



**Mental Health  
Association  
in New Jersey, Inc.**

# Wait Times for Outpatient Mental Health Treatment in New Jersey

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MENTAL HEALTH ASSOCIATION IN NEW JERSEY

# Methodology

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## Introduction:

- MHANJ contacted 124 outpatient mental health facilities\* in 21 counties.
- Of these, 14 that reported they are not providing outpatient mental health services.
- Of the remaining 110 facilities, 17 did not respond (max. 3 phone calls made).
- Data summary includes 93 facilities responding to survey.

## Timeline:

- Calls were made January 12-28, 2022.
- Data analyzed throughout February 2022.

\*NJMentalHealthCares provided list of facilities and made calls.

## Categories assessed:

- Time for intake appointment.
- Time for counseling/therapy appointment including individual and group.
- Time for clinical/medication appointment with psychiatrist or psych APN.

## Important Notes:

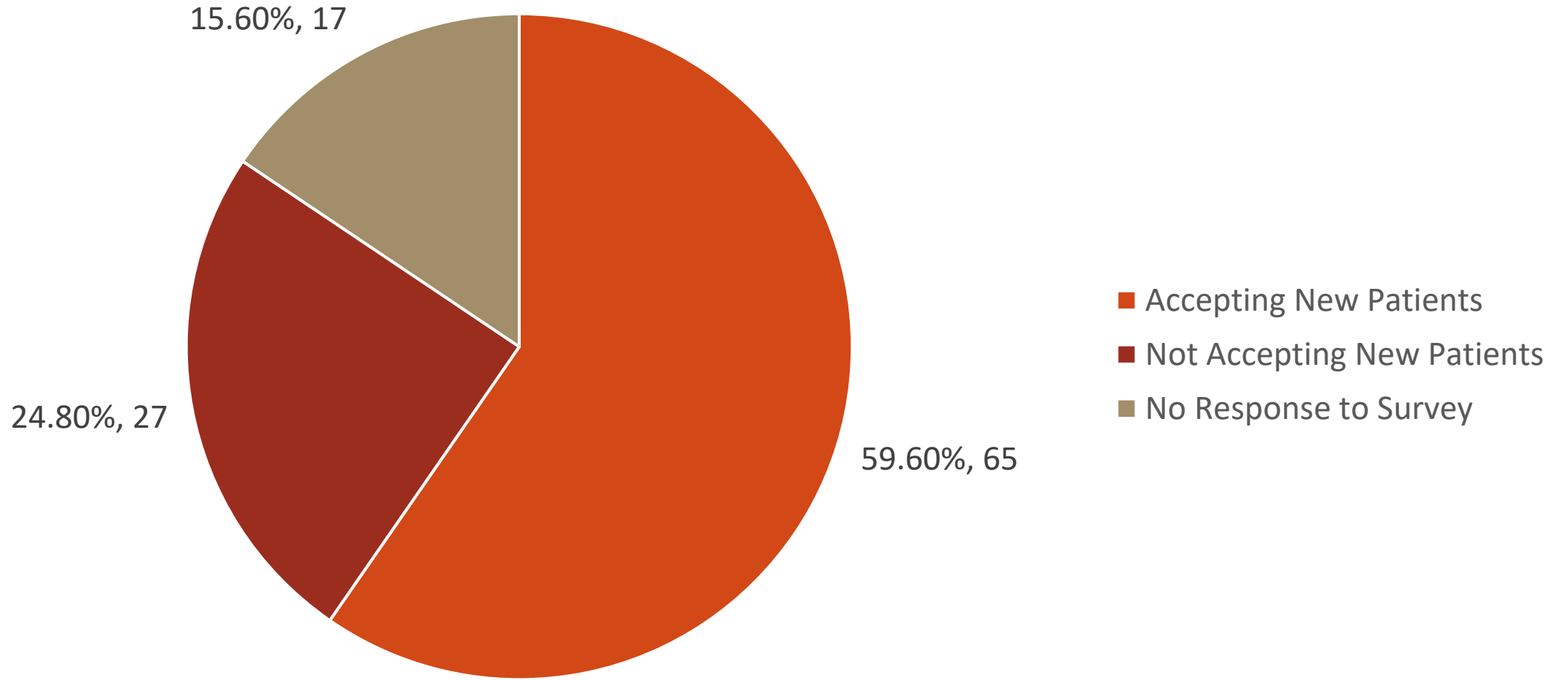
- Study conducted for MHANJ call center.
- Snapshot in time.
- Not a secret shopper study.

# Key Findings

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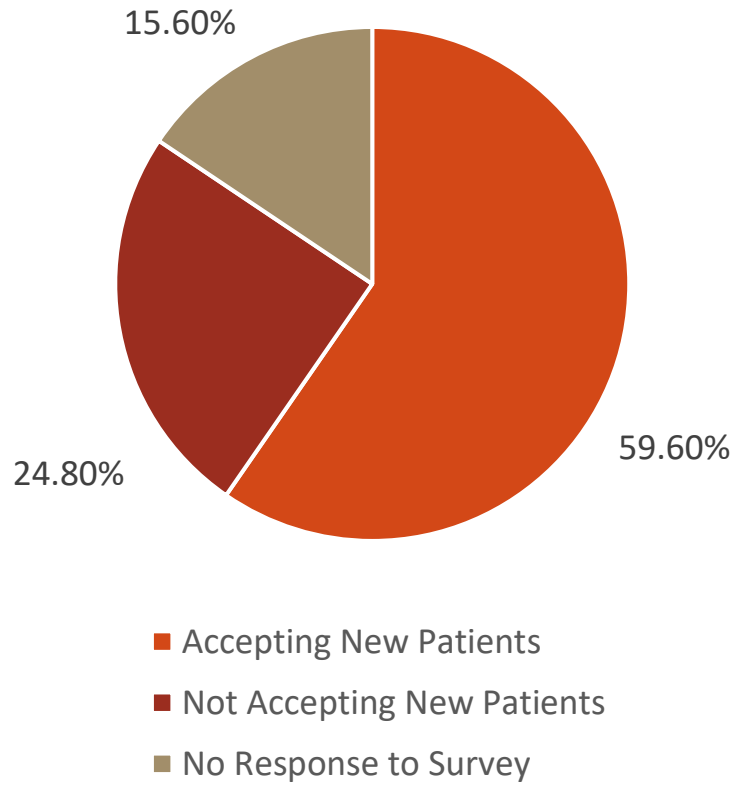
- Over 15% of facilities did not respond to survey/call us back; this is a concern for people seeking appointments for mental health services.
- 25% of facilities contacted are not accepting new patients.
- While 60% of facilities contacted reported they are accepting new patients, wait times for counseling and psychiatric appointments are lengthy.
- Max. wait time for intake and counseling appointments= >12 weeks; Max. wait time for clinical appointments was >22 weeks.
- Wait times vary largely across all counties, with some having few or no appointments available at all.
- Several organizations have consolidated specifically in the southern region and some counties could offer very few (if any) appointments.

## 25% of Facilities Are Not Accepting Any New Patients

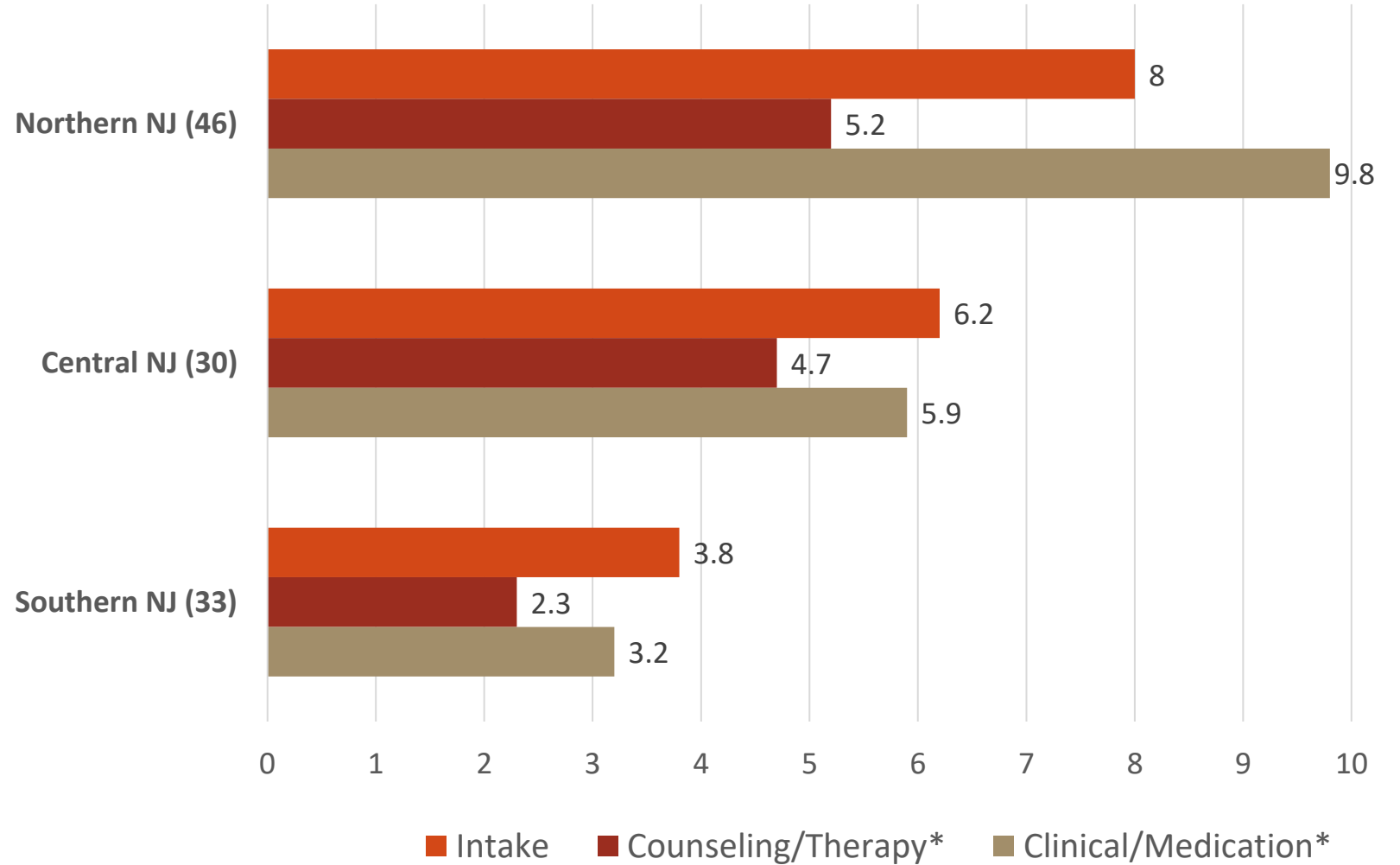


# Summary

## 25% of Facilities Are Not Accepting Any New Patients



## Average Outpatient Wait Times (Weeks)



\*Counseling & Clinical appts. follow intake

# Recommendations

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As access to mental health appointments remains an issue, the following actions are recommended:

- Increase hours and staffing of EISS.
- Address workforce shortage issues across the state.
  - Legislate and/or convene a Governor's appointed task force (April-June) to come up with short-term and long-term recommendations to increase the mental health and SUD workforce in the state.
  - Reevaluate DOBI regulations for network adequacy to ensure access to care is considered.
- Statewide assessment of staffing vacancy rate.
- Modify requirements for billing sign-off where possible.
- Increase salaries for licensed clinicians, peers, and direct care providers; reevaluate reimbursement rates.
- Identify barriers to private practitioners participating in MCO networks.
- Support 988 implementation and community crisis interventions programs (e.g., mobile community crisis teams, stabilization centers, respites).

# Wait Time Study and Advocacy

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