

TOOLS

Health Policy Essentials: Common Health Care Acronyms

FEBRUARY 2015

[A]

AAA	Area Agency on Aging
AAPCC	Adjusted Average Per Capita Cost
ACL	Administration for Community Living
ACO	Accountable Care Organization
ACA	Patient Protection and Affordable Care Act of 2010 (also, "PPACA")
ADL	Activities of Daily Living
AFDC	Aid to Families with Dependent Children
AHRQ	Agency for Healthcare Research and Quality
ALOS	Average Length of Stay
AMP	Average Manufacturer Price
AOA	Administration on Aging
APC	Ambulatory Payment Classification
ARRA	American Recovery and Reinvestment Act of 2009
ASC	Ambulatory Surgical Center
ASO	Administrative Services Only
ASP	Average Sales Price
AV	Actuarial Value
AWP	Average Wholesale Price

[B]

BBA	Balanced Budget Act of 1997
BBRA	Balanced Budget Refinement Act of 1999
BIPA	Medicare, Medicaid and SCHIP Benefits Improvement and Protection Act of 2000
BPCI	Bundled Payment for Care Improvement (Initiative)

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[C]

CAH	Critical Access Hospital
CAHPS	Consumer Assessment of Health Care Providers and Systems
CBO	Congressional Budget Office
CCIIO	Center for Consumer Information and Insurance Oversight
CHC	Community Health Center
CHIP	Children’s Health Insurance Program (formerly “SCHIP”)
CMHC	Community Mental Health Center
CMMI	Center for Medicare and Medicaid Innovation
CMS	Centers for Medicare & Medicaid Services
COLA	Cost of Living Adjustment
CON	Certificate of Need
COP	Conditions of Participation
CPI	Consumer Price Index
CPT®	Current Procedural Terminology®
CRS	Congressional Research Service
CTG	Community Transformation Grant

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[D]

DD	Developmental Disability
DME	Durable Medical Equipment/ Direct Medical Education
DRA	Deficit Reduction Act of 2005
DRG	Diagnosis-Related Group
DSH	Disproportionate Share Hospital

[E]

E&M	Evaluation and Management
ED	Emergency Department
EHB	Essential Health Benefits
EMR	Electronic Medical Record
EHR	Electronic Health Record
EMTALA	Emergency Medical Treatment and Active Labor Act of 1986
EOB	Explanation of Benefits
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment Program
ERISA	Employee Retirement Income Security Act
ESI	Employer-Sponsored Insurance
ESRD	End Stage Renal Disease

[F]

FEHB	Federal Employees Health Benefits Program (also, "FEHBP")
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FFE	Federally Facilitated Exchange
FFP	Federal Financial Participation
FFS	Fee-For-Service
FICA	Federal Insurance Contributions Act (Social Security)
FMAP	Federal Medical Assistance Percentage
FMLA	Family and Medical Leave Act
FPL	Federal Poverty Level
FQHC	Federally Qualified Health Center
FTC	Federal Trade Commission

[G]

GAO	U.S. Government Accountability Office
GDP	Gross Domestic Product
GME	Graduate Medical Education

[H]

HCBS	Home- and Community-Based Services
HCPCS	Healthcare Common Procedure Coding System
HDHP	High-Deductible Health Plan
HEDIS®	Healthcare Effectiveness Data and Information Set®
HHA	Home Health Agency
HHRG	Home Health Resource Group
HHS	U.S. Department of Health and Human Services
HI	Hospital Insurance (Medicare Part A)
HIE	Health Information Exchange

HIFA	Health Insurance Flexibility and Accountability
HIPAA	Health Insurance Portability and Accountability Act of 1996
HIT	Health Information Technology
HIX	Health Insurance Exchange
HMO	Health Maintenance Organization
HPSA	Health Professional Shortage Area
HRA	Health Reimbursement Account
HRSA	Health Resources and Services Administration
HSA	Health Savings Account

[I]

IADL	Instrumental Activities of Daily Living
ICD	International Classification of Diseases
ICF/IID	Intermediate Care Facility for Individuals with Intellectual Disabilities (formerly “ICF/MR”)
IGT	Intergovernmental Transfer
IHS	Indian Health Service
IMD	Institution for Mental Disease
IME	Indirect Medical Education
IPA	Independent Practice Association
IPAB	Independent Payment Advisory Board
IPPS	Inpatient Prospective Payment System
IRF	Inpatient Rehabilitation Facility
IRF-PAI	Inpatient Rehabilitation Facility Patient Assessment Instrument

[J]

JCAHO Joint Commission on the Accreditation of Health Care Organizations; now known as the Joint Commission

[L]

LHD Local Health Department

LIS Low-income Drug Subsidy

LOS Length of Stay

LTC Long-Term Care

LTCH Long-Term Care Hospital

LTSS Long-Term Services and Supports

[M]

MA Medicare Advantage

MAC Medicare Administrative Contractor

MA-PD Medicare Advantage Prescription Drug Plan

MACPAC Medicaid and CHIP Payment and Access Commission

MAGI Modified Adjusted Gross Income

MCBS Medicare Current Beneficiary Survey

MCO Managed Care Organization

MDS Minimum Data Set

MedPAC Medicare Payment Advisory Commission

MEI Medicare Economic Index

MEPS Medical Expenditure Panel Survey

MIPPA	Medicare Improvement for Patients and Providers Act of 2008
MLR	Medical Loss Ratio
MMA	Medicare Prescription Drug, Improvement, and Modernization Act of 2003
MMIS	Medical Management Information System
MOU	Memorandum of Understanding
MS-DRG	Medicare Severity-Diagnosis Related Groups
MSP	Medicare Savings Program; Medicare Secondary Payor
MSSP	Medicare Shared Savings Program
MUA	Medically Underserved Area

[N]

NAIC	National Association of Insurance Commissioners
NCQA	National Committee for Quality Assurance
NF	Nursing Facility
NPRM	Notice of Proposed Rulemaking
NQF	National Quality Forum

[O]

OAA	Older Americans Act of 1965
OACT	Office of the Actuary (CMS)
OASDI	Old Age Survivors, Disability, and Health Insurance Program
OASIS	Outcome and Assessment Information Set
OMB	Office of Management and Budget

OPD	Outpatient Department
OPM	Office of Personnel Management
OPPS	Outpatient Prospective Payment System

[P]

P4P	Pay for Performance
PACE	Program of All-inclusive Care for the Elderly
PBM	Pharmacy Benefit Manager
PCCM	Primary Care Case Management
PCMH	Patient-Centered Medical Home
PCP	Primary Care Provider
PDL	Preferred Drug List
PDP	Prescription Drug Plan
PFFS	Private Fee-for-Service (Plan)
PHS	U.S. Public Health Service
PMPM	Per Member Per Month
POS	Point of Service
PPACA	Patient Protection and Affordable Care Act of 2010 (also, "ACA")
PPO	Preferred Provider Organization
PPS	Prospective Payment System

[Q]

QHP	Qualified Health Plan
QI	Qualified Individual

QIO	Quality Improvement Organization
QMB	Qualified Medicare Beneficiary
QWDI	Qualified Working Disabled Individual

[R]

RAC	Recovery Audit Contractor
RBRVS	Resource-Based Relative Value Scale
RHC	Rural Health Clinic
RUC	American Medical Association/Specialty Society Relative Value Scale Update Committee
RUG-III	Resource Utilization Group, Version III
RVU	Relative Value Unit

[S]

SAMHSA	Substance Abuse and Mental Health Services Administration
SGR	Sustainable Growth Rate
SHOP	Small Business Health Options Program
SIM	State Innovation Models (Initiative)
SLMB	Specified Low-Income Medicare Beneficiary
SMD	State Medicaid Director
SMI	Supplementary Medical Insurance (Medicare Part B)
SNAP	Supplemental Nutrition Assistance Program
SNF	Skilled Nursing Facility
SNP	Special Needs Plan (Medicare Advantage)

SPA	State Plan Amendment
SSA	Social Security Administration
SSI	Supplemental Security Income
SSDI	Social Security Disability Insurance

[T]

TANF	Temporary Assistance to Needy Families
TPA	Third-Party Administrator
TWIIA	Ticket to Work Investment and Improvement Act of 1999

[U]

UPL	Upper Payment Limit
UR	Utilization Review
USP	U.S. Pharmacopeia
USPSTF	U.S. Preventive Services Task Force

[V]

VBID	Value-Based Insurance Design
VEBA	Voluntary Employee Beneficiary Association