Alcohol and Drug Screening, Assessment, Brief Intervention and Referral to Treatment (SABIRT)

Pursuant to the Department of Health Care Services (DHCS) All Plan Letter (APL) 21-014, “Alcohol and Drug SABIRT,” IEHP has updated its requirements for alcohol and substance use screening in the primary care setting.

The USPSTF Grade A and B Recommendations, the American Academy of Pediatrics (AAP) Bright Futures initiative and DHCS Medi-Cal Provider Manual advise tobacco, alcohol and drug use screening and assessment with appropriate follow-up action as necessary should begin to occur at 11 years of age and include pregnant women. This nationally recognized best practice is known as Alcohol and Drug Screening, Assessment, Brief Interventions and Referral to Treatment (SABIRT), formerly known as Screening, Brief Intervention & Referral for Treatment (SBIRT)

Effective October 11, 2021, IEHP will cover payment for the following SABIRT services rendered to Members 11 years and older, including pregnant women:

1. **When the Member answers “yes” to the alcohol prescreen question** on the Staying Healthy Assessment (SHA), the PCP must conduct screening for unhealthy alcohol and drug use using any of the validated screening tools listed below. **PCPs must document which screening tool is used in the Member’s medical record:**
   - Alcohol Use Disorders Identification Test (AUDIT-C);
   - Brief Addiction Monitor (BAM);
   - Cut Down-Annoyed-Guilty-Eye-Opener Adapted to Include Drugs (CAGE-AID);
   - Tobacco Alcohol, Prescription Medications and other Substances (TAPS);
   - National Institute on Drug Abuse (NIDA) Quick Screen for Adults;
   - Drug Abuse Screening Test (DAST-10);
   - Parents, Partner, Past, and Present (4Ps) for pregnant women and adolescents;
   - Car, Relax, Alone, Forget, Friends, Trouble (CRAFFT) for non-pregnant adolescents; and
   - Michigan Alcoholism Screening Test Geriatric (MAST-G) alcohol screening for geriatric population.

   These screening tools can be found at [https://www.iehp.org/en/providers/special-programs](https://www.iehp.org/en/providers/special-programs)

2. **When the Member’s screening is positive**, the PCP must assess whether unhealthy alcohol use or substance use disorder is present, using any of the validated assessment tools listed below. **PCPs must document which assessment tool is used in the Member’s medical record:**
   - Alcohol Use Disorders Identification Test (AUDIT);
   - Brief Addiction Monitor (BAM);
   - NIDA-Modified Alcohol, Smoking and Substance Involvement Screening Test (NM-ASSIST);
   and
   - Drug Abuse Screening Test (DAST-20).

   These assessment tools can be found at [https://www.iehp.org/en/providers/special-programs](https://www.iehp.org/en/providers/special-programs)
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3. **Immediate intervention must be offered to Members.** To meet this requirement PCPs must:
   - Provide feedback to the patient regarding screening and assessment results;
   - Discuss negative consequences that have occurred and the overall severity of the problem;
   - Support the patient in making behavioral changes; and
   - Discuss and agree on plans for follow-up with the patient, including referral to other treatment if indicated.

4. **The following must be documented in the Member’s medical record:**
   - The service provided (e.g., screen and brief intervention);
   - The name of the screening instrument and the score on the screening instrument (unless the screening tool is embedded in the electronic health record);
   - The name of the assessment instrument (when indicated) and the score on the assessment (unless the screening tool is embedded in the electronic health record); and
   - If and where a referral to an AUD or SUD program was made.

**Billing and Coding**

<table>
<thead>
<tr>
<th>Billing Code</th>
<th>Description</th>
<th>When to Use</th>
<th>Frequency Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>G0442</td>
<td>Annual alcohol misuse screening, 15 minutes</td>
<td>Alcohol use screening</td>
<td>1 per year, per provider</td>
</tr>
<tr>
<td>H0049</td>
<td>Alcohol and/or drug screening</td>
<td>Drug use screening</td>
<td>1 per year, per provider</td>
</tr>
<tr>
<td>H0050+</td>
<td>Alcohol and/or drug services, brief intervention, per 15 minutes</td>
<td>Alcohol misuse counseling or counseling regarding the need for further evaluation/ treatment</td>
<td>1 per day, per provider</td>
</tr>
</tbody>
</table>

**Claim Submission**

IEHP is responsible for processing claims for SABIRT services. Providers must use a standard CMS-1500 Claim form to receive reimbursement and submit claims to:

IEHP - Claims
P.O. Box 4349
Rancho Cucamonga, CA 91729-1800