In May 2013, the United States Preventive Services Task Force (USPSTF) updated its alcohol screening recommendation (listed at http://www.uspreventiveservicestaskforce.org/uspstf/uspsabrecs.htm). The USPSTF recommends that clinicians screen adults ages 18 years or older for alcohol misuse and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse and/or referral to mental health and/or alcohol use disorder services, as medically necessary. As a contracted PCP with CenCal Health, you are required to provide Screening, Brief Intervention, and Referral to Treatment (SBIRT) services for members ages 18 and older who misuse alcohol. Coverage of SBIRT services by CenCal Health took effect January 1, 2014. Note: The new SBIRT benefit only targets misuse of alcohol.

BACKGROUND:

Approximately 21 percent of US adults report engaging in risky or hazardous drinking, and the prevalence of current alcohol dependence is about four percent. Alcohol misuse plays a contributing role in a wide range of health conditions, such as hypertension, gastritis, liver disease and cirrhosis, pancreatitis, certain types of cancer (for example, breast and esophageal), cognitive impairment, anxiety, and depression. Research findings implicate alcohol misuse as a major risk factor for trauma, including falls, drowning, fires, motor vehicle crashes, homicide, and suicide. Research findings also link alcohol use in pregnancy to fetal alcohol syndrome, which occurs in about 0.2 to 1.5 per 1,000 live births in the United States.

Counseling interventions in the primary care setting can positively affect risky drinking behaviors in adults by reducing weekly alcohol consumption and increasing long-term adherence to recommended drinking limits. Brief behavioral counseling interventions decrease the proportion of persons who engage in episodes of heavy drinking. Indirect evidence supports the effect of screening and brief behavioral counseling interventions on reducing the probability of traumatic injury or death especially those related to motor vehicles.

For adults, PCPs must offer the Staying Healthy Assessment (SHA) or other approved tool within 120 days after enrollment and every three years, with annual reviews of the member’s answers. The SHA contains a single alcohol screening question recommended by the USPSTF, and is posted on CenCal Health’s website in the “Health Education” section, at http://www.cencalhealth.org/for_providers/HEprovider/stayinghealthytools.html.

REQUIREMENTS:

Beginning January 1, 2014, CenCal Health will cover and pay for an expanded alcohol screening for members 18 years of age and older who answer “yes” to the alcohol question in the SHA (considered a “pre-screen”), or at any time the PCP identifies a potential alcohol misuse problem. When a member answers “yes” to the SHA alcohol pre-screen question, PCP’s must offer the member an expanded, validated alcohol screening questionnaire. While any validated screening tool is acceptable, CenCal Health recommends the use of the Alcohol Use Disorder Identification Test (AUDIT) or Alcohol Use Disorder Identification Test—Consumption (AUDIT-C). Each member is allowed at least one expanded screening, using a validated screening tool, per year (billable as procedure code H0049). (Note: that
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administration of the alcohol question on the SHA is considered part of routine primary care. PCPs must maintain documentation of the SHA and the expanded screening. When a member transfers to another PCP, you must obtain prior records. If no documentation is found, you must provide and document this service.

CenCal Health will cover and pay for brief intervention(s) for members who screen positively for risky or hazardous alcohol use or a potential alcohol use disorder. Each member is allowed three brief intervention sessions per year. You may combine these sessions in one or two visits or administer the sessions as three separate visits.

Brief Intervention
CenCal Health will cover and pay for brief intervention(s) for members who screen positively for risky or hazardous alcohol use or a potential alcohol use disorder. Brief intervention(s) typically include one to three sessions, 15 minutes in duration per session (each session billable as procedure code H0049), offered in-person, by telephone, or by telehealth modalities. Each member is allowed three brief intervention sessions per year, and you may combine these sessions in one or two visits or administer the sessions as three separate visits. You may refer offsite for brief interventions; however, CenCal Health encourages all PCPs and their teams to offer the service within the primary care clinic, to increase the likelihood of members following through on the interventions.

Referral to Treatment
Members who are found, upon screening and evaluation, to meet criteria for an alcohol use disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM), or whose diagnosis is uncertain, must be referred for further evaluation and treatment. Treatment for alcohol use disorders is not a service covered by CenCal Health. For further diagnostic evaluation and treatment, refer to the alcohol and drug program of the county in which the member resides. The DHCS website has information about SBIRT services and training materials at http://www.dhcs.ca.gov/services/medical/Pages/SBIRT.aspx. On this webpage the header Referral to Treatment links to a list of California county contacts for local substance use disorder treatment information and referrals.

PROVIDER REQUIREMENTS:

1. All licensed providers, as well as non-licensed providers who meet the requirements below, may offer SBIRT services in the primary care setting. Registered Nurses are licensed clinical professionals, so are not required to complete SBIRT training, and do not need to meet the non-licensed provider requirements.

2. Non-licensed health care providers must provide SBIRT under the supervision of a licensed health care provider. Licensed health care providers eligible to supervise staff are currently limited to a:
   a. Licensed Physician;
   b. Physician Assistant;
   c. Nurse Practitioner; and
   d. Psychologist.
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3. At least one supervising licensed provider per clinic or practice must take four hours of SBIRT training within 12 months after initiating SBIRT services.

   a. On a continual basis beyond the first 12 months of service, at least one supervisor per clinic or practice must have the completed training.
   b. For solo physician practices, the physician is highly encouraged, but not required, to take the training within 12 months after initiating SBIRT services.

4. Trained non-licensed providers (including but not limited to health educators, Certified Addiction Counselors, health coaches, medical assistants, and non-licensed behavioral assistants) may provide SBIRT services if they meet the following requirements, which must be met before rendering services:

   a. Be under the supervision of a licensed provider listed in #2 above.
   b. Complete a minimum of 60 documented hours of professional experience such as coursework, internship, practicum, education or professional work within their respective field. This experience should include a minimum of 4 hours of training directly related to SBIRT services (such as motivational interviewing).
   c. Complete a minimum of 30 documented hours of face-to-face client contact within his or her respective field. (This requirement is in addition to the 60 hours of clinical professional experience described above). This may include internships, on-the-job-training, or professional experience and SBIRT services training.
   d. Supervising licensed providers (one per clinic or practice) must attest that they have obtained the required training on SBIRT within 12 months after initiating the provision of SBIRT services (one-time requirement)
   e. Non-licensed providers must attest that they have completed training and other requirements, prior to initiating services.

HOW TO OBTAIN TRAINING:

Training materials concerning the Staying Healthy Assessment and SBIRT services are located on CenCal Health’s website under Educational Trainings & Seminars:
http://www.cencalhealth.org/for_providers/educational.html

In addition to SBIRT training provided by CenCal Health, any program that is accepted for CME or other professional CE credits meets the requirements for training, including online and in-person sessions.

ATTESTATIONS OF TRAINING:

Providers who administer and bill CenCal Health for SBIRT services must keep documentation on file that demonstrates compliance with the requirements described under items #3 and #4, above.

Questions on these services can be directed to your Provider Services Representative at 805.562.1676.