

Progress Toward Overcoming Barriers

WIPHL SERVICE DELIVERY MODEL AND EXPERIENCE

- A. Proactive service delivery reaches all patients, including those who are not seeking services.
- B. Clinical settings can hire health educators to deliver most services.
- C. Health educators capitalize on patient's extant trust of their clinical settings and elicit trust with their own skills.
- D. Motivational interventions address patients' attitudinal barriers.
- E. Patients who do not receive services can be tracked and invited to participate at their next visit.
- F. WIPHL has elicited high positive-screen rates and patient satisfaction scores.
- G. Lack of referral resources for patients with severe problems need not hinder delivery of brief interventions with risky use and milder problems. Also, for alcohol- and opioid-dependent patients who cannot or will not obtain treatment, primary care clinicians can offer pharmacotherapy while health educators provide behavioral support.

FINANCING

- H. Medicare and 11 leading health plans in Wisconsin reimburse for SBIRT services. Medicaid will reimburse for all recipients starting in January 2010. Reimbursement will accommodate health educator compensation, systems change, and other costs.

(over)

RESEARCH AND EVIDENCE-BASED RECOMMENDATIONS

- I. Ample research demonstrates the large impact of unhealthy behaviors on health, healthcare utilization, and costs. Ample research also has shown the effectiveness of behavioral prevention services and net cost savings within 12 months.
- J. WIPHL is attaining substantial reductions in risky and problem drinking.
- K. Many authorities recommend that all patients receive SBIRT and other behavioral prevention services in healthcare settings, including the National Institutes of Health, the US Preventive Services Task Force, the National Commission on Prevention Priorities, the National Business Group on Health.

WIPHL OUTREACH EFFORTS

- L. WIPHL is conducting ample education for providers on SBIRT effectiveness, cost-effectiveness, and systems changes that allow clinical settings to delivery effective behavioral prevention services while maintaining patient flow.
- M. With help from its partners, WIPHL is conducting outreach to business leaders, other purchasers, payers, and policymakers on the impacts of excessive drinking and drug use in the private and public sectors and the effectiveness and cost-effectiveness of SBIRT.
- N. In educational sessions, the effectiveness and cost-effectiveness of SBIRT are compared to that of other options, such as health-risk appraisals (HRAs).