Frequently Used Acronyms

Acronyms can have different meanings in different areas of the business. Documented below are acronyms used in Author Operational areas. Included are business and IT acronyms.

|  |  |  |  |
| --- | --- | --- | --- |
| Functional Area | XXX Dept | Systems Used | xxxx |
| Role | Name | Reports | xxxxxx |

**Acronyms**

| **Acronym** | **Represents** | **Definition** |
| --- | --- | --- |
| ACD | Advanced Coverage Determination |  |
| AE | Automatic Enrollment |  |
| AEP | Active Enrollment Period |  |
| ANI | Automatic Number Identification. | Number display of an incoming call. |
| ANOC | Annual Notification of Change |  |
| AOR | Appointment of Representation |  |
| BCC | Beneficiary Contact Center | CMS driven department to handle beneficiary inquiries |
| BFCC QIO | Beneficiary and Family Covered Care - Quality Improvement Organization |  |
| BRD | Business Requirement Documents |  |
| BSS | Back Stage Support |  |
| CAB | Consumer Advisory Board |  |
| CAPS | Core Administration Processing System |  |
| CAPS | Core Administrative Platform Services | Single eco-system for Author Service Operation management |
| CAS | Claims Administration System |  |
| CDAG | Coverage Determination Appeals & Grievances |  |
| CDF | Core Data Fabric |  |
| CI | Customer Interface |  |
| CIT | Claims Inquiry Tool | Cotiviti web-based UI that allows a user to search for a claim and see what, if any, code edit recommendations were made |
| CMU | Contract Management Unit |  |
| COB | Coordination of Benefits |  |
| COT | Chain of Trust | Guidelines within the EA Repository to assess potential non-functional requirements related to verifying data exchange performance and validity |
| CPE | Compliance Program Effectiveness |  |
| CRM | Customer Relationship Manager | Type of software |
| CTM | Complaint Track Module |  |
| CV | Clinical Validation |  |
| CXT | ClaimsXten | Code editing service |
| DLP | Desk Level Procedure |  |
| DOR | Definition of Ready |  |
| DPNMS | Dental Provider Network Management System |  |
| DRI | Designated Responsible individual |  |
| DX | Diagnosis |  |
| DX CODE | Diagnosis Code |  |
| EA | Enterprise Architecture |  |
| ECOM | Enterprise Clinical Operating Model |  |
| EDI | Electronic Data Interchange |  |
| EDW | Enterprise Data Warehouse |  |
| EGWP | Employer/Union-only Group Waiver Plan |  |
| EOB | Explanation of Benefit |  |
| EOC | Evidence of Coverage |  |
| EOP | Explanation of Payment |  |
| EOR | Evidence of Remittance |  |
| EPI | Edge Platform Interoperability | Jira Board Name |
| ERA | Electronic Remittance Advice |  |
| ESP | Enterprise Solution Point | Humana's Governance Risk and Compliance platform |
| FA | Formulary Administration (Part D) |  |
| FTU | First time use |  |
| FWA | Fraud Waste and Abuse |  |
| G&A | Grievance and Appeals |  |
| GCP | Google Cloud Platform |  |
| HAUS | Humana Accessibility and Usability Standards | Standard related to accessibility and usability of UI applications. |
| HCPP | Health Care Prepayment Plans |  |
| HCPR | Health Care Payor Rules |  |
| HIDMS | Humana ID management service |  |
| HPS | Humana Pharmacy Solutions |  |
| HRCM | Health Rules Care Manager |  |
| HRP | Health Rules Payor |  |
| HSO | Health Services Organization |  |
| ICD | Interface Contract Definition |  |
| IDN | Integrated Denial Notice | CMS required denial of an enrollee's request for coverage upon discontinuation and/or reduction of a previously authorized course of treatment. |
| IMO | Integration Management Office |  |
| IPAR | Incorrect Payment Audit Requests |  |
| IRE | Independent Review Entity |  |
| IVR | Interactive voice recording |  |
| KAM | Key Account Manager |  |
| LEP | Late Enrollment Penalty |  |
| LiNET | Low-Income Newly Eligible Transition Program |  |
| LOA | Letter of Agreement |  |
| LRO | Launch Readiness Office |  |
| MAC | Medicare Administrative Contractors |  |
| MAPA | Medicare Advantage Paperless Application |  |
| MCG | Milliman Care Guidelines |  |
| MGP | Military Group Policy |  |
| MHK | MedHOK |  |
| MRA | Medicate Risk Adjustment | Business partner |
| MRM | Medical Record Management | Data Exchanges |
| MSN | Medicare Summary Notice |  |
| MTM | Medication Therapy Management |  |
| MTV | Metavance | Claims Payment System |
| MVP | Minimum Viable Product |  |
| NPSR | Net Promoter Score Relationship | Score of customer relationship with Humana |
| NPST | Net Promoter Score of the Transaction. |  |
| OCR | Optical Character Recognition |  |
| ODAG | Organization Determination Appeals & Grievance |  |
| OEP | Open Enrollment Period |  |
| OLI | Other Liability Insurance |  |
| OON | Out of Network |  |
| OOP | Out of Pocket |  |
| OSB | Optional Supplemental Benefits |  |
| PA | Prior Authorization |  |
| PAAG | Provider at a Glance |  |
| PARE | Pathologist, Anesthesiologist, Radiologist, Emergency room | Ancillary providers: Claims process based off this logic |
| PBS | Premium Billing System |  |
| PCM | Perfect Call Metric |  |
| PCUG | Plans Communications User Guide |  |
| PDLM-MMP | Plan Decision Letter Monitoring Medicare & Medicaid Plans |  |
| PDP | Prescription Drug Plans |  |
| PFFS | Private Fee For Service |  |
| PHI | Personal Health Information |  |
| PIMS | Provider Information Management System |  |
| PIV | Post Implementation Validation | Approval by the business team on what IT has delivered |
| POA | Power of Attorney |  |
| RAID | Risks, Assumptions, Issues, Decisions |  |
| RCA | Retrospective Claims Adjustment |  |
| RCC | Retail Contact Center |  |
| RCCQ | Rule Configuration and Criteria Questionnaire | Requirements gathering tool for Claims XTN |
| SAML | Security Assertion Markup Language | Token used for exchanging authentication and authorization data between parties. |
| SARAG | Service Authorization Requests, Appeals & Grievances |  |
| SDOH | Social Determinates Of Health |  |
| SEP | Special Enrollment Period |  |
| SIT | Systems Integration Testing |  |
| SNP | Special Needs Program |  |
| SOS | Service Operations Support |  |
| TPL | Third Party Liability |  |
| TPL COB  OLI | Third Party Liability Coordination of Benefits Other Liability Insurance |  |
| TrOOP | True Out-of-Pocket |  |
| TTY | Teletypewriter | Telecommunication Device for the Deaf |
| UAT | User Acceptance Testing |  |
| UM | Utilization Management | Team providing authorizations and clinical reviews |
| UST | Universal Screening Team |  |
| VIPR | Virtual Intelligent Plan Recommendation |  |
| VOC | Voice of the Customer |  |
|  |  |  |
| VSR | Vision and Scope Requirements | Vision and Scope Requirements document |
| WCAG | Web Content Accessibility Guidelines | W3C A11Y |
| WOL | Waiver of Liability |  |