

# **Beyond the SBIRT Codes: Strategies for Financing Youth SBIRT**



**NATIONAL COUNCIL  
FOR BEHAVIORAL HEALTH**  
■ STATE ASSOCIATIONS OF ADDICTION SERVICES ■

*Stronger Together.*

# What Resources Are Needed?

Staff time

Administrative costs

Training

Coaching

Fidelity monitoring

Tracking outcomes

Sustaining beyond start-up





## Screening & Brief Intervention Reimbursement Codes

- |              |  |
|--------------|--|
| <b>99408</b> | Substance use screening and brief intervention. <b>15-30 min</b>           |
| <b>99409</b> | Substance use screening and brief intervention. <b>Greater than 30 min</b> |
| <b>H0049</b> | Alcohol or drug screening. <b>15 min</b>                                   |
| <b>H0050</b> | Alcohol or drug brief intervention. <b>15 min</b>                          |

# Understanding Your State's Codes



Fee schedule

Services

Provider types

Settings

Specific training requirements

## **Clarification in the “Free Care” Rule**

Schools and public health departments can now bill Medicaid for services provided for free to non-Medicaid enrollees.





**State and Federal Support**

Local Resources

State Budget

Federal Grants

# QUESTIONS?

# Golden Opportunities for SBIRT

New financing opportunities for SUD prevention and early intervention:

- 1115 Waivers
  - Health Homes
  - Certified Community Behavioral Health Clinics (CCBHCs)
  - Alternative Payment Models
  - Medicaid Reimbursement in Community Behavioral Health
  - EPSDT
- Share potential actions for advocates to realize these opportunities





# Alternative Payment Models

- Growing understanding of the impact of substance use on various health outcomes, service utilization and cost
- Increased interest in population-based approaches
- Need for education with health systems, providers, health plans, and policymakers
- Opportunities for inclusion in Delivery System Reform Incentive Payment (DSRIP) programs

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# What Can Advocates Do?

- Determine whether your state is pursuing payment/delivery redesigns like Section 1115 waivers, value-based purchasing arrangements, CCBHCs, Health Homes.
- Get involved with and ensure that prevention and early intervention is embedded in project design.
- Continue to raise consciousness on SUD prevention and early intervention and its role in achieving the Triple Aim.
- Continue to move system upstream.



# Links Provided in Discussion

- <http://www.communitycatalyst.org/resources/alerts/advocates-guide-to-the-change-in-the-medicaid-free-care-rule>
- <http://www.communitycatalyst.org/resources/publications/document/Funding-and-Sustaining-SBIRT-in-Schools-December-2015.pdf>
- <https://www.medicaid.gov/federal-policy-guidance/downloads/SMD15003.pdf>
- <https://wellsys.biz/>
- <https://www.medicaid.gov/state-resource-center/innovation-accelerator-program/reducing-substance-use-disorders/reducing-substance-use-disorders.html>
- Health Homes information, including which states are participating in the program: [https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/health-homes-technical-assistance/downloads/hh-map\\_v53.pdf](https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/health-homes-technical-assistance/downloads/hh-map_v53.pdf)
- What the heck is a CCBHC? Find more info here: <http://www.thenationalcouncil.org/topics/certified-community-behavioral-health-clinics/>
- more info about EPSDT, from Health Management Associates: <https://www.healthmanagement.com/wp-content/uploads/10-29-15-HMA-SBIRT-Webinar.pdf>



# Thank you!

Questions?

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