STATE OF NEW JERSEY
DEPARTMENT OF CHILDREN AND FAMILIES

CONTRACT REIMBURSEMENT MANUAL (CRM)

GLOSSARY OF TERMS

The following terms when capitalized in the Manual shall have the meaning as stated. Additional terms, as needed, will be defined in the policy circulars. Furthermore, when a term in this glossary has a different meaning in a particular circular, the term will be defined for a limited application in that circular.

Accrual Basis of Accounting
The accounting method in which Revenue is reported in the period in which it is earned, regardless of when it is collected, and expenses are reported in the period in which they are incurred, regardless of when they are paid.

Acquiring Organization
The business entity that acquires, affiliates, consolidates, merges, etc. with a Provider Agency.

Acquisition
The takeover of one corporation by another, if both parties retain their legal existence after the transaction.

Acquisition Cost
The net invoice unit price of an item of Equipment, including the cost of any modifications, attachments, accessories or auxiliary apparatus necessary to make it usable for the purpose for which it was acquired. Ancillary charges, such as taxes, duty, protective in-transit insurance, freight and installation shall be included in or excluded from the Acquisition Cost in accordance with the Provider Agency's regular written accounting practices.

Action
Notice of an impending remedy, including Termination of the Contract. The action may be implemented during the current Contract or a subsequent Contract as appropriate.

Actual Units of Service
The number of service units delivered by the Provider Agency for the reporting period.

Additional Insured
An endorsement to an insurance policy extending the coverage to the State of New Jersey against loss in accordance with the terms of the policy. Designating the State as an additional insured permits the Department to pay the premium should the insured fail to do so.

Affiliation
The association of two or more entities for the advancement of a specific goal or purpose.

Agreement
The Standard Language Document, the Individual Provider Agreement, the Annex(es), any additional appendices or attachments (including any approved assignments, subcontracts or modifications) and all supporting documents

Allocability
A cost is allocable if it is assignable or chargeable to a particular cost objective, such as a contract, project, product, service, process, or other major activity, in accordance with the relative benefits received or some other equitable relationship.

Annex B Budget
The Attachments to the Contract Standard Language Document and Standardized Agreement containing Financial information.

Annex(es)
The attachment(s) to the Contract Standard Language Document and Standardized Agreements containing programmatic and financial information.

Applicable Credits
Those receipts or reduction of expenditures which operate to offset or reduce expense items allowable to the Contract as direct or indirect costs.

Applicant
The person, agency or entity responding to a Request for Proposal (RFP) or a Request for Qualifications (RFQ).

Award(s)
Includes State grants, State aid, and federal and State financial assistance in the form of grants, loans, loan guarantees, property, capital funding agreements, interest subsidies, insurance, food commodities and other assistance.

Broad Form
Liability coverage that provides insurance for multiple types of perils. A Broad Form policy provides all risks coverage in one policy except for listed exclusions.

Budget Category
One of the major groupings of cost identified in the Contract Budget Annex B form.

Budget Period
A period congruent with the Contract when services are delivered. Generally, a budget will cover a 12-month period which coincides with the Provider Agency's fiscal year.

Budgeted Units of Service
The projected level at which the Provider Agency will deliver Contract services. The Budgeted Units of Service are specified in the Annex B and/or Annex B-2.

Business Associate

A person or entity, other than a member of the workforce of a Covered Entity, who performs functions or activities on behalf of, or provides certain services to, a Covered Entity that involves access by the Business Associate to Protected Health Information (PHI). This definition is also applicable to a subcontractor that creates, receives, maintains, or transmits Protected Health Information (PHI) on behalf of another Business Associate.

Business Associates Agreement (BAA)

Sets forth the responsibilities of a Provider Agency, as a Covered Entity, in relationship to Protected Health Information (PHI), as those terms are defined and regulated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and the regulations adopted thereunder by the Secretary of the United States Department of Health and Human Services with the intent that the Covered Entity shall, at all times, be in compliance with HIPAA and the underlying regulations. The Business Associate Agreement (BAA) is entered into for the purpose of the Business Associate providing services on behalf of the Covered Entity.

Cash Basis of Accounting

The accounting method in which Revenue is reported in the period in which it is received and expenses are reported in the period in which they are paid.

Certificate of Insurance

A statement of coverage taking the place of the policy as evidence of insurance indicating the insured.

Charitable Registration and Investigation Act

N.J.S.A. 45:17A-18 et. seq., specifically 45:17A-21b was developed to protect the public from fraud and deceptive practices.

Chief Executive Officer (CEO)

Because of the differences in the types of agencies that contract with the Department, the following are separate definitions for CEO in:

1. Private for-profit and non-profit Provider Agencies:
   In the case of private for-profit and non-profit Provider Agencies, the CEO shall be either the chairperson of the Agency's governing body or the executive director of the Agency, as designated by resolution of the governing body and consistent with Agency by-laws.

2. Public Provider Agencies:
   In the case of public Provider Agencies, (e.g., municipalities and counties), the CEO shall be either the chairperson of the Agency's governing body (e.g., city council, board of supervisors, board of chosen freeholders), or the Agency's chief administrator (e.g., mayor, city manager, county administrator), as designate by resolution of the governing body.

3. Educational Institutions:
   In the case of educational institutions, the CEO shall be either the chairperson of the Agency's governing body or the president of the institution, as designated by resolution of the governing body and consistent with the institution's by-laws.

Client Fees (also Fees)
The monetary assessment which, according to Departmental policies, may be charged to certain recipients of specific social services. Any allowable Client Fees to be charged and the amount projected to be collected by the Provider Agency in connection with the delivery of Contract services are specified in the Contract Annex (es).

Closeout "final" (See Final Contract Closeout)

Closeout "preliminary" (See Preliminary Contract Closeout)

Cluster:
One or more service-related Programs designated by the Departmental Component, and identified in the Contract.

Cognizant
A term used to designate audit responsibilities and is generally used in conjunction with the awarding State agency that provides the predominant amount of direct funding to a Recipient that originated with, or passed through, the State agency.

Cognizant Division
The division or other designated component within the Department of Children and Families responsible for all fiscal Contract administration functions when a Provider Agency contracts with more than one Departmental Component.

Commercial Automobile Liability Insurance
Coverage that provides limits above the standard limits in the base policy and/or covers areas of liability not covered in a standard policy.

Conditional Contract
A Third Party Social Service or training Contract between the Department and the Provider Agency, during which time special terms or conditions specified in the Contract must be met by the Provider Agency, in accordance with specified time frames.

Conflict of Interest (also Conflict)
A Conflict, or the appearance of a Conflict, between the private interests and the official responsibilities of a person in a position of trust. Persons in a position of trust include, but are not limited to Provider Agency paid and volunteer Staff Members, officers, or Governing Board members.

Consistency
A Provider Agency's method of accounting must be uniform from one period to another.

Consolidation
When two or more corporations cease to exist, and by the same process a new one is created, taking over the assets and assuming the liabilities of merging entities.

Contract
One of the Department's social service or training Contracts with a Provider Agency. Terms and conditions of the Contract are included in the Standard Language Document, Annex (es), appendices, and attachments and Contract Modifications (including any approved assignments and subcontracts) and supporting documents. The Contract constitutes the entire binding agreement between the Department and the Provider Agency.

Contract Budget
The Department approved budget for Cost-Related Contracts contained in the Annex B and Annex B-2, and prepared in accordance with the Department's Contract Reimbursement Manual and Contract Policy and Information Manual.

Contract Modification
The formal procedures entailing the Department's written approval on the DCF.P1.10 Contract Modification form (Attachment 1) to allow certain programmatic and/or financial changes in the Contract during the Contract term.

Contracted State Agency
The State organization or unit that enters into a contractual arrangement with a Departmental Component of the Department of Children and Families.

Copyrighted Material
Exclusive, legal rights to adapt, distribute, reproduce, publish or sell any information funded and developed under a Department Contract or subcontract.

Cost Analysis
The evaluation of cost data for the purpose of establishing estimates of Contract costs to be incurred and then determining costs to be reimbursed or prices to be paid. The Cost Analysis method for determining Contract value is applicable to Cost-Related Contracts.

Cost-Related Contract
A Contract for which the total value of the Contract is determined by a detailed analysis of costs, i.e., "Cost Analysis".

Cost Sharing
Denotes Provider Agency participation in the cost of Programs funded under Department Contracts. Provider Agencies are able to participate in the cost of Programs from various sources of restricted and unrestricted funds.

County Human Services Advisory Councils (CHSACs)
Councils appointed by the government of each county to review county-level human service activities and to serve as the primary vehicle for local public input into the New Jersey Department of Children and Families' decision making. The activities of the County Human Services Advisory Councils include, but are not limited to, the

issuance, review and comment on human service proposals; preparation of allocation plans; review of existing purchase of service contracts; and coordination and consolidation of the local human services delivery systems.

Covered Entity

A health plan, a health care clearinghouse, or a health care provider who transmits any health information in electronic form in connection with a transaction covered by the regulations. In reference to the Business Associate Agreement (BAA), Covered Entity shall mean the New Jersey Department of Children and Families (DCF).

Cultural Competence

The Department of Children and Families recognizes a set of beliefs and culturally competent values. Cultural Competence is the process by which individuals and systems respond respectfully to the strengths and skills of diverse ethnicities and cultures, languages, socio-economic classes, disabilities, religions, genders, sexual orientation and other diversity related factors. This practice enables DCF staff and contracted Providers to achieve desired outcomes while preserving the pride, respect and dignity of each individual in our diverse communities thus ensuring the safety, well-being and success of the children, youth and families we serve.

Cumulative Increase

The combined effect of all budget changes within a Budget Category.

Days

Calendar days.

Default

The Provider Agency has materially failed to fulfill or comply with the terms and conditions of the Contract.

Department

The New Jersey Department of Children and Families. As used throughout the Manual, it also means, where appropriate from the context, the division, commission, bureau, office, unit or other designated component of the Department of Children and Families responsible for the administration of particular Contract Programs.

Departmental Component

The division, bureau, commission, office or other unit within the Department responsible for the negotiation, administration review, approval, and monitoring of certain Third Party Social Service or training Contracts.

Depreciation

The process of allocating the cost of a tangible fixed asset (e.g., buildings, office equipment and computer equipment) less salvage value, over its estimated useful life in a rational and systematic manner.

Designated Entity
That group or county board which has been given the authority by the Department of Children and Families to solicit human service proposals for the review and comment and recommended acceptance for third-party social service Contracts. Although the RFP is handled by a group other than the Departmental Component, the Contract is signed and finalized by the Departmental Component.

Disallowed Costs
Those charges to a Contract that the Departmental Component determines to be unallowable in accordance with applicable cost principles, Departmental policies, or other conditions contained in the Contract.

Donor
The public (except the State of New Jersey) or private entity contributing match to a Contract.

Donor Agreement (Public or Private)
A standard written agreement between the Provider Agency and a public or private entity providing match to be used in a SSBG service Contract. The standard Donor Agreement is furnished by the Departmental Component.

Emergency
A situation in which the life, health, safety, or welfare of children and families are at risk or will be placed at risk absent prompt intervention. This can occur as the result of a natural disaster and its after effects, a sudden and unexpected withdrawal of a Contract, or other circumstances as deemed necessary and appropriate by the Commissioner.

Employee Fidelity Bond (commercial blanket bond)
Coverage issued for a stated amount on all regular employees of the Provider Agency insuring against loss from employees' dishonest acts.

Employers' Liability Insurance
Coverage against the common law liability of an employer for injuries by accident or disease to employees, as distinguished from the liability imposed by Workers' Compensation Law.

Equipment
An article of nonexpendable tangible personal property having a useful life of more than two years and an Acquisition Cost of $1,000 or more per unit. General purpose Equipment includes office Equipment, reproduction and printing Equipment, motor vehicles, and automated data processing Equipment, whether or not special modifications are needed to make the Equipment suitable for a particular purpose.

Evaluation Committee
The individuals approved by the Grants Management Committee to evaluate the proposals.

Expiration
The cessation of the Contract because its term has ended.

Facilities
Land and buildings or any portion thereof, equipment individually or collectively, or any other tangible capital asset, wherever located and whether owned or leased by the Provider Agency.

Fair Market Value
The value determined to be a reasonable price for a comparable item on the competitive market in the same geographic area. Such determination is made in some cases by comparison shopping and in others by formal appraisal procedures.

Federal Government Executive and Legislative Branch(es)
An officer or employee of any federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress.

Financial Transaction
Any exchange of money or goods for money or goods between two or more parties

Final Contract Closeout
The process by which the Departmental Component determines that all applicable administrative actions and all required work of the Contract has been completed by the Provider Agency and the Departmental Component. This process includes reconciling the FROE with the Provider's audit and determining whether any funds need to be recovered.

Flexible Limits
An upper dollar limit which is established for each Budget Category, and which may not be exceeded without an approved Contract Modification. Flexible Limits are determined by adding an amount to the approved Annex B Budget.

For-Profit Contract
A Contract in which a fixed dollar amount is added to the Net Cost to determine the Contract Reimbursable Ceiling. For-Profit Contracts are allowed only with for-profit Provider Agencies.

General and Administrative or Indirect Costs
Costs which are incurred for common or joint objectives and which are not readily subject to treatment as direct costs. These costs are not directly traceable to a particular segment and probably could not be fully eliminated if any one segment of the enterprise were discontinued.

General Liability Insurance
Liability coverage for all premises and operations for all general liability hazards, unless excluded.

Governing Board (also Board)
The Provider Agency board, commission, council or other organizational body that signs the Contract, enacts Provider Agency policy regarding Contract services, and is responsible to the Department for Contract compliance.

Governmental Officer
An officer or staff member of the Executive Branch of State Government, authorized by law to administer governmental processes or perform other functions related to such processes.

Governmental Processes
Includes but is not limited to the promulgation of any executive order; rate setting; development, negotiation, award, modification or cancellation of a public contract; issuance, denial, modification, renewal, revocation or suspension of licenses or waivers; procedures for purchasing; or rendition of administrative determinations.

Grants Management Committee
The committee appointed and approved by the Deputy Commissioner to coordinate and manage the grant and request for proposal process among a variety of Departmental Components.

Grants Management Support Unit
The unit in the Deputy Commissioner's Office to support and maintain records of requests for proposals and responses to grant applications. The unit shall also support the grant application process for federal or other grants.

Health Insurance Portability and Accountability Act of 1996 (HIPAA) Regulations
The regulations promulgated under HIPAA by the U.S. Department of Health and Human Services, including, but not limited to, the Privacy Rule and the Security Rule, and shall include the regulations codified at 45 CFR Parts 160, 162, and 164.

Hybrid Entity
Under HIPAA, a larger entity with subdivisions that may have distinct missions with certain subdivisions providing health-related treatment services, while other subdivisions within the same entity may not.

Initial Advance Payment
The first payment made by check or other appropriate payment mechanism to a Provider Agency during the Contract term before expenses are incurred or services are provided.

In-Kind Contributions
Property or services (except the services of volunteers) which benefit the Contract Program and which are contributed by a public entity without charge to the Provider Agency. Public contributions formerly designated as CCE (Certified Cash Expenditures) are included as In-Kind Contributions.

Interest
The cost incurred for the use of borrowed funds. Interest costs are generally paid at fixed intervals by the user.

Letter of Approval
The written correspondence between the Departmental Component and Provider Agency authorizing a Contract Modification pending the submission and approval of a DCF.P1.10 Contract Modification form (Attachment 1).

Limits
The dollar amount of insurance carried for the types of insurance listed.

Line Item
Each entry of cost within a Budget Category listed in the Annex B (e.g., the salary or wages for each position listed under the Budget Category of Personnel).

Lobbying
Any act, whether written, verbal, or non-verbal, that seeks to influence legislation, regulation or governmental processes, or any communication with or securing information from governmental officers.

Lobbyist
Any person, partnership, committee, association, corporation, labor union or any other organization that employs, engages or otherwise uses the services of any governmental affairs agent to influence legislation, regulations or governmental processes.

Lower Tier Covered Transaction(s) (Contract/Subcontract)
The Contract between DCF and the Provider Agency and all subsequent subcontracts, down to the lowest level, that may result from the initial Contract.

Lower Tier Participant(s) (Provider Agency/Subcontract)
The Provider Agency and all subcontractors, down to the lowest level, that may result from the initial Contract.

Mail
Letter, e-mail, or legible facsimile (fax) transmission

Management Decision
The evaluation by the federal or State awarding agency or the pass-through entity of the audit findings and corrective action plan and the issuance of a written decision as to what corrective action is necessary.

Marketable Asset
Any item of value that can be sold, bartered or traded.

Match
A percentage or designated amount of funds required as Cost Sharing for certain Department of Children and Families Contracts. Such requirements may be Departmental or statutory.

Merger
Occurs where one corporation is dissolved and absorbed by another that remains in existence.

Minority

A person who is:

1. African American, having origins in any of the black racial groups in Africa;

2. Hispanic, having Spanish culture, with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race;

3. Asian-American, having origins in and of the original peoples of the Far East, Southeast Asia, Indian sub-continent, Hawaii, or the Pacific Islands;

4. American Indian or Alaskan native (Native American), having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliations or community recognition.

Minority Agency

A business organization, profit or non-profit, which is:

A sole proprietorship, partnership, or joint venture in which at least 51% of the ownership interest is held by Minorities and the policy-making, management and daily business operations are controlled by one or more of the Minorities who own it; or

A corporation or other business entity authorized under the laws of the United States whereby 51% of the stockholders, board of directors, ownership or management of daily business operations is controlled by one or more Minorities.

Modified Accrual Basis of Reporting

The reporting method in which all unpaid expenditures and uncollected Revenue attributable to the Contract (i.e., expenditures which are allocated to the Contract and have been incurred during the Contract term and Revenue which has been earned during the Contract term) are paid or collected by a specified date after the Expiration or Termination of the Contract. All such post-Contract payments or collections are then reported on the final expenditure report.

Net Cost

The Total Cost less Revenue.

Non-Cost-Related Contract

A Contract for which the total value is determined by a means other than Cost Analysis. Price Analysis is the most common method employed

Notice

An official written communication between the Department and Provider Agency. All Notices shall be delivered in person or certified mail, return receipt requested, and shall be directed to the persons and addresses specified for such purpose in the annex(es) or to such other persons as either party may designate in writing. (cont'd)
The Notice shall also be sent by regular mail and shall be presumed to have been received by the addressee five Days after being sent to the last address known by the Departmental Component.

Open Purchase Service(s)
A contract service that is purchased on a fee for service or an as needed basis and in which the number of units to be purchased may not be fixed. Such contract service programs usually do not have a reimbursable ceiling.

Pass-through Entity
A non-federal entity, which includes a State, local government, non-profit organization and for-profit organization that transmits a federal or state award to a Provider Agency or a subcontractor to carry out a federal or State program.

Payment Rate
The agreed upon amount to be paid to the Provider Agency per single unit of service delivered under the Contract.

Person
An individual, corporation, company, association, authority, firm, partnership, society, state, local government or organization.

Pre-Award Survey
The examination and evaluation of certain records and documents to determine the adequacy of the financial management and administrative systems of a potential or current Provider Agency prior to the issuance of a new or successor Contract with the Provider Agency.

Preliminary Contract Closeout
The process whereby the Departmental Component reconciles the amount of funding paid to a Provider Agency during the contract term against the Final Report of Expenditures (FROE) or the latest Report of Expenditures (ROE) submitted by the Provider Agency to the Departmental Component, and also the "final" process by which the Department of Children and Families determines that all applicable administrative actions and all required work of the Contract, with the exception of the final audit, have been completed by the Department and the Provider Agency.

Price Analysis
The evaluation of price data without analysis of the separate cost components in arriving at prices to be paid for Contract services. The Price Analysis method of determining Contract value is applicable to Non-Cost-Related Contracts.

Principal
Officer, director, owner, partner, key employee or other person within the Provider Agency with primary management or supervisory responsibilities; or person who has a critical influence on or substantive control over the Contract whether or not employed by the Provider Agency.

Product/Completed Operation
A form of liability insurance which covers accidents arising out of operations which have been completed or abandoned, provided the accident occurs away from the premises owned, rented, or controlled by the insured.

Professional Liability/Malpractice
Coverage for the Provider Agency and health care providers in its employ, acting under their scope of duties, while providing medical and social services care to the clients.

Program
A specific service. A Program is generally represented by each column in the Contract Expense Summary of the Annex B: Contract Budget.

Program Director
The Program Director named in the Annex(es) must be directly responsible for Contract services, and unless otherwise specified in the Annex(es), must devote full time to the Provider Agency to carry out that responsibility and to supervise Provider Agency personnel in the administration and/or delivery of Contract services.

Program Income
All income generated by the Provider Agency as a result of Department supported activities (e.g., third party health insurance such as Medicaid, Medicare, or private insurance plans). Program Income does not include restricted or unrestricted public or private donations to the Provider Agency.

Property Insurance
A broad form of insurance coverage for damage or loss to real and personal property.

Protected Health Information (PHI)
Individually identifiable health information that is transmitted by electronic media or transmitted or maintained in any other form or medium.

Protest/Appeal
The procedure defined herein for unsuccessful applicants to challenge the determination of the proposal review and evaluation process from which they were denied funding.

Provider Agency (also Provider)
The public or private organization which has a social service or training Contract with the Department.

Reasonableness
A cost is reasonable if, in its nature or amount, it does not exceed that which would be incurred by an ordinarily prudent person in the conduct of competitive business.

Recipient (Contractee or Provider Agency)
The legal entity that enters into a contractual arrangement with any Departmental Component.

Reimbursable Ceiling
The cost of the Contract to the Departmental Component and the maximum payment to the Provider agency.

Renewal
The process of continuing the Contract into a new contract period

Replacement Equipment
Property acquired with Department funds to take the place of other Equipment purchased with Department funds. Replacement Equipment must serve the same function as the Equipment replaced and must be of the same nature or character, although not necessarily the same model, grade or quality.

Retaliation
When a complainant or witness is subjected to adverse effects for their involvement in the complaint process.

Revenue
The total income generated by the Provider Agency from its Programs and activities.

Sexual Harassment
Sexual harassment with or without sexual conduct is defined as unwanted sexual advances, requests for sexual favors, hostile work environment harassment, quid pro quo harassment, and any other verbal or physical contact that is or can be construed of a sexual nature.

Significant Events
A known or anticipated program, financial or administrative event or circumstance of a nature and extent that can reasonably be expected to diminish the quality or quantity of services to clients, or to influence or to jeopardize the ability of the Provider Agency to deliver contracted services, or to meet responsibilities under the Contract and which requires Notice to the Departmental Component. Examples include legal, administrative, financial services such as, but not limited to, bankruptcy petition, Merger, Acquisition, Affiliation, Consolidation, civil or criminal action taken against an employee of the agency, a finding of abuse or neglect against an employee of the agency and planned relocation or change in Service location(s).

Staff Member
A person who receives all or part of his/her income from the Provider Agency's payroll, subcontractors, and/or volunteer(s) that serve(s) the Provider Agency in any capacity.

Standard Language Document
The document which establishes the non- negotiable obligations, responsibilities, rights and relationships of the Contract parties.

State
The State of New Jersey.

State Agency

Any of the principal departments in the Executive Branch of the State Government (not including the Department of Children and Families) and division, board, bureau, office, commission or other instrumentality within the legislature of the State and any office, board, bureau or commission within or created by the Legislative Branch, and any independent State authority, commission, instrumentality or agency. A county or municipality shall not be deemed an agency or instrumentality of the State.

Subcontractor Study

Conducted by a DCF contracted Provider that has been approved to subcontract DCF services. It is an onsite review of a potential subcontractor to determine its suitability prior to submission to the Departmental Component for approval.

Subrecipient (Subcontractee)

The legal entity that enters into a Contractual arrangement with a Contractee or another Subcontractee, no matter how many interceding administrative Tiers (levels) separate the parties.

Termination

The official cessation of a Contract **prior** to the expiration of its term that results from action taken by the Department or the Provider Agency in accordance with provisions contained in the Contract.

Third Party Social Service Contracting

When the State contracts with another party (Provider Agency) for services on behalf of an individual receiving services funded by a Departmental Component of the Department of Children and Families. In this type of purchase arrangement, the individual receiving the services, not the State, is the consumer. The three parties involved are the individual receiving the services, the service Provider, and the State acting as the third party on behalf of the individual receiving the services. DCF Third Party Social Service Contracts must comply with the Department's contracting policies and procedures. These policies and procedures regulate Contracts and agreements with public or private Providers for the accomplishment of a particular purpose or program.

Third-Party Harassment

Unwelcome behavior involving any of the protected categories as defined in the Law Against Discrimination (N.J.S.A. 10:5-1 et.seq.) that is not directed at an individual but exists in the workplace and interferes with an individual's ability to do the job.

Tier

Each successive, separate level of administrative organization beginning with the Department of Children and Families and ending with the Provider of service.

Total Cost

All costs of the Provider Agency's Programs, activities, and Equipment before Revenue.

Total Operating Costs
The total operating cost(s) excluding the cost of Equipment. The term Total Operating Costs is applicable only to Cost-Related Contracts.

Trade-In
The difference between the amount that would have been paid for Replacement Equipment without a trade-in and the amount paid with the trade-in. The term refers to the actual difference, not necessarily the trade-in value shown on an invoice.

Transfer of Governing Board
Occurs when the Provider Agency remains intact, but assigns control or governance to a new entity or Governing Board.

Umbrella Organization
An affiliation among two or more business entities whereby each remains distinct, but joins to form a new collective directing organization. The new organization may be given management or service control, without acquiring the assets or liabilities of the existing entities.

Umbrella Policy
A policy that provides limits above the standard limits in the base policy, and/or covers areas of liability not covered in a standard policy.

Unit Cost
1. The Contract Reimbursable Ceiling minus Equipment divided by the Budgeted Units of Service, or

2. The cost to the Department minus any Equipment expenditures during a given period divided by the Actual Units of Service rendered during that period.

Unit of Service
The breakdown of the services used as a standard of measurement (e.g., hours, roundtrips, or meals).

Workers' Compensation Insurance
Benefits payable to an employee, without regard to liability, required by State law in case of illness, injury, disability, or death as a result of occupational hazards.