,790,000			
Arkansas : Fayetteville	Renovate Building #4	1,143,000			
California : Fresno	Correct Seismic Defic.	4,350,000			
California : Livermore	Remodel 5th Floor Wards - Bldg. #62	1,575,000			
California : Los Angeles	Remodel Building #209 - Psy	2,197,000			
California : Palo Alto	Surgical Addition	14,300,000			
California : Palo Alto	Deadend Corridor Stairs	4,000,000			
California : Palo Alto	Two Additional Elevators	1,132,000			
California : Sepulveda	Safety & Fire Deficiencies	4,450,000			
Colorado : Denver	Safety & Fire Deficiencies	1,229,000			
Colorado : Denver	Clinical Support Wing Mod.	40,412,000			
Florida : Gainesville	Clinical Improv. & Research & Educ. Ph2	17,244,160			
Florida : Tampa	Two Elevators	1,076,000			
Florida : Miami	Relocate Surgical Intensive Care	1,407,000			
Florida : Miami	Outpatient Addn./Renov. & Sci Relocation	21,389,000			
Georgia : Atlanta	Warehouse & Engineering Office	1,650,000			
Georgia : Atlanta	Ambulatory Care Addition	7,294,000			
Georgia : Augusta	Safety & Fire Defic.	1,129,000			
Georgia : Dublin	Renovate Wards Bldg. #17	1,420,000			
Iowa : Des Moines	Ambulatory Care Addition & Renovation	3,749,000			
Iowa : Iowa City	Safety & Fire Defic.	2,155,000			
Iowa : Knoxville	Safety & Fire Defic.	1,054,000			
Idaho : Boise	Renovate Wards 2 & 4 Bldg. #67	2,047,000			
Illinois : Hines (DPC)	Emergency Generators	1,263,000			
Illinois : Hines	New Central Incinerator	1,777,000			
Illinois : Hines	Supply Depot Expansion, Bldg. #37	6,274,000			
Illinois : North Chicago	Replace/Upgrade Fire Alarm Sys.	1,015,000			
Illinois : North Chicago	Sprinkler Systems	3,084,100			
Massachusetts : Boston	Secondary Gen. & Update Wiring	2,550,000			
Maryland : Perry Point	New Clinical Administration Bldg.	1,510,000			
Maine : Togus	Safety & Fire Defic.	1,638,000			
Michigan : Allen Park	Expand/Renovate Lab	1,175,000			
Michigan : Battle Creek	Safety & Fire Defic.	1,165,000			
Michigan : Battle Creek	Replace Administration Bldg.	2,705,000			
Missouri : Kansas City	A-O-V Systems	1,603,000			
Missouri : St. Louis	Safety & Fire Defic.	1,223,000			
Missouri : St. Louis	Safety & Fire Defic.	1,135,600			
Missouri : St. Louis	New Ambulatory Care Bldg.	1,590,000			
Mississippi : Biloxi (BD)	Clinical Addition & Outpatient	18,855,000			
Nevada : Reno	New Laundry	2,155,000			
New York : Albany	Patient Support System "AOV"	3,500,000			
New York : Albany	Update Primary Distribution (Ph-3)	1,657,000			
New York : Albany	Radiation Therapy	2,140,000			
New York : Bath	Ambulatory Care Addition B-76	4,029,000			
New York : Brooklyn	Medical Gas System	2,768,200			
New York : Buffalo	Renovate SPD	2,069,000			
New York : Castle Point	Relocate and Replace Boiler Plant	2,634,000			
New York : Northport	Safety & Fire Deficiencies	3,352,000			
New York : St. Albans	Primary Distr. & 2nd Generator Systems	1,666,100			
New York : St. Albans	Laundry Consolidation	5,821,000			
New York : Syracuse	Improvements to Outpatient Clinic	1,520,000			
Ohio : Chillicothe	Elimination of Exit Deficiencies	1,727,000			
Ohio : Cincinnati	Correction of Fire & Safety Defic.	1,288,000			
Ohio : Cincinnati	Clinical Expansion & Relocation	8,681,000			
Ohio : Cincinnati	Two Additional Elevators	1,454,000			
Ohio : Dayton	Consolidate Kitchen Bldgs. # 300 & 411	1,133,000			
Oklahoma : Oklahoma	Clinical Addn./Modern./Corr. Seismic Def.	31,913,000			
Oregon : Roseburg	Elevators	1,409,000			
Oregon : White City	Renovate/Consolidate R.M.S.	1,292,000			
Pennsylvania : Altoona	Ambulatory Care Addition	9,000,000			
Pennsylvania : Philadelphia	Clinical Improvements	1,198,000			
Pennsylvania : Philadelphia	Safety and Fire Deficiencies	7,091,000			
Pennsylvania : Wilkes Barre	Three Additional Elevators	2,200,000			
Puerto Rico : San Juan	Update RO Space for Outpatient Clinic	4,237,000			
South Carolina : Columbia	Renovate Building #22 (Admin)	1,322,000			
Tennessee : Mountain Home	Clinical Addition	9,145,000			
Tennessee : Murfreesboro	Renovate Wards 6A and 6B	2,935,000			
Tennessee : Murfreesboro	Safety & Fire Deficiencies	3,821,000			
Texas : Houston	Correct Electrical Deficiencies	2,421,800			
Texas : San Antonio	Sprinkler System Horizontal Exit	4,619,000			
Virginia : Hampton	SCI Unit	3,664,000			
Virginia : Salem	Safety & Fire Deficiencies	3,988,400			
Washington : Salem	Renovate Bldg. #76 for Intermediate Care	2,198,500			
Washington : American Lake	Renovate Wards - Bldg #7	1,735,000			
Projects Under \$1,000,000, Total	99 Projects	45,168,870			

¹ Projects included in table if approved for development by Administrator's Office or if there has been an appropriation of funds available for financing all or part of the project.

² Same as value of construction issued or awarded when projects financially complete.

³ For Purchase & Hire Projects, the date the station reports construction started.

National Cemetery Projects,¹ Fiscal Year 1980—Completions and Year End Status

Location	Description	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A)
TOTAL	45 Projects	55,762,835	9,368,270	17	
A. Projects Completed, Total	5 Projects	1,736,103	1,736,103	100	
California : Ft. Rosecrans	Lawn Watering System	792,472	(²)	100	May 1980 (C)
Illinois : Golden Gate	Lawn Watering Sys. Remaining 40 Acres	251,117	(²)	100	November 1979 (C)
Illinois : Camp Butler	10 Acre Development	200,121	(²)	100	May 1980 (C)
Puerto Rico : Rock Island	Water Lines	154,083	(²)	100	May 1980 (C)
Puerto Rico : Puerto Rico	Service Bldg. & Comfort Station	338,310	(²)	100	January 1980 (C)
B. Projects Under Construction, Total	14 Projects	15,760,932	7,632,167	48	
Projects \$1,000,000 and Over, Total	6 Projects	12,026,745	6,719,779	56	
California : Riverside	Develop 45 Acres	2,187,116			September 1980 (A)
Colorado : Ft. Logan	Develop 35 Acres	1,877,945	552,628	29	June 1980 (A)
Massachusetts : Massachusetts	Develop 20 Acres/Const. Adm. & Svc. Bldg.	2,801,928	2,789,428	99	June 1979 (A)
New York : Calverton	Develop 50 Acres (Phase 1)	2,767,424	1,753,750	63	December 1979 (A)
Oregon : Willamette	20 Acre Development & Service Building	1,144,212	706,126	62	May 1980 (A)
Tennessee : Chattanooga	5 Acre Development & Additional Facility	1,248,120	917,847	74	January 1980 (A)
Projects Under \$1,000,000, Total	8 Projects	3,734,187	912,388	24	
C. Projects Not Under Construction, Total	26 Projects	38,265,800			
Projects \$1,000,000 and Over, Total	10 Projects	29,923,000			
Hawaii : National Memorial Cemetery	Columbarium on Crater Rim	1,558,000			
Hawaii : National Memorial Cemetery	Admin. Bldg/Memorial Ctr/Parking Struc.	2,387,000			
Massachusetts : Massachusetts	Develop 32 Acres Phase 2	1,998,000			
Michigan : Federal Region #5	Develop 50 Acres/Admin. & Service Bldg.	3,350,000			
Minnesota : Ft. Snelling	Admin. Bldg. & Service Building	3,646,000			
New York : Calverton	Admin. Bldg. & Committal Service Complex	2,223,000			
Pennsylvania : Calverton	Develop 25 Acres & Service Building	2,248,000			
Pennsylvania : Indiantown Gap	Develop 63 Acres and Addtl. Facilities	4,665,000			
Pennsylvania : Indiantown Gap	Develop 20 Acres/Const. Adm. & Svc. Bldg.	3,473,000			
Virginia : Quantico	Develop 20 Acres/Const. Adm. & Svc. Bldg/Ph	4,375,000			
Projects Under \$1,000,000, Total	16 Projects	8,342,800			

¹ Projects in table include those approved by the Administrator and those in some stage of design for construction for which funds have been approved.

² Same as value of construction issued or awarded when project is financially complete.

Domiciliary Construction Projects,¹ Fiscal Year 1980—Completions and Year End Status

Location	Projects	Number of Nursing Home Care Beds	Estimated Construction Cost	Value of Work in Place	Percent Complete	Date Construction Completed (C) or Contract Awarded (A) ³
TOTAL	3 Projects	608	24,491,066	5,264,110	21	
A. Projects Completed, Total	0 Projects	0	0	0	0	
B. Projects Under Construction, Total	1 Project	200	7,165,066	5,264,110	73	
Projects \$1,000,000 and Over, Total	1 Project	200	7,165,066	5,264,110	73	
Ohio : Dayton		200	7,165,066	5,264,110	73	March 1979 (A)
Projects Under \$1,000,000, Total	0 Project	0	0	0	0	
C. Projects Not Under Construction, Total	2 Projects	408	17,326,000			
Projects \$1,000,000 and Over, Total	2 Projects	408	17,326,000			
New York : Bath		208	8,993,000			
Virginia : Hampton		200	8,333,000			
Project Under \$1,000,000, Total	0 Project	0	0			

¹ Projects included in table if approved for development by Administrator's Office or if there has been an appropriation of funds available for financing all or part of the project.

² Same as value of construction issued or awarded when project is financially complete.

³ For Purchase & Hire Projects, the date the station reports construction started.

TABLE 54

Incompetent and Minor Beneficiaries Served

Fiscal Year	Total Beneficiaries	Incompetent Adults				Minors		
		Total	Type of Fiduciary			Total	Type of Fiduciary	
			State Court Appointed Fiduciaries	Federal Fiduciaries	Supervised Direct Payment ¹		State Court Appointed	Federal Fiduciaries
1980	138,797	114,905	40,917	69,930	6,058	23,892	5,490	18,402
1979	143,286	115,933	42,890	67,283	5,760	27,353	7,022	20,331
1978	145,891	115,187	44,759	65,029	5,399	30,704	9,184	21,520
1977	149,843	114,262	46,960	62,258	5,044	35,581	11,685	23,896
T.O. 9/30/76	144,997	105,191	48,850	51,803	4,538	39,806	15,044	24,762
1976	141,218	100,044	49,208	46,505	4,331	41,174	16,154	25,020
1975	146,471	97,272	52,662	40,995	3,615	49,199	21,971	27,228
1974	177,950 ²	107,636	58,328	46,618	2,690	70,314	33,856	36,458 ²
1973	669,028	115,495	61,399	52,251	1,845	583,533	43,857	539,676
1972	730,532	114,092	64,635	48,740	717	616,440	53,941	562,499
1971	770,972	114,751	68,087	46,664	656,221	63,738	592,483

¹ This type payment first authorized in fiscal year 1972.² Decrease is due to discontinuance of supervision over cases where payment on behalf of the minor is made to a parent, or other responsible family member.

TABLE 55

Death: Special Acts, Class of Beneficiary, Period of Service—Sept. 1980

Class of Beneficiary	Total			Regular Establishment		Civil War		Spanish-American War	
	Number	Monthly Value	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total cases	17	288	16.94	8	14.25	3	20.00	6	19.00
Surviving Spouse alone	10	162	16.24	8	14.25	2	24.21
Surviving Spouse and children
Children alone	7	126	17.94	3	20.00	4	16.40
Total dependents	17	8	3	6
Surviving Spouses	10	8	2
Children	7	3	4

National Cemeteries—Location, Interments, and Status of Gravesites
September 30, 1980

National Cemetery	FY 1980 Interments	Cumulative Gravesites Used	Gravesites Reserved	Gravesites ¹ Available	Close-out Date ² (Fiscal Year)
Alexandria, LA	112	6,161	26	521	1987
Alexandria, VA	5	4,062	154	0	CLOSED
Alton, IL	1	489	38	6	CLOSED
Annapolis, MD	3	2,917	36	2	CLOSED
Balls Bluff, VA	0	25	0	0	CLOSED
Baltimore, MD	412	33,808	3,546	905	CLOSED
Barrancas, FL	631	12,534	593	4,075	1988
Bath, NY	150	8,711	0	1,558	1987
Baton Rouge, LA	8	5,017	59	177	CLOSED
Bay Pines, FL	9	4,224	1	1	CLOSED
Beaufort, SC	142	11,442	179	5,642	2000+
Beverly, NJ	382	36,283	4,299	7	CLOSED
Biloxi, MS	209	2,463	351	11,675	2000+
Black Hills, SD	354	6,072	472	55,202	2000+
Calverton, NY	6,756	12,988	0	358,177	2000+
Camp Butler, IL	281	8,340	330	8,042	2000+
Camp Nelson, KY	146	5,877	68	4,733	2000+
Cave Hill, KY	2	5,634	3	25	CLOSED
Chattanooga, TN	468	23,904	600	27,327	2000+
City Point, VA	18	5,480	83	36	CLOSED
Cold Harbor, VA	7	968	0	4	CLOSED
Corinth, MS	20	6,233	24	7,259	2000+
Crown Hill, IN	0	795	0	0	CLOSED
Culpeper, VA	324	4,600	17	5,410	1998
Cypress Hills, NY	34	18,561	61	82	CLOSED
Danville, IL	80	6,186	0	3,771	2000+
Danville, KY	0	393	1	5	CLOSED
Danville, VA	8	2,137	30	39	CLOSED
Dayton, OH	438	24,995	2	13,409	2000+
Fayetteville, AR	86	3,354	123	286	1983
Finn's Point, NY	0	2,703	2	0	CLOSED
Florence, SC	78	4,481	72	213	1982
Ft. Bayard, NM	36	1,858	0	750	2000+
Ft. Bliss, TX	778	14,869	1,265	19,935	2000+
Ft. Gibson, OK	229	7,513	143	11,276	2000+
Ft. Harrison, VA	32	1,107	2	16	CLOSED
Ft. Leavenworth, KS	490	17,596	626	827	1982
Ft. Logan, CO	1,594	24,244	796	81,396	2000+
Ft. Lyon, CO	27	925	0	25,631	2000+
Ft. McPherson, NE	96	3,554	101	5,600	2000+
Ft. Meade, SD	0	188	0	27	CLOSED
Ft. Rosecrans, CA	478	44,141	2,397	50	CLOSED
Ft. Sam Houston, TX	1,831	37,937	3,296	22,158	1995
Ft. Scott, KS	89	2,984	103	2,923	2000+
Ft. Smith, AR	184	5,479	233	3,094	2000+
Ft. Snelling, MN	3,016	69,812	14,498	149,266	2000+
Glendale, VA	14	1,308	0	3	CLOSED
Golden Gate, CA	928	97,200	8,814	0	CLOSED
Grafton, WV	2	2,079	50	2	CLOSED
Hampton, VA	52	20,919	497	227	CLOSED
Hampton, VA (VAC)	0	22	0	0	CLOSED
Hot Springs, SD	0	1,481	0	1	CLOSED
Houston, TX	1,152	12,018	36	205,444	2000+
Indiantown Gap	0	0	0	295,137	OPEN 1983
Jefferson Barracks, MO	2,423	62,693	2,532	69,618	2000+
Jefferson City, MO	10	1,555	72	12	CLOSED
Keokuk, IA	56	2,531	65	10,276	2000+
Kerrville, TX	0	460	0	0	CLOSED
Knoxville, TN	30	7,335	252	181	CLOSED
Leavenworth, KS	258	13,742	2	31,948	2000+
Lebanon, KY	21	1,989	33	64	2000+
Lexington, KY	0	1,388	0	9	CLOSED
Little Rock, AR	365	15,747	346	1,832	1986
Long Island, NY	2,848	233,430	13,666	6,809	CLOSED
Los Angeles, CA	539	66,585	695	709	CLOSED
Loudon Park, MD	14	6,491	5	126	CLOSED
Marietta, GA	51	16,281	436	124	CLOSED
Marion, IN	94	4,591	0	7,374	2000+
Massachusetts	0	0	0	210,500	2000+
Memphis, TN	726	28,983	641	4,497	1988
Mill Springs, KY	30	1,732	34	589	2000+
Mobile, AL	16	3,582	275	15	CLOSED
Mound City, IL	38	6,769	75	1,068	2000+
Mountain Home, TN	174	6,048	0	7,723	2000+
Nashville, TN	452	25,046	430	5,769	1995
Natchez, MS	64	4,907	59	266	1986
Nat. Memorial Cemetery of the Pacific, HI	627	26,600	675	850	1982 ³
New Albany, IN	7	4,934	168	213	CLOSED
New Bern, NC	103	5,281	100	364	1983
Philadelphia, PA	38	10,367	41	15	CLOSED
Port Hudson, LA	113	6,231	32	930	1989

Prescott, A
Puerto Rico
Quintaco,
Quincy, IL
Raleigh, N
Richmond
Riverside,
Rock Island
Roseburg,
St. August
Salisbury,
San Antonio
San Francisco
Santa Fe,
Seven Pin
Sitka, AK
Springfield
Staunton
Togus, M
White Cl
Willamette
Winning
Winchester
Wood, W
Woodlawn
Zachary

Total

¹ Includes
cremate
² Most c
eligible.

See footnotes at end of table.

National Cemeteries—Location, Interments, and Status of Gravesites
September 30, 1980

National Cemetery	FY 1980 Interments	Cumulative Gravesites Used	Gravesites Reserved	Gravesites ¹ Available	Close-out Date ² (Fiscal Year)
Prescott, AZ	26	2,965	0	1	CLOSED
Puerto Rico, PR	760	12,223	1,410	31,136	2000+
Quantico, VA	0	0	0	180,300	OPEN 1983
Quincy, IL	1	457	1	120	2000+
Raleigh, NC	127	3,741	89	1,516	1991
Richmond, VA	41	7,219	269	11	CLOSED
Riverside, CA	3,814	7,370	0	174,795	2000+
Rock Island, IL	351	10,670	294	3,978	1994
Roseburg, OR	112	2,262	0	100	1981
St. Augustine, FL	5	1,159	24	0	CLOSED
Salisbury, NC	99	14,289	73	1,224	1993
San Antonio, TX	1	3,007	29	197	CLOSED
San Francisco, CA	93	22,806	718	3	CLOSED
Santa Fe, NM	647	12,038	455	10,006	2000
Seven Pines, VA	14	1,130	1	4	CLOSED
Sitka, AK	26	612	1	73	1982
Springfield, MO	251	7,293	241	709	1984
Staunton, VA	3	841	7	12	CLOSED
Togus, ME	0	5,371	0	0	CLOSED
White City, OR	120	1,458	0	22,188	2000+
Willamette, OR	2,382	51,236	2,367	42,538	2000+
Wilmington, NC	106	4,321	68	330	1983
Winchester, VA	9	5,046	39	33	CLOSED
Wood, WI	757	20,434	1	1,781	1988
Woodlawn, NY	19	6,251	239	31	CLOSED
Zachary Taylor, KY	67	8,365	1,154	176	CLOSED
Totals	41,120	1,416,933	72,141	2,165,495	

¹ Includes estimated gravesites in undeveloped areas and gravesites suitable for cremated remains.

² Most cemeteries indicated as "Closed" will continue to make interments of eligible family members in occupied gravesites and previously reserved gravesites.

³ 1982 casketed remains and 2000+ cremated remains.

NOTE: Above listing of 107 national cemeteries does not include planned cemeteries in Standard Federal Regions IV and V.

Disability, Death: Number of Cases, Amount, Period of Service

Period of Service	Number of Cases Sept. 1980	Average Annual Expenditure Per Case		Total Expenditures (in Thousands)	
		Sept. 1979	Sept. 1980	Fiscal Year 1980	Cumulative Through Sept. 1980
Grand total	4,646,180	2,116.50	2,369.71	11,045,412	176,437,239
Living veterans	3,195,395	2,331.13	2,599.80	8,330,722	
Service connected	2,273,589	2,431.00	2,668.99	6,103,643	
Retired Reserve or Emergency Officers	183	6,326.78	6,650.76	1,225	514,475
Non-service connected	921,602	2,097.78	2,428.31	2,227,079	
Special acts	21	224.00	236.57	5	
Deceased veterans	1,450,785	1,661.71	1,862.93	2,714,690	
Service connected	357,971	3,409.95	3,801.32	1,345,603	
Non-service connected	1,092,797	1,121.65	1,227.98	1,369,088	
Special acts	17	236.84	203.29	7	
Civil War	192	1,204.84	1,150.81	233	8,222,826
Deceased veterans	192	1,204.84	1,150.81	233	
Service connected	5	3,842.00	3,792.00	25	
Non-service connected	184	1,144.43	1,093.90	208	
Special acts	3	240.00	240.00		
Indian wars	45	1,268.33	1,210.40	55	119,019
Deceased veterans	45	1,268.33	1,210.40	55	58,593
Service connected		2,868.00			
Non-service connected	45	1,235.00	1,210.40	55	
Spanish-American War	13,308	1,323.32	1,439.81	19,150	5,259,210
Living veterans	138	2,739.96	2,948.09	407	3,372,400
Service connected	3	4,272.00	4,744.00	21	
Non-service connected	135	2,717.65	2,908.18	386	
Deceased veterans	13,170	1,303.51	1,424.00	18,743	1,886,810
Service connected	137	4,017.46	4,386.31	613	
Non-service connected	13,027	1,276.38	1,393.40	18,130	
Special acts	6	219.00	228.00		
Mexican border service	725	1,226.27	1,382.78	1,025	9,855
Living veterans	196	2,049.60	2,412.98	518	5,791
Service connected	5	1,200.00	3,187.20	47	694
Non-service connected	191	2,069.36	2,392.72	471	5,076
Deceased veterans	529	904.54	1,001.08	507	4,030
Service connected	2	3,860.00	4,404.00	9	85
Non-service connected	527	888.71	988.16	498	3,945
World War I	692,166	1,543.60	1,682.81	1,177,923	45,277,637
Living veterans	197,711	2,395.45	2,669.33	537,089	31,054,698
Service connected	29,720	3,126.37	3,403.07	102,576	10,160,268
Retired emergency officers	182	6,318.48	6,640.68	1,213	188,735
Non-service connected	167,808	2,264.10	2,535.08	433,300	20,705,696
Special acts	1	120.00	120.00		
Deceased veterans	494,455	1,168.66	1,288.34	640,834	14,222,339
Service connected	30,128	3,857.04	4,241.03	129,329	3,454,826
Non-service connected	464,327	998.12	1,096.75	511,505	10,768,113
World War II	2,519,956	2,054.27	2,307.12	5,806,050	83,091,051
Living veterans	1,849,597	2,198.15	2,461.99	4,558,392	63,662,000
Service connected	1,193,196	2,301.38	2,535.52	3,047,037	50,219,838
Non-service connected	656,401	2,013.73	2,328.32	1,511,355	13,442,162
Deceased veterans	670,359	1,668.59	1,879.82	1,247,658	19,429,050
Service connected	173,286	3,087.96	3,465.11	575,369	10,967,229
Non-service connected	497,073	1,196.79	1,327.18	672,289	8,461,821
Korean conflict	445,611	2,387.19	2,691.16	1,217,216	13,219,874
Living veterans	316,672	2,640.92	2,976.61	948,248	9,913,897
Service connected	235,654	2,743.55	3,013.14	717,772	8,534,438
Non-service connected	81,018	2,337.73	2,870.36	230,476	1,379,459
Deceased veterans	128,939	1,805.17	1,990.10	268,968	3,305,977
Service connected	39,186	3,198.34	3,566.92	141,418	1,889,162
Non-service connected	89,753	1,253.64	1,301.66	127,550	1,416,815
Regular establishment	311,657	2,858.62	3,079.73	961,411	9,496,686
Living veterans	261,706	2,633.71	2,827.98	739,153	6,790,367
Service connected	261,685	2,633.97	2,828.18	739,135	
Retired reserve officers	1	8,004.00	8,484.00	12	325,741
Special acts	20	228.52	242.40	5	
Deceased veterans	49,951	3,956.76	4,398.67	222,258	2,706,319
Service connected	49,943	3,957.36	4,399.36	222,251	
Special acts	8	253.50	171.00	7	
Vietnam era	662,520	2,533.52	2,795.32	1,862,350	11,546,599
Living veterans	569,375	2,451.54	2,708.80	1,546,916	9,397,565
Service connected	553,326	2,451.82	2,695.54	1,495,831	9,189,589
Non-service connected	16,049	2,441.55	3,165.77	51,085	207,976
Deceased veterans	93,145	3,020.67	3,324.25	315,434	2,149,035
Service connected	65,284	3,787.68	4,172.77	276,589	1,912,811
Non-service connected	27,861	1,319.56	1,336.01	38,845	236,224

Disability, Age Group, Period of Service — Sept. 1980

Age Group	Grand Total			World War I			World War II		
	Total ³	Service-Connected	Non-Service-Connected	Total	Service-Connected	Non-Service-Connected	Total	Service-Connected	Non-Service-Connected
Average age	57.3	53.4	66.5	85.4	84.9	87.0	62.2	62.7	64.0
Total veterans	3,195,354	2,273,589	921,566	197,529	29,721	167,808	1,849,605	1,193,202	656,403
Under 20	157	157							
20 to 24	23,351	23,164	187						
25 to 29	84,441	82,213	2,228						
30 to 34	242,912	235,878	7,034						
35 to 39	122,715	117,651	5,064						
40 to 44	101,883	97,195	4,688						
45 to 49	214,144	177,348	36,796						
50 to 54	327,132	239,460	87,672				123,654	71,824	51,830
55 to 59	670,999	512,299	158,700				604,018	448,724	155,294
60 to 64	590,635	426,398	164,237				541,789	378,549	163,240
Under 65	2,378,369	1,911,763	466,606				1,269,461	899,097	370,364
65 to 69	342,469	206,447	136,022				320,702	185,233	135,469
70 to 74	198,011	95,655	102,356				188,449	86,303	102,146
75 to 79	58,399	21,434	36,965	1,649	263	1,386	51,977	16,447	35,530
80 to 84	95,690	20,553	75,096	76,156	13,504	62,652	17,414	5,023	12,391
85 to 89	102,799	15,183	87,492	100,812	13,833	86,979	1,283	859	424
90 to 94	18,599	2,273	16,294	18,220	1,988	16,232	184	145	39
95 and over	1,018	281	735	692	133	559	135	95	40
65 and over	816,985	361,826	454,960	197,529	29,721	167,808	580,144	294,105	286,039

Age Group	Korean Conflict			Vietnam Era			Regular Estab- lishment	Spanish- American War ¹	Mexican Border Service ¹	R.E.O. and R.R.O. ²
	Total	Service-Connected	Non-Service-Connected	Total	Service-Connected	Non-Service-Connected				
Average age	51.4	51.9	49.9	37.8	37.8	34.1	45.8	100.1	86.7	87.4
Total veterans	316,673	235,654	81,019	569,376	553,327	16,049	261,685	137	150	199
Under 20							157			
20 to 24				4,088	3,901	187	19,263			
25 to 29				65,069	62,841	2,228	19,372			
30 to 34				236,533	229,499	7,034	6,370			
35 to 39				95,736	90,672	5,064	26,979			
40 to 44	6,229	2,794	3,435	36,545	35,292	1,253	59,109			
45 to 49	123,184	86,574	36,610	46,723	46,537	186	44,237			
50 to 54	132,515	96,729	35,786	39,974	39,918	56	30,989			
55 to 59	26,157	22,771	3,386	23,483	23,463	20	17,341			
60 to 64	15,430	14,443	987	15,344	15,344	10	18,072			
Under 65	303,515	223,311	80,204	563,495	547,457	16,038	241,898			
65 to 69	7,557	7,011	546	4,795	4,788	7	9,415			
70 to 74	3,511	3,303	208	882	880	2	5,169			
75 to 79	1,310	1,262	48	193	192	1	3,270			
80 to 84	549	544	5	11	10	1	1,472			
85 to 89	209	203	6				288		47	41
90 to 94	17	15	2				125		3	124
95 and Over	5	5					48		18	32
65 and over	13,158	12,343	815	5,881	5,870	11	19,787	134	2	2

¹Service connected and non-service connected are combined in S.A.W. and Mexican Border service.

²Emergency, provisional, probationary, temporary or reserve officers in receipt of retired pay under Public Law 2-73, 743, 262-77 or 351-81.

³R.E.O. and R.R.O. included in Grand Total total, but not in Grand Total service-connected and non-service-connected.

Terminations of Awards, Disability, Death—Fiscal Year 1980

Reasons for Terminations	Total	World War I		World War II		Korean Conflict		Vietnam Era		Regular Estab- ment	Old ² Wars	Mexican Border Service
		Service- Connected	Non- Service- Connected	Service- Connected	Non- Service- Connected	Service- Connected	Non- Service- Connected	Service- Connected	Non- Service- Connected			
Disability, total	199,232	4,324	35,200	28,184	91,077	3,477	10,073	12,031	3,181	11,556	92	37
Death of veteran	121,167	4,284	31,563	27,344	44,902	3,047	3,085	3,071	300	3,450	88	33
Disability less than 10 percent	1,920			96		46		1,145		633		
Disability less than permanent and total	417				179		119		119			
Estate in excess of \$1,500	147	4	3	37	47	8	11	22	3	12		
Excessive corpus of estate	359		142		208		8	1				
Failure to cooperate	2,445		306	9	1,019	7	181	590	102	231		
Income provision	42,863		2,080		34,272		4,751		1,757		1	2
Person entitled is incarcerated	171				91		35		44	1		
Veteran on active duty or in receipt of retirement pay	1,809			103	45	84	4	907	4	662		
Failure to return questionnaire	11,419		608		8,799		1,456		555			
Miscellaneous ¹	16,515	36	498	595	1,515	285	423	6,295	297	6,567	2	2
Death, total	243,037	1,964	42,228	12,956	120,939	3,130	40,262	8,882	5,019	5,468	2,140	49
Dependency not established or discontinued	107,588	7	648	1,254	67,164	803	30,278	3,599	1,673	2,158	4	
Payee incarcerated	59		5	1	44		5	1	3			
Death of payee	54,753	1,830	29,768	9,574	7,719	1,448	384	813	41	1,308	1,830	38
Income provisions	39,451	1	5,265	157	26,777	94	4,487	800	1,605	253	7	5
Excess corpus of estate	442		226	20	164	2	23	1	4	1		1
Person entitled (widow, child, parent) married	9,497	30	733	527	4,529	170	1,366	1,012	672	449	9	
Failure to return questionnaire	13,694	4	2,927	289	8,094	102	1,271	407	405	171	22	2
Miscellaneous ¹	17,553	92	2,656	1,134	6,448	511	2,448	2,249	616	1,128	268	3

¹ Includes temporary terminations.² Civil War, Indian Wars, Spanish American War.

TABLE 60

COMPENSATION AND PENSION

*Veterans Receiving Compensation or Pension Compared
With Estimated Veteran Population by Period of Service*

Period of Service	Estimated Veteran Population	Number Receiving Compensation, Pension or Retirement	Percent Receiving Compensation, Pension or Retirement	Receiving Compensation Only	Percent Receiving Compensation	Receiving Pension and/or Retirement	Percent Receiving Pension
Total	30,118,000	3,195,395	10.61	2,273,610	7.55	921,785	3.06
World War I	521,000	197,711	37.95	29,721	5.7	167,990	32.24
World War II	12,422,000	1,849,597	14.89	1,193,196	9.61	656,401	5.28
Korean Conflict	4,659,000	316,672	6.80	235,654	5.06	81,018	1.74
Vietnam Era	8,463,000	569,375	6.73	553,326	6.54	16,049	0.19
Peacetime	4,053,000	261,706	6.46	261,706	6.46	NA
Old Wars ² ¹	334	8	326

¹ Less than 1000² Includes Spanish-American War and Mexican War

TABLE 61

COMPENSATION AND PENSION

*Veterans Receiving Compensation or Pension Compared With Estimated
Veteran Population by Geographic Area of Residence—September 1980*

U.S. Geographic Location	Estimated Veteran Population	Receiving Compensation or Pension	Percent Receiving Compensation or Pension
Total	30,118,000	3,195,395	10.61
East	7,957,000	846,512	10.64
South	6,386,000	823,533	12.90
Midwest	7,829,000	710,475	9.07
Southwest	2,716,000	339,324	12.49
West	5,230,000	475,551	9.09

Composition of Geographic Locations:

East — Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island and Vermont.

South — Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Puerto Rico, South Carolina, Tennessee, Virginia, and West Virginia.

Midwest — Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin.

Southwest — Arizona, New Mexico, Oklahoma, Texas and Utah.

West — Alaska, California, Colorado, Hawaii, Idaho, Montana, Nevada, Oregon, Philippines, Washington and Wyoming.

TABLE 62

COMPENSATION AND PENSION

*Death Benefit (Compensation, Dependency & Indemnity Compensation or Pension)
Cases on the Rolls Compared to the Number of Deceased Veterans Who Participated
In Each Period of Service*

Period of Service	Participants	Total Death Benefit Cases	Percent on Rolls	Death Compensation and DIC Cases	Percent on Rolls	Death Pension Cases	Percent of Total
Total	15,607,000	1,450,785	9.3	357,971	2.29	1,092,814	7.0
World War I	5,265,000	494,455	9.39	30,128	0.57	464,327	8.82
World War II	4,113,000	670,359	16.3	173,286	4.21	497,073	12.09
Korean Conflict	2,148,000	128,939	6.0	39,186	1.82	89,753	4.18
Vietnam Era	1,371,000	93,145	6.79	65,284	4.76	27,861	2.03
Indian War	106,000	45	(³)	(³)	45	(³)
Mexican Border	(²)	529	2	527
Civil War	2,213,000	192	.01	5	(³)	187	.01
Peacetime	(³)	49,951	49,943	8
Spanish-American War	391,000	13,170	3.37	137	.04	13,033	3.33

¹ Includes 19 Special Act Cases.² Data not available.³ Less than 0.005 Percent.

Disability: Class of Dependent, Period of Service—Sept. 1980

Class of Dependent	Total			World War I		World War II		Korean Conflict	
	Number	Monthly Value	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total veterans	2,273,589	505,676,103	222.41	29,720	283.59	1,193,196	211.29	235,654	251.08
Veterans less than 30 percent disabled (no dependency benefit)	1,268,403	76,427,764	60.26	13,576	84.28	659,170	59.45	126,024	61.23
Veterans 30 percent or more disabled	1,005,186	429,248,339	427.03	16,144	451.20	534,026	398.72	109,630	469.35
Without dependents	307,592	108,984,240	354.31	7,664	406.05	166,826	323.86	31,170	380.83
With dependents	697,594	320,264,099	459.10	8,480	492.00	367,200	432.73	78,460	504.51
Spouse only	410,667	183,320,963	446.40	8,321	490.86	290,274	428.66	37,564	512.93
Spouse, child or children	247,417	114,060,936	461.01	121	558.42	65,779	428.72	34,892	475.83
Spouse, child or children, and parent or parents	2,960	2,289,537	773.49			871	632.48	447	845.68
Spouse, parent, or parents	2,294	1,662,253	724.61			1,375	679.27	414	822.48
Child or children only	27,728	13,423,370	484.11	38	527.95	6,438	437.39	3,910	488.62
Child or children and parent or parents	574	474,747	827.08			91	664.19	77	800.60
Parent or parents only	5,954	5,032,294	845.20			2,373	804.97	1,156	885.03
Total dependents on whose account additional compensation was being paid	1,200,274			8,621		474,312		147,217	
Spouses	663,338			8,442		358,299		73,317	
Children	523,597			179		111,013		71,557	
Parents	13,339					5,000		2,343	

Class of Dependent	Vietnam Era		Regular Establishment		Spanish-American War		Mexican Border Service	
	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total veterans	553,326	224.62	261,685	235.68	3	395.33	5	265.60
Veterans less than 30 percent disabled (no dependency benefit)	315,950	60.67	153,679	59.95	1	48.00	3	61.33
Veterans 30 percent or more disabled	237,376	442.84	108,006	485.72	2	569.00	2	572.00
Without dependents	66,415	371.61	35,514	430.60	1	195.00	2	572.00
With dependents	170,961	470.52	72,492	512.72	1	943.00		
Spouse only	45,500	448.87	29,007	521.14	1	943.00		
Spouse, child or children	109,593	466.03	37,032	489.23				
Spouse, child or children, and parent or parents	1,257	819.78	385	857.60				
Spouse, parent or parents	331	742.93	174	815.16				
Child or children only	12,546	496.06	4,796	511.52				
Child or children and parent or parents	305	862.80	101	886.20				
Parent or parents only	1,429	826.02	997	922.20				
Total dependents on whose account additional compensation was being paid	413,277		156,846		1			
Spouses	156,681		66,598		1			
Children	252,497		88,351					
Parents	4,099		1,897					

Death: Total, Class of Beneficiary, Period of Service—Sept. 1980

Class of Beneficiary	Total			World War I		World War II		Korean Conflict		Vietnam Era	
	Number	Monthly Value	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total cases	357,941	113,403,785	316.82	30,128	353.42	173,267	288.80	39,184	297.29	65,283	347.79
Compensation	57,835	4,580,604	79.20	53	100.04	44,416	79.47	11,058	78.22	11	79.46
Dependency and indemnity compensation	296,745	107,344,300	361.74	30,073	353.86	126,447	359.51	27,388	381.66	65,257	347.82
Dependency and indemnity compensation and compensation	3,361	1,478,881	440.01	2	401.00	2,404	436.86	738	448.52	15	441.73
Surviving Spouse alone	200,107	78,111,627	390.35	29,135	353.52	100,378	377.88	19,540	426.65	19,717	427.26
Surviving Spouse and children	29,625	13,696,626	462.33	361	514.70	4,755	447.19	2,236	450.90	16,647	465.05
Surviving Spouse, children and mother	2,048	1,180,444	576.39	119	600.02	56	586.88	1,527	573.36
Surviving Spouse, children and father	255	143,846	564.10	13	640.38	6	530.67	194	561.29
Surviving Spouse, children, mother and father	558	326,257	584.69	4	640.25	9	534.11	438	582.58
Surviving Spouse and mother	7,255	3,649,887	503.09	4	525.25	3,704	496.12	974	492.36	1,392	518.71
Surviving Spouse and father	869	436,996	502.87	529	504.25	102	472.94	136	512.93
Surviving Spouse, mother and father	771	404,568	524.73	273	546.18	98	478.94	253	523.30
Children alone	18,371	3,769,797	205.20	523	264.47	1,983	230.19	966	213.44	12,005	197.85
Children and mother	1,557	501,095	321.83	74	387.61	55	318.53	1,232	317.89
Children and father	174	53,114	305.25	9	371.78	8	326.50	143	299.90
Children, mother and father	456	151,131	331.43	6	434.17	6	363.33	388	331.82
Mother alone	76,345	8,477,410	111.04	103	209.40	50,680	112.14	11,772	96.08	7,623	124.80
Father alone	8,923	1,080,575	121.10	2	126.00	6,062	132.33	1,326	92.54	841	100.75
Mother and father	10,627	1,420,411	133.66	4,678	143.06	2,030	101.49	2,747	145.85
Total dependents	443,746	30,557	190,089	46,516	111,438
Surviving Spouses	241,488	29,500	109,775	23,021	40,304
Children	80,008	948	9,202	4,910	50,394
Mothers	99,617	107	59,538	15,000	15,600
Fathers	22,633	2	11,574	3,585	5,140

Class of Beneficiary	Regular Establishment		Civil War		Spanish-American War		Mexican Border Service	
	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total cases	49,935	366.70	5	316.00	137	365.53	2	367.00
Compensation	2,297	78.29
Dependency and indemnity compensation	47,436	380.32	5	316.00	137	365.53	2	367.00
Dependency and indemnity compensation and compensation	202	446.66	2	395.50
Surviving Spouse alone	31,209	418.87	124	369.14	2	367.00
Surviving Spouse and children	5,624	468.20	2	705.00
Surviving Spouse, children and mother	346	579.95
Surviving Spouse, children and father	42	558.24
Surviving Spouse, children, mother and father	107	595.50
Surviving Spouse and mother	1,181	515.30
Surviving Spouse and father	102	512.28
Surviving Spouse, mother and father	147	517.90
Children alone	2,880	204.84	3	263.00	11	263.00
Children and mother	196	322.74
Children and father	14	305.07
Children, mother and father	56	314.27
Mother alone	6,167	111.91
Father alone	692	102.20
Mother and father	1,172	123.28
Total dependents	64,998	5	141	2
Surviving Spouses	38,758	2	126	2
Children	14,536	3	15
Mothers	9,372
Fathers	2,332

Disability, Degree of Impairment, Type of Major Disability, Period of Service—Sept. 1980

Degree of Impairment	Total				Tuberculosis (Lungs and Pleura)			Psychiatric and Neurological Diseases				General Medical and Surgical Conditions				
	Number	Percent of Total	Monthly Value	Average Monthly Value	Number	Percent of Total Tuberculosis	Percent of Degree of Impairment	Average Monthly Value	Number	Percent of Total Psychiatric and Neurological Diseases	Percent of degree of impairment	Average Monthly Value	Number	Percent of Total General Medical and Surgical Conditions	Percent of Degree of Impairment	Average Monthly Value
TOTAL																
Total	2,273,589	100.0	505,676,103	222.41	48,844	100.0	2.2	177.39	468,552	100.0	20.6	389.60	1,756,193	100.0	77.2	179.11
No disability	27,130	1.2	1,810,359	66.73	25,367	51.9	93.5	67.01	1,763	0.1	6.5	62.66
10 percent	883,474	38.9	42,807,728	48.45	1,496	3.1	0.2	59.23	132,122	28.2	14.9	48.20	749,856	42.7	84.9	48.48
20 percent	356,290	15.7	31,645,091	88.82	3,624	7.4	1.0	107.38	24,811	5.3	7.0	89.27	327,855	18.7	92.0	88.58
30 percent	316,987	13.9	47,344,649	149.36	9,724	19.9	3.1	148.30	77,417	16.5	24.4	146.49	229,846	13.1	72.5	150.37
40 percent	185,806	8.2	38,624,402	207.88	1,147	2.4	0.6	204.94	26,166	5.6	14.1	204.83	158,493	9.0	85.3	208.40
50 percent	114,552	5.0	33,521,040	292.63	1,253	2.6	1.1	299.55	43,060	9.2	37.6	287.15	70,239	4.0	61.3	295.87
60 percent	124,571	5.5	71,383,769	573.04	1,292	2.6	1.0	539.96	19,774	4.2	15.9	487.04	103,505	5.9	83.1	589.88
70 percent	89,678	3.9	65,280,518	727.94	969	2.0	1.1	520.17	47,071	10.1	52.5	776.55	41,638	2.4	46.4	677.84
80 percent	39,988	1.8	30,067,937	751.92	1,617	3.3	11.5	608.70	11,637	2.5	29.1	785.28	26,734	1.5	66.9	746.07
90 percent	14,039	0.6	11,518,751	820.48	123	0.2	0.9	768.09	3,854	0.8	27.4	842.54	10,062	0.6	71.7	812.74
100 percent	121,074	5.3	131,671,859	1,087.53	2,232	4.6	1.8	964.99	82,640	17.6	68.3	1,044.64	36,202	2.1	29.9	1,195.52
WORLD WAR I																
Total	29,720	100.0	8,428,263	283.59	4,251	100.0	14.3	213.27	5,634	100.0	19.0	435.67	19,835	100.0	66.7	255.56
No disability	404	1.4	26,296	65.09	232	5.5	57.4	67.38	172	0.9	42.6	62.00
10 percent	5,737	19.3	329,693	57.47	14	0.3	0.2	64.00	411	7.3	7.2	60.98	5,312	26.8	92.6	57.18
20 percent	7,411	24.9	785,624	106.01	3,016	71.0	40.7	111.16	889	15.8	12.0	113.58	3,506	17.7	47.3	99.65
30 percent	4,134	13.9	621,353	150.30	294	6.9	7.1	160.07	750	13.3	18.1	153.40	3,090	15.6	74.8	148.62
40 percent	2,619	8.8	541,601	206.80	132	3.1	5.0	211.91	457	8.1	17.4	212.02	2,030	10.2	77.6	205.29
50 percent	2,100	7.1	606,259	288.69	40	0.9	1.9	288.85	761	13.5	36.2	290.86	1,299	6.5	61.9	287.42
60 percent	2,347	7.9	1,322,880	563.65	45	1.1	1.9	617.18	340	6.0	14.5	415.00	1,962	9.9	83.6	588.18
70 percent	1,155	3.9	738,294	639.22	9	0.2	0.8	608.78	420	7.5	36.4	645.37	726	3.7	62.8	636.03
80 percent	740	2.5	503,746	680.74	8	0.2	1.1	733.00	191	3.4	25.8	637.04	541	2.7	73.1	695.39
90 percent	186	0.6	142,823	767.87	5	0.1	2.7	661.60	16	0.3	8.6	784.44	165	0.8	88.7	769.48
100 percent	2,887	9.7	2,809,694	973.22	456	10.7	15.8	933.78	1,399	24.8	48.5	964.17	1,032	5.2	35.7	1,004.80
WORLD WAR II																
Total	1,193,196	100.0	252,106,848	211.29	27,480	100.0	2.3	192.09	271,030	100.0	22.7	335.88	894,686	100.0	75.0	174.20
No disability	15,482	1.3	1,034,163	66.80	14,743	53.7	95.2	67.01	739	0.1	4.8	62.64
10 percent	467,685	39.2	22,577,213	48.27	652	2.4	0.1	63.71	88,685	32.7	19.0	48.12	378,348	42.3	80.9	48.27
20 percent	175,596	14.7	15,512,925	88.34	363	1.3	0.2	88.69	14,052	5.2	8.0	88.27	161,181	18.0	91.8	88.35
30 percent	175,814	14.7	25,708,137	146.22	5,824	21.2	3.3	147.10	48,998	18.1	27.9	144.27	120,992	13.5	68.8	146.97
40 percent	100,250	8.4	20,344,848	202.94	613	2.2	0.6	203.02	15,649	5.8	15.6	200.22	83,988	9.4	83.8	203.45
50 percent	63,245	5.3	18,198,395	287.74	855	3.1	1.4	301.81	23,556	8.7	37.2	283.46	38,834	4.3	61.4	290.04
60 percent	68,311	5.7	39,095,441	572.32	913	3.3	1.3	535.31	10,917	4.0	16.0	469.52	56,481	6.3	82.7	592.79
70 percent	47,039	3.9	34,353,520	730.32	825	3.0	1.8	511.82	25,004	9.2	53.2	795.76	21,210	2.4	45.1	661.69
80 percent	21,667	1.8	15,761,401	727.44	1,460	5.3	6.7	603.32	6,098	2.3	28.1	770.53	14,109	1.6	65.1	721.66
90 percent	6,850	0.6	5,467,622	798.19	108	0.4	1.6	765.13	1,642	0.6	24.0	806.85	5,100	0.6	74.4	796.24
100 percent	51,257	4.3	54,053,183	1,054.55	1,124	4.1	2.2	981.54	36,429	13.4	71.1	1,032.13	13,704	1.5	26.7	1,124.55

KOREAN CONFLICT

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KOREAN CONFLICT

Total	235,654	100.0	59,171,445	251.09	10,134	100.0	4.3	117.76	43,321	100.0	18.4	516.67	182,199	100.0	77.3	195.37
No disability	7,180	3.0	480,082	66.86	6,892	68.0	96.0	67.01	288	0.2	4.0	63.32
10 percent	82,170	34.9	3,995,410	48.62	249	2.5	0.3	65.57	9,016	20.8	11.0	48.21	72,905	40.0	88.7	48.62
20 percent	36,204	15.4	3,205,331	88.54	81	0.8	0.2	88.00	1,881	4.3	5.2	88.56	34,242	18.8	94.6	88.54
30 percent	31,772	13.5	4,801,281	151.12	2,028	20.0	6.4	148.86	5,908	13.7	18.6	149.87	23,836	13.1	75.0	151.62
40 percent	19,740	8.4	4,165,797	211.03	212	2.1	1.1	203.99	2,261	5.2	11.4	209.99	17,267	9.5	87.5	211.26
50 percent	11,510	4.9	3,442,459	299.08	238	2.3	2.1	294.38	3,540	8.2	30.8	295.85	7,732	4.2	67.1	300.71
60 percent	14,357	6.1	8,416,874	586.26	177	1.8	1.2	512.03	2,228	5.1	15.5	510.92	11,952	6.6	83.3	601.40
70 percent	10,437	4.4	7,807,005	748.01	70	0.7	0.7	550.16	4,966	11.5	47.6	797.91	5,401	3.0	51.7	704.70
80 percent	4,746	2.0	3,704,029	780.45	64	0.6	1.3	688.66	1,390	3.2	29.3	813.61	3,292	1.8	69.4	768.24
90 percent	1,664	0.7	1,367,281	821.68	7	0.1	0.4	909.71	480	1.1	28.9	843.88	1,177	0.6	70.7	812.11
100 percent	15,874	6.7	17,785,896	1,120.44	116	1.1	0.7	976.95	11,651	26.9	73.4	1,093.21	4,107	2.2	25.9	1,203.56

VIETNAM ERA

Total	553,326	100.0	124,292,533	224.63	2,009	100.0	0.4	220.74	97,582	100.0	17.6	433.81	453,735	100.0	82.0	179.80
No disability	809	0.1	52,890	65.38	546	27.1	67.5	67.00	263	0.1	32.5	62.01
10 percent	219,442	39.7	10,635,372	48.47	429	21.4	0.2	48.70	22,358	22.9	10.2	48.15	196,855	43.3	89.6	48.50
20 percent	95,431	17.3	8,450,443	88.55	62	3.1	0.1	88.73	5,716	5.9	6.0	88.47	89,653	19.8	93.9	88.56
30 percent	70,896	12.8	10,931,908	154.20	517	25.7	0.7	150.87	13,941	14.3	19.7	151.32	56,438	12.4	79.6	154.94
40 percent	45,680	8.3	9,807,176	214.69	106	5.3	0.2	208.60	5,623	5.8	12.3	212.94	39,951	8.8	87.5	214.96
50 percent	27,279	4.9	8,198,892	300.56	41	2.0	0.2	294.29	4,608	10.3	36.8	292.33	17,204	3.8	63.0	305.37
60 percent	26,435	4.8	14,252,279	539.14	50	2.5	0.2	562.20	4,608	4.7	17.4	498.90	21,777	4.8	82.4	547.61
70 percent	22,322	4.0	15,837,752	709.51	19	1.0	0.1	664.11	11,437	11.7	51.2	735.85	10,866	2.4	46.7	681.87
80 percent	9,613	1.7	7,496,579	779.84	12	0.6	0.1	834.42	2,945	3.0	30.6	799.33	6,656	1.5	69.3	771.11
90 percent	4,303	0.8	3,651,262	848.54	1	0.1	0.1	604.00	1,397	1.4	32.4	877.89	2,905	0.6	67.5	834.51
100 percent	31,116	5.6	34,977,980	1,124.12	226	11.2	0.7	960.04	19,523	20.0	62.8	1,035.43	11,367	2.5	36.5	1,281.56

REGULAR ESTABLISHMENT

Total	261,685	100.0	61,674,500	235.68	4,970	100.0	1.9	169.50	50,984	100.0	19.5	477.46	205,731	100.0	78.6	177.40
No disability	3,255	1.3	216,928	66.64	2,954	59.4	90.8	67.02	301	0.2	9.2	63.00
10 percent	108,437	41.5	5,269,896	48.60	152	3.1	0.1	58.91	11,652	22.8	10.8	48.38	96,633	47.0	89.1	48.64
20 percent	41,647	15.9	3,690,680	88.62	102	2.1	0.2	88.90	2,273	4.5	5.5	88.60	39,272	19.1	94.3	88.62
30 percent	34,370	13.1	5,281,775	153.67	1,061	21.3	3.1	149.33	7,820	15.3	22.7	148.58	25,489	12.4	74.2	155.42
40 percent	17,517	6.7	3,764,980	214.93	84	1.7	0.5	205.75	2,176	4.3	12.4	210.14	15,257	7.4	87.1	215.67
50 percent	10,417	4.0	3,074,780	295.17	79	1.6	0.8	298.87	5,168	10.1	49.6	287.41	5,170	2.5	49.6	302.87
60 percent	13,121	5.0	8,296,295	632.29	107	2.1	0.8	582.92	1,681	3.3	12.8	551.18	11,333	5.5	86.4	644.79
70 percent	8,725	3.3	6,543,947	750.02	46	0.9	0.5	547.59	5,244	10.3	60.1	764.04	3,435	1.7	39.4	731.33
80 percent	3,222	1.2	2,602,182	807.63	73	1.5	2.3	595.64	1,013	2.0	31.4	822.34	2,136	1.0	66.3	807.90
90 percent	1,036	0.4	889,763	858.84	2	0.1	0.2	780.50	319	0.6	30.8	872.31	715	0.3	69.0	853.05
100 percent	19,938	7.6	22,043,274	1,105.59	310	6.2	1.6	950.05	13,638	26.8	68.4	1,057.97	5,990	2.9	30.0	1,222.05

SPANISH AMERICAN WAR

Total	3	100.0	1,186	395.33	3	100.0	100.0	395.33
No disability
10 percent	1	33.3	48	48.00	1	33.3	100.0	48.00
20 percent
30 percent	1	33.3	195	195.00	1	33.3	100.0	195.00
40 percent
50 percent
60 percent
70 percent

Disability, Degree of Impairment, Type of Major Disability, Period of Service—Sept. 1980—Continued

Degree of Impairment	Total				Tuberculosis (Lungs and Pleura)				Psychiatric and Neurological Diseases				General Medical and Surgical Conditions			
	Number	Percent of Total	Monthly Value	Average Monthly Value	Number	Percent of Total Tuberculosis	Percent of Degree of Impairment	Average Monthly Value	Number	Percent of Total Psychiatric and Neurological Diseases	Percent of Degree of Impairment	Average Monthly Value	Number	Percent of Total General Medical and Surgical Conditions	Percent of Degree of Impairment	Average Monthly Value
80 percent
90 percent
100 percent	1	33.3	943	943.00	1	33.3	943.00
MEXICAN BORDER SERVICE																
Total	5	100.0	1,328	265.60	1	100.0	20.0	255.00	4	100.0	80.0	268.25
No disability
10 percent	2	40.0	96	48.00
20 percent	1	20.0	88	88.00
30 percent
40 percent
50 percent	1	20.0	255	255.00	1	100.0	100.0	255.0
60 percent
70 percent
80 percent
90 percent
100 percent	1	20.0	889	889.00	1	25.0	100.0	889.00

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TABLE 66

PENSION

Disability: Total, Period of Service, Type of Major Disability—Sept. 1980

Type of Pension and Disability	Total				World War I			World War II		
	Number	Percent of Total	Monthly Value	Average Monthly Value	Number	Percent of Total	Average Monthly Value	Number	Percent of Total	Average Monthly Value
Total	921,602	100.0	186,494,116	202.36	167,808	100.0	211.26	656,401	100.0	194.03
Tuberculosis (lungs and pleura)	11,226	1.2	2,725,514	242.79	1,265	0.8	275.83	8,575	1.3	233.34
Psychiatric and neurological diseases	205,835	22.3	50,676,012	246.20	19,186	11.4	331.60	144,539	22.0	235.94
Psychoses	54,131	5.9	12,163,275	224.70	1,783	1.1	348.34	33,302	5.1	220.43
Other psychiatric and neurological diseases	151,704	16.5	38,664,441	254.87	17,403	10.4	329.88	111,237	16.9	240.58
General medical and surgical conditions	590,095	64.0	117,520,364	199.16	134,068	79.9	196.75	402,775	61.4	194.25
No disability shown	114,446	12.4	15,572,226	136.07	13,289	7.9	184.14	100,512	15.3	129.50
Old Law	36,673	4.0	3,081,749	84.03	31,183	18.6	83.42	4,795	0.7	87.29
Sec 306	604,671	65.6	89,160,990	147.45	98,816	58.9	181.14	447,321	68.1	139.42
PL 95-588	280,258	30.4	94,251,377	336.30	37,809	22.5	395.40	204,285	31.1	316.10

	Korean Conflict			Vietnam Era			Spanish-American War			Mexican Border Service		
	Number	Percent of Total	Average Monthly Value	Number	Percent of Total	Average Monthly Value	Number	Percent of Total	Average Monthly Value	Number	Percent of Total	Average Monthly Value
Total	81,018	100.0	239.20	16,049	100.0	263.81	135	100.0	242.35	191	100.0	199.39
Tuberculosis (lungs and pleura)	1,310	1.6	268.84	76	0.5	308.72
Psychiatric and neurological diseases	32,101	39.6	239.31	9,964	62.1	252.49	29	21.5	292.55	16	8.4	319.88
Psychoses	13,065	16.1	212.89	5,979	37.2	237.36
Other psychiatric and neurological diseases	19,036	23.5	258.45	3,985	24.8	275.19	29	21.5	292.55	16	8.4	319.88
General medical and surgical conditions	47,217	58.3	238.96	5,973	37.2	282.24	34	25.2	289.91	28	14.7	325.36
No disability shown	390	0.5	158.67	36	0.2	245.56	72	53.3	200.56	147	77.0	162.87
Old Law	614	0.8	85.96	81	60.0	113.59
Sec 306	49,374	60.9	150.01	7,071	44.1	393.42	37	27.4	391.03	145	75.9	145.79
PL 95-588	31,030	38.3	384.14	8,978	55.9	161.74	17	12.6	532.24	46	24.1	368.35

TABLE 67

PENSION

Death: Total, Class of Beneficiary, Period of Service—Sept. 1980

Class of Beneficiary	Total			World War I		World War II		Korean Conflict	
	Number	Monthly Value	Average Monthly	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total	1,092,797	111,828,026	102.33	464,327	91.77	497,073	110.85	89,753	108.63
Surviving Spouse alone	809,471	83,620,562	103.30	446,761	91.37	332,008	116.95	16,183	150.25
Surviving Spouse and children	91,228	14,080,197	154.34	7,441	154.82	56,909	151.63	18,123	163.25
Children alone	192,098	14,127,267	73.54	10,125	62.78	108,156	70.68	55,447	78.62
Total dependents	1,333,432	473,422	622,576	162,366
Surviving Spouses	900,694	454,199	388,916	34,305
Children	432,738	19,223	233,660	128,061

Class of Beneficiary	Vietnam Era		Civil War		Indian Wars		Spanish-American War		Mexican Border Service	
	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value	Number	Average Monthly Value
Total	27,861	111.50	184	91.25	45	100.91	13,027	116.19	527	82.73
Surviving Spouse alone	1,881	156.92	64	125.09	36	107.86	12,025	118.82	513	82.23
Surviving Spouse and children	8,643	157.32	104	184.04	8	137.50
Children alone	17,337	83.73	120	73.20	9	73.11	898	73.13	6	52.17
Total dependents	61,122	185	45	13,179	537
Surviving Spouses	10,524	64	36	12,129	521
Children	50,598	121	9	1,050	16

Persons in Training During Fiscal Year by Program and Period of Service

Program	Fiscal Year			
	1980	1979	1978	1977
Post-Korean Educational Assistance Program				
In training during year — Total	1,106,889	1,278,538	1,521,840	1,937,874
Institutions of higher learning	842,088	967,790	1,144,075	1,380,025
Resident schools other than college	148,551	175,098	211,241	313,846
Correspondence schools	42,102	51,383	72,945	131,811
On-job training	74,148	84,267	93,579	112,382
Children's Educational Assistance Program				
In training during year — Total	82,632	85,696	88,299	88,168
Institutions of higher learning	75,530	77,915	80,402	80,257
Schools other than college	6,538	7,180	7,291	7,383
Special restorative training	61	73	94	82
On-job training	503	528	512	456
Period of service of beneficiary's parent				
World War I	1,129	1,108	1,099	1,225
World War II	25,246	28,899	31,756	33,228
Korean conflict	12,759	13,519	13,848	13,676
Vietnam era	33,451	31,225	29,507	27,437
Other	10,047	10,945	12,089	12,592
Educational Assistance for Spouses of Totally Disabled or Deceased Veterans				
In training during year — Total	12,952	17,260	19,394	19,470
Institutions of higher learning	10,752	13,977	15,548	15,461
Schools other than college	2,162	3,239	3,801	3,984
Special restorative training		2	2	6
On-job training	38	42	43	39
Period of service of beneficiary's spouse				
World War I	111	183	205	227
World War II	2,088	3,553	4,300	4,285
Korean conflict	1,232	1,854	2,250	2,314
Vietnam era	8,303	9,758	10,184	9,995
Other	1,218	1,912	2,455	2,649
Vocational Rehabilitation Program for Disabled Veterans				
In training during year — Total	25,543	29,470	31,018	33,231
Institutions of higher learning	18,854	21,672	23,145	24,728
Schools other than college	5,371	6,195	6,233	6,703
On-job training	943	1,116	1,160	1,038
Institutional on-farm	119	149	173	199
Unknown	256	338	307	563
Period of service of veterans				
World War II	350	395	353	90
Korean conflict	376	440	456	308
Vietnam era	23,073	26,870	28,809	31,601
Post-Korean and between wars	1,744	1,765	1,400	1,232

¹ Estimated.² The unknown count of type of training was generated by a change from a punched card to magnetic tape system. Steps are being taken to correct these data.

TABLE 69

HOUSING ASSISTANCE

Guaranteed or Insured Loans, Direct Loans, Property Management

Item	Cumulative Through Sept. 30, 1980	Fiscal Year 1980	Fiscal Year 1979
Guaranteed or Insured Loans			
Number of loans, total	10,651,936	297,447	364,578
Home	10,609,730	289,164	357,850
Mobile home	42,206	8,283	6,728
Amount of loans (\$000), total	\$185,306,947	\$14,815,266	\$16,071,991
Home	\$184,744,928	\$14,653,112	\$15,955,333
Mobile home	\$ 562,019	\$ 162,154	\$ 116,658
Amount of guaranty and insurance (\$000), total	\$ 89,920,856	\$ 6,370,076	\$ 7,342,507
Home	\$ 89,677,297	\$ 6,289,415	\$ 7,284,387
Mobile Home	\$ 243,559	\$ 80,661	\$ 58,120
Defaults and claims:			
Defaults reported	2,983,393	138,323	120,284
Loans in default-end of period		60,080	48,141
Defaults disposed of, total	2,923,313	126,384	121,591
Cured or withdrawn	2,512,652	115,349	108,268
Percent	86.0	91.3	89.0
Claims vouchered for payment	410,661	11,035	13,323
Rate per 1000 loans outstanding		2.71	3.33
Average number of loans outstanding		4,072,456	4,004,578
Direct Loans			
Number of loans fully disbursed	332,997	1,160	1,419
Amount of loans fully disbursed (\$000)	\$ 3,432,244	\$ 30,828	\$ 37,318
Property Management			
Number acquired	445,865	11,578	13,139
Number sold	431,436	11,762	14,722
Number redeemed	5,370	207	261
Number on hand-end of period		8,414	9,450

TABLE 70

INSURANCE

*Appropriations and Other Receipts Versus
Expenditures Cumulative Through September 30, 1980*

Item	United States Government Life Insurance Fund	National Service Life Insurance Fund	Veterans Reopened Insurance Fund	Veterans Special Life Insurance Fund	Service-Disabled Veterans Insurance Fund	Servicemen's Group Life Insurance Fund
Appropriations and other receipts:						
Appropriations	\$	\$	\$	\$	\$ 4,250,000	\$
Receipts other than appropriations	4,681,283,508	36,950,746,249	753,215,208	1,321,509,712	381,918,418	1,955,931,752
Total	4,681,283,508	36,950,746,249	753,215,208	1,321,509,712	386,168,418	1,955,931,752
Expenditures:						
Fiscal Year	83,130,262	1,221,150,433	57,178,633	66,825,072	30,176,588	99,727,203
Cumulative to September 30, 1980	4,202,495,240	27,908,972,942	266,386,630	616,833,701	374,238,608	1,955,813,277
Covered into U.S. Treasury				4,250,000		
Investments, loans and liens	478,877,324	9,407,647,295	505,066,509	747,251,000	33,324,641	
Balance	-89,056	-365,873,988	-18,237,931	-46,824,989	-21,394,831	118,475

Summary of Operations (Accrual Basis)
(In thousands)

	U.S. Government Life Insurance		National Service Life Insurance		Veterans Special Life Insurance		Service-Disabled Veterans Insurance		Veterans Reopened Insurance	
	Fiscal Year 1980	Cumulative Totals From Origin January 1919 to September 30, 1980	Fiscal Year 1980	Cumulative Totals From Origin October 1940 to September 30, 1980	Fiscal Year 1980	Cumulative Totals From Origin April 1951 to September 30, 1980	Fiscal Year 1980	Cumulative Totals From Origin April 1951 to September 30, 1980	Fiscal Year 1980	Cumulative Totals From Origin May 1966 to September 30, 1980
INCOME										
Premiums	\$ 4,521	\$2,078,279	\$634,633	\$20,376,242	\$63,719	\$912,070	\$27,750	\$296,312	\$24,024	\$478,475
Policy proceeds left to be paid in installments	2,118	779,725	27,156	5,381,217	1,205	38,397	741	24,614	570	13,213
Dividends left on credit or deposit	4,033	75,442	64,631	1,380,193	7,612	24,807	2,810	2,810
Investment income	34,081	2,135,103	647,441	9,423,166	46,662	346,336	1,273	10,126	36,740	257,584
Extra hazard contributions from the U.S. Government	27	142,349	1,983	4,811,562
Total	44,780	5,210,898	1,375,844	41,372,380	119,198	1,321,610	29,764	331,052	64,144	750,082
DISPOSITION OF INCOME										
Death benefits	32,548	1,467,992	336,415	9,924,059	18,289	264,512	17,799	252,969	14,340	149,375
Matured endowments	483	487,656	48,252	677,337	2,230	18,709	353	2,507	5,795	19,683
Surrender benefits	2,692	318,531	50,973	840,069	5,075	45,222	2,899	19,692	2,244	17,277
Disability benefits	698	386,313	59,891	796,395	2,837	20,653	8,191	81,312	3,008	19,906
Payments from policy proceeds left to be paid in installments	14,146	1,031,461	106,212	7,602,188	1,586	34,448	926	21,815	901	11,658
Dividends withdrawn	5,102	72,282	72,134	1,286,030	3,329	8,695	517	517
Net deposits for policy reserves	-35,063	415,377	199,998	8,349,615	47,020	657,580	14,623	181,629	23,032	441,921
Reserve for dividends left on credit or deposit	403	21,070	15,475	336,264	5,305	18,717	2,380	2,380
Administrative costs	917	18,405
Total	21,009	4,210,682	889,350	29,811,957	85,671	1,068,536	44,791	558,924	53,134	681,122
Net gain (+) or loss (-) from operations before dividends and transfers	23,771	1,000,216	486,494	11,560,423	33,527	253,074	-15,027	-228,872	11,010	68,960
Dividends to policyholders	27,459	991,877	530,258	11,496,295	33,479	179,453	29,456	29,456
Transfers to U.S. Government	0	55,613
Gain (+) or loss (-) after dividends and transfers	-3,688	8,339	-43,764	64,128	48	18,008	-15,027	-228,872	-18,446	39,504

In Force - Fiscal Year 1980

Item	Participating						Nonparticipating			
	U.S. Government Life Insurance		National Service Life Insurance		Veterans Special Life Insurance		Service-Disabled Veterans Insurance		Veterans Reopened Insurance	
	Number of Policies	Amount of Insurance (000 Omitted)	Number of Policies	Amount of Insurance (000 Omitted)	Number of Policies	Amount of Insurance (000 Omitted)	Number of Policies	Amount of Insurance (000 Omitted)	Number of Policies	Amount of Insurance (000 Omitted)
In force at beginning of year	107,751	\$441,520	3,665,317	\$23,895,260	546,500	\$4,763,511	170,748	\$1,184,488	186,341	\$1,684,684
Insurance issued during year	8,814	81,685
Insurance reinstated during year	0	0	8,564	37,132	382	3,341	541	2,165	46	427
Insurance terminated during year by:										
Death	7,492	32,910	52,553	323,659	2,161	18,418	2,192	14,282	1,981	17,774
Maturity as endowment	84	531	8,307	45,656	376	2,094	420	2,518	75	344
Permanent total disability	5	34
Lapse, expiry, and net changes	8	73	24,445	256,580	10,073	95,388	855	8,931	2,791	26,854
Cash surrender	716	3,046	13,235	75,013	1,283	10,247	496	3,501	1,204	10,409
Total terminated	8,305	36,594	98,540	700,908	13,893	126,147	3,963	29,232	6,051	55,381
In force at end of year	99,446	404,926	3,575,341	23,231,484	532,989	4,640,705	167,326	1,157,421	189,150	1,711,415
Selected year end items:										
In force on 5 year term plan	513	3,314	1,173,872	9,185,788	299,244	2,751,978	87,453	840,422
In force on all other plans	98,933	401,612	2,401,469	14,045,696	233,745	1,888,727	167,326	1,157,421	101,697	870,993
In force with disability income rider	2,007	15,712	443,162	3,369,188	88,747	804,711	10,113	75,693
In force under disability premium waiver	212	1,280	149,751	1,036,088	7,270	62,547	13,216	90,255	39,781	374,446

TABLE 73

PERSONNEL

Employment: Full, Part-Time and Intermittent by Installation

Installation	Sept. 30, 1980	Sept. 30, 1979
Total	228,285	226,084
Central Office	4,300	4,358
Field	223,985	221,726
Medical Centers (Separate)	178,961	174,366
Domiciliaries and Medical Centers	16,934	16,671
Regional Offices (Separate)	13,742	14,867
Regional Office and Medical Centers	7,612	8,865
Regional Office and Insurance Centers	1,723	1,900
Independent Outpatient Clinics	1,428	1,328
Data Processing Centers	1,695	1,897
National Cemeteries	857	856
Supply Depots and Marketing Center	483	474
Miscellaneous Activities (VCS Field Offices, Prosthetic Center, National Cemetery Area Offices, IG Field Audit Offices)	550	502

TABLE 74

PERSONNEL

Employment: Full, Part-Time and Intermittent by Pay System

Pay System	Sept. 30, 1980	Sept. 30, 1979
Total	228,285	226,084
GS	131,133	130,069
Title 38 (excludes Canteen)	52,786	50,810
Wage System	38,765	39,729
Canteen	3,650	3,551
Nationals (Manila)	209	221
Senior Executive Service	252	251
Others (includes Stay-in-School)	1,490	1,453

TABLE 75

PERSONNEL

Employment: Sex and Veteran Preference—September 30, 1980

	All Employees		Male Employees		Female Employees	
	Number	Percent	Number	Percent	Number	Percent
Total	228,285	100.0	108,462	100.0	119,823	100.0
With Preference	85,164	37.3	75,510	69.6	9,654	8.1
Without Preference	143,121	62.7	32,952	30.4	110,169	91.9

Employment: Minority Groups by Grade—May 31, 1980

Grade or Supervisory Level	Total Employment (Full-time)	Percent Minority Employment	Black	Hispanic	American Indian or Alaskan Native	Asian or Pacific Islander Oriental
Total all pay plans	203,923	30.9	52,612	6,402	466	3,616
GS and equivalent	162,859	27.5	36,594	4,537	359	3,354
GS-1 thru GS-4	43,978	37.1	14,500	1,424	118	281
GS-5 thru GS-8	56,000	32.2	15,675	1,608	136	622
GS-9 thru GS-11	43,213	18.4	5,373	1,019	76	1,483
GS-12 thru GS-13	11,217	10.5	827	161	21	167
GS-14 thru GS-15	8,433	16.0	218	325	8	801
GS-16 thru GS-18	18	5.6	1	0	0	0
Federal wage systems	37,009	46.2	15,080	1,705	98	225
Nonsupervisory	32,524	46.7	13,356	1,534	89	207
Leader	789	48.4	335	40	3	4
Supervisory	3,576	42.9	1,388	127	6	13
Production Facilitating	120	5.0	1	4	0	1
Other wage systems	4,197	27.5	944	163	9	37

Employment of Women—May 31, 1980

Type of Employment	Total Employment	Women	
		Number	Percent
Total	203,926	108,867	53.4
GS Total	162,840	97,719	60.0
GS-1 thru GS-6	85,103	56,524	66.4
GS-7 thru GS-12	64,878	39,540	60.9
GS-13 and above	12,801	1,651	12.9
Title 38 (excludes canteen)	35,512	26,635	75.0
Wage systems	36,889	8,531	23.1
Canteen	1,454	972	66.8
Other (includes stay in school)	2,743	1,645	60.0

TABLE 78

Appropriations, Expenditures and Balances—Cash Basis

FISCAL

	Appropriations	Expenditures		Nonexpenditure Transfers	(—) Covered into U.S. Treasury (+) or restored	Investments	Cash Balances
		Fiscal Year 1980	Cumulative through September 30, 1980				
General and Special Funds:							
Compensation and pensions	\$163,718,447,000	\$ 11,202,081,858	\$162,799,501,800	\$ 16,969	\$	\$	\$ 918,962,170
Readjustment benefits	59,592,657,904	2,416,976,383	59,396,004,640	*71,709,000	124,944,264
Veterans insurance and indemnities	361,905,036	3,918,586	407,896,103	49,746,500	3,755,433
Medical care, Current Year	5,832,039,000	5,272,091,015	5,272,091,015	18,087,121	541,860,864
Medical care, 1954—79	50,606,474,226	709,197,371	49,880,214,212	637,224,855	89,035,158
Medical and prosthetic research	1,310,406,131	130,911,573	1,290,698,162	19,707,966
Assistance for health manpower training institutions, 1973—85	296,693,000	42,405,870	188,235,113	2,684	108,455,202
Medical administration and miscellaneous operating expenses, Current Year	48,205,000	40,971,153	40,971,153	1,247,736	5,986,111
Medical administration and miscellaneous operating expenses, 1954—79	668,017,481	9,081,118	635,312,273	30,929,902	1,775,305
General operating expenses, Current Year	611,609,000	566,585,215	566,585,215	8,837,665	36,186,120
General operating expenses, 1954—79	6,988,506,650	63,387,108	6,877,184,206	100,643,618	10,678,826
Construction of hospital and domiciliary facilities	1,042,596,863	1,032,915,863	*9,681,000
Construction, major projects	2,245,009,000	189,506,170	963,719,772	7,734,760	1,289,023,988
Construction, minor projects	617,431,000	105,168,349	466,268,137	2,019,442	153,182,306
Construction, minor projects (Corps of Engineers)	2,126,796	2,126,796
Grants for construction of state extended care facilities, 1966—82	102,200,000	14,223,388	76,253,412	1,915,405	24,031,182
Grants to the Republic of the Philippines	813,000	34,526	712,768	100,233
Grants to the Republic of the Philippines, Current Year	1,300,000	1,091,197	1,091,197	11,230	197,572
Grants to the Republic of the Philippines, 1950—1979	49,520,537	204,083	36,258,977	13,239,697	21,864
Grants for the Construction of State Veterans Cemeteries 1980—1982	5,000,000	234,475	234,475	4,765,525
Loan Guaranty revolving fund	32,420,742	27,557,295	839,953,246	1,221,082,732	413,550,227
Direct Loan revolving fund	1,733,055,599	*67,153,518	*722,083,458	*2,014,614,526	440,524,531
Canteen service revolving fund	4,965,000	*886,680	*25,065,665	12,068,086	17,962,580
Rental, maintenance and repair of quarters	*97,127	97,127
Service-disabled veterans insurance fund	4,500,000	2,789,129	1,101,986	3,398,014
Soldiers' and sailors' civil relief	3,528,000	2,011,031	*16,969	1,500,000
Veterans reopened insurance fund	*17,226,572	*455,653,972	454,814,000	839,972
Special Therapeutic and Rehabilitation Activities Fund	*191,274	*591,841	591,841
Vocational rehabilitation revolving fund	2,197,000	7,981	482,858	1,600,000	114,141
Education Loan fund	3,337,586	64,670,282	71,709,000	7,038,719
Servicemen's group life insurance fund	*145,942	*145,942	145,942
Supply fund	130,000,000	*4,249,353	7,938,359	*71,400	15,677,579	106,312,663
Construction and Operation of Garage and Parking Facilities	*122,179	*122,179	122,179
Consolidated working fund	1,369,137	130	*130
Total: Appropriations and funds	\$296,009,497,169	\$ 20,713,155,046	\$289,646,673,004	\$ *741,656,696	\$ 843,082,705	\$ 454,814,000	\$ 4,323,270,768
Deduct proprietary receipts from the public	3,695,157
Total: Federal Funds	\$296,009,497,169	\$ 20,709,459,889	\$289,646,673,004	\$ *741,656,696	\$ 843,082,705	\$ 454,814,000	\$ 4,323,270,768
Trust Funds:							
Post Vietnam Era Veterans Education	217,309,159	32,816,900	46,640,968	170,668,193
General post fund, national homes	89,893,483	6,186,030	78,873,667	386	2,746,000	8,273,430
National service life insurance fund	31,880,271,606	928,228,195	23,797,169,340	89	8,065,150,000	17,952,177
U.S. government life insurance fund	3,931,412,405	76,683,384	3,503,973,173	1,811,199	424,522,000	1,106,032
Veterans special life insurance fund	250,000	*44,317,194	*721,596,900	*51,150,000	4,250,000	665,031,000	1,415,900
Sub-Total: Trust funds	36,119,136,653	999,597,315	26,705,060,248	*51,150,000	6,061,674	9,157,449,000	199,415,732
Deduct: Proprietary receipts from the public	572,587,191
Total: Trust funds	36,119,136,653	427,010,124	26,705,060,248	*51,150,000	6,061,674	9,157,449,000	199,415,732
Deduct: Intragovernmental transactions	2,091,983
Total: Veterans Administration	332,128,633,822	21,134,378,030	316,351,733,252	*792,806,696	849,144,379	9,612,263,000	4,522,686,370
Appropriations and funds not included above:							
Personal funds of patients	*976,093	*60,080,361	60,080,361
Funds due incompetent beneficiaries	2,793	*39,896	39,896
Miscellaneous administrative and construction expenses	10,855,083,789	10,476,102,823	378,980,966
Miscellaneous benefit and insurance expenses	25,110,301,012	24,621,740,653	488,560,359
Miscellaneous trust funds	4,700,842,392	4,658,621,658	42,220,735
Miscellaneous transfer appropriations and working funds	38,634,996	31,269,691	7,365,305
Total: Other appropriations and funds	40,704,862,190	*973,300	39,727,614,568	917,127,365	60,120,257

*Indicates Credit.

VA Gross Expenditures—Fiscal Years 1971–1980

Fiscal Year	Grand Total	Medical and Administrative Expenses						Hospital and Domiciliary Construction Costs	Construction Grants for State Homes	Health Manpower Training Facilities	National Cancer Institute (transfer to VA)
		Total	Medical Care	General Operating Expenses	Medical and Prosthetic Research	Medical Administration Expenses					
1980	\$23,186,845,618	\$6,646,752,559	\$5,857,450,290	\$605,216,938	\$137,038,522	\$47,046,809	\$286,094,889	\$14,223,186	\$41,416,112		
1979	22,178,870,841	6,205,941,745	5,408,251,895	625,740,917	125,577,137	46,371,796	240,304,876	14,190,947	38,321,902		
1978	20,937,106,741	5,683,811,346	4,948,297,375	575,213,971	117,563,185	42,736,815	245,081,811	5,031,278	38,143,438		
1977	20,284,739,028	5,072,993,821	4,402,752,024	522,061,364	108,745,374	39,435,059	224,546,309	3,670,801	33,875,869		
T.O. 9-30-76	4,524,304,469	1,195,770,956	1,033,503,297	123,644,945	27,373,991	11,248,723	49,196,439	2,064,709	3,749,462		
1976	20,167,672,990	3,996,765,600	3,831,942,636	479,213,633	101,130,244	34,479,087	185,569,710	11,616,975	26,950,826		
1975	18,002,858,455	3,919,256,993	3,348,139,083	438,660,271	95,794,770	36,662,859	119,579,730	3,153,684	12,926,229		
1974	15,281,999,263	3,290,194,883	2,833,622,391	343,916,399	81,581,682	31,034,411	106,364,406	2,484,814			
1973	13,973,824,241	2,966,237,960	2,545,676,531	317,104,838	78,412,475	25,044,116	92,635,174	2,448,163			
1972	12,723,327,251	2,650,982,373	2,269,185,623	290,516,258	68,958,723	22,321,769	107,335,950	2,553,288			
1971	11,565,101,689	2,256,979,848	1,913,508,523	260,146,750	63,138,682	20,185,893	80,919,238	4,168,114			\$ 70 ²
											\$ 27,379

Fiscal Year	Total	Compensation and Pension					Invalid Lifts, Devices, and Polio Rentals ³	Headstones Markers and Burial Flags ³	Tort Claim Settlements	Other ⁵
		Compensation and Pensions	Statutory Burial Awards	Clothing Allowances ³	Mortgage and Group Insurance	Interment and Plot Awards ⁴				
1980	\$11,256,935,680	\$11,046,637,368	\$101,078,125	\$15,070,089	\$3,200,000	\$53,954,538	\$7,886,835	\$16,830,344		\$12,278,381
1979	10,540,134,325	10,324,258,064	94,218,175	13,763,407	4,260,424	50,436,396	12,306,114	15,243,853		25,647,892
1978	9,630,679,653	9,455,752,982	85,881,083	12,709,134	2,600,000	51,369,656	7,497,994	13,469,609		1,399,195
1977	9,038,803,014	8,874,719,650	80,034,069	11,471,325	2,844,000	47,647,466	6,630,520	14,050,489		1,405,495
T.O. 9-30-76	2,087,912,845	2,040,460,373	19,849,033	9,524,355	1,283,940	11,888,226	1,557,711	3,348,447		760 ⁵
1976	8,242,088,546	8,074,488,426	130,505,883	10,623,546	3,740,397	11,888,226	6,361,164	13,079,492		3,289,638
1975	7,551,176,877	7,385,070,190	130,590,145	8,794,394	1,600,000	11,888,226	5,304,048	13,007,763		6,810,337
1974	6,734,790,004	6,615,598,931	101,607,099	740,193	2,200,000	11,888,226	3,929,569	2,644,410		8,068,574
1973	6,568,081,137	6,426,646,756	77,701,419	759,462	1,249,917	48,959,907	3,340,854	2,559,306	\$ 1,228	15,324
1972	6,167,996,446	6,045,214,262	75,753,044	663,017	1,850,000	42,051,401	3,007,622	2,257,664	37,254	6,848,192
1971	5,839,390,281	5,726,457,889	69,644,373	603,653	1,850,000	39,561,067	2,541,021	2,005,881	92,616	2,837,818 ²
										1,516,219 ²

Fiscal Year	Total ⁷	Educational Assistance and Readjustment Benefits					Housing for Paraplegic Veterans	Changes in Receivables	Post-Vietnam Era Veterans (Ch. 32) Educational Assistance ⁸
		Post-Korean Veterans (Ch. 34) Educational Assistance	Dependents (Chapter 35) Educational Assistance	Vocational Rehabilitation (Ch. 31, Books, Supplies, etc.)	Subsistence Allowance (Voc. Rehab. Chapter 31) ⁶	Automobiles, etc., for Disabled Veterans			
1980	\$2,383,912,487	\$2,066,583,779	\$194,146,792	\$31,924,840	\$56,055,388	\$12,470,395	\$19,467,885	\$2,341,866	\$921,542
1979	2,800,897,985	2,449,924,173	204,061,042	32,333,777	64,071,095	12,457,080	22,607,775	15,212,423	230,620
1978	3,336,618,918	3,026,928,408	216,981,694	32,767,736	67,285,440	13,757,956	14,299,168	35,409,387 ²	
1977	3,891,448,932	3,567,244,475	202,161,088	32,679,339	68,016,591	13,306,986	14,254,830	6,214,377 ²	
T.O. 9-30-76	738,178,540	667,905,838	28,229,888	6,800,966	13,454,828	3,446,095	3,351,014	14,989,911	
1976	5,543,354,200	5,028,843,708	185,582,673	27,502,222	58,077,759	19,073,015	14,553,425	209,721,398	
1975	4,529,227,472	4,164,774,846	163,277,716	22,500,293	50,565,594	17,251,021	14,322,011	96,535,991	
1974	3,268,556,875	3,005,746,476	115,546,256	22,593,495	45,151,941	5,005,085	11,254,178	63,259,444	
1973	2,696,239,516	2,513,214,849	99,879,139	22,995,825	48,959,907	6,789,579	12,890,667	40,469,457	
1972	1,935,797,731	1,812,434,284	76,631,860	22,937,790	42,051,401	10,539,775	7,068,429	6,185,593	
1971	1,631,738,617	1,521,699,607	70,644,290	19,168,047	39,561,067	6,642,228	8,016,871	5,567,574	

Insurance and Indemnities

Servicemen's

Veterans

Military

Soldiers

Insurance and Indemnities

Fiscal Year	U.S. Government Life Insurance	National Service Life Insurance	Veterans Special Life Insurance	Service-disabled Veterans Insurance	Veterans Reopened Insurance	Service-men's Group Life Insurance Fund	Service-men's Indemnities	Military and Naval Insurance	Soldiers' and Sailors' Civil Relief
1980	\$87,086,482	\$1,290,320,168	\$79,460,717	\$29,483,042	\$50,544,569	\$99,727,203	\$402,000
1979	84,395,143	1,109,596,880	77,173,601	26,108,688	29,240,377	105,653,392	3,000	488,000	830
1978	70,401,933	745,611,702	29,913,010	21,547,719	21,977,962	118,539,000	1,000	567,000	3,178
1977	75,022,139	763,278,062	28,307,779	21,393,447	21,367,900	118,089,380	5,574	666,788	6,698
T.O. 9-30-76	15,284,568	168,012,046	7,869,537	6,077,136	5,366,324	25,927,221	2,786	181,462
1976	88,805,893	949,901,617	38,287,346	23,150,102	22,218,746	126,001,104	191	752,714	9,417
1975	104,128,105	1,028,933,065	34,256,480	22,388,592	21,672,793	132,272,330	9,476	887,627	2,078
1974	96,269,929	879,961,278	26,758,014	21,346,577	19,389,713	83,241,810	4,268	1,006,426	4,887
1973	85,585,286	736,065,715	24,346,142	20,082,876	18,408,675	79,426,528	28,827	1,090,058	2,602
1972	104,217,996	958,006,040	22,629,652	18,909,369	16,021,871	113,341,078	5,683	1,227,405	9,957
1971	101,057,270	859,289,985	22,063,259	17,590,247	14,710,802	163,988,014	743	1,352,490	10,318

Miscellaneous Funds and Expenditures

Fiscal Year	Vocational Rehabilitation Revolving Fund	Grants to The Republic of The Philippines	Rental Maintenance and repair of quarters	Supply Fund	General Post Fund	Consolidated Working Fund	Direct Loans to Veterans	Loan Guaranty Revolving Fund	All Others
1980	\$985,779	\$1,390,088	\$418,130,463	\$6,186,030	\$49,160,273	\$444,633,891
1979	986,491	268,790	389,185,552	5,600,648	57,375,851	453,021,818
1978	1,007,173	1,672,105	392,897,095	5,030,407	1,177,107	73,296,267	514,097,639
1977	992,362	2,013,640	387	364,926,821	4,374,619	1,558,753	96,587,591	520,808,342
T.O. 9-30-76	242,704	543,402	61,709	80,745,157	1,053,625	599,754	19,168,327	116,295,760
1976	833,532	1,869,576	217,101	330,636,825	4,661,975	1,531,704	88,649,371	483,799,919
1975	992,277	2,019,325	205,320	8,554,095	3,912,665	1,059,537	83,694,151	422,549,554
1974	884,041	1,952,900	200,342	213,261,928	3,674,147	795,145	81,861,265	449,102,008
1973	627,319	1,816,967	179,495	199,030,568	3,171,917	502,089	104,064,742	372,580,455	841,346
1972	378,464	1,954,474	180,281	182,937,825	2,603,569	419,666	113,126,877	322,052,753	556,150
1971	351,056	1,652,300	142,653	150,744,832	2,480,062	514,386	147,134,261	268,240,129	649,364

¹ Data are on an accrued expenditures basis.

² Credit.

³ Clothing Allowance, Polio Rentals, Headstones/Markers included in their respective columns beginning with FY 1975; previously included under "All Others."

⁴ Reported separately for the first time Transition Quarter ending 9/30/76.

⁵ Changes in receivables and WWI adjusted service certificates. TQ 9/30/76 WWI adjusted service certificates only.

⁶ Data for FY 1973 and prior years included in Compensation and Pension appropriations.

⁷ Grand totals for FY 1970, 1971 and 1973 include funds for construction of a Corregidor-Bataan memorial (\$76,138, \$761, and \$37,628 respectively).

Veterans Administration Comparative Consolidated Balance Sheet¹

TABLE 80

ASSETS	September 30, 1980	September 30, 1979	Increase (Decrease)
Current assets:			
Cash and disbursing authority ²	\$ 4,603,217,396.79	\$ 4,834,715,912.59	\$.
Accounts receivable	554,437,324.18	534,836,790.66	
Interest receivable	221,089,620.13	200,955,496.24	
Advance for bidding at public sales	269,794.78	322,597.05	
Inventories	140,851,788.23	118,306,215.19	
Acquired security or collateral property	234,449,071.08	220,079,409.33	
Accrued reimbursements due from insurance appropriations	1,942.00		
Total current assets	5,754,316,936.19	5,909,216,421.06	(154,899,484.87)
Other assets:			
Loan receivable	1,873,913,168.02	1,783,844,582.91	
Vendee accounts receivable	1,240,062,377.23	1,216,096,147.90	
Investments	9,612,263,000.00	9,483,959,000.00	
Policy liens	761,481.40	771,539.09	
Deposits with trustee	71,170,474.34	87,338,057.56	
Total other assets	12,798,170,500.99	12,572,009,327.46	226,161,173.53
Fixed assets:			
Land, buildings and plants	2,957,157,994.26	2,722,075,123.66	
Construction and betterments in process	929,153,548.71	803,035,867.40	
Leasehold improvements	2,909,721.85	2,830,689.35	
Equipment	1,408,960,562.08	1,215,566,176.16	
Total Fixed assets	5,298,181,826.90	4,743,507,856.57	554,673,970.33
Deferred charges:			
Construction advance	18,805,893.65	11,551,555.46	
Advance payments on undelivered supplies and services	37,089,699.24	36,860,157.39	
Advance to employees for travel expenses	1,818,588.21	2,208,193.60	
Value of ADP equipment purchases options	3,290,119.96	4,050,502.01	
Advance for educational benefits	16,089,594.82	17,306,271.09	
Total deferred charges	77,085,895.88	71,976,679.55	5,109,216.33
Total assets	23,927,763,159.96	23,296,710,284.64	631,052,875.32
LIABILITIES AND CAPITAL			
Current liabilities:			
Accounts payable	1,159,724,007.92	1,301,654,084.06	
Accrued salaries and wages	173,007,620.96	82,411,377.47	
Accrued annual leave - Canteen Service			
Accrued services and benefits	251,562,482.10	263,592,667.19	
Undelivered orders - personal funds of patients	162,449.63	121,058.96	
Employee payroll allotments for U.S. Savings Bonds	979,290.83	1,297,275.21	
Federal, state, city and territorial income taxes withheld and FICA taxes	12,872,613.81	10,567,934.80	
Canteen Service unredeemed coupons	256,814.76	114,695.69	
Other miscellaneous liabilities - Canteen Service			
Accrued interest - U.S. Treasury	2,112,005.51	2,010,380.16	
Accrued interest on policy liens due general fund	65,068.50	77,187.15	
Accrued interest on dividend deposits	12,316,720.28	9,917,321.87	
Premiums paid on advance	92,073,500.00	95,945,000.00	
Matured contracts payable	43,011,780.85	35,824,928.02	
Undeposited general fund receipts	1,051,011.50	1,101,522.01	
Total current liabilities	1,749,195,366.65	1,804,635,432.59	(55,440,065.94)
Other liabilities:			
Participation certificates outstanding, net	330,850,903.01	426,068,748.26	
Insurance program operating reserves	10,642,914,824.00	10,363,139,559.00	
Total other liabilities	10,973,765,727.01	10,789,208,307.26	184,557,419.75
Unfunded liabilities:			
Accrued annual leave	412,125,201.57	351,608,454.70	
Unredeemed coupons	267,476.41	267,476.41	
Total unfunded liabilities	412,392,677.98	351,875,931.11	60,516,746.87
Total liabilities	13,135,353,771.64	12,945,719,670.96	189,634,100.68
Accountabilities:			
Funds of patients and incompetent beneficiaries	58,793,433.76	57,696,570.21	
Policyholders insurance dividend deposit	363,817,855.86	344,950,325.85	
Borrowers deposits for taxes and insurance	52,447,815.94	52,107,764.97	
Unapplied insurance collections	2,702,860.76	2,037,195.10	
Bid deposits and other suspense items	4,665,600.65	15,948,813.82	
Total accountabilities	482,427,566.97	472,740,669.95	9,686,897.02
Capital reserves:			
Insurance fund retained earnings (reserve for contingencies)	6,735,262.89	48,731,935.22	
Direct loan and loan guaranty programs - reserve for losses	757,936,508.38	718,271,922.99	
Total reserves	764,671,771.25	767,003,858.21	(2,332,086.96)
Capital borrowings from U.S. Treasury - interest bearing - direct loan program	1,730,077,996.00	1,730,077,996.00	
Capital residual	7,815,232,054.10	7,381,168,089.52	434,063,964.58
Total liabilities and capital	\$23,927,763,159.96	\$23,296,710,284.64	\$ 631,052,875.32

¹Contingent liabilities with respect to the guaranty or insurance of loans not shown.²Cash and disbursing authority for annual appropriations reduced by the unobligated balance returned to the Treasury in accordance with Section 18, Title 7, GAO Policy and Procedures Manual.

TABLE 81

FISCAL

VA Supply Fund Comparative Balance Sheet

ASSETS	September 30, 1980	September 30, 1979	Increase (Decrease)
Cash	\$106,312,662.90	\$102,063,309.75	
Advance payments on undelivered orders	127,979.03	238,226.10	
Advances to employees	19,404.40	12,500.36	
Accounts receivable	23,269,466.94	15,733,850.69	
Inventories	99,052,210.70	91,239,264.77	
Work in process — Service & Reclamation division	110,945.09	68,441.43	
Work in process — Printing & Reproduction	25,735.44	18,774.94	
Supply Depot operating equipment less reserve for depreciation	964,622.04	825,196.68	
Printing & Reproduction equipment less reserve for depreciation	547,695.93	474,440.46	
Marketing center equipment less reserve for depreciation	68,100.72	67,154.23	
Total Assets	\$230,498,823.19	\$210,741,159.41	\$19,757,663.78
LIABILITIES AND CAPITAL			
Accrued salaries and wages	489,050.51	347,323.76	
Accrued transportation and service costs	732,386.76	825,037.56	
Accounts payable	41,273,361.03	36,694,961.36	
Advances from other government agencies	202,946.21	219,553.31	
Total Liabilities	\$42,697,744.51	\$38,086,875.99	\$4,610,868.52
Capital at beginning of period	172,998,878.12	172,948,071.92	
Property acquired without cost to VA		50,806.20	
Adjusted capital	\$172,998,878.12	\$172,998,878.12	
Operating profit or loss* — Current fiscal year	15,146,795.26	47,754.49	
Operating profit or loss* — Prior fiscal year	344,594.70*	392,349.49*	
Capital at end of period	\$187,801,078.68	\$172,654,283.42	\$15,146,795.26
Total Liabilities and Capital	\$230,498,823.19	\$210,741,159.14	\$19,757,663.78

VA Supply Fund—Statement of Income and Expense
Fiscal Year 1980

INCOME		
Sales of supplies and equipment		\$430,174,450.18
Less: Cost of Goods sold		421,515,564.62
Income on Sales		8,658,885.56
Other Income:		
Income-station transfers	7,851,160.75	
Discounts on purchases	2,631,070.36	
Reimbursable earnings	3,824,555.90	
Donated income	13,823,735.50	
Credit allowances	1,638,745.12	
Variances and adjustments	36,008.61*	
Increased valuation	106,028.00	
Miscellaneous income	6,025.80	29,845,312.82
Total income		\$ 38,504,198.38
EXPENSES		
Maintenance and operation of supply depots		8,889,674.23
Other operating expenses		8,953,986.41
Net transportation costs		3,279,511.13
Completed S&R projects		1,644,402.21
Depot storage, handling, etc.		234,107.42
Donations, reappraisals and Write offs		342,173.54
Disposal of operating equipment		13,548.18
Total expense		\$ 23,357,403.12
Operating Profit		\$ 15,146,795.26

*Negotiation.

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Estimated Selected Expenditures by State—Fiscal Year 1980

State	Total Expenditures All Programs	Readjustment Benefits							
		Total		Educational Assistance					
				Post-Korean Conflict Veterans (Title 38, U.S.C., Ch. 34)		Sons and Daughters of Deceased & Totally Disabled Veterans (Title 38, U.S.C., Ch. 35)		Widows/Widowers and Spouses of Totally Disabled Veterans (Title 38, U.S.C., Ch. 35)	
		Total Number Who Trained During Year	Amount	Total Number Who Trained During Year	Amount	Total Number Who Trained During Year	Amount	Total Number Who Trained During Year	Amount
World Totals	\$21,640,677,847	1,228,016 ¹	\$2,380,654,079	1,106,889	\$2,066,583,779	82,632	\$171,461,726	12,952	\$22,685,066
Philippines	110,648,988	4,766	8,296,851	2,303	6,064,431	2,407	2,160,985	53	43,836
Other foreign areas	79,370,264	1,011	15,116,334	812	13,890,115	170	1,169,376	11	55,915
Puerto Rico	280,417,539	8,569	21,763,428	5,708	16,075,420	2,173	3,564,647	369	600,832
Other U.S. areas	5,847,030	1,195	2,577,233	1,120	728,753	63	1,614,162	10	231,611
Total U.S.	21,164,394,026	1,212,361	2,332,900,233	1,096,946	2,029,825,060	77,819	162,952,556	12,509	21,752,872
Alabama	430,720,298	32,303	66,326,119	28,590	56,936,254	2,356	4,734,024	393	720,086
Alaska	37,007,950	3,222	4,240,594	3,113	4,016,949	79	136,456	11	15,567
Arizona	321,816,274	27,523	50,730,295	24,630	43,280,146	2,021	3,892,257	417	678,651
Arkansas	340,019,207	14,279	31,530,161	12,365	28,806,340	1,378	2,987,177	276	537,948
California	2,036,628,539	164,136	303,450,531	152,689	275,400,284	8,301	16,988,933	1,794	3,091,206
Colorado	285,020,254	23,433	47,107,143	20,715	39,090,432	1,435	2,925,554	270	422,804
Connecticut	221,872,408	11,526	19,571,823	10,664	17,226,745	499	1,121,070	62	82,585
Delaware	56,811,771	3,713	5,859,883	3,406	5,076,153	187	395,669	24	40,990
District of Columbia	517,700,708	12,481	6,739,946	11,759	5,296,814	385	519,591	49	53,236
Florida	1,209,045,586	62,423	128,937,825	54,439	106,962,309	5,912	12,551,908	1,408	2,487,642
Georgia	569,652,824	33,359	70,832,357	29,279	59,475,874	2,738	6,139,880	455	953,853
Hawaii	64,526,337	9,744	16,255,620	9,115	14,404,240	367	887,617	74	143,845
Idaho	73,004,580	5,340	10,496,549	4,807	9,191,305	337	654,792	41	73,279
Illinois	762,438,364	42,821	78,820,785	40,880	73,300,039	1,284	2,944,143	153	249,545
Indiana	365,405,404	22,530	43,545,941	20,557	37,981,661	968	1,903,412	93	142,327
Iowa	241,623,872	10,397	20,123,392	9,525	17,751,330	520	1,065,230	40	61,229
Kansas	220,799,624	12,519	24,956,838	11,290	21,652,433	813	1,619,747	88	133,181
Kentucky	351,230,104	16,939	36,761,486	15,130	31,865,389	1,324	2,839,352	154	298,945
Louisiana	370,743,528	17,691	37,287,246	16,009	32,852,830	1,293	2,986,615	160	294,053
Maine	141,826,068	7,124	14,297,813	6,292	12,013,119	477	982,006	75	140,852
Maryland	312,515,406	24,511	37,476,976	22,606	32,387,360	1,233	2,617,843	156	264,152
Massachusetts	655,907,173	27,160	51,763,179	23,920	43,303,822	2,496	5,341,751	242	429,269
Michigan	599,924,533	37,939	67,523,201	34,925	59,720,297	1,937	3,976,623	228	361,554
Minnesota	361,453,200	20,116	39,772,901	18,756	35,919,906	976	2,046,118	66	103,595
Mississippi	289,208,557	10,347	22,329,091	8,951	18,631,582	1,093	2,310,014	144	253,406
Missouri	467,317,579	26,137	48,424,197	24,351	44,027,382	1,241	2,440,629	157	282,873
Montana	76,552,882	4,448	8,518,580	4,000	7,260,478	292	623,745	37	44,080
Nebraska	152,782,431	10,349	19,630,726	9,441	17,127,643	625	1,280,038	71	102,806
Nevada	84,396,148	5,585	9,506,848	5,129	8,389,081	221	410,340	54	74,778
New Hampshire	91,400,406	5,956	12,050,506	5,090	9,640,786	392	773,072	47	71,054
New Jersey	471,876,045	20,014	38,789,225	18,031	32,355,707	1,134	3,002,273	183	279,414
New Mexico	160,172,065	10,255	21,284,999	9,014	17,930,695	899	1,885,335	134	221,128
New York	1,509,735,129	50,554	94,779,547	44,926	80,003,182	4,030	8,695,747	451	740,723
North Carolina	568,128,219	37,760	83,813,768	33,916	73,756,787	2,829	6,223,367	487	968,269
North Dakota	52,890,913	3,927	7,308,673	3,666	6,584,331	165	350,749	13	23,205
Ohio	809,917,597	40,473	76,261,680	37,165	66,699,206	1,821	3,787,886	206	367,755
Oklahoma	355,523,019	21,086	41,059,516	18,234	34,063,295	1,915	3,835,475	369	654,702
Oregon	254,748,142	16,461	32,542,103	14,867	28,309,864	807	1,508,912	123	195,144
Pennsylvania	1,009,930,403	39,309	68,416,524	35,808	58,458,952	2,337	5,111,753	200	303,086
Rhode Island	104,866,776	5,680	9,839,708	4,947	8,178,285	531	1,034,239	42	59,352
South Carolina	298,495,667	25,572	55,161,651	23,443	49,991,476	1,447	3,059,460	247	445,272
South Dakota	100,320,530	4,121	8,477,594	3,634	7,059,413	223	512,841	21	32,848
Tennessee	496,956,714	27,163	57,855,002	25,013	52,364,733	1,625	3,360,229	186	344,525
Texas	1,449,161,609	94,752	187,940,736	83,396	159,926,368	7,501	15,347,340	1,577	2,659,201
Utah	115,822,412	9,250	19,765,502	8,261	17,215,190	625	1,181,955	50	88,930
Vermont	57,121,180	1,800	3,404,102	1,445	2,516,057	219	397,114	13	18,834
Virginia	551,018,745	35,145	69,248,158	31,461	59,907,584	2,865	5,844,841	417	727,641
Washington	412,921,865	32,385	64,635,398	29,427	57,554,349	2,031	4,071,007	385	733,284
West Virginia	244,001,169	8,828	18,222,095	7,844	15,489,015	601	1,109,795	70	103,280
Wisconsin	377,019,710	19,235	35,080,629	17,694	30,867,202	1,096	2,305,928	76	134,566
Wyoming	54,416,102	2,540	4,144,971	2,351	3,804,386	138	249,804	20	42,322

¹Excludes the following which are not distributable by State: adjusted service and dependents pay; statutory burial awards and burial flags; special allowances under ch. 23, title 38 U.S.C.; invalid lifts, devices, equipment, etc.; death gratuities; adjusted service certificates World War I; tort claim settlements; mortgage life insurance; funds transferred to Veterans' Administra-

tion by National Cancer Institute; vocational rehabilitation revolving fund; loan guaranty revolving fund; rental, maintenance and repair of quarters; supply revolving fund; and personal funds of patients.

Estimated Selected Expenditures by State—Fiscal Year 1980

State	Readjustment Benefits—Continued				Direct Loans	Insurance and Indemnities	Hospital and Domiciliary Construction ²	Medical Services and Administrative Costs
	Vocational Rehabilitation		Automobiles and Other Conveyances for Disabled Veterans	Homes for Paraplegics				
	Subsistence, Equipment and Supplies, Books and Tuition (Title 38, U.S.C., Ch. 31)							
	Total Number Who Trained During Year	Amount						
World Totals	25,543 ³	87,980,228	12,470,395	19,472,885	39,825,346	1,214,360,174	295,413,576	6,665,012,221
Philippines	3	16,409	11,190	1,922,704	3,689,011
Other foreign areas	18	928	3,650,344
Puerto Rico	319	1,393,975	128,554	8,031	1,783,069	551,061	72,317,688
Other U.S. areas	2	2,707	66,000	286,365
Total U.S.	25,087	86,566,209	12,330,651	19,472,885	39,751,315	1,206,717,692	294,862,515	6,589,005,522
Alabama	964	3,371,607	235,630	328,518	32,034	15,027,363	3,178,487	123,310,724
Alaska	19	63,577	8,045	3,642	1,536,429	22,149,426
Arizona	455	1,614,173	485,319	779,749	67,636	20,591,579	1,278,231	89,909,900
Arkansas	260	940,284	282,337	176,075	1,488,850	12,604,773	11,561,323	91,776,104
California	1,372	4,647,032	1,282,611	2,060,465	32,903	128,996,659	20,666,118	664,038,060
Colorado	1,013	3,863,726	298,941	505,686	20,281,958	2,920,752	83,005,883
Connecticut	301	828,611	196,099	116,713	19,145,986	3,164,740	75,237,517
Delaware	96	307,211	39,960	27,600	2,743,912	426,963	23,959,767
District of Columbia	288	544,286	176,019	150,000	7,585,627	7,830,247	24,872,111	429,674,971
Florida	664	2,702,655	1,095,878	3,137,433	147,973	81,925,875	18,569,436	262,523,006
Georgia	887	3,343,704	379,046	540,000	184,182	29,327,665	6,064,634	144,009,686
Hawaii	188	669,576	30,342	120,000	4,237,288	125,639	13,107,801
Idaho	155	500,063	77,110	635,518	3,940,651	107,723	17,366,953
Illinois	504	1,751,315	273,293	302,450	898,654	50,474,522	6,712,339	317,190,330
Indiana	912	3,238,520	130,021	150,000	92,628	21,915,588	7,426,722	98,923,074
Iowa	312	1,048,551	107,052	90,000	239,435	16,491,023	6,338,879	88,334,666
Kansas	328	1,127,329	93,394	330,754	80,242	12,436,790	1,196,223	82,538,306
Kentucky	331	1,314,557	198,429	244,814	991,736	16,560,495	2,021,982	88,957,208
Louisiana	229	839,039	160,534	154,175	32,426	18,072,139	1,248,903	102,990,946
Maine	280	1,015,789	54,104	91,943	4,176,543	7,310,447	7,854,133	32,527,860
Maryland	516	1,804,183	73,538	329,900	2,593	21,504,991	9,124,694	76,716,771
Massachusetts	502	1,661,719	364,048	662,570	40,089,508	8,273,935	201,357,292
Michigan	849	2,587,677	307,150	570,000	113,013	34,566,634	4,566,199	159,771,468
Minnesota	318	1,003,640	159,484	540,158	3,728,631	20,826,317	3,612,603	124,698,321
Mississippi	159	651,598	154,315	328,176	16,154	11,430,730	4,295,057	76,522,468
Missouri	388	1,252,809	229,521	190,983	91,660	20,206,648	2,695,831	163,734,924
Montana	119	475,204	55,073	60,000	3,218,400	4,393,822	841,679	21,499,683
Nebraska	212	831,505	106,875	181,859	415,452	7,575,279	1,082,977	56,671,715
Nevada	181	578,751	53,898	4,310,611	8,408,624	25,149,157
New Hampshire	427	1,358,355	52,354	154,885	2,430,552	4,605,562	38,815	19,523,076
New Jersey	666	2,449,818	334,613	367,400	44,049,030	1,196,942	117,014,426
New Mexico	208	954,036	113,805	180,000	1,274	7,641,355	2,263,109	39,368,216
New York	1,147	3,919,318	669,029	751,548	316,544	95,941,466	19,117,996	559,609,874
North Carolina	528	1,984,427	286,648	594,270	123,852	22,064,926	1,820,794	133,262,150
North Dakota	83	307,273	43,115	299,600	3,157,931	485,226	18,888,268
Ohio	1,281	3,954,155	662,625	790,053	181,291	55,998,956	10,310,760	239,154,242
Oklahoma	568	1,999,138	266,611	240,295	1,095,856	17,463,088	1,713,834	73,806,152
Oregon	664	2,116,371	141,231	269,581	3,830	14,310,442	2,860,092	78,313,666
Pennsylvania	964	2,928,045	541,097	1,073,591	134,597	78,874,507	10,582,686	309,199,434
Rhode Island	160	470,559	97,273	5,464,297	358,297	32,232,997
South Carolina	435	1,360,873	185,120	119,450	31,872	11,637,438	1,824,657	73,325,850
South Dakota	243	837,385	35,107	809,600	3,130,605	1,489,367	49,235,741
Tennessee	339	1,243,168	334,530	207,817	238,999	17,890,217	9,849,882	162,055,028
Texas	2,278	8,059,518	630,057	1,318,252	2,829,359	67,249,928	7,610,429	372,821,294
Utah	314	1,214,554	64,873	856,811	5,349,306	6,441,132	41,422,224
Vermont	123	421,747	50,350	1,936,267	2,052,254	1,738,449	20,003,999
Virginia	602	1,939,675	261,031	567,386	764,740	34,189,050	14,550,597	136,998,201
Washington	542	1,857,994	147,878	270,886	25,365	23,733,632	6,632,482	118,258,032
West Virginia	313	1,275,573	89,432	155,000	49,293	9,751,934	18,167,566	79,925,593
Wisconsin	369	1,308,552	194,331	270,050	1,007,634	23,426,250	2,474,863	133,958,228
Wyoming	31	26,984	21,475	2,310,447	2,379,589	4,697,603	22,974,845

² Includes \$14,223,186 in Grants for Construction of state extended care facilities.³ Includes 114 not identified by location.

TABLE 83—Continued

FISCAL

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension							
	All Periods of Service							
	Living and Deceased Veterans						Living Veterans	
	Total		Service Connected		Non-Service Connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	4,646,180	\$11,045,412,451	2,631,743	\$7,449,245,642	2,014,437	\$3,596,166,809	3,195,395	\$8,330,722,126
Philippines	37,519	96,740,422	29,608	65,658,675	7,918	31,081,747	14,108	39,270,526
Other Foreign Areas	21,932	60,603,586	8,861	30,701,150	13,071	29,902,436	8,963	27,569,969
Puerto Rico	46,131	183,994,262	22,123	113,568,532	24,008	70,425,730	34,359	155,808,278
Other U.S. Areas	1,318	2,917,432	918	2,115,840	400	801,592	917	2,068,663
Total U.S.	4,539,280	10,701,156,749	2,570,240	7,237,201,445	1,969,040	3,463,955,304	3,137,048	8,106,004,690
Alabama	94,003	222,845,571	48,677	136,007,522	45,326	86,838,049	60,590	158,521,754
Alaska	4,208	9,077,859	3,379	7,475,071	829	1,602,788	3,426	7,294,020
Arizona	56,846	159,238,633	37,265	123,582,210	19,581	35,656,423	41,874	124,557,530
Arkansas	67,968	191,057,996	32,154	118,224,541	35,814	72,833,455	46,274	150,797,074
California	395,566	919,442,268	238,705	662,873,492	156,861	256,568,776	278,950	672,714,112
Colorado	51,849	131,704,518	35,644	103,506,471	16,205	28,198,047	37,860	100,076,268
Connecticut	51,567	104,752,342	33,198	76,741,485	18,369	28,010,857	37,491	81,053,546
Delaware	10,786	23,793,546	6,459	16,558,635	4,327	7,234,911	7,444	17,525,566
District of Columbia	16,116	40,997,806	9,611	29,555,732	6,505	11,442,074	10,920	28,166,904
Florida	249,843	716,941,471	152,457	534,727,709	97,386	182,213,762	180,746	562,695,484
Georgia	121,187	319,234,300	63,853	204,540,879	57,334	114,693,421	80,538	233,768,436
Hawaii	12,083	30,799,989	9,333	25,949,068	2,750	4,850,921	9,033	22,888,077
Idaho	16,726	40,457,186	9,803	28,016,221	6,923	12,440,965	12,156	32,040,243
Illinois	159,050	308,341,734	81,577	184,160,373	77,473	124,181,361	104,223	224,441,305
Indiana	90,336	193,501,451	47,929	123,947,792	42,407	69,553,659	60,088	145,730,283
Iowa	50,175	110,096,477	25,737	69,022,236	24,438	41,074,241	33,804	85,058,458
Kansas	44,716	99,591,225	24,519	66,038,641	20,197	33,552,584	30,161	74,087,271
Kentucky	86,277	205,937,197	41,074	118,312,708	45,203	87,624,489	56,496	152,922,478
Louisiana	88,672	211,111,868	41,639	119,285,276	47,033	91,826,592	56,658	151,471,257
Maine	29,796	75,659,272	15,504	49,120,656	14,292	26,538,616	20,642	59,521,845
Maryland	73,472	167,689,381	44,410	120,855,516	29,062	46,833,865	49,490	119,376,652
Massachusetts	154,336	354,423,259	103,593	273,563,923	50,743	80,859,336	114,368	283,651,550
Michigan	154,786	333,384,018	91,767	234,519,827	63,019	98,864,191	107,549	258,833,276
Minnesota	79,851	168,814,267	45,866	110,728,160	33,985	58,086,267	56,780	131,257,657
Mississippi	67,178	174,615,057	30,062	95,293,821	37,116	79,321,236	43,645	128,682,004
Missouri	103,474	232,164,319	50,484	138,779,780	52,990	93,384,539	68,190	173,757,187
Montana	16,329	38,080,718	9,258	25,939,920	7,071	12,140,798	11,772	30,441,546
Nebraska	28,262	67,406,282	15,754	45,725,071	12,508	21,681,211	19,560	51,979,072
Nevada	15,558	37,020,908	10,392	28,211,805	5,166	8,809,103	11,851	28,921,711
New Hampshire	21,455	52,751,895	13,084	38,545,470	8,371	14,206,425	15,597	41,979,534
New Jersey	138,193	270,826,423	85,788	194,501,968	52,405	76,324,455	97,700	206,161,491
New Mexico	31,425	89,613,112	19,355	65,656,501	12,070	23,956,611	22,911	70,841,839
New York	344,196	739,969,702	200,785	511,137,892	143,411	228,831,810	244,520	578,061,394
North Carolina	127,645	327,042,729	63,454	200,336,535	64,191	126,706,194	84,204	244,297,237
North Dakota	10,595	22,751,215	6,192	14,760,462	4,403	7,990,753	7,609	17,902,385
Ohio	204,087	428,010,668	116,486	285,688,955	87,601	142,321,713	141,067	325,807,287
Oklahoma	80,502	220,384,573	43,976	147,616,103	36,526	72,768,470	55,915	172,236,823
Oregon	53,821	126,718,009	29,376	84,408,140	24,445	42,309,869	38,675	100,167,078
Pennsylvania	257,933	542,722,655	142,195	356,385,692	115,738	186,336,963	173,440	407,066,423
Rhode Island	24,966	56,971,477	15,364	42,261,135	9,602	14,710,342	17,822	44,658,317
South Carolina	65,921	156,514,199	31,547	91,492,652	34,374	65,021,547	41,107	108,271,061
South Dakota	15,302	37,177,623	7,322	22,274,696	7,980	14,902,927	10,630	29,645,576
Tennessee	104,714	249,067,586	48,536	140,986,084	56,178	108,081,502	68,201	183,511,013
Texas	302,144	810,709,863	174,619	557,589,294	127,525	253,120,569	209,693	613,471,231
Utah	18,469	41,987,437	12,315	32,226,436	6,154	9,761,001	13,413	32,690,643
Vermont	10,467	27,986,109	5,722	19,640,345	4,745	8,345,764	7,291	22,180,392
Virginia	113,555	295,267,999	66,199	209,223,424	47,356	86,044,575	77,533	215,510,501
Washington	80,416	199,636,956	52,377	152,106,101	28,039	47,530,855	58,375	153,523,376
West Virginia	50,994	117,884,688	24,588	69,474,235	26,406	48,410,453	33,675	88,717,220
Wisconsin	83,953	181,072,106	46,277	116,737,422	37,676	64,334,684	59,233	142,536,066
Wyoming	7,511	17,908,647	4,580	12,887,362	2,931	5,021,285	5,588	14,535,879

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension — Continued							
	All Periods of Service							
	Living Veterans				Deceased Veterans			
	Service Connected		Non-Service Connected		Total		Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	2,273,772	\$6,103,643,016	921,623	\$2,227,079,110	1,450,785	\$2,714,690,325	357,971	\$1,345,602,626
Philippines	10,961	21,804,655	3,147	17,465,871	23,411	57,469,896	18,640	43,854,020
Other Foreign Areas	5,440	15,708,638	3,523	11,861,331	12,969	33,033,617	3,421	14,992,512
Puerto Rico	19,536	104,318,700	14,823	51,489,578	11,772	28,185,984	2,587	9,249,832
Other U.S. Areas	772	1,614,748	145	453,915	401	848,769	146	501,082
Total U.S.	2,237,063	5,960,196,275	899,985	2,145,808,415	1,402,232	2,595,152,059	333,177	1,277,005,170
Alabama	40,557	106,098,405	20,033	52,423,349	33,413	64,323,817	8,120	29,909,117
Alaska	3,136	6,534,248	290	759,772	782	1,783,839	243	940,823
Arizona	32,327	102,215,559	9,547	22,341,971	14,972	34,681,103	4,938	21,366,661
Arkansas	26,763	99,512,733	19,511	51,284,341	21,694	40,260,922	5,391	18,711,808
California	203,725	511,019,845	75,225	161,693,622	116,616	246,729,431	34,980	151,853,647
Colorado	30,871	83,343,098	6,989	16,733,170	13,989	31,628,250	4,773	20,163,373
Connecticut	30,230	65,497,280	7,261	15,556,266	14,076	23,698,796	2,968	11,244,205
Delaware	5,736	13,549,399	1,708	3,976,167	3,342	6,267,980	723	3,009,236
District of Columbia	8,041	21,580,909	2,879	6,585,995	5,196	12,830,902	1,570	7,974,823
Florida	131,252	441,310,225	49,494	121,385,259	69,097	154,245,987	21,205	93,417,487
Georgia	52,479	159,437,871	28,059	74,330,565	40,649	85,465,864	11,374	45,103,008
Hawaii	8,043	20,608,044	990	2,280,033	3,050	7,911,912	1,290	5,341,024
Idaho	8,683	23,880,020	3,473	8,160,223	4,570	8,416,943	1,120	4,136,201
Illinois	72,217	152,811,500	32,006	71,629,805	54,827	83,900,429	9,360	31,348,673
Indiana	41,995	104,023,859	18,093	41,706,424	30,248	47,771,168	5,934	19,923,933
Iowa	22,414	58,291,608	11,390	26,766,850	16,371	25,038,019	3,323	10,730,628
Kansas	20,810	52,886,625	9,351	21,200,646	14,555	25,503,954	3,709	13,152,016
Kentucky	34,225	95,777,979	22,271	57,144,499	29,781	53,014,719	6,849	22,534,729
Louisiana	34,974	94,959,962	21,684	56,511,295	32,014	59,640,611	6,665	24,325,314
Maine	13,348	41,449,177	7,294	18,072,668	9,154	16,137,427	2,156	7,671,479
Maryland	38,344	94,369,631	11,146	25,007,021	23,982	48,312,729	6,066	26,485,885
Massachusetts	94,151	237,225,344	20,217	46,426,206	39,968	70,771,709	9,442	36,338,578
Michigan	83,202	205,367,275	24,347	53,466,001	47,237	74,550,742	8,565	29,152,562
Minnesota	41,102	94,500,083	15,678	36,757,574	23,071	37,556,770	4,764	16,228,077
Mississippi	24,502	75,417,041	19,143	53,264,963	23,533	45,933,053	5,560	19,876,780
Missouri	43,110	113,329,452	25,080	60,427,735	35,284	58,407,132	7,374	25,450,328
Montana	8,333	22,661,486	3,439	7,780,063	4,557	7,638,169	925	3,278,434
Nebraska	13,598	37,965,442	5,962	14,013,630	8,702	15,427,210	2,156	7,759,629
Nevada	9,347	23,530,727	2,504	5,390,984	3,707	8,099,197	1,045	4,681,078
New Hampshire	11,709	33,022,944	3,888	8,956,590	5,858	10,772,361	1,375	5,522,526
New Jersey	78,211	166,232,683	19,489	39,928,808	40,493	64,664,902	7,577	28,269,285
New Mexico	16,749	55,406,264	6,162	15,435,575	8,514	18,771,273	2,606	10,250,237
New York	182,766	445,788,734	61,754	132,272,660	99,676	161,908,308	18,019	65,349,158
North Carolina	53,047	161,588,142	31,157	82,709,095	43,441	82,745,492	10,407	38,748,383
North Dakota	5,583	12,897,892	2,026	5,004,493	2,986	4,848,830	609	1,862,570
Ohio	104,759	244,841,688	36,308	80,965,599	63,020	102,203,381	11,727	40,847,267
Oklahoma	37,219	123,070,689	18,696	49,166,134	24,587	48,147,750	6,757	24,545,414
Oregon	25,960	71,407,241	12,715	28,759,837	15,146	26,550,931	3,416	13,000,899
Pennsylvania	126,328	301,793,217	47,112	105,273,206	84,493	135,656,232	15,867	54,592,475
Rhode Island	13,833	36,106,132	3,989	8,552,185	7,144	12,313,160	1,531	6,155,003
South Carolina	25,635	68,327,560	15,742	39,943,501	24,544	48,243,138	5,912	23,165,082
South Dakota	6,452	19,361,249	4,178	10,284,327	4,672	7,532,047	870	2,913,447
Tennessee	40,233	112,802,891	27,968	70,708,122	36,513	65,556,537	8,303	28,183,193
Texas	147,767	448,802,591	61,926	164,668,640	92,451	197,238,632	26,852	108,786,703
Utah	10,989	27,214,860	2,424	5,475,783	5,056	9,296,794	1,326	5,011,576
Vermont	4,921	16,584,810	2,370	5,595,582	3,176	5,805,717	801	3,055,535
Virginia	55,472	162,243,548	22,061	53,266,953	36,022	79,757,498	10,727	46,979,876
Washington	45,717	124,065,547	12,658	29,457,829	22,041	46,113,580	6,660	28,040,554
West Virginia	20,688	57,680,585	12,987	31,036,635	17,319	29,167,468	3,900	11,793,650
Wisconsin	41,378	100,555,948	17,855	41,980,118	24,720	38,536,040	4,899	16,181,474
Wyoming	4,132	11,246,233	1,456	3,289,646	1,923	3,372,768	448	1,641,129

TABLE 83—Continued

FISCAL

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension—Continued							
	All Periods of Service		Vietnam Era					
	Deceased Veterans		Living Veterans					
	Non-Service Connected		Total		Service Connected		Non-Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	1,092,814	\$1,369,087,699	569,375	\$1,546,916,008	553,326	\$1,495,830,598	16,049	\$51,085,410
Philippines	4,771	13,615,876	281	1,393,855	276	1,351,113	5	42,742
Other Foreign Areas	9,548	18,041,105	1,610	4,205,292	1,596	4,133,805	14	71,487
Puerto Rico	9,185	18,936,152	8,226	44,537,560	7,697	42,803,217	529	1,734,343
Other U.S. Areas	255	347,677	251	700,308	246	683,181	5	17,127
Total U.S.	1,069,055	1,318,146,889	559,007	1,496,078,993	543,511	1,446,859,282	15,496	49,219,711
Alabama	25,293	34,414,700	10,113	25,651,270	9,846	24,673,590	267	977,680
Alaska	539	843,016	1,347	2,749,036	1,330	2,671,144	17	77,892
Arizona	10,034	13,314,452	9,283	26,541,921	9,109	25,926,052	174	615,869
Arkansas	16,303	21,549,114	6,354	21,791,479	6,065	20,908,898	289	882,581
California	81,636	94,875,184	53,637	134,818,923	52,162	130,538,947	1,475	4,279,976
Colorado	9,216	11,464,877	9,835	26,601,143	9,706	26,161,388	129	439,755
Connecticut	11,108	12,454,591	5,662	14,108,596	5,464	13,521,236	198	587,360
Delaware	2,619	3,258,744	1,661	3,929,160	1,637	3,833,815	24	95,345
District of Columbia	3,626	4,856,079	2,238	5,583,027	2,186	5,420,342	50	162,685
Florida	47,892	60,828,503	35,498	112,355,202	34,718	109,666,419	780	2,688,783
Georgia	29,275	40,362,856	17,582	51,907,058	17,020	50,147,878	562	1,759,180
Hawaii	1,760	2,570,888	3,058	7,684,707	3,017	7,575,758	41	108,949
Idaho	3,450	4,280,742	2,161	5,362,197	2,126	5,260,601	35	101,596
Illinois	45,467	52,551,556	15,324	34,851,800	14,733	32,991,422	591	1,860,378
Indiana	24,314	27,847,235	10,214	27,386,819	9,852	26,253,133	362	1,133,686
Iowa	13,048	14,307,391	5,034	12,382,972	4,849	11,844,005	185	538,967
Kansas	10,846	12,351,938	5,013	12,104,696	4,858	11,638,207	155	466,489
Kentucky	22,932	30,479,990	7,501	21,591,961	7,221	20,646,832	280	945,129
Louisiana	25,349	35,315,297	8,332	22,702,725	8,000	21,670,149	332	1,032,576
Maine	6,998	8,465,948	3,601	10,633,857	3,468	10,218,251	133	415,606
Maryland	17,916	21,826,844	10,179	25,943,634	10,015	25,407,743	164	535,891
Massachusetts	30,526	34,433,130	16,869	43,678,167	16,412	42,312,376	457	1,365,791
Michigan	38,672	45,398,190	20,126	53,200,277	19,623	51,727,559	503	1,472,718
Minnesota	18,307	21,328,693	8,682	18,489,057	8,488	17,917,685	194	571,372
Mississippi	17,973	26,056,273	5,999	17,440,367	5,806	16,764,265	193	676,102
Missouri	27,910	32,956,804	9,569	25,392,080	9,244	24,338,378	325	1,053,702
Montana	3,632	4,360,735	2,280	5,937,227	2,211	5,713,764	69	223,463
Nebraska	6,546	7,667,581	3,177	8,636,354	3,087	8,348,169	90	288,185
Nevada	2,662	3,418,119	2,754	6,160,117	2,728	6,039,357	26	120,760
New Hampshire	4,483	5,249,835	3,801	10,654,930	3,737	10,436,236	64	218,694
New Jersey	32,916	36,395,617	14,016	33,946,082	13,702	33,002,266	314	943,816
New Mexico	5,908	8,521,036	5,356	15,161,947	5,191	14,651,541	165	510,406
New York	81,657	96,559,150	36,160	91,536,953	34,748	87,252,361	1,412	4,284,592
North Carolina	33,034	43,997,099	15,869	47,774,148	15,476	46,377,567	393	1,396,572
North Dakota	2,377	2,986,260	1,295	2,576,352	1,257	2,461,650	38	114,702
Ohio	51,293	61,356,114	22,709	56,532,423	21,986	54,358,903	723	2,173,520
Oklahoma	17,830	23,602,336	10,775	33,132,142	10,333	31,594,966	442	1,537,176
Oregon	11,730	13,550,032	7,616	19,545,397	7,416	18,883,983	200	661,414
Pennsylvania	68,626	81,063,757	23,651	58,011,214	22,960	55,921,719	691	2,089,495
Rhode Island	5,613	6,158,157	8,416	7,454,709	2,812	7,233,829	71	220,880
South Carolina	18,632	25,078,046	1,862	20,587,242	8,241	20,016,357	175	570,885
South Dakota	3,802	4,618,600	5,224,681	1,769	4,935,840	93	288,841
Tennessee	28,210	37,373,380	10,205	28,527,440	9,836	27,271,471	369	1,255,969
Texas	65,599	88,451,929	47,392	137,898,985	46,501	134,917,366	891	2,981,619
Utah	3,730	4,285,218	2,928	6,623,203	2,884	6,428,770	44	194,433
Vermont	2,375	2,750,182	1,206	4,217,441	1,135	3,966,313	71	251,128
Virginia	25,295	32,777,622	18,745	52,407,876	18,378	51,205,198	367	1,202,678
Washington	15,381	18,073,026	14,983	39,278,048	14,681	38,344,772	302	933,276
West Virginia	13,419	17,373,818	4,644	12,680,026	4,469	12,091,875	175	588,151
Wisconsin	19,821	22,354,566	10,109	23,299,248	9,749	22,096,541	360	1,202,707
Wyoming	1,475	1,731,639	1,303	3,392,677	1,267	3,272,386	36	120,291

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension—Continued							
	Vietnam Era						Korean Conflict	
	Deceased Veterans						Living Veterans	
	Total		Service Connected		Non-Service Connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	93,145	\$315,434,060	65,284	\$276,589,464	27,861	\$38,844,596	316,672	\$948,247,580
Philippines	292	1,524,568	230	1,417,476	62	107,092	132	740,517
Other Foreign Areas	1,475	5,950,833	1,260	5,589,774	215	361,059	745	2,542,867
Puerto Rico	877	2,662,028	632	2,153,171	245	508,857	8,351	39,421,697
Other U.S. Areas	58	205,787	47	191,292	11	14,495	143	359,917
Total U.S.	90,443	305,090,844	63,115	267,237,751	27,328	37,853,093	307,301	905,182,582
Alabama	2,437	8,295,175	1,747	7,338,045	690	957,130	5,946	18,029,532
Alaska	168	516,013	122	460,102	46	55,911	382	858,867
Arizona	1,523	5,501,405	1,070	4,852,890	453	648,515	4,163	14,798,030
Arkansas	1,288	4,038,775	922	3,500,514	366	538,261	3,957	15,145,872
California	9,816	35,688,506	7,053	32,053,935	2,763	3,634,571	29,986	83,701,893
Colorado	1,688	6,486,791	1,296	5,947,347	392	539,444	3,825	11,443,539
Connecticut	561	1,718,033	376	1,475,811	185	242,222	3,589	8,699,681
Delaware	274	983,381	197	880,461	77	102,920	729	1,988,074
District of Columbia	303	1,072,130	211	947,549	92	124,581	1,433	4,406,188
Florida	5,422	21,216,715	4,213	19,547,859	1,209	1,668,856	16,537	63,255,367
Georgia	3,831	13,744,109	2,868	12,470,360	963	1,273,749	7,971	26,710,550
Hawaii	500	2,075,530	412	1,952,628	88	122,902	1,316	3,810,497
Idaho	407	1,287,426	267	1,105,396	140	182,030	1,063	3,271,689
Illinois	2,551	7,077,066	1,491	5,564,069	1,060	1,512,997	9,728	23,579,523
Indiana	1,632	4,626,138	1,008	3,782,302	624	843,836	5,883	15,906,196
Iowa	662	1,861,818	425	1,529,753	237	332,065	2,966	8,481,673
Kansas	969	3,195,032	652	2,768,040	317	426,992	2,598	7,755,989
Kentucky	1,743	5,452,231	1,231	4,725,630	512	726,601	5,463	16,406,650
Louisiana	2,031	6,258,421	1,344	5,281,423	687	976,998	5,621	16,034,140
Maine	591	1,951,387	417	1,707,468	174	243,919	2,137	7,036,065
Maryland	1,803	6,708,020	1,329	6,077,901	474	630,119	5,257	14,139,876
Massachusetts	1,509	5,148,260	1,053	4,484,938	456	663,322	14,167	37,554,088
Michigan	2,550	8,937,558	1,433	5,295,807	1,117	1,641,751	10,532	29,504,025
Minnesota	954	2,590,122	599	2,114,406	355	475,716	5,163	13,227,614
Mississippi	1,337	4,436,549	973	3,929,421	364	507,128	3,823	12,738,674
Missouri	1,910	5,611,321	1,218	4,658,569	692	952,752	6,379	18,374,396
Montana	324	898,973	193	721,219	131	177,754	1,028	3,010,886
Nebraska	544	1,684,147	358	1,451,582	186	232,566	1,899	5,584,677
Nevada	427	1,549,442	299	1,391,473	128	157,969	1,192	3,710,938
New Hampshire	348	1,192,970	253	1,067,429	95	125,541	1,574	4,842,130
New Jersey	1,663	5,460,164	1,105	4,659,965	558	800,199	10,274	23,925,773
New Mexico	886	2,846,122	560	2,383,267	326	462,855	2,364	8,514,189
New York	3,427	10,079,718	2,123	8,143,453	1,304	1,936,265	24,268	64,192,537
North Carolina	3,603	12,494,273	2,649	11,210,935	954	1,283,338	7,986	26,464,217
North Dakota	160	444,460	104	378,510	56	65,950	637	1,773,417
Ohio	3,282	9,383,927	1,999	7,590,761	1,283	1,793,166	13,950	36,112,781
Oklahoma	1,890	6,373,367	1,362	5,612,648	528	760,719	5,142	18,270,632
Oregon	967	2,911,993	601	2,431,684	366	480,309	3,152	9,672,306
Pennsylvania	3,284	9,821,171	2,075	8,067,216	1,209	1,753,955	16,561	44,427,608
Rhode Island	305	1,094,208	209	949,338	96	144,870	1,650	4,453,047
South Carolina	2,181	7,803,940	1,606	7,015,639	575	788,301	3,784	11,612,121
South Dakota	252	692,969	156	557,386	96	135,583	1,075	3,424,715
Tennessee	2,323	7,385,263	1,632	6,433,983	691	951,280	5,919	18,166,641
Texas	7,948	29,145,432	5,941	26,342,924	2,007	2,802,508	18,180	61,596,443
Utah	430	1,402,571	280	1,192,658	150	209,913	1,279	3,871,836
Vermont	169	578,717	125	518,444	44	60,273	791	2,701,982
Virginia	3,407	13,871,981	2,680	12,893,947	727	978,034	7,841	25,597,810
Washington	2,096	7,653,638	1,539	6,918,203	557	735,435	5,873	18,091,109
West Virginia	904	2,566,069	625	2,198,385	279	367,684	3,729	11,137,864
Wisconsin	976	2,743,954	598	2,210,777	378	533,177	6,034	15,636,702
Wyoming	187	533,463	116	443,301	71	90,162	505	1,534,536

TABLE 83—Continued

FISCAL

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension—Continued							
	Korean Conflict							
	Living Veterans				Deceased Veterans			
	Service Connected		Non-Service Connected		Total		Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	235,654	\$717,771,706	81,018	\$230,475,874	128,939	\$268,967,642	39,186	\$141,417,547
Philippines	112	630,489	20	110,028	160	602,732	120	534,754
Other Foreign Areas	661	2,185,698	84	357,169	736	2,089,679	343	1,442,333
Puerto Rico	4,943	25,842,767	3,408	13,578,930	2,118	6,026,009	857	2,637,936
Other U.S. Areas	120	289,293	23	70,624	62	116,487	18	44,455
Total U.S.	229,818	688,823,459	77,483	216,359,123	125,863	260,132,735	37,848	136,758,069
Alabama	4,275	12,985,551	1,671	5,043,981	3,093	6,377,389	1,032	3,387,591
Alaska	358	787,860	24	71,007	126	215,750	18	73,977
Arizona	3,340	12,571,003	823	2,227,027	1,491	3,649,429	532	2,303,646
Arkansas	2,550	11,234,956	1,407	3,910,916	1,482	3,012,000	584	1,765,532
California	23,543	66,662,918	6,443	17,038,975	11,783	28,938,043	4,301	19,178,722
Colorado	3,242	9,770,961	583	1,672,578	1,436	3,344,298	491	2,123,130
Connecticut	2,956	7,016,890	633	1,682,791	1,358	2,520,703	268	1,010,533
Delaware	587	1,581,473	142	404,601	330	714,602	81	367,662
District of Columbia	1,073	3,465,548	360	939,640	608	1,896,893	253	1,388,386
Florida	12,405	51,010,373	4,132	12,244,994	6,155	16,800,404	2,629	11,989,026
Georgia	5,013	17,819,945	2,958	8,890,605	3,679	7,862,204	1,280	4,542,644
Hawaii	1,186	3,498,082	130	312,415	466	1,063,700	216	732,759
Idaho	870	2,712,563	193	559,126	417	739,402	97	314,664
Illinois	7,124	16,774,627	2,604	6,804,896	5,148	8,647,734	1,013	2,805,556
Indiana	4,217	11,400,066	1,666	4,506,130	2,692	5,545,615	606	1,678,721
Iowa	2,243	6,502,917	723	1,978,756	1,334	2,273,757	354	917,216
Kansas	2,004	6,225,903	594	1,530,086	1,190	2,313,342	392	1,225,932
Kentucky	3,342	10,208,507	2,121	6,198,143	2,419	4,423,641	789	2,059,056
Louisiana	3,880	11,100,945	1,741	4,933,195	2,609	5,272,480	847	2,691,549
Maine	1,444	4,995,483	693	2,040,582	751	1,492,652	236	742,026
Maryland	4,222	11,438,659	1,035	2,701,217	2,406	5,524,129	713	3,157,872
Massachusetts	11,960	31,179,432	2,207	6,374,654	3,391	7,002,320	958	3,387,421
Michigan	8,152	23,306,569	2,380	6,197,456	4,644	7,939,307	860	2,538,465
Minnesota	4,323	10,908,605	840	2,319,009	2,044	3,594,856	479	1,378,724
Mississippi	2,405	8,412,100	1,418	4,326,574	1,826	3,702,077	669	2,027,682
Missouri	4,545	13,240,649	1,834	5,133,747	2,911	5,430,614	855	2,599,152
Montana	806	2,371,074	222	639,812	433	747,865	88	281,828
Nebraska	1,488	4,386,405	411	1,198,272	845	1,572,553	219	743,341
Nevada	981	3,129,236	211	581,702	428	944,874	110	529,814
New Hampshire	1,153	3,593,084	421	1,249,046	543	1,101,226	150	560,704
New Jersey	8,356	19,093,192	1,918	4,832,581	3,717	6,911,429	762	2,791,480
New Mexico	1,770	6,766,740	594	1,747,449	909	2,097,797	303	1,193,449
New York	17,850	47,052,334	6,418	17,140,203	8,557	15,775,140	1,729	5,814,103
North Carolina	5,374	18,373,886	2,612	8,090,331	3,761	7,392,106	1,185	3,844,801
North Dakota	499	1,439,564	138	333,853	353	560,629	80	167,028
Ohio	10,452	27,087,736	3,498	9,025,045	5,629	9,702,360	1,200	3,456,534
Oklahoma	3,637	13,830,639	1,505	4,439,993	1,994	4,167,731	795	2,561,447
Oregon	2,305	7,319,114	847	2,353,191	1,210	2,439,514	348	1,300,796
Pennsylvania	12,426	33,163,584	4,135	11,264,024	7,090	12,971,302	1,678	5,023,735
Rhode Island	1,322	3,549,230	328	903,817	589	1,203,641	158	576,442
South Carolina	2,522	7,802,627	1,262	3,809,494	2,250	4,810,518	720	2,514,898
South Dakota	705	2,414,006	370	1,010,709	455	836,821	98	313,078
Tennessee	3,666	11,681,130	2,253	6,485,511	2,946	5,451,432	991	2,721,653
Texas	13,939	49,056,049	4,241	12,540,394	7,915	19,391,203	3,094	12,629,640
Utah	1,109	3,407,458	170	464,378	567	1,056,687	130	491,773
Vermont	529	1,985,291	262	716,691	258	513,765	77	254,101
Virginia	5,683	19,420,749	2,158	6,177,061	3,504	8,768,551	1,388	5,862,962
Washington	4,863	15,284,576	1,010	2,806,533	2,259	5,619,576	856	3,823,898
West Virginia	2,181	6,945,995	1,548	4,191,869	1,459	2,510,618	524	1,147,687
Wisconsin	4,551	11,605,295	1,483	4,031,407	2,204	3,937,200	566	1,597,493
Wyoming	392	1,251,880	113	282,656	199	350,856	46	167,740

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension—Continued							
	Korean Conflict		World War II					
	Deceased Veterans		Living Veterans					
	Non-Service Connected		Total		Service Connected		Non-Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	89,753	\$127,550,096	1,849,597	\$4,558,392,125	1,193,196	\$3,047,037,107	656,401	\$1,511,355,018
Philippines	40	67,978	12,379	29,193,570	10,180	17,687,484	2,199	11,506,086
Other Foreign Areas	393	647,346	3,607	9,519,798	2,180	6,119,277	1,427	3,400,521
Puerto Rico	1,261	3,388,073	12,658	48,769,791	3,660	20,554,118	8,998	28,215,673
Other U.S. Areas	44	72,032	416	701,104	306	351,534	110	349,570
Total U.S.	88,015	123,374,666	1,820,537	4,470,207,862	1,176,870	3,002,324,694	643,667	1,467,883,168
Alabama	2,061	2,989,798	36,005	90,088,754	20,978	53,511,280	15,027	36,577,474
Alaska	108	141,773	1,196	2,583,956	978	2,062,102	218	521,854
Arizona	959	1,345,783	21,670	62,758,994	14,845	47,339,783	6,825	15,419,211
Arkansas	898	1,248,468	28,958	88,295,076	14,439	52,540,377	14,519	35,754,699
California	7,482	9,759,321	152,212	341,842,744	98,152	230,488,464	54,060	111,354,280
Colorado	945	1,221,168	17,438	43,120,330	12,846	32,727,961	4,592	10,392,369
Connecticut	1,090	1,510,170	23,015	46,309,053	18,114	36,167,269	4,901	10,141,784
Delaware	249	346,940	4,042	9,024,071	2,758	6,160,200	1,284	2,863,871
District of Columbia	355	508,507	5,620	13,360,655	3,476	8,682,722	2,144	4,677,933
Florida	3,526	4,811,378	99,250	295,308,868	64,566	213,600,933	34,694	81,707,935
Georgia	2,399	3,319,560	44,301	120,802,009	22,872	67,193,209	21,429	53,608,800
Hawaii	250	330,941	3,086	7,634,331	2,474	6,295,841	612	1,338,490
Idaho	320	424,738	6,820	17,769,106	4,463	12,537,023	2,357	5,232,083
Illinois	4,135	5,842,178	65,213	134,259,901	42,963	86,106,392	22,250	48,154,509
Indiana	2,086	2,866,894	35,006	79,510,189	22,973	52,943,260	12,033	26,566,929
Iowa	980	1,356,541	19,897	48,379,272	12,762	32,444,948	7,135	15,934,324
Kansas	798	1,087,410	17,402	40,636,506	11,312	27,343,295	6,090	13,293,211
Kentucky	1,630	2,364,585	36,057	92,103,466	19,487	51,742,624	16,570	40,360,842
Louisiana	1,762	2,580,931	35,401	90,745,828	18,751	49,696,018	16,650	41,049,810
Maine	515	750,626	11,859	32,974,549	6,614	20,656,741	5,245	12,317,808
Maryland	1,693	2,366,257	26,691	61,155,137	18,552	43,431,035	8,139	17,724,102
Massachusetts	2,433	3,614,899	68,500	166,077,122	54,992	136,094,563	13,508	29,982,559
Michigan	3,784	5,400,842	63,046	141,772,099	46,716	107,072,261	16,330	34,699,838
Minnesota	1,565	2,216,132	33,421	75,114,337	23,254	52,693,388	10,167	22,420,949
Mississippi	1,157	1,674,395	28,296	80,006,522	13,209	40,020,813	15,087	39,985,709
Missouri	2,056	2,831,462	41,550	99,741,024	24,029	59,795,473	17,521	39,945,551
Montana	345	466,037	6,601	16,653,962	4,174	11,429,409	2,427	5,224,553
Nebraska	626	829,212	11,203	28,514,123	7,239	19,599,004	3,964	8,915,119
Nevada	318	415,060	6,169	14,412,360	4,238	10,478,751	1,931	3,933,609
New Hampshire	393	540,522	8,007	20,526,248	5,280	14,528,602	2,727	5,997,646
New Jersey	2,955	4,119,949	61,262	122,541,222	48,003	95,820,232	13,259	26,720,990
New Mexico	606	904,348	11,887	36,889,720	7,437	26,393,630	4,450	10,496,090
New York	6,828	9,961,037	154,850	351,972,406	111,188	261,468,418	43,662	90,503,988
North Carolina	2,576	3,547,305	49,016	134,114,836	25,098	73,963,864	23,918	60,150,972
North Dakota	273	393,601	4,518	10,484,765	3,149	7,155,785	1,369	3,328,980
Ohio	4,429	6,245,826	86,469	188,389,952	61,251	133,975,578	25,218	54,414,374
Oklahoma	1,199	1,606,284	31,215	92,417,611	17,679	59,101,231	13,536	33,316,380
Oregon	862	1,138,718	21,117	52,621,039	12,452	34,157,610	8,665	18,463,429
Pennsylvania	5,412	7,947,567	111,087	250,103,878	77,257	176,486,180	33,830	73,617,698
Rhode Island	431	627,199	10,867	26,695,010	8,147	21,088,606	2,720	5,606,404
South Carolina	1,530	2,295,620	23,764	60,719,295	11,370	30,992,626	12,394	29,726,669
South Dakota	357	523,743	5,777	15,487,825	3,127	9,418,774	2,650	6,609,051
Tennessee	1,955	2,729,779	43,096	109,219,818	21,729	58,320,155	21,367	50,899,663
Texas	4,821	6,761,563	113,610	318,963,291	66,783	201,253,994	46,827	117,709,297
Utah	437	564,914	6,968	16,610,062	5,468	13,342,448	1,500	3,267,614
Vermont	181	259,684	4,174	12,046,872	2,543	8,402,854	1,631	3,644,018
Virginia	2,116	2,905,589	39,285	103,588,952	22,830	66,030,532	16,455	37,558,420
Washington	1,403	1,795,678	27,423	69,320,973	19,200	50,861,087	8,223	18,459,886
West Virginia	935	1,362,931	20,832	52,287,847	11,543	31,514,436	9,289	20,773,411
Wisconsin	1,638	2,339,707	32,524	77,110,729	21,227	52,173,433	11,297	24,937,296
Wyoming	153	183,116	2,864	7,141,167	1,893	5,020,480	971	2,120,687

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension—Continued							
	World War II						World War I	
	Deceased Veterans						Living Veterans	
	Total		Service Connected		Non-Service Connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	670,359	\$1,247,062,671	173,286	\$575,368,579	497,073	\$672,294,092	197,711	\$537,088,575
Philippines	19,170	42,590,933	17,444	38,213,480	1,726	4,377,453	931	5,864,526
Other Foreign Areas	2,992	6,121,753	716	2,760,977	2,276	3,360,776	2,104	8,701,901
Puerto Rico	4,221	9,427,185	632	2,493,481	3,589	6,933,704	1,920	8,230,647
Other U.S. Areas	183	295,649	38	101,409	145	194,240	9	27,358
Total U.S.	643,793	1,189,227,151	154,456	531,799,232	489,337	657,427,919	192,746	514,264,143
Alabama	15,233	28,268,540	3,363	10,760,269	11,870	17,508,271	3,530	11,303,424
Alaska	287	527,795	54	206,086	233	321,709	35	103,518
Arizona	6,358	13,469,399	1,908	7,590,548	4,450	5,878,851	2,299	6,401,724
Arkansas	9,206	17,636,266	2,530	7,915,796	6,766	9,720,470	3,738	12,631,185
California	49,651	98,700,785	13,960	54,914,803	35,691	43,785,982	16,682	41,196,457
Colorado	5,352	10,536,794	1,593	5,690,311	3,759	4,846,483	2,201	6,370,039
Connecticut	6,641	11,978,355	1,624	5,666,099	5,017	6,312,256	1,987	4,543,030
Delaware	1,685	2,980,537	306	1,146,867	1,379	1,833,670	296	740,231
District of Columbia	2,477	5,844,202	653	3,337,044	1,824	2,507,158	435	1,169,138
Florida	29,811	63,798,882	8,910	35,962,380	20,901	27,836,502	12,025	32,844,347
Georgia	18,309	36,058,936	4,503	16,130,129	13,806	19,928,807	3,584	11,830,885
Hawaii	1,086	2,228,591	360	1,233,743	726	994,848	222	574,883
Idaho	1,877	3,503,373	502	1,660,730	1,375	1,842,643	999	2,677,721
Illinois	26,369	43,798,255	5,122	16,008,782	21,247	27,790,473	7,575	17,458,571
Indiana	13,423	22,777,383	2,954	8,991,883	10,469	13,785,500	4,737	11,512,188
Iowa	6,930	11,956,731	1,867	5,546,720	5,063	6,410,011	3,771	9,827,209
Kansas	6,090	11,068,797	1,817	5,656,814	4,273	5,411,983	2,850	7,029,202
Kentucky	13,867	24,519,000	3,302	9,593,963	10,565	14,925,037	3,938	11,659,902
Louisiana	15,481	28,865,295	2,930	9,911,683	12,551	18,953,612	3,252	10,671,679
Maine	4,093	7,477,898	1,067	3,384,097	3,026	4,093,801	1,385	3,861,063
Maryland	11,025	20,923,279	2,473	9,832,129	8,552	11,091,150	2,235	5,425,663
Massachusetts	19,267	36,531,874	5,186	18,822,044	14,081	17,709,830	5,319	13,485,347
Michigan	22,625	38,821,560	4,697	15,000,617	17,928	23,820,943	5,957	13,372,389
Minnesota	9,797	17,363,726	2,535	7,978,682	7,262	9,385,044	5,450	15,102,529
Mississippi	10,525	20,116,138	2,346	7,433,733	8,176	12,682,405	2,922	10,158,898
Missouri	15,179	26,569,889	3,598	11,142,041	11,581	15,427,848	6,160	16,890,920
Montana	2,001	3,378,246	420	1,367,600	1,581	2,010,646	894	2,288,593
Nebraska	3,659	6,778,986	1,104	3,547,209	2,555	3,231,777	1,721	4,496,680
Nevada	1,594	3,081,028	376	1,543,197	1,218	1,537,831	417	1,055,656
New Hampshire	2,669	4,850,941	634	2,370,596	2,035	2,480,345	789	1,919,940
New Jersey	20,303	34,942,661	4,262	14,706,502	16,041	20,236,159	4,649	9,289,842
New Mexico	3,710	7,667,514	1,120	3,907,505	2,590	3,760,009	1,187	3,724,816
New York	51,875	91,436,673	10,966	38,040,273	40,909	53,396,400	12,058	25,957,852
North Carolina	20,381	37,275,911	4,357	14,284,165	16,024	22,991,746	4,675	14,994,262
North Dakota	1,267	2,067,742	302	855,449	965	1,212,293	589	1,659,086
Ohio	30,911	52,479,814	6,133	19,929,593	24,778	32,550,221	8,232	19,214,347
Oklahoma	10,052	19,204,959	3,029	9,576,156	7,023	9,628,803	3,701	11,948,203
Oregon	6,196	11,292,042	1,588	5,482,111	4,608	5,809,931	3,426	8,743,397
Pennsylvania	45,083	77,398,840	9,160	29,294,529	35,923	48,104,311	9,985	23,015,768
Rhode Island	3,304	6,200,592	812	3,038,561	2,492	3,162,031	1,010	2,343,957
South Carolina	11,258	20,643,605	2,159	7,321,854	9,099	13,321,751	2,150	6,513,457
South Dakota	1,760	3,070,348	422	1,268,583	1,338	1,801,765	1,209	3,385,287
Tennessee	16,807	30,069,528	3,760	11,347,240	13,047	18,722,288	4,512	13,932,195
Texas	40,743	82,796,745	11,411	40,697,763	29,332	42,098,982	11,296	36,846,057
Utah	2,218	3,867,292	609	1,988,626	1,519	1,878,666	846	1,955,816
Vermont	1,439	2,783,112	403	1,443,005	1,036	1,340,107	496	1,334,988
Virginia	15,555	30,775,488	3,916	14,802,546	11,639	15,972,942	3,554	10,080,387
Washington	8,282	16,466,662	2,509	9,282,482	5,773	7,184,180	3,672	9,332,196
West Virginia	8,689	14,851,303	2,074	5,848,561	6,615	9,002,742	2,236	6,257,144
Wisconsin	10,661	18,238,857	2,588	7,742,746	8,073	10,496,111	5,452	14,138,114
Wyoming	735	1,284,982	182	594,387	553	690,595	403	994,961

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension									
	World War I									
	Living Veterans						Deceased Veterans			
	Service Connected		Emergency Officer Retirement Pay		Non-Service Connected		Total		Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	29,720	\$102,575,693	182	\$1,212,613	167,808	\$433,300,269	494,455	\$640,834,406	30,128	\$129,329,152
Philippines	11	81,863	920	5,782,663	2,764	7,878,054	124	591,550
Other Foreign Areas	106	669,747	1,998	8,032,154	6,780	14,789,497	274	1,347,271
Puerto Rico	34	277,362	1,886	7,953,285	4,102	8,422,967	107	529,107
Other U.S. Areas	2	10,764	7	16,594	50	61,873	1	1,912
Total U.S.	29,567	101,535,957	182	1,212,613	162,997	411,515,573	480,759	609,682,015	29,622	126,859,312
Alabama	462	1,469,610	3	17,528	3,065	9,816,286	11,126	15,401,390	620	2,679,573
Alaska	4	14,499	31	89,019	155	338,648	4	15,987
Arizona	573	2,295,829	5	31,696	1,721	4,074,199	4,607	7,778,891	577	2,513,423
Arkansas	445	1,891,759	3	14,920	3,291	10,724,506	8,750	12,634,811	661	2,823,858
California	3,455	12,108,572	29	203,407	13,198	28,884,478	36,629	48,038,244	2,991	12,868,125
Colorado	513	2,114,431	4	28,770	1,684	4,226,838	4,513	7,016,244	543	2,349,517
Connecticut	461	1,403,226	1	5,146	1,525	3,134,658	5,015	5,736,860	359	1,537,020
Delaware	36	117,331	2	10,550	258	612,350	924	1,089,961	37	154,144
District of Columbia	109	334,912	5	35,010	321	799,216	1,359	2,124,792	122	548,536
Florida	2,160	8,075,291	15	114,259	9,850	24,654,797	23,027	32,676,271	1,628	7,244,553
Georgia	474	1,728,853	7	45,652	3,103	10,056,380	12,710	19,294,318	883	3,814,357
Hawaii	15	54,704	207	520,179	699	1,202,746	21	99,789
Idaho	111	410,303	888	2,267,418	1,665	2,157,673	93	385,313
Illinois	1,019	2,641,618	6	37,406	6,550	14,779,547	19,372	20,223,798	808	3,396,111
Indiana	713	2,020,636	2	13,296	4,022	9,478,256	11,437	12,706,813	682	2,852,719
Iowa	433	1,530,930	1	5,726	3,337	8,290,553	7,003	7,563,442	370	1,533,988
Kansas	344	1,126,745	2,506	5,902,457	5,590	6,503,465	316	1,329,917
Kentucky	649	2,021,799	3	16,130	3,288	9,621,973	10,601	14,936,994	699	2,911,979
Louisiana	290	1,169,958	1	6,007	2,961	9,495,714	10,802	15,154,200	609	2,554,025
Maine	160	551,519	2	10,872	1,223	3,298,672	3,379	4,025,056	174	741,590
Maryland	427	1,348,506	5	40,136	1,803	4,037,021	7,356	9,341,290	441	1,925,020
Massachusetts	1,275	4,762,575	5	32,146	4,039	8,690,626	14,463	17,202,380	1,191	5,109,577
Michigan	830	2,296,773	5,127	11,075,616	16,171	17,040,793	705	2,959,607
Minnesota	970	3,630,682	5	30,148	4,475	11,441,699	9,652	12,127,254	713	3,117,643
Mississippi	479	1,883,749	2,443	8,275,149	8,976	14,514,669	821	3,488,847
Missouri	753	2,544,342	9	58,532	5,398	14,288,046	13,999	16,616,551	804	3,359,292
Montana	174	597,692	720	1,690,901	1,624	2,076,412	104	436,841
Nebraska	231	894,874	1	6,007	1,489	3,594,799	3,303	4,121,934	203	849,435
Nevada	81	300,743	336	754,913	1,033	1,549,963	65	292,302
New Hampshire	121	442,278	1	8,339	667	1,469,323	2,038	2,661,397	143	629,492
New Jersey	655	1,855,421	2	17,304	3,992	7,417,117	13,569	13,116,032	542	2,265,555
New Mexico	236	1,038,453	2	12,526	949	2,673,837	2,582	4,459,005	260	1,141,154
New York	1,802	5,593,987	9	56,118	10,247	20,307,747	33,533	37,124,953	1,595	6,687,880
North Carolina	447	1,927,103	3	21,872	4,225	13,045,287	13,837	18,624,451	642	2,813,557
North Dakota	108	4,432,128	481	1,226,958	1,122	1,525,129	57	235,722
Ohio	1,366	3,857,341	7	35,753	6,859	15,321,253	21,437	25,129,340	1,195	5,060,888
Oklahoma	487	2,067,943	2	12,704	3,212	9,867,556	9,462	13,810,794	566	2,455,365
Oregon	426	1,463,153	2	13,472	2,998	7,266,772	6,024	7,526,590	402	1,750,624
Pennsylvania	1,543	4,709,477	9	55,341	8,433	18,250,950	26,864	28,273,122	1,336	5,681,949
Rhode Island	146	529,397	864	1,814,560	2,660	2,644,325	107	472,433
South Carolina	241	667,018	4	28,160	1,905	5,818,279	7,687	10,380,563	435	1,922,205
South Dakota	144	469,561	1,065	2,915,726	2,085	2,588,558	105	469,350
Tennessee	537	1,860,307	5	34,058	3,970	12,037,830	12,847	17,660,617	766	3,277,223
Texas	1,337	5,401,176	9	64,338	9,950	31,380,543	30,730	44,389,348	1,987	8,539,200
Utah	136	409,388	710	1,546,428	1,708	2,062,066	112	468,056
Vermont	92	352,785	404	982,203	1,158	1,423,493	90	387,081
Virginia	473	1,719,640	7	48,605	3,074	8,312,142	11,085	15,080,454	590	2,548,213
Washington	555	2,074,411	2	14,860	3,115	7,242,925	7,773	10,057,020	505	2,162,230
West Virginia	261	769,937	1	6,583	1,974	5,480,624	5,737	7,571,768	262	1,084,422
Wisconsin	740	2,326,894	2	13,510	4,710	11,797,710	10,168	11,455,296	635	2,716,865
Wyoming	68	225,698	1	5,726	334	763,537	713	921,831	46	196,760

TABLE 83—Continued

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension									
	World War I		Regular Establishment							
	Deceased Veterans		Living Veterans							
	Non-Service Connected		Total		Service Connected		Reserve Officers		Special Acts	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	464,327	\$511,505,254	261,706	\$739,152,718	261,685	\$739,135,436	1	\$ 12,304	20	\$ 4,978
Philippines	2,640	7,286,504	382	2,053,706	382	2,053,706				
Other Foreign Areas	6,506	13,442,226	897	2,600,111	897	2,600,111				
Puerto Rico	3,995	7,893,860	3,202	14,841,236	3,202	14,841,236				
Other U.S. Areas	49	59,961	98	279,976	98	279,976				
Total U.S.	451,137	482,822,703	257,127	719,377,689	257,106	719,360,407	1	12,304	20	4,978
Alabama	10,506	12,721,817	4,992	13,440,846	4,992	13,440,846				
Alaska	151	322,661	466	998,643	466	998,643				
Arizona	4,030	5,265,468	4,456	14,051,329	4,455	14,051,196			1	133
Arkansas	8,089	9,810,953	3,262	12,921,956	3,261	12,921,823			1	133
California	33,638	35,170,119	26,385	71,017,568	26,383	71,017,275			2	293
Colorado	3,970	4,666,727	4,560	12,538,230	4,560	12,538,230				
Connecticut	4,656	4,199,840	3,234	7,383,513	3,234	7,383,513				
Delaware	887	935,817	716	1,846,030	716	1,846,030				
District of Columbia	1,237	1,576,256	1,190	3,640,900	1,189	3,640,789			1	111
Florida	21,399	25,431,718	17,399	58,843,106	17,398	58,842,950			1	156
Georgia	11,827	15,479,961	7,094	22,502,467	7,093	22,502,334			1	133
Hawaii	678	1,102,957	1,351	3,183,659	1,351	3,183,659				
Idaho	1,572	1,772,360	1,113	2,959,530	1,113	2,959,530				
Illinois	18,564	16,827,687	6,372	14,261,035	6,372	14,261,035				
Indiana	10,755	9,854,094	4,238	11,393,681	4,238	11,393,468			1	213
Iowa	6,633	6,029,454	2,126	5,963,082	2,126	5,963,082				
Kansas	5,274	5,173,548	2,293	6,554,277	2,292	6,552,475			1	1,802
Kentucky	9,902	12,025,015	3,528	11,143,065	3,523	11,142,087			5	978
Louisiana	10,193	12,600,175	4,052	11,316,885	4,052	11,316,885				
Maine	3,205	3,283,466	1,660	5,016,311	1,660	5,016,311				
Maryland	6,915	7,416,270	5,123	12,703,552	5,123	12,703,552				
Massachusetts	13,272	12,092,803	9,507	22,824,029	9,507	22,824,029				
Michigan	15,466	14,081,186	7,881	20,964,113	7,881	20,964,113				
Minnesota	8,939	9,009,611	4,062	9,319,575	4,062	9,319,575				
Mississippi	8,155	11,025,822	2,604	8,336,247	2,603	8,336,114			1	133
Missouri	13,195	13,257,259	4,530	13,352,078	4,530	13,352,078				
Montana	1,520	1,639,571	968	2,549,547	968	2,549,547				
Nebraska	3,100	3,272,499	1,548	4,730,983	1,548	4,730,983				
Nevada	968	1,257,661	1,319	3,582,640	1,319	3,582,640				
New Hampshire	1,895	2,031,905	1,417	4,014,405	1,417	4,014,405				
New Jersey	13,027	10,850,477	7,493	16,444,268	7,493	16,444,268				
New Mexico	2,322	3,317,851	2,113	6,543,374	2,113	6,543,374				
New York	31,938	30,437,073	17,171	44,365,783	17,169	44,365,516			2	267
North Carolina	13,195	15,810,894	6,650	20,924,174	6,649	20,923,841			1	333
North Dakota	1,065	1,289,407	570	1,408,765	570	1,408,765				
Ohio	20,242	20,068,452	9,697	25,503,586	9,696	25,503,453			1	133
Oklahoma	8,896	11,355,429	5,081	16,463,206	5,081	16,463,206				
Oregon	5,622	5,775,966	3,358	9,569,909	3,358	9,569,909				
Pennsylvania	25,528	22,591,173	12,133	31,450,068	12,133	31,450,068				
Rhode Island	2,553	2,171,892	1,406	3,705,070	1,406	3,705,070				
South Carolina	7,252	8,458,358	3,257	8,820,772	3,257	8,820,772				
South Dakota	1,980	2,119,208	707	2,123,068	707	2,123,068				
Tennessee	12,081	14,383,394	4,460	13,635,770	4,460	13,635,770				
Texas	28,743	35,850,148	19,199	58,109,668	19,198	58,087,364	1	12,304		
Utah	1,596	1,594,010	1,392	3,626,796	1,392	3,626,796				
Vermont	1,068	1,036,412	623	1,877,567	622	1,877,567				
Virginia	10,495	12,532,241	8,101	23,818,984	8,101	23,818,824			1	160
Washington	7,268	7,894,790	6,416	17,472,128	6,416	17,472,128				
West Virginia	5,475	6,487,346	2,233	6,351,113	2,233	6,351,113				
Wisconsin	9,533	8,738,431	5,109	12,340,275	5,109	12,340,275				
Wyoming	667	725,071	511	1,470,063	511	1,470,063				

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension									
	Regular Establishment						Mexican Border Services			
	Deceased Veterans						Living Veterans			
	Total		Service Connected		Special Acts		Total		Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	49,951	\$222,253,542	49,943	\$222,251,526	8	\$ 2,016	196	\$ 517,988	5	\$ 46,662
Philippines	720	3,089,636	720	3,089,636
Other Foreign Areas	828	3,852,157	828	3,852,157
Puerto Rico	358	1,432,225	358	1,432,225
Other U.S. Areas	42	162,024	42	162,024
Total U.S.	48,003	213,717,500	47,995	213,715,484	8	2,016	196	517,988	5	46,662
Alabama	1,354	5,730,216	1,354	5,730,216	2	7,546
Alaska	45	184,671	45	184,671
Arizona	851	4,106,144	851	4,106,144	3	4,967
Arkansas	692	2,701,727	692	2,701,727	2	3,353
California	6,663	32,782,086	6,663	32,782,086	22	52,232
Colorado	849	4,048,971	849	4,048,971	1	1,421	1	1,421
Connecticut	341	1,556,583	341	1,556,583	4	9,673
Delaware	102	458,261	102	458,261
District of Columbia	330	1,748,575	330	1,748,575	1	1,937
Florida	3,803	18,562,674	3,803	18,562,674	13	38,507
Georgia	1,837	8,123,774	1,837	8,123,774	2	1,381
Hawaii	280	1,318,008	280	1,318,008
Idaho	161	670,098	161	670,098
Illinois	924	3,567,076	924	3,567,076	8	17,818
Indiana	676	2,568,907	675	2,568,695	1	212	3	3,830
Iowa	306	1,196,381	306	1,196,381	7	18,718
Kansas	532	2,171,313	532	2,171,313
Kentucky	822	3,209,571	821	3,209,351	1	212	3	10,096
Louisiana	934	3,882,160	934	3,882,160
Maine	262	1,096,298	262	1,096,298
Maryland	1,107	5,469,983	1,106	5,469,771	1	212	5	8,790
Massachusetts	1,053	4,527,075	1,052	4,526,863	1	212	5	27,145	1	20,223
Michigan	866	3,340,911	865	3,340,699	1	212	5	15,110
Minnesota	435	1,627,375	435	1,627,353	1	2,747
Mississippi	750	2,993,457	750	2,993,457
Missouri	897	3,680,660	897	3,680,660	2	6,689
Montana	120	470,946	120	470,946
Nebraska	271	1,163,329	271	1,163,329	6	11,997
Nevada	195	924,292	195	924,292
New Hampshire	193	885,537	193	885,537	9	21,881
New Jersey	905	3,842,143	905	3,842,143	2	4,063
New Mexico	363	1,624,862	363	1,624,862	4	7,793
New York	1,599	6,633,842	1,598	6,633,630	1	212	6	20,443
North Carolina	1,571	6,582,923	1,571	6,582,923	8	25,600
North Dakota	66	225,861	66	225,861
Ohio	1,194	4,788,154	1,194	4,788,154	7	23,856	1	3,811
Oklahoma	1,004	4,336,814	1,004	4,336,814
Oregon	474	2,026,006	474	2,026,006	3	6,832
Pennsylvania	1,613	6,507,563	1,613	6,507,563	18	43,877	1	6,848
Rhode Island	244	1,114,589	244	1,114,589	6	6,524
South Carolina	990	4,383,922	990	4,383,922	5	15,024
South Dakota	89	305,050	89	305,050
Tennessee	1,146	4,365,060	1,145	4,364,858	1	212	4	11,039
Texas	4,416	20,557,475	4,415	20,556,943	1	532	14	43,234
Utah	195	870,463	195	870,463
Vermont	104	445,625	104	455,625	2	1,542
Virginia	2,148	10,843,898	2,148	10,843,898	4	13,360
Washington	1,247	5,833,815	1,247	5,833,815	4	17,852	1	14,359
West Virginia	415	1,514,595	415	1,514,595
Wisconsin	511	1,908,860	511	1,908,860	3	8,636
Wyoming	58	238,941	58	238,941	2	2,475

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension									
	Mexican Border Service								Spanish-American War	
	Living Veterans		Deceased Veterans						Living Veterans	
	Non-Service Connected		Total		Service Connected		Non-Service Connected		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
46,662	World Total	191 \$ 471,326	529 \$ 507,110	2 \$ 8,618	527 \$ 498,492	138 \$ 407,132				
	Philippines						3	24,352		
	Other Foreign Areas									
	Puerto Rico						1	7,347		
	Other U.S. Areas									
46,662	Total U.S.	191 471,326	529 507,110	2 8,618	527 498,492	134 375,433				
	Alabama	2 7,546	4 5,886	1 4,309	3 1,577	1 382				
	Alaska									
	Arizona	3 4,967	5 5,099		5 5,099					
	Arkansas	2 3,353	6 8,112		6 8,112	2 8,153				
	California	22 52,232	23 14,862		23 14,862	26 84,231				
1,421	Colorado		2 4,253		2 4,253	1 1,630				
	Connecticut	4 9,673	13 8,550		13 8,550					
	Delaware		3 5,902		3 5,902					
	District of Columbia	1 1,937				3 6,059				
	Florida	13 38,507	31 27,131		31 27,131	24 50,087				
	Georgia	2 1,381	6 7,278		6 7,278	4 14,086				
	Hawaii									
	Idaho									
	Illinois	8 17,818	8 6,865		8 6,865	3 12,657				
	Indiana	3 3,830	23 16,319		23 16,319	6 17,380				
	Iowa	7 18,718	18 16,908		18 16,908	3 5,532				
	Kansas		7 6,627		7 6,627	5 6,601				
	Kentucky	3 10,096	4 5,633		4 5,633	4 7,338				
	Louisiana		3 3,482		3 3,482					
	Maine		5 5,889		5 5,889					
	Maryland	5 8,790	19 17,936		19 17,936					
20,223	Massachusetts	4 6,922	23 17,856		23 17,856	2 5,654				
	Michigan	5 15,110	17 19,939		17 19,939	2 5,263				
	Minnesota	1 2,747	15 11,763		15 11,763	1 1,798				
	Mississippi		1 870		1 870	1 1,296				
	Missouri	2 6,689	18 16,955		18 16,955	1 1,334				
	Montana		1 2,053		1 2,053	1 5,258				
	Nebraska	6 11,997	2 4,976		2 4,976	2				
	Nevada									
	New Hampshire	9 21,881	15 9,868		15 9,868					
	New Jersey	2 4,063	17 14,880		17 14,880	4 10,241				
	New Mexico	4 7,793	6 6,056		6 6,056					
	New York	6 20,443	26 24,091		26 24,091	7 15,420				
	North Carolina	8 25,600	16 17,961		16 17,961					
3,811	North Dakota		2 2,685		2 2,685					
	Ohio	6 20,045	14 15,208		14 15,208	4 30,342				
	Oklahoma		8 7,596		8 7,596	1 5,029				
6,848	Oregon	3 6,832	13 14,877	1 4,309	12 10,568	2 8,199				
	Pennsylvania	17 37,029	43 33,483		43 33,483	6 14,010				
	Rhode Island	6 6,524	5 3,380		5 3,380					
	South Carolina	5 15,024	17 18,316		17 18,316	1 3,150				
	South Dakota		2 2,158		2 2,158					
	Tennessee	4 11,039	12 13,035		12 13,035	5 18,110				
	Texas	14 43,234	27 40,828		27 40,828	3 16,403				
	Utah		3 3,426		3 3,426					
	Vermont	2 1,542	4 2,861		4 2,861					
14,359	Virginia	4 13,360	8 4,497		8 4,497	2 3,132				
	Washington	3 3,493	10 7,284		10 7,284	5 11,716				
	West Virginia		7 5,065		7 5,065	1 2,580				
	Wisconsin	3 8,636	17 18,411		17 18,411	2 2,362				
	Wyoming	2 2,475								

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension									
	Spanish-American War									
	Living Veterans				Deceased Veterans					
	Service Connected		Non-Service Connected		Total		Service Connected		Non-Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	3	\$ 20,897	135	\$ 386,235	13,170	\$ 18,742,664	137	\$ 613,070	13,033	\$ 18,129,594
Philippines			3	24,352	305	1,783,973	2	7,124	303	1,776,849
Other Foreign Areas					157	228,820			157	228,820
Puerto Rico			1	7,347	96	215,570	1	3,912	95	211,658
Other U.S. Areas					6	6,949			6	6,949
Total U.S.	3	20,897	131	354,536	12,606	16,507,352	134	602,034	12,472	15,905,318
Alabama			1	382	158	236,618	3	9,114	155	227,504
Alaska					1	962			1	962
Arizona					132	165,523			132	165,523
Arkansas			2	8,153	174	223,567	2	4,381	172	219,186
California	1	198	25	84,033	2,037	2,548,733	12	55,976	2,025	2,492,757
Colorado			1	1,630	147	189,349	1	4,097	146	185,252
Connecticut					147	181,553			147	181,553
Delaware					23	32,546			23	32,546
District of Columbia	1	1,586	2	4,473	116	141,113	1	4,733	115	136,380
Florida			24	50,087	833	1,134,179	21	101,369	812	1,032,810
Georgia			4	14,086	273	371,197	3	21,744	270	349,453
Hawaii					19	23,337	1	4,097	18	19,240
Idaho					42	58,754			42	58,754
Illinois			3	12,657	446	567,403	2	7,279	444	560,124
Indiana			6	17,380	355	516,070	8	46,190	347	469,880
Iowa			3	5,532	115	116,450	1	6,570	114	159,880
Kansas			5	6,601	172	238,531			172	238,531
Kentucky			4	7,338	319	462,134	7	34,750	312	427,384
Louisiana					152	202,991	1	4,474	151	198,517
Maine					69	83,752			69	83,752
Maryland					263	321,732	3	18,414	260	303,318
Massachusetts			2	5,654	254	331,731	2	7,736	252	323,995
Michigan			2	5,263	356	440,766	5	17,357	351	423,409
Minnesota			1	1,798	167	233,828	3	11,269	164	222,559
Mississippi			1	1,296	115	160,348	1	3,640	114	156,708
Missouri					358	469,749	2	10,614	356	459,135
Montana			1	1,334	54	64,674			54	64,674
Nebraska			2	5,258	77	99,331	1	4,733	76	94,598
Nevada					30	49,598			30	49,598
New Hampshire					52	70,422	2	8,768	50	61,654
New Jersey			4	10,241	316	375,837	1	3,640	315	372,197
New Mexico					55	67,445			55	67,445
New York			7	15,420	653	827,798	8	29,819	645	797,979
North Carolina					264	348,041	3	12,012	261	336,029
North Dakota					18	22,324			16	22,324
Ohio	1	19,113	3	11,229	545	696,004	6	20,681	539	675,323
Oklahoma			1	5,029	176	246,354	1	3,640	175	242,714
Oregon			2	8,199	261	338,823	2	5,697	259	333,126
Pennsylvania			6	14,010	510	645,131	5	17,155	505	627,976
Rhode Island					35	50,685	1	3,640	34	47,045
South Carolina			1	3,150	157	199,137	2	6,574	155	192,563
South Dakota					25	30,177			25	30,177
Tennessee			5	18,110	413	583,037	7	31,390	406	551,647
Texas			3	16,403	659	899,207	4	20,233	655	878,974
Utah					25	34,289			25	34,289
Vermont					44	58,144	2	7,279	42	50,865
Virginia			2	3,132	309	407,085	5	28,310	304	378,775
Washington			5	11,716	371	473,212	4	19,926	367	453,286
West Virginia			1	2,580	102	142,124			102	142,124
Wisconsin			2	2,362	183	232,816	1	4,733	182	228,083
Wyoming					31	42,741			31	42,741

Estimated Selected Expenditures By State—Fiscal Year 1980

State	Compensation and Pension											
	Indian Wars						Civil War					
	Deceased Veterans						Deceased Veterans					
	Total		Service Connected		Non-Service Connected		Total		Service Connected		Non-Service Connected	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
World Total	45	\$54,789			45	\$54,789	182	\$233,441	5	\$24,670	187	\$208,771
Philippines												
Other Foreign Areas							1	878			1	878
Puerto Rico												
Other U.S. Areas												
Total U.S.	45	54,789			45	54,789	181	232,563	5	24,670	186	207,893
Alabama							8	8,603			8	8,603
Alaska												
Arizona	3	3,631			3	3,631	2	1,582			2	1,582
Arkansas							6	5,664			6	5,664
California	5	6,951			5	6,951	9	11,221			9	11,221
Colorado							2	1,550			2	1,550
Connecticut												
Delaware							1	949			1	949
District of Columbia							3	3,197			3	3,197
Florida	3	3,186			3	3,186	12	26,545	1	9,623	11	16,922
Georgia	1	764			1	764	3	3,284			3	3,284
Hawaii												
Idaho							1	217			1	217
Illinois	3	3,724			3	3,724	6	7,508			6	7,508
Indiana	1	1,626			1	1,626	9	12,297	1	3,423	8	8,874
Iowa							3	2,532			3	2,532
Kansas							5	6,847			5	6,847
Kentucky							6	5,523			6	5,523
Louisiana							2	1,582			2	1,582
Maine							4	4,495			4	4,495
Maryland							3	6,360	1	4,778	2	1,582
Massachusetts	1	1,274			1	1,274	7	8,939			7	8,939
Michigan							8	9,908			8	9,908
Minnesota	4	5,495			4	5,495	3	2,373			3	2,373
Mississippi							6	8,945			6	8,945
Missouri	4	4,102			4	4,102	8	7,291			8	7,291
Montana												
Nebraska	1	1,954			1	1,954						
Nevada												
New Hampshire												
New Jersey							3	1,756			3	1,756
New Mexico	2	1,681			2	1,681	1	791			1	791
New York	2	2,582			2	2,582	4	3,511			4	3,511
North Carolina	2	1,527			2	1,527	6	8,299			6	8,299
North Dakota												
Ohio							8	7,918			8	7,918
Oklahoma							1	791			1	791
Oregon	1	1,414			1	1,414						
Pennsylvania	1	764			1	764	5	4,528			5	4,528
Rhode Island							2	1,740			2	1,740
South Carolina	1	796			1	796	3	2,341			3	2,341
South Dakota	4	5,966			4	5,966						
Tennessee	1	764			1	764	18	27,827	2	6,846	16	20,981
Texas	5	6,588			5	6,588	8	11,806			8	11,806
Utah												
Vermont												
Virginia							6	5,544			6	5,544
Washington							3	2,373			3	2,373
West Virginia							6	5,926			6	5,926
Wisconsin												
Wyoming												

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