

APPENDIX A: GLOSSARY AND COMMON ACRONYMS

Glossary

Term	Abbreviation	Definition
Active Disease Diagnosis		Physician-documented diagnosis (or a nurse practitioner-, physician assistant-, or clinical nurse specialist-documented diagnosis if allowable under state licensure laws) at the time of assessment.
Admission and Discharge Reporting		LTCH CARE Data Set assessments that include a select number of items from the LTCH CARE Data Set used to gather important quality data for LTCH patients at transition points, such as when they enter or leave a LTCH. Admission/Discharge reporting includes Admission, Discharge, and Expired assessments.
Admission Date		The date a person enters the LTCH and is admitted as a patient. A day begins at 12:00 a.m. and ends at 11:59 p.m. Regardless of whether admission occurs at 12:00 a.m. or 11:59 p.m., this date is considered the first day of admission.
Assessment Period		A specified period of time over which a specific aspect of patient assessment, or his/her condition or status, is captured by the LTCH CARE Data Set assessment. The assessment period ends on the ARD
Assessment Reference Date	ARD	The end point of the assessment period for the LTCH CARE Data Set assessment record.
Assessment Submission and Processing System	ASAP	The CMS system that receives submissions of LTCH CARE Data Set assessment records, validates records for accuracy and appropriateness, and stores validated records in the ASAP database.
Body Mass Index	BMI	Number calculated from a person's weight and height. BMI is a reliable indicator of body fat and is used as a screening tool to identify possible weight problems for adults.
Browser		A program that allows access to the Internet or a private intranet site. A browser with 128-bit encryption is necessary to access the Centers for Medicare & Medicaid Services (CMS) intranet to submit data or retrieve reports.

Term	Abbreviation	Definition
Centers for Medicare & Medicaid Services	CMS	CMS is the Federal agency that administers the Medicare, Medicaid, and Child Health Insurance Programs.
CMS Certification Number	CCN	This is the hospital's identification number and is linked to its Medicare provider agreement. The CCN is used for CMS certification, submitting and reviewing the hospital's cost reports, and assessment-related activities.
Code of Federal Regulations	CFR	A codification of the general and permanent rules published in the Federal Register by the Executive departments and agencies of the Federal Government.
Comatose (Coma)		Pathological state in which neither arousal (wakefulness, alertness) nor awareness exists. The person is unresponsive and cannot be aroused; he or she may or may not open his or her eyes, does not speak, and does not move his or her extremities on command or in response to noxious stimuli (e.g., pain).
Community Residential Setting		A private home, apartment, board and care, assisted living facility, group home, or adult foster care. A community residential setting is defined as any house, condominium, or apartment in the community whether owned by the patient or another person, retirement communities, or independent housing for the elderly. Also included in this category are non-institutional community residential settings that provide the following types of services: home health, homemaker/personal care, or meals.
Constipation		A condition of more than short duration where someone has fewer than three bowel movements a week or stools that are usually hard, dry, and difficult and/or painful to eliminate.
Continence		Any void into a commode, urinal, or bedpan that occurs voluntarily or as a result of prompted toileting, assisted toileting, or scheduled toileting.
Discharge Assessment		An assessment required on patient discharge. A discharge assessment may be planned or unplanned.

Term	Abbreviation	Definition
Discharge Date		The date a patient leaves the LTCH. A day begins at 12:00 a.m. and ends at 11:59 p.m. Regardless of whether discharge occurs at 12:00 a.m. or 11:59 p.m., this date is considered the actual date of discharge. For the Expired Assessment, the date of death should be the same as the discharge date.
Epithelial Tissue		New skin that is light pink and shiny (even in persons with darkly pigmented skin). In Stage 2 pressure ulcers, epithelial tissue is seen in the center and edges of the ulcer. In full thickness Stage 3 and 4 pressure ulcers, epithelial tissue advances from the edges of the wound.
Eschar		Dead or devitalized tissue that is hard or soft in texture; usually black, brown, or tan in color, and may appear scab-like. Necrotic tissue and eschar are usually firmly adherent to the base of the wound and often the sides/edges of the wound.
Expired Assessment		The assessment that is completed when a patient dies in the facility, or dies during an interrupted stay of less than 3 calendar days.
Facility ID	FAC_ID	The facility identification number is assigned to each LTCH by the QIES ASAP system. The FAC_ID must be placed in the individual LTCH CARE Data Set and tracking form records. This normally is completed as a function within the facility's LTCH CARE Data Set data entry software.
Fatal File Error		An error in the LTCH submission file format that causes the entire file to be rejected, therefore, the individual assessment records in the submission file are not validated or stored in the ASAP database. The Submitter Final Validation Report identifies Fatal File Error(s). The LTCH must contact its software support to resolve the problem with the submission file. Once the submission file problem is resolved, the submission file and associated LTCH CARE Data Set Assessment records must be resubmitted.
Fatal Record Error		An error in a LTCH CARE Data Set assessment record that results in the assessment record being rejected. The Final Validation Report lists the assessment records that were rejected. The LTCH must correct error(s) on each assessment record that was rejected and resubmit.

Term	Abbreviation	Definition
Fecal Impaction		A mass of dry, hard stool that can develop in the rectum due to chronic constipation. Watery stool from higher in the bowel or irritation from the impaction may move around the mass and leak out, causing soiling, often a sign of a fecal impaction or obstruction.
Federal Register		The official daily publication for rules, proposed rules, and notices of Federal agencies and organizations, as well as Executive Orders and other Presidential Documents. It is a publication of the National Archives and Records Administration, and is available by subscription and online.
Final Validation Report	FVR	A report generated after the successful submission of LTCH CARE Data Set assessment record files. This report lists all of the patients for whom assessments have been submitted in a particular submission batch, and displays all errors and/or warnings that occurred during the validation process. Each individual record is listed on the FVR as “accepted” or “rejected”. Accepted records are added to the ASAP database. Rejected records are not added to the ASAP database and must be corrected and re-submitted.
Fluctuance		The texture of wound tissue indicative of underlying unexposed fluid.
Granulation Tissue		Red tissue with “cobblestone” or bumpy appearance, bleeds easily when injured.
Health Insurance Portability and Accountability Act of 1996	HIPAA	Federal law that gives the Department of Health and Human Services (DHHS) the authority to mandate regulations that govern privacy, security, and electronic transactions standards for health care information.
Home Health Agency	HHA	An organization that gives home care services, like skilled nursing care, physical therapy, occupational therapy, speech therapy, and personal care by home health aides.
Hospice		A program for terminally ill persons. Hospice care involves a team-oriented approach that addresses the medical, physical, social, emotional, and spiritual needs of the patient. Hospice also provides support to the patient’s family or caregiver.

Term	Abbreviation	Definition
Hospital Emergency Department		An organized hospital-based facility for the provision of unscheduled or episodic services to patients who present for immediate medical attention.
ID/DD Facility		An institution that is engaged in providing, under the supervision of a physician, any health and rehabilitative services for individuals who are intellectually disabled (ID) or who have developmental disabilities (DD).
Inactivation		A type of correction allowed under the LTCH CARE Data Set Correction Policy. When an erroneous record has been accepted into the ASAP database, an inactivation request is required. This removes the erroneous record from the active file to an archive (history file). A new record to replace the removed record must be completed and submitted to the QIES ASAP system.
Inpatient Rehabilitation Facility or Unit	IRF	A hospital, or a distinct unit, that provides an intensive rehabilitation program to inpatients.
International Classification of Diseases – Clinical Modification	ICD-CM	Official system of assigning codes to diagnoses associated with hospital utilization in the United States. The ICD-CM contains a numerical list of the disease code numbers in tabular form, an alphabetical index to the disease entries. ICD-10-CM will replace ICD-9-CM (diagnoses) on October 1, 2014.
Item Set		LTCH CARE Data Set items that are active on a particular assessment type.
Legal Name		Patient's name as it appears on the Medicare card. If the patient is not enrolled in the Medicare program, the patient's name as it appears on a Medicaid card or other government-issued document is used.
Long-Term Care Facility		An institution that is primarily engaged in providing medical and non-medical care to people who have a chronic illness or disability. These facilities provide care to people who cannot be cared for at home or in the community. Long-term care facilities provide a wide range of personal care and health services for individuals who cannot take care of themselves due to physical, emotional, or mental health issues. The provision of non-skilled care and related services for residents in long-term care can include, but are not limited to: supportive services such as dressing, bathing, using the bathroom, diabetes monitoring, and medication administration.

Term	Abbreviation	Definition
Long-Term Care Hospital	LTCH	An acute-care hospital that provides treatment for patients who stay, on average, more than 25 days. Most patients are transferred from an intensive or critical care unit. Services provided include comprehensive rehabilitation, respiratory therapy, head trauma treatment, and pain management.
Long-Term Care Hospital Continuity Assessment Record and Evaluation Data Set	LTCH CARE Data Set	A core set of data elements, including common definitions and coding categories that form the foundation of the required assessment for all patients treated in hospitals that are certified to participate in Medicare and designated as LTCHs certified to participate in Medicare. This core set of data elements is used to collect data to inform the quality measures required by the LTCH Quality Reporting Program.
LTCH Assessment Submission Entry and Reporting	LASER	A free, Java-based application that provides an options for facilities to collect and maintain facility, patient, and LTCH CARE Data Set Assessment information for subsequent submission to the appropriate national data repository.
LTCH CARE Data Set Assessment Scheduling		The process of setting the ARD as well as calculating the last possible day for completion and day of submission to the Quality Improvement Evaluation System (QIES) Assessment Submission and Processing (ASAP) system.
LTCH CARE Data Set Assessment Submission		Assessment Submission refers to electronic submission of the LTCH CARE Data Set Assessment data to the QIES ASAP System. The data is required to be in formats that conform to standard record layouts and data dictionaries, and pass standardized edits as defined by CMS and/or the State.
LTCH CARE Data Set Assessment Timing		Assessment Timing refers to when assessments must be conducted. Assessment timing is <u>not</u> the same for all assessment types.
LTCH CARE Data Set Completion Date		The date at which all portions of the LTCH CARE Data Set have been completed. This is the date recorded at Z0500B.

Term	Abbreviation	Definition
LTCH CARE Data Set Submission Date		The date on which the completed Admission, Discharge, or Expired Assessment record is submitted to the QIES ASAP system.
Medicaid		A Federal and State program subject to the provisions of Title XIX of the Social Security Act that pays for specific kinds of medical care and treatment for low-income families.
Medicare		<p>A health insurance program administered by CMS under provisions of Title XVIII of the Social Security Act for people aged 65 and over, for those who have permanent kidney failure, and for certain people with disabilities.</p> <p>Medicare Part A: The part of Medicare that covers inpatient hospital services and services furnished by other institutional health care providers, such as nursing facilities, home health agencies, and hospices.</p> <p>Medicare Part B: The part of Medicare that covers services of doctors, suppliers of medical items and services, and various types of outpatient services.</p>
Medicare Number (or Comparable Railroad Insurance Number)		An identifier assigned to an individual for participation in a national health insurance program. The Medicare Health Insurance identifier may differ from the patient's SSN, and may contain both letters and numbers. For example, many patients receive Medicare benefits based on a spouse's Medicare eligibility. This number may also be referred to as the Health Insurance Claim (HIC) number.
Modification		A type of correction allowed under the LTCH CARE Data Set Correction Policy. A modification is required when a LTCH CARE Data Set record has been accepted by the ASAP database, but the information in the record contains errors. The modification will correct the record in the ASAP database.

Term	Abbreviation	Definition
Monitoring		The ongoing collection and analysis of information (such as observations and diagnostic test results) and comparison to baseline and current data in order to ascertain the individual's response to treatment and care, including progress or lack of progress toward a goal. Monitoring can detect any improvements, complications or adverse consequences of the condition or of the treatments; and support decisions about adding, modifying, continuing, or discontinuing, any interventions.
National Provider Identifier	NPI	A unique federal number that identifies providers of health care services. The NPI applies to the LTCH and all of its patients.
Necrotic Tissue		Dead or devitalized tissue categorized as eschar or slough. Necrotic tissue is usually firmly adherent to the base of the wound and often the sides/edges of the wound.
Non-Blanchable		Reddened areas of tissue that do not turn white or pale after pressed firmly with a finger or device
Non-Removable Dressing/Device		A dressing or device such as a primary surgical dressing that cannot be removed, an orthopedic device, or a cast.
On Admission		As close to the actual time of admission as possible.
Outpatient Services		A service received at a hospital outpatient department or community mental health center and that does not include an overnight stay
Persistent Vegetative State	PVS	PVS is an enduring situation in which an individual has failed to demonstrate meaningful cortical function but can sustain basic body functions supported by noncortical brain activity.
Planned Discharge		A discharge where the patient is nonemergently, medically released from care at the LTCH due to some reason arranged for in advance.
Prospective Payment System	PPS	A method of reimbursement in which Medicare payment is made based on a predetermined, fixed amount. The payment amount for a particular service is derived based on the classification system of that service (for example, DRGs for inpatient hospital services).
Psychiatric Hospital		An institution that provides, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mentally ill patients.

Term	Abbreviation	Definition
Quality Improvement and Evaluation System	QIES	The umbrella system that encompasses collection and reporting of LTCH CARE Data Set assessment data, as well as data for other providers such as SNFs, IRFs, and home health agencies. .
Quality Measure	QM	Tools that help measure or quantify healthcare processes, outcomes, patient perceptions, and organizational structure and/or systems that are associated with the ability to provide high-quality health care and/or that relate to one or more quality goals for health care. These goals include: effective, safe, efficient, patient-centered, equitable, and timely care.
Short-Stay Acute Care Hospital		A hospital that is contracted with Medicare to provide acute inpatient care and accept a predetermined rate as payment in full.
Skilled Nursing Facility	SNF	A nursing facility with the staff and equipment for the provision of skilled nursing services, skilled rehabilitative services, and/or other related health services. This category includes swing bed hospitals, which are generally small, rural hospitals or critical access hospitals (CAH) participating in Medicare that have CMS approval to provide post-hospital SNF care and meet certain requirements.
Slough Tissue		Dead or devitalized (necrotic) tissue in the wound bed that is yellow, tan, gray, green, or brown; usually moist, can be soft, stringy, and mucinous in texture. Slough may be adherent to the base of the wound or present in clumps throughout the wound bed.
Social Security Number		A tracking number assigned to an individual by the U.S. Federal government for taxation, benefits, and identification purposes.
Stage 1 Pressure Ulcer		An observable, pressure-related alteration of intact skin, whose indicators as compared to an adjacent or opposite area on the body may include changes in one or more of the following parameters: skin temperature (warmth or coolness); tissue consistency (firm or boggy); sensation (pain, itching); and/or a defined area of persistent redness in lightly pigmented skin, whereas in darker skin tones, the ulcer may appear with persistent red, blue, or purple hues.

Term	Abbreviation	Definition
Stage 2 Pressure Ulcer		Partial thickness loss of dermis presenting as a shallow open ulcer with a red-pink wound bed, without slough. May also present as an intact or open/ruptured blister
Stage 3 Pressure Ulcer		Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscle is not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining or tunneling.
Stage 4 Pressure Ulcer		Full thickness tissue loss with exposed bone, tendon or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.
State Provider Number		Medicaid Provider Number established by a state.
Submission Confirmation Page		The initial feedback generated by the ASAP system after an LTCH CARE Data Set data file is electronically submitted. This page acknowledges receipt of the submission file, but does not examine the file for any warnings and/or errors. Warnings and/or errors are provided on the Final Validation Report.
Suspected Deep Tissue Injury		Purple or maroon area of discolored intact skin due to damage of underlying soft tissue. The area may be preceded by tissue that is painful, firm, mushy, boggy, warmer or cooler as compared to adjacent tissue.
System of Records	SOR	Standards for collection and processing of personal information as defined by the Privacy Act of 1974.
Tunneling		A channel that can extend in any direction from a wound into and through subcutaneous tissue or muscle. Tunneling is commonly associated with infection that has resulted in tissue.
Undermining		The destruction of tissue underlying intact skin along wound margins.

Term	Abbreviation	Definition
Unplanned Discharge		<ul style="list-style-type: none"> • A transfer of the patient to be admitted to another hospital/facility, that results in the patient's absence from the LTCH (for longer than 3 days, including the date of transfer); or • A transfer of the patient to an emergency department of another hospital in order to either stabilize a condition or determine if an acute-care admission is required based on emergency department evaluation, which results in the patient's absence from the LTCH for greater than 3 days; or • When a patient unexpectedly leaves the LTCH against medical advice; or • When a patient unexpectedly decides to go home or to another setting (e.g., due to the patient deciding to complete treatment in an alternate setting). • Does not include <i>planned transfers</i> to an acute-care inpatient hospital for admission for a planned intervention, treatment, or procedure, unless the patient does not return to the LTCH within 3 days.
Worsening in Pressure Ulcer Status		<p>Pressure ulcer “worsening” is defined as a pressure ulcer that has progressed to a deeper level of tissue damage and is therefore staged at a higher number using a numerical scale of 1-4 (using the staging assessment determinations assigned to each stage; starting at the stage 1, and increasing in severity to stage 4) on an assessment as compared to the previous assessment. For the purposes of identifying the absence of a pressure ulcer, zero pressure ulcers is used when there is no skin breakdown or evidence of damage.</p>

Common Acronyms

Acronym	Definition
ADLs	Activities of Daily Living
ARD	Assessment Reference Date
ASAP	Assessment Submission and Processing
BMI	Body mass index
CFR	Code of Federal Regulations
CMS	Centers for Medicare and Medicaid Services
CCN	CMS Certification Number
CY	Calendar Year
FAC_ID	Facility ID (for LTCH CARE Data submission)
FR	Final Rule
FVR	Final Validation Report (for LTCH CARE Data submission)
FY	Fiscal Year
HIPAA	Health Insurance Portability and Accountability Act of 1996
ICD	International Classification of Diseases
ICD-CM	International Classification of Diseases, Clinical Modification
ISC	Item Set Code
LASER	LTCH Assessment Submission Entry and Reporting
LTCH	Long-Term Care Hospital
LTCHQR Program	Long-Term Care Hospital Quality Reporting Program
NPI	National Provider Identifier
OMB	Office of Management and Budget
PPS	Prospective Payment System
PVS	Persistent Vegetative State
QIES	Quality Improvement and Evaluation System
SNF	Skilled Nursing Facility
SOR	Systems of Records