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DEFINITIONS AND ACRONYMS

Abuse – the inappropriate use of public funds by either a provider or recipient.

AOTA - American Occupational Therapy Association, Inc.

ASHA - American Speech-Language-Hearing Association.

Assessment - the collection and synthesis of information and activities to determine the state of a child's health plus any delays or problems in the child's cognitive, social, emotional, and physical development.

Assistive Technology Device - any item, piece of equipment, or product system used to increase, maintain, or improve the functional capabilities of a child with a disability. This does not include convenience items but covers medically necessary assistance achieved through the use of assistive technology.

At Risk - refers to children who are more likely to have substantial development delays if early intervention services are not provided.

Audiology Services – are services for the identification of children with auditory impairment using at risk criteria and appropriate screening techniques.

Bureau of Health Services Financing (BHSF) – the Bureau within the Department of Health and Hospitals responsible for the administration of the Louisiana Medicaid Program.

Case Management/Support Coordination - services provided to eligible recipients to help them gain access to the full range of needed services including medical, social, educational, and other support services.

Centers for Medicare and Medicaid Services (CMS) – the federal agency charged with overseeing and approving states' implementation and administration of the Medicaid and Medicare programs.

CMS 1500 - the universal claim form used to bill Medicaid services.

Cost Avoidance - term referring to avoiding the payment of Medicaid claims when other insurance resources are available to the Medicaid recipient.

COTA - Certified Occupational Therapy Assistant

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Department of Health and Hospitals (DHH) – the state agency responsible for administering the Medicaid program and other health-related services including public health, behavioral health and developmental disabilities.

Developmental Disability (DD) - a severe, chronic disability of a person attributed to a mental and/or physical disability that has an onset before age 22 and is likely to continue indefinitely and results in substantial functional limitation in three or more of the major life activities.

Diagnosis - the determination of the nature and cause of the condition requiring attention.

Diagnostic services - any medical procedures recommended by a physician or other licensed practitioner to enable him to identify the existence, nature, or extent of illness, injury, or other health deviation in a recipient.

Early Intervention Services - services provided to children, birth through age two, who are experiencing developmental delays or have diagnosed conditions that may lead to developmental delays designed to meet the developmental needs of each child and provided under public supervision by qualified personnel in conformity with an individualized family services plan. In Louisiana, these services are provided through the EarlySteps program with the Department of Health and Hospitals.

Early and Periodic Screening, Diagnosis and Treatment (EPSDT) - a federally mandated cluster of preventive health, diagnosis, and treatment services for Medicaid eligible children age 0-21.

EarlySteps (Infants and Toddlers with Disabilities) - individuals from birth through age two who need early intervention services because they are experiencing developmental delays or have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.

Evaluation - the process of collecting and interpreting data obtained through observation, interview, record review, or testing.

EMC - Electronic Media Claim.

Family Service Coordination - An active process for implementing the IFSP that promotes and supports a family's capacities and competencies to identify, obtain, coordinate, monitor, and evaluate resources and services to meet needs. This service is provided through an enrolled agency and may also be called support coordination or case management.

Federal Poverty Level - a measure used by the federal government to denote a survival level of family income. It varies by family size. The figures are revised annually. The poverty income

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guidelines are used for administrative purposes as a set standard to determine eligibility for public assistance.

Fiscal Intermediary - the private fiscal agent with which DHH contracts to operate the Medicaid Management Information System. It processes the Title XIX (Medicaid) claims for services provided under the Medical Assistance Program and issues appropriate payment(s).

Fraud - an aspect of law. The definition that governs between citizens and agencies is found in Louisiana R.S. 14:67 and Louisiana R.S. 14:70.01. For further explanation, see Chapter 1 of the Medicaid Manual for further information.

ICN - Internal Claim Number.

Individual Education Program (IEP) - Program that meets all the requirements of IDEA and Bulletin 1706 and includes all special educational and related services necessary to accomplish comparability of educational opportunity between exceptional children and children who are not exceptional.

Individualized Family Service Plan (IFSP) - a written plan for providing early intervention services to a child and the child's family who is eligible under IDEA Part C.

Individuals with Disabilities Education Act (IDEA) - originally known as the Education of the Handicapped Act.

Local Education Agency (LEA) - the organization in charge of public schools in a particular geographic area.

Major Life Activities – are daily living activities that include self-care, receptive expressive language, mobility, self-direction, capacity for individual living and economic self-sufficiency.

Medicaid - a federal-state medical assistance entitlement program provided under an approved State Plan authorized under Title XIX of the Social Security Act.

Medicaid Agency - is the single state agency responsible for the administration of the Medical Assistance Program (Title XIX). In Louisiana, the Bureau of Health Services Financing within the Louisiana Department of Health and Hospitals is the single state Medicaid agency. It is sometimes referred to as the Louisiana Medicaid Program.

Medicaid Management Information System (MMIS) - the computerized claims processing and information retrieval system for the Medicaid Program. This system is an organized method for payment for claims for all Medicaid covered services. It includes all Medicaid providers and eligible recipients.

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OBRA '89 - Omnibus Budget Reconciliation Act of 1989 that expanded Medicaid eligibility and EPSDT services.

Occupational Therapy (OT) Services - services that address the functional needs of a child related to the performance of self-help skills, adaptive behavior, play and sensory, motor, and postural development.

OTA - Occupational Therapy Assistant.

OTR - Registered Occupational Therapist.

Pay and Chase - method of payment where Medicaid pays the recipient's medical bills and then pursues reimbursement from liable health insurance company(s) and other liable third parties.

PCA - Personal Care Attendant.

PCCM - Primary Care Case Management.

Primary Care Physician (PCP) - the physician that serves as the recipient's family doctor, providing basic primary care, referral and after-hours coverage.

Physical Therapy (PT) Services - services designed to improve the child's movement dysfunction.

Preventive Services - services provided by a physician or other licensed practitioner to prevent disease, disability, and other health conditions or their progression, to prolong life. These services include screening and immunizations.

Prior Authorization (PA) - a request for approval for payment of service must be made by the provider before rendering the service.

Provider - health professionals enrolled in Medicaid who perform and/or deliver medically necessary services and/or supplies for eligible Medicaid recipients.

Psychological Services - obtaining, integrating, and interpreting information about child behavior, and child and family conditions related to learning, mental health, and development and planning and managing a program of psychological counseling for children and family based on the results of the information.

Recipient - a Medicaid eligible individual.

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Remittance Advice (RA) - a control document that informs the provider of the current status of submitted claims.

Related Services - services provided in the education system only when it can be documented that the student needs or requires the services to benefit from the education program. These services include but are not limited to interpreter services, orientation and mobility training, audiological services, health services, speech therapy, counseling, and occupational or physical therapy. Medicaid reimburses for speech therapy, occupational therapy, physical therapy, audiology and psychology services through the EPSDT Health Services Program.

REOMB - Recipient's Explanation of Medical Benefits.

Screening Services - the use of standardized tests given under medical direction in an individual or the mass examination of a designated population to detect the existence of one or more particular diseases or health deviations or to identify for more definitive studies individuals suspected of having certain diseases.

Speech/Language Pathology - identifies children with communicative or oropharyngeal disorders and delays in development of communication skills including diagnosis and appraisal of specific disorders and delays in those skills.

State Plan - documents submitted by a state setting forth how it will use federal funds and conform to federal regulations. The plan must be approved by federal officials.

SURS - Surveillance Utilization Review System.

Title XIX - see Medicaid.

TPL - Third-Party Liability.

Treatment - the provision of services medically necessary to control or correct diagnosed conditions.