

1	Which of these codes would count towards 1 full screen a year?	Full Screens are limited to one a year. Codes H0049, 99409 and 99408 may only be billed once a year.
2	If someone can bill up to 4 units of brief intervention at a time, with no more than 16 units within a year, how does the 99408 and 99409 work?	<p>99408 – May be used for patients who receive a full screen and one brief intervention. The time to implement 99408 is between 15-30 minutes. 99408 are limited to one a year. (\$24.00)</p> <p>99409 – May be used for patients who receive a full screen and one brief intervention. The time to implement is greater than 30 minutes. 99409 are limited to one a year. (\$48.00)</p> <p>H0049 – May be used when an individual receives only an alcohol / or drug full screen. H0049 is limited to one a year.</p>
3	99408 - Does it count for the 1 full screen and possibly 1 or 2 units of Brief intervention?	99408 – This billing code is for one full screen and one brief intervention. The maximum billing for 99408 is \$24.00 as the service takes less than thirty minutes.
5	Once ICD-10 comes into play, we really will need some type of diagnosis code to tie to this billing.	The diagnosis code 780.99 should be utilized when the SBIRT Practitioner is unable to diagnose.
6	Who would use the HCPCS codes and who would use the CPT Codes?	Any approved provider may use any of the 4 procedure codes.
7	How do the codes interact with one another?	<p>If only a full screen was completed, a provider may use H0049 to bill Medicaid.</p> <p>If a full screen and brief intervention was completed taking less than 30 minutes, the provider may use 99408.</p> <p>If a full screen and brief intervention was completed taking more than 30 minutes, a provider would use 99409.</p> <p>If only a brief intervention was completed, the provider would utilize the billing code H0050.</p> <p>A provider could bill the following codes in combination based on the SBIRT service provided:</p> <ul style="list-style-type: none"> <li>• H0049 and H0050 (No more than a total of four units of intervention in one day)</li> <li>• 99408 and H0050 (No more than a total of four units of brief intervention in one day)</li> <li>• 99409 and H0050 (No more than a total of</li> </ul>

		four units of brief intervention in one day)
8	What are the limits for the CPT codes?	99408 - Limited to 1 YR 99409 - Limited to 1 YR
9	Will you require professionals to obtain a professional NPI number?	Yes, individuals must obtain their own professional NPI number. SBRT practitioners may NOT use their program NPI number.
10	How will a provider know if a full screen and brief intervention has been completed? If the screening has been completed by another provider, would screen need to be completed order to bill for the brief intervention.	The provider would need to check the MCO customer service to see if SBIRT services have been utilized.  The SBIRT documentation shall include at minimum the results of the full screen, brief intervention and any appropriate referrals.
11	What certificates will be approved for the Health Educators?	KDADS will accept the CHES and/or MCHES certificate. For more information, please refer to the following website: <a href="http://www.nchec.org/">http://www.nchec.org/</a>
12	What about Confidentiality?	Per the Legal Action Center, the key to determining whether a patient's SBIRT records are protected by 42 C.F.R. Part 2 is whether the provider conducting the SBIRT services is considered a 42 C.F.R. Part 2 program. All licensed SUD providers must abide by 42 C.F.R. Part 2.
13	Training – When will SBIRT training through WSU be available? Will other previously approved trainings be accepted and if so, how will those other trainings be tracked or recognized by the MCOs?	Wichita State University will not be hosting SBIRT Training.  <a href="http://www.TrainingTeams.org">www.TrainingTeams.org</a> will be maintaining a list of all approved SBIRT practitioners.  A list of approved trainers and/or approved

		<p>trainings is maintained on the KDADS website.</p> <p>To learn more about becoming an approved SBIRT Practitioner, please refer to the KDADS website and refer to the SBIRT Policy.</p> <p><a href="http://www.kansasbehavioralhealthservices.org/Bhs1.0/Consumer_And_Families/Programs_And_Services/Screening_Brief_Intervention_Referral_For_Treatment_SBIRT.aspx">http://www.kansasbehavioralhealthservices.org/Bhs1.0/Consumer_And_Families/Programs_And_Services/Screening_Brief_Intervention_Referral_For_Treatment_SBIRT.aspx</a></p>
14	<p>MCO contract changes – Does each center need to individually initiate contact with each MCO to add SBIRT services? When will each MCO be ready to accept billing?</p>	<p>Yes, please make contact with your MCO Representative. Any provider wanting to provide SBIRT must make initiate contact with the MCO provider representative and indicate their desire to provide SBIRT so all necessary documentation may be completed. MCO’s will be ready to accept claims as of 04/01/2014. SBIRT practitioners must be enrolled on the TrainingTeams.org website. The MCO’s will be checking this website for billing purposes.</p>
15	<p>Documentation requirements – what are the documentation requirements for the code or how will those requirements be distributed?</p>	<p>SBIRT practitioners must maintain SBIRT documentation in the client’s file. The SBIRT documentation shall include at minimum the date/time (beginning and ending), the results of the full screen, brief intervention and any appropriate referrals. The person performing the screening and/or intervention should be clearly noted.</p>