

Screening, Brief Intervention, Referral, and Treatment

Cooperative Agreements for Screening, Brief Intervention, Referral, and Treatment (SBIRT) expand and enhance State substance abuse treatment service systems by:

- Expanding the State's continuum of care to include Screening Only (SO), Brief Intervention (BI), Referral to Treatment (RT), and Brief Treatment (BT) services in general medical and other community settings (for example, community health centers, nursing homes, schools and student assistance programs, occupational health clinics, hospitals, and emergency departments);
- Supporting clinically appropriate services for persons at risk for, or diagnosed with, a Substance Use Disorder (for example, Substance Abuse or Dependence); and
- Identifying systems and policy changes to increase access to treatment in generalist and specialist settings.

Program Description

SBIRT was developed to be a public health approach to deliver early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders. In order to provide opportunities for early intervention with persons at risk for substance abuse, primary care centers, hospital emergency rooms, trauma centers, and other community settings can implement SBIRT before more severe consequences occur.

One of the main benefits of SBIRT is that it incorporates screening and treatment components of care into a system of services. Screening for substance use problems can occur quickly and if the patient is at risk for developing a problem, brief intervention can raise their awareness of current levels of substance use and the risk for future problems. Patients needing more in-depth care are referred to treatment. Another added benefit of SBIRT is that the treatment stays the same regardless of service setting.

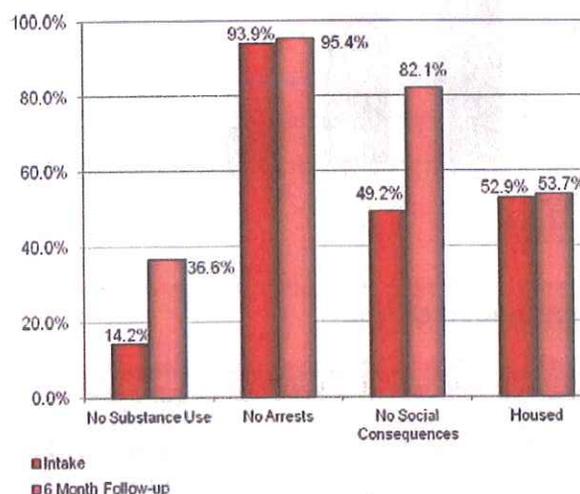
The SBIRT program began in Fiscal Year 2004. Among the current SBIRT grants, over **472,300** clients have been screened for substance abuse issues. These grants span across 13 states and 1 U.S. territory.

National Outcome Measures (NOMs)

These outcomes chart the progress of clients for whom both intake and 6-month follow-up data were available. These outcomes include:

- **Abstinence from Alcohol/Drug Use – Increased by 158%**
- **No Arrests – Increased by 2%**

- **No Social Consequences from Alcohol/Drug Use – Increased by 67%**
- **Stability in Housing – Increased by 2%**



Risky Behavior Outcomes

Risky behavior data are reported for clients for whom both intake and 6-month follow-up data were available. These outcomes include:

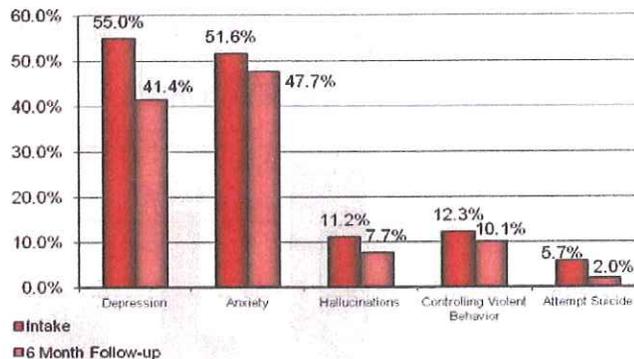
- **Injected Illegal Drugs – Decreased by 61%**
- **Had unprotected sex – Decreased by 12%**
- **Had unprotected sex with an injection drug user – Decreased by 33%**
- **Had unprotected sex with an individual who was high – Decreased by 16%**

Screening, Brief Intervention, Referral, and Treatment (cont.)

Mental Health Outcomes

Mental health data are reported for clients for whom both intake and 6-month follow-up data were available. These outcomes include:

- *Depression* – Decreased by 25%
- *Anxiety* – Decreased by 8%
- *Hallucinations* – Decreased by 31%
- *Trouble understanding, concentrating, or remembering* – Decreased by 16%
- *Trouble controlling violent behavior* – Decreased by 18%
- *Suicide attempts* – Decreased by 65%



Substances of Use

Substance	Percent
Any Alcohol	72.5%
Marijuana/Hashish	33.9%
Cocaine/Crack	9.1%
Oxycontin/Oxycodone	2.1%
Methamphetamine	2.0%

Is SBIRT Effective?

In the eight years since its inception, SBIRT has been effective in reaching over 1.5 million persons who are at risk for substance use problems. It has been successful in reducing substance use and mental health outcomes, as well as risky lifestyle behaviors.

In addition to decreases in substance abuse, screening and brief interventions have also been associated with fewer hospital days and fewer emergency department visits.

Recent cost-benefit analyses and cost-effectiveness analyses have demonstrated net-cost savings from SBIRT-type interventions.

How Would I Get Paid?

Payer	Code	Description	Fee Schedule
Commercial Insurance	CPT99408	Alcohol and/or substance abuse structured screening and brief intervention services; 15 to 30 minutes	\$33.41
	CPT99409	Alcohol and/or substance abuse structured screening and brief intervention services; greater than 30 minutes	\$65.51
Medicare	G0396	Alcohol and/or substance abuse structured screening and brief intervention services; 15 to 30 minutes	\$29.42
	G0397	Alcohol and/or substance abuse structured screening and brief intervention services; greater than 30 minutes	\$57.69
Medicaid	H0049	Alcohol and/or drug screening	\$24.00
	H0050	Alcohol and/or drug service, brief intervention, per 15 minutes	\$48.00

Source: SAMHSA (2012). Coding for SBI Reimbursement. <http://www.samhsa.gov/prevention/sbirt/coding.aspx>

Additional SBIRT Resources

SAMHSA's SBIRT Homepage:

<http://www.samhsa.gov/prevention/SBIRT/index.aspx>

Screening, Brief Intervention, and Referral to Treatment

Cooperative Agreements for Screening, Brief Intervention, and Referral to Treatment (SBIRT) expand and enhance State substance abuse treatment service systems by:

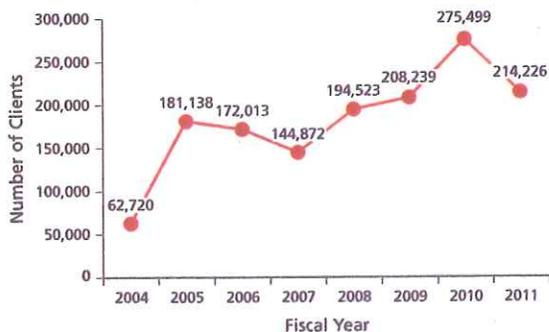
- expanding the State's continuum of care to include Screening Only (SO), Brief Intervention (BI), Referral to Treatment (RT), and Brief Treatment (BT) services in general medical and other community settings (e.g., community health centers, nursing homes, schools and student assistance programs, occupational health clinics, hospitals, and emergency departments);
- supporting clinically appropriate services for persons at risk for, or diagnosed with, a substance use disorder (e.g., substance abuse or dependence); and
- identifying systems and policy changes to increase access to treatment in generalist and specialist settings.

The SBIRT program began in Fiscal Year (FY) 2004. This profile focuses on FY 2011 client intake data and details the measurable outcomes that clients have achieved from intake to 6 months post-intake.

Clients Served: FY 2004–FY 2011

A total of 1,453,230 clients were served by the SBIRT program from FY 2004 to FY 2011. The majority (81%) of SBIRT clients (N=50,440 in FY 2004, N=145,020 in FY 2005, N=132,980 in FY 2006, N=109,204 in FY 2007, N=141,944 in FY 2008, N=174,524 in FY 2009, N=236,665 in FY 2010, and N=185,502 in FY 2011) received SO services. Fourteen percent (N=9,391 in FY 2004, N=27,184 in FY 2005, N=26,943 in FY 2006, N=23,068 in FY 2007, N=38,759 in FY 2008, N=25,861 in FY 2009, N=29,635 in FY 2010, and N=22,460 in FY 2011) of clients received BI services; 3% (N=1,715 in FY 2004, N=4,519 in FY 2005, N=6,420 in FY 2006, N=7,019 in FY 2007, N=7,498 in FY 2008, N=4,499 in FY 2009, N=5,792 in FY 2010, and N=3,753 in FY 2011) received RT services; and 2% (N=1,174 in FY 2004, N=4,415 in FY 2005, N=5,670 in FY 2006, N=5,581 in FY 2007, N=6,322 in FY 2008, N=3,355 in FY 2009, N=3,407 in FY 2010, and N=2,511 in FY 2011) received BT services.

Number of Clients Served by Fiscal Year



National Outcome Measures (NOMs): Intake and 6-Month Follow-Up

These outcomes chart the progress of clients for whom both intake and 6-month follow-up data were available. The follow-up rate for 6-month interviews of SBIRT clients was 72% (N=599) for those who received BI services, 70% (N=97) for those who received BT services, and 68% (N=130) for those who received RT services. These data are based on matched cases as of April 4, 2012. Note that the total number of matched cases varies by NOM.

Abstinence – The percentage of clients who reported that they did **not** use alcohol or illegal drugs within the past 30 days **increased from intake to 6-month follow-up by 269% for BI clients (N=563), by 800% for BT clients (N=85), and by 450% for RT clients (N=126).**

Crime and Criminal Justice – The percentage of clients who reported **no** arrests within the past 30 days **increased from intake to 6-month follow-up by 2% for BT clients (N=63) and by 6% for RT clients (N=95).**

Employment/Education – The percentage of clients who reported current employment or school attendance **increased from intake to 6-month follow-up by 16% for BT clients (N=64) and by 19% for RT clients (N=96).**

Social Connectedness – The percentage of clients who reported that they were socially connected in their community (attended religious/faith-based and/or voluntary self-help groups, interacted with family/friends) within the past 30 days **decreased from intake to 6-month follow-up by 9% for BT clients (N=61) and by 12% for RT clients (N=101).**

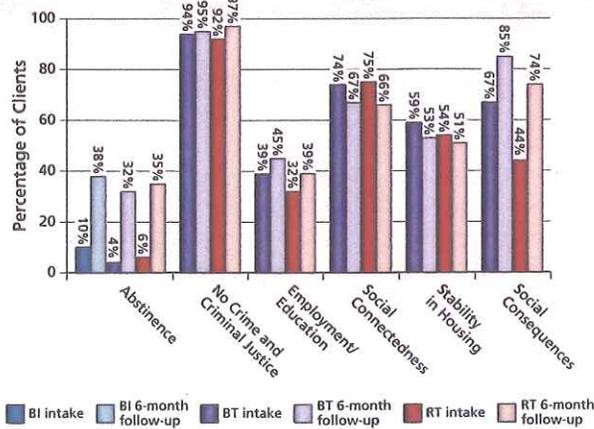
Stability in Housing – The percentage of clients who reported that they had a permanent place to live in the community within the past 30 days **decreased from intake to 6-month follow-up by 11% for BT clients (N=64) and by 6% for RT clients (N=101).**

Social Consequences – The percentage of clients who experienced **no** alcohol-related or illegal drug-related health, behavioral, or social consequences within the past 30 days **increased from intake to 6-month follow-up by 26% for BT clients (N=58) and by 68% for RT clients (N=84).**



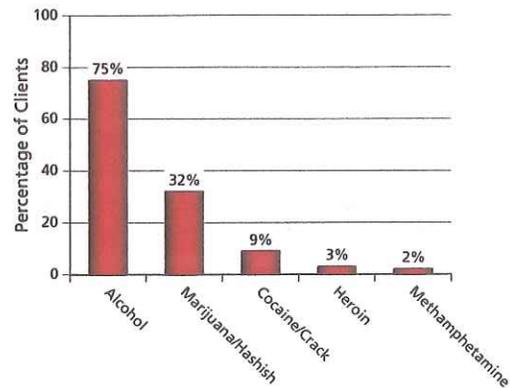
Screening, Brief Intervention, and Referral to Treatment

Client Progress on National Outcome Measures



Alcohol and Illegal Drug Use

Top Five Substances Reported at Intake by BI, BT, and RT Clients



Client Characteristics: Intake (FY 2011)

The following describe the 214,226 SBIRT clients served in FY 2011.

Gender

Fifty-seven percent (N=121,335) of the clients were female, and 43% (N=92,572) were male. Less than 1% (N=39) of clients were transgender, and less than 1% (N=1) of clients were other. Data were missing for less than 1% (N=279).

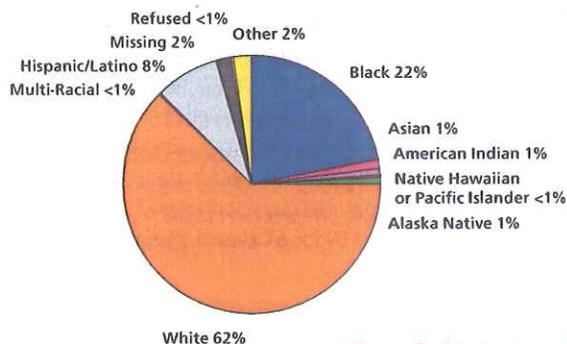
Age

- 18% (N=38,878) of clients were age 65 or older
- 18% (N=37,990) of clients were between the ages of 55–64
- 17% (N=35,918) of clients were between the ages of 25–34
- 17% (N=35,637) of clients were between the ages of 45–54
- 15% (N=31,653) of clients were between the ages of 35–44
- 14% (N=29,455) of clients were between the ages of 18–24
- 2% (N=4,611) of clients were age 17 or under

Age data were missing for less than 1% (N=84) of clients.

Race/Ethnicity

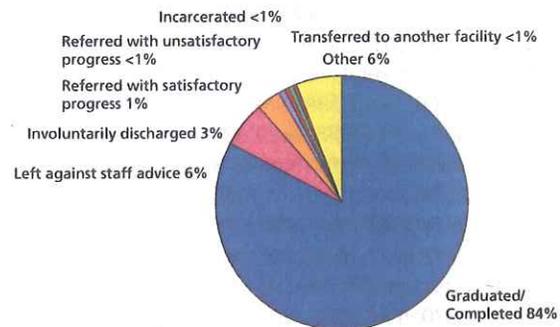
Race of FY 2011 Clients



Discharge Status: Retention and Length of Stay

Of the SBIRT clients who received BI, BT, and RT services in FY 2011, a total of 23,349 were discharged from the program.

Program Discharge Status of FY 2011 Intakes for BI, BT, and RT Clients



In regard to length of stay, 85% (N=19,743) of clients stayed in the program for 0–30 days. Twelve percent (N=2,902) remained in the program for 31–90 days; 2% (N=352) stayed for 121+ days; and 2% (N=352) stayed for 91–120 days.

Alcohol Use: Intake and 6-Month Follow-Up

The percentage of SBIRT clients who reported becoming intoxicated within the past 30 days by drinking five or more alcoholic beverages remained unchanged from intake to 6-month follow-up for BI clients (50%, N=269), decreased for BT clients (71% to 67%, N=51), and decreased for RT clients (84% to 64%, N=64).

Acknowledgments and Contact Information

For further information about the Screening, Brief Intervention, and Referral to Treatment program, contact Reed Forman, Team Leader, at reed.forman@samhsa.hhs.gov. | All data are courtesy of the Services Accountability Improvement System (SAIS). For questions related to the SAIS project, contact Deepa Avula, Branch Chief, at deepa.avula@samhsa.hhs.gov. | For additional copies of program profiles and/or more information on substance abuse treatment, contact the National Clearinghouse for Alcohol and Drug Information (NCADI) at <http://ncadi.samhsa.gov>.