D.M.H. Glossary

200% Poverty
References the Federal Poverty Level. 200% poverty means those making less than twice the poverty level.

5150
Refers to Section 5150 is a section of California's Welfare and Institutions Code (specifically, the Lanterman-Petris-Short Act or "LPS") which allows a qualified officer or clinician to involuntarily confine a person deemed a danger to himself, herself, and/or others[1] and/or gravely disabled. A qualified officer, which includes any California peace officer, as well as any specifically designated county clinician, can request the confinement after signing a written declaration. When used as a term, 5150 can informally refer to the person being confined or to the declaration itself.

AB 2034
Assembly Bill No. 2034 provided State general funds that allowed localities to provide comprehensive, integrated services to adults who have serious mental illness and who are homeless or at risk of becoming homeless; or who have recently been released from a county jail or state prison; or who are at significant risk of incarceration or homelessness and do not have access to needed services and supports. Funding for this program was eliminated from the Fiscal Year 07/08 state budget in a line-item veto by the Governor. The AB 2034 program was honored as a model program for individuals with mental illness who are homeless under the President's New Freedom Commission. The program's success provided both inspiration and data on effective practices and helped spur public support for the Proposition 63 ballot initiative.
Acronyms

ACHSA : Association of Community Human Service Agencies
ARMS : At Risk Mental State
AOT : Assisted Outpatient Treatment

Terms & Definitions

Access
“Access” means the extent to which an individual who needs mental health services is able to receive them, based on conditions such as availability of services, cultural and language appropriateness, transportation needs, and cost of services.

Advance Directive
Legal documents or statements, including a living will, which are witnessed and allow an individual to convey in expressed instructions or desires concerning any aspect of an individual’s health care, such as the designation of a health care surrogate, the making of an anatomical gift, or decisions about end-of-life care ahead of time. An Advance Directive provides a way for an individual to communicate wishes to family, friends and health care professionals, and to avoid confusion about end-of-life care ahead of time.

Annual Liability
The Annual Liability, also known as UMDAP liability, is based on a sliding scale fee and applies to services extended to the client and dependent family members. The annual liability is determined by using the adjusted monthly income amount and the number dependent on the adjusted monthly income. A client is responsible for the annual liability amount or the actual cost of care, whichever is less. The annual liability period runs from the date of the client’s first visit through end of the and the subsequent eleven calendar months (e.g. An initial liability determination made of Jan 5, 2007 would be valid through December 31, 2007) and each 12-month period thereafter during which the client continues to receive services. It is renewed annually, provided the client continues to receive services, with the new 12-month period beginning on the 1st day of the month during which liability was originally determined (e.g. using the earlier example, the next annual liability period would run from Jan 1, 2008 through December 31, 2008). Note: Admissions and/or readmissions during the 12-month period do not change the sliding scale fee period.

Assessment
“Assessment” means a professional review and evaluation of an individual’s mental health needs and conditions, in order to determine the most appropriate course of treatment, if indicated, and may ascertain eligibility for specific entitlement or mandated programs.

Assisted Outpatient Treatment (AOT)
Assisted outpatient treatment is sustained and intensive court-ordered treatment in the community for those most overcome by the symptoms of severe mental illness. The treatment mechanism is only used until a person is well enough to maintain his or her own treatment regimen. Serving as a bridge to recovery for those released from inpatient facilities as well as an alternative to hospitalization, assisted outpatient treatment can stop the "revolving door" of repeated hospitalizations, jailings, and homelessness.

Association of Community Human Service Agencies.
ACHSA represents more than 75 nonprofit community agencies that provide a wide range of child welfare, mental health, and juvenile justice services for vulnerable individuals and families in Los Angeles County. The mission is to promote the role of the private nonprofit sector in mental health and child welfare service delivery and to provide mutual support in pursuit of a more effective community.
At Risk for Suicide
"At Risk for Suicide" means those individuals or population groups who demonstrate a higher likelihood than average to commit suicide.

At Risk Mental State (ARMS)
"At Risk Mental State" means the condition of individuals who are at risk for developing a psychotic illness and are experiencing signs or symptoms that are indicative of high risk for psychotic illness. These individuals have not yet been diagnosed with a psychotic illness.

Auditor-Controller
The department within the County that is responsible for auditing business operations and paying debts.
B

Acronyms

BOS : Board of Supervisors

Terms & Definitions

Benefits establishment
A program of the Comprehensive Community Care plan (CCC). It was discovered that many clients of DMH are eligible for MediCal but did not apply for it. It was resolved that clients would be screened and given help in applying for MediCal so that DMH could receive income for providing services to these clients and thereby increase income for the county.

Block Grant
In a federal system of government, a block grant is a large sum of money granted by the national government to a regional government with only general provisions as to the way it is to be spent. This can be contrasted with a categorical grant which has more strict and specific provisions on the way it is to be spent. An advantage of block grants is that they allow regional governments to experiment with different ways of spending money with the same goal in mind.

Board Letter
This is the official proposal/request to the Board of Supervisors to use department funding for a specific purpose. The Board Letter must be approved by the Supervisors in order for any funding to be released.

Board of Supervisors (BOS)
Refers to the Los Angeles County Board of Supervisors that oversee all county departments, including DMH. This Board is an elected body.

Body Mass Index
A measure of body fat based on height and weight that applies to both adult men and women.

Bundling and Unbundling of Service Codes
Bundling or unbundling that occurs when the actual services performed and reported for payment on a claim can be represented by a different group of procedure codes.
Acronyms

CAO : Chief Administrative Officer
CAU : Central Authorization Unit
CAMP : Los Angeles Police Department Case Assessment and Management Program.
CBO : Community-based organization
CCAC : Cultural Competence Advisory Committee
CCC : Comprehensive Community Care plan
CCHIT : Certification Commission for Healthcare Information Technology
CCR : California Code of Regulations
CEO : Chief Executive Officer
CGF : County General Funds
CIMH : California Institute for Mental Health
CIOB : Chief Information Office Bureau
CMHDA : California Mental Health Directors Association
COD : Co-occurring Disorders
CMHPC : California Mental Health Planning Council
CMS : Centers for Medicare & Medicaid Services
COB : Coordination of Benefits
COS : Community Outreach Service
CSAC : California State Association of Counties
CSS : Community Services and Supports
CTF : Community Treatment Facility

Terms & Definitions

Chief Administrative Officer (CAO)
This position was replaced by the CEO in the restructuring of 2007.

California Institute for Mental Health (CIMH)
The mission of CIMH is to promote excellence in mental health services through training, technical assistance, research, and policy development.

California Mental Health Director’s Association (CMHDA)
CMHDA provides assistance, information, training, and advocacy to the public mental health agencies that are its members. The mission of the Association is to provide leadership, advocacy, expertise and support to California’s county and city mental health programs (and their system partners) that will assist them in serving persons with serious mental illness and serious emotional disturbance.

California Mental Health Planning Council (CMHPC)
PL 106-310 re-authorized the Community Mental Health Services Block Grant and reaffirmed the requirement that each state must have a mental health planning council in order to receive the block grant. Federal law requires the Planning Council to perform the following functions: Review the State mental health plan and the annual implementation report and submit to the State any recommendations for modification. Advocate for adults with serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses or emotional problems. Monitor, review, and evaluate annually the allocation and adequacy of mental health services within the State.

California State Association of Counties (CSAC)
The primary purpose of CSAC is to represent county government before the California Legislature, administrative agencies and the federal government. CSAC places a strong emphasis on educating the public about the value and need for county programs and services.
CalWORKs
California Work Opportunities and Responsibilities to Kids Act, which under California Welfare and Institutions Code Section 11200 et seq. provides for mental health supportive services to eligible welfare recipients. CalWORKs funding consists of both Federal and State funds.

Cash Flow Advance
County General Funds (CGF) furnished by County to Contractor for cash flow purposes in expectation of Contractor repayment pending Contractor's rendering and billing of eligible services/activities.

Centers for Medicare & Medicaid Services – 1500
Standard paper claim form used by a non-institutional provider or supplier to bill Medicare carriers and Medicare administrative contractors when a provider qualifies for a waiver from the Administrative Simplification Compliance Act requirement for electronic submission of claims; also used to bill Medicaid State Agencies.

Central Authorization Unit
Unit of managed care division in the DMH Office of the Medical Director that conducts monitoring and authorization of services. Specific service authorizations include Over Threshold Authorization, psychological testing, Day Treatment/TBS Authorization and requests for authorization of out-of-county services.

Certification Commission for Healthcare Information Technology
A recognized certification authority for electronic health record products in the United States, setting the industry bar for functionality, interoperability of products and networks, and security.

Children and Youth in Stressed Families
“Children and Youth in Stressed Families” means children and youth placed out-of-home or those in families where there is substance abuse or violence, depression or other mental illnesses, or lack of caregiving adults (e.g., as a result of a serious health condition or incarceration), rendering the children and youth at high risk of behavioral and emotional problems.

Children's Countywide Case Management
A division within the DMH Child, Youth and Family Programs Administration oversees a variety of Countywide administrative and service functions related to services provided to children and youth.

Client Supportive Services
Essential service that may not be reimbursable under Medi-Cal or other benefits programs (e.g., outreach and engagement services, housing services, employment services, transportation, etc.).

Community-defined Evidence
“Community-defined evidence” means practices that have a community-defined evidence base for effectiveness in achieving mental health outcomes for underserved communities. It also defines a process underway that will develop specific criteria by which effectiveness may be documented using community-defined evidence that will eventually give the procedure equal standing with current evidence-based practices.

Community Clinic
“Community clinic” means a clinic operated by a tax-exempt nonprofit corporation that is supported in whole or in part by donations, bequests, gifts, grants, government funds, or contributions. Any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. These clinics provide essential health services to primarily uninsured and under-served men, women, and children.

Community Outreach Service
Services provided to the community-at-large, who include special population groups, human service agencies, and individuals and families who are not clients of the mental health system.
Community Services and Supports
One of the Plans funded under California's Mental Health Services Act. CSS plan focuses on children and families, transitional age youth, adults, and older adults who have the most severe and persistent mental illness or serious emotional disturbances, including those who are at risk of homelessness, jail, or being put or kept in other institutions because of their mental illness. The CSS Plan for Los Angeles County was initiated in 2005 and funds several new service delivery programs including Full Service Partnerships, Wellness Centers, Service Area Navigation Teams, Urgent Care Center, and Family Supportive Services.

Community Services and Supports (CSS)
The Community Services and Supports Plan, in general, references planned community-based mental health services and support programs funded under the Mental Health Services Act. The plan must demonstrate community collaboration, cultural competence, client- and family-driven mental health systems and other components that support a recovery and resilience oriented system of care. The CSS plan is the first of five (5) plans that is funded through the State Department of Mental Health for the MHSAs.

Community Treatment Facility
The specific licensing term associated with a high level residential treatment facility for youth. A CTF facility is a higher level of care than an RCL 14 facility.

Co-occurring Disorders (COD)
"Co-occurring disorders" means two or more disorders occurring to one individual simultaneously. Clients said to have COD have more than one mental, developmental, or substance-related disorder, or a combination of such disorders. COD exists when at least one disorder of each type can be established independent of the other and is not simply a cluster of symptoms resulting from a single disorder.

Coordination of Benefits
A process for determining the respective responsibilities and priority order of two or more insuring entities that have some financial responsibility for a medical claim.

Comprehensive Community Care (CCC)
This plan was developed in 2000 under the direction of Dr. Southard. This plan focused on redesigning the current system to become a client and family focused system through changes in both philosophy (Client focused model) and structure (more community involvement, changes in delivery of services).

Contract Discrepancy Report
A written report prepared by the County to identify Contractor's specific failures in meeting contract standards.

Contract Provider
A person/group/organization that contracts with DMH to provide any type of mental health services (e.g., direct services, indirect services, consultation).

Cost Reimbursement (CR)
The arrangement for the provision of mental health services based on the reasonable actual and allowable costs of services provided under this Agreement, less all fees paid by or on behalf of patients/clients and all other revenue, interest and return resulting from the same services.

County Council
County council is the lawyer part of the county. This department provides legal council for the county. Every plan must go through the council to make sure that it is not in violation of the law.
Countywide Resource Management
An organizational division within the DMH that centrally tracks capacity and prospectively authorizes access to approximately one thousand, three hundred (1,300) beds distributed across institutes for Mental Disease, a Psychiatric Health Facility, state hospitals, intensive residential facilities, and inpatient facilities servicing indigent clients.

CPT

CR/DC Manual
SDMH's Cost Reporting/Data Collection Manual

Credentialing
A process of review to approve a provider who applies to participate in a health plan. Specific criteria and prerequisites are applied in determining initial and ongoing participation in the health plan.

Cultural Competency
The practice of continuous self-assessment and community awareness by service providers to ensure a focus on the specific needs regarding linguistic, socioeconomic, educational, spiritual and ethnic experiences of consumers and their families/support systems relative to their care.

Cultural Competence Advisory Committee (CCAC)
The Department of Mental Health (DMH) Director established the Cultural Competence Advisory Committee (CCAC) as an advisory group to DMH Office of Multicultural Services as andated in the Federal Waiver Request. This group plays a critical role in supporting the department in the development and direction of cultural competency standards. The CCAC is comprised of representatives from the California Mental Health Directors Association, mental health consumers and family members, cultural competency consultants, ethnic-specific programs, and university affiliates.
D

**Acronyms**

- DBH: Department of Behavioral Health.
- DCEO: Deputy Chief Executive Officer
- DCFS: Department of Children and Family Services. (Los Angeles County)
- DMH: Department of Mental Health (State of California)
- DPSS: Department of Public Social Services. (Los Angeles County’s)
- DSM IV: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition
- DUP: Duration of Untreated Psychosis

**Terms & Definitions**

**Day(s)**
Calendar day(s) unless otherwise specified

**Day Treatment Rehabilitation**
Day Rehabilitation is a structured program of therapeutic services and activities, in the context of a therapeutic milieu, designed to improve, maintain and restore personal independence and functioning consistent with age-appropriate learning and development. It provides services to a distinct group of clients. Day Rehabilitation is a packaged program with services available at least three (3) hours and less than twenty-four (24) hours each day the program is open. In Los Angeles County these services must be authorized by the Central Authorization Unit.

**Delegates**
The Delegates are an advisory group made up of over 100 stakeholders from the community, service providers, consumers, family members and DMH staff who together formulated the first MHSA plan, the Community Supports and Services (CSS) plan. This advisory group is currently working on the next MHSA plan, the Prevention and Early Intervention (PEI) plan.

**Deputy Chief Executive Officer (DCEO)**
In the restructuring of 2007 the CAO was replaced by the CEO and DCEO positions were created to oversee different county clusters. The cluster that DMH is in reports to the DCEO.

**Deputy Director**
An executive management position in the DMH that may have responsibility for multiple Service Areas (of which DMH has 8) as well as provide oversight for a particular type of Countywide program (e.g., Adult Systems of Care); and alternatively, may have responsibility for certain administrative functions (e.g., Program Support, Planning, and Training).

**Diagnostic and Statistical Manual of Mental Disorders, 4th Edition, Text Revision**
Manual that is published by the American Psychiatric Association and provides diagnostic criteria and other information related to all psychiatric disorders.

**Differential Response**
“Differential Response” means a process by which counties respond commensurate to the individual reports of abuse and neglect that child welfare agencies receive each year. This approach improves a community’s ability to keep children safe. This is accomplished by responding earlier and more meaningfully to reports of abuse and neglect, before family difficulties escalate to the point of harm.

**Director**
The director of Los Angeles County Director of Mental Health or his/her authorized designee.
Directly Operated Facility(ies)
County mental health service delivery site that operates under the DMH's jurisdiction, and are staffed by County employees.

Duration of Untreated Psychosis (DUP)
"Duration of Untreated Psychosis" means the period of time that may range from days to years (depending on recognition of the illness and access to services) between the time an individual experiences symptoms for a psychotic illness and the time when they first receive treatment. (This is an important measure, as studies indicate that a lower DUP will provide better overall outcomes for the individual.)
Acronyms

EDI : Electronic Data Interchange
EHR : Electronic Health Record
EOB : Explanation of Benefits'
EOB : Emergency Outreach Bureau
EMT : Executive Management Team of DMH.
EPSDT : Early and Periodic Screening, Diagnosis, and Treatment program

Terms & Definitions

Early Intervention
“Early Intervention” means the Early Intervention element of the MHSA PEI component which is directed toward individuals and families for whom a short-duration (usually less than one year), relatively low-intensity intervention is appropriate to measurably improve a mental health problem or concern very early in its manifestation, thereby avoiding the need for more extensive mental health treatment or services; or to prevent a mental health problem from getting worse. (Examples: mental health consultation with interventions in child care environments; parent-child interaction training for children with behavioral problems; anger management guidance; and socialization programs with a mental health emphasis for home-bound older adults with signs of depression).

Early and Periodic Screening, Diagnosis, and Treatment program
A requirement of the Title XIX of the Social Security Act, Medi-Cal program to provide comprehensive health care, providing medically necessary services to underserved Medi-Cal eligible beneficiaries less than twenty one (21) years of age.

Electronic Data Interchange
A set of standards for structuring information to be electronically exchanged between and within businesses, organizations, government entities and other groups.

Electronic Health Record
An electronic health record provides secure, real-time, patient-centric information to aid clinical decision-making by providing access to a patient’s health information at the point of care.

Emergency Outreach Bureau (EOB)
The EOB is responsible for the administration and coordination of all mobile response services. These include: Psychiatric Mobile Response Teams, DMH-Law Enforcement Teams, Homeless Outreach Teams and Emergency Response Teams.

Emergency response team (ERT).
ERT provides on-scene consultation and crisis intervention for natural disasters, critical incidents, and terrorist acts.

Emerging Best Practices
“Emerging Best Practices” means those treatments and services with a promising, but less thoroughly documented, evidentiary base.

Explanation of Balance (EOB)
‘Explanation of Balance’ for Title XIX Short-Doyle/Medi-Cal services which is the State Department of Health Services adjudicated claim data and ‘Explanation of Benefits’ for Medicare which is the Federal designated Fiscal Intermediary’s adjudicated Medicare claim data.
**Episode Data**
Information collected regarding a patient that is associated with an Episode of Care.

**Episode of Care**
The time period between the opening and closing of a case within a mental health provider site and the services delivered during that time period through that provider site. It is possible for a client to have multiple episodes of care open at a given point of time.

**Established Maximum Allowable Rate**
The Short-Doyle/Medi-Cal maximum reimbursement for a specific SFC unit as established by SDMH.

**Evidence-based Practice**
"Evidence-based Practice" means the range of treatment and services of well-documented effectiveness. An evidence-based practice has been, or is being evaluated and meets the following criteria:
- Has some quantitative and qualitative data showing positive outcomes, but does not yet have enough research or replication to support generalized positive public health outcomes.
- Has been subject to expert/peer review that has determined that a particular approach or strategy has a significant level of evidence of effectiveness in public health research literature.
**Acronyms**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tr>
<td>FFP</td>
<td>Federal Financial Participation</td>
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<td>FFS</td>
<td>Fee-for-Service</td>
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<tr>
<td>FSPs</td>
<td>Full Service Partnerships</td>
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**Terms & Definitions**

**Facility**
A building or place that provides a particular service or is used for a particular industry.

**Family to Family** is the NAMI Family-to-Family Education Program. It is a free, 12-week course for family caregivers of individuals with severe mental illnesses. The course is taught by trained family members. All instruction and course materials are free to class participants. Over 115,000 family members have graduated from this national program.

**Federal Financial Participation**
Federal Financial Participation for Short-Doyle/Medi-Cal services and/or Medi-Cal Administrative Activities as authorized by Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.

**Fee-for-Service**
A funding mechanism whereby a provider is reimbursed based on services delivered.

**First 5 California**
This program is funded by revenues under Proposition 10 and this group works to help children five and under to thrive. Programs funded through First 5 focus on building strong physical and emotional well-being. In 2003, First 5 identified children with mental health needs as a special needs target population.

**First Onset**
"First Onset" (or "First Break") means the first time an individual meets DSM-IV criteria for a psychotic illness. (DSM-IV diagnoses for psychotic illness include schizophrenia, schizoaffective disorder, brief reactive psychosis, schizophreniform disorder, bipolar disorder with psychotic features, and major depression with psychotic features. All of these diagnoses include psychotic symptoms.)

**Fiscal Intermediary**
County acting on behalf of the Contractor and the Federally designated agency in regard to and/or Title XIX Short-Doyle/Medi-Cal services, and/or Title XIX Medi-Cal Administrative Activities.

**Fiscal Year**
County's Fiscal Year which commences July 1 and ends the following June 30.

**Full Service Partnerships**
Full Service Partnerships (FSPs) are a program model funded under the MHSA Community Service and Supports (CSS) Plan. In these programs, individuals and, where appropriate, their families enroll in a voluntary program designed to ensure that the person(s) receiving services are provided the broad range of supports they need to accelerate their recovery and develop an on-going realization of wellness. Each enrolled individual is assigned to a single point of responsibility case manager and team with a low enough caseload to insure 24/7 availability. Services include linkages to, or provision of, all needed services or benefits as defined by the client and/or family in consultation with the case manager. Services are founded on a "whatever-it-takes" commitment and are judged effective by how well the individuals make progress on concrete outcomes of well-being.
Fully Served
Clients and their family members who receive the full spectrum of mental health services and other community services and supports needed to advance the client’s recover, wellness and resilience are considered to be fully served.
**G**

**Acronyms**

GROW : General Relief Opportunities for Work

**Terms & Definitions**

**Gatekeeper**
"Gatekeeper" means those individuals in a community who have face-to-face contact with large numbers of community members as part of their usual routine; they may be trained to identify persons at risk for mental health problems or suicide and refer them to treatment or supporting services as appropriate.

**Grant-in-aid**
Monies allocated by one level of government to another level of government to be used for specific purposes.

**Gross Program Budget**
The sum total of the Net Program Budget and all "Third Party Revenues" shown in the Financial Summary.

**Guide to Procedure Codes**
A manual created by DMH that defines specific mental health services covered under this contract and the acceptable codes that can be used to claim those services.
H

Acronyms

HCPCS : Healthcare Common Procedure Coding System
HIPAA : Health Insurance Portability and Accountability Act
HL7 : Health Level Seven
HOPE : Pasadena Police Department's Homeless Outreach Psychiatric Evaluation team.
HOT : Homeless Outreach Team

Terms & Definitions

Health-based Interventions
"Health-based interventions" means mental health programs and interventions designed to be used within a healthcare setting to assist trained healthcare providers in identifying, screening, assessing, and treating or referring, individuals with, or at risk for, mental health problems.

Health Center
"Health center" means a health center serving as a non-profit organization that provides primary and preventive health care services for uninsured and underserved populations in collaboration with other community providers.

Healthcare Common Procedure Coding System (HCPCS)
A standardized coding system for describing the specific items and services provided in the delivery of health care for Medicare, Medicaid, and other health insurance programs to ensure that insurance claims are processed in an orderly and consistent manner.

Health Deputies
Each Supervisor's office has a deputy for each county department. The deputy reports to the Supervisor and is the eyes and ears for them on that topic. Each Supervisor has a Deputy for Health that reports to the Supervisory on mental health, public health, health and behavioral services.

Healthy Families
The federally subsidized health insurance program administered by the State of California for the provision of comprehensive health services (including medical, dental and vision care) to children ages birth through 19th birthday from low income families.

Healthy Families Procedures Manual
DMH's Healthy Families Procedures Manual for providers. The HF Procedure Manual contains the formal requirements, policies and procedures governing Healthy Families and is incorporated into this Agreement by reference. Contractor hereby acknowledges receipt of the HF Procedures Manual upon execution of this Agreement.

Health Insurance Portability and Accountability Act (HIPAA)
HIPAA was enacted by the U.S. Congress in 1996. Title II of HIPAA defines numerous offenses relating to health care and sets civil and criminal penalties for them. It also creates several programs to control fraud and abuse within the health care system. However, the most significant provisions of Title II are its Administrative Simplification rules. Title II requires the Department of Health and Human Services (HHS) to draft rules aimed at increasing the efficiency of the health care system by creating standards for the use and dissemination of health care information.

Health Level Seven (HL7)
Standards for electronic interchange of clinical, financial, and administrative information among health care oriented computer systems.
HIPAA Final Security Rules
Rules dealing specifically with electronic protected health information, which lay out three types of security safeguards required for compliance: administrative, physical, and technical.

Historical Trauma
“Historical Trauma” means memories passed from one generation to the next; e.g., hardships experienced by Native American populations, Japanese internment or Holocaust victims, refugees escaping war, slavery descendents, etc. Also referred to as “intergenerational trauma.”

Homeless Outreach Team (HOT)
HOT is dedicated to assisting mentally ill homeless persons at risk for incarceration or involuntary psychiatric hospitalization.
Acronyms

IFB  : Invitation For Bid.
IMD  : Institutions for Mental Disease
IMP  : Indigent Medication Program
IOM  : Institute of Medicine
IS   : Integrated System
ISD  : Internal Services Department
ISO  : International Organization for Standardization

Terms & Definitions

ICD-9
International Classification of Diseases, Ninth Revision.
The ICD-9 is used to provide a standard classification of diseases for the purpose of health records.

IMD
Institutions for Mental Disease. Hospitals, nursing facilities or other institutions of more than 16 beds that are primarily engaged in providing diagnosis, treatment or care of persons with mental disease, including medical attention, nursing care and related services.

Indigent Medication Program (IMP)
A program managed by DMH Pharmacy Services division that coordinates the enrollment of indigent clients in pharmaceutical company Patient Assistance Programs that enables indigent clients to receive free medications if they are unable to pay. Once an application is approved, replacement medications are shipped by the relevant pharmaceutical company PAP to DMH Pharmacy Services, which in turn ships those medications to the dispensing contract pharmacy.

Individuals Experiencing Onset of Serious Psychiatric Illness
“Individuals Experiencing Onset of Serious Psychiatric Illness” means those individuals identified by providers, including but not limited to primary health care, as presenting signs of mental illness “first onset” (or “first break”) including those who are unlikely to seek help from any traditional mental health service.

Inpatient Fee-for-Services
Services provided at a FFS/Medi-Cal Hospital. Such hospitals submit reimbursement claims for Medi-Cal psychiatric inpatient hospital services through DMH as the fiscal intermediary. Within DMH, this process is managed by the Medi-Cal Inpatient Consolidation.

Integrated Plan
MHSA has five plans and each plan has its own timeline. However, all five plans will end at the same time (in five years) and one year before they end the County must create an integrated plan that combines all five plans. This new plan will be the “integrated plan” and will then be the only plan for MHSA funding.

Interagency Placement Screening Committee
Committee consisting of DMH and other community agencies that recommends and authorizes residential placement for children and adolescents with severe emotional disorders. This committee is coordinated by the DMH Countywide Children’s Case Management Program.
**Intervention**
"Intervention" means the act of intervening, interfering or interceding with the intent of modifying the outcome. In health and mental health, an intervention is usually undertaken to help treat or cure a condition.

**Integrated System. (IS)**
A custom-developed Web-based wrapper of the MHMIS developed in order to generate HIPAA-compliant claims. ISD hosts this application that runs on the Intel platform.

**Internal Services Department (ISD)**
Provides wide area network services throughout the County and County-level information security oversight.

**International Organization for Standardization (ISO)**
An international organization that consists of member bodies that are the national standards bodies of most of the countries of the world. ISO is responsible for the development and publication of international standards in various technical.

**Invitation For Bid (IFB)**
Solicitation based on a very specific and non-negotiable Statement of Work.
J

Terms & Definitions

Juvenile Justice Involvement
"Juvenile Justice Involvement" means children and youth at risk of or experiencing Juvenile Justice involvement—those with signs of behavioral/emotional problems who are at risk of or have had any contact with any part of the juvenile justice system, and who cannot be appropriately served through Community Services and Supports (CSS).
Katie A.
The National Center for Youth Law (NCYL) is co-counsel in the case of Katie A. v. Bontá, a child welfare reform class action against the California Department of Health Services (DHS), Los Angeles County’s Department of Children and Family Services (DCFS), and the California Department of Social Services (CDSS). Advocates seek the establishment and implementation of a community-based mental health service delivery system for California’s children in state foster care or at imminent risk of out-of-home placement. L.A. County entered into negotiations and settled in March of 2003. The settlement obligates the County to a number of comprehensive reforms, including better identification of mental health needs, enhancement of permanency planning, and prompt provision of individualized services designed to promote stability and ensure quality care for children in custody. Plaintiffs also succeeded in committing the County to offering family-based wraparound services to children with mental, emotional, or behavioral issues with the aim of facilitating family reunification and reducing multiple and arbitrary placements.
Acronyms

LAHSA: Los Angeles Homeless Services Authority (LAHSA)
LAMHPS: Los Angeles Mental Health Plan System
LAPIS: Los Angeles Public Administration/Guardian Information Systems
LGBT: Lesbian, gay, bisexual and transgender
LPS: Lanterman-Petris-Short Act.

Terms & Definitions

Lanterman-Petris-Short Act (LPS).
This Act went into effect July 1, 1972 in California. The Act in effect ended all hospital commitments by the judiciary system, except in the case of criminal sentencing (e.g. convicted sexual offenders) and those who were "gravely disabled" defined as unable to obtain food, clothing, or housing. It expanded the evaluative power of psychiatrists and created provisions and criteria for holds.

Laura's law
AB 1421 (also know as "Laura's Law) makes assisted outpatient treatment (AOT) available in California. Assisted outpatient treatment’s sustained and intensive court-mandated treatment in the community now can help those most overcome by the symptoms of a severe mental illness. The treatment mechanism is used until a person is well enough to again maintain his or her own treatment regimen. And eligibility for assisted outpatient treatment is not predicated solely on dangerousness. A progressive eligibility standard allows programs created under AB 1421 to help people who are vitally in need of care but who do not meet LPS’ restrictive dangerousness threshold for inpatient hospitalization.

Los Angeles Homeless Services Authority (LAHSA)
LAHSA is a Joint Powers Authority established in 1993 as an independent agency by the County and the City of Los Angeles. LAHSA is the lead agency in the Los Angeles Continuum of Care, and coordinates and manages over $60 million dollars annually in Federal, State, County and City funds for programs providing shelter, housing and services to homeless persons in Los Angeles City and County.

Los Angeles Mental Health Plan System (LAMHPS)
A browser-based system used by Provider Relations to assist in maintaining credentials for contract providers. The LAMHPS is on an SQL server that is located in the Provider Relations office. The system contains information on:

- Credentials
- Contracts
- Demographics
- Group Members/Staff
- Billing Address
- License Number
- Languages
- Specialties
- Contact Persons

The data for this system in keyed in by the Provider Relations staff. There is an external interface with the MHMIS. The provider ID and license number is extracted from LAMHPS and stored in a DB2 table on MHMIS.
Los Angeles Public Administration/Guardian Information Systems (LAPIS)
Information system that provides accounting, information management, and office automation for conservatorship, investigation and case management, placement tracking, funeral arrangement, and fiscal tracking.

Legal Entity
The legal organization structure under California law.
Acronyms

MAA : Medi-Cal Administrative Activities
MEDS : Medi-Cal Eligibility Data System
MFT : Marriage and Family Therapist.
MHC : Mental Health Commission
MHFFS : Mental Health Fee-for-Service.
MHMIS : Mental Health Management Information System
MHRC : Mental Health Rehabilitation Centers certified by the State Department of Mental Health
MHSA : Mental Health Services Act
MHSOAC : Mental Health Services Oversight and Accountability Commission
MRMIB : Managed Risk Medical Insurance Board

Terms & Definitions

Master Agreement List
A list of contractors who have submitted a Statement of Qualifications (SOQ) in response to County’s Request for Statement of Qualifications (FRSQ), have met the minimum qualifications listed in the RFSQ, and have an executed Master Agreement.

Maximum Contract Amount
The sum total of all “Allocations” shown in the Financial Summary; except that the “Maximum Contract Amount” shall not include “Third Party Revenue” shown in the Financial Summary.

Medi-Cal Administrative Activities (MAA)
Activities outside of actual treatment that support the medical treatment such as enrolling people in Medi-Cal, recruiting new providers or any other administrative type of activities for the proper and efficient administration of the Medi-Cal program. Claims for MAA are currently entered in an internet browser based application.

Medi-Cal
The Medicaid program in the State of California.

Medical Director
The psychiatrist who is responsible for the supervision of the psychiatric/medical service and leadership in the development and execution of clinical services provided under the DMH.

Medi-Cal Eligibility Data System (MEDS)
The data system maintained by the California Department of Health Services that contains information on Medi-Cal eligibility. This database is the authority for determining a beneficiary’s eligibility for Medi-Cal specialty mental health services and the County responsible for authorization and payment of services.

Medical Model
The medical model describes the approach to illness which is dominant in Western medicine. It aims to find medical treatments for diagnosed symptoms and syndromes and treats the human body as a very complex mechanism. Critics state that because mental illness cannot be diagnosed like heart disease or broken bones with ancillary tests that it contradicts the medical model of diagnosis and treatment. In addition, this model focuses on the disease and the treatment course is determined by the diagnosis.
Medical Necessity
Medical Necessity is a United States legal doctrine, related to activities which may be justified as reasonable, necessary, and/or appropriate, based on evidence-based clinical standards of care. Medicare uses medical necessity as a way to determine if consumers should pay for goods or services. Medical necessity is used by mental health consumers to claim eligibility for Medicare.

Medicare
A health insurance program administered by the United States government, covering people who are either age 65 and over, or who meet other special criteria, such as a disabling illness (i.e. severe mental illness). It was originally signed into law on July 30, 1965 by President Lyndon B. Johnson as amendments to Social Security legislation.

Medicare Fiscal Intermediary
Private insurance companies that serve as the federal government’s agents in the administration of the Medicare program, including the administration of claims payment.

Megan’s law
California’s Megan’s Law provides the public with certain information on the whereabouts of sex offenders so that members of local communities may protect themselves and their children. Megan’s Law is named after seven-year-old Megan Kanka, a New Jersey girl who was raped and killed by a known child molester who had moved across the street from the family without their knowledge. In the wake of the tragedy, the Kankas sought to have local communities warned about sex offenders in the area. All states now have a form of Megan’s Law.

Member or Title XXI Healthy Families Program Member (“HFPM”)
An enrollee in any Healthy Families Health Plan through Healthy Families.

Mental Health Commission
State law requires that each county have a Mental Health Board or Commission. Members are appointed by the Board of Supervisors for three-year terms. Those terms may be extended. Commissioners advise the Board of Supervisors and the Director of Mental Health on various aspects of local mental health programs.

Mental Health Disorder
“Mental Health Disorder” means a diagnosable illness that significantly interferes with an individual’s cognitive, emotional or social abilities.

Mental Health Fee-for-Service (MHFFS)
Backend system that applies edits to FFS claims before they are forwarded to the State as HIPAA compliant claims via the IS.

Mental Health Integration
“Mental Health Integration” means to combine mental health prevention assessment intervention, treatment and referral into the primary health care system for the purpose of preventing the development of serious emotional disorders and mental illness and increasing access to mental health services for underserved populations.

Mental Health Management Information System (MHMIS)
Legacy mainframe based applications that encompass a number of distinct applications including PATS.

Mental Health Problem
“Mental Health Problem” means diminished cognitive, emotional or social abilities, but not to the extent that the criteria for a mental disorder are met.
Mental Health Promotion
"Mental Health Promotion" means an action or series of actions taken to emphasize mental health and well-being in the community.

Mental Health Services Act (MHSA)
The MHSA, adopted by the California electorate on November 2, 2004 creates a new permanent revenue source, administered by the State Department of Mental Health (SDMH), for the transformation and expanded delivery of mental health services provided by State and county agencies and requires the development of integrated plans for prevention, innovation, and system of care services.

MET
This is the Los Angeles County Sheriff's Department Mental Health Evaluation Team. This team responds to 911 or other calls requesting help with psychotic, suicidal or homicidal persons. They are authorized to hospitalize people against their will if they are too ill for outpatient treatment. The Long Beach Police Department also has a MET team called LB MET.

M RMIB
State of California Managed Risk Medical Insurance Board, the administrator of Healthy Families for the State of California.
Acronyms

NAMI: National Alliance on Mental Illness.
NCPDP: National Council for Prescription Drug Programs
NDC: National Drug Code
NGA: Non-governmental Agency
NOA: Notice of Action
NPI: National Provider Identifier

Terms & Definitions

National Alliance on Mental Illness (NAMI)
NAMI is the nation’s largest grassroots mental health organization dedicated to improving the lives of persons living with serious mental illness and their families. Founded in 1979, NAMI has become the nation’s voice on mental illness, a national organization including NAMI organizations in every state and in over 1100 local communities across the country who join together to meet the NAMI mission through advocacy, research, support, and education. There is also a California chapter of NAMI known as CAMI.

National Council for Prescription Drug Programs (NCPDP)
An American National Standards Institute accredited standards development organization. NCPDP creates and promotes standards for the transfer of data to and from the pharmacy services sector of the healthcare industry.

National Drug Code (NDC)
A medication-labeling mechanism used in the United States. A unique 10-digit, 3-segment number identifying the labeler, product, and trade package size that is assigned to each listed drug product.

National Provider Identifier (NPI)
A unique, ten-digit numeric identifier assigned to covered health care providers by the National Plan and Provider Enumeration System. This identifying number does not carry any information about health care providers, such as the state in which they practice or their provider type or specialization. The intent of the NPI is to improve the efficiency and effectiveness of electronic transmission by allowing providers and business entities to submit the same identification number(s) to all payers, such as insurance plans, clearinghouses, systems vendors, and billing services.

Negotiation Package
Detailed documents submitted by Contractor consisting of five major parts: Agency Identification; Program Description; Budget; Corporate Capability; and Required Supplemental Documentation.

Negotiated Rate (NR)
The total amount of reimbursement, including all revenue, interest and return, which is allowable for delivery of a SFC unit as defined by Director and which is shown on the Financial Summary. An NR is the gross rate of reimbursement which is generally determined by dividing Contractor’s gross program cost of delivering a particular SFC by the number of such SFC units to be delivered. All fees paid by or on behalf of patients/clients and all other revenue, interest and return resulting from the same service shall be deducted from the cost of providing the mental health services covered by the Negotiated Rate. A portion of the State-approved NR, which in some cases may be higher than the contracted NR, may be retained by County as County’s share of reimbursement from SDMH.

Net Program Budget
The Maximum Contract Amount which is the sum total of all “Allocations” and “Pass Through” amounts shown in the Financial Summary. Unless otherwise provided in this Agreement, or separately agreed to in
writing between the parties, it is the intent of the parties that the Net Program Budget shall be equal to the Maximum Contract Amount.

**Non-governmental Agency (NGA)**
Any organization other than a unit of government or agency. Includes private profit and nonprofit organizations.

**Non-repudiation**
Verification that the sender and the recipient were, in fact, the parties who claimed to send or receive the message.

**Non-traditional Mental Health Settings**
"Non traditional mental health settings" means systems and organizations not traditionally defined as mental health; i.e., school and early childhood settings, primary health care systems including community clinics and health centers, and community settings with demonstrated track records of effectively serving ethnically diverse and underserved or underserved populations.

**Notice of Action (NOA)**
A required document that is given to Medi-Cal beneficiaries informing them of denials, terminations, reductions or modifications of requested specialty mental health services from the County of Los Angeles Department of Mental Health Local Mental Health Plan, and the beneficiary's right to appeal.
Acronyms

IOM : Institute of Medicine
OAC : Mental Health Services Oversight and Accountability Commission
OCA : Office of Consumer Affairs
OFA : Office of Family Advocate
OMA : Outcome Measures Application
OMS : Office of Multicultural Services
OTAR : Over Threshold Authorization Request

Terms & Definitions

Office of Consumer Affairs (OCA)
This office was created seven years ago and predates MHSA. This office has been involved in client movement and has been an advocate for consumers who are receiving services and those who wish to work or volunteer in system. This office also created Client coalitions as a means to advocate for consumers. This office is going to be merged into the Division of Empowerment and Advocacy, which will be fully funded by MHSA.

Office of Family Advocate (OFA)
The OFA addresses the needs of families as they seek to secure mental health services for their loved ones. OFA often works in collaboration with NAMI and has specifically done outreach to Spanish speaking families in LA county.

Office of Medical Director (OMD)
A division of DMH that has Department-wide professional responsibility for the design, implementation, and quality management of clinical services.

Office of Multicultural Services (OMS)
The Office of Multicultural Services, established in December 1997, provides leadership direction to the Department of Mental Health (DMH) in promoting culturally competent mental health services within California's Public Mental Health System. The Office of Multicultural Services is charged with a leadership role in the development of the Cultural Competency Plan, ensuring culturally appropriate treatment intervention, services, and assessment in each of California's diverse counties. These elements are fundamental to the successful implementation and delivery of managed mental health services. Each county Mental Health Plan (MHP) is responsible for providing an annual Cultural Competency Plan to DMH that enumerates the planned strategies for providing cultural and linguistically competent care.

Onset
"Onset" means the beginning of a serious psychiatric illness that can be diagnosed by the DSM IV. In this respect, onset can include the onset of depression in an older adult or a new mother experiencing the onset of post-partum depression. Onset can apply to any psychiatric illness. Individuals may experience onset of a serious psychiatric illness a number of times.

Oral Presentation
An explanation and/or clarification of information stated in the Proposal. Presentations may be requested by the Proposer or the Department.

Outcome Measures Application (OMA)
Custom-developed system to capture and report MHSA-related outcome measures.
Over Threshold Authorization Request (OTAR)
Custom developed application to track TAR requests for authorization of treatment beyond a threshold of services not requiring pre-authorization during a given trimester of care. OTAR is used by the DMH Medi-Cal Professional Services division to manage mental health care provided through the Fee-for-Service Outpatient network. County anticipates replacing this application with the IBHIS System.

Over-Threshold Specialty Mental Health Services
All services provided which exceed eight (8) sessions per trimester period are considered over-threshold and require prior authorization from the CAU. Over threshold limits and authorization are limited to specialty mental health services being delivered to Medi-Cal funded clients being served by Fee-for-Service Network providers.
Acronyms

PAI : Protection and Advocacy Inc
PAP : Patient Assistance Program.
PATH : Projects for Assistance in Transition from Homelessness Federal grant funds.
PATS : Prescription Authorization and Tracking System
PBM : Pharmacy Benefits Manager
PCP : Primary Care Provider
PEI : Prevention and Early Intervention
PET : Psychiatric evaluation team.
PCP : Primary Care Provider
PHF : Psychiatric Health Facility.
PHI : Protected Health Information
PMA : Psychotropic Medication Authorization
PMM : Project Management Methodology
PMRT : Psychiatric Mobile Response Team

Terms & Definitions

Patient Assistance Program (PAP)
A program operated by a pharmaceutical company foundation that provides a mechanism by which indigent patients can obtain medications at no cost.

Patient’s Rights Office
The Patients’ Rights Office of the Los Angeles County Department of Mental Health was created in response to legislation requiring each county mental health director to appoint a patients’ rights advocate(s) to protect and further the Constitutional and statutory rights of mental health care recipients. Some of the duties of this office include; investigation of complaints, representation of patients at certification review and medication capacity hearings, beneficiary services program, residential care advocacy, minors’ rights program, jail advocacy program, LPS designation functions, training and consultation, monitoring Electroconvulsive treatment (ECT), data collection, legislative interaction, missing person locator and peer advocacy program.

Peer to Peer
Peer-to-Peer is a unique, experiential learning program for people with any serious mental illness who are interested in establishing and maintaining their wellness and recovery. The course was written by Kathryn Cohan McNulty, a person with a psychiatric disability who is also a former provider and manager in the mental health field and a longtime mutual support group member and facilitator. The program is offered through NAMI.

PEI Principles
“PEI Principles” means the Prevention and Early Intervention Principles and Criteria defined in the MHSOAC PEI Recommendations paper, adopted in January 2007. These principles, which serve as the foundation for PEI, may be found at: [www.dmh.ca.gov/MHSOAC/docs/FinalOAC_RecoforMHSAPEIPrgg-11-10-06.pdf](http://www.dmh.ca.gov/MHSOAC/docs/FinalOAC_RecoforMHSAPEIPrgg-11-10-06.pdf)

PEI Program
“PEI program” means any program selected for implementation by a county that comprises or is a part of a PEI project and is likely to meet PEI outcomes desired for addressing PEI Key Community Needs and for PEI Priority Populations.
PEI Project
"PEI Project" means a PEI program or combination of programs, policies and approaches that is designed to address one or more PEI Key Community Needs and one or more PEI Priority Populations, consistent with PEI Principles, to meet specific PEI individual/family and/or program/system outcomes.

PET
PET is the psychiatric evaluation team. PET responds to calls to evaluate whether someone needs to be hospitalized. This term is not used as much in DMH anyone because the LA police department and the sheriff’s department have their own names for these teams (SMART).

Pharmacy Benefits Manager (PBM)
A company that allows health plans to outsource the administration of their prescription drug benefit for plan members. This includes prescription claims adjudication, formulary/prior authorization management, manufacturer’s rebate negotiation and data submission.

Point of Service
A Point-of-Service Medi-Cal program that gives providers the most current information available on Medi-Cal client accounts.

Posttraumatic Stress Disorder
"Posttraumatic Stress Disorder" means an anxiety disorder that develops as a result of witnessing or experiencing a traumatic occurrence, especially life-threatening events.

Prescription Authorization and Tracking System (PATS)
Electronic prescribing and pharmacy billing module hosted by ISD.

Prevention
"Prevention" means the Prevention element of the MHSA PEI component includes programs and services defined by the Institute of Medicine (IOM) as Universal and Selective, both occurring prior to a diagnosis for a mental illness. (For MHSA purposes, IOM’s Indicated prevention category fits into the operational definition for Early Intervention, as explained in the next section).

Prevention and Early Intervention (PEI)
A Plan funded under the California Mental Health Services Act. This plan focuses interventions and programs on individuals across the life span prior to the onset of a serious emotional or behavioral disorder or mental illness.

Pre-Screen Proposals
Using the Pre-Evaluation tool, Contracts Division staff determines if the Proposer’s documents demonstrate general responsiveness to the RFP and meet minimum requirements.

Primary Care
"Primary Care" means the provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.

Priority Population
"Priority Population" means a specific group of individuals defined by the OAC as a population who should receive priority consideration by counties when determining who will receive PEI services. Priority populations include:
- Underserved Cultural Populations
- Individuals Experiencing Onset of Serious Psychiatric Illness
- Children and Youth in Stressed Families
- Trauma-Exposed Individuals
- Children and Youth at Risk for School Failure
- Children and Youth at Risk of or Experiencing Juvenile Justice Involvement
Prodrome (Prodromal Syndrome)
“Prodrome” means the period in the course of a disorder when some signs and symptoms are present but the full-blown criteria are not yet met. Typically, the prodrome can be defined only retrospectively, after the individual has met the full criteria for the disorder.

Professional Services Unit
Administrative unit of managed care division in the DMH Office of the Medical Director that oversees the Central Authorization Unit and manages the credentialing of Fee-for-Service Network Medi-Cal providers.

Program Head
Program Head oversees personal, budget, and hiring of their specific program.

Projects for Assistance in Transition from Homelessness Federal grant funds (PATH)
Program that provides services to individuals who have a severe mental illness or who have co-occurring severe mental illness and substance abuse disorders, and who are homeless or at imminent risk of becoming homeless.

Project Management Methodology (PMM)
Highly detailed description of the procedures to be followed in a project life cycle. Often includes forms, charts, checklists, and templates to ensure structure and consistency.

Promising Practice
“Promising Practice” means programs and strategies that have some quantitative data showing positive outcomes over a period of time, but do not have enough research or replication to support generalized outcomes. It has an evaluation design in place to move towards demonstration of effectiveness; however, it does not yet have evaluation data available to demonstrate positive outcomes.

Proposition 63 (Prop. 63)
Prop 63 is the ballot initiative which passed in November 2004, and became the Mental Health Services Act.

Protected Health Information (PHI)
Any information about health status, provision of health care, or payment for health care that can be linked to an individual. This term is specifically defined under HIPAA.

Protection and Advocacy Inc (PAI)
This is an organization of lawyers that advocate for the disenfranchised. This organization has been involved in suing the state to ensure funding for specific programs, including mental health programs.

Prudent Reserve
The Mental Health Services Act requires that some of the funding not be spent but instead be put in a special account that can be used at a later date when other funding sources are cut. For example, before the MHSA, counties would spend all the money they were given in a year because if they did not spend it, it would be absorbed back into the state budget and they would lose it. This would then leave counties vulnerable without any extra money to fall back on during years when state or federal budgets for mental health were cut. The Prudent Reserve is like a savings account for a rainy day for mental health and that money can stay in each county’s account for 3 years after which it is absorbed into a statewide account that is controlled by the State of California DMH.

Psychiatric Health Facility (PHF)
A health facility licensed by the State Department of Mental Health, that provides 24 hour acute inpatient care on either a voluntary or involuntary basis to mentally ill persons. This care shall include, but not be limited to, the following basic services: psychiatry, clinical psychology, psychiatric nursing, social work, rehabilitation, drug administration, and appropriate food services for those persons whose physical health needs can be met in an affiliated hospital or in outpatient settings.
Psychotropic Medication Authorization (PMA)
Web application that allows doctors and clerks to enter medical and background information on Child and Transition Age Youth clients which require prescribed medications. The information is sent to the Courts for their approval.

Psychiatric Mobile Response Team (PMRT)
A field-based, directly-operated service delivery programs that provides evaluations and interventions (including the initiation of an involuntary psychiatric hold, if indicated) of clients experiencing a psychiatric crisis in the community. These programs operate under the DMH Emergency Outreach Bureau. Similar field based programs (MET, SMART, HOPE) pair DMH staff with local law enforcement agencies.

Psychiatric Advance Directive
An Advance Directive specific to healthcare concerns associated with a psychiatric condition and the care provided for that condition. See Advance Directive.
Terms & Definitions

Quality Assurance activities
Indirect activities defined by the Federal government that assist a Local Mental Health Plan in insuring and improving the quality of care delivered by its organization that are not provided as a service to or in relation to a specific client of the Department. Claiming for these services is currently paper-based. Only licensed professionals may claim for QA activity.

Quality Improvement Program
A DMH program involving DMH leadership, management, staff, consumers and family members intended to create and sustain a culture of system wide involvement and continuous improvement to the delivery of care.

Qualified Proposer
A bidder, lawfully able to conduct business in the state, which is solvent, not in financial distress, and is willing and able to meet the requirements of the RFP.
RCL : Residential Care Level.
RFI : Request for Information
RFP : Request for Proposals
RFS : Request for Services
RFSQ : Request for Statement of Qualifications

Terms & Definitions

RCL Certification Unit
A unit of the Childrens' Countywide Case Management division within the DMH Child, Youth and Family Programs Administration that issues placement certifications to residential care facilities to provide care for youth in need of this level of care. The unit also monitors the care being provided in these facilities.

Re-alignment Money
In the 1960s, mental hospitals were closed and community based services were promised. However, there was no funding for these services and so they failed to materialize. In 1992, the State of California passed a law that allocated a percentage of the vehicle license tax and sales tax to be given to support mental health services. This tax was “re-aligned” to mental health to guarantee funding for services. This funding became known as "re-alignment money."

Recovery
Recovery is a goal for mental health care, in which consumers are able to self-direct their lives in a positive manner outside of a mental health system. Recovery will be individualized for every person.

Referral
"Referral" means the process of sending an individual from one practitioner to another for health care, mental health or other services and supports.

Residential Care Level (RCL)
A licensing term used to designate specific levels of care, and associated requirements, for residential treatment facilities for youth. An “RCL 14” facility, for example, is a higher level of care than an “RCL 12” facility, and licensing requirements related to staffing and programming differ between the two types of facilities.

Request for Information (RFI)
A non-competitive request of information, data, comments, or reactions from possible Contractors preceding the issuance of a RFP document.

Request for Proposals (RFP)
All documents, whether attached or incorporated by reference, utilized for soliciting proposals. Solicitation based on proposed solutions in response to a defined need of the County.

Request for Services (RFS)
A second solicitation process to contractors on a pre-qualified Master Agreement that requests specific and detailed services as defined in a Statement of Work at a time when such services are needed.

Request for Statement of Qualifications (RFSQ)
A solicitation based on establishing a pool of qualified vendors/contractors to provide services through a Master Agreement.
RGMS
DMH's Revenue Generation Management System which is included as a subsystem in MIS.

RO/TCM Manual
SDMH's Short-Doyle/Medi-Cal Manual for the Rehabilitation Option and Targeted Case Management.

Resilience
“Resilience” means the personal qualities of optimism and hope, and the personal traits of good problem solving skills that lead individuals to live, work and learn with a sense of mastery and competence. Research has shown that resilience is fostered by positive experiences in childhood at home, in school and in the community. When children encounter negative experiences at home, at school and in the community, mental health programs and interventions that teach good problem solving skills, optimism and hope can build and enhance resilience in children.
Acronyms

SAAC : Service Area Advisory Council.
SAMHSA : Substance Abuse and Mental Health Services Administration
SDHS : State Department of Health Services.
SDMH : State of California Department of Mental Health
SDSS : State Department of Social Services.
SFPR : Single Fixed Point of Responsibility
SGF : State General Fund
SLT : System Leadership Team
SMI : Severely Mentally Ill.
SNF : Skilled Nursing Facility
SPA : Service Planning Areas
SOC : System of Care
SOQ : Statement of Qualifications
SOW : Statement of Work
SSDI : Social Security Disability Income.
SSI : Supplemental Security Income.
STOP : Supportive and Therapeutic Options Program

Terms & Definitions

SAMHSA
Substance Abuse and Mental Health Services Administration.
Federal agency which administers various programs related to SAMHSA within DMH. SAMHSA also refers to block grant funding received from SAMHSA to pay for certain services.

Schiff Cardenas Crime Prevention Act
State Assembly Bill 1913 administered as the Juvenile Justice Crime Prevention Act, providing a source of funding for community-based solutions to locally identified juvenile crime prevention needs.

School-based Interventions
"School-based interventions" means a unifying intervention framework and strategic plan for school-based Prevention and Early Intervention programs. The framework and plan must encompass a comprehensive approach to enhance regular classroom strategies to enable learning; support students during vulnerable periods of transition (e.g., to a new school or to a new class); increase and strengthen home and school connections; identify and support trauma-exposed students; respond to and prevent crises; increase and strengthen community involvement and support (e.g., health services, tutoring, volunteer programs, mentoring programs, family resource centers); and facilitate student and family access to effective services and special assistance as needed.

School Failure
"School Failure" means the process of an individual experiencing continued lack of academic success and achievement based on learning disabilities, emotional disorders, family stress, and/or other conditions that, if not resolved, may result in suspension, truancy, and/or expulsion.

Screening
"Screening" means a process used to identify individuals with an increased risk of having mental health disorders that warrant immediate attention, intervention, or more comprehensive review.

Serious Emotional Disturbance (SED)
"Serious Emotional Disturbance" means a child who (1) has one or more mental disorders as identified in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders, other than a primary
substance use disorder or developmental disorder, that result in behavior inappropriate to the child’s age according to expected developmental norms, and (2) who meets the criteria in paragraph (2) of subdivision (a) of Section 5600.3 of the Welfare and Institutions Code.

**Serious Mental Illness or Disorder**

"Serious Mental Illness or Disorder" means a mental disorder that is severe in degree and persistent in duration and that may cause behavioral disorder or impair functioning so as to interfere substantially with activities of daily living. Serious mental disorders include schizophrenia, major affective disorders, and other severely disabling mental disorders.

**Service Area Advisory Council (SAAC)**

Each of the eight service areas in LA County have an advisory council of stakeholders and community members that meet to advise DMH on current and future policies and practices (See SAAC chart attached for contact information).

**Service Area District Chief**

A middle management position within the Los Angeles County Department of Mental Health that provides administrative oversight of directly-operated and contracted mental health service providers within one of Los Angeles County DMH’s eight Service Areas. These individuals report to a Deputy Director.

**Service Planning Areas**

Los Angeles County is administratively divided into eight (8) geographically-based Service Planning Areas, also referred to as "Service Areas". This organizational structure facilitates closer coordination among agencies providing services in that geographic area.

**SFC**

Service Function Code, as defined by Director, for a particular type of mental health service, and/or Title XIX Medi-Cal administrative claiming activity.

**Share of Cost**

A monthly dollar amount some Medi-Cal recipients must pay, or agree to pay, toward their medical expenses before they qualify for Medi-Cal benefits. A Medi-Cal recipient's SOC is similar to a private insurance plan's out-of-pocket deductible.

**Short-Doyle/Medi-Cal (SD/MC)**

The Federal Medicaid program in California that provides reimbursement for County mental health services to Medi-Cal eligible individuals.

**Single Fixed Point of Responsibility (SFPR)**

A specifically designated individual or team within a clinic or agency who has responsibility for maintaining the Client Care Coordination Plan and for coordinating and authorizing services provided to clients who are receiving ongoing mental health services.

**Sliding fee schedule**

The charge for services based upon the income and family size of the individual or family requesting services.

**State of California Department of Mental Health (SDMH)**

Provides oversight of the state public mental health budget, which includes local assistance funding. SDMH responsibilities include providing leadership for local county mental health departments, evaluating and monitoring public mental health programs, administrating federal funds for mental health programs and services, and implementing of the Mental Health Services Act (Proposition 63).

**Small County**

"Small County" means a county in California with a total population of less than 200,000, according to the most recent projection by the California State Department of Finance.
SMART
SMART is the Los Angeles City Police Department System-wide Mental Assessment Response Team. This team responds to 911 or other calls requesting help with psychotic, suicidal or homicidal persons. They are authorized to hospitalize people against their will if they are too ill for outpatient treatment.

SMI
SMI stands for severely mentally ill. SMI can be severe and persistent but people can recover from it. SMI includes mental, behavioral and emotional disorders. SMI symptoms cause functional impairment and/or substantially interfere with or limit one or more major life activities. This term applies only to adults.

State General Fund (SGF)
California SGF used as FFP match.

SNF-STP
Skilled Nursing Facility licensed by the State Department of Health Services, with an added Special Treatment Program certified by the State Department of Mental Health.

Specialized Intensive Foster Care
A community-based alternative placement for children who require out-of-home care along with therapy and specialized services—including those children who are emotionally and behaviorally disturbed, developmentally disabled, and medically disabled. Specialized Intensive Foster Care programs involve the application of specific evidence-based practices designed to treat this population.

Stakeholder
A person or group of people who impacts or is directly impacted by mental health services or, a person who represents others' interests relative to mental health services.

State
The State of California.

Statement of Qualifications (SOQ)
A contractor's response to an RFSQ.

Statement of Work (SOW)
A written description of services desired by County for a specific Work Order.

Stigma and Discrimination
"Stigma" means the feelings, reactions and stereotypes that people experience when they encounter mental illness and the adults and children who face it. "Discrimination" means the unlawful and intentional action taken to deprive individuals of their rights to mental health services, based on those feelings and reactions.

Supervisory District
There are five Supervisors in Los Angeles County and each has their own district. (See Board of Supervisors above)

Supportive and Therapeutic Options Program (STOP)
Program for children who do not qualify for any other type of funding for a particular service or support. The main goal of intervention or support is to help bring the child home, maintain the child in the home, or return the child to his/her community.

System for Treatment Authorization Request (STAR)
Tracks inpatient days approved and denied TAR. County anticipates to fully replacing this application with the IBHIS System.
System Leadership Team (SLT)
This team was created by the Delegates (see above) during the first MHSA plan, the Community Supports and Services (CSS) plan in order to have a smaller decision making body to address specific concerns. The SLT is made up of Delegates, stakeholders and DMH staff. Currently, the SLT serves as an oversight committee for the implementation and revision of the CSS plan and eventually the other MHSA plans once they are put into practice.

System of Care
CSOC refers to Children System of Care, ASOC refers to Adult System of Care and OASOC refers to Older Adult System of Care.
Acronyms

TAR : Treatment Authorization Request
TAY : Transitioned Age Youth
TBS : Therapeutic Behavioral Services

Terms & Definitions

Tarasoff

*Tarasoff v. Regents of the University of California* was a case in which the Supreme Court of California held that mental health professionals have a duty to protect individuals who are being threatened with bodily harm by a patient. The original 1974 decision mandated warning the threatened individual, but a 1976 rehearing of the case by the California Supreme Court called for a "duty to protect" the intended victim. The professional may discharge the duty in several ways, including notifying police, warning the intended victim, and/or taking other reasonable steps to protect the threatened individual. On June 21, 2001, Geno Colello asked his father to loan him a gun. When his father refused, Colello said he would get another gun and "kill" the "kid" who was then dating his ex-girlfriend. Colello's father relayed this threat to Goldstein, his son's psychotherapist, who urged him to take Colello to Northridge Hospital Medical Center. Later that evening a hospital social worker evaluated Colello. Colello's father told the evaluator about his son's threat. Colello was admitted to the hospital as a voluntary patient but discharged the next day. The following day he shot and killed Ewing and then himself. The California Court of Appeal concluded in *Ewing v. Goldstein* and *Ewing v. Northridge Hospital Medical Center* that the defendants' duty to warn could have been triggered by the statements Colello's father made to Goldstein and the social worker regarding his son's threats. The court saw no difference between threats conveyed directly by the patient and those related by an immediate family member of the patient.

Target Community

"Target Community" means a subset of the priority service population, such as those residing in a geographic area or school catchment area, or a countywide target population (e.g., children and youth in foster care) that will be the focus for a PEI project.

Therapeutic Behavioral Services (TBS)

TBS is a short-term intensive intervention that may be included as one component of a comprehensive mental health service plan. TBS provides one-to-one support for full scope Medi-Cal children and youth under the age of twenty one (21) years, who are experiencing a life crisis or when a life crisis is imminent, who need additional support to transition from a higher to lower level placement or to prevent movement to a higher level of care. In Los Angeles County, these services must be authorized by the Central Authorization Unit.

Threshold Language

The State Department of Mental Health tracks how many people are served in each county in mental health. If a county has 3,000 Medi-Cal consumers that speak a certain language then that language becomes a "threshold language" and the county is required to provide services and written materials in that language. Los Angeles County has 13 threshold languages, most counties have 1-3 languages.

Title IV

Title IV of the Social Security Act, 42 United States Code Section 601 et seq.; XX. "Title XIX" means Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.

Title XXI

Title XXI of the Social Security Act, 42 United States Code Section 1396 et seq.
Transitioned Age Youth
This term applies to youth and young adults between the age 16 and 25. This age group became a focus of treatment in the MHSA.

Transformation
This term is applied to the overall change in the Mental health system that now focuses not just on providing services but seeing outcomes. There is now a system of accountability in place to measure the effectiveness of our services to ensure that we are employing the recovery model and seeing positive results. Evidence based practices and Full service partnerships are two ways that transformation of the system is evident.

Trauma
"Trauma" means a psychological or emotional reaction to an event or to an enduring condition, in which the individual's emotional experience is overwhelming, or they experience a perceived threat to life, bodily integrity, or sanity.

Trauma-exposed Individuals
"Trauma-exposed" means those who are exposed to traumatic events or prolonged traumatic conditions, including grief, loss and isolation, including those who are unlikely to seek help from any traditional mental health service.

Treatment Authorization Request (TAR)
A request submitted to DMH administration requesting authorization for the provision of a particular service or type of service of medication.

Triage
A process for sorting injured people into groups based on their need for immediate medical treatment.
Acronyms

UREP : Under Represented Ethnic Populations.

Terms & Definitions

UB-04
Uniform Bill-04
A standardized form from the Centers for Medicare and Medicaid Services used to electronically submit claims for health care received in an institutional setting to payers.

UB-92
Uniform Bill-92
Starting May 23, 2007, all of paper claims must use the UB-04 since the UB-92 will no longer be acceptable. See Uniform Bill-04.

UMDAP
SDMH's Uniform Method of Determining Ability to Pay. Process by which annual liability is determined.

Underserved/Inappropriately served
An individual who has been diagnosed with serious mental illness or serious emotional disturbance, and their families who are receiving some service, but whose services do not provide the necessary opportunities to move forward and pursue their wellness/recovery goals.

Unit of Service
The increment unit of time used to capture the quantity of services provided (e.g. 1 minute = 1 Unit of Service) during mental health service procedure. Claims are generated based upon service provided and multiplied by the rate for that procedure.

Unserved
An individual in need who receives no services.

UREP
UREP stands for Under Represented Ethnic Populations. Examples of these populations are Native American, African-American, Hispanic/Latino, Asian/Pacific Islander, African Refugee, Other Refugee groups, Lesbian/Gay/Bisexual/Transgender and other underserved communities.
V

Terms & Definitions

Very Small County
"Very small county" means a county in California with a total population of less than 100,000 according to the annual projections published by the Department of Finance.

Vision
Refers to the Department of Mental Health vision statement: "The Los Angeles County Department of Mental Health (DMH) strives to make our community better by providing world class mental health care. We improve the lives of thousands of people each year because we believe treatment works and recovery is possible."
**Acronyms**

WET : Workforce Education and Training  
W&I Code : Welfare and Institutions Code

**Terms & Definitions**

**Welfare and Institutions Code (WIC)**  
Code enacted to insure the rights or physical, mental or moral welfare of children are not violated or threatened by their present circumstances or environment. WIC establishes programs and services designed to provide protection, support or care of children and provides protective services to the fullest extent deemed necessary by the juvenile court, probation department or other public agencies designated by the Board of Supervisors to perform the duties prescribed by this code.

**Wellness Center**  
The Wellness Center is designed to infuse our entire system with the philosophy and principles of recovery and will be available to all clients. It will provide client operated services, including housing, vocational, and educational assistance, as well as a focus on social relationships and community integration activities. The Wellness Center will be a multicultural, welcoming environment. The intent is to provide a place where clients support each other and receive services in order to assist each other in maintaining their current level of care in the community. Clients will be encouraged to assist other clients in achieving community reintegration, wellness and meaningful social connections.

**Whatever It Takes**  
Refers to a wide array of clinical and supportive services beyond mental health care, such as housing and employment services, for individuals with a serious mental illness or a serious emotional disturbance to support recovery and/or resilience. The approach helps individual and families regain their lives. For most clients, full recovery requires more than clinical interventions.

**Workforce Education and Training (WET)**  
A Plan funded under the California Mental Health Services Act which provides financial and other support to counties in educating and training their workforce to better meet the service delivery requirements of MHSA.

**Wraparound**  
The process of providing individualized, comprehensive, community-based services and supports to children and youth with serious emotional and/or behavioral disturbances so they can be reunited and/or remain with their families and communities. Wraparound helps families develop an effective support network, increase their competence and teaches them new skills for managing the special needs of their child. Wraparound is one of the effective services that children's MHSA-funded programs are built upon.
X

Terms & Definitions
Y

Terms & Definitions
Z

Terms & Definitions