Performance Measures Tables

By Strategic Goal and by Program

The following tables display our key and supporting measures both by strategic goal and objective (see Table 1), and by organization and program (see Table 2).

For each measure, we show available trend data for 5 years. **The actual 2007 result as compared to the 2007 target is designated as follows:**

- **Green or G**: Target was met or exceeded.
- **Yellow or Y**: Target was not met, but the deviation did not significantly impact program performance.
- **Red or R**: Target was not met, but the deviation did significantly impact program performance.

For measure coded "red", we provide a brief explanation of why there was a significant deviation between the actual and planned performance level and briefly identify the steps being taken to ensure goal achievement in the future. Please see the Performance Shortfalls tables beginning on page 86 for this information.

For those measures where 2007 results are partial or estimated, we will publish final data in the FY 2009 Congressional Budget and/or the FY 2008 Performance and Accountability Report.

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

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

VA continues working to ensure the quality and integrity of our data. The Key Measures Data Table starting on page 204 provides the definition, data source, frequency of collection, any data limitations, and data verification and measure validation for each of VA's 23 key measures. The Assessment of Data Quality beginning on page191 provides an overall view of how our programs verify and validate data for all of the measures. Definitions for the key as well as supporting measures are located in Part IV.

Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Strategic Goal 1: Restore the capability of veterans with disabilities to the greatest extent possible, and improve the quality of their lives and that of their families.							
Objective 1.1: Maximize the physical, mental, and social functioning of veterans with disabilities and be a leader in providing specialized health care services.							
Percent of Specially Adapted Housing (SAH) grant recipients who indicate that grant-funded housing adaptations increased their independence (1) New measure; first year that Housing survey data are reported for this measure.	N/A	N/A	N/A	(1) Avail. 11/2007	TBD	98.0%	99.0%
Objective 1.2: Provide timely and accurate decisions on disability compensation claims to improve the economic status and quality of life of service-disabled veterans.							
National accuracy rate (core rating work) % (Compensation) (through July)	86%	87%	84%	88%	* 88% Y	89%	98%
Rating-related compensation actions - average days pending	114	120	122	130	135 R	127	100
Compensation & Pension rating-related actions - average days to process	182	166	167	177	183 R	160	125
Overall satisfaction rate % (Compensation) (1) No customer satisfaction survey was performed for 2006.	58%	59%	58%	(1) N/A	TBD	63%	90%
National accuracy rate % (compensation authorization work) (through July)	88%	90%	90%	91%	* 91% Y	93%	98%
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans	N/A	N/A	N/A	N/A	TBD**	TBD **	50%
Percent of compensation recipients who were kept informed of the full range of available benefits (1) No customer satisfaction survey was performed for 2006.	42%	43%	44%	(1) N/A	TBD	49%	60%
Percent of compensation recipients who perceive that VA compensation redresses the effect of service-connected disability in diminishing the quality of life	N/A	N/A	N/A	N/A	TBD**	TBD **	70%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	77%	81%	85%	83%	* 83% Y	87%	98%
Productivity Index % (Compensation and Pension)	N/A	N/A	N/A	90%	88% Y	94%	100%
Deficiency-free decision rate (BVA)	89.0%	93.0%	89.0%	93.0%	94.0% G	92.0%	92.0%
Appeals resolution time (Number of Days) (Joint BVA-VBA Compensation and Pension measure)	633	529	622	657	660 G	685	675

***** These are partial or estimated data. Final data will be published in the FY 2009 Congressional Budget and/or the FY 2008 Performance and Accountability Report.

Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
BVA Cycle Time (Days)	135	98	104	148	136 R	105	104
Appeals decided per Veterans Law Judge (BVA)	604	691	621	698	721 G	630	752
Cost per case (BVA time only)	$1,493	$1,302	$1,453	$1,381	$1,337 G	$1,580	$1,627
** Pending review of the Veterans' Disability Benefits Commission's recommendations of October 2007 to determine whether a program outcome study is necessary.							

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

Rehabilitation rate % (VR&E)	59%	62%	63%	73%	73% G	73%	80%
Speed of entitlement decisions in average days (VR&E) (1) Corrected	63	57	62	(1) 54	54 Y	53	40
Accuracy of decisions (Services) % (VR&E)	82%	86%	87%	82%	77% Y	85%	96%
Customer satisfaction (Survey) % (VR&E) (1) No customer satisfaction survey was performed for 2003, 2005, 2006, or 2007.	(1) N/A	79%	(1) N/A	(1) N/A	(1) N/A	82%	92%
Accuracy of Vocational Rehabilitation program completion decisions % (VR&E)	81%	94%	97%	95%	93% Y	97%	99%
Serious Employment Handicap (SEH) Rehabilitation Rate % (VR&E)	58%	N/A	N/A	73%	73% Y	74%	80%
Common Measures**							
Percent of participants employed first quarter after program exit (VR&E)	N/A	N/A	N/A	TBD	N/A	70%	80%
Percent of participants still employed three quarters after program exit (VR&E)	N/A	N/A	N/A	TBD	N/A	70%	85%
Percent change in earnings from pre-application to post-program employment (VR&E)	N/A	N/A	N/A	TBD	N/A	TBD	TBD
Average cost of placing participant in employment (VR&E)	N/A	N/A	N/A	TBD	$8,856 Y	$8,000	$6,500
** These are designated as "common measures" because they are also used by other agencies that manage vocational rehabilitation programs. They also support the Performance Improvement Initiative of the President's Management Agenda. Targets shown above are estimates and may change. First set of data is projected to be received in January 2008.							

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

Average days to process - DIC actions (Compensation)	153	125	124	136	132 R	125	90
Percent of DIC recipients above the poverty level (Compensation)	N/A	99%	100%	100%	100% G	100%	100%
Percent of DIC recipients who are satisfied that VA recognized their sacrifice (Compensation)	N/A	80%	N/A	N/A	TBD**	TBD **	90%
** Pending review of the Veterans' Disability Benefits Commission's recommendations of October 2007 to determine whether a program outcome study is necessary.							

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	Strategic Target
Strategic Goal 2: Ensure a smooth transition for veterans from active military service to civilian life.							
Objective 2.1: Ease the reentry of new veterans into civilian life by increasing awareness of, access to, and use of VA health care, benefits, and services.							
Percent of severely-injured or ill OEF/OIF servicemembers/veterans who are contacted by their assigned VA case manager within 7 calendar days of notification of transfer to the VA system as an inpatient or outpatient (through August)	N/A	N/A	N/A	Baseline	* 90% G	90%	95%
Percent of veterans returning from a combat zone who respond "yes completely" to survey questions regarding how well they perceive that their VA provider listened to them and if they had trust and confidence in their VA provider	N/A	N/A	N/A	Baseline	TBD	68%	72%
Percent of appointments for primary care scheduled within 30 days of desired date for veterans and servicemembers returning from a combat zone	N/A	N/A	N/A	Baseline	TBD	90%	94%
Out of all original claims filed within the first year of release from active duty, the percentage filed at a BDD site prior to a servicemember's discharge (Compensation) (1) The 2006 result was recalculated to capture workload not included in the initial calculation. This result is a more accurate depiction of BDD participation as VBA moved to a new automated data collection methodology in 2006.	N/A	N/A	55%	(1) 46%	TBD	48%	65%
Number of outpatient visits at Joint Ventures and significant sites. (Facilities providing 500 or more outpatient visits and/or admissions per year)	N/A	N/A	N/A	121,229	TBD	123,654	133,845
Objective 2.2: Enhance the ability of veterans and servicemembers to achieve educational and career goals by providing timely and accurate decisions on education claims and continuing payments at appropriate levels.							
Average days to complete original education claims	23	26	33	40	32.4 G	35	10
Average days to complete supplemental education claims	12	13	19	20	13.2 G	15	7
Montgomery GI Bill usage rate (%): All program participants (through July) (1) Corrected	58%	65%	(1) 66%	(1) 67%	* 68% G	68%	75%
Montgomery GI Bill usage rate (%): Veterans who have passed their 10-year eligibility period (through July) (1) Corrected	66%	71%	(1) 71%	(1) 70%	* 72% G	72%	80%
Percent of Montgomery GI Bill participants who successfully completed an education or training program Measure under development	N/A	N/A	N/A	TBD	TBD	TBD	TBD

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Percentage of beneficiaries that believe their VA educational assistance has been either very helpful or helpful in the attainment of their educational or vocational goal Measure under development	N/A	N/A	N/A	TBD	TBD	TBD	TBD
Customer satisfaction-high rating (Education) (1) No customer satisfaction survey was performed for 2005, 2006, or 2007.	89%	86%	(1) N/A	(1) N/A	(1) N/A	88%	95%
Telephone Activities - Blocked call rate (Education) % (1) Corrected	13%	20%	38%	(1) 43%	32% Y	25%	10%
Telephone Activities - Abandoned call rate (Education) % (1) Corrected	7%	10%	17%	(1) 20%	11% G	15%	5%
Payment accuracy rate (Education) % (1) Corrected	94%	94%	96%	(1) 94%	95% Y	96%	97%

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

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

Percent of patients rating VA health care service as very good or excellent:							
Inpatient (through May)	74%	74%	77%	78%	* 77% Y	78%	80%
Outpatient (through May)	73%	72%	77%	78%	* 77% Y	78%	80%
Percent of primary care appointments scheduled within 30 days of desired date (through August)	93%	94%	96%	96%	* 97.2% G	96%	96%
Percent of specialty care appointments scheduled within 30 days of desired date (1) reflects cum. for year, (2) henceforth, eight clinical areas included instead of five (through August)	(1) 89%	(2) 93%	93%	94%	* 95% G	95%	95%
Clinical Practice Guidelines Index II (through May)	N/A	N/A	N/A	83%	* 83% Y	84%	87%
Prevention Index III (through May)	N/A	N/A	N/A	88%	* 87% Y	88%	88%
Annual percent increase of non-institutional, long-term care average daily census using 2006 as the baseline (1) Baseline = 43,325 (2) through June	N/A	N/A	N/A	(1) Baseline	* 6.5% R	26.3%	9.5%
Number of new enrollees waiting to be scheduled for their first appointment (electronic waiting list) (through August)	N/A	N/A	N/A	10,000	* 117 G	7,500	fewer than 500

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results FY 2003	Results FY 2004	Results FY 2005	Results FY 2006	Results FY 2007 Result	Target FY 2007 Target	Strategic Target
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities	67%	69%	73%	74%	TBD	76%	90%
Percent of admission notes by residents that have a note from attending physician within one day of admission:							
Surgery	N/A	N/A	75%	86%	TBD	88%	95%

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

Non-rating pension actions - average days to process	67	58	68	92	104 R	96	60
National accuracy rate (authorization pension work) % (through July)	81%	84%	86%	88%	* 91% G	89%	98%
Compensation & Pension rating-related actions - average days to process	182	166	167	177	183 R	160	125
National accuracy rate (core rating-related pension work) % (through July)	91%	93%	90%	90%	* 91% Y	92%	98%
Rating-related pension actions - average days pending	98	77	83	90	89 Y	85	65
Overall satisfaction rate % (Pension) (1) No customer satisfaction survey was performed for 2006.	66%	66%	65%	(1) N/A	TBD	71%	90%
Percent of pension recipients who were informed of the full range of available benefits (1) No customer satisfaction survey was performed for 2006.	39%	40%	41%	(1) N/A	TBD	43%	60%
Percent of pension recipients who said their claim determination was very or somewhat fair (1) No customer satisfaction survey was performed for 2006.	62%	64%	65%	(1) N/A	TBD	68%	75%
Percent of VA beneficiaries receiving financial assistance for medical expenses** (Pension)	N/A	N/A	N/A	TBD	TBD	TBD	TBD
Percent of pension recipients who believe that the processing of their claim reflects the courtesy, compassion, and respect due to a veteran** (1) No customer satisfaction survey was performed for 2006.	N/A	N/A	78%	(1) N/A	TBD	80%	95%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	77%	81%	85%	83%	* 83% Y	87%	98%

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	Strategic Target
Appeals resolution time (Number of Days) (Joint Compensation and Pension measure with BVA)	633	529	622	657	660 G	685	675
Productivity Index % (Compensation and Pension)	N/A	N/A	N/A	90%	88% Y	94%	100%
** New measures added during Pensions PART review.							

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

Average number of days to process TSGLI disbursements (Insurance)	N/A	N/A	N/A	3.8	3.0 G	5	5
Percent of servicemembers covered by SGLI (Insurance)	N/A	N/A	98%	99%	99% G	98%	98%
Conversion rate of disabled SGLI members to VGLI (%) (Insurance)	N/A	N/A	35%	41%	40% Y	45%	50%
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average enlisted servicemember (Insurance)	N/A	N/A	1.9	1.8	1.8 G	1.7	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average officer (Insurance)	N/A	N/A	1.0	0.9	0.9 G	0.9	1.0
Ratio of premium rates charged per $1,000 by other organizations compared to the SGLI premium rates charged per $1,000 by VA for similar coverage (Insurance)	N/A	N/A	1.4	1.3	1.2 G	1.0	1.0
Ratio of premium rates charged per $1,000 by other organizations compared to the VGLI premium rates charged per $1,000 by VA for similar coverage (Insurance)	N/A	N/A	0.9	0.9	0.9 Y	1.0	1.0
Rate of high veterans' satisfaction ratings on services delivered % (Insurance)	95%	96%	96%	96%	96% G	95%	95%
Number of disbursements (death claims, loans, and cash surrenders) per FTE (Insurance)	N/A	N/A	1,692	1,697	1,724 G	1,702	1,750

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Objective 3.4: Ensure that the burial needs of veterans and eligible family members are met.							
Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	75.2%	75.3%	77.1%	80.2%	83.4% Y	83.8%	90.0%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	94%	94%	94%	94%	94% Y	97%	100%
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours	73%	73%	73%	74%	72% Y	80%	93%
Average number of days to process a claim for reimbursement of burial expenses	42	48	57	72	91 R	60	21
National Accuracy Rate for burial claims processed % (through July)	92%	94%	93%	94%	* 94% Y	95%	98%
Objective 3.5: Provide veterans and their families with timely and accurate symbolic expressions of remembrance.							
Percent of graves in national cemeteries marked within 60 days of interment	72%	87%	94%	95%	94% G	90%	92%
Percent of applications for headstones and markers for the graves of veterans who are not buried in national cemeteries processed within 20 days	N/A	N/A	13%	62%	38% R	70%	90%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete	N/A	98%	99%	99%	99% G	99%	99%
Percent of headstones and markers that are undamaged and correctly inscribed	97%	97%	96%	96%	96% Y	98%	98%

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	Strategic Target
Objective 3.6: Improve the ability of veterans to purchase and retain a home by meeting or exceeding lending industry standards for quality, timeliness, and foreclosure avoidance.							
Foreclosure avoidance through servicing (FATS) ratio % (Housing)	45.0%	44.0%	48.0%	54.0%	57.0% G	51.0%	51.0%
Veterans satisfaction level % (Housing) (1) No Housing survey was completed for 2004 or 2005.	95.0%	(1) N/A	(1) N/A	Avail. 11/2007	TBD	95.0%	97.0%
Percent of lenders who indicate that they are satisfied with the VA Loan Guaranty Program (1) No Housing survey was completed for 2004 or 2005.	92.0%	(1) N/A	(1) N/A	Avail. 11/2007	TBD	94.0%	95.0%
Statistical quality index % (Housing)	98.0%	98.0%	98.0%	99.0%	99.2% G	98.0%	98.0%
E-FATS - Ratio of dollars saved through successful loan interventions, to dollars spent by VA on Loan Administration FTE who perform intervention work (Housing)	N/A	N/A	N/A	7.0:1	6.8:1 Y	8.0:1	8.0:1
Strategic Goal 4: Contribute to the public health, emergency management, socioeconomic well-being, and history of the Nation.							
Objective 4.1: Improve the Nation's preparedness for response to war, terrorism, national emergencies, and natural disasters by developing plans and taking actions to ensure continued service to veterans, as well as to support national, state, and local emergency management and homeland security efforts.							
Percent of Under Secretaries, Assistant Secretaries, and other key officials who self-certify their teams "ready to deploy" to their COOP site (OS&P)	N/A	N/A	85%	85%	90% Y	100%	100%
Objective 4.2: Advance VA medical research and develop programs that address veterans' needs – with an emphasis on service-connected injuries and illnesses – and contribute to the Nation's knowledge of disease and disability.							
Progress towards development of one new treatment for post-traumatic stress disorder (PTSD) (through August) (Five milestones to be achieved over 4 years)	N/A	33%	40%	47%	* 67% G	67%	100%
Progress towards development of a standard clinical practice for pressure ulcers (through August) (Six milestones to be achieved over 5 years)	N/A	43%	52%	61%	* 65% Y	74%	100%
Percentage of study sites that reach 100% of the recruitment target for each year of each clinical study (Measure description changed for clarification purposes only)	N/A	N/A	29%	40%	* 33% Y	35%	50%

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Objective 4.3: Enhance the quality of care to veterans and provide high-quality educational experiences for health profession trainees, created internally in VA and via partnerships with the academic community.							
Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experience	83	84	84	85	86 G	86	89
Objective 4.4: Enhance the socioeconomic well-being of veterans, and thereby the Nation and local communities, through veterans benefits; assistance programs for small, disadvantaged, and veteran-owned businesses; and other community initiatives.							
Attainment of statutory minimum goals for service-disabled veteran-owned small businesses expressed as a percent of total procurement dollars (OSDBU) (through August)	0.49%	1.25%	2.15%	3.58%	* 5.59% G	3.00%	3.00%
Objective 4.5: Ensure that national cemeteries are maintained as shrines dedicated to preserving our Nation's history, nurturing patriotism, and honoring the service and sacrifice veterans have made.							
Percent of respondents who rate national cemetery appearance as excellent	97%	98%	98%	97%	97% Y	99%	100%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need	97%	97%	98%	98%	98% Y	99%	100%
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment	N/A	64%	70%	67%	69% Y	70%	90%
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations	N/A	76%	72%	77%	75% Y	79%	90%
Percent of gravesites that have grades that are level and blend with adjacent grade levels	N/A	79%	84%	86%	83% Y	88%	95%

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	Strategic Target
Enabling Goal: Deliver world-class service to veterans and their families through effective communication and management of people, technology, business processes, and financial resources.							
Objective E-1: Recruit, develop, and retain a competent, committed, and diverse workforce that provides high-quality service to veterans and their families.							
Percentage of VA employees who are veterans (HR&A)	24.0%	26.0%	28.0%	30.6%	31% Y	32.0%	33.0%
Objective E-2: Improve communication with veterans, employees, and stakeholders about VA's mission, goals, and current performance, as well as benefits and services that the Department provides.							
Percentage of title 38 reports that are submitted to Congress within the required timeframe (OCLA)	70% w/i 30 days	54% w/i 15 days	21% by due date	13% by due date	40% Y	45% by due date	100%
Percentage of testimony submitted to Congress within the required timeframe (OCLA)	N/A	N/A	N/A	N/A	75% G	65%	100%
Percentage of responses to pre- and post-hearing questions that are submitted to Congress within the required timeframe (OCLA)	N/A	N/A	21%	15%	27% Y	35%	100%
Objective E-3: Implement a One-VA information technology framework that enables the consolidation of IT solutions and the creation of cross-cutting common services to support the integration of information across business lines and provides secure, consistent, reliable, and accurate information to all interested parties.							
Number of distinct data exchanges between VA and DoD (OI&T) DMDC is Defense Manpower Data Center	N/A	N/A	N/A	20 from DMDC to VA; 8 from VA to DMDC	11 from DMDC to VA; 6 from VA to DMDC Y	8 from DMDC to VA; 1 from VA to DMDC	1 from DMDC to VA; 1 from VA to DMDC

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Objective E-4: Improve the overall governance and performance of VA by applying sound business principles; ensuring accountability; employing resources effectively through enhanced capital asset management, acquisition practices, and competitive sourcing; and linking strategic planning to budgeting and performance.							
Gross Days Revenue Outstanding (GDRO) for third party collections (VHA)	N/A	N/A	Baseline	54	59 Y	58	54
Dollar value of 1st party and 3rd party collections (VHA):							
1st Party ($ in millions) (through August)	$685	$742	$772	$863	* $916 Y	$985	$1,019
3rd Party ($ in millions) (through August)	$804	$960	$1,056	$1,096	* $1,232 G	$1,173	$1,695
Total annual value of joint VA/DoD procurement contracts for high-cost medical equipment and supplies** (1) Corrected **Beginning in 2007, medical supplies were added to this measure.	N/A	N/A	Baseline	(1) $152M	$180M G	$170M	$220M
Obligations per unique patient user (VHA) (Estimate)	$5,202	$5,493	$5,597	$5,799	* $6,210 Y	$5,686	TBD
Percent of tort claims decided accurately at the administrative stage (OGC)	86.0%	89.0%	88.4%	92.2%	92.6% G	90.0%	90.0%
Cumulative % of FTEs (compared to total planned) included in Management Analysis/Business Process Reengineering studies initiated (OP&P)	N/A	N/A	0%	0%	33% G	33%	100%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0	0
Number of material weaknesses identified during the annual independent financial statement audit or separately identified by management (OM) (a) VA's material weaknesses identified during the annual independent financial statement audit are also considered weaknesses under FMFIA.	5	4	4	3	(a) 4 Y	3	0
Percent of space utilization as compared to overall space (owned and direct-leased) (OAEM) (through August) (1) Corrected	N/A	80% Baseline	98%	(1) 104%	* 112% G	95%	95%
Percent Condition Index (owned buildings) (OAEM) (through August)	N/A	N/A	82% Baseline	79%	* 78% Y	84%	87%
Ratio of non-mission dependent assets to total assets (OAEM) (through August)	N/A	N/A	22% Baseline	15%	* 13% G	16%	10%
Ratio of operating costs per gross square foot (GSF) (OAEM) (through August) (Targets and results were adjusted to conform with Federal Real Property Council Tier 1 definitions)	N/A	$4.52 Baseline	$4.85	$5.59	* $5.11 Y	$4.52	$4.52

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Cumulative percentage decrease in facility traditional energy consumption per gross square foot from the 2003 baseline (OAEM) (1) Corrected (2) Changed per Executive Order 13423 issued in January 2007	Baseline	N/A	N/A	(1) 4.4%	TBD	(2) 6%	(2) 30%
Number of arrests, indictments, convictions, administrative sanctions, and pretrial diversions	N/A	N/A	N/A	2,241	2,061 G	1,900	2,204
Percentage of successful prosecutions	N/A	N/A	N/A	96%	95% G	85%	87%
Number of reports issued that identify opportunities for improvement and provide recommendations for corrective action	N/A	N/A	N/A	150	217 G	132	164
Number of CAP reports issued that include relevant health care delivery pulse points	N/A	N/A	N/A	64	45 G	45	57
Monetary benefits gained from review of VA activities and processes (dollars in millions)	N/A	N/A	N/A	$900	$670 G	$600	$1,033
Number of international and domestic benefit reviews conducted to determine the appropriateness of monetary benefits processing for claimants	N/A	N/A	N/A	0	1 G	1	3
Maintain unqualified audit opinion of financial statements containing no material weaknesses or reportable conditions (Yes/No)	N/A	N/A	N/A	Yes	Yes G	Yes	Yes
Percentage of recommendations implemented to improve efficiencies in operations through legislative, regulatory, policy, practices, and procedural changes in VA (a) Corrected	N/A	N/A	N/A	(a) 93%	86% G	82%	90%1
Percentage of preaward recommendations sustained during contract negotiations	N/A	N/A	N/A	70%	66% G	61%	65%

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Table 1 – FY 2007 Performance Measures by Strategic Goal and Objective

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

Strategic Goal/Measure (Key Measures in Bold)	Results					Target	
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	Strategic Target
Achieve adoption of recommendations relative to IT systems in compliance with FISMA, regulations, and policies within one year from issuance of a report	N/A	N/A	N/A	0%	19% R	90%	100%
Achieve a professional, competent, and credible reputation as a result of work performed (based on a scale of 0 to 5, where 5 is high):							
Investigations	N/A	N/A	N/A	4.9	4.9 Y	5.0	5.0
Audit	N/A	N/A	N/A	4.3	3.7 R	4.8	5.0
Healthcare Inspections	N/A	N/A	N/A	4.6	4.4 Y	4.6	5.0
CAP Reviews	N/A	N/A	N/A	4.7	4.7 G	4.7	5.0

[1] VA OIG intends that VA will implement all recommendations. This goal recognizes that some complex implementation actions may go beyond 2010, which is the out-year for OIG's Strategic Plan.

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Veterans Health Administration							
		P&F ID Codes:		36-0152-0-1-703		36-0160-0-1-703	
		36-0162-0-1-703		36-0181-0-1-703		36-5358-0-1-703	
Medical Care Programs		36-4014-0-3-705		36-8180-0-7-705		36-0165-0-1-703	
Resources							
FTE	187,049	194,055	197,650	197,900	207,615		
Total Program Costs ($ in millions)	$27,654	$30,772	$31,668	$33,468	$36,433		
Performance Measures							
Percent of patients rating VA health care service as very good or excellent:							
Inpatient (through May)	74%	74%	77%	78%	* 77% Y	78%	80%
Outpatient (through May)	73%	72%	77%	78%	* 77% Y	78%	80%
Percent of primary care appointments scheduled within 30 days of desired date (through August)	93%	94%	96%	96%	* 97.2% G	96%	96%
Percent of specialty care appointments scheduled within 30 days of desired date **(1) reflects cum. for year, (2) henceforth, eight clinical areas included instead of five (through August)**	(1) 89%	(2) 93%	93%	94%	* 95% G	95%	95%
Clinical Practice Guidelines Index II (through May)	N/A	N/A	N/A	83%	* 83% Y	84%	87%
Prevention Index III (through May)	N/A	N/A	N/A	88%	* 87% Y	88%	88%
Number of new enrollees waiting to be scheduled for their first appointment (electronic waiting list) (through August)	N/A	N/A	N/A	10,000	* 117 G	7,500	fewer than 500
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities	67%	69%	73%	74%	TBD	76%	90%
Percent of veterans returning from a combat zone who respond "yes completely" to survey questions regarding how well they perceive that their VA provider listened to them and if they had trust and confidence in their VA provider	N/A	N/A	N/A	Baseline	TBD	68%	72%
Number of outpatient visits at Joint Ventures and significant sites. (Facilities providing 500 or more outpatient visits and/or admissions per year)	N/A	N/A	N/A	121,229	TBD	123,654	133,845

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Gross Days Revenue Outstanding (GDRO) for third party collections (VHA)	N/A	N/A	Baseline	54	59 Y	58	54
Dollar value of 1st party and 3rd party collections (VHA):							
1st Party ($ in millions) (through August)	$685	$742	$772	$863	* $916 Y	$985	$1,019
3rd Party ($ in millions) (through August)	$804	$960	$1,056	$1,096	* $1,232 G	$1,173	$1,695
Total annual value of joint VA/DoD procurement contracts for high-cost medical equipment and supplies** (1) Corrected **Beginning in 2007, medical supplies were added to this measure.	N/A	N/A	Baseline	(1) $152M	$180M G	$170M	$220M
Common Measures							
Obligations per unique patient user (VHA) (Estimate)	$5,202	$5,493	$5,597	$5,799	* $6,210 Y	$5,686	TBD
Special Emphasis Programs							
Annual percent increase of non-institutional, long-term care average daily census using 2006 as the baseline **(1) Baseline = 43,325 (2) through June**	N/A	N/A	N/A	(1) Baseline	* 6.5% R	26.3%	9.5%
Percent of severely-injured or ill OEF/OIF servicemembers/veterans who are contacted by their assigned VA case manager within 7 calendar days of notification of transfer to the VA system as an inpatient or outpatient (through August)	N/A	N/A	N/A	Baseline	* 90% G	90%	95%
Percent of appointments for primary care scheduled within 30 days of desired date for veterans and servicemembers returning from a combat zone	N/A	N/A	N/A	Baseline	TBD	90%	94%
Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experience	83	84	84	85	86 G	86	89
Percent of admission notes by residents that have a note from attending physician within one day of admission:							
Surgery	N/A	N/A	75%	86%	TBD	88%	95%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Medical Research	P&F ID Codes:			36-0161-0-1-703 36-4026-0-3-703		36-0160-0-1-703	
Resources							
FTE	3,206	3,206	3,206	3,193	3,175		
Total Program Costs ($ in Millions)	$1,022	$1,067	$851	$831	$867		
Performance Measures							
Progress towards development of one new treatment for post-traumatic stress disorder (PTSD) (through August) **(Five milestones to be achieved over 4 years)**	N/A	33%	40%	47%	* 67% G	67%	100%
Progress towards development of a standard clinical practice for pressure ulcers (through August) (Six milestones to be achieved over 5 years)	N/A	43%	52%	61%	* 65% Y	74%	100%
Percentage of study sites that reach 100% of the recruitment target for each year of each clinical study (through August) (Measure description changed for clarification purposes only)	N/A	N/A	29%	40%	* 33% Y	35%	50%

Veterans Benefits Administration

Compensation	P&F ID Codes:			36-0102-0-1-701		36-0151-0-1-705	
Resources							
FTE	7,525	7,568	7,538	7,725	8,410		
Total Program Costs ($ in millions)	$25,550	$27,261	$29,626	$31,802	$35,306		
Performance Measures							
National accuracy rate (core rating work) % (Compensation) (through July)	86%	87%	84%	88%	* 88% Y	89%	98%
Compensation & Pension rating-related actions - average days to process	182	166	167	177	183 R	160	125
Rating-related compensation actions - average days pending	114	120	122	130	135 R	127	100
Average days to process - DIC actions (Compensation)	153	125	124	136	132 R	125	90
Overall satisfaction rate % (Compensation) (1) No customer satisfaction survey was performed for 2006.	58%	59%	58%	(1) N/A	TBD	63%	90%
National accuracy rate % (compensation authorization work) (through July)	88%	90%	90%	91%	* 91% Y	93%	98%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Out of all original claims filed within the first year of release from active duty, the percentage filed at a BDD site prior to a servicemember's discharge (Compensation) (1) The 2006 result was recalculated to capture workload not included in the initial calculation. This result is a more accurate depiction of BDD participation as VBA moved to a new automated data collection methodology in 2006.	N/A	N/A	55%	(1) 46%	TBD	48%	65%
Percent of veterans in receipt of compensation whose total income exceeds that of like circumstanced veterans	N/A	N/A	N/A	N/A	TBD**	TBD **	50%
Percent of compensation recipients who were kept informed of the full range of available benefits (1) No customer satisfaction survey was performed for 2006.	42%	43%	44%	(1) N/A	TBD	49%	60%
Percent of compensation recipients who perceive that VA compensation redresses the effect of service-connected disability in diminishing the quality of life	N/A	N/A	N/A	N/A	TBD**	TBD **	70%
Percent of DIC recipients above the poverty level (Compensation)	N/A	99%	100%	100%	100% G	100%	100%
Percent of DIC recipients who are satisfied that VA recognized their sacrifice (Compensation)	N/A	80%	N/A	N/A	TBD**	TBD **	90%
Appeals resolution time (Number of Days) (Joint Compensation and Pension measure with BVA)	633	529	622	657	660 G	685	675
Productivity Index % (Compensation and Pension)	N/A	N/A	N/A	90%	88% Y	94%	100%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	77%	81%	85%	83%	* 83% Y	87%	98%
Average number of days to process a claim for reimbursement of burial expenses	42	48	57	72	91 R	60	21
National Accuracy Rate for burial claims processed % (through July)	92%	94%	93%	94%	* 94% Y	95%	98%

** Pending review of the Veterans' Disability Benefits Commission's recommendations of October 2007 to determine whether a program outcome study is necessary.

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Pension	P&F ID Codes:		36-0151-0-1-705			36-0200-0-1-701	
Resources							
FTE	1,827	1,535	1,540	1,561	1,515		
Total Program Costs ($ in millions)	$3,378	$3,495	$3,569	$3,722	$3,823		
Performance Measures							
Non-rating pension actions - average days to process	67	58	68	92	104 R	96	60
National accuracy rate (authorization pension work) % (through July)	81%	84%	86%	88%	* 91% G	89%	98%
Compensation & Pension rating-related actions - average days to process	182	166	167	177	183 R	160	125
National accuracy rate (core rating-related pension work) % (through July)	91%	93%	90%	90%	* 91% Y	92%	98%
Rating-related pension actions - average days pending	98	77	83	90	89 Y	85	65
Overall satisfaction rate % (Pension) (1) No customer satisfaction survey was performed for 2006.	66%	66%	65%	(1) N/A	TBD	71%	90%
Percent of pension recipients who were informed of the full range of available benefits (1) No customer satisfaction survey was performed for 2006.	39%	40%	41%	(1) N/A	TBD	43%	60%
Percent of pension recipients who said their claim determination was very or somewhat fair (1) No customer satisfaction survey was performed for 2006.	62%	64%	65%	(1) N/A	TBD	68%	75%
Percent of VA beneficiaries receiving financial assistance for medical expenses** (Pension)	N/A	N/A	N/A	TBD	TBD	TBD	TBD
Percent of pension recipients who believe that the processing of their claim reflects the courtesy, compassion, and respect due to a veteran** (1) No customer satisfaction survey was performed for 2006.	N/A	N/A	78%	(1) N/A	TBD	80%	95%
Appeals resolution time (Number of Days) (Joint Compensation and Pension measure with BVA)	633	529	622	657	660 G	685	675

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Productivity Index % (Compensation and Pension)	N/A	N/A	N/A	90%	88% Y	94%	100%
National accuracy rate (fiduciary work) % (Compensation & Pension) (through July)	77%	81%	85%	83%	* 83% Y	87%	98%
** New measures added during Pensions PART review.							

The indicators below are the component end-products for the measure on average days to complete rating-related actions. We do not establish separate performance goals for these indicators. For a detailed discussion of VA's performance regarding timeliness of rating-related actions processing, refer to pages 118-122.

	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	Claims Completed in FY 2007
Average days to process rating-related actions	**182**	**166**	**167**	**177**	183	824,844
Initial disability compensation	207	186	185	196	208	220,795
Initial death compensation/DIC	153	125	124	136	132	29,437
Reopened compensation	193	178	179	191	196	441,501
Initial disability pension	93	94	98	113	118	35,185
Reopened pension	101	101	103	120	123	52,384
Reviews, future exams	95	87	95	79	82	38,899
Reviews, hospital	54	54	55	53	56	6,643

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
		P&F ID Codes:		36-0137-0-1-702 36-0151-0-1-705		36-8133-0-7-702	
Education							
Resources							
FTE	866	841	852	889	958		
Total Program Costs ($ in millions)	$2,189	$2,495	$2,690	$2,844	$3,080		
Performance Measures							
Average days to complete original education claims	23	26	33	40	32.4 G	35	10
Average days to complete supplemental education claims	12	13	19	20	13.2 G	15	7
Montgomery GI Bill usage rate (%): All program participants (through July) (1) Corrected	58%	65%	(1) 66%	(1) 67%	* 68% G	68%	75%
Montgomery GI Bill usage rate (%): Veterans who have passed their 10-year eligibility period (through July) (1) Corrected	66%	71%	(1) 71%	(1) 70%	* 72% G	72%	80%
Percent of Montgomery GI Bill participants who successfully completed an education or training program Measure under development	N/A	N/A	N/A	TBD	TBD	TBD	TBD
Percentage of beneficiaries that believe their VA educational assistance has been either very helpful or helpful in the attainment of their educational or vocational goal Measure under development	N/A	N/A	N/A	TBD	TBD	TBD	TBD
Customer satisfaction-high rating (Education) (1) No customer satisfaction survey was performed for 2005, 2006, or 2007.	89%	86%	(1) N/A	(1) N/A	(1) N/A	88%	95%
Telephone Activities - Blocked call rate (Education) % (1) Corrected	13%	20%	38%	(1) 43%	32% Y	25%	10%
Telephone Activities - Abandoned call rate (Education) % (1) Corrected	7%	10%	17%	(1) 20%	11% G	15%	5%
Payment accuracy rate (Education) % (1) Corrected	94%	94%	96%	(1) 94%	95% Y	96%	97%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Vocational Rehabilitation and Employment	P&F ID Codes:	36-0135-0-1-702		36-0151-0-1-705			
Resources							
FTE	1,091	1,105	1,115	1,110	1,187		
Total Program Costs ($ in millions)	$631	$676	$706	$702	$771		
Performance Measures							
Rehabilitation rate % (VR&E)	59%	62%	63%	73%	73% G	73%	80%
Speed of entitlement decisions in average days (VR&E) (1) Corrected	63	57	62	(1) 54	54 Y	53	40
Accuracy of decisions (Services) % (VR&E)	82%	86%	87%	82%	77% Y	85%	96%
Customer satisfaction (Survey) % (VR&E) (1) No customer satisfaction survey was performed for 2003, 2005, 2006, or 2007.	(1) N/A	79%	(1) N/A	(1) N/A	(1) N/A	82%	92%
Accuracy of Vocational Rehabilitation program completion decisions % (VR&E)	81%	94%	97%	95%	93% Y	97%	99%
Serious Employment Handicap (SEH) Rehabilitation Rate % (VR&E)	58%	N/A	N/A	73%	73% Y	74%	80%
Common Measures **							
Percent of participants employed first quarter after program exit (VR&E)	N/A	N/A	N/A	TBD	N/A	70%	80%
Percent of participants still employed three quarters after program exit (VR&E)	N/A	N/A	N/A	TBD	N/A	70%	85%
Percent change in earnings from pre-application to post-program employment (VR&E)	N/A	N/A	N/A	TBD	N/A	TBD	TBD
Average cost of placing participant in employment (VR&E)	N/A	N/A	N/A	TBD	$8,856 Y	$8,000	$6,500

** These are designated as "common measures" because they are also used by other agencies that manage vocational rehabilitation programs. They also support the Performance Improvement Initiative of the President's Management Agenda. Targets shown above are estimates and may change. First set of data is projected to be received in January 2008.

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Housing		P&F ID Codes: 36-0128-0-1-704 36-4130-0-3-704		36-1119-0-1-704 36-4127-0-3-704 36-0151-0-1-705		36-4025-0-3-704 36-4129-0-3-704	
Resources							
FTE	1,404	1,256	1,049	1,042	983		
Total Program Costs ($ in millions)	$1,520	$389	$2,072[a]	$210 [b]	$240		

(a) Includes positive subsidy, administrative expenses, and upward reestimates, which are required to comply with Credit Reform Act guidelines.
b) The total program costs do not include any subsidy costs due to a negative subsidy of the Loan Guarantee program.

Performance Measures							
Foreclosure avoidance through servicing (FATS) ratio % (Housing)	45.0%	44.0%	48.0%	54.0%	57.0% G	51.0%	51.0%
Veterans satisfaction level % (Housing) (1) No Housing survey was completed for 2004 or 2005.	95.0%	(1) N/A	(1) N/A	Avail. 11/2007	TBD	95.0%	97.0%
Percent of lenders who indicate that they are satisfied with the VA Loan Guaranty Program (1) No Housing survey was completed for 2004 or 2005.	92.0%	(1) N/A	(1) N/A	Avail. 11/2007	TBD	94.0%	95.0%
Statistical quality index % (Housing)	98.0%	98.0%	98.0%	99.0%	99.2% G	98.0%	98.0%
Percent of Specially Adapted Housing (SAH) grant recipients who indicate that grant-funded housing adaptations increased their independence (1) New measure; first year that Housing survey data are reported for this measure.	N/A	N/A	N/A	(1) Avail. 11/2007	TBD	98.0%	99.0%
E-FATS - Ratio of dollars saved through successful loan interventions, to dollars spent by VA on Loan Administration FTE who perform intervention work (Housing)	N/A	N/A	N/A	7.0:1	6.8:1 Y	8.0:1	8.0:1

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Insurance		P&F ID Codes: 36-4010-0-3-701 36-8150-0-7-701		36-0120-0-1-701 36-4009-0-3-701 36-8455-0-8-701		36-4012-0-3-701 36-8132-0-7-701 36-0151-0-1-705	
Resources							
FTE	493	490	488	482	451		
Total Program Costs ($ in millions)	$2,695	$2,580	$2,580	$3,344	$3,192		
Performance Measures							
Average number of days to process TSGLI disbursements (Insurance)	N/A	N/A	N/A	3.8	3.0 G	5	5
Percent of servicemembers covered by SGLI (Insurance)	N/A	N/A	98%	99%	99% G	98%	98%
Conversion rate of disabled SGLI members to VGLI (%) (Insurance)	N/A	N/A	35%	41%	40% Y	45%	50%
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average enlisted servicemember (Insurance)	N/A	N/A	1.9	1.8	1.8 G	1.7	1.0
Ratio of the multiple of salary that SGLI covers versus the multiple of salary that private sector covers for the average officer (Insurance)	N/A	N/A	1.0	0.9	0.9 G	0.9	1.0
Ratio of premium rates charged per $1,000 by other organizations compared to the SGLI premium rates charged per $1,000 by VA for similar coverage (Insurance)	N/A	N/A	1.4	1.3	1.2 G	1.0	1.0
Ratio of premium rates charged per $1,000 by other organizations compared to the VGLI premium rates charged per $1,000 by VA for similar coverage (Insurance)	N/A	N/A	0.9	0.9	0.9 Y	1.0	1.0
Rate of high veterans' satisfaction ratings on services delivered % (Insurance)	95%	96%	96%	96%	96% G	95%	95%
Number of disbursements (death claims, loans, and cash surrenders) per FTE (Insurance)	N/A	N/A	1,692	1,697	1,724 G	1,702	1,750

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	Results FY 2004	Results FY 2005	Results FY 2006	Results FY 2007 Result	Target FY 2007 Target	Strategic Target
National Cemetery Administration							
Burial Program		P&F Codes:	36-0129-0-1-705		36-0183-0-1-705		
			36-5392-0-1-705		36-0151-0-1-705		
Resources							
FTE	1,476	1,492	1,523	1,527	1,541		
Total Program Costs ($ in millions)	$348	$406	$403	$421	$465		
Performance Measures							
Percent of veterans served by a burial option within a reasonable distance (75 miles) of their residence	75.2%	75.3%	77.1%	80.2%	83.4% Y	83.8%	90.0%
Percent of respondents who rate the quality of service provided by the national cemeteries as excellent	94%	94%	94%	94%	94% Y	97%	100%
Percent of graves in national cemeteries marked within 60 days of interment	72%	87%	94%	95%	94% G	90%	92%
Percent of respondents who rate national cemetery appearance as excellent	97%	98%	98%	97%	97% Y	99%	100%
Percent of funeral directors who respond that national cemeteries confirm the scheduling of the committal service within 2 hours	73%	73%	73%	74%	72% Y	80%	93%
Percent of applications for headstones and markers for the graves of veterans who are not buried in national cemeteries processed within 20 days	N/A	N/A	13%	62%	38% R	70%	90%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete	N/A	98%	99%	99%	99% G	99%	99%
Percent of headstones and markers that are undamaged and correctly inscribed	97%	97%	96%	96%	96% Y	98%	98%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need	97%	97%	98%	98%	98% Y	99%	100%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment	N/A	64%	70%	67%	69% Y	70%	90%
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations	N/A	76%	72%	77%	75% Y	79%	90%
Percent of gravesites that have grades that are level and blend with adjacent grade levels	N/A	79%	84%	86%	83% Y	88%	95%

Board of Veterans' Appeals

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

Resources							
FTE	451	440	433	452	444		
Administrative costs only ($ in millions)	$47	$50	$50	$54	$54		
Performance Measures							
Deficiency-free decision rate (BVA)	89.0%	93.0%	89.0%	93.0%	94.0% G	92.0%	92.0%
Appeals resolution time (Number of Days) (Joint BVA-VBA Compensation and Pension measure)	633	529	622	657	660 G	685	675
BVA Cycle Time (Days)	135	98	104	148	136 R	105	104
Appeals decided per Veterans Law Judge (BVA)	604	691	621	698	721 G	630	752
Cost per case (BVA time only)	$1,493	$1,302	$1,453	$1,381	$1,337 G	$1,580	$1,627

Departmental Management

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

Total FTE and Program Costs (less BVA and OIG FTE and costs, which are identified separately)							
FTE	2,597	2,697	3,167	2,162	3,626		
Total Program Costs ($ in millions)	$617	$718	$762	$928	$1,531		
Performance Measures							
Attainment of statutory minimum goals for service-disabled veteran-owned small businesses expressed as a percent of total procurement dollars (OSDBU) (through August)	0.49%	1.25%	2.15%	3.58%	* 5.59% G	3.00%	3.00%
Percentage of VA employees who are veterans (HR&A)	24.0%	26.0%	28.0%	30.6%	31% Y	32.0%	33.0%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Percent of Under Secretaries, Assistant Secretaries, and other key officials who self-certify their teams "ready to deploy" to their COOP site (OS&P)	N/A	N/A	85%	85%	90% Y	100%	100%
Cumulative % of FTEs (compared to total planned) included in Management Analysis/Business Process Reengineering studies initiated (OP&P)	N/A	N/A	0%	0%	33% G	33%	100%
Percent of tort claims decided accurately at the administrative stage (OGC)	86.0%	89.0%	88.4%	92.2%	92.6% G	90.0%	90.0%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0	0
Number of material weaknesses identified during the annual independent financial statement audit or separately identified by management (OM) (a) VA's material weaknesses identified during the annual independent financial statement audit are also considered weaknesses under FMFIA.	5	4	4	3	(a) 4 Y	3	0
Number of distinct data exchanges between VA and DoD (OI&T) DMDC is Defense Manpower Data Center	N/A	N/A	N/A	20 from DMDC to VA; 8 from VA to DMDC	11 from DMDC to VA; 6 from VA to DMDC Y	8 from DMDC to VA; 1 from VA to DMDC	1 from DMDC to VA; 1 from VA to DMDC
Percentage of responses to pre- and post-hearing questions that are submitted to Congress within the required timeframe (OCLA)	N/A	N/A	21%	15%	27% Y	35%	100%
Percentage of testimony submitted to Congress within the required timeframe (OCLA)	N/A	N/A	N/A	N/A	75% G	65%	100%
Percentage of title 38 reports that are submitted to Congress within the required timeframe (OCLA)	70% w/i 30 days	54% w/i 15 days	21% by due date	13% by due date	40% Y	45% by due date	100%
Percent of space utilization as compared to overall space (owned and direct-leased) (OAEM) (through August) (1) Corrected	N/A	80% Baseline	98%	(1) 104%	* 112% G	95%	95%
Percent Condition Index (owned buildings) (OAEM) (through August)	N/A	N/A	82% Baseline	79%	* 78% Y	84%	87%
Ratio of non-mission dependent assets to total assets (OAEM) (through August)	N/A	N/A	22% Baseline	15%	* 13% G	16%	10%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	Target FY 2007 Target	Strategic Target
Ratio of operating costs per gross square foot (GSF) (OAEM) (through August) (Targets and results were adjusted to conform with Federal Real Property Council Tier 1 definitions)	N/A	$4.52 Baseline	$4.85	$5.59	* $5.11 Y	$4.52	$4.52
Cumulative percentage decrease in facility traditional energy consumption per gross square foot from the 2003 baseline (OAEM) (1) Corrected (2) Changed per Executive Order 13423 issued in January 2007	Baseline	N/A	N/A	(1) 4.4%	TBD	(2) 6%	(2) 30%

Office of Inspector General

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

Resources							
FTE	399	434	454	510	470		
Administrative costs only ($ in millions)	$58	$66	$70	$74	$74		
Performance Measures							
Number of arrests, indictments, convictions, administrative sanctions, and pretrial diversions	N/A	N/A	N/A	2,241	2,061 G	1,900	2,204
Percentage of successful prosecutions	N/A	N/A	N/A	96%	95% G	85%	87%
Number of reports issued that identify opportunities for improvement and provide recommendations for corrective action	N/A	N/A	N/A	150	217 G	132	164
Number of CAP reports issued that include relevant health care delivery pulse points	N/A	N/A	N/A	64	45 G	45	57
Monetary benefits gained from review of VA activities and processes (dollars in millions)	N/A	N/A	N/A	$900	$670 G	$600	$1,033
Number of international and domestic benefit reviews conducted to determine the appropriateness of monetary benefits processing for claimants	N/A	N/A	N/A	0	1 G	1	3
Maintain unqualified audit opinion of financial statements containing no material weaknesses or reportable conditions (Yes/No)	N/A	N/A	N/A	Yes	Yes G	Yes	Yes
Percentage of recommendations implemented to improve efficiencies in operations through legislative, regulatory, policy, practices, and procedural changes in VA (a) Corrected	N/A	N/A	N/A	(a) 93%	86% G	82%	90%[1]
Percentage of preaward recommendations sustained during contract negotiations	N/A	N/A	N/A	70%	66% G	61%	65%

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Table 2 – FY 2007 Performance Measures by Program

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

Organization/Program/Measure (Key Measures in Bold)	Results					Target	Strategic Target
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007 Result	FY 2007 Target	
Achieve adoption of recommendations relative to IT systems in compliance with FISMA, regulations, and policies within one year from issuance of a report	N/A	N/A	N/A	0%	19% R	90%	100%
Achieve a professional, competent, and credible reputation as a result of work performed (based on a scale of 0 to 5, where 5 is high):							
Investigations	N/A	N/A	N/A	4.9	4.9 Y	5.0	5.0
Audit	N/A	N/A	N/A	4.3	3.7 R	4.8	5.0
Healthcare Inspections	N/A	N/A	N/A	4.6	4.4 Y	4.6	5.0
CAP Reviews	N/A	N/A	N/A	4.7	4.7 G	4.7	5.0

[1] VA OIG intends that VA will implement all recommendations. This goal recognizes that some complex implementation actions may go beyond 2010, which is the out-year for OIG's Strategic Plan.

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Dropped Performance Measures Where Final Results Were not Reported in the FY 2006 PAR

Veterans Health Administration	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006 Final	FY 2006 Target
Clinical Practice Guidelines Index	Baseline	70%	77%	87%	(1) 83%	77%
Prevention Index II	82%	83%	88%	90%	(2) 88%	88%
Percent of appointments scheduled within 30 days of desired appointment date	N/A	N/A	N/A	93.7%	(3)	93.7%
Percent of outpatient encounters that have electronic progress notes signed within 2 days	N/A	N/A	84%	85%	86%	86%
Average number of appointments per year per FTE	2,719	2,856	2,356	2,533	(3) 2,573	2,678
Number of patients under non-institutional long-term care as expressed by average daily census	24,126	24,413	25,523	27,469	(4)	32,105
Prevention Index II (Special Populations)	N/A	80%	86%	87%	(5) 87%	86%
Percent of admission notes by residents that have a note from attending physician within one day of admission:						
Medicine	N/A	N/A	N/A	95%	(6) 97%	85%
Psychiatry	N/A	N/A	N/A	95%	(6) 97%	85%
Number of peer-reviewed publications authored by VA investigators within the fiscal year	N/A	N/A	2,557	2,793	(7) 2,824	2,655

Footnotes for why measures were dropped:

(1) Measure was changed to CPGI II.

(2) Measure was changed to PI III.

(3) Measures are now captured as part of other wait time measures.

(4) Measure was redefined and now includes a different, larger population. Moreover, it is now expressed as the annual percent increase of non-institutional, long-term care average daily census using 2006 as the redefined baseline.

(5) In FY 2005, this index was composed of 6 measures. By 2006, this index was modified primarily due to changes in the National Center for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Sets (HEDIS) measure definitions and composed of 9 (instead of 6) measures. The old index was "dropped" and revitalized as PI III. The addition of three measures, related to breast and cervical cancer as well as immunizations, made trending PI II no longer applicable.

(6) Measures for Medicine and Psychiatry were dropped in 2006, but Surgery continues to be monitored.

(7) Measure was dropped and replaced by the key measure to monitor progress towards development of a new treatment for PTSD.