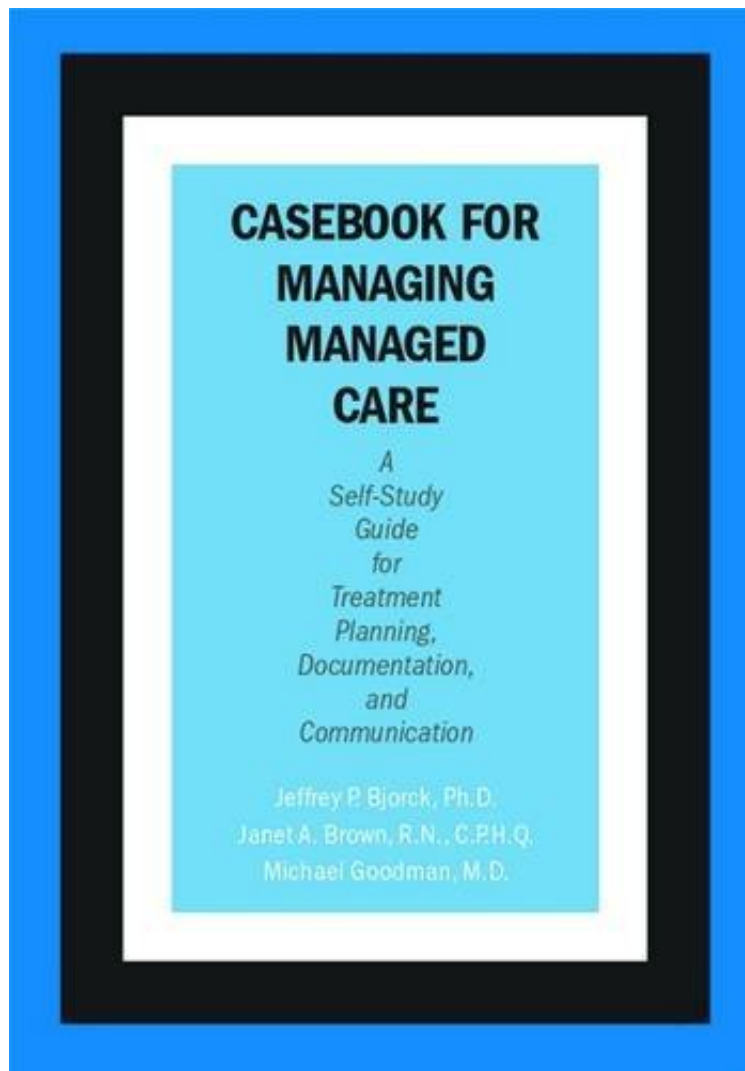


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## Casebook for Managing Managed Care: A Self-Study Guide for Treatment Planning, Documentation, and Communication

*Dr Jeffrey P Bjorck Ph.D.*

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**Dr Jeffrey P Bjorck Ph.D. :** Casebook for Managing Managed Care: A Self-Study Guide for Treatment Planning, Documentation, and Communication before purchasing it in order to gage whether or not it would be worth my time, and all praised Casebook for Managing Managed Care: A Self-Study Guide for Treatment Planning, Documentation, and Communication:

In today's environment of managed care, practitioners face more daunting challenges than ever: treatment authorizations are becoming more difficult to obtain, as are referrals to other healthcare practitioners, which are increasingly performance based. Into this competitive environment comes *Casebook for Managing Managed Care: A Self-Study Guide for Treatment Planning, Documentation, and Communication*. Dedicated to helping mental healthcare practitioners clearly articulate and prove the value of what they provide patients within the managed care system, this foundational text uniquely fills a gap in the literature by providing a user-friendly, self-contained tutorial for the Patient Impairment Profile (PIP) documentation method. The PIP combines impairment terminology, the impairment profile, and the various treatment plan components to create a common language for describing behavior-based patient dysfunction and communicating the clinical rationale for treatment. As a model for treatment plan development, the PIP system trains the practitioner (or treatment team) in the "must-have" skills needed for today's managed care environment. Here practitioners will find explicit instructions about how to - Communicate treatment needs convincingly- Distinguish effectively between goals, objectives, and interventions- Track progress over time- Document treatment summaries efficiently Using clear language and a wide array of case vignettes, the Casebook demonstrates how using PIPS can streamline the documentation, communication, and decision-making processes. The Casebook continues the groundbreaking tradition of its predecessors: *Managing Managed Care: The Mental Health Practitioner's Survival Guide* (Goodman et al. 1992) and *Managing Managed Care II: A Handbook for Mental Health Professionals, Second Edition* (Goodman et al. 1996). It is uniquely valuable both as a stand-alone instructional text and as a companion to the second edition, which introduced the Patient Impairment Lexicon and the PIP system itself. The Casebook's updates to the Impairment Lexicon definitions that first appeared in *Managing Managed Care II* are based on the authors' ongoing psychometric evaluation and research. This practical text will find its way onto the bookshelves of mental healthcare practitioners and managed care personnel alike. Psychiatrists, clinical psychologists, clinical social workers, marriage and family therapists, and psychiatric nurses -- especially those participating as managed care providers -- and case managers and utilization reviewers within managed care organizations, regardless of background, will find a framework for success within these pages. The Casebook's broad appeal also extends to both students in healthcare disciplines and the graduate programs that train them, and to psychiatric/behavioral healthcare organizations and facilities (inpatient, outpatient, and residential), where it will be used for treatment planning.

"This volume is an extremely successful exploration of the practical application of the PIP system."-- "Doody's Journal"  
"Until Managed Care has been hanged, drawn and quartered and replaced by a more equitable and effective system of medical coverage, this "Casebook for Managing Managed Care" furnishes clinicians with a metaphorical lode-star, compass, and radar screen to navigate these treacherous waters. This highly informative book provides the practitioner with more than a survival guide for documenting and communicating their clinical activities to third party payers. The many examples also serve as excellent vignettes for modeling the ingredients of efficient assessment/treatment methods and empirically supported rationales in general."-- "Arnold A. Lazarus, Ph.D., ABPP, Distinguished Professor Emeritus of Psychology, Rutgers University; President, Center for Multimodal Psychological Services, Princeton, New Jersey"  
"This book has come along at just the right time. As all clinicians are realizing the need to relate effectively to managed care programs, this book by Jeffrey Bjorck, Janet Brown and Michael Goodman offers a sound solution in the form of a carefully reasoned and researched system that begins with identification of the patient's impairments and follows through by rating the severity of the impairments, developing an impairment profile from which goals and objectives for treatment are established, selecting interventions along with performance measures and tracking patient progress to termination. Throughout, the emphasis of the system is to justify treatment needed and document progress in that treatment. This book offers significant solutions to a very thorny problem for many in clinical practice. To facilitate learning the system the book is written as a self-study workbook with numerous case examples to practice on and many helpful comments by the authors at predictable trouble points.... The authors are to be commended for their fine work in this area. The approach taken by the authors is one that will be invaluable for training students and for professional development of those in the field."-- "C. Eugene Walker, Ph.D., Professor Emeritus, University of Oklahoma Medical School, Edmond, Oklahoma"  
"From the Inside Flap  
In today's environment of managed care, practitioners face more daunting challenges than ever: treatment authorizations are becoming more difficult to obtain, as are referrals to other healthcare practitioners, which are increasingly performance based. Into this challenging environment comes *Casebook for Managing Managed Care: A Self-Study Guide for Treatment Planning, Documentation, and Communication*. Dedicated to helping mental healthcare practitioners clearly articulate and prove the value of what they provide patients within the managed care system, this foundational text uniquely fills a gap in the literature by providing a user-friendly, self-contained tutorial for the Patient Impairment Profile (PIP) documentation method. As a model for treatment plan development, the PIP combines impairment terminology, the impairment profile, and the various treatment plan components to create a common language for describing behavior-based patient dysfunction and communicating the clinical rationale for treatment. Using clear language and a wide array of case vignettes, the Casebook demonstrates how using the PIP system can streamline the documentation,

communication, and decision-making processes. Useful as a stand-alone instructional text for all mental health care practitioners (e.g., psychiatrists, clinical psychologists, clinical social workers, marriage and family therapists, and psychiatric nurses, especially those participating as managed care providers) and for case managers and utilization reviewers -- regardless of background -- this volume is also intended for use as a companion to *Managing Managed Care II: A Handbook for Mental Health Professionals*, Second Edition, (Goodman et al. 1996), which introduced the PIP and the Patient Impairment Lexicon (research-based definition updates are provided in the Casebook).

About the Author Jeffrey P. Bjorck, Ph.D., is an Associate Professor of Psychology at Fuller Theological Seminary's Graduate School of Psychology in Pasadena, California. He is also a licensed clinical psychologist in private practice. Dr. Bjorck obtained his Doctor of Philosophy degree from the University of Delaware, having completed his internship at the University of Oklahoma Health Sciences Center. He has served on the faculty of Fuller Seminary's Graduate School of Psychology for the past 9 years, where his teaching responsibilities include courses in Psychometric Theory, MCMI-III Assessment, Human Learning, and Multimodal Therapy. Dr. Bjorck also conducts empirical research, including the ongoing psychometric evaluation of the Patient Impairment Lexicon, which provides the basis for the Patient Impairment Profile system outlined in this text and its companion, *Managing Managed Care II: A Handbook for Mental Health Professionals* (Goodman, et al. 1996).

Janet A. Brown, R.N., C.P.H.Q., is a consultant in quality, utilization, and risk management with psychiatric and medical-surgical, acute and ambulatory, healthcare organizations, all of which are now positioning for managed care. Ms. Brown has 22 years of experience in the evaluation, development, and implementation of effective strategies, systems, and processes to meet federal and state regulations, accreditation standards, and review requirements, as well as managed care and employer/payer information needs. Ms. Brown is the author of *The Healthcare Quality Handbook: A Professionals Resource and Study Guide*, currently in its 14th edition, and serves as instructor for quality management professionals preparing for the certification examination. She has chaired the national Healthcare Quality Educational Foundation and was the 1995--1996 president of the National Association for Healthcare Quality.

Michael Goodman, M.D. (1945--1996), was a clinical psychiatrist in private practice in Beverly Hills and Pasadena, California. He attended Tufts Medical School and completed his psychiatry residency at Northwestern University in Chicago, Illinois. Dr. Goodman served for 14 years as a physician advisor with the former California Professional Standards Organization and its current successor, California Medical, Inc. He was also a consultant in managed mental healthcare with treatment programs and practitioner groups participating in newer managed deliver models. Dr. Goodman was an assistant professor at the UCLA School of Medicine, Department of Psychiatry and Neurobehavioral Sciences, Los Angeles, California. He was also a mental healthcare consultant for the American Medical Association's Doctors Advisory Network, which provides "hands-on" assistance with managed care to members of the American Medical Association. He died on June 17, 1996.