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A

Agency for Healthcare Research and Quality (AHRQ): AHRQ is a federal agency within the United States Department of Health and Human Services (HHS). The Agency was established to enhance the quality, appropriateness, and effectiveness of health care services and access to care by conducting and supporting research, demonstration projects, and evaluations; developing guidelines; and disseminating information on health care services and delivery systems.

Avoidable Hospital Use: This term is used to designate all avoidable hospital service use including avoidable emergency department use, avoidable hospital admissions and avoidable hospital readmissions within 30 days. This can be achieved through better aligned primary care and community-based services, application of evidence based guidelines for primary and chronic disease care, and more efficient transitions of care through all care settings.

B

Behavioral Risk Factor Surveillance System (BRFSS): BRFSS is a United States health survey that looks at behavioral risk factors. It is run by the Centers for Disease Control and Prevention. The BRFSS is a cross-sectional telephone survey conducted by state health departments with technical and methodological assistance provided by the CDC. The U.S. federal government can then compare states based on the core questions to allocate funding and focus interventions. The states themselves also use the survey results to focus interventions for the public and to decide what is worth their while to focus on. City, county, tribal, and local governments also rely on BRFSS data for information about their jurisdictions.

C

D

Delivery System Reform Incentive Payment Program (DSRIP): As part of New York’s Medicaid Redesign Team (MRT) Waiver Amendment, DSRIP’s purpose is to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goals being stabilizing the safety-net system and reducing avoidable hospital use by 25% over 5 years. DSRIP is the largest piece of the MRT Waiver Amendment with a total allocation of $6.9 billion.

Diagnostic and Treatment Centers: These centers provide a comprehensive range of primary health care outpatient services to a population that includes uninsured individuals.

Disease Incidence: Incidence is a measure of disease that allows us to determine a person's probability of being diagnosed with a disease during a given period of time. Therefore, incidence is the number of newly diagnosed cases of a disease. An incidence rate is the number of new cases of a disease divided by the number of
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persons at risk for the disease. If, over the course of one year, five women are diagnosed with breast cancer, out of a total female study population of 200 (who do not have breast cancer at the beginning of the study period), then we would say the incidence of breast cancer in this population was 0.025. (or 2,500 per 100,000 women-years of study).

**Disease Prevalence:** Prevalence is a measure of disease that allows us to determine a person’s likelihood of having a disease. Therefore, the number of prevalent cases is the total number of cases of disease existing in a population. A prevalence rate is the total number of cases of a disease existing in a population divided by the total population. So, if a measurement of cancer is taken in a population of 40,000 people and 1,200 were recently diagnosed with cancer and 3,500 are living with cancer, then the prevalence of cancer is 0.118. (or 11,750 per 100,000 persons).

**Dual Medicare/Medicaid Eligibility:** Dual Medicare/Medicaid eligibility status is based upon the last month of enrollment/eligibility during the year. If a Medicaid beneficiary was indicated as being eligible for Part A, B, C or D Medicare services they are classified as dual eligible. The dual-eligible Medicare and Medicaid population is diverse and includes individuals with multiple chronic conditions, physical disabilities, and cognitive impairments such as dementia, developmental disabilities, and mental illness. It also includes some individuals who are relatively healthy.

**E**

**English-speaking ability less than “very well”:** Based on self-assessment, American Community Survey (ACS) data about English-speaking ability represent the respondent’s perception about his or her own ability, or the responses may reflect the perception of a household member who answered the ACS questions for the entire household. The ACS does not provide data on English-speaking ability for those who speak only English at home.

**F**

**Federally Qualified Health Centers (FQHCs):** FQHCs include all organizations receiving grants under Section 330 of the Public Health Service Act (PHS). FQHCs qualify for enhanced reimbursement from Medicare and Medicaid, as well as other benefits. FQHCs must serve an underserved area or population, offer a sliding fee scale, and provide comprehensive services.

**Foreign Born:** The U.S. Census Bureau uses the term foreign born to refer to anyone who is not a U.S. citizen at birth. This includes naturalized U.S. citizens, lawful permanent residents (immigrants), temporary migrants (such as foreign students), humanitarian migrants (such as refugees and asylees), and persons illegally present in the United States. The terms native and native born refer to anyone born in the United States, Puerto Rico, a U.S. Island Area (e.g., Guam), or abroad of a U.S. citizen parent or parents.
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G
H

Health Care Utilization: In health care, the consumption of services or supplies, such as the number of office visits a person makes per year with a health care provider, the number of prescription drugs taken, or the number of days a person is hospitalized.

Health Home: A way of organizing primary care that emphasizes care coordination and communication to provide patients with timely, well-organized and integrated care, and enhanced access to teams of providers within a health care organization.

Health Resources and Services Administration (HRSA): An agency of the U.S. Department of Health and Human Services, HRSA is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable. HRSA’s grantees provide health care to uninsured people, people living with HIV/AIDS, and pregnant women, mothers, and children. HRSA also supports the training of health professionals, the distribution of providers to areas where they are needed most, and improvements in health care delivery.

Healthcare Effectiveness Data and Information Set (HEDIS): Tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. Altogether, HEDIS consists of 75 measures across 8 domains of care. The NCQA collects HEDIS data directly from Health Plan Organizations and Preferred Provider Organizations for multiple purposes and the data collected are maintained in a central database with strict controls to protect confidentiality.

Health Professional Shortage Areas (HPSA): Health Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary care, dental care, or mental health providers and may be geographic (a county or service area), population (e.g., low income or Medicaid eligible) or facilities (e.g., federally qualified health centers, or state or federal prisons).

I
J
K

L

Local Government Unit (LGU): The acronym “LGU” as utilized in this needs assessment refers to New York State counties or New York City.
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M

**Mental Health Professionals:** In New York State, the licensed mental health (MH) workforce includes psychiatrists, psychologists, clinical or master level social workers, nurse practitioners—psychiatry, marriage and family therapists, mental health counselors, psychoanalysts, and creative arts therapists.

**Morbidity:** Morbidity is another term for illness. A person can have several co-morbidities simultaneously. So, morbidities can range from Alzheimer's disease to cancer to traumatic brain injury. Morbidities are NOT deaths. Prevalence is a measure often used to determine the level of morbidity in a population.

**Mortality:** Mortality is another term for death. A mortality rate is the number of deaths due to a disease divided by the total population. If there are 25 lung cancer deaths in one year in a population of 30,000, then the mortality rate for that population is 83 per 100,000.

N

**Nursing Home Behavioral Intervention Services:** In New York State this program must include a discrete unit with a planned combination of services with staffing, equipment and physical facilities designed to serve individuals whose severe behavior cannot be managed in a less restrictive setting. The program's services are directed at attaining or maintaining the individual at the highest practicable level of physical, affective, behavioral and cognitive functioning.

**National Committee for Quality Assurance (NCQA):** NCQA is an independent non-profit organization in the United States that works to improve health care quality through the administration of evidence-based standards, measures, programs, and accreditation. NCQA operates on a formula of measure, analyze, and improve and it aims to build consensus across the industry by working with policymakers, employers, doctors, and patients, as well as health plans.

P

**Patient Characteristics Survey (PCS):** The NYS Office of Mental Health’s PCS provides a comprehensive one-week "snapshot" of the population served by New York State’s public mental health system. It includes demographic, clinical, and social characteristics for the population that received a mental health service during the specified one-week period.

**Potentially Preventable Emergency Room Visits (PPVs):** Part of the nationally recognized measures for avoidable hospital use. The measures identify emergency room visits that could have been avoided with adequate ambulatory care.
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Premature Mortality: Premature deaths are deaths that occur before a person reaches an expected age, for instance, age 75. Many of these deaths are considered to be preventable.

Prevention Quality Indicators – Adults (PQIs): Part of the nationally recognized measures for avoidable hospital use PQIs are a set of measures that can be used with hospital inpatient discharge data to identify quality of care for “ambulatory care sensitive conditions.” These are conditions for which good outpatient care can potentially prevent the need for hospitalization, or for which early intervention can prevent complications or more severe disease. The PQIs are population-based and can be adjusted for covariates for comparison purposes.

Program Performing Provider System (PPS): The entities that are responsible for creating and implementing a DSRIP project are called "Performing Provider Systems", abbreviated "PPS". Performing Provider Systems are providers that form partnerships and collaborate in a DSRIP Project Plan. PPSs include both major public hospitals and safety net providers, with a designated lead provider for the group. Safety net partners can include an array of providers: hospitals, health homes, skilled nursing facilities, clinics and FQHCs, behavioral health providers, community based organizations and others.

Public Health Insurance Coverage: Public coverage includes the federal programs Medicare, Medicaid and other medical assistance programs, VA Health Care; the Children’s Health Insurance Program (CHIP); and individual state health plans.

Quality Assurance Reporting Requirements (QARR): QARR is the New York State Department of Health's version of HEDIS, which is the national Healthcare Effectiveness Data and Information Set.

Statewide Planning and Research Cooperative System (SPARCS): A comprehensive data reporting system established in 1979 as a result of cooperation between the health care industry and government. Initially created to collect information on discharges from hospitals, SPARCS currently collects patient level detail on patient characteristics, diagnoses and treatments, services, and charges for every hospital discharge, ambulatory surgery patient, and emergency department admission in New York State.

Substance Use Disorder Professionals: In New York State, the certified and credentialed substance use disorder (SUD) workforce includes physicians and counselors. Physicians can be board certified in addiction medicine and/or...
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authorized for buprenorphine prescribing. Counselors may be credentialed in alcoholism and substance abuse or certified in rehabilitation.

T  
U

Urban and Rural Area Designations: Urban areas (metro areas) are geographic entities defined by the U.S. Office of Management and Budget (OMB) for use by Federal statistical agencies in collecting, tabulating, and publishing Federal statistics. An urban area includes one or more counties containing a core urban area of 50,000 or more people, together with any adjacent counties that have a high degree of social and economic integration (as measured by commuting to work) with the urban core. The OMB defines rural as all counties outside metropolitan areas based on 2010 census data. There are currently 24 counties designated rural in New York State.