

## Glossary

**Active claim:** A workers compensation claim for which at least one medical service is provided during a specified time period.

**All states:** States included are AK, AL, AR, AZ, CO, CT, DC, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MD, ME, MI, MN, MO, MS, MT, NC, NE, NH, NJ, NM, NV, OK, OR, RI, SC, SD, TN, UT, VA, VT, WI, and WV.

**Change in prescription per drug claims:** The change in the number of prescriptions per claims having at least one prescription. We consider the change to be relatively stable if it is between -5% and +5%.

**Comorbid condition:** The D’Hoore, Sicotte, and Tilquin adaptation of the Charlson Comorbidity Index serves as the main basis for the comorbidities’ diagnosis used to identify claims with a comorbid condition. A comorbidity is only identifiable if treated or reported during the medical encounter.

**COVID-19 treated claims:** Claims with a paid COVID-19 medical treatment other than a lab test using the diagnosis reporting guidelines established by the Centers for Medicare & Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). Claims from Accident Years 2020 and 2021 also include COVID-19 claims reported on NCCI’s Call 31 with medical payments reported in NCCI’s Medical Data Call.

**Evaluation & Management:** Health consultation services such as office visits.

**Inpatient hospital stays:** A hospital admission of a patient requiring hospitalization of at least one 24-hour period.

**Length of stay:** The amount of time, in days, between admission to a hospital and discharge.

**Major surgery:** A service is classified as “surgical” if it falls within the surgical category as defined by the American Medical Association. A service is further classified as “major surgery” if it is not an injection and has a global follow-up period of 90 days as defined by the Centers for Medicare & Medicaid Services.

**Morphine milligram equivalents (MME):** The Centers for Disease Control and Prevention provides a way to convert daily—or hourly—doses of opioids to an equivalent daily dose of

morphine by assigning a conversion factor to each type of drug.

**Opioid claim:** A workers compensation claim for which at least one opioid is reimbursed during a specified time period.

**Physical medicine:** Includes medical rehabilitation services such as physical therapy.

**Physician service:** A term that refers to any professional medical service that is provided by a medical doctor, therapist, or other professional.

**Physician service intensity (PSI):** A resource-based measure of the relative value that applies by Current Procedural Terminology (CPT) and place of service and does not vary by state or date of service.

**Surgery:** A service is classified as “surgical” if it falls within the surgical category as defined by the American Medical Association.

**Telemedicine:** The use of medical information exchanged via electronic communications to improve a patient’s clinical health status.

**Time to treatment (TTT):** The amount of time, measured in days, between the date an accident occurs and the date the first medical service in a given category is provided (for claims occurring during the given quarter with the measured paid service reported to NCCI within 105 days after the end of the quarter).