

**Medicare Reimbursement for Brief Counseling Interventions
for Adults that Screen Positive for Alcohol Misuse**

Medicare Benefit	Reimbursement for up to four, brief face-to-face behavioral counseling interventions per year for individuals, including pregnant women, who screen positive for alcohol misuse; Medicare benefit since October 14, 2011. No coinsurance and no deductible for patient. Decision Memo for Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse
Alcohol Misuse Includes “Risky/Hazardous” and “Harmful” Drinking, and is distinct from “Alcohol Dependence”	<p>Risky/Hazardous Drinking: Frequency of drinking (drinks/week or drinks/occasion) that exceeds recommended drinking limits and that increases an individual’s risk for future alcohol-related problems.</p> <p>Harmful Drinking: Drinking pattern that is currently causing harm (e.g., family, health, legal, employment) but does not meet criteria for alcohol dependence.</p> <p>Alcohol Dependence (i.e., Addiction): Defined by three or more of the following: tolerance; withdrawal; alcohol use often greater than intended; unsuccessful efforts to control alcohol use; a great deal of time spent in alcohol-related activities; important social, occupational, or recreational activities reduced or given up because of alcohol use; alcohol use continued despite knowledge of physical or psychological problem that is likely caused by alcohol use (Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV).</p>
Value to you and your patients	Brief counseling interventions and follow-up care for individuals that screen positive for alcohol misuse can reduce alcohol consumption and improve health outcomes. <ul style="list-style-type: none"> • Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse • The Alcohol Use Disorders Identification Test
Procedure Code	G0443 – Brief face-to-face behavioral counseling for Alcohol Misuse, 15 minutes ***Can bill for both G0442 (screening) and G0443 (brief intervention) on the same day, but cannot bill more than one G0443 per visit.
Eligibility	<p>Eligible Primary-Care Clinicians: General practice, family practice, internal medicine, obstetrics/gynecology, pediatric medicine, geriatric medicine, certified nurse midwife, nurse practitioner, certified clinical nurse specialist, physician assistant</p> <p>Eligible Places of Service:</p> <ul style="list-style-type: none"> • Physician’s office, outpatient hospital, independent clinic, state or local public health clinic • Decision Memo for Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse
Brief Counseling Intervention	A short motivational conversation that engages patient and supports/promotes behavior change. Effective interventions to reduce alcohol misuse include an initial counseling session of about 15 minutes, feedback, advice, and goal-setting. Most also include further assistance and follow-up treatment. Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse
Referral Options	If referring a patient for post-screening assessment or treatment, contact local outpatient substance abuse program or mental health organization. Referral assistance available at the following sites: <ul style="list-style-type: none"> • Clinicians Support Guide 2005 • A Guide to Substance Abuse Services for Primary Care Clinicians – Chapter 5

Clinician Support and Training

Successful screening and intervention involves trained practitioners and staff. Sources provide training resources on screening and brief counseling interventions, screening sheets, flow sheets, guide to implementation, and patient educational material.

- [NIAAA Clinician’s Guide Online Training](#)
- [A Guide to Substance Abuse Services for Primary Care Clinicians](#)
- [Health Team Works: Alcohol & Substance Use Guideline Materials](#)

Example of a Brief Counseling Intervention for a Positive Alcohol Misuse Screening

The Approach	Things to Consider and Inquire
Advise	<p>Advise patient of your assessment and recommendations related to the findings.</p> <ul style="list-style-type: none"> • “You are drinking more than is medically safe.” Relate to the patient’s concerns and medical findings if present. • “I recommend that you cut down (or quit) and I’m willing to help”.
Assist	<p>Is the patient ready to change drinking habits? If yes:</p> <ul style="list-style-type: none"> • Help set a goal to cut down to within maximum limits or abstain for a time. • Agree on a plan including: What specific steps the patient will take; how drinking will be tracked; how the patient will manage high-risk situations; who might be willing to help, such as a significant other or nondrinking friend. • Provide educational materials. <p>If no:</p> <ul style="list-style-type: none"> • Restate your concern about his or her health. • Encourage reflection by asking patients to weigh what they like about drinking versus their reasons for cutting down. What are the major barriers to change? • Reaffirm your willingness to help when he or she is ready.
Follow-up and Continue to Support	<p>Was the patient able to meet and sustain the drinking goal? If yes:</p> <ul style="list-style-type: none"> • Reinforce and support continued adherence to recommendations. • Negotiate drinking goals as indicated (e.g., if the medical condition changes or if an abstaining patient wishes to resume drinking). • Encourage the patient to return if unable to maintain adherence. • Rescreen at least annually. <p>If no:</p> <ul style="list-style-type: none"> • Acknowledge that change is difficult. • Support any positive change and address barriers to reaching the goal. • Renegotiate the goal and plan; consider a trial of abstinence. • Consider engaging significant others. • Reassess the diagnosis if the patient is unable to either cut down or abstain.

Adapted from The National Institute on Alcohol Abuse and Alcoholism: [A Clinician’s Guide, 2005 Edition](#)

Pocket guide summarizing entire process of screening, diagnosis, and brief interventions for alcohol misuse and for alcohol dependence: [A Pocket Guide for Alcohol Screening & Brief Intervention](#)

For more information including additional guidelines for persons 65 or older; materials for Spanish-speaking persons, and non-Medicare billing information:

- [NIAAA: A Clinician’s Guide](#)
- [SAMHSA: Pocket Guide](#)
- [SBIRT Primary Care Residency Initiative](#)