SOUTH CAROLINA
Healthy Connections
MEDICAID

Screening, Brief Intervention and Referral to Treatment

South Carolina Department of Health Human Services

2015

Screening, Brief Intervention and Referral to Treatment

- An evidenced-based, integrated and comprehensive approach to the identification, intervention and treatment of substance (drug and alcohol) usage, domestic violence, depression and tobacco usage.
- *The SBIRT program in South Carolina is specific to pregnant women to include 12 months postpartum.

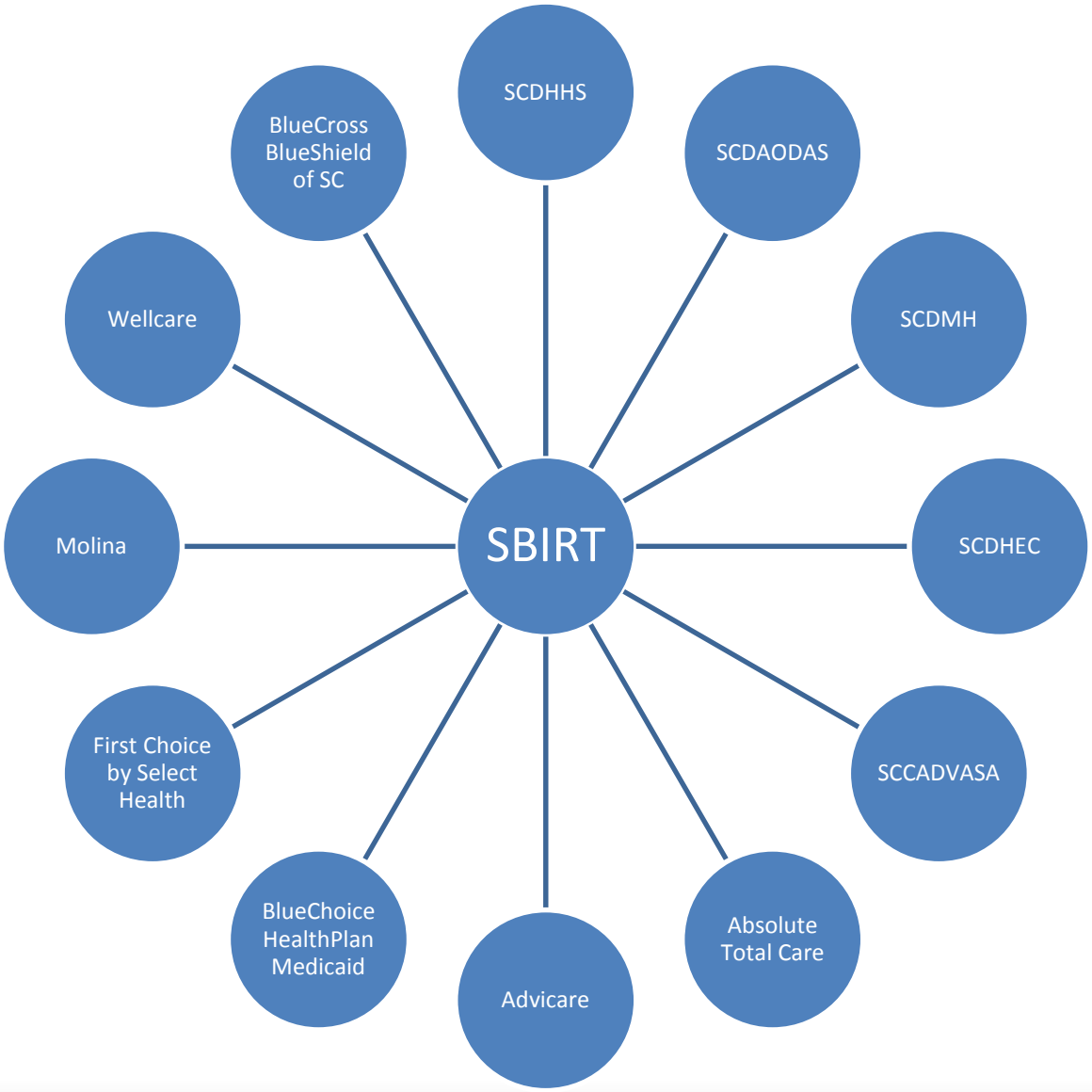
Screening, Brief Intervention and Referral to Treatment

- **Screening** – Brief process of identifying substance use, behavioral health issues, domestic violence, and tobacco use.
- **Brief Intervention** – 5-10 minute session to raise awareness of risks and increase motivation to engage support in choices that support health.
- **Referral** – When a risk has been identified and treatment is needed.
- **Treatment** – Cognitive behavioral work for member to acknowledge risks and change behavior.

Questions You may be Asking

- Do I really have to do this thing?
  - It is not mandated by the state but we hope you will find your own personal reasons for doing SBIRT with your patients.
- How much hassle is involved?
  - There are a few challenges with starting up, but it can be made easy and routine, as with taking a blood pressure.
- Will it annoy my patients?
  - The majority of patients ARE open to discussing their substance use to help their health.

A COLLABORATIVE EFFORT



Healthy Connections

Why is SBIRT important for physicians and other primary care practitioners?

- By intervening early, SBIRT saves lives and money and is consistent with overall support for patient wellness.
- Late-stage intervention and substance abuse treatment is expensive, and the patient often develops comorbid health conditions.
- Primary care is one of the most convenient points of contact for substance issues; many patients are more likely to discuss with their physician than family members, peers, partners or rehab specialist.

SC Alcohol Use Data

Alcohol use *3 months before* pregnancy	57.4 %
Alcohol use *during the last 3 months* of pregnancy	9.3%

SC Tobacco Cigarette Use Data

Cigarette use *3 months before* pregnancy	28.5%
Cigarette *use during last 3 months* of pregnancy	13.9%

* SC PRAMS Data collected by SCDHEC

SC Physical Abuse Data

Physical Abuse ***Before*** Pregnancy	4.6%
Physical Abuse ***After*** Pregnancy	3.5%

SC Post-Partum Depression Data

Always or often felt Down/Depressed/Hopeless ***After*** Pregnancy	13.0%

* SC PRAMS Data collected by SCDHEC

Screening

SBIRT Tool Sheet

Healthy Connections MEDICAID

SBIRT INTEGRATED SCREENING TOOL

*** Fax the COMPLETED form to the patient's plan and referral site and keep a copy in patient file**

- ☐ Absolute Total Care — Fax: 877-285-3226
- ☐ BlueChoice HealthPlan Medicaid — Fax: 855-360-2810
- ☐ Molina — Fax: 866-423-3889
- ☐ Wellcare — Fax: 866-455-6562
- ☐ Advicare — Fax: 888-781-4316
- ☐ First Choice by Select Health — Fax: 866-533-5493
- ☐ SCDHHS (Fee-For-Service) — Fax: 803-255-8247
- ☐ BlueCross BlueShield of South Carolina & BlueChoice HealthPlan — Fax: 803-870-9884

PATIENT INFORMATION

Patient's last name:	First:	Middle:	Language:	Race:	Ethnicity:	Expected due date:
Phone no: ( )	Street address:			Member ID no:		

PROVIDER INFORMATION

Practice name:	Group NPI:	Individual NPI:	Screening provider's name:	Phone no: ( )

PATIENT SCREENING INFORMATION

Parents Did any of your parents have a problem with alcohol or drug use?	YES				NO
Peers Do any of your friends have a problem with alcohol or other drug use?	YES				NO
Partner Does your partner have a problem with alcohol or other drug use?			YES		NO
Violence Are you feeling at all unsafe in any way in your relationship with your current partner?		YES			NO
Emotional Health Over the last few weeks, has worry, anxiety, depression or sadness made it difficult for you to do your work, get along with people or take care of things at home?				YES	NO
Past In the past, have you had difficulties in your life due to alcohol or other drugs, including prescription medications?			YES		NO
Present In the past month, have you drunk any alcohol or used other drugs? 1. How many **days per month** do you drink? _____ 2. How many **drinks on any given day**? _____ 3. How often did you have **4 or more drinks per day** in the last month? _____ 4. In the past month have you taken any prescription drugs?			YES		NO
Smoking Have you smoked any cigarettes in the past three months?			YES		NO
Please provide additional details for any "yes" responses:	↓ Review risk	↓ Review domestic violence resources	↓ Review substance use, set healthy goals	↓ Consider mental evaluation	

ADVICE FOR BRIEF INTERVENTION

	Y	N	N/A
Did you **State** your medical concern?			
Did you **Advise** to abstain or reduce use?			
Did you **Check** patient's reaction?			
Did you **Refer** for future assessment?			

At Risk Drinking

Non-Pregnant	Pregnant/Planning Pregnancy
7+ drinks/week 3+ drinks/day	**Any Use is Risky Drinking**

CONFIDENTIAL SBIRT REFERRAL INFORMATION

Patient referred to: (Check all that apply)	☐ DMH	☐ DAODAS	☐ DHEC Quitline Fax: 800-483-3114	☐ Private provider (Name & NPI)	☐ Domestic violence 803-256-2900
Date of referral appointment (DD/MM/YY):	Date screened:	☐ Patient refused referral	☐ Referral not warranted:		☐ Patient requested assistance

Women's health can be affected by emotional problems, alcohol, tobacco, other drug use and domestic violence. Women's health is also affected when those same problems are presented in people close to us. By "alcohol," we mean beer, wine, wine coolers or liquor.

Physician's Signature: _____

Simplicity of Screening

- The Integrated Screening Tool has eight questions.
- Questions require Yes/No answers.
- Questions address:
  - Parents
  - Peers
  - Partner
  - Violence
  - Emotional Health
  - Past/Present Alcohol and Drug Usage
  - Smoking

- Clinicians, not administrative staff, should administer the screening.
  - Physicians
  - Physician Assistants
  - Nurses
  - Social Workers
  - Behavioral Therapists
  - Nurse Practitioners
  - Medical Assistant
- Early identification and intervention lead to better outcomes.
- The clinician is often the first point of contact (90% of substance use disorders go untreated).

*SBIRT may only be billed by OB/GYN's. All other provider types must bill under the OB/GYN's NPI.

Key Points for Screening

- Screen everyone.
- Use a validated tool.
- Explore each substance, many patients use more than one.
- Follow up positives or “red flags” by assessing details and consequences of use.

Screening Summary

- Screening is the first step of the SBIRT process and determines the severity and risk level of the patient's substance use.
- The result of a screen allows the provider to determine if a brief intervention or referral to treatment is a necessary next step for the patient.
- Based on findings of a screening: the clinician has valid, patient self-reported information that is used in the brief intervention.
- The result of a screen allows the provider to determine if a brief intervention is a necessary next step for the patient.

Brief Intervention

Brief conversation (5 to 10 minutes) between provider and member that involves:

- Providing feedback and education regarding the screening results and associated risks to the baby.
- Listening to the member and eliciting her own internal motivation for change.
- Providing guidance, support, and a menu of options to the member that includes a referral to treatment.

Greatest success achieved using Motivational Interviewing (MI) approach.

Motivational Interviewing (MI)

- MI is a way of being with members that is focused on the spirit of collaboration, autonomy, respect, and compassion.
- MI is a client-centered, evidence-based method for enhancing the members own motivation to change behavior and aiding in resolving the members ambivalence about making a behavior change.
- MI assumes that motivation can be influenced in the context of a supportive relationship with the provider with the goal of influencing change in the direction of health.
- Listening to the member and eliciting her own internal motivation for change.
- Resources:
  - DAODAS can facilitate training for your health care site!*
  - "Motivational Interviewing in Health Care: Helping Patients Change Behavior" by Stephen Rollnick, William R. Miller and Christopher C. Butler
  - motivationalinterviewing.org

*South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) is an independent agency that provides health information on behalf of Healthy Connections and South Carolina's Medicaid Managed Care Organizations (MCOs).

Ask Permission (Engage) "I appreciate you answering the screening tool questions. Could we take a minute to discuss your results?"

Provide Feedback (Focus) "Great. Thanks. The reason I want to talk more about your drinking is because it can affect your baby. Is it alright if we talk a little more about that?" (Provide information on effects of alcohol on baby)

Enhance Motivation & Elicit Change Talk (Evoke) "Have you ever considered cutting back or quitting?" If so, "Why?" If not, "What would need to happen for you to consider cutting back/quitting?"

Provide Advice "As your health care provider, it is recommended that you quit drinking during pregnancy."

Discuss Next Steps (Plan) "If you were to make a change, what would be your first step? Is it alright if I share with you some options that others have found to be helpful in their efforts to quit drinking?" (Attempt to make referral to DAODAS site.)

Close on Good Terms Summarize, emphasize patient's strengths, highlight change talk and decisions made and arrange for follow-up as appropriate.

Adapted from Southeastern Consortium for Substance Abuse Training (SECSAT) brief intervention card

Motivational Interviewing Demonstration Video

Produced by SCDAODAS

Referral to Treatment

A strong referral to appropriate treatment is key.

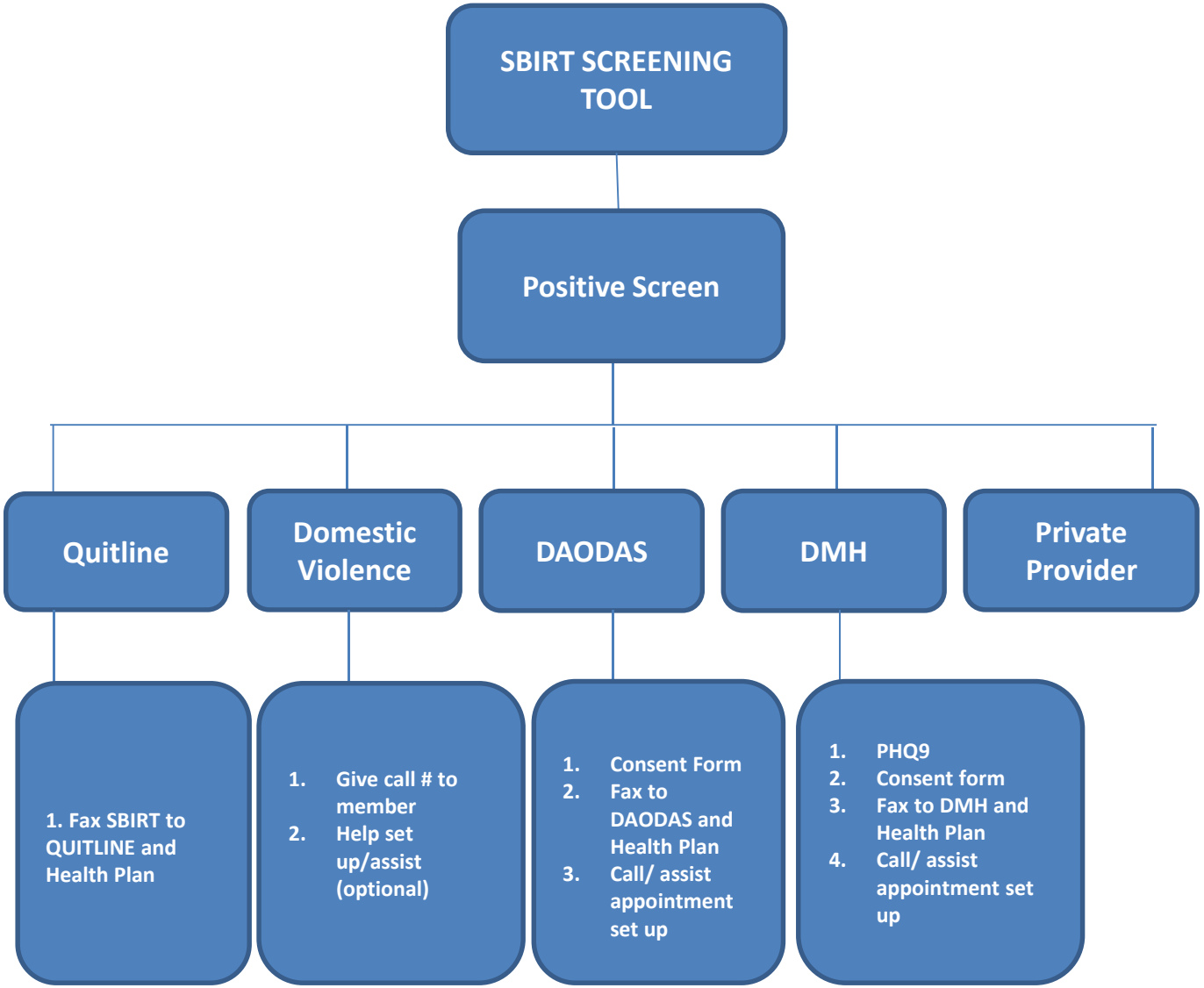
When your patient is ready:

- Make a plan with the patient
- The physician and or staff should actively participate in the referral process
- The warmer the referral handoff, the better the outcome
- Decide how you will interact/communicate with the treatment provider
- Confirm your follow up plan with the patient
- Decide on ongoing follow up support strategies you will use
- Know your referral resources in your community!

*Evidence indicates that approximately 5 percent of patients screened will require a referral to treatment.

- Quitline – Tobacco Cessation
  - 1) Fax Referral Form
- Domestic Violence
  - 1) Domestic Violence Hot Line(800-799-SAFE)
  - 2) Provide assistance in contacting local DV center
- DAODAS
  - 1) Fax Referral Form
  - 2) Consent Form
  - 3) Local listing of DAODAS County agencies
  - 4) Call local DAODAS county agency contact and secure appointment before patient leaves the office
- DMH
  - 1) Fax Referral Form
  - 2) PHQ9 Form
  - 3) Consent Form
  - 4) Local listing of DMH County Agencies
  - 5) Call local DMH county agency contact and secure appointment before patient leaves the office
- Private Provider
  - 1) Set appointment with private provider before patient leaves the office

SBIRT


SBIRT SCREENING TOOL
Positive Screen
Quitline
Domestic Violence
DAODAS
DMH
Private Provider
1. Fax SBIRT to QUITLINE and Health Plan
1. Give call # to member
2. Help set up/assist (optional)
1. Consent Form
2. Fax to DAODAS and Health Plan
3. Call/ assist appointment set up
1. PHQ9
2. Consent form
3. Fax to DMH and Health Plan
4. Call/ assist appointment set up

Referral Reminders

- Most patients with substance related injuries or problems are not motivated to seek formal treatment.
- Fill out all appropriate referral resources to **completion** and send to referral resource, health plan and keep in patient record.
- Assist patient in making referral appointment prior to patient leaving the office.
- Provide a list of referral resources to patients.

Billing

Two codes are billed in support of SBIRT services:

- H0002 = SBIRT behavioral health screening:
  - Performed once per fiscal year.
  - Reimbursed at $24.00.

- H0004 = SBIRT behavioral health brief intervention:
  - Defined as brief (5-10 minute) intervention or session in which a referral is made or attempted.
  - May be billed twice per fiscal year.
  - Reimbursed at $48.00.

HD Modifier

Procedure	**Code**
Screening	H0002
Positive Screen	**H0002 HD modifier**
Brief Intervention	H0004
Brief Intervention resulting in a Referral	**H0004 HD modifier**

CMS 1500 FORM

- Bill individual provider NPI AND group NPI for the associated practice on the CMS 1500 form.
- The individual provider's NPI: line level 24J (loop 2310B) .
- group NPI number: field 33A (loop 2010AA).
- *If the provider is the owner and only provider in the practice and only has an individual NPI number, than the provider should bill utilizing their individual NPI number on both the line level (24J or loop 2310B) and the field level (33A or loop 2010AA).

Summary

SUMMARY

- Screen ALL pregnant or 12 month post-partum Medicaid members using the approved Screening Tool.
  - Use Motivational Interviewing techniques for greatest success with referrals to treatment.
  - Positive screens result in a brief intervention.
- Refer to treatment
  - Smoking – DHEC's QuitLine.
  - Emotional Health – Refer to DM.
  - Alcohol/Substance Abuse – Refer to DAODAS.
  - Domestic Violence – DV Hotline.
  - Refer to private provider if applicable.
  - Seek assistance from plan for referrals if needed.
- Keep ALL completed screening tool sheets in patient's records.
- When making a referral: send completed tool sheet to patient's health plan and referral site.

Thank You.

Healthy Connections