

Glossary of Terms and Acronyms

-Glossary-

Acute Care: Intensive, psychiatric services provided on a short-term basis to a person experiencing significant symptoms of a mental health disorder that interferes with a person's ability to perform activities of daily living.

Acute Inpatient Hospital Psychiatric Care: Acute Care provided in a psychiatric hospital with 24-hour medical supervision.

Capitation: A payment model which is based on prospective payment for services, irrespective of the actual amount of services provided, generally calculated on a per OHP Member per month basis.

Care Coordination: A process-oriented activity that provides ongoing communication and collaboration with children and families multiple needs. The activity can include: facilitating communication between the family, natural supports, community resources, and involved child-serving providers and agencies; organizing, facilitating and participating in team meetings at which strengths and needs are identified and safety planning occurs. The activity provides for continuity of care by creating linkages to and managing transitions between levels of care and transitions for older youth to the adult service system.

Case Management: A goal-oriented activity that assists children, youth, and families that could include: identifying strengths and needs; identifying, brokering and linking to community services and resources; assisting in obtaining entitlements; advocating on behalf of families; providing support and consultation to families; facilitating access to intensive services; and providing crisis planning, prevention, and intervention services.

CASII (Child and Adolescent Severity Intensity Instrument): an assessment tool to determine need of service for a child or adolescent (6 – 18 years of age), developed by the American Academy of Child and Adolescent Psychiatry

Child and family team: A group of people, chosen with by the family and connected to them through natural, community, and formal support relationships who will work together to develop and implement the family's plan; address unmet needs; and work toward the family's vision.

CMHP (Community Mental Health Program): An organization that provides all services for persons with mental or emotional disorders and developmental disabilities, and alcoholism and alcohol abuse problems, operated by, or contractually affiliated with, a local mental health authority (LMHA) and operated in a specific geographic area of the state under an omnibus contract with the Department of Human Services.

Crisis safety/response plan: A dynamic document that details the actions that the members of the child and family team develop and are prepared to implement if a

particular risk is realized. The crisis response plan describes how Community/ Public Safety is provided or needs are met, addressing placement, school, working with law enforcement and community.

Culturally Competent: The Capacity to provide services in an effective manner that is sensitive to the culture, race, ethnicity, language and other differences of an individual. Such services may include, but are not limited to, use of bilingual and bicultural staff, provision of services in culturally appropriate alternative settings, and use of bicultural Paraprofessionals as intermediaries with professional staff.

Discharge criteria: The diagnostic, behavioral, functional indicators, that, when met, means the service is complete. Discharge criteria must be documented in the child's mental health treatment plan.

Discharge summary: The written documentation of the last service contract with the child. Documentation must include the diagnosis at enrollment, and a summary statement that describes the effectiveness of treatment modalities and progress, or lack of progress, toward treatment objectives as documented in the mental health treatment plan. The discharge summary also includes the reason for discharge, changes in diagnosis during treatment, current level of functioning, prognosis, and recommendations for further treatment. Discharge summaries are completed no later than 30 calendar days following a planned discharge and 45 calendar days following an unplanned discharge.

DSM Code: The numerical code, including modifiers, which identifies psychiatric disorders defined in the most recent American Psychiatric Association's Diagnostic and Statistical Manual.

EBP (Evidence-based practice): The clinical and preventive mental health services that are based on the most current information from generally accepted scientific research and approved by OMHAS.

Early Intervention: Provision of Covered Services directed at preventing or ameliorating a mental disorder or potential disorder during the earliest stages of onset or prior to onset for individuals at high risk of a mental disorder.

Emergency Service: Inpatient or outpatient Covered Services by a Provider that is qualified to provide these Services and that are needed to evaluate or stabilize an Emergency Situation. See definition for Twenty-four (24) Hour Urgent and Emergency Services.

Evaluation: A psychiatric or psychological Assessment used to determine the need for mental health services. The Evaluation includes the collection and analysis of pertinent bio-psychosocial information through interview, observation, and psychological and neuropsychological testing. The Evaluation concludes with a five axes Diagnosis of a

DSM multi-axial Diagnosis, prognosis for rehabilitation, and treatment recommendations.

Facilitator: A person who is trained to coordinate the wraparound process for an individual family. This person could be a professional, family member or other team member.

Family: Parent or parents, legal guardian, siblings, grandparents, spouse and other primary relations whether by blood, adoption, legal or social relationship.

Family-Driven: Families have the primary decision making role in the mental health care of their own children as well as the policies and procedures governing care of all children in their community, state, tribe territory and nation. This includes: choosing supports, services and providers; setting goals; designing and implementing programs; monitoring outcomes; and determining the effectiveness of all efforts to promote the mental health and well being of children and youth.

FFS (Fee-For-Service): The payment for reimbursable services retrospectively based upon agreed rates and the amount of service provided.

Flexible Service: A service that is an alternative or addition to a Traditional Service that is as likely or more likely to effectively treat the mental disorder as documented in the OHP Member's Clinical Record. Flexible Services may include, but are not limited to: Respite Care, Partial Hospitalization, Subacute Psychiatric Care, Family Support Services, Parent Psychosocial Skills Development, Peer Counseling, and other non-Traditional Services identified.

FCHP (Fully Capitated Health Plans): Prepaid Health Plans that contract with DHS to provide physical health care services under the OHP Medicaid Demonstration Project and State Children's Health Insurance Program.

Intake: The process of gathering preliminary information about a potential Consumer to determine whether the person is eligible for services, the urgency of the situation or need for services, and the initial provisional Diagnosis. This information is used to schedule the first appointment, if applicable.

JCAHO: The Joint Commission on Accreditation of Healthcare Organizations.

JCAHO Psychiatric Residential Program: A program which provides non-emergency inpatient (residential) psychiatric services for children under age 21 in residential facilities which are licensed by DHS Children, Adults and Families Program and accredited by the JCAHO. These programs must meet Psychiatric Day Treatment standards regarding staffing credentials and staffing patterns, the integration of education and treatment, and Family focused, community-based Treatment.

Juvenile Psychiatric Review Board: The Board is authorized to have jurisdiction over youth who are charged with a crime and found guilty except for insanity.

Legal party: A person or entity who has legal standing on the child's dependency or delinquency case. Legal parties typically include the child, the parents and the state in dependency cases. By statute certain agencies are also parties to juvenile cases based on the care and commitment of the child. Agencies that might be included are child welfare, Oregon Youth Authority, juvenile justice, and mental health. An agency can contract with another agency to provide a particular service to the child and/or family, but the duties and obligations of a party cannot be transferred. A party may proceed without an attorney (known as appearing 'pro se'), but an attorney will always represent a party to the case.

LMP (Licensed Medical Practitioner): A person who is a physician, nurse practitioner and/or physician's assistant licensed to practice in the State of Oregon whose training, experience and competence demonstrates the ability to conduct a comprehensive mental health Assessment and provide Medication Management. The LMHA or Contractor must document that the person meets these minimum qualifications.

LMHA (Local Mental Health Authority): As defined in ORS 430.620, the county court or board of commissioners of one or more counties who choose to operate a CMHP; or, if the county declines to operate or contract for all or part of a CMHP, the board of directors of a public or private corporation which contracts with DHS to operate a CMHP for that county.

Medicaid: A federal and state funded portion of the Medical Assistance Program established by Title XIX of the Social Security Act, as amended, and administered in Oregon by DHS. The program provides medical assistance to poor and indigent persons.

Medical Assistance Program: now called Division of Medical Assistance Program
Mission statement: Family mission statement – a statement crafted by the wraparound team that provides a one or two sentence summary of goals the team is working toward with the child and family.

MHO (Mental Health Organization): A Prepaid Health Plan under contract with DHS to provide Covered Services under the OHP Medicaid Demonstration Project and State Children's Health Insurance Program. MHOs can be FCHPs, CMHPs or private MHOs or combinations thereof.

OHP (Oregon Health Plan) Member: As used in this Agreement, an individual found eligible by a program of DHS to receive health care services under the OHP Medicaid

Demonstration Project or State Children's Health Insurance Program and who is enrolled with Contractor under this Agreement.

OHP Member Representative: A person who can make Oregon Health Plan related decisions for OHP Members who are not able to make such decisions themselves. An OHP Member Representative may be, in the following order of priority, a person who is designated as the OHP Member's health care representative, a court-appointed guardian, a spouse, or other family member as designated by the OHP Member, the Individual Service Plan Team (for OHP Members with developmental disabilities), a DHS case manager or other DHS designee. For OHP Members in the care or custody of DHS's Children, Adults and Families Services or Oregon Youth Authority (OYA), the OHP Member Representative is DHS or OYA. For OHP Members placed by DHS through a Voluntary Child Placement Agreement (SCF form 499), the OHP Member shall be represented by his or her parent or legal guardian.

OHP (Oregon Health Plan): Oregon's health care reform effort consisting of a Medicaid Demonstration Project, State Children's Health Insurance Program, an individual insurance program for persons excluded from health insurance coverage due to pre-existing health conditions, and a group insurance program for small businesses. One objective of this reform effort includes universal coverage for Oregonians. In the context of this Agreement, Oregon Health Plan refers to the OHP Medicaid Demonstration Project and State Children's Health Insurance Program.

Oregon Health Plan (OHP) Client: An individual found eligible by a program of DHS to receive health care services under the OHP Medicaid Demonstration Project or State Children's Health Insurance Program.

Oregon Health Plan Plus Benefit Package: A benefit package with a comprehensive range of Services, as described in OAR 410-120-1200, Medical Assistance Benefits, available to OHP Members who are over the age of 65, the disabled, the TANF population, General Assistance recipients, and pregnant women and children (under the age of 19) up to 185 percent of Federal Poverty Level (FPL).

Oregon Health Plan Standard Benefit Package: A benefit package that provides basic health care Services as described in OAR 410-141-0500 and OAR 410-120-1200, Medical Assistance Benefits, for adults who are not otherwise eligible for Medicaid (Parents, Adults/Couples)

Oregon Youth Authority (OYA): The Department created by the 1995 Legislative Assembly that has responsibility for care and housing of child and adolescent offenders adjudicated and sentenced by juvenile justice to the juvenile correction system.
Other Inpatient Services: Services which are equivalent to Acute Inpatient Hospital Psychiatric Care but which are provided in a non-hospital setting.

Outpatient Hospital Services: Covered services received in an outpatient hospital setting where the OHP member has not been admitted to the facility as an inpatient, as defined in the DHS Hospital Services Guide.

Paraprofessional: A worker who does not meet the definition of QMHA or QMHP but who assists such associates and professionals.

Plan of care: A dynamic document describing the family, the team and the work to be undertaken to meet the family and child's needs to achieve the family's long-term vision. This is an evolving and changing document. Progress and updates are included as components of the Plan of Care.

Psychiatric Day Treatment: Community-based day or residential treatment services for children in a psychiatric treatment setting, which conforms to established state-approved standards.

PSRB (Psychiatric Security Review Board): The Board is authorized to have jurisdiction over persons who are charged with a crime and found guilty except for insanity.

QMHA (Qualified Mental Health Associate): A person delivering services under the direct supervision of a QMHP and meeting the following minimum qualifications as documented by Contractor: a bachelor's degree in a behavioral sciences field; or a combination of at least three years' relevant work, education, training or experience; and has the competencies necessary to communicate effectively; understand mental health Assessment, treatment and service terminology and to apply the concepts; and provide psychosocial Skills Development and to implement interventions prescribed on a Treatment Plan within their scope of practice.

QMHP (Qualified Mental Health Professional): A LMP or any other person meeting the following minimum qualifications as documented by Contractor: graduate degree in psychology; bachelor's degree in nursing and licensed by the State of Oregon; graduate degree in social work; graduate degree in behavioral science field; graduate degree in recreational, art, or music therapy; or bachelor's degree in occupational therapy and licensed by the State of Oregon; and whose education and experience demonstrates the competencies to identify precipitating events; gather histories of mental and physical disabilities, alcohol and drug use, past mental health services and criminal justice contacts; assess Family, social and work relationships; conduct a mental status examination; document a multi-axial DSM Diagnosis; write and supervise a Treatment Plan; conduct a Comprehensive Mental Health Assessment; and provide Individual Therapy, Family Therapy, and/or Group Therapy within the scope of their training.

Residential Treatment Facility: A facility that is operated to provide supervision, care and treatment on a 24-hour basis for six or more residents consistent with ORS 443.400 through ORS 443.455.

Strengths needs assessment: A document that describes the strengths and needs of a child based on a strengths inventory including positive skills, attributes and features of

the family. This would include a list to capture the needs of the family that are either verbally or behaviorally shared. This document will include background, summary and progress information on the family; a place to live; social/fun; emotional/behavioral; education/vocational; legal; medical; safety/crisis; spiritual; cultural; financial, including additional comments or information.

Therapeutic Group Home: A home providing planned Treatment to a child in a small residential setting. Treatment includes theoretically based individual and group home Skills Development and Medication Management, Individual Therapy and Consultations as needed, to remediate significant impairments in the child's functioning that are the result of a principal mental or emotional disorder diagnosed on Axis I of the DSM multi-axial Diagnosis.

Treatment: A planned, Medically Appropriate, individualized program of interactive medical, psychological, or rehabilitative procedures, experiences, and/or activities designed to rehabilitate, relieve or minimize mental or emotional disorders identified through a mental health Assessment.

Treatment Foster Care: A program of rehabilitation as prescribed in the Treatment Plan and provided in the child's foster home. Skill development activities are delivered on an individualized basis and are designed to promote skill development in areas identified in the Treatment Plan. The service requires the use of Treatment Foster Care in coordination with other mental health interventions to reduce symptoms associated with the child's mental or emotional disorder and to provide a structured, therapeutic environment. The service is intended to reduce the need for future services, increase the child's potential to remain in the community, restore the child's best possible functional level, and to allow the child to be maintained in a least restrictive setting.

Treatment Plan: A written individualized comprehensive plan based on a completed mental health assessment documenting the OHP Member's treatment goals, Measurable Objectives, the array of services planned, and the criteria for goal achievement.

Utilization: The amount and/or pattern of Covered Services used by an OHP Member, measured, for example, in dollars, units of service, or staff time.

Utilization Guidelines: Guidelines for the amount of Covered Services expected to be used by an OHP Member with a specific mental disorder over time.

Utilization Management: The process used to regulate the provision of services in relation to the overall Capacity of the organization and the needs of Consumers.

Wraparound Principles: A set of 10 statements that defines the wraparound philosophy and guides the activities of the wraparound process.

Wrap meeting: A family-driven meeting of the child and family team called and facilitated by the facilitator during the Plan

-Acronyms-

- A&D - Alcohol and Drug
- AFDC - Aid to Families with Dependant Children
- AMH - Addictions & Mental Health Division
- ASO – Administrative Services Organization
- CAF - Children’s Adults and Families (Division of Department of Human Services)
- CASA - Court appointed special advocate
- CASII - Child and Adolescent Service Intensity Instrument
- CASSP - Child & Adolescent Service System Program – A program that was funded by the National Institute of Mental Health to develop with local communities to plan, develop and implement services for children and adolescents with serious emotional disorders.
- CME – Care Management Entity
- CMHP - Community mental health programs
- CHIP - Children’s health Insurance Program (provides medical assistance to children up to age 19 who qualify for Medicaid but have family income under 170% of the federal poverty level)
- CMHP - Community Mental Health Program
- CMHS - Center for Mental Services, located in the Substance Abuse and Mental Health Services Administration (federal agency) established under PL 102-321
- CMO – Care Management Organizaition
- CMS - Centers for Medicare and Medicaid Services
- DD - Developmental Disabilities
- DHS - Department of Human Services
- DOE - Department of Education
- DMAP - Department of Mental Health Assistance
- DSM IV - Diagnostic and Statistical Manual of Mental Disorders (4th Edition) classification system for mental illnesses developed by the American Psychiatric Association
- EBP - Evidence-Based Practice
- EI - Early Intervention or Early Identification
- EPSDT - Early and Periodic Screening, Diagnosis and Treatment – part of Title XIX Medicaid
- ESD - Education Service District
- FCHP - Fully Capitated Health Plan (health plans that contract with DMAP to provide capitated services, including inpatient hospital, to Medicaid clients)
- FERPA - Family Education Rights and Privacy Act (student school records act) Federal regulation governing confidentiality of student records and parental rights of access and consent to release.

- FFCMH - Federation of Families for Children's Mental Health – a national organization of families and professionals dedicated to advocacy and systems change for children's mental health
- FFS - Fee-for-service (payment to medical providers based on each service or group of services provided)
- HHO - Household of one
- HHS - Department of Health and Human Services
- HMO - Health Maintenance Organization (plans that contract with AMH to provide mental health services to OHP clients)
- ICTS I- ntensive Community-Based Treatment Services
- IDEA - Individuals with Disabilities Education Act
- IEP - Individual Education Plan – a written plan for education services for a child with a disability developed jointly by parents and school personnel as required under federal law
- IFSP - ndividual Family Service Plan – written objectives for each child under 5 years of age, addressing both the child's and family's needs in the early intervention education program
- ISA - Intensive Services Array
- ITS - Intensive Treatment Services
- LCSW - Licensed Clinical Social Worker – denotes certification by a State of Oregon
- LEA - Local Educational Agency
- LMHA - Local mental health authority
- MHO - Mental Health Organization
- NAMI - The National Alliance for the Mentally Ill – a national organization of families and professionals dedicated to advocacy for adults with persistent mental illness
- NICWA - the National Indian Child Welfare Association
- NMHA - National Mental Health Association
- OHP - Oregon Health Plan -- Medicaid
- OJJDP - Office of Juvenile Justice and Delinquency Prevention
- OMPRO - no longer an acronym, but use to stand for Oregon Medical Professional Review Organization – provides review of clients records to determine eligibility status
- OYA - Oregon Youth Authority
- PPO - Preferred-provider organization
- QMHP - Qualified Mental Health Professional
- QMHA - Qualified Mental Health Associate
- SAMHSA - Substance Abuse Mental Health Services Administration, U.S. Department of Health and Human Services
- SED - Serious Emotional Disability (or Disorder) – also commonly EH for 'emotional handicap' or EBD for 'emotional or behavioral disorder.'
- SIG - State Infrastructure Grant

- SMHA - State Mental Health Agency
- SOC - System of Care
- SPD - Seniors and Persons with Disabilities Division
- SSA - Social Security Administration – a federal agency that administers social security and disability benefits
- SSBG - Social Security Block Grant, Title XX of Social Security Act
- SSDI - Social Security Disability Insurance – a federal program administered by SSA
- SSI - Supplemental Security Income – a federal program administered by SSA
- TANF - Temporary Assistance for Needy Families Program
- Title IV - Child Welfare Act Section of Social Security Act
- Title IV-A - Aid to Families with Dependant Children (Section of Social Security Act)
- Title IV-B - Child Welfare Services Program (Section of Social Security Act)
- Title IV-E - Foster Care and Adoption Assistance Programs (Section of Social Security Act)
- Title V - Maternal and Child Health (Section of Social Security Act)
- Title X - Federal Family Planning Program (Section of the Public Health Services Act)
- Title XVIII - Medicare (Section of the Social Security Act)
- Title XIX - Medicaid (Section of the Social Security Act)
- Title XX - See SSBG
- WIC - Special Supplemental Food Program for Women, Infants and Children

