



# EqualityCare News

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## Attention EqualityCare Providers

CMS-1500  
08-010

EqualityCare will pay for Screening, Brief Intervention, Referral and Treatment (SBIRT) services, for recipients 18 years of age and older, that meet the requirements detailed in this bulletin for dates of service beginning January 1, 2009.

### What is SBIRT?

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance abuse use disorders, as well as those who are at risk of developing these disorders. Primary care centers, hospital emergency rooms, trauma centers and other community settings provide opportunities for early intervention with at-risk substance users before more severe consequences occur.

- **Screening** is a quick, simple way to identify patients who need further assessment or treatment for substance use disorders. It does not establish definitive information about diagnosis and possible treatment needs. The goal of SBIRT is to make screening for substance abuse a routine part of medical care.
- **Brief intervention** is a single session or multiple sessions of motivational discussion focused on increasing insight and awareness regarding substance use and motivation toward behavioral change. Brief intervention can be tailored for variance in population or setting and can be used as a stand-alone treatment for those at-risk as well as a vehicle for engaging those in need of more extensive levels of care.
- **Brief treatment** is a distinct level of care and is inherently different from both brief intervention and specialist treatment. Brief treatment is provided to those seeking or already engaged in treatment, who acknowledges problems related to substance use. Brief treatment in relation to traditional or specialist treatment has increased intensity and is of shorter duration. It consists of a limited number of highly focused and structured clinical sessions with the purpose of eliminating hazardous and/or harmful substance use.
- **Referral to specialized treatment** is provided to those identified as needing more extensive treatment than offered by the SBIRT program. The effectiveness of the referral process to specialty treatment is a strong measure of SBIRT success and involves a proactive and collaborative effort between SBIRT providers and those providing specialty treatments to ensure access to the appropriate level of care.



A key aspect of SBIRT is the integration and coordination of screening and treatment components into a system of services. This system links a community's specialized treatment programs with a network of early intervention and referral activities that are conducted in medical and social service settings.

### **Is SBIRT Effective?**

SBIRT research has shown that large numbers of individuals at risk of developing serious alcohol or other drug problems may be identified through primary care screening. Interventions such as SBIRT have been found to:

- Decrease the frequency and severity of drug and alcohol use,
- Reduce the risk of trauma, and
- Increase the percentage of patients who enter specialized substance abuse treatment.

In addition to decreases in substance abuse, screening and brief interventions have been associated with fewer hospital days and fewer emergency department visits. Cost-benefit analyses and cost-effectiveness analyses have demonstrated net-cost savings from these interventions.

### **WY SBIRT Screening Tool - ASSIST**

The Mental Health & Substance Abuse Services Division has chosen the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) developed by the World Health Organization (WHO.) The ASSIST screening tool can be accessed via

[http://www.who.int/substance\\_abuse/activities/assist/en/](http://www.who.int/substance_abuse/activities/assist/en/). Documents available include:

- ASSIST: Guidelines for Use in Primary Care
- Brief Intervention for Substance Use: A Manual for Use in Primary Care
- Self-Help Strategies for Cutting Down or Stopping Substance Use: A Guide

### **Covered Services and Billing Codes**

The SBIRT HCPCS codes are:

**H0049-** Alcohol and/or drug screening, per screening (\$24.00/screening for physicians)  
(\$20/screening for PHN)

**H0050-** Alcohol and/or drug services, brief intervention, per fifteen (15) minute units – Maximum of 4 units (\$48.00 for physicians) (\$40/15 minute unit for PHN)

### **Provider types that can bill for H0049 & H0050 are:**

- All Physicians - any taxonomy which starts with 20
- Public Health - taxonomy 251K00000X
- Federally Qualified Health Centers (FQHC) - taxonomy 261QF0400X
- Rural Health Clinics (RHC) - taxonomy 261QR1300X

Providers are to bill these codes in addition to the code they will bill for the primary focus of the visit. Screening and brief intervention are not stand alone services, rather they may be part of a medical visit with another problem focus. For example, a patient presents for migraine headaches and is given the ASSIST (H0049-screening). The ASSIST tool indicates the need for a brief intervention (H0050-brief intervention). The brief intervention would be done in the physician's office and the physician would bill the most appropriate code for their services related to the initial complaint of migraine headache, in addition to the appropriate SBIRT codes, H0049 (1 unit for screening) & H0050 (with appropriate number of units based on a 15 minute unit for brief intervention). If the ASSIST tool indicates a need for a referral to treatment rather than a brief intervention, the physician would bill the most appropriate code for their services related to the initial complaint of migraine headache, in addition to the appropriate SBIRT code, in this case it would only be for the screening (H0049) and the physician would give the patient a referral to the local substance abuse center for treatment.



Although SBIRT provides valuable services and is closely linked to a reduction in substance use with at-risk users, providing SBIRT services is not mandatory at this time.

**NOTE: SBIRT services will not be covered for clients with services limited to emergency services only. This will show on the EqualityCare and State Healthcare Benefit Plans Quick Reference Guide as the ALEN plan.**

Procedure codes and fees listed are subject to change at any time without prior notice. The most accurate way to verify coverage for a specific service is to review the EqualityCare fee schedules at : <http://wequalitycare.acs-inc.com>.



Wyoming Department of Health  
Public Health Insurance Program



Pharmacy  
Group  
6530

## Important Changes! Please read!



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We're on the Web!  
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If you have additional questions regarding billing or covered services, please contact the ACS Provider Relations Unit at (307) 772-8401 or toll free at (800) 251-1268. Call center hours are Monday through Friday from 9am-5pm. For eligibility or provider check inquiries, please contact the AVR at (800) 251-1270.