

Glossary

- AAC Austin Automation Center
The AAC is a federal data center. All Veterans Affairs (VA) data including the National Patient Care Database and Decision Support System (DSS) National Data Extracts are housed at AAC.
- ACRS Automated Customer Registration System
Researchers interested in accessing the VA DSS data must first get permission from ACRS. This permission is then recorded and automatically checked each time access is requested.
- APC Ambulatory Payment Classifications
The Centers for Medicare and Medicaid Services (CMS) was mandated through the Omnibus Budget Reconciliation Act of 1986 to develop a prospective payment system (PPS) for outpatient services. All services paid under the new PPS are classified into groups called Ambulatory Payment Classifications or APCs. Services in each APC are similar clinically and in terms of the resources they require. A payment rate is established for each APC. Depending on the services provided, hospitals may be paid for more than one APC for an encounter.
- AWP Average Wholesale Price
AWPs are a set of wholesale prices for pharmaceuticals. A common source of AWP information is *The Red Book* (see <http://www.medec.com/html/products/productdetail/redbook.html>).
- BID *bis in die*
This is a Latin term that means giving medication twice a day.
- BIRLS Beneficiary Information and Records Locator Subsystem
BIRLS is a set of databases that can be linked by social security number. With BIRLS, a researcher can gain information on veterans who died and obtained benefits from VA (for mortality studies), who received a monetary benefit for aid and attendance (to defray, perhaps, the cost of the Community Residential Care Program), who had accounts for VA educational benefits (to determine the extent of contact with VA for other services besides health care), type and amount of benefits paid to com-

- pensation and pension recipients (a rich source for sampling veterans), as well as many other issues.
- BPA** Blanket Purchase Agreement
BPA allows individual VA facilities to obtain additional discounts for particular medications. BPAs are negotiated with commitment volumes/quantities in mind, in exchange for additional price consideration, as well as additional value-added programs and services. Many agreements are negotiated for specific customer groups under the VA Federal Supply Schedule program, depending on tracking requirements and interest within the customer group.
- CAC** Cost Adjusted Charges
Charges are often obtained from hospital bills or from discharge data. Charges are frequently higher than actual costs. We can adjust the charges to reflect the actual amount of resources used by multiplying reported charges by a hospital-level cost-to-charge ratio. We refer to the adjusted charges as CAC.
- CCS** Clinical Classifications Software
CCS is a tool for clustering patient diagnoses and procedures into clinically meaningful categories. This software was developed by the Agency for Healthcare Quality and Research (see <http://www.ahrq.gov/data/hcup/ccs.htm>).
- CDA** Cost Distribution Account
The VA Cost Distribution Report includes patient care departments such as medicine, admitting and screening, or ambulatory surgery. It also includes services related to indirect costs such as building management. Expenditures for these departments are listed in CDAs.
- CDR** Cost Distribution Report
The CDR is routinely prepared by all VA medical centers. The CDR represents an estimate of the costs expended by each VA patient care department. The data in the CDR come from the Financial Management System.
- CMOPs** Consolidated Mail Outpatient Pharmacies
The VA has seven mail-order distribution centers for pharmaceuticals known as CMOPs.
- CMS** Centers for Medicare and Medicaid Services (formerly Health Care Financing Agency)
CMS is the federal agency within the U.S. Department of Health and Human Services that runs the Medicare and Medicaid programs. CMS works to make sure that the beneficiaries in these programs are able to get high-quality health care (see www.cms.gov).

COPD	<p>Chronic Obstructive Pulmonary Disease</p> <p>COPD is composed primarily of two related diseases: chronic bronchitis and emphysema. In both diseases, the flow of air through the airways and out of the lungs is obstructed. The condition is permanent and worsens over time.</p>
CPI	<p>Consumer Price Index</p> <p>CPI comprises data on changes in the prices paid by consumers for a representative basket of goods and services.</p>
CPRS	<p>Computerized Patient Record System</p> <p>CPRS is one component of the larger clinical and management information system known as the Veterans Health Information Systems and Technology Architecture (VISTA).</p>
CPT	<p>Current Procedural Terminology</p> <p>CPT codes were developed by the American Medical Association in 1966. Each year, an updated publication is prepared to reflect updates in medical technology and practice. The 2002 version of CPT contained 8,107 codes and descriptors. VA uses CPT codes to identify ambulatory care procedures.</p>
CSP	<p>Cooperative Studies Program</p> <p>CSP encourages and supports VA investigators to conduct clinical research and data collection across selected research facilities. CSP conducts multicenter studies to provide a natural resource to the VA health care community and beyond.</p>
DAP	<p>Drug Accountability Package</p> <p>DAP is software that is part of VISTA, and it is responsible for tracking current drug costs.</p>
DRG	<p>Diagnostic Related Group</p> <p>DRG is a classification system for inpatient care. DRG assignment is based on six factors: (1) principal diagnosis, (2) secondary diagnosis, (3) surgical factors, (4) age, (5) sex, and (6) discharge status. Under the PPS, hospitals are paid a set fee for treating patients in a single DRG category, regardless of the actual cost of care for the individual.</p>
DSS	<p>Decision Support System</p> <p>DSS is a set of programs that use relational databases to provide information needed by managers and clinicians, including the cost of specific patient care encounters.</p>
E&M	<p>Evaluation and Management</p> <p>E&M is a set of CPT codes that refer to evaluation and management services.</p>

FCP	<p>Federal Ceiling Price</p> <p>This is a federal price schedule for pharmaceuticals available to the Big 4: VA, the Department of Defense, the Coast Guard, and the Public Health Services.</p>
FMS	<p>Financial Management System</p> <p>FMS tracks VA expenditures by “cost center.” VA expenditures are recorded in a general ledger—an accounting entity that corresponds to a VA service.</p>
FSS	<p>Federal Supply Schedule</p> <p>FSS is a multiple-award, multiyear federal contract that is available for use by any federal government agency. It satisfies all federal contract laws. Pricing is negotiated based on how vendors do business with their commercial customers. The FSS program also provides additional opportunities for savings to the customers with negotiated quantity and tier discounts.</p>
FY	<p>Fiscal Year</p> <p>The federal FY begins on October 1 and ends on September 30 of the following year. The convention is to refer to a federal FY by the year it ends; thus, FY98 represents the period 1 October 1997 to 30 September 1998.</p>
GHC	<p>Group Health Cooperative</p> <p>GHC is a nonprofit HMO that provides both care and coverage. It is a staff-model HMO as physicians are salaried employees.</p>
GLM	<p>Generalized Linear Model</p> <p>GLMs are a large class of statistical models for relating responses to linear combinations of predictor variables. Models for continuous variable, rates, and proportions; binary, ordinal, and multinomial variables; and counts can be handled as GLMs. GLMs can also handle different error structures.</p>
HCFA	<p>Health Care Financing Agency (now CMS)</p> <p>As of 1 July 2001, HCFA was renamed CMS.</p>
HCPCS	<p>Health Care Financing Administration’s Common Procedure Coding System</p> <p>This system was developed to cover medical supplies, devices, and specialized services not represented by CPT codes.</p>
HCUP	<p>Healthcare Cost and Utilization Project</p> <p>HCUP is a family of health care databases and related software. HCUP databases bring together the data collection efforts of state data organizations, hospital associations, private data organizations, and the federal government to create a national information resource of patient-level health care data.</p>

HERC	<p>Health Economics Resource Center</p> <p>HERC is a national center that assists VA researchers in assessing the cost effectiveness of medical care, evaluating the efficiency of VA programs and providers, and conducting high-quality health economics research.</p>
HSR&D	<p>Health Services Research and Development Service</p> <p>This is one of the four research services within the VA Office of Research and Development.</p>
ICU	<p>Intensive Care Unit</p> <p>ICUs provide more intensive care to more severely ill patients. Accordingly, ICUs have greater personnel and facility costs. There are different types of ICUs (e.g., medical, coronary, surgical), but often the term <i>ICU</i> is used to refer to any of these categories.</p>
IRB	<p>Institutional Review Board</p> <p>IRBs review research protocols that involve human participants. They ensure the ethical and safe treatment of study participants.</p>
IRM	<p>Information Resource Management</p> <p>This is the service at each VA medical center that supports the local information technology and computer networks.</p>
IV	<p>Intravenous</p> <p>This is one of the common drug delivery methods (the other is oral). This involves administering the medication into a vein.</p>
JCAHO	<p>Joint Commission on Accreditation of Healthcare Organizations</p> <p>VA hospitals seek JCAHO accreditation. JCAHO's mission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.</p>
KP	<p>Kaiser Permanente</p> <p>KP is America's largest not-for-profit HMO. KP is composed of two organizations: the health maintenance organization and the Permanente physician group. KP is referred to as a group-model HMO.</p>
LOS	<p>Length of Stay</p> <p>This is the length, measured in number of days, of an inpatient hospital stay.</p>
MAC	<p>Maximum Allowable Cost</p> <p>MAC is a ceiling price for health care services such as medicines.</p>
MDC	<p>Major Diagnostic Category</p> <p>The MDC is a classification system that represents groups of similar DRGs. Each MDC typically involves the same organ system of the body.</p>

- MEDPAR** Medicare Provider Analysis Review File
The MEDPAR is a hospital discharge database containing records for Medicare beneficiaries who were discharged in a given year. The MEDPAR database is created by CMS.
- MEPS** Medical Expenditure Panel Survey
The MEPS is the third (and most recent) in a series of national probability surveys conducted by the Agency for Healthcare Research and Quality on the financing and use of medical care in the United States (see <http://www.meps.ahrq.gov>).
- MUMPS** Massachusetts General Hospital Utility Multiprogramming System
This is software developed for the lab system at Massachusetts General in 1966. VISTA is based on MUMPS. The four rules of MUMPS are (1) thou shalt not declare variable types or file sizes; (2) thou shalt not KILL, except for globals and variables; (3) thou shalt not covet thy neighbor's User Class Identifiers (UCI); and (4) remember string handling, for it shall make MUMPS special.
- NCHS** National Center for Health Statistics
NCHS, a division of the Centers for Disease Control, gathers and stores statistical data on health. It is responsible for several large-scale national health surveys.
- NDC** National Drug Code
The NDC serves as a universal product identifier for human drugs.
- NDE** National Data Extract
The NDE is a set of data sets generated from the VA DSS.
- NPCD** National Patient Care Database
NPCD is the integration of four existing Veterans Health Administration (VHA) databases into a single, patient-centric database. It is composed of the Patient Treatment File, Outpatient Care File, Integrated Patient Database (IPDB), and Event Driven Reporting (EDR) databases.
- OLS** Ordinary Least Square
This is the most common regression technique, and it uses least squares as the fitting criterion. Thus, OLS minimizes the sum of squared residuals, and the beta coefficients are the values at which this is achieved.
- OPC** Outpatient Care File
The OPC is an automated system for recording and tracking events associated with each VA patient's outpatient clinical progress. The OPC file is the principal source of outpatient workload data.
- PBM/SHG** Pharmacy Benefits Management Strategic Healthcare Group
PBM/SHG is composed of clinical pharmacists, data analysts, and administrative pharmacy personnel. PBM is partly responsible for facili-

- tating and coordinating the VA national formulary process (see <http://www.vapbm.org/PBM/menu.asp>).
- PRRTP Psychosocial Residential Rehabilitation Treatment Program
PRRTP is designed to provide a therapeutic residential environment often necessary to sustain outpatient treatment for psychiatric conditions and psychosocial readjustment. VA defines PRRTP as inpatient care, and it is often viewed as an alternative to specialty psychiatry and substance abuse inpatient care.
- PTF Patient Treatment Files
PTF is the principal source of inpatient workload data. The database contains abstracts of each VA patient's clinical care.
- PTSD Post-Traumatic Stress Disorder
PTSD is a psychiatric disorder that can occur following the experience or witnessing of life-threatening events such as military combat, natural disasters, and so forth.
- QUERI Quality Enhancement Research Initiative
The QUERI is mandated to translate research discoveries and innovations into better patient care of our nation's veterans and VA systems improvement.
- RBRVS Medicare Resource Based Relative Value Scale
RBRVS values are weights that are based on the time it takes to provide a service or to perform a procedure. They also reflect the minimum training required to provide a given service; this compensates providers for income lost during their years of training.
- RUG Resource Utilization Group
RUG is a validated instrument to measure nursing home residents' resource use. There are two primary versions: RUG II and RUG III.
- RVU Relative Value Unit
An RVU is a weight (e.g., RBRVS) that provides information on relative resource use.
- SE VA Outpatient Event File
SE refers to the VA Outpatient Event File SE version. It is a VA database for outpatient care.
- SMI Serious Mental Illness
SMI is defined as a condition affecting people age 18 and older who currently or at any time during the past year have had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the *Diagnostic and Statistical Manual of Mental Disorders* (4th ed.) that has resulted in functional impairment that substantially interferes with or limits one or more major life activities.

SSN	<p>Social Security Number</p> <p>The nine-digit SSN is divided into three parts. The first three digits are the area number. If your number was assigned before 1972 when social security cards were issued by local offices, the area number reflects the state where you applied for your number. If your number was assigned in 1972 or later, the area number reflects the state as determined by the ZIP code in the mailing address on your application for the number. The middle two digits are the group number. They have no special geographic or data significance but merely serve to break the number into conveniently sized blocks for orderly issuance. The last four digits are serial numbers. They represent a straight numerical sequence of digits from 0001 to 9999 within the group.</p>
TID	<p><i>ter in die</i></p> <p>This is a Latin phrase that means giving medication three times per day.</p>
UD	<p>Unit Dose</p> <p>Medications are often based on a UD order. The provider specifies the dosage, route, and schedule on the prescription.</p>
VA	<p>Department of Veterans Affairs</p> <p>VA has three main functions: to assist veterans in burial costs, to provide eligible veterans with medical care, and to provide eligible veterans with compensation/pension services. Among health researchers, VA is often used interchangeably with VHA.</p>
VHA	<p>Veterans Health Administration</p> <p>VHA is responsible for providing medical care to eligible veterans.</p>
VISN	<p>Veterans Integrated Service Network</p> <p>This is a geographically identified network of VA medical centers. The VA medical system consists of 22 VISNs that are focused on pooling and aligning resources to better meet local health care needs and to provide greater access to care.</p>
VISTA	<p>Veterans Health Information Systems and Technology Architecture</p> <p>VISTA is an automated environment that supports day-to-day operation at local VA health care facilities.</p>
WAC	<p>Wholesale Acquisition Cost</p> <p>WAC is a pricing term meant to approximate what a drug wholesaler pays a manufacturer for a drug. A pharmacy's actual cost would presumably be slightly higher, since it would have to pay the wholesaler a markup.</p>