Addressing Adolescent Substance Use with Screening, Brief Intervention, and Referral to Treatment: Frequently Asked Questions for Providers

Incorporating Screening, Brief Intervention, and Referral to Treatment (SBIRT) for adolescents into the primary care practice can help providers improve the health of their patients and potentially preventing future at-risk behaviors. This document provides basic information on SBIRT for use with primary care practices.

General Information

What is SBIRT?

Screening, Brief Intervention, and Referral to Treatment, referred to as SBIRT, is an evidence-based approach to substance use prevention and treatment endorsed by the American Academy for Pediatrics (AAP) and Substance Abuse and Mental Health Services Administration (SAMHSA). It is used to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs. SBIRT programs are usually made up of three components: an initial screening, a brief intervention, and referral to treatment. Each health plan or state agency’s SBIRT program generally focuses on prevention, reinforcement of healthy behaviors, and connection to community resources or treatment resources when deemed appropriate.

What makes SBIRT different than other approaches to substance use and treatment, especially for adolescents?

Unlike common substance use programs that focus on treatment of substance use disorder, SBIRT for adolescents focuses on prevention and early identification of risky substance use and provides a way to involve connected health care providers (especially primary care providers and behavioral health specialists) in a young person’s treatment plan.

How does SBIRT help families connect to substance use treatment?

Part of a state agency or health plan’s SBIRT program often involves making a referral to treatment for adolescents who are identified as high-risk for a substance use disorder following a brief intervention. It is important to note that not all adolescents screened for substance use receive a brief intervention or referral to treatment services. The decision to move through the components of SBIRT depends on the adolescent’s answers to questions by the SBIRT provider, and the health care provider’s discretion.

During a brief intervention or referral to treatment, the provider walks through helpful information, such as healthy behaviors or treatment solutions that may work best for that adolescent and his or her family. Providers can refer the adolescent to an in-network behavioral health specialist, or provide contact information for non-treatment community resources that may impact the adolescent’s substance use, such as the local Boys and Girls Club. The brief intervention and referral components of SBIRT gives each SBIRT provider the opportunity to learn each adolescent’s history with substance use, what local resources are available, and how to effectively determine which resources are needed to address each patient’s substance use needs.

*SAMHSA. “SBIRT: Screening, Brief Intervention, and Referral to Treatment.” Available at: https://www.integration.samhsa.gov/clinical-practice/sbirt.
Why is SBIRT important to my practice?
SBIRT for adolescents addresses an important part of overall health — behavioral health. In 2014, over 22 million adolescents 12 and over self-reported their need for treatment for alcohol or substance use in the last year.† By focusing on preventing adolescent substance use, or intervening early to interrupt the trajectory toward more serious substance use, SBIRT allows providers to help adolescents connect to other ways to manage the factors that lead to substance use in the first place. SBIRT gives every provider a tool to identify and address substance use needs in a simple and useful way.

How will SBIRT’s motivational interviewing training help me with other areas of my practice?
SBIRT offers a unique way to connect providers to their patients and address patients’ needs from a whole-person perspective. The motivational interviewing done during the screening and brief intervention components can help providers glean important, non-verbal information and build trust in order to connect patients to helpful services.

Where can I learn more about SBIRT?
More information about SBIRT can be found at the following websites:

- SAMSHA SBIRT Overview
- SAMSHA-HRSA Center for Integrated Health Solutions Introduction to SBIRT
- SBIRT Education Webinar for Brief Clinical SBIRT Training for Adolescent Providers
- Adolescent Substance Use Resource Hub

Implementation

What tools can I use to screen an adolescent?
There are several tools available for the screening portion of SBIRT, including the Screening to Brief Intervention (S2BI) Tool and the CRAAFT Screening Tool for Adolescent Substance Use. More information about SBIRT screening is available on SAMSHA’s website.

Can SBIRT be done with an individual adolescent, or with the adolescent and his or her family?
It is recommended to do the screening and brief intervention components of an SBIRT program directly with the adolescent when the family is not present.

What do I do if one of my patients screens high-risk for substance use?
If an adolescent positively screens as high-risk, then the provider will need to focus on the referral to treatment component of SBIRT. Once a provider makes a referral to an appropriate behavioral health specialist (informally known as a “warm handoff”), then the focus of care will shift from primary prevention to treatment and supportive services for that adolescent. It is important to follow-up with that adolescent to ensure the necessary services were accessed and try to coordinate care in a holistic manner.

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†SAMHSA. “Substance Abuse and Mental Illness Prevention.” Available at: https://www.samhsa.gov/prevention.
Payment and Reimbursement

Can I get reimbursed for SBIRT? If so, how much?

Generally, yes, providers can be reimbursed for SBIRT. However, not all states reimburse providers for SBIRT for adolescents, though health plans may choose to do so even in those states. Reimbursement rates for SBIRT vary, depending on the phase of the program.

What codes can I use to bill for SBIRT?

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<th>Description</th>
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<td>Alcohol and/or drug screening, brief intervention, per 15 minutes</td>
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ABOUT THIS RESOURCE

This resource is a product of Improving Access to SBIRT Services for Adolescents, a three-year learning collaborative of Medicaid-focused safety net health plans to advance prevention and early intervention for adolescent substance use disorders. The initiative was led by the Center for Health Care Strategies in partnership with the Association for Community Affiliated plans, with funding from the Conrad N. Hilton Foundation. For more information, visit CHCS’ Improving Access to Screening, Brief Intervention, and Referral to Treatment in Primary Care for Adolescents Resource Center at www.chcs.org/sbirt-resource-center/.

ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a nonprofit health policy resource center committed to improving health care quality for low-income Americans. CHCS works with state and federal agencies, health plans, providers, and community-based organizations to develop innovative programs that better serve people with complex and high-cost health care needs. For more information, visit www.chcs.org.

‡ SAMHSA. “Coding for Screening and Brief Intervention Reimbursement.” Available at: https://www.samhsa.gov/sbirt/coding-reimbursement.