

# 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>

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>

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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

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

## 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