

## Exhibit A - Definitions

In addition to any terms that may be defined elsewhere in this Contract and with the following exceptions and additions, the terms in this Contract have the same meaning as those terms appearing in OARs 309-012-0140, 309-016-0605, 309-032-0180, 309-032-0860, 309-032-1505, 309-033-0210, and 410-141-3000. The order of preference for interpreting conflicting definitions in this Contract is (in descending order of priority) CCO Administrative Rules of OHA, General Rules of OHA, Addictions and Mental Health Rules of OHA, and the definitions below. The following terms shall have the following meanings when capitalized:

*[Definitions from Attachment 4 to the RFA will be included, together with the following definitions:]*

1. **“Acute Inpatient Hospital Psychiatric Care”** means acute care provided in a psychiatric hospital with 24-hour medical supervision.
2. **“Assessment”** means the determination of a person's need for Covered Services. It involves the collection and evaluation of data pertinent to the person's history and current problem(s) obtained through interview, observation, and record review.
3. **“Business Day”** means any day except Saturday, Sunday or a legal holiday. The word "day" not qualified as Business Day means calendar day.
4. **“Certified or Qualified Health Care Interpreter”** means a trained person who is readily able to communicate with a person with limited English proficiency and to accurately translate the written or oral statements of the person with limited English proficiency into spoken English, and who is readily able to translate the written or oral statements of other persons into the spoken language of the person with limited English proficiency. A certified Health Care Interpreter is trained and has received certification from a national certification body; A qualified Health Care Interpreter is trained and has demonstrated language proficiency in English and a second language where certification is not possible using a standardized, nationally recognized language proficiency assessment.
5. **“Chemical Dependency Provider”** means a practitioner approved by OHA to provide publicly funded alcohol and drug abuse Chemical Dependency Services.
6. **“Civil Commitment”** means the legal process of involuntarily placing a person, determined by the Circuit Court to be a mentally ill person as defined in ORS 426.005 (1) (d), in the custody of OHA. OHA has the sole authority to assign and place a committed person to a treatment facility. OHA has delegated this responsibility to the Community Mental Health Program Director.
7. **“Clinical Reviewer”** means the entity individually chosen to resolve disagreements related to a Member's need for LTPC immediately following an Acute Inpatient Hospital Psychiatric Care stay.
8. **“Community”** means the groups within the geographic area served by a CCO and includes groups that identify themselves by age, ethnicity, race, economic status, or other defining characteristic that may impact delivery of health care services to the group, as well as the governing body of each county located wholly or partially within the coordinated care organization's service area.
9. **“Coordinated Care Services”** means those Covered Services that Contractor agrees to provide in the Statement of Work, Exhibit B, Part 1 through 10 of this Contract, in exchange for a CCO Payment.
10. **“Cultural Competence”** Cultural Competence refers to the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, disabilities, religions, genders, sexual orientation and other diversity factors in a manner

that recognizes, affirms and values the worth of individuals, families and communities and protects and preserves the dignity of each. OAR 415-056-0005. Operationally defined, cultural competence is the integration and transformation of knowledge about individuals and groups of people into specific standards, policies, practices, and attitudes used in appropriate cultural settings to increase the quality of services, thereby producing better outcomes.

11. **“Early Intervention”** means the Provision of Covered Services directed at preventing or ameliorating a mental disorder or potential disorder during the earliest stages of onset or prior to onset for individuals at high risk of a mental disorder.
12. **“Electronic Health Record”** means an electronic record of an individual’s health-related information that conforms to nationally recognized interoperability standards and that can be created, managed and consulted by authorized clinicians and staff across more than one health care provider.
13. **“Emergency Psychiatric Hold”** means the physical retention of a person taken into custody by a peace officer, health care facility, State Hospital, hospital or nonhospital facility as ordered by a physician or a CMHP director, pursuant to ORS Chapter 426,.
14. **“Evaluation”** means a psychiatric or psychological Assessment used to determine the need for mental health or chemical dependency services. The Evaluation includes the collection and analysis of pertinent biopsychosocial information through interview, observation, and psychological and neuropsychological testing. The Evaluation concludes with a five axes Diagnosis of a DSM multiaxial Diagnosis, prognosis for rehabilitation, and treatment recommendations.
15. **“Family”** means parent or parents, legal guardian, siblings, grandparents, spouse and other primary relations whether by blood, adoption, legal or social relationship.
16. **“Geropsychiatric Treatment Service” or “GTS”** means four units at the State hospital serving frail elderly persons with mental disorders, head trauma, advanced dementia, and/or concurrent medical conditions who cannot be served in community programs.
17. **“Innovator Agent”** means an Authority employee who serves as the single point of contact between a CCO and the Authority.
18. **“Intensive Psychiatric Rehabilitation”** means the application of concentrated and exhaustive treatment for the purpose of restoring a person to a former state of mental functioning.
19. **"Invoiced Rebate Dispute"** means a disagreement between a pharmaceutical manufacturer and the Contractor regarding the dispensing of pharmaceuticals, as submitted by OHA to Contractor through the Pharmacy Drug Rebate Dispute Resolution Process in Schedule 4, Section 1, Subsection c.
20. **“Learning Collaborative”** means a program in which CCOs, state agencies, and patient- centered primary care homes can:
  - a. Share information about quality improvement;
  - b. Share best practices and emerging practices that increase access to culturally competent and linguistically appropriate care and reduce health disparities;
  - c. Share best practices that increase the adoption and use of the latest techniques in effective and cost-effective patient centered care;

- d. Coordinate efforts to develop and test methods to align financial incentives to support patient centered primary care homes;
  - e. Share best practices for maximizing the utilization of patient centered primary care homes by individuals enrolled in medical assistance programs, including culturally specific and targeted outreach and direct assistance with applications to adults and children of racial, ethnic and language minority communities and other underserved populations;
  - f. Coordinate efforts to conduct research on patient centered primary care homes and evaluate strategies to implement the patient centered primary care home to improve health status and quality and reduce overall health care costs; and
  - g. Share best practices for maximizing integration to ensure that patients have access to comprehensive primary care, including preventative and disease management services.
21. **“Licensed Mental Health Practitioner” or “LMP”** means a person who is a physician, nurse practitioner or physician's assistant licensed to practice in the State of Oregon whose training, experience and competence demonstrates the ability to conduct a comprehensive mental health Assessment and provide Medication Management. The Local Mental Health Authority, pursuant to ORS 430.630 (LMHA) or Contractor must document that the person meets these minimum qualifications.
22. **“Local Mental Health Authority” or “LMHA”** means local mental health authority” means one of the following entities:
- a. The board of county commissioners of one or more counties that establishes or operates a community mental health program;
  - b. The tribal council, in the case of a federally recognized tribe of Native Americans that elects to enter into an agreement to provide mental health services; or
  - e. A regional local mental health authority comprising two or more boards of county commissioners.
23. **“Long-Term Psychiatric Care” or “LTPC”** means inpatient psychiatric services delivered in an Oregon State-operated Hospital after Usual and Customary care has been provided in an Acute Inpatient Hospital Psychiatric Care Setting or The Joint Commission (TJC) Psychiatric Residential Treatment Facility for children under age 18 and the individual continues to require a hospital level of care.
24. **“Material Change”** for purposes of the reporting required in Exhibit G, means any circumstance in which Contractor experiences a change in operations that is reasonably likely to affect Contractor’s Participating Provider capacity or reduce or expand the amount, scope or duration of Covered Services being provided to Members including but not limited to:
- a. Changes in Contractor’s service delivery system that may directly impact the provision of services to Contractor’s Members or affect Provider participation;
  - b. Expansion or reduction of a Service Area requiring a Contract amendment, particularly related to Provider capacity and service delivery in the affected Service Area;
  - c. Modifications of Provider payment processes or mechanisms that could affect Provider participation levels;

- d. Enrollment of a new population (e.g., roll over or new OHP benefit package recipients);
  - e. Loss of or addition of a Participating Provider, specialty Provider, clinic or hospital, previously identified on the Provider Capacity Report that will significantly impact Contractor's Members.
25. **"Member"** means an OHP Client who is enrolled with Contractor under this Contract.
26. **"Mental Health Practitioner"** means a person with current and appropriate licensure, certification, or accreditation in a mental health profession, which includes but is not limited to: psychiatrists, psychologists, registered psychiatric nurses, QMHAs, and QMHPs.
27. **"Metrics and Scoring Committee"** means the committee established in accordance with ORS 414.638(1).
28. **"Oregon Integrated and Coordinated Health Care Delivery System"** means the system for OHP and individuals who are dually eligible for Medicare and Medicaid that makes CCOs accountable for care management and provision of integrated and coordinated health care for each organization's members, managed within fixed global budgets, by providing care so that efficiency and quality improvements reduce medical cost inflation while supporting the development of regional and community accountability for the health of the residents of each region and community, and while maintaining regulatory controls necessary to ensure quality and affordable health care for all Oregonians.
29. **"Oregon Patient/Resident Care System" or "OP/RCS"** means the OHA data system for persons receiving services in the Oregon State Hospitals and selected community hospitals providing Acute Inpatient Hospital Psychiatric services under contract with OHA.
30. **"Outreach"** means services provided away from the service provider's office, clinic or other place of business in an effort to identify, engage or serve Members who might not otherwise access, obtain, keep or benefit from usual appointments. Such services include, but are not limited to, community-based visits with a Member in an attempt to engage him or her in Medically Appropriate treatment, and providing Medically Appropriate treatment in a setting more natural or comfortable for the Member.
31. **"Patient Protection and Affordable Care Act" or "PPACA"** means the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148) as modified by the Health Care and Education Reconciliation Act of 2010 (P.L. 111-152).
32. **"Payment"** means a CCO Payment as defined in this Exhibit A or a supplemental payment described in Exhibit C.
33. **"Provider Panel" or "Provider Network"** means those Participating Providers affiliated with the Contractor who are authorized to provide services to Members.
34. **"Psychiatric Security Review Board" or "PSRB"** means the Board authorized under ORS Chapter 161 which has jurisdiction over persons who are charged with a Tier One crime and found guilty except for insanity.
35. **"Region"** means the geographical boundaries of the area served by a CCO as well as the governing body of each county that has jurisdiction over all or part of the CCO's service area.

36. **“Services Coordination”** means Services provided to Members who require access to and receive Covered Services, or long term care services, or from one or more Allied Agencies or program components according to the treatment plan. Services provided may include establishing pre-commitment service linkages; advocating for treatment needs; and providing assistance in obtaining entitlements based on mental or emotional disability.
37. **“Special Health Care Needs”** means individuals who have high health care needs, multiple chronic conditions, mental illness or chemical dependency either 1) have functional disabilities, or 2) live with health or social conditions that place them at risk of developing functional disabilities (for example, serious chronic illnesses, or certain environmental risk factors such as homelessness or family problems that lead to the need for placement in foster care.
38. **“State”** means the State of Oregon.
39. **“State Hospital Review Panel” or “SHRP”** means the panel authorized under ORS Chapter 161 to make decisions about the individuals who are charged with a Tier Two offense and found guilty except for insanity.
40. **“Subcontractor”** means any Participating Provider or any other individual, entity, facility, or organization that has entered into a subcontract with the Contractor or any Subcontractor for any portion of the Work under this Contract.
41. **“Transitional care”** means assistance for a Member when entering and leaving an acute care facility or a long term care setting.
42. **“Urban Indian Clinic”** means a clinic designated as an Urban Indian Health Program (UIHP) under Title V of the Indian Health Care Improvement Act, Public Law 94-437, enrolled with OHA as a FQHC.