

## GLOSSARY

The following is a list of abbreviations, acronyms and definitions used in the Behavioral Health Services manual chapter.

**Assertive Community Treatment (ACT)** - Services provided as interventions that address the functional problems of individuals who have the most complex and/or pervasive conditions associated with a major mental illness or co-occurring addictions disorder.

**Community Psychiatric Support and Treatment (CPST)** - A comprehensive service which focuses on reducing the disability resulting from mental illness, restoring functional skills of daily living, building natural supports and solution-oriented interventions intended to achieve identified goals or objectives as set forth in the individualized treatment plan.

**Crisis Intervention (CI)** - Services provided to a person who is experiencing a psychiatric crisis and are designed to interrupt and/or ameliorate a crisis experience, through a preliminary assessment, immediate crisis resolution and de-escalation and referral and linkage to appropriate community services to avoid more restrictive levels of treatment.

**Crisis Stabilization** - Services intended to provide short-term and intensive supportive resources for the youth and his/her family. The intent of this service is to provide an out-of-home crisis stabilization option for the family in order to avoid psychiatric inpatient and institutional treatment of the youth by responding to potential crisis situations.

**EP** - A service provided as part of Medicaid's Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program.

**FDA** – the Food and Drug Administration (FDA) is an agency within the U.S. Department of Health and Human Services. The FDA's organization consists of the Office of the Commissioner and four directorates overseeing the core functions of the agency: Medical Products and Tobacco, Foods, Global Regulatory Operations and Policy, and Operations.

**Federally Qualified Health Center (FQHC)** - An entity authorized under §330 of the Public Health Service (PHS) Act to receive grant funding to provide health care services and improve the health status of medically underserved populations. The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) certifies FQHC status.

**Human Services Field** - Academic program with a curriculum content in which at least 70 percent of the required courses are in the study of behavioral health or human behavior.

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**CHAPTER 2: BEHAVIORAL HEALTH SERVICES**

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**Licensed Mental Health Professional (LMHP)** - An individual who is licensed in the State of Louisiana to diagnose and treat mental illness or substance use, acting within the scope of all applicable State laws and their professional license.

**Medically Necessary Services** – Health care services that are in accordance with generally accepted evidence-based medical standards or that are considered by most physicians (or other independent licensed practitioners) within the community of their respective professional organizations to be the standard of care.

**Multi-Systemic Therapy (MST)** - Services that provide an intensive home/family and community-based treatment for youth who are at risk of out-of-home placement or who are returning from out-of-home placement.

**Outpatient Therapy by Licensed Practitioners - Other Licensed Practitioner Outpatient Therapy** - Individual, family, group outpatient psychotherapy, mental health assessment, evaluation, testing, medication management, psychiatric evaluation, medication administration, individual therapy with medical evaluation and management and case consultation.

**Psychosocial Rehabilitation (PSR)** - Services designed to assist the individual with compensating for or eliminating functional deficits and interpersonal and/or environmental barriers associated with their mental illness.

**Rural Health Clinic (RHC)** - An entity authorized under the Rural Health Clinic (RHC) Act of 1977 to encourage and stabilize the provision of outpatient primary care in rural areas through cost-based reimbursement. These entities may be independent (a free-standing practice that is not part of a hospital, skilled nursing facility or home health agency) or provider-based (an integral and subordinate part of a hospital, skilled nursing facility or home health agency).