

CURRICULUM VITAE

J. HAROLD BERBERICK

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Education:

Doctor of Education, Leadership Studies and Public Administration
Fairleigh Dickinson University, Teaneck, New Jersey

Master of Arts, Psychology

University of Northern Colorado, Greeley, Colorado

Bachelor of Arts, Sociology, Minors in Psychology and Philosophy
Regis College, Denver, Colorado

Continuing Education and Institutes:

Harvard University, John F. Kennedy School of Government

Institute for Senior Executives of the Commonwealth of Massachusetts

Institute on the Management of Change

Institute on Management Strategies

Williams College, Williamstown, Massachusetts

AK Rice Institute, Institute for Applied Study of Social Systems

State University of New York, Graduate School of Public Administration, Albany,
New York

Coursework in Public Administration

Certification:

Board Certified in Healthcare Management, American College of Healthcare Executives

Professional Experience:

1999-present **PRESIDENT**

Behavioral Health Strategies, Inc.

Principal for Behavioral Health Strategies, Inc., a firm which provides consultation and expert witness malpractice services for law firms and attorneys, both on the plaintiff and defense sides. Areas of specialty include: most aspects of mental health, behavioral health and developmental disabilities services in group homes, psychiatric hospitals, developmental centers, mental health residential care, emergency services, social/vocational services, managed care, health maintenance organizations (HMOs), and psychiatric rehabilitation. Expertise extends to wrongful death and injuries, treatment plan compliance,

standards of care, seclusion and restraint, adherence to regulatory standards, quality assurance and accreditation.

Expert witness work includes record reviews, report writing, deposition, court testimony, and consultation.

Behavioral Health Strategies also provides a wide range of consultation and management services to the Behavioral Healthcare Industry to foster success and competitiveness within a complex healthcare environment. This also includes Interim Management for Mental Health Centers, Hospitals, Inpatient Units, Outpatient Services, and Comprehensive Delivery Systems during periods of transition, merger, succession and initiation of new programs.

Behavioral Health Strategies also specializes in short-term focused consultation in the areas of delivery system assessment, managed care, quality assurance, financial management, systems integration, standards of care, performance management and accreditation.

Responsible for all aspects of the business, including financial management, development of tools, systems and products, marketing, planning, etc.

1998-1999

**EXECUTIVE DIRECTOR
Greater Lawrence Mental Health Center, Inc.
Lawrence, Massachusetts**

Chief Executive for a comprehensive community mental health center serving the culturally diverse city of Lawrence and surrounding towns. Responsible for all programmatic and fiscal operations of the Center and for managing complex relationships with the local communities, the State Departments of Mental Health and Medical Assistance and private HMO companies. Accomplishments included bringing stability to a previously financially and clinically troubled agency, reorganizing all clinical services, initiating new programs, major quality assurance improvements, recovery of significant dollars in accounts receivable, deemed uncollectable, and exceeding fiscal year budget plan.

1992-1998

**EXECUTIVE DIRECTOR, PILGRIM BEHAVIORAL HEALTH, INC.
Harvard Pilgrim Health Care
Quincy, Massachusetts**

Planned, initiated and administered all mental health and substance abuse services for a nationally recognized Health Maintenance Organization of 400,000 members enrolled in a network model delivery system. Responsible for a mental health budget in excess of \$40 million. Managed an extensive psychiatric services system that consisted of comprehensive crisis, inpatient, hospital diversion, and outpatient services for Commercial, Medicaid and Medicare enrolled members. Developed a strong staff model clinical program with case management, crisis services, and intensive outpatient services. Established a separate, wholly owned corporation with a board of directors to expand and market mental health and substance abuse services. Functioned as a senior manager for Harvard Pilgrim in all aspects of mental health managed care, including contracting, facility and provider credentialing, budgeting and quality assurance. Managed complex

relationships between the Managed Care Organization and the external environment.

The Harvard Pilgrim Behavioral Health Program was based on strong values and principles, and emphasized high quality care and customer satisfaction, while simultaneously achieving impressive financial targets. Achievements included high customer satisfaction, achievement of National Commission of Quality Assurance (NCQA) behavioral health requirements, meeting employer performance standards, obtaining annual savings of over \$3 million in substance abuse services, and maintaining very favorable per member per month (PMPM) costs.

1988-1992 **AREA DIRECTOR, LOCAL SERVICE CENTER**
Massachusetts Department of Mental Retardation
Southeastern Massachusetts

Planned and managed a comprehensive and integrated system of developmental disabilities/mental retardation services in Southeastern Massachusetts. The system consisted of a continuum of services, including day and residential programs, family support, respite, emergency services and case management. Provided oversight of twenty provider agencies, serving 700+ clients. Managed Local Service Center, including program and fiscal operations for a complex system of contracted services. Performed systems planning, community relations and quality assurance, staff hiring, training and siting new programs. Also ensured compliance with Federal court consent decrees, community education and consultation, legislative liaison, and maintained an active local citizens advisory board. Placed particular emphasis on developing small residential units in the community, on supported and transitional employment, and on specialized programs for difficult to serve populations.

1980-1988 **AREA DIRECTOR/MENTAL HEALTH CENTER DIRECTOR**
Massachusetts Department of Mental Health
Southeastern Massachusetts

Planned, administered and evaluated a comprehensive system of care for the mentally ill, the mentally retarded, and children and adolescents in the Cape Cod and Attleboro areas of Southeastern Massachusetts. Included direct management of an extensive network of community support services for the mentally ill, including case management services, a full continuum of residential care, emergency services, psychosocial rehabilitation, and outpatient services. Additional services for the mentally ill and mentally retarded were provided through program and fiscal oversight of voluntary agencies that supplemented the State network of services. Also had extensive experience in managing inpatient services, including a comprehensive community mental health center with 33 certified acute care beds and an 88-bed inpatient unit for acute and long-term patients.

Accomplishments included regaining certification of the inpatient unit and significantly expanding housing, psychosocial rehabilitation and case management services. Improved working relationships with other agencies, family associations, neighborhood groups, local legislators, etc. in developing a

consensus for the direction of the system and in gaining community acceptance of mental health and retardation programs. Greatly reduced the fragmentation and competitiveness of the local mental health system to that of an integrated system under the direction of the Area Office, with a primary focus on providing appropriate services for the severely disabled. Also achieved the lowest per capita utilization of inpatient beds in the state.

1978-1980

DIRECTOR OF PROJECT MANAGEMENT
New York State Office of Mental Health, Central Office
Albany, New York

Senior management position with responsibility for the implementation and ongoing operation of newly funded community programs and special projects throughout the New York State mental health system. This included the initial implementation of the \$28 million Community Support Program in the state. Administered the statewide Alternative Living, Group Residences, and Family Care Programs. Administered federal formula grants and special demonstration projects. State coordinator for Housing and Urban Development (HUD) Demonstration Program for chronically mentally ill – obtained \$5.1 million in federal funding. Developed and implemented Crisis Residence Program in thirteen psychiatric centers across the state. Worked closely with other state agencies to regulate and improve conditions in single room occupancy hotels and proprietary homes for adults. Worked closely with commissioner-level staff in formulating and implementing mental health programs and policy in the state. Gained broad experience in working with all levels of government – county, executive branch, and legislative. General responsibilities included supervision of statewide residential programs, policy development, program implementation, voluntary and proprietary sector liaison, budget preparation and staff supervision responsibilities. Position was responsible to the Deputy Commissioner for Program Operations.

1971-1978

DIRECTOR OF REHABILITATION SERVICES
Capital District Psychiatric Center
Albany, New York

The Center is a progressive State Community Mental Health facility providing inpatient and community-based services in a nine-county catchment area with a population of approximately 1,000,000 persons. One of fifteen senior staff initially hired to develop the Capital District Psychiatric Center. Developed and managed a wide variety of rehabilitation programs both in the Center and in the community. Placed particular emphasis on establishing programs in the community that served as alternatives to inpatient care for long-term patients. These included group and crisis residences, hostels, group apartments, vocational rehabilitation programs, transitional employment, medical services, social clubs and other outpatient programs. A number of these programs were developed to service long-term patients who were “repatriated” from distant custodial hospitals. Developed programs in collaboration and partnership with County providers of services, emphasizing the development of a single system of care. Administrative responsibilities included overseeing a staff of 60, administering the program budget, obtaining grant funds, and program evaluation.

Initiated the first group residences, halfway houses/admission diversion and apartment programs in New York State psychiatric centers. These programs were acknowledged as models and were replicated in many areas of the state.

Interim Management:

Executive Director, Chesapeake Youth Center, Cambridge, Maryland. Chief Executive responsible for the Chesapeake Youth Center, which consisted of 120 residential beds, a psychiatric inpatient unit, emergency services, and an academic school serving both males and females who were referred by the Departments of Mental Health and Social Services and the juvenile criminal justice system.

Executive Director, Behavioral Health Services, Crittenton Hospital and Medical Center, Rochester, Michigan. Responsible for Adult and Geriatric Inpatient Services, Day Hospital programming and Psychiatric Emergency Services.

Vice President (Interim), Behavioral Health Services, jointly operated by Erie County Medical Center and the Department of Psychiatry, State University of New York at Buffalo. Responsible for 120 psychiatric inpatient beds, 50 alcohol and substance abuse beds, outpatient mental health and substance abuse services, an emergency medication clinic, and psychiatric emergency services for adults and children. Erie County Medical Center operated one of New York State's highest volume Psychiatric Emergency Services and Acute Inpatient programs.

Expert Witness:

Approved as an expert witness in the jurisdictions of New York, Connecticut, Ohio, Illinois, New Hampshire, Pennsylvania, Missouri, Utah, and Wyoming. Cases involved sexual assault, wrongful death, abuse and neglect, wrongful termination of employment, improper use of restraints, and other standards of care issues.

Committees and Boards (Partial):

Chair, Committee on Long-Term Strategic Planning, Fort Logan Mental Health Center, Denver, CO.

Committee on Implementation of the Problem-Oriented Medical Record, Capital District Psychiatric Center, Albany, NY.

President, Capital District Chapter, National Rehabilitation Association, Albany, NY.

Chair, Statewide Resource Allocation and Systems Planning Committee, Massachusetts Department of Mental Health, Boston, MA.

Chair, Cape Cod and the Islands Area Director Selection Committee, Hyannis Port, MA

Chair, Executive Committee for Mental Health and Substance Abuse Services, Harvard Pilgrim Health Care, Dedham, MA.

Committee for Implementation of National Commission of Quality Assurance Standards (NCQA) for Pilgrim Health Care.

Member, Board of Directors, Pond Long-Term Care, Wrentham, MA

Member, Board of Directors, Pond Meadow, Wrentham, MA

Chair, Board of Directors Haley House, Inc., Boston, MA.

Consultations:

Matthew Thornton Health Plan, Bedford, New Hampshire

Mental Health Consultant and Acting Director of Mental Health for 170,000-member Health Maintenance Organization. Consulted on all aspects of Mental Health Program. Restructured provider contracts, developed performance standards for employer groups, initiated quality assurance and utilization management programs for compliance with National Commission on Quality Assurance (NCQA).

Joint Commission on Accreditation of Hospitals, Chicago, Illinois

Assisted in development of new Joint Commission accreditation standards.

Albany Medical College, Albany, New York

Consulted in psychiatric rehabilitation and conducted community education.

American Psychiatric Association, Joint Information Service

Assisted in development of innovative models for residential services.

State of North Carolina

Assisted and consulted with Local Management Entity (LME) in developing Medicaid Managed Care initiatives.

Professional and Research Activities:

Principal Co-Investigator, University of Connecticut and Robert Wood Johnson Foundation Pilot Project in "Risky Drinking," at Pilgrim Behavioral Health.

"Crisis Residences: An Evaluation of an Alternative to Psychiatric Inpatient Treatment,"
Doctoral Dissertation.

Adjunct Faculty in the Graduate Program of Rehabilitation Counseling, State University of New York at Albany.

Project Co-Director, National Institute of Mental Health, Community Support Demonstration and Replication Grant.

Administrator, National Institute of Mental Health Grant, "The Fort Logan Lodge: Intentional Community for Chronic Patients."

Select Papers Presented:

"The Budgetary and Managerial Aspects of Operating a Comprehensive Rehabilitation Program," International Association of Psycho-Social Rehabilitation Services, Philadelphia, Pennsylvania.

"Case Management: A Foundational Service," Conference on Innovations in Community Mental Health, Boston, Massachusetts.

"A Comprehensive Model for Providing Residential Services for Severely Disabled Persons," New York State Conference on Alternative Living, Monticello, New York.

"Designing a Community Support System for New York State," Council of State Governments, Atlantic City, New Jersey.

“Principles and Practice of Servant Leadership,” Conference on Best Practices in the Market Place, Bangalore, India.

“Theory and Practice of Psychiatric Rehabilitation,” Albany Medical College, Grand Rounds Presentation, Albany, New York.

“Psychiatric Rehabilitation: A Research Perspective,” National Conference on Psycho-Social Rehabilitation, Cleveland, Ohio.

“A Research Perspective on Problem Patients in Community Mental Health,” International Association of Psycho-Social Rehabilitation Services, Los Angeles, California.

“Residential Services as Support Systems in the Community,” New York Conference on Community Support Systems and Psycho-Social Rehabilitation, Albany, New York.

“Restructuring Mental Health Services in New York City Utilizing a Community Support Model,” New York City Federation of Voluntary Mental Health Agencies, New York City.

“The Role of Residential and Community Support Services in Rural Psychiatry,” Conference on Rural Mental Health, Gowanda, New York.

“Transitional Services for the Mentally Ill,” National Rehabilitation Association, Cherry Hill, New Jersey.

“A Work Therapy Program in a New State Hospital,” National Conference on Adjunctive Therapy, Forest Hospital, Des Plaines, Illinois.

Areas of Professional Interest:

Legal issues in mental health and developmental disabilities, behavioral health management, large systems conceptualization and management, quality assurance, and behavioral health research.

Professional Affiliations:

American College of Healthcare Executives (Fellow), Board Certified in Healthcare Management (#215057)

American College of Mental Health Administration (Fellow)

American Orthopsychiatric Association (Fellow)

American Psychological Association

American Association of Intellectual and Developmental Disabilities (AAIDD)

(Revised 4/9/15)