VA | U.S. Department of Veterans Affairs

FY 2023 Annual Performance Plan & FY 2021 Report

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MISSION STATEMENT

To fulfill President Lincoln's promise *"To care for him who shall have borne the battle, and for his widow, and his orphan" by* serving and honoring the men and women who are America's Veterans.

VA CORE VALUES, CHARACTERISTICS AND CUSTOMER EXPERIENCE PRINCIPLES

The Department of Veterans Affairs (VA) Core Values — Integrity, Commitment, Advocacy, Respect, and Excellence — define our culture and strengthen our dedication to those we serve. They provide a baseline for the standards of behavior expected of all VA employees. They remind us and others that "I CARE".

VA's Core Values guide the behavior of VA employees, VA Core Characteristics – Trustworthy, Accessible, Quality, Innovative, Agile, and Integrated – identify what VA stands for and what VA strives to be as an organization. VA wants employees, Veterans, Servicemembers, their families, caregivers, and survivors to associate these core values and characteristics with the Department and its workforce.

Customer Experience (CX) Principles commit all VA employees to provide the best customer experience delivering care, benefits, and memorial services to Veterans, Servicemembers, their families, caregivers, and survivors. CX is the product of interactions between an organization and a customer throughout their relationship. VA measures these interactions through ease, effectiveness, and emotion, impacting the customer's overall trust in the organization. VA uses CX data and insights in strategy development and decision-making to ensure that the voices of Veterans, Servicemembers, their families, caregivers, and survivors, inform how VA delivers care, benefits, and memorial services.

ORGANIZATIONAL STRUCTURE

VA is comprised of three Administrations and several staff offices that deliver services to Veterans as shown in Figure 1.

- VHA provides a broad range of primary care, specialized care, and related medical and social support services uniquely associated with Veterans' health or special needs. VHA advances medical research and development to support Veterans' health and wellness by pursuing medical research in areas that directly address Veterans' diseases and conditions.

- VBA provides various benefits to Veterans and their families. These benefits include military-to-civilian transition assistance services, disability compensation, pension, fiduciary services, educational and homeownership opportunities, Veteran readiness and employment services, and life insurance.

- The National Cemetery Administration (NCA) provides Veterans and their eligible family members with burial and memorial benefits. These benefits include burial at national cemeteries, headstones, markers, medallions, and Presidential Memorial Certificates.

- VA staff offices provide various services to the Department, including information technology (IT), human resource management, strategic planning, Veteran outreach and education, financial management, acquisition, and facilities management.
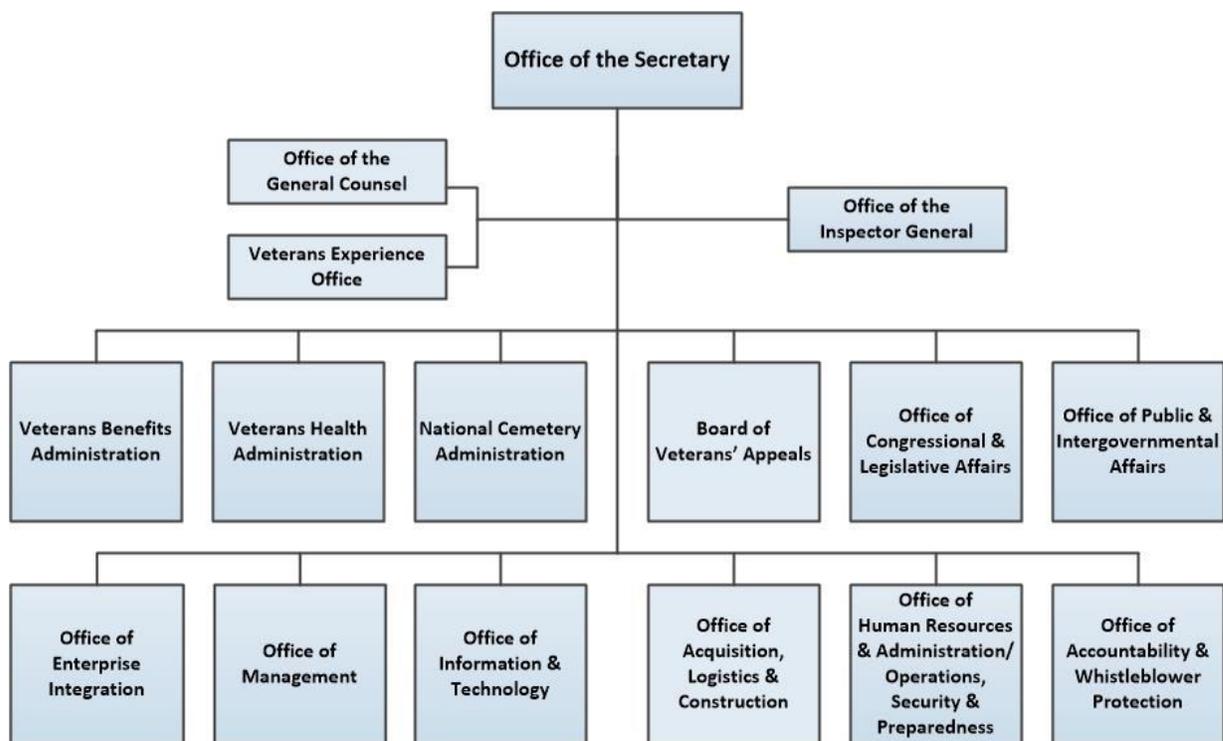
Figure 1 - VA Organization Chart

AGENCY PRIORITY GOALS

Agency Priority Goals (APG) focus on leadership priorities, establish outcomes and produce quantifiable results. APG emphasizes mission areas where agencies need to drive significant progress and change. APG statements are outcome-oriented, ambitious, and measurable, with specific targets reflecting near-term results or achievements agency leadership wants to accomplish within 24 months
Agency leaders across the Federal government select approximately four to five goals every two years, identify responsible officials for goal achievement, and perform

quarterly performance reviews, identifying progress barriers and making appropriate implementation changes. VA had four APGs for the FY 2020-2021 cycle.

Goal 1: Decision Review and Appeals: VA will provide claimants who disagree with VA's decisions on benefits claims and appeals with timely reviews under the new, streamlined process authorized by the Veterans Appeals Improvement and Modernization Act of 2017 (AMA). By September 30, 2021, VA processed and adjudicated Supplemental Claims and Higher-Level Reviews within 125 days on average and Direct Docket Appeals within 365 days on average. VA collected data throughout FY 2020 and 2021 to establish average processing times for Evidence Docket and Hearing Docket appeals.

Progress Update: In FY 2021, VBA completed Higher-Level Reviews in an average of 87 days, 30% below the targeted 125 days. As VBA completes the third year of operating within the AMA framework, trend analysis pertaining to both Veteran and system behavior are drivers for continued process improvement as efficiencies are identified. VBA improved its communications to partners by providing additional information to clarify the lane choices available and qualifications for each lane; updated application forms to provide easier to understand formatting and used survey results to identify Veterans' experiences using the new claims process.

Additionally, trend analysis resulted in improvements in resource allocation, evidenced by the continued timeliness of AMA lanes as the inventory increased due to the COVID-19 pandemic.

In FY 2021, the Board of Veterans' Appeals (BVA) dispatched 20,494 AMA decisions, comprising nearly 21% of the Board's 99,721 decisions. The Board met its 365-day timeliness average goal for processing Direct Docket appeals. The average number of days to complete a Direct Docket decision in FY 2021 was 300. The Board released timeliness goals for its two remaining AMA dockets (Evidence Submission, Hearing) in FY 2021 with targets of:

- 365 average days to complete (ADC) for Direct,
- 550 ADC for Evidence, and
- 730 ADC for Hearing docket appeals.

The Board now has timeliness goals for all its AMA dockets. Establishing these goals satisfied an open US Government Accountability Office (GAO) High-Risk List (HRL) recommendation (GAO-18-352) and will begin to be monitored and reported monthly through the 2022 VA Annual Performance Plan and Report. It is important to note that as the prioritization of legacy appeals resolution and Direct Docket timeliness continues, inventories and timeliness for Evidence and Hearing dockets will continue to temporally increase until the majority of Board decisions are rendered in the AMA dockets.

Goal 2: Suicide Prevention: Through clinical and community strategies, VHA will proactively identify and provide interventions for at-risk Veterans, both those using VHA

care and those using other care systems, to prevent suicide and overdose death. VA will:

- increase the implementation of Safety Planning in Emergency Departments (SPED),
- increase the use of predictive modeling to reach high-risk Veterans, and
- partner with Health and Human Services/Substance Abuse and Mental Health Services Administration to develop statewide plans to end Veteran suicide.

Progress Update: SPED combines safety planning interventions with follow-up phone calls after discharge from Emergency Departments and Urgent Care Center. Research has shown a significant reduction in suicidal behaviors due to the intervention. The number of safety plans attempted in the Emergency Departments across the VHA enterprise increased from 48% at the start of FY 2020 to 86% at the end of FY 2021.

Since FY 2020, all Recovery Engagement and Coordination for Health – Veterans Enhanced Treatment (REACH VET) national performance metrics exceeded 95%. Technical assistance was provided to low-performing facilities on these metrics. Based on the REACH VET model, Veterans identified within the top risk tier at their facility received clinical care reviews and attempted outreach. From FY 2020 to the end of FY 2021:

- the percentage of Veterans receiving a care review by a facility coordinator rose from 99% to 100%,
- the Veteran's provider reviewed care plans increased from 95% to 99%,
- those receiving an evaluation of care rose from 93% to 99%, and
- those receiving an outreach attempt increased from 92% to 99%.

At the end of FY 2019, seven states were engaged in the Governors' Challenge to develop state-wide plans focused on reducing Veteran suicide. Twenty-eight additional states joined the Governors' Challenge in the last two years for a total of 35 states at the end of FY 2021. State training and ongoing support pivoted to virtual during the COVID-19 pandemic, with four policy academies and three implementation academies and monthly community of practice calls held virtually.

Goal 3: Connected Care/Telehealth: VA will improve Veterans' access to quality healthcare using digital care delivery methods. VA will:

- focus efforts on ambulatory care providers providing care to Veterans using video telehealth in the home,
- expand the use of VA's text messaging app,
- expand the use of secure messaging, and
- increase triage support from Clinical Contact Centers.

Progress Update: In FY 2021, over 95% of primary care clinicians and 98% of mental health mobile clinicians completed a video telehealth visit to Veterans in their homes or mobile devices. Moreover, the percentage of targeted ambulatory care-specialty care professionals who completed a video visit to Veterans in their homes or mobile devices

grew from 79% to 86%. As of September 2021, there was an increase of 890 unique Veterans enrolled in Annie, a VA service that sends automated text messages to Veterans to help them stay focused on their self-care. As of September 2021, there was a 22% increase in Veterans who received care in VA compared to FY 2020, who received at least one secure message from VA.

Goal 4: Veterans experience with VA.gov: VA will measure and improve Veteran experience with VA.gov using the government-wide drivers identified for measuring CX with the Federal Government by September 30, 2021. Veterans experience scores related to VA.gov will increase by five percent compared to an FY 2020 baseline with a long-range plan to reach at least 90%.

Progress Update: Although customer experience scores did not improve by five percent as projected, between FY 2020 and FY 2021 VA.gov, scores remained steady at 64%. This 64% user satisfaction score is six percent higher than when VA.gov relaunched in FY 2019. This user satisfaction score is not solely a cumulative score of modernization efforts on VA.gov, but an overall user satisfaction score between both modernized pages on VA.gov as well as those online legacy pages within VA, which outnumber those modernized on VA.gov significantly. It is anticipated that user satisfaction scores will increase year-over-year as more legacy features and sites transition to VA.gov or incorporate the same plain-language approach adapted onVA.gov.

VA has five new APGs in the FY 2022-2023 cycle:

Goal 1: Suicide Prevention: VA is meaningfully contributing to whole of government and community-based efforts to target an overall 10% reduction in Veteran suicide rate from 2019 to 2024, with decreases in the long term of 3% annually by 2028, through enhancement of programs and training focused on community interventions. To help achieve this, VA will concentrate on non-VA providers who often lack training on specific suicide reduction tools for Veterans.

Goal 2: Caregiver Support: VA is currently undertaking a broad programmatic review of the Program of Comprehensive Assistance for Family Caregivers (PCAFC) to ensure it achieves intended outcomes for all new and Legacy Participants and Legacy Applicants. While this review is underway, VA's Caregiver Support Program (CSP) will continue to enhance and expand services to Family Caregivers of Veterans, including increasing access for those not currently served by PCAFC; expanding access to the Program of General Caregiver Support Services (PGCSS); and improving the experience of both Veterans and their Family Caregivers as they access these supports and services.

Goal 3: Expanding Connected Care: Expanding connected care options for Veterans, VA will leverage telehealth and digital technologies to enhance the accessibility, capacity, quality, choice and experience of VA health care for Veterans, their families,

and their caregivers anywhere in the United States, including its territories, its possessions, the District of Columbia, and Puerto Rico.

Goal 4: Diversity, Equity, Inclusion, Accessibility - Improving Trust of Underserved Veteran Populations: VA will measure, report and improve the trust of underserved Veterans, such as women, Veterans of color, and LGBTQ+ Veterans. Through this data and human-centered design insights, VA will drive improvements to the experiences of underserved populations served by VA.

Goal 5: Rural Health Workforce: VA will improve rural healthcare workforce staffing levels which impacts the care VA delivers to rural Veterans including American Indian and Alaska Native Veterans. By September 30, 2023, VA will ensure 90% of rural dwelling Veterans are satisfied with their access to healthcare when and where they need it.

Quarterly updates to VA's APGs can be found on www.Performance.gov.

STRATEGIC GOALS OVERVIEW

FY 2021 is the last year for operations under the Department's FY 2018 – 2024 strategic plan, which committed the Department to accomplishing the following strategic goals.

- **Strategic Goal 1:** Veterans choose VA for easy access, greater choices, and clear information to make informed decisions.
- **Strategic Goal 2:** Veterans receive highly reliable integrated care, support and excellent customer service that emphasizes their well-being and independence throughout their life journey.
- **Strategic Goal 3:** Veterans trust VA to be consistently accountable and transparent.
- **Strategic Goal 4:** VA will transform business operations by modernizing systems and focusing resources more efficiently to be competitive and provide world-class customer service to Veterans and its employees.

Per the guidance in Office of Management and Budget (OMB) Circular A-11, VA has written and proposed a new strategic plan for FY 2022 – 2028. Under the new plan, VA will accomplish the following strategic goals:

- **Strategic Goal 1:** VA consistently communicates with its customers and partners to assess and maximize performance, evaluate needs, and build long-term relationships and trust.
- **Strategic Goal 2:** VA delivers timely, accessible, high-quality benefits, care, and services to meet the unique needs of Veterans and all eligible beneficiaries.
- **Strategic Goal 3:** VA builds and maintains trust with stakeholders through proven stewardship, transparency, and accountability.

- **Strategic Goal 4:** Governance, systems, data, and management best practices strengthen the customer experience and increase accountability, security and emergency preparedness, quality and service across VA and the ecosystem of partners.

VA PRIORITIES AND PRINCIPLES

The Strategic Plan incorporates the VA Secretary's four fundamental principles to lead and manage VA:

Advocacy – Access – Outcomes – Excellence

1. Advocacy – VA will be the Nation's premier advocate for Veterans, their families, caregivers, and survivors.

2. Access – VA will provide timely access to VA resources: world-class health care, earned benefits and a final resting place as a lasting tribute to their service: deliver benefits, care, and services to our most vulnerable Veterans, reduce Veterans' homelessness and suicide, ensure access to educational opportunities, training and jobs worthy of their skills and service, provide care in their homes when Veterans need it and the training, support, and resources our caregivers need.

3. Outcomes – Veteran outcomes will drive everything we do; leverage data, health informatics and evidence to understand outcomes; measure the quality and effectiveness of benefits, care and services and Veterans' experiences and satisfaction.

4. Excellence – VA will seek excellence in all we do for Veterans: leverage the strength and diversity that defines our Veterans, workforce, and our country ensure every Veteran is afforded access to VA's capacity and resources diversity, equity, and inclusiveness are fundamental to everything we do VA welcomes all Veterans, including women, Veterans of color and lesbian, gay, bisexual, transgender, and queer (LGBTQ+) Veterans every person feels safe, free of harassment and discrimination in VA facilities.

GOAL 1: VETERANS CHOOSE VA FOR EASY ACCESS, GREATER CHOICES AND CLEAR INFORMATION TO MAKE INFORMED DECISIONS

To provide Veterans with better choices and improved access to the benefits, care, and services they need, we must enhance our understanding of what Veterans are experiencing at each phase of their life journey. To that end, VA will establish interactive relationships with Veterans before they transition from active duty, during their transition to civilian life, and after that to provide better information to Veterans about the care, benefits, and services available to them. VA will engage Veterans in a multitude of ways to include, but not limited to, in-person conversations, surveys, call centers, and by providing enhanced digital content, all for the express purpose of proactively providing information relevant to the Veteran's stage in life. VA will leverage data accumulated from these communication channels from market analyses and other sources to enhance Veterans' options.

VA's goal is to make it easy for the Veteran to access benefits, care, and services from VA and our partners who support Veterans. VA must compete for our Veteran customers or risk losing them. We believe competing with the private sector to serve our Veterans will make us stronger, and we welcome the challenge. In its quest to better serve Veterans in the manner they wish to be served, VA has identified three significant elements on enhanced access for Veterans: VA understands Veterans. Veterans are informed, and care, benefits, and services are available for Veterans to use. This goal expands easy access beyond making an appointment and reduces wait times to ensure Veterans can use any benefit, care, or service they need no matter where they are.

STRATEGIC OBJECTIVE 1.1: VA UNDERSTANDS VETERANS' NEEDS THROUGHOUT THEIR LIVES TO ENHANCE THEIR CHOICES AND IMPROVE CUSTOMER EXPERIENCES

VA understands Veterans' lives and relevant experiences to better anticipate their needs. This includes:
- understanding the evolving nature of military service and combat,
- understanding their experiences and the new and pervasive challenges transitioning Servicemembers face, and
- communicating with Veterans to ensure we provide the services they need and achieve the outcomes they have earned.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
OSDBU 966: Customer Satisfaction with Outreach Events	N/A	5	4	5	N/A	N/A	N/A	Off-track
VEO 692: Overall Trust in VA among Veterans, their families, caregivers, and survivors	72%	79%	76%	90%	3% increase	3% increase	N/A	Off-track
VEO 746: Ease to receive VA care or services needed by Veterans, their families, caregivers, and survivors.	71%	76%	70%	90%	3% increase	3% increase	N/A	Off-track

Table 1 – Strategic Objective 1.1 Performance Measures

ACCOMPLISHMENTS

- VA's Office of Small and Disadvantaged Business Utilization (OSDBU) tracks "Customer Satisfaction with Outreach Events." VA finished FY 2021 with a median outcome of four on a scale of one through five. This measure looks at the median score, and although the greatest number of responses were rated at five ("very satisfied") the median point was four ("satisfied"). This measure will be discontinued for FY 2022, and internal, continuous quality improvement efforts will continue. More relevant outreach efforts focused on the federal procurement process will benefit Veterans and small businesses.

- VA's Veterans Experience Office (VEO) measures the "Overall Trust in VA among Veterans, their families, caregivers, and survivors." In FY 2021, VA's aspirational goal was to achieve a 90% trust score in response to the survey question "I trust VA to fulfill our country's commitment to Veterans," with a result of 76%, VA was off track for this goal. As VA's lead organization for CX, VEO supported this mission by providing leaders the "Voice of the Veteran" to launch more rapid, results-driven service recovery and program improvement. In FY 2021, VA sustained 65 unique Veteran Signals (VSignals) surveys and created 34 new VSignals surveys at the request of VA partners and stakeholders, a 52% increase from FY 2020. Those 99 total surveys across 14 VA business lines resulted in VA sending more than 12.5 million surveys, receiving two million survey responses, and over 500,000 free-text responses from Veterans, their families, caregivers, and survivors. VA worked with

stakeholders through this data and identified service recovery and systems improvement opportunities that dramatically increased Veteran trust.

Each quarter, VA surveys Veterans who use any VA service about VA's performance. While VA-wide trust currently stands at 76%, this represents a 21% increase between FY 2016 and FY 2021. Such an increase reflects improvements in the Veteran's experience and overall sentiment of trust in VA. This improvement is a testament to the dedication of VA's frontline employees and a robust customer-centric approach across the Department. Frontline employees apply best practices and methodologies to implement service improvements based on direct feedback from Veteran customers.

- Through this CX survey data, VA deployed algorithms to detect free-text responses from Veterans that may be at risk for suicide and homelessness. Of the new surveys launched, 22 included a "free text" capability increasing VA's ability to capture Veteran insights and identify at-risk Veterans. As a result, over 3,200 alerts were immediately routed to the Veterans Crisis Line and National Call Center (NCC) for Homeless Veterans. To better understand our Veterans, VA produced eight new journey maps. Journey maps are visual artifacts based on qualitative data (interviews), demonstrating how Veterans and other stakeholders currently navigate VA care, benefits, and services, including pain points, bright spots, and moments that matter most throughout their journey. The journey maps created in FY 2021 highlighted:
    - journey for women Veterans' benefits,
    - Native American Veterans experience,
    - Loan Guaranty, employee experience onboarding,
    - Geriatrics, extended care,
    - VA Pathways to Care,
    - Transition Care Management/VA Liaison Program,
    - Equal Employment Opportunity (EEO), and
    - Telehealth.

The Veterans Journey Map illustrates how VA touches Veterans life at all stages and how care, benefits, and services fit into specific events of a Veteran's journey. The map can be found at: www.blogs.va.gov/VAntage/wp-content/uploads/2020/02/Veteran-Journey-Map.pdf.

VA also measures the "Ease to receive VA care of services needed by Veterans, their families' caregivers and survivors". In FY 2021 VEO's ambitious goal was to achieve a 90% ease score in response to the survey question "It was easy to get the care or service I needed", with a result of 70%, VEO was off track for this goal. In FY 2021, VA updated the VA Welcome Kit and developed and published eight one-page Quick Start Guides (QSG), as part of the VA Welcome Kit (www.va.gov/welcome-kit/). The VA Welcome Kit and associated QSGs are navigation tools that highlight ways VA can assist Veterans as they approach many of the most critical milestones

in their life and aid them by detailing how to best access specific VA benefits and services. New QSG topics included:

- State benefits and services,
- Vet Center services,
- Veteran-owned small business support,
- services for Veterans ages 65 and over,
- services for LGBTQ Veterans,
- food and nutrition services,
- whole health services, and
- applying for burial in a VA National Cemetery.

In FY 2021, the VA Welcome Kit and QSGs received more than 800,000 views.

- VA soft-launched the VA Flagship Mobile Application (App) to support the 40% increase in traffic coming to VA.gov from mobile devices. The App allows Veterans to check the status of their health and benefits services and complete transactional interactions quickly and easily. The App's features include:
  - biometric login for quick account access,
  - editable personal contact information and direct deposit details, claim and appeal status, geolocation to find the nearest VA facilities, secure short message service messaging with VA health providers, and access to the Veteran Crisis Line

- VA established VA Profile as the authoritative data source for more than 16 million Veteran contact records, further centralizing Veteran contact information. VA Profile collects, maintains, and instantly synchronizes contact information for VA employees and Veterans accessing VA self-service portals. This year's integrations included the White House VA Hotline and Member Services, as well as the Mental Health Checkup and Virtual Case Manager Mobile Apps. The ongoing integration of VA Profile data access and update capabilities across VA provides VA employees access to updated Veteran information. It empowers Veterans to update their information through all integrated customer service points of entry, reducing effort and frustration, and allowing VA employees to provide quality CX with the most up-to-date information possible. Utilizing VA Profile-enabled systems, Veterans can now indicate their VA communications preferences and have those preferences instantly recorded across all VA Profile partner systems. This allows Veterans more choice over how VA contacts them and helps VA inform customers of essential updates in the most convenient way possible.

- VA launched a new Debt Management web page on VA.gov, improving customers' digital experience by enabling them to check the status of VA debts related to the GI Bill and other VA education benefits, disability compensation, pension, and VA-backed or VA direct home loans. The new webpage also allows Veterans to download debt letters, explore options for repayment, and submit debt resolution options through the new Financial Status Report.

ASSESSMENT

In FY 2021, all three measures were off-track for the goal: VA understands our Veterans' lives and relevant experiences to better anticipate what they need. This measure includes understanding the evolving nature of military service and combat, understanding Veterans' experiences and the new and pervasive challenges transitioning Servicemembers face. Additionally, it includes communicating with our Veterans to ensure we provide the services they need and achieve the outcomes they desire.

VA takes pride in providing exceptional care to Veterans. As in years past, many Veterans had a favorable view of their care at VA facilities and in the community. During this period, VA worked diligently to provide enhanced systems access that allows Veterans easier and more practical access to health and benefits services. The changes appear to be successful, as evidenced by an increased traffic flow to VA.gov by 40% during the same period. The improvements help and benefit Veterans in accessing and understanding their benefits more. OSDBU performed strongly in many areas this reporting period and will continue to incorporate customer satisfaction feedback to achieve success. Some of the missed goals are likely due to change and uncertainty in the middle of the COVID-19 pandemic.

While off-track, VA is making progress in Strategic Objective 1.1 and acknowledges there is room for improvement, as it directly reflects the trust Veterans have in the VA.

In collaboration with OMB, VA has determined that Strategic Objective 1.1 is an area requiring focus.

STRATEGIC OBJECTIVE 1.2: VA ENSURES VETERANS ARE INFORMED OF, UNDERSTAND, AND CAN GET THE BENEFITS, CARE, AND SERVICES THEY EARNED, IN A TIMELY MANNER

As the chief advocate for Veterans, VA proactively educates and informs all Veterans about what benefits and services they are eligible for and what other non-VA provided benefits are available to them based on their personal needs, location, and desires before departing military service. VA will continue to reach out to Veterans who have transitioned out of the military but are not using VA services to ensure they are aware of their potential eligibility for benefits and care.

Informed by customer feedback, VA will integrate digital information, contact centers and databases so Veterans can easily find what they need, no matter which communication channel they choose. Using human centered design practices and working with Veterans, VA will continually ensure VA.gov is Veteran-centric and user friendly, and provides seamless and personalized forms, tools, online communities, and information. VA will also unify Veteran data, adding customer preferences for electronic correspondence to VA's Profile database and integrating the VA Profile service with mobile Apps. VA will also establish a governance structure to institutionalize the focus on CX and maintain senior VA leadership involvement in, and commitment to, the customer service effort.

PERFORMANCE MEASURES

Measure	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
VBA 469: % of Integrated Disability Evaluation System (IDES) participants who have a proposed rating completed within 20 days	52.0%	69.4%	91.6%	63.0%	63.0%	63.0%	N/A	On-track
VBA 576: Percent of Disability Compensation Rating Claims processed within 125 days	73.0%	75.0%	65.5%	63.0%	48.0%	52.0%	N/A	On-track
VBA 786: Percent of eligible Veterans contacted within their first year of separation from military service	N/A	59.0%	58.2%	40.0%	50.0%	50.0%	N/A	On-track
VBA 852: Average number of days from VR&E's receipt of Veteran's application to notification that the Veteran was found entitled or not entitled to services	42.3	35.96	31.5	45.0	45.0	45.0	N/A	On-track
VBA 911: Veterans or Beneficiaries who are satisfied with the value received from their GI Bill	78%	N/A	67%	80%	Closed	Closed	N/A	Off-track
VBA 917: Customer Satisfaction for VA Portion of the Transition Assistance Program (TAP)	N/A	95.8%	95.7%	95.0%	95.0%	95.0%	N/A	On-track
VBA 918: Percentage of Pension Rating Claims processed within 125 days	N/A	N/A	88.5%	80.0%	63.0%	70.0%	N/A	On-track

Measure	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VEO 752: Effectiveness of the VA care or service needed by Veterans, their families, caregivers, and survivors.	73%	75%	75%	90%	3% increase	3% increase	N/A	Off-track
VEO 761: Emotional Resonance - Veterans, their families, caregivers, and survivors felt like valued customers when receiving needed care or services from VA.	76%	71%	77%	90%	3% increase	3% increase	N/A	Off-track

Table 2 – Strategic Objective 1.2 Performance Measures

ACCOMPLISHMENTS

- VA tracks "percent of IDES participants who have a proposed rating decision completed within 20 days." Over 91% of IDES participants received proposed ratings within 20 days, exceeding the target of 63%. VA accomplished this by developing an improved, streamlined IDES rating procedure, which reduced the average proposed rating time by 13.9 days. This reduced overall processing times provides participants with timely information about proposed VA benefits.

- VA tracks "percent of disability compensation rating claims processed within 125 days." In FY 2021, VA met the target of 63%, with a year-end result of 65.5%. By working closely with its Medical Disability Examination Office and the Records Management Center Offices, and even with most claims in backlog status due to medical exams and federal record requests during the FY, VA successfully navigated delays by monitoring the available workload for claim rating actions and ensuring the respective pending claims were being completed within the targeted goal of 125 days. This allowed Veterans to receive their compensation benefits sooner than the publicized timeliness goal.

- VA tracks "percentage of eligible Veterans contacted within their first year of separation from military service" via the VA Solid Start (VASS) program. This measure reflects the number of eligible Veterans with at least one successful contact during the period of eligibility. For VASS, a successful contact is defined as the eligible Veteran accepting the VASS outreach call and completing the interaction with the VASS representative. In FY 2021, VA and the VASS program exceeded the 40% target, with 58.2% of eligible Veterans contacted within their first year of

separation from military service. To improve the performance and outcomes of the VASS program, VA implemented many enhancements during FY 2021. To provide additional support during the pandemic, VA created targeted scripting to address COVID-19-related issues and challenges that recently separated Veterans may be experiencing. Additionally, VA developed enhanced supportive scripting and tools to target information for women Veterans to help ensure ready access to VA benefits and services for all eligible Veterans. Finally, VA also focused on targeting contact attempts during days/times in which attempts are most successful. VA research shows first-year Veterans face increased challenges with homelessness, family reintegration, employment, post-traumatic stress disorder, and substance abuse, all of which can increase the risk for suicide. VASS addresses transition-related challenges through proactive outreach to connect recently separated Veterans with the services and benefits they have earned and high-quality mental health care when needed. These interactions support, educate, and empower Veterans with knowledge of accessing and using the benefits they have earned.

- VA tracks "average number of days from Veteran Readiness and Employment Program's (VR&E) receipt of Veteran's application to notification of entitlement or non-entitlement to services." VBA monitors this metric to ensure Veterans are notified promptly of the entitlement decision under the strategic target and performance standards. This metric measures the average number of days from VA receiving the Veteran's application for Chapter 31 benefits to the notification of entitlement or non-entitlement to a plan of services. VBA is on track with an average of 31.5 days, exceeding the targeted average of 45 days. The benefit and value of this metric is that it ensures Veterans receive a timely decision of entitlement to services.

- VA tracks "Veterans or beneficiaries who are satisfied with the value received from their GI Bill." In FY 2021, VBA missed the target of 80%, with a year-end result of 67%. Respondents are generally more satisfied with the service they receive at the beginning of their benefit usage (86.4%) than with the service they receive from VA as they continue using their benefits (71.2%). As part of the Digital GI Bill modernization effort, VA expects the launch of a new benefits portal to provide more readily available benefits information for GI Bill students and more self-service options. VBA requested the removal of this measure from the Annual Performance Plan & Report (APP&R) beginning FY 2022 because the measure is based in part on the experience the GI Bill student has with the service their school provides. It is mapped to two survey questions, "I was satisfied with the assistance I received from my school when submitting my Certificate of Eligibility," and "if I had an issue with my education benefits, I was satisfied with the assistance that I received from VA." Both questions focus on respondent treatment or support while engaged in customer service with their school or the VA. As part of this experience is outside VA's control and can be influenced by other factors which VA cannot control for, VBA will no longer track this measure for the APP&R beginning FY 2022.

- VA tracks "customer satisfaction for VA portion of the Transition Assistance Program (TAP)." TAP satisfaction is calculated as a weighted aggregate percentage of those transitioning Servicemembers (TSMs) who attend VA Benefits and Services briefings in-person and responded with a 4 (agree) or 5 (strongly agree) with the survey questions from the Transition Assistance Curriculum Participant Assessment (TACPA) conducted by the Department of Defense (DoD), "I will use what I learned in the module in my transition planning," and "the module enhanced my confidence in transition planning." The survey data is received quarterly from DoD. In FY 2021 through the second quarter (the most current quarter available) VA exceeded the 95% target with a satisfaction rating of 95.7%. The results of the TACPA are used to inform a host of VA transition-focused programs and projects and those of VA's internal and external partners. By continually evaluating program performance and working with TAP interagency partners other external and internal partners, the VA Benefits and Services briefings are continuously improved and revised to ensure the most current information is provided to our customers. Studies show that Servicemembers and Veterans who attend VA Benefit and Services briefings are far more likely to use their benefits than those who do not attend. By providing the best information available in the most effective manner, VA ensures the TSMs, Veterans, their families, and caregivers understand their earned benefits and best utilize them for their specific individual situations.

- VA tracks "VBA percentage of pension rating claims processed within 125 days fiscal year to date (FYTD)." The goal for FY 2021 was to process 80% of Pension rating claims within 125 days. VA collaborated with its Pension Management Centers throughout the FY to optimize workload management and ensure this target remained on track. Every month in FY 2021, this metric exceeded the target of 80%. The percentage of pension rating claims processed within 125 days is currently 88.5%. This supports VA's goal of delivering timely benefits to Veterans and their survivors.

- VA measures the "effectiveness of the VA care or service needed by Veterans, their families, caregivers, and survivors." In FY 2021, VA's aspirational goal was to achieve a 90% effectiveness score in response to the survey question "I got the care or service I needed," with a year-end result of 75%, VEO was off track for this goal. In FY 2021, VA improved single-entry access to VA by transitioning from MyVA311 to MyVA411 (1-800-698-2411). This transition was in response to input from the customer on having an easy-to-remember phone number as VA's telephonic "front door." With only one phone number to remember, Veterans can now access information about VA benefits and services, connect to any VA Contact Center, or speak to a live agent 24 hours per day, 365 days per year for basic assistance and referrals to the specialist best able to assist with complicated requests. Along with the transition to MyVA411, VA placed COVID-19 Frequently Asked Questions (FAQs) on the interactive voice response (IVR) at 27 VA health care facilities across the country and MyVA411. The FAQs were offered in English and Spanish and provided Veterans with instant, 24/7 access to information about COVID-19, reducing call volume surges to live customer service representatives by 78%.

- VA also continued providing Veterans, their families, caregivers, and survivors access to VA and non-VA resources through the #VetResources Newsletter and VA.gov events calendar. The #VetResources Newsletter is sent to more than 11 million subscribers weekly, resulting in 128 million emails opened and 30.6 million clicks to resources. VA's coordination of the VA Events Page resulted in more than 1,500 VA and community events posted and viewed more than 3.7 million times, a 1,615% increase from FY 2020.

- VA rolled out the *Quiet at Night* Toolkit. Quiet at Night implements a set of strategies for VA medical facilities to adopt to help patients receive uninterrupted rest within inpatient settings. The toolkit is designed to improve the Hospital Consumer Assessment of Healthcare Providers and Systems Quietness of the Hospital measurement. Iron Mountain Medical Center implemented the toolkit and noted a 20% improvement in the Survey of Health Experience of Patients Quietness of Hospital score, improving overall satisfaction with hospital stays from 85.6% in June 2021 to 88.5% in September 2021.

- VA measures the "Emotional Resonance - Veterans, their families, caregivers, and survivors felt like valued customers when receiving needed care or services from VA." In FY 2021, VA's aspirational goal was to achieve a 90% emotional resonance score in response to the survey question "I felt like a valued customer"; with a year-end result of 75%, VA was off track for this goal. VA refreshed VA's Annual I CARE Training to improve customers' emotional resonance. The updated training included tying CX principles to VA's core values and characteristics and turning words into positive interactions with Veterans, families, caregivers, and survivors. Since the relaunch, more than 131,000 employees have completed the training.

- In FY 2021, VA hosted eight virtual Veterans Experience Action Center (VEAC) events. For these events, VA joins forces with State Departments of Veterans Affairs, community and strategic partners, and local community partners to virtually connect Veterans, family members, caregivers, and survivors to services and benefits they have earned. Virtual VEACs allow VA to engage hard-to-reach Veterans, including seniors, women, homeless, and transitioning Servicemembers, to evaluate and remedy issues. As part of some VEAC events, VA incorporated a pilot to connect Veterans to local peer-to-peer networks to address Veteran suicide. In FY 2021, these events served 3,548 Veterans, family members, caregivers, and survivors, connecting 236 Veterans to Peer-to-Peer services. Post-event surveys showed 87.9% of respondents agreed or strongly agreed that they received efficient help and 93.1% agreed or strongly agreed that they felt respected and valued during their participation at the event.

ASSESSMENT

In FY 2021, six of nine measures associated with ensuring Veterans receive timely benefits, care, and services were on-track.

VA strives to ensure it provides the most accurate information available, so it continually reviews and revises its Transition Assistance Program. This program offers Servicemembers nearing their separation date a comprehensive overview of eligibility and benefits. Likewise, if a Service member is wounded, injured, or falls ill while serving and cannot perform their military duties, they are referred to the IDES for a disability evaluation. In FY 2021, VA streamlined the IDES process and reduced the average processing time by more than 13 days. With this time savings, VA provided 91% of Servicemembers with a disability rating within 20 days, allowing them to begin their new life as a civilian with a clear understanding of the benefits and services for which they have qualified.

VA continues to improve other processes that Veterans depend on for decisions that will affect their post-military lives. VBA can now process a pension rating claim for 88% of Veterans within 125 days by maximizing workload management among claims reviewers. At the end of FY 2021, VBA determined a Veteran's eligibility for the Veteran Readiness and Employment program within 31 days. Having this information quickly helps Veterans assess their options on time.

An increasing number of Veterans feel like valued customers of VA. When VA began collecting this information in FY 2018, 71% of Veterans felt valued; now, that number has improved to 75%. When asked in FY 2018 if they received the services they needed, only 69% of Veterans said they had. That result has now climbed to 77%. This steady increase in both metrics shows that VA listens to Veteran feedback and acts on comments and concerns to serve them better.

VA has determined that Strategic Objective 1.2 is maintaining progress.

GOAL 2: VETERANS RECEIVE HIGHLY RELIABLE AND INTEGRATED CARE AND SUPPORT AND EXCELLENT CUSTOMER SERVICE THAT EMPHASIZES THEIR WELL-BEING AND INDEPENDENCE THROUGHOUT THEIR LIFE JOURNEY

Serving as a leading advocate and honoring military service, VA will deliver integrated and seamless benefits, care, and services, enhancing the lives of Servicemembers, Veterans, their families, caregivers, and survivors. Improved quality of life means Veterans are independent, economically secure, socially engaged however they choose, and enjoy enhanced well-being. VA will engender the full trust of our customers.

STRATEGIC OBJECTIVE 2.1: VA HAS COLLABORATIVE, HIGH-PERFORMING, AND INTEGRATED DELIVERY NETWORKS THAT ENHANCE VETERAN WELL-BEING AND INDEPENDENCE

VA will leverage highly integrated partnerships with the public and private sectors to ensure Veterans get the best care and services available whether from VA or VA-approved community providers, even outside of VA. If the community provides a better outcome, Veterans will be able to use that service. Veterans deserve the opportunity to get the best outcomes. This means that VA will excel at its service offerings. VA will also, in partnership with Department of Defense (DoD) and Department of Labor (DOL), better prepare Veterans for employment and reintegration into civilian life.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
BVA 65: Appeals Adjudicated by the Board	95,089	102,663	99,721	93,600	111,500	130,000	N/A	On-track
BVA 983: Accuracy Rate: AMA Appeals	N/A	3	N/A	N/A	Base-lining	TBD	N/A	Not Started
BVA 985: Average Days to Complete – AMA Hearing Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	730	730	N/A	Not Started

Measure Name	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
BVA 986: Average Days to Complete – AMA Evidence Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	550	550	N/A	Not Started
BVA 712: Appeals Hearings held by the Board	22,743	15,669	23,777	50,000	36,030	50,000	N/A	Off-track
BVA 778: Number of Issues Decided	305,708	294,161	270,685	272,376	N/A	N/A	N/A	Off-track
BVA 780: Appeals decided per FTE	88	89	84	78	N/A	N/A	N/A	On-track
BVA 984: Average Days to Complete – AMA Direct Docket from Notice of Disagreement	N/A	N/A	300	365	365	365	N/A	On-track
NCA 54: Percent of graves in National Cemeteries marked within 60 days of interment	95%	86%	92.4%	95%	95%	95%	N/A	Off-track
NCA 234: Percent of Veterans served by a burial option within a reasonable distance (75 miles) of their residence	92%	93%	94%	93%	94%	94%	N/A	On-track
NCA 812: Number of interments in National Cemeteries	134,833	126,844	149,925	135,533	135,770	134,272	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
NCA 813: Number of additional VetPop Served	37,608	71,307	182,273	182,273	36,657	10,767	N/A	On-track
OSDBU 878: Percentage of total procurement awarded to Veteran-Owned Small Businesses	25.7%	22.7%	25.1%	17.0%	17.0%	17.0%	N/A	On-track
OSDBU 967: New Contract Awards Using SDVOSB or VOSB Set-Aside	N/A	15.3%	17.2%	10.0%	10.0%	10.0%	N/A	On-track
OSDBU 968: Percentage of Total Procurement Awarded to Service-Disabled Veteran-Owned Small Business (SDVOSB)	24.8%	22.5%	24.8%	15.0%	15.0%	15.0%	N/A	On-track
VBA 846: Percent of Life Insurance Clients highly satisfied with the program	93.3%	93%	96.5% - from January 2021	95.0%	NA	NA	N/A	Paused
VBA 218: Average days to complete original Education Claims	24.1	15.4	22.4	24.0	24.0	TBD	N/A	On-track
VBA 219: Average days to complete supplemental Education Claims	13.4	6.9	6.7	12.0	12.0	TBD	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VBA 226: Default resolution rate for VA backed home loans	87.4%	93.81%	97.8%	80.0%	80.0%	80.0%	N/A	On-track
VBA 840: Percent of calls answered by the VBA National Call Center within 2 minutes	32%	74%	81.7%	69.0%	75.0%	77.0%	N/A	On-track
VBA 841: Percent of calls blocked by the VBA National Call Center	0%	0%	0%	0.04%	N/A	N/A	N/A	On-track
VBA 842: Percentage of interactions correctly managed by the National Call Center	92.3%	92%	92.2%	91.0%	91.0%	91.0%	N/A	On-track
VBA 843: Average days to complete higher-level reviews	37	94	87	125	125	125	N/A	On-track
VBA 848: National claim-based quality for Pension Claims (Rating)	93%	94%	96%	93%	93%	93%	N/A	On-track
VBA 919: VR&E Program Participation Rate	N/A	33,200	32,928	32,218	N/A	N/A	N/A	On-track
VBA 920: Number of VR&E Positive Outcomes	N/A	13,220	17,874	17,000	14,055	14,055	N/A	On-track
VHA 635: Percentage of Community Care Claims processed timely	52%	71%	97%	90%	90%	92%	93%	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VHA 681: The percent of patients responding "Usually" or "Always" to getting an appointment for urgent and routine care as soon as needed in the primary and specialty care setting as measured by the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.	81%	83%	81%	83%	84%	85%	86%	Off-track
VHA 682: Percent of Primary Care Patients who respond Always and Usually regarding their ability to get an appointment for needed care right away	75%	75%	75%	78%	80%	81%	82%	Off-track
VHA 741: Overall rating of Primary Care Provider	N/A	74%	74%	77%	78%	78%	79%	Off-track
VHA 742: Percentage of Eligible Veterans who have received telehealth services during the FY.	15%	27%	40%	25%	35%	36%	36%	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VHA 747: Overall Rating of Hospital	67%	70%	71%	71%	73%	73%	74%	On-track
VHA 750: Overall Rating of Specialty Care Provider	72%	75%	74.6%	71.5%	77%	77%	78%	On-track
VHA 753: Percentage of Veterans receiving telehealth at home or on a mobile device	1.7%	19%	32%	17%	24%	25%	25%	On-track
VHA 760: Overall Satisfaction with Community Care	N/A	78%	80%	79%	81%	82%	82%	On-track
VHA 790: Percentage of unique Veterans accessing Whole Health services	4.5%	7.0%	7.8%	7.2%	9.0%	10.0%	10.5%	On-track
VHA 834: Percent of women assigned to designated women's health primary care providers	81%	82%	85%	81%	86%	87%	87%	On-track

Table 3 – Strategic Objective 2.1 Performance Measures

ACCOMPLISHMENTS

- VA tracks the "percentage of total procurement awarded to Veteran-Owned Small Businesses (VOSB)." For FY 2021, VA exceeded the target of 17% with an achievement of 25.1%. The Veterans Benefits, Health Care, and Information Technology Act of 2006 requires the "rule of two." The rule of two requires the VA to set aside procurements for VOSBs or service-disabled Veteran-owned small businesses (SDVOSBs) when market research indicates that two or more such entities would submit offers, assuming the award can be made at a fair and

reasonable price. Veterans benefit from this activity because it provides economic opportunities for VOSBs.

- VA tracks the "new contract awards using SDVOSB or VOSB Set-Aside." For FY 2021, VA exceeded its target of 10% with an achievement of 17.2%. This metric seeks to measure the extent to which VA contracting officers use acquisition strategies provided by the Veterans First Contracting Program (VFCP) when making a new base contract award. The metric intends to highlight the number of new VFCP contracting opportunities and is therefore based upon contract actions rather than contract dollars. The metric is cumulative from the beginning of the FY to the end of the reporting period. Veterans benefit from this activity because it provides economic opportunities for SDVOSBs.

- VA tracks the "percentage of total procurement awarded to SDVOSB. For FY 2021, VA exceeded the target of 15% with an achievement of 24.8%. The VFCP has created a hierarchy of small business socioeconomic groups with SDVOSBs as first in the priority. It is implemented through the "rule of two" where if two or more verified SDVOSBs are both identified and capable, the acquisition must be set-aside for SDVOSBs, provided the contracting officer has a reasonable expectation that two or more verified SDVOSBs will submit offers and that the award can be made at a fair and reasonable price. Veterans benefit from this activity because it provides economic opportunities for VOSBs.

- VA tracks "percent of life insurance clients highly satisfied with the program." During FY 2021, VA's Insurance Service began converting from a paper survey process to an online survey tool. Thus, this metric was approved to pause in April 2021 due to the transition. VA plans to reevaluate this measure upon full migration to the online tool.

- VA tracks "average days to complete original education claims." VA measures original education claims timeliness by the average number of days to process an initial application for education benefits. In FY 2021, VA surpassed the target of 24 days by processing original claims in an average of 22.4 days. VA expects original claims processing timeliness to improve with the ongoing modernization efforts of the GI Bill program. Improving original claims timeliness increases the speed at which beneficiaries receive initial eligibility determinations for benefits such as tuition, fees, monthly housing allowances, books, and supplies.

- VA tracks "average days to complete supplemental education claims." VA measures supplemental education claims timeliness by the average number of days to process subsequent claims for education benefits after eligibility is established. In FY 2021, VBA met the target of 12 days with a timeliness average of 6.7 days. This timeliness measure is expected to improve with the ongoing modernization efforts of the GI Bill program. Improving supplemental claims timeliness increases the speed at which beneficiaries receive payment for tuition, fees, monthly housing allowances and books and supplies, lessening the financial burden of a post-secondary education.

- VA tracks "default resolution rate for VA backed home loans" to measure the outcomes of Veterans to be able to avoid foreclosure. VA loss mitigation actions and home retention options continue to assist our Veterans to retain home ownership and avoid foreclosure at a high rate. In FY 2021, VA exceeded the target of 80%, with a year-end result of 97.84% of VA borrowers able to retain homeownership or avoid foreclosure. VA additionally assisted in the prevention of more than 203,000 loans from experiencing foreclosure through various loss mitigation strategies. During the last two fiscal years, the opportunities afforded to Veterans have been bolstered by a foreclosure moratorium through July 31, 2021. Many Veteran borrowers have also effectively utilized COVID-19 forbearance and modifications to retain homeownership. It is expected that this rate will lower closer to the target level in future fiscal years as the moratoriums have ended.

- VA tracks "percent of calls answered by the VBA NCC within two minutes." This measure reflects the percent of callers who are successfully connected with a live agent within two minutes of entering the agent queue. This measure is captured monthly and reflects the FYTD performance through the end of the designated period. In FY 2021, VA exceeded the 69% target with 81.78% of calls answered within two minutes. To improve performance and provide a better experience for callers, VA implemented many enhancements during FY 2021. Two key enhancements specifically targeted the customer's wait time and experience with the NCC interactive voice response (IVR) system. VA expanded the NCC service hours for all locations to provide consistent and efficient access across the full 13-hour NCC span of control aligning with the needs and expectations of our customers, helping to ensure a consistent experience and wait time for all customers. VA also updated and simplified the process to reach an agent through the NCC IVR to ensure easier navigation to connect with an agent and reduce the number of transfers within the NCC. These enhancements improved the customer's experience while connecting with an agent and created increased capacity within the NCC to better meet Veteran and beneficiary needs.

- VA tracks "percent of calls blocked by the VBA NCC." This measure reflects the percent of callers who are unable to advance to the queue to wait to speak to an agent. This measure is captured monthly and reflects the FYTD performance through the end of the designated period. In FY 2021, VA exceeded the 0.4% target with 0.0% of calls blocked. To improve performance and provide a better experience for NCC callers, VA implemented many enhancements during FY 2021 to improve access to benefit support. VA worked closely with its Office of Human Capital Services to develop an expedited hiring process for NCC agents, which helped to achieve and maintain a 90% staffing level throughout FY 2021 and ensure NCC agents are available and ready to answer customer calls in a timely and efficient manner. VA also expanded the NCC footprint by opening an NCC location in Reno, NV, to increase capacity for afternoon and evening coverage, which have historically presented coverage challenges. These enhancements provided additional capacity to meet Veteran and beneficiary needs during the COVID-19 pandemic and

improved their experience when engaging with the VA NCC. Since this measure remains successful and on-track it will be retired this year.

- VA tracks "average days to complete higher-level reviews (HLR)." VA has committed to processing HLRs in 125 days or less on average. In FY 2021, VA achieved this goal with a processing time of 87.2 days. This achievement benefits Veterans by providing timely reviews of decisions much faster than the prior legacy appeals process that could take three to five years to complete.

- VA tracks "national claim-based quality for pension rating claims (FYTD percentage)." The goal for FY 2021 was to maintain an accuracy rate of 93% by measuring the accuracy of decisions made in the grant or denial of Veterans benefits. Additionally, this measure provided VBA the ability to identify training gaps and ensure that any error trends are quickly identified and corrected. This metric has exceeded the target of 93% every month of FY 2021 with an accuracy rate higher than 93%. The national claim-based quality for pension rating claims at the end of August 2021 was 95.7%. By meeting this target, VBA ensures Veterans are receiving high quality decisions for the benefits they have earned and are entitled to receive.

- VA tracks "VR&E program participation rate" to measure the number of eligible and entitled Veterans who have entered a plan of service. In FY 2021, VA completed 32,928 new plans, 2.1% above the targeted 32,218. However, VA discovered this data point is ineffective in evaluating the intention of this target, therefore the measure will be removed beginning FY 2022.

- VA tracks "number of VR&E positive outcomes," closely monitoring the number of program participants completing the program, referred to as positive outcomes. Positive outcomes are the primary objective of the VR&E program mission, as it is the key indicator of successful program completion. The metric measures the following rehabilitations (Rehabs) as indicators of successful completion:
  - number of Chapter 31 employment,
  - continuing education,
  - independent living,
  - maximum rehab gains,
  - Chapter 18, and Chapter 35

In FY 2021, VBA achieved 17,874 positive outcomes, exceeding the target 17,000 by 5.1%. The benefit and value of this metric is to drive Veteran success in meeting their program goals and ensuring that they are better equipped for employment and independent living after completion.

- VA tracks "percentage of Veterans receiving telehealth at home or on a mobile device." In FY 2021, VA met the target of 19.5% with a year-end result of 30.9%. Episodes of video telehealth care grew by over 146% from FY 2020 to 2021. In addition, overall trust in video telehealth care grew from 82.7% in the first quarter of

FY 2021 to 89.3% in the fourth quarter. During FY 2021 the percentage of clinicians who completed a video visit in the home or on a mobile device grew from:
- 90.71% to 95.53% for primary care,
- 94.79% to 97.95% for mental health, and from
- 79.37% to 85.67% for other targeted ambulatory healthcare professionals (includes specialty care and surgical care health care professionals).

- VA tracks "percentage of Veterans receiving a portion of care via telehealth modalities." More than 2.3 million unique Veterans received a portion of their care in FY 2021 via a telehealth modality. This represents a 43% increase in telehealth utilization by Veterans between FY 2020 and 2021. Veterans participated in over 11.2 million episodes of telehealth in FY 2021. This represents a 97% increase in telehealth episodes of care between FY 2020 and 2021. During FY 2021, 18,575 unique Veterans were provided with daily monitoring for COVID related symptoms from the Remote Patient Monitoring-Home Telehealth program. This occurred during an estimated 176,424 daily sessions.

- VA tracks "percentage of community care claims processed timely." In FY 2021, VA met the target of 90% with a year-end result of 97%. The community care claims backlog has been eliminated. Provider claims are now processed and paid well within expectations and VA is restoring community provider trust.

- VA tracks "overall rating of specialty care provider." In FY 2021, VA met the target of 71.50% with a year-end result of 74.67%. VA also tracks, "overall rating of hospital (#747)" and "overall rating of primary care provider (#741)." In FY 2021, VA met the target of 71% for hospital ratings and the target of 74% for primary care providers. All three of these measures are tracked through the Survey of Health Experience of Patients (SHEP), which provides VA with extensive information on how Veterans perceive the care and services we provide to them. During FY 2021, the Office of Primary Care (OPC) met with VA Patient Centered Care experts to identify significant improvement opportunities based on Veteran feedback from the Vsignals and SHEP surveys. These included access to care, care coordination, comprehensiveness of exam, provider engagement with medication decisions, and self-management support. The opportunities were shared with Primary Care Veterans Integrated Services Network (VISN) leads during a national monthly call, each lead then submitted one best practice and greatest opportunity from their VISN to be reviewed by the OPC team of experts. The top best practice, PUREL: Preferences, Understanding, Responsible, Explain and Listen was shared in depth on the September 2021 call and three others, Take Five, Stress Discussed and Patient Experience networking strategies will be shared quarterly throughout FY 2022.

- VA tracks "the percent of primary care patients who respond "Always" and "Usually" regarding their ability to get an appointment for needed care right away." In FY 2021, VA did not meet the target of 79%, ending the year at 75.27%. Nor did VA meet the target for the composite measure, "The average of the percent "Always" and

"Usually" responses for four access measures found in the Patient Centered Medical Home survey and the Specialty Care Consumer Assessment of Health Providers and Systems Survey." In FY 2021, VA did not meet the target of 83%, ending the year at 81%. These two metrics were just below their targets likely due to the increased demand on staff for vaccine administration, inpatient acute care for COVID patients, staff shortages due to illness and attrition of the health care workforce due to retirement and burnout. Despite these challenges, timeliness of urgent care delivery was maintained throughout the pandemic.

- VA tracks "overall satisfaction with community care." In FY 2021, VA met the target of 79% with a year-end result of 80%. The overall satisfaction with community care saw an increase this year from 78.1 to 80.4 in the fourth quarter of FY 2021. This increase can be attributed to the implementation of the community care network contract in four regions.

- VA tracks "number of unique Veterans accessing Whole Health services." In FY 2021, VA met target of 7.18% with a year-end result of 7.87%. The FY 2021 result is a 17.3% increase from the FY20 result of 6.69%. The goal for VA is the development of a rigorous strategy for measuring Veteran well-being as part of routine VA health care.

- VA tracks "percent of women assigned to designated women's health primary care providers." In FY 2021, VHA met the target of 83% with a year-end result of 84%. Measure results increased by 2.4%, from 82.05% in October 2020 to 84.01% in September 2021. VA continues to work directly with sites that have gaps in their staffing of women health primary care providers, assist sites with strategies to hire and recruit providers where needed and sponsor training efforts, including mini residencies to train providers in women's health.

- VA tracks "NCA percent of Veterans served by a burial option within a reasonable distance (75 miles) of their residence." This measure was off-track by one percent while VA continued its effort to expand access to burial in a national or grant-funded Veterans' cemetery within 75 miles of a Veteran's residence towards the strategic goal of providing convenient access to 95% of all Veterans. In FY 2021, the opening of one full national cemetery in upstate New York, one rural initiative national cemetery in Cheyenne, Wyoming, and two VA grant-funded state Veterans' cemeteries (one each in Idaho and South Dakota) provided new access for Veterans that previously were not considered served within the reasonable distance standard. These facilities provide a first interment option for Veterans previously unserved by the network of national, state, and tribal Veterans' cemeteries.

- VA tracks, "NCA percent of graves in national cemeteries marked within 60 days of interment". This measure was off-track because COVID-19 triggered supply chain issues that affected the production of headstones and markers for placement in national cemeteries. An industry-wide shortage in a key component of the engraving process caused delays in production and delivery of markers. Additionally, many

contractors experienced a shortage of worker availability due to illness and staffing challenges. VA is working with contracted vendors for headstones and markers to manage the impact on delivery of headstones and markers. The prompt marking of a gravesite or columbarium niche is an important aspect of timely service for the families of those being interred. NCA is working with vendors to bring this metric back to "on-track" status as soon as possible.

- VA tracks, "NCA (#) interments in national cemeteries." This measure was on-track because VA has continued its record of high quality of service to Veterans and their families through providing dignified interments and committal services in the shrines that are our national cemeteries. Throughout the challenges of the COVID-19 pandemic, national cemeteries remained open for interments. While some families had to defer the ceremonies that often accompany interments at a national cemetery until a later time, the cemeteries continue to work with families to ensure the delivery of appropriate respect and honors. Through the continuation of the availability of interment options, Veterans and their families can remain confident in the availability of VA services when and where the Veteran or the family needs those services.

- VA tracks "NCA (#) additional VetPop served." With openings of two national cemeteries (Western New York, and Cheyenne. Wyoming), and the new VA grant-funded state Veterans' cemeteries (Idaho and South Dakota), VA is on-track for meeting the strategic goal of providing a first interment option for 95% of all Veterans in a national or grant-funded Veterans' cemetery within 75 miles of their home. Opening these cemeteries provides service to nearly 150,000 Veterans for whom interment at a national or state cemetery had previously required travel of more than 75 miles. Veterans serviced by the new cemeteries enjoy convenient access making the choice of interment in a national of grant-funded cemetery a more viable interment option.

- VA tracks the number of "appeals adjudicated by the Board." In FY 2021, the Board adjudicated 99,721 appeals, which exceeded its target of 93,600 by 6,121. These appeals decisions enable many Veterans and their families to begin receiving the benefits they earned and deserve.

- VA monitors the number of "appeal hearings held by the Board." The Board held a record 23,777 hearings (97% were virtual) in FY 2021. Through several initiatives, the Board has driven a steady increase in the number of hearings scheduled, from 860 in October 2020 to over 2,586 in September 2021. While setting a record, VA was still short of its goal of 50,000 hearings held. In the fourth quarter of 2021, new Veterans Law Judges (VLJ) were appointed by the Secretary of Veterans Affairs to conduct hearings and adjudicate more appeals for Veterans. The Board successfully onboarded 15 of the 20 appointees with the remaining scheduled to join the Board in January 2022.

While the Board retains the capacity to schedule and hold 50,000 hearings, based on a lower show rate and feedback from stakeholders including VSOs and private

attorney representatives about scheduling challenges, the Board has reassessed the FY 2022 goal. Additionally, the Board is scheduling a Hearing Summit for the second quarter of FY 2022 to bring leaders from National VSOs, private bar associations, Congressional staff, and other stakeholders of the Board. The Summit will enable VA Senior Leaders to partner with external stakeholders to openly identify opportunities for viable solutions to improve the hearing process for Veterans, discuss training opportunities, and cultivate a culture of transparency and willingness to partner for positive change.

- VA tracks the "number of issues decided." This measure tracks the number of issues adjudicated on behalf of the Secretary presented to the Board for appellate review. An appeal can have multiple issues, which can result in longer and more complex decisions. In FY 2021, 270,685 issues were adjudicated, 0.6% below the FY 2021 target of 272,376. In FY 2022, this metric was removed from external reporting because the number of issues per appeal is outside of the Board's control. VA met its appeals adjudicated goal in FY 2021. VA will continue to track the number of issues adjudicated internally.

- VA tracks the number of "appeals decided per full-time employee (FTE)." In FY 2021, the Board was able to achieve 84 decisions per FTE, exceeding the target of 78. This is a multifaceted measure with the following factors influencing the results: new hires; complexity of appeals; organizational prioritization of hearing requests; the number of issues per appeal; organizational knowledge lost from attrition; changes in Veterans law; and the implementation of new technologies. In FY 2022, this metric was removed from external reporting since it is not a good overall indicator of the Board's production in terms of hearings and adjudicated appeals in evolving appeals business model. The VA will continue to track this measure internally.

- VA tracks the "ADC – AMA Direct Docket from Notice of Disagreement." The Board met its 365-day timeliness goal for processing Direct Docket appeals in FY 2021. The average number of days to complete a Direct Docket appeal in FY 2021 was 300 days. Additionally, the Board released timeliness goals for its two remaining AMA dockets (Evidence Submission, Hearing) in FY 2021. With targets of 365 ADC for Direct, 550 ADC for Evidence, and 730 ADC for Hearing docket appeals, the Board now has timeliness goals for all its AMA dockets.

ASSESSMENT

In FY 2021, 27 of the 33 active performance measures associated with the delivery of services to Veterans ended the year on track. Comparison of monthly and quarterly results between FY 2020 and 2021 showed that VA's operations had recovered from the challenge that the COVID-19 pandemic presented to organizations large and small the previous year as operations moved from in-person to on-line. VA successfully delivered benefits to Veterans at a level of excellence that matched or exceeded its operations before the pandemic.

VBA drove down processing times for several key activities: approving education claims, answering and addressing calls at the NCC, and reviewing benefit claims. It took extra measures to assist Veterans at risk of defaulting on their mortgages with two 180-day periods of forbearance on fees, penalties, and additional interest; a moratorium on certain eviction and foreclosure actions through September 2021; and the Veterans Assistance Partial Claim Program, which was launched at the end of July 2021. As a result, VBA was able to resolve default cases for more than 98% of Veterans at risk of default.

Appeals resolution for Veterans who would like to dispute VA's disability rating decisions continues to improve. In FY 2021, the Board exceeded its target for the number of appeals adjudicated and the number of issues decided. The Board did not attain its goal of holding 50,000 hearings in a year, but it did hold a record number at 23,777. This number exceeds the prior year's total by approximately 50%. In FY 2022, the Board will continue to strive for 50,000 for the year.

VA recognizes that access and good patient experience are important to Veterans who choose VHA for their health care. In FY 2021, VHA continued to leverage the use of telehealth as the pandemic ebbed and flowed across the country. After the experience of FY 2020, VHA adjusted its targets for telehealth delivery upward in FY 2021, but still exceeded them significantly. Telehealth is increasingly seen by patients and clinicians as a viable alternative to in-person care.

Third quarter results regarding Veterans' access to care, 80.87% of survey respondents indicated they could always or usually see a doctor when needed. Detailed analysis of results from the SHEP shows communication remains the primary driver of patient satisfaction with VA healthcare. Veterans consistently rate their ability to communicate with VA physicians and nurses as high. All six SHEP measures in VA's portfolio of measures are driven by communication. In those instances where communication may not be at the desired levels, VHA has patient satisfaction teams that develop initiatives and programs to help a facility get back on track.

By FY 2021, VA had successfully transitioned employees working from home when applicable and serving Veterans virtually or under new constraints. In the second year of the pandemic the organization not only adjusted to unusual conditions but excelled in many respects.

VA, in collaboration with OMB, has determined that Strategic Objective 2.1 is making noteworthy progress.

STRATEGIC OBJECTIVE 2.2: VA ENSURES AT-RISK AND UNDERSERVED VETERANS RECEIVE WHAT THEY NEED TO END VETERAN SUICIDE, HOMELESSNESS, AND POVERTY

VA will proactively identify at-risk Veterans. While most Veterans reintegrate successfully into civilian life, some face social, economic, and health challenges that impede their transition into civil society. Through the REACH VET initiative, VA identifies existing conditions that increase Veterans' risk of suicide to pro-actively. enhance care. VA will expand the use of predictive analytics tools like REACH VET to reach out to Veterans before transition and leverage our integrated network to provide services catered to their specific needs. VA will no longer wait until Veterans are in crisis to reach out to them. VA will improve support to Veteran families and caregivers to prepare and sustain them as they take care of their Veteran.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
NCA 956: Percentage of pre-need applications processed within 120 days	N/A	92.5%	91.0%	85.0%	85.0%	90.0%	N/A	On-track
VBA 647: Average Days to Complete Initial Appointment Exam	68.6	38.2	37.7	76.0	N/A	N/A	N/A	On-track
VBA 853: Accuracy of requirements in closing a Veteran's case or declaring the Veteran rehabilitated or discontinued	98.8%	98.48%	96.4%	97.0%	93.0%	93.0%	N/A	Off-track
VHA 535: Percent of HUD-VASH vouchers allocated that resulted in a homeless Veteran obtaining permanent housing	84%	83%	83%	92%	92%	92%	92%	Off-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VHA 606: Percent of participants at risk for homelessness (Veterans and their households) served in SSVF that were prevented from becoming homeless	91%	89%	88%	90%	90%	90%	90%	Off-track
VHA 756: Percentage of Veterans flagged as high risk for suicide who have received all recommended interventions and follow up	81%	86%	81%	83%	87%	88%	89%	Off-track
VHA 788: Average improvement in mental health symptoms in the 3-4 months after start of mental health treatment as measured by the mental health component of the Short Form-12	2.56	2.30	2.00	2.30	3.00	3.00	3.00	Off-track
VHA 804: Percent of long-term service and support obligations and/or expenditures devoted to purchased Personal Care Service for frail elderly and disabled Veterans wishing to remain at home	0.0%	9.0%	11.0%	9.3%	11.0%	12.0%	13.0%	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
VHA 826: Percent of homeless program positions, including HUD-VASH case managers, filled in the field	86%	86%	89%	90%	N/A	N/A	N/A	Off-track
VHA 832: Percentage of caregiver applications dispositioned within 90 days	90.0%	96.8%	63.0%	90.0%	92.0%	92.0%	92.0%	Off-track
VHA 835: Use of interventions for Veterans at-risk for suicide through the use of predictive modeling and enhanced engagement strategies (REACHVET & STORM)	85%	96%	98%	95%	98%	98%	98%	On-track

Table 4 – Strategic Objective 2.2 Performance Measures

ACCOMPLISHMENTS

- VA tracks "percent of U.S. Department of Housing and Urban Development (HUD) VA Supportive Housing (VASH) vouchers allocated that have resulted in homeless Veterans obtaining permanent housing." In FY 2021, VA did not meet the target of 92%, ending with a year-end result of 83%. The VHA National HUD-VASH Program Office is actively partnering with key stakeholders, including HUD and the United States Interagency Council on Homelessness, to develop and implement strategies to improve voucher utilization rates in HUD-VASH. These strategies include, but are not limited to: expanding access to safe and affordable housing stock through project-based development; increasing HUD-VASH case management capacity through innovative partnerships with internal and external care providers; developing models to utilize HUD-VASH vouchers in settings which cater to the needs of aging Veterans, including Medical Foster Homes and Assisted Living Facilities; and expanding the population of Veterans served in HUD-VASH through targeted outreach to Veterans recently made eligible for the program through legislative changes.

- VA tracks, "percent of participants at risk for Homelessness (Veterans and their Households) served in Supportive Services for Veteran Families (SSVF that were prevented from becoming homeless." In FY 2021, VA did not meet target of 90%, ending the year at 88%. While VA missed the target, we note that in FY 2021 - 25,195 Veterans were moved from homelessness to permanent housing, compared to 17,051 in FY 2020. This is a noteworthy achievement and represents significant impact, particularly during the challenges created in housing during the pandemic. SSVF has worked with leading researchers in homeless prevention and with HUD to develop a new federal homeless prevention screening process designed to identify those at highest risk of homelessness. This new process will be included in the FY 2022 version of the Homeless Management Information System and will be in widespread use.

- VA tracks "percentage of VHA homeless program positions, including HUD-VASH case managers, filled in the field." In FY 2021, VA did not meet the target of 90%, ending the year at 89%. The hiring process slowed during the pandemic, but VHA has implemented strict requirements across the VA health care system to ensure these positions are filled.

- VA tracks "percentage of Veterans flagged as high-risk for suicide who have received recommended interventions and follow-up." In FY 2021, VA did not meet the target of 83%, ending the year at 81%. Despite extensive efforts to maintain and improve management of high-risk Veterans during the COVID-19 pandemic, scores on this measure decreased. There were two main drivers of this drop in scores: changes to measure specification and changes in clinical care due to the pandemic. To address these gaps, VA is working with suicide prevention teams at facilities with lower performance to facilitate process improvement and working to return and maintain VHA inpatient mental health capacity at normal levels. VA will also investigate methods for improving VA documentation of care received from community mental health providers.

- VA tracks "average improvement in mental health symptoms in the three to four months after start of mental health treatment as measured by the mental health component of the Short Form-12." In FY 2021, VA did not meet the target of 2.3, ending the year with a result of 2.0. Despite extensive efforts to maintain and improve management of mental health conditions during the pandemic, scores on the metric did not meet the target. There were two main drivers of this drop in scores: changes in clinical care due to the pandemic and changes to the baseline scores of Veterans entering mental health treatment. To address these gaps, VA is working with mental health programs to ensure access to multiple forms of outpatient mental health care as needed, including virtual care, extended hours, and community care if available. As both providers and Veterans become more comfortable with modalities such as telehealth care, we expect we will be able to serve Veterans who seek mental health services in such a way that improvement scores will return to pre-pandemic levels.

- VA tracks "use of interventions for Veterans at-risk for suicide through the use of predictive modeling and enhanced engagement strategies (REACHVET & STORM)." In FY 2021, VA exceeded the target of 95% with a year-end result of 98%. These predictive analytics-targeted prevention programs have helped to focus attention to Veterans at elevated risk to ensure that they stay engaged in care and receive interventions designed to minimize risk of adverse outcomes.VA and DoD collaborated to develop VA and DoD versions of the Stratification Tool for Opioid Risk Mitigation (STORM) and Recovery Engagement and Coordination for Health – Veterans Enhanced Treatment (REACHVET 2.0) predictive models, using matched risk predictors calibrated to their respective patient populations.

- VA tracks "Geriatrics: percent of total long-term service and support obligations and/or expenditures devoted to purchased personal care services for frail elderly and disabled Veterans who want to remain at home." In FY 2021, VHA exceeded the target of 9.3% with a year-end result of 11.0%. Seven VISNs are at or above the national average. This measure is a community standard measure that examines the shift in resources from nursing home to personal care services. The measure is in keeping with the desired goal to expand personal care services to Veterans. This is a multi-year process and FY 2021 showed continued progress despite the COVID-19 pandemic, which reduced access to some personal care services.

- VA tracks "percentage of caregiver applications dispositioned within 90 days." In FY 2021, VHA did not meet the target of 90%, having reached only 63%. However, VA experienced a 350% increase in applications in FY 2021 compared to FY 2020. Performance for the full year was impaired by the volume of applications and the complexity of processing this increase, particularly in the first half of FY 2021. VHA's capacity to handle the massive influx of application volume improved over time as additional staff were hired and training for established and new employees was improved.

- VA's pre-need program is a success story and is tracked under performance measure "percentage of pre-need applications processed within 120 days." It allows Veterans and eligible family member to administratively establish eligibility for national cemetery interment and have all the necessary records on file with NCA. VA has been able to keep pace with increased awareness and expansion of the program to continue timely determinations of eligibility within a reasonable period after application. The opportunity of completing a pre-need application for interment at a national cemetery provides pre-planning and peace of mind for the Veteran and their family members and greatly eases the administrative burden on survivors at the time of need.

- VA tracks "average days to complete initial appointment exams FYTD timeliness measure." This metric tracks the time it takes to establish a fiduciary for a beneficiary who has been determined to be unable to manage their VA benefits. The goal for FY 2021 was to complete initial appointment field exams within 76 days, on average. VA collaborated with Fiduciary Hubs throughout the FY to ensure this target remained

on track. This metric exceeded the target every month of FY 2021. As of October 1, 2021, the average days to complete a Fiduciary initial appointment examination was 37.7 days. The timely completion of initial appointment examinations is important as it establishes the appointment of a fiduciary, who provides oversight and protection to Veterans and beneficiaries who are deemed unable to manage their benefits. As a result of VBA's Fiduciary Program modernization, field examination timeliness for initial appointments and follow up appointments will be tracked under a new, combined measure beginning FY 2022.

- VA tracks "accuracy of requirements in closing a Veteran's case or declaring the Veteran rehabilitated or discontinued." This is a rolling 12-month average. VA's FY 2021 result is off-track at 96.44%, narrowly missing the target of 97%. The statistical formula used to select the sample included high past performance resulting in a small sample size which would not allow a regional office to make one error and meet the high target of 97%. Therefore, 17 regional offices did not meet this target. Our action plan for getting back on track is to increase the sample size and lower the target to allow for the opportunity for success. The benefit and value of this accuracy measure ensures services provided to Veterans are accurate and consistent.

ASSESSMENT

In FY 2021, four of the 11 measures associated with care of at-risk Veterans ended the year on-track. Like many organizations, VA found that the need for assistance increased significantly over the last two years. In many instances VA was able to shift resources and streamline processes to meet Veterans' needs, but in others the demand for resources by multiple parties created scarcities that were difficult to address.

The COVID-19 pandemic forced substantial changes to mental health care delivery, including shifting treatment to telehealth modalities and restricting capacity in inpatient and residential mental health programs for Veteran and staff safety. These changes, combined with stress and behavior change, including increased substance use, required rapid adaptation on the part of clinicians and patients in unplanned ways. Patients in intensive substance use treatment reported challenges to group treatment delivery via telehealth, as well as increased difficulty maintaining abstinence with the disruption to recovery networks, social support, and alternative healthful activities caused by pandemic-related distancing restrictions. Adaptations reduced consistency of clinical protocol delivery and reduced the ability of mental health care to improve patient function. Conversely, effective care management and proactive outreach practices helped to maintain regular contact and care engagement with Veterans. VA expects to regain the ground lost in the last 18 months as traditional treatment modalities can be offered and healthful social activities return to normal, with the added benefit that newly developed outreach practices have been implemented thoroughly and have proven very effective.

Housing homeless Veterans or those at risk of homelessness was also a challenge during the pandemic. Only 82% of eligible Veterans were able to find housing using HUD-VASH vouchers in FY 2021. Limited face-to-face contact with landlords and the

resulting reduction in access to available housing, impeded efforts at mediation and housing searches when it was necessary to relocate Veterans to more affordable housing. With the end of eviction moratoriums across the country, VA anticipates another difficult year in meeting the housing needs of Veterans and their families, but local coordinators at VA medical centers are working closely with local partners to maximize the use of resources that are available.

Veterans look to VA for assistance in several ways, including at the end of life when they need help with daily activities and responsibilities. VA programs provide funding in support of personal care for frail elderly and disabled Veterans wishing to remain at home. Personal care services include assistance such as a home health aide, adult day health care, and respite services for caretakers. VA cut in half the amount of time it takes to assess the ability of a Veteran to manage their own finances effectively. Quickly assessing mental competency of vulnerable Veterans ensures that a fiduciary can be put in place rapidly who will look out for the Veteran's best interests.

VA, in collaboration with OMB, has determined that Strategic Objective 2.2 is an area requiring additional focus.

GOAL 3: VETERANS TRUST VA TO BE CONSISTENTLY ACCOUNTABLE AND TRANSPARENT

VA is committed to build lifelong, trusted relationships with its Veterans. This is the foundational basis for delivering relevant and excellent benefits, care, and services to our Veterans that enhance their lives. VA understands that earning Veterans' and employees' trust is the standard we aspire to achieve and is critical to our long-term success. How VA delivers on its promises is as important as the services it delivers. VA is committed to enhancing the cultural integrity of the Department. We continue to earn the trust, and be the provider of choice, for Veterans by holding ourselves accountable, being transparent about how we are performing, and showing how we adhere to our core values with every interaction. Specifically, VA will focus on accountability, transparency, and value to the Veteran.

- **Accountability**: The Secretary set the standard for excellence in his State of VA address, stating Veterans deserve the best, no matter where they are or who serves them. Accountability occurs at all levels and is translated as follows:

  - **Organizational accountability:** VA has clearly stated outcomes and consistently measures and shares the value of its efforts on behalf of Veterans. The organization is committed to using data for process and performance improvement. VA continues to improve accountability, communication, and cross-functional collaboration throughout the organization.

  - **Individual accountability:** Veterans deserve the best and brightest the Nation has to offer. VA only hires and retains individuals who embody our values and are committed to VA's mission. Leaders and staff incorporate VA's values into everything they do and are measured by their adherence to those values for achieving positive outcomes for Veterans.

- **Transparency:** VA publicly and consistently shares critical metrics demonstrating how it improved the Veteran's experience, well-being, independence, and quality of life.

- **Value:** VA will deliver value to the Veteran by achieving excellent outcomes that enhance their lives and provide them what they need.

STRATEGIC OBJECTIVE 3.1: VA IS ALWAYS TRANSPARENT TO ENHANCE VETERANS' CHOICES, TO MAINTAIN TRUST, AND TO BE OPENLY ACCOUNTABLE FOR ITS ACTIONS

VA will continue self-assessments based on how well it delivers positive outcomes to Veterans and how well the Veteran is satisfied. Further, VA will share its performance with Veterans and the Nation to keep ourselves honest about how we are doing.

PERFORMANCE MEASURE

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
BVA 960: Veterans' Overall Confidence/Trust Score with the Board	N/A	41.0%	40.8%	Baseline	TBD	TBD	N/A	Not Started
VBA 912: Average Days to Complete (ADC) Education Program Approvals	N/A	N/A	19.9	33.0	30.0	30.0	N/A	On-track
VBA 913: Average Days to Complete (ADC) Education Compliance Survey Reports	N/A	N/A	28	85	80	80	N/A	On-track

Table 5 – Strategic Objective 3.1 Performance Measures

ACCOMPLISHMENTS

- VA tracks "Veterans' overall confidence/trust score with the Board." This measure tracks the number of Veterans that respond Agree and Strongly Agree to VA's VSignals survey question "I trust the Board of Veterans' Appeals to fulfill our country's commitment to Veterans and their families." FY 2021 was a baseline year for this measure due to updates to the Board's surveys and survey processes. VA uses the data from the surveys and feedback from Veterans as it continues to build a strong customer-centric approach to the appeals process. Non the less, VA ended the year with a score of 42%. In FY 2022, VA will continue to adapt and align priorities to pursue business process improvements and align strategy to meet the changing landscape of appeals with a goal of improving the appeals experience for Veterans and their families. Such priorities include:
    - leveraging technology to better modernize appeals processing in case flow
    - maximizing available hearing resources for Veterans; and
    - adapting strategy in response to court decisions that impact operations.

- VA tracks "average days to complete (ADC) education program approvals." This measure reflects the timeliness of activities to ensure Veterans, Servicemembers, and qualified family members have access to use their GI Bill benefits to achieve their educational objective. VA measures the timeframe it takes to receive State Approving Agency applications and supporting documentation, to the time it takes to review, accept, and process updates. In FY 2021, VA exceeded the target of 30 days, with a year-end result of 19.9 days. VA continues to seek efficiency in the approval process and IT advancements to support automation without risking the loss of quality oversight with all ETI program approval actions.

- VA tracks "average days to complete (ADC) education compliance survey reports" by measuring the timeframe it takes to execute an onsite or remote visit at an ETI, review/audit ETI enrollment practices and certifications, and generate a final report identifying the outcomes of the compliance survey visit in respect to Title 38 requirements. In FY 2021, VA met the target of 80 days, with a year-end result of 28 days. VA continues to seek efficiency in the compliance survey process and IT advancements to support automation without risking the loss of quality oversight at all approved ETIs. This measure reflects the timeliness of actions aimed at ensuring oversight and protection and helping to prevent fraud, waste, or abuse of Veterans GI Bill education benefits.

ASSESSMENT

VA's goal is to remain transparent and accountable by maintaining the trust of the Veterans we serve. In FY 2021, VA measured three goals under the objective: VA is always transparent to enhance Veterans' choices, maintain trust, and be openly accountable for its actions. All three goals finished the year successful or on track. The first is a Board of Veterans' Appeals' metric tracking Veteran response survey questions related to trust in the Board to fulfill our commitment to Veterans and their families. This question is asked on four VSignals surveys (Filing an Appeal; Filing a Notice of Disagreement; Hearing; and Decisions). At the end of FY 2021, the Board's trust score was 40.8%.

Additionally, there were two measurements from the Veterans Benefits Administration, average days to complete education program approvals and average days to complete education compliance surveys. Both measures were on track or successful, measuring 19.9 days and 28 days, respectively. These are examples of VA's commitment to transparency, trustworthiness, and accountability.

VA continues to look for ways to improve its accountability with additional initiatives underway to improve the same. This included VBA launching a national quality scorecard to ensure VBA customers receive an accurate education payment, which was shown (above) to be successful.

VA has determined that Strategic Objective 3.1 is maintaining progress.

STRATEGIC OBJECTIVE 3.2: VA HOLDS PERSONNEL AND EXTERNAL SERVICE PROVIDERS ACCOUNTABLE FOR DELIVERING EXCELLENT CUSTOMER SERVICE AND EXPERIENCES WHILE ELIMINATING FRAUD, WASTE, AND ABUSE

VA will achieve accountability by establishing and ensuring high-quality care and service standards are delivered consistently across our integrated delivery networks. This will ensure VA and community providers are held to the same high standards no matter where they are, and Veterans can count on us to deliver the same quality of care and services no matter what VA facility or community provider they choose. Veterans should be able to walk into any VA facility and receive the same level of care and service.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
OAWP 926: Average time for OAWP investigation cases	N/A	200	148	120	120	120	N/A	Off-track
OIG 585: Percentage of reports—audit, inspection, evaluation, contract review, Comprehensive Healthcare Inspection Program reports issued that identify opportunities for improvement	N/A	90%	91%	70%	70%	70%	N/A	On-track
OIG 586: Number of arrests, indictments, convictions, criminal complaints, pretrial diversions, and administrative sanctions	N/A	2,224	2,049	2,100	2,330	2,330	N/A	Off-track
OIG 587: Monetary benefits ($ in millions) from audits, investigations, contract reviews, inspections, and other evaluations	$3,855	$4,007	$4,868	$4,006	$4,006	$4,006	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
OIG 588: Return on investment (monetary benefits divided by cost of operations in dollars)	$37	$25	$23	$22	$22	$22	N/A	On-track
OIG 590: Percentage of recommendations implemented within one year to improve efficiencies in operations through legislative, regulatory, policy, practice, and procedural changes in VA	83.0%	71.0%	73.0%	85.0%	85.0%	85.0%	N/A	Off-track
OIG 591: Percentage of recommended recoveries achieved from post award contract reviews	N/A	100%	100%	98%	98%	98%	N/A	On-track
OIG 694 Percentage of investigations that result in criminal, civil, or administrative actions	65%	63%	64%	74%	74%	74%	N/A	Off-track
VBA 304: National Accuracy Rate - Percent of disability compensation rating issues processed accurately	94.9%	95.91%	95.3%	96.0%	96.0%	96.0%	N/A	Off-track
VBA 845: Education Claim quality	98.0%	98.0%	97.9%	95.0%	95.0%	96.0%	N/A	On-track
VBA 850: Percentage of follow-up field exams completed within 175 days	75.0%	91.0%	98.9%	75.0%	N/A	N/A	N/A	On-track
VBA 1002: Percentage of Fiduciary Field Examinations completed within 54 days	N/A	N/A	N/A	N/A	70%	70%	N/A	Not Started
VBA 844: National High Level Review Accuracy Rate - percent of higher-level review for disability compensation rating issues processed accurately	96.3%	96.9%	95.3%	96.0%	94.0%	94.0%	N/A	Off-track

Table 6 – Strategic Objective 3.2 Performance Measures

ACCOMPLISHMENTS

- VA's Office of Inspector General (OIG) FY2021 oversight work is detailed in the 337 publications issued, identifying more than $4.8 billion in monetary impact for a return on investment of 25 to one. Further, VA's OIG hotline received and triaged more than 29,000 contacts to help identify wrongdoing and concerns with VA programs and activities. OIG criminal investigators opened 334 investigations and closed 372. Collectively, this work was essential to ongoing efforts to hold wrongdoers accountable, resulting in 982 arrests, indictments, convictions, criminal complaints, pretrial diversions, and administrative sanctions.

- VBA tracks "education claim quality" by payment accuracy. VBA revised its sampling methodology and used a 12-month rolling average to determine payment accuracy. In FY 2021, VBA exceeded the target of 95%, with a year-end result of 97.9%. By exceeding the quality targets, VBA ensured accuracy of payment and eligibility information for Veterans using GI Bill benefits.

- VBA tracks "percentage of follow-up field exams completed within 175 days FYTD." The goal for FY 2021 was to complete 75% of all Fiduciary follow-up field exams within 175 days. In response to the COVID-19 pandemic, VBA deployed VA Video Connect (VVC) to perform video conference interviews instead of a personal visit. In instances where the beneficiary/fiduciary was unwilling or able to use VVC, the field examiner telephonically conducted the interview. This mitigation provided a seamless transition into a virtual environment and kept examination on track through FY 2021. This metric exceeded the target of 75% monthly during FY 2021, with over 98% completed within 175 days. This measure reflects the timeliness of actions aimed at ensuring oversight and protection of funds under management for Veterans that cannot manage their benefits, helping to prevent fraud, waste, or abuse of Veterans' benefits. As a result of VBA's Fiduciary Program modernization, field examination timeliness for initial and follow-up appointments will be tracked under a new, combined measure beginning FY 2022.

- VBA tracks "national high-level review accuracy rate - percent of higher-level review for disability compensation rating issues processed accurately." VBA conducts national quality reviews measuring the accuracy of HLRs of compensation claims completed at VBA's Decision Review Operations Centers (DROCs). Quality reviews serve as an effective and positive action to improve quality levels and provide better decisions to Veterans and their beneficiaries. VBA continues to review the new HLR process and refine appropriate quality goals that represent a challenging and achievable target. In FY 2021, VBA fell less than one percent short of the 96% target, achieving 95.3% accuracy. For FY 2022, VBA adjusted the accuracy target from 96% to 94% due to significant analysis. To meet FY 2022 targets, VBA will provide DROCs additional training to conduct local quality reviews to promote national quality reviews. Additionally, in FY 2022, VBA will conduct virtual in-process

review visits to identify errors, allowing employees to take immediate corrective action on any identified deficiencies and provide on-the-spot mentoring.

- VBA tracks the "national accuracy rate percent of disability compensation rating issues processed accurately." August 2021 rating issue-based quality was 95.34% and fell less than one percent short of the 96% target. In FY 2022, To meet the target, the plan is to review the following with the field stations:
  - provide a year in a total error trends sheet
  - focus on the 26 offices that are below 95.5%, starting with the bottom five offices
  - meet with those offices from the bottom up to review their quality numbers for FY 2021
  - review error trends and all the available QA calls and training provided in FY 2021 and determine if error trends fall in or out of the tools provided, and
  - ask for a wellness plan for FY 2022.

  In accordance with standard statistical practice, VBA reports weighted accuracy results by dividing the total correct claims by the total claims reviewed, yielding unweighted accuracy. With the implementation of statistical weighting, users will no longer derive accuracy using this calculation. Previously, each month of data contributed 1/12 towards the 12-month rolling accuracy value. With weighted results, accuracy is influenced by the volume of claims completed each month. This same logic applies to three-month accuracy metrics. Since accuracy is based on a rolling cumulative, the number fluctuates based on what months roll off with either high accuracy or low accuracy numbers. The individual month of July 2021 was a high-quality month at 96.47%, and June and July had high production numbers.

- The Office of Accountability and Whistleblower Protection (OAWP) tracks the average time it takes to close a case from when OAWP receives a case. Resolving cases timely brings closure to complainants and whistleblowers and ensures that VA can hold its staff accountable. In FY 2021, OAWP was on track to achieve its goal and averaged a case closure time of 148 days for the entire year. During FY 2021, the organization resolved backlogged cases identified in late FY 2019. Several of these backlogged cases were received by OAWP in FY 2017 and FY 2018, thereby skewing the average case closure time. In June 2021, OAWP achieved and exceeded its goal of 120 days by averaging a monthly case closure time of 96 days. OAWP achieved this goal by establishing policy and operating procedures, training staff, and utilizing technology to enhance how it communicated and managed cases.

ASSESSMENT

VA holds personnel and external service providers accountable for delivering excellent customer service and experiences while eliminating fraud, waste, and abuse. In FY 2021, VBA, OIG, and OAWP contributed 12 performance measures to align with the

strategic objective. At the end of the FY, six performance measures were on track, and six were listed as off track.

By sampling VBA's education claims for quality control, VA maintained high standards of accurate education payments and provided the necessary information to Veterans using GI Bill benefits. VBA employed VA Video Connect to meet with Veterans during the COVID-19 era to ensure oversight and protection of funds needed to prevent fraud, waste, or abuse of Veterans' benefits.

While several measures in this category are off-track, VA has determined that Strategic Objective 3.2 maintains progress.

GOAL 4: VA WILL TRANSFORM BUSINESS OPERATIONS BY MODERNIZING SYSTEMS AND FOCUSING RESOURCES MORE EFFICIENTLY TO BE COMPETITIVE AND TO PROVIDE WORLD-CLASS CUSTOMER SERVICE TO VETERANS AND ITS EMPLOYEES

The cross-cutting objectives and strategies in this goal place the organization's behavior into four critical categories that will enable performance in an ever-changing business environment. The goal will also address two critical functions, Human Resources (HR) IT, that must be optimized for the Department to modernize. These strategies will help the Department make choices about its strategic footprint (capital assets and construction); rapidly deploy human capital capabilities as mission requirements evolve; put in place an IT infrastructure that supports Veteran engagement and delivery goals and emphasizes value analytics, so VA makes smart, implementable, and relevant business decisions. VA will either develop or take advantage of shared services to improve hiring, procurement, and IT to drive improved service and delivery.

MANAGEMENT OBJECTIVE 4.1: VA'S INFRASTRUCTURE IMPROVEMENTS, IMPROVED DECISION-MAKING PROTOCOLS, AND STREAMLINED SERVICES ENABLE VA TO ADAPT TO CHANGING BUSINESS ENVIRONMENTS AND VETERAN NEEDS

Organizational agility will ensure VA is able to adapt quickly to market forces, deliver quality customer experiences and service to Veterans, and ensure preparedness and resilience to provide essential services continuously in times of crisis.

Institutionalizing a data-driven governance structure in which leadership makes time-sensitive decisions that are quickly deployed will become a hallmark of VA operations. Evolving Veteran needs and a changing business environment dictate the need for an agile strategic footprint, allowing VA to make quick infrastructure and personnel shifts that best serve Veterans.

VA has a robust research and development capability and innovation to improve services to Veterans and employees. The rapid incorporation of new approaches to how we serve Veterans is critical to the delivery of world-class health care and benefits. The future focus of VA medical research will be on personalized medicine driven by application of clinical genomics to tailor treatment to individual needs.

VA will shape the business operating environment and champion legislative authorities that reduce bureaucracy, shift resources and employees to Veterans' services and most important needs and give VA flexibility to adapt operations to serve Veterans. By working with communities, other Government agencies, Federal, state, Tribal, local, and other public and private institutions to shape smarter and better approaches to service delivery, VA can focus on its strengths and ensure Veterans receive what they need, where they need it.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
HRA/OSP 971: OSP Number of violent crimes committed on VA property (i.e., assault, aggravated assault, sexual assault, attempted murder, homicide (murder), kidnapping, manslaughter, robbery, terroristic threats, threats to U.S. officials and other crimes and workplace violence)	N/A	N/A	6,538	TBD	N/A	N/A	N/A	Not Started
HRA/OSP 969: OSP Percent of VA Police Officers who are Veterans	N/A	N/A	83.2%	90.0%	90.0%	90.0%	N/A	Off-track
HRA/OSP 970: OSP Number of Veteran-specific site page visits to Disaster Assistance.gov	N/A	N/A	11,686	6,000	6,000	6,000	N/A	On-track
HRA/OSP 972: OSP Percent of background investigations adjudicated within 90 days of receipt (enterprise wide).	N/A	N/A	80.7%	75.0%	80.0%	85.0%	N/A	On-track
HRA/OSP: Completion of Police Program Inspections	NA	NA	NA	NA	80%	85%	N/A	Not Started
HRA/OSP: Law Enforcement Training Center VA Police Officer Standardized Training Graduation Rate	NA	NA	NA	NA	85%	85%	N/A	Not Started
OALC 400: Percent of major construction projects accepted by VA in the quarter estimated for completion	60%	93%	75%	75%	75%	75%	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
OALC 974: Acquisition Customer Satisfaction - Pre-solicitation function	N/A	N/A	5.3	4.3	N/A	N/A	N/A	On-track
OALC 825: Percent of major leasing projects accepted by VA in the quarter estimated for completion.	100%	69%	107%	75%	75%	75%	N/A	On-track
OALC 976: Acquisition Customer Satisfaction – Contract Administration	N/A	N/A	4.64	4.2	4.85	4.85	N/A	On-track
OALC 977: VA Category Management – Annual Reduction of unique Tier 0 Contracts	N/A	N/A	25,240	55,459	52,000	49,000	N/A	On-track
OALC 980: VA Achievement Federal Category Management Spend Under Management Targets	N/A	N/A	120.5%	85.0%	$23B or 100% of spend	$24B or 100% of spend	N/A	On-track
OALC 973: Procurement Action Lead Time (PALT)	N/A	N/A	298	120	300	290	N/A	Off-track
OALC TBD: Acquisition Customer Satisfaction - Overall Contracting Activity	N/A	N/A	N/A	N/A	4.70	4.85	N/A	Not Started
OALC 975: Acquisition Customer Satisfaction - Pre-Award Activity	N/A	N/A	4.48	4.20	4.60	4.75	N/A	On-track
OALC 253: Percentage of Facilities customers who are satisfied with services being provided	79%	76%	76%	75%	N/A	N/A	N/A	Not Started
OCLA 799: Responding to Questions for the Record (QFR) sets: Percent of QFR sets	100%	100%	100%	85%	85%	85%	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
submitted on time (within 48 hours of due date)								
OCLA 800: Correspondence/Concurrence Actions: Percent of folder actions completed on time (within 48 hours of due date)	93%	92%	91%	90%	90%	90%	N/A	On-track
OCLA 981: On Time Delivery of Hearing Testimony	N/A	N/A	83%	90%	90%	90%	N/A	Off-track

Table 7- Management Objective 4.1 Performance Measures

ACCOMPLISHMENTS

- VA's Office of Acquisition, Logistics, and Construction (OALC) track "the percent of major construction projects accepted by VA in the quarter estimated for completion." In FY 2021, VA met its target of 75% acceptance in the quarter estimated, with an annual acceptance rate of 75%. This timeliness measure indicates VA is delivering on its promise to provide buildings and structure projects on time. VA delivered 11 of the 12 planned projects for a 92% acceptance rate. OALC's emphasis on locking in pre-construction requirements and focus on cost, scope, and quality management will continue to improve performance in this metric.

- VA tracks "the percent of major leasing projects accepted by VA in the quarter estimated for completion." This measure ensures that VA is driving infrastructure projects and managing appropriated funds effectively. In FY 2021, VA exceeded the target of 75%, with a year-end average of 107%.

- VA tracks "VA Category Management – annual reduction of unique tier 0 contracts." In FY 2021, OALC exceeded the contract reduction target of a 20% reduction with a final year-end decrease of 63.7%. This reduction in contracts directly benefited Veterans through increased patient safety and reduced supply chain risk due to procurement variability. VA accomplished this through spending analysis, identifying vendors with multiple contracts for similar goods and services, or multiple vendors for similar goods and services. Additionally, VA researched existing strategic vehicles that offered better pricing or terms of a contract, which met VA requirements for goods and services and VA's requirement to use Veteran-owned businesses.

- VA tracks "VA Achievement Federal Category Management Spend Under Management (SUM) Targets." In FY 2021, OALC surpassed OMB's SUM target of 80% with a year-end result of 120%. VA established itself as the number one large agency in SUM percentage, with 83.6% of all spending being managed. VA was third overall in percentage behind DLA and OPM (smaller agencies). VA accomplished these metrics through careful data analysis of small business spending, ensuring Veteran-owned businesses received SUM credit as appropriate. VA also worked to identify addressable strategic spend contracts for unmanaged spending. The movement of spending to managed vehicles reduces procurement variability, which improves patient safety. It also provides cost avoidance, allowing VA to repurpose budgeted dollars to other programs to benefit Veterans.

- VA tracks "acquisition customer satisfaction - pre-award activity." The benefit of this measure is to gain visibility of the customer experience of pre-award contract activities. In FY 2021, VA exceeded the annual target of 4.2, with a year-end result of 4.48. The survey is being re-crafted, and VA anticipates an internal survey to be released during the 1st quarter in FY 2022.

- VA tracks "acquisition customer satisfaction – contract administration." In FY 2021, VA met the annual target of 4.2 with a year-end result of 4.64. VA is working across the Program/Project Management community to ensure coverage of the entire acquisition workforce and anticipates a new survey being released in FY 2022.

- VA tracks "Procurement Action Lead Time (PALT)." In FY 2021, OALC did not meet the target of 120 days with a year-end result of 298 days. The calculation method of this measure changed across governments in FY 2019. FY 2020 was a period for Federal departments to get familiar with the new definition and OMB provided results for Federal departments in FY 2021. OALC is assessing the results using the PALT definition to develop the various performance metrics and validate the data. In FY 2022, OALC has adjusted metrics with quarterly goals to reduce the PALT. This measure ensures contracts are processed more efficiently and available to benefit Veterans more quickly.

- VA tracks and reports the number of violent crimes committed on VA property. In FY 2021, this measure was re-baselined due to several factors, including a new electronic recording/tracking system. The total number of reported violent crimes on VA property for FY 21 was 6,538.

- VA reports on the percent of VA Police Officers who are Veterans. This measure assesses the degree to which VA's law enforcement community reflects customers we serve, which better assures relationship building. During FY 2021, the quarterly target for this metric was 90% of VA Police Officers being Veterans. VA Police Officers, who are Veterans, ranged from 84.45% to 83.2% over the fiscal year, with an overall average of 83.8%.

- HRA/OSP reports on the number of Veteran-specific site page visits to DisasterAssistance.gov. This measure assesses the number of visits to the site that serves as an assistance tool for Veterans affected by disasters. It also serves as a self-help/education platform to inform Veterans of benefits they may be eligible to receive before, during, and after a disaster. The target for this measure was 6,000-page visits per quarter. There was a total of 39,493-page visits for the year. More robust page visit activity generally reflects disaster impacts occurring during that quarter.

ASSESSMENT

As the pandemic continues, VA has maintained an agile and robust environment that has allowed the Department to adapt quickly to the various needs of Veterans. While Table seven contains 19 measures, in FY 2021, only 14 were active. Of the active measures, 11 finished the reporting period on track, with three finishing off-track. Success was shown in law enforcement and safety, oversight, and the acquisition process. VA proactively monitors the operational and strategic environment to better adapt to the changing business and Veteran's needs during the COVID-19 pandemic. Procedures and protocols were instituted to provide benefits and services to Veterans, family members, caregivers, and survivors. HRA/OSP reported that the number of Veteran specific site page visits to DisasterAssistance.gov measured at 11,686, nearly doubling its goal of 6,000. This ensures that VA will continue to maintain facilities, properties, and operations where Veterans and their families feel safe and protected. Over 80% of all background investigations were adjudicated within 90-days, which surpassed the goal of 75%.

Satisfaction remains high with services provided to facilities and procurement customers. VA needs to capitalize on data-driven governance, conduct robust research and development, rapidly incorporate new approaches to service delivery, and collaborate with community stakeholders. VA strives to make time-sensitive decisions, quick infrastructure, and personnel changes, and deliver critical benefits and services to Veterans by improving infrastructure, improved decision-making protocols, and streamlined services, which directly benefit Veterans.

VA continues to maintain progress in 4.1 towards adapting to changing business environments and Veterans' needs.

MANAGEMENT OBJECTIVE 4.2: VA WILL MODERNIZE ITS HUMAN CAPITAL MANAGEMENT CAPABILITIES TO EMPOWER AND ENABLE A DIVERSE, FULLY STAFFED, AND HIGHLY SKILLED WORKFORCE THAT CONSISTENTLY DELIVERS WORLD-CLASS SERVICES TO VETERANS AND THEIR FAMILIES

A robust human capital management capability is paramount to VA's ability to recruit and empower its workforce in service to Veterans effectively and efficiently. The needs of our Veterans are ever-growing, putting a greater demand on our workforce. We must optimize their skills and abilities to fulfill our service mission.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
HRA/OSP 86: Executive Fill Rate – Medical Center Directors (MCD)	87.0%	94.9%	95.0%	90.0%	90.0%	90.0%	N/A	On-track
HRA/OSP 278: Percent of VA Employees who are Veterans	32.2%	30.7%	29.4%	N/A	N/A	N/A	N/A	Inactive
HRA/OSP 979: Retention of VA Workforce	68.0%	69.7%	67.5%	70.0%	70.0%	71.0%	N/A	Baselining
HRA/OSP 715: Executive Fill Rate – Non-Medical Center Directors (Non-MCD)	80.8%	73.9%	78.5%	90.0%	85.0%	85.0%	N/A	Off-track
HRA/OSP 964: Time to Hire - Title 5 and Hybrid Title 38	57%	57%	57%	56%	58%	60%	N/A	On-track
HRA/OSP 965: Time to Hire – VHA Title 38	52%	62%	62%	51%	58%	60%	N/A	On-track
HRA/OSP 608: Employee Engagement Index (EEI)	70.3%	72.0%	Interim data N/A	65.0%	N/A	N/A	N/A	Not started

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
HRA/OSP 794: Employee Engagement level	36.0%	39.0%	39.0%	35.5%	37.0%	37.0%	N/A	On-track
HRA/OSP 795: Best Places to Work Index Score	65.0%	70.2%	63.0%	63.0%	63.0%	65.0%	N/A	On-track
OEDCA 819: Employment Discrimination Cases Pending a Final Action	826	737	365	600	600	600	N/A	On-track
OEDCA 823: Decision Disposition Reversal Rate	N/A	1%	0%	10%	10%	10%	N/A	On-track
OEDCA 880: Average Processing Time of All Employment Discrimination Final Actions	N/A	N/A	199	160	160	160	N/A	Off-track
OEDCA 881: Employment Discrimination Cases Closed per Quarter	162	178	277	150	450	450	N/A	On-track
VBA 921: Adherence to the 1:125 Veteran Readiness Counselor (VRC) to Veteran National Ratio Per PL 114	N/A	1:116	1:120	1:125	1:125	1:125	N/A	On-track
OGC 885: Assess adequate legal support for Agency: Average number of case hours per attorney produced each quarter.	N/A	332	330	325	325	325	N/A	On-track
OGC 886: Assess adequate legal support for Agency: Average number of case hours per paralegal produced each quarter.	N/A	259	254	225	250	250	N/A	On-track

Measure Name	Results			Targets				Measure Status
	2019	**2020**	**2021**	**2021**	**2022**	**2023**	**2024 (VHA only)**	
OGC 887: Assess adequate legal support for Agency: Average dollar cost per case hour.	N/A	$165	$161	$250	$250	$250	N/A	On-track

Table 8 - Management Objective 4.2 Performance Measures

ACCOMPLISHMENTS

- VA's Office of Employment Discrimination Complaint Adjudication (OEDCA) tracks "pending inventory," which is the number of cases awaiting a final agency action from OEDCA. VA's goal for FY 2021 was to maintain an inventory of 600 cases or less. VA met this goal with a pending year-end inventory of 365 cases. This represents a 46% decrease in the number of cases awaiting a decision FY. VA surpassed the target goal by utilizing resources to hire additional staff and outsourcing the drafting of less complex cases to the United States Postal Service (USPS) EEO Services. VA plans to maintain an inventory below the target of 600 in FY 2022 by staffing vacant FTE positions and contracting with the USPS on an as-needed basis. VA is seen as being responsive to a workplace free of discriminatory practices when inventory is low, contributing to a rise in VA employees' confidence in the EEO process. When employees feel safe and included in their work environment, they can better serve Veterans.

- VA tracks their "Decision Disposition Accuracy Rate." This monitors the number of final agency decisions issued by OEDCA overturned by the EEOC's Office of Federal Operations (OFO). In FY 2021, VA met the target rate of 10%, with a reversal rate of less than one percent, which means that 99% of OEDCA's decisions are either not appealed or affirmed by OFO on appeal. This achievement demonstrates VA's ability to attract and retain top legal talent in the EEO field and VA's ability to provide attorneys with access to continuous learning opportunities. As VA's decisions are affirmed, employees and Veterans are assured that our legal decisions are accurate, fair, thorough, and uphold anti-discrimination laws.

- VA tracks the "Average Processing Time (APT) for All Decisions", which calculates the average number of days it takes OEDCA to issue a final agency decision on a case. VA's goal for FY 2021 was to maintain an APT of 160 days. Due to OEDCA's aggressive reduction in pending inventory, VA could not reach the target goal and ended FY 2021 with an APT of 199.46 days. However, OEDCA decreased its overall APT by 23.4% during the fiscal year. This decrease indicates that OEDCA's docket management practices are working and moving the APT in the right direction. Additionally, due to OEDCA's 46% decrease in pending inventory, OEDCA will transition resources and shift the focus from older case closures to the closure of

new cases within the target goal. OEDCA Leadership has implemented several successful initiatives, which include:

- creating the Case Review Team to expedite the process of finalizing cases drafted by contractors
- re-conceptualizing how attorneys manage their docket
- introducing new methodologies for case prioritization, and
- running periodic docket management initiatives to clear fewer complex cases and to prevent unnecessary backlog

OEDCA recognizes the importance of closing cases in a timely manner to promote confidence in the VA's commitment to fostering an environment of inclusivity and diversity in the workplace.

- VA tracks "decisions dispatched per month," which calculates the total number of final agency decisions OEDCA closes each month. In FY 2021, VA achieved the target of 150 decisions dispatched each month. On average, OEDCA closes 20 more cases than it receives each month. This trend is an excellent indicator of continuous, long-term inventory reduction and validates that OEDCA's docket management strategies are effective and sustainable. OEDCA's continued commitment to closing complaints and addressing acts of discrimination within VA is another way to empower employees, which leads to better service for our Veterans.

- VA Office of Human Resources and Administration/Operations, Security, and Preparedness (HRA/OSP) reports on the All-Employee Survey (AES) measures. engagement level is the first measure, and in FY 2021, VA exceeded the targeted 35.5%, resulting in 39%. Through coordinated efforts across the enterprise, senior leaders and supervisors have devoted greater attention to intertwining factors affecting employees' attitudes, overall attachment to the organization, its mission, and the level of engagement. These efforts influence employee satisfaction with their job in the organization, and they are more likely to recommend the workplace to others.

- VA measures time to hire from the "hiring need validated date" to the "new hire actual start date." OPM's suggested goal is 80 days for Title 5 hires only. However, VA also applies this goal to Hybrid Title 38 hires. In FY 2021, Time to hire – VA-wide Title 5 and Hybrid Title 38 met the target of 56%, with a year-end result of 57% of USA Staffing hires brought on board within 80 days. The average time to hire for Title 5 and Hybrid Title 38 combined was 82 days.

  Title 38 hires are significantly more complex, and VA strives to hire Title 38 employees in 100 days. "Time to hire – VHA Title 38" exceeded the target of 54%, with a year-end result of 62% of USA Staffing hires brought on board within 100 days, the average being 96 days. Expedited COVID-19 surge hiring practices continued to positively impact hiring times into FY 2021, resulting in a 22% increase in USA Staffing hires over FY 2020 and maintaining an overall 85-day average. By increasing the percentage of hires meeting the time to hire targets and decreasing

hiring times overall, VA maximizes the number of Veterans served while improving the quality of service.

- VA's Corporate Senior Executive Management Office (CSEMO) tracks the "Executive Fill Rate – Medical Center Directors (MCD)" for the Department. In FY 2021, VA exceeded the target of 90% with a year-end result of 95%. Successfully utilizing the national announcement recruitment strategy for MCD positions enabled VISN Directors to review the best-qualified candidates against their vacancy requirements. Timely hiring to these critical leadership positions ensures qualified senior executives oversee VA's medical facilities to provide Veterans the best possible care and service.

- VA also tracks the "Executive Fill Rate – non-Medical Center Directors (non-MCD)." This measure represents all SES leaders in the Department who are conversely not MCDs. In FY 2021, with a year-end result of 79%, the Department did not meet the target of 90%. In addition to the COVID-era emphasis on hiring medical occupations, this shortfall was due to organizational realignment, reorganization, and repurposing positions. These activities delayed the recruiting process for senior executives and ultimately prolonged the hiring timeline.

- Through the VA Executive Resources Board, CSEMO reports the status of all vacancies experiencing no recruitment action over six months. This oversight function encourages timely recruiting actions for allocated senior executive positions. CSEMO meets periodically with organizations to discuss the status of recruitment actions and further prepare necessary recruitment documents. By ensuring VA maintains appropriate executive fill rates, the benefits of active leadership guide the Administrations and Staff Offices more broadly as these leaders engage across the workforce. The result is expected to better align with organizational missions and the long-standing VA priority of improved customer service to our Nation's Veterans.

- VA tracks "Adherence to 1:125 Vocational Rehabilitation Counselor to Veteran ratio per Public Law 114-223." In FY 2021, VBA continued to operate under 1:125, exceeding the target with a ratio of 1:120. The benefit and value of this metric are to ensure that counselors have a reasonable caseload so Veterans can receive timely and attentive services.

ASSESSMENT

VA continues to move forward in modernizing human capital management capabilities to create a world-class workforce that can deliver the highest quality benefits and services to Veterans, recognizing a robust human capital management capability is paramount to VA's success. In FY 2021, VA measured 14 goals, with two inactive under this objective. Of the active goals, eight finished the reporting period on track, with two finishing off-track.

VA remains successful in hiring and staffing retention. VHA medical positions have remained more successful than non-medical positions. While FY 2021 was successful, VA, and in particular VHA, will be faced with a more competitive labor market in FY 2022 and beyond, as well as implementing new workforce related legislation requirements.

For the second year in a row, VA exceeded its engagement level target. This is an excellent level of improvement given the challenges (COVID-19) and transition to broader use of telework and a broader reliance upon technology during this period. Also, evidenced by the end-of-year scores, OEDCA increases VA employee confidence in the EEO process as responsive to achieving a workplace free of discriminatory practices. When employees feel safe and included in their work environment, they can better serve Veterans. OEDCA's continued commitment to closing complaints and addressing acts of discrimination within the VA is another way to empower employees, leading to better service for Veterans.

Finally, VBA's tracking of "adherence to 1:125 VRC to the Veteran ratio" continues to be successful. The benefit, a smaller counselor caseload, providing more timely and attentive Veteran Services. Since this measure remains successful and on track, it will be retired this year.

VA has determined this objective is in need of additional focus.

MANAGEMENT OBJECTIVE 4.3: VA IT MODERNIZATION WILL DELIVER EFFECTIVE SOLUTIONS THAT ENABLE VA TO PROVIDE IMPROVED CUSTOMER SERVICE AND A SECURE, SEAMLESS EXPERIENCE WITHIN AVAILABLE RESOURCES IN A COST-EFFECTIVE MANNER

VA will invest in the replacement and modernization of systems and processes that better respond to the needs of Veterans, business partners, and employees; rapidly changing technology; and pervasive security threats.

In alignment with President's Management Agenda CAP Goal 4, which emphasizes the need to improve customer service across the Government, VA will provide Veterans a coordinated and seamless experience in delivering the highest quality care, benefits, and services. VA will modernize by building a unified enterprise of integrated, interoperable business processes and technical services that put Veterans first.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
OIT 855: Intrusion Detection & Prevention	N/A	99%	99%	100%	N/A	N/A	N/A	Off-track
OIT 856: Exfiltration & Enhanced Defenses	N/A	77%	79%	90%	N/A	N/A	N/A	Off-track
OIT 857: Data Protection	N/A	90%	90%	90%	N/A	N/A	N/A	On-track
OIT 858: Hardware Asset Management	N/A	95%	95%	95%	N/A	N/A	N/A	On-track
OIT 859: Software Asset Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
OIT 860: Authorization Management	N/A	100%	100%	100%	N/A	N/A	N/A	On-track
OIT 861: Mobile Device Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
OIT 862: Privileged Network Access Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
OIT 863: High Value Asset Access Management	N/A	100%	100%	90%	N/A	N/A	N/A	On-track
OIT 864: Automated Access Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track

Table 9 - Management Objective 4.3 Performance Measures

ACCOMPLISHMENTS

- VA's Office of Information and Technology (OIT) tracks VA's progress on Cybersecurity Cross-Agency Priority (Cybersecurity CAP) Goals. These goals are categorized into three main stages:
  - Information Security Continuous Monitoring,
  - Identity, Credential, Access Management, and
  - Advanced Network and Data Protections (ANDP)

  In FY 2021, OIT met eight out of 10 Cybersecurity CAP Goals, improving the previous score of seven by one Cybersecurity CAP Goal. VA improved Cybersecurity CAP Goal A3 Authorization Management, granting authority to operate 100% of VA high and moderate impact systems. The systems required new authorization due to either, a re-organization from regional boundaries or, being deployed due to healthcare requirements. By improving this Cybersecurity CAP Goal, VA is assured that systems vital to continuous operations meet cybersecurity requirements, resulting in more effective protection of Veteran information.

- OIT tracks VA's Cybersecurity CAP Goal A8, "Advanced Network and Data Protections and focuses on Intrusion Detection and Prevention." The goal is that at least four of six intrusion detection and prevention metrics have met an implementation target of at least 90%, and 100% of email traffic is analyzed using Domain-based Message Authentication, Reporting & Conformance (DMARC) email authentication protocols (DHS BOD 18-01). Currently, VA meets all six-intrusion detection and prevention metrics, and 98% of email traffic is analyzed using DMARC email authentication protocols (DHS BOD 18-01). VA continues to work to meet the cybersecurity CAP goal at 100%. VA does not own several domains and those need to be moved under the VA.gov domain. Completing this effort will allow VA to

- enhance its cybersecurity posture and improve the security of Veteran data from potential cyber threat actors.

ASSESSMENT

VA is continuously investing in modernizing systems and procedures to provide secure and top-tier customer service. Eight of the ten measures aligned with this goal ended the fiscal year on track, showing that protecting data, information, hardware, software, and network access is a high priority even in these challenging times.

With ever-changing cyber threats, VA focused on monitoring and securing credentials resulting in more effective protection of Veteran data and personal information. OI&T used DMARC (an email authentication protocol) to detect any potential harm and help keep Veteran data free of any cyber threats. VA strives to meet CAP goal A8, "Advanced Network and Data Protection and focuses on intrusion detection and prevention" at 100%.

In FY 2021, VA leveraged efficiency through technology to respond to these challenging times, ensure safety and security, and maintenance services to Veterans.
VA has determined that Management Objective 4.3 is maintaining progress.

MANAGEMENT OBJECTIVE 4.4: VA WILL INSTITUTIONALIZE DATA SUPPORTED AND PERFORMANCE FOCUSED DECISION MAKING THAT IMPROVES THE QUALITY OF OUTCOMES

To ensure modernization efforts are practical, and resources are focused efficiently, VA will use value analytics to quantify improved outcomes for Veterans that are efficiently and effectively using taxpayer funds and reduce non-monetary costs. Further, VA will consistently analyze ways to improve efforts, make appropriately aligned high-value investments, and continuously assess improvements achieved. Implementing this value management approach and data-driven decision-making will complement VA's approach to value management.

Consistently reliable, accessible, comprehensive, and up-to-date data is critical to achieving VA agility and implementing value management in the Department. This will support data-driven decision making. VA will ensure managers and decision-makers have the right information to drive data-based analytics and management efforts. This will support data-driven decision-making. Further, VA will institutionalize enterprise-wide modeling, value analytics, and forecasting capabilities. This will enable the VA to project future needs and ensure the VA provides excellent care and services to Veterans.

PERFORMANCE MEASURES

Measure Name	Results			Targets				Measure Status
	2019	2020	2021	2021	2022	2023	2024 (VHA only)	
BVA 959: Board's Accuracy Rate: Legacy Appeal	N/A	91%	92%	92%	92%	92%	N/A	On-track

Table 10 - Management Objective 4.4 Performance Measure

ACCOMPLISHMENTS

- VA tracks the "Board's Accuracy Rate: Legacy Appeals." The Board's accuracy rate for FY 2021 was 92.06% which exceeded its goal of 92%. The Board's Quality Review Office (QR) assesses the accuracy of legacy decisions by reviewing randomly selected cases based on a statistically valid sample size to determine the proportion of cases that contain legal errors, which can range from non-substantive to substantive errors. VA closely monitors trends in the types of errors identified by QR and uses the data to pivot and provide enhanced training and guidance in real time to VLJs and attorneys to help ensure that the decisions issued by the Board are sound and free of legal error. In FY 2022, VA will evaluate the quality review process to ensure that it provides valuable feedback about whether a decision is free of errors and legally sound.

ASSESSMENT

The Board was on track to support Strategic Objective 4.4's goal- focus on quality outcomes. The Board's system to review select cases for legal errors is helping build trust that the documents are prepared the first time correctly.

VA, in collaboration with OMB, has determined that Strategic Objective 4.4 is an area of noteworthy progress.

In addition to the performance measures outlined above, VA OIG's major management challenges and items identified in GAO's High-Risk List remain a focus. The OIG and GAO sections that follow outline VA corrective actions and progress relating to outside audit findings.

VA OIG FY 2020 MAJOR MANAGEMENT CHALLENGES

The Inspector General's statements regarding major management challenges and VA's response can be found in the Agency Financial Report: www.va.gov/finance/afr/index.asp.

GAO HIGH RISK LIST PROGRESS SUMMARIES

ISSUE ONE: MANAGING RISKS AND IMPROVING VA HEALTH CARE

Government Accountability Office (GAO) assessment: "Risks to the timeliness, cost-effectiveness, quality, and safety of Veterans' health care, along with other persistent weaknesses identified in recent years, raise serious concerns about VA's management and oversight of its health care system." (GAO 2015 High-Risk Report, p. 28: www.gao.gov/assets/670/668415.pdf)

VA submitted an updated Health Care Action Plan to GAO in May 2021 documenting recent progress made on health care areas of concern and actions taken. VA posted the action plan to the Federal Register in September 2021 to demonstrate transparency and public accountability. The plan includes future planned actions with detailed project milestones, defined goals and objectives, and resource assessments; information on work related to the COVID-19 pandemic; and a response to critiques made in GAO's 2021 High-Risk Series: Dedicated Leadership Needed to Address Limited Progress in Most High-Risk Areas (GAO-21-119SP) published March 2, 2021. VA is currently addressing GAO's feedback from the 2021 high-risk series in future action plan updates. In its March 2021 publication, GAO added national efforts to prevent, respond to, and recover from drug misuse to their HRL. This long-standing, persistent public health crisis not only represents a serious risk to the health of our Veterans but to their families and the communities in which they live. As a direct health care service provider and one of 15 federal response partner agencies, VA is collaborating with the Office of National Drug Control Policy on its strategy for addressing this new HRL designation. GAO emphasizes the importance of our drug misuse efforts and continued collaboration with our federal, state, and tribal partners, as well as with private health care providers.

During the semi-annual HRL Strategic Planning Conference in August 2021, VA convened a panel of six representatives of federal partners from Internal Revenue Service, Department of Homeland Security (DHS), National Oceanic and Atmospheric Administration, and DoD to understand their challenges, approaches, and strategies to addressing GAO's HRL concerns. The Interagency panelists provided invaluable insights, advice, and experience to the 60 conference attendees and which inform the way to faster and more efficient progress as VA addresses our areas of concern.

GAO has determined the key elements needed to make progress in High-Risk areas are the following criteria: leadership commitment, capacity actions, action plan, monitoring and demonstrated progress. Below is a summary of VA's actions:

Leadership Commitment: Leaders in VHA, in partnership with OIT, continue to establish a unified vision for ensuring VA effectively takes action to address the five areas of concern and drives organizational accountability toward resolution of the high-risk listing. In February 2021, the Acting Deputy Under Secretary for Health (DUSH)

was named the senior accountable official for the "Managing Risks and Improving VA Health Care" GAO HRL.

VA has established a management structure that will endure over time and across leadership changes. VA has developed and matured its HRL governance structure to set the strategic direction of its efforts and to oversee the status of progress toward the HRL removal criteria to achieve desired outcomes. At the operational level of the governance structure are the Area of Concern (AOC) workgroups. The workgroups report to the HRL Steering Committee, comprised of Outcome Leads from each AOC. The Steering Committee reports to the HRL Oversight Board for this listing, led by the DUSH and includes the Deputy Chief Information Officer (CIO) and the HRL Outcome Executives for each AOC. The HRL Oversight Board reports to the VA Operations Board, chaired by the VA Deputy Secretary.

VHA's DUSH, Deputy CIO for Quality Performance and Risk (OIT), and the Senior Advisor to the DUSH signed the Oversight Board and Steering Committee Charters in July 2021, formalizing VA's HRL governance structure for this HRL listing.

Capacity Actions: VA dedicated approximately three dozen government staff and allocated over $27 million in contract support for best practices and training staff in portfolio management, risk management, and change management. VA is pleased to achieve a partially met rating for capacity in the most recent High-Risk series and recognizes more work is needed to resolve the areas of concern.

In September 2021, VA and GAO reached a mutual agreement on a framework to evaluate VA's Action Plan through a series of bi-monthly meetings with GAO. This vital step in regular communications with GAO is key to ensuring actions achieve stated outcomes, GAO feedback is considered on time, and VA provides sufficient documentation to demonstrate progress.

Monitoring: VA is refining metrics for measuring progress toward agreed-upon outcomes. VA collects, tracks, and monitors performance metric data quarterly. Metric results are reviewed via a dashboard by the HRL Steering Committee and Oversight Board and shared with GAO each quarter. Additionally, VA collects and tracks documentation that demonstrates the progress of its actions. VA developed the Integrated Operation Platform for recording and storing these documents, artifacts, and other data.

Additionally, VA developed guidance for metrics development that will aid in understanding and communicating business benefits to stakeholders. VA also decoupled specific Modernization Lanes of Effort (LOE) that do not directly contribute towards the outcomes of the HRL areas of concern. VA will continue to monitor the LOE activities to determine if/when an intersection occurs.

Demonstrated Progress The following table provides examples of the progress VA has made regarding issue one.

Areas of Concern	Examples of Demonstrated Progress in FY 2021
Policies and Processes	• VA medical facilities' ability to implement national policy without need for restatement or interpretation will reduce unnecessary administrative burdens and help provide consistent high-quality care at every point of service. • VHA provides direct support to VA medical facilities to reduce unnecessary policy inventory by building on best practices learned through local policy analyses, including electronic health record modernization, leading to an average 24% reduction in local policies in 2020. • From 2015 – 2021, VHA reduced national policy by 300 and overdue national policy by 50% while increasing the quality of policy content and the efficiency of policy development.
Oversight and Accountability	• Established the Office of Oversight, Risk, and Ethics in FY 2020 (formerly the Office of Risk Management). This consolidated several oversight-focused offices and reports directly under the USH to align oversight functions as part of the larger Veterans Health Administration Central Office (VHACO) redesign (announced on January 1, 2020). • Reorganized the VHA Governance Integrated Project Team in FY 2020 as the Executive Sponsorship Coalition and established governing principles that will outlast leadership changes and, with the needs of the field in mind, the IPT continue to work on its major priorities. • Implementation of a comprehensive compliance and integrity program to strengthen accountability, grounded in continuous improvement, system wide VHACO, VISN, Consolidated Patient Account Center (CPAC) and facility leadership, and Compliance and Business Integrity Officers located at all 18 VISNs, 8 CPACs and 140 Medical Centers. • Identified metrics that will provide meaningful indication of progress towards achieving its goals and objectives and fulfilling the ultimate desired outcomes of the effort.
Information Technology Challenges	• The OIT AOC met in November 2020 with all Outcome Leads and stakeholders to establish a Plan of Actions and Milestones to drive further linkage and accountability across the outcomes. • Additionally, the OIT AOC is working to identify goals and objectives for each outcome to better address gaps and is

Areas of Concern	Examples of Demonstrated Progress in FY 2021
	• working with VHA on how best to integrate into HRL governance structures. • The AOC is revisiting current root causes to ensure their applicability and alignment.

Training	• The Training Workgroup (TWG) developed a more comprehensive plan that shows the need for extensive collaboration with subject matter experts in the field, continuous process improvement, oversight and compliance reporting along with change and communications planning for each Training Outcome through FY 2024. To implement this Training Action Plan over the next four years, the TWG is:
	    • Collaborating with the field and program offices to ensure that the training processes and policies developed account for critical field and program office needs.
	    • Establishing a VHA Training Steering Committee to guide the development and implementation of training standards, processes, and systems.
	    • Collaborating with the VA Chief Learning Officer to develop an integrated approach to VA and VHA Training Directive Development, to leverage VHA training standards and improve consistency in training guidance throughout VA and VHA.
	• VHA implemented several draft policies and procedures from the GAO Action Plan during the COVID-19 Pandemic. As a result, VHA rapidly prepared and executed urgently needed, training targeted to specific staff, through a centralized process that ensured standardized application across the enterprise, including timely and accurate updates based on constant changes directed by the Center for Disease Control and Prevention and other governing bodies.

Resource Allocation	• Established collaboration between the Manpower Management Office and Finance at the working group and leadership level to coordinate remediation activities. Continuing to focus on strengthening and expanding the collaboration across program offices, working groups, and areas of concern to demonstrate forward progress in executing the action plan. • Improve and refine the action plan, timelines and metrics based on the continued identification of root causes driving high risks and link actions to outcomes.

Areas of Concern	Examples of Demonstrated Progress in FY 2021
	• Refine training, communication, monitoring, and oversight methodologies to ensure remediation actions are successfully implemented and sustained across the field and program offices. • Identified interim improvement efforts that can assist with remediating risks while long-term systems implementation efforts are ongoing.

ISSUE TWO: IMPROVING AND MODERNIZING FEDERAL DISABILITY PROGRAMS

GAO assessment: "Management attention and efforts are needed across the government to ensure that disability programs provide benefits in a timely manner, reflect current ideas about disability, and achieve positive employment outcomes." (GAO 2015 High-Risk Report, p. 259: www.gao.gov/assets/670/668415.pdf)

GAO has determined the key elements needed to make progress in high-risk areas are the following criteria: leadership commitment, capacity actions, action plan, monitoring, and demonstrated progress. Issue two is addressed in two areas; below is a summary of VA's actions in each area.

Managing Disability Claims Workloads (Appeals)

Leadership Commitment*:* While VA met this criterion in the 2019 report, VA continues to strengthen its overall approach to all GAO HRL areas with VA's "Executive Advisory Board" governance structure to provide strategic guidance on solutions to all open HRL areas. Furthermore, VA continues to fulfill its commitment to collaborate with GAO with an agreed meeting cadence to include working sessions to improve all open HRL areas.

Capacity*:* Through the Periodic Progress Report on Appeals, required by Public Law 115-55, Section 3, VBA & the Board routinely share process plans for legacy and AMA appeals, performance metrics, resource requirements, outreach, and risks. The Board dispatched 99,721 appeals decisions, 7% above the FY 2021 goal, and held a record 23,777 hearings.

Action Plan*:* VA continues to implement plans to reduce the backlog of appeals of claims decisions by addressing issues identified in the root cause analysis. VBA and the Board routinely comply with reporting requirements per PL 115-55, § 3. In FY 2021, VA received additional guidance from GAO to strengthen the living Action Plan; VBA and the Board continue to collaborate on timely updates.

Monitoring*:* VA utilizes AMA production and receipt data to monitor and forecast future workloads, production, and staffing requirements. In FY 2021, the Board published ADC goals for the remaining two AMA dockets (evidence and hearing dockets), completing goals for all five appeals options available for Veterans. VA will monitor and report both goals and actual ADC, improving transparency while driving strategic resource

decisions. Both VBA and the Board regularly communicate with VSOs and Veterans' advocates to gather feedback about the new process. Additionally, VA created three surveys using the VSignals to understand better and assess the Veteran's experience using the new decision review process and continuously improve the Veteran experience.

Demonstrated Progress*:* Since AMA implementation on February 19, 2019, VA has reduced pending legacy appeals from over 400,000 to 125,000, with a 28% reduction in FY 2021 alone. VA plans to resolve most of the legacy inventory in 2023 except for limited remanded appeals. Under the AMA process, in FY 2021, VBA completed 352,402 claims with an ADC of 89 days, 36 days below the 125-day goal. In FY 2021, the Board processed 20,526 AMA decisions. Of those, 13,282 were Direct Docket appeals and averaged 300 days to complete, 65 days below the 365-day goal. In FY 2021, the Board published ADC goals for the remaining two AMA dockets (Evidence and Hearing Dockets).

Updating Disability Benefit Eligibility Criteria (Veteran Affairs Schedule for Rating Disabilities (VASRD))

Leadership Commitment: VA sustains leadership focus on the progress for all VASRD rules, as evidenced in three new leadership roles and dedicated staffing.
Capacity: VBA drafted a new Project Management Plan (PMP), 71% of VASRD updates are implemented, and the VASRD Office is established with a continuous funding mechanism in place to support long-term sustainability.

Capacity: VBA drafted a new Project Management Plan (PMP), 71% of VASRD updates are implemented, and the VASRD Office is established with a continuous funding mechanism in place to support long-term sustainability.

Action Plan: 10 of the 14 regulations for the 15 VASRD Body Systems have been implemented. The Integrated Master Schedule (IMS) and PMP are executed as planned.

Monitoring: VBA's IMS and PMPs ensure consistent operations, including meeting with internal partners, scheduling, publication of rulemakings, and implementation.

Demonstrated Progress: VBA's establishment of the VASRD Office standardizes and assures continuous progress. VBA completed a third Earning Loss Study in 2021, which consisted of conducting multiple rounds of estimations for the 100 most prevalent diagnostic codes throughout the VASRD. VBA has also initiated work to engage in a fourth ELS. In addition, VBA has and will continue to strategically publish companion rules to offset costs and ensure budget neutrality.

ISSUE THREE: VA ACQUISITION MANAGEMENT

GAO assessment: "The Department of Veterans Affairs (VA) Acquisition Management is a high-risk area as VA must demonstrate greater leadership commitment and strategic planning to ensure efficient use of its acquisition funding and staffing resources." (GAO High-Risk Report, p. 210, www.gao.gov/assets/700/697245.pdf)
GAO has determined the key elements needed to make progress in high-risk areas are the following criteria: leadership commitment, capacity actions, action plan, monitoring, and demonstrated progress. Here is a summary of VA's actions in each area for this issue.

Below is a summary of VA's actions in each area for issue three – which outlines the rationale for the expected rating.

Leadership Commitment*: HRL self-assessment – partially met overall; fully Met on AOC one, Outdated Acquisition Regulations and Policies

VA Acquisition Management (AM) has progressed significantly in establishing the Acquisition Management Program (AMP), a strategic roadmap leading to the future state that will modernize and transform VA AM and resolve GAO HRL concerns. VA has also assigned Senior Executives as champions for the initiatives and objectives in the AMP. The Executive Director, Office of Acquisition and Logistics (OAL), has also established an HRL. Program Management Office and appointed HRL Outcome Executives across the seven AOCs to assure an enterprise focus for the HRL AOC along with leading efforts to be removed from the HRL OAL has also established internal and external partnerships to address HRL issues.

Various modernization and transformation efforts drive enterprise governance and improved program management. The VA AM improvements include building an ecosystem where the foundation is the AMP utilizing an Acquisition Knowledge Portal (AKP) and the Acquisition Lifecycle Framework to drive change functionality and enhance the competencies and skills of the VA Acquisition Workforce (AWF). In addition, VA is committed to improving AM from an enterprise perspective -- from the Secretary down.

Capacity*: HRL self-assessment – partially met overall; fully met on AOC one, Outdated Acquisition Regulations and Policies

The Associate Executive Director, Procurement Policy Systems and Oversight, lead the Program Managers for the VA Acquisition Regulation (VAAR) – VA public-facing regulatory guidance and the VA Acquisition Manual (VAAM) – VA internal standardized procedures, guidance, and instructions (PGI) which includes enterprise collaboration along with routine meetings to ensure timely improvements and real-time content management. VA AM improvements include initiatives, objectives, and measures required to ensure that outdated acquisition regulations and policies are updated timely. The updates to the VAAR and VAAM and the Federal Acquisition Regulation are posted on the AKP in a single view to help the VA AWF assess all updates on a single page.

Action Plan*: HRL self-assessment – partially met overall; fully met on AOC one, outdated acquisition regulations and Policies

VA AM submitted a preliminary VA Acquisition Management HRL Action Plan containing root causes, outcomes, goals, and corrective actions to GAO on April 5,

2021, and the Congressionally Mandated Report (CMR) to Congress on July 2, 2021. VA AM is updating the HRL Action Plan for submission with the next CMR in July 2022. In addition, several recent accomplishments are supporting VA AM improvements leading to a rating of "Met" for AOC one. Thirty-two of forty-one VAAR revisions have been forwarded to OMB for action leading to a final rule. The VAAM is now establishing internal VA acquisition standardized PGI for completing various acquisition activities throughout the acquisition lifecycle.

Monitoring*:* HRL self-assessment – partially met

GAO generally does not rate monitoring and demonstrated progress removal criteria until a performance measurement plan is incorporated in the Action Plan and that Action Plan is approved. VA is in the process of developing measures and metrics that align with HRL outcome goals. We continue to develop the HRL metrics aligned to AMP initiatives and objectives, which are also included in the Office of Acquisition and Logistics Operating Plans led by each Associate Executive Director.

Demonstrated Progress: HRL self-assessment – partially met
VA has responded to all 49 recommendations related to VA AM. GAO has officially closed 28, and 21 remain open (all reports issued after Jan 2020).

CROSS-AGENCY COLLABORATION

VA works with many Departments and Bureaus across the Federal Government to achieve its strategic objectives and performance goals, leveraging other organizations' contacts with Veterans to ensure that they receive timely and seamless benefits and services. VA participates in more than 20 Interagency Policy Councils addressing a variety of issues of concern to Veterans and citizens. The following section highlights collaborations between VA and other Federal agencies.

INTERAGENCY GOVERNANCE

VA works closely with interagency partners under the VA-DoD Joint Executive Committee (JEC) as prescribed in 38 USC § 320. The JEC works to remove barriers and challenges which impede collaborative efforts, assert and support mutually beneficial opportunities to improve business practices, ensure high-quality, cost-effective services for VA and DoD beneficiaries, and facilitate opportunities to improve resource utilization.

- Co-chaired by the Deputy Secretary for VA and the Under Secretary of Defense for Personnel and Readiness with membership from VA, DoD, the military services, and DOL, the JEC sets the strategic direction for joint coordination and sharing efforts between VA, DoD, and other Federal partners. The JEC oversees the work of several interagency subcommittees and working groups on strategic priorities in health care collaboration, integrated benefits, and services delivery, enhanced transition, and post-separation experience, modernized shared

business operations, and interoperability and partnership as documented in the VA-DoD Joint Strategic Plan. The JEC reviews progress on critical milestones at quarterly meetings, and the Co-Chairs conduct bi-weekly meetings to resolve issues that arise in between quickly.

- In FY 2021, the JEC developed a new strategic planning cycle model to enable long-term planning, department-level strategy alignment, and flexible strategy execution. The VA-DoD Joint Strategic Plan for FY 2022-2027 shifts from a three-year to a six-year planning cycle, reflecting the collaborative relationship growth and joint strategy maturation. While the Joint Strategic Plan focuses on the big picture long-term strategy, the JEC issues Annual Priority Guidance from the co-chairs to identify current priorities and direct subcommittee leadership to develop action plans in the Joint Operating Plan. The detailed plans in the Joint Operating Plan establish agreed-upon milestones and performance measures for joint work. Critical milestones are derived from this document to feed the Quarterly Priority Milestone Review. The JEC Co-Chairs review progress, issue guidance, and maintain oversight at each quarterly JEC meeting. Each year, the JEC assesses outcomes and reports accomplishments to Congress in its Annual Joint Report. This systematic strategic planning cycle allows VA and DoD to manage shared goals jointly.

- The JEC submits an Annual Joint Report to Congress simultaneously as the President's budget submission each year to report interagency outcomes and achievements supporting JEC priorities from the prior fiscal year.

VETERANS HEALTH ADMINISTRATION

VHA works with several organizations on a wide range of issues related to Veterans' health. For example:

- The Office of Mental Health and Suicide Prevention has major Federal partners in the DoD and Department of Energy. VHA is collaborating with these partners on the Joint Incentive Funded projects entitled "Opioid Management and Safety Initiative (OMSI)" and "Interagency Collaboration for Advancing Predictive Analytics (ICAPA)," which seek to develop predictive models and decision support to reduce the risk of suicide, overdose, and traumatic brain injury-related harm across Service member transitions. The planned outcomes of these collaborations are improvements in current decision support and targeted prevention programs such that Service members are engaged in care and adverse outcomes prevented during the transition between VHA and DoD. DoD may also benefit from early identification of at-risk Service members who may benefit from preventative services. These informatics innovations should improve care quality and proactivity for new Veterans entering VHA care.

  The Office of Mental Health and Suicide Prevention has other major Federal partners in efforts with DoD. VHA worked with DoD to harmonize suicide risk

screening and high risk for suicide care management protocols for implementation in the new Cerner medical record. These informatics innovations should improve care quality and engagement for new Veterans at risk for suicide.

- Geriatrics and Extended Care (GEC) has two major Federal partners for Purchased Long Term Services and Supports: Administration for Community Living (ACL) and the Center for Medicaid and CHIP Services, Disabled and Elderly Health Program Group.

  ACL assists GEC in finding local aging and disability network agencies to operate Veteran-Directed Care programs under contract with local VA medical centers. Veterans benefit by having more home care options and having care delivered by people they know and trust. Federal Medicaid assists GEC in identifying newly adopted quality measures for personal care services. Veterans benefit by having an assurance that VA is purchasing quality home care.

- DoD and VA Office of Community Care has a rich history of cooperating and sharing health care resources with DoD. As of September 2021, VA has 147 resource-sharing agreements with DoD, 82 of which are for clinical care. For FY 2021, VA has purchased over $94.2 million worth of health care from DoD through September 2021.

- In 2012, VA and the Department of Health and Human Service's Indian Health Service (IHS) signed a national reimbursement agreement that called for VA to reimburse IHS for direct care services provided to eligible American Indian/Alaska Native Veterans, which has been renewed through June 2024. 74 IHS sites are currently participating in the reimbursement program according to the national reimbursement agreement and 116 individual agreements with Tribal Health Programs. Since 2012, over 13,000 Veterans have been provided healthcare under this agreement. While the care VA pays for under this agreement is not care provided under section 1703, VA includes it related to an essential segment of Veteran care provided outside of VA facilities.

- VA also partners with IHS. 73 IHS sites are currently participating in the reimbursement program according to the national reimbursement agreement. The agreement was recently amended to cover additional services such as COVID-19 testing and telehealth. VA will continue to provide health care to Veterans closer to their home in a culturally sensitive environment for the best possible outcomes.

- VA is a member of the National Disaster Medical System (NDMS), a federally coordinated healthcare system and partnership of the United States Departments of Health and Human Services, DHS, DoD, and VA. The purpose of the NDMS is to support state, local, Tribal and Territorial authorities following disasters and emergencies by supplementing health and medical systems and response capabilities. NDMS would also support the military and the VA health care

systems in caring for combat casualties, should requirements exceed their capacity.

- The VA Office of Management and the VHA Office of Compliance and Business Integrity partnered with the Centers for Medicare and Medicaid Services to prevent and detect provider fraud and abuse in VHA by developing and implementing a computer matching agreement.

- The Office of Patient-Centered Care and Cultural Transformation (OPCC&CT) has established a significant partnership with the National Center for Complementary and Integrative Health at the National Institutes of Health (NIH). OPCC&CT and NIH are working together on developing strategies for well-being outcome measurement; held jointly sponsored conference in June and further ones anticipated. The goal for OPCC&CT is to establish a rigorous process for measuring Veteran well-being as part of routine VA health care.

- Caregiver Support Program (CSP) works with several organizations on a wide range of issues related to Veterans' health. In collaboration with the Office of Care Management & Social Work (CMSW), CSP and CMSW worked closely with DoD through the VA/DoD JEC to streamline application processes between DoD and VA's caregiver programs, Special Compensation for Assistance with Activities of Daily Living and Program of Comprehensive Assistance for Family Caregivers.

- The Office of Primary Care (OPC) works with the Department of Health and Human Services (HHS.) Public Health Service (PHS.) Commissioned Officer (C.O.) Corp to deploy COs to VA. Health Care Systems (VAHCS) to augment clinical staff under challenging areas to recruit and to the underserved, using the VA MISSION Act Section 401 list. There were 53 COs deployed to VAHCS.

These initiatives seek to improve the Veteran experience and increase access to care by reducing wait times, balancing supply, and demand, and ensure patients are getting the care when and where they need it, even during a pandemic.

VETERANS BENEFITS ADMINISTRATION

VBA continues to leverage public and private partnerships to improve the Veteran experience. VBA collaborates with other Federal and state agencies, VSOs, and educational institutions to improve benefits delivered as demonstrated by the following examples:

- VBA worked closely with DoD, Defense Health Agency (DHA), and the military service departments to develop Integrated Disability Evaluation System (IDES) process improvements intended to optimize IDES and reduce processing times. These efforts resulted in implementing a parallel rating process that reduced the

average proposed rating time by 13.9 days and ensured that 95% of proposed ratings were completed within 20 days.

- VBA also worked closely with DHA and various DoD and VA IT personnel to develop automated document transfer functionality, fully implemented on February 1, 2021. This functionality served to automate the transfer of IDES referral packages from DoD to VA, and IDES examination results from VA to DoD. This automation helped provide more timely and consistent information transfer and eliminated the need for manual processes previously necessary for VA and DoD to exchange IDES documentation.

- VBA partners with the National Archives and Records Administration (NARA) and National Personnel Record Center (NPRC) to obtain service treatment records, military personnel records, and service verification to support the adjudication of Veterans benefit claims. In FY 2021, NARA and NPRC completed 303,113 requests.

- In FY 2021, VBA partnered with the DOL to collaborate on launching the Veteran Rapid Retraining Assistance Program (VRRAP) authorized by the American Rescue Plan Act. This collaboration led to publishing a high-demand occupation list to support students seeking training opportunities and the inclusion of DOL hiring resources within VRRAP material, including student award letters.

- VBA collaborated with Federal housing agencies to develop similar loss mitigation efforts to address financial hardships incurred by homeowners because of the COVID-19 pandemic. Furthermore, VBA and the other housing agencies issued aligned guidance addressing foreclosure and eviction moratoriums and establishing forbearance periods that support mortgage industry implementation and public understanding to assist Veteran borrowers.

- VBA joined the Climate-Related Financial Risk Section 5c Task Force in collaboration with other Federal Agencies to better integrate climate-related financial risk into underwriting standards, loan terms and conditions, and asset management and servicing procedures related to Federal lending policies and programs. VBA's Climate/Financial Risk team continues to meet bi-weekly to identify and work through specific financial risks that pertain to its Loan Guaranty Program.

- In collaboration with other Federal housing agencies, VBA serves as a principal task force member of the newly created Property Appraisal and Valuation Equity Interagency Task Force which is charged to deliver a final action report to address racial inequities in property valuation.

- VBA maintained close collaboration with the Veterans Health Administration's Office of Mental Health and Suicide Prevention to ensure ready access to mental health care support for Veterans who require crisis support or VA health care

enrollment. VBA partnered with DoD to identify VASS-eligible Veterans and target priority contact to those Veterans who had a mental health care appointment during the last year of active duty. VBA also worked closely with other VA offices and programs to develop additional resources, handoffs, and tools to support Veterans during this critical period.

- VBA partnered with DoD to improve enrollment of TSMs and recently separated Veterans in VA health care. VA and DoD collaborated on improving the VA Benefits and Services briefings to increase understanding of the healthcare enrollment process and added a facilitated registration portion to walk the TSMs through the process. Additionally, more healthcare-specific information was added to the resource materials provided during the transition process. As identified in the 2020 Post Separation TAP Assessment Outcome Study Report, the utilization of VA health care increased by approximately 20% from the 2019 results.

- VBA collaborated with the Department of the Treasury's Fiscal Service to expand electronic payment options for VA Insurance customers and encourage customers to switch from paper to electronic payment methods. VA Insurance leverages Treasury's eBilling platform website Pay.gov, for customers to opt-in to receive electronic billing notifications instead of mail and to make Insurance payments using credit card, bank account, or PayPal/Amazon payment services that are faster and more secure.

- Additionally, VBA partnered with Treasury's Fiscal Service to execute an outreach campaign with customers using paper checks to pay their recurring Insurance premiums and to make loan repayments. As a result of the campaign, VBA reported a 6.5% increase in monthly electronic payments and a six percent decrease in the volume of monthly paper check transactions.

- VBA partnered with the Defense Finance Accounting Service, Departments of Homeland Security, Commerce and Public Health Service to establish a Servicemembers' Group Life Insurance ~~SGLI~~ Online Enrollment System (SOES) Configuration Control Board to prioritize and implement improvements to SOES that impact approximately four million Service members.

NATIONAL CEMETERY ADMINISTRATION
NCA works with the following agencies and serves on joint boards to better serve Veterans and the public:

- Army - Defense Personnel Accounting Agency (DPAA) – to identify Unknown Servicemembers from various battles and wars.
- Cemetery Joint Mortuary Affairs Board (CJMAB) – NCA, Arlington National Cemetery (Managed by the Department of the Army), American Battlefield Monument Commission, Casualty Affairs from all branches of service, and DoD's

Military Funeral Honors Group. This group meets and discusses challenges from across the spectrum and shares beneficial practices for all.

- NCA also attends meetings for the Chemically Contaminated Human Remains (C-CHR) Program the Army is developing and looking at ways to bring contaminated remains back to CONUS for final disposition.

NCA has worked with the Department of the Army for the successful transfer to NCA jurisdiction of 11 cemeteries where Army posts were closed through Base Realignment and Closure.

The History Office at Arlington National Cemetery is producing a monograph commemorating the Centennial of the Tomb of the Unknowns in 2021. To enhance their text, NCA asked other Federal agencies and scholars of war and memory to contribute substantial sidebars highlighting the work of their offices or areas of expertise. The NCA History Program participated in a brainstorming session and committed to contributing two sidebars of approximately 1,000 words each, with images. Senior Historian Sara Leach wrote on the memorial practices utilized for unknowns in national cemeteries. Historian Richard Hulver provided an overview of the Vietnam Unknown's identification as Michael J. Blassie and his reburial in Jefferson Barracks National Cemetery in 1998.

The NCA History program collaborated with the Naval History and Heritage Command (NHHC) on two FY 2021 projects. First, NHHC historians reviewed NCA's comments and recommendations for the inaugural monument to the US Navy Seawolves (a fast attack helicopter squadron in Vietnam) proposed for Great Lakes National Cemetery. NHHC's curators also aided NCA historians in evaluating a request to place a Medal of Honor headstone on a 19th-century peacetime sailor's grave in New Jersey.

NCA is working closely with the Library of Congress, Veterans History Project, the National Museum of the American Indian (Smithsonian Institution), the US Army Museum network, and universities to share the stories of Veterans and Servicemembers interred or memorialized in NCA cemeteries. The Veterans Legacy Program (VLP) contributes to NCA's statutory mission to "memorialize Veterans in perpetuity" through educational outreach and programming at VA national cemeteries, soldier's lots, and monument sites. VLP programs engage scholars, teachers, and students of all levels in researching hometown Veterans in their local national cemeteries and then producing that research into instructional materials for Kindergarten through 12 schools and materials for public benefit. VLP products include lesson plans, annotated cemetery maps, documentaries, biographies, and digital archives. The challenge of COVID-19 has created an opportunity for VLP to enhance and increase its digital posture, creating new GIS-based materials (Geographic Information System) to project the national cemetery experience in a digital format for remote experience. VLP leverages its educational outreach programs to increase community engagement with NCA cemeteries and raise awareness of VA memorial benefits.

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Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
1.1	OSDBU 966: Customer Satisfaction with Outreach Events	N/A	4	5	5	N/A	N/A	N/A	Off-track
1.1	VEO 692: Overall Trust in VA among Veterans, their families, caregivers, and survivors	72.00%	79.00%	78.90%	90.00%	3.0% increase	3.0% increase	N/A	Off-track
1.1	VEO 746: Ease to receive VA care or services needed by Veterans, their families, caregivers, and survivors.	71%	76%	72%	90%	3% increase	3% increase	N/A	Off-track
1.2	VBA 469: % of IDES participants who have a proposed rating completed within 20 days	52.00%	69.00%	91.60%	63.00%	63.00%	63.00%	N/A	On-track
1.2	VBA 576: Percent of Disability Compensation Rating Claims processed within 125 days	73.00%	75.00%	65.50%	63.00%	48.00%	52.00%	N/A	On-track
1.2	VBA 786: Percent of eligible Veterans contacted within their first year of separation from military service	N/A	59.00%	58.20%	40.00%	50.00%	50.00%	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
1.2	VBA 852: Average number of days from VR&E's receipt of Veteran's application to notification that the Veteran was found entitled or not entitled to services	42.3	35.96	31.5	45	45	45	N/A	On-track
1.2	VBA 911: Veterans or beneficiaries who are satisfied with the value received from their GI Bill	78%		67%	80%	TBD	TBD	N/A	Off-track
1.2	VBA 917: Customer Satisfaction for VA Portion of the Transition Assistance Program (TAP)	N/A	96.00%	95.70%	95.00%	95.00%	95.00%	N/A	On-track
1.2	VBA 918: Percentage of Pension Rating Claims Processed Within 125 Days	N/A	N/A	88.50%	80.00%	63.00%	70.00%	N/A	On-track
1.2	VEO 752: Effectiveness of the VA care or service needed by Veterans, their families, caregivers, and survivors.	73%	75%	75%	90%	3% increase	3% increase	N/A	Off-track
1.2	VEO 761: Emotional Resonance - Veterans, their families, caregivers, and survivors felt like valued customers when receiving needed care or services from VA.	76%	71%	77%	90%	3% increase	3% increase	N/A	Off-track
2.1	BVA 65: Appeals Adjudicated by the Board	95,089	102,663	99,721	93,600	111,500	130,000	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
2.1	BVA 983: BVA Accuracy Rate: AMA Appeals	N/A	N/A	N/A	N/A	Baselining	TBD	N/A	Not Started
2.1	BVA 985: BVA Average Days to Complete – AMA Hearing Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	730	730	N/A	Not Started
2.1	BVA 986: BVA Average Days to Complete – AMA Evidence Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	550	550	N/A	Not Started
2.1	BVA 712: Appeals Hearings Held by the Board	22,743	15,669	23,777	50,000	36,030	50,000	N/A	Off-track
2.1	BVA 778: Number of Issues Decided	305,708	294,161	270,685	272,376	N/A	N/A	N/A	Off-track
2.1	BVA 780: Appeals Decided per FTE	88	89	84	78	N/A	N/A	N/A	On-track
2.1	BVA 984: Average Days to Complete – AMA Direct Docket from Notice of Disagreement	N/A	N/A	300	365	365	365	N/A	On-track
2.1	NCA 54: Percent of graves in National Cemeteries marked within 60 days of interment	95%	86%	92.4%	95%	95%	95%	N/A	Off-track
2.1	NCA 234: Percent of Veterans served by a burial option within a reasonable distance (75 miles) of their residence	92%	93%	94%	93%	94%	94%	N/A	On-track
2.1	NCA 812: Number of interments in National Cemeteries	134,833	126,844	149,925	135,533	135,770	134,272	N/A	On-track
2.1	NCA 813: Number of additional VetPop Served	37,608	71,307	182,273	182,273	36,657	10,767	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets			2024 (VHA only)	Measure Status
		2019	2020	2021	2021	2022	2023		
2.1	OSDBU 878: Percentage of total procurement awarded to Veteran-Owned Small Businesses	25.70%	22.70%	25.10%	24.30%	17.00%	17.00%	N/A	On-track
2.1	OSDBU 967: New Contract Awards Using SDVOSB or VOSB Set-Aside	N/A	15.30%	17.20%	10.00%	10.00%	10.00%	N/A	On-track
2.1	OSDBU 968: Percentage of Total Procurement Awarded to Service-Disabled Veteran-Owned Small Business (SDVOSB)	24.80%	22.50%	24.80%	15.00%	15.00%	15.00%	N/A	On-track
2.1	VBA 846: Percent of Life Insurance Clients Highly Satisfied with the Program	93.3%	93.0%	96.5%	95.0%	NA	NA	N/A	Not Started
2.1	VBA 218: Average days to complete original education claims	24.1	15.4	22.4	24.0	TBD	TBD	N/A	On-track
2.1	VBA 219: Average days to complete supplemental education claims	13.4	6.9	6.7	12.0	TBD	TBD	N/A	On-track
2.1	VBA 226: Default resolution rate for VA backed Home Loans	87.4%	94.0%	97.8%	80.0%	80.0%	80.0%	N/A	On-track
2.1	VBA 840: Percent of calls answered by the VBA National Call Center within 2 minutes	32%	74%	81.7%	69.0%	75.0%	77.0%	N/A	On-track
2.1	VBA 841: Percent of calls blocked by the VBA National Call Center	0%	0%	0%	0.04%	N/A	N/A	N/A	On-track
2.1	VBA 842: Percentage of interactions correctly managed by the National Call Center	92.30%	92.0%	92.1%	91.0%	91.0%	91.0%	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
2.1	VBA 843: Average days to complete higher-level reviews	37	94	87	125	125	125	N/A	On-track
2.1	VBA 848: National claim-based quality for pension claims (Rating)	93%	94%	95%	93%	93%	93%	N/A	On-track
2.1	VBA 919: VR&E Program Participation Rate	N/A	33,200	32,928	32,220	N/A	N/A	N/A	On-track
2.1	VBA 920: Number of VR&E Positive Outcomes	N/A	13,220	17,874	17,000	14.055	14,055	N/A	On-track
2.1	VHA 635: Percentage of Community Care Claims Processed Timely	52%	71%	97%	90%	90%	92%	93%	On-track
2.1	VHA 681: The percent of patients responding "Usually" or "Always" to getting an appointment for urgent and routine care as soon as needed in the primary and specialty care setting as measured by the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.	81%	83%	81%	83%	84%	85%	86%	Off-track
2.1	VHA 682: Percent of Primary Care Patients who respond Always and Usually regarding their ability to get an appointment for needed care right away	75%	75%	75%	78%	80%	81%	82%	Off-track
2.1	VHA 741: Overall rating of Primary Care Provider	N/A	74%	74%	77%	78%	78%	79%	Off-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
2.1	VHA 742: Percentage of Eligible Veterans who have received Telehealth Services during the fiscal year (FY).	15%	27%	40%	25%	35%	36%	36%	On-track
2.1	VHA 747: Overall Rating of Hospital	67%	70%	71%	71%	73%	73%	74%	On-track
2.1	VHA 750: Overall Rating of Specialty Care Provider	72%	75%	74.60%	71.50%	77%	77%	78%	On-track
2.1	VHA 753: Percentage of Veterans receiving telehealth at home or on mobile device	1.70%	19%	32%	17%	24%	25%	25%	On-track
2.1	VHA 760: Overall Satisfaction with Community Care	N/A	78%	80%	79%	81%	82%	82%	On-track
2.1	VHA 790: Percentage of unique Veterans accessing Whole Health services	4.50%	7.00%	7.80%	7.20%	9.00%	10.00%	10.50%	On-track
2.1	VHA 834: Percent of women assigned to designated women's health primary care providers	81%	82%	85%	81%	86%	87%	87%	On-track
2.2	NCA 956: Percentage of pre-need applications processed within 120 days	N/A	92.50%	91.00%	85.00%	85.00%	90.00%	N/A	On-track
2.2	VBA 647: Average Days to Complete Initial Appointment Exam	68.6	38.2	39.6	76	N/A	N/A	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
2.2	VBA 853: Accuracy of requirements in closing a Veteran's case or declaring the Veteran rehabilitated or discontinued	99.00%	98.00%	96.40%	97.00%	93.00%	93.00%	N/A	Off-track
2.2	VHA 535: Percent of HUD-VASH vouchers allocated that resulted in a homeless Veteran obtaining permanent housing	84%	83%	83%	92%	92%	92%	92%	Off-track
2.2	VHA 606: Percent of participants at risk for homelessness (Veterans and their households) served in SSVF that were prevented from becoming homeless	91%	89%	88%	90%	90%	90%	90%	Off-track
2.2	VHA 756: Percentage of Veterans flagged as high risk for suicide who have received all recommended interventions and follow up	81%	86%	81%	83%	87%	88%	89%	Off-track
2.2	VHA 788: Average improvement in mental health symptoms in the 3-4 months after start of mental health treatment as measured by the mental health component of the Short Form-12	2.56	2.3	2.0	2.3	3.0	3.0	3.0	Off-track
2.2	VHA 804: Percent of long-term service and support obligations and/or expenditures devoted to purchased Personal Care Service for frail elderly and disabled Veterans wishing to remain at home	0.00%	9.00%	11.00%	9.30%	11.00%	12.00%	13.00%	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
2.2	VHA 826: Percent of homeless program positions, including HUD-VASH case managers, filled in the field	86%	86%	89%	90%	N/A	N/A	N/A	Off-track
2.2	VHA 832: Percentage of caregiver applications dispositioned within 90 days	90.00%	96.80%	63.00%	90.00%	92.00%	92.00%	92.00%	Off-track
2.2	VHA 835: Use of interventions for Veterans at-risk for suicide through the use of predictive modeling and enhanced engagement strategies (REACHVET & STORM)	85%	96%	98%	95%	98%	98%	98%	On-track
3.1	BVA 960: Veterans' Overall Confidence/Trust Score with the Board	N/A	41.00%	40.80%	Baseline	TBD	TBD	N/A	Not Started
3.1	VBA 912: Average Days to Complete (ADC) Education Program Approvals	N/A	N/A	19.9	33	30	30	N/A	On-track
3.1	VBA 913: Average Days to Complete (ADC) Education Compliance Survey Reports	N/A	N/A	28	85	80	80	N/A	On-track
3.2	OAWP 926: Average time for OAWP investigation cases	N/A	200	148	120	120	120	N/A	Off-track
3.2	OIG 585: Percentage of reports (audits, inspections, investigations, and other reviews) issued that identified opportunities for improvement and provide recommendations for corrective action	N/A	90%	90%	70%	70%	70%	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
3.2	OIG 586: Number of arrests, indictments, convictions, criminal complaints, pretrial diversions, and administrative sanctions	N/A	2,224	2,224	2,100	2,100	2,100	N/A	On-track
3.2	OIG 587: Monetary benefits ($ in millions) from audits, investigations, contract reviews, inspections, and other evaluations	$3,855	$4,970	$4,868	$4,000	$4006	$4006	N/A	On-track
3.2	OIG 588: Return on investment (monetary benefits divided by cost of operations in dollars)	$37	$23	$23	$22	$22	$22	N/A	On-track
3.2	OIG 590: Percentage of recommendations implemented within one year to improve efficiencies in operations through legislative, regulatory, policy, practice, and procedural changes in VA	83.00%	73.00%	73.00%	85.00%	85%	85%	N/A	Off-track
3.2	OIG 591: Percentage of recommended recoveries achieved from post award contract reviews	N/A	100%	100%	98%	98%	98%	N/A	On-track
3.2	OIG 694: Percentage of full cases that result in criminal, civil, or administrative actions	65%	64%	64%	74%	74%	74%	N/A	Off-track
3.2	VBA 304: National Accuracy Rate - Percent of disability compensation rating issues processed accurately	94.90%	94.90%	95.30%	96.00%	96.00%	96.00%	N/A	Off-track
3.2	VBA 845: Education Claim quality	98.00%	98.00%	97.90%	95.00%	95.00%	96.00%	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
3.2	VBA 850: Percentage of follow-up field exams completed within 175 days	75.00%	91.00%	98.90%	75.00%	N/A	N/A	N/A	On-track
3.2	VBA 844: National High Level Review Accuracy Rate - Percent of higher-level review for disability compensation rating issues processed accurately	96.30%	97.00%	96.00%	96.00%	94.00%	94.00%	N/A	On-track
4.1	HRA/OSP 969: OSP Percent of VA Police Officers who are Veterans	N/A	N/A	83.20%	90.00%	90.00%	90.00%	N/A	Off-track
4.1	HRA/OSP 970: OSP Number of Veteran-specific site page visits to DisasterAssistance.gov	N/A	N/A	11,686	6,000	6,000	6,000	N/A	On-track
4.1	HRA/OSP 972: OSP Percent of background investigations adjudicated within 90 days of receipt (enterprise wide).	N/A	N/A	80.70%	75.00%	80.00%	85.00%	N/A	On-track
4.1	HRA/OSP: Completion of Police Program Inspections	NA	NA	NA	NA	80%	85%	N/A	Not started
4.1	HRA/OSP: Law Enforcement Training Center (LETC) VA Police Officer Standardized Training (POST) Graduation Rate	NA	NA	NA	NA	85%	85%	N/A	Not started
4.1	OALC 400: Percent of major construction projects accepted by VA in the quarter estimated for completion	60%	93%	75%	85%	85%	90%	N/A	On-track
4.1	OALC 974: Acquisition Customer Satisfaction - Pre-solicitation function	N/A	N/A	5.3	4.3	N/A	N/A	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
4.1	OALC 825: Percent of major leasing projects accepted by VA in the quarter estimated for completion.	100%	69%	125%	75%	75%	75%	N/A	On-track
4.1	OALC 976: Acquisition Customer Satisfaction – Contract Administration	N/A	N/A	4.64	4.2	4.85	4.85	N/A	On-track
4.1	OALC 977: VA Category Management – Annual Reduction of unique Tier 0 Contracts	N/A	N/A	63.70%	55,459	52,000	49,000	N/A	On-track
4.1	OALC 980: VA Achievement Federal Category Management Spend Under Management Targets	N/A	N/A	120.50%	85.00%	$23.00B or 100% of spend	$24.00B or 100% of spend	N/A	On-track
4.1	OALC 973: Procurement Action Lead Time (PALT)	N/A	N/A	298	120	300	290	N/A	Off-track
4.1	OALC TBD: Acquisition Customer Satisfaction - Overall Contracting Activity	N/A	N/A			4.7	4.85	N/A	Not started
4.1	OALC 975: Acquisition Customer Satisfaction - Pre-Award Activity	N/A	N/A	4.48	4.2	4.6	4.75	N/A	On-track
4.1	OALC 253: Percentage of Facilities customers who are satisfied with services being provided	79%	76%	76%	75%	N/A	N/A	N/A	Not started
4.1	OCLA 799: Responding to Questions for the Record (QFR) sets: Percent of QFR sets submitted on time (within 48 hours of due date)	100%	100%	100%	85%	85%	85%	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
4.1	OCLA 800: Correspondence/Concurrence Actions: Percent of folder actions completed on time (within 48 hours of due date)	93%	92%	91%	90%	90%	90%	N/A	On-track
4.1	OCLA 981: On Time Delivery of Hearing Testimony	N/A	N/A	83%	90%	90%	90%	N/A	Off-track
4.2	HRA/OSP 86: Executive Fill Rate – Medical Center Directors (MCD)	87.00%	94.90%	90.00%	90.00%	90.00%	90.00%	N/A	On-track
4.2	HRA/OSP 278: Percent of VA Employees who are Veterans	32.20%	30.70%	29.70%	N/A	N/A	N/A	N/A	Not started
4.2	HRA/OSP 979: Retention of VA Workforce	68.00%	69.70%	68.90%	70.00%	70.00%	71.00%	N/A	Not started
4.2	HRA/OSP 715: Executive Fill Rate – Non-Medical Center Directors (Non-MCD)	80.80%	73.90%	78.40%	90.00%	85.00%	85.00%	N/A	Off-track
4.2	HRA/OSP 964: Time to Hire - Title 5 and Hybrid Title 38	57%	57%	56%	56%	58%	60%	N/A	On-track
4.2	HRA/OSP 965: Time to Hire – VHA Title 38	52%	62%	54%	54%	58%	60%	N/A	On-track
4.2	HRA/OSP 608: Employee Engagement Index (EEI)	70.30%	72.00%	data not available	65.00%	N/A	N/A	N/A	Not started
4.2	HRA/OSP 794: Engagement level	36.00%	39.00%	Not available	35.50%	35.50%	36.00%	N/A	On-track
4.2	HRA/OSP 795: Best Places to Work Index Score	65.00%	70.20%	63.00%	63.00%	63.00%	65.00%	N/A	On-track
4.2	OEDCA 819: Employment Discrimination Cases Pending a Final Action	826	737	365	600	600	600	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets			2024 (VHA only)	Measure Status
		2019	2020	2021	2021	2022	2023		
4.2	OEDCA 823: Employment Discrimination Decision Accuracy Rate	N/A	1%	0%	10%	10%	10%	N/A	On-track
4.2	OEDCA 880: Average Processing Time of All Employment Discrimination Final Actions	N/A	N/A	199	160	160	160	N/A	Off-track
4.2	OEDCA 881: Employment Discrimination Cases Closed per Quarter	162	178	277	150	450	450	N/A	On-track
4.2	VBA 921: Adherence to the 1:125 Vocational Rehabilitation Counselor (VRC) to Veteran National Ratio Per PL 114	N/A	1:125	1:120	1:125	1:125	1:125	N/A	On-track
4.3	OGC 885: Assess adequate legal support for Agency: Average number of case hours per attorney produced each quarter.	N/A	332	330	325	325	325	N/A	On-track
4.3	OGC 886: Assess adequate legal support for Agency: Average number of case hours per paralegal produced each quarter.	N/A	259	254	225	250	250	N/A	On-track
4.3	OGC 887: Assess adequate legal support for Agency: Average dollar cost per case hour.	N/A	$165	$161	$250	$250	$250	N/A	On-track
4.3	OIT 855: Intrusion Detection & Prevention	N/A	99%	99%	100%	N/A	N/A	N/A	Off-track
4.3	OIT 856: Exfiltration & Enhanced Defenses	N/A	77%	77%	90%	N/A	N/A	N/A	Off-track
4.3	OIT 857: Data Protection		90%	90%	90%	N/A	N/A	N/A	On-track

Strat. Alignment	Measure Name	Results			Targets				Measure Status
		2019	2020	2021	2021	2022	2023	2024 (VHA only)	
4.3	OIT 858: Hardware Asset Management	N/A	95%	95%	95%	N/A	N/A	N/A	On-track
4.3	OIT 859: Software Asset Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
4.3	OIT 860: Authorization Management	N/A	100%	98%	100%	N/A	N/A	N/A	Off-track
4.3	OIT 861: Mobile Device Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
4.3	OIT 862: Privileged Network Access Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
4.3	OIT 863: High Value Asset Access Management	N/A	100%	100%	90%	N/A	N/A	N/A	On-track
4.3	OIT 864: Automated Access Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
4.3	OIT 864: Automated Access Management	N/A	100%	100%	95%	N/A	N/A	N/A	On-track
4.4	BVA 959: Board's Accuracy Rate: Legacy Appeal	N/A	91%	92%	92%	92%	92%	N/A	On-track

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VBA	Average days to complete original education claims	24.45	24.1	15.4	22.4	24	TBD	TBD	N/A
VBA	Average days to complete supplemental education claims	12.3	13.4	6.9	6.7	12	TBD	TBD	N/A
VBA	Default resolution rate for VA backed Home Loans	87.6%	87.4%	94%	97.8%	80%	80%	80%	N/A
VBA	National Accuracy Rate - Percent of disability compensation rating issues processed accurately	N/A	94.9%	94.9%	95.3%	96%	96%	96%	N/A
VBA	Percent of Disability Compensation Rating Claims processed within 125 days	75%	73%	75%	65.5%	63%	48%	52%	N/A
VBA	Average Days to Complete Initial Appointment Exam	N/A	68.6	38.2	39.6	76	N/A	N/A	N/A
VBA	Percent of eligible Veterans contacted within their first year of separation from military service	N/A	N/A	59%	58.2%	40%	50%	50%	N/A
VBA	Percent of calls answered by the VBA National Call Center within 2 minutes	N/A	32%	74%	81.7%	69%	75%	77%	N/A
VBA	Percent of calls blocked by the VBA National Call Center	0%	0%	0%	0%	0.04%	N/A	N/A	N/A
VBA	Percentage of interactions correctly managed by the National Call Center	N/A	92.34%	92%	92.1%	91%	91%	91%	N/A
VBA	Average days to complete higher-level reviews of AMA Claims	N/A	37	94	87	125	125	125	N/A
VBA	National High Level Review Accuracy Rate - Percent of higher level review for disability compensation rating issues processed accurately	N/A	96.3%	97%	96%	96%	94%	94%	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VBA	Education Claim quality	N/A	98%	98%	97.9%	95%	95%	96%	N/A
VBA	Percent of Life Insurance Clients Highly Satisfied with the Program	92.80%	93.30%	93%	96.5%	95%	N/A	N/A	N/A
VBA	National claim based quality for pension claims (Rating)	N/A	93%	94%	95%	93%	93%	93%	N/A
VBA	Percentage of follow-up field exams completed within 175 days	N/A	75%	91%	98.9%	95%	N/A	N/A	N/A
VBA	Average number of days from VR&E's receipt of Veteran's application to notification that the Veteran was found entitled or not entitled to services	N/A	42.3	35.96	31.5	45	45	45	N/A
VBA	Accuracy of requirements in closing a Veteran's case or declaring the Veteran rehabilitated or discontinued	98.20%	99%	98%	96.3%	97%	93%	93%	N/A
VBA	Veterans or beneficiaries who are satisfied with the value received from their GI Bill	N/A	78%	N/A	67.00%	80%	TBD	TBD	N/A
VBA	Average Days to Complete (ADC) Education Program Approvals	N/A	N/A	N/A	19.9	30	30	30	N/A
VBA	Average Days to Complete (ADC) Education Compliance Survey Reports	N/A	N/A	N/A	28	80	80	80	N/A
VBA	Customer Satisfaction for VA Portion of the Transition Assistance Program (TAP)	N/A		96%	95.7%	95%	95%	95%	N/A
VBA	Percentage of Pension Rating Claims Processed Within 125 Days	N/A	N/A	N/A	88.5%	80%	63%	70%	N/A
VBA	VR&E Program Participation Rate	N/A	N/A	33,200	32,928	32,220	N/A	N/A	N/A
VBA	Number of VR&E Positive Outcomes	N/A	N/A	13,220	17,874.0	17,000	TBD	TBD	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VBA	% of Integrated Disability Evaluation System (IDES) participants who have a proposed rating completed within 20 days	N/A	52.00%	69.00%	91.60%	63.00%	63.00%	63.00%	N/A
VBA	Adherence to the 1:125 Vocational Rehabilitation Counselor (VRC) to Veteran National Ratio Per PL 114	N/A	N/A	1:125	1:120	1:125	1:125	1:125	N/A
VHA	Percent of HUD-VASH vouchers allocated that resulted in a homeless Veteran obtaining permanent housing	N/A	84%	83%	83%	92%	92%	92%	92%
VHA	Percent of participants at risk for homelessness (Veterans and their households) served in SSVF that were prevented from becoming homeless	N/A	91%	89%	88%	90%	90%	90%	90%
VHA	Percentage of Community Care Claims Processed Timely	N/A	52%	71%	97%	90%	90%	92%	93%
VHA	The percent of patients responding "Usually" or "Always" to getting an appointment for urgent and routine care as soon as needed in the primary and specialty care setting as measured by the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.	N/A	81%	83%	81%	83%	84%	85%	86%
VHA	Percent of Primary Care Patients who respond Always and Usually regarding their ability to get an appointment for needed care right away	77%	75%	75%	75%	78%	80%	81%	82%

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VHA	Overall rating of Primary Care Provider	N/A	N/A	74%	74%	77%	78%	78%	79%
VHA	Percentage of Eligible Veterans who have received Telehealth Services during the fiscal year (FY).	N/A	15%	27%	40%	25%	35%	36%	36%
VHA	Overall Rating of Hospital	71%	67%	70%	71%	71%	73%	73%	74%
VHA	Overall Rating of Specialty Care Provider	N/A	72%	75%	74.6%	71.5%	77%	77%	78%
VHA	Percentage of Veterans receiving telehealth at home or on mobile device	N/A	1.70%	19%	32%	17%	24%	25%	25%
VHA	Percentage of Veterans flagged as high risk for suicide who have received all recommended interventions and follow up	N/A	81%	86%	81%	83%	87%	88%	89%
VHA	Overall Satisfaction with Community Care	N/A	N/A	78%	80%	79%	81%	82%	82%
VHA	Average improvement in mental health symptoms in the 3-4 months after start of mental health treatment as measured by the mental health component of the Short Form-12	N/A	2.56	2.3	2	2.3	3	3	3
VHA	Percentage of unique Veterans accessing Whole Health services	N/A	1,715	7%	7.8%	7.2%	9%	10%	10.5%
VHA	Percent of long-term service and support obligations and/or expenditures devoted to purchased Personal Care Service for frail elderly and disabled Veterans wishing to remain at home	N/A	0%	9%	11%	9.3%	11%	12%	13%

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VHA	Percent of homeless program positions, including HUD-VASH case managers, filled in the field	N/A	86%	86%	89%	90%	N/A	N/A	N/A
VHA	Percentage of caregiver applications dispositioned within 90 days	N/A	90%	96.88%	63%	90%	92%	92%	92%
VHA	Percent of women assigned to designated women's health primary care providers	N/A	80.60%	82%	85%	81%	86%	87%	87%
VHA	Use of interventions for Veterans at-risk for suicide through the use of predictive modeling and enhanced engagement strategies (REACHVET & STORM)	98%	85%	96%	98%	95%	98%	98%	98%
VHA	Increase in total Permanent housing placement	N/A	N/A	N/A	N/A	N/A	5%	10%	10%
NCA	Percent of graves in National Cemeteries marked within 60 days of interment	97%	95%	86%	92.4%	95%	95%	95%	N/A
NCA	Percent of Veterans served by a burial option within a reasonable distance (75 miles) of their residence	94%	92.3%	93%	94%	93%	93.99%	94.5%	N/A
NCA	Number of interments in National Cemeteries	135,306	134,833	126,844	149,925	135,533	135,770	134,272	N/A
NCA	Number of additional VetPop Served	27,711	37,608	71,307	182,273	182,273	36,657	10,767	N/A
NCA	Percentage of pre-need applications processed within 120 days	N/A	N/A	92.5%	91%	85%	85%	90%	N/A
BVA	Appeals Adjudicated by the Board	85,288	95,089	102,663	99,721	62,426	111,500	130,000	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
BVA	Appeals Hearings Held by the Board	N/A	22,743	15,669	23,777	26,000	50,000	50,000	N/A
BVA	Number of Issues Decided	N/A	305,708	294,161	270,685	181,660	N/A	N/A	N/A
BVA	Appeals Decided per FTE	N/A	88	89	84	78	N/A	N/A	N/A
BVA	Board's Accuracy Rate: Legacy Appeal	N/A	N/A	91%	92%	92%	92%	92%	N/A
BVA	Veterans' Overall Confidence/Trust Score with the Board	N/A	N/A	41%	40.8%	Baseline	TBD	TBD	N/A
BVA	BVA Accuracy Rate: AMA Appeals	N/A	N/A	N/A	N/A	N/A	TBD	TBD	N/A
BVA	Average Days to Complete – AMA Direct Docket from Notice of Disagreement	N/A	N/A	N/A	300	365	365	365	N/A
BVA	BVA Average Days to Complete – AMA Hearing Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	N/A	TBD	TBD	N/A
BVA	BVA Average Days to Complete – AMA Evidence Docket from Notice of Disagreement	N/A	N/A	N/A	N/A	N/A	TBD	TBD	N/A
OIT	Intrusion Detection & Prevention	N/A	N/A	99%	99%	100%	N/A	N/A	N/A
OIT	Exfiltration & Enhanced Defenses	N/A	N/A	77%	77%	90%	N/A	N/A	N/A
OIT	Data Protection	N/A	N/A	90%	90%	90%	N/A	N/A	N/A
OIT	Hardware Asset Management	N/A	N/A	95%	95%	95%	N/A	N/A	N/A
OIT	Software Asset Management	N/A	N/A	100%	100%	95%	N/A	N/A	N/A
OIT	Authorization Management	N/A	N/A	100%	98%	100%	N/A	N/A	N/A
OIT	Mobile Device Management	N/A	N/A	100%	100%	95%	N/A	N/A	N/A
OIT	Privileged Network Access Management	N/A	N/A	100%	100%	95%	N/A	N/A	N/A
OIT	High Value Asset Access Management	N/A	N/A	100%	100%	90%	N/A	N/A	N/A
OIT	Automated Access Management	N/A	N/A	100%	100%	95%	N/A	N/A	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
HRA/OSP	Executive Fill Rate – Medical Center Directors (MCD)	82.9%%	87%	95.70%	90%	90%	90%	90%	N/A
HRA/OSP	Percent of VA Employees who are Veterans	32.50%	32.24%%	30.7%%	29.7%	N/A	N/A	N/A	N/A
HRA/OSP	Employee Engagement Index (EEI)	69.30%	70.30%	72%	Interim data not available	65%	N/A	N/A	N/A
HRA/OSP	Executive Fill Rate – Non-Medical Center Directors (Non-MCD)	79.80%	80.80%	73.90%	78.4%	85%	85%	85%	N/A
HRA/OSP	Engagement level	34.80%	36%	37.30%	39%	35.50%	35.50%	36%	N/A
HRA/OSP	Time to Hire - Title 5 and Hybrid Title 38	N/A	57%	61%	56%	56%	58%	60%	N/A
HRA/OSP	Time to Hire – VHA Title 38	N/A	52%	64%	62%	54%	58%	60%	N/A
HRA/OSP	OSP Percent of VA Police Officers who are Veterans	N/A	N/A	N/A	83.2%	90%	90%	90%	N/A
HRA/OSP	OSP Number of Veteran-specific site page visits to DisasterAssistance.gov	N/A	N/A	N/A	11,686	6,000	6,000	6,000	N/A
HRA/OSP	OSP Number of violent crimes committed on VA property (i.e., Active Shooter, Aggravated Assault, Homicide, Robbery and Sexual Assault). OCOP	N/A	N/A	0	6,538	360	N/A	N/A	N/A
HRA/OSP	Retention of VA Workforce	68.10%	68%	69.70%	67.9%	70%	70%	71%	N/A
HRA/OSP	Percent of background investigations adjudicated within 90 days of receipt (enterprise wide).	N/A	N/A	N/A	80.7%	75.0%	80.0%	85.0%	N/A
HRA/OSP	Best Places to Work Index Score	N/A	65.0%	70.2%	63.0%	63.0%	63.0%	65.0%	N/A
OALC	Procurement Action Lead Time (PALT)	N/A	N/A	N/A	298	120	300	290	N/A
OALC	Acquisition Customer Satisfaction - Pre-solicitation function	N/A	N/A	N/A	5.3	4.3	N/A	N/A	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
OALC	Acquisition Customer Satisfaction - Pre-Award Activity	N/A	N/A	N/A	4.48	4.2	4.6	4.75	N/A
OALC	Acquisition Customer Satisfaction – Contract Administration	N/A	N/A	N/A	4.64	4.75	4.85	4.85	N/A
OALC	VA Achievement Federal Category Management Spend Under Management Targets	N/A	N/A	N/A	120.5%	80%	$23.00B or 100% of spend	$24.00B or 100% of spend	N/A
OALC	Percent of major construction projects accepted by VA in the quarter estimated for completion	N/A	60%	93%	75%	85%	85%	90%	N/A
OALC	Percent of major leasing projects accepted by VA in the quarter estimated for completion.	N/A	100%	69%	125%	75%	75%	75%	N/A
OALC	Percentage of Facilities customers who are satisfied with services being provided	N/A	79%	76%	76%	75%	N/A	N/A	N/A
OAWP	Average time for OAWP investigation cases	N/A	N/A	200	148	120	120	120	N/A
OCLA	Responding to Questions for the Record (QFR) sets: Percent of QFR sets submitted on time (within 48 hours of due date)	N/A	100%	100%	100%	85%	85%	85%	N/A
OCLA	Correspondence/Concurrence Actions: Percent of folder actions completed on time (within 48 hours of due date)	N/A	93%	92%	91%	90%	90%	90%	N/A
OCLA	On Time Delivery of Hearing Testimony	N/A	N/A	N/A	83%	90%	90%	90%	N/A
OEDCA	Employment Discrimination Cases Pending a Final Action	N/A	826	737	365	600	600	600	N/A
OEDCA	Employment Discrimination Decision Accuracy Rate	N/A	N/A	1%	0%	10%	10%	10%	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
OEDCA	Average Processing Time of All Employment Discrimination Final Actions	N/A	N/A	N/A	199	160	160	160	N/A
OEDCA	Employment Discrimination Cases Closed per Quarter	N/A	162	178	277	150	450	450	N/A
OGC	Assess adequate legal support for Agency: Average number of case hours per attorney produced each quarter.	N/A	N/A	332	330	325	325	325	N/A
OGC	Assess adequate legal support for Agency: Average number of case hours per paralegal produced each quarter.	N/A	N/A	259	254	225	250	250	N/A
OGC	Assess adequate legal support for Agency: Average dollar cost per case hour.	N/A	N/A	$165	$161	$250	$250	$250	N/A
OIG	Monetary benefits ($ in millions) from audits, investigations, contract reviews, inspections, and other evaluations	N/A	$3,855	$4,007	$4,006	$4,010	$2,053.50	$2,508.00	N/A
OIG	Percentage of full cases that result in criminal, civil, or administrative actions	74%	65%	64%	64%	74%	30%	30%	N/A
OIG	Percentage of reports (audits, inspections, investigations, and other reviews) issued that identified opportunities for improvement and provide recommendations for corrective action	N/A	N/A	90%	90%	70%	90%	90%	N/A
OIG	Number of arrests, indictments, convictions, criminal complaints, pretrial diversions, and administrative sanctions	N/A	N/A	2,224	2,224	2,100	1,165	1,165	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
OIG	Return on investment (monetary benefits divided by cost of operations in dollars)	N/A	$37	$23	$23	$22	$22	$22	N/A
OIG	Percentage of recommendations implemented within one year to improve efficiencies in operations through legislative, regulatory, policy, practice, and procedural changes in VA	N/A	83.00%	73.00%	73.00%	85.00%	42.50%	42.50%	N/A
OIG	Percentage of recommended recoveries achieved from post award contract reviews	N/A	N/A	100%	100%	98%	49%	49%	N/A
OPIA	Increase the number of Faith-based and Community leaders trained on VA services, programs and benefits which are available to Veterans	N/A	N/A	N/A	N/A	N/A	N/A	10%/year	N/A
OPIA	Increase traffic to VA's social media platforms	N/A	N/A	N/A	N/A	N/A	N/A	TBD	N/A
OPIA	Increase the number of Veterans attending VA-sponsored Claims Clinics in Indian Country	N/A	N/A	N/A	N/A	N/A	N/A	6%/year	N/A
VEO	Overall Trust in VA among Veterans, their families, caregivers and survivors	N/A	72%	79%	78.9%	90%	3% increase	3% increase	N/A
VEO	Ease to receive VA care or services needed by Veterans, their families, caregivers and survivors.	N/A	71%	76%	72%	90%	3% increase	3% increase	N/A
VEO	Effectiveness of the VA care or service needed by Veterans, their families, caregivers and survivors.	N/A	73%	75%	75%	90%	3% increase	3% increase	N/A

Organization	Measure Name	2018 Result	2019 Result	2020 Result	2021 Result	2021 Target	2022 Target	2023 Target	2024 Target (VHA only)
VEO	Emotional Resonance - Veterans, their families, caregivers and survivors felt like valued customers when receiving needed care or services from VA.	N/A	76%	71%	77%	90%	3% increase	3% increase	N/A
OSDBU	Percentage of total procurement awarded to Veteran-Owned Small Businesses	N/A	25.7%	22.7%	25.1%	24.3%	17%	17%	N/A
OSDBU	Customer Satisfaction with Outreach Events	N/A	N/A	4	5	5	N/A	N/A	N/A
OSDBU	New Contract Awards Using SDVOSB or VOSB Set-Aside	N/A	N/A	15.3%	17.2%	10%	10%	10%	N/A
OSDBU	Percentage of Total Procurement Awarded to Service-Disabled Veteran-Owned Small Business (SDVOSB)	N/A	24.8%	22.5%	24.8%	15%	15%	15%	N/A

ADC - Average days to complete
AES - All Employee Survey
AKP - Acquisition Knowledge Portal
AM - Acquisition Management
AMA - Veterans Appeals Improvement and Modernization Act of 2017
AMP - Acquisition Management Program
AOC - Area of Concern
APG - Agency Priority Goals
APT - Average Processing Time
AWF - VA Acquisition Workforce
CAP - Cross Agency Priority
C-CHR - Chemically Contaminated Human Remains
CJMAB - Cemetery Joint Mortuary Affairs Board
CL - Community Living
CMR - Congressionally Mandated Report
CMSW- Office of Care Management & Social Work
CPAC - Consolidated Patient Account Center
CSEMO - The Corporate Senior Executive Management Office
CSP - Caregiver Support Program
CX - Customer Experience
DMARC - Domain-based Message Authentication, Reporting & Conformance
DoD - Department of Defense
DOL - Department of Labor
DPAA - Defense Personnel Accounting Agency
DROC - Decision Review Operations Centers
DUSH - Deputy Undersecretary for Health
EEO - Equal Employment Opportunity
ELS - Earning Loss Study
ETI - Educational or Training Institutions
FAQ - Frequently Asked Questions
FTE - full-time employee
FY - Fiscal Year
FYTD - Fiscal year to date
GAO - Government Accountability Office
GEC -Geriatrics and Extended Care
HLR - higher-level reviews
HR - Human Resources
HRA/OSP - Office of Human Resources and Administration/Office of Operations and Administration
HRL - High Risk List
HUD VASH - U.S. Department of Housing and Urban Development-VA Supportive Housing
ICAPA - Interagency Collaboration for Advancing Predictive Analytics
IDES - Integrated Disability Evaluation System

HIS - Indian Health Service
IMS - The Integrated Master Schedule
IT - Decision Review Operations Centers
IVR - interactive voice response
JEC - Joint Executive Committee
LGBTQ - lesbian, gay, bisexual, transgender and queer
LOE - lanes of effort
MCD - Medical Center Directors
NARA - National Archives and Records Administration
NCA - National Cemetery Administration
NCC - National Call Center
NDMS - National Disaster Medical System
NHHC - Naval History and Heritage Command
NIH - National Institutes of Health
NPRC - National Personnel Record Center
OAL - Office of Acquisition and Logistics
OALC - Office of Acquisition, Logistics and Construction
OAWP - Office of Accountability and Whistleblower Protection
OFO - Office of Federal Operations
OIG - Office of Inspector General
OIT - The Office of Information and Technology
OMB - Office of Management and Budget
OMSI - Opioid Management and Safety Initiative
OPC - Office of Primary Care
OSDBU - The Office of Small and Disadvantaged Business Utilization
PALT - Procurement Action Lead Time
PMP - Project Management Plan
QR - Quality Review Office
QSG - Quick Start Guides
REACH VET - Recovery Engagement and Coordination for Health – Veterans Enhanced Treatment
REACHVET 2.0 - Recovery Engagement and Coordination for Health – Veterans Enhanced Treatment
SDVOSBs - service-disabled Veteran-owned small businesses
SHEP - Survey of Health Experience of Patients
SOES - SGLI Online Enrollment System
SPED - Safety Planning in Emergency Departments
SSVF - Supportive Services for Veteran Families
STORM - Stratification Tool for Opioid Risk Mitigation
TACPA - Transition Assistance Curriculum Participant Assessment
TAP - Transition Assistance Program
TSMs - transitioning Service members
TWG - The Training Workgroup
USPS - United States Postal Service
VA - The Department of Veterans Affairs
VAAM - VA Acquisition Manual

VAAR - VA Acquisition Regulation
VASRD - Veterans Health Administration Central Office
VASS - VA Solid Start
VBA - Veterans Benefits Administration
VEAC - Veterans Experience Action Center
VEO - The Veterans Experience Office
VFCP - Veterans First Contracting Program
VHA - Veterans Health Administration
VHACO - Veterans Health Administration Central Office
VISN - Veterans Integrated Services Network
VLP - Veterans Legacy Program
VOSB - Veteran-Owned Small Businesses
VR&E - Veteran Readiness and Employment Program
VRRAP - Veteran Rapid Retraining Assistance Program
VVC - VA Video Connect