

IMPORTANT PROVIDER NEWS FOR HEALTH PLAN OF NEVADA MEDICAL PROVIDERS!

SBIRT: A Quick Reference Guide

No one wakes up and decides to struggle with addiction.
No one wakes up and says, you know what, I want to lose my job.
No one wakes up and says, I want to hurt my family members.
No one wants to develop cirrhosis or hepatitis c, or overdose and die.

40 years of addiction research has shown that 1 out of every 2 patients who enter your medical office reporting a substance use, is also using or struggling with a second substance. Did you know that there is a way you could go about screening for Substance Use Disorder as you would screen for Disease Management? Well there is but, unfortunately, this screening is not routinely done in primary care settings. We would like that to change today!

SBIRT, which stands for Screening, Brief Intervention, and Referral to Treatment, is the tool we suggest you add to your practice. It is ranked in the top 10 of prevention services and has been one of the most important public health approaches that is proven to really work. Whether your patient is struggling with alcohol, opioid or other substance use disorders, SBIRT is an evidence-based practice used in medical settings to identify, diagnose, reduce, and prevent the risky or problematic use of substances.

In terms of cost-effectiveness and clinically preventable burden, SBIRT is among the top 2 high priority preventive services. It is seen by the US Preventive Services Task Force as the most clinically effective and cost effective preventive service screen for alcohol use for primary care.

SBIRT allows for early intervention and treatment of people who have problematic alcohol use within the primary care setting. Reports indicate its use reduces alcohol use and at risk drinking by 10-30% during a 3-month follow-up and some studies report up to 48 months of improved drinking patterns. Attached you will find the SBIRT: A Quick Reference Guide, which will outline this intervention.

Please take some time to read the information. Consider adding this valuable tool to your practice. If you want more information or training related to SBIRT, please contact Behavioral Healthcare Options at 1-855-442-4648 and mention SBIRT. We will have the appropriate person contact you to answer questions and/or set up training.

Please watch for additional two-page overview of SBIRT to follow in separate faxblast.

Thank you for your time and attention to this matter,

HPN Behavioral Health Team

SBIRTⁱ: A Quick Reference Guide

WHAT: Screening, **B**rief **I**ntervention, and **R**eferral to **T**reatment (SBIRT)ⁱⁱ is an evidence-based approach to delivering early intervention treatment services for people with substance use disorders, and those at risk of developing a substance use disorder (SUD). SBIRT is ranked in the top 10 of preventive services^{iii,iv} and has been adapted for use in primary care centers, hospital emergency settings, office- and clinic-based practices, and other community settings, providing opportunities for early identification, diagnosis, and reduction or prevention of risky or problematic use of substances. This type of intervention fills the gap between primary prevention and more intensive or specialized treatment for those with SUDs.

HOW: There are three components of SBIRT. They are as follows:

1. Screening: Screening involves a rapid assessment of substance use behaviors with standardized assessment tools. Screening quickly assesses the severity of substance use and identifies the appropriate level of treatment. The screening instruments most commonly used include DSM-5 Opioid Use Disorder Checklist and AUDIT (**A**lcohol **U**se **D**isorders **I**dentification **T**est) and DAST-10 (Drug Abuse Screening Test). In some cases, screening alone can raise awareness, reduce use, and have preventive effects.

2. Brief Intervention: Brief intervention focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change. Brief Intervention uses motivational interviewing techniques to help increase self-awareness of problematic substance use. The brief intervention is shown to significantly reduce substance use.

EXAMPLE OF A BRIEF INTERVENTION TECHNIQUE

- Build rapport - raise the subject. Ask permission to talk about alcohol or drugs. Explore the pros and cons of use. (EX: "Help me understand through your eyes, what are the good things about using alcohol/drugs?" "What are some of the not so good things about using alcohol/drugs?")
- Provide feedback - ask permission to give information, discuss screening findings, link substance use behaviors to any known consequences, summarize using a decisional balance ("So, on the one hand, you like to drink, and on the other hand, you have experienced negative consequences at work and at home.")
- Build readiness to change - "Could we talk for a few minutes about your interest in making a change? On a scale from 1 to 10, 1 being not ready at all and 10 being completely ready, how ready are you to make any changes in your substance use?"
- Negotiate a plan for change - either reducing use to low-risk levels OR an agreement to follow up with specialty treatment services.
- Keep in mind the stages of change and there may be reluctance to move into the action stage. It is important to explore readiness to change and a plan in future visits.

3. Referral to Treatment: Refer patients whose assessment or screening shows a need for additional services to brief therapy or additional treatment through specialty care. Depending on severity, patients may be offered brief treatment (a variable number of sessions, depending on

the program and client, focusing on motivating clients to change substance use patterns) or be referred to a substance abuse treatment program. For referrals to the appropriate level of care, please call (or have member call) Health Plan of Nevada Behavioral Health at **702 364-1484** or **800 873-2246**.

Reimbursement Codes for performing SBIRT

Payer	Code	Description
Commercial Insurance	CPT 99408	Alcohol and/or substance abuse structured screening and brief intervention services; 15 to 30 minutes
	CPT 99409	Alcohol and/or substance abuse structured screening and brief intervention services; greater than 30 minutes
Medicare	G0396	Alcohol and/or substance abuse structured screening and brief intervention services; 15 to 30 minutes
	G0397	Alcohol and/or substance abuse structured screening and brief intervention services; greater than 30 minutes
Medicaid	H0049	Alcohol and/or drug screening
	H0050	Alcohol and/or drug screening, brief intervention, per 15 minutes

If you have any questions or need assistance with referrals, please call Health Plan of Nevada Behavioral Health at **702 364-1484** or **800 873-2246**.

ⁱ Office of National Drug Control Policy. (2012). Screening, brief intervention, and referral to treatment (SBIRT). [Washington, D.C.]: Office of National Drug Control Policy (ONDCP), Substance Abuse and Mental Health Services Administration (SAMHSA).

ⁱⁱ Office of National Drug Control Policy. (2012). Screening, brief intervention, and referral to treatment (SBIRT). [Washington, D.C.]: Office of National Drug Control Policy (ONDCP), Substance Abuse and Mental Health Services Administration (SAMHSA).

ⁱⁱⁱ Partnership for Prevention – National Commission on Prevention Priorities (2006). Priorities for America’s Health: Capitalizing on Life-Saving, Cost Effective Prev Services, 2006.

^{iv} Maci oosek et al (2017). Updated Priorities Among Effective Clinical Preventive Services. The Annals of Family Medicine.