



The NCI PPS is recommending the NYS Screening, Brief Intervention and Referral to Treatment to meet the evidence based prevention deliverables for:

- 3.a.i **Task 10.4**
Integration of Primary Care and Behavioral Health; conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs, and

- 4.a.iii **Task 4.1**
Strengthening Mental Health and Substance Abuse Infrastructure Across Systems; train patient or client facing staff to deliver evidence-based screening tool that supports MEB promotion and disorder prevention (i.e. SBIRT)

TRAINING MUST BE FACILITATED BY A NYS OASAS CERTIFIED SBIRT TRAINER TO RECEIVE CREDIT

[SBIRT Resources \(5 pages\)](#)

[What is SBIRT?](#)

SBIRT is an evidence-based approach to identifying patients who use alcohol and other drugs at risky levels with the goal of reducing and preventing related health consequences, disease, accidents and injuries. Risky substance use is a health issue and often goes undetected.

SBIRT is a comprehensive, integrated, public health approach that provides opportunities for early intervention before more severe consequences occur. Evidence-based tools that are demonstrated to be valid and reliable in identifying individuals with problem use or at risk for a Substance Use Disorder (SUD) must be used. Based on implementation of this model nationally, of 459,599 patients screened, 22.7 percent screened positive for a spectrum of use (risky/problematic, abuse/addiction). Of those who screened positive 15.9 percent were recommended for a brief intervention with a smaller percentage recommended for brief treatment (3.2 percent) or referral to specialty treatment (3.7 percent).

[Why is SBIRT Important?](#)

- SBIRT is effective. More than screening, SBIRT is an effective tool for identifying risk behaviors and providing appropriate intervention.
- By screening for high risk behavior, healthcare providers can use evidence-based brief interventions focusing on health and other consequences, preventing future problems.

[How does SBIRT work?](#)

- SBIRT incorporates screening for all types of substance use with brief, tailored feedback and advice.
- SBIRT can be performed in a variety of settings. Screening does not have to be performed by a physician.
- Simple feedback on risky behavior can be one of the most important influences on patient behavior and change.

[What are the benefits of SBIRT?](#)

- Prevent disease, accidents and injuries related to substance use, resulting in better patient outcomes.
- SBIRT reduces costly healthcare utilization.
- SBIRT is reimbursable, billing codes are available in New York State.
- Many payers reimburse for SBIRT services.



Below is the breakdown of who needs what trainings:

Table 1: Provider types eligible to bill for office-based SBIRT services

Provider Type	Required OASAS Approved Training/Certification
Physicians (services may be performed by another provider type under the supervision of the physician)	4 hours, unless certified by the American Society of Addiction Medicine (ASAM), the American Board of Ambulatory Medicine (ABAM), the American Academy of Addiction Psychiatry (AAAP) or the American Academy Osteopathic Association (AOA)
Nurse Practitioners	4 hours, unless qualified as a Certified Addictions Registered Nurse (CARN)
Nurse Midwives	4 hours
Psychologists	4 hours

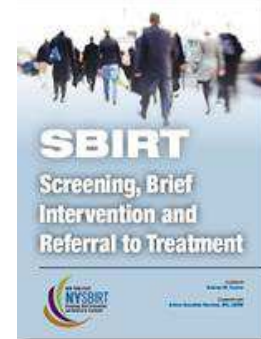
Table 2: Provider types eligible to perform SBIRT and bill under a licensed provider/facility (Includes provider types listed in Table 1)

Provider Type	Required Training/Certification
Physician Assistants	4 hours
Registered Nurses	4 hours, unless qualified as a CARN
Licensed Practical Nurses	4 hours
Licensed Master Social Worker (LMSW) or Licensed Clinical Social Worker (LCSW)	4 hours
Licensed Mental Health Counselors	4 hours
Licensed Marriage and Family Therapist	4 hours
Certified School Counselor	4 hours
Certified Rehabilitation Counselor	4 hours
OASAS-credentialed professionals including Credentialed Alcoholism and Substance Abuse Counselors (CASACs), Credentialed Prevention Professionals (CPPs) and Credentialed Problem Gambling Counselors	4 hours
Health Educators and unlicensed individuals (may only provide SBIRT services under the supervision of a licensed health care professional, following consistent protocols)	12 hours

New York State Approved SBIRT Training

- [OASAS SBIRT Training Provider Certification](#)
 - [SBIRT Training Program](#) (4 hours) - **Free** online, interactive SBIRT training for healthcare professionals offered by Center for Practice Innovations.
 - [SBIRT Core Training Program](#) (4 hours) - Online SBIRT training for primary and acute healthcare professionals offered by [Clinical Tools, Inc.](#) **Please note:** behavioral health professionals should consider other OASAS approved options for training.
 - [Four Hour Certified SBIRT Training Providers](#)
 - [Twelve Hour Certified SBIRT Training Providers](#)
- * Both the 4 hour and 12 hour trainings can be taught by regional NCI Certified SBIRT Training partners.

NYS SBIRT Promotional Brochures



Provider Information

Implementation:

- [DSRIP Breakthrough Series: SBIRT Implementation](#)
- [New York Best Practice - Establishing a Policy Advisory Committee](#)
- [SBIRT Implementation and Process Change Manual for Practitioners](#) - This manual is designed to be a resource for those interested in creating a sustainable SBIRT program.

Reimbursement Information

- [SBIRT Medicaid Billing Questions - Resources](#) (posted July 2015)
- [Billing Update for Pre-Admission SBIRT Services and Post-Admission Brief Treatment Services](#)
- **NEW** [Medicaid Guidelines](#) - NYSDOH
- [OASAS licensed 822 and 828 programs](#)
- [Decision Memo for Screening and Behavioral Counseling Interventions in Primary Care \(CAG-00427N\)](#) - The Centers for Medicare and Medicaid Services
- [Decision Memo for Screening for Depression in Adults](#) - The Centers for Medicare and Medicaid Services

General Information

- [Alcohol Screening and Counseling - An effective but underused health service](#) - CDC Vital signs (January 2014 issue). CDC Vital signs links science, policy, and communications with the intent of communicating a call-to-action for the public. [Spanish version](#)
- [Center for Disease Control and Prevention - Vital signs: Communication between Health Professionals and their Patients About Alcohol Use](#) - 44 States and the District of Columbia (2011)
- [OASAS FYI: SBIRT](#) - an introduction to SBIRT



Federal Agency SBIRT Resources

- [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#) - SBIRT webpage
 - [TAP 33: Systems-Level Implementation of Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](#)
 - [SBIRT in Behavioral Healthcare](#) - SAMSHA report on evidence supporting the effectiveness of SBIRT
- [National SBIRT Addiction Technology Transfer Center \(ATTC\)](#) - Funded by SAMHSA to advance SBIRT as a timely public health model worthy and in need of advancement to reach its full potential impact on the health of Americans.
- [SAMHSA- Health Resources Services Administration \(HRSA\) Center for Integrated Health Services](#)
- [Office of National Drug Control Policy \(ONDCP\)](#) - SBIRT Fact Sheet
- [NIAAA](#) - Report on Brief interventions

OASAS-Approved Evidence Based Alcohol and Substance Use Screening Instruments

NYS OASAS has approved several evidence-based screening instruments and will update the list as new screening instruments become available or are approved. Listed below are those approved screening instruments.

Pre-Screen (aka Brief Screen) - A pre-screen is defined by SAMHSA as "a rapid, proactive procedure to identify individuals who may have a condition or be at risk for a condition before obvious manifestations occur." It involves short questions relating to alcohol and drug use, and must be administered prior to beginning a full screening. Many providers ask patients the pre-screening questions first and then ask the full screening questions if patients score positive on the pre-screening questions. Pre-screens are considered part of routine medical management and are not a separately reimbursable service.

Commonly Used Pre-Screens

- [AUMenDIT-C](#)
- **NIAAA** - Single-item pre-screener for alcohol use: "How many times in the past year have you had 5 (men)/4 (women) or more drinks in a day?" A score of 1 or more is considered a positive result and should initiate full screening and possibly a brief intervention
- **DAST-1** - Single-item Question for Drugs, "In the past 12 months, have you used drugs other than those required for medical reasons?" A "yes" response is considered a positive result and should initiate full screening and possibly a brief intervention
- **NIDA** - Single-item Question for Drugs - "How many times in the past year have you used an illegal drug or used a prescription medication for non-medical reasons?" A score of 1 or more is considered a positive result and should initiate full screening and possibly a brief intervention

Full Screens - Full screens are administered after an individual has screened positive on a pre-screen. Full screens ask a validated series of questions to assess the level of an individual's substance use. Full screens are categorized below.

Adult Screening Instruments

- [AUDIT \(Alcohol Use Disorder Identification Test\)](#) and [AUDIT Score Chart](#) - Developed by the World Health Organization (WHO) and evaluated over a period of two decades. It has been found to provide an accurate measure of risk across gender, age, and cultures. Also available in [Spanish](#) and [Score Chart in Spanish](#)
 - [AUDIT Manual](#)
 - [AUDIT Manual Spanish](#)
- [ASSIST \(Alcohol, Smoking, and Substance Abuse Involvement Screening Test\)](#) - A brief screening questionnaire to find out about people's use of psychoactive substances. It was developed by the World Health Organization (WHO) and an international team of substance use researchers as a simple method of screening for hazardous, harmful and dependent use of alcohol, tobacco and other psychoactive substances. Also available in pdf format in [Arabic](#), [Chinese](#), [Farsi](#), [French](#), [German](#), [Hindi](#), [Portuguese](#), and [Spanish](#).
 - [ASSIST Manual](#)
 - [ASSIST Manual Spanish](#)
- [DAST - 10 \(Drug Abuse Screening Test\)](#) - Includes questions about involvement with drugs, not including alcoholic beverages, during the past 12 months. "Drug use" refers to the use of prescribed or over the counter drugs in excess of what's directed and any non-medical and/or illegal use of drugs.



Adolescent Screening Instruments

- [CRAFFT \(Car, Relax, Alone, Forget, Family or Friends, Trouble\)](#) - An alcohol and drug behavioral health screening tool for use with children under the age of 21 and is recommended by the American Academy of Pediatrics' Committee on Substance Abuse for use with adolescents. It is a short, effective screening tool meant to assess whether a longer conversation about the context of use, frequency, and other risks and consequences of alcohol and other drug use is warranted. Also available in [other languages](#)
 - [CRAFFT Manual](#)
- [S2BI](#) - (Screening to Brief Intervention) A seven-item tool is used to assess the frequency of alcohol and substance use (e.g., tobacco, marijuana, prescription drugs, illegal drugs, inhalants, herbs or synthetic drugs) among youth and adolescents from 12 to 17 years of age.
 - [S2BI Manual](#)
 - [S2BI Quick Guide](#)
- [NIAAA Alcohol Screening for Youth Manual](#) - Uses a two-item scale to assess alcohol use among youth and adolescents between 9 and 18 years of age. The first question determines the frequency of friends' drinking, and the second question assesses personal drinking frequency.
 - [NIAAA Youth Guide Algorithm](#)

Pregnant Women Screening Instruments

- [T-ACE](#) - (Tolerance, Annoyance, Cut Down, Eye Opener) A four-item questionnaire developed to assess alcohol use in pregnant women. It provides obstetricians and gynecologists with a brief and useful way to identify patients at risk for drinking amounts which may be dangerous to the fetus.
- [TWEAK](#) - (Tolerance, Worried, Eye Opener, Amnesia, K/Cut Down) A five-item scale which was developed originally to screen for risky drinking during pregnancy.

Consideration of Other Evidence Based Screening Instruments for SBIRT

Providers using or wanting to use an evidence-based SBIRT screening instrument that is not listed above may submit that screening instrument and supporting research documentation of the appropriateness of that screening instrument for consideration and approval by OASAS to PICM@oasas.ny.gov

Screening Instruments in Multiple Languages

- [Alcohol and Substance Use Screens in Multiple Languages](#) - Please note, not all screening instruments available at this website are OASAS-approved instruments.

Demonstration Videos on SBIRT Screening

- [Emergency Nurses Association](#)
- [Yale Training Videos](#)
- [Project Link](#)

Resources for Screening Women

- [Video: Screening and Brief Interventions for Women](#)
- [Tool Kit: Drinking and Reproductive Health](#)

Resources for Adolescents

- [Adolescent Screening, Brief Intervention, and Referral to Treatment for Alcohol and Other Drug Use Using the CRAFFT Screening Tool](#)
- [NIDA for Teens](#)
- [New Teen Alcohol Risk Screening Guide From NIAAA](#)
 - [NIAAA site for Teens](#)
- ["Talk to Your Child About Alcohol" guide](#)
- [SBIRT for Pediatricians](#)
- [Adolescent SBIRT Curriculum](#) - Skills-based education on Adolescent SBIRT. Request copies of curriculum, PowerPoint slides and Learner's Guide.