

# Screening and Intervening: Reimbursable Procedures for Substance Abuse

Office of National Drug Control Policy 2007

## Overview:

Substance abuse and addiction have a major impact on public health. It is a leading cause of illness and death in our nation. It leads to unintentional injuries and violence; exacerbates medical conditions (e.g. diabetes, hypertension); exacerbates neuropsychiatric disorders (e.g. depression); induces medical diseases (e.g. stroke, dementia, hypertension, cancers); induces infectious diseases and infections (e.g. HIV, Hepatitis C); and can affect the efficacy of prescribed medications. Finally, substance abuse also often results in dependence which may require multiple treatment services.

The majority of Americans with a substance abuse disorder are unaware they need help and do nothing. Screening Brief Intervention and Referral to Treatment (SBIRT) addresses this treatment gap by providing services for a full spectrum of risky, problem use, abuse and addiction. It is a protocol that effectively reduces substance abuse and other adverse consequences including DUI's, accidents, injuries, trauma, depression, and work-place impairment. It can take place in a wide range of health care settings.

## *Improving the System: Reimbursable Procedures for Substance Abuse*

ONDCP, as a coordinating agency for drug control, has launched an innovative new effort in the United States to help reduce the misery and alleviate the burden of substance abuse: Screening, Brief Intervention, and Referral to Treatment (SBIRT). SBIRT is designed to be used in our nation's health care system before substance use and abuse becomes a more serious problem. New reimbursable codes for SBIRT have been adopted. Now patients visiting physicians can be screened for substance use, abuse and dependence in a variety of health care settings, as a standard part of preventive medicine, similar to screening for tobacco and obesity. SBIRT tools are now widely available for use in primary care settings and hospitals so that substance abuse can be detected early and a brief intervention or brief treatment can be administered in the primary health facility without a referral to specialty treatment.

Mainstreaming preventive screening and interventions for substance use and abuse in health care settings de-stigmatizes substance use and abuse. It now becomes the first line of defense by a medical practitioner to raise awareness for patients about their substance abuse and its potential impact on their health. On a broader level, SBIRT has the potential to prevent and divert the millions of Americans who are heading down the road towards substance abuse and dependence.

## *New American Medical Association Codes:*

New AMA Current Procedural Terminology Codes (CPT®) for screening and brief intervention as a medical service were published October 8, 2007, and will become effective January 2008. The AMA has also established the relative value units (RVU's) associating a cost value per service.

The code numbers and brief descriptors follow:

- 99408 - Alcohol and/or substance (other than tobacco) abuse structured screening (e.g., AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes;
- 99409 - Intervention Services, greater than 30 minutes.

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## New HCPCS Codes:

The Healthcare Common Procedure Coding System (HCPCS) Level II procedure codes for Medicaid Services for Substance Abuse were published in January 2007 by the Centers for Medicare and Medicaid Services (CMS), and the definitions were refined in August 2007: The definitions were developed based on a review of the Screening and Brief Intervention materials that were prepared in support of the SBI CMS code request package and a National Association of State Alcohol and Drug Abuse Directors (NASADAD) *State Issue Brief on Screening and Brief Intervention*. NASADAD participated in a Substance Abuse and Mental Health Services Administration (SAMHSA) screening and brief intervention workgroup group that developed the materials and made the code request to CMS.

The HCPCS Level II definitions and administrative codes are:

- **H0049 Alcohol and/or Drug Screening:** A quick process designed to identify an individual who has an alcohol and/or drug use problem or is at risk for developing one by evaluating responses to questions about alcohol and/or other drug use. A valid brief questionnaire about the context, frequency, and amount of alcohol and/or other drug use can be used to examine substance use patterns. Examples of valid questionnaires are the AUDIT (Alcohol Use Disorder Identification Test), MAST (Michigan Alcohol Screening Test), DAST (Drug Abuse Screening Test), and ASSIST (Alcohol, Smoking, and Substance Involvement Screening Test). The result of a positive screen is a recommendation for a brief intervention for individuals with an alcohol and/or drug use problem or at risk of developing one, or a referral to a substance abuse treatment program for individuals with severe alcohol and/or other drug abuse and dependence.
- **H0050 Alcohol and/or Drug Service, Brief Intervention, per 15 minutes:** A brief one-on-one session in which concerns about an individual's alcohol and/or other drug use are expressed, and advice to cut down or moderate an individual's behavior is given. The intervention usually follows immediately after an individual receives a positive screen indicating that an alcohol and/or drug use problem is present or there is a risk for developing one. Feedback is given on alcohol and/or other drug use patterns. The intervention focuses on increasing motivation for behavior change to reduce harmful levels of alcohol/and or other drugs. Intervention strategies include education, simple advice, brief counseling, continued monitoring, or referral to a substance abuse treatment specialist.

## Training:

Training for medical professionals is being provided in a variety of venues on how to screen for alcohol and substance abuse problems and in brief interventions. A secondary purpose is to aid in the development of SBI programs in hospitals. Through SAMHSA, participants learn the differences among screening, brief interventions, and referral to treatment; become familiar with validated screening tools for identifying patients at elevated risk for harm from drinking; learn essential goals of a brief intervention, namely to help patients understand their screening results, explore the idea of reducing or quitting, and choose an appropriate plan; and to understand and identify relevant operational issues for an SBI program and how to make decisions about these issues.

For more information visit: [www.sbirt.SAMHSA.gov](http://www.sbirt.SAMHSA.gov).

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