

Predicament of Services: An Independent Survey of New Orleans Mental Healthcare System

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Abstract In the city of New Orleans, a number of social, cultural, economic, and historical factors have affected the availability and accessibility of mental health services. To assist individuals suffering from mental illness in the city of New Orleans, various agencies, programs and databases have been implemented to promote easy access to the available mental health services. This study explores the ease of accessing available mental health services through telephone contact. The telephone was used as the main source of contact in this study to emulate the experience that a potential mental health client would undergo when trying to find treatment. National, state, and local mental health provider databases were used to compose a list of mental health agencies in the New Orleans area. One hundred and twenty-seven facilities were identified as mental health treatment agencies. Each agency was contacted by phone and requested to participate in the study by completing a 15-item questionnaire regarding the availability and accessibility of mental health services. Seventy-nine percent [n= 101] of the agencies contacted by phone did not answer or had an automated voicemail service. Descriptive information regarding the availability and accessibility of mental health services, types of services, and treatment populations are reported and discussed. This research addresses the disparities between the burden of mental disorders, resources and accessibility.

Keywords: *New Orleans, mental health services, availability, accessibility*

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1. Predicament of Services: An Independent Survey of New Orleans Mental Healthcare System

Mental healthcare is fundamental in Louisiana and difficulty accessing it adversely affects the residents and society as a whole. Louisiana estimates approximately 4,659,978 residents; out of that number, 172,000 (or 5%) of adults 18 years of age and older suffer with Serious Mental Illness (SMI) [1]. Unfortunately, only 19,468 individuals were reportedly receiving services for serious mental illness (SMI) [1]. The state of Louisiana is ranked number 16 in the country for individuals age 18 and older with Serious Mental Illness (SMI) [2]. According to SAMHSA, only 38.2% of adults with mental illness in Louisiana receive any form of treatment from either the public or private sectors [1]. The remaining 61.8% receive no mental health treatment. According to Mental Health America (MHA) 2019 statistics, Louisiana ranks 41st in access to mental health care [3]. This ranking was determined by Louisiana's access to mental health services that include: psychiatric hospitals, nonfederal general hospitals with a separate psychiatric inpatient unit,

residential treatment centers for children with emotional disturbance, residential treatment centers for adults, freestanding outpatient facilities, and multi-setting (non-hospital based) MH (mental health) facilities. The city of New Orleans, Louisiana circumvents the plight of mental illness by providing a plethora of mental health services to its residents.

"In 2015, the total adult population in Orleans Parish was 360,524, and out of that group 19,468 individuals were receiving services for serious mental illness (SMI). Orleans Parish has a population of 46,762 children and youth between the ages of 9-17, and out of that group there are 3,273 children that receive services for serious emotional disturbances (SED) In 2015, New Orleans had a total population of 407,286; out of the population, 22,741 people were being treated for SED or SMI" [2].

According to US Census data, New Orleans, LA has more mental health care service providers than the national average ratio of mental health service providers. The mental health provider ratio in New Orleans is 340:1; the national average is 500:1 [4]. With a mental health provider ratio that excels beyond the national average, how does New Orleans attribute the number of SMI and SED residents that go without services? The purpose of this study is to examine the availability and accessibility of mental health services in New Orleans.

1.1. Trends of New Orleans Mental Health

Mental health services in New Orleans, Louisiana has exhibited consistent proclivities throughout its history. In 1816, Charity Hospital became the first institution to provide inpatient services to the mentally ill [5]. By 1847, Charity Hospital had concluded its services to the mentally ill due to deficiencies in quality care; but in 1852, the New Orleans Temporary Insane Asylum opened its doors [5]. The New Orleans Temporary Insane Asylum provided services for thirty years; throughout its tenure, they changed their location multiple times. One of the locations was in a prison, but by December of 1856, the "insane department" was abolished and mentally ill inmates were directed to the state asylum [5]. The New Orleans Temporary Insane Asylum foreshadows many of the issues that are prevalent in the city today. The city of New Orleans' dilemma of quality of care and the substitution of mental health facilities for prisons are issues that are ongoing.

1.2. Impact of Hurricane Katrina on Mental Health

In 2005, Hurricane Katrina drastically changed the New Orleans mental healthcare system. Due to deinstitutionalization, New Orleans has lost several beds in psychiatric hospitals needed for mental health patients. An estimated 92 psychiatric beds were lost from the closure of Charity Hospital located in downtown New Orleans [6]. This hospital accounted for over 80% of care costs before 2005, when Hurricane Katrina hit the Greater New Orleans area [7]. The State of Louisiana Bureau of Health Services Financing originally reported, "In May 2007, the Louisiana Department of Health (LDH) was awarded a \$100 million Primary Care Access Stabilization Grant (PCASG)" (as cited in LPHI, 2017, p. 8-9) [8]. This grant was given to help provide more access to primary, mental health, and dental care services to all patients no matter their income.

Hurricane Katrina will always be remembered as one of the worst disasters in history. Evidence suggests that disasters can trigger different mental and physical health issues (e.g., trauma-related disorders, depression, anxiety, and substance abuse). In 2005, the Centers for Disease Control and Prevention (CDC) conducted a study of where 50 percent of returning New Orleans residents displayed signs of a need for mental health treatment [9]. Similar research found that from 222 survivors surveyed, over half (52%) continued to experience poor mental and physical health 15 months after Katrina [10]. According to the Substance Abuse Mental Health Services Administration (SAMSHA), "between 2005-2010, there were 93,000 residents (age 12 and over) of the New Orleans area and the surrounding cities of Metairie and Kenner that were classified as having a substance use disorder" [11].

1.3. Substance Abuse, Criminal Justice and Mental Health

Based on a study conducted, it was found that those who suffer from both substance abuse and mental illness are 7.47 times as likely to be arrested and booked in

comparison to those with substance abuse issues alone (5.32) as well those with serious mental health issues (1.84) [12]. In regards to mental health and substance abuse, the statistics indicate that when the two co-exist in a person, it is quite detrimental in terms of the probability that an individual will enter the criminal justice system. As a result of the correlation between mental illness and the criminal justice system, New Orleans created a Consent Decree with its police officers to minimize the use of force against those who suffer from mental health illness or are diagnosed with behavioral health issues. In order to do so the New Orleans Police Department (NOPD) initiated the Crisis Intervention Team (CIT). The CIT's purpose is to evaluate situations and determine if there are any mental health issues that present themselves. CIT is the primary responder to mental health/ behavioral health issues. In an interview, an interviewee stated the CIT officers act as de facto case managers [6].

The National Alliance on Mental Illness indicated that individuals in a mental health crisis are more likely to have interactions with the police than get medical help. Over 2 million individuals suffering from a mental illnesses are arrested each year [13]. Considering their now criminal history it is conceivably more difficult to get needed services because of a lack of funds, insurance, and overall accessibility.

1.4. Availability vs. Accessibility

According to the World Health Organization (WHO), availability is defined as the sufficient supply and appropriate stock of health workers, while accessibility is the equitable distribution of the health workers [14]. According to the Office of Disease Prevention and Health Promotion, accessibility requires 3 distinct steps: (1) entry into the healthcare system (usually through insurance coverage); (2) location where needed health services are provided; and (3) rapport between providers and patients [15].

As indicated by the Office of Disease Prevention and Health Promotion, there is a direct association between insurance coverage and accessibility. According to Davis (2019), insurance coverage and access to care plays a major role in the treatment of mental health. One study found that individuals suffering from psychological distress experienced more difficulty accessing health care services than adults without such distress [16,17]. Whether or not a patient has insurance or not, is just one issue. Other aspects to consider are the type of reimbursable services, such as the copayments, cost of medication and other costs for services.

The insurance companies that provide mental health services in the New Orleans area are: Atena, American Fidelity Assurance Company, Blue Cross Blue Shield of LA, CIGNA HealthCare, and Humana [18]. TRICARE, Medicare, and Medicaid also provide mental health services to the New Orleans area. Insurances with low reimbursement rates lead to mental health care providers not accepting patients who have their health care plans. For example, in the 2000s, Medicare reimbursement rates for psychologists were on the decline, and a survey showed that 26% of psychologists had stopped accepting Medicare citing low reimbursement rates as the reason for

their departure [19]. Reimbursement rates for mental health services can range from \$7.83 to \$504.62 depending on the type and duration of the service [1,20,21,22].

According to research, insurance issues are only one barrier; a bigger barrier is locating mental health providers who are available to meet the patient's needs [23]. Williams, Gilroy, Chang and Seymour (2017) surmised in their study that depending on the insurance company and level of training, only 9.8% to 59% of providers could offer a new patient appointment with psychiatry appointments being particularly difficult to schedule. In their project, they used what is known as a "secret shopper" methodology. Three researchers made scripted telephone calls to all behavioral health providers within 20 miles of central Denver who were listed in the online insurance directories of Anthem BlueCross BlueShield, United Healthcare, and Cigna [23]. The researchers pretended to be patients with depression (mild to moderate). Insurance companies were contacted by researchers to make inquiries about scheduling a psychiatric appointment. The study concluded that up to 10 calls were necessary to obtain an appointment with a psychiatrist [23]. The methodology of this study provides clear evidence of availability and accessibility of mental health services therefore, the scripted telephone calls procedure is used as a data collection method in the New Orleans Mental Health Services Survey.

2. Method

This study presents findings from the New Orleans Mental Health Services Survey (NOMHSS) conducted from September 2019 through October 2019. The NOMHSS was used to collect information from agencies in the New Orleans area that provide mental health treatment services. This section describes the research procedure, material and analysis used in the study.

2.1. Procedure

A database of mental health agencies was composed based on the following criteria: (1) agency licensed and accredited to provide mental health treatment (2) agency main location in one of the 17 Orleans Parish zip codes (3) agency provides mental health services to residents who live within the 17 Orleans Parish zip codes. National, state, and local mental health treatment provider databases were used to identify qualifying mental health agencies [20,21,22,23,28]. Agencies were classified by seven types of providers categories including: psychiatric hospital, inpatient psychiatric unit of a hospital, residential treatment center for children or adults, outpatient or day treatment mental health agencies, multi-setting mental health agencies (non-hospital residential plus outpatient or day treatment or partial hospitalization), and correctional facilities.

One hundred and twenty-seven facilities were identified as mental health treatment agencies. Each agencies' main offices were contacted by phone and requested to participate in the study by completing a 15-item questionnaire regarding the availability and accessibility of mental health services. Data was recorded and analyzed.

Descriptive statistics and research findings are reported in the results section in Table 1 – Table 6.

2.2. Instruments

A 15-item questionnaire form, the New Orleans Mental Health Service Questionnaire Form (NOMHSS) (Table 7), was adapted from the Substance Abuse and Mental Health Services Administration, 2012 National Mental Health Services Survey (N-MHSS) [11]. The NOMHSS is designed to collect data on the services, characteristics, and accessibility of mental health treatment service agencies throughout the New Orleans area. Participates were allowed to select multiple items on the NOMHSS to provide detailed information regarding each agency. IBM Statistical Package for the Social Sciences (SPSS) was used for the statistical analysis of the collected data.

3. Results

Based on the research findings, there are over 127 mental health agencies available to provide services to individuals in the New Orleans area (Table 1). 79% of the agencies contacted by phone did not answer or had an automated voicemail service (Table 1). Roughly, 5% of the agencies contacted did not have a working phone number. Of the agencies that answered the phone, (15.6%) 80% of those agencies elected to participate in the study.

Table 1. Accessibility of Mental Health Service via Telephone

Agency Responses	Frequency	Percent
<i>Answered the Phone</i>	20	15.6%
<i>No Answer/Voicemail</i>	101	78.9%
<i>Number Not in Service</i>	6	4.7%
<i>Agreed to Participate</i>	16	80%
<i>Withdrew from the Study</i>	4	20%
Total (N=127)		

Of the 16 agencies that completed the survey, roughly 88% reported that consumers access their services through outside referrals, while 62.5% were from walk-in and court orders (Table 2). The majority of the agencies surveyed (81.3%) reported advertising their services through television, the internet, or other media formats (Table 2).

Table 2. Accessibility of Mental Health Service via Other Methods

Agency Responses	Frequency	Percent
<i>Referral</i>	14	87.5%
<i>Walk-in</i>	10	62.5%
<i>Court-Ordered</i>	10	62.5%
<i>Other</i>	4	25%
<i>Advertise programs</i>	13	81.3%
Total (N=16)		

Note: Participates were allowed to select multiple items

3.1. Available Mental Health Services

The mental health agencies surveyed in this study offer an array of services that include: intake services, diagnostic evaluation, referral services, mental health treatment services, substance abuse treatment services,

outpatient mental health services, telemedicine therapy, and crisis intervention present in Table 3. Less than seven percent of the agencies surveyed indicated that they provide 24-hour hospital inpatient service (Table 3).

Table 3. Available Mental Health Services

Agency Services	Frequency	Percent
<i>Mental health intake</i>	13	81.3%
<i>Diagnostic evaluation</i>	7	43.8%
<i>Mental health information and referrals</i>	10	62.5%
<i>Mental health treatment</i>	11	68.7%
<i>Substance abuse treatment</i>	9	56.3%
<i>24-hour hospital inpatient</i>	1	6.3%
<i>24-hour residential</i>	6	37.5%
<i>Less than 24-hour day treatment</i>	3	18.8%
<i>Less than 24-hour outpatient</i>	6	37.5%
<i>Consumer-run (peer support)</i>	5	31.2%
<i>Psychiatric emergency walk-in</i>	4	25%
<i>Telemedicine therapy</i>	2	12.5%
<i>Crisis intervention</i>	9	56.3%
<i>Total (N=16)</i>		

Note: Participates were allowed to select multiple items

3.2. Agency Classification and Characteristics

The majority of the agencies surveyed (68.7%) identified themselves as an outpatient, day treatment, or partial hospitalization mental health agency. Residential treatment center for adults (37.5%) and residential treatment center for children (31.3%) accounted for one-third of the agencies surveyed. 31% of the agencies that completed the survey identified themselves as a psychiatric hospital or other state government agency. State mental health agency (SMHA) and local, county, and parish government agencies accounted for 25%, while tribal government accounted for 13% of the agency classifications. 13% categorized themselves as a private for-profit organization, while 44% reported they are categorized as a private non-profit organization. 19% reported themselves as a separate inpatient psychiatric unit of a general hospital. Less than 7% (6.3%) identified their agencies as a multi-setting mental health agency or a jail, prison, or detention center. All but one agency (93.7%) reported being licensed as a mental health agency and having a National Provider Identifier (NPI) number (Table 4).

Table 4. Agency Classification and Characteristics

Agency Classification	Frequency	Percent
<i>Psychiatric hospital</i>	5	31.3%
<i>Psychiatric unit of a general hospital</i>	3	19%
<i>Residential treatment center for children</i>	5	31.3%
<i>Residential treatment center for adults</i>	6	37.5%
<i>Outpatient or day treatment</i>	11	68.7%
<i>Multi-setting agency</i>	1	6.3%
<i>Jail, prison, or detention center</i>	1	6.3%
<i>A private for-profit organization</i>	2	12.5%
<i>A private non-profit organization</i>	7	43.7%
<i>State mental health agency (SMHA)</i>	4	25%
<i>Other state government agency</i>	5	31.3%
<i>Regional/district authority or local, county, parish or municipal government</i>	4	25%
<i>Tribal government</i>	2	12.5%
<i>Licensed or accredited</i>	15	93.7%
<i>National Provider Identifier (NPI) number</i>	15	93.7%
<i>Total (N=16)</i>		

Note: Participates were allowed to select multiple items.

3.3. Treatment Population, Payment, and Insurance

The agencies that agreed to complete the survey reported the following data regarding their treatment population. Children (aged 17 or younger) accounted for 44% of the treatment population, while 81% were young adults (18-25) or adults (26 or older). Mood and anxiety disorders were identified as the most prevalent disorder with 68%, while autism spectrum disorders, attention deficit, conduct disorders, schizophrenia and or other psychoses were 56% of the treatment population. Eating disorders (e.g., anorexia nervosa, bulimia) were identified as a large treatment group (62.5%) and other disorders not listed accounted for 56% of the population.

Table 5. Treatment Population Served

Treatment Population	Frequency	Percent
<i>Schizophrenia or other psychoses</i>	9	56.3%
<i>Mood disorders</i>	11	68.7%
<i>Autism spectrum disorders</i>	9	56.3%
<i>Attention deficit or conduct disorders</i>	9	56.3%
<i>Anxiety disorders</i>	11	68.7%
<i>Eating disorders</i>	10	62.5%
<i>Other</i>	9	56.3%
<i>Children (aged 17 or younger)</i>	7	43.7%
<i>Young adults (18-25)</i>	13	81.3%
<i>Adults (26 or older)</i>	13	81.3%
<i>Mental health treatment services for the hearing-impaired</i>	6	37.5%
<i>Mental health treatment services in a language other than English</i>	6	37.5%
<i>Total (N=16)</i>		

Note: Participates were allowed to select multiple items.

The majority of the agencies surveyed (50%) accepted cash or self-payment, while 63% accepted Medicaid and 38% accepted Medicare. Federal military insurance and private health insurance were accepted as a form of payment for 31% of the agencies. 31% of the agencies used a sliding fee scale and 38% offered treatment at no charge to clients who could not pay.

Table 6. Type of Payment and Insurance Accepted

Payment and Insurance	Frequency	Percent
<i>Sliding fee scale</i>	5	31.3%
<i>No charge</i>	6	37.5%
<i>Cash or self-payment</i>	8	50%
<i>Medicare</i>	6	37.5%
<i>Medicaid</i>	10	62.5%
<i>State-financed plan</i>	4	25%
<i>Federal military insurance</i>	5	31.3%
<i>Private health insurance</i>	5	31.3%
<i>IHS/638 contract funds</i>	2	12.5%
<i>Other</i>	1	6.3%
<i>Total (N=16)</i>		

Note: Participates were allowed to select multiple items.

4. Conclusion

The research findings indicate that there are over 127 mental health agencies in the New Orleans area, which

provide an assortment of outpatient, inpatient and residential mental health services. Of the sample selected, private non-profit organizations, outpatient, day treatment, and partial hospitalization mental health agencies were the larger groups. However, state-funded inpatient services represent a much smaller portion of the agencies sampled, which would suggest financial means play a part in the availability of certain mental health services. The data suggest that mental health services are widely available to individuals in the New Orleans area, but economic factors influence consumer options.

Regarding the accessibility of mental health services in New Orleans, research findings indicate that consumers may face obstacles communicating with service providers through the telephone. Barriers to access services can result in reducing the overall effectiveness of treatment and exacerbate consumers' frustration and mental illness symptoms. Agencies that have no working telephone number or automated voicemail services may deter consumers from attempting to locate the help that they need.

The research method of investigation was designed to mimic a consumers attempt to access mental health services through internet searches, databases, and telephone contact. This design revealed limitations in a number of issues regarding the accessibility of mental health services, but it also restricted the sample size of the agencies surveyed. Future studies may find alternative data collection strategies (e.g., mailed surveys, staff interviews, or consumer interviews) more effective in attaining a larger sample size.

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References

- [1] United States Census Bureau. (2018). United States Census Bureau QuickFacts: Louisiana; Orleans Parish, Louisiana. (n.d.). Retrieved from <https://www.census.gov/quickfacts/fact/table/LA,orleansparishlouisiana/PST045218>
- [2] Louisiana Department of Health Office of Behavioral Health. (2017, September 1). FY 2018-2019 Combined Behavioral Health Assessment and Plan Community Mental Health Services and Substance Abuse Prevention and Treatment Block Grants. Retrieved from http://ldh.la.gov/assets/csoc/block_grant/FY1819_Block_Grant_PI_an_approved_update.pdf.
- [3] Mental Health America (MHA). (2019). Overall Ranking. Retrieved from <https://www.mhanational.org/issues/ranking-states#four>.
- [4] Substance Abuse and Mental Health Services Administration. (2019). Behavioral Health Barometer: Louisiana, Volume 5: Indicators as measured through the 2017 National Survey on Drug Use and Health and the National Survey of Substance Abuse Treatment Services. Retrieved from [https://store.samhsa.gov/system/files/louisiana-bh-barometer-volume5-sma19-baro-17-us.pdf](https://store.samhsa.gov/website:https://store.samhsa.gov/system/files/louisiana-bh-barometer-volume5-sma19-baro-17-us.pdf).
- [5] Vandal, G. (2005). Curing the Insane in New Orleans: The Failure of the "Temporary Insane Asylum," 1852-1882. *Louisiana History: The Journal of the Louisiana Historical Association*, 46, (2), pp. 155-184.
- [6] Louisiana Public Health Institute (LPHI) (2017). The New Orleans Behavioral Health Crisis System. pp. 1-39.
- [7] Rudowitz, R., Rowland, D., & Shartzter, A.. Health Care in New Orleans Before And After Hurricane Katrina. (2006, August 29). Retrieved from <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.25.w393>.
- [8] State of Louisiana Bureau of Health Services Financing. (2011). Greater New Orleans Community Health Connection Provider Manual. Retrieved from <http://www.lamedicaid.com/provweb1/Providermanuals/manuals/GNOCHC/GNOCHC.pdf>.
- [9] Centers for Disease Control and Prevention. (2006, January 20). Assessment of Health-Related Needs After Hurricanes Katrina and Rita --- Orleans and Jefferson Parishes, New Orleans Area, Louisiana, October 17-22, 2005. *Morbidity and Mortality Weekly Report (MMWR)*, pp. 55(02); 38-41.
- [10] Rhodes, J., Chan, C., Paxson, C., Rouse, C. E., Waters, M., & Fussell, E. (2010). The impact of Hurricane Katrina on the mental and physical health of low-income parents in New Orleans. *American Journal of Orthopsychiatry*, 80(2), 237-247.
- [11] Substance Abuse and Mental Health Services Administration (SAMHSA), National Survey on Drug Use and Health (NSDUH): 2012a. Substance Use and Mental Disorders in the New Orleans-Metairie-Kenner Metropolitan Statistical Area (MSA). Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.
- [12] Prince, J. D., & Wald, C. (2018). Risk of criminal justice system involvement among people with co-occurring severe mental illness and substance use disorder. *International Journal of Law and Psychiatry*, 58, 1-8.
- [13] National Alliance on Mental Illness (NAMI). (n.d.). Jailing People with Mental Illness. Retrieved from <https://www.nami.org/learn-more/public-policy/jailing-people-with-mental-illness>.
- [14] World Health Organization (WHO). (2019). What do we mean by availability, accessibility, acceptability and quality (AAAQ) of the health workforce? Retrieved from <https://www.who.int/workforcealliance/media/qa/04/en/>.
- [15] Office of Disease Prevention and Health Promotion (ODPHP). (2019). Access to Health Services Healthy People 2020. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>.
- [16] McKenna, R. M., Pintor, J. K., & Ali, M. M. (2019). Insurance-based disparities in access, utilization, and financial strain for adults with psychological distress. *Health Affairs*, 38(5), 826-834, 834A-834F.
- [17] Davis, J. (2019). Children with chronic illness: When compliance is complicated: The essential guide to hospital-based care planning the essential guide to hospital-based care planning. *Hospital Case Management*, 27(10) Retrieved from <https://search.proquest.com/docview/2287016668?accountid=26173>.
- [18] Louisiana Department of Insurance. (n.d.). Understanding Health Care Networks. Retrieved October 13, 2019, from <http://www.lidi.la.gov/consumers/insurance-type/healthinsurance/healthcare-provider-network>.
- [19] American Psychological Association. (2015, March). Medicare's Shrinking Psychologist Reimbursement Rates. Retrieved from <https://www.apaservices.org/practice/advocacy/state/leadership/medicare-payment>.
- [20] Aetna. (n.d.). Save money with Aetna's provider network. Retrieved October 3, 2019, from <http://www.aetna.com/individuals-families-health-insurance/document-library/2013-aetna-bh-provider-network.pdf>.
- [21] American Medical Association. (2019, July 1). Fee schedule for Community/Private Mental Health Centers. Retrieved September 30, 2019, from <https://medicaid.ms.gov/wp-content/uploads/2014/03/CommunityMentalHealthCenter.pdf>.
- [22] U.S. Centers for Medicare & Medicaid Services. (2018). Physician Fee Schedule Search. Retrieved from <https://www.cms.gov/apps/physician-fee-schedule/license-agreement.aspx>.

[23] Williams, M., Gilroy, J., Chang, T., Seymour, D. (2017). Challenges for insured patients in accessing behavioral health care. *Annals of Family Medicine*, 15, 363-365.

[24] City of New Orleans Health Department. (2019). Health Department - Providers. Retrieved from <https://www.nola.gov/health/resources/>.

[25] National Alliance on Mental Illness (NAMI) New Orleans. (2019). Resource Guide: A Roadmap to Resources and Support for Persons Living With Mental Illness Retrieved from <https://namineworleans.org/wp-content/uploads/sites/145/2019/06/NAMI-Resource-Guide-6.5.19-WEB-FINAL.pdf>.

[26] The NOLA Partnership for Mental Health. Resource Guide. (n.d.). Retrieved from <https://www.nolapartnership.org/resources.html>.

[27] Substance Abuse and Mental Health Services Administration (SAMHSA). Behavioral Health Treatment Services Locator. (n.d.). Retrieved from <https://findtreatment.samhsa.gov/>.

[28] Substance Abuse and Mental Health Services Administration (SAMHSA), National Mental Health Services Survey (N-MHSS): 2012. Data on Mental Health Treatment Facilities. BHSIS Series S-78, HHS Publication No. (SMA) 16-4949. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2015.

Appendix

Table 7. Research Script

<p>Research Script Directions: Read the script below when contacting a participating agency representative.</p> <ul style="list-style-type: none"> • Hello, my name is _____. • I am a Dillard University student investigating the availability and accessibility of mental health services in New Orleans. • If you choose to participate in this study, you will be asked to complete a brief 14-item questionnaire over the phone. • The agency you represent and your personal information will not be published; only responses to the questions will be recorded. No identifying consumer information or data will be collected in this study; only information that would be advertised or available to consumers will be requested. • You may withdraw from the study at any time. • If you have any questions, please feel free to contact the principal investigator, Dr. Sean Gibbs, Assistant Professor of Psychology. 2601 Gentilly Boulevard, New Orleans Louisiana 70122. 504.816.4604. sigibbs@dillard.edu. • Are you willing to participate in our study? <i>If the response is yes, then proceed to ask the questions listed below. If the response is no, politely thank the representative for their time, end the call, and notate the response.</i>
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Table 8. New Orleans Mental Health Service Questionnaire Form

New Orleans Mental Health Service Questionnaire Form Directions: MARK “YES” OR “NO FOR EACH ITEM	
Agency Services	
1. Does this agency, at this location, offer:	
A. Mental health intake services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
B. Mental health diagnostic evaluation	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
C. Mental health information and referral services (also includes emergency programs that provide services in person or by telephone)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
D. Mental health treatment services (services focused on improving the mental well-being of individuals with mental disorders and on promoting their recovery)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
E. Substance abuse treatment services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
F. 24-hour hospital inpatient services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
G. 24-hour residential services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
H. Less than 24-hour day treatment or partial hospitalization services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
I. Less than 24-hour outpatient mental health services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
J. Consumer-run (peer support) services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
K. Psychiatric emergency walk-in services	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
L. Telemedicine therapy	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
M. Crisis intervention	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
Agency Classification	
2. Which ONE category best describes this agency, at this location?	
A. Psychiatric hospital	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
B. Separate inpatient psychiatric unit of a general hospital	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
C. Residential treatment center for children	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
D. Residential treatment center for adults	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
E. Outpatient or day treatment or partial hospitalization mental health agency	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
F. Multi-setting mental health agency (non-hospital residential plus outpatient or day treatment or partial hospitalization)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
G. Is this agency a jail, prison, or detention center that provides treatment exclusively for incarcerated persons or juvenile detainees?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
3. Is this agency operated by:	
H. A private for-profit organization	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
I. A private non-profit organization	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
J. State mental health agency (SMHA)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
K. Other state government agency or department (e.g., Department of Health)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
L. Regional/district authority or local, county, parish or municipal government	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
M. Tribal government	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
N. U.S. Federal agency	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
O. Other (Specify: _____)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>

New Orleans Mental Health Service Questionnaire Form	
Directions: MARK "YES" OR "NO FOR EACH ITEM	
Treatment Population	
4. Does this agency, at this location, provide treatment services that specifically address:	
A. Schizophrenia or other psychoses	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
B. Mood disorders (e.g., bipolar, depression)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
C. Autism/autism spectrum disorders	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
D. Attention deficit or conduct disorders (e.g., ADHD, disruptive behavior disorder)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
E. Anxiety disorders (e.g., PTSD, obsessive-compulsive disorder, phobia disorder)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
F. Eating disorders (e.g., anorexia nervosa, bulimia)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
G. Other (Specify: _____)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
5. What age groups are accepted for treatment at this agency?	
H. Children (aged 17 or younger)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
I. Young adults (18-25)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
J. Adults (26 or older)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
6. Does this agency offer mental health treatment services for the hearing-impaired?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
7. Does this agency provide mental health treatment services in a language other than English at this location?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
Type of Payment and Insurance Accepted	
8. Does this agency use a sliding fee scale?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
9. Does this agency offer treatment at no charge to clients who cannot afford to pay?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
10. Which of the following types of client payments or insurance are accepted by this agency for mental health treatment services?	
A. Cash or self-payment	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
B. Medicare	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
C. Medicaid	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
D. State-financed health insurance plan other than Medicaid	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
E. Federal military insurance (such as TRICARE)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
F. Private health insurance	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
G. IHS/638 contract care funds	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
H. Other (Specify: _____)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
Agency Accessibility	
11. How do consumer typically access your agencies' services?	
A. Referral	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
B. Walk-in	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
C. Court-Ordered	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
D. Other (Specify: _____)	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
12. Does this agency advertise information about the agency's mental health treatment programs (e.g. website, database, television, newspaper ads)?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
13. Is this agency licensed or accredited as a mental health clinic or mental health center?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
14. Does this agency have a National Provider Identifier (NPI) number?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>
15. Does this agency offer any internships/volunteer opportunities?	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 3 Unsure <input type="checkbox"/>

This form was adapted from the Substance Abuse and Mental Health Services Administration, National Mental Health Services Survey (N-MHSS): 2012.



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