

**Virginia Behavioral Health Risk Screening Tool  
for Pregnant Women and Women of Child Bearing Age**  
Instructions

**Introduction**

Best practices' supports the early identification, counseling and referral to treatment of women affected by behavioral risks such as substance use, intimate partner violence, and depression. Virginia's Behavioral Health Risks Screening Tool is a standardized instrument intended to screen pregnant, postpartum and women of childbearing age for depression, substance use and /or experiences of intimate partner violence. If a woman scores positive on this tool you may wish to conduct further screening before referring her for additional services. The tool provides links to the mental health and intimate partner violence screening instruments referenced below.

Screening to detect emotional problems, alcohol, tobacco and other drug use as well as intimate partner violence should occur periodically during pregnancy as well as after delivery. The Behavioral Health Risk tool is designed to encourage discussion between a woman and her service provider regarding these risk behaviors. Initially women may be reluctant to acknowledge these behaviors, but as they develop a relationship with you, they will be more likely to do so. Because circumstances in a woman's life may also change over time, we recommend that screenings be repeated.

Two versions of the tool are available as well as a background document:

1. Patient/Client Tool (Attachment A): The woman self-administers this version. The provider (nurse or clinician) reviews it with the woman, provides a brief intervention and, if indicated, refers her for the appropriate services.
2. Provider Tool (Attachment B): The provider administers the tool, reviews it with the woman, provides a brief intervention and, if indicated, refers her for the appropriate services.
3. Background Document (Attachment C): Provides background information on the development of the tool as well as links to the additional screening instruments.

**Administration**

Ask the questions in order and allow women time to answer. Provide a "brief intervention" after you have completed administering the screening tool.

**Scoring the Tool**

**Substance Use:** If yes to Items #1, #4, #5 and/or #6, review and explore her substance use and set healthy goals with her. If you haven't already done so, be sure to obtain a

medical history of her use of alcohol, tobacco and other drugs including prescription and over the counter medications.

If yes to items # 2 and/or # 3, explore how she feels these situations may have impacted on her own substance use and emotional health. For example, parental substance use affects children and can contribute to the child's mental health and substance use problems. Knowing about her friends' patterns of use will help the two of you assess how much social support she will have to remain drug and alcohol free.

**Mental Health:** If yes to Item #7, review the woman's response and /or administer additional screening to determine if she needs further evaluation. If she is pregnant administer the *Edinburgh*; if not, administer the *PHQ 9*

**Intimate Partner Violence:** If yes to item #8, review the woman's response and administer the *Women's Experience with Battering (WEB)/ Relationship Assessment Tool* or the *Abuse Assessment Screen (AAS)* to determine if further referral is needed.

**Provide a Brief Intervention** (3 – 15 minutes)

Encourage her to continue those behaviors that support her health. Utilize motivational interviewing techniques to raise her awareness of those behaviors that place her at risk and help motivate her to change these behaviors.

**Referral to Treatment**

If you identify a problem or have concerns about a woman, discuss the need for further assessment, referral and treatment options with her. Options for referral and treatment services are based upon the resources available in the individuals' community.

**Reimbursement**

The Behavioral Risks Screening Tool is reimbursable by the Department of Medical Assistance Services (DMAS) fee-for-service programs (Medicaid, FAMIS, FAMIS Plus and FAMIS MOMS) under the female enrollee's benefit as well as the infant enrollee's benefit, depending on the billing codes.

There are two ways for providers to be reimbursed by DMAS depending on the provider qualifications.

**CPT Code 99420:**

DMAS qualified providers for reimbursement of CPT Code 99420 (administer, interpret and provider brief intervention) include Physicians, Nurse Practitioners or Physician Assistants – whether in private practices or in Health Departments, Federally Qualified Health Centers, and Rural Health Clinics. Registered Nurses or Licensed Practical Nurses may administer the tool

under the scope of their license, but an approved provider must interpret the results and provide brief intervention as needed to be reimbursed by DMAS.

Using CPT Code 99420, providers may be reimbursed for up to four screenings per year, per client, per provider - thus allowing the provider to bill DMAS for reimbursement for a screen once per trimester for a pregnant woman and once during her postpartum period.

If a child is seen in pediatric clinic, providers can screen the infant’s mother up to four times per year and bill DMAS for reimbursement under the infant’s benefit using CPT Code 99420.

CPT Codes 99408 and 99409:

DMAS qualified providers for reimbursement of the substance abuse screening codes 99408 and 99409 include: Physicians, Licensed Professional Counselors, Licensed Nurse Practitioners, Licensed Psychiatric Clinical Nurse Specialists, Licensed Clinical Psychologists, Licensed Clinical Social Workers, Licensed Marriage and Family Therapists, Licensed Substance Abuse Practitioners – whether in private practices or in Health Departments, Federally Qualified Health Centers, and Rural Health Clinics. Individuals who hold a bachelor's degree, are certified as a substance abuse counselor (CSAC) and are under the direct supervision of one of the licensed practitioners listed in this section, or individuals who hold a bachelor's degree, are a certified additions counselor (CAC) under the direct supervision of one of the licensed practitioners listed in this section may also provide these services.

Providers may be reimbursed for up to three service units, per fiscal year, per client per provider. Providers would bill code 99408 (15-30 minutes) or 99409 (more than 30 minutes).

Providers must document in the client’s chart the screening, its results, the nature of the brief intervention provided, and the clients response.

<b>CPT Code</b>	<b>Service Limits (per provider)</b>	<b>Reimbursement Rate</b>
CPT Code 99420		Rates effective 7/1/14
Over 20 years	4 per pregnancy (DMAS recommends one per trimester and one postpartum)	\$7.25
Under 21 years	Mother may be screened 4 times per year	\$7.83
<b>CPT Code 99408 (15 – 30 min.)</b>		
Over 20 years	Mother may be screened 3 times per fiscal year	\$23.93
Under 21 years	Mother may be screened 3 times per fiscal year	\$25.84
<b>CPT Code 99409 (&gt; 30 min.)</b>		
Over 20 years	Mother may be screened 3 times per fiscal year	\$46.65
Under 21 years	Mother may be screened 3 times per fiscal year	\$50.38