

Acronym	Name	Description
ARRA	American Recovery and Reinvestment Act	<p>Recovery Act has three immediate goals:</p> <ul style="list-style-type: none"> • Create new jobs and save existing ones • Spur economic activity and invest in long-term growth • Foster unprecedented levels of accountability and transparency in government spending <p>The Recovery Act intends to achieve those goals by:</p> <ul style="list-style-type: none"> • Providing \$288 billion in tax cuts and benefits for millions of working families and businesses • Increasing federal funds for education and health care as well as entitlement programs (such as extending unemployment benefits) by \$224 billion • Making \$275 billion available for federal contracts, grants and loans • Requiring recipients of Recovery funds to report quarterly on how they are using the money. All the data is posted on Recovery.gov so the public can track the Recovery funds.
CAQH	Council for Affordable Quality Healthcare	an unprecedented nonprofit alliance of health plans and trade associations, is a catalyst for industry collaboration on initiatives that simplify healthcare administration
CCD	Continuity of Care Document	The Continuity of Care Document (CCD) is built using HL7 Clinical Document Architecture (CDA) elements and contains data that is defined by the ASTM Continuity of Care Record (CCR). It is used to share summary information about the patient within the broader context of the personal health record.
CCR	Continuity of Care Record	A standard specification being developed jointly by ASTM International, the Massachusetts Medical Society (MMS), the Health Information Management and Systems Society (HIMSS), and the American Academy of Family Physicians (AAFP).
CMS	Centers for Medicare and Medicaid Services	A federal agency within the United States Department of Health and Human Services (HHS) that administers the Medicare program and works in partnership with state governments to administer Medicaid, the State Children's Health Insurance Program (CHIP), and health insurance portability standards (HIPAA)
COB	Coordination of Benefits	Coordination of benefits is a practice which is used to ensure that insurance claims are not paid multiple times when someone is insured under multiple insurance plans.
Consumer	Consumer	Any actual or potential recipient of health care, such as a patient in a hospital, a client in a community mental health center, or a member of a prepaid health maintenance organization
COV-HIE	Commonwealth of Virginia Health	A services gateway to be created under contract from VDH to a non-profit Governance Body and

	Information Exchange	various technology and services vendors to serve the health information exchange needs of all stakeholders in the Commonwealth of Virginia. COV-HIE is a temporary name, the contracted Governance Body will define official name and branding for the network.
CRM	Customer Relationship Management	An information industry term for methodologies, software, and usually Internet capabilities that help an enterprise manage customer relationships in an organized way.
DMAS	Department of Medical Assistance Services	DMAS is the agency that administers Medicaid and the State Children's Health Insurance Program (CHIP) in Virginia.
E- scan	Environmental Scan	Process of gathering, analyzing, and dispensing information for tactical or strategic purposes
EHR	Electronic Health Record	A longitudinal electronic record of patient health information generated by one or more encounters in any care delivery setting, including patient demographics, progress notes, problem lists, vital signs, past medical history, review of systems, immunizations, laboratory data, radiology reports, and other components of medical records
EMR	Electronic Medical Record	A computerized legal medical record created in an organization that delivers care, such as a hospital and doctor's surgery
ESB	Enterprise Service Bus	Consists of a software architecture construct which provides fundamental services for complex architectures via an event-driven and standards-based messaging-engine (the bus)
FQHC	Federally Qualified Health Centers	Public and private non-profit health care organizations that meet certain criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(l)(2)(B) of the Social Security Act and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).
HIE	Health Information Exchange	The mobilization of healthcare information electronically across organizations within a region, community or hospital system
HIT I-APD	Health Information technology Implementation Advance Planning Document	Plan of action that requests Federal matching funds and approval to acquire and implement the proposed SMHP services, equipment, or both.
HITAC	Health Information Technology Advisory Commission	Consists of members appointed by the chair in consultation with the Secretary of Technology and represents broad stakeholder engagement in health information technology and exchange
HITECH	Health Information Technology for Economic and Clinical Health Act	Federal Act that amends Public Health Service Act by adding a number of funding opportunities to advance health information technology. The Act seeks to improve American health care delivery and patient care through an unprecedented investment in health information technology.

HITSAC	Health Information Technology Standards Advisory Committee	Advises the Information Technology Investment Board (ITIB) on the approval of nationally recognized technical and data standards for HIT systems or software
HITSP	Health Information Technology Standards Panel	Serve as a cooperative partnership between the public and private sectors for the purpose of achieving a widely accepted and useful set of standards specifically to enable and support widespread interoperability among healthcare software applications, as they will interact in a local, regional and national health information network for the United States.
HRSA	Health Resources and Services Administration	Is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable
LOINC	Logical Observation Identifiers Names and Codes	Facilitate the exchange and pooling of clinical results for clinical care, outcomes management, and research by providing a set of universal codes and names to identify laboratory and other clinical observations
MITA	Medicaid Information Technology Architecture	A national framework supporting improved systems development and health care management for the Medicaid enterprise
MMIS	Medicaid Management Information System	An integrated group of procedures and computer processing operations (subsystems) developed at the general design level to meet principal objectives
MPI	Master Patient Index	The MPI system is characterized by a structured format that permits instantaneous access to medical patient records and eliminates all paper medical records, allowing accurate, quick documentation and retrieval of patients' visits.
NHIN	Nationwide Health Information Network	Set of standards, services and policies that enable secure health information exchange over the Internet.
NLR	National Level Repository	Used to track incentive payments to health care providers that adopt electronic health records and modernize their computer systems.
NTIA	National Telecommunications and Information Administration	An agency in the U.S. Department of Commerce that serves as the executive branch agency principally responsible for advising the President on telecommunications and information policies
PPCP	Priority Primary Care Provider	Defined in the Virginia HIT Regional Extension Center contract with ONC as providers practicing internal medicine, family practice, Ob/Gyn and pediatrics in groups of 10 or fewer, unless they serve uninsured/underinsured patients
QIO	Quality Improvement Organizations	Improve the effectiveness, efficiency, economy, and quality of services delivered to Medicare beneficiaries.
QoC	Quality of Care	Metric typically associated with measuring patient outcomes, positive or negative. Can be gathered for purely statistical analyses or as part of a program of continuous improvement in

		healthcare provider or payer organizations.
RFP	Request for Proposal	"Official" statement to vendors about the services you require
RLS	Record Locator Service	Holds information authorized by the patient about where authorized information can be found, but not the actual information the records may contain.
SDE	State Designated Entity	In reference to the contractual relationship between a state and ONCHIT for the funding grants for statewide health information exchange, when a state abdicates contractual control of the funding and statewide health information exchange to a third party, typically an existing Health Information Exchange within the state. The Commonwealth of Virginia does NOT have an SDE. The responsible agency to ONCHIT for the duration of grant funding being received for statewide health information exchange is the Virginia Department of Health.
SLA	Service Level Agreement	A part of a service contract where the level of service is formally defined
SMHP	State Medicaid HIT Plan	A plan describing how a state's Medicaid Services agency intends to implement and promote Health IT, especially in light of meaningful use requirements as defined by CMS.
SOA	Service Oriented Architecture	A flexible set of design principles used during the phases of systems development and integration
SPIDeR	Systems Partnering in a Demographic Repository (SPIDeR)	SPIDeR is a query application created to serve all staff members of DSS. The secure web-based application enables a User to sign-on to SPIDeR using a single sign-on to query an individual and/or all case members in multiple systems, at once, in real time. The results of each query will display as one composite view.
SS-A	State Self- Assessment	The process by which a state performs an assessment of health IT maturity in both the public and private sector within its borders. Can also be referred to as an environmental scan.
SSL	Security Socket Layer	Cryptographic protocols that provide security for communications over networks such as the Internet
VDH	Virginia Department of Health	The Commonwealth of Virginia's Health Department
VHEN	Virginia Health Exchange Network	A collaboration of Virginia health plans and systems dedicated to lowering administrative costs in healthcare convened by the Virginia Association of Health Plans (VAHP), The Virginia Hospital and Healthcare Association (VHHA), and the Governor's Office of Health IT.
VHIT REC	Virginia HIT Regional Extension Center	The organization offering technical assistance, guidance and information on best practices to support and accelerate health care providers' efforts to become meaningful users of electronic health records (EHRs) in Virginia.

