



Glossary of Key Terms and Acronyms

Oregon Public Employees' Benefit Board (PEBB)




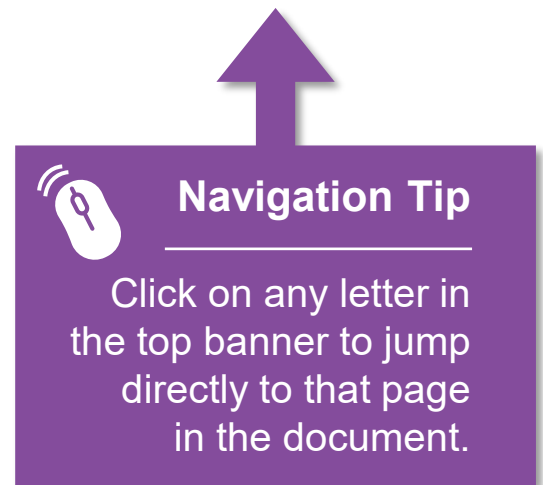
Document Overview

This glossary explains common acronyms and terms used in PEBB materials.

The content is in alphabetical order. Use the letters in the blue banner at the top to jump to a section.

Here are the other items you can click:

- Click this icon  or any [blue underlined text](#) to access a related website or online resource.
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Accidental Death and Dismemberment (AD&D)

A type of insurance that pays a benefit if you die due to an accident or experience a severe physical loss. This includes the loss of a limb, mobility, sight, or hearing.

Accountable Care Organization (ACO)

A group of health care providers who provide coordinated care and chronic disease management. This combination improves the quality of care that patients receive. The group’s payment is tied to achieving quality goals and outcomes that result in cost savings.

Activities of Daily Living (ADL)


The basic self-care tasks that a person needs to live independently. This includes eating, dressing, bathing, and using the bathroom.

Adolescent and School Health (ASH)

A division of the Centers for Disease Control and Prevention (CDC). ASH works with schools to strengthen education, health services, school environments, and community connections.

Affordable Care Act (ACA)

A U.S. federal law that was enacted in 2010. It reformed the health care system, increased access to health insurance, and lowered health care costs. (May also be referred to as the Patient Protection and Affordable Care Act.)

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American Federation of State, County and Municipal Employees (AFSCME)

A labor union that represents members in different occupations. Occupations include nurses, corrections officers, and child care providers. AFSCME advocates for fairness in the workplace, excellent public service, as well as prosperity and opportunity for working families.

Americans with Disabilities Act (ADA)

A U.S. law that was enacted in 1990. It prohibits discrimination against people with disabilities in areas like employment, government, public accommodations, commercial facilities, transportation, and telecommunications.

ASIFlex 

The administrator of PEBB’s [Flexible Spending Accounts \(FSAs\)](#) and commuter benefit accounts.

Assertive Community Treatment (ACT)

Person-centered support for individuals with severe mental illness. It takes a recovery-based approach through treatment, rehabilitation, and support services.

Association of Engineering Employees of Oregon (AEE)

A professional organization that represents over 1,000 engineering and technical employees working for the Oregon Department of Transportation, Oregon Parks and Recreation Department, and the Oregon State Department of Forestry.

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Beneficiary

A person or entity who receives assets from an account, insurance policy, or trust after the owner's death.

BenefitHelp Solutions (BHS)

The administrator of PEBB’s [COBRA](#) and retiree health insurance benefits.

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Canopy


The administrator of PEBB’s [Employee Assistance Program \(EAP\)](#) for most members. ([Lyra Health](#) administers the EAP for [Oregon State University](#) employees.)

Carrier

An [insurer](#) or [third-party administrator \(TPA\)](#) that PEBB contracts with to provide benefits to members.

Children’s Health Insurance Program (CHIP)

An insurance program that provides low-cost health coverage to children in families that earn too much money to qualify for Medicaid but not enough to buy private insurance. [Each state](#) offers this program and works closely with its state Medicaid program.


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Claim

A request for a benefit made by you or your health care provider to your health plan [carrier](#). The request can be for items or services you think are covered, including reimbursement of a health care expense.

Coinsurance

The percentage of covered health care costs that you pay. You may first need to meet your annual [deductible](#) before coinsurance applies.

Collective Health

A benefits technology and administrative platform that partners with Providence Health Plan. The partnership is intended to help members understand, navigate, and pay for health care.

Commission


A fee paid to an insurance broker by an insurance company. It's typically a percentage of the [premium](#) paid by the policyholder. It serves as the broker's compensation for their services.

Community Resource Desk (CRD)

A service that helps individuals and families connect to resources in their community. Resources includes food pantries, housing resources, and transportation options.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

A U.S. federal law that may allow you to keep health coverage after your employment ends, you lose coverage as a covered dependent, or you experience another qualifying event. If you elect COBRA coverage, you pay 100% of the [premium](#), plus a 2% administrative fee.


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Consumer-Driven Health Plan (CDHP)

A type of medical insurance plan that combines a [High-Deductible Health Plan \(HDHP\)](#) with a tax-advantaged [Health Savings Account \(HSA\)](#).

Coordinated Care Model

A medical plan model that uses a collaborative, team-based approach to deliver care. The team is led by your [primary care provider \(PCP\)](#). It also includes nurses, specialists, and pharmacists. The members of your team work together to ensure they're all on the same page when it comes to your health. (May also be referred to as [medical home](#).)

Copayment or Copay

A fixed dollar amount you pay for certain health care services.

Core Benefits

Benefits that are considered essential to a member's overall satisfaction and wellbeing. They typically include health care, time off, and retirement plans.

Cost Share

The amount of health care services that you're responsible for paying out of your own pocket.

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Deductible

The amount you may be required to pay each year before your plan starts to pay for a covered health care service.

Delta Dental 

A health insurance company that provides dental plan coverage. PEBB offers Delta Dental plan options to members.

Department of Consumer and Business Services (DCBS)


Oregon’s largest consumer protection and business regulatory agency. The divisions and programs that make up the DCBS include the Building Codes Division, [Division of Financial Regulation \(DFR\)](#), Oregon Occupational Safety and Health Administration (OSHA), Workers’ Compensation Board, Workers’ Compensation Division, and two ombuds offices.

Dependent

A person who is eligible for benefits based on their relationship to you. Examples include your spouse, domestic partner, child(ren), or stepchild(ren).

Dependent Care Flexible Spending Account (DCFSA)

A type of Flexible Spending Account (FSA) that allows you to set aside pre-tax dollars to pay for work-related child or elder care expenses. You may contribute up to a certain amount each year. Any unused funds in your account at the end of the year are forfeited.

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Dependent Eligibility Verification

A process used to confirm that dependents covered by a health care plan are eligible according to the plan's rules.

Division of Financial Regulation (DFR)

A state government agency within the Oregon [Department of Consumer and Business Services \(DCBS\)](#). The DFR is responsible for protecting access to fair products and services through education, regulation, and consumer assistance.

Double Coverage

When you're covered by two health insurance plans at the same time. For example, this occurs when you're covered by your own employer's plan as well as a spouse or domestic partner's plan.


— E —

Early Retiree

An individual who retires before the age of 65.

Employee Assistance Program (EAP)

A free and confidential benefit that can assist you and your eligible family members with any personal problems through counseling sessions that are available in person, by phone, or virtually each year

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Employee Retirement Income Security Act (ERISA)

A U.S. federal tax and labor law enacted in 1974 to establish minimum standards for health plans. It requires plans to provide participants with information and create a claims and appeals process. ERISA also establishes enforcement rules to ensure plan funds are protected and participants receive benefits.

Enlight

A digital wellbeing tool that's available at no cost to you through the [Canopy Employee Assistance Program \(EAP\)](#). It helps you explore ways to improve your sleep, relationships, mood, and more.

EviCore

A utilization management program that Providence Health Plan uses for [prior authorizations](#). These are related to physical therapy, occupational therapy, and other medical services. EviCore ensures services meet evidence-based clinical guidelines before they're performed.

Evidence of Insurability (EOI)

A process used by insurance companies to gather health and financial information about you to determine if they will offer you coverage. It is often used with voluntary [life insurance](#).

Exclusive Provider Organization (EPO)

A managed care plan where services are covered only if you use doctors, specialists, or hospitals in the plan's network (except in an emergency).

Explanation of Benefits (EOB)

A document from your health insurance company that explains what medical treatments and/or services were paid on your behalf.

ExpressCare Virtual

A virtual health care program that’s available at no cost to Providence Health Plan members.

— F —


Family Medical Leave Act (FMLA)

A U.S. federal law enacted in 1993. This law allows eligible employees to take up to 12 weeks of unpaid, job-protected leave per year for specific family and medical reasons. Leave can be used for the birth of a child, the placement of a child for adoption or foster care, or to care for a family member or themselves with a serious health condition. Employers must maintain the employee's health benefits during the leave.

Flexible Spending Account (FSA)

An account arranged through your employer that lets you pay for eligible out-of-pocket expenses or expenses with tax-free dollars. You decide how much to put into your FSA, up to an annual limit set by PEBB. Your contributions to the account aren’t taxed. PEBB offers three types of FSAs (administered by [ASIFlex](#)):

- [Health Care FSA](#) — for eligible medical, dental, vision, and pharmacy expenses.
- [Dependent Care FSA](#) — for eligible child and elder care expenses.
- [Commuter benefits account](#) — for eligible parking and transit expenses.


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Formulary

A list of prescription medications that are covered by a prescription drug plan. (May also be referred to as preferred drug list.)

Free & Clear

A tobacco-cessation program that’s available at no cost to you through the [Canopy Employee Assistance Program \(EAP\)](#).

— G —

Garner 

A digital tool that can be used to find high-quality health care providers. When you use Garner-approved providers, you can be repaid for eligible costs, such as your [deductible](#), [copay](#), or [coinsurance](#). The [Garner directory](#) is available at no cost to members enrolled in a Providence Health Plan or Moda Health medical plan.

Generic Drug

A prescription drug that has the same active ingredients as a brand-name drug but generally costs less. Generic drugs are as safe and effective as brand-name drugs.

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Health Care Flexible Spending Account (HCFSA)

A type of [FSA](#) that allows you to set aside pre-tax dollars to pay for eligible out-of-pocket medical, dental, and vision expenses for you and your [dependents](#). You may contribute up to a certain amount each year. Any unused funds in your account at the end of the year are forfeited.

Health Care Service Contractor (HCSC)


Medical plans that offer a high level of service and benefits with low out-of-pocket [copays](#). To receive benefits, you must use the providers and facilities that are part of the plan. You select an in-network [primary care provider \(PCP\)](#) to guide your care. PEBB sponsors two Kaiser Permanente HCSC plans.

Health Insurance Portability and Accountability Act (HIPAA)

A U.S. federal law enacted in 1996. It sets national standards to protect the privacy and security of personal health information. It establishes rules for how health information is used and disclosed. It also grants rights to patients over their health records.

Health Maintenance Organization (HMO)

A type of health insurance plan that limits coverage to care from providers who work for or contract with the HMO. It generally won't cover out-of-network care except in an emergency. An HMO may require you to live or work in the plan's service area to be eligible for coverage.


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Health Policy and Analytics (HPA)

A division of the [Oregon Health Authority \(OHA\)](#). It provides policy development, strategic planning, and clinical leadership. It also develops technology tools to support care coordination, health system performance evaluation, and transformation. PEBB is a program within the HPA division of Oregon Health Authority. PEBB aligns with HPA’s efforts to develop and implement innovative approaches working with partners to achieve the triple aim of better health, better care, and lower costs.

Health Reimbursement Arrangement (HRA)


An employer-funded account that is used to reimburse you for qualified medical expenses. You’re reimbursed up to a fixed dollar amount per year. Unused amounts may be rolled over to use in subsequent years. Your employer funds and owns the arrangement. (May also be referred to as Health Reimbursement Account.)

Health Savings Account (HSA)

A type of savings account that lets you set aside money on a pre-tax basis. You can use the funds in your account to pay for qualified medical expenses, like [deductibles](#), [copays](#), and [coinsurance](#). You can only contribute to an HSA if you are enrolled in an HSA-eligible plan, like a [High-Deductible Health Plan \(HDHP\)](#). An HSA may earn interest or other earnings, which are not taxable.

High-Deductible Health Plan (HDHP)

A type of medical insurance plan with a higher [deductible](#) amount. The [premium](#) amount is usually lower. However, you generally pay more for health care services out of your pocket before the plan starts to pay its share. (This is called your deductible). HDHPs can be combined with a [Health Savings Account \(HSA\)](#).


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Imputed Income

The cash value of a benefit that your employer pays on your behalf. This amount is treated as part of your taxable income. It is most common with benefits like employer-paid [life insurance](#) or health plan coverage for your domestic partner.

Incur

The date a service occurs, or a purchase is received. This is the last date you are allowed to receive a service or purchase an eligible item.

Incurred But Not Reported (IBNR)

The estimated cost of [claims](#) that have already occurred but have not yet been reported to the insurance company. Insurance companies set aside reserves to cover unreported claims to ensure they have sufficient funds for all liabilities.


In-Network (INN) Provider



A health care provider or facility that has a contract with your health insurance plan to provide services at a negotiated discount.

Innovation Work Group (IWG)

Representatives from the PEBB and OEBC Boards who work together to study issues and make recommendations to improve health care in Oregon.

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Insurer

A company that administers a member benefit plan. It takes on the risk of claims and service payments associated with that plan.

— J —

— K —

Kaia Health


A digital exercise therapy program for musculoskeletal pain. This program is available at no cost to Providence Health Plan members.

Kaiser Permanente (KP)

An integrated health care organization that combines a nonprofit health plan with its own hospitals and doctors. PEBB offers Kaiser Permanente health plan options to members.

Kindbody

A fertility and family-building company. Moda Health partners with Kindbody to support members on their journey to parenthood.


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— L —

Life Insurance

A type of insurance that pays a benefit directly to any [beneficiaries](#) you’ve designated in the event of your death.

Long-Term Care (LTC)

Insurance coverage that helps pay for the care you may need if you’re unable to independently perform basic [activities of daily living \(ADLs\)](#).

Long-Term Disability (LTD)

Insurance coverage that pays you a portion of your monthly pay if a disability prevents you from working for a longer period of time.


Lyra Health

The administrator of [Oregon State University’s Employee Assistance Program \(EAP\)](#).

— M —

Maximum Benefit

The most your health plan will pay for a specific service each year.

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Medical Home

A medical plan model that uses a collaborative, team-based approach to deliver care. The team is led by your [primary care provider \(PCP\)](#). It also includes nurses, specialists, and pharmacists. The members of your team work together to ensure they're all on the same page when it comes to your health. (May also be referred to as [coordinated care model](#).)

Medicare Eligible

An individual who currently qualifies for Medicare benefits due to age (65 or older) or disability.

Member

An individual who's eligible for PEBB benefits. This includes state of Oregon employees and public university employees in Oregon, as well as their eligible [dependents](#).


Moda Health

A health insurance company that provides medical and dental plan coverage. PEBB offers several Moda Health plans to members.

— N —

National Association of Insurance Commissioners (NAIC)

An organization composed of chief insurance regulators from the 50 U.S. states, the District of Columbia, and U.S. territories. Its purpose is to support state-based insurance regulation, ensure market integrity, and protect consumers.


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Network

Facilities, providers, and suppliers that a health insurance plan has contracted with to provide services at a discounted rate.

Non-Preferred Brand

Brand-name prescription medications that aren't included in a plan's [formulary](#), or list of preferred drugs.

— O —

Omada

A diabetes prevention and weight management program. [Kaiser Permanente](#) and [Providence Health Plan](#) contract with Omada to provide services to their members.

Open Enrollment


The period each year when you can enroll in PEBB benefits or make changes to your existing coverage.

Oregon Administrative Rules (OARs) 🔗

The regulations adopted by Oregon state agencies to implement and interpret state laws passed by the legislature. They provide specifics on how laws are put into practice and have the force of law.

Oregon Educators Benefit Board (OEBB) 🔗

A program that provides a variety of benefit plans to K-12 school districts, education service districts, community colleges, and local governments in Oregon.


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Oregon Health Authority (OHA) 

An Oregon state agency that works to improve the physical, mental, and social wellbeing of Oregonians through different programs and services.

Oregon Revised Statute (ORS)

The recorded state laws of Oregon, including all legislation passed by the Oregon Legislative Assembly or citizen initiatives. It serves as the official source for Oregon's state laws and is maintained by the [Oregon State Legislature](#).

Oregon State University (OSU)

A large, public research university based in Corvallis, Oregon.

Out-of-Area (OOA)

A medical treatment that is received outside your health plan's service region.

Out-of-Network (OON) Provider

A health care provider or facility that doesn't have a contract with your health insurance plan to provide services at a negotiated discount.

Out-of-Pocket Maximum

The most you will pay each year before your plan begins to pay 100% of eligible expenses. (May also be referred to as out-of-pocket max or out-of-pocket limit.)

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Paid Leave Oregon (PLO)

An Oregon state program that provides paid, job-protected time off for eligible workers for medical, family, and safe leave purposes.

Patient-Centered Primary Care Home (PCPCH)

An [Oregon Health Authority \(OHA\)](#) program that collaborates with community partners to develop standards of care for primary care practices. The partners who meet those standards are recognized as Patient-Centered Primary Care Homes.

PCP 360


A [primary care provider \(PCP\)](#) in a Moda Health plan who’s part of a facility that’s been certified by Oregon’s [Patient-Centered Primary Care Program \(PCPCH\)](#) or other similar programs.

PEBB Information Exchange (PIE)

A group of PEBB [staff](#), local governments, universities, and agency administrations. The group shares Board meeting highlights, benefits information, eligibility and audit results, system changes, and communications.

PEBB Member Advisory Committee (PMAC)

A group of labor and management members that provides advice and feedback to the PEBB Board and its [staff](#) about potential plan and benefit changes.

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Per Employee Per Month (PEPM)

Fees or rates paid to providers or plans for each employee covered by the plan each month.

Per Member Per Month (PMPM)

Fees or rates paid to providers or plans for each member covered by the plan each month.

Pharmacy Benefits Manager (PBM)

A [third-party administrator \(TPA\)](#) that manages prescription drug benefits for health insurance plans.

Plan

A program offered by PEBB to provide members with health and insurance benefits.

Preferred Brand


Brand-name prescription medications that are selected by a health insurance plan as being more cost-effective and/or advantageous compared to other prescription drugs.

Preferred Provider Organization (PPO)

A type of health plan that contracts with medical providers, such as hospitals and doctors, to create a network of participating providers. You pay less when you use providers that are in the plan's network.

Premium

The amount taken from your paycheck to pay for benefits.


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Preventive Care

Routine health care that includes screenings, checkups, and patient counseling to prevent an illness, disease, or other health problems. (May also be referred to as preventive services.)

Primary Care Provider (PCP)

The medical professional who coordinates your overall health and wellness.

Prior Authorization

Approval that’s needed from your health insurance plan before it will cover certain services. (May also be referred to as pre-authorization or pre-auth.)

Progyny


A fertility and family-building company. Providence Health Plan partners with Progyny to support members on their journey to parenthood.

Providence Health Plan (PHP)

A health insurance company that provides medical plan coverage. PEBB offers Providence Health Plan options to members.

Provider

An individual or facility that provides health care services. Examples include doctors, nurses, chiropractors, physician assistants, hospitals, surgical centers, skilled nursing facilities, and rehabilitation centers.


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Public Employees’ Benefit Board (PEBB) 

The program that designs, contracts, and administers a benefits package for eligible members in Oregon.

Public Employees’ Retirement System (PERS) 

A retirement plan for public employees in the state of Oregon.


— **Q** —

Qualified Status Change (QSC) 

A life event that allows you to make changes to your benefit plan elections outside the annual [Open Enrollment](#) period.

Quit for Life 

A tobacco-cessation program that’s available at no cost to anyone who’s enrolled in a PEBB medical plan.


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— R —

Referral

A written order from your [primary care provider \(PCP\)](#) for you to see a specialist or get certain medical services. Some health insurance plans require you to get a referral before you can receive medical care from anyone except your PCP.

Request for Proposal (RFP)

A formal document used by an organization to ask potential insurance brokers or [carriers](#) to submit bids for providing health plans. The RFP outlines the organization's specific needs, requirements, and evaluation criteria. The process ensures a competitive and transparent way to find the best-suited insurance provider.

Risk-Based Capital (RBC)


Rules that make banks and insurance companies keep a certain amount of money in reserve. This money is a safety cushion. The amount of money that must be saved is based on how risky the company’s business is.

Rule Advisory Committee (RAC)

A group of individuals from impacted communities who provide input to the [Oregon Health Authority \(OHA\)](#) throughout the rulemaking process.

Rx

A common abbreviation for prescription drugs.


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— S —

Schedule of Benefits (SOB)

A document that outlines the key details of a health plan in a simplified format. It includes a summary of covered services, cost-sharing amounts, and services that aren’t covered by the plan.

Self-Insured

A type of insurance plan in which the plan sponsor pays for health care costs rather than the insurance company. A [third-party administrator \(TPA\)](#) typically processes the [claims](#) on the plan sponsor’s behalf.

Self-Pay


Paying for health care services directly with your own money.

Service Employees International Union (SEIU)

A labor union with 87,000 members in Oregon who are united by their belief in the dignity and worth of workers and the services they provide. The SEIU is dedicated to improving the lives of workers and their families and creating a more just and humane society.

Short-Term Disability (STD)

Insurance coverage that pays you a portion of your salary if you become disabled and are unable to work for a short period of time. STD is for non-job-related disabilities, like illnesses, accidents, and injuries.


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Specialty Drug

Prescription medications that are used to treat complex, chronic, and rare conditions. These drugs are typically higher cost and require special handling, monitoring, and administration.

Spring Health

A telehealth program that’s available at no cost to Moda Health members for mental and behavioral health services.

Staff

PEBB employees who manage the day-to-day operations of the health and insurance benefit plans. This includes enrollment, claims, and member services.

Strategies on Evidence and Outcomes Workgroup (SEOW)


A committee with representatives from PEBB and OEBC that uses data and evidence to improve the health and wellness programs for members. The SEOW reviews data, discusses health program outcomes, and makes recommendations to the OEBC and PEBB Boards.

Summary of Benefits and Coverage (SBC)

An easy-to-read summary of the costs and coverage associated with a specific health insurance plan. The format of each SBC is the same, so you can easily compare plan options based on price, benefits, and other features.

Summary Plan Description (SPD)

A document that explains the important details of a benefit plan in plain language. It outlines eligibility, benefits, and responsibilities, and is required under the [Employee Retirement Income Security Act \(ERISA\)](#).


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Surcharge

An additional fee you may have to pay for benefits based on your tobacco use or other coverage options.

Sword Health

A virtual physical therapy program that’s available at no cost to Moda Health members.

— T —

Teladoc

A diabetes prevention program that’s available at no cost to Moda Health members.

The Standard

The administrator of PEBB’s [life insurance](#) and [Accidental Death and Dismemberment \(AD&D\)](#) insurance.


Third-Party Administrator (TPA)

A company that manages administrative aspects of a benefit plan on behalf of another entity, such as [claims](#) processing.

— U —

Unum

The administrator of PEBB’s [Long-Term Care \(LTC\)](#) insurance.

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— V —

Virta

A provider-led, research-backed treatment program to help reverse type 2 diabetes. Virta is available at no cost to [Providence Health Plan](#) and [Moda Health](#) members.

Vision Service Plan (VSP)

A health insurance company that provides vision plan coverage. PEBB offers VSP plan options to members.

— W —

WeightWatchers (WW)


A program that’s available at no cost to PEBB members who are 18 or older to help achieve and maintain a healthy weight.

Whole Life Directions

This program has been replaced by the [Enlight](#) digital wellbeing tool.

Willamette Dental Group

A health insurance company that provides dental plan coverage. PEBB offers a Willamette Dental Group plan option to members.


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Web Content Accessibility Guidelines (WCAG)

International set of standards for making web content more accessible to people with disabilities. Developed by the [World Wide Web Consortium \(W3C\)](#).

Worksite Wellness Coordinating Council (WWCC)

A group that provides guidance to agencies, PEBB, and the Governor's Office on evidence-based worksite wellness. Council members include agency leaders from the [Oregon Health Authority \(OHA\)](#), Public Health Division, [Public Employees' Benefit Board \(PEBB\)](#), Department of Administrative Services (DAS), the Governor's Office, and union representatives.

Walk with Ease (WWE)

A community program with health lessons, simple exercises, and motivation tools.

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—Z—

