

Glossary

A

Accommodations and modifications. Changes made in a regular education program to help a youth make educational progress. Certain criteria must be met to be eligible for these changes (see 504 Plan).

Acute. Symptoms that are both temporary and severe.

Adolescent. A person who is in transition between childhood and adulthood. The World Health Organization defines adolescence as the years between age 10 and 19.

Advocacy organization/advocacy group. An organization that is dedicated to helping people navigate systems to get what they need. The group may also work to influence other people and systems to change laws and procedures.

Affected child. A child who shows symptoms of a behavioral health or other disorder.

Agenda. A document that lists the main points to be covered in an IEP meeting.

Alternative medicine/complementary and alternative medicine/CAM. Alternative medicine includes medical products and practices that are not part of “standard care.” Standard care practices are based on the results of scientific research and are widely used by doctors and nurses. Examples of alternative practices include homeopathy (herbal medicine), traditional medicine, chiropractic, and acupuncture. “Complementary medicine” or “complementary and alternative medicine” (CAM) usually means alternatives are being used together with standard treatment. A common example would be using massage or meditation with standard medical treatment. (As such alternatives are used more widely, they may become part of standard care.)

Annual (IEP) goal. An educational goal that the school system expects the youth to reach by the end of the school year, as part of his or her Individualized Education Program (IEP).

Annual IEP review. A meeting to review a child’s or youth’s IEP and make any necessary changes in goals, services, or placement in the next school year.

Annual or lifetime maximum benefit. The maximum amount a patient will be required to pay per year for certain types of treatment under the terms of your health insurance plan.

Annual out-of-pocket maximum. The maximum amount a patient will be required to pay for certain types of treatment under the terms of your health insurance plan.

Appeal. A formal request for a decision to be changed by a higher authority.

Areas of need. Broad categories in which a youth needs to improve in order to make progress in school, as determined by the IEP team and included in the IEP document.

Assessment. The evaluation of a person’s medical, behavioral, or education condition in order to determine what services the person needs.

Assessment team. A team of school staff or consultants assigned by the school to evaluate a youth. For behavioral health issues, the team usually includes a psychologist and may include specialists in certain disorders.

At-risk. In possible danger, especially for developing a problem.

Attention Deficit Hyperactivity Disorder (ADHD)/Attention Deficit Disorder (ADD). A chronic (long-lasting or happening again and again) condition that makes it difficult for a person to organize, stay focused, make realistic plans, or think before acting. People with ADHD may show more symptoms related to moving around or not being able to sit still easily (hyperactivity) than people with ADD.

Authorize, authorization, pre-authorization, prior authorization. Approval given by the insurance company for a treatment that is shown to be medically necessary and covered by the person’s health care benefits.

Authorized representative. Someone who is legally assigned to speak, act, or receive information on behalf of another person.

B

Behavior. A person’s actions, speech, or manner of expressing themselves.

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Behavioral health (also called mental health). A person's mental well-being, which includes thoughts, feelings, emotions, and behavior.

Behavioral health organization (BHO). An insurance company that manages benefit plans for mental (behavioral) health or substance (drug and alcohol) abuse treatment.

Behavioral health specialist. A trained and licensed/certified provider who can assess, evaluate, and treat persons with behavioral health issues.

Benefits (also called coverage). The contract between an insurance company and the insured person, promising to pay for certain treatments under certain conditions.

Black-box warning. A Food and Drug Administration (FDA) warning that alerts doctors to a possibly serious side effect or complication that might be caused by giving a medication under certain conditions.

C

Cap. The limit on the amount of money that a health insurance policy/plan will pay for certain services.

Care manager. A type of case manager for a health insurance plan whose job it is to help people find options for getting treatment approved or to solve unusual problems with the benefits plan.

Case manager. A staff member in a medical, behavioral health, education, or insurance setting whose job is to set up services, coordinate services, and/or help solve problems for a client.

Certified. Eligible (allowed) to receive special education services. A youth has to be certified under one of the IDEA 2004 law's 13 disability categories in order to receive special education services.

Chronic. A condition or situation, which is long-lasting or occurs again and again.

Claim (insurance). A request to get a certain service or treatment paid by the insurance company.

Clinical assessment report (also called clinical evaluation report). The written report that follows a clinical assessment/evaluation. This report may include the reason for a person's

evaluation, summary of the person's health history, test results and explanations, and recommendations for treatment.

Clinical diagnosis. A health provider's description of a problem; made after an evaluation (sometimes called an assessment) is performed.

Clinician (also called clinical provider). A provider (usually a clinical psychologist or licensed clinical social worker) who evaluates a client; may also provide therapy.

Communities. Groups of people that gather together for a specific purpose. Examples include a college neighborhood, online support groups, political groups, religious groups, etc.

Community Mental Health Agency (CMHA). A large mental health center that has a contract to provide services to people who are enrolled in public health insurance plans; sometimes called a Community Mental Health Organization (CMHO) or a Community Mental Health Center (CMHC).

Community resources. Agencies, organizations, and programs that provide services for people with different types of needs.

Comorbid diagnosis. An additional or "secondary" diagnosis, when a person shows symptoms for more than one disorder.

Companioning. A term that describes how a family member or friend can provide support by listening, watching, and making suggestions as a young adult begins to navigate systems

Complaint. A written statement that describes a problem a person is having with a provider or service. The complaint should include names, dates, times, and other factual information related to the issue.

Comprehensive assessment. See "School evaluation."

Comprehensive psychiatric treatment. Mental/behavioral health treatment in a campus-like setting for those who require it on a long-term basis.

Confidential. Information about a patient that a health provider cannot tell police, employers, or others not involved in the person's treatment, except under certain conditions (for example, if a crime may be or has been committed).

Consent. Legal permission a person gives to others to take an action or release personal information.

Continuum of care. The care options available for behavioral health patients, ranging from a short office visit to inpatient hospital treatment.

Co-payment or co-pay. An amount you must pay when you visit a healthcare provider. Varies according to health plan.

Coverage (also called benefits). The contract between an insurance company and the insured person, promising to pay for certain treatments under certain conditions.

Crisis intervention. Psychiatric assistance during a period of extreme distress.

Criteria (one criterion, many criteria). Standards that must be met to qualify to receive certain services.

Cumulative Record (CR). A youth's permanent school record.

Customer services (or member services) representative. An insurance company employee who answers routine questions or solves problems by phone.

D

Day treatment program. This intensive treatment program provides psychiatric treatment with special education for school age youth, and may provide treatment with other programming for young adults.

Deductible. The amount of money a person must pay out-of-pocket before the person's insurance plan will begin to pay for certain types of services.

Denied. Not approved for paid coverage of services under a particular health plan.

Development. The process of growth or advancement (for example, from one stage of life to another).

Diagnosis. The broad term health providers use to describe a problem. A behavioral health diagnosis is reached after an evaluation, which may include conversations with you and others, as well as tests, examinations, and/or laboratory studies.

Diagnostic and Statistical Manual of Mental Disorders (DSM).

A publication of the American Psychiatric Association that lists and describes behavioral health disorders. Healthcare providers use the DSM categories to diagnose illnesses.

Disability, disabling condition, or 13 disability categories.

A condition that interferes with a youth's ability to learn or function at the same level as others of the same age.

Disorders. Conditions in which physical changes, thoughts, feelings, or behaviors cause problems with activities and daily living.

Drug interactions. Possible problems that may occur when one drug is used at the same time as another drug.

Drug screening examination. A medical test (usually by blood, urine, or hair sample) that tests for illegal substances within the body.

Due process rights. Procedures that must be followed to appeal a decision made by an organization, such as a school system or a mental health center.

Durable power of attorney. A legal process for assigning a trusted family member or friend to make decisions for a person if he or she becomes physically or mentally unable to do so. For example, this trusted friend or relative might pay bills or make medical decisions for you in the event of a serious accident.

E

Early and Periodic Screening, Diagnosis, and Treatment program (EPSDT). A public health insurance program aimed at finding, diagnosing, and treating problems in children and youth.

Electronic medical records. Medical records that are stored and filed in a computer system.

Eligible. Qualified to receive treatment or services, because certain conditions have been met. For example, you can be eligible for a program because of your age, disability, or income level.

Eligibility meeting. A meeting to determine whether a youth is eligible to receive special education services. This meeting always includes the parent of a youth under 18, if he or she is willing and able to be involved.

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Eligibility report. A report that determines whether or not a youth is qualified to receive special education services because a regular education program cannot meet educational needs.

Emerging adulthood (also called transition to adulthood). The period between age 14 to 26 (up to age 30 according to some opinions), in which a person is in the process of becoming an adult.

Enrollment period. The amount of time some insurance programs allow for choosing (enrolling in) a plan or provider network.

Evaluate/evaluation. The process of examining a person's condition or behavior to find out more about the problem. An evaluation can include conversations with you and others, a physical examination, other tests, and laboratory studies.

Evidence. A set of facts that can be observed and measured.

Exclusions. Types of treatment that an insurance plan will not pay for under certain conditions.

Expected progress. How much educational or developmental progress the state expects a youth of a certain age to make under typical circumstances.

Extended School Year program (ESY). An IEP developed for the summer months to help a youth keep up with the progress he or she has made during the school year.

F

Facilitator. A person who runs or directs a meeting.

Free Application for Federal Student Aid (FAFSA). A form that can be prepared annually by current and prospective college students (undergraduate and graduate) in the United States to determine their eligibility for student financial aid.

Family advocacy organization. An organization that provides information, training, or support to families and works to influence the public, legislators, or government agencies. (See also Advocacy Organizations/Advocacy Groups).

Family Education Rights and Privacy Act (FERPA). A federal law regulating how a youth's school records can be used.

Family medicine practitioner. Sometimes known as a primary care provider, family doctor, family practice doctor, or primary care practitioner; a provider who sees patients for general healthcare needs.

Federally Qualified Healthcare Center. A local healthcare center that can assess and treat patients.

Field care managers. Special case managers employed by a Managed Care Organization or Behavioral Health Organization that is based in the local community.

Financial Power of Attorney. A legal process in which a trusted family member or friend makes financial decisions or pays bills if a person becomes physically or mentally unable to do so. A financial power of attorney document is one form of Durable Power of Attorney (See also Medical/Health Care Power of Attorney).

504 Plan. An educational plan that lists accommodations and modifications that will help a student who meets certain criteria make progress in a regular education program. Some youth with behavioral health disorders who do not qualify for special education services under the IDEA 2004 law can qualify for 504 Plan accommodations.

Flexible benefits. A commitment from the insurance company that money targeted to pay for one type of health plan benefit (for example, in-patient hospital treatment) can be used for another level of care (such as residential treatment).

Free Appropriate Public Education (FAPE). A youth's right, under the federal IDEA 2004 law, to an education "designed to meet his or her unique needs." Guarantees the right to special education services when the regular education program cannot meet the youth's needs because of a disability.

G

Gender non-conforming. A person whose behavior and appearance do not match society's expectations of someone of that gender.

Gender orientation. A person's internal sense of whether they are male or female, a combination of both, or neither.

Genetic predisposition. A tendency to develop an illness that is inherited through one or both biological parents. A predisposition means a person may possibly develop that illness, and so should be watched carefully for symptoms.

Genetic traits. Physical qualities, mental qualities, or conditions a person inherits from a biological (“blood”) relative.

Good-faith effort. A legal term that means the person or agency has shown a sincere effort to be fair, honest, and willing to solve problems.

Grievance. A formal, written complaint to a higher authority about a problem with a provider or service.

Guardian/guardianship (conservator/conservatorship). A state court proceeding in which a person is given the legal right to make decisions for someone else.

Guardian ad litem. A person, appointed by a court, who serves as an advocate for a child or youth, or a person with a disability, during a guardianship proceeding.

Guidelines (insurance). Rules set up to determine the conditions under which certain treatment services will be approved for payment by an insurance plan.

H

Health history or health history form. A form that contains basic information about a person’s medical history. This will usually include physical diseases, behavioral health issues, medications, allergies, immunizations, family health history, and developmental history.

Health insurance policy/plan. A contract to pay certain health care costs. The plan states what the company and the individual will pay (for example, premiums, caps, deductibles, co-pays, out-of-pocket maximums, etc.).

Health Insurance Portability and Accountability Act (HIPPA). Federal law requiring health care providers, under certain conditions, to get permission before releasing patient information.

I

IEP document. A legal agreement (Individualized Education Program), signed by the school system representative, parent(s) or guardians, and youth (if he or she is over 16) that describes goals, services, and placement to be provided for a youth with a disability.

Impact on educational performance. See “educational impact.”

Individualized Education Program (IEP). A program of educational services for a student with a disability. In the school system, this term is often used to refer to 1) a meeting to certify a youth for special education services; 2) the education plan written at this meeting; and 3) the legal document that describes the program.

Individualized Family Service Plan. A plan developed by a social agency to provide services to a youth or family.

Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004). A federal law that guarantees the right to educational services for students with disabilities aged three through 21 (or through the end of the school year in which an eligible student turns 22).

In-network providers. A member of a group of health care providers who can provide treatment to a patient under the terms of a health insurance plan.

Inpatient psychiatric unit. A special unit in a hospital where patients with severe behavioral health problems stay 24 hours per day while receiving treatment.

Insurance policy/plan. See “Health insurance policy/plan.”

Intake interview. The first appointment with a new health provider or social agency. At an intake interview, the client or patient gives information and discusses symptoms or concerns.

Integrated care. A treatment approach in which providers work together to give the best care for a patient.

K

Key words. Important words used by systems and organizations to exchange important information and decide whether someone is eligible to get services.

L

Legal templates. Free or low-cost legal documents that have fillable blanks for people to use. Can usually be found online or by asking a provider.

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Lesbian, Gay, Bisexual, Queer/Questioning, Intersex, and 2-Spirited (LGBTQI2-S). Sexual identifications for people who do not identify as heterosexual.

Licensed medical practitioner. A provider who is licensed/certified by the state to practice medicine. Examples: Doctor and nurse practitioner.

Local Education Agency (LEA) representative. The school official at an IEP meeting who has the power to make the final agreement between a youth, the parent or guardian of a youth, and the school system about the youth's educational program.

M

Managed Care Organization (MCO). An insurance company that the state pays to run a public medical health insurance plan.

Massive Multimedia Online Role-Playing Games (MMORPGs). Online role-playing gaming platforms where an unlimited number of people play simultaneously, controlling fictional characters interacting in a fictional world.

Medical and behavioral assessments. The process by which health care providers evaluate a patient's physical and mental health.

Medical (health care) Power of Attorney (POA). A legal document in which a person gives a family member or trusted friend the right to make health care decisions if the person becomes physical or mentally unable to do so. The form is one of two documents that make up a Durable Power of Attorney (See also Financial Power of Attorney).

Medically necessary. Treatments necessary to manage or cure a patient's symptoms.

Medical specialist. A provider who is trained and licensed/certified to treat a patient's medical conditions.

Member's handbook. A handbook that sums up the benefits that an insurance plan provides. It also lists contact information, such as providers' phone numbers and information portals. Also available on the company's website, in most cases.

Mental health (also called behavioral health). A person's mental well-being, which includes thoughts, feelings, emotions, and behavior.

Mental Health/Substance Abuse (MHSA) telephone number. A phone number (listed in the health insurance member's handbook and on the health insurance ID card) that a person must call to get help with questions or problems relating to behavioral health and substance abuse insurance benefits.

Mental incapacity. The inability of a person to care for his or her own safety and property because they are mentally unable to make or carry out the necessary decisions.

Mobile crisis. A mental health service, usually available through hospitals and community mental health centers, that comes to a person's location to provide an immediate emergency mental health evaluation.

Mobility supports. Ways to help people with their physical movements. Examples: wheelchairs, walkers, crutches, canes, etc.

Mood disorders. Disorders that affect a person's ability to regulate emotions. Examples: Depression, Bipolar disorder.

N

Natural supports. An informal personal support network consisting of friends, family, neighbors, or others in the community who provide help without being part of a paid service.

Navigating systems. The process of finding the right services in agencies and organizations that serve youth and young adults to meet concerns.

Number codes. A combination of numbers used by medical and insurance systems to represent patient diagnoses and services provided.

Nurse Practitioner (NP). A registered nurse (RN) who has done further advanced training in patient care. An NP can provide many of the same services as a doctor, including ordering tests and prescribing medicine. An NP with special training in psychiatric disorders may be called a Licensed Psychiatric Nurse Practitioner (LPN).

O

Objectives (also known as data points). In an IEP, specific steps that describe what a youth must learn or accomplish in order to master a stated goal.

Obligate. If the school system representative signs an agreement with a youth, the school is legally required to do what the agreement says the school will do for that youth.

Off-label. A drug prescribed for a condition or a type of patient it was not originally intended to treat. This means that the United States Food and Drug Administration (FDA) has not yet approved a drug for a certain use in a certain patient group. The doctor may prescribe it anyway, based on his or her own experience and the experience of other doctors and researchers.

Out-of-network provider. A provider who is not on the list of a certain insurance company's contracted providers.

Out-of-pocket. Costs for services that are not covered by a health insurance policy/plan and that the patient is responsible for paying.

Over-the-counter medicines. A medication that can be sold without a prescription from a medical practitioner.

P

Parent advocate. A parent who is involved, aware, and active in the management of his or her youth's care and who speaks up for the youth's best interests.

Patient portal. An electronic system used by healthcare providers to maintain records and exchange information with patients and caregivers.

Pediatric. Medical field for treating children. Children who see a pediatrician (pediatric doctor) usually switch to another provider at age 18.

Physical examination records. The documents in which a person's overall physical health care is described. This record is created after a physical examination.

Physical or "physical examination." A medical examination of a person's overall physical (body) health.

Premium. The amount a person pays to belong to a health insurance policy/plan. In some plans, this fee is subsidized (paid for, or partly paid for, by a government agency).

Prescription drug assistance programs. Programs to help buy medications for people with low income.

Present level of performance. A portion of the IEP document that describes a youth's current ability to function and make educational progress in school.

Primary care provider. Sometimes known as a family doctor, family practice doctor, or primary care practitioner; a provider who sees patients for general health care needs. A pediatrician or family physician may serve as a child's or youth's primary care provider.

Primary disorder. When a person meets the criteria for two different disorders, one disorder will be called the primary (or main) disorder.

Prior authorization. See "authorization."

Private pay insurance plan. A health insurance plan that the patient pays for himself or he gets through an employer. Young adults can also be part of their parents' insurance plan(s) until age 26.

Procedures. Ways of doing things in a certain situation or circumstance.

Provider. An individual or organization that provides medical, behavioral health, insurance, or social agency services.

Psychiatric crisis. A situation in which a person has a sudden, severe change in behavior that creates a serious risk of harm to that person or someone else.

Psychiatric medications. Drugs prescribed by a doctor or nurse practitioner (NP) that treat behavioral health problems.

Psychiatrist. A medical doctor (MD) who has done several years of extra training in diseases and disorders of the mind. A psychiatrist can prescribe medications.

Psychotherapy. A form of counseling that is commonly known as "talk therapy," but may include other kinds of one-on-one or group treatment.

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R

Referral. A primary care provider's order that will allow a patient to see a specialist under the terms of a health insurance plan.

Regular education program. A typical educational program designed for youth of a particular age group.

Reimbursement. A repayment of money to the patient for money he or she has already spent on services.

Relationships. Interactions with people in systems and in the community who can help solve problems and get needed services. (For example, building relationships with case managers, doctors, therapists, and community members who help in navigating systems).

Release form (also called "Permission to release information"). A form that gives permission for a health, education, insurance, or social services provider to share information with another provider or organization.

Residential treatment center. A facility where a patient receives behavioral health or substance abuse treatment 24 hours per day.

Respite services. Temporary care for a person with an illness, so regular caregivers, such as parents or other family members, can take breaks.

Response to Intervention (RTI). Evidence of methods a school has tried in order to deal with a youth's problem in the regular classroom.

Right to privacy. A patient's right, under certain conditions, to keep personal information private and not share with others.

Role-Playing Games (RPGs). A type of video game where the gamer controls a fictional character who interacts with other characters in an imaginary world.

Roles. The different jobs people and providers perform in certain situations. For example, it is a patient's role to describe symptoms they are experiencing, whereas it is the doctor's role to diagnose the condition.

Rule-out. A condition that would disqualify a youth from being certified as having a disability under IDEA 2004. For example, if

the main reason for a youth's lack of progress is poor attendance at school, a behavioral health issue alone would not be enough to qualify that youth to receive special educational services.

S

Scams. Illegal attempts to trick others into giving money, usually done by telephone or online.

School evaluation (also called a "comprehensive assessment"). An evaluation performed by the school system; this evaluation examines many areas of a youth's behavior, abilities, and school performance.

Secondary disorder (also called a comorbid diagnosis). A term used in medical and behavioral health systems to mean a person meets the criteria for more than one disorder.

Service coordinator. If a youth is eligible for services because of a medical, behavioral, or developmental problem, a person called a service coordinator may be assigned to help the family create a plan for getting treatment and other services.

Sexual dysfunction. Difficulty or inability to perform or enjoy sexual activities that are typical for a person.

Sexuality. A person's sexual feelings or preferences.

Sliding scale. A system in which people are charged fees according to what they can afford to pay.

Special education. Services and methods used to educate students with disabilities who qualify under the federal IDEA 2004 law.

Specialized crisis services. A unit of trained staff that comes to a youth's location to assess his or her need for emergency care.

Standardized assessment tools. Tests commonly used to evaluate behavioral health or educational problems. Some typical standard assessment tools include cognitive and adaptive tests, psychological evaluations, developmental evaluations, and educational evaluations.

State child protection agency. A government agency responsible for evaluating and protecting the physical, emotional, and mental well-being of children and youth.

Subsidized. Paid for by an organization or government agency.

Supplemental Security Income (SSI). A monthly government payment available to (a) low-income families with children under age 18 who have disabilities and (b) low-income adults with disabilities.

Symptoms. Signs of disease that may include physical changes, thoughts, feelings, and behaviors.

Systems. Organizations and agencies that provide treatment or services (for example, mental health systems).

System of care. An agreement between different agencies in a community to collaborate (cooperate) in providing different types of services to a certain population. Some communities have “systems of care” that provide a range of services and supports for youth with mental health problems. These services and supports might include therapy, help with housing and food issues, peer support, and connections to education or training programs.

System representative. See “LEA representative.”

T

Telemedicine. Medical or behavioral health assistance provided through the Internet or videoconferencing software.

Therapeutic dose. The amount of a medication that is effective to treat the patient’s symptoms.

Therapist. A person licensed by the state to give treatment for physical health, behavioral health, and/or developmental disorders.

Timeline. The time frame in which a person or organization must respond to an action taken by another person or organization. (For example, if a person files a complaint, the agency involved must respond within a certain number of days. This period is called the timeline.)

Titrate or Titration. The process of increasing a person’s medication dosage from a small amount of a drug to a larger dose over a period of days or weeks.

Transition. A term used in education law to mean a period of years between the late teens and early twenties, when a young person’s task is to gain the skills needed for independent living.

Transition plan. A set of goals for a student’s transition after completing high school. By law, the transition plan must be included in the student’s Individualized Education Program (IEP) beginning at age 16.

Transition to adulthood (also called emerging adulthood). The period between age 14 to 26 (up to age 30 in the opinion of some), in which a person is in the process of becoming an adult.

Transportation supports. Help with getting to places for education, work, and community life. Transportation supports might include a disability discount for bus transportation, a special education bus, or a program that reimburses (pays back) for a transportation expense.

Trauma. A serious, negative event in a person’s life that can affect behavior, emotions, and physical health. Examples: sexual abuse, family violence, death of a close relative, or involvement in a natural disaster.

Treatment plan. A medical plan that lists treatment steps, which can help a youth or young adult reach goals created with help from providers and parents or guardians.

U

Unstable housing. A place for a youth to live or stay now, but the youth may have to leave soon (due to safety concerns, can’t pay rent, etc.).

Utilization review, utilization reviewer. The process by which insurance companies decide whether certain health services are covered by a person’s health insurance plan. The company employs the reviewers, who are often nurses or social workers.

V

Vocational rehabilitation. A state government agency that helps people with disabilities find jobs and gain skills to succeed in the workforce.