



**GOD'S LOVE  
WE DELIVER®**

## God's Love We Deliver Terminology

### **CBO: Community Based Organization**

Typically non-profit organizations that work to improve the health and quality of life in the community they represent, often working beyond the typical parameters of the health care sector by providing housing, healthy food options, outreach programs and more to the members of their community.

### **CCH: Community Care Hubs**

A Community Care Hub is a community-centered entity that organizes and supports a network of community-based organizations providing services to address health-related social needs. A CCH centralizes administrative functions and operational infrastructure, including, but not limited to, contracting with healthcare organizations, payment operations, management of referrals, service delivery fidelity and compliance, technology, information security, data collection, and reporting. A CCH has trusted relationships with and understands the capacities of local community-based and healthcare organizations and fosters cross-sector collaborations that practice community governance with authentic local voices.

### **MTM: Medically Tailored Meals**

What we do – better than anyone! Medically tailored meals are medically appropriate meals delivered to the homes of individuals living with complex severe or chronic illnesses who are unable to shop or cook for themselves.

## Government/Policy Related Terminology

### **CFCO: Community First Choice Option**

An optional set of services under Medicaid, allowing long-term services and supports without a state Medicaid Waiver, meant to use federal money to expand home and community-based services and supports to individuals in need of long term care for help with everyday activities and health-related tasks that can be performed by an aide or direct care worker.

### **CHIP: Children's Health Insurance Program**

A program administered by the United States Department of Health and Human Services that provides matching funds to states for health insurance to families with children

### **CMS: Centers for Medicare & Medicaid Services**

A federal agency within HHS that administers the Medicare program and works in partnership with state governments to administer Medicaid, CHIP, and health insurance portability standards. In

addition to these programs, CMS has other responsibilities, including the administrative simplification standards from HIPAA, measurement, analysis, and development of quality health service-related standards through its survey and certification process.

### **DSRIP: Delivery Reform System Incentive Payment**

A mechanism designed to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25% over 5 years by investing in and promoting community-level collaborations and focusing on system reform.

### **GUSNIP-PPR: Gus Schumacher Nutrition Incentive Program-Produce Prescription**

GusNIP is a competitive grant program that aims to connect the food and healthcare systems. GusNIP-PPR is the Produce Prescription program under GusNIP that intends to conduct projects that demonstrate and evaluate the impact of fresh fruit and vegetable prescriptions to (1) increase procurement and consumption of fruits and vegetables, (2) reduce individual and household food insecurity, and (3) reduce healthcare usage and associated costs.

### **HHS: Department of Health and Human Services**

Federal division designed to enhance the health and well-being of all Americans, by providing for effective health and human services and by fostering sound, sustained advances in the sciences underlying medicine, public health, and social services.

### **HIPAA: Health Insurance Portability and Accountability Act**

An Act of Congress that stipulates how personally identifiable information maintained by the healthcare and healthcare insurance industries should be protected from fraud and theft. HIPAA prohibits healthcare providers and healthcare businesses from disclosing protected information to anyone other than a patient and the patient's authorized representatives without their consent.

### **HRSA: Health Resources & Service Administration**

Provides equitable health care to the nation's highest-need communities, supporting people with low incomes, people with HIV, pregnant people, children, parents, rural communities, transplant patients, and the health workforce.

### **HRSN: Health Related Social Needs**

Health-related social needs are social and economic needs that individuals experience that affect their ability to maintain their health and well-being. These include needs such as employment, affordable and stable housing, healthy food, personal safety, transportation, and affordable utilities.

### **MA: Medicare Advantage**

MCO's that contract with the federal government to provide health insurance benefits to people who qualify for Medicare which can include services not covered by traditional Medicare, like vision, hearing, dental services, fitness programs, transportation services, prescription coverage, and other services to promote health and wellness.

## **PHI: Protected Health Information**

Individually identifiable health information, that can be demographic, medical histories, test and laboratory results, mental health conditions, insurance information and other data that a healthcare professional collects to identify an individual and determine appropriate care.

## **PHS: Public Health Solutions**

A major public health organization in NYC, their mission is to conduct significant research and assist NYC DOHMH, but also provide vital services that improve the health of low-income and high-risk families and communities throughout New York City.

## **RWHAP: Ryan White HIV/AIDS Program**

Provides comprehensive primary health care and support services in an outpatient setting for low income people with HIV.

## **SDOH: Social Drivers of Health**

The economic and social conditions that influence health status, including but not limited to: economic stability, education access and quality, healthcare access and quality, neighborhood and built environment, and social/community context, food security, housing, utilities, transportation, and safety needs.

## **SNAP: Supplemental Nutrition Assistance Program**

Provides food benefits to low-income families to supplement their grocery budget so they can afford the nutritious food essential to health and well-being.

## **Section 1115 Demonstrations:**

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services authority to approve experimental, pilot, or demonstration projects that are found by the Secretary to be likely to assist in promoting the objectives of the Medicaid program.

*Please email the Business Development & Communications team at [partner@glwd.org](mailto:partner@glwd.org) with any questions or concerns.*

## **WIC: Women, Infants and Children**

Aims to safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care; funded by the United States Department of Agriculture's Food and Nutrition Service and administered by the New York State Department of Health.

## **Health Insurance Terminology**

### **ACA: Affordable Care Act**

Introduced the Health Insurance Marketplace, a single place where consumers can apply for and enroll in private health insurance plans, creating new ways to design and test how to pay for and deliver health care.

### **CT: Care Transitions**

Care Transitions planning considers the patient's medical, physical, cognitive, economic and emotional strengths and abilities as well as their available support system upon being discharged from a clinical inpatient or rehabilitation facility/setting. It is a short-term model, usually lasting for 30 days, where patients with chronic illnesses or complex care issues work alongside a transition coach to build or improve self-management skills. This allows them to transition from the hospital to their homes more easily and covers the cost of some supportive services for the 30 day time period which are not normally covered under traditional Medicare services (i.e. Medically Tailored Meals).

### **D-SNP: Dual-Eligible Special Needs Plan**

A managed care plan for people who qualify for both Medicare and state Medicaid assistance, combining and coordinating Medicare and Medicaid benefits to make them easily accessible to people who have both.

### **EPO: Exclusive Provider Organization**

Line of Business that doesn't require a referral to see a specialist like an HMO, but it also doesn't cover out of network providers like a PPO.

### **FFS: Fee For Service**

A payment model in which health care providers are paid for each service performed. In health care, it gives an incentive for physicians to provide more treatments because payment is dependent on the quantity of care, rather than quality of care.

### **HARP: Health And Recovery Plans**

An MCO Medicaid LOB that manages physical health, mental health, and substance use services in an integrated way for adults with significant behavioral health needs (mental health or substance use).

### **HMO: Health Maintenance Organization**

A line of business that usually limits coverage to care from doctors who work for or contract with the HMO LOB. It generally won't cover out-of-network care except in an emergency. An HMO may require you to live or work in its service area to be eligible for coverage. HMO's often provide integrated care and focus on prevention and wellness.

## **ILS: In Lieu of Services**

MMC recipients are provided with alternative services that are medically appropriate and cost-effective substitutes for existing covered services.

## **LOB: Line of Business**

The product or service that is provided by a health plan so that the populations can be categorized into a more specific area, can be referred to as a “Product Line.”

## **LTSS: Long-Term Services & Supports**

Include a range of services that assist individuals with functional limitations on their ability to carry out daily activities.

## **MAP: Medicaid Advantage Plus**

A type of integrated D-SNP combined with a type of MLTC plan offered through the same insurance company. MAP plans provide managed care if a member is eligible for (and enrolled in) Medicare and Medicaid and in need of a certain amount of long-term care. Currently offered in Albany, Montgomery, Nassau, New York City, Rensselaer, Schenectady, Suffolk, and Westchester counties only.

## **MCO: Managed Care Organization**

A health care company or health plan.

## **Medicaid:**

A jointly funded federal and state health insurance plan administered by states for low income adults, pregnant women, children and people with certain disabilities.

## **Medicare:**

A federal health insurance program for people who are 65 or older, certain younger people with disabilities, and people with end-stage renal disease (permanent kidney failure requiring dialysis or a transplant, sometimes called ESRD)

## **MLTC: Managed Long-Term Care**

Helps people who are chronically ill or have disabilities and who need health and long-term care services, such as home care or adult day care, stay in their homes and communities as long as possible.

## **MMC: Medicaid Managed Care**

A pathway to providing services through contracts between state-level Medicaid agencies and MCO's, leveraging an established rate of payment for those services based on a set number of members receiving care in a month.

## **NPI Number:**

The National Provider Identifier is a unique number assigned to health care providers - individuals AND groups - for the purposes of identification and billing.

## **PACE: Program of All-Inclusive Care for the Elderly**

Provides comprehensive medical and social services to certain frail, community-dwelling elderly individuals, most of whom are dually eligible for Medicare and Medicaid benefits, enabling the members to remain in the community rather than receive care in a nursing home.

## **POS: Point of Service**

A hybrid of HMO and PPO plans. Like an HMO, participants designate an in-network physician to be their primary care provider. But like a PPO, patients may go outside of the provider network for health care services, where they'll have to pay most of the cost.

## **PPO: Preferred Provider Organization**

A line of business that contracts with medical providers, such as hospitals and doctors, to create a network of participating providers. You pay less if you use providers that belong to the plan's network. You can use doctors, hospitals, and providers outside of the network for an additional cost.

## **SNP: Special Needs Plan**

An MA coordinated care plan that provides benefits and services to people with specific diseases or who have certain health care needs; a joint federal and state program that helps with medical costs for some people with limited income and resources. Can be: An institutionalized individual, a dual eligible individual, or an individual with a severe or disabling chronic condition, as specified by CMS.

## **SSBCI: Special Supplemental Benefits for the Chronically Ill**

Offered to Medicare Advantage members with one or more complex chronic conditions, who are at high risk for hospitalization or adverse health outcomes, and who require intensive care coordination.

## **VBC: Value-Based Care (Or VBP: Value-Based Payments)**

A program and method to offer monetary incentives to health care providers for the quality of care they deliver to people. Value-based care programs are designed to focus on better care for individuals, better health for populations, and lowering costs.

## **Healthcare Practice Terminology**

### **ACO: Accountable Care Organization**

An organization of clinically integrated health care providers that work together to provide, manage, and coordinate health care for a defined population.

## **FQHC: Federally Qualified Health Center**

Community-based entities that provide comprehensive care to local, often underserved individuals, regardless of coverage. FQHC offerings include primary and preventive health services, as well as dental, specialty and emergency care. They serve Medicaid members, individuals facing homelessness, migrants and other populations, regardless of their ability to pay for care.

## **HEDIS: Health Plan Employer Data and Information Set**

Created and managed by NCQA, a set of metrics that enables individuals and businesses to accurately compare the features and performance of different healthcare plans by providing metrics for all types of care.

## **IPA: Independent Practice Association**

A corporation (nonprofit or for-profit) and/or LLC that contracts directly with providers of medical or medically related services, or another IPA in order to contract with one or more MCOs.

## **PCP: Primary Care Provider**

A health care professional who practices general medicine. Many PCP's are doctors, but nurse practitioners and physician assistants can sometimes also be PCP's. Areas of practice include Family Medicine, Internal Medicine, OB/GYN, and Pediatrics.

## **NCQA: National Committee for Quality Assurance**

An independent nonprofit organization that works to improve health care quality through the administration of evidence-based standards, measures, programs, and accreditation with a high commitment to ethical behaviors.

## **SCP: Specialty Care Provider**

A health care professional where medical services are provided by healthcare professionals with advanced training and expertise in specific areas of medicine. These specialists provide more focused and in-depth care for patients with specific health conditions, such as cardiovascular disease, neurological disorders, or cancer.

## **SNF: Skilled Nursing Facility**

Where skilled nursing care provided by trained registered nurses in a medical setting under a doctor's supervision. Patients may go from the hospital to a SNF to continue recovering after an illness, injury or surgery. In addition to skilled nursing, care may include rehabilitative services from licensed physical, occupational or speech therapists. A SNF provides transitional care, with the goal of getting well enough to go home.