Release #2 contains information for SBIRT providers to be used when completing a Referral to Treatment as part of the SBIRT process. Contact Iowa Department of Public Health (IDPH) SBIRT staff with any questions.

Referral to Treatment is made when this service is recommended through use of one of the identified screening tools used in Iowa’s SBIRT project. Referral to treatment is determined by the AUDIT and/or DAST 10 scores. The referral is generally facilitated by the community health staff but may include assistance from the co-located treatment provider. With the National Guard, the referral is generally facilitated by the co-located treatment provider.

Making the Referral:
SBIRT staff conducting a Referral to Treatment can refer an eligible individual to the co-located treatment provider agency or to another agency in the community where the individual lives.

Funding for Treatment:
An SBIRT Referral to Treatment should be made to the provider that best meets the needs of the individual being referred. In the event that an individual is un-insured/under-insured, and is at or below 200% of the Federal Poverty Level guidelines, a referral should be made to an IDPH Funded substance abuse treatment provider that can offer services on a sliding-fee scale. SBIRT funding for assessment and treatment services are only to be utilized at the SBIRT funded block grant treatment provider agency which originated the referral as the designated SBIRT substance abuse block grant funded participating partner within the SBIRT grant.

For individuals receiving treatment services on a sliding-fee scale at an IDPH Funded substance abuse treatment provider, assistance in the form of funding may be available for the individual’s portion of treatment costs (Co-pays) through the Access to Recovery (ATR) project. In order to be eligible, the individual must receive treatment services at an IDPH Funded provider that is also an ATR provider of this service, and the individual must meet all eligibility requirements for admission into ATR.

Funding for co-pay services are outlined as follows:

- If the individual is assessed as appropriate for treatment services and accepts enrollment into the ATR program on the date of assessment, ATR co-pays should be used to cover the costs,
- If the individual is assessed as appropriate for treatment services and refuses enrollment into the ATR program, SBIRT funding may not be used to cover any SBIRT funded treatment services,
- If the individual is assessed as appropriate for treatment services but does not begin treatment services on the date of assessment, SBIRT funding may be used to cover assessment co-pay costs only.

For individuals at or below 200% of the Federal Poverty Level guidelines but are determined 1) not to be eligible for treatment services provided on a sliding-fee scale, or 2) not eligible for ATR, or 3) the agency cap for ATR admissions is at capacity, and/or 4) there is an application time period where the individual has applied, but awaiting admission, into ATR covered services. The co-located SBIRT treatment provider may use their SBIRT contracted funding to fund treatment services and/or the individual’s portion of treatment costs (co-pays) for the individual at the co-located SBIRT treatment provider agency. Documentation of patient inability to pay for services must be documented in client’s clinical record.

For Active Military/National Guard members at or above 201% of the Federal Poverty Level guidelines, through the ATR project up to 75% of treatment costs (based on Medicaid rates of reimbursement) can be funded at IDPH Funded Substance Abuse Treatment providers. In order to be eligible, the individual must receive treatment services at an IDPH Funded provider that is also an ATR provider of this service, and the individual must meet all eligibility requirements for admission into ATR.
SBIRT - Iowa
SBIRT Policy Manual October 2012 - Release #2: SBIRT Treatment Services

**Services Funded**
Treatment services that can be funded through SBIRT include: Assessment; Continuing Care (Level I); Extended Outpatient (Level I); Intensive Outpatient (Level II.1); Residential (Level III.3 and III.5); and Halfway House (Level III.1). Documentation of services must be maintained per licensure standards and agency policies.

**Exception to Services Funded**
SBIRT treatment fees may not be used for restitution related fees, including but not limited to, Operating While Intoxicated (OWI) classes and associated fees, batter’s education classes, etc, however; SBIRT treatment services may be used for assessment of co-pays for court ordered individuals.

**Additional Information:**
For a list of IDPH Funded Substance Abuse Treatment providers, please see IDPH Funded Treatment Service Area Map January 2013 at [http://www.idph.state.ia.us/bh/substance_abuse_resources.asp](http://www.idph.state.ia.us/bh/substance_abuse_resources.asp)