

**RFP STATEMENT OF WORK  
CalWORKs PROGRAM**

**LIST OF ACRONYMS**

1)	<b>AFDC</b>	Aid to Families with Dependent Children
2)	<b>BOS</b>	Board of Supervisors
3)	<b>CalWORKs</b>	California Work Opportunity and Responsibility to Kids
4)	<b>CBO</b>	Community Based Organization
5)	<b>CCS</b>	Community Client Services
6)	<b>CDR</b>	Contract Discrepancy Report
7)	<b>CIBHS</b>	California Institute of Behavioral Health Solutions
8)	<b>COD</b>	Co-Occurring Disorders
9)	<b>CPA</b>	Certified Public Accountant
10)	<b>CR</b>	Cost Reimbursement
11)	<b>DDE</b>	Direct Data Entry
12)	<b>DMH</b>	Department of Mental Health
13)	<b>DMV</b>	Department of Motor Vehicles
14)	<b>DPSS</b>	Department of Public Social Services
15)	<b>DSM-5</b>	Diagnostic and Statistical Manual of Mental Disorders, 5 <sup>th</sup> Edition
16)	<b>DV</b>	Domestic Violence
17)	<b>EDI</b>	Electronic Data Interchange
18)	<b>EW</b>	Eligibility Worker
19)	<b>FY</b>	Fiscal Year
20)	<b>GAIN</b>	Greater Avenues for Independence
21)	<b>GEARS</b>	GAIN Employment Activity and Reporting System
22)	<b>GSW</b>	GAIN Services Worker
23)	<b>HFSS</b>	Homeless Family Solutions System
24)	<b>HIPAA</b>	Health Insurance Portability and Accountability Act
25)	<b>IBHIS</b>	Integrated Behavioral Health Information System
26)	<b>LOC</b>	Level of Care
27)	<b>MHP</b>	Mental Health Promotion
28)	<b>MOU</b>	Memorandum of Understanding
29)	<b>NGA</b>	Non-Governmental Agency
30)	<b>NPI</b>	National Provider Identifier
31)	<b>PC</b>	Personal Computer
32)	<b>PHI</b>	Protected Health Information
33)	<b>PRS</b>	Performance Requirements Summary
34)	<b>RFP</b>	Request For Proposals
35)	<b>SA</b>	Service Planning Area
36)	<b>SD</b>	Supervisorial District
37)	<b>SE-IPS</b>	Supported Employment Individual Placement and Support
38)	<b>SFPR</b>	Single Fixed Point Response
39)	<b>SOW</b>	Statement of Work
40)	<b>SUD</b>	Substance Use Disorder
41)	<b>TANF</b>	Temporary Assistance for Needy Families
42)	<b>URM</b>	Utilization Review Matrix
43)	<b>WIC</b>	Welfare and Institutions Code
44)	<b>WtW</b>	Welfare-to-Work

**TERMS & DEFINITIONS**

**Access** - "Access" means the extent to which an individual who needs mental health services is able to receive them, based on conditions such as availability of services, cultural and language appropriateness, transportation needs, and cost of services.

**Administrative Directives** – Documents used to disperse newly enacted regulations or to update existing ones as determined by DPSS. These updates supplement and enhance the GAIN Program Handbook and should be filed therein under the applicable chapter and subject matter.

**Assessment (DPSS)** - This is a primary tool for developing the WtW plan. The evaluation of work history, inventory of employment skills, knowledge and abilities; education history, present educational competency level; level of English competency and need for English-as-a-Second Language courses; work and educational history; inventory of their skills, knowledge, and abilities acquired in the country in which they were raised, educated or had prior work history; primary language literacy level, need for supportive services; employability given current skills and local labor market conditions; and physical limitations or mental conditions that limit the ability to work or participate.

**Assessment (Mental Health)** - "Assessment" means a professional review and evaluation of an individual's mental health needs and conditions, in order to determine the most appropriate course of treatment, if indicated, and may ascertain eligibility for specific entitlement or mandated programs.

**Barriers** – Personal or other problems/issues that interfere with participation in WtW activities, employment, and job search. This can be temporary or long term.

**Board Letter** - This is the official proposal/request to the Board of Supervisors to use department funding for a specific purpose. The Board Letter must be approved by the Supervisors in order for any funding to be released.

**Board of Supervisors (BOS)** - This refers to the Los Angeles County Board of Supervisors that oversee all county departments, including DMH. This Board is an elected body.

**California Institute for Behavioral Health Solutions (CIBHS)** - The mission of CIMH is to promote excellence in mental health services through training, technical assistance, research, and policy development.

**California Work Opportunity and Responsibility to Kids (CalWORKs) (DPSS)** – California's name for the federal TANF Program to provide temporary financial assistance and employment-focused services to families with minor children who may or may not have income, and their property limit is below state maximum limits for family size.

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**Case Management (DMH)** - Targeted Case Management are services that assist a client to access needed medical, educational, social, pre-vocational, vocational, rehabilitative, or other community services for eligible clients. The service activities may include, but are not limited to, communication, coordination, and referral; monitoring service delivery to ensure client's access to service and the service delivery system; monitoring of the client's progress; and plan development.

**Case Management (DPSS)** – The coordination of services and activities in a linguistic and the culturally appropriate manner, including but not limited to: assessing the participant's employability and need for supportive services; tracking and evaluating the participant's attendance and progress in work activities; identifying and authorizing supportive services; making a recommendation of cause for failure to participate; referring the participant to community resources for work activities, counseling and assisting in accessing community resources and resolving problems; documenting in the physical and electronic case file; and completing other required documents.

**Cash Aid** – The CalWORKs aid payment.

**Community Based Organization (CBO)** - An organization that demonstrates their presence and their level of commitment and experience to the Service Area(s) to be served by them and their collaboration with other agencies in the community.

**Collateral** - A service activity to a significant support person in a client's life with the intent of improving or maintaining the mental health status of the client. The client may or may not be present for this service activity. Outside agency staff, school teachers, and board and care operators are **not** significant support persons.

**Community Client Services (CCS)** – A service directed to a specific population.

**Community Mental Health Clinic** - "Community clinic" means a clinic operated by a tax-exempt nonprofit corporation that is supported in whole or in part by donations, bequests, gifts, grants, government funds, or contributions. Any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. These clinics provide essential health services to primarily uninsured and under-served men, women, and children.

**Community Outreach Services** - Services provided to the community-at-large, who include special population groups, human service agencies, and individuals and families who are not clients of the mental health system.

**Co-Occurring Disorders (COD)** - "Co-Occurring disorders" means two or more disorders occurring for one individual simultaneously. Clients said to have COD have more than one mental, developmental, or substance-related disorder, or a combination of such disorders. COD exists when at least one disorder of each type can be established independent of the other and is not simply a cluster of symptoms resulting from a single disorder.

**Contract Discrepancy Report** - A written report prepared by the County to identify Contractor's specific failures in meeting contract standards.

**Contract Provider** - A person/group/organization that contracts with DMH to provide any type of mental health services (e.g., direct services, indirect services, consultation).

**Cost Reimbursement (CR)** - The arrangement for the provision of mental health services based on the reasonable actual and allowable costs of services provided under this Agreement, less all fees paid by or on behalf of patients/clients and all other revenue, interest and return resulting from the same services.

**Crisis Intervention** - A service lasting less than 24 hours to or on behalf of a client for a condition that requires a more timely response than a regularly scheduled visit and is delivered at a site other than a Crisis Stabilization program. Service activities include but are not limited to Assessment, Collateral, and Therapy.

**Credentialing** - A process of review to approve a provider who applies to participate in a health plan. Specific criteria and prerequisites are applied in determining initial and ongoing participation in the health plan.

**Deputy Director** - An executive management position in the DMH that may have responsibility for multiple Service Areas (of which DMH has 8) as well as provide oversight for a particular type of Countywide program (e.g. Adult Systems of Care); and alternatively, may have responsibility for certain administrative functions (e.g., Program Support, Planning, and Training).

**Diagnostic and Statistical Manual of Mental Disorders, 5th. Edition (DSM 5)** - Manual that is published by the American Psychiatric Association and provides diagnostic criteria and other information related to all psychiatric disorders.

**Director** - Los Angeles County's Director of Mental Health or his/her authorized designee.

**Directly Operated Facility(ies)** - County mental health service delivery site that operates under the DMH's jurisdiction, and are staffed by County employees.

**Domestic Violence** - A pattern of abusive behaviors by one or both partners in an intimate relationship such as marriage, dating, family, friends or cohabitation.

**Electronic Data Interchange** - A set of standards for structuring information to be electronically exchanged between and within businesses, organizations, government entities and other groups.

**Electronic Health Record** - An electronic health record provides secure, real-time, patient-centric information to aid clinical decision-making by providing access to a patient's health information at the point of care.

**Eligibility Worker (EW)** – The County employee responsible for the initial and ongoing eligibility determination for CalWORKs assistance.

**Episode Data** - Information collected regarding a patient that is associated with an Episode of Care.

**Episode of Care** - The time period between the opening and closing of a case within a mental health provider site and the services delivered during that time period through that provider site. It is possible for a client to have multiple episodes of care open at a given point of time.

**Evidence-based Practice** - "Evidence-based Practice" means the range of treatment and services of well-documented effectiveness. An evidence-based practice has been, or is being evaluated and meets the following criteria:

- Has some quantitative and qualitative data showing positive outcomes, but does not yet have enough research or replication to support generalized positive public health outcomes.
- Has been subject to expert/peer review that has determined that a particular approach or strategy has a significant level of evidence of effectiveness in public health research literature.

**Exemption** – A condition or circumstance that excludes the recipient from participation in a WtW activity for as long as the condition or circumstance continues to exist, subject to frequent review.

**Fiscal Year** - County's Fiscal Year which commences July 1 and ends the following June 30.

**GAIN** – Acronym for "Greater Avenues for Independence", program established on September 26, 1985 with the passage of the State of California Assembly Bill 2580. The GAIN Program establishes a comprehensive system of services to assist CalWORKs applicants/recipients in obtaining unsubsidized employment.

**GAIN Services Worker (GSW)** – The employee of the DPSS GAIN Line Operations who directly provides case management to GAIN program participants.

**GEARS** – GEARS is the acronym for "GAIN Employment Activity and Reporting System", which is the automated data management system used to support the GAIN program in Los Angeles County by tracking participants, authorizing payments, generating reports, maintaining inventories of available resources, and providing program monitoring data.

**Group Therapy** - Group Therapy is a mental health services activity delivered to more than one client at the same time (this includes services to a family/families or other collaterals when claims will be submitted for more than one client represented during the contact) which focuses on the mental health needs of the client(s).

**Guide to Procedure Codes** - A manual created by DMH that defines specific mental health services covered under this contract and the acceptable codes that can be used to claim those services.

**Health Insurance Portability and Accountability Act (HIPAA)** - HIPAA was enacted by the U.S. Congress in 1996. Title II of HIPAA defines numerous offenses relating to health care and sets civil and criminal penalties for them. It also creates several programs to control fraud and abuse within the health care system. However, the most significant provisions of Title II are its Administrative Simplification rules. Title II requires the Department of Health and Human Services (HHS) to draft rules aimed at increasing the efficiency of the health care system by creating standards for the use and dissemination of health care information.

**Individual therapy** - A service activity which is a therapeutic intervention that focuses primarily on symptom reduction as a means to improve functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.

**Intervention** - "Intervention" means the act of intervening, interfering or interceding with the intent of modifying the outcome. In health and mental health, an intervention is usually undertaken to help treat or cure a condition.

**Integrated System (IS)** - A custom-developed Web-based wrapper of the Mental Health Management Information System (MHMIS) developed in order to generate HIPAA-compliant claims. Internal Services Department hosts this application that runs on the Intel platform.

**Interns** – Interns, for the purposes of this solicitation, are students who have obtained a minimum of a master's degree in their clinical discipline and who obtain skills in a new career through on-the-job training as part of their school requirements, rather than employment.

**Los Angeles Mental Health Plan System (LAMHPS)** - A browser-based system used by Provider Relations to assist in maintaining credentials for contract providers. The LAMHPS is on an SQL server that is located in the Provider Relations office. The system contains information on:

- Credentials
- Contracts
- Demographics
- Group Members/Staff
- Billing Address

- License Number
- Languages
- Specialties
- Contact Persons

The data for this system is keyed in by the Provider Relations staff. There is an external interface with the MHMIS. The provider ID and license number is extracted from LAMHPS and stored in a DB2 table on MHMIS.

**Los Angeles Public Administration/Guardian Information Systems (LAPIS)** - Information system that provides accounting, information management, and office automation for conservatorship, investigation and case management, placement tracking, funeral arrangement, and fiscal tracking.

**Legal Entity** - The legal organization structure under California law.

**Maximum Contract Amount (MCA)** - The sum total of all "Allocations" shown in the Financial Summary; except that the "MCA" shall not include "Third Party Revenue" shown in the Financial Summary.

**Medical Director** - The psychiatrist who is responsible for the supervision of the psychiatric/medical service and leadership in the development and execution of clinical services provided under the DMH.

**Medication Support** - Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biological necessary to alleviate the symptoms of mental illness which are provided by a staff person, within the scope of practice of his/her profession.

**Mental Health Disorder** - "Mental Health Disorder" means a diagnosable illness that significantly interferes with an individual's cognitive, emotional or social abilities.

**Mental Health Promotion** - "Mental Health Promotion" means an action or series of actions taken to emphasize mental health and well-being in the community.

**Mental Health Rehab Option** - A service activity which includes assistance in improving, maintaining, or restoring one or more individuals' functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, and support resources.

**Mental Health Services** - "Mental Health Services" mean those individual or group therapies and interventions that are designed to provide reduction of mental disability and improvement or maintenance of functioning consistent with the goals of learning, development, independent living and enhanced self-sufficiency and that are not provided as a component of adult residential services, crisis residential treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment

intensive. Service activities may include but are not limited to assessment, plan development, therapy, rehabilitation and collateral.

**National Provider Identifier (NPI)** - A unique, ten-digit numeric identifier assigned to covered health care providers by the National Plan and Provider Enumeration System. This identifying number does not carry any information about health care providers, such as the state in which they practice or their provider type or specialization. The intent of the NPI is to improve the efficiency and effectiveness of electronic transmission by allowing providers and business entities to submit the same identification number(s) to all payers, such as insurance plans, clearinghouses, systems vendors, and billing services.

**Negotiation Package** - Detailed documents submitted by Contractor consisting of five major parts: Agency Identification; Program Description; Budget; Corporate Capability; and Required Supplemental Documentation.

**Net Program Budget** - The MCA which is the sum total of all "Allocations" and "Pass Through" amounts shown in the Financial Summary. Unless otherwise provided, or separately agreed to in writing between the parties, it is the intent of the parties that the Net Program Budget shall be equal to the MCA.

**Non-Compliance** – The process by which the County penalizes participants who fail to meet the requirements of the GAIN program. Although the GAIN program's mission is to increase participation and work with the individual in achieving employment and dependency from CalWORKs, sanctions via non-compliance procedures can be an effective tool in securing participation when all other efforts fail.

**Non-governmental Agency (NGA)** - Any organization other than a unit of government or agency. This includes private profit and nonprofit organizations.

**Onset** - "Onset" means the beginning of a serious psychiatric illness that can be diagnosed by the DSM IV. In this respect, onset can include the onset of depression in an older adult or a new mother experiencing the onset of post-partum depression. Onset can apply to any psychiatric illness. Individuals may experience onset of a serious psychiatric illness a number of times.

**Oral Presentation** - An explanation and/or clarification of information stated in the Proposal. Presentations may be requested by the Proposer or the Department.

**Participant** – A person who receives CalWORKs WtW benefits and services. (i.e., a client).

**Patient's Rights Office** - The Patients' Rights Office of the Los Angeles County DMH was created in response to legislation requiring each county mental health director to appoint a patients' rights advocate(s) to protect and further the Constitutional and statutory rights of mental health care recipients. Some of the duties of this office include;

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investigation of complaints, representation of patients at certification review and medication capacity hearings, beneficiary services program, residential care advocacy, minors' rights program, jail advocacy program, LPS designation functions, training and consultation, monitoring Electroconvulsive treatment (ECT), data collection, legislative interaction, missing person locator and peer advocacy program.

**Peer Support** - When people such as colleagues, members of self help organizations and others meet as equals to give each other emotional or practical support on a reciprocal basis.

**Pre-Screen Proposals** - Using the Pre-Evaluation tool, Contracts Division staff determines if the Proposer's documents demonstrate general responsiveness to the RFP and meet minimum requirements.

**Program Manager** - Program Manager oversees personal, budget, and hiring of their specific program.

**Proposer** - Agency applying to provide mental health services in response to a RFP.

**Protected Health Information (PHI)** - Any information about health status, provision of health care, or payment for health care that can be linked to an individual. This term is specifically defined under HIPAA.

**Quality Assurance (QA) Activities** - Indirect activities defined by the Federal government that assist a Local Mental Health Plan in insuring and improving the quality of care delivered by its organization that are not provided as a service to or in relation to a specific client of the Department. Claiming for these services is currently paper-based. Only licensed professionals may claim for QA activity.

**Quality Improvement Program** - A DMH program involving DMH leadership, management, staff, consumers and family members intended to create and sustain a culture of system wide involvement and continuous improvement to the delivery of care.

**Qualified Proposer** - A bidder, lawfully able to conduct business in the state, which is solvent, not in financial distress, and is willing and able to meet the requirements of the RFP.

**Recovery** - Recovery is a goal for mental health care, in which consumers are able to self-direct their lives in a positive manner outside of a mental health system. Recovery will be individualized for every person.

**Referral** - "Referral" means the process of sending an individual from one practitioner to another for health care, mental health or other services and supports.

**Request for Proposals (RFP)** - All documents, whether attached or incorporated by reference, utilized for soliciting proposals. Solicitation based on proposed solutions in response to a defined need of the County.

**Rehabilitation Option/Targeted Case Management Manual** - SDMH's Short-Doyle/Medi-Cal Manual for the Rehabilitation Option and Targeted Case Management.

**Sanction** – A penalty consisting of a reduction in the family's grant by removing a non-complying participant from the Assistance Unit (AU) for a period of time. The term "sanction" applies when participant fails or refuses, without good cause, to participate in a mandated activity associated with WtW requirements.

**Screening** - "Screening" means a process used to identify individuals with an increased risk of having mental health disorders that warrant immediate attention, intervention, or more comprehensive review.

**Serious Mental Illness or Disorder** - "Serious Mental Illness or Disorder" means a mental disorder that is severe in degree and persistent in duration and that may cause behavioral disorder or impair functioning so as to interfere substantially with activities of daily living. Serious mental disorders include schizophrenia, major affective disorders, and other severely disabling mental disorders.

**Service Planning Areas** - Los Angeles County is administratively divided into eight (8) geographically-based Service Planning Areas, also referred to as "Service Areas". This organizational structure facilitates closer coordination among agencies providing services in that geographic area.

**Service Function Code** - SFC, as defined by Director, for a particular type of mental health service, and/or Title XIX Medi-Cal administrative claiming activity.

**Single Fixed Point of Responsibility (SFPR)** - A specifically designated individual or team within a clinic or agency who has responsibility for maintaining the Client Care Coordination Plan and for coordinating and authorizing services provided to clients who are receiving ongoing mental health services.

**Severely and Persistently Mentally Ill (SPMI)** - SPMI can be severe and persistent but people can recover from it. SPMI includes mental, behavioral and emotional disorders. SPMI symptoms cause functional impairment and/or substantially interfere with or limit one or more major life activities. This term applies only to adults.

**State General Fund (SGF)** - California SGF used as Federal Financial Program match.

**State** - The State of California.

**Statement of Work (SOW)** - A written description of services desired by County for a Specific Work Order.

**Substance Use/Abuse** - The overindulgence in and/or dependence on a drug or other chemical leading to effects that are detrimental to the individual's physical and mental health, or the welfare of others.

**Threshold Language** - The SDMH tracks how many people are served in each county in mental health. If a county has 3,000 Medi-Cal consumers that speak a certain language then that language becomes a "threshold language" and the county is required to provide services and written materials in that language. Los Angeles County has 13 threshold languages, most counties have 1-3 languages.

**Title IV** - Title IV of the Social Security Act, 42 United States Code Section 601 et seq.; XX. "Title XIX" means Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.

**Title XXI** - Title XXI of the Social Security Act, 42 United States Code Section 1396 et seq.

**Triage** - A process for sorting injured people into groups based on their need for immediate medical treatment.

**UMDAP** - SDMH's Uniform Method of Determining Ability to Pay. Process by which annual liability is determined.

**Unit of Service** - The increment unit of time used to capture the quantity of services provided (e.g. 1 minute = 1 Unit of Service) during mental health service procedure. Claims are generated based upon service provided and multiplied by the rate for that procedure.

**Vision** - Refers to the DMH vision statement: "To improve the quality of life in the County by providing responsive, efficient, and high quality public services that promote the self-sufficiency, well being and prosperity of individual families, business and communities".

**Volunteers** - People who work on behalf of others without being motivated by financial or material gain.

**Welfare and Institutions Code (WIC)** - Code enacted to insure the rights or physical, mental or moral welfare of children are not violated or threatened by their present circumstances or environment. WIC establishes programs and services designed to provide protection, support or care of children and provides protective services to the fullest extent deemed necessary by the juvenile court, probation department or other public agencies designated by the Board of Supervisors to perform the duties prescribed by this code.

**Welfare-to-Work Plan** – A plan developed with the participant based on an assessment. Of a participant's skills, education, and work history. The plan includes specific activity assignments, the hours of participation, services and time frames for completing the assigned WtW activity. Additionally, the plan is used to guide the participant into unsubsidized employment. Approved work activities include: English-as-a-Second Language training, unsubsidized employment, on-the-job training, job search and job readiness assistance, community service, work experience, vocational training, community service, mental health, substance abuse and domestic violence treatment services, and educational and job skills training directly related to employment.

**Welfare-to-Work Activities** – A list of allowable welfare-to-work activities to which the participant may be assigned as specified under the CalWORKs program rules and regulations.

**Work Participation Rate Requirements** – The number of hours per week a participant is required to engage in WtW activities and the federal requirements for states and counties to have a percentage of participants meeting these rates.

RFP Terms and Definitions updated 9/25/2014