

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-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, and is appropriate for use with patients 12-64 years of age. The tool is designed to guide participants in a conversation to identify goals and values, increase motivation to address problematic substance use and set goals for improving health. It can identify individuals who need a higher level of care so they can be referred to specialty supports and services as needed.

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?

- Identify risky or potentially risky patterns of substance use in a population.
- Provide evidence-based interventions for people who may otherwise not access care.
- Connect people to resources, services and supports.
- Early intervention results in decreased long term and 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.
- SBIRT is a billable service.

SBIRT Coding and Reimbursement

Qualifying Providers

For Medicaid plans, the following licensed providers can independently bill for SBIRT:

- Physicians (MDs, DOs)
- Physician Extenders (e.g., Physician Assistants)
- Advanced Practice Nurses (APNs)

Marketplace insurance plans also allow the following licensed behavioral health provider types to independently bill for SBIRT:

- Licensed Professional Counselor (LPC)
- Licensed Associate Professional Counselor (LAPC)
- Licensed Clinical Psychologist (LCP)
- Licensed Clinical Social Workers (LCSW)
- Licensed Marriage and Family Therapists (LMFT)
- Licensed Master Social Workers (LMSW)

Billing Guidance

Medicaid patients:

H0049 Alcohol and/or drug screening **H0050** Alcohol and/or drug screening, brief intervention, per 15 minutes

Marketplace patients:

G0396 Alcohol and/or substance (other than tobacco) misuse structured assessment and intervention, 15-30 minutes

G0397 Alcohol and/or substance (other than tobacco) misuse structured assessment and intervention, greater than 30 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.

For Medicaid claims, please refer to the <u>Nevada Medicaid Fee Schedules</u> for complete billing information.

For Marketplace claims, please see MLN904084 – Screening, Brief Intervention & Referral to Treatment (SBIRT) Services for additional information from Centers for Medicare and Medicaid.

Reference:

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

