

Behavioral Health Systems Glossary

**Key Concepts and Terms for
Tobacco Control Program Staff**



American Lung Association.

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The term “behavioral health” in the context of this document means the promotion of mental health, resilience, and wellbeing; the treatment of mental and substance use disorders; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities. Behavioral health conditions and the behavioral health field have historically been financed, authorized, structured, researched, and regulated differently than other health conditions. As more is learned about the physiological impacts of traumatic experiences and behavioral health conditions, and the behavioral impacts of physical health conditions, it is apparent that behavioral health should be treated with the same level of importance and urgency as physical health. To achieve this, health systems, including their financing, policies, and administrative structures, must change to incorporate and respond appropriately to treat a patient's complete health needs. This glossary of key concepts and terms is intended to support tobacco control program staff and other public professionals with a deeper understanding of concepts, models and terms commonly used in behavioral health settings.

This glossary includes links for additional information and resources from the American Lung Association, The Centers for Disease Control and Prevention, Substance Abuse and Mental Health Services Administration, the National Alliance for Mental Illness and the National Council for Mental Wellbeing, along with other national partners.

All references to “tobacco” and “tobacco products” within this guide and resource collection refer to commercial tobacco and not to the traditional use of tobacco and/or other plant mixtures grown or harvested and used by American Indians and Alaska Natives for ceremonial or medicinal purposes.

**The full resource collection that
accompanies this document can
be found at:**



Lung.org/CessationTA/BH



Glossary of Key Behavioral Health System Concepts for Tobacco Control Program Staff

12-Step Program

The most common and widespread treatment modality for alcohol and substance abuse. The first such program, Alcoholics Anonymous, was developed in the 1930s and has now spread all over the world, although this success is mostly attributable to the spread of the [Minnesota Model](#). Such programs are commonly called now “peer led,” where, instead of being led by behavioral health professionals, meetings are led by other individuals who are in recovery.

Access

Access is the potential for or actual entry of a population into the health system. The ability to obtain wanted or needed services may be influenced by many factors, including travel, distance, waiting time, available financial resources, and availability of a regular source of care. Access also refers to the extent to which a public health service is readily available to a community’s individuals in need. Accessibility also refers to the capacity of an agency to provide service in such a way as to reflect and honor the social and cultural characteristics of the community and focuses on agency efforts to reduce barriers to service utilization.

ACEs (Adverse Childhood Experiences)

Factors that contribute to chronic stress in the developing body and have strong correlations with hardship in adulthood. While there is no standard definition of ACEs, a common list includes poverty, housing insecurity, parents’ arrest and/or incarceration, familial separation, mental illness of a family member, abuse (physical, emotional, or sexual), neglect food insecurity and poor nutrition. In recent years, researchers have begun exploring risk and protective factors such as parenting styles that seem to reduce the problematic outcomes from these experiences. The Centers for Disease Control and Prevention reports that ACEs – such as physical or emotional abuse or neglect – are [commonly associated with an increased risk for smoking](#).

Assessment

The process of regularly and systematically collecting, assembling, analyzing, and making information available on the health needs of the community. This includes statistics on health status, community health needs, epidemiologic and other studies of health problems. It is one of the three core functions of public health, involving the systematic collection and analysis of data in order to provide a basis for decision-making. This may include collecting statistics on community health status, health needs, community assets and/or other public health issues. The American Psychiatric Nurses Association provides [information on specific tools to use in the assessment of tobacco use screening](#).

Assisted Outpatient Treatment (AOT) and Outpatient Civil Commitment

Assisted Outpatient Treatment (AOT) and Outpatient Civil Commitment are types of legal interventions and court ordered treatments for individuals with severe mental illness. Most states have laws that can compel individuals with severe mental illness to get treatment, provided they meet certain standards, including due process. [Learn more...](#)



Behavioral Health Population

In its simplest form “the behavioral health population” are those individuals suffering from an acute or chronic mental illness and/or drug use, misuse, abuse, or dependence. In some cases, it is worthwhile to distinguish mental health issues from substance use issues. However, various similarities as well as high rates of dual diagnosis present a strong rationale to refer to this group of individuals collectively as the behavioral health population. For example, group and individual counseling, and psychoeducation are treatment modalities effective in working with individuals on both mental health and substance use issues.

Behavioral Risk Factor Surveillance Survey (BRFSS)

The BRFSS is an annual, random telephone survey of state residents aged 18 and older in households with telephones. The Behavioral Risk Factor Surveillance Survey collects state-level information in a routine, standardized manner on a variety of health behaviors and preventive health practices related to the leading causes of death and disability. BRFSS interviews are conducted monthly, and data are analyzed annually (on a calendar-year basis). In 2009, the BRFSS began conducting surveys by cellular phone in addition to traditional “landline” telephones. BRFSS was initially developed in 1984 by the Centers for Disease Control and Prevention (CDC) in collaboration with state health departments and is currently conducted in all 50 states, the District of Columbia and several United States territories.

[Learn more...](#)

Best Practice(s)

A set of guidelines, standards, ethics or ideas that represent the most efficient or prudent course of action, given the situation, the consumer’s/community’s needs and desires. Best Practices are the evidence about what works, and the resources available. The CDC offers [best practice guides for public health](#) to support further integration of tobacco treatment services.

Bundled Payments

A payment model where a provider (or health system) receives a global payment for a care episode. Examples include birth of a child or hip replacement surgery. The payment does not fluctuate if costs increase or decrease.

Capitation (or Capitated Payment)

A mechanism to help achieve value-based-care, where a provider (or health system) has an agreement with a payor to be paid less than the normal cost of reimbursement, typically at a set percentage rate. At the end of year, the provider can demonstrate they have provided high quality care, either through patient outcomes or quality measures, the initial percentage withheld, and additional dollars can be earned back. This can be used with bundled payments or a fee-for-service payment model.



Case Management

When a social worker or other individual (nurse) coordinates care and other services for a patient or client. Most social service providers are aware they are engaging with chronic problems experienced by a patient that are in-part sustained by their socio-environmental and occupational situations. They further recognize that clients in need of one service often require others. Coordinating these services as well as navigating the patient between multiple care providers, sometimes across organizations, is a task with elevated importance in assuring positive outcomes for the patient.

Centers for Medicare and Medicaid Services (CMS)

The federal agency, housed within the Department of Health and Human Services, responsible for the administration of the Medicare program and responsible for working with states to implement the Medicaid program. Visit [CMS.gov](https://www.cms.gov) for additional guidance and resources.

Cognitive Behavioral Treatment (CBT)

Cognitive Behavioral Treatment or CBT focuses on the tri-directional relationship between our thoughts, our emotions/feelings, and our behaviors. This theory of change is that by changing one, we can change the others. CBT is a common treatment modality for a variety of psychological issues and has gained its dominance because of three features: (1) it can be delivered effectively for a wide range of issues including acute episodes of depression, grief, or anxiety as well as persistent issues like insomnia and various phobias, (2) it can be effectively delivered in a few (<5), brief sessions, making it ideal for integrated care environments and (3) it can be delivered by a range of practitioners of varying degrees of behavioral health education including in some cases self-administered. Learn more from [SAMHSA.gov](https://www.samhsa.gov).

Client

A client is a person who is receiving services from a therapist or mental health professional. The term client is often used interchangeably with the word "patient".

Clubhouse Model

Clubhouses are community- based safe spaces for individuals with persistent mental health issues, intellectual or cognitive disabilities and substance abuse issues. The facilities offer a variety of services including vocational training and education, individual counseling services, group therapy, case management and/or medical support. While these programs are often directed by professional administrators or healthcare or social work providers, peers with a lived experience of having behavioral health conditions tend to do most of the operational work. Addressing tobacco use disorder is an important component to whole-person wellness and tobacco treatment services have been successfully implemented within this model. [Learn more...](#)



Co-Treatment

Co-treatment is the act of providing care simultaneously for two issues known to have interactive effects with one another. Learn more about the case for the co-treatment of tobacco use disorder [here](#).

Continuous Quality Improvement

An ongoing effort to improve the efficiency, effectiveness, quality, or performance of services, processes, capacities, outcomes. These efforts can seek “incremental” improvement over time or “breakthrough” improvement all at once. Among the most widely used tools for continuous improvement is a four-step quality model, the Plan-Do-Study-Act (PDSA) cycle. [Learn more...](#)

Crisis Intervention Team Program

Crisis Intervention Team (CIT) programs are community-based programs that bring together law enforcement, mental health professionals, mental health advocates (people living mental illness and their families), and other partners to improve community responses to mental health crises. Visit [National Alliance on Mental Illness \(NAMI\)](#) to learn more. [see also: Mental Health First Aid]

Cultural Competence

An understanding and appreciating cultural differences and similarities within, among, and between groups and individuals, especially when working within a different community than the individual’s community. This competence requires that the individual draw on the community-based values, traditions, and customs to work with knowledgeable persons of and from the community in developing targeted interventions and communications. [Learn more from the CDC](#) about how to enhance services for diverse populations.

Diagnostic and Statistical Manual of Mental Disorders (DSM)

The standardized diagnostic guide used by healthcare professionals both domestically and internationally. It is the authoritative guide to the diagnosis of mental disorders. DSM contains descriptions, symptoms, and other criteria for diagnosing mental disorders. For more information see Substance Use Disorder. [Learn More...](#)

Dual Diagnosis

A dual diagnosis is being diagnosed with both a mental health disorder and substance use disorder. The relationship between substance use and mental health is dynamic and complex. Individuals with mental health issues disproportionately use substances, such as tobacco products, with the intensity of one predicting the intensity of the other. And individuals with substance abuse issues disproportionately report poorer mental health. [Learn more...](#)



Empowerment

Consistent with several theoretical models of behavior change and practice-based evidence in behavioral health treatment modalities, empowerment focuses on a person's autonomy over their own choices, thoughts and actions [see also: Motivational Interviewing].

Evidence-Based Practice

An intervention with at least one peer-reviewed study supporting a specific deployment of that intervention to a substantively similar demographic group. Randomized controlled trials are typically seen as the strongest type of study supporting an evidence-based practice. [Learn more...](#)

Fee-For-Service

A method of reimbursement in which doctors and other health care providers are paid a set amount for each service performed. Examples of services include appointments, treatments, tests ordered, or prescriptions given. Scaling revealed that the fee-for-services model may incentivize more treatment, regardless of health outcome. Since providers are paid for each service they perform, there is an incentive to order tests and perform services that may end up being unnecessary, however, it also might incentivize providers to provide additional counseling because they will get an additional reimbursement. Fee-for-service is commonly referred to as "FFS" in billing and coding contexts.

Integrated Care

An organizing principle based on the systematic coordination of general and behavioral health care. Integrating mental health and substance use treatment with primary care services produces the best outcomes and proves the most effective approach to caring for people with multiple health care needs. There are several different approaches, but what they all have in common is some shared responsibility for behavioral health care professionals to screen for possibly connected medical concerns and for medical professionals to seek out related behavioral health issues. [Learn more...](#)

Least Restrictive Care

This refers to a patients' civil rights and their right to their choice of care. As a matter of ethical obligation, in all cases behavioral healthcare providers should attempt to provide care to their clients that is least restrictive in the community, but that also provides an adequate quality of care, and which provides for the safety of the client and the community.

Medication-Assisted Treatment (MAT)

Also known as medication-assisted recovery, which is using a Food and Drug Administration (FDA)-approved medication to overcome the patient's addiction. Medications such as bupropion, varenicline and nicotine replacement therapy (NRT) has been proven effective to treat nicotine and tobacco use dependence. The National Council for Mental Wellbeing offers [additional information and resources related to medication assisted treatment](#).



Nicotine replacement therapy (NRT)

NRT is FDA-approved and provides a person with a controlled dose of nicotine. There are five different forms of NRT currently available in the United States. Non-nicotine containing MAT for the treatment of tobacco use dependency includes the use of FDA-approved medications bupropion and varenicline. Over time, a person can reduce the dose and frequency of the drug and eventually becomes nicotine and tobacco-free. It is critical that medications are buttressed by behavioral interventions that build individuals' coping skills and prevent relapse. All 7 FDA approved medications are considered first line treatments for nicotine dependence and are required to be covered by most health plans. [Learn more...](#)

Mental Health First Aid

Mental Health First Aid is a course that teaches you how to identify, understand and respond to signs of mental illnesses and substance use disorders. The training gives you the skills you need to reach out and provide initial help and support to someone who may be developing a mental health or substance use problem or experiencing a crisis. [Learn more...](#)

Mental Health Parity Act

The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that requires mental health or SUD benefits be comparable to medical/surgical benefits in health insurance plans. Prior to the MHPAEA, mental and behavioral health benefits were often covered at lower levels than medical/surgical health benefits or completely excluded from coverage. Mental and behavioral health benefits typically had higher cost-sharing (such as co-pays, coinsurance and deductibles) and more stringent treatment limitations (such as number of visits and inpatient days). Under the MHPAEA, financial and utilization management requirements must be the same for both mental health and physical health treatment. This law does not require plans to offer mental health or SUD benefits; however, insurers that choose to cover either or both are subject to the law's parity requirements. [Learn more...](#)

Minnesota Model

The [Minnesota Model](#) is an expansion, development, and professionalization of the "*Alcoholics Anonymous*" model of addictions treatment. In short, the 12-step system was first and foremost a treatment modality for those struggling with dependence on alcohol. Today, 12-step programs can be found for every substance use disorder and other compulsive or addictive behaviors. This expansion of the 12-step model for other addictions is mostly credited to the success of the Minnesota Model which took the peer-led, mutual aid society, *Alcoholic Anonymous* and added to it a variety of behavioral health professional help including psychiatrists, psychologists, and social workers whose expertise could augment the prosocial peer support. The Minnesota Model has been the leading model of addictions treatment for decades in part because of its encouragement of individualized care treatment, however, in recent years the model has come under increasing criticism due to some views that the features of its abstinence-focused approach are paternalistic and disempowering to people in recovery. [Learn more...](#)



Motivational Interviewing (MI)

This counseling style was designed to help clients build commitment and reach a decision to change a behavior. The principal purpose of motivational interviewing is to help clients resolve their ambivalence to recovering from substance use disorder and move along the continuum of change towards recovery. [NAMI Minnesota has created a guide to using motivational interviewing](#) as a strategy to support recovery from tobacco use disorder.

Opt-In vs. Opt-out Treatment Models

Opt-out care is the practice by which every person that is screened positive for tobacco use is enrolled in treatment, unless they choose not to receive treatment. Opt-in care is the practice of asking every tobacco user if they want treatment, and only providing treatment if they choose to receive treatment. Opt-Out is primarily used in inpatient settings but it is an emerging treatment model in ambulatory/outpatient settings. [More information coming soon from American Lung Association.](#)

Patient

A patient is any recipient of health care services, including behavioral health services, that are performed by healthcare professionals. Also commonly referred to as a “*client*” in behavioral health settings.

People First Language

People First Language (PFL) puts the person before the health condition, socio-economic status or setting, and describes what a person is experiencing, and not who a person is. PFL uses phrases such as “person with a disability,” “individuals with disabilities,” and “person experiencing homelessness,” as opposed to phrases that identify people based solely on their disability, such as “the disabled.” An individual is not a “schizophrenic” they are a “person *with* schizophrenia”. The Office of Disability Rights has [guidance on the usage of People First Language](#).

Peer Services

While different organizations have different definitions, peer services are when an individual that has a “shared lived experience” with the community they are serving. These trained individuals are often referred to as “peer support specialists” and serve an important and trusted role in health promotion. Leveraging peer services in behavioral health settings is an effective strategy to increase both access and capacity for tobacco treatment services. [Learn more...](#)

Promising Practice

An intervention that has been shown to work in a certain context, but it is unclear how generalizable the findings are based on the current evidence base. Evidence-based and promising practices exist on a spectrum where an “*evidence-based practice*” is consistently over time and in multiple contexts shown to be successful.



Prospective Payment System (PPS)

A method of reimbursement in which Medicare payment is made based on a predetermined, fixed amount. The payment amount for a particular service is derived based on the classification system of that service (for example, diagnosis-related groups for inpatient hospital services). The Centers for Medicare & Medicaid Services (CMS) uses separate PPSs for reimbursement to acute inpatient hospitals, home health agencies, hospice, hospital outpatient, inpatient psychiatric facilities, inpatient rehabilitation facilities, long-term care hospitals, and skilled nursing facilities.

Quality Measures

Tools that compare performance among providers, healthcare systems and outcomes to meet goals of effectiveness, safety, efficiency, patient-centeredness, equity and timely care. Many payors, including CMS, use quality measures in its quality improvement, public reporting, and pay-for-reporting programs for specific healthcare providers. [Learn more...](#)

Recovery

The most common term describing the period of a person's life when they are actively treating substance use disorder, including nicotine and tobacco dependence, which is a chronic relapsing condition.

Relapse

Relapse is the return of illness or substance use disorder symptoms. Relapse is not failure, and it is a common experience for many people in recovery from chronic relapsing conditions. For many, symptoms that begin to reoccur can be successfully addressed with the skills and resiliency developed in treatment. Planning for continued care can help prevent relapse. [see also: Slip] Learn more about slips and relapses in recovery from tobacco use disorder at smokefree.gov

Residential Treatment

Similar to the medical field where there is a distinction between "inpatient" and "outpatient" care, where the former is provided to those formally admitted to the hospital, the behavioral health world distinguishes between residential and outpatient services. Residential treatment refers to treatment, where the patient lives in a community while getting their treatment. Residential services can be short- or long-term. They can be large psychiatric facilities, group homes, or transitional housing. In their best uses, residential treatment provides a therapeutic environment that offers a whole-person wellness model. Ideally, residential treatment settings will offer tobacco-free environments and comprehensive co-treatment of tobacco use disorder. [Learn more...](#)



Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA is the division of the United States Department of Health and Human Services (HHS) specifically tasked with measuring mental health and substance abuse nationwide and acting as a central resource of evidence-based, best practices to treat, manage and improve behavioral health. Each state is assigned to a SAMHSA regional office. Visit [SAMHSA.gov](https://www.samhsa.gov) to learn more.

Severe and Persistent Mental Illness (SPMI)/ Serious Mental Illness (SMI)

These two terms are often used interchangeably. In general, SPMI/SMI are defined as any complex mental illness requiring continued management and treatment.

Slip

A slip, in reference to recovery from tobacco use, might be defined as a person quitting smoking, having one or two cigarettes after their quit. For most people, even “*just one puff*” counts. If a person has a slip (“I’ll have just one”), it could be harder for them to fully recover from their tobacco use disorder. A slip is different from a *relapse*. A relapse means going back to regularly using a tobacco product. Learn more about slips and relapses in recovery from tobacco use disorder at [smokefree.gov](https://www.smokefree.gov)

Social Determinants of Health

Direct causes and risk factors which, based on scientific evidence or theory, directly influence the level of a specific health problem. These may be defined as the “upstream” factors that affect the health status of populations and individuals. Roughly divided into the social environment (cultural, political, policy, economic systems, social capital, etc.), the physical environment (natural and built), and genetic endowment. The determinants of health affect both individual response (behavior and biology) and the prevalence of illness and disease. [Learn more...](#)

Strength-Based Approach

The fundamental concept of a strengths-based approach is to build a recognition of an individual’s inherent strengths and to develop those in ways that better serve the individuals by enhancing their self-determination and sense of individual power. It is frequently the case that individuals experiencing homelessness, living in poverty, using drugs, or engaged with the criminal justice system are seen as deficient: intellectually, cognitively, emotionally, or morally. As a result, assisting these individuals is conceptualized as filling this deficiency. Contrary to this view, these lifestyles and their accompanying behaviors may be seen as adaptive and indicative of underlying resources that can be reshaped to better serve the individual.

Substance Use Disorder (SUD)

In its simplest form, SUD refers to drug addiction. The Diagnostic and Statistical Manual of Mental Disorders (DSM) recognizes 10 named drugs or classes of drugs and leaves open the possibility that uncategorized drugs can also lead to problematic use. [See Also: Tobacco Use Disorder.]



Telehealth

Telehealth and telemedicine are often used interchangeably and generally refer to the use of electronic information and telecommunications technology to support long distance clinical healthcare and patient and professional health related education and support. This includes social media and apps which connect consumers and providers, though often in a more informal and casual environment. Telehealth use among behavioral health providers is a promising strategy to advance health equity by reducing the maldistribution of professionals and improving access to mental health and substance use disorder treatment. Common uses in behavioral health settings include addressing shortages in local or on-site behavioral health services in rural or underserved populations, medication and treatment management, and virtual appointments for therapy sessions. [Learn more...](#)

Tobacco Use Disorder (TUD)

When an individual is dependent upon nicotine, which is found in tobacco. A psychoactive drug (affects the mind), nicotine is a highly addictive, central nervous system stimulant. The addictive nature of nicotine includes drug-reinforced behavior, obsessive use and reoccurring use after abstaining from it, as well as physical dependence and tolerance. Tobacco use disorder is a chronic, relapsing condition, and is the [leading cause of preventable disease, disability and death in the United States](#). Tobacco use disorder can be safely and effectively treated with evidence-based cessation counseling and/or FDA-approved quit medications.

Trauma-Informed Care (TIC)

TIC is an approach to human services provision that recognizes that a person is likely to have experienced trauma previously and that engagement with systems and other individuals (especially those with some authority or in a position of unequally higher power) has the potential to retraumatize. TIC trains staff to recognize the symptoms of trauma in the individuals it serves and adapts systems to lessen or eliminate systematic retraumatizing. Initially TIC was specific to therapeutic services but has been expanded to include nearly all social services provision. [Learn more...](#)

Value-Based Care

The concept where providers and health systems are paid based on patient outcomes rather than on the number of services provided. Types of value-based care include Accountable Care Organizations (ACOs) and capitation models. Payments are based on patient outcomes and quality of care, which could lead to an emphasis on preventative care. [Learn more...](#)

Withdrawal Symptoms

Also referred to as *Recovery Symptoms*. Acute physiological nicotine-related withdrawal symptoms usually peak 24 to 48 hours after a person quits and diminish within a matter of weeks. The physiological cravings for nicotine usually last about 7 days but psychological cravings frequently last longer.



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