

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
2 Spirit	80.600	A modern umbrella term used by some indigenous North Americans to describe or label gender-variant individuals in their communities.
Accepted Records	80.206 & 80.206.1	Adjudicated claims cleared and approved for payment.
Access	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An individual's right to inspect and obtain a copy of PHI about the individual, for as long as the PHI is maintained.
Access Code	80.002	Numbered code to open doors that have keypad locks.
Accessibility	80.217	The timeliness in which consumers can obtain available services.
Accounting of Disclosures	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Information that describes disclosures of PHI made by a covered entity. An individual has the right to request an accounting of disclosures that occurred during the 6 years prior to the date of the request. P02.04 Accounting of Disclosures
Action (Services)	80.604	(1) The denial or limited authorization of a requested service, including the type or level of service; (2) The reduction, suspension, or termination of a previously authorized services; (3) The denial, in whole or in part, of payment for a service.
Actions (Committees)	80.505, 80.508, 80.509, 80.510, 80.512, 80.513, 80.514, & 80.515	Tasks deemed necessary to convert committee issues into recommendations and/or decisions.
Ad Hoc Membership	80.505	Ad hoc members who have standing appointments with the committee as consultants when the subject matter of the policy calls for their review. Ad hoc members are non-voting members of the P&P Committee. These include representatives of contracted provider agencies and a family resource agency.
Adjudicated Encounter Data	80.211 & 80.212	Encounter data that has been fully verified by CAMHD Management Information System (MIS) Section to be complete and accurate.
Administrative Exception Review	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A methodical review by the CAMHD Medical Director of all acute psychiatric services provided under exceptional circumstances to determine medical necessity for the purposes of possible payment for those services. Administrative exceptions are also reviews of services delivered to BHP members that were believed medically necessary but do not fall within the usual and customary scope of the plan.
Administrative Review	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A methodical review to determine the medical necessity and appropriateness of the admission for inpatient stays of one (1) day or a fraction of a day and to determine the appropriateness of the discharge.

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<i>Administrative Safeguards</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Are administrative actions, and policies and procedures, to manage the selection, development, implementation, and maintenance of security measures to protect electronic PHI and to manage the conduct of the covered entity's or business associate's workforce in relation to the protection of that information. 45 CFR 164.304
<i>Administrative Tribunal</i>	80.404, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	a board, commission, or tribunal (other than a court) having authority under Hawaii state law or federal law to compel the production of PHI. P03.06 Judicial, Administrative Proceedings
<i>Admitted</i>	80.804	Refers to the agreement between client and CAMHD staff to receive/render continuous mental health services as signified by electronic data entry.
<i>Adult abuse or neglect statutory definitions</i>	80.823.1	https://www.capitol.hawaii.gov/hrscurrent/Vol07_Ch0346-0398/HRS0346/HRS_0346-0222.htm
<i>Aggrieved Party</i>	80.603	The person who is filing a grievance or on whose behalf the grievance or grievance appeal is being filed.
<i>Alias</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	An assumed or additional name.
<i>Allocable Cost</i>	80.218	A cost is allocable to a particular cost objective, such as a grant, contract, project, service, or other activity, in accordance with the relative benefits received. A cost is allocable if it is treated consistently with other costs incurred for the same purpose in like circumstances.
<i>Allowable Cost</i>	80.218	Cost is allowable when it is reasonable, allocable, and lawful and for cost invoiced for reimbursement, actually incurred or accrued and accounted for in accordance with generally accepted accounting principles, for contract- related expenditures.
<i>Ally</i>	80.600	A heterosexual and/or cisgender person who supports equal civil rights, gender equality, LGBT social movements, and challenges homophobia, biphobia and transphobia.

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Amendment	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A formal alteration of legal documentation by modification or addition. Individuals have the right to request to amend PHI in their health records. P02.08 Amendments
Ancillary Funding	80.610	A clearly defined sum of money allocated for ancillary services that are not available through existing contracted mental health services to consumers. These funds are limited and closely monitored to assure that disbursement is completed in the most clinically appropriate and fiscally responsible manner.
Ancillary Services	80.610	Supportive services that support mental health treatment delivery as outlined in the individualized plan, and/or time-limited interventions that are not available through existing contracted services. Examples include: transportation services, interpretive services, specific clinical services that are not available through contracted providers, special community programs or classes, and urine drug screens.
Annual Performance Appraisal	80.306	Culmination of continuous evaluation of an employee’s work performance during a twelve-month period.
Appeal	80.511 & 80.604	A request for review of an action, as “action” is defined in this section.
Appeal/Grievance Appeal	80.509	A written request made by, or on behalf of a non-Med-QUEST consumer or provider for review by the GAC of an adverse grievance decision or an adverse fiscal billing determination; or for review by the Appeals Board of an adverse GAC decision. Appeals from grievances filed on behalf of a Med-Quest youth do not come before the GAC. Such grievances are appealed directly to the Med-Quest Division through their Grievance Review process.
Appeals Board	80.511	Committee consisting of the Deputy Director for Behavioral Health, the CAMHD Chief and the Medical Director that hears appeals to decisions rendered by the CAMHD Executive Management Team (EMT).
Appearance of Conflict of Interest	80.301	An appearance of conflict exists when a reasonable person will conclude from the circumstances that the employee’s ability to protect the public interest, or perform public duties, are compromised by personal interest.
Appellant	80.604	An individual who files an appeal. This can be the parent/legal guardian, provider, or an individual or personal care physician who has been designated to act on behalf of the youth, parent, or legal guardian.
Applicant	80.308, 80.308.1, 80.308.2, & 80.308.3	Any practitioner applying for credential approval with CAMHD.
Application	80.628	A Family Application Form and all required information necessary to make an eligibility determination.
Application(s)	80.108.1 & 80.108.3	Database or information system that houses or tracks information.
Appointment	80.638	The mutual advance scheduling of time between a client, family member, and FGC or FCLB staff for the provision of CAMHD services. 1. The format for these appointments is inclusive of in-person, telephone, and telehealth. 2. The appointments include, but are not limited to, initial mental health evaluation, eligibility determination, welcome meeting, assessment, medication evaluation, medication management, individual and family therapy, treatment team meeting, coordinated service planning meeting, or case management meeting.

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<i>Appropriate Documentation</i>	80.206 & 80.206.1	The required, comprehensive and relevant documentation of the services rendered by providers as specified in CAMHD’s Interagency Performance Standards and Practice Guidelines.
<i>APRN</i>	80.636	(Advanced Practice Registered Nurse) Hawaii licensed registered nurse who has met the requirements of and received recognition as an advanced practice registered nurse from the Board of Nursing as a nurse practitioner, clinical nurse specialist, certified nurse midwife or nurse anesthetist.
<i>APRN RX</i>	80.636	(Advance Practice Registered Nurse Prescriptive Authority)-advanced practice registered nurse with authority granted to verbally, or in writing, direct, order, or designate the preparation of, use of, or manner of using, a drug within the recognized APRN's scope of practice in a collegial working relationship, as defined in Hawaii Administrative Rules, Title 16, Chapter 89C., with a physician and an exclusionary formulary.
<i>Asexual</i>	80.600	The lack of sexual attraction to anyone, or low or absent interest in sexual activity. It may be considered the lack of a sexual orientation, or one of the four variations thereof, alongside heterosexuality, homosexuality, and bisexuality.
<i>Assigned PHAO</i>	80.116	is either the Public Health Administrative Officer (PHAO) of a CAMHD Branch if the vehicle purchase is for the Branch; or the Division PHAO if the vehicle purchase is for CAMHD Central Administration.
<i>Attestation Letter</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	A letter from a representative of the Agency attesting that they have obtained primary source verification documents from the primary source and that originals of these documents are maintained in the Agency credential file.
<i>Authentication</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	the corroboration that a person is the one claimed.
<i>Authorization</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	a written document signed and dated by an individual that gives the covered entities permission to use or disclose specified PHI for purposes defined in the authorization. An authorization is valid if it contains the core elements required by HIPAA. P02.02 Authorizations
<i>Authorized Officer</i>	80.101	The CAMHD Administrator or designee who signs new and revised P&Ps.
<i>Availability</i>	80.217	The extent to which the Network's providers of the appropriate type and number are distributed geographically to meet the needs of consumers.

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<i>Availability</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	the property that data or information is accessible and useable upon demand by an authorized person.
<i>Backup</i>	80.117	The activity of copying files or databases so that they will be preserved in case of equipment failure or other catastrophe. Backup is usually a routine part of CAMHD’s operation. The backup data is stored in a secured facility off the CAMHD site or location.
<i>BBA</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	Balanced Budget Act, 42 CFR.
<i>Behavioral Health Criteria</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Criteria that establishes medical necessity and appropriateness of acute psychiatric hospitalizations by objectively determining the severity of illness (SI), intensity of service (IS), acuity factors of specific diagnoses and harmful behaviors in children and adolescents.
<i>Behavioral Health Plan Member</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Medicaid-eligible youth registered by CAMHD, who meets the criteria for CAMHD’s Support for Emotional and Behavioral Development (SEBD) program.
<i>Billing Outlier</i>	80.206.1	Clinician whose billing claim records, in terms of billable service hours and billable amount, were above the standard service range for that particular level of care.
<i>Biometric Identifier</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Identifying information based on a physical characteristic (a fingerprint). P04.11 De-identified information and Limited Data Sets.
<i>Bisexual</i>	80.600	A person who is emotionally, romantically, and sexually attracted to both males and females.
<i>Branch</i>	80.116, 80.202, 80.205, 80.310, 80.505, 80.603, 80.609, 80.610, 80.614, 80.624, 80.627, 80.706, & 80.836	A CAMHD Family Guidance Center or the Family Court Liaison Branch.

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Breach	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>The acquisition, access, use, or disclosure of PHI in a manner not permitted under the Privacy Rule of this part which compromises the security or privacy of the PHI.</p> <p>1. Breach excludes:</p> <p>Any unintentional acquisition, access, or use of PHI by a workforce member or person acting under the authority of a covered entity or a business associate, if such acquisition, access, or use was made in good faith and within the scope of authority and does not result in further use or disclosure in a manner not permitted under the Privacy Rule.</p> <p>Any inadvertent disclosure by a person who is authorized to access PHI at a covered entity or business associate to another person authorized to access PHI at the same covered entity or business associate, or organized health care arrangement in which the covered entity participates, and the information received as a result of such disclosure is not further used or disclosed in a manner not permitted under the Privacy Rule. A disclosure of PHI where a covered entity or business associate has a good faith belief that an unauthorized person to whom the disclosure was made, would not reasonably have been able to retain such information.</p> <p>2. Except as provided in paragraph (1) of this definition, an acquisition, access, use, or disclosure of PHI in a manner not permitted under Privacy Rule is presumed to be a breach unless the covered entity or business associate, as applicable, demonstrates that there is a low probability that the PHI has been compromised based on a risk assessment of at least the following factors:</p> <ul style="list-style-type: none"> i. The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification; ii. The unauthorized person who used the PHI or to whom the disclosure was made; iii. Whether the PHI was actually acquired or viewed; and iv. The extent to which the risk to the PHI has been mitigated.

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Business Associate	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	<p>1. Except as provided in paragraph (4) of this definition, business associate means, with respect to a covered entity, a person who:</p> <ul style="list-style-type: none"> a. On behalf of such covered entity or of an organized health care arrangement (as defined in this section) in which the covered entity participates, but other than in the capacity of a member of the workforce of such covered entity or arrangement, creates, receives, maintains, or transmits PHI for a function or activity regulated by this subchapter, including claims processing or administration, data analysis, processing or administration, utilization review, quality assurance, patient safety activities listed at 42 CFR 3.20, billing, benefit management, practice management, and repricing; or b. Provides, other than in the capacity of a member of the workforce of such covered entity, legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial services to or for such covered entity, or to or for an organized health care arrangement in which the covered entity participates, where the provision of the service involves the disclosure of PHI from such covered entity or arrangement, or from another business associate of such covered entity or arrangement, to the person. <p>2. A covered entity may be a business associate of another covered entity.</p> <p>3. Business associate includes:</p> <ul style="list-style-type: none"> a. A Health Information Organization, E-prescribing Gateway, or other person that provides data transmission services with respect to PHI to a covered entity and that requires access on a routine basis to such PHI. b. A person that offers a personal health record to one or more individuals on behalf of a covered entity. c. A subcontractor that creates, receives, maintains, or transmits PHI on behalf of the business associate. <p>4. Business associate does not include:</p> <ul style="list-style-type: none"> a. A health care provider, with respect to disclosures by a covered entity to the health care provider concerning the treatment of the individual. b. A plan sponsor, with respect to disclosures by a group health plan (or by a health insurance issuer or HMO with respect to a group health plan) to the plan sponsor, to the extent that the requirements of 45 CFR §164.504(f) apply and are met. c. A government agency, with respect to determining eligibility for, or enrollment in, a government health plan that provides public benefits and is administered by another government agency, or collecting PHI for such purposes, to the extent such activities are authorized by law. d. A covered entity participating in an organized health care arrangement that performs a function or activity as described by paragraph (1)(t) of this definition for or on behalf of such organized health care arrangement, or that provides a service as described in paragraph (1)(ii) of this definition to or for such organized health care arrangement by virtue of such activities or services. 45 CFR § 160.103, P04.10 Business Associates, P04.14 Notification of Breach-Unsecured Protected Health Information-DOH Business Associate (BA) of Covered Entities (CE)
Business-Related Calls	80.810	Calls necessary to conduct State business.
CAMHD	80.118, 80.119, 80.120, & 80.403	The Child and Adolescent Mental Health Division
CAMHD Behavioral Health Plan	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	The Child and Adolescent Mental Health Division as a health care organization providing Hawaii Medicaid-covered services on a risk basis to members in exchange for capitated payments.
CAMHD Business Offices	80.001	The main offices CAMHD and its Family Guidance Center.
CAMHD Data Center	80.117	Processing center for CAMHD claims and client information.

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CAMHD Executive Management Team (EMT)	80.309	Includes the Division Chief, Medical Director, Clinical Director, Performance Manager and an FGC Branch Chief.
CAMHD Staff	80.823	For purposes of this policy, the term “CAMHD staff” will refer to any individual employed by the CAMHD who is designated by his/her supervisor to perform duties/responsibilities specific to this policy.
CAMHD Waitlist	80.614	A list where youth are placed when the youth has been accepted for placement but CAMHD contracted bed is not available. This list is provided by the out-of- home Providers using a CAMHD form, “Waitlisted Youth Report” which is an attachment to the “Weekly Census Report on Client Status.”
CAMHMIS	80.706	Child and Adolescent Mental Health Management Information System.
Capitated Payment	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Payment the Department of Human Services makes to CAMHD on behalf of enrolled members for the provision of medical services under the Medicaid State Plan.
Case-Based Review	80.506	A review methodology that provides for an in-depth look into the status of youth served, and how well programs and local service systems are performing for them. Reviewers examine child status and program performance for a chosen sample of youth through interviews with multiple respondents and review of case records. Determinations with the support of a structured protocol are made regarding how well youth are doing along dimensions of child well-being, and how well basic program functions (e.g. understanding of the youth’s situation, treatment planning and implementation, producing effective results, etc.) are being carried out. Aggregate data is analyzed to glean patterns of performance across program functions, and to provide a context for the overall determination of performance for the agency.
Catchment Area	80.706	The geographical area assigned to a school district.
CD Burn	80.213	Transfer of data from a computer hard drive to an electronic compact disc for storage.
Center	80.622	CAMHD Family Guidance Centers and the Family Court Liaison Branch.
Central Office	80.001 & 80.101	CAMHD’s administrative office not including the Family Guidance Centers (FGC) and their satellite locations.
Certification	80.411	refers to the authorization granted by the department because of demonstrated compliance with the standards established by Child and Adolescent Mental Health Division (CAMHD), and as determined by the Hawaii Administrative Rules Title 11, Chapter 98, Special Treatment Facility.
Chairman	80.103	the person responsible for: a. conducting a meeting in the proper manner; b. approving for distribution to members the minutes of the meeting so conducted; and c. ensuring that the agreed follow-up action has been taken.
CHCC	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Covered Health Care Component.

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<i>Child Abuse</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The acts or omissions of any person or legal entity caring for a child that have resulted in harm or imminent or threatened harm to the child's physical or psychological health or welfare. HRS § 350-1, P03.08 Public Health Activities.
<i>Child Abuse or Neglect</i>	80.406	Means the acts or omissions of any person who, or legal entity which, is in any manner or degree related to the child, is residing with the child, or is otherwise responsible for the child's care, that have resulted in the physical or psychological health or welfare of the child, who is under the age of eighteen, to be harmed, or to be subject to any reasonably foreseeable, substantial risk of being harmed.
<i>Child Abuse or Neglect Statutory Definitions</i>	80.823.1	https://www.capitol.hawaii.gov/hrscurrent/Vol07_Ch0346-0398/HRS0350/HRS_0350-0001.htm
<i>Circuit</i>	80.706	Refers to Family Court circuits define by county. There are four (4) circuits: First Circuit, Honolulu; Second Circuit, Maui; Third Circuit, Hawai'i; and Fifth Circuit, Kaua'i.
<i>Cisgender</i>	80.600	A person whose gender identity corresponds with their sex assigned at birth; not transgender.
<i>Civil Monetary Penalty</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The amount determined under § 160.404.
<i>Claims Review</i>	80.206	The method by which provider billing claims are examined to ensure that services provided were in compliance with indicated standards.
<i>Client</i>	80.308, 80.308.1, 80.308.2, 80.308.3, 80.401, 80.609, 80.628, 80.628.1, & 80.706	Child or youth with emotional and/or behavioral health challenges eligible to receive intensive mental health services from CAMHD.
<i>Clinical Oversight</i>	80.641	Monitoring the clinical progress of youth in mental health treatment and the quality of contracted clinical programs. Oversight may include intervening with providers to recommend changes in the program or treatment approach when necessary to ensure youth are making reasonable progress and that care provided meets medical necessity criteria.
<i>Clinical Record</i>	80.804	The standard client chart that is maintained at the FGC or the Agency that contains entire records of all previous clinical documents filed by service episode in a prescribed format.
<i>Clinical Services Office (CSO)</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, 80.635, & 80.641	The section of CAMHD responsible for clinical oversight, service capacity, and program monitoring of CAMHD contracted providers.

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<i>Clinically Necessary Services</i>	80.622	Services determined to be necessary per a youth’s Individualized Education Program (IEP), Coordinated Service Plan (CSP), or by the CAMHD Medical Director for youth eligible the Support for Emotional and Behavioral Development (SEBD) program or mental health services only.
<i>Clinicians</i>	80.310	For purposes of this policy, clinicians include the qualified Hawaii-licensed CAMHD Medical Director, Clinical Directors and Clinical Psychologists.
<i>Closed</i>	80.804	The client no longer receives services and the client has been discharged or disenrolled as signified through electronic data entry.
<i>Code Sets</i>	80.108.1	A code set refers to any set of codes used to encode data elements, such as tables of terms, medical concepts, medical diagnostic codes, or medical procedure codes.
<i>Codes</i>	80.609.01	Unique Identifiers.
<i>Collegial</i>	80.636	Means the power or authority vested equally in each of the working parties.
<i>Co-Managing Care</i>	80.641	A collaborative partnership between CAMHD employees and contracted providers to ensure clinically appropriate, effective, and efficient treatment.
<i>Committee</i>	80.103	Standing and ad hoc committees empowered by the Executive Management Team (EMT) to conduct the work of the CAMHD.
<i>Compensatory Time Credit (CTC)</i>	80.304	Means the number of hours of credit that an employee earns for overtime work. The number of actual hours of overtime work shall be converted to compensatory time credits at the rate of one and one-half hours of compensatory time credit for each hour of overtime worked or fraction thereof computed to the nearest fifteen (15) minutes.
<i>Compensatory Time Off (CTO)</i>	80.304	Hours when an employee is scheduled to be absent from work as mutually agreed upon with their supervisor when such absence is credited as compensatory time—off and charged against the employee’s compensatory time credit.
<i>Complete Application</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	All blanks on the application form are filled in and necessary additional explanations provided; 2) All requested attachments and information have been submitted; 3) Verification of the information is complete and was done through primary sources when required; 4) All information necessary to properly evaluate the applicant’s qualifications has been received and is consistent with the information provided in the application.
<i>Compliance Officer</i>	80.502	CAMHD staff appointed by the Executive Management Team (EMT) to oversee and monitor the implementation of the CCP. This individual is the focal point for compliance activities and has full authority to act decisively regarding compliance issues.
<i>Compliance Program Plan</i>	80.502	Standards guiding CAMHD's compliance efforts to promote prevention, detection and resolution of instances of conduct that do not conform to Federal and State law and Federal health care program requirements as well as CAMHD's ethical and business policies. The CCP includes the following components: Standards and Procedures, Compliance Oversight, Compliance Education, Communication with Compliance Officer, Use of Audits and Thresholds, Disciplinary Mechanisms, and Detection, Prevention and Reporting.
<i>Computer Systems</i>	80.108.1	Groups of databases or information systems.
<i>Concurrent Review for Continued Stay</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A methodical review to determine the medical necessity and appropriateness of admission and subsequent inpatient stay, and to determine treatment options for an expedited safe discharge, prepare for case management, monitor quality of services, and ensure payment for medically necessary services.
<i>Confidence Level</i>	80.206	The confidence associated with the ability of the corresponding interval to contain the true proportion (or total number in the universe).

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Confidential Communication	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Covered entities must permit and accommodate reasonable requests for confidential communication of PHI. Example: a patient may request that confidential communications from DOH be sent to an alternative address, such as a work address or a PO Box. P02.06 Confidential Communications
Confidential Information	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Includes any of the following information, whether the information is in paper, verbal or electronic form: --Patient information (such as health, financial and demographic information); --DOH workforce members' information (such as salaries, employment records, disciplinary actions, etc.); --Official information (such as financial and statistical records, strategic plans, internal reports, memos, contracts, peer review information, proprietary computer programs, source code, proprietary technology, etc.); and --Third party information (such as computer programs, client and vendor proprietary information, source code, proprietary technology, etc.). P04.05 Confidentiality Agreement
Confidentiality	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The protection of individually identifiable health information (IIHI) as required by state and federal laws; the degree to which data about individuals and organizations must be protected. 45 CFR §164.304 -the property that data or information is not made available or disclosed to unauthorized persons or processes.
Confirmed	80.406	Means a report of child abuse or neglect that has been investigated by the Department of Human (DHS) where there has been a determination by the DHS that physical, sexual, or psychological harm, physical neglect, threatened harm occurred, and a perpetrator of the harm or threat has been identified.
Conflict of Interest	80.301	A conflict of interest is a situation in which a person or organization is involved in multiple interests, financial or otherwise, and serving one interest could involve working against another. For example, a conflict of interest could arise if a state employee uses their state position, authority, or resources for personal financial benefit.
Consumer	80.217, 80.301, 80.508, 80.511, 80.601, 80.604, 80.608, 80.610, 80.611, 80.621, 80.843, 80.409, & 80.835	Youth with emotional and/or behavioral challenges receiving intensive mental health services from the Child and Adolescent Mental Health Division (CAMHD). The definition of consumer includes the youth, parent(s), legal guardian or designated third-party representative registered with a CAMHD Family Guidance Center (FGC).

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Contracted Provider Agency	80.705, 80.308, 80.308.1, 80.308.2, & 80.308.3, & 80.804	Agency under contract with CAMHD to provide mental health services to CAMHD clients.
Contractor	80.600	Any person who is employed directly by an agency or organization that has a contract or Memorandum of Understanding with the CAMHD.
Contrary	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	When used to compare a provision of State law to a standard, requirement, or implementation specification adopted under this subchapter, means: 1. A covered entity or business associate would find it impossible to comply with both the State and federal requirements; or 2. The provision of State law stands as an obstacle to the accomplishment and execution of the full purposes and objectives of part C of title XI of the Act, section 264 of Pub. L. 104-191, or sections 13400-13424 of Pub. L. 111-5, as applicable. 45 CFR 160.202
Coordinated Service Plan (CSP)	80.614 & 80.621	A written design for service that describes the roles and responsibilities of multiple agencies or programs that provide therapeutic or supportive interventions or activities essential to the youth and family's treatment.
Correction	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A formal alteration to a record by modification, deletion, or addition. P02.08 Amendment
Correctional Institution	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Any penal or correctional facility, jail, reformatory, detention center, work farm, halfway house, or residential community program center operated by, or under contract to, the United States, a State, or territory, a political subdivision of a State or territory, or an Indian tribe, for the confinement or rehabilitation of persons charged with or convicted of a criminal offense or other persons held in lawful custody. Note: Other persons held in lawful custody includes juvenile offenders adjudicated delinquent, aliens detained awaiting deportation, persons committed to mental institutions through the criminal justice system, witnesses, or others awaiting charges or trial 45 CFR § 164.501, P03.09 Specialized Government Functions
Cost Effective	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A health intervention is "cost effective" if there is no other available intervention that offers a clinically appropriate benefit at a lower cost.
Cost Items	80.218	Refers to the items within the budget categories.
Cost Principles	80.218	Represent guidelines for determining which types of expenditures will be allowed for contracts executed under Chapter 103 F, Hawaii Revised Statutes, for the Purchases of Health and Human Services.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Cost Reimbursement Contract	80.218	Contract under which allowable and reasonable costs incurred by a contractor in the performance of a contract are reimbursed in accordance with the terms of the contract.
Covered Entity	80.110, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The term “covered entity” is defined at Sec. 160.103 as one of the following: (1) A health plan; (2) a health care clearinghouse; (3) a health care provider who transmit any health information in electronic form in connection with a transaction covered by part 162 of title 45 of the Code of Federal Regulations (CFR).
Covered Functions	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Those functions of a covered entity the performance of which makes the entity a health 1 plan, health care provider, or health care clearinghouse. 45 CFR § 164.103
Covered Health Care Component (CHCC)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A component or combination of components of a hybrid entity designated by the hybrid entity in accordance with the Privacy Rule. P01.00 Introduction
Credentialing	80.308, 80.308.1, 80.308.2, & 80.308.3, 80.310, & 80.508	The systematic process of assessing the qualifications of CAMHD and CAMHD agencies’ qualified Hawaii-licensed mental health professional (QMHP), direct care personnel and clinical supervisors. The credentialing process ensures that staff has the required primary source verified credentials, licenses, certificates, malpractice coverage and other pertinent background to provide services to the consumers of CAMHD.
Credentialing Committee	80.308, 80.308.1, 80.308.2, & 80.308.3	The Credentialing Committee is a standing Child and Adolescent Mental Health Division (CAMHD) committee is designated to provide oversight over CAMHD’s credentialing processes in accordance with the Credentialing Committee Policy and Procedures. Membership shall be representative of various disciplines from CAMHD’s various sections with preference given, but not limited to licensed professionals.
Critical Data	80.117	All mission critical systems, utility files, data or information necessary to enable continuity or resumption of CAMHD business processes in the event of a disaster.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Critical Sentinel Event</i>	80.805	An event resulting in death.
<i>Custodian</i>	80.202	Any person designated by the Division Chief to have control over and responsibility for a petty cash fund.
<i>Data</i>	80.110	Protected health information (PHI) or individually identifiable health information that is transmitted by electronic media; maintained in any electronic medium; or transmitted by electronic media; maintained in any electronic medium; or transmitted or maintained in any other form or medium. Protected health information excludes individually identifiable health information in: education records covered by the Family Education Right and Privacy Act (as amended, 20 USC 1232g) and records described at 20 USC 1232g(a)(4)(B)(iv).
<i>Data Aggregation</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Combining PHI created or received as a business associate of one entity with PHI received as a business associate of another entity, to permit data analyses relating to the healthcare operations of the respective entities. 45 CFR § 164.501, P04.11 Business Associates
<i>Data Use Agreement</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An agreement into which the covered entity enters with the intended recipient of a limited data set that establishes the ways in which the information in the limited data set may be used and how it will be protected.P04.11 De-identified Information and Limited Data Sets
<i>Decedent</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Deceased individual. P03.12 Deceased Individuals
<i>Default Determination</i>	80.603	An alternative determination made by the GO is cases where a party to a grievance fails to respond to an inquiry by the GO or fails to produce requested documents by the given response date, or within a reasonable time thereafter.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
De-Identified Data	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Health information that does not identify an individual or where identifiable information has been removed and where there is no reasonable basis to believe that the information could be used to identify an individual. 45 CFR § 164.S14, P04.11 De-identified Information and Limited Data Sets
Delegation	80.308, 80.308.1, 80.308.2, & 80.308.3, 80.313, & 80.313.1	Authority assigned by the CAMHD to another/other organization(s) to conduct functions and activities on CAMHD’s behalf as defined within a formal agreement. The organization is identified as a "delegate".
Deletion	80.108.3	Refers to the process of making a login no longer effectual, thereby canceling network, email and application access to CAMHMIS for staff who are no longer employed with CAMHD.
Department of Commerce and Consumer Affairs (DCCA)	80.308, 80.308.1, 80.308.2, & 80.308.3	Professional and vocational licensing division of the State of Hawaii
Department of Human Services Hearing	N/A	The term “hearing” means any formal proceeding for the determination of the legal rights of specific parties which is authorized by law or rules in a matter which is initiated by action taken, or to be taken, by CAMHD or which may be initiated by a petition or application for the granting of any right, privilege, authority or relief from or after administrative action.
Deployed Employee	80.641	An employee who does not fall under the FGC on the CAMHD organizational chart but is deployed or assigned for a specific purpose to an FGC location by their section and supervisor.
Designated Record Set	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	1. A group of records maintained by or for a covered entity that is: i. The medical records and billing records about individuals maintained by or for a covered health care provider; ii. The enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or iii. Used, in whole or in part, by or for the covered entity to make decisions about individuals. 2. For purposes of this definition, the term record means any item, collection, or grouping of information that includes PHI and is maintained, collected, used, or disseminated by or for a covered entity.
Desk Review	80.214	The reviewing off-site of financial documents such as grants performance reports, single audit reports, financial statements, etc., in lieu of an on-site visit.
Detention Home	80.609.01	A hardware and staff secure Home for Pre-Adjudicated Youth. The primary purpose of detention is to hold pre-adjudicated youth who are either a risk to themselves or to the public and who may be at risk of not showing up to their next court date. However, post adjudicated youth may be held there as well.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Discharge	80.609.01	The formal release of a youth from the State's jurisdiction. Discharge dates are determined by the court at the time of commitment. Youth may be discharged prior to their scheduled discharge date at the discretion of the Executive Director of the OYS, unless the court orders otherwise. Court approval for early discharge is required for approximately 60% of the youth committed. Factors considered in early discharge decisions include: the youth's risk to public safety, the youth's personal progress at the facility, and dynamics related to the youth's family, school and employment. A youth may still be on probation status and under the court's jurisdiction when discharged from the state's jurisdiction. For youth on Parole, the Executive Director of OYS remains the youth's legal guardian and the youth still falls under the state's jurisdiction.
Disclosure	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The release, transfer, provision of access to, or divulging in any other manner of information outside the entity holding the information. 45 CFR §160.103, P02.02 Authorizations
Discovery Sample	80.206	The fifty (50) records randomly selected using a random number generator or a statistically manual selection process.
Discrimination	80.600	Any act, policy, or practice that, regardless of intent, has the effect of subjecting any youth to differential treatment as a result of that youth's actual or perceived sexual orientation or gender identity.
Disposal	80.120, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The discarding or abandonment of records containing personal information or the sale, donation, discarding, or transfer of any medium, including computer equipment or computer media, containing records of personal information, or other non-paper media upon which records of personal information are stored, or other equipment for non-paper storage of information. P27.01 Destruction of Personal Records
DOH	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Hawaii State Department of Health
DOH Privacy Glossary	80.102, 80.802, & 80.813	See CAMHD P&P 80.819, DOH Privacy Policies Introduction and Privacy Glossary.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Drug (Chemical) Restraint</i>	80.602	Any drug that: 1. Is administered to manage a youth’s behavior in a way that reduces the safety risk to the youth or others; 2. Has the temporary effect of restricting the youth’s freedom of movement; and 3. Is not a standard treatment for the youth’s medical or psychiatric condition.
<i>Dual Relationship</i>	80.301	A dual relationship occurs when an employee or provider is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the employee or provider has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.
<i>Educationally Supported (ES)</i>	80.617	This is the term used to describe youth who are eligible for CAMHD due to their qualifying for IDEA and their being referred by their IEP team.
<i>Ejection</i>	80.614	Action taken by a Provider whereby a consumer is terminated from a placement in the Provider’s treatment program (excluding discharges relating to elopements that last longer than seven days) and the Branch does not agree with the discharge. This includes discharges when the Provider believes the treatment goals have been met but the Branch does not agree.
<i>Electronic Health Record</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff. P02.04 Accounting of Disclosures.
<i>Electronic Media</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	(1) Electronic storage material on which data is or may be recorded electronically, including, for example, devices in computers (hard drives) and any removable/transportable digital memory medium, such as magnetic tape or disk, optical disk, or digital memory card; (2) Transmission media used to exchange information already in electronic storage media. Transmission media include, for example, the Internet (wide-open), extranet or intranet (using Internet technology to link a business with information accessible only to collaborating parties), leased lines, dial-up lines; private networks, and the physical movement of removable/transportable electronic storage media. Certain transmission, including of paper, via facsimile, and of voice, via telephone, are not considered to be transmissions via electronic media if the information did not exist in electronic form before the transmission.
<i>Electronic Protected Health Information</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	Information that comes within paragraphs (1)(i) or (1)(ii) of the definition of protected health information as specified in this Glossary.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Electronic Record</i>	80.213	Record that includes numeric, graphic, and text information, which may be recorded on any medium capable of being read by a computer and which satisfies the definition of a record. This includes, but is not limited to, magnetic media, such as tapes and disks (hard and floppy), and optical disks.
<i>Eligibility Determination</i>	80.628	The decision of whether a child or youth qualifies to receive intensive mental health services from CAMHD – applies to both initial applications and periodic reviews.
<i>Eligible</i>	80.628	Child or youth meets standard CAMHD Eligibility Criteria and qualifies to receive intensive mental health services from CAMHD (valid for up to one (1) year).
<i>Emancipated Minor</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person under eighteen years of age who is totally self-supporting [HRS §327E-2] or a minor who has been married pursuant to HRS Chapter 572. HRS §327E-2, HRS §577.25, P03.11 Personal Representatives
<i>Emergency Safety Intervention</i>	80.602	Intervention or action performed in a manner that is safe, proportionate, appropriate to the severity of the behavior, and the youth's chronological and developmental age, size, gender, physical, medical, psychiatric condition and personal history (including any history of physical or sexual abuse) to ensure the safety of the youth and others.
<i>Emergency Safety Situation</i>	80.602	When unanticipated youth behavior places the youth or others at serious threat of violence or injury if no intervention occurs and calls for an emergency safety intervention as defined in this section.
<i>Employee</i>	80.306 & 80.600	Full-time and part-time civil service member and non-member employees employed directly by the CAMHD serving in temporary or regular appointments (i.e., student interns, trainees, employees, volunteers, and contracted providers) of the Executive Branch of Hawaii State Government in all bargaining units.
<i>Employee Performance Appraisal (Form 526)</i>	80.306	Department of Human Resources Development (DHRD) form used to review and document the performance level of Civil Service member and non-member employees serving probational or regular appointments.
<i>Employee Performance Appraisal (Form 526-E)</i>	80.306	Department of Human Resources Development (DHRD) form used to review and document the performance level of Civil Service non-members employees serving exempt appointments.
<i>Encounter</i>	80.203, 80.211, 80.212, & 80.213	A record of a contracted treatment service rendered by a CAMHD contracted provider to a registered CAMHD client.
<i>Encryption</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The use of an algorithmic process to transform data into a form in which the data in which there is a low probability of assigning meaning without use of a confidential process or key. 45 CFR §164.304 definitions, P04.13 Notification of Breach of Unsecured PHI.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Enrollee</i>	80.601	A consumer who QUEST eligible and is enrolled in CAMHD’s behavioral health plan.
<i>Evaluation</i>	80.401	The process of gathering and assessing all pertinent information to identify problems and strengths, define intervention goals, and formulate a diagnosis or diagnostic impression.
<i>Exclusionary Formulary</i>	80.636	Means the listing of drugs or categories of drugs designated by the board of medical examiners that shall not be prescribed by an APRN granted prescriptive authority.
<i>Executive Management Team (EMT)</i>	80.503, 80.505, & 80.511	Executive Management Team (EMT) is the governing body of the Child and Adolescent Mental Health Division. This committee includes the Division Administrator, all Branch Chiefs, Medical Director, Public Health Administrative Officer, Performance Manager, Management Information Systems Manager, Provider Relations Specialist, Chief Executive Officer of a family organization, Psychologist appointed from the Clinical Services Office and a family resource representative.
<i>Expedited Review Request for SEBD Eligibility Coversheet</i>	80.628.1	Coversheet referral attached to SEBD Referral Form indicating this youth is being referred for expedited review for presumptive SEBD eligibility.
<i>Facility</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The physical premises and the interior and exterior of a building(s).
<i>False Claim</i>	80.400	A false or fraudulent claim submitted to the State or Federal government for payment.
<i>False Claim Act</i>	80.400	Establishes liability for any person who knowingly presents false or fraudulent claims to the U.S. Government for payment.
<i>Family</i>	80.618	The natural, adoptive or extended family with whom the youth is residing in the home.
<i>Family Guidance Center (FGC)</i>	80.616	Family Guidance Center is a CAMHD center that serves catchment areas throughout the state.
<i>Family Guidance Center (FGC) Executive Team (ET)</i>	80.309	Includes the FGC Branch Chief, FGC Clinical Director, FGC Mental Health Supervisor, and the FGC Public Health Administrative Officer.
<i>Family Guidance Center Branch (Branch)</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Any of the eight Department of Health regional centers that utilize CAMHD treatment teams to determine needed services that include Mental Health Care Coordinators to coordinate and procure services for youth in need of intensive mental health services.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Family Member	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	With respect to an individual: 1. A dependent ² of the individual; or 2. Any other person who is a first-degree, second-degree, third-degree, or fourth degree relative of the individual or of a dependent of the individual. Relatives by affinity (such as by marriage or adoption) are treated the same as relatives by consanguinity (that is, relatives who share a common biological ancestor). In determining the degree of the relationship, relatives by less than full consanguinity (such as half-siblings, who share only one parent) are treated the same as relatives by full consanguinity (such as siblings who share both parents). i. First-degree relatives include parents, spouses, siblings, and children. ii. Second-degree relatives include grandparents, grandchildren, aunts, uncles, nephews, and nieces. iii. Third-degree relatives include great-grandparents, great-grandchildren, great aunts, great uncles, and first cousins. iv. Fourth-degree relatives include great-great grandparents, great-great grandchildren, and children of first cousins.
FCLB	80.616	Family Court Liaison Branch is a branch of CAMHD that serves youth at the Hawaii Correctional Facility, Hale Ho’omalua Juvenile Detention Facility and Homé Maluhia, a non-secured facility.
FERPA	80.813, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Family Educational Rights and Privacy Act. Provides privacy protections and rights for the records of students maintained by federally funded educational agencies or institutions. Education records covered by FERPA are excluded from HIPAA. 34 CFR Part 99
FERPA Disclosure	80.813	To permit access to or the release, transfer, or other communication of personally identifiable information contained in education records to any party, by any means, including, but not limited to, oral, written, or electronic means.
FGC Care Coordinator	80.617 & 80.705	The CAMHD staff member assigned to a youth’s case who works in a Family Guidance Center (FGC) and provides case management services, supports the family, sends out referrals and develops the youth’s Coordinated Service Plan (CSP).
FGC Clinical Lead (CL)	80.401, 80.617, 80.628, & 80.641	A Child Psychiatrist or Clinical Psychologist deployed by the Clinical Services Office to work in a Family Guidance Center to provide clinical leadership and oversight of client care.
FGC Clinical Team (CT)	80.617	The CL and the Care Coordinator (CC) assigned to the case constitute the FGC Clinical Team; the CC’s direct Mental Health Supervisor (MHS1) usually is also part of this team.
FGC Leadership Team	80.641	The governing body of the FGC, made up of leaders representing all the functions of the FGC. The Center Chief leads the FGC Leadership Team. Its purpose is to foster regular, open communication between the CSO, Healthcare System Management Office (HSMO), CAMHD Administrative Services Office (CASO), and the Center, so CAMHD services and initiatives implement smoothly and effectively.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Financial Remuneration	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	The direct or indirect payment from or on behalf of a third party whose product or service is being described. Direct or indirect payment does not include any payment for treatment of an individual.
Fiscal	80.616	A section within the CAMHD.
Fiscal Monitoring	80.214	The evaluation of the appropriateness of expenditures through either of the following methods: Desk Review or On-Site Visit.
Flash Drive	80.000	A portable storage device that includes the encryption level and minimum-security requirement approved and recommended by DOH Health Information Systems Office (HISO) and/or the DOH HIPAA Office and/or the CAMHD Healthcare System Management Office (HSMO).
Flash Drive	80.000	A portable storage device that includes the encryption level and minimum-security requirement approved and recommended by DOH Health Information Systems Office (HISO) and/or the DOH HIPAA Office and/or the CAMHD Healthcare System Management Office (HSMO).
Focused Audit	80.206.1	The systematic method of review of billing records identified with unusual billing pattern and/or suspected fraudulent billing claims. The review may also include billing records submitted by clinician previously identified as a “billing outlier”.
Foreseeable Victim	80.410	Means a person who is either identified or reasonably identified by the consumer. This would also include persons in close proximity of the foreseeable victim, such as a young child, other family members, or co-workers.
Furlough	80.609.01	The temporary release of a youth back to the community for periods of time that typically range from 8 to 48 hours. Youth on furlough remain under the jurisdiction of the State, but are supervised by a parent, legal guardian or other responsible adult not in the employ of HYCF.
Gay	80.600	A person who primarily is emotionally, romantically, and sexually attracted to individuals of the same sex, typically in reference to boys or men.
Gender Dysphoria (GD)	80.600	A DSM-5 diagnosis in which there is a marked difference between the individual’s expressed/experienced gender and the gender others would assign him or her, continuing for at least six months. This condition is only diagnosed when the individual experiences clinically significant distress or impairment in social, occupational, or other important areas of functioning.
Gender Expression	80.600	The manner in which a person expresses his or her gender through clothing, appearance, behavior, speech, etc. Gender expression is a separate concept from sexual orientation and gender identity.
Gender Identity	80.600	A person’s internal, deeply felt sense of being male or female, regardless of the person’s sex at birth.
Generally Accepted Accounting Principles (GAAP)	80.218	These are standards and guidelines promulgated by the Financial Accounting Standards Board and the Government Accounting Standard Board, depending upon the type of organization involved. These principles direct how and when they should recognize costs on accounting records and financial statements.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Genetic Information	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	1. Subject to paragraphs (2) and (3) of this definition, with respect to an individual, information about: <ul style="list-style-type: none"> i. The individual's genetic tests; ii. The genetic tests of family members of the individual; 2. Any reference in this subchapter to genetic information concerning an individual or family member of an individual shall include the genetic information of: <ul style="list-style-type: none"> i. A fetus carried by the individual or family member who is a pregnant woman; and ii. Any embryo legally held by an individual or family member utilizing an assisted reproductive technology. 3. Genetic information excludes information about the sex or age of any individual. <ul style="list-style-type: none"> iii. The manifestation of a disease or disorder in family members of such individual; or iv. Any request for, or receipt of, genetic services, or participation in clinical research which includes genetic services, by the individual or any family member of the individual.
Genetic Services	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	1. A genetic test; 2. Genetic counseling (including obtaining, interpreting, or assessing genetic information); or 3. Genetic education.
Genetic Test	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	an analysis of human DNA, RNA, chromosomes, proteins, or metabolites, if the analysis detects genotypes, mutations, or chromosomal changes. Genetic test does not include an analysis of proteins or metabolites that is directly related to a manifested disease, disorder, or pathological condition.
Gift	80.205	A gift includes money, goods, services, loans, travel, entertainment, hospitality, discounts, promises, or any other thing for which full value it not paid.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Government Agency	80.119, 80.120, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	Any department, division, board, commission, public corporation, or other agency or instrumentality of the State or of any county. HRS § 487N-1
Grievance	80.509, 80.511, & 80.603	Any oral or written communication, made by or on the behalf of a consumer, provider, and others that expresses dissatisfaction with any aspect of the CAMHD operations, activities, behavior, or providers and its sub-contractor(s), except in matters regarding the termination of a contract or a non-extension of a contract that is eligible for extension.
Grievance Appeal	80.603	A written request made by, or on behalf of a non-Med-QUEST consumer or provider for review by the Grievance and Appeals Committee of an adverse grievance decision; or for review by the Appeals Board of an adverse Grievance and Appeals Committee decision.
Grievance Management System (GMS)	80.603	The designated system that has the responsibility to address and resolve a grievance or an appeal of an action. The Grievance Office (GO), the CAMHD Privacy Coordinator, Claims Review Section, and the Branch’s Quality Assurance Specialist are the primary GMS. As a grievance may actually be an appeal of an action, the CAMHD Clinical Services Office (CSO) is also considered a GMS.
Grievance Review	80.603	A Med-Quest review process of a denied, unresolved, or unfavorable findings and conclusions, made on behalf of a Med-Quest youth at the CAMHD grievance level. The Grievance Review process is not open to grievances that merely involve a Med-Quest youth (e.g., provider reimbursement for services to a Med-Quest youth, etc.).
Group Health Plan	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	(also see definition of "health plan")-an employee welfare benefit plan (as defined in section 3(1) of the Employee Retirement Income and Security Act of 1974 (ERISA), 29 U.S.C. 1002(1)), including insured and self-insured plans, to the extent that the plan provides medical care (as defined in section 2791(a)(2) of the Public Health Service Act (PHS Act), 42 U.S.C. 300gg-91(a)(2)), including items and services paid for as medical care, to employees or their dependents directly or through insurance, reimbursement, or otherwise, that: 1. Has 50 or more participants (as defined in section 3(7) of ERISA, 29 U.S.C. 1002(7)); or 2. Is administered by an entity other than the employer that established and maintains the plan.
Guardian	80.628	The person(s) who has the legal authority (and corresponding duty) to care for the personal and property interests of the child or youth.
Guardian ad litem (GAL)	80.811	Guardian (as cited in HRS 587-2) a person appointed by the court under section 587-34 whose role is to protect and promote the needs and interests of the child or a party.
Hands-Free Attachment	80.810.1	An attachment or addition whether or not permanently part of the cell phone, by which a user engages in a call without the use of either hand, whether or not the use of either hand is necessary to activate, deactivate or initiate a function of such a telephone.
Harassment	80.600	Includes, but is not limited to: name-calling; disrespectful gestures, jokes, or comments; inappropriate touching; threats of physical or emotional harm or negative consequences (including religious condemnation); physical abuse; sexual abuse, including unwanted sex acts, touching, pantomime, and threats; emotional abuse, such as shunning or isolation; bullying; and cyber-bullying. Attempting to change a youth’s sexual orientation or gender identity is also a form of harassment.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Hawaii False Claim Act</i>	80.400	Hawaii's state version of the federal False Claims Act (FCA) is the Hawaii False Claims Act for False Claims to the State.
<i>Health and Human Services</i>	80.208	Is defined as services to communities, families, or individuals which are intended to maintain or improve health or social well being through direct services including, but not limited to: a. Assessment, treatment, diagnosis, prevention, and education services provided directly to a target clientele; or b. Insurance coverage for assessment, treatment, diagnosis, prevention, and education services to be provided to a target clientele.
<i>Health Care</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Care, services, or supplies related to the health of an individual. Health care includes, but is not limited to: 1. Preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care; and counseling, service, assessment, or procedure with respect to the physical or mental condition, or functional status, of an individual or that affects the structure or function of the body; and 2. Sale or dispensing of a drug, device equipment, or other item in accordance with a prescription. 45 CFR § 160.103
<i>Health Care Clearinghouse</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A public or private entity, including a billing service, repricing company, community health management information system or community health information system, and "value- added" networks and switches, that does either of the following functions: 1. Processes or facilitates the processing of health information received from another entity in a nonstandard format or containing nonstandard data content into standard data elements or a standard transaction. 2. Receives a standard transaction from another entity and processes or facilitates the processing of health information into nonstandard format or nonstandard data content for the receiving entity. 45 CFR § 160.103
<i>Health Care Component</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	A component or combination of components of a hybrid entity designated by the hybrid entity in accordance with 45 CFR §164.105(a)(2)(iii)(C).

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Word (Alphabetical)	Policy #	Definition
Health Care Operations	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>Any of the following activities of the covered entity to the extent that the activities are related to covered functions:</p> <ol style="list-style-type: none"> 1. Conducting quality assessment and improvement activities, including outcomes evaluation and development of clinical guidelines, provided that the obtaining of generalizable knowledge is not the primary purpose of any studies resulting from such activities; patient safety activities; (as defined in 42 CFR 3.20); population-based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, contacting of health care providers and patients with information about treatment alternatives; and related functions that do not include treatment; 2. Reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, health plan performance, conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers, training of non-health care professionals, accreditation, certification, licensing, or credentialing activities; 3. Except as prohibited under 45 CFR §164.502(a)(5)(i), underwriting, enrollment, premium rating, and other activities relating to the creation, renewal or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to claims for health care (including stop-loss insurance and excess of loss insurance), provided that the requirements of 164.415(g) are met, if applicable; 4. Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs; 5. Business planning and development, such as conducting cost-management and planning-related analyses related to managing and operating the entity, including formulary development and administration, development or improvement of methods of payment or coverage policies; and 6. Business management and general administrative activities of the entity, including, but not limited to: <ol style="list-style-type: none"> a. Management activities relating to implementation of and compliance with the requirements of the Privacy Rule b. Customer service, including the provision of data analyses for policy holders, plan sponsors, or other customers, provided that PHI is not disclosed to such policy holder, plan sponsor, or customer. c. Resolution of internal grievances; d. The sale, transfer, merger, or consolidation of all or part of the covered entity with another covered entity, or an entity that following such activity will become a covered entity and due diligence related to such activity; and e. Consistent with the applicable requirements of 45 CFR §164.514, creating de-identified health information or a limited data set, and fundraising for the benefit of the covered entity;
Health Care Professional	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>Practicing health care professional involved in educational activities, programs, and training at DOH. Such activities may include continuing education, observation, and/or direct individual care under supervision. P04.08 Volunteers, Students, Health Care Professionals and Other Workforce Members</p>

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Health Care Provider	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A provider of medical or health services and any other person or organization who furnishes, bills, or is paid for health care in the normal course of business. 45 CFR § 160.103
Health Information	80.402, 80.409, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Any information, whether oral or recorded in any form or medium, that (1) is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and (2) relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual. 45 CFR § 160.103
Health Insurance Issuer	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An insurance company, insurance service, or insurance organization (including an HMO) that is licensed to engage in the business of insurance in a State and is subject to State law that regulates insurance. Such term does not include a group health plan. 45 CFR §160.103
Health Intervention	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A health intervention is an activity undertaken for the primary purpose of preventing, improving, or stabilizing a medical condition. Activities that are primarily custodial, part of normal existence, or undertaken primarily for the convenience of the patient, family, or practitioner, are not considered health interventions.
Health Maintenance Organization (HMO)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	(as defined in section 2791(b)(3) of the PHS Act, 42 U.S.C. 300gg-91(b)(3) and used in the definition of "health plan")-a federally qualified HMO, an organization recognized as an HMO under State law, or a similar organization regulated for solvency under State law in the same manner and to the same extent as such an HMO.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Health Outcomes</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Treatment of medical conditions that directly affect the length or quality of a person's life.
<i>Health Oversight Agency</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is authorized by law to oversee the health care system (whether public or private) or government programs in which health information is necessary to determine eligibility or compliance, or to enforce civil rights laws for which health information is relevant. Examples: U.S. DHHS, DOH (medical assistance programs, regulation of institutional health care providers, mental health services, disposition of bodies, enforcement of prescription drug restrictions), Insurance commissioner (licensing and regulation of health insurers), Director of Commerce and Consumer Affairs (healthcare professional licensing), Department of Public Safety, Narcotics Enforcement Division (controlled substances). 45 CFR § 164.501, P03.07 Health Oversight Activities

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Health Plan	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>An individual or group plan that provides, or pays the cost of, medical care.</p> <ol style="list-style-type: none"> 1. Health plan includes the following, singly or in combination: <ol style="list-style-type: none"> i. A group health plan, as defined in this section. ii. A health insurance issuer, as defined in this section. iii. An HMO, as defined in this section. iv. Part A or Part B of the Medicare program under title XVIII of the Act. v. The Medicaid program under title XIX of the Act, 42 U.S.C. 1396, et seq. vi. The Voluntary Prescription Drug Benefit Program under Part D of title XVIII of the Act, 42 U.S.C. 1395w-101 through 1395w-152. vii. An issuer of a Medicare supplemental policy (as defined in section 1882(g)(1) of the Act, 42 U.S.C. 1395ss(g)(1)). viii. An issuer of a long-term care policy, excluding a nursing home fixed indemnity policy. ix. An employee welfare benefit plan or any other arrangement that is established or maintained for the purpose of offering or providing health benefits to the employees of two or more employers. x. The health care program for uniformed services under title 10 of the United States Code. xi. The veterans health care program under 38 U.S.C. chapter 17. xii. The Indian Health Service program under the Indian Health Care Improvement Act, 25 U.S.C. 1601, et seq. xiii. The Federal Employees Health Benefits Program under 5 U.S.C. 8902, et seq. xiv. An approved State child health plan under title XXI of the Act, providing benefits for child health assistance that meet the requirements of section 2103 of the Act, 42 U.S.C. 1397, et seq. xv. The Medicare Advantage program under Part C of title XVIII of the Act, 42 U.S.C. 1395w-21 through 1395w-28. xvi. A high risk pool that is a mechanism established under State law to provide health insurance coverage or comparable coverage to eligible individuals. xvii. Any other individual or group plan, or combination of individual or group plans, that provides or pays for the cost of medical care (as defined in section 2791(a)(2) of the PHS Act, 42 U.S.C. 200gg-91(e)(2)).
Hearing Committee	80.511	Committee appointed by the PARC to hear the actions and/or recommendations made by the investigative PARC subcommittee and the responses from the professional involved.
HHS	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	United States Department of Health and Human Services, the agency responsible for overseeing HIPAA. 45 CFR §160.103

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Word (Alphabetical)	Policy #	Definition
HIPAA	80.110, 80.409, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Health Insurance Portability and Accountability Act of 1996. HIPAA requires the adoption of standards for protecting the privacy of individually identifiable health information and establishes national standards for health care transactions, unique health identifiers, code sets for the data elements of the transactions, and security of health information. 45 CFR Parts 160, 162, 164
HIPAA Complaint	80.603	Any assertion, whether written or oral, that an unauthorized disclosure of protected health information was made in violation of HIPAA regulations by CAMHD.
HIPAA Security Rule	80.110	The Rule defines administrative safeguards as "administrative actions, and policies and procedures, to manage the selection, development, implementation, and maintenance of security measures to protect electronic data and to manage the conduct of the covered entity's workforce in relation to the protection of that information."
Hybrid Entity	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A single legal entity that is a covered entity, whose business activities that include both covered and non-covered functions, and designates its health care components in accordance with 45 CFR §164.105(a)(2)(iii)(C). 45 CFR § 164.103, P01.00 Introduction.
IEP Team	80.617	The parents/guardians, DOE staff working with the student, and other professionals involved with the case, including the FGC CC and CL constitute the IEP team.
Immediate Family	80.301	For purposes of this policy, immediate family is defined as the employee's spouse and children.
In loco parentis	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	"in the place of a parent." Exists when a person undertakes care and control of another in absence of such supervision by latter's natural parent(s) and in absence of formal legal approval, and is temporary in character and is not to be likened to an adoption which is permanent. P03.11 Personal Representatives.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Incapacitated</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An individual who lacks the ability to understand the significant benefits, risks, and alternatives to proposed health care and to make and communicate a healthcare decision.
<i>Incidental Disclosure</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Incidental disclosures of PHI occur as a by-product of an otherwise permitted disclosure; and are permitted only to the extent that the CHCC has applied reasonable and appropriate safeguards and implemented the minimum necessary standard, where appropriate. P02.02 Authorizations
<i>Incompetent</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Any individual who has been adjudicated to be incompetent or is, in the opinion of the treating physician, either permanently or temporarily not able to understand the nature and consequences of his/her decisions. P03.11 Personal Representatives.
<i>Individual</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The person who is the subject of PHI.
<i>Individualized Education Plan (IEP)</i>	80.621	A written statement for each child with a disability that is developed, reviewed and revised in accordance with Section 614 (Individualized Education Programs) of the Individual Disabilities Education Act, as amended in 1997. The statement includes a description of the student's present levels of educational performance, annual goals including short-term objectives, special education and related services, dates for beginning and duration of services, and measure for how progress on implementation of the services will be evaluated.

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Word (Alphabetical)	Policy #	Definition
Individualized Educational Program (IEP)	80.617	The Department of Education (DOE) document that describes special educational interventions and supports that shall be provided by DOE to the student to ensure he or she receives and can benefit from a Free and Appropriate Public Education (FAPE).
Individually Identifiable Health Information (IIHI)	80.402, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Is information that is a subset of health information, including demographic information collected from an individual, and; 1. Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and 2. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual, and a. That identifies the individual; or b. With respect to which there is a reasonable basis to believe that the information can be used to identify the individual.
Individuals with Disabilities Education Act (IDEA)	80.617	The Federal legislation requiring public schools to provide special education supports to youth with a range of educationally-relevant disabilities.
Ineligible	80.628	Child or youth does not meet the standard CAMHD Eligibility Criteria and does not qualify to receive intensive mental health services from CAMHD.
Informal Request	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A request, in any form, that a person submits to an agency for access to records.
Informed Consent to Evaluation, Treatment and Services	80.401	The signed agreement by a client, age 14 years and above, or the parent(s) or legal guardian(s) for treatment following an explanation and subsequent understanding of the condition to be treated; the proposed treatment or procedure; the intended and anticipated results; the benefits and risks of such treatment; and alternatives to the proposed treatment, including non-treatment (HRS §671-3).
Informed Consent to Release of Confidential Information	80.804	A consent form that must: (1) Identify the person who is authorized to disclose the protected health information; (2) Identify the client; (3) Describe the nature of and time span of the protected health information to be disclosed; (4) Identify to whom the protected health information is to be disclosed; (5) Describe the purpose of the disclosure; (6) State that the consent is subject to revocation; and (7) Include the date upon which the consent to disclose ends.
Initial Review	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A methodical review to determine the medical necessity and appropriateness of the admission, prepare for case management, proposed discharge planning, determine quality of care, and ensure payment for medically necessary services.

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Word (Alphabetical)	Policy #	Definition
Inmate	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person incarcerated in or otherwise confined in a correctional institution. 45 CFR § 164.501, P03.09 Specialized Government Functions
Institutional Review Board (IRB)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A federally mandated review board whose function is to protect human research subjects. An IRB can be used to review and approve a researcher's request to waive or alter the Privacy Rule's requirements for an authorization. P03.13 Research.
Intake Coordinator	80.628	Staff member assigned by the FGC Chief to serve as the point person for all applications.
Intake Coordinator	80.628 & 80.628.1	FGC Staff member assigned by the Branch Chief (BC) to serve as the point person for all SEBD referrals.
Interagency Performance Standards and Practice Guidelines (IPSPG)	80.217	Standards and guidelines designed to define service content standards and improve the efficiency and effectiveness of school-based behavioral health and intensive mental health services.
Internal Review	80.506	Review of data and performance through the case-based review methodology; is a self-assessment and accountability process that is jointly conducted by school complexes, Family Guidance Centers (FGC) and the Early Intervention Section (EIS).
Intersex	80.600	A variation in sex characteristics including chromosomes, gonads, or genitals that do not allow an individual to be distinctly identified as male or female.
Jurisdiction	80.706	Geographic or topical area of authority for the Branches.
Law Enforcement Official	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An officer or employee of any agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, who is empowered by law to: 1) investigate or conduct an official inquiry into a potential violation of law; or 2) prosecute or otherwise conduct a criminal, civil, or administrative proceeding arising from an alleged violation of law. 45 CFR §164.501, P03.05 Law Enforcement.
Leave	80.309	Any absence from administrative or clinical leadership positions.
Leave of Absence	80.001	Time interval during which staff is away from the office.
Lesbian	80.600	A girl or woman who primarily is emotionally, romantically, and sexually attracted to girls or women.

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Word (Alphabetical)	Policy #	Definition
Level System	80.609.01	A behavior management program utilized at HYCF. As youth advance through the 4 levels (based both on their time at the facility and their behaviors), their privileges increase. The program is utilized, in part, to contribute to the management's decision making regarding furlough, parole and early discharge.
Licensed	80.612	Means that the individual is licensed in the State of Hawaii.
Licensed Mental Health Professional	80.401	A person who provides counseling as part of the following professions: (1) A licensed mental health counselor licensed according to chapter 453D; (2) A licensed marriage and family therapist licensed according to chapter 451J; (3) A licensed clinical social worker licensed according to chapter 467E; (4) A licensed psychologist licensed according to chapter 465; (5) A physician licensed according to chapter 453, who is board certified, or board eligible, in psychiatry; or (6) An advanced practice registered nurse licensed according to chapter 457 who holds an accredited national certification in an advanced practice registered nurse with psychiatric specialization. A CAMHD licensed Mental Health Professional may also be a supervisor.
Limited Data Set	80.804, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Individual health information that has had certain direct identifiers removed, but does contain other PHI that could potentially identify the individual, and is used for a specific research purpose, public health or health care operations purposes only. It may be used or disclosed without obtaining an individual's authorization if the covered entity and the recipient of the data enter into a data use agreement. A limited data set is not considered deidentified data. 45 CFR § 164.514, P03.01 Minimum Necessary, P04.11 De-Identified Information and Limited Data Sets.
Login	80.108.3	Identification or name used to access or log into a computer, network or site.
Long Term Commitment	80.609.01	Commitment to the State to minority (age 18) or Majority (age 19) regardless of the length of commitment, or commitment for a period of time exceeding one (1) year.
Māhū	80.600	In modern day Hawai'i it is a commonly used slang word for transvestite and transgender persons.
Mainland	N/A	Term that refers to any geographic location found in the contiguous United States and the state of Alaska.
Major Contract	80.214	Any contract over \$300,000
Management Information System	80.117	Computer-based information collection and analysis system that gathers data from inside and outside the CAMHD to produce current, accurate, and informative reports for decision makers. The MIS also provides information needed for submission and processing of billing invoices.
Management Meetings	80.103	Include the Executive Management Team (EMT), the Expanded Executive Management Team (EEMT), and Network (FGC branch chiefs).

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Word (Alphabetical)	Policy #	Definition
Marketing	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>1. Except as provided in paragraph (2) of this definition, marketing means to make a communication about a product or service that encourages recipients of the communication to purchase or use the product or service.</p> <p>2. Marketing does not include a communication made:</p> <ul style="list-style-type: none"> i. To provide refill reminders or otherwise communicate about a drug or biologic that is currently being prescribed for the individual; only if any financial remuneration received by the covered entity in exchange for making the communication is reasonably related to the covered entity's cost of making the communication. ii. For the following treatment and health care operations purposes, except where the covered entity receives financial remuneration in exchange for making the communication: <ul style="list-style-type: none"> A. For treatment of an individual by a health care provider, including case management or care coordination for the individual, or to direct or recommend alternative treatments, therapies, health care providers, or settings of care to the individual; B. To describe a health-related product or service (or payment for such product or service) that is provided by, or included in a plan of benefits of, the covered entity making the communication, including communications about: the entities participating in a health care provider network or health plan network; replacement of, or enhancements to, a health plan; and health-related products or services available only to a health plan enrollee that add value to, but are not part of, a plan of benefits; or C. For case management or care coordination, contacting of individuals with information about treatment alternatives, and related functions to the extent these activities do not fall within the definition of treatment. 45 CFR §164.501
MAX	80.401	CAMHD's electronic case management system.
Measurement-Based Care	80.641	The use of measurement tools to quantify assessment, treatment, and clinical outcomes. It involves both (1) routine monitoring throughout services and (2) using the results of the ongoing monitoring in decision making. It is a mechanism to enhance the quality of services, support and strengthen clinical decision making, improve communication with all team members (including youth and their caregivers), and contribute to program and system quality assurance (See CAMHD's Measurement-Based Care document: https://health.hawaii.gov/camhd/files/2020/05/Measurement-Based-Care.pdf).
Mechanical Restraint	80.602	Any device attached or adjacent to the youth's body (e.g., four- point bed restraint) that restricts a youth's movement.
Medicaid Fee-For-Service Recipient	80.628.1	Client who is a recipient of the Hawaii Medicaid Fee-For-Service (FFS) Program.
Medical Condition	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Is a disease, an illness, or an injury. A biological or psychological condition that lies within the range of normal human behavior is not considered a disease, illness, or injury.
Medical Necessity (Hawaii Revised Statutes)	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	<p>"A health intervention is medically necessary if it is recommended by the treating Physician or treating licensed health care provider, is approved by the health plan's Medical director or physician designee, and is:</p> <ul style="list-style-type: none"> (1) For the purpose of treating a medical condition; (2) For the most appropriate delivery or level of service, considering potential benefits and harms to the patient; (3) Known to be effective in improving health outcomes; provided that: (4) Effectiveness is determined first by scientific evidence; (5) If no scientific evidence exists, effectiveness is determined then by professional standards of care; and (6) If no professional standard of care exists or if one exists but is outdated or contradictory, effectiveness is determined then by expert opinion; and (7) Cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For the purposes of this paragraph, cost-effective shall not necessarily mean the lowest price."

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Word (Alphabetical)	Policy #	Definition
Medical Necessity (Teal Book)	80.604	In order to be considered medically necessary, the medical goods or services provided or ordered must: 1) be necessary to protect life, to prevent significant illness or significant disability; 2) be individualized, specific, and consistent with symptoms or confirmed diagnosis of the illness under treatment, and not in excess of the youth’s needs; 3) be consistent with generally accepted professional medical standards as determined by the Medicaid program, and not experimental or investigational; 4) be reflective of a level of service that can be safely furnished, and for which no equally effective and more conservative or less costly treatment is available statewide; and 5) be furnished in a manner not primarily intended for the convenience of the youth, the youth’s caretaker, or the provider.
Medically Necessary (Med-Quest)	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Those covered services provided by a physician or other licensed practitioner of the healing arts within the scope of their practice under State law that follows standard medical practice and is deemed essential and appropriate for the diagnosis or treatment of a particular illness or injury.
Mental Health Evaluation	80.617	A written report by a mental health professional that describes a youth’s current emotional and behavioral functioning. Ideally, the report includes a mental health diagnosis and a description of the youth’s functional impairment. Admission or discharge reports prepared by a treatment facility and Emotional/Behavioral reports prepared by DOE may be considered Mental Health Evaluations for the purpose of CAMHD eligibility determination.
Mental Health Professional (MHP)	80.308, 80.308.1, 80.308.2, 80.308.3, & 80.508	Unlicensed, Board Ineligible Psychiatrist; Psychiatric Resident; Unlicensed, Ph.D. or Psychologist (Psy.D.); Registered Public Nurse (RPN), Licensed with Masters Degree; Unlicensed, Masters Psychology; Licensed, Masters Social Work; Unlicensed Masters Social Work (MSW); Unlicensed Marriage & Family Therapist (MFT); Unlicensed, Masters Certified Counselor; Unlicensed, Masters Degree.
Mental Health Treatment Plan	80.614	Individualized planning for each youth identifying evidence-based treatment interventions that are the most promising options for delivering positive treatment outcomes for a youth’s individual goals and objectives. The Plan includes clear descriptions of specific treatment strategies and services and discharge planning.
Mental Health Treatment Team (MHTT)	80.614, 80.617, & 80.618	Parents or Guardians and the CAMHD youth together with the professionals involved in the youth’s mental health treatment make up the Mental Health Treatment Team. Typically, this includes the treating therapist, the CC, the CL and the MHS1.
Milestones	80.505	Pre-planned events when certain deliverables with target dates are provided. Milestones help verify that progress toward accomplishing committee goals and objectives is on track and on schedule. Delays in meeting milestones are triggers for alerts and concerns about performance and may result in issues to be identified.
Minimum Necessary	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A covered entity shall be treated as being in compliance with respect to the use, disclosure or request of PHI only if the covered entity limits such PHI, to the extent practicable, to the limited data set as defined in 45 CFR §164.51(e)(2) or, if needed by such entity, to the minimum necessary to accomplish the intended purpose of such use, disclosure, or request, respectively. P03.01 Minimum Necessary

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Word (Alphabetical)	Policy #	Definition
Minor	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person under the age of 18 years. HRS §577-1, P03.11 Personal Representatives
Minor-Initiated Mental Health Treatment or Services	80.401	Outpatient or in-home mental health treatment or services that a minor, 14 years of age or older, requested without a parent(s) or legal guardian(s) consent, knowledge, or participation (Minor-initiated mental health treatment or services does not include medication or residential programs.).
Minutes	80.103	A permanent record of the proceedings of a meeting. Minutes are considered unconfirmed until formally approved at a subsequent meeting of the committee.
MIS	80.616	Management Information System is a section located within the CAMHD under Health Information System Office.
Mismatch Services	80.217	Services received by consumer which are not preferred by the mental health treatment team.
Misuse of Social Security Benefits	80.811	Misuse occurs when a representative payee does not use social security benefits and/or SSI payments for the beneficiary's current and future needs, or does not save them for the beneficiary.
Mitigation	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Activities to lessen any harmful effects when a privacy violation or breach has occurred. P04.03 Mitigation
Mobile Electronic Device	80.00 & 80.121	any electronic device that has data storage and is capable of connecting to any network (wired or wireless) such as laptop computers, flash drives, smart phones, tablets and portable hard drives.
Modification Plan (MP)	80.621	A written statement describing the specific regular or adapted regular educational services and related services to be provided to the student who does not require special education, but whose disability requires modifications to prevent exclusion from full participation in his/her education program per Section 504 of the Vocational Rehabilitation Act.

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Word (Alphabetical)	Policy #	Definition
More Stringent	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	In the context of a comparison of a provision of state law and a standard, requirement, or implementation specification adopted under the HIPAA Privacy Rule, a state law that meets one or more of the following criteria: I. Use or Disclosure. Prohibits or restricts a use or disclosure when the privacy regulation would permit it; except if the disclosure is: A. Required by the Secretary in connection with determining whether a covered entity or \-... business associate in compliance with the Privacy Rule; or B. To the individual who is the subject of the individually identifiable health information. II. Access or Amendment. Provides clients with greater rights of access or amendment to their health information; III. Amount of Information. Requires CHCCs to provide clients with more information about uses, disclosures, rights and remedies; IV. Limits on Consent or Authorization. Narrows the scope or duration, increases the privacy protections, or reduces the coercive effect of the circumstances surrounding individual authorization; V. Information Retention and Reporting. Requires CHCCs to retain or report information for the accounting of disclosures that is more detailed or is for a longer duration; or VI. Other Matters. Provides greater privacy protection for the client. 45 CFR §160.202, P01.00 Introduction
Motion	80.103	A proposed form of resolution/recommendation to be put to a formal vote at a meeting. If a motion is passed by a majority of the members present, it is recorded as a resolution of the meeting. The motion shall request that the Committee either “approve,” “endorse” or “note” the item. a. The committee shall “approve” an item only when it is the final approval authority for that item. b. The Committee shall “endorse” an item when it is supporting a proposal to be approved by a higher level committee. c. The Committee shall “note” an item which has been provided for information and does not require formal endorsement or approval. By noting an item, the Committee/Board signifies that it has recorded observations with respect to the issue even though it may not have the power to approve the proposal or recommended it to a higher body.
National Commission of Quality Assurance (NCQA)	80.308, 80.308.1, 80.308.2, & 80.308.3	Is an independent 501(c)(3) non-profit organization in the United States designed to improve health care quality. NCQA manages voluntary accreditation programs for individual physicians and medical groups. Health plans seeking accreditation measure performance through the Healthcare Effectiveness Data and Information Set (HEDIS).
Net Financial Error	80.206	This parameter is computed by dividing the net overpayment (from records rejected by the auditors) by the total dollar amount of the sample.
Network	80.108.1	Wired or wireless connection that allows multiple authorized users access to data.
No Show	80.638	A scheduled appointment that the client either misses or cancels with less than 24 hours’ notice without rescheduling.
Non-Major Contract	80.214	Any contract under \$300,000.
Notice of Privacy Practices (NPP)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The Notice of Privacy Practices describes how health information is used and disclosed and describes patients' rights regarding their health information. Acknowledgment of receipt of the notice is sought from all clients at the first visit. 45 CFR §164.520, P02.01 Notice of Privacy Practices.

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Word (Alphabetical)	Policy #	Definition
<i>Occupational Exposure</i>	80.901	The Centers for Disease Control (CDC) defines occupational exposure as an incident that may place a healthcare worker at risk for acquiring a bloodborne disease such as Hepatitis or HIV.
<i>Office of Health Care Assurance (OHCA)</i>	80.411	Refers to the Department of Health (DOH) Office that manages the State licensing and Federal certification of medical and health care facilities, agencies, and services provided throughout the State in order to ensure acceptable standards of care provided.
<i>Ombudsman</i>	80.803	Person appointed by the Hawaii State Legislature who establishes procedures for receiving and processing complaints, conducts investigations of administrative acts of agencies and reports the findings to the complainants and the agencies investigated and may, after a reasonable time has elapsed, present an opinion and recommendations to the governor, the legislature, or the public.
<i>On-Site Visit</i>	80.214	Consists of an employee team of not less than two (2) members which review and evaluate at the provider's place of business, samples of financial data in accordance with the Department of Health Fiscal Monitoring Plan.
<i>Order</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An order of a court or administrative tribunal. P03.06 Judicial, Administrative
<i>Organized Health Care Arrangement</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<ol style="list-style-type: none"> 1. A clinically integrated care setting in which individuals typically receive health care from more than one health care provider; 2. An organized system of health care in which more than one covered entity participates, and in which the participating covered entities: <ol style="list-style-type: none"> i. Hold themselves out to the public as participating in a joint arrangement; and ii. Participate in joint activities that include at least one of the following: <ol style="list-style-type: none"> A. Utilization review, in which health care decisions by participating covered entities are reviewed by other participating covered entities or by a third party on their behalf; B. Quality assessment and improvement activities, in which treatment provided by participating covered entities is assessed by other participating covered entities or by a third party on their behalf; or C. Payment activities, if the financial risk for delivering health care is shared, in part or in whole, by participating covered entities through the joint arrangement and if PHI created or received by a covered entity is reviewed by other participating covered entities or by a third party on their behalf for the purpose of administering the sharing of financial risk. 3. A group health plan and a health insurance issuer or HMO with respect to such group health plan, but only with respect to PHI created or received by such health insurance issuer or HMO that relates to individuals who are or who have been participants or beneficiaries in such group health plan; 4. A group health plan and one or more other group health plans each of which are maintained by the same plan sponsor; or 5. The group health plans described in paragraph (4) of this definition and health insurance issuers or HMOs with respect to such group health plans, but only with respect to PHI created or received by such health insurance issuers or HMOs that relates to individuals who are or have been participants or beneficiaries in any of such group health plans.
<i>Outlier</i>	80.628	An eligibility determination that does not align with the standard CAMHD Eligibility Criteria.

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<i>Overtime Work</i>	80.304	Hours when an employee renders service at the direction of proper authority and if the performance of such service is, as defined in collective bargaining agreements and including, but limited to: 1) in excess of a scheduled eight (8) hours workday, 2) in excess of forty (40) straight time hours worked per week; or 3) on a day which is observed as a legal holiday.
<i>OYS</i>	80.616	Office of Youth Services is an arm of the Department of Human Services whose aim is to provide programs and services for Hawaii's youth including the provision of balanced and comprehensive services for at-risk youth, to prevent delinquency, reduce recidivism, and maximize opportunities for youth to become productive, responsible citizens through community based and family-focused treatment interventions.
<i>OYS Administrator</i>	N/A	The appointee that runs OYS.
<i>P&P Committee</i>	80.101	A standing committee made up of representatives from each major section of CAMHD and chaired by the P&P Coordinator. Members track and edit the P&Ps for the units responsible.
<i>Paraprofessional (PARA)</i>	80.308, 80.308.1, 80.308.2, 80.308.3, & 80.508	Certified Substance Abuse Counselor (CSAC); Registered Public Nurse (RPN) Bachelors, Licensed; RPN Associate, Licensed; Licensed Practical Nurse (LPN); Bachelors, Psychology; Bachelors, Social Work; Bachelors, Counseling; Bachelors, Other; Associates, Other; High School Graduate or GED.
<i>Parent</i>	80.401	Parent(s) of the client; includes natural parent(s) or legal guardian(s).
<i>Password</i>	80.108.3	A secret series of characters that enables a user to access a file, computer, or program.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Payment	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	<p>1. The activities undertaken by:</p> <ul style="list-style-type: none"> i. A health plan to obtain premiums or to determine or fulfill its responsibility for coverage and provision of benefits under the health plan (except as prohibited under genetic information for underwriting purposes (45 CFR §164.502(a)(5)(i)); or ii. A health care provider or health plan to obtain or provide reimbursement for the provision of health care; and <p>2. The activities in paragraph (1) of this definition relate to the individual to whom health care is provided and include, but are not limited to:</p> <ul style="list-style-type: none"> i. Determinations of eligibility or coverage (including coordination of benefits or the determination of cost sharing amounts), and adjudication or subrogation of health benefit claims; ii. Risk adjusting amounts due based on enrollee health status and demographic characteristics; iii. Billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss insurance and excess of loss insurance), and related health care data processing; iv. Review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges; v. Utilization review activities, including pre-certification and preauthorization of services, concurrent and retrospective review of services; and vi. Disclosure to consumer reporting agencies of any of the following PHI relating to collection of premiums or reimbursement: <ul style="list-style-type: none"> A. Name and address; B. Date of birth; C. Social security number; D. Payment history; E. Account number; and F. Name and address of the health care provider and/or health plan. 45 CFR §164.501
Performance Category	80.306	Factor that is used to evaluate an employee’s performance. The ‘Significant Categories’ are: ‘Quality of Work’ and ‘Quantity and Timelines of Work’.
Performance Improvement Steering Committee (PISC)	80.503	A CAMHD committee chaired by the Division Performance Manager and whose vice-chair is the Division’s Medical Director; comprised of chairpersons or their delegates from each CAMHD standing committee, contract provider representative, a Family Guidance Center (FGC) Branch Chief representative, and a family organization representatives. All CAMHD units and sections identify and track measurable performance outcomes on a regular basis and establish benchmarks that are reported through.
Person	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A natural person, trust or estate, partnership, corporation, professional association or corporation, or other entity, public or private. 45 CFR §160.103

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Personal (Physical) Restraint	80.602	Involves any use of physical force to restrict a youth’s freedom of movement. Personal escorts where the youth is willfully cooperating with the escort is not considered a restraint until such time as the youth no longer intends to follow or be escorted (e.g., youth struggles with staff).
Personal Health Record	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An electronic record of individually identifiable health information on an individual that can be drawn from multiple sources and that is managed, shared, and controlled by or for the individual.
Personal information (PI)	80.118, 80.119, 80.120, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Means an individual's first name or first initial and last name in combination with any one or more of the following data elements, when either name or data elements are not encrypted: 1. Social security number; 2. Driver's license number or Hawaii identification card number; or 3. Account number, credit or debit card number, access code, or password that would permit access to an individual's financial account. Personal information does not include publicly available information that is lawfully made available to the general public from federal, state, or local government records. HRS § 487N-1, P26.01-- P30.01 DOH Identity Theft Policies
Personal Record	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Any item, collection or grouping of information about an individual that is maintained by an agency. It includes, but is not limited to, the individual's education, financial, medical, or employment history, or items that contain or make reference to the individual's name, identifying number, symbol, or other identifying particular assigned to the individual, such as a finger or voice print or a photograph. HRS § 92F-3, P26.01 Notification of Security Breach, P27.01 Destruction of Personal Records.
Personal Representative	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person authorized under state or other law to act on behalf of the individual making health-related decisions. Examples: the guardian or conservator of an adult patient, the beneficiary or personal representative of a deceased patient, the parent or guardian of the minor (except in circumstances where state law gives minors the right to make health decisions). P03.11 Personal Representatives

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Personally Identifiable Information</i>	80.106	Means information found in educational records that includes, but is not limited to: 1) the student's name; 2) the name of the student's parent or other family member; 3) the address of the student or student's family; 4) a personal identifier, such as the student's social security number or student number; 5) a list of personal characteristics that would make the student's identity easily traceable, or 6) other information that would make the student's identity easily traceable.
<i>Petty Cash Fund</i>	80.202	A sum of money set aside for the purpose of making change or paying small obligations for which the issuance of individual warrant vouchers and warrants would be exclusively costly or time consuming.
<i>Physical Safeguards</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Are physical measures, policies, and procedures to protect a covered entity's or business associate's electronic information systems and related buildings and equipment, from natural and environmental hazards, and unauthorized intrusion. 45 CFR 164.304
<i>Plan Sponsor</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	As defined at section 3(16)(8) of ERISA, 29 U.S.C. 1002(16)(8).
<i>Policy</i>	80.101 & 80.505	Specific guidelines that chart a course of action. A policy may state goals, purpose, expectations, mandates and/or other requirements to guide decision-making.
<i>Policy & Procedure Coordinator</i>	80.101	A CAMHD employee assigned to chair the committee by the Authorized Officer. A CAMHD employee among the members may assume the role, when the P&P Coordinator is not present.
<i>Practitioner</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	Any QMHP, MHP or Paraprofessional.
<i>Pre-Audit Review</i>	80.206 & 80.206.1	The methodology used by the CAMHD Claims Review Section (CRS) to identify billing records for inclusion in the focused audit.
<i>Precision Level</i>	80.206	A measurement of the closeness of the sample estimate and the corresponding unknown universe value.
<i>Prescribing Medications</i>	80.612	Means a written or oral prescription by a licensed psychiatrist for the dispensing of drugs by a licensed pharmacist.
<i>Prevalent Non-English Languages</i>	80.601	Means a non-English language spoken by a significant number or percentage of potential consumers and consumers in the State.
<i>Primary Source Verification</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	The process of verifying an individual professional's verbal or documented claims of professional and legal standing through direct contact with officials at the primary sources of education, licensing, prior employment, insurance carriers, etc.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Privacy	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An individual's right to determine whether, when and to whom personal health care information is released and the right to control or influence information that is related to them.
Privacy Board	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A board of members authorized by the HIPAA privacy rule to approve a waiver of authorization for use or disclosure of identifiable health information. P03.13 Research
Privacy Coordinator	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The person designated by each health care component and charged with carrying out the HIPAA compliance responsibilities for a health care component. P01.03 Privacy Officials
Privacy Officer	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The person designated to carry out and coordinate DOH activities related to privacy and security of health information as required by HIPAA. P01.03 Privacy Officials.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Privacy Rights</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The specific actions that an individual can take or request to be taken with regard to the uses and disclosures of their information. P02.01-P02.08 Privacy Rights Section.
<i>Privacy Rule</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The Privacy Rule implements the privacy requirements of the Administrative Simplification subtitle of the Health Insurance Portability and Accountability Act of 1996.
<i>Procedure</i>	80.101 & 80.505	Detailed direction to put policy into practice and set forth the mechanics for implementing the policy.
<i>Professional Activities Review Committee (PARC)</i>	80.511	Committee created by a professional staff of the CAMHD whose function is to maintain the professional standards of persons engaged in its profession, occupation or specialty practice established by the bylaws of the of the professional society and the CAMHD. The committee reviews the qualifications of the professional to participate or continue to participate in rendering mental health services to CAMHD consumers.
<i>Progress Notes</i>	80.804	documentation related to any type of encounter (i.e. phone, in-person, email) with the client or on behalf of the client and family, including person(s) encountered, date, time, location, purpose, and result.
<i>Protected Categories</i>	80.600	A characteristic of a person which, by law and/or policy, cannot be targeted for discrimination. For the purpose of this policy the following are protected categories: race, ethnicity, sex, immigration status, disability, national origin, sexual orientation, or gender identity or expression.
<i>Protected Health Information</i>	80.106	Individually identifiable health information that is transmitted by electronic media; maintained in any electronic medium; or transmitted or maintained in any other form or medium. Protected health information excludes individually identifiable health information in: education records covered by the Family Educational Right and Privacy Act (as amended, 20 U.S.C. 1232g) and records described at 20 U.S.C. 1232g(a)(4)(B)(iv). [See Individually Identifiable Health Information]
<i>Protected Health Information</i>	80.307	Individually identifiable health information that is transmitted by electronic media; maintained in any electronic medium; or transmitted or maintained in any other form or medium. Protected health information excludes individually identifiable health information in education records covered by the Family Educational Rights and Privacy Act (as amended, 20 U.S.C. 1232g) and records described at 20 U.S.C. 1232g(a)(4)(B)(iv).

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Word (Alphabetical)	Policy #	Definition
Protected Health Information	80.402	individually identifiable health information that is transmitted by electronic media or maintained in electronic form/medium that is: 1. Transmitted by electronic media; 2. Maintained in any medium described in the definition of electronic media at 45 CFR §162.103 of this subchapter; or. 3. Transmitted or maintained in any other form or medium. Protected health information excludes individually identifiable health information in: a) Education records covered by the Family Educational Rights and Privacy Act (FERPA) as amended by 20 U.S.C. 1232g; b) Records described at 20 U.S.C. 1232g(a)(4)(B)(iv); and Employment records held by a covered entity in its role as employer.
Protected Health Information (PHI)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Individually identifiable health information: 1. Except as provided in paragraph (2) of this definition, that is: a. Transmitted by electronic media; b. Maintained in electronic media; or c. Transmitted or maintained in any other form or medium. 2. Protected health information excludes IIHI: a. Covered by the Family Educational Rights and Privacy Act (FERPA) b. Records on a student who is eighteen years of age or older, or is attending an institution of postsecondary education, which are made or maintained by a physician, psychiatrist, psychologist, or other recognized professional or paraprofessional acting in his professional or paraprofessional capacity, or assisting in that capacity, and which are made, maintained, or used only in connection with the provision of treatment to the student, and are not available to anyone other than persons providing such treatment, except that such records can be personally reviewed by a physician or other appropriate professional of the student's choice. 20 USC 1232g(a)(4)(8)(iv) c. Employment records held by a covered entity in its role as employer. d. Regarding a person who has been deceased for more than 50 years. 45 CFR §160.103
Protected Health Information (PHI)	80.843	Individually identifiable health information (IIHI) including demographic information, in any form, including information that is transmitted orally, or in written or electronic form, that relates to: 1. The consumer's past, present or future physical or mental health of condition, 2. The provision of health care to the consumer, or 3. The past, present, or future payment for the provision of health care to the consumer that identifies the consumer or for which there is a reasonable basis to believe can be used to identify the consumer. Protected health information excludes IIHI covered by the Family Educational Rights and Privacy Act (FERPA) and employment records held by a covered entity in its role as employer (45 CFR Section 160.103).
Protocol for Recording Minutes of Meetings	80.103	Refers to the standard format to be used when preparing minutes of meetings of committees.
Provider	80.621	A qualified individual, agency or agency's subcontractor who has been contracted by the State to provide intensive mental health services to youth with emotional and/or behavioral challenges.
Provider Appeal	80.218	A written request made by, or on behalf of a Provider Agency for review by the Grievance Committee due to adverse findings by CAMHD's contracted Claims Reviewers; or for review by the Appeals Board of an adverse Grievance Committee decision.
Provider Network	80.217	Providers contracted by CAMHD to provide emergency and intensive mental health services in accordance with the IPSPG and applicable CAMHD Request for Proposal.
Provisionally Eligible	80.628	Child or youth appears to meet standard CAMHD Eligibility Criteria, but more information is needed (valid for up to six (6) months, to allow time to collect additional clinical information).

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Psychotherapy Notes</i>	80.804	Notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private, group, joint, or family counseling session that are separated from the rest of the individual’s medical record, but do not include: (1) Medical prescription and monitoring; (2) Counseling session start and stop times; (3) Modalities/frequencies of treatment; (4) Results of clinical tests; or (5) A summary of diagnosis, functional status, treatment plan, symptoms, prognosis, or progress.
<i>Public Health Authority</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is responsible for public health matters as part of its official mandate. 45 CFR §164.501, P03.08 Public Health Activities
<i>QAIP Work Plan</i>	80.503 & 80.506	A working plan that guides the systematic implementation of CAMHD’s performance improvement process.
<i>Qualified Mental Health Professional (QMHP)</i>	80.308, 80.308.1, 80.308.2, & 80.308.3, 80.508	The following State of Hawaii Licensed clinicians fall under this category: Board Certified or Board Eligible Medical Doctor (M.D.) Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), Licensed Psychologist (Ph.D. or Psy.D.); Advanced Practice Registered Nurse (APRN) and Osteopathic Doctor (D.O.).
<i>Qualified Protective Order</i>	80.404	Is an order of the court or an administrative tribunal or a stipulation by the parties to the litigation or administrative proceeding that: A. Prohibits the parties from using or disclosing the protected health information for any purpose other than the litigation or proceeding for which such information was requested, and B. Requires the return to CAMHD or destruction of the protected health information or personally identifiable information (including all copies made) at the end of the litigation or proceeding.
<i>Quality Assurance and Improvement Program (QAIP)</i>	80.503 & 80.506	Document that defines the purpose, goals and objectives, and administration of the QAIP and includes an organized system of information collection for the purpose of continuous quality improvement and results for youth served. The QAIP encompasses CAMHD’s utilization management program.
<i>Quality Steering Committee</i>	80.508	CAMHD standing committee that identifies and tracks opportunities for improvement, and has oversight of the implementation of improvement activities and/or actions within the CAMHD system from identified data sources: CAMHD Standing Committees, Quality of Care Referrals, and CAMHD Standing Reports.
<i>Queer</i>	80.600	An umbrella term for sexual and gender minorities that are not heterosexual or cisgender. Queer may be used by those who reject traditional gender identities as a broader, less conformist, and deliberately ambiguous alternative to LGBT.
<i>QUEST Recipient</i>	80.628 & 80.628.1	Client who is a recipient of Hawaii Medicaid QUEST.
<i>Questioning</i>	80.600	A term used to describe those who are in the process of discovery and exploration about their sexuality orientation or gender identity.
<i>Qui Tam</i>	80.400	Provision that allows private citizens to bring civil actions on behalf of the government in return for an incentive. Promotes the practice of private persons coming forward and aiding the government in pursuing fraud and waste.
<i>Quorum</i>	80.103, 80.505, 80.508, 80.509, 80.510, 80.512, 80.513, 80.514, & 80.515	A simple majority of voting members of the committee present at the meeting or by phone, fax or email to ensure that the discussion and decisions are made by a representative gathering. If voting members are not present or available by phone, fax or email, decisions cannot be reached and must be tabled.
<i>Reasonable Care</i>	80.410	Means the attention that a professional with comparable training and experience in a particular community would give when faced with a similar situation.

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Word (Alphabetical)	Policy #	Definition
Reasonable Cause	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An act or omission which a covered entity or business associate knew, or by exercising reasonable diligence would have known, that the act or omission violated an administrative simplification provision, but in which the covered entity or business associate did not act with willful neglect. 45 CFR 160.401, P04.06 Workforce Sanctions.
Reasonable Cost	80.218	A cost is reasonable if, in its nature or amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the costs.
Reasonable Diligence	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	the business care and prudence expected from a person seeking to satisfy a legal requirement under similar circumstances. 45 CFR 1604.401, P04.06 Workforce Sanctions
Record	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	Any item, collection, or grouping of information that includes PHI and is maintained, collected, used, or disseminated by or for a covered entity.
Recorder	80.103	The person responsible for recording the proceedings of a meeting and for producing the minutes of the meeting in accordance with the Protocol for Recording Minutes of Meetings.
Records	80.118, 80.119, 80.120, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Means any material on which written, drawn, spoken, visual, or electromagnetic information is recorded or preserved, regardless of physical form or characteristics. HRS §487N-1, DOH Identity Theft Policies P26.01-30.01.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Recredentialing	80.308, 80.308.1, 80.308.2, & 80.308.3	A re-verification process of primary source information that may have changed since last reviewed, such as licenses and malpractice claims information.
Redacted	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Means the rendering of data so that it is unreadable or is truncated so that no more than the last four digits of the identification number are accessible as part of the data. HRS §487N-1, P29.01 Social Security Number Redaction.
Referral	80.628 & 80.628.1	Any child or youth referred to a Family Guidance Center (FGC) for an SEBD eligibility determination.
Referral Packet	80.609.01, 80.614, 80.628, 80.628.1,	SEBD Referral Form and all required information necessary to identify a child or youth as qualified to receive intensive mental health services.
Referral Sources	80.628 & 80.628.1	Staff of QUEST Plan, Department of Human Services, Department of Education, Department of Health, Family Court, Attorney General’s Office, private provider, parent/guardian, or others who submit an SEBD referral packet to CAMHD or request support accessing SEBD program services.
Registered	80.804	The assignment of a unique standard electronic identification number which allows services to be tracked and data captured.
Registration	80.310	For purposes of this policy, established administrative procedures to enter the required personnel information of CAMHD clinicians into CAMHMIS.
Rejection	80.614	Action taken by a Provider where a youth is not accepted after a referral packet sent by the BRANCH is received and reviewed.
Remedial Action	80.506	A remedial action is a corrective step or series of corrective steps that will change inappropriate or substandard care to a level of practice that it is meeting CAMHD standards of care.
Reportable Incident	80.805	An unexpected occurrence involving serious challenging behavior or an injury that does not pose a significant risk of harm or death.
Representative Payee	80.811	A person or organization selected to receive cash benefit payments on behalf of a beneficiary (i.e., the client).
Required by Law	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A mandate contained in law that compels an entity to make a use or disclosure of PHI and that is enforceable in a court of law. Required by Law includes, but is not limited to, court orders and court-ordered warrants; subpoenas or summons issued by a court, grand jury, a governmental or tribal inspector general, or an administrative body authorized to require the production of information; a civil or an authorized investigative demand; Medicare conditions of participation with respect to health care providers participating in the program; and statutes or regulations that require the production of information, including statutes or regulations that require such information if payment is sought under a government program providing public benefits. 45 CFR §164.103, P03.10 Required by Law

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Research	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. 45 CFR §164.501, P03.13 Research
Research and Evaluation Team (RET)	80.641	CAMHD’s research staff who work as part of the Program Improvement and Communications Office (PICO). They collaborate closely with the University of Hawai’i Department of Psychology to develop research projects that analyze CAMHD data to understand system functions.
Researcher	80.000	An individual who requests and receives approval to use CAMHD data as a volunteer workforce member under the oversight of the Program Improvement and Communications Office (PICO). This research data may contain Protected Health Information (PHI), personally identifiable information (PII), and other important and sensitive data in the conduct of research. The researcher shall successfully complete all CAMHD research-related and institutional review board requirements. To the extent this data includes PHI that is regulated under HIPAA, refer to this resource for federal reference information: https://www.hhs.gov/hipaa/for-professionals/index.html
Researcher	80.000	An individual who requests and receives approval to use CAMHD data as a volunteer workforce member under the oversight of the Program Improvement and Communications Office (PICO). This research data may contain Protected Health Information (PHI), personally identifiable information (PII), and other important and sensitive data in the conduct of research. The researcher shall successfully complete all CAMHD research-related and institutional review board requirements. To the extent this data includes PHI that is regulated under HIPAA, refer to this resource for federal reference information: https://www.hhs.gov/hipaa/for-professionals/index.html
Resolution	80.103	A motion which has been passed by a majority of the members present at a meeting.
Resource/Utilization Management	80.631, 80.632, 80.633, 80.634, 80.635, 80.629, & 80.630	The function of CSO that produces reports, analyses data and trends, determines the needs for specialized services, facilitates services for challenging youth, monitors utilization services, approves initial and continued stays for specialized services, Acute Psychiatric Hospitalization, Hospital Based Residential, and Community Based Residential High Risk 1 levels of care, and participates in the development and implementation of newly identified services or levels of care.
Respite	80.618	A period of relief for families who have ongoing care giving responsibilities for a child. Respite care can occur in or out of the home depending on the families’ need. Any opportunity that ensures that a child is taken care of while the parent takes a break is considered respite. Respite support services are integrated with other mental health services, as needed to promote coordinated, effective service delivery to the youth and family.
Respite Funds	80.618	Specific funds that are used to compensate a provider of respite supports.
Respite Support	80.618	The provision of care, arranged by the parent(s)/primary caregiver of an identified youth(s) to provide relief to the parent(s)/primary caregiver(s).
Restraint	80.602	The restriction of freedom of movement through personal, drug or mechanical means in order to protect the individual from injury to self or to others. There are no distinguishing time limits among any form of restraint.

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Word (Alphabetical)	Policy #	Definition
Restriction	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Under HIPAA, an individual has a right to request restrictions on the use and disclosure of his/her own PHI. DOH is not required to agree to a restriction. P02.08 Restrictions.
Reviewing Officer	80.306	Level of management above the supervisor who reviews and signs the performance appraisal form.
Risk	80.109	Those factors that could affect confidentiality, availability, and integrity of CAMHD's key information assets and systems.
Role-Based Access	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	DOH must make reasonable efforts to assign individual access to PHI based on that person's role at DOH. Workforce members should only have access to the health information needed to fulfill their job responsibilities. P03.01 Minimum Necessary.
Root Cause Analysis	80.805	A process for identifying the basic or causal factors that underlie variation in performance, including the occurrence or possible occurrence of a sentinel event. A root cause analysis focuses primarily on systems and processes, not individual performance. It progresses from special causes in clinical processes to common causes in organizational processes and identifies potential improvements in processes or systems that would tend to decrease the likelihood of such events in the future, or determines, after analysis, that no such improvement opportunities exist.
RPMS	80.609.01	Resource and Patient Management System.
Sanction	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Formal disciplinary action taken in response to a breach of DOH security and privacy policies. P04.06 Workforce Sanctions
Screeener	80.609	Mental health professional or mental health worker supervised by a mental health professional who have completed training in the criteria for mental health services and the process of eligibility determination.
Screening	80.609	Standardized process to gather sufficient information as to the eligibility of a CAMHD client to arrive at a preliminary judgment as that client's probable eligibility or ineligibility for community mental health services.

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Word (Alphabetical)	Policy #	Definition
SEBD	80.628, 80.628.1, 80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Support for Emotional and Behavioral Development Program. This program is for youth ages 3 through 20, who are recipients of either the Hawaii Medicaid QUEST or FFS Program, and have a CAFAS score 80 or higher, and have a qualifying primary DSM-IV Axis I diagnosis.
SEBD Determination Process	80.628	The FGC Clinical Directors and the CAMHD Medical Director who reviews the referral and makes the determination of eligibility for intensive mental health services.
SEBD Presumptive Eligibility Determination Process	80.628.1	The process by which FGC Psychologists, Social Workers, Clinical Directors, and the CAMHD Medical Director review referrals and make the determination of presumptive eligibility for CAMHD SEBD intensive mental health services.
SEBD Provisional Eligibility Status	80.628.1	the SEBD status category assigned a youth with incomplete or uncertain clinical status (e.g., CAFAS in approximately 60 to 80 range, no Mental Health Assessment) which qualifies the youth to receive SEBD services.
SEBD Review Panel	80.628 & 80.628.1	Two (2) CAMHD FGC Clinical Directors who review reconsiderations of the original SEBD determination process denial. The two (2) Clinical Directors who compose the panel cannot have been involved in the original determination process.
Seclusion	80.602	The involuntary confinement of a youth in a locked and/or secure room to ensure the safety of the youth or others. Any such isolation in a secure environment from which the youth is not potentially free to leave is considered seclusion (e.g., having a staff member block the exit from the unlocked seclusion room).
Secretary	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The U.S. Secretary of Health and Human Services (HHS) or any other officer or employee of HHS to whom the authority involved has been delegated. 45 CFR §160.103, P04.10 Business Associates, P04.13 Notification of Breach of Unsecured PHI
Secured Location	80.402	Area where the fax machine is located that is accessible only by the recipient or person(s) within the program for which the transmission is intended.
Security Audit	80.107	A security audit is a systematic, measurable technical assessment of how the confidentiality, availability and integrity of an organization's information is assured including the effectiveness of the implementation of CAMHD's security policies.
Security Breach (Regarding State ID Theft Laws)	80.118, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Means an incident of unauthorized access to and acquisition of unencrypted or unredacted records or data containing personal information where illegal use of personal information has occurred, or is reasonably likely to occur and that creates a risk of harm to a person. Any incident or unauthorized access to and acquisition of encrypted records or data containing personal information along with confidential process or key constitutes a security breach. HRS §487N-1, DOH Identity Theft Policies P26.01- 30.01

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Word (Alphabetical)	Policy #	Definition
Security Incident	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, 80.847	The attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system.
Security Office	80.110	Staff designated as the security official responsible for the development and implementation of the IIPAA security policies and procedures required for CAMHD.
Sentinel Event	80.602 & 80.805	An unexpected occurrence involving death or serious physical and/or psychological injury, or the risk thereof, requiring immediate investigation and/or administrative response. Serious injury specifically includes loss of limb or function. The phrase "or the risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome.
Serious and Persistent Mental Illness (SPMI):	80.620	Refers to adults with psychiatric diagnoses, typically of adult onset, that are highly disabling for extended periods of time when left untreated including schizophrenia, schizoaffective, bipolar disorders, major depression and borderline personality disorder.
Serious Injury	80.602	Any significant impairment of the physical condition of the youth as determined by qualified medical personnel, including, but not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else.
Serious Occurrence	80.602	A youth's death, serious injury or suicide attempt.
Service Episode	80.804	The period during which services are provided which fall between an admission date and subsequent discharge date.
Service Gaps	80.217	Period of time when consumer does not receive services.
Settlement	80.509	The process of adjusting or determining between an aggrieved party and the CAMHD, where there is a meeting of the minds to a transaction or controversy and an agreement is reached.
Sexual Orientation	80.600	A person's emotional, romantic, and sexual attraction, to individuals of the same sex or of a different sex.
Short Term Commitment	80.609.01	Commitment to the State (HYCF) for a specific period of time, not to exceed one (1) year.
Significant Performance Category	80.306	"Critical" factor that is used to evaluate an employee's performance which the employee must satisfactorily perform to pass the evaluation.
Simple Majority	80.505, 80.509, 80.510, 80.512, 80.513, 80.514, & 80.515	One more than half of committee membership.
Social Authority	80.639	This is a new form of capital based on trust; it is developed when an individual or organization is recognized as an expert in a field or topic, thereby becoming an influencer in that field or area.
Social Media	80.639	Interactive computer-mediated technologies that facilitate the creation or sharing of information, ideas, career interests and other forms of expression via virtual communities and networks. [3] Some of the most popular social media websites include Facebook, Facebook Messenger, YouTube, Instagram, Twitter, Tumblr, LinkedIn, WhatsApp, Pinterest, Reddit, and more.

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Word (Alphabetical)	Policy #	Definition
<i>Social Security Number</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Means a 9-digit number issued by the Social Security Administration to citizens, permanent residents, and temporary (working) residents under section 205(c)(2) of the Social Security Act, codified as 42 U.S.C. § 405(c)(2)(B)(i). DOH Identity Theft Policies P26.01- 30.01
<i>Specially Protected Health Information</i>	80.404	Documentation relating to the presence of AIDS. HIV or any AIDS related diagnosis (HRS 325-101: Haw. Admin. R 17-1401-4(2)); B. Substance abuse records (drug and alcohol) which reflect treatment/management of substance abuse by a federally approved substance abuse program (42 CFR); or use of other substance abuse services (Haw. Admin. R 11-175-31 (a)(5)); C. Documentation relating to mental health diagnosis and treatment (HRS 334 5); D. Records relating to persons with developmental disabilities (HRS 333E-6(4)); E. Information in the records of peer review committees and proceedings; and F. Psychiatric notes.
<i>Specially Protected Health Information</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The following health information: 1. Documentation relating to the presence of AIDS, HIV or any AIDS-related diagnosis; 2. Substance abuse records (drug and alcohol) which reflect treatment/management of substance abuse by a federally funded substance abuse program; or use of other substance abuse services; 3. Documentation relating to mental health diagnoses and treatments.
<i>Staff Meetings</i>	80.103	Meetings held by Family Guidance Centers (FGC) and Central Administration Sections that are chaired by the respective supervisors or designee to conduct the work of the respective sections.
<i>Stakeholder</i>	80.111	An individual or group with an interest in the success of an organization in delivering intended results and maintaining the viability of the organizations products and services.
<i>Standing Committee Meetings</i>	80.103	Include Performance and Improvement Steering Committee (PISC), Safety and Risk Management (SARM), Information Systems Design (ISD), Training, Evidence-Based Services (EBS), Grievance and Appeals, Compliance, Utilization Management (UR), Credentialing, and Policy and Procedures (P&P).
<i>Standing Committees</i>	80.505	Credentialing, Information Systems Design, Grievance And Appeals, Compliances, Policy and Procedures, Safety and Risk Management, Training, Utilization Management, and Evidence-based Services.

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Word (Alphabetical)	Policy #	Definition
State Law	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A constitution, statute, regulation, rule, common law, or other State action having the force and effect of law. 45 CFR §160.202.
Steering Committee	80.101	The Steering Committee is a standing committee made up of representatives from each major section of CAMHD. The SC will review policies as indicated and make recommendations to the CAMHD Administrator.
Student	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An individual who is assigned to DOH for training as part of a formal affiliated program while enrolled in a formal health care training/educational program. [P04.08 Volunteers, Students, and other Workforce Members]
Subcontractor	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person who acts on behalf of a business associate, other than in the capacity of a member of the workforce of such business associate.
Subpoena	80.404, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A written command requiring a witness to come to court to testify and/or produce records (subpoena duces tecum) for use as evidence. P03.05 Judicial, Administrative Proceedings
Subpoena Duces Tecum	80.404	Is a legal document to the custodian of a record, ordering appearance with the designated records, at a specified time and place. The order may be signed by a clerk, judge, or an administrative hearing officer.

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Word (Alphabetical)	Policy #	Definition
<i>Sufficient Evidence</i>	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	Evidence is considered sufficient to draw conclusions, if it is peer-reviewed, is well controlled, directly or indirectly relates the intervention to health outcomes, and is reproducible both within and outside of research settings.
<i>Summary for Employees</i>	80.306	(Form 527): Department of Human Resources Development (DHRD) form to be given to employee upon the commencement of the rating period when the supervisor discusses job duties, expectations/requirement and any goals/projects expected in the rating period.
<i>Summary of Provided Services (SOPS)</i>	80.611	Written summary of all CAMHD services provided to the consumer that includes the name of the CAMHD Care Coordinator (CC), name of provider agency and clinician, and listing of CAMHD services for which payment has been made, including dates and levels of care.
<i>Supervisor</i>	80.306	Person who plans, assigns, and reviews the work of subordinate employees, and is generally responsible for conducting their performance appraisals.
<i>Supervisor Discussion Notes</i>	80.306	(Form HRD 529-E): Department of Human Resources Development (DHRD) form used to keep a record of employee performance throughout the rating period.
<i>Support Services</i>	80.001	Services include clerical support, answering phones, handling the distribution of mail and receiving visitors to the business office.
<i>Surrogate</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	A person, other than an individual's agent or guardian, authorized in accordance with HRS 327E-5, to make health care decisions on behalf of an incapacitated individual. HRS §327E-2, P02.03 Access.
<i>System Review</i>	80.206	A “walk through” of the systems and the processes that generated the sampling unit to identify any problems or weaknesses in the system.
<i>Tag</i>	80.639	A tag is a keyword added to a social media post to categorize content. You can also tag someone in a post or photo, which creates a link to their social media profile and associates them with the content. Users have the option to remove unwanted tags from their profile.
<i>Telecom Request</i>	80.810	Form used by state agencies to request purchase approval from the state’s Department of Accounting and General Services (DAGS) Information and Communications Services Division (ICSD) for telecom equipment/services and to coordinate any moves, changes, additions, or removals of telephone equipment within the agency with ICSD as required.
<i>Termination</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	Voluntary or involuntary end of contract or employment with CAMHD or a CAMHD Contracted Provider Agency.
<i>The Educational Commission for Foreign Medical Graduates (ECFMG)</i>	80.308, 80.308.1, 80.308.2, & 80.308.3	Evaluates foreign medical graduates’ medical school curriculum to ensure that it is in alignment with the United States’ medical school standards.

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Word (Alphabetical)	Policy #	Definition
The National Provider Identifier (NPI)	80.308, 80.308.1, 80.308.2, & 80.308.3	Is a Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification Standard. The NPI is a unique identification number for covered health care providers. Covered health care providers and all health plans and health care clearinghouses must use the NPIs in the administrative and financial transactions adopted under HIPAA. The NPI is a 10-position, intelligence-free numeric identifier (10-digit number). This means that the numbers do not carry other information about healthcare providers, such as the state in which they live or their medical specialty. The NPI must be used in lieu of legacy provider identifiers in the HIPAA standards transactions. As outlined in the Federal Regulation, The Health Insurance Portability and Accountability Act of 1996 (HIPAA), covered providers must also share their NPI with other providers, health plans, clearinghouses, and any entity that may need it for billing purposes. CAMHD requires an NPI for all QMHPs and MHPs, and all paraprofessionals providing and billing for 13101 (Intensive In-Home therapy) services.
Third Party Representative (“TPR”)	80.603	A person who, in a representative capacity and with written consent, files a grievance on behalf of the aggrieved party.
Time Out	80.602	The removal of youth from peers or rewarding situations that does not involve seclusion. Time Out is not used as a primary purpose to confine the youth, only to separate the youth from others. Such a restriction requires constant monitoring by staff. The individual is not physically prevented from leaving the designated time-out area.
Total Vehicle Purchase Price	80.116	the “price-off-the-lot” and includes the sum of: the sales price; taxes; delivery charges; dealer preparation fees; indicated document charges; and any other charge that is required to take possession of the vehicle.
TPO	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Treatment, Payment, Health Care Operations. Generally, covered entities are allowed to use and disclose PHI for TPO without an individual's authorization. 45 CFR §164.501, P02.01 Notice of Privacy Practices, P02.02 Authorizations, P02.04 Accounting of Disclosures, P02.07 Restrictions.
Transaction	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The transmission of information between two parties to carry out financial or administrative activities related to health care including: health care claims, payment and remittance advice, coordination of benefits, claim status, enrollment and disenrollment in a health plan, eligibility for a health plan, premium payments, referral certification and authorization, first report of injury, claims attachments, others prescribed by the Secretary. 45 CFR §160.103.
Transgender	80.600	A person whose gender identity (their understanding of themselves as male or female) does not correspond with their sex assigned at birth. A transgender girl is a girl whose birth sex was male but who understands herself to be female. A transgender boy is a boy whose birth sex was female but who understands himself to be male.

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Word (Alphabetical)	Policy #	Definition
Treatment	80.401	The broad range of crisis, outpatient, intermediate, domiciliary, and inpatient services and care, including diagnostic evaluation, medical, psychiatric, psychological, and social service care, vocational rehabilitation, career counseling, and other special services which may extend to children and adolescents deemed to need mental health services.
Treatment	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The provision, coordination, or management of health care and related services by one or more health care providers, including coordination or management of health care by a health care provider with a third party, and consultation and referral between health care providers relating to a patient. 45 CFR §164.501. P02.01 Notice of Privacy Practices, P02.02 Authorizations, P02.04 Accounting of Disclosures, P02.07 Restrictions
Treatment Team	80.610, 80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	A multi-disciplinary team consisting of the youth, family, service providers, Mental Health Care Coordinators (MHCC), school personnel, and other individuals involved in the welfare of the youth.
Unaffiliated Student	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Student not enrolled in a formal affiliated health care training program, but who is interested in healthcare-related careers. Such students are not involved in direct individual care but may have access to an individual's PHI. P04.08 Volunteers, Students and other Workforce Members
Unit	80.304 & 80.810	For purposes of this policy CAMHD Units include the Family Guidance Center, Family Court Liaison Branch or Central Office.
Unsecured Protected Health Information (UPHI)	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary 45 CFR §164.402, P04.13 Notification of Breach of Unsecured PHI.
URCS	80.629, 80.630, 80.631, 80.632, 80.633, 80.634, & 80.635	The CAMHD CSO Utilization Review Clinical Specialist who is the first-line reviewer for acute psychiatric services.

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Word (Alphabetical)	Policy #	Definition
<i>Use</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	The sharing, employment, application, utilization, examination, or analysis of individually identifiable health information within an entity that maintains such information. 45 CFR §160.103, P02.02 Authorizations.
<i>User(s)</i>	80.107, 80.108.3, 80.109, & 80.108.1	CAMHD staff authorized to maintain or access specified data for specified purposes. Users include, but are not limited to, full- and part-time employees, contractors, business associates, volunteer workers, temporary workers and others granted access.
<i>Utilization Management</i>	80.623 & 80.641	They are a set of techniques used to assess the appropriateness of care before its delivery.
<i>Utilization Review</i>	80.641	This is a retrospective evaluation of services provided to clients to control costs and monitor the quality of care.
<i>Validation</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Verification of the identity and authority of a person who requests PHI. P04.09 Verification of Identity and Authority.
<i>Vendor of Personal Health Records</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An entity, other than a covered entity, that offers or maintains a personal health record.
<i>Violation</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Infringement of the Privacy or Security Rule or other applicable federal/state laws, or failure to comply with an administrative simplification provision. 45 CFR 160.103, P04.06 Workforce Sanctions.
<i>Virus</i>	80.109	Any script, program or code that runs a function not intended by the user.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
<i>Visual Imaging</i>	80.409	The likeness of a consumer recorded through visual means including still photography, digital imaging, videotapes, painting, or drawing. In this policy the term “visual imaging” will be used to identify any such recording of the consumer’s likeness.
<i>Volunteer</i>	80.302, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	An individual who performs uncompensated services for DOH under the direction and control of a DOH supervisor. Volunteers are considered part of the DOH "workforce" (see, below) P04.08 Volunteers, Students, and other Workforce Members
<i>Voting Membership</i>	80.505	The members of the P&P Committee who are identified in this policy as members of the committee.
<i>Vulnerable Adult Abuse</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	physical or psychological abuse or neglect, sexual abuse, financial exploitation, negligent treatment, or maltreatment by a caregiver of an adult, who, because of mental or physical impairment is dependent upon that person, care organization or care facility for personal health, safety, or welfare. HRS §346-222, P03.03 Abuse, Neglect, P03.06 Law Enforcement
<i>Waiver of Authorization or Alteration</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Under limited circumstances, a waiver of the authorization requirement to use or disclose PHI may be obtained from the IRB by the researcher. The waiver can be approved only if specific criteria are met. P03.13 Research.
<i>Whistleblower</i>	80.400	An informant who exposes wrongdoing within an organization in the hope of stopping it.
<i>Willful Neglect</i>	80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Conscious, intentional failure or reckless indifference to the obligation to comply with the administration simplification provision violated. 45 CFR 1604.401, P04.06 Workforce Sanctions.

GLOSSARY OF POLICY DEFINITIONS

Word (Alphabetical)	Policy #	Definition
Workforce	80.307, 80.403, 80.819, 80.820, 80.821, 80.823, 80.824, 80.825, 80.826, 80.827, 80.828, 80.829, 80.830, 80.831, 80.832, 80.833, 80.834, 80.835, 80.836, 80.837, 80.838, 80.839, 80.840, 80.841, 80.842, & 80.847	Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity or business associate, and is under the direct control of the covered entity or business associate, whether or not they are paid by covered entity or the business associate. 45 CFR §160.103.
Written Communication	80.801	For the purpose of this policy, the conveying of written information in the format of memoranda and letters.
Young Adults	80.620	Individuals aged 18 through age 20.
Youth	80.111, 80.600, 80.603, 80.614, 80.618, & 80.622	Child or adolescent with emotional and/or behavioral challenges receiving intensive mental health services from a Child and Adolescent Mental Health Division (CAMHD) Family Guidance Center (Branch).
Youth on Parole	80.609.01	Following commitment to HYCF, and upon demonstrating marked improvement in behaviors and attitudes, the youth are eligible for parole back to the community. Youth on parole are still under the jurisdiction of the State (HYCF). Rarely is a youth on both probation and parole.
Youth on Probation	80.609.01	Youth on Probation are supervised by the Judiciary. (In the vast number of cases in Hawaii, youth adjudicated for a criminal offense are initially placed on probation). If they are non-adherent with the terms of their probation and/or commit additional offenses, they may be committed to the State (HYCF).