



CT METS Key Terms, Acronyms, and Definitions

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Key Terms, Acronyms, and Definitions

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CT METS PROGRAM Key Terms, Acronyms, and Definitions

What is CT METS?

The **Connecticut Medicaid Enterprise Technology System (CT METS)** is a large-scale, statewide information technology (IT) and business process improvement program led by the Department of Social Services. The CT METS Program will examine the business processes and systems that are currently in place to manage HUSKY Health, including how we organize the large volumes of information necessary to support the program. CT METS will recommend technology and business process improvements to enhance delivery of services and support new initiatives through state-of-the art technology solutions.

The lists below include terms and acronyms that are used or maybe encountered as part of the CT METS Program. While not all terms and acronyms are listed, the table can be used as a helpful tool.

"A" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Access Health Connecticut	AHCT	Health insurance marketplace that offers individuals, families, and small employers a range of qualified healthcare coverage options from health insurance carriers in public healthcare programs. Access Health CT also coordinates eligibility and enrollment with state Medicaid and Children's Health Insurance Programs (CHIP).
Administrative Services Organization	ASO	Organizations that enter into contracts with DSS to provide specified program services. Provides utilization management, benefit information, and intensive care management services within a centralized information system framework.
Advance Planning Documents	APD	Federal law requires states to request prior approval for enhanced Federal Funding Participation (FFP) through submission of an APD. An APD includes a full description of the approach, timeline, and costs intended to manage the design, development, and implementation of projects.
Approved Work Plan		The contractor's project work plan containing task, milestone, schedule, and other information as required by the contractor's approved Project Management Plan (PMP), and which has been initially or subsequently baselined and approved by the Program Director or their designee. The Approved Work Plan shall be inclusive of all actual or projected milestone dates that are approved by the Program Director or their designee and in accordance with the approved PMP.
Architecture Governance Board	AGB	Provides high-level strategy and guidance to Medicaid Enterprise Information Technology Standards processes to enhance productivity and ensure effective and efficient use of information technology.
As-Is		The current business process model used to administer and operate the CT Medicaid and CHIP programs.



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Awareness, Desire, Knowledge, Ability, Reinforcement	ADKAR®	A Prosci® proprietary five-stage model for facilitating successful implementation of organizational, government, and community change which incorporates a framework for understanding change starting at an individual level; used as a foundation to the Organizational Change Management of the CT METS project.
Access Health Connecticut	AHCT	Health insurance marketplace that offers individuals, families, and small employers a range of qualified healthcare coverage options from health insurance carriers in public healthcare programs. Access Health CT also coordinates eligibility and enrollment with state Medicaid and Children's Health Insurance Programs.

"B" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Benecare The dental Administrative Services Organization (ASO) for the HUSKY Health Program.		The medical ASO contracted by the Department of Social Services (DSS) to administer and provide dental services to HUSKY Health members.
Bureau of Information Technology Services	BITS	Bureau within the Department of Administrative Services (DAS) that supports maintaining, operating, developing, and enhancing information systems. Provides DDI of applications enhancement and support of DSS information technology systems hardware, software, and data communications. Note: For historical purposes, some older documents may still refer to BITS as ITS, in those instances – please refer to ITS below.
Business Network	BizNet	Managed by the Department of Administrative Services, it is an online system allowing documents to be uploaded by state contractors in a PDF format and viewed by state agencies that require these forms as part of the contracting process to improve efficiency and quality of transfer of information.
Business Process Modeling Notation	BPMN	A graphical representation for specifying business processes in a business process model. Originally developed by the Business Process Management Initiative (BPMI) and used by the Centers for Medicare & Medicaid Services (CMS) as a standard for documenting Medicaid business processes.
Business Rules Engine	BRE	As part of the Service Oriented Architecture (SOA) technical framework, it facilitates decision-making for standardized business rules' definitions, such as real-time information transfer with determination of customer and provider self-service web portal inquiries.



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"C" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Center for Medicaid and CHIP Services	CMCS	A federal CMS division organized into seven groups that are responsible for the various components of policy development and operations for Medicaid, the Children's Health Insurance Program (CHIP), and the Basic Health Program (BHP). CMCS has an Innovation Accelerator Program (IAP) team dedicated to supporting innovation and enhancing partnerships with states.
Centers for Medicare and Medicaid Services	CMS	Federal agency of the Department of Health and Human Services (HHS) with regional offices that administers Medicare and works in partnership with state governments to administer Medicaid, the Children's Health Insurance Program (CHIP), and health insurance portability standards.
Central Office	СО	The central administration of the Connecticut Department of Social Services, which is located at 55 Farmington Avenue, Hartford, CT 06105.
Change Control Board	ССВ	Reviews, assesses, and manages project change requests and other process details submitted by the project team as part of the Change Management Plan.
Chief Fiscal Officer	CFO	Agency official responsible for financial operations, knowledge of costs distribution and identifying and reporting trends throughout the agency.
Chief Information Security Officer	CISO	Supports implementation, distribution, enforcement, and maintenance of the security of information in and out of the agency.
Children's Health Insurance Program	CHIP	The Children's Health Insurance Program, known in Connecticut as HUSKY B and part of the HUSKY Health Program, provides health coverage to children in families whose income is too high to meet Medicaid eligibility. Children covered under CHIP receive their medical services from a managed care plan or fee-forservice program. Families share in the costs of the program by paying monthly premiums and co-payments for some services.
Code of Federal Regulations	CFR, C.F.R.	The Code of Federal Regulations is a publication that includes the codification of the general and permanent rules and regulations established by Act of Congress (44 U.S.C. 1510) issued by the executive departments and federal administrative agencies.
Community Health Network of CT, Inc.	CHN CT	The medical ASO contracted by the DSS to administer and provide medical services to HUSKY Health members.
Concept of Operations	ConOps or COO	Provides a high-level approach to CT METS in terms of technical design, architecture, and analyses of the proposed system and alternatives.
Conduent		Conduent, formerly Xerox State HealthCare, is the DSS Contractor for tasks related to screening and eligibility determination, premium billing collection, and providing medical spend down support to DSS.



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Connecticut Behavioral Health Partnership	СТ ВНР	A working collaborative between the Department of Mental Health and Addiction Services (DMHAS), the Department of Children and Families (DCF), the DSS, Beacon Health Options, and legislatively mandated Oversight Council.
Connecticut Dental Health Partnership	CT DHP	Provides dental plan coverage for the HUSKY Health Program and is administered by Benecare, the state's dental ASO.
Connecticut General Statutes	CGS	Codified general statutes of Connecticut enacted via passage by the state's legislature (General Assembly) and signed into law by the Governor.
Connecticut Medicaid Enterprise Technology System	CT METS	The Connecticut Medicaid Enterprise Technology System (CT METS) is a large-scale, statewide information technology (IT) and business process improvement program led by the Department of Social Services. The CT METS Program will examine the business processes and systems that are currently in place to manage HUSKY Health, including how we organize the large volumes of information necessary to support the program. CT METS will recommend technology and business process improvements to enhance delivery of services and support new initiatives through state-of-the art technology solutions.
CT METS Liaison		A key CT METS stakeholder connecting a DSS business area with the CT METS Team acting to facilitate the collection and dissemination of information on behalf of a DSS division functional business area.

"D" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Data Management Strategy	DMS	Within the Medicaid Information Technology Architecture (MITA), provides the structure for handling the data created, stored, managed, and processed across state Medicaid Enterprise boundaries.
Department of Administrative Services	DAS	DAS is the central administrative agency of Connecticut state government that houses a number of distinct programs that comprise the business functions of state government, including technology services and procurement support.
Department of Health and Human Services	HHS (formerly known as DHHS)	Federal agency whose mission is to enhance and protect the health and well-being of all Americans by providing effective Health and Human Services and fostering advances in medicine, public health, and social services.
Department of Social Services	DSS	The Department of Social Services delivers and funds a wide range of programs and services as Connecticut's multi-faceted health and human services agency. DSS serves about 1 million residents of all ages in all 169 Connecticut cities and towns. DSS supports the basic needs of children, families, and adults of all ages.
Design, Development, and Implementation	DDI	Fundamental building phase of a project. State Medicaid programs may receive an enhancing federal funding of 90% for projects that comply with specific conditions and standards.



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Diagnosis Related Group	DRG	A system of payment for the operating costs associated with hospital stays. Classifies patients in groups for purposes of identifying "products" that a hospital provides based on International Classification of Diseases (ICD) diagnoses and used for determining Medicare and Medicaid payments for each "product." As part of the system, each case is categorized into a DRG.
Division of Health Services	DHS	A division of DSS comprising many core Medicaid business functions, including the Community Options Unit, Integrated Care Unit, Medical Operations Unit, Medical Policy and Clinical Consultation Team, Certificate of Need (CON), and Reimbursement Unit.
Document Management Process	DMP	As part of program management for CT METS, the project team will follow the DMP, a predictable and timely review and tracking process for project documents.
DXC Technology*	DXC	*For information on DSS' current fiscal agent, see Gainwell Technologies. DXC may still appear in some legacy documents, the entry below is included for reference purposes only. DXC, formerly Hewlett Packard Enterprises (HPE), acts as the contracted fiscal agent for DSS supporting provider credentialing and enrollment, claims processing, Medicare premium buy-in, pharmacy prior authorization, e-prescribing transaction support, and drug rebate collection and processing. DXC also provides a provider call center, client call center, provider relations representatives, provider communications, operates a website, and issues bulletins and newsletters. DXC also operates the data warehouse.

"E" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Electronic Clinical Quality Measures	eCQMs	Providers within DHS are encouraged to submit clinical quality measures using defined standards, such as Quality Reporting Document Architecture (QRDA) to report and measure clinical quality, ensure timely access to data for reporting, and support audits.
Electronic Data Interchange	EDI	A computer-to-computer exchange of business documents (data) in a standard format between trading partners. Under the Health Insurance and Portability Accountability Act of 1996 (HIPAA), standard electronic transactions are required when submitting eligibility verification, claims, and other data to a payer, as well as related responses from a payer.
Electronic Visit Verification	EVV	An electronic system that verifies provision of in-home services and links such services directly with claims processing. In 2016, the EVV system was established in response to federal requirements set forth in the 21st Century Cures Act (Cures Act), beginning with home health services and growing over time to include various waiver services.



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Eligibility Management System	EMS	DSS' former eligibility management system that was phased-out by the implementation of ImpaCT.
Enterprise		The combination of information, information systems, business processes, and the entities in which these operate to administer a Medicaid program is collectively referred to as a "Medicaid Enterprise."
Enterprise Data Warehouse	EDW	EDWs are central repositories of integrated data from one or more disparate sources and used for reporting and data analysis and considered a core component of business intelligence.
Enterprise Master Person Index	ЕРМІ	Implemented in January 2016, it identifies individuals across systems, settings, and populations to enable a single, unified health record for statewide outcomes improvement and real-time health information exchange. Serves as an enterprise solution for maintaining consistent, accurate, and current demographic data, ensuring that each individual is represented once across all subscribing systems.
Enterprise Program Management Office	ЕРМО	DSS unit responsible for providing project management, coordination, and implementation support for DSS projects.
Enterprise Service Bus	ESB	Information technology hub that electronically routes and manages the distribution of tasks integral to supporting the administration of the Medicaid Enterprise applications.

"F" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Federal Funds Participation or Federal Financial Participation	FFP	This is the percentage of Federal Medical Assistance Percentage that highlights the federal assistance provided to states. Implementing activities are matched 90% federal and 10% state funding. Software is reimbursed at 75% federal and 25% state.
Federal Poverty Level	FPL	Measure of income used by the federal HHS to determine eligibility for certain programs and benefits, including the Medicaid program and CHIP.

"G" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Gainwell Technologies		Gainwell Technologies acts as the contracted fiscal agent for DSS supporting provider credentialing and enrollment, claims processing, Medicare premium buy-in, pharmacy prior authorization, e-prescribing transaction support, and drug rebate collection and processing. Gainwell also provides a provider call center, client call center, provider relations representatives, and provider communications. It also operates a website, issues bulletins and newsletters, and operates the data warehouse. Note: Gainwell replaced DXC Technology as the contracted fiscal agent for DSS.



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"H" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Health Information Exchange	HIE	HIE allows healthcare professionals and patients to appropriately access and securely share a patient's medical information electronically.
Health Information Sharing Maturity Model	HISMM	The sharing of health information electronically across key stakeholders to improve healthcare practices with a Maturity Model designed to provide states with a mechanism to assess the maturity of Health Information Exchange within the Medicaid Enterprise. HISMM ensures effective use of scarce resources, leverages common efforts, ensures best practices and lessons learned, and improves reuse of solutions across states.
Health Information Technology	HIT	Involves the exchange of health information in an electronic environment across consumers, providers, and payers. DSS's Health Information Technology Strategic Plan provides achievable solutions for transforming the most valuable asset, data, into actionable information while implementing a scalable Medicaid Health Information Exchange.
Health Information Technology for Economic and Clinical Health	HITECH	An act enacted under Title XIII of the American Recovery and Reinvestment Act of 2009. Under the HITECH Act, the United States Department of Health and Human Services provides funding to states to promote and expand the adoption and meaningful use of health information technology.
Health Insurance eXchange	HIX	DSS partners with Access Health CT, which operates the state- based HIX portal through which Connecticut residents can apply for health insurance coverage, including HUSKY A & D, CHIP, and qualified health plans.
Health Insurance for Uninsured Kids and Youth	HUSKY Health Program	The State of Connecticut's healthcare coverage program for Medicaid and CHIP. HUSKY Health provides a comprehensive healthcare benefit package, including preventive care, primary and specialist care, hospital visits, behavioral health services and supports, dental services, prescription medications, and non-emergency medical transportation (NEMT) for Medicaid members only.
Health Insurance Portability and Accountability Act of 1996	НІРАА	HIPAA is federal legislation passed by Congress in 1996 that requires the protection and confidential handling of protected health information. HIPAA specifies what medical and administrative code sets should be used within those standards and requires the use of the national identification systems for healthcare patients, providers, payers (or plans), and employers (or sponsors), and specifies the types of measures required to protect the security and privacy of personally identifiable healthcare information.



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Health	HMS	DSS contractor that identifies third-party insurance liabilities,
Management		benefit recoveries, applied income dispositions, and accesses
Systems		Medicaid Recovery Audit Contractor (RAC).

"I" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
ImpaCT		DSS' current eligibility management system.
Implementation Advance Planning Document	IAPD	IAPD documentation is required and submitted to HHS/CMS' Regional Office to receive approval for project implementation, such as the 2018 IAPD submission seeking approval and financial support for the design, development, and implementation (DDI) of a new, modular Connecticut Medicaid Enterprise system.
		IAPD contains nine sections as derived from the broader state-specific Health Information Technology IAPD template, including executive summary, results of activities, statement of needs and objectives, statement of alternative considerations, personnel resource statement, proposed activity schedule, proposed budget, and cost allocation plan for implementation activities. It additionally includes appendices.
Implementation Advance Planning Document (Update)	IAPD(U)	IAPD(U) documentation is required and submitted to HHS/CMS' Regional Office occurring annually or as-needed, providing updates to the initially approved project IAPD as to notable delays, changes to timeline or funding, or other adjustments to implementation.
Independent Verification and Validation	IV&V	The IV&V organization reports directly to the federal funding organization (CMS) and externally monitors both the Project Office and the contractors' efforts as a critical component of project quality management systems in the CT METS Program.
Information Technology Services	ITS	Information Technology Services supports maintaining, operating, developing, and enhancing information systems. Provides DDI of applications enhancement and support of DSS information technology systems hardware, software, and data communications.
		Note: For historical purposes, some older documents may still refer to ITS. However, IT staff are now employees of DAS BITS (the Department of Administrative Services Bureau of Information Technology).



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Instructional Design Method	IDM	An instructional design model provides guidelines or a framework to organize and structure the process of creating instructional activities. These models can be used to define an approach to achieve instructional goals. It is the practice of creating instructional experiences to help facilitate effective learning that is learner-centered, goal-oriented, and focused on real world performance with outcomes that can be measured.
interChange		Current name of Medicaid Management Information System (MMIS) under contract with Gainwell (see Gainwell) formally DXC, and prior to that Hewlett-Packard Enterprises (HPE), since 2005.

"J" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
JIRA		Project software that helps track, monitor, and communicate
		project issues and risks.

"K" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Key Performance	KPI	A KPI is a measurable value that demonstrates operational
Indicator		performance in meeting key business standards.
		Organizations establish KPIs at multiple levels to evaluate
		their success at reaching targets.

"L" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
LEAN		A customer-focused initiative to improve processes based on optimizing value delivered to the public. It examines the existing way of doing business and works to eliminate what may be considered waste, redundancy of effort, excessive movement, waiting times between functions, etc.
Learning Management System	LMS	LMS is a software application for the administration, documentation, tracking, reporting, and delivery of electronic educational technology, also called e-learning courses or training programs.



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"M" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Master Service Agreement	MSA	Legal contract document that consolidates separate but related agreements between the same signing parties.
Medicaid Enterprise Certification Lifecycle	MECL	A certification process developed by CMS to accommodate the approaches that states employ to update or upgrade their MMIS systems. The MECL includes the activities necessary for states to complete the four lifecycle phases: <i>Initiation and Planning</i> ; <i>Requirements, Design, and Development</i> ; <i>Integration, Test, and Implementation</i> ; and <i>Operations & Maintenance</i> . The MECL is a cornerstone of the Medicaid Enterprise Certification Toolkit (MECT) v2.3 and subsequent versions.
Medicaid Enterprise Certification Toolkit	MECT	Set of documentation, requirements, guidance, and tools developed by CMS to assist states in all phases of the MMIS lifecycle beginning with the preparation of an APD through the certification review process.
Medicaid Information Technology Architecture	MITA	MITA is a CMS initiative intended to foster integrated business and IT transformation across the Medicaid Enterprise to improve the administration of the Medicaid program. MITA is a national framework that supports technologies aligned with Medicaid business processes that enable coordination with public health and other partners, including human services. It is a framework of integrated systems that communicate effectively through interoperability and common standards.
Medicaid Management Information System	MMIS	DSS's automated claims processing and information retrieval system certified by CMS and currently operated by Gainwell Technologies. It is organized into six function areas: Member, Provider, Claims, Reference, Management and Administrative Reporting subsystem (MAR) and Surveillance and Utilization Review subsystem (SUR). For Medicaid purposes, the mechanized claims processing and information retrieval system which states are required to have, unless waived by the secretary, is the Medicaid Management Information System (MMIS). Legacy MMIS implemented in 2008 by Hewlett-Packard enterprise services, now Gainwell technology (previously DXC), aka interChange.
Medical Equipment Devices and Supplies	MEDS	Connecticut state law (P.A. 14-217) requires the electronic transmission of prescriptions for reimbursements under Medicaid for durable medical equipment. The MEDS project facilitates direct messaging to submit MEDS electronic prescriptions utilizing the Health Information Service Provider, implemented in 2014 as part of a previously approved HIT IAPD(U).
Mercer Consulting	Mercer	Contracted by DSS for a variety of services including providing Medicaid expertise for the CT METS Program.



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MITA Maturity Level	MML	MITA is a CMS initiative intended to foster integrated business
		and IT transformation across the Medicaid Enterprise to
		improve the administration of the Medicaid program. MITA is a
		national framework to support improved systems development
		and healthcare management for the United States Medicaid
		Enterprise. MITA sets forth a number of goals, including
		development of seamless and integrated systems that
		communicate effectively through interoperability and common
		standards. DSS is seeking to increase MITA maturity by adopting
		enterprise-level technical systems components through
		which Medicaid systems are connected, promoting
		interoperability among agencies and ASOs.
Module or Modularity		A technical solution that meets CMS requirements that groups
		business functions together as part of a larger, more complex
		information system with the ability to interoperate across
		systems and therefore agencies, and even states.
Myers & Stauffer		Contracted by DSS for services involving development and
		implementation of the case mix reimbursement system that
		includes a case mix adjustment based on Minimum Data Set
		(MDS) date for Medicaid facilities in the state. Hosts MDS portal
		housing Case Mix Index (CMI) reports, populated.

"N" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
National Human Services Interoperability Architecture	NHSIA	Provides a framework to facilitate information sharing, improve service delivery, prevent fraud, and provide better outcomes for children and families. NHSIA brings together pieces from other architecture models such as the Federal Enterprise Architecture (FEA). NHSIA consists of seven viewpoints examining architecture from different business and technology perspectives. NHSIA offers a foundation for common understanding, interoperability, standards, and reuse.
North Highland Corporation, LLC	NHC	NHC is a private, for-profit organization that entered into a contract with the Department of Social Services for Organizational Change Management (OCM) services as a result of their response to a Request for Proposal.

"O" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Office of Attorney General	OAG	The Connecticut Office of Attorney General is the chief civil legal office(r) of the state and represents the interests of the people of the State of Connecticut and all civil legal matters involving the state to protect the public interest, and to serve as legal counsel to all state agencies.
Office of Policy Management	OPM	State agency that provides the information and analysis used to formulate public policy for the state and assists state agencies and municipalities in implementing policy decisions on the



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		Governor's behalf.
Organizational and Skill Development	OSD	As the result of a partnership between the University of Connecticut School of Social Work and the DSS wherein OSD is to provide Organizational Change Management enablement and support services for the Connecticut Medicaid Enterprise Technology System program for the Connecticut's State Medicaid Agency.
Organizational Change Management	OCM	A framework to evaluate an organization's current operational state, and subsequently manage the effect of new business processes, information systems, or technology changes within organizational structure or cultural changes within an enterprise.

"P" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Person Centered Medical Home	PCMH	A model or philosophy of primary care that is person- centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety.
Person-Centered Medical Home Plus	PCMH+	The Person-Centered Medical Home Plus or PCMH+ program provides person-centered, comprehensive, and coordinated care to HUSKY members. PCMH+ builds on the success of Connecticut Medicaid's Person-Centered Medical Home (PCMH) program which works to improve the quality of care our members receive. The PCMH+ program works to improve HUSKY member's overall health and assists with access to services like access to healthy food, transportation to appointments and assistance in finding community agencies that support housing or employment.
Personal Health Record	PHR	Expansion effort through the Connecticut Department of Social Services/Division of Health Services Annual Health Information Technology IAPD to increase access to additional Medicaid recipients to accessing their own health information electronically, and to support goals for meeting meaningful use measures for patient electronic access to health information and coordination of care through patient engagement.
Personally Identifiable Information	PII	Any data that permits the identity of an individual to be directly or indirectly inferred, including any other information that is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, legal permanent resident, or a visitor to the U.S. CMS has created policy requirements for CMS staff and partners to notify proper authorities in the event that an incident (suspected or occurred), breach, or potential breach to PII has occurred as a result of noncompliance with privacy policies of the Department, including accidental disclosure.
Pharmacy Management	PHM	Gainwell Technologies and the ASOs interact together for core MMIS services, which include Pharmacy Benefit Management services. Pharmacy Management services include processing of pharmacy claims, prospective and retrospective drug utilization review prior authorizations, preferred drug lists, step therapy, e-prescribing support, and drug rebate processing.



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Planning Advanced Planning Document	PAPD	A document that is submitted to HHS/CMS to secure approval of the planning needs to initiative a project and funding to begin a project. The CT METS PAPD was generated in 2017 to develop the Technical and Data Management Strategies, the MMIS Concept of Operations, and the initial requirements for the IV&V, OCM, and SI vendors.
PMI/PMBOK Guide	РМВОК	The Project Management Institute's Project Management Body of Knowledge and framework is an industry standard for methodologies used in business and government information system management projects and portfolios.
Prior Authorization	PA	Healthcare services or goods that require a provider's prior submission to a payer to review for medical necessity in order to authorize payments for services.
Program Architecture	PA	Design of the CT METS technology infrastructure, integration platform, and operational planning during the program, with consideration to lowering risks of future operations. Later in the CT METS Program, Program Architecture will assist the CT METS technology infrastructure development, module component development, integration platform development, computing and hosting setup, and operations execution phase with a focus on lowering risks and future operations complexity and cost.
Project Management Methodology	PMM	A set of principles and processes evaluated for project fit and selection and used to guide and manage a project. Examples include PMI/PMBOK, Waterfall, Agile, Hybrid, Scrum, Lean, Six Sigma, Kanban, Critical Path Method, Event Chain Methodology (ECM), Integrated Project Management, and Projects integration Sustainable Methods (PriSM). The CT METS Program employs the PMI/PMBOK method mapping activities in the work breakdown structure (WBS) with advantages of prioritization and better scheduling. It mimics parts of other project management methodologies, like the Waterfall and Critical Path Method, as the initial planning phase is "front-heavy" in nature.
Project Management Office	PMO	The PMO for CT METS is an organizational unit with the CT METS Program that supports the management and implementation of the CT METS Program. This includes project management oversight and support, and technical and business subject matter expertise. The CT METS PMO is associated with the DSS's Enterprise Program Management Office (EPMO) that provides oversight and support for a portfolio of projects for DSS.
Project Management Plan	PMP	Document to understand project structure, scope, and overall plan of execution by which the project will be managed.
Project Management Team		Members comprising the project team who are directly involved in project management activities.
Project Manager	PM	A professional who may be certified in the field of project management, a project manager can have the responsibility of the planning, execution, and closing of any project, typically relating to construction industry, architecture, computer networking, telecommunications, or software development.



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Project Schedule		An output of a schedule model that presents a link to activities with planned dates, durations, milestones, and resources.
Protected Health Information	PHI	PHI includes an individual's personal physical or mental health condition, provision of healthcare, payment of healthcare, and common identifiers like name, address, birth date, and Social Security number. Under the HIPAA Privacy Rule, standards are set for when PHI may be used and disclosed. Under the HIPAA Security Rule, safeguards are specified for covered entities and their business associates to protect the confidentiality, integrity, and availability of electronic protected health information or e-PHI.

"Q" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Quality Assurance	QA	An office within DSS providing assurance for programmatic and fiscal integrity composed of five divisions: audit, investigations and recoveries, special investigations, quality control, and third-party liability.
Quality Improvement	QI	A concept that includes key stakeholders analyzing and developing improvement strategies through the process of conducting assessments and reviewing data to prioritize trends or themes to develop a specific improvement goal. Root cause analyses and systemic issues identification help to form measurable goals and timeframes to support outcomes.
Quality Management	QM	Actions confirming that a quality product is delivered and conforms to contract requirements and meets the need of the customer within a process that is iterative and incremental. The process includes identification, planning, implementation, and execution of the plan. Once the plan is operational, the QA team leverages the plan to assess, measure, monitor, and continually improve the plan.

"R" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Requirements	RTM	A table or grid that maps each project requirement to a
Traceability Matrix		business need. Requirements are traced from its initiation to
		implementation.
Reuse		"Build Once, Reuse Often" strategy: application and data
		strategies and designs strive to follow a component-based,
		service-oriented architecture, resulting in solutions being built
		once, reused often, and maintained easily over time.
Review Process #1, #2,	R1, R2, R3	States must adhere to updated federal requirements for
#3		Medicaid Information Technology Systems. Meeting these
		requirements requires certification by CMS. States must pass
		three milestone reviews during the duration of the Medicaid
		Enterprise Certification Lifecycle (MECL). The purpose of the



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Risk		reviews is for states to receive early feedback about issues that may impede certification. The first milestone review is known as R1 - Project Initiation Milestone Review, requiring artifacts like the Concept of Operations. The second milestone review is known as R2 – Operational Milestone Review, requiring artifacts including technical, operational, and management controls for the System Security Plan. The third milestone review is known as R3 – MMIS Certification Final Review, requiring a live demonstration of the product. A factor internal or external to a project that has the potential
		to adversely affect the project's course.
Risks, Actions, Issues, Decisions	RAID	A managed system within JIRA to monitor and track <i>risks</i> (potential to adversely affect the project and need mitigation), <i>actions</i> (tasks to complete in project), <i>issues</i> (events that need to be managed and resolved), and <i>decisions</i> (to act upon within the project).

"S" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Secure File Transfer Protocol	SFTP	File-based exchanges between legacy information systems and components received from web services or systems requiring a high level of security, both at the source and the destination, ensuring appropriate protection of sensitive data through electronic data interchange (EDI) file transfers between entities.
Service Oriented Architecture	SOA	A software design strategy in which common functionality and capabilities (utility services) come with standard, well-defined interfaces. Provides flexibility to interact with other technical components over a network and can incorporate and integrate many different technologies.
Shared Services		The concept whereby one part of an organization or group builds or provides a service that can be utilized by another part of the organization or group at less cost than provisioning the service alone. Thus, the funding and resourcing of the service is shared and the providing department effectively becomes an internal service provider.
SharePoint		SharePoint is a software tool that provides a secure central repository used by CT METS and its contractors to store, organize, share, and access information.
Social Determinants of Health	SDOH	Conditions under which people are born, grow, live, and die that influence a person's health.
Stakeholder		An individual, group, or organization who may affect, be affected by, or perceive itself to be affected by a decision, activity, or outcome of a project, delineated by internal and external groups.
State Medicaid Agency	SMA	Connecticut Department of Social Services, the single State Medicaid Agency that oversees all state agencies and arranges services pertaining to Medicaid-funded programs.



Key Terms, Acronyms, and Definitions

State Medicaid Director	SMD	DSS' Division of Health Services Director responsible for oversight and direction of the State Medicaid and CHIP programs.
State Medicaid Manual	SMM	Made available to all State Medicaid agencies by CMS. Provides information and procedural material needed by the states to administer the Medicaid program. Provides mandates, advice, optional Medicaid policies and procedures, instructions, regulatory citations, and information for implementing provisions of Title XIX of the Social Security Act.
State Self-Assessment	SS-A	A high-level assessment conducted by DSS outlining current Medicaid business process architecture using CMS-defined models, matrixes, and templates.
Steering Committee	SC	Project Governance model comprising an appointed leadership team and other members, to initiate and oversee project health and progress, providing advisory capacity with authority to act on risks and issues.
Subject Matter Expert	SME	An individual with functional understanding of a business function, process, or technical area well enough to answer questions from people in other groups.
Substance Abuse and Mental Health Services Administration	SAMHSA	A branch of the HHS charged with improving the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from substance abuse and mental illnesses.
Super User		A systems administration role with access to administration or management functions not available to routine users.
Supplemental Nutrition Assistance Program	SNAP	DSS-administered program that helps eligible individuals and families afford the cost of food at supermarkets, grocery stores, and farmers' markets. To receive SNAP benefits in Connecticut, household income and other resources (assets, in some cases) must be under certain limits and are reviewed. The income standards for SNAP are based on the federal poverty levels (FPL).
System Development Life Cycle	SDLC	A phased approach the state and its contractors will use in planning, creating, testing, deploying, and maintaining the CT METS platform, including all components and modules that make up the Connecticut Medicaid Enterprise. The SDLC comprises the process to ensure management has timely, complete, and accurate information on the status of the projects in the system throughout the lifecycle. SDLC process supports three main areas: schedules and timelines, activities and milestones, and key decision points and gait/milestone reviews.
System Integrator	SI	A key resource used by an organization to identify, analyze, design, and deploy complex IT solutions and implement enterprise-wide IT applications within an organization.
Systems Integration Platform	SIP	A systems integration platform is a solution that enables efficient integration of multiple Medicaid modules by providing a data sharing platform across different Medicaid modules and external entities.



Key Terms, Acronyms, and Definitions

"T" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Target Operating Model		Reflects the functional design, organizational structure, and technology systems of a proposed business model. It is based on BPMN mapping of To-Be processes and technology requirements.
Technical Management Strategy	TMS	An important part of the MITA and identified through the State Self- Assessment (SSA) as a part of the MITA approach to promote federal goals of collaboration between states, CMS, and vendors.
Temporary Family Assistance (aka Temporary Assistance for Needy Families)	TFA (aka TANF)	Federal legislation providing block grants to states to fund programs that provide services and benefits to income-eligible families.
Third Party Liability	TPL	The legal obligation of third parties (e.g., certain individuals, entities, insurers, or programs) to pay part or all of the expenditures for medical assistance furnished under a Medicaid state plan.
То-Ве		The resulting future Medicaid Enterprise operating model that the CT METS initiative seeks to attain whereby Business processes are aligned with information technology systems.

"U" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
User Acceptance Testing	UAT	Used in system acceptance sign-off process (last phase) of the software testing process. Ensures software is ready to roll out to stakeholders.
User Experience Design	UX	Process of creating products that provide meaningful and relevant experiences to users. This involves the design of the entire process of acquiring and integrating a technology product, including aspects of branding, design, usability, and function with importance for patient-facing Medicaid information technology such as portals and mobile platforms.

"V" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Veyo		The Connecticut DSS contractor that administers non-emergency medical transportation services for the HUSKY Health Program.
Virtual Private Network	VPN	Provides remote access to authorized users outside of the corporate network communication channels.





CT METS PROGRAM

Key Terms, Acronyms, and Definitions

"W" Key Terms, Acronyms, and Definitions

Term	Acronym	Definition
Work Breakdown	WBS	A hierarchical decomposition of the total scope of work to be
Structure		conducted by the project team into tasks to accomplish the
		project objectives and create the required deliverables.