

# Healthier Washington

## Glossary of Terms

This glossary is the product of careful research by staff from DOH, DSHS and HCA who are engaged in Healthier Washington communications. It will provide guidance on many of the names, terms and acronyms used under the Healthier Washington initiative. It will help us to be consistent when communicating within our agencies and with external audiences, and help us understand each other's work.

This glossary defers to other resources to define common health care terms, such as provider, deductible, and dependent, but offers definitions such as managed care and electronic health record to share how the terms are used under Healthier Washington.

Some of the terms shown here will likely generate debate. As a cross-agency collaborative effort, the glossary does not attempt to impose a strict set of terms upon agencies or stakeholders. In entries where competing definitions exist, we offer a caution indicator [!] to help users achieve clarity. It is important to remember that the way *you* define a term may differ from how each member of your audience defines it, potentially leading to mistaken assumptions. Continue to reference any policies, glossaries or style guides developed at your agency for communications that are largely about and produced by your agency but reference the work under Healthier Washington.

We welcome additions to this Glossary of Terms. Send suggestions to [HWsite@hca.wa.gov](mailto:HWsite@hca.wa.gov).

Use the A to Z menu for quicker navigation.

Letters are not hyperlinked do not have a term inside this glossary.

[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

- **Access to Care Standards:** describe the minimum standards and criteria for clinical eligibility for behavioral health services for the Regional Support Network/Behavioral Health Organization (RSN/BHO) care delivery system. Medicaid enrollees are eligible for all outpatient and residential levels of care and clinical services in the Medicaid State Plan based on medical necessity and the Access to Care Standards.
- **Accountable care networks:** also referred to as Accountable Care Organizations, these networks are a part of the “paying for value” strategy under the Accountable Care Program. The networks provide “best in class” patient service and experience and access to high-quality and timely service at a lower cost. Currently the state Health Care Authority offers two accountable care networks to state employees and retirees in selected counties.
- **Accountable Communities of Health (ACHs):** bring together leaders from multiple public and health sectors around the state with a common interest in improving health and health equity. ACHs work regionally to align resources and activities; they improve the delivery of whole-person health and wellness. Washington State has nine ACH regions. [Go to the ACH web page.](#)

11.3.2017

# Healthier Washington

## Glossary of Terms

- **Automated Client Eligibility System (ACES):** a tool for determining eligibility, issuing benefits, management support, and sharing of data between agencies. This system is used by the State of Washington's Department of Social and Health Services.
- **Analytics, Interoperability, and Measurement (AIM):** a Healthier Washington investment area that is working to leverage and strengthen existing health data systems from multiple sectors to create capacity for analytics and decision support to best serve Washington's needs, from service delivery to policy and program development, to health care reform investment strategies. [Go the AIM web page.](#)
- **Apple Health:** the brand name for Medicaid in Washington State.
- **Behavioral health:** is the general term used to refer to both mental health and substance use disorder; the term is not synonymous with mental health – it is inclusive of mental health conditions, substance use disorders, and their co-occurrence.
- **Behavioral Health Advisory Council:** the Council makes decisions that will best serve citizens in need of behavioral health services. Council members are concerned with the need, planning, operation, funding and use of services for mental health, substance use and gambling disorders. [Go to the Council website.](#)
- **Behavioral Health Organizations (BHOs):** created through Washington State legislation to purchase and administer public mental health and substance use disorder services. Beginning in 2019, most BHOs across the state will be replaced by the managed care model.
- **Bi-directional physical and behavioral health care integration:** a flexible model of care intended to increase access to physical and behavioral health care through a “no wrong door” approach. Strategies may include: enhanced communication between practices and providers (care coordination), referrals and consultation; co-location, telehealth, routine use of evidence-based screening tools, cross-training between disciplines, and an interest in addressing all of an individual’s needs in the setting of their choice.
- **Bree Collaborative:** the Washington State Legislature established the Dr. Robert Bree Collaborative to identify ways to improve health care quality, outcomes, and affordability. Members are appointed by the governor. [Go to the Bree Collaborative website.](#)
- **Buckets of Prevention:** the Centers for Disease Control and Prevention developed a population health and prevention framework with three categories (also called buckets). The 3 buckets are 1.) Traditional Clinical Prevention, 2.) Innovative Clinical Prevention, 3.) Total Population or Community-Wide Prevention. [Go to the CDC Buckets of Prevention article.](#)
- **Care coordination:** **[!]** A method of health care treatment across several providers; patient-centered medical homes models and accountable care organizations are two common examples of care coordination.

# Healthier Washington

## Glossary of Terms

- **Centers for Medicare and Medicaid Innovation Center:** the Innovation Center was established by Congress to test “innovative payment and service delivery models to reduce program expenditures while preserving or enhancing the quality of care” for individuals who receive Medicare, Medicaid, or Children’s Health Insurance Program (CHIP) benefits.
- **Chemical dependency:** see term “[substance use disorder](#)”.
- **Clinical Data Repository (CDR):** The CDR connects different electronic health record platforms and aggregates clinical information in one easily accessible location. The information helps health care providers gain a more comprehensive understanding of a patient’s medical history. This enables clinicians to achieve better results for their patients and improve overall community health. [Go to the CDR web page.](#)
- **Clinical community linkages:** a priority focus in Healthier Washington of connecting health care providers, community organizations, and public health agencies so they can improve patients' access to preventive and chronic care services.
- **Common Measure Set:** see term “[Washington State Common Measure Set for Health Care Quality and Cost](#)”.
- **Critical Access Hospitals (CAH):** the federal designation Critical Access Hospital was established under the U.S. Balanced Budget Act of 1997 to meet the health care needs of people in rural areas. Critical Access Hospitals are small hospitals with fewer than 25 beds in rural areas.
- **Data lake:** a web storage repository that holds a vast amount of raw data in its native format, including structured, semi-structured, and unstructured data. The data structure and requirements are not defined until the data is needed.
- **Delivery System Reform Incentive Program/Payment/Pool (DSRIP):** DSRIP is a strategy to accomplish delivery system reform. The term “DSRIP funds” refers to the type of money available to pay for regional transformation projects.
- **Demonstration projects:** are efforts by Accountable Communities of Health to address regional health needs through the Medicaid Transformation Demonstration. Transformation projects are aimed at:
  - **Health systems capacity building**—workforce development; system infrastructure technology and tools; and system supports to assist providers in adopting value-based purchasing and payment.
  - **Care delivery redesign**—integrated delivery of physical and behavioral health services; care focused on specific populations; alignment of care coordination and case management to serve the whole person; and outreach, engagement, and recovery supports.
  - **Prevention and health promotion**—prevention activities for targeted populations and regions.

# Healthier Washington

## Glossary of Terms

- **Department of Health (DOH):** a Washington State government agency, Department of Health is one of three primary partners in the Healthier Washington initiative.
- **Department of Social and Health Services (DSHS):** a Washington State government agency, Department of Social and Health Services is one of the three primary partners in the Healthier Washington initiative.
- **Design funds:** are intended to support Accountable Communities of Health (ACHs) make investments required to coordinate transformation projects, such as technology, tools, and human resources. ACHs must complete a two-step certification process during Design Year 1.
- **Early Adopter:** the Southwest Washington regional service area opted to be an “early adopter” of fully integrated contracting for physical and behavioral health care beginning April 2016. It was the only region of the state to do so. State law calls for fully integrated managed care to be implemented for Apple Health (Medicaid) statewide by 2020. Also see term “[mid-adopter](#)”.
- **Electronic health records (EHR):** are designed to reach out beyond the health organization that originally collects and compiles the information. They are built to share information with other health care providers, such as laboratories and specialists and contain information from all the clinicians involved in the patient’s care. The National Alliance for Health Information Technology stated that EHR data “can be created, managed, and consulted by authorized clinicians and staff across more than one health care organization.”
- **Electronic Medical Records (EMR):** are digital versions of the paper charts in the clinician’s office. An EMR contains the medical and treatment history of the patients in one practice. The information in EMRs does not travel easily *out* of the practice. In fact, the patient’s record might even have to be printed and delivered by mail to specialists and other members of the care team.
- **Evidence-based: [!]** a thoroughly researched strategy within a practice setting that has a high regard to improving and measuring outcomes (treatments, referrals, patient safety, follow-up care, etc.). In public behavioral health care, evidence-based is a legislative standard through which a practice must meet standards of increased efficacy at reasonable costs.
- **Evidence informed:** a thoroughly researched strategy that has a high regard to improving and measuring outcomes.
- **Federally Qualified Health Centers (FQHC):** federally funded nonprofit health centers or clinics that serve medically underserved areas and populations. Federally qualified health centers provide primary care services regardless of your ability to pay. Services are provided on a sliding scale fee based on your ability to pay.

# Healthier Washington

## Glossary of Terms

- **Fee-for-service (FFS):** a method in which doctors and other health care providers are paid for each service performed. Examples of services include tests and office visits.
- **Foundational Community Supports:** through the Medicaid Demonstration (Initiative 3), this system will enhance the availability of supportive housing and supported employment services for those who are the most vulnerable and have complex care needs. [Go to the Initiative 3 \(PDF\) fact sheet.](#)
- **Fully integrated managed care:** an initiative under Healthier Washington to bring together the payment and delivery of physical and behavioral health services for people enrolled in Medicaid.
- **Guide:** see term “[Population Health Planning Guide](#)”.
- **Health Care Authority (HCA):** a Washington State government agency, Health Care Authority is one of the three primary partners in the Healthier Washington initiative; also the lead.
- **Health disparities:** refers to differences in access to or availability of facilities and services. Health status disparities refer to the variation in rates of disease occurrence and disabilities between socioeconomic and/or geographically defined population groups.
- **Health Home:** Washington State’s Medicaid “Health Home” services provide comprehensive care coordination across medical, behavioral, and long-term services and supports for Medicaid beneficiaries with chronic conditions that are of high risk and cost. The goal is to improve beneficiary experience of care, improve health and reduce costs.
- **Health equity:** means striving for the highest possible standard of health for all people regardless of social conditions, economy, demographics, or geography; and giving priority attention to the needs of those at greatest risk of poor health.
- **Health Information Exchange (HIE):** refers to the sharing of electronic health-related information in a manner that protects the confidentiality, privacy, and security of the information. This process requires use of national standards as they are established in order to increase interoperability, security, and confidentiality of information. OneHealthPort is the lead organization that operates the Washington State Health Information Exchange. [Go to OneHealthPort’s website.](#)
- **Health Information Technology (HIT):** information processing involving both computer hardware and software that deals with the storage, retrieval, sharing, and use of health care information, data, and knowledge for communication and decision making.

# Healthier Washington

## Glossary of Terms

- **Health Innovation Leadership Network (HILN):** is comprised of providers, business, health plans, consumers, community entities, governments, tribal entities and other key partners appointed by the governor to help accelerate the efforts of Healthier Washington. The group meets quarterly. [Go to the HILN roster web page.](#)
- **Health literacy:** the ability of an individual to obtain, interpret and understand basic health information and services and to use such information and services in ways that are health enhancing.
- **Health promotion:** the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.
- **Health Provider Shortage Area:** a state and federal determination of areas and populations in Washington that can be designated as having a shortage of health care providers; designations are available for three areas of health care: primary medical care, primary dental care, and mental health care.
- **Healthier Washington:** a state initiative aimed at transforming health care so that people experience better health and receive better, more affordable care by 2020. It is the operational work of the State Health Care Innovation Plan (SHCIP) developed to apply for a federal State Innovation Model (SIM) grant.
- **Home health care:** is a wide range of health care services that can be delivered in the home for an illness or injury, such as wound care, patient and caregiver education, injections, and monitoring of serious illness and unstable health status.
- **Integrated care:** see term “[bi-directional physical and behavioral health care integration.](#)”
- **Integrated clinical record:** the components of the Clinical Data Repository (CDR) sourced by the state Health Care Authority. This will include but not be limited to: medical, dental, behavioral health, and naturopathic records.
- **Investment areas:** a term found in the Healthier Washington grant application, investment areas reference the following categories: community empowerment and accountability, practice transformation support, payment redesign, analytic interoperability and measurement, and project management.
- **Long-term care:** the continuum of medical and social services designed to support the needs of people living with chronic health problems that affect their ability to perform everyday activities. Most of these services are not medical care, but assist with the basic personal tasks of everyday life, such as bathing and dressing.

# Healthier Washington

## Glossary of Terms

- **Long-term services and supports:** are a spectrum of health and social services that support elders or people with disabilities who need help with daily living tasks. The services can be provided in the home and community or in a facility.
- **Managed care:** [\[!\]](#) health plans or networks contracted to deliver managed care.
- **Managed Care Organizations (MCO):** a health care delivery system organized to manage cost, use and quality. Managed care provides health benefits and additional services through contracted arrangements between state Medicaid agencies and organizations (MCOs) that accept a set per member per month (capitation) payment for these services.
- **Medicaid Information Technology Architecture:** A Centers for Medicare and Medicaid initiative that fosters an integrated business and information technology architecture. Establishes nation guidelines for technologies and processes that can enable “improved program management across the Medicaid enterprise.”
- **Medicaid Transformation Demonstration:** In January 2017, the Centers for Medicare & Medicaid Services (CMS) approved a *Section 1115 Demonstration*. In Washington State, this particular demonstration is called the Medicaid Transformation Demonstration. Washington’s five-year contract with CMS authorizes up to \$1.5 billion in federal investments to support the three initiatives of the Demonstration. [Go to the Demonstration web page.](#)
- **Mental health:** is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community. Conversely, mental illness consists of diagnosable mental disorders or health conditions that are characterized by alterations in thinking, mood, or behavior associated with distress and/or impaired functioning.
- **Mid-adopter:** refers to a region of the state that implements an integrated managed care plan before 2020. This means behavioral health benefits are integrated into the Apple Health managed care program so that clients have access to the full complement of medical and behavioral health services through a single managed care plan.
- **No-wrong-door:** an approach to providing care that supports effective connections and access to the right type of care regardless of the setting it was first sought in.
- **Patient Decision Aids:** are part of the Shared Decision Making model of health care delivery. These are tools that can help people engage in shared health decisions with their health care provider. In 2016, Washington became the first state in the nation to formally review, certify and advocate the use of high-quality patient decision aids. [Go to the patient decision aids web page.](#)
- **Payment models:** four specific alternative models of paying for health care identified under the Healthier Washington initiative. Each model tests care payments under a value-based standard, rather than paying a fee for service. Also see term “[pay for performance](#)”.

# Healthier Washington

## Glossary of Terms

- **Pay for performance:** also called “paying for value,” this is a strategy aimed at changing how we pay for health care. It moves away from the traditional fee-for-service approach to payment for how well providers perform. This can include patient satisfaction and a track record of helping people achieve health.
- **Payment redesign:** a Healthier Washington investment area aimed at creating partnerships with purchasers, providers and payers, Washington will leverage its purchasing power to be the first mover in shifting the health care market from traditional fee-for-service to integrated, value-based payment models.
- **Plan for Improving Population Health (P4IPH):** see term “[Population Health Planning Guide](#)”.
- **Population health:** a reference to health outcomes of a group of people, rather than individuals. It can refer to a population within a geographical boundary, a clinical population, or a population defined by certain common characteristics.
- **Population Health Planning Guide:** a collection of data, information, tools, and resources. It can be used by anyone who wants to address a health issue inside a specific community or target population. [Go to the Guide’s web page](#).
- **Portal:** see term “[Web Resource Portal](#)”.
- **Practices:** a medical specialty group that provides continuing and comprehensive health care for an individual or family. Providers and clinicians within practices possess unique attitudes, skills, and knowledge which qualify them to provide continuing and comprehensive medical care, health maintenance and preventive services regardless of sex, age or type of problem, be it biological, behavioral, or social.
- **Practice transformation:** a Healthier Washington investment area that supports providers across the state to effectively coordinate care, increase capacity, and benefit from value-based reimbursement strategies.
- **Practice Transformation Support Hub (Hub):** a Healthier Washington and legislatively mandated deliverable that accelerates regional and statewide health improvement activities. The Hub supports local efforts by connecting health care providers with tools, training, and hands-on technical assistance that coordinates care, promotes community linkages, and assists with the transition to value-based payment models. [Go to the Hub’s website](#).
- **Provider:** a physician, nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services.



# Healthier Washington

## Glossary of Terms

- **Quadruple Aim:** is the expanded version of the Triple Aim that includes improving population health, increasing patient satisfaction, and reducing per-capita health care spending, and addressing clinician and staff satisfaction. Also see term "[Triple Aim](#)".
- **Regional Health Needs Inventory (RHNI):** are an inventory by Accountable Communities of Health (ACHs) that takes a data-driven approach to project selection, design, and implementation. Under the Medicaid Transformation Demonstration, ACHs must gather, review, and interpret information about the health status, systems, and capacity of their region.
- **Regional Service Areas (RSA):** are geographical boundaries for the state to purchase behavioral and physical health care through managed care contracts. [Go to the RSA \(PDF\) map](#).
- **Regional Support Networks (RSN):** are entities responsible for the administration and purchase of public mental health services within their geographic region. As of April 1, 2016, the RSNs transitioned into BHOs. See term "[Behavioral Health Organization](#)".
- **Rural Health Clinics (RHCs):** the Rural Health Clinics program was established to stabilize access to outpatient primary care in underserved rural areas. Under the program, the U.S. Centers for Medicare & Medicaid Services (CMS) designate private and non-profit clinics meeting conditions for certification as Rural Health Clinics. RHCs are eligible for enhanced Medicare and Medicaid reimbursement.
- **Shared decision making:** a priority focus that stems from the practice transformation investment area, shared decision making is a collaborative method that allows patients and their providers to make health care decisions together. Through this method, providers will acquire skills and have access to high-quality tools that can actively engage patients and their families in their health care decisions.
- **Social Determinants of Health:** describes a set of factors surrounding health equity that contribute to a person's current state of health. These factors may be biological, socioeconomic, psychosocial, behavioral, or social in nature. [Go to the Social Determinants of Health web page](#).
- **State Health Care Innovation Plan (SCHIP):** this plan is the foundation for the Healthier Washington grant application. [Go to the SCHIP \(PDF\) document](#).
- **State Health Improvement Plan (SHIP):** active from 2014-2017, the State Health Improvement Plan focuses on what we know influences health in Washington, reaching beyond the traditional medical care and public health systems. The plan captures, aligns, and builds on many local, state, and national improvement plans and initiatives. [Go to the SHIP website](#).
- **Substance use disorder (SUD):** refers to the recurrent use of alcohol and/or drugs causing clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.

# Healthier Washington

## Glossary of Terms

- **Triple Aim:** a framework developed by the Institute for Health care Improvement that describes an approach to optimizing health system performance in the following areas:
  - Improving the patient experience of care (including quality and satisfaction)
  - Improving the health of populations
  - Reducing the per capita cost of health careAlso see term “[Quadruple Aim](#)”.
- **Upstream:** are interventions involving policy approaches that can affect large populations through regulation, increased access, or economic incentives.
- **Value-based payment:** a payment reimbursement method for health care services aimed at rewarding value (quality of health care), not volume (fee-for-service). [Go to an informational video about value-based payments](#).
- **Value-based purchasing:** means purchasing practices aimed at improving the value of health care services and health outcomes. Also see term “[pay for performance](#).”
- **Value-based Roadmap:** lays out how HCA will fundamentally change how it pays for health care to drive new models of care delivery that support population health. This roadmap combines major components of Healthier Washington. [Go to the Value-based Roadmap \(PDF\)](#).
- **Waiver:** see term “[Medicaid Transformation Demonstration](#)”.
- **Washington State Common Measure Set for Health Care Quality and Cost:** a way of tracking important elements of health and health care performance and is intended to inform public and private health care purchasing. [Go to the Washington State Common Measure Set for Health Care Quality and Cost website](#). Also see [WAcommunitycheckup.org](#)
- **Web Resource Portal:** a Practice Transformation Support Hub deliverable and a legislative mandate through House Bill 2572, the web-based clearinghouse is a website of resources for health care, mental health and substance use disorder providers that will support health transformation efforts in the following areas: integrating physical and behavioral health, moving from volume to value-based care, and improving population health by connecting providers to community resources. [Go to the Portal website](#).
- **Whole-person care:** means expanded health care delivery that links patients to comprehensive physical, behavioral and substance use disorder care. Examples of whole-person care can include nutrition, housing, child-care, neighborhood safety, chronic disease prevention, social supports, substance use, etc.