



SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT



Integrated Behavioral Health Care

In this new era of health care, CareSource® is positioned to support you, our trusted partners, in delivering integrated health care to our members. CareSource believes that improvement in health outcomes requires a strong patient–health care provider relationship, and we know that good health means more than just taking care of physical needs.

At CareSource we are committed to a comprehensive, community-based health approach with strong collaboration and partnerships for our plan members. Just as preventive screening for heart disease or diabetes is customary, diagnostic assessment for early detection of substance use disorder (SUD) is critical to mitigate the drastic effects on an individual's physical, behavioral, and psychosocial well-being. **Screening, Brief Intervention, and Referral to Treatment**, commonly called SBIRT, is an evidence-based tool that can identify concerning substance use patterns.

CareSource is committed to our providers. We listen to feedback and strive to eliminate barriers. We understand that billing for SBIRT can seem complicated. Please refer to the following information that addresses these concerns.

What is SBIRT?

SBIRT is an evidence-based approach to identify, reduce, and prevent problematic substance use disorders. There are three major components to SBIRT:

Screening: Assessing a patient for risky substance use behaviors using standardized screening tools.

Brief Intervention: A short conversation to provide feedback and advice while exploring and supporting changes in risky substance use behaviors.

Referral to Treatment: Providing a referral for brief therapy or additional treatment to patients whose screening indicates the need for additional services.

This screening should occur annually. However, more frequent screening may be warranted for:

- Adolescents
- Patients who are pregnant or considering becoming pregnant
- Individuals experiencing significant increases in psychological stressors
- Patients with substance use problems who demonstrate recent changes in behavior

Why SBIRT?

- Early intervention results in decreased long-term, intensive substance use services saving lives and money.
- Used by paraprofessionals as well as clinicians, SBIRT is a non-confrontational positive approach and can be useful in multiple settings.
- States like Wisconsin and Texas have built on clinical success with SBIRT and demonstrated effectiveness in reducing hospital costs and emergency room visits.
- The SBIRT screening tool was successfully implemented during a five-year pilot project in two Georgia hospitals, resulting in a decrease in substance use among participants.

SBIRT Coding and Reimbursement

SBIRT coding and reimbursement can vary by plan and by state.

Qualifying Providers

Marketplace Insurance Plans

For Marketplace insurance plans, the following licensed provider types can bill independently for SBIRT:

- Physician (MD, DO) or Physician Assistant (PA)
- Nurse Practitioner (NP), Certified Nurse Midwife (CNM) or Clinical Nurse Specialist (CNS)
- Behavioral Health Professional (LAPC, LCP, LCSW, LMSW, LPC, LMFT)

Billing Guidance

State	Billing Codes
Georgia Marketplace	G0396 – Alcohol and/or substance (other than tobacco) misuse structured screening and brief intervention services, 15 to 30 minutes G0397 - Alcohol and/or substance (other than tobacco) misuse structured screening and brief intervention services, any time frame greater than 30 minutes G0442 – Screening for alcohol misuse and brief behavioral counseling G0443 – Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes

Modifier 25 can be attached to these codes to show that time was spent conducting the SBIRT process apart from other office procedures.

A patient may be seen the same day by another provider as long as the second provider submits a claim using their own unique billing number.

SBIRT sessions must last at least 15 minutes to be eligible for billing. This can be documented by either:

- 1) documenting the start-and-stop time or
- 2) documenting total face-to-face time involved in the SBIRT session.

Codes listed are subject to change. Marketplace providers should reference CMS.gov [Physician Fee Schedule](#) for billing information.

Reference: Screening, Brief Intervention and Referral to Treatment www.samhsa.gov/sbirt