



## California Behavioral Health Planning Council

ADVOCACY • EVALUATION • INCLUSION

### GLOSSARY OF TERMS AND ACRONYMS

<b>AAA</b>	<b>Area Agency on Aging</b> Federally funded and state designated regional agency responsible for coordinating existing resources and for developing a comprehensive, coordinated system of services for older adults in the county.
<b>AB</b>	<b>Assembly Bill</b>
<b>ABA</b>	<b>American Bar Association</b>
<b>ACE</b>	<b>Adverse Childhood Experiences</b> Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur when we are young. ACEs and the associated toxic stress they create are the root causes of some of the most common, serious, and costly health and social challenges facing our state. In fact, ACEs are strongly linked to 9 of the 10 leading causes of death in the United States. The ACEs Aware initiative is a first-in-the nation effort to screen patients for Adverse Childhood Experiences (ACEs) to help improve and save lives.
<b>ACMHA</b>	<b>American College of Mental Health Administration</b>
<b>ACSW</b>	<b>Academy of Certified Social Workers</b>
<b>ACT</b>	<b>Assertive Community Treatment</b> Assertive Community Treatment (ACT) programs offer the highest level of outpatient care in the community for adults who are homeless or at risk of becoming homeless, have a serious mental illness, and may also struggle with substance use. ACT is an intensive case management treatment model that uses a “whatever it takes” approach to help people.

<b>ADL</b>	<b>Activities of Daily Living</b> The things people do on a normal day, such as eating, using the toilet, getting dressed, bathing, or brushing teeth.
<b>ADP</b>	<b>(Department of) Alcohol and Drug Programs</b>
<b>ADRDA</b>	<b>Alzheimer's Disease and Related Disorders Association</b>
<b>AHA</b>	<b>American Hospital Association</b>
<b>AIDS</b>	<b>Acquired Immune Deficiency Syndrome</b>
<b>AMA</b>	<b>American Medical Association</b>
<b>AMI</b>	<b>Alliance for the Mentally Ill</b>
<b>AOD</b>	<b>Alcohol and Other Drug</b>
<b>APA</b>	<b>American Psychiatric Association or American Psychological Association</b>
<b>ARC</b>	<b>AIDS Related Complex</b>
<b>ARF</b>	<b>Adult Residential Facility</b> An adult residential care facility, (sometimes called a "board and care" home), is licensed by the State of California Department of Social Services, Community Care and Licensing. These facilities provide care and supervision to adults, ages 18 to 59, who have a mental illness.
<b>ASH</b>	<b>Atascadero State Hospital</b>
<b>ASO</b>	<b>Administrative Services Organization</b>
<b>ASOC</b>	<b>Adult System of Care</b>
<b>BCP</b>	<b>Budget Change Proposal</b>
<b>BHCIP</b>	<b>Behavioral Health Continuum Infrastructure Program</b> The Department of Health Care Services (DHCS) was authorized through 2021 legislation to establish the Behavioral Health Continuum Infrastructure Program (BHCIP) with \$2.2 billion to construct, acquire, and rehabilitate real estate assets or to invest in needed mobile crisis infrastructure to expand the community continuum of behavioral health treatment resources. DHCS is

releasing BHCIP grant funds through six rounds that target various gaps in the state's behavioral health facility infrastructure.

## **BHBH**

### **Behavioral Health Bridge Housing**

Through the Behavioral Health Bridge Housing (BHBH) Program, the California Department of Health Care Services (DHCS) will provide a total of \$1.5 billion in funding to county behavioral health agencies and Tribal entities to operate bridge housing settings to address the immediate and sustainable housing needs of people experiencing homelessness who have serious behavioral health conditions, including serious mental illness (SMI) and/or substance use disorder (SUD). The program, which was signed into law in September 2022 under Assembly Bill 179 (Ting, Chapter 249, Statutes of 2022), provides funding through June 30, 2027.

## **BH-CONNECT**

### **California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment**

On October 20, 2023, DHCS submitted its application for a new Medicaid Section 1115 Demonstration to increase access to and improve mental health services for Medi-Cal members statewide. The demonstration, the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration (formerly the CalBH-CBC Demonstration), takes advantage of Centers for Medicare & Medicaid Services' (CMS') 2018 guidance and associated federal funding aimed at improving care for Medi-Cal members living with significant behavioral health needs. This demonstration builds on California's historic commitment to creating a full continuum of care for substance use disorder treatment and recovery services; in 2015, California launched the Drug Medi-Cal Organized Delivery System (DMC-ODS), a first-in-the-nation model that has been emulated in many other states. Like DMC-ODS, this opportunity allows California to make historic investments in building out the full continuum of care for behavioral health, with a special focus on the populations most at risk.

## **BHIBA**

### **Behavioral Health Infrastructure Bond Act**

(Also known as the Behavioral Health Bond)

In March 2024, California voters passed Proposition 1, a two-bill package including the Behavioral Health Services Act (BHSA) (Senate Bill 326) and the Behavioral Health Infrastructure Bond Act of 2024 (BHIBA) (Assembly Bill 531). The BHIBA portion is a \$6.38 billion general obligation bond to develop an array of behavioral health treatment, residential care settings, and supportive housing to help provide appropriate care facilities for Californians experiencing mental health conditions and substance use

disorders. DHCS was authorized to award up to \$4.4 billion in BHIBA funds for Behavioral Health Continuum Infrastructure Program (BHCIP) competitive grants.

## **BHIN**

### **Behavioral Health Information Notice**

## **BHOATR**

### **County Behavioral Health Outcomes, Accountability, and Transparency Report**

The County Behavioral Health Outcomes, Accountability, and Transparency Report (BHOATR) is required by the Behavioral Health Services Act for counties to submit annually to the Department of Health and Human Services (DHCS). The BHOATR provides information on county adherence to their integrated plans, including reporting on actual mental health and substance use disorder (SUD) expenditures and activities undertaken during the reporting period.

## **BHSA**

### **Behavioral Health Services Act**

In March 2024, California voters passed Proposition 1, a two-bill package including the Behavioral Health Services Act (BHSA) (Senate Bill 326) and the Behavioral Health Infrastructure Bond Act of 2024 (BHIBA) (Assembly Bill 531). The BHSA replaces the Mental Health Services Act of 2004. It reforms behavioral health care funding to prioritize services for people with the most significant mental health needs while adding the treatment of substance use disorders (SUD), expanding housing interventions, and increasing the behavioral health workforce. It also enhances oversight, transparency, and accountability at the state and local levels. Additionally, the BHSA creates pathways to ensure equitable access to care by advancing equity and reducing disparities for individuals with behavioral health needs. It is one part of Proposition 1.

## **BH-SAC**

### **Behavioral Health Stakeholder Advisory Committee**

The DHCS Behavioral Health Stakeholder Advisory Committee (BH-SAC) is a broad-based body to disseminate information and receive coordinated input regarding DHCS behavioral health activities. It was created as part of the ongoing DHCS effort to integrate behavioral health with the rest of the health care system, and incorporates existing groups that have advised DHCS on behavioral health topics. Following the model of the Stakeholder Advisory Committee, the BH-SAC advises the DHCS Director on the behavioral health components of the Medi-Cal program as well as behavioral health policy issues more broadly. The BH-SAC convenes a diverse and visible stakeholder advisory group of leaders and representatives from key behavioral health concerns,

including counties, providers, and policy organizations to provide feedback and guidance to DHCS on behavioral health issues.

**BHSA Partners  
Forum**

This is an informal gathering of both Government and Community Partners to discuss issues related to the Behavioral Health Services Act.

**BHSA Revenue  
Stability  
Workgroup**

Workgroup to assess year-over-year fluctuations in tax revenues generated by the Behavioral Health Services Act (BHSA) and develop and recommend solutions to reduce BHSA revenue volatility and to propose appropriate prudent reserve levels.

**BHSEOAC**

**Behavioral Health Services Oversight & Accountability  
Commission**

(Also known as the Commission for Behavioral Health)

**BHSS**

**Behavioral Health Services and Supports**

Behavioral Health Services and Supports is a component of the Behavioral Health Services Act (BHSA) in California. The BHSA, passed as part of Proposition 1 in March 2024, aims to transform and expand the state's behavioral health system.

BHSS focuses on providing a wide range of services and supports for individuals with serious mental health conditions and substance use disorders (SUDs).

**BHT**

**Behavioral Health Transformation**

Behavioral Health Transformation is the effort that will implement the ballot initiative known as Proposition 1. BHT complements and builds on California's other major behavioral health initiatives including, but not limited to, California Advancing and Innovating Medi-Cal (CalAIM) initiative, the California Behavioral Health Community-Based Organization Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration proposal the Children and Youth Behavioral Health Initiative (CYBHI), Medi-Cal Mobile Crisis, 988 expansion, and the Behavioral Health Continuum Infrastructure Program (BHCIP).

Californians voted to pass Proposition 1 to modernize the behavioral health delivery system, improve accountability and increase transparency, and expand the capacity of behavioral health care facilities for Californians. Proposition 1 includes up to \$6.4 billion in bonds to build new supportive housing and community-based treatment settings. DHCS is enacting changes resulting from Proposition 1 through the Behavioral Health Transformation project.

<b>Bicultural</b>	Of two different cultures. Used here to indicate a person's background in and ability to identify with two distinct ethnic cultures.
<b>Bilingual</b>	Using or able to use two languages with the fluency of a native speaker.
<b>Board &amp; Care</b>	Program that only provides room, board, medication dispensing, and general supervision but no in-house treatment program. Clients in board and care frequently go out to community activities or community treatment programs.
<b>BPT</b>	<b>Board of Prison Terms</b>
<b>B/S or BOS</b>	<b>Board of Supervisors</b>
<b>CACFS</b>	<b>California Alliance of Child and Family Services</b>
<b>CADPAAC</b>	<b>County Alcohol and Drug Program Administrators Association of California</b>
<b>CAHF</b>	<b>California Association of Health Facilities</b>
<b>CalAIM</b>	<b>California Advancing and Innovating Medi-Cal</b> CalAIM is a multi-year DHCS initiative to improve the quality of life and health outcomes of our population by implementing broad delivery system, program, and payment reform across the Medi-Cal program.
<b>CALBH/BC</b>	<b>California Association of Local Behavioral Health Boards and Commissions</b>
<b>CALHHS</b>	<b>California Health and Human Services Agency</b>
<b>CAL ICH</b>	<b>California Interagency Council on Homelessness</b>
<b>CAL-OSHA</b>	<b>California Occupational Safety and Health Act</b>
<b>CALQIC</b>	<b>California Quality Improvement Coordinators</b>
<b>CALWORKS</b>	<b>California Work Opportunity and Responsibility to Kids</b>
<b>CAMFT</b>	<b>California Association of Marriage and Family Therapists</b>
<b>CAMHAOA</b>	<b>California Association of Mental Health Advocates for Older Adults</b>

<b>CAMHPRA</b>	<b>California Association of Mental Health Patient Rights Advocates</b>
<b>CAMI</b>	<b>See NAMI-CA</b>
<b>CAO</b>	<b>County Administrative Officer</b>
<b>CAP Model</b>	<b>Cost Accounting and Planning Model</b>
<b>CARCH</b>	<b>California Association of Residential Care Homes</b>
<b>CARE</b>	<b>Community Assistance, Recovery, and Empowerment Act</b> CARE is a compassionate civil court process that provides participants with a clinically appropriate, community-based set of services and supports that are culturally and linguistically competent. Individualized CARE plans can initially be structured to last up to 12 months, and can be extended for an additional 12 months as necessary. CARE plans ensure participants receive a broad range of necessary services, including short-term stabilization medications, wellness and recovery supports, and connection to other social services such as housing.
<b>CASRA</b>	<b>California Association of Social Rehabilitation Agencies</b>
<b>CASSP</b>	<b>Child and Adolescent Service System Program</b>
<b>CCAC</b>	<b>Cultural Competency Advisory Council</b>
<b>CCBHC</b>	<b>Certified Community Behavioral Health Clinic</b> A Certified Community Behavioral Health Clinic model is designed to ensure access to coordinated comprehensive behavioral health care. CCBHCs are required to serve anyone who requests care for mental health or substance use, regardless of their ability to pay, place of residence, or age - including developmentally appropriate care for children and youth. CCBHCs must meet standards for the range of services they provide, and they are required to get people into care quickly. An important feature of the CCBHC model is that it requires crisis services that are available 24 hours a day, 7 days a week. CCBHCs are required to provide a comprehensive array of behavioral health services so that people who need care don't have to piece together the behavioral health support they need across multiple providers. In addition, CCBHCs must provide care coordination to help people navigate behavioral health care, physical health care, social services, and the other systems they are involved in. CCBHCs can be supported through the Section 223 CCBHC Medicaid Demonstration, through SAMHSA administered

CCBHC Expansion (CCBHC-E) Grants, or through independent state programs separate from the Section 223 CCBHC Medicaid Demonstration.

**CCC**                      **Crisis Care Continuum**

**CCE**                      **Community Care Expansion Program**  
The Community Care Expansion (CCE) Program funds the acquisition, construction, and/or rehabilitation of adult and senior care facilities that serve applicants and recipients of Supplemental Security Income/State Supplementary Payment (SSI/SSP) or Cash Assistance Program for Immigrants (CAPI), who are at risk of or experiencing homelessness. Funds are also available to preserve residential care settings, including through operating subsidies for existing licensed adult and senior care facilities currently serving SSI/SSP or CAPI recipients.

**CBAS**                      **Community-Based Adult Services (CBAS)**  
Outpatient, facility-based service program that delivers skilled nursing care, social services, occupational and speech therapies, personal care, family/caregiver training and support, nutrition services, transportation, and other services to eligible members who meet applicable eligibility criteria.

**CBHA**                      **California Council of Community Behavioral Health Agencies**

**CBHDA**                      **California Behavioral Health Directors Association**

**CBHPC**                      **California Behavioral Health Planning Council**

**CBO**                      **Community-Based Organization (CBO)**  
A CBO is a public or private nonprofit organization that operates within a local community for the greater common good. Examples include Federally Qualified Health Centers (FQHCs), community or school-based health centers (SHHCs) and service organizations. CBOs can bring established connections with local health departments (LHDs) and schools/districts

**CCoA**                      **California Commission on Aging**

**CCBHC**                      **Certified Community Behavioral Health Clinic**  
A Certified Community Behavioral Health Clinic (CCBHC) is a specially-designated clinic that provides a comprehensive range of mental health and substance use services. CCBHCs serve anyone who walks through the door, regardless of their diagnosis and insurance status.



<b>CCEPD</b>	<b>Council Committee on Employment of People with Disabilities</b>
<b>CCF</b>	<b>Community Care Facility</b>
<b>CCH</b>	<b>California Association of Children's Homes</b>
<b>CCJBH</b>	<b>Council on Criminal Justice and Behavioral Health</b>
<b>CCMH</b>	<b>California Council on Mental Health</b>
<b>CCR</b>	<b>California Code of Regulations</b>
<b>CDADP</b>	<b>California Department of Alcohol and Drug Programs</b>
<b>CDEPs</b>	<b>Community-Defined Evidence Practices</b> CDEPs are community-based behavioral health practices that have reached a strong level of support within specific communities.
<b>CDBG</b>	<b>Community Development Block Grant</b>
<b>CDC</b>	<b>California Department of Corrections</b>
<b>CDA</b>	<b>California Department of Aging</b>
<b>CDCR</b>	<b>California Department of Corrections and Rehabilitation</b>
<b>CDE</b>	<b>California Department of Education</b>
<b>CDS</b>	<b>Client Data System (predecessor of CSI)</b>
<b>CDSS</b>	<b>California Department of Social Services</b>
<b>CE</b>	<b>Continuing Education</b> A training activity or series of training activities offered to members of the current workforce who have already completed a training program in their profession. Continuing education sessions are offered to existing professionals and do not include students as primary participants.
<b>CES</b>	<b>Coordinated Entry System</b>
<b>CFMTM</b>	<b>Client and Family Member Task Force</b>
<b>CFR</b>	<b>Code of Federal Regulations</b>

<b>CHA</b>	<b>California Health Care Association</b> Private hospitals providing care, including acute psychiatric services.
<b>CHCF</b>	<b>California Health Care Foundation</b>
<b>CIBHS</b>	<b>California Institute for Behavioral Health Solutions</b>
<b>CIMH</b>	<b>California Institute for Mental Health</b>
<b>CMA</b>	<b>California Medical Association</b>
<b>CMAC</b>	<b>California Medical Assistance Committee</b>
<b>CMB</b>	<b>California Medical Board</b>
<b>CMC</b>	<b>California Men's Colony</b>
<b>CMF</b>	<b>California Medical Facility (Vacaville)</b>
<b>CMHACY</b>	<b>California Mental Health Advocates for Children and Youth</b>
<b>CMHC</b>	<b>Community Mental Health Center</b>
<b>CHW</b>	<b>Community Health Worker</b> CHW services are preventive health services to prevent disease, disability, and other health conditions or their progression; to prolong life; and promote physical and mental health and well-being. CHW services may assist with a variety of concerns impacting MCP Members, including but not limited to, the control and prevention of chronic conditions or infectious diseases, behavioral health conditions, and need for preventive services. Additionally, CHW services can help Members receive appropriate services related to perinatal care, preventive care, sexual and reproductive health, environmental and climate-sensitive health issues, oral health, aging, injury, and domestic violence and other violence prevention services. CHWs may include individuals known by a variety of job titles, including promotores, community health representatives, navigators, and other non-licensed public health workers, including violence prevention professionals.
<b>CMHS</b>	<b>Center for Mental Health Services (Federal) or Community Mental Health Services</b>
<b>CMS</b>	<b>Centers for Medicare and Medicaid Services</b>

<b>CNA</b>	<b>California Nurses Association</b>
<b>CNMHC</b>	<b>California Network of Mental Health Clients (aka “the Network”)</b>
<b>CNS</b>	<b>Clinical Nurse Specialist</b>
<b>Coalition</b>	<b>California Coalition for Mental Health</b>
<b>COC</b>	<b>Continuum of Care</b>
<b>COLA</b>	<b>Cost of Living Adjustment</b> Almost always expressed as a percent increase.
<b>CONREP</b>	<b>Forensic Conditional Release Program</b>
<b>COOP</b>	<b>Cooperative Program</b> Cooperative programs, also known as third-party cooperative programs, are state and local agreements where the Department of Rehabilitation (DOR) and public partner agencies combine their resources to provide vocationally focused services to help individuals with disabilities obtain and retain competitive, integrated employment and maximize their ability to live independently in their communities.
<b>Conservatorship</b>	Involuntary Status for people unable to provide food, clothing, and shelter due to a mental disorder. Conservatorships are established through the court and last for one year.
<b>CPA</b>	<b>California Psychiatric Association</b>
<b>CPCA</b>	<b>California Primary Care Association</b>
<b>CRC</b>	<b>Caregiver Resource Center</b>
<b>CRCAC</b>	<b>Community Residential Care Association of California</b>
<b>CR/DC</b>	<b>Cost Reporting and Data Collection System</b> The State’s system of budgeting and reporting costs by program and developing costs per unit of service.
<b>CRDP</b>	<b>California Reducing Disparities Project</b> A statewide policy initiative to identify solutions for historically unserved, underserved, and inappropriately served communities. Under the Office of Health Equity, this statewide Prevention and Early Intervention effort, the California Reducing Disparities Project

(CRDP), focuses on five populations: African Americans, Asians and Pacific Islanders (API), Latinos. Lesbian, Gay, Bisexual, Transgender, Queer, and Questioning (LGBTQ), Native Americans

<b>CRTS</b>	<b>Community Residential Treatment Systems</b>
<b>CS</b>	<b>Community Supports</b> Community Supports are services provided by Medi-Cal managed care plans (MCPs) to address Medi-Cal members' health-related social needs, help them live healthier lives, and avoid higher, costlier levels of care. Members may receive a Community Supports service if they meet the eligibility criteria, and if the MCP determines the Community Supports service is a medically appropriate and cost-effective alternative to services covered under the California Medicaid State Plan.
<b>CSAC</b>	<b>California State Association of Counties</b>
<b>CSEA</b>	<b>California State Employees Association</b>
<b>CSH</b>	<b>Camarillo State Hospital</b>
<b>CSIS</b>	<b>Client Service Information System (replaced CDS)</b>
<b>CSOC</b>	<b>Children's System of Care</b>
<b>CSPA</b>	<b>California State Psychological Association</b>
<b>CSSP</b>	<b>Community Support System Project</b>
<b>CSW</b>	<b>Clinical Social Worker</b>
<b>CTF</b>	<b>Community Treatment Facility</b>
<b>CWC</b>	<b>Certified Wellness Coach</b> The Certified Wellness Coach is a new profession that is helping increase our state's overall capacity to support the behavioral health and well-being of California's children and youth in a wide variety of settings, such as schools, community-based organizations and health providers.
<b>CWDA</b>	<b>California Welfare Directors Association</b>
<b>CYA</b>	<b>California Youth Authority</b>

<b>CYBHI</b>	<b>Children and Youth Behavioral Health Initiative</b> The Children and Youth Behavioral Health Initiative (CYBHI) is part of the Master Plan for Kids' Mental Health, a historic investment by the State of California that takes a "whole child" approach to address the factors that contribute to the mental health and well-being of our children and youth.
<b>DD</b>	<b>Developmentally Disabled</b>
<b>DDS</b>	<b>Department of Developmental Services</b>
<b>DEI</b>	<b>Diversity, Equity, and Inclusion</b>
<b>Demography</b>	The statistical study of human populations, especially with reference to size, distribution, and vital statistics (ages, sex, race, etc.).
<b>DGS</b>	<b>Department of General Services</b>
<b>DHHS</b>	<b>Department of Health and Human Services (Federal)</b>
<b>DHCS</b>	<b>Department of Health Care Services</b>
<b>DMC-ODS</b>	<b>Drug Medi-Cal Organized Delivery System</b> The Drug Medi-Cal Organized Delivery System (DMC-ODS) provides a continuum of care modeled after the American Society of Addiction Medicine (ASAM) Criteria for substance use disorder (SUD) treatment services, enables more local control and accountability, provides greater administrative oversight, creates utilization controls to improve care and efficient use of resources, implements evidenced based practices in SUD treatment, and coordinates with other systems of care.
<b>DMH</b>	<b>Department of Mental Health</b>
<b>DOC</b>	<b>Department of Corrections</b>
<b>DOF</b>	<b>Department of Finance</b>
<b>DOIT</b>	<b>Department of Information Technology</b>
<b>DOR</b>	<b>Department of Rehabilitation</b>
<b>DPA</b>	<b>Department of Personnel Administration</b>
<b>DOR</b>	<b>Department of Rehabilitation</b>

<b>DRGs</b>	<b>Diagnostically Related Groups</b>
<b>DSH</b>	<b>Department of State Hospitals</b>
<b>DSM IV</b>	<b>Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition</b>
<b>DSM V</b>	<b>Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition</b>
<b>DSS</b>	<b>Department of Social Services</b>
<b>EAP</b>	<b>Employee Assistance Program</b>
<b>EBPs</b>	<b>Evidence-Based Practices</b>
<b>ECM</b>	<b>Enhanced Care Management</b> ECM is a new statewide Medi-Cal benefit available to eligible members with complex needs, including: 1) Access to a single Lead Care Manager who provides comprehensive care management and coordinates their health and health-related care and services and 2) Connections to the quality care they need, no matter where members seek care – at the doctor, the dentist, with a social worker, or at a community center.
<b>ECT</b>	<b>Electroconvulsive Therapy</b>
<b>ED</b>	<b>Executive Director</b>
<b>EEO</b>	<b>Equal Employment Opportunity</b>
<b>EHR</b>	<b>Electronic Health Record</b> An Electronic Health Record (EHR) is an electronic version of a patient's medical history that is maintained by the provider over time and may include all of the key administrative clinical data relevant to that person's care under a particular provider, including demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data, and radiology reports.
<b>EMHI</b>	<b>Early Mental Health Initiative</b>
<b>EPSDT</b>	<b>Early Periodic Screening, Diagnosis, and Treatment</b>
<b>ERA</b>	<b>Expense Reimbursement Agreement</b>

<b>FEMA</b>	<b>Federal Emergency Management Administration</b>
<b>FFP</b>	<b>Federal Financial Participation</b>
<b>FFS/MC</b>	<b>Fee-for-Service Medi-Cal</b>
<b>FFY</b>	<b>Federal Fiscal Year (10/1 to 9/30)</b>
<b>FI</b>	<b>Fiscal Intermediary</b>
<b>FQHC</b>	<b>Federally Qualified Health Center</b> An Electronic Health Record (EHR) is an electronic version of a patient's medical history that is maintained by the provider over time and may include all of the key administrative clinical data relevant to that person's care under a particular provider, including demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data, and radiology reports.
<b>FSP</b>	<b>Full Service Partnership</b> The foundation of Full Service Partnerships is doing "whatever it takes" to help individuals on their path to recovery and wellness. Full Service Partnerships embrace client-driven services and supports with each client choosing services based on individual needs. Adult FSP programs assist with housing, employment and education in addition to providing mental health services and integrated treatment for individuals who have a co-occurring mental health and substance abuse disorder. Services can be provided to individuals in their homes, the community and other locations. Peer and caregiver support groups are available. Embedded in Full Service Partnerships is a commitment to deliver services in ways that are culturally and linguistically competent and appropriate.
<b>FTE</b>	<b>Full Time Equivalent (Staff)</b> A designation of the staff time assigned to any given staff position. ".5 FTE" represents a half-time position. FTE designation does not necessarily correspond to how many individuals are filling a position. "1.5 FTE" may represent one person working full-time and one person working half-time, or three people each working half-time, etc.
<b>FY</b>	<b>Fiscal Year</b>
<b>GC</b>	<b>Government Code</b>

<b>Geriatrics</b>	A branch of medicine or psychiatry dealing with the problems or diseases of old age.
<b>Gerontology</b>	The study of aging.
<b>HCAI</b>	<b>Department of Health Care Access and Information (Formerly OSHPD)</b>
<b>HCBA</b>	<b>Home and Community Based Alternatives</b>
<b>HCFA</b>	<b>Health Care Financing Administration (Federal)</b>
<b>HFP</b>	<b>Healthy Families Program</b>
<b>HHC</b>	<b>Housing and Homelessness Committee</b>
<b>HHS</b>	<b>Health and Human Services (Federal)</b>
<b>HHSA</b>	<b>Health and Human Services Agency (State)</b>
<b>H&amp;HS</b>	<b>Health and Human Services (County)</b> A County department that provides integrated health, mental health, social, and income maintenance services.
<b>HIE</b>	<b>Health Information Exchange</b> HIE enables health care providers and organizations to share health information electronically.
<b>HIV</b>	<b>Currently preferred clinical name of the AIDS virus (Human Immunodeficiency Virus)</b>
<b>HMIS</b>	<b>Homeless Management Information System</b> HMIS is a local information technology system used to collect client-level data and data on the provision of housing and services to individuals and families at risk of and experiencing homelessness. The U.S. Department of Housing and Urban Development (HUD), along with other planners and policymakers, use aggregate HMIS data to better inform homeless policy and decision-making at the federal, state, and local levels. The HEARTH (Homeless Emergency Assistance and Rapid Transition to Housing) Act of 2009 requires that all communities have an HMIS with the capacity to collect unduplicated counts of individuals and families experiencing homelessness.
<b>HMO</b>	<b>Health Maintenance Organization</b>



## HOAC

## Health Officers Association of California

### Housing First

A homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the understanding that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to increase a client's success in remaining housed and improving their life.

### Housing Intervention

Housing Intervention is a key component of the Behavioral Health Services Act (BHSA), which aims to provide stable housing for individuals with significant behavioral health needs, including those who are homeless or at risk of homelessness. Proposition 1, passed in March 2024, includes the Behavioral Health Services Act and a \$6.4 billion Behavioral Health Bond to support community infrastructure and housing with services.

Key aspects of housing interventions under Proposition 1 include:

- **30% Allocation:** Each county must allocate 30% of its Behavioral Health Services Act funding to housing interventions.
- **Priority for Chronic Homelessness:** Half of this funding is prioritized for individuals and families experiencing long-term homelessness.
- **Types of Support:** This includes rental subsidies, operating subsidies, shared housing, family housing for eligible children and youth, and transitional rent.
- **Ongoing Funding:** The act provides ongoing revenue for counties to assist people with severe behavioral health needs with housing and offers a path to long-term recovery.

## HPSA

### Health Professional Shortage Area

A federal designation used to identify areas, populations, and facilities that have a shortage of either primary care, dental, or mental health providers. It is measured by the ratio of available discipline-specific providers to the population of the area; a specific population group; or the number of those served by the facility.

## HSA

### Health Systems Agency

<b>HUD</b>	<b>Department of Housing and Urban Development (federal)</b>
<b>IA</b>	<b>Interagency Agreement</b>
<b>ICD-10</b>	<b>International Classification of Diseases (Tenth Edition)</b>
<b>ICF</b>	<b>Intermediate Care Facility</b>
<b>ICF/PR</b>	<b>Intermediate Care Facility/Psychiatric Rehabilitation</b>
<b>ICF/SA</b>	<b>Intermediate Care Facility/Sub-Acute</b>
<b>IDEA</b>	<b>Individuals with Disabilities Education Act of 1990</b>
<b>IEP</b>	<b>Individualized Education Plan</b>
<b>IFB</b>	<b>Invitation for Bid</b>
<b>IHSS</b>	<p><b>In Home Support Services</b></p> <p>The IHSS Program will help pay for services provided to you so that you can remain safely in your own home. IHSS is an alternative to out-of-home care, such as nursing homes or board and care facilities. The types of services which can be authorized through IHSS are housecleaning, meal preparation, laundry, grocery shopping, personal care services (such as bowel and bladder care, bathing, grooming and paramedical services), accompaniment to medical appointments, and protective supervision for the mentally impaired. County social service agencies administer IHSS.</p>
<b>IMD</b>	<b>Institute for Mental Disease</b>
<b>IPs</b>	<p><b>Integrated Plans</b></p> <p>The Behavioral Health Services Act (BHSA) requires counties to submit three-year Integrated Plans for Behavioral Health Services and Outcomes (Integrated Plans (IPs)). Whereas the Three-Year Program and Expenditure Plan required under the MHSA focused exclusively on MHSA dollars, the BHSA establishes the IP to serve as a three-year prospective global spending plan that describes how counties plan to use all available behavioral health funding, including BHSA, 1991 and 2011 Realignment, federal grant programs, federal financial participation from Medi-Cal, opioid settlement funds, local funding, and other funding to meet statewide and local outcome measures, reduce disparities, and address the unmet need in their community. In accordance with the BHSA, the IP provides a description of how counties will plan expenditures across a range of behavioral health funding sources and deliver high-quality, culturally</p>

responsive, and timely care along the Behavioral Health Care Continuum for the plan period.

<b>IPP</b>	<b>Incentive Payment Program</b> The CalAIM Incentive Payment Program (IPP) is intended to support the implementation and expansion of ECM and Community Support by incentivizing managed care plans (MCPs), in accordance with 42 CFR Section 438.6(b), to FR Section 438.6(b), to: Drive MCP delivery system investment in provider capacity and delivery system infrastructure, Bridge current silos across physical and behavioral health care service delivery, Reduce health disparities and promote health equity, Achieve improvements in quality performance, and Encourage take-up of Community Supports.
<b>IPS</b>	<b>Individual Placement and Support</b> Individual Placement and Support (IPS) – Supported Employment model is an evidence-based practice that helps individuals with mental disorders find and keep competitive employment.
<b>IRB</b>	<b>Institutional Review Board</b>
<b>IRO</b>	<b>Independent Review Organization</b> An independent organization hired by Medicare that reviews a level 2 appeal. It is not connected with us and is not a government agency. This organization decides whether the decision we made is correct or if it should be changed. Medicare oversees its work. The formal name is the Independent Review Entity.
<b>ISA</b>	<b>Integrated Services Agency</b>
<b>ISO</b>	<b>Information Security Officer</b>
<b>IST</b>	<b>Incompetent to Stand Trial</b>
<b>IT</b>	<b>Information Technology</b>
<b>JCAHO</b>	<b>Joint Commission on Accreditation of Healthcare Organization</b>
<b>JC/PC</b>	<b>Judicially Committed/Penal Code</b>
<b>JJ</b>	<b>Juvenile Justice</b>
<b>LAN</b>	<b>Local Area Network</b>

<b>LAO</b>	<b>Legislative Analyst's Office</b>
<b>LCSW</b>	<b>Licensed Clinical Social Worker</b>
<b>LEA</b>	<b>Local Education Agency</b>
<b>LEAP</b>	<b>Limited Examination and Appointment Program</b>
<b>LPCC</b>	<b>Licensed Professional Clinical Counselor</b>
<b>LPPC</b>	<b>Legislation and Public Policy Committee</b>
<b>"L" Facility</b>	Locked nursing facility providing basic care for patients.
<b>Line Item Budget</b>	Budget costs shown by expense or revenue category (i.e., office supplies, pharmacy, salaries). The County budget is a line-item budget.
<b>LMFT</b>	<b>Licensed Marriage and Family Therapist</b>
<b>LMHP</b>	<b>Licensed Mental Health Professional</b>
<b>LOC</b>	<b>Level of Care</b>
<b>LPHA</b>	<b>Licensed Practitioner of the Healing Arts</b>
<b>LPS Act</b>	<b>Lanterman-Petris-Short Act</b> California legislation to protect the civil rights of the mentally ill. Governs involuntary mental health treatment.
<b>LPS Administration</b>	Administration of involuntary and court-ordered psychiatric evaluation and treatment.
<b>LTCS</b>	<b>Long Term Care Services</b>
<b>LTSS</b>	<b>Long Term Services and Supports</b> Long-term services and supports help improve a long-term medical condition. Most of these services help you stay in your home so you don't have to go to a nursing facility or hospital. LTSS covered by our plan include Community-Based Services, Nursing Facilities (NF), and Community Supports. IHSS and 1915(c) waiver programs are Medi-Cal LTSS provided outside our plan.
<b>LVN</b>	<b>Licensed Vocational Nurse</b>
<b>MAA Mandated</b>	<b>Medi-Cal Administrative Activity (Claiming)</b>

**Costs** State Revenue and Taxation Code provides for reimbursement of certain costs for legislatively mandated programs. In Mental Health the “mandate” includes case management and utilization review. These funds pay the 10 percent match only. Sometimes called SB 90 claims to the State.

**MAT** **Medication Assisted Treatment**

**Match** Dollars the County is required to appropriate in order to receive State funds. With Realignment, the County must match State dollars in accordance with a schedule developed by the State DMH based on County standard matching obligations for FY 1990-91 (WIC §17608.05).

**MCO** **Managed Care Organization**  
Medi-Cal Managed Care contracts for health care services through established networks of organized systems of care, which emphasize primary and preventive care. Managed care plans are a cost-effective use of health care resources that improve health care access and assure quality of care.

**MCP** **Managed Care Plan (for health services)**

**MD** **Mentally Disabled or Mentally Disordered (or Doctor of Medicine)**

**MDO** **Mentally Disordered Offender**

**MDSO** **Mentally Disordered Sex Offender**

**MEDS** **Medi-Cal Eligibility Data System**

**MFCC** **Marriage, Family, and Child Counselor**

**MFT** **Marriage and Family Therapist**

**MHAC** **Mental Health Association in California (aka MHA)**

**MHB/C** **Mental Health Board (in each county) (Sometimes a Commission)**  
Each county in California is required to establish a mental health board comprised of consumers, family members, and other interested citizens. None of them may be employees of county mental health or its contractors. Members are appointed by the

BOS for three-year terms. MHB/Cs review and evaluate community mental health needs and special problems; they review county Mental Health Plans each year and advise and report to the BOS regarding mental health services.

**MHP**                      **Mental Health Plan (designation of counties providing managed mental health care services)**

**MHRC**                      **Mental Health Rehabilitation Centers**

**MHS**                      **Mental Health Services**

**MHSA**                      **Mental Health Services Act**  
The MHSA was passed by California voters in 2004 and is funded by a one percent income tax on personal income in excess of \$1 million per year. It is designed to expand and transform California's behavioral health system to better serve individuals with, and at risk of, serious mental health issues, and their families. MHSA addresses a broad continuum of prevention, early intervention, and service needs and the necessary infrastructure, technology, and training elements that effectively support the public behavioral health system.

**MIA**                      **Mentally Indigent Adult**

**MIS**                      **Management Information System**  
A computerized system from which management can obtain data describing the services delivered by a program and the demographic data of the people who receive the services. An MIS is a computerized method of counting numbers of people and services; it does not evaluate the outcome or quality of services.

**MNC**                      **Medical Necessity Criteria**

**MOE**                      **Maintenance of Effort**

**MOU**                      **Memorandum of Understanding**

**Mobile Crisis Services**                      Mobile crisis services are a community-based intervention designed to provide de-escalation and relief to individuals experiencing a behavioral health crisis wherever they are, including at home, work, school, or in the community. Mobile crisis services are provided by a multidisciplinary team of trained behavioral health professionals in the least restrictive setting. Mobile crisis services include screening, assessment, stabilization, de-escalation, follow-up, and coordination with healthcare services and other supports. Mobile

crisis services are intended to provide community-based crisis resolution and reduce unnecessary law enforcement involvement and emergency department utilization.

<b>MSH</b>	<b>Metropolitan State Hospital</b>
<b>MHP</b>	<b>Multifamily Housing Program</b>
<b>MSW</b>	<b>Master of Social Work</b>
<b>NAMI</b>	<b>National Alliance for the Mentally Ill</b>
<b>NAMI-CA</b>	<b>California Chapter (formerly CAMI)</b>
<b>NASMHPD</b>	<b>National Association of State Mental Health Program Directors</b>
<b>NASW</b>	<b>National Association of Social Workers</b>
<b>NGI</b>	<b>Not Guilty by Reason of Insanity</b>
<b>NIAAA</b>	<b>National Institute on Alcohol Abuse and Alcoholism</b>
<b>NIDA</b>	<b>National Institute of Drug Abuse</b>
<b>NIMH</b>	<b>National Institute of Mental Health</b>
<b>NLOC</b>	<b>Non-Level of Care—Staffing</b>
<b>NNA</b>	<b>Negotiated Net Amount</b>
<b>NOA</b>	<b>Notice of Action</b>
<b>NOFA</b>	<b>Notification/Notice of Funding Availability</b>
<b>NorQIC</b>	<b>Northern California Quality Improvement Coordinators</b>
<b>NPLH</b>	<b>No Place Like Home Program</b>
<b>NR</b>	<b>Negotiated Rate</b>
<b>NSH</b>	<b>Napa State Hospital</b>
<b>NWD</b>	<b>No Wrong Door</b> As of July 1, 2022, DHCS implemented a “no wrong door” policy to ensure beneficiaries receive mental health services regardless of the delivery system where they seek care (via county behavioral

health, Medi-Cal managed care plan (MCP), or the fee-for-service delivery system). This policy allows beneficiaries who directly access a treatment provider to receive an assessment and mental health services, and to have that provider reimbursed for those services by their contracted plan, even if the beneficiary is ultimately transferred to the other delivery system due to their level of impairment and mental health needs. In certain situations, beneficiaries may receive coordinated, non-duplicative services in multiple delivery systems, such as when a beneficiary has an ongoing therapeutic relationship with a therapist or psychiatrist in one delivery system while requiring medically necessary services in the other.

**NYMBY**                      **Not In My Backyard**

**OA**                              **Office Automation**

**OAL**                            **Office of Administrative Law**

**OBRA**                        **Omnibus Budget Reconciliation Act**

**OBS**                            **Organic Brain Syndrome**

**Older Adults**              Persons age 60 or over.

**OMS**                            **Office of Multicultural Services (DMH)**

**OT**                              **Occupational Therapist**  
The profession is intended to support the development of a larger, more representative behavioral health workforce, providing young people with increased support from people who they can connect with, who speak their language, understand their communities, and work in places that are convenient to youth. Through wellness promotion, screening, and crisis referral, Certified Wellness Coaches help make behavioral health support more inclusive and readily available to youth, bridging the crucial gap between need and accessibility. Occupational Therapists and Occupational Therapy Assistants work with people experiencing different medical conditions or disabilities to develop, improve or restore functional daily living skills.

**Overmatch**                Dollars more than required match that the County appropriates from its general fund. Supports a more enriched program and allows programs to exceed the SMA.



<b>PACE</b>	<b>Program for All Inclusive Care for the Elderly</b> A program that covers Medicare and Medicaid benefits together for people age 55 and over who need a higher level of care to live at home.
<b>PACT</b>	<b>Programs for Assertive Community Treatment</b>
<b>PAI</b>	<b>Protection &amp; Advocacy, Inc.</b>
<b>PASARR</b>	<b>Pre-Admission Screening and Annual Resident Review</b>
<b>PATH</b>	<b>Providing Access and Transforming Health Initiative</b> PATH is a five-year, \$1.85 billion initiative to build up the capacity and infrastructure of on-the-ground partners, such as community-based organizations (CBOs), public hospitals, county agencies, tribes, and others, to successfully participate in the Medi-Cal delivery system as California widely implements Enhanced Care Management and Community Supports and Justice Involved services under CalAIM. Drawing upon the success and lessons learned from the Whole Person Care and Health Homes Pilots, PATH funding will address the gaps in local organizational capacity and infrastructure that exist statewide, enabling these local partners to scale up the services they provide to Medi-Cal beneficiaries. With resources funded by PATH—such as additional staff, billing systems, and data exchange capabilities—community partners will successfully contract with managed care organizations, bringing their wealth of expertise in community needs to the Medi-Cal delivery system. As PATH funds serve to strengthen capacity statewide, particularly among providers and CBOs that have historically been under-resourced, the initiative will help California advance health equity, address social drivers of health, and move towards an equitable, coordinated, and accessible Medi-Cal system.
<b>PATH</b>	<b>Grant Projects for Assistance in Transition from Homelessness</b> PATH funds are Federal funds authorized under the Stewart B. McKinney Homeless Assistance Amendment Act of 1990 and granted to the State for the provision of services for 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.
<b>PC</b>	<b>Penal Code</b> State legal code defining offenses and corresponding sentences.

<b>PC-1026</b>	The penal code designation for those persons determined to be “not guilty by reason of insanity.”
<b>PES</b>	<b>Psychiatric Emergency Services</b>
<b>PEI</b>	<b>Prevention and Early Intervention</b>
<b>PFP</b>	<b>Pay for Performance</b>
<b>PHF</b>	<b>Psychiatric Health Facility</b>
<b>PHI</b>	<b>Protected Health Information</b> Information about you and your health, such as your name, address, social security number, physician visits, and medical history. Refer to our Notice of Privacy Practices for more information about how we protect, use, and disclose your PHI, as well as your rights with respect to your PHI.
<b>PHP</b>	<b>Prepaid Health Plan</b>
<b>PHM</b>	<b>Population Health Management</b> In 2023, the Department of Health Care Services (DHCS) will launch Population Health Management (PHM), which is a cornerstone of CalAIM. PHM will establish a cohesive, statewide approach that ensures Medi-Cal members have access to a comprehensive program that leads to longer, healthier and happier lives, improved health outcomes, and health equity. Several of the key elements of PHM were already in place in the Medi-Cal program prior to CalAIM through both DHCS policies and Medi-Cal managed care plans' procedures and programs. Under PHM, plans and their networks and partners are responsive to individual member needs within the communities they serve, while also working within a common framework and set of expectations.
<b>PIO</b>	<b>Public Information Office or Officer</b>
<b>POC</b>	<b>Performance Outcomes Committee</b>
<b>PPS</b>	<b>Prospective Payment System</b> PPS is a payment method in which a predetermined fixed amount is paid to a clinic for the services provided during a patient visit and is described
<b>PRC</b>	<b>Patients' Rights Committee</b>
<b>Prior</b>	Authorization to provide services that must be obtained from CMHS

<b>Authorization</b>	or any other source of payment before services can be delivered to clients.
<b>PSH</b>	<b>Patton State Hospital</b>
<b>PSH</b>	<b>Permanent Supportive Housing</b>
<b>PSRO</b>	<b>Professional Standards Review Organization</b>
<b>PSS</b>	<b>Peer Support Specialist</b>
<b>PST</b>	<b>Planned Scheduled Treatment</b>
<b>PSW</b>	<b>Psychiatric Social Worker</b>
<b>PSY.D</b>	<b>Doctor of Psychology</b>
<b>PT</b>	<b>Psychiatric Technician or Physical Therapist</b>
<b>QA</b>	<b>Quality Assurance</b>
<b>QI</b>	<b>Quality Improvement</b> An organizational philosophy that seeks to meet client needs and expectations with the minimum of effort or rework or waste, by using a structured process that selectively identifies and improves all aspects of care and service on an ongoing basis.
<b>RCF</b>	<b>Residential Care Facility</b>
<b>Realignment</b>	The Realignment legislation of 1991 (AB 1491 and AB 1288, the Bronzan-McCorquodale Act) shifted responsibility from the state to counties for health, mental health, and various social service programs, accompanied by a source of revenue to pay for the funding changes. The new revenues allocated to counties to fund these programs were ½ cent of the sales tax and increases in the Vehicle License Fee. These realignment measures provided a source of funding that was expected to grow seven to eight percent per year. Realignment provides the opportunity for increased county flexibility, discretion, and effectiveness. The state's new role under realignment is one of oversight, technical assistance, and assessment.
<b>Recovery Model</b>	The Recovery Model focuses on personal recovery and the individual's holistic well-being, including mental health, substance use, and social integration. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), recovery

involves a process of change where individuals improve their health and wellness, live self-directed lives, and work toward their full potential. This model typically requires structured programs and treatment plans to support recovery from addiction before securing permanent housing. The Recovery Model places a strong emphasis on personal growth, self-determination, and individual choice, encouraging active participation in one's healing journey.

**Rehabilitation Option**

When approved by HCFA and the State Department of Health Services, the Rehabilitation Option will change the SD/MC program as follows:

1. Outpatient services can be provided out of the clinic;
2. Funding will be available for rehabilitative services as well as for treatment services; and
3. Services may be under the direction of a "licensed practitioner of the healing arts" rather than only under the direction of a physician.

It is expected that this will allow reimbursement for more of the services provided, and provide more revenue to CMHS.

**RIF**

**Reduction in Force**

Reduction in the number of staff positions in any organization due to funding cuts. Individuals who lose jobs in a "RIF" situation usually are those who have the least job seniority, regardless of training or special skills.

**RFA**

**Request for Application**

**RFP**

**Request for Proposal**

An agency or foundation may issue an RFP when it wishes to establish a new program activity or service. The RFP describes the desired program and invites prospective providers to submit proposals describing their ability to implement the program.

**RN**

**Registered Nurse**

**SAM**

**State Administrative Manual**

**SAMHSA**

**Substance Abuse and Mental Health Services Administration Block Grant (Federal)**

Provides block grant funds to the State for specified mental health services. The State, in turn, gives these funds to the counties through an application process.

<b>SB</b>	<b>Senate Bill</b>
<b>SBHC</b>	<b>School Based Health Center</b> A school-based health center is a facility that delivers one or more of the following clinical service components on a school campus or in an easily accessible alternate location including a mobile health van stationed on or near a school campus. School-based health centers in California may provide one or more of the following clinical service areas: Medical services, Behavioral health services, and Oral health services
<b>SCO</b>	<b>State Controller's Office</b>
<b>SD</b>	<b>Short-Doyle Act</b> California law, which provides for local community-controlled mental health services. The Act provides state funding (90 percent State, 10 percent County) for such services and defines the categories of services to be delivered.
<b>SDOH</b>	<b>Social Determinants of Health</b> The circumstances, in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. In turn, a wider set of forces—economics, social policies, and politics shape these circumstances.
<b>SE</b>	<b>Supported Employment</b>
<b>SED</b>	<b>Seriously Emotionally Disturbed</b>
<b>SEP</b>	<b>Special Education Pupils</b>
<b>SFY</b>	<b>State Fiscal Year (July 1 through June 30)</b>
<b>SGF</b>	<b>State General Fund</b>
<b>SHAB</b>	<b>State Hospital Advisory Board</b>
<b>SHIA</b>	<b>Supportive Housing Initiative Act</b>
<b>Short-Doyle Funds</b>	State funds allocated to the counties for mental health services as provided for in the Short Doyle Act. Changed with Realignment legislation; now Bronzan-McCorquodale is the legislation that provides for mental health funding.
<b>SMC</b>	<b>Systems and Medicaid Committee</b>

<b>SMHS</b>	<b>Specialty Mental Health Services</b> The Department of Health Care Services (DHCS) administers California's Medicaid (Medi-Cal) program. The Medi-Cal Specialty Mental Health Services (SMHS) program operates under the authority of a Section 1915(b) waiver approved by the Centers for Medicare & Medicaid Services (CMS), alongside the State's other Medi-Cal delivery systems: Medi-Cal managed care, dental managed care, and the Drug Medi-Cal Organized Delivery System (DMC-ODS). DHCS received approval on December 29, 2021 from CMS for the CalAIM Section 1915(b) waiver, effective through December 31, 2026.
<b>SMI</b>	<b>Serious Mental Illness</b>
<b>SNF</b>	<b>Skilled Nursing Facility</b> (Pronounced “sniff”)
<b>SNF/STP</b>	<b>Skilled Nursing Facility/Special Treatment Program</b>
<b>SOC</b>	<b>Systems of Care</b>
<b>Socco</b>	<b>Society of Community Care Operators</b>
<b>SoCQIC</b>	<b>Southern California Quality Improvement Coordinators</b>
<b>SOGI</b>	<b>Sexual Orientation Gender Identity</b>
<b>SOPS</b>	<b>Structured Outpatient Services</b>
<b>SOTEP</b>	<b>Sex Offender Treatment and Evaluation Project</b>
<b>SPB</b>	<b>State Personnel Board</b>
<b>SPMP</b>	<b>Skilled Professional Medical Personnel</b>
<b>SSI/SSP</b>	<b>Supplemental Security Income/State Supplementary Program</b>
<b>SRC</b>	<b>State Rehabilitation Council</b>
<b>STP</b>	<b>Special Treatment Program</b> An STP is a supplement to the basic “L” facility program. It is extremely limited.
<b>SUD</b>	<b>Substance Use Disorder</b> The recurring use of a substance (legal or illegal) to the point that it interferes with the user's responsibilities and/or physical health

<b>Supportive Housing</b>	Supportive Housing combines affordable housing with individualized health, counseling, and employment services for persons with mental illness, chemical dependency, chronic health problems, or other challenges. Generally, it is transitional housing, but it can be permanent housing in cases such as a group home for persons with mental illness or developmental disabilities.
<b>SVP</b>	<b>Sexually Violent Predator</b>
<b>TA</b>	<b>Technical Assistance</b>
<b>TAY</b>	<b>Transitional Age Youth</b>
<b>TANF</b>	<b>Temporary Assistance to Need Families</b>
<b>TAR</b>	<b>Treatment Authorization Request</b>
<b>TBI</b>	<b>Traumatic Brain Injury</b>
<b>T-CON</b>	<b>Temporary Conservatorship</b>
<b>TIC</b>	<b>Trauma Informed Care</b> Trauma-informed care recognizes and responds to the signs, symptoms, and risks of trauma to better support the health needs of patients who have experienced Adverse Childhood Experiences (ACEs) and toxic stress.
<b>Title 9</b>	<b>Portion of California Code of Regulations pertaining to Community Mental Health Services</b>
<b>Transitional Housing</b>	Transitional housing programs provide people experiencing homelessness a place to stay combined with supportive services for up to 24 months. The most common form is apartments or shared living facilities for the formerly homeless or single female parents with children. When treatment and supervision is involved, a facility is usually called a halfway house or group home.
<b>UMDAP</b>	<b>Uniform Method of Determining Ability to Pay</b>
<b>Units of Service/Time</b>	Units of service are the means of measuring the volume of services provided, i.e., a 24-hour or day care DAY; an outpatient VISIT; a STAFF HOUR of outreach. Case management is measured by units of time. Each unit of time equals 15 minutes.
<b>UR</b>	<b>Utilization Review</b>

Review of services that are delivered to clients of health and mental health service providers. Such reviews are made by peer professionals to determine that quality of care is maintained and that treatment is necessary.

<b>VLF</b>	<b>Vehicle License Fees</b>
<b>VR</b>	<b>Related to Vocational-Rehabilitation Issues</b>
<b>VPP</b>	<b>Vacaville Psychiatric Program</b>
<b>WET</b>	<b>Workforce Education and Training</b>
<b>WEC</b>	<b>Workforce and Employment Committee</b>
<b>WIC</b>	<b>Welfare and Institutions Code (also W&amp;I Code)</b>
<b>988</b>	<b>988 Suicide and Crisis Lifeline</b>