Glossary of Abbreviations and Terms

Abbrevia.tions

ALG — Antilymphocyte globulin

A M A — American Medical Association

ASTS — American Society of Transplant Surgeons

ATG — Antithymocyte globulin AWP — Average wholesale price

AZA — Azathioprine

CPT — Common Procedure Terminology

CSA — Cyclosporine

DHHS — U.S. Department of Health and Human Serv-

ices

ESRD — End-stage renal disease

FDA — Food and Drug Administration (Public

Health Service)

HCEA — Health Care Financing Administration (DHHS)

OKT-3 — Orthoclone OKT-3 (muromonab CD3)

OTA — Office of Technology Assessment (U.S. Con-

gress)

PRED — Prednisone

UNOS — United Network of Organ Sharing

Terms

Adjunct prescription **drugs**: Medications that are used as part of the immunosuppressive therapeutic regimen but that are not themselves primary post-transplant immunosuppressive drugs.

Allogeneic **bone marrow transplant:** A procedure in which the bone marrow is obtained from a healthy donor and delivered by intravenous infusion into the recipient.

Aplastic **anemia:** A blood disorder in which the bone marrow fails to produce adequate numbers of red blood cells.

Assignment: A process whereby a Medicare beneficiary assigns his or her right to payment from Medicare to the physician or supplier. In return, the physician or supplier agrees to accept Medicare's reasonable (i.e., allowed) charge as payment in full for covered services. The physician (or supplier) may not charge the beneficiary more than the applicable deductible and coinsurance amounts. For physicians and suppliers who do not accept assignment, payment is made by Medicare directly to the beneficiary, who is responsible for paying the bill. In addition to the deductible and coinsurance amounts, the beneficiary is liable for any difference between the physician's actual charge and Medicare's reasonable (allowed) charge.

Autologous **bone marrow transplant:** A procedure in which a patient's own bone marrow is extracted, treated, and then restored to the patient.

Balance billing: In the Medicare program, the practice of billing a Medicare beneficiary in excess of Medicare's allowed charge. The "balance billing' amount would be the difference between Medicare's allowed charge and the physician's (or supplier's) billed charge.

Cadaveric kidney: A kidney obtained from a deceased donor.

Carrier: A fiscal agent (typically a private insurance company) under contract to the Health Care Financing Administration to administer Medicare Part B benefits.

Coinsurance: That percentage of covered hospital and medical expenses, -after subtraction of any deductible, for which an insured person is responsible. Under Medicare Part B, after the annual deductible has been met, Medicare will generally pay 80 percent of approved charges for covered services and supplies; the remaining 20 percent is the coinsurance, which the beneficiary pays.

Conventional immunosuppressive therapy: See traditional immunosuppressive therapy

Customary, prevailing, and reasonable charge method (Medicare): The method used by Medicare carriers to determine the approved charge for a particular Part B service from a particular physician or supplier. Under this method, the approved charge is limited to the lowest of the physician's actual charge for the service, the physician's customary charge for the service, and charges by peer physicians or suppliers in the same locality. If necessary, prevailing charges are adjusted by the Medicare Economic Index.

Deductible: The Medicare Part B deductible is the portion of approved charges (for covered services each calendar year) for which a beneficiary is responsible before Medicare assumes liability. The deductible is set at \$100 in 1991.

Functioning graft: An implanted organ that is still functioning to some capacity of its purpose.

Graft: An implanted organ.

Histocompatibility: The genetic compatibility between the donor and recipient, which determines in part whether an organ graft will be rejected.

Hypertension: High blood pressure.

Immunology: The science concerned with the study of the immune system.

Immunosuppressive drug: Any drug that suppresses the natural reactions of the immune system. In organ transplants, such drugs can reduce or prevent the body's immune system's rejection of the organ as a foreign substance.

In vitro: Outside of the living body and in an artificial environment.

Medicare coverage: Refers to the health care benefits available to eligible Medicare beneficiaries.

Nephrotoxic: Poisonous to the kidney.

Nonrenal transplant: Any transplant other than a kidney transplant (e.g., heart, liver).

Organ graft **failure:** The failure of an implanted organ to function and fulfill its purpose. For kidney transplant patients, this means a return to dialysis until another organ is available. For other transplant patients, organ failure could mean death unless another organ is available for transplantation.

Organ rejection: A condition caused by the incompatibility between an organ recipient's genetic makeup and the donor's genetic makeup, leading the recipient's immune system to act against the transplanted organ. If untreated, organ rejection leads to organ failure.

Parenteral **drug administration:** Any non-oral means of introducing a drug into the body (e.g., by injection).

Prophylactic therapy: Preventive measures to inhibit disease. For transplant recipients, prophylactic immunos-uppressive therapy is that which prevents or inhibits organ rejection.

Protocol: A standard course of therapy, designed to achieve certain ends.

Reasonable charge (Medicare): Payment on the basis of *customary, prevailing, and reasonable charges*.

Reasonable cost-based reimbursement (Medicare): A method of payment for health care services in which hospitals (or other providers) are paid their incurred costs of treating patients after the treatment has Occurred.

Regimen: Any plan of therapy designed to achieve certain ends.

Renal: Of or relating to the kidney.

Successful graft: An organ that functions effectively.

Syngeneic: In bone marrow transplantation, refers to a transplant involving a donor and recipient with identical genetic makeups.

Traditional immunosuppressive therapy: Drug therapy to prevent organ rejection using azathioprine and prednisone.