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Managed Care in Human Services


Managed Care in Human Services, edited by Steven Wernet, provides the human services professional with an exclusive view of the impact of managed care on the evolution of human services organizations, relationships, and systems. Through case studies of systems and agency reforms, and structural reforms and changes in the helping professions and client relationship, the reader is exposed to the key concepts and service delivery dilemmas of managed care. By utilizing a well-organized structure, with easy-to-read texts, Wernet introduces the issues facing systems, agencies, professions, and clients, as managed care tumbles from the health care industry to human services.

After a comprehensive introduction, Wernet organizes the book into three sections. Each section is comprised of case studies developed by a range of practitioners and academics. This allows the reader to study the concepts in entirety or digest the sections independently. This structure also provides excellent and flexible teaching tools for social workers, counselors, psychologists, and business students. Continuing education students, as well as Master's level students, will be challenged and stimulated by the development of ideas in each section.

The case studies reflect public sector and private sector experiments and initiatives. Each provides the environmental context for the reader, assisting in the reader's understanding of how managed care is transforming the system organization and client-professional relationship. By describing system and organizational responses, one is aware of the transformation of the human service delivery system. It provides an accurate portrayal of the constraints and successes in overlying a medical system on a caring system based in human relationships.

The business principles as well as operating assumptions of managed care are described as they impact community networks of services, large public systems, and traditional agencies. Throughout each section, the reader is introduced to how the struggle of walking between the understanding of capitation and those serving the abused child and his/her family in a time-limited, protocol-driven context fuels reform efforts. Privatization, joint ventures, and shared resources long utilized in the business community expand to the work of serving individuals and families.

Experiments and innovation, and organizational struggle and development run throughout each section. The conclusion clearly summarizes how organizations are responding to managed care initiatives — what works and what does not. By providing a range of experiences and issues, Wernet and associates create fertile ground for thought, discussion, and creative expansion of the current system. At the end of the book, the reader has been well versed, with concrete examples from a variety of sources, in managed care in human services. Professional students will be updated on the trends and changes in their respective fields, the development issues for their organizations, and some new perspectives for human services as a whole.

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