

SBIRT in action: Improving enrollees' lives

What is SBIRT?

Screening, Brief Intervention, and Referral to Treatment — commonly referred to as SBIRT — is an evidence-based approach to identifying enrollees who use alcohol and other drugs at dangerous levels. SBIRT's goal is to reduce and prevent related health consequences, disease, accidents, and injuries. Risky substance use is a health issue that often goes undetected. By incorporating this reliable evidence-based tool — which is demonstrated to be reliable in identifying individuals with risk for a substance use disorder — significant harm can be prevented.

SBIRT can be performed in a variety of settings. Screening does not have to be performed by a physician. SBIRT incorporates screening for all types of substance use with brief, tailored feedback, and advice. Simple feedback on risky behavior can be one of the most critical influences on changing enrollee behavior.

Why use SBIRT?

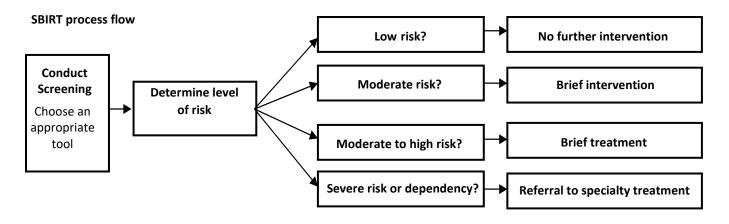
- SBIRT is an effective tool for identifying risk behavioral and providing appropriate intervention.
- By screening for high-risk behavior, healthcare providers can use evidence-based brief interventions focusing on health and consequences, preventing future problems.
- Brief intervention focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change.
- Referral to treatment provides those identified as needing more extensive treatment with access to specialty care.
- SBIRT reduces costly healthcare utilization.
- SBIRT is reimbursable through Medicaid.
- SBIRT is appropriate for any enrollee, regardless of age, gender, or health status.

When we say	We mean
Screening	 Provide a short, structured consultation to identify the right amount of treatment. Use common screening tools (listed below).
Brief intervention	 Educate enrollees and increase motivation to reduce risky behavior. Brief education intervention increases motivation to reduce risky behavior. Typically 5 to 10 minutes

When we say	We mean
Brief treatment	 Fulfill goals of: Changing the immediate behavior or thoughts about a risky behavior. Addressing long-standing problems with harmful drinking and drug misuse. Helping enrollees with higher levels of disorder obtain more long-term care. Typically 5 to 12 minutes
Referral to treatment	• If an enrollee meets the diagnostic criteria for substance dependence or other mental illnesses as defined by the <i>Diagnostic</i> and Statistical Manual of Mental Disorders, Fifth Edition, we recommend you refer them to a specialty provider.

Who delivers SBIRT services?

Primary care centers, hospital emergency rooms, trauma centers, and community health settings have the best chance to intervene early with at-risk substance users and prevent more severe consequences. Primary care providers are the primary source of SBIRT services. However, nurse practitioners, physician assistants, and behavioral health providers play an important role as well. SBIRT services are intended to be delivered in primary care medical settings as the first line of substance use harm reduction, identification, and referral to specialized services.



Implementing SBIRT into care management

There are multiple screening tools to use for different populations. Amerigroup District of Columbia, Inc. recommends the following screening tools for their brief nature, ease of use, flexibility for multiple types of enrollees, and indication of need for further assessment or intervention:

Screening tool	Age range or population	Overview
Alcohol Use Disorder	All enrollees	Developed by the Word Health
Identification Test (AUDIT)		Organization. Appropriate for all
		ages, genders, and cultures
Alcohol, Smoking, and	Adults	Simple screener for hazardous use of
Substance Abuse		substances (including alcohol,
Involvement Screen Test		tobacco, and other drugs)
(ASSIST)		
Drug Abuse Screening Test	Adults	Screener for drug involvement during
(DAST-10)		last 12 months (does not include
		alcohol)
Car, Relax, Alone, Forget,	Adolescents and	Alcohol and drug screening tool for
Family or Friends, Trouble	children	enrollees under the age of 21.
(CRAFFT)		Recommended by the American
		Academy of Pediatrics.
Screening to Brief	Adolescents	Assesses frequency of alcohol and
Intervention (S2BI)		substance
NIAAA Alcohol Screening	Pregnant women	Four-item scale to assess alcohol use
for Youth		in pregnant women; recommended
		for OB/GYNs
Tolerance, Annoyance, Cut	Pregnant women	Five-item scale to screen for risky
Down, Eye Opener (T-ACE)		drinking during pregnancy
Tolerance, Worried, Eye	Pregnant women	Five item scale to screen for risky
Opener, Amnesia, K-Cut		drinking during pregnancy
Down (TWEAK)		

Reimbursement

CPT code	Code description	
99408	SBIRT: Alcohol and substance (other than tobacco) abuse structure screening	
	(for example, AUDIT, DAST) and brief intervention (SBI) services; 15 to 30	
	minutes	
99409	SBIRT: Alcohol and substance (other than tobacco) abuse structure screening	
	(for example, AUDIT, DAST) and brief intervention (SBI) services; over 30	
	minutes	

Need help with a referral to a behavioral health specialist?

Referrals can be complex and involve coordination across different types of services. We can help! Contact Provider Services at **800-454-3730**. We're committed to active involvement with our care provider partners and going beyond the contract to create a real impact on the health of our communities.

Sources:

- 1. Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Healthcare, April 1, 2019, samhsa.gov.
- 2. Alcohol Screening and Brief Intervention: A Guide for Public Health Practitioners, American Public Health Association, page 8.