

CoE Office Hours: How to Leverage Telehealth Strategies for Substance Use Brief Intervention

Thursday, May 13th, 2021

3:00-4:00pm ET



Center of Excellence for Integrated Health Solutions

Funded by Substance Abuse and Mental Health Services Administration

Operated by the National Council for Behavioral Health

Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).

SAMHSA

Substance Abuse and Mental Health
Services Administration

www.samhsa.gov

Upcoming CoE Events:

CoE Office Hours: Supporting Leadership Development Among BIPOC Staff
[Register here](#) for Office Hour on May 24, 2021, 2-3pm ET

Interested in an individual consultation with the CoE experts on integrated care?

[Contact us through this form here!](#)

Looking for free trainings and credits?

[Check out integrated health trainings from Relias here](#)

Subscribe for Center of Excellence Updates

[Subscribe here](#)



Center of Excellence for Integrated Health Solutions
Funded by Substance Abuse and Mental Health Services Administration
Operated by the National Council for Behavioral Health

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH

Resources

sbirtoregon.org

Workflows	Screening forms	Clinic tools	Online curriculum	Video demonstrations	Billing & documentation	Screening app	ANTECEDENT
-----------	-----------------	--------------	-------------------	----------------------	-------------------------	---------------	------------

SBIRT (Screening, Brief Intervention, Referral to Treatment) represents an innovative, evidence-based approach to addressing unhealthy alcohol use with medical patients. Its core components include:

- Regular and universal screening in the medical setting, regardless of medical complaint.
- Universal and routine use of validated screening tools.
- Consideration of substance use as a continuum rather than a dichotomous “addicted versus not addicted” judgment.
- Use of patient-centered change talk versus directive, prescriptive talk.
- Facilitating smooth, bidirectional transitions between primary care and specialty addiction treatment.

While SBI towards adult alcohol use ranks among the highest-performing preventive services based on cost effectiveness and health impact, it also remains among the least implemented. Common perceived barriers include limited time during the patient visit, lack of knowledge and training, fearing negative patient reactions, and feeling uncomfortable discussing substance use.

This website presents information and tools designed to counter these barriers, and emphasizes a team-based approach to implementing SBIRT. Our materials cover drug use as well, despite evidence that brief interventions may not impact self-reported drug use among adult patients.

This website was created in the Department of Family Medicine at Oregon Health and Science University and acts as a resource for primary care clinics and emergency departments throughout Oregon and the United States.


Video examples:



Clinic workflow



Brief intervention: Steve



Brief intervention: Tom

Website Resources:

- Demonstration videos
- Screening forms
- Reimbursement information
- Pocket cards and tools
- Training curriculum
- Screening app
- [Adult Reference Sheet](#)
- [Adolescent Reference Sheet](#)
- [Pregnancy Reference Sheet](#)

Others:

- [Webinar Recording: How to Leverage Telehealth Strategies for Substance Use Brief Intervention](#)
- [Adult SBIRT Change Package](#)
- [Adolescent SBIRT Change Package](#)

Reference Sheets (Handouts)

Low-risk drinking limits

	Drinks per week	Drinks per day
Men	14	4
Women	7	3
All ages >65	7	3
Pregnancy	0	0

Drinking among adult primary care patients

Some risks of unhealthy drinking

- Depression, Anxiety, Aggressive behavior
- Cancer of the throat and mouth
- Frequent colds, reduced resistance to infection, increased risk of pneumonia
- Liver damage
- Pregnancy: Birth defects, miscarriage, premature birth, low birth weight
- Sexually transmitted diseases, Men: erectile dysfunction
- Painful nerves, Numb, tingling toes
- Alcohol use disorder, Impaired memory, Memory loss
- Premature aging
- Hypertension, Heart failure, Anemia, Weight gaining
- Breast cancer
- Vitamin deficiencies, Bleeding, Stomach inflammation, Dizziness, Irritability
- Information of the pancreas
- Impaired sensation leading to falls
- Failure to fulfil obligations at work, school, or home, Car accidents, Legal problems

Readiness ruler

Not at all 0 1 2 3 4 5 6 7 8 9 10 Very

1-800-923-4357

Billing codes

Screening only	Screening plus brief intervention
Medicaid: CPT 96300	Medicaid: 515 min: CPT 96308
	Medicaid: 435 min: CPT 96309
	Medicaid: 3-14 min: C2011
	Medicaid: 1-13 min: G2296
	Medicaid: 1-13 min: G2298

SBIRT 1-2

SBIRT 1-2	SBIRT 1-3	SBIRT 1-4	SBIRT 1-5	SBIRT 1-6	SBIRT 1-7
Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309

Adult Reference Sheet

Some risks of adolescent alcohol and marijuana use:

- 27% of teenage drivers in fatal car crashes were drinking. Car crashes are the leading cause of teen death.
- Marijuana affects the reaction to alcohol and speeds on the road.
- Teens who use marijuana tend to get lower grades and are more likely to drop out of high school.
- A high school graduate who can alcohol use has less income than a high school graduate who can't.
- Heavy use of marijuana as a teenager can lower IQ later in life as an adult.
- Brain scans show long-term damage that looks to be more than twice as likely to be linked to marijuana use as to alcohol use.
- Alcohol poisoning and suicide are major causes of adolescent-related news stories.
- Brain shrinking and marijuana can raise the risk of unemployment, social anxiety, PTSD, and substance use.
- Drinking increases the risk of injuries, the third leading cause of death among teens.

A standard drink of alcohol equals:

- 12 oz. Beer
- 5 oz. Wine
- 1.5 oz. Liquor
- 8 oz. Malt liquor

One party cup 16 oz.

Readiness ruler:

Not at all 0 1 2 3 4 5 6 7 8 9 10 Very

1-800-923-4357

Billing codes

Screening only	Screening plus brief intervention
Medicaid: CPT 96300	Medicaid: 515 min: CPT 96308
	Medicaid: 435 min: CPT 96309
	Medicaid: 3-14 min: C2011
	Medicaid: 1-13 min: G2296
	Medicaid: 1-13 min: G2298

SBIRT 1-2

SBIRT 1-2	SBIRT 1-3	SBIRT 1-4	SBIRT 1-5	SBIRT 1-6	SBIRT 1-7
Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309

Adolescent Reference Sheet

Some risks of drinking and drug use during pregnancy

Fetal alcohol spectrum disorders
(drunk)

Birth defects
(drunk, marijuana, cocaine, opiates)

Low birth weight
(drunk, marijuana, cocaine, opiates, mmt)

Miscarriage
(drunk, cocaine)

Premature birth
(drunk, marijuana, cocaine, opiates, mmt)

Development and behavior problems
(drunk, marijuana, cocaine, opiates, mmt)

1-800-923-4357

Billing codes

Screening only	Screening plus brief intervention
Medicaid: CPT 96300	Medicaid: 515 min: CPT 96308
	Medicaid: 435 min: CPT 96309
	Medicaid: 3-14 min: C2011
	Medicaid: 1-13 min: G2296
	Medicaid: 1-13 min: G2298

SBIRT 1-2

SBIRT 1-2	SBIRT 1-3	SBIRT 1-4	SBIRT 1-5	SBIRT 1-6	SBIRT 1-7
Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309	Medicaid: 1-13 min: CPT 96308	Medicaid: 1-13 min: CPT 96309

Pregnancy Reference Sheet

Thank You

Questions?

Email integration@thenationalcouncil.org

SAMHSA's Mission is to reduce the impact of substance abuse and mental illness on America's communities.

www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)