



Screening, Brief Intervention and Referral to Treatment (SBIRT)

Key components

Screening

A very brief set of questions that identifies the risk of substance use disorder (SUD) related problems

- It should be 5 to 10 minutes long.
- Reimbursement requires the use of validated screening instruments.

Brief Intervention (BI)

A short (5 to 30 minutes long) counseling session that raises awareness of risks and motivates the client toward acknowledgment of the problem

Referral to Treatment

Procedures to help the member access specialized treatment.

Potential benefits



Positively affects

- Patients with SUDs
- Patient morbidity and mortality rates



Reduces

- Health care costs
- Work impairment and incidents of driving under the influence



Improves

- Neonatal outcomes

Potential benefits for practices



Awareness

- Increases clinicians' awareness of substance use issues



Better approach

- Offers clinicians a more systematic approach to addressing substance use and makes it less of a judgment call

Example

Referral to treatment

3%

Alcohol use/dependence in past 12 months

23%

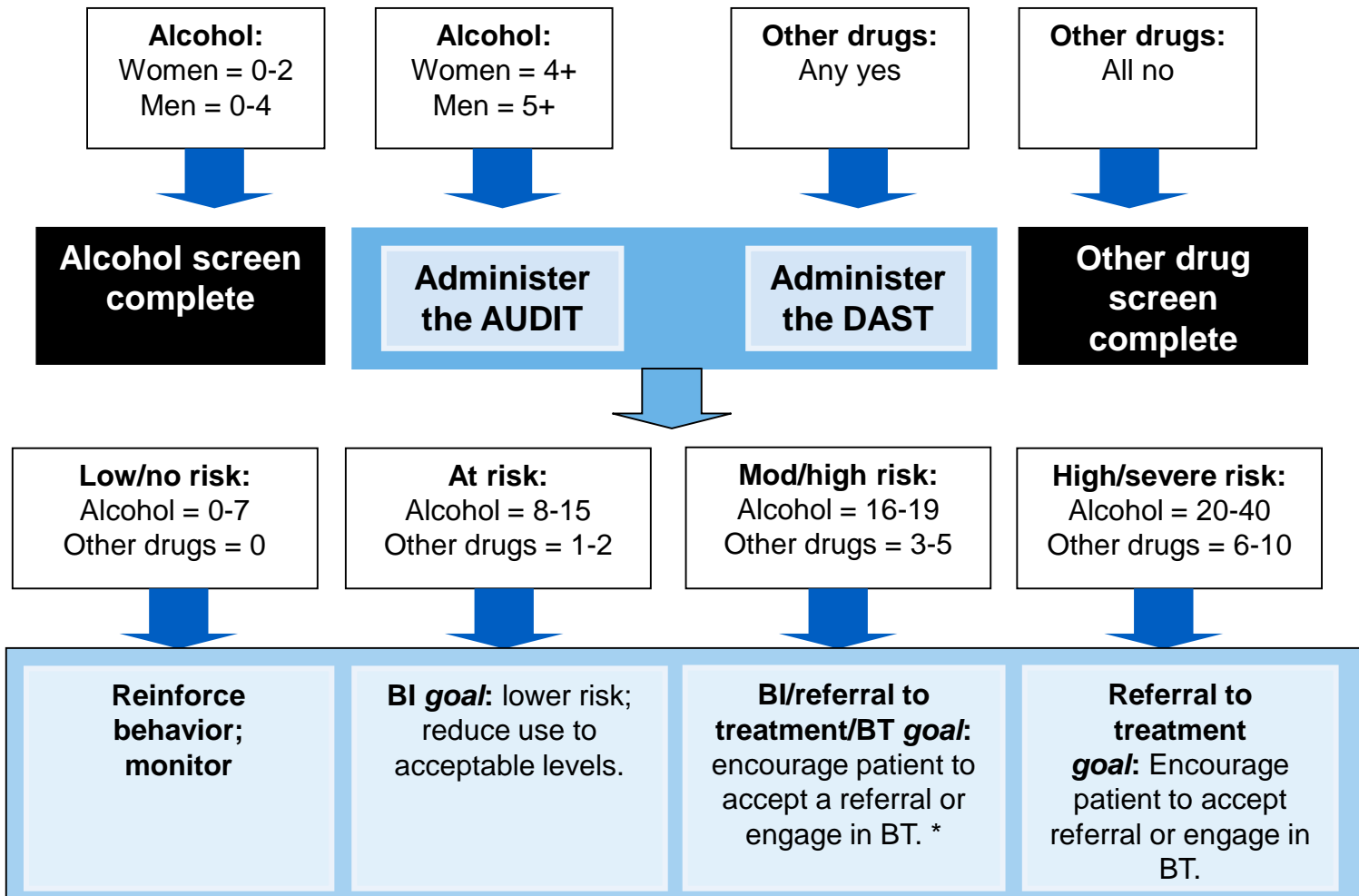
Brief intervention

Heavy drinking, but no alcohol use/dependence in past 12 months

74%

No alcohol use/dependence or heavy drinking in past 12 months

Decision tree (example)



* Brief treatment.

Screening tools

Characteristics of a useful screening tool:

- Brief (10 or fewer questions)
- Flexible
- Easy to administer and easy for the patient
- Addresses alcohol and other drug use
- Indicates the need for further assessment or intervention
- Has good sensitivity and specificity

Screening tools (cont.)

| Screen | Target population | Items | Assessment | Setting (most common) | Type |
|---------------------------|------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------|
| ASSIST ¹ (WHO) | Adults; validated in many cultures and languages | 8 | Screen identifies hazardous, harmful or dependent drug use (including injection drug use). | Primary care | Interview |
| AUDIT ² (WHO) | Adults and adolescents; validated in many cultures and languages | 10 | Screen identifies alcohol problem use and dependence. It can be used as a prescreen to identify patients in need of full screen/BI. | Different settings; AUDIT C primary care (3 questions) | Self-administered, interview or computerized |
| DAST-10 ³ | Adults | 10 | Screen identifies drug-use problems in past year. | Different settings | Self-administered or interview |

Screening tools (cont.)

| Screen | Target population | Items | Assessment | Setting (most common) | Type |
|---------------------|-----------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------|
| CRAFFT ¹ | Adolescents | 6 | Screen identifies alcohol and drug use, risky behavior and consequences of use. | Different settings | Self-administered |
| CAGE ² | Adults and youth > 16 | 4 | Screen identifies signs of dependence but not risky use. | Primary care | Self-administered or interview |
| TWEAK ³ | Pregnant women | 5 | Screen identifies risky drinking during pregnancy — based on CAGE. The screen asks about the number of drinks one can tolerate, alcohol dependence and related problems. | Primary care, women's organizations | Self-administered, interview or computerized |

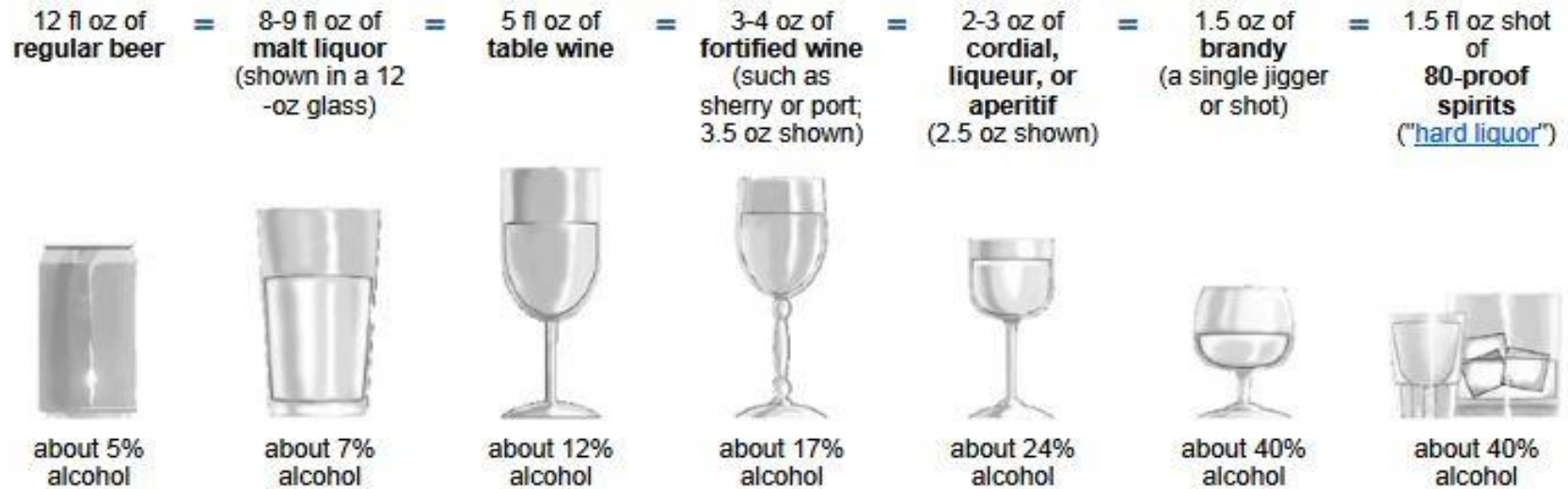
Screening tools (cont.)

Substance Abuse and Mental Health Services Administration (SAMHSA) provides information on SBIRT and related resources.

Here are two screening tools available at SAMHSA's site:

- https://www.integration.samhsa.gov/clinicalpractice/sbirt/CRAFT_Screening_interview.pdf
- https://www.integration.samhsa.gov/clinical-practice/sbirt/CRAFT_Screening_interview.pdf

How is risk defined?



The percent of "pure" alcohol, expressed here as alcohol by volume (alc/vol), varies by beverage.

| At-risk alcohol use | Men | Women | Older adults (65+) |
|---------------------|------|-------|--------------------|
| Per occasion | > 4 | > 3 | > 1 |
| Per week | > 14 | > 7 | > 7 |

Chart and table data via National Institute on Alcohol Abuse and Alcoholism.

Prescreening

Prescreening is a quick approach to identifying people who need to do a more extended screen and BI.

- Self-reported:
 - 1 to 4 questions
- Biological:
 - Blood alcohol level test

Alcohol prescreening question

National Institute on Alcohol Abuse and Alcoholism
one-item screen for alcohol use:

- “How many times in the past year have you had X or more drinks in a day?”
 - See “risk” table (slide 11) for the number of drinks.
 - This identifies unhealthy alcohol use.
- A positive screen is equal to more than one drink.

Drug use prescreening question

National Institute on Drug Abuse one-item screen for illicit drug use:

- “How many times in the past year have you used an illegal drug or used a prescription medication for nonmedical reasons?”
 - This identifies overall use.
- A positive screen is equal to one or more drink.

Codes and reimbursement in New York

| Payer | Add-on code | Description |
|--------------------------------------|-------------|------------------------------------------------------------------------------------------------------------|
| Medicaid | H0049 | Alcohol and/or drug screening |
| | H0050 | Alcohol and/or drug screening, brief intervention, per 15 minutes alcohol and/or substance use |
| Medicaid, Commercial Insurance | 99408 | Alcohol and/or substance use structured screening and brief intervention services; 15 to 30 minutes |
| | 99409 | Alcohol and/or substance use structured screening and brief intervention services; greater than 30 minutes |

Sources: SAMHSA, <https://www.samhsa.gov/sbirt/coding-reimbursement>. Last updated: 05/01/2019 and [https://www.integration.samhsa.gov/sbirt/Reimbursement for SBIRT.pdf](https://www.integration.samhsa.gov/sbirt/Reimbursement%20for%20SBIRT.pdf).

Codes and reimbursement in New York (cont.)

| Payer | Add-on code | Description |
|----------|-------------|------------------------------------------------------------------------------------------------------------|
| Medicare | G0396 | Alcohol and/or substance use structured screening and brief intervention services; 15 to 30 minutes |
| | G0397 | Alcohol and/or substance use structured screening and brief intervention services; greater than 30 minutes |

Sources: SAMHSA, <https://www.samhsa.gov/sbirt/coding-reimbursement>. Last updated: 05/01/2019 and https://www.integration.samhsa.gov/sbirt/Reimbursement_for_SBIRT.pdf.

Codes and reimbursement in New York (cont.)

| Payer | Add-on code | Description |
|----------------------|-------------|------------------------------------------------------------------------------------------------------------|
| Commercial Insurance | CPT 99408 | Alcohol and/or substance use structured screening and brief intervention services; 15 to 30 minutes |
| | CPT 99409 | Alcohol and/or substance use structured screening and brief intervention services; greater than 30 minutes |

Sources: SAMHSA, <https://www.samhsa.gov/sbirt/coding-reimbursement>. Last updated: 05/01/2019 and https://www.integration.samhsa.gov/sbirt/Reimbursement_for_SBIRT.pdf.

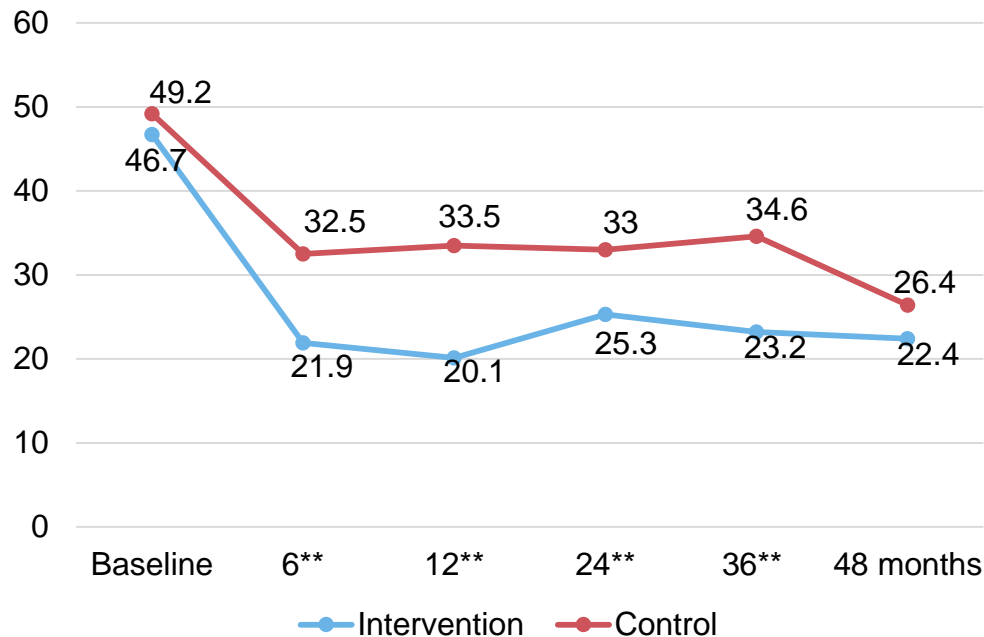
Does SBIRT work?



Project TrEAT: Trial of Early Alcohol Treatment

- The program included: 17 primary care practices comprised of 64 physicians within 10 Wisconsin counties.
- Approximately 18,000 patients were screened:
 - Around 500 men and 300 women screened positive for at-risk drinking.
 - They were randomized into two groups of approximately 400 each and followed for 48 months.
- Both the control and intervention group received a general health booklet with information about seat belt use, immunizations, exercise, tobacco, alcohol and drugs.
- The intervention group also received two 10-15 minute sessions by a PCP using a scripted workbook.

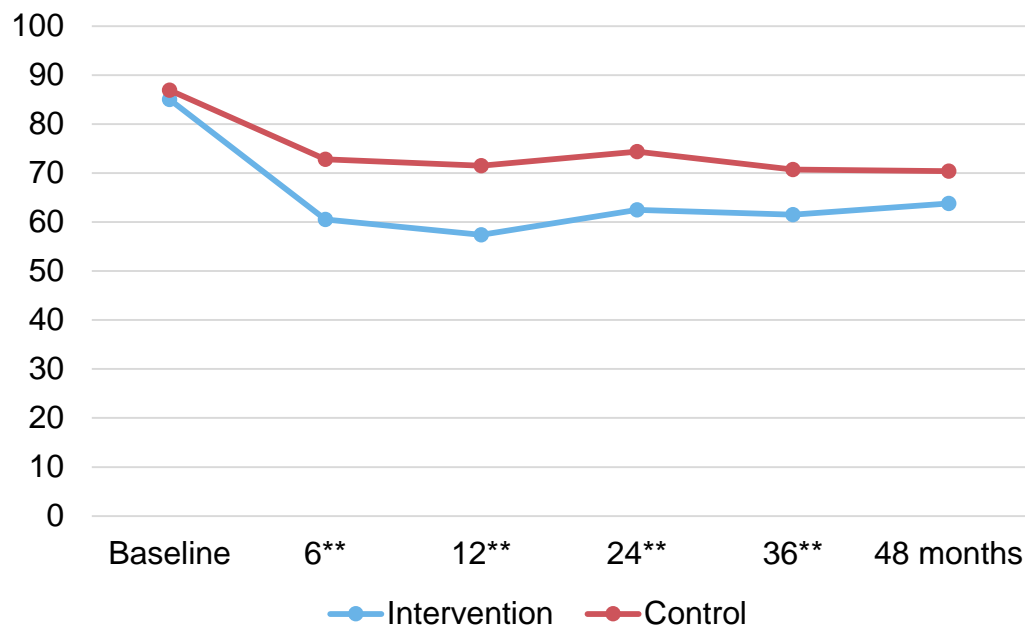
Project TrEAT (cont.)



* Heavy drinkers were defined as men who drank > 20 standard drinks and women who drank > 13 standard drinks in the previous seven days.

** Difference statistically significant.

Project TrEAT (cont.)



* Binge drinkers were defined as people who drank > 5 drinks within one day in the previous 30 days.

** Difference statistically significant.

Project TrEAT statistics

Health care utilization analysis at 48 months

| | SBIRT | Control |
|-------------------------|-------|---------|
| ED visits | 302 | 376 |
| Days of hospitalization | 420 | 664 |

Key resources

- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Centers for Medicare and Medicaid Services (CMS)

Summary

- Screening, Brief Intervention and Referral to Treatment:
 - Saves lives.
 - Saves time.
 - Saves money.
- Screening and brief interventions (BIs) are both very effective for alcohol use.
- Screening is very effective for identifying illicit drug use:
 - BI is not effective for drug use.
 - RT (referral to treatment) should follow a positive screening.

Thank you

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