

## **COMPLIANCE ALERT 11-28**

## *Medicare Covers* Screening and Interventions to Reduce Alcohol Misuse

Beginning October 14, 2011, CMS announced that Medicare "covers annual alcohol screening, and for those that screen positive, up to four, brief, face-to-face behavioral counseling interventions per year for Medicare beneficiaries, including pregnant women:

- who misuse alcohol, but whose levels or patterns of alcohol consumption do not meet criteria for alcohol dependence (defined as at least three of the following: tolerance, withdrawal symptoms, impaired control, preoccupation with acquisition and/or use, persistent desire or unsuccessful efforts to quit, sustains social, occupational, or recreational disability, use continues despite adverse consequences); and,
- who are competent and alert at the time that counseling is provided; and,
- whose counseling is furnished by qualified primary care physicians or other primary care practitioners in a primary care setting."

Four behavioral counseling interventions are covered and "must be consistent with the following guidelines:

- 1. **Assess**: Ask about/assess behavioral health risk(s) and factors affecting choice of behavior change goals/methods.
- 2. Advise: Give clear, specific, and personalized behavior change advice, including information about personal health harms and benefits.
- 3. **Agree**: Collaboratively select appropriate treatment goals and methods based on the patient's interest in and willingness to change the behavior.
- 4. **Assist**: Using behavior change techniques (self-help and/or counseling), aid the patient in achieving agreed-upon goals by acquiring the skills, confidence, and social/environmental supports for behavior change, supplemented with adjunctive medical treatments when appropriate.
- 5. **Arrange**: Schedule follow-up contacts (in person or by telephone) to provide ongoing assistance/support and to adjust the treatment plan as needed, including referral to more intensive or specialized treatment. "

In outpatient hospital settings, as in any other setting, services covered must be provided by a primary care provider.

Source: http://www.cms.gov/transmittals/downloads/R138NCD.pdf