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

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

Strategic Goal 1: Restore the capability of veterans with disabilities to the greatest extent possible and improve the quality of their lives and that of their families.

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

Prevention Index II (Special Populations) (through June)	N/A	N/A	N/A	80%	* 86% G	80%
Percent of veterans who were discharged from a Domiciliary Care for Homeless Veterans (DCHV) Program, or HCHV Community-based Contract Residential Care Program to an independent or a secured institutional living arrangement (through June)	N/A	N/A	65%	72%	*79% G	67%

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

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

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(Explanations of performance are found in the Performance Measures by Program table) (Key Measures are in bold)

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

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

^{**} Pending Program Outcome Study. Study was cancelled in 2004 because of the new Disability Compensation Commission. Study will be conducted in CY 2005. The Commission first met in August 2004 and the results are tentatively expected 15 months thereafter.

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

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

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(Explanations of performance are found in the Performance Measures by Program table) (Key Measures are in bold)

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

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

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

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

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

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

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

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

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(Explanations of performance are found in the Performance Measures by Program table)
(Key Measures are in bold)
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Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Compliance survey completion rate (Education) (1) Correction	94%	92%	93%	(1) 93%	94% G	90%
Customer satisfaction-high ratings (Education) (a) Results will not be available until 2005	82%	86%	87%	89%	(a)	87%
Telephone Activities - Blocked call rate (Education)	39%	45%	26%	13%	20% Y	18%
Telephone Activities - Abandoned call rate (Education)	17%	13%	11%	7%	10% Y	8%
Payment accuracy rate (Education)	96%	92%	93%	94%	94% G	94%
Average days to complete original education claims	36	50	34	23	26 Y	24
Average days to complete supplemental education claims	22	24	16	12	13 Y	12

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

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

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

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

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

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(Explanations of performance are found in the Performance Measures by Program table) (Key Measures are in bold)

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

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

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(Explanations of performance are found in the Performance Measures by Program table)
(Key Measures are in bold)
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 Performance Measures
 FY 2000
 FY 2001
 FY 2002
 FY 2003
 FY 2004
 FY 2004
 FY 2004
 Actual
 Plan

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

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

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

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

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

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

Objective 3.4: Ensure that the burial needs of veterans and eligible family members are met.

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

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(Explanations of performance are found in the Performance Measures by Program table)

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

Objective 3.5: Provide veterans and their families with timely and accurate symbolic expressions of remembrance.

Percent of graves in national cemeteries marked within 60 days of interment (NCA)	N/A	N/A	49%	72%	87% G	78%
Percent of headstones and markers ordered by national cemeteries for which inscription data are accurate and complete (NCA)	N/A	N/A	N/A	N/A	98%	Baseline
Percent of headstones and markers that are undamaged and correctly inscribed (NCA)	97%	97%	96%	97%	97% Y	98%
Percent of headstones and markers ordered online by other federal and state veterans cemeteries using BOSS (NCA)	87%	89%	89%	90%	91% G	90% G
Percent of individual headstone and marker orders transmitted electronically to contractors (NCA)	89%	92%	92%	95%	100% G	97%
Percent of Presidential Memorial Certificates that are accurately inscribed (NCA)	98%	98%	98%	99%	99% G	99%

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

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

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

(Explanations of performance are found in the Performance Measures by Program table)
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 Performance Measures
 FY 2000
 FY 2001
 FY 2002
 FY 2003
 FY 2004
 FY 2004
 FY 2004
 Actual
 Plan

Objective 4.2: Advance VA medical research and development programs that address veterans' needs, with an emphasis on service-connected injuries and illnesses, and contribute to the Nation's knowledge of disease and disability.

Number of Career Development Awardees	195	193	209	210	229 Y	237
Sustain 2002 level of partnering opportunities with: Veterans Service Organizations; other Federal Agencies; non-profit foundations, e.g., American Heart Association, American Cancer Society; and private industry, e.g., pharmaceutical companies (estimated actual)	137	139	139	139	*139 G	139

Objective 4.3: Sustain partnerships with the academic community that enhance the quality of care to veterans and provide high-quality educational experiences for health care trainees.

Medical residents' and other trainees' scores on a VHA Survey assessing their clinical training experience (through June)	N/A	84	83	83	* 83 G	82
training experience (unough june)						

Objective 4.4: Enhance the socioeconomic well-being of veterans, and thereby the Nation and local communities, through veterans' benefits; assistance programs for small, disadvantaged, and veteran-owned businesses; and other community initiatives.

Attainment of statutory minimum goals for small business concerns as a percent of total procurement (OSDBU) (1) Correction		(1) 32.6%	(1) 31.2%	31.8%	N/A	23%
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Objective 4.5: Ensure that national cemeteries are maintained as shrines dedicated to preserving our Nation's history, nurturing patriotism, and honoring the service and sacrifice veterans have made.

Percent of respondents who rate national cemetery appearance as excellent (NCA)	82%	96%	97%	97%	98% G	98%
Percent of respondents who would recommend the national cemetery to veteran families during their time of need (NCA)	N/A	97%	98%	97%	97% Y	98%
Percent of headstones and/or markers in national cemeteries that are at the proper height and alignment (NCA)	N/A	N/A	N/A	N/A	64%	Baseline
Percent of headstones, markers, and niche covers that are clean and free of debris or objectionable accumulations (NCA)	N/A	N/A	N/A	N/A	76%	Baseline

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(Explanations of performance are found in the Performance Measures by Program table)

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 Performance Measures
 FY 2000
 FY 2001
 FY 2002
 FY 2003
 FY 2004
 FY 2004
 FY 2004

 Actual
 Plan

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

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

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

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

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

Objective E-3: Implement a *One VA* information technology framework that supports the integration of information across business lines and that provides a source of consistent, reliable, accurate, and secure information to veterans and their families, employees, and stakeholders.

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

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

Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Percent decrease of annual IT budget spent on sustainment, shifting corresponding savings to modernization (zero sum gain) (IT)	N/A	N/A	N/A	5%	1.5% Y	5%

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

Dollar value of 1st party and 3rd party collections:						
1st Party (\$ in millions)	\$176	\$231	\$486	\$685	\$742 Y	\$792
Dollar value of 1st party and 3rd party collections:						
3rd Party (\$ in millions) (1) (Correction)	\$397	\$540	(1) \$690	\$804	\$960 G	\$917
Acute Bed Days of Care (BDOC)/1000 (estimated actual)	1,002	895	900	1,000	* 1,000 G	1,000
Outpatient visits/1000:	7.0	2.4	2.4	0.4	*24.0	2.4
Med/Surg (estimated actual) Mental Health (estimated actual)	2.7 8.4	2.4 8.1	2.4 8.1	2.4 8.1	* 2.4 G * 8.1 G	2.4 8.1
Ratio of collections to billings (expressed as a percentage) (estimated actual)	28%	31%	37%	41%	* 41% G	41%
Cost - Obligations per unique patient user	N/A	N/A	\$4,928	\$5,202	\$5,562 Y	\$5,536
Efficiency - Average number of appointments per year per FTE	N/A	N/A	2,719	2,856	2,868 G	2,700
Dollar value of sharing agreements with DoD (Joint Measure with VBA) (\$ in millions)	N/A	\$58	\$83	\$105	\$120 G	\$116
Percent increase of EDI usage over base year of 1997 (OM)	86%	178%	235%	320%	884% G	245%
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements (OM)	0	0	0	0	0 G	0
Number of material weaknesses identified during the Annual Financial Statement Audit or Identified by Management (OM)	11	12	6	5	4 G	4
Cumulative % of commercially eligible FTE on which competitive sourcing studies are completed (OPP&P)	N/A	N/A	5%	12%	0% R	53%

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(Explanations of performance are found in the Performance Measures by Program table) (Key Measures are in bold)

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

Performance Measures	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004 Actual	FY 2004 Plan
Decrease underutilized space from FY 03 baseline of 19,930,244 sq ft (OAEM)	N/A	N/A	N/A	Baseline	28,994,639	TBD
Decrease vacant space from FY 03 baseline of 8,874,544 sq ft (OAEM)	N/A	N/A	N/A	Baseline	8,536,758	TBD
Reduce facility energy consumption relative to a 1985 baseline (OAEM)	N/A	N/A	N/A	N/A	TBD	TBD
(1) Number of indictments, arrests, convictions, administrative sanctions, and pretrial diversions:	1,361	1,655	1,621	1,894	2,016 G	1,950
Number of Arrests	338	401	452	624	741	493
Number of Indictments	280	376	357	349	397	460
Number of Convictions	247	337	331	417	332	422
Number of Administrative Sanctions	496	541	481	484	522	575
Number of Pretrial Diversions	N/A	N/A	N/A	20	24	Baseline
Number of Reports issued:	124	136	169	(2) 182	(3) 223 G	208
Combined Assessment Reviews (CAPs)Total	18	26	33	42	52	60
VHA CAPs	18	22	21	34	40	48
VBA CAPs	0	4	12	8	12	12
Audit Reports	35	26	26	24	24	29
Pre-and Post-Award Contract Reviews	40	48	60	65	105	62
Healthcare Inspection Reports	15	22	37	24	26	42
Administrative Investigations	16	14	12	21	11	15
Value of monetary benefits (\$ in millions) from:					(4) \$3,121 G	\$884
IG Investigations	\$28	\$52	\$85	\$64	\$301	\$45
IG audits	\$264	\$4,095	\$730	\$8	\$2,104	\$775
IG contract reviews	\$35	\$42	\$62	\$82	\$661	\$64
Customer Satisfaction:					4.6 Y	4.8
Combined Assessment Program Reviews	N/A	N/A	4.4	4.1	4.5	4.7
Investigations	4.6	4.8	4.8	4.9	4.9	5.0
Audit	4.4	4.2	4.3	4.2	4.6	4.5
Contract Reviews	4.9	4.7	4.9	4.5	4.6	4.9
Healthcare Inspections	4.4	4.2	4.7	4.4	4.4	4.9

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

⁽²⁾ Includes 5 CAP summary reports that are not counted in the CAP total and 1 joint review with DoD.
(3) Includes 3 CAP summary reports that are not counted in the CAP total and 2 joint reviews completed by OIG Offices of Investigation, Audit, and Healthcare Inspections.

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