# **SBIRT**

Screening, Brief Intervention, and Referral to Treatment (SBIRT), part of a larger intervention strategy by the SC Department of Health and Human Services (SCDHHS), is designed to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs. 1 SBIRT targets those with nondependent substance use with effective intervention strategies that hopefully prevent the need for more extensive or specialized treatment.<sup>1</sup>

In South Carolina, these services were expanded for pregnant women and those who have had a baby within the past year and who receive Medicaid after analysis by the USC Institute for Families in Society found that about in one in three SC female Medicaid recipients in 2010 and more than one in four in 2011 had an opiate prescription<sup>2</sup> at a time when US deaths from prescription painkiller overdoses among women had increased 400%.3

SBIRT provides tools and reimbursement for providers to perform standardized screening and referrals for more than 30,000 pregnant women each year through Medicaid obstetric providers.



THE SCDHHS INITIATIVE IS A COMPREHENSIVE APPROACH THAT LOOKS. AT SUBSTANCE USE, DOMESTIC VIOLENCE, AND TOBACCO USE THROUGH THESE FOUR STEPS.

Very brief to identify substance use, behavioral health issues and domestic SCREENING violence

> Intervention to raise awareness of risks and motivate the patient toward acknowledging

When a risk is identified and referred for REFERRAL more intensive treatment

**TREATMENT** 

INTERVENTION

there is a problem

Cognitive behavioral work for a member to acknowledge risks

BY THE NUMBERS: 5

percent of pregnant

percent of women screened had a brief intervention

percent of women screened had a referral to treatment

percent of women referred saw a mental 50.0 health or substance abuse provider



OVER 9,000 WOMEN WERE SCREENED IN 2014.5

## Making a Positive Difference for SC Moms and Babies

The health care of pregnant women who have Medicaid insurance in SC and who have an SBIRT screening shows generally higher scores than all Medicaid participants in SC and the US in four important measures of care quality.



Accessed Preventative/ Ambulatory Care Services



Received timely prenatal care



Attended at least 81% of the recommended prenatal visits



Received timely postpartum care

SBIRT	96.9%	86.3%	77.9%	61.6%
SC MEDICAID	58.1%	84.3%	65.9%	54.1%
US MEDICAID	83.2%	75.5%	60.1%	62.8%

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#### MORE ABOUT THE STUDY

A sample of 5,445 women who had an SBIRT screening during fiscal year 2014 was pulled from the Medicaid claims database. In order to gauge access to maternity care services for this population, 2014 Healthcare Effectiveness Data and Information Set (HEDIS) criteria were applied to the SBIRT sample, all South Carolinians with Medicaid, and all U.S. Medicaid participants. (HEDIS is a tool with 81 measures across 5 domains of care used by the majority of U.S. health plans to evaluate performance.<sup>6</sup>)

For this analysis, four HEDIS measures were applied:

- 1. Adult Access to Preventive/Ambulatory Health Services The percentage of members 20 years and older who had an ambulatory or preventive care visit.
- 2. Timeliness of Prenatal Care The percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the organization.
- 3. Timeliness of Postpartum Care The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.<sup>8</sup>
- 4. Frequency of Ongoing Prenatal Care The percentage of Medicaid deliveries during the measurement period where there were 81 percent of the expected number of prenatal care visits, adjusted for gestational age and month of enrollment.<sup>8</sup>

### THE PARTNERS

Partners for this Initiative include the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS), the South Carolina Department of Health and Environmental Control (DHEC) Quit Line, the South Carolina Department of Mental Health (DMH), and the seven SC Medicaid health plans. Together, these organizations are working to develop provider training to assist with the identification, intervention, and referral of those in South Carolina's pregnant Medicaid population who may benefit from further substance use treatment.

#### **NOTES**

- 1 Department of Health and Human Services Centers for Medicare & Medicaid Services. Screening, Brief Intervention, and Referral to Treatment (SBIRT) Services. Retrieved from http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/SBIRT\_Factsheet\_ICN904084.pdf
- 2 Lòpez-DeFede, A., Harris, T., Blanco-Silva, K., & Walker, D. (2012, Sept 12). Women of childbearing age and opioids: Preliminary data SC Medicaid Program. Retrieved from https://www.scdhhs.gov/sites/default/files/BOI%20Opiates\_PreNatal%20Sept%2012\_2012.pdf
- 3 Centers for Disease Control and Prevention. (2013, July). CDC Vitalsigns: Prescription Painkiller Overdoses. Retrieved from http://www.cdc.gov/vitalsigns/PrescriptionPainkillerOverdoses/index.html
- 4 South Carolina Healthy Connections Medicaid. (2015). Screening, Brief Intervention and Referral to Treatment (SBIRT). Retrieved from https://www.scdhhs.gov/organizations/screening-brief-intervention-and-referral-treatment-sbirt
- 5 Percentages represent data for state fiscal year 2014 (July 1, 2014 June 30, 2015).
- 6 National Center for Quality Assurance. HEDIS® & Performance Measurement: Measuring Performance. Retrieved from http://www.ncqa.org/HEDISQualityMeasurement.aspx
- 7 Agency for Healthcare Research and Quality. Measure Summary: Adults' access to preventive/ambulatory health services: percentage of members 20 years and older who had an ambulatory or preventive care visit. Retrieved from http://www.qualitymeasures.ahrq.gov/content.aspx?id=48680
- 8 National Center for Quality Assurance. State of Health Care Quality 2014 Table of Contents: Perinatal Care. Retrieved from http://www.ncqa.org/Portals/0/Newsroom/2014/SOHC-web.pdf

