SBIRT
Referral to Treatment
Protocol Recommendation

SBIRT patients who are being referred for specialty treatment have been screened by the AUDIT and/or DAST & PHQ-9 and are found to be at High Risk and subsequently would benefit from this level of care. They have most likely received a brief intervention (BI) to help increase their commitment to being referred for specialty treatment.

Goal of a Referral Network:

- Care Coordination
- Accessible Patient Intake Appointments
- Easy to Communicate Patient Progress

Being Prepared to Make Referrals to Specialty Treatment Providers:

Before your first referral…
1. SBIRT referral partners sign a Business Associate Agreement/Qualified Service Organization Agreement (BAA/QSOA) to allow providers to communicate confidential about the patient's alcohol & drug use, provided that both agencies meet the necessary patient protection requirements.
2. Have a valid release of information (ROI) form ready
3. Know the process for immediately scheduling the patient for an intake
4. Contracted specialty providers will agree to schedule patients for an intake appointment within 24-48 business hours.

Making a Referral:

1. Patient signs ROI forms for both the referring provider and the provider being referred to
2. If patient has a primary care physician (PCP) – the SBIRT clinician obtains an ROI to notify the PCP of the screening results and the referral for treatment
3. If patient does not have a PCP, the SBIRT clinician refers the patient to the proper case manager or an insurance navigator.
4. With patient present, the SBIRT clinician schedules the intake appointment with the specialty treatment provider within 24 – 48 hours
5. If a patient has a PCP – the specialty provider will obtain an ROI to notify the PCP of the assessment results and treatment plan.
6. After the intake appointment, the specialty provider notifies by fax the assessment summary and treatment recommendations including ASAM level of care and any other recommendations affecting patient care.