## ARIZONA LONG TERM CARE SYSTEM (ALTCS) SUPPLEMENT FOR MEMBER HANDBOOK 2017-2018

## DEFINITIONS FOR AHCCCS MEMBERS Pursuant To 42 CFR 438.10

- 1. **Appeal**: To ask for review of a decision that denies or limits a service.
- 2. **Copayment**: Money a member is asked to pay for a covered health service, when the service is given.
- 3. **Durable Medical Equipment**: Equipment and supplies ordered by a health care provider for a medical reason for repeated use.
- 4. **Emergency Medical Condition**: An illness, injury, symptom or condition (including severe pain) that a reasonable person could expect that not getting medical attention right away would:
  - Put the person's health in danger; or
  - Put a pregnant woman's baby in danger; or
  - Cause serious damage to bodily functions; or
  - Cause serious damage to any body organ or body part.
- 5. Emergency Medical Transportation: See EMERGENCY AMBULANCE SERVICES

Emergency Ambulance Services: Transportation by an ambulance for an emergency condition.

- 6. **Emergency Room Care**: Care you get in an emergency room.
- 7. **Emergency Services**: Services to treat an emergency condition.

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8. Excluded Services: See EXCLUDED

**Excluded**: Services that AHCCCS does not cover. Examples are services that are:

- Above a limit.
- Experimental, or
- Not medically needed.
- 9. **Grievance**: A complaint that the member communicates to their health plan. It does not include a complaint for a health plan's decision to deny or limit a request for services.
- 10. Habilitation Services and Devices: See HABILITATION

Habilitation: Services that help a person get and keep skills and functioning for daily living.

- 11. **Health Insurance**: Coverage of costs for health care services.
- 12. Home Health Care: See HOME HEALTH SERVICES

**Home Health Services**: Nursing, home health aide, and therapy services; and medical supplies, equipment, and appliances a member receives at home based on a doctor's order.

- 13. Hospice Services: Comfort and support services for a member deemed by a Physician to be in the last stages (six months or less) of life.
- 14. Hospital Outpatient Care: Care in a hospital that usually does not require an overnight stay.
- 15. Hospitalization: Being admitted to or staying in a hospital.

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- 16. **Medically Necessary**: A service given by a doctor, or licensed health practitioner that helps with health problem, stops disease, disability, or extends life.
- 17. **Network**: Physicians, health care providers, suppliers and hospitals that contract with a health plan to give care to members.
- 18. Non-Participating Provider: See OUT OF NETWORK PROVIDER

**Out of Network Provider**: A health care provider that has a provider agreement with AHCCCS but does not have a contract with your health plan. . You may be responsible for the cost of care for out-of-network providers.

19. Participating Provider: See IN-NETWORK PROVIDER

In-Network Provider: A health care provider that has a contract with your health plan.

- 20. **Physician Services**: Health care services given by a licensed physician.
- 21. Plan: See SERVICE PLAN

**Service Plan**: A written description of covered health services, and other supports which may include:

- Individual goals;
- Family support services;
- Care coordination; and
- Plans to help the member better their quality of life.

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22. Preauthorization: See PRIOR AUTHORIZATION

**Prior Authorization**: Approval from a health plan that may be required before you get a service. This is not a promise that the health plan will cover the cost of the service.

- 23. **Premium**: The monthly amount that a member pays for health insurance. A member may have other costs for care including a deductible, copayments, and coinsurance.
- 24. Prescription Drug Coverage: Prescription drugs and medications paid for by your health plan.
- 25. Prescription Drugs: Medications ordered by a health care professional and given by a pharmacist.
- 26. **Primary Care Physician**: A doctor who is responsible for managing and treating the member's health.
- 27. Primary Care Provider (PCP): A person who is responsible for the management of the member's health care. A PCP may be a:
  - Person licensed as an allopathic or osteopathic physician, or
  - Practitioner defined as a physician assistant licensed or
  - Certified nurse practitioner.
- 28. Provider: A person or group who has an agreement with AHCCCS to provide services to AHCCCS members.
- 29. Rehabilitation Services and Devices: See REHABILITATION

Rehabilitation: Services that help a person restore and keep skills and functioning for daily living that have been lost or impaired.

30. Skilled Nursing Care: Skilled services provided in your home or in a nursing home by licensed nurses or therapists.

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# ARIZONA DEPARTMENT OF ECONOMIC SECURITY Division of Developmental Disabilities

# ARIZONA LONG TERM CARE SYSTEM (ALTCS) SUPPLEMENT FOR MEMBER HANDBOOK 2017-2018

## DEFINITIONS FOR AHCCCS MEMBERS Pursuant To 42 CFR 438.10

- 31. **Specialist**: A doctor who practices a specific area of medicine or focuses on a group of patients.
- 32. **Urgent Care**: Care for an illness, injury, or condition serious enough to seek immediate care, but not serious enough to require emergency room care.