

SBIRT

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Approved By:	Highmark Wholecare – Market Leadership
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Annual Approval Date:	10/2025
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Products:	Medicaid
Application:	All participating hospitals and providers
Page Number(s):	1 of 2

Disclaimer

Highmark Wholecare medical policy is intended to serve only as a general reference resource regarding coverage for the services described. This policy does not constitute medical advice and is not intended to govern or otherwise influence medical decisions.

POLICY STATEMENT

This policy provides information regarding the coverage of, as determined by applicable federal and/or state legislation.

This policy is designed to address medical necessity guidelines that are appropriate for the majority of individuals with a particular disease, illness or condition. Each person's unique clinical circumstances warrant individual consideration, based upon review of applicable medical records.

The qualifications of the policy will meet the standards of the National Committee for Quality Assurance (NCQA) and the Pennsylvania Department of Health (DHS) and all applicable state and federal regulations.

DEFINITIONS

Highmark Wholecare – Managed care organization serving vulnerable populations that have complex needs and qualify for Medicaid. Highmark Wholecare members include individuals and families with low income, expecting mothers, children, and people with disabilities. Members pay nothing to very little for their health coverage. Highmark Wholecare currently services Pennsylvania Medicaid: PA HealthChoices.

SBIRT- Screening, brief intervention and Referral to treatment.

PROCEDURES

A prior authorization is not required.

Highmark Wholecare provides coverage for medically necessary Screening, Brief Intervention, and Referral to Treatment (SBIRT) treatment in a physical healthcare setting. Providers are asked to perform this evaluation in order to determine if a potential Substance Use Disorder exists and then as appropriate referral to treatment. Highmark Wholecare is paying the Screening for Alcohol and/or Drug Screening in addition to the office visit as outlined in this policy.



Reimbursement Policy

The screening for SBIRT shall be billed using procedural code H0049 for a reimbursement of \$3.00 per screening up to twice per year. This would be paid in addition to the office visit and will be reimbursed. If another SBIRT code is used, it will not be reimbursed

Post-payment Audit Statement

The medical record must include documentation that reflects the medical necessity criteria and is subject to audit by Highmark Wholecare at any time pursuant to the terms of your provider agreement.

Place of Service: Inpatient/Outpatient

REIMBURSEMENT

Participating facilities will be reimbursed per their Highmark Wholecare contract.

References

CMS



