

Characteristics of Managed Behavioral Health Care Organizations in 1996

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Objective: Data from a survey of managed behavioral health care organizations were analyzed to describe characteristics of these firms as well as service utilization and revenues. **Methods:** Six managed behavioral health care organizations fully completed a survey by the American Managed Behavioral Healthcare Association in which they reported 1996 data for their contracts. The contracts represented more than 16 million covered lives and accounted for approximately 13 percent of all individuals enrolled in managed behavioral health care organizations in 1996. **Results:** More than three-quarters of the contracts (77.5 percent) were nonrisk. Plans described as network-based risk contracts, which represented 28.7 percent of covered members, accounted for 71.1 percent of revenues. The vast majority of reported contracts were with private employers or health maintenance organizations (HMOs); these contracts accounted for 76.8 percent of reported revenues. HMOs tended to place somewhat greater restrictions on outpatient psychotherapy and outpatient medication management visits than did other types of payers; the most common limit for HMO-related contracts was 20 outpatient visits a year, compared with 50 visits a year for other payer categories. HMO contracts also required higher copayments for outpatient visits. Utilization of services differed by payer type; for example, use of inpatient services ranged from .18 percent of covered members for contracts with private employers to .90 percent of covered members for Medicaid contracts. **Conclusions:** Overall rates of service utilization were lower than those reported in other recent studies of managed behavioral health care. The survey findings provide a starting point to guide further investigation in this area. (*Psychiatric Services* 51:1422-1427, 2000).

The managed behavioral health care industry began in the mid-1980s as a reaction to increased costs resulting from the growing inclusion of mental health and substance abuse benefits in private insurance plans. As health plans, insurance companies, self-funded plans (Employer Retirement Income Security plans), and health maintenance organizations (HMOs) began to offer managed care products for

behavioral health, managed behavioral health organizations emerged to manage these benefits by setting up and administering behavioral health provider networks (1).

Enrollment in managed behavioral health care programs has grown steadily, from 78.1 million in 1992 to an estimated 124 million in 1996 (1). Of the estimated 181.4 million people with health insurance in 1996, a total of 68.4 percent were enrolled in some

type of specialty managed behavioral health organization (2). Most organizations are large for-profit companies that operate across different types of employers and geographic areas. The industry is dominated by a small number of large firms, and their networks and operations may function differently from place to place (3).

Behavioral health care services may be embedded, as are other services, in the general delivery system of a health plan, they may be provided through a distinct and separate structure, or they may be offered in a hybrid way involving elements of both approaches (4). The term managed behavioral health care encompasses a variety of programs and technological applications. Types of products include administrative services only, utilization review, employee assistance programs, integrated management, and full-risk arrangements. The role of a managed behavioral health care organization differs markedly across these products. Arrangements vary in their intensity of care management, levels of risk, and amount of revenue, ranging from the purely administrative service and provider network model at one extreme to the full-risk capitated product at the other (5).

Despite the growing enrollment in managed behavioral health care arrangements, relatively little is known about the characteristics of the organizations and the scope of services. Kihlstrom (6) acknowledged that little information about managed behavioral health care firms is available through the major associations, and because many of the firms are not traded publicly, much of the information is proprietary.

Data for Kihlstrom's study were obtained through national surveys con-

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Managed Behavioral Health Care An Industry Perspective

Alan J. Kent, Michel Hersen



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Managed Behavioral Health Care Sharon A. Shueman, Warwick G. Troy, Samuel L. Mayhugh, 1994-01-01 *Managed Behavioral Health Care* Sharon A. Shueman, Warwick G. Troy, Samuel L. Mayhugh, 1994-01-01 *Annotated Bibliography for Managed Behavioral Health Care 1989-1999*, 2000 **Blueprints for Managed Care** Frank D. McGuirk, Andrew B. Keller, Colette Croze, 1996-12 Considers three models consumer flow dollar flow and full model in generic system without at risk contracting generic system with full capitation and full transfer of utilization risk and generic system with partial case rate funding shared utilization risk and centralized utilization management The blueprints of state systems covers consumer flow dollar flow and full model in Arizona pre and post reform systems Oregon pre and post reform systems and Washington State pre and post reform systems and a comparison of the three state systems **Handbook of Quality Management in Behavioral Health** George Stricker, Warwick G. Troy, Sharon A. Shueman, 2013-11-11 For the first time in history behavioral health providers are expected to understand and participate in activities intended to access and improve the quality of services they provide This handbook is designed as a general resource in the field of behavioral health quality management for a very diverse group of readers including graduate and undergraduate students payors purchasers and administrators within managed care organizations public sector service system planners and managers applied health services researchers and program evaluators This volume provides a comprehensive context for the development of quality management QM in health services behavioral health in particular as well as an overview of tools techniques and programs reflecting QM in practice It also offers perspectives on both internally and externally based QM activities Managed Behavioral Health Care Handbook E. Clarke Ross, 2001 Written by a team of nationally recognized authorities on managed care Managed Behavioral Health Care Handbook guides you through specific strategies that characterize contemporary efforts made at managing behavioral health care building a clear understanding of their role and their effect in improving the quality of behavioral health care today and in the future From beginning to end you will learn the core components of the managed behavioral health care process and gain invaluable insight into the numerous controversies and public policy issues

Personality Assessment in Managed Health Care James N. Butcher, 1997-08-28 In response to the many challenges facing mental health professionals in the era of managed care this highly respected group of contributors from academia managed care and full time clinical practice outline the importance of personality assessment particularly through the use of MMPI 2 Butcher and his colleagues argue that psychological assessment plays an indispensable role in managed care both because it is an essential tool for evaluating the effectiveness of therapy and because of its significant contributions to the structuring and shortening of the process of therapy By providing working examples of psychological treatment in the context of managed care this book shows us that the most effective treatments use personality assessment as their foundation *Integrated Behavioral Healthcare* Nicholas A. Cummings, Victoria Follette, Steven C. Hayes, William

O'Donohue,2001-09-05 Healthcare is now practiced in a different financial and delivery system than it was two decades ago. Currently managed care defines what is treated, how, by whom, and for what reimbursement. Mental health professionals have been greatly impacted by these changes to their practice, and yet there is little understanding of exactly what it is and where it is going. The present volume explores these issues, prospects, and opportunities from the vantage of mental health medical professionals and managed care executives who are in the very process of implementing changes to the existing system of managed care. Behavioral healthcare will be integrated into medical practice in the future for sound clinical and economic reasons. The present volume, edited by four prominent mental health professionals, provides a roadmap of the emerging directions integrated behavioral healthcare is taking and lays out the steps the mental health professional needs to take in training and modifying her/his clinical practice to adapt to the new system of healthcare. Leading Experts in managed care: Nicholas Cummings, Father of behavioral managed care; Multidisciplinary approach: *Managed Behavioral Healthcare*; Michael A. Freeman, 1994. **Psychological Testing in the Age of Managed Behavioral Health Care** Mark E. Maruish, E. Anne Nelson, 2001-08. Written by a recognized expert in assessment employed by a large managed behavioral healthcare organization, MBHO, this book seeks to provide psychologists who rely on testing as an integral part of their practice a guide on how to survive and thrive in the era of managed behavioral healthcare. It also offers ideas on how to capitalize on the opportunities that managed care presents to psychologists. The goal is to demonstrate that despite the tightening of the reins on authorizations for reimbursable testing, psychological testing can continue to play an important role in psychological practice and behavioral healthcare service delivery. The book presents ideas for increasing the likelihood of getting tests authorized by MBHOs using inexpensive public domain assessment instruments, ethically using psychological testing in MBHO settings, capitalizing on the movement to integrate primary care and behavioral healthcare through the use of psychological testing and designing and implementing outcomes assessment systems within MBHO settings. Intended for practicing psychologists and other behavioral health practitioners employed by MBHOs in direct service delivery, care management, or supervisory positions, as well as for graduate clinical or counseling psychology students who will most likely work in MBHO settings. *Managing Managed Care* Committee on Quality Assurance and Accreditation Guidelines for Managed Behavioral Health Care, Institute of Medicine, 1997-05-05. Managed care has produced dramatic changes in the treatment of mental health and substance abuse problems, known as behavioral health. *Managing Managed Care* offers an urgently needed assessment of managed care for behavioral health and a framework for purchasing, delivering, and ensuring the quality of behavioral health care. It presents the first objective analysis of the powerful multimillion-dollar accreditation industry and the key accrediting organizations. *Managing Managed Care* draws evidence-based conclusions about the effectiveness of behavioral health treatments and makes recommendations that address consumer protections, quality improvements, structure, and financing roles of public and private participants, inclusion of special populations, and ethical

issues The volume discusses trends in managed behavioral health care highlighting the emerging role of the purchaser The committee explores problems of overlap and fragmentation in the delivery of behavioral health care and discusses the issue of access a special concern when private systems are restricted and public systems overburdened Highly applicable to the larger health care system this volume will be of particular interest to all stakeholders in behavioral health federal and state policymakers public and private purchasers health care providers and administrators consumers and consumer advocates accrediting organizations and health services researchers

Best Practices in Financial Management for Behavioral Health and Social Services J. Jay Mackie, 2008-08 *Pathways of Addiction* Institute of Medicine, Committee on

Opportunities in Drug Abuse Research, 1996-11-01 Drug abuse persists as one of the most costly and contentious problems on the nation's agenda *Pathways of Addiction* meets the need for a clear and thoughtful national research agenda that will yield the greatest benefit from today's limited resources The committee makes its recommendations within the public health framework and incorporates diverse fields of inquiry and a range of policy positions It examines both the demand and supply aspects of drug abuse *Pathways of Addiction* offers a fact filled highly readable examination of drug abuse issues in the United States describing findings and outlining research needs in the areas of behavioral and neurobiological foundations of drug abuse The book covers the epidemiology and etiology of drug abuse and discusses several of its most troubling health and social consequences including HIV violence and harm to children *Pathways of Addiction* looks at the efficacy of different prevention interventions and the many advances that have been made in treatment research in the past 20 years The book also examines drug treatment in the criminal justice setting and the effectiveness of drug treatment under managed care The committee advocates systematic study of the laws by which the nation attempts to control drug use and identifies the research questions most germane to public policy *Pathways of Addiction* provides a strategic outline for wise investment of the nation's research resources in drug abuse This comprehensive and accessible volume will have widespread relevance to policymakers researchers research administrators foundation decisionmakers healthcare professionals faculty and students and concerned individuals

Handbook of Mental Health Administration and Management William H. Reid, Stuart B. Silver, 2013-08-21 Clinicians who understand mental health care administration in addition to their clinical fields are likely to be valuable to the organizations in which they work This handbook is an accessible source of information for professionals coming from either clinical or management backgrounds Sections offer coverage in mental health administrative principles mental health care management business finance and funding of care information technology human resources and legal issues

Mental Health Measures in Medicaid HEDIS Gail K. Robinson, 1996 **Textbook of Administrative Psychiatry** John A. Talbott, Robert E. Hales, 2001 This textbook provides the practitioner and student of administration in behavioral healthcare an overview of the evolving behavioral health system core and new administrative psychiatry concepts new roles for behavioral health players how selected behavioral health systems are changing the trend toward integrated systems and

law and ethics **Health Care Policy and Practice** Cynthia Moniz, Stephen Gorin, 2018-12-07 In Health Care Policy and Practice A Biopsychosocial Perspective Moniz and Gorin guide students through the development of the American health care system what it is what the policies are and how students can influence them Part I focuses on recent history and reforms Part II examines the system s structure and policies and Part III explores policy analysis and advocacy and disparities in health based on demographics and inequities in access to care The book concludes with a discussion of the impact of social factors on health and health status This new fifth edition has been fully updated to include the Trump administration s efforts to repeal and replace the Affordable Care Act ACA and to integrate content throughout the text on the impact of the ACA in recent years In addition new content on health disparities for the LGBTQ community has been added **A Psychologist's Proactive Guide to Managed Mental Health Care** Alan J. Kent, Michel Hersen, 1999-12-01 A Psychologist s Proactive Guide to Managed Mental Health Care offers a concise overview of the evolution of managed mental health care and its impact on the working lives of clinical and counseling psychologists Although many books explore the ramifications of managed care for psychotherapy this is the first to take a broad perspective and examine the ways in which the new health care delivery system is affecting all aspects of practice not just treatment but also assessment and training as well as mental health research The authors include some of the country s most noted psychologists with extensive experience in managed care Their tone is optimistic rather than pessimistic as they look at developments others have only deplored they see potential roles and opportunities for growth for psychologists In an era of dramatic health change all those practitioners who are concerned about how to make managed care work for them rather than against them will find this Guide essential reading **ALTERNATE BLURBA** Psychologist s Proactive Guide to Managed Mental Health Care offers a concise overview of the evolution of managed mental health care and its impact on the working lives of clinical and counseling psychologists While many books explore the ramifications of managed care for psychotherapy this is the first to take a broad perspective and examine the ways in which the new health care delivery system is affecting all aspects of practice not just treatment but also assessment and training and mental health research as well *Smart Technologies in Healthcare Management* Nidhi Sindhwani, Sarvesh Tanwar, Ajay Rana, Ramani Kannan, 2024-06-28 Offering a holistic view of the pioneering trends and innovations in smart healthcare management this book focuses on the methodologies frameworks design issues tools architectures and technologies necessary to develop and understand intelligent healthcare systems and emerging applications in the present era Smart Technologies in Healthcare Management Pioneering Trends and Applications provides an overview of various technical and innovative aspects challenges and issues in smart healthcare along with recent and novel findings It highlights the latest advancements and applications in the field of intelligent systems and explores the importance of cloud computing and the design of sensors in an IoT system The book offers algorithms and a framework with models in machine learning and AI for smart healthcare management A detailed flow chart and innovative and modified

methodologies related to intelligent computing in healthcare are discussed as well as real world based examples so that readers can compare technical concepts with daily life concepts This book will be a useful reference for academicians and the healthcare industry along with professionals interested in exploring innovations in varied applicational areas of AI IoT and machine learning Researchers startup companies and entrepreneurs will also find this book of interest Health Care, USA Harry A. Sultz, Kristina M. Young, 2006 During the last few years components of the health care system in the United States have changed more rapidly than ever before New industry developments health insurance changes and major cost increases have significant implications for both providers and consumers Changes in the Medicare program on which all other service charges are based double digit premium increases by managed care companies the growing number of uninsured and a nation wide movement among physicians to set up ambulatory diagnostic surgical and other treatment centers in competition with hospitals are changing the structure and operation of the U S health care system The 5th edition contains updated service utilization and financial information as well as updated health care industry trends with the latest developments All existing tables and charts have been updated and new tables and charts have been added to highlight trends and illustrate major points of the narrative

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