Environmental Scan | Final Report

Managing Unhealthy Alcohol Use in Primary Care

AHRQ
Agency for Healthcare
Research and Quality

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Executive Summary

Unhealthy alcohol use (UAU) is the fourth-leading cause of preventable death in the United States and is a major risk factor for many health, social, and economic burdens.[1] For several years, leading experts have recommended universal screening of adults and brief counseling for UAU in primary care settings due to the demonstrated effectiveness of these interventions.[2,3] Despite recommendations, most patients who need support for UAU are not clinically identified, and over 90 percent of adults with alcohol use disorder (AUD) do not receive treatment.[4] In 2019, the U.S. Department of Health and Human Services, through the Agency for Healthcare Research and Quality (AHRQ), launched the initiative, AHRQ's EvidenceNOW: Managing Unhealthy Alcohol Use Initiative, to address UAU. The initiative funded six sites (grantees) that supported several hundred primary care practices to increase implementation of UAU evidence-based interventions such as screening and brief intervention (SBI) and medication-assisted therapy (MAT).

The initiative also involved implementation of AHRQ's Resource Center for Managing Unhealthy Alcohol Use in Primary Care (Resource Center). A key activity of the Resource Center was to conduct and regularly update an environmental scan (e-scan) that captured promising practices, strategies, tools, and resources to identify and manage UAU in primary care settings. The e-scan served as a resource for AHRQ grantees and all other primary care stakeholders across the country. The e-scan continuously addressed two key questions:

1. What are the current issues with which primary care providers need help in implementing and sustaining screening, brief intervention, and/or referral to treatment (SBI/RT) and MAT services to address UAU?

2. What are the current SBI/RT and MAT practices, strategies, tools, and resources available to primary care settings to address UAU and issues identified in Key Question 1?

This report is a culmination of an e-scan conducted annually from August 2019 to August 2023. The first annual e-scan was developed while AHRQ grantees were planning their respective UAU service implementation efforts. As a result, it served as a starting point for addressing the key questions and captured seminal practices, strategies, tools, and resources identified by the Resource Center's Technical Expert Panel (TEP), partners, and senior advisor (see Acknowledgements section). Subsequent annual e-scans were designed to build on one another by reflecting on the current issues faced by primary care providers and identifying new practices, strategies, tools, and resources available to address these issues. For example, the second annual e-scan conducted during the COVID-19 pandemic included a targeted search on virtual delivery of SBI/RT and MAT and telehealth resources addressing the facilitators and barriers to implementing and conducting virtual healthcare services.

Methods. Methods employed to address e-scan Key Questions 1 and 2 included reviewing source documents, gathering feedback, and conducting a targeted literature review. The initial e-scan involved a review of AHRQ grantee applications to gain a grounded understanding of the expectations, terminology, and nomenclature of AHRQ's initiative for use with all future e-scans. Subsequent e-scans included gathering feedback from grantees, the TEP, partners, and senior advisor through a series of Learning Community workgroups, structured feedback forms, email, and SharePoint site discussions to

gain insights into the issues faced by primary care providers (Key Question 1). Issues identified were open-coded and then categorized using the organizational implementation framework of Meyer et al. (2012). This collective review of documents and stakeholder feedback informed a targeted review of the literature to identify relevant SBI/RT and MAT practices, strategies, tools, and resources (Key Question 2). PubMed/Medline, Google Scholar, and Google were used to identify peer-reviewed and grey literature. As much as possible, the review focused on literature published within the past 2 years; however, it also included foundational tools and resources developed within the last 10 years.

Key Findings. For Key Question 1, the identified issues were organized according to the Meyer's Organizational Capacity Framework.[5] Common issues identified throughout AHRQ's initiative related to the following constructs:

- *Workforce and Human Resources:* Several impacts on SBI/RT and MAT implementation were noted in the areas of workforce development and staffing. First, concerns about the clinical workforce's knowledge and skills for addressing UAU are common in primary care; incorporating SBI/RT into standard healthcare professional training is a key facilitator of successful implementation.[6] Second, healthcare workforce burnout is at an all-time high, resulting in staff shortages as providers and support staff leave their positions.[7] Third, practices face ongoing challenges incorporating SBI/RT and MAT amidst other competing concerns, including adapting to telehealth, caring for patients experiencing the repercussions of COVID-19 (delayed care, long-term health effects), and operating with limited staffing.[8]

- *Physical Infrastructure:* In their efforts to meet the growing demand for telehealth/telemedicine, primary care practices are tasked with identifying and adapting technology to fit their unique needs.

- *Interorganizational Capabilities:* Concerns about access to primary care and lack of clinical providers, especially in rural regions, have been amplified in recent months as the pandemic led to many practices closing their doors due to lack of patients and revenue.[9]

- *Data and Informational Resources:* Electronic health records (EHR) functionality to support SBI/RT and MAT implementation and related quality improvement (QI) activities poses ongoing challenges in primary care. Primary care practices need EHR tools to support implementation.

- *Governance and Decision-making Structure:* Primary care practices continue to struggle with State reimbursement issues (e.g., inadequate payment/reimbursement), suggesting concerns about long-term sustainability, especially in light of the increased need for telehealth/telemedicine. Additionally, there is a need for increased knowledge about the roles and responsibilities of practice facilitators within primary care as a means of assisting QI and service implementation, including concerns about conducting practice facilitation virtually.

- *Organizational Culture:* Issues obtaining provider acceptance of and active participation in the integration of SBI/RT into organizational workflow (i.e., buy-in) were identified. Competing priorities around healthcare delivery—especially during a pandemic—continued to serve as challenges in implementing SBI/RT and/or MAT. Stigma surrounding UAU poses unique challenges for practices to implement SBI/RT and MAT. Specifically, MAT continues to be underused in practices, as providers express limited knowledge about and a reluctance to use medications for treatment of UAU.

For Key Question 2, Appendix III (Compendium of Resources and Tools for Managing Unhealthy Alcohol Use) captures over 590 practices, strategies, tools, and resources available to address UAU and issues identified by grantees in Key Question 1. These are organized by seven main topic areas:

1. SBI/RT

2. MAT

3. Primary Care and Behavioral Health Services Integration

4. Quality Improvement and Implementation Science

5. Electronic Health Record (EHR) Systems and Related Integration

6. UAU General Resources

7. Telehealth Resources

Also, definitions of key terms and acronyms referenced in this summary report are captured in Appendix I (Agency for Healthcare Research and Quality Key Terms and Definitions) and Appendix IV (Acronyms List).

Discussion. This e-scan identified: 1) a wide range of issues faced by primary care providers in their efforts to implement and sustain SBI/RT and MAT services to address UAU, and 2) a vast array of practices, strategies, tools, and resources available to address these issues. Some of the most salient issues identified by grantees over the course of the AHRQ initiative included: 1) EHR functionality, 2) primary care and behavioral health integration, 3) implementation of telehealth/telemedicine, and 4) virtual practice facilitation to support training, implementation, and quality improvement. This e-scan represents the largest, most comprehensive, known publicly available collection of over 590 UAU related practices, strategies, tools, and resources to support SBI/RT and MAT implementation, residing in the AHRQ's Academy for Integrating Behavioral Health & Primary Care (The Academy).

Introduction

Unhealthy alcohol use (UAU) affects almost a third of adults. It is the fourth-leading cause of preventable death in the United States and is a major risk factor for many health, social, and economic burdens.[10] In 1990, the National Academy of Medicine (at the time named Institute of Medicine) highlighted the need for broadening alcohol treatment and discouraged a sole focus on alcoholism, given the range of excessive alcohol use that can negatively affect overall health.[11] Further, since 2004—and as recently as 2019—the U.S. Preventive Services Task Force (USPSTF) recommended universal screening of adults and brief counseling for UAU in primary care settings because of the demonstrated effectiveness of these interventions.[12,13] Despite expert recommendations, most patients who need support for UAU are not clinically identified, and over 90 percent of adults with alcohol use disorder (AUD) do not receive treatment.[14] Definitions of key terms and acronyms referenced in this summary are captured in Appendix I (Agency for Healthcare Research and Quality Key Terms and Definitions) and Appendix IV (Acronyms List).

> **UAU** refers to the full spectrum of unhealthy drinking, including risky or hazardous drinking, harmful drinking, alcohol abuse, alcohol dependence, alcoholism, alcohol addiction, and alcohol use disorder (AUD). These varied terms have been and continue to be used to describe points along the spectrum of drinking behaviors. For simplicity and clarity, the term UAU encompasses the entire spectrum.
>
> – *Agency for Healthcare Research and Quality*

In 2019, the U.S. Department of Health and Human Services, through the Agency for Healthcare Research and Quality (AHRQ), launched the initiative referred to as the EvidenceNOW: Managing Unhealthy Alcohol Use (AHRQ initiative), which funded six sites:

- Colorado: University of Colorado School of Medicine
- Michigan and Washington: Altarum and Kaiser Permanente Washington Health Research Institute
- Illinois and Wisconsin: Northwestern University
- North Carolina: University of North Carolina
- Oregon: Oregon Health & Science University
- Virginia: Virginia Commonwealth University

Funded sites (grantees) collectively supported several hundred primary care practices over a three-year period to increase implementation of evidence-based interventions, including screening for UAU, brief interventions for patients who drink too much, and medication-assisted therapy (MAT) to treat AUD. Participating practices may have also implemented referral to treatment to make sure patients whose needs could not be met within the primary care setting were met through another community-based provider. The AHRQ initiative included a national evaluation and the Resource Center for Managing Unhealthy Alcohol Use in Primary Care (Resource Center).

AHRQ's Resource Center for Managing Unhealthy Alcohol Use

The Resource Center was established to support grantees in working together to address their needs and ultimately improve screening, brief intervention, and/or referral to treatment (SBI/RT) and MAT in primary care. Two main entities composed the Resource Center: 1) Learning Community, and 2) Environmental Scan. The Learning Community fostered collaboration through workgroup discussions, convened and elicited input from a technical expert panel (TEP), and collected and addressed issues from grantees. The environmental scan (e-scan) captured current promising practices, strategies, tools, and resources to identify and manage UAU in primary care settings. The e-scan was intended to serve as a resource for both AHRQ grantees and the broader primary care community.

Results from each e-scan were maintained over the course of the AHRQ initiative on AHRQ's Academy for Integrating Behavioral Health and Primary Care (The Academy) web portal. The Academy is a national resource and coordination center for stakeholders working on behavioral health and primary care services and systems integration. The Academy resources were annually updated and shared with the public, including the UAU grantee community.

The e-scan addressed key questions listed in Exhibit 1 and was updated on an ongoing basis as new issues and/or resources were identified. The e-scan reflected AHRQ grantee efforts and feedback regarding their respective implementation support needs, targeted reviews of the literature, and input from a cadre of subject matter experts (SMEs) involved in this initiative. SMEs included members of the Resource Center's TEP; partners (American Academy of Addiction Psychiatry and National Council for Mental Wellbeing); and the senior advisor, Dr. Paul Seale (see the Acknowledgments section). SMEs worked in a range of content areas (e.g., behavioral health, substance use disorder, primary care services and systems, and implementation science) relevant to both the AHRQ initiative and the broader primary care community.

Environmental Scan Updates. This e-scan report is the culmination of annual e-scan updates completed for the AHRQ initiative. The first e-scan was developed while AHRQ grantees were planning their respective UAU service implementation efforts; as a result, it served as a starting point for addressing the key questions. The

Exhibit 1. Environmental Scan Key Questions
1. What are the current issues with which primary care providers need help implementing and sustaining SBI/RT and MAT services to address UAU?
2. What are the current SBI/RT and MAT practices, strategies, tools, and resources available to primary care settings to address UAU and the issues identified in Key Question 1?

Resource Center's TEP, partners, and senior advisor determined it would be essential also to capture seminal practices, strategies, tools, and resources relevant to e-scan key questions to support primary care providers (including grantees) to implement and sustain SBI/RT and MAT services. These are all captured in Appendix III (Compendium of Resources and Tools for Managing Unhealthy Alcohol Use). Annual e-scan updates were designed to build on one another by reflecting on the current issues faced by primary care providers and identifying the additional practices, strategies, tools, and resources available to address these issues.

Methods

To address e-scan Key Questions 1 and 2, three data collection activities were employed: 1) reviewing source documents, 2) gathering feedback, and 3) conducting a targeted literature review.

Source Document Review. To develop a grounded understanding of AHRQ's grantees, the initial e-scan involved a review of AHRQ source documents, specifically: 1) the AHRQ initiative's request for applications (RFA),[i] and 2) all six corresponding AHRQ initiative grantee applications. Review of these documents helped to identify:

- *Key terms and operational definitions*. Relevant key terms, definitions, and acronyms are provided in [Appendix I](#) (Agency for Healthcare Research and Quality Key Terms and Definitions) and [IV](#) (Acronyms List).
- *Implementation issues that grantees anticipate experiencing,* to address Key Question 1. Grantees discussed a variety of items in their applications, including potential challenges and barriers associated with executing a selected implementation strategy. This information was used to identify issues that grantees expect to face when implementing and sustaining SBI/RT and MAT.
- *Strategies, practices, tools, and resources* that grantees expect to use to support implementation of their respective interventions, to address e-scan Key Question 2.

Feedback from Grantees, TEP, Partners, and Senior Advisor. In addition to document review, feedback for addressing e-scan Key Questions 1 and 2 was gathered from grantees, the TEP, partners, and senior advisor through a series of Learning Community workgroups, structured feedback forms, email, and SharePoint site discussions.

- *Learning Community workgroups* were designed to facilitate communication and collaboration across project groups (i.e., AHRQ, grantees, TEP, partners, and senior advisor). Discussion topics were informed by grantee feedback, requests via email, AHRQ, and input from the TEP and partners, including the topic and agenda of each meeting, resources shared, and meeting notes produced (Key Question 1).
- *Structured feedback forms* were used to encourage grantees, the TEP, partners, and senior advisor to send further feedback. The TEP, partners, and senior advisor were asked to consult individually on e-scan key questions and/or recommend seminal practices, strategies, tools, and resources supporting SBI/RT and MAT implementation in primary care settings via this structured electronic feedback form.
- A general *Resource Center email address* was created to allow for written feedback. In addition, grantees, the TEP, partners, and senior advisor were encouraged to use this email to share questions, information, and resources.

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[i] Agency for Healthcare Research and Quality, 2018. RFA-HS-18-002. https://grants.nih.gov/grants/guide/rfa-files/rfa-hs-18-002.html.

- Similarly, *SharePoint site discussion boards* were created for each Learning Community workgroup to raise issues, ask questions, and share resources.

Targeted Review of Peer-reviewed and Grey Literature. A targeted literature review was conducted to identify SBI/RT and MAT practices, strategies, tools, and resources available to primary care settings to address UAU and the issues raised by primary care providers. For the initial e-scan, the Resource Center drew from the comprehensive search terms list to develop a tailored literature review search strategy. The search strategy's key words were stratified into two categories: relevant clinical service delivery topics (e.g., SBI/RT, MAT, UAU) and non-clinical topics (e.g., policy, EHRs). Subsequent e-scans built on this strategy. Key words were modified based on newly identified issues experienced by primary care providers (see Appendix II, Target Literature Review Search Strategy). Resource Center staff searched PubMed/Medline, Google Scholar, and Google to identify relevant peer-reviewed and grey literature. The Resource Center also mined NORC's Screening, Brief Intervention, and Referral to Treatment (SBIRT) library to identify relevant resources and literature.

Inclusion and Exclusion Criteria. The literature review for the e-scan was limited as much as possible to English-language articles, materials, and resources published in the past two years. Additionally, the literature review focused on the primary care setting and adult populations. The first e-scan also captured seminal SBI/RT and MAT practices, strategies, tools, and resources developed in the past 10 years recommended by the TEP, partners, and senior advisor. Similarly, the look-back period for subsequent e-scans was expanded for newly identified issues to allow for the inclusion of seminal resources. Furthermore, new resources on working with special populations, such as adolescents, older adults, and pregnant women, were included if they provided novel information for implementing SBI/RT and MAT in relevant settings.

Analysis. An Excel spreadsheet was developed to list, abstract, and analyze key information about each practice, strategy, tool, resource, and issue area identified to address e-scan Key Questions.

Analysis for Key Question 1 involved open-coding identified issues and categorizing them by Meyer's Organizational Capacity Framework[15] constructs, shown in Exhibit 2. This framework expands on previously well-established conceptual models for public health services and systems research by emphasizing organizational capacity. The particular set of constructs identified within this framework provided a comprehensive and systematic way to organize grantee feedback over time. Annual e-scan updates used the same categories to understand any changes associated with different periods of implementation (e.g., preparation, start-up, implementation).

For Key Question 2, practices, strategies, tools, and resources identified were reviewed and open-coded to inform development of a taxonomy to organize them into a compendium (see Appendix III). Review of the AHRQ initiative's RFA also influenced the taxonomy. This taxonomy was used with subsequent e-scans and edited to include new topics or subtopics as needed (e.g., inclusion of Telehealth General Resources).

Exhibit 2. Meyer's Organizational Capacity Framework Constructs and Examples[16]	
Construct Category	**Examples**
Fiscal and economic resources	Budget, diversity of revenue or funding sources, in-kind assets, program costs/per capita
Workforce and human resources	Number of full-time employees, staff knowledge/skills and expertise, staffing configuration/availability/deployment, staff retention
Physical infrastructure	Operating space, transportation, medical equipment, telecommunications equipment, tools, and software
Interorganizational capabilities	Density and strength of provider organization relationships, number of network partners, breadth/diversity of partners, collaboration
Data and informational resources	Electronic health records (EHRs) and health information exchange platforms, information technology (IT) support, data and information sources, internet access, data collection tools
System boundaries and size (externally controlled, static)	Community characteristics, population, demographics
Governance and decision-making structure	Decision-making structure, governance structure, legal authorities, policies, procedures, guidelines
Organizational culture	Fit (goals, norms, needs), leadership, strategy/strategic plan

Key Findings

E-scan key findings are organized according to the two key questions outlined in Exhibit 1.

KEY QUESTION 1	**What are the current issues with which primary care providers need help implementing and sustaining SBI/RT and MAT services to address UAU?**

The healthcare delivery system has experienced seismic shifts over the last few years (e.g., increased need for telehealth/telemedicine, Affordable Care Act, parity laws). These shifts have prompted efforts to test new payment models and approaches to care and have impacted primary care in particular,[17] including behavioral health and substance use disorder services. Key Question 1 provides an opportunity for a more current understanding of implementation issues, given changes in the healthcare landscape. Issues were categorized according to Meyer's Organizational Capacity Framework. Exhibit 3 lists relevant constructs and examples of identified issues. The remaining parts of this section summarize the issues, organize them according to relevant Meyer et al. construct categories, and highlight related compendium resources.

Exhibit 3. Current Issues Associated with Implementation of Selected SBI/RT and MAT Strategies	
Construct Category	*Grantee Examples*
Workforce and human resources	Provider knowledge/skills related to SBI and MAT, provider knowledge of current telehealth/telemedicine approaches to the delivery of care; staffing approaches, provider training and self-efficacy
Physical infrastructure	Identification of the right equipment and technology platforms to conduct telehealth/telemedicine with patients
Interorganizational capabilities	Limited access to rural specialty providers for referrals
Data and informational resources	Limited EHR system functionality to facilitate quality improvement (QI) and service implementation
Governance and decision-making structure	Inadequate reimbursement for telehealth/telemedicine and SBI/RT services, increased complexity associated with referral to services, confusion/concern around documentation requirements, practice facilitator roles and responsibilities, virtual practice facilitation
Organizational culture	Provider acceptance and implementation of SBI/RT services to address UAU in primary care

Workforce and Human Resources

In March 2020, the COVID-19 pandemic led the United States to take significant preventive measures to reduce disease transmission, including closing schools, workplaces, fitness facilities, and places of worship, as well as restricting travel. The implications of the pandemic impacted health, wellness, and UAU. In fact, research studies find that financial and mental health stressors related to the pandemic were associated with increased alcohol consumption among adults.[18,19,20] Research continues to be conducted to determine how UAU and the need for effective interventions may be changing.

This is particularly pertinent with regard to changes in healthcare. Increased stress on the healthcare system during the pandemic has been well documented in mainstream news and media channels, and some literature has started demonstrating the potential for long-term implications for primary care.[21,22,23] Early in the pandemic, in-person visits significantly decreased, while the need for telehealth visits increased.[24,25] Data suggest that, while patients are slowly returning to in-person visits, telehealth visits remain well above pre-pandemic levels. This shift in the landscape of primary care poses new challenges for many providers as they learn how to integrate telehealth into their existing workflows.[26,27]

Therefore, issues related to the construct of workforce knowledge and human resources have quickly emerged as a key concern. Of particular concern is provider self-efficacy in delivering SBI/RT and MAT services in light of this changing landscape of primary care (e.g., knowledge of telehealth/telemedicine approaches to care, knowledge of treatment options available, knowledge of and application of screening tools, staffing approaches, staffing turnover). Additionally, the pandemic has had adverse

mental health impacts on providers, such as burnout, and led to providers leaving their professions. As a result, many primary care practices are facing staff shortages.[28]

The compendium includes a host of resources on clinical practice guidelines, workforce development content (including practice guides), and web-based trainings to strengthen workforce capacity on SBI/RT and MAT service delivery (see Appendix III). Newly identified resources focus on virtual delivery of SBI/RT and MAT. Additionally, several general telehealth resources were identified that focus on facilitators and barriers to implementing and conducting virtual healthcare services.

The uptake for UAU screening among healthcare providers has far exceeded that of brief intervention, referral, and treatment resulting in missed opportunities in the delivery of routine healthcare to close the UAU treatment gap.[29] This is in part due to concerns over time, knowledge, resources, and the "added value" (e.g., clinical benefit, business case) needed to conduct SBI/RT and MAT.[30] Therefore, additional training is likely needed among the primary care workforce highlighting the value of SBI/RT and MAT and providing real-world examples and exercises, as well as support needed to adapt workflows and protocols to address the issue of constraints on time. The Healthcare Professional's Core Resource on Alcohol (HPCR) released by NIAAA provides information on the tools and techniques that providers need to address UAU, including the steps of SBI/RT, why they are important, and how providers can support patients in treatment and recovery. The guide, Alcohol Screening and Brief Intervention Inhibit Risky Alcohol Use, was developed by the American Association of Medical Assistants. It encourages medical assistants to take an active role and serve as champions for SBI for alcohol use in primary care settings, which can increase productivity, reduce provider burden, and results in cost savings within the practice. Additionally, Kognito, a provider of practice-based digital learning experiences, recently released a new simulation training course, SBI with Adults, that prepares healthcare providers to screen patients for substance use and perform brief interventions using motivational interviewing techniques.

Physical Infrastructure

In their efforts to meet the growing demand for telehealth/telemedicine, primary care practices are tasked with identifying and adapting technology to fit their unique needs. Technologies include videoconferencing, the Internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications. Telehealth applications include:

- *Live (synchronous) videoconferencing:* A two-way audiovisual link between a patient and a care provider.
- *Store-and-forward (asynchronous) videoconferencing:* Transmission of a recorded health history to a health practitioner, usually a specialist.
- *Remote patient monitoring (RPM):* The use of connected electronic tools to record personal health and medical data in one location for review by a provider in another location, usually at a different time.
- *Mobile health (mHealth):* Healthcare and public health information provided through mobile devices; the information may include general educational information, targeted texts, and notifications about disease outbreaks.

Resources are included in the Telehealth Resources section of the compendium to assist primary care practices and mental health providers in the identification, adaptation, and implementation of technology and telehealth applications both for general practice as well as for addressing UAU and treating substance use disorders (SUDs).

Interorganizational Capabilities

The availability and access of specialty providers, specifically in rural areas, continues to be a concern (e.g., long wait times for patients to access a provider, health professional shortage areas) related to the construct of "interorganizational capabilities." Through implementation of the AHRQ initiative, it is anticipated that grantees will collaborate and coordinate strategies to address these issues. However, it is also recognized that these issues can be extremely challenging for grantees and the broader primary care community alike. Additionally, these concerns have grown during the COVID-19 pandemic as many practices have had to close their doors or lost revenue as patients postponed wellness visits and preventive care and practices. It is estimated that 16,000 practices closed during the pandemic, and 22 percent of those were primary care.[31] Therefore, the compendium includes an array of resources on primary care and behavioral health services integration. Resources to support rural practice implementation of UAU services are also included (see Unhealthy Alcohol Use General Resources and the Rural Prevention and Treatment of Substance Use Disorder Toolkit).

Data and Informational Resources

The construct "data and informational resources" refers to the limited EHR functionality to support SBI/RT and MAT implementation and related QI activities, which continues to be a challenge for primary care providers. Therefore, new tools are included to support current SBI/RT and MAT implementation using existing EHRs.

EHR modifications are possible among well-known commercial EHR vendors. However, given the various systems used by provider organizations (e.g., Epic, GE Centricity, eMDs, eClinicalWorks, MDLAND), relevant and useful resources are often informed by State (e.g., Oregon, Kansas, Indiana, New Hampshire) and community (e.g., Burlington, Vermont; New York City; Mat-Su Borough, Alaska; Chapel Hill, North Carolina) implementation of SBI/RT. Two studies in 2019 and 2017 noted use of Epic's EHR system to support UAU service implementation; however, these studies did not focus on the EHR tools themselves:

- In a 2019 study supported by AHRQ,[32] an evidence-based approach to screening and counseling for UAU using Epic's EHR system was implemented. This informed the design of a "dissemination package with actionable steps" for primary care clinics and systems to enhance service implementation. The Alcohol Use Disorders Identification Test (AUDIT) screening tool was incorporated. The dissemination package was evaluated, and results suggested its positive utility for other clinics and systems interested in integrating UAU services.
- Another study funded by the Vermont Health Improvement Program focused on design, implementation, and evaluation of clinical decision support (CDS) tools using Epic's EHR system to address depression, alcohol use, and prescription misuse.[33] Results from that study highlighted that CDS tools allowed primary care providers to focus more on patient treatment

plans and promoted use of other clinical staff (e.g., nurse staff) to support related processes of care. The tools were positively received by patients, physicians, and other clinic staff.

A targeted search of specific EHR vendor websites (i.e., Epic, NextGen, eClinicalWorks, GE Centricity, MDLAND) was completed to identify specific tools/products, although it did not yield relevant information. Following this search, the Resource Center emailed several EHR vendors to confirm that no relevant SBI/RT or MAT tools or products were available. Email correspondence yielded one response from an Epic representative who mentioned the Manage Patients with Risky Alcohol Use workflow.[ii,34] This workflow is available to existing Epic outpatient software users but is not advertised on Epic's website. Existing users need to contact Epic directly to access the workflow. Designed in 2018, the workflow uses the AUDIT-C and assesses other risk factors (e.g., social determinants of health). Epic users can customize this workflow, if needed.[iii]

A targeted review of grey literature did yield a varied but limited number of resources on how to modify and optimize EHR systems to support implementation of SBI/RT and MAT services. Several UAU grantees have recognized this gap in resources and are sharing their findings from AHRQ initiative via published articles and conference presentations. For example, one grantee published a journal article titled The Need for Electronic Health Records to Support Delivery of Behavioral Health Preventive Services. This article highlights needed changes in EHR systems to improve screening and counseling for UAU as well as meet the National Academies' digital health recommendation for information technology that best serves patients and care teams. All relevant EHR materials identified for this e-scan can be found in the [Electronic Health Record Systems and Related Integration](#) section of the compendium.

Governance and Decision-making Structure

Other issues consistently identified by grantees, the TEP, partners, and senior advisor were relevant to the construct "governance and decision-making structure," specifically:

- ***State Reimbursement/Payment Policies.*** State reimbursement issues (e.g., inadequate payment/reimbursement) continued to make implementation and sustainability of SBI/RT and MAT services challenging, especially in light of the increased need for telehealth/telemedicine. The COVID-19 pandemic also presented significant opportunities for expansion of telehealth services with a renewed focus on State-by-State reimbursement and payment policies. Additionally, concerns around the risks associated with documenting screening results and brief intervention were identified, specifically the impact on patient's employment and insurance coverage.

- ***Practice Facilitator Roles and Responsibilities.*** As a means of facilitating QI and service implementation, the roles and responsibilities of practice facilitators within the broader primary care community were explored. Also, in light of the changing primary care landscape due to the COVID-19 pandemic, practice facilitators raised concerns about conducting practice facilitation virtually.

[ii] Implementation costs may vary by Epic customers, depending on their use of certain Epic services.
[iii] Epic users may modify the workflow and the content as needed at no cost. This assumes the Epic user does not need any new development of the workflow, which would incur a cost for the Epic user.

State-level Reimbursement Policies. A targeted review of the literature was completed to identify State reimbursement policies or related policy guidance supporting implementation of SBI/RT and MAT services. This review uncovered wide variation in UAU State fiscal policies. It also appeared that States were in the early phases of developing advanced payment arrangements and related methodologies for UAU treatment in primary care settings. Key findings from the literature review included:

- A report funded by the Centers for Disease Control and Prevention (CDC) reviewed and examined the existing State Medicaid policies for alcohol SBI reimbursement, including the District of Columbia.[35] State-by-State comparisons highlight similarities and differences in reimbursement, approved providers, approved service location types, approved billing codes, approved billing units, approved screening tools, and other reimbursement details. The report discusses the importance of broad stakeholder collaboration and input when developing reimbursement policies to address implementation issues and ensure maximum use of services. "Lenient" State reimbursement policies from Kansas, Washington, and New York are also highlighted as ideal models to consider increasing service use and reach.[36] Other literature highlighted the importance of "champions" in policy development to advocate for activation of certain reimbursement codes.[37,38]

- A brief developed by the Melville Charitable Trust, the Technical Assistance Collaborative, and the Center for Health Care Strategies contains a summary of State and health plan efforts to explore value-based payment to promote SUD treatment in primary care. Guiding principles in reimbursement policy development are discussed: consideration of how physical health and behavioral health services are financed and managed; exploration of whether licensing or other regulatory requirements inhibit providers from pursuing services integration; and identifying and addressing billing reimbursement policies that impede physical and behavioral health integration efforts.[39] Several State efforts are referenced (e.g., Pennsylvania, Northern California, Maryland, Oregon, and New York).

- The Centers for Medicare & Medicaid Services (CMS) published SBI/RT guidance on various topics (e.g., eligible providers, covered services [including information on telemedicine-related services], documentation, and billing) for Medicare fee-for-service providers and Medicaid programs. The guidance includes the most commonly used reimbursement codes and other resources.[40]

- In consultation with Medicaid and the CHIP Payment and Access Commission (MACPAC), Mathematica developed an Excel-based catalog to systematically record several aspects of Medicaid telehealth policies and changes in policies due to COVID-19.[41] The catalog does the following: 1) provides information on policies related to COVID-19; 2) details services and specialty care eligible to be delivered through telehealth; 3) lists providers allowed to deliver telehealth services before and in response to COVID-19; 4) outlines the modalities covered; 5) summarizes delivery requirements by State, including information on originating sites and allowed out-of-State providers; and 6) inventories payment policies and changes in response to COVID-19.

SBI/RT resources summarized in this section and additional content covering other State policy topics (e.g., Federal confidentiality laws, SBI/RT policy development, practices to improve payment for

outpatient services) are also captured in the SBI/RT Billing and Reimbursement section of the compendium.

Targeted literature reviews yielded limited information on specific MAT State reimbursement policies or related guidance. However, a webinar series developed by a Resource Center partner, the National Council for Mental Wellbeing, highlights case examples (e.g., from Massachusetts) of common models used to finance MAT in various practice settings, including primary care (e.g., community health centers).[42] In addition, the compendium includes a resource developed by the National Association of Community Health Centers and Providers Clinical Support System (PCSS) that focuses on recommended intake, billing, and coding procedures to support community health centers' delivery of MAT for SUDs. Relevant MAT policy content is located in the MAT Billing and Reimbursement section of the compendium.

The resources that include information about reimbursement for telehealth/telemedicine are often not SBI/RT- or MAT-specific and are included as a subsection of a larger report addressing facilitators/barriers to telehealth implementation. Therefore, these resources are in the Telehealth Resources section of the compendium. As the Resource Center updated the e-scan, it proactively identified any new literature that presented promising SBI/RT and MAT fiscal State policy developments for use both with and without telehealth/telemedicine.

Practice Facilitator Roles and Responsibilities in Primary Care. Several resources were identified to address the roles and responsibilities of practice facilitators within primary care. Two key resources are AHRQ's Practice Facilitation Training Modules and the Veterans Health Administration (VHA) Implementation Facilitation Training Manual. These resources assist with training new practice facilitators and offer guidance for those in the practice facilitator role, covering core competencies necessary to successfully implement practice facilitation and QI efforts in primary care practices. Practice facilitation leaders charged with promoting SBI/RT and MAT for UAU in primary care practices can use this guide in combination with the SBI/RT and MAT resources in the compendium as a starting point for tailoring their efforts. Two systematic reviews[43,44] on practice facilitation in integrated primary care also offer insight into the general roles and responsibilities of practice facilitators. Themes shared by these resources demonstrate that their roles often include relationship-building and frequent communication with practices; developing processes; providing feedback on implementation efforts and progress, including identifying strengths and challenges; and facilitating training sessions with practice staff.

Understanding the initiative and ability to guide practices through implementation is integral to successful practice facilitation. Therefore, practice facilitators may need to complete training specifically on SBI/RT and MAT for UAU. A grantee of the AHRQ initiative, University of Colorado Anschutz Medical Campus, developed resources to meet this need, including six online learning modules covering screening, brief intervention, MAT, and team-based care for UAU.[45] In addition, Wisconsin Department of Health Services developed an online training that offers three modules on SBI/RT that can be used by practice facilitators and providers in any State. The training offers an exam for licensed providers in Wisconsin to become eligible for reimbursement.

Virtual practice facilitation became particularly important as facilitators continued supporting practices in implementing SBI/RT and MAT for UAU during the COVID-19 pandemic. Virtual practice

facilitation provides practice support and QI activities remotely through the use of technology. The VHA Implementation Facilitation Training Manual contains a full chapter on virtual facilitation techniques and best practices, and AHRQ's Practice Facilitation Training Modules also offers ways to engage practices remotely. Additionally, a presentation by the TMF Health Quality Institute focuses on virtual practice facilitation, describing many techniques that practice facilitators can use. Common techniques include a combination of phone, email, and virtual meetings and workshops. Due to the high reliance on technology, best practices include having technology support services available, allowing time during virtual meetings for relationship-building, and establishing frequent, regular contacts with the practice to maintain the relationship.

Organizational Culture

The construct "organizational culture" refers to obtaining provider acceptance for and active participation in the integration of SBI/RT into organizational workflow (i.e., buy-in). Several identified resources can be used when trying to elicit buy-in from primary care practices. These resources often focus on the benefits of implementing SBI/RT in primary care to improve patient health and reduce healthcare costs. For example, the USPSTF Recommendation Statement concludes that there is adequate evidence that brief behavioral counseling interventions in adults who screen positive are associated with reduced UAU. There were reductions in both the odds of exceeding recommended drinking limits and heavy use episodes at 6- to 12-month follow-up. Additionally, epidemiologic literature links reductions in alcohol use with reductions in risk of morbidity and mortality and provides indirect support that reduced alcohol consumption may help improve some health outcomes.

One particularly relevant resource is Dr. Richard Brown's SBIRT, Now More Than Ever presentation, which argues that SBI/RT is especially important due to the behavioral health issues arising during the COVID-19 pandemic, leading to cost savings and improved patient health. Another presentation, What Is SBIRT and Why Use It, presents the effectiveness of SBI/RT in addressing UAU, its connection with other health conditions, and potential cost savings. Additionally, a fact sheet developed by the North Dakota Prevention Resource and Media Center highlights the goals, health benefits, and cost-effectiveness of implementing SBI/RT in primary care. Several reports and articles also offer insight that can be useful in developing content for eliciting provider buy-in through emphasizing return on investment. Among these are The Cost Benefits of Investing Early in Substance Abuse Treatment by the Office of National Drug Control Policy, and the Urban Institute's Potential Cost Savings Associated with Providing Screening, Brief Intervention, and Referral to Treatment for Substance Use Disorder in Emergency Departments.

KEY QUESTION 2	What are the current SBI/RT and MAT practices, strategies, tools, and resources available to primary care settings to address UAU and the issues identified in key question 1?

Findings for this e-scan represent practices, strategies, tools, and resources identified during the targeted literature review, in addition to those identified by grantees and the Resource Center's TEP, partners, and senior advisor. Over 600 practices, strategies, tools, and resources have been identified through the e-scan since its inception in 2019. However, website updates and/or content changes resulted in several resources being removed from the compendium. Therefore, over 590 individual materials, including instruments, videos, journal articles, guides, informative websites, and concrete tools (e.g., pocket cards), are included in the final e-scan compendium in Appendix III, along with brief descriptions and hyperlinks or URLs for all of them. In line with the objectives of AHRQ's initiative, this section briefly summarizes the array of UAU practices, strategies, tools, and resources according to seven topic areas (listed below). The compendium (see Appendix III) follows the same organization. This section also includes hyperlinks for the reader to access relevant resources in the compendium.

I.   Screening, Brief Intervention, and Referral to Treatment

II.   Medication-Assisted Therapy

III. Primary Care and Behavioral Health Services Integration

IV.   Quality Improvement and Implementation Science

V.   Electronic Health Record Systems and Related Integration

VI.   Unhealthy Alcohol Use General Resources

VII. Telehealth Resources

I. Screening, Brief Intervention, and Referral to Treatment (SBI/RT)

One key objective of AHRQ's initiative is to improve implementation of SBI and referral to treatment in cases where patients' needs cannot be adequately addressed within the primary care setting. A total of 284 resources and relevant peer-reviewed literature were identified to support SBI/RT implementation; this section of the compendium is the most extensive and comprises the following types of SBI/RT materials and resources (see Appendix III):

- Clinical Practice Guidelines
- Screening Tools and Related Resources
- Practice Organization Implementation
- Workforce Development
- Patient Engagement and Education
- Billing and Reimbursement
- SBI/RT Websites and Literature

Clinical Practice Guidelines. This section of the compendium includes eight resources developed by clinical institutions and professional associations to help providers appropriately identify, manage, diagnose, and treat UAU. Several UAU clinical practice guidelines developed or published by authoritative sources were identified, including the USPSTF's Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions Recommendation Statement, and the American Society of Addiction Medicine's (ASAM's) Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions. In 2020, ASAM also released the second edition of the Handbook for Addiction Medicine and Clinical Practice Guideline on Alcohol Withdrawal Management. These resources offer guidelines and relevant information to help clinical providers make decisions about identifying, treating, and diagnosing UAU and AUD.

Screening Tools and Related Resources. This section of the compendium includes actual screening tools and supplemental information to help clinicians screen their patients for UAU. A total of 40 resources were identified in this section. The USPSTF recommends that primary care clinicians screen adults 18 years and older, including pregnant women, for UAU.[46] The initial e-scan identified several screening tools, a good portion of which are referenced in the USPSTF's 2018 final recommendations statement:

- AUDIT and the U.S. version (referred to as USAUDIT) for its greater specificity following an initial UAU screen
- Alcohol Use Disorders (AUD) Identification Test-Alcohol Consumption Questions (AUDIT-C)
- National Institute on Alcohol Abuse and Alcoholism (NIAAA) Recommended Single Alcohol Screening Question (SASQ)
- Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)
- Tolerance, Worried, Eye-opener, Amnesia, K/Cut down (TWEAK)
- Tolerance, Annoyed, Cut down, Eye-opener (T-ACE)

Following are brief descriptions of each:

[AUDIT, AUDIT-C, and the SASQ](). The AUDIT is a screening tool that was developed based on data from a multinational World Health Organization (WHO) study. The AUDIT was designed for healthcare practitioners working in a range of clinical settings and can also be administered by non-health professionals with appropriate guidance. The 10-item tool helps identify unhealthy, hazardous, and harmful drinking and the risk for developing alcohol dependence. The compendium ([Appendix III]()) includes clinician-administered; self-report; U.S.-adapted (e.g., USAUDIT); and original versions of the tool. It is available in approximately 40 languages.

The USPSTF states that brief screening tools (one to three items) are the most accurate in assessing UAU in adults.[47] Such instruments include the AUDIT-C and the SASQ, both of which are included in the compendium. The AUDIT-C is a three-item brief version of the AUDIT that may be used as an initial screening tool. The National Council for Mental Wellbeing's version of the AUDIT-C, called the AUDIT-C Plus 2, includes two questions on the use of other substances. The SASQ is also brief and requires less than one minute to administer.

ASSIST. The WHO developed the ASSIST to assess and manage alcohol and other substance use and related problems in general medical care settings with adults.[48] The e-scan includes the ASSIST and an adapted version called the NIDA Modified ASSIST (NM ASSIST), developed by the National Institute on Drug Abuse (NIDA).

Screening Tools for Pregnant Women and Women of Childbearing Age. At-risk alcohol use by women has wide-ranging effects on their health, including their respective reproductive function and pregnancy-related outcomes.[49] Pregnancy-related deaths in the United States have more than doubled over the past few decades.[50,51] The e-scan's compendium includes screening tools referenced in the USPSTF's 2018 recommendation statement, specifically the TWEAK and the T-ACE. In 2019, the American College of Gynecologists and Obstetricians (ACOG) reaffirmed its previous committee opinion (originally issued in 2011) on at-risk drinking and alcohol dependence. ACOG's committee references screening tools, specifically the T-ACE.[52] The compendium also includes the Behavioral Health Risks Screening Tool developed by the Institute for Health and Recovery (IHR) in partnership with AllCare Health. The Behavioral Risk Screening Tool includes questions on other SUDs, mental health, and domestic violence. Additionally, the compendium includes information to support implementation of CHOICES, an evidence-based program that works to prevent alcohol-exposed pregnancies.

Additional Screening Tools. The e-scan identified other screening tools not referenced in the USPSTF's final recommendation statement:

- Tobacco, Alcohol, Prescription medications, and other Substance (TAPS) Tool, which is a combined two-part screening and brief assessment developed for adult primary care patients
- Substance Use Brief Screen (SUBS)
- Addiction Severity Index – Baseline (ASI-B) and Addiction Severity Index – Follow-Up (ASI-F)
- 5Ps Prenatal Substance Abuse Screen for Alcohol and Drugs
- SUD Symptom checklists, which can be used to support providers making SUD diagnoses and initiating discussion of substance use

Practice Organization Implementation. Implementation of UAU services necessitates a primary care practice either to establish or strengthen existing processes that support successful integration of SBI/RT services. The compendium presents 33 guidance materials (e.g., toolkits, step-by-step guides) to support organizational planning, implementation, and continuous improvement of SBI/RT services. These include CDC's Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use: A Step-by-Step Guide for Primary Care Practices, and two publications developed by the National Council for Mental Wellbeing: Implementing Care for Alcohol & Other Drug Use in Medical Setting: An Extension of SBIRT and SBIRT 102: Operational Considerations.

Materials include process improvement strategies, guidance on how to tailor organizational implementation, and strategies to address common challenges and barriers associated with implementation. Several materials were identified to address concerns about provider buy-in. For example, the Person-Centered Version of the Alcohol and Alcohol Problems Perceptions Questionnaire (PC-AAPPQ) was recently developed to measure provider attitudes toward working with patients who

use alcohol. Others encourage more members of medical care teams to get involved and serve as champions for SBI/RT, such as the American Association of Medical Assistants' guide and the Reproductive Health National Training Center's toolkit.

Two newly published resources provide support for implementation of SBI/RT among specific populations, such as the guide developed by the National Council for Mental Wellbeing—Getting Candid: Framing the Conversation around Youth Substance Use Prevention—and one published by the Center of Excellence on LGBTQ+ Behavioral Health Equity—Practice Considerations: Use of the SBIRT Model Among Transgender & Nonbinary Populations.

Workforce Development. Continuous development of UAU knowledge and skills is critical to successful implementation and sustainability of UAU services. Ninety workforce development content and resources are organized in the compendium according to three main categories:

- *Manuals, Guides:* These materials help clinicians understand appropriate skills and tools needed to implement SBI. Several materials focus on the development of brief intervention and motivational interviewing skills. For example, several relevant Substance Abuse and Mental Health Services Administration's (SAMHSA) Treatment Improvement Protocols (TIPS) targeted at SUD counselors focus on brief intervention and cultural competence. SAMHSA also provides advisories that more deeply review skills covered in the TIPS, such as its Using Motivation Interviewing in Substance Use Disorder Treatment advisory. A newly published resource by NIAAA offers guidance to healthcare professionals to screen and intervene for alcohol use among youth ages 9–18.

- *Training Programs, Courses, Videos, and Training Registries:* These are web-based workforce training modules and videos designed for providers. For example, the Providers Clinical Support System (PCSS) offers several online modules covering the fundamentals of managing SUDs and using motivational interviewing. Also included is the University of Colorado Anschutz Medical Campus's E-Learning for their Facilitating Alcohol Screening and Treatment program. The NIAAA and ASAM provides numerous courses on what every healthcare professional needs to know about alcohol and treating patients with AUD. Some of the trainings listed can satisfy clinical continuing education requirements (e.g., Continuing Medical Education [CME] credits).

- *Tools:* These include provider tools to support delivery of SBI/RT services, such as pocket cards for quick reference. Also, useful websites (e.g., Addiction Technology Transfer Center and NIAAA) are listed to help providers locate SBI/RT trainers and treatment services for their patients.

Patient Engagement and Education. In the last few years, there has been a shift toward testing patient-centered approaches to care. This type of care complements the current emphasis on value-based healthcare. The compendium includes four materials that cover shared decision-making and actual tools to support patient engagement efforts. Additionally, 19 patient education materials (e.g., handouts, pamphlets, posters, web-based resources) are included to help increase patients' knowledge of UAU, treatment options, how to locate treatment, and guidance on how to discuss UAU with their clinical provider to help reduce stigma associated with seeking and receiving care. Both types of materials (patient engagement and education) complement and strengthen providers' implementation of brief intervention.

Billing and Reimbursement. This section of the compendium includes 24 websites, guides, and fact sheets to help practices appropriately bill for SBI/RT services and work with stakeholders to inform development of State policies that help sustain SBI/RT services. For example, the American Psychological Association (APA) recently updated their website with information clinicians can use to bill for SBI/RT, including an explanation of what SBI/RT services are and associated billing codes.

SBI/RT Websites and Literature. The compendium also includes supplemental SBI/RT website resources developed by various stakeholders (e.g., WHO, CDC, SAMHSA-HRSA Center for Integrated Health Solutions, SBIRT Colorado, SBIRT Oregon). These 66 resources are listed under the Relevant Websites SBI/RT section of the compendium because the content provided is comprehensive (e.g., relevant to both clinical workforce development and organizational-level implementation of SBI/RT). Relevant peer-reviewed literature on SBI/RT topics (e.g., brief intervention, SBIRT fidelity tools, current evidence of effectiveness) is also included. Most of the literature listed comprises reviews or systematic reviews, including the USPSTF's 2018 evidence report and systematic review, Screening and Behavioral Counseling Interventions to Reduce Unhealthy Alcohol Use in Adolescents and Adults: An Updated Systematic Review for the USPSTF, which highlights the current literature on the effectiveness and harms of UAU screening and counseling. In addition, it contains reviews pertaining to special populations, including a publication released in NIAAA's Alcohol Research: Current Reviews, which reviews screening instruments, brief interventions, and implementation of SBI/RT among girls and women.

II. Medication-Assisted Therapy (MAT)

Another key objective of AHRQ's initiative is to integrate MAT in primary care. MAT involves use of approved medications combined with a form of counseling and behavioral therapy to treat SUDs.[53] Evidence shows that MAT is an effective treatment for people with SUDs, including people with AUD. Three medications have been approved by the Food and Drug Administration (FDA) to treat AUD; they have been shown to reduce or eliminate alcohol use as well as prevent relapse:[54]

- Disulfiram
- Naltrexone
- Acamprosate

In addition, research shows promising results associated with other non-FDA-approved medications (e.g., topiramate, gabapentin) for reducing alcohol consumption and symptoms associated with alcohol withdrawal.

The e-scan identified 75 resources, tools, and literature that can be used to support a primary care practice's implementation of MAT (see Appendix III). These MAT resources are categorized into the following areas:

- Clinical practice guidelines
- Materials to support a provider organization's efforts to implement MAT practice-wide
- Materials to support clinical workforce development on MAT

- Relevant systematic reviews

Clinical Practice Guidelines. The American Psychiatric Association's (APA's) 2018 practice guideline on AUD is included in the compendium, along with one other resource from NIAAA. In addition to reviewing the available evidence on the use of AUD pharmacotherapy, the APA 2018 practice guideline offers actionable recommendations that clinicians can incorporate into clinical practice, with the goal of improving quality of care. Each recommendation is given a rating that reflects the level of confidence that potential benefits of an intervention outweigh potential harms. These guidelines provide comprehensive guidance for the pharmacological treatment of AUD, including co-occurring conditions and disorders.[55]

Practice Organization Implementation. Information in this section of the compendium includes organizational-level guidance for leadership (e.g., administrative, clinical) to support implementation and/or expansion of MAT services. Three resources developed and published by SAMHSA offer guidance for practices that are working to implement and/or expand MAT services. These resources include a MAT Implementation Checklist, which outlines key issues for leadership and other stakeholders (e.g., policymakers, State and local officials) to consider before implementation. The checklist is broken down into sections describing different factors, including the economic environment, the treatment environment, workforce issues, regulatory issues, and attitudes about MAT. The second SAMHSA resource—Expanding the Use of Medications to Treat Individuals with Substance Use Disorders in Safety-Net Settings: Creating Change on the Ground: Opportunities and Lessons Learned from the Field—draws from the experiences of safety-net providers and highlights lessons learned and opportunities to support MAT implementation. The third SAMHSA resource provides guidance on MAT for UAU, specifically benzodiazepines, during the COVID-19 pandemic. The e-scan also identified a toolkit, published by RAND Corporation on How to Integrate Pharmacotherapy for Substance Use Disorders at Your Mental Health Clinic, including a workflow map and roles and responsibilities for all team members. The final resource identified in this section is a fact sheet on the Use of Telemedicine While Providing MAT, published by the U.S. Department of Justice.

Billing and Reimbursement. A total of seven resources were identified in this section and provide billing and reimbursement policy information to support practices in implementing and sustaining MAT services. Two training webinars focus on successful implementation of MAT within an organization, including financing and reimbursement of MAT via telehealth.

Workforce Development. Similar to SBI/RT workforce development resources, all 34 MAT workforce development resources are organized in the compendium in two main categories:

- *Manuals, Guides, and Fact Sheets:* These materials guide clinicians in understanding appropriate skills and tools needed to implement MAT. Materials also cover risks associated with specific medications, how to determine which medication to prescribe, general information about UAU, and special considerations for young adults, older adults, and pregnant and postpartum women. Most of these manuals/guides are published by NIAAA, NIDA, SAMHSA, and WHO. Examples include the Medication for the Treatment of Alcohol Use Disorder: A Brief Guide; Medical Management Treatment Manual: A Clinical Guide for Researchers and Clinicians Providing Pharmacotherapy for Alcohol Dependence; Quick Guide for Physicians

Based on TIP 49: Incorporating Alcohol Pharmacotherapies into Medical Practice; and AHRQ's Overview of Medications Used in the Treatment of Alcohol Use Disorder and Frequently Asked Questions, which provides information and answers common questions primary care clinicians may have about medications prescribed for the treatment of AUD.

- *Training Programs, Courses, and Videos:* These resources are web-based trainings and videos designed for providers, including several webinars developed by PCSS, SBIRT Colorado, National Council for Mental Wellbeing, and NAADAC, the Association for Addiction Professionals. Several PCSS webinars, including a webinar titled Module 4: Pharmacotherapy for Alcohol Use Disorder, describe and compare pharmacological treatment options for individuals with AUD, including the FDA-approved medications acamprosate, disulfiram, and naltrexone, as well as two other evidence-based treatments that are not yet FDA approved (e.g., topiramate and gabapentin). This PCSS webinar is part of a larger series of trainings for healthcare professionals on SUD and co-occurring disorders, and participants can receive up to one American Medical Association (AMA) Physician's Recognition Award (PRA) Category 1 Credit™ of continuing education. Another CME course offering is Bringing Alcohol and Other Drug Research to Primary Care by Baylor College of Medicine, which trains providers on evidence-based treatments for substance use, including AUD.

Relevant Literature. The compendium includes 27 resources that explore the efficacy and safety of different medications for patients with AUD. Several systematic reviews in this section focus on the efficacy and comparative effectiveness of the three FDA-approved medications (e.g., naltrexone, disulfiram, acamprosate), as well as some studies of medications more commonly used in the treatment of psychiatric conditions. Many of these systematic reviews focus on the provision of these medications through primary care, identifying their positive impact on reducing alcohol consumption.

III. Primary Care and Behavioral Health Services Integration

AHRQ recognizes that integrating SBI and MAT in primary care settings to address AUD can have a positive impact on the treatment and management of other common conditions (e.g., liver disease, hypertension). AHRQ's initiative encouraged grantees to work with primary care practices that did not integrate behavioral health services. Thus, the compendium includes a mix of 66 guides, websites, reports, issue briefs, toolkits, and literature to support the integration of primary care SBI/RT and MAT services (e.g., SAMHSA's Guide to Substance Abuse Services for Primary Care Clinicians; AHRQ's Guidebook of Professional Practices for Behavioral Health and Primary Care Integration: Observations from Exemplary Sites; and Advancing Integration of General Health in Behavioral Health Settings: A Continuum-Based Framework). Also included are web-based resources that focus on specific service integration models, such as the Collaborative Care Model and the Primary Care Behavioral Health Model, in addition to a workforce development training that offers CME credits on behavioral health services integration.

Several resources discuss organizational-level considerations, opportunities, and barriers for implementation and sustainability of integrated primary care and behavioral health. Barriers include financing, health information technology, and workforce challenges. In 2020, the National Academies of Sciences, Engineering, and Medicine held a workshop exploring challenges and opportunities for providing integrated care for people with mental health and SUDs in primary care settings. In addition, a newly released guide from the Bipartisan Policy Center, titled Tackling America's Mental Health and Addiction Crisis Through Primary Care Integration: Task Force Recommendations, provides implementation recommendations, including payment and workforce models.

IV.   Quality Improvement (QI) and Implementation Science

AHRQ grantees were expected to increase dissemination and implementation of PCOR findings to improve identification and management of UAU among adults in primary care, and to involve QI support to accelerate implementation of SBI and MAT. Furthermore, AHRQ encouraged grantees to use practice facilitation "as a central and unifying strategy to support implementation" for this initiative.[56] Given AHRQ's expectations of its grantees, all 50 resources are organized according to three areas: 1) quality improvement, 2) practice facilitation, and 3) implementation science. Most of these resources were referenced by grantees in their respective applications:

- *Quality Improvement:* Peer-reviewed literature on improvement models and conceptual frameworks (e.g., Systems Engineering Initiative for Patient Safety model; Practical, Robust Implementation, and Sustainability Model [PRISM]; Plan-Do-Study-Act) for use in primary care. This section also includes several new resources on virtual implementation strategies, such as AcademyHealth's blog series on the challenges of remote implementation facilitation.
- *Practice Facilitation:* Peer-reviewed literature, guides, and websites to support implementation of primary care practice facilitation. Several of these resources were developed by AHRQ (e.g., AHRQ's Practice Facilitation Training Modules and Recruitment and Retention of Primary Care Practices in Quality Improvement Initiatives toolkit).
- *Implementation Science:* Mainly peer-reviewed literature and websites discussing use of various implementation frameworks, such as the Consolidated Framework for Implementation Research (CFIR); integrated-Promoting Action on Research Implementation in Health Services (i-PARIHS); PRISM; Diffusion of Innovations; and the Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM) model.

V.   Electronic Health Record (EHR) Systems and Related Integration

This section of the compendium includes 25 resources, a variety of which includes websites, guides, and peer-reviewed literature that can help primary care stakeholders modify and optimize EHR systems to support implementation of SBI/RT services. The resources offer strategies, lessons learned, and potential challenges with integrating SBI/RT and specific screening tools into EHR workflows. This includes best practices for designing EHRs with clinical decision support tools to help primary care providers identify and treat UAU. Several journal articles from the peer-reviewed literature also include

findings from pilot studies exploring implementation of screening for SUD and UAU in primary care settings using EHR systems and application with special populations, such as pregnant women.

VI.   Unhealthy Alcohol Use (UAU) General Resources

Content that is not focused exclusively on SBI/RT or MAT is listed under the Unhealthy Alcohol Use General Resources section of the compendium. These 31 materials can be used by UAU stakeholders and potential partners to deepen their understanding of UAU, its health implications, and different approaches to managing and preventing it. Materials include statistics on alcohol use from the CDC (FastStats Alcohol Use) and key stakeholder reports, such as Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health, published by the Office of the Surgeon General, and the 2018 Global Status Report on Alcohol and Health released by the WHO. This section includes one notable tool that applies broadly to substance use, the National Clinician Consultation Center's Substance Abuse Warmline, which offers teleconsultation to clinicians on their questions related to patients with substance use. Other resources cover the impact of the COVID-19 pandemic on UAU and its implications for primary care. In addition, this section includes resources that apply to special populations, such as McCrady et al.'s 2020 article[57] on best practices for targeting alcohol use disorder treatment to the unique needs of women.

VII.   Telehealth Resources

This section of the compendium includes both content that is not focused exclusively on UAU, SBI/RT, and/or MAT, as well as several newer resources that focus on telehealth interventions for UAU. For example, the American Telemedicine Association maintains a website of resources on telehealth basics, research, practice guidelines, and telehealth specifics related to delivering care during the COVID-19 pandemic. The National Consortium of Telehealth Resource Centers provides resources, webinars, technical assistance, and an interactive map for finding affiliated regional telehealth resource centers to support organizations and individuals providing healthcare at a distance. Stakeholders can use all 66 materials to develop a deeper understanding of the barriers and facilitators to implementing telehealth services into primary care for UAU.

In addition, the compendium offers updated resources from Telehealth.HHS.gov for both patients and providers, including a guide with information about SBI/RT and telehealth treatment for SUDs. There are also resources by ASAM—Supporting Access to Telehealth for Addiction Services—and some by SAMHSA and CMS, which discuss options for providing substance use services during the COVID-19 pandemic, including expanding telehealth, using mobile apps, and connecting enrollees to community resources. Several newer resources focus on reimbursement for telehealth and policy and implementation recommendations, including updates about telehealth policies and expansion in each State during the COVID-19 pandemic. The compendium also includes journal articles presenting findings from studies that used telehealth and mobile app interventions to treat AUD.

Discussion

This is the final report in a series of annual e-scan updates capturing the issues that grantees and primary care providers face as they implement SBI/RT and MAT services. Additionally, this e-scan includes a sweep of seminal UAU practices, strategies, tools, and resources recommended by AHRQ grantees, the TEP, partners, and the senior advisor, as well as relevant resources to address identified issues through a targeted literature review. Some of the most salient issues identified through the e-scan and by grantees over the course of the AHRQ initiative included: 1) EHR functionality, 2) primary care and behavioral health integration, 3) implementation of telehealth/telemedicine, and 4) virtual practice facilitation to support training, implementation, and quality improvement.

Issues specific to EHR integration and functionality (e.g., documenting service delivery, data extraction) have, for decades, been identified by primary care providers as a barrier to SBI/RT and MAT implementation and related QI activities. Relevant and useful resources have been developed over the last few years; however, given the variation in and cost to adapt EHR systems, State requirements, and organizational needs, more resources are needed for primary care providers to overcome the existing issues faced by EHRs. For example, one much-needed resource is a publicly available detailing of the capabilities of each EHR platform, including those that have the functionality to support delivery and documentation of SBI/RT and MAT services. Efforts are underway by several AHRQ UAU grantees to disseminate information—through peer-reviewed publications and presentations—about the capabilities of EHRs utilized by practices in the initiative. For example, one grantee team recently published an article titled The Need for Electronic Health Records to Support Delivery of Behavioral Health Prevention Services, which summarizes the limitations of the EHR systems utilized by practices and provided suggestions for needed improvements.

EHR coding and billing issues remain a challenge but also an area for opportunity and growth. For example, adapting EHR systems to the specific needs of individual primary care practices to facilitate coding, billing, and reimbursement is needed. Additionally, allowing multiple EHR platforms to interface with each other, particularly where a group of practices or health systems have multiple EHR platforms is critical to successful implementation and sustainability. These examples illustrate opportunities for collaboration among EHR vendors and other key stakeholders to streamline processes and improve data quality for the broader primary care community.

Support for the integration of behavioral health into primary care has grown in recent years due to the proven benefits for both patients and practices. However, resources providing guidance on the integration of SBI/RT and MAT into primary care are limited. Several UAU grantees worked with practices from the start of the AHRQ initiative, moving toward an integrated model of care to seamlessly integrate SBI/RT and MAT protocols into workflows. Some grantees approached their initiative by implementing the single alcohol screening question (SASQ) while others chose to implement a broader behavioral health screen that includes alcohol. In either case, challenges related to workforce development, including behavioral health workforce shortages and inadequate training and education among the primary care workforce, have consistently been identified as barriers to implementing an integrated care model. One solution for the future workforce is to require SBI/RT and MAT training in college programs, i.e., social work, nursing, medicine, psychiatry, psychology, etc. For

the existing workforce, additional professional development training opportunities and proper time off to complete these trainings are needed.

There is also still a need for a brief validated tool to simultaneously screen for UAU in conjunction with other behavioral risks (e.g., depression, other substance use). Many of the existing tools focus on the use of one substance (e.g., alcohol only), several substances (e.g., alcohol, tobacco, and marijuana), or one mental health concern (e.g., depression, anxiety, or suicide only). Although using these tools in combination is widely accepted as evidence-based, the burden on the practice staff and patients is significant. The primary and integrated care community would benefit from very brief validated tools that can be seamlessly integrated into workflows to quickly identify, intervene, and treat co-occurring behavioral health concerns.

The third most salient issue identified by grantees throughout the ARHQ initiative was the integration of telehealth/telemedicine into primary care. While this was an issue that began in response to the pandemic, it evolved over time and has become a part of routine practice and care with patients. The integration of telehealth/telemedicine into primary care required: 1) a quick learning curve among the primary care workforce; 2) an infrastructure upgrade (e.g., physical space, high-speed internet capabilities); and 3) updates to insurance coverage and billing requirements. While several resources have been developed to assist primary care practices implement telehealth/telemedicine, concerns among rural providers has increased due to limited internet capabilities. Additionally, smaller practices have concerns about implementing telehealth/telemedicine due to limited funds and resources.

Practice facilitation that could be delivered virtually also became particularly important as grantees had to quickly adapt to recruit, onboard, and engage practices in the initiative as well as to support primary care practices with training, implementation, and QI during the COVID-19 pandemic. Practice facilitators utilized a variety of technologies (e.g., video conferencing platforms with engagement tools) and techniques (e.g., holding smaller virtual meetings, virtual process mapping exercises) to build rapport and foster strong working relationships with clinic staff and to create efficiencies in delivering practice facilitation. While virtual facilitation techniques and resources existed prior to the pandemic, more information on lessons learned and resources on effective strategies and best practices to support virtual and hybrid approaches emerged.

The AHRQ initiative provided grantees a space to not only reflect on the issues faced by primary care practices when implementing SBI/RT and MAT but to also reflect more broadly on the increased need for prevention of UAU, particularly in one of the most challenging times in our more recent history (i.e., COVID-19). This four-year e-scan represents the largest, most comprehensive, known publicly available collection of UAU-related practices, strategies, tools, and resources to support SBI/RT and MAT implementation, with over 590 individuals resources residing in the [AHRQ's Academy for Integrating Behavioral Health & Primary Care (The Academy)](#). There remains, however, additional areas for growth and opportunity to address all of the challenges identified by grantees throughout the initiative.

Appendix I: Agency for Healthcare Research and Quality Key Terms and Definitions

The following are the Agency for Healthcare and Quality's (AHRQ's) definitions of key terms associated with its Screening and Management of Unhealthy Alcohol Use in Primary Care: Dissemination and Implementation of PCOR Evidence initiative:[iv]

Alcohol Use Disorder: Alcohol use disorder (AUD) is a chronic relapsing brain disease characterized by compulsive alcohol use, loss of control over alcohol intake, and a negative emotional state when not using. To be diagnosed, individuals must meet at least 2 of 11 criteria as defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM)-5. Depending on the number of criteria present, AUD is defined as mild, moderate, or severe.

Dissemination: Dissemination is the spread of findings from research to a target audience, such as patients, families, providers, healthcare teams, healthcare systems, and payers. The intent is to make stakeholders aware of the research findings.

Implementation: Implementation is the use of strategies and processes to adopt and integrate research findings and evidence-based interventions into day-to-day practice. Implementation often requires changing practice patterns. In essence, implementation is putting evidence-based interventions to use within the setting and population of interest.

Medication-Assisted Therapy: Medication-assisted therapy (MAT) is the use of FDA-approved medications in combination with counseling and behavioral therapies to provide a whole-patient approach to the treatment of AUD.

Patient-Centered Outcomes Research: Patient-Centered Outcomes Research (PCOR) is comparative clinical effectiveness research of the impact on health outcomes of two or more preventive, diagnostic, treatment, or healthcare delivery approaches. PCOR produces not only clinical findings (e.g., brief, multi-contact interventions are more effective than brief, single-contact interventions) but also evidence about the effectiveness of how healthcare is delivered (e.g., use of electronic screening and brief intervention [e-SBI] compared with face-to-face SBI). There are multiple sources of PCOR findings:

- AHRQ Effective Health Care Program (http://www.effectivehealthcare.ahrq.gov/)
- Patient-Centered Outcomes Research Institute (http://www.pcori.org/)
- U.S. Preventive Services Task Force (http://www.uspreventiveservicestaskforce.org/)
- Community Preventive Services Task Force (https://www.thecommunityguide.org/pages/task-force-findings.html)

[iv] AHRQ's Screening and Management of Unhealthy Alcohol Use in Primary Care: Dissemination and Implementation of PCOR Evidence Project. (n.d.). *Request for application.* https://grants.nih.gov/grants/guide/rfa-files/rfa-hs-18-002.html.

Practice Facilitation: Practice facilitation is a supportive service provided to a primary care practice by a trained individual or team of individuals. These individuals use a range of organizational development, project management, quality improvement (QI), and practice improvement approaches to build the internal capacity of a practice to help it engage in improvement activities over time and support it in reaching incremental and transformative goals. This support may be provided onsite, virtually (through phone conferences and webinars), or through a combination of onsite and virtual visits.

Practice Facilitator: Practice facilitators (also known as a practice coaches, QI coaches, and practice enhancement assistants) are specially trained individuals who work with primary care practices to identify needed change to improve patients' outcomes. They do this by helping primary care teams develop the skills needed to adapt clinical evidence to their specific circumstance and practice environment.

Primary Care: AHRQ defines primary care as the provision of integrated, accessible healthcare services by clinicians who are accountable for addressing a large majority of personal healthcare needs, including prevention and health promotion; developing a sustained partnership with patients; and practicing in the context of family and community.

Primary Care Practices: Primary care practices are healthcare organizations dedicated to providing primary care that use lead clinicians such as family medicine physicians, general internal medicine physicians, general practice physicians, general pediatric physicians, geriatrician physicians, nurse practitioners, and physician assistants.

Screening and Brief Intervention: Screening and brief intervention (SBI) is an evidence-based approach to reducing unhealthy alcohol use among adult primary care patients. SBI involves using an effective screening instrument to detect unhealthy alcohol use and, if needed, following up with a brief behavioral counseling intervention. *NOTE: The AHRQ initiative's scope of work focuses primarily on increasing SBI and MAT in primary care, although screening, brief intervention, and referral to treatment (SBIRT) may be incorporated into projects as part of the continuum of care for patients whose needs cannot be adequately met within a primary care setting.*

Telehealth/Telemedicine: Telehealth, also referred to as telemedicine, is the delivery of health-related services and information via telecommunications technologies in the support of patient care, administrative activities, and health education.

Unhealthy Alcohol Use: Unhealthy alcohol use (UAU) refers to the full spectrum of unhealthy drinking, including risky or hazardous drinking, harmful drinking, alcohol abuse, alcohol dependence, alcoholism, alcohol addiction, and AUD. These varied terms have been and continue to be used to describe points along the spectrum of drinking behaviors. For simplicity and clarity, UAU encompasses the entire spectrum.

Appendix II: Target Literature Review Search Strategy

Search Input
"EHR system" AND "screening, brief intervention, and referral to treatment" AND "alcohol use" AND "primary care"
"EHR system" AND "screening, brief intervention" AND "alcohol use" AND "primary care"
"EMR system" AND "medication-assisted therapy" AND "screening brief intervention and referral to treatment" AND "primary care"
"EMR system" AND "MAT" AND "SBIRT Implementation" AND "primary care"
"EHR system" AND "SBIRT implementation" AND "primary care"
"EMR system" AND "MAT implementation" AND "primary care"
"EHR system" AND "primary care" AND "screening brief intervention" AND "alcohol use"
"EHR system" AND "primary care" AND "medication-assisted therapy" AND "alcohol"
"EHR system" AND "primary care" AND "SBIRT" AND "alcohol"
"EHR system" AND "primary care" AND "MAT" AND "alcohol"
"Epic EHR system" AND "MAT" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"Epic" AND "EHR system" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"Epic" AND "EHR system" AND "MAT implementation" AND "primary care" AND "alcohol use"
"NextGen EHR system" AND "MAT" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"NextGen" AND "EHR system" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"NextGen" AND "EHR system" AND "MAT implementation" AND "primary care" AND "alcohol use"
"GE Centricity EHR system" AND "MAT" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
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"GE Centricity" AND "EHR system" AND "MAT implementation" AND "primary care" AND "alcohol use"
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"eMDs" AND "EHR system" AND "MAT implementation" AND "primary care" AND "alcohol use"
"MDLAND EHR system" AND "MAT" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"MDLAND" AND "EHR system" AND "SBIRT implementation" AND "primary care" AND "alcohol use"
"MDLAND" AND "EHR system" AND "MAT implementation" AND "primary care" AND "alcohol use"
"EHR system" AND "reviews" AND "primary care" AND "SBIRT" AND "alcohol"
"EHR system" AND "reviews" AND "primary care" AND "medication-assisted therapy" OR "MAT" AND "alcohol"
"review" AND "electronic health record" AND "primary care" AND "SBIRT"

Search Input
"review" AND "electronic health record" AND "primary care" AND "MAT"
"systematic review" AND "electronic health record" AND "primary care" AND "SBIRT"
"systematic review" AND "electronic health record" AND "primary care" AND "medication-assisted therapy" OR "MAT"
"policy" AND "reimbursement" AND "SBIRT" AND "primary care" AND "alcohol use"
"policy" AND "reimbursement" AND "MAT" AND "primary care" AND "alcohol use"
"policy" AND "reimbursement" AND "SBI" AND "primary care" AND "alcohol use"
"State policy" AND "reimbursement" AND "SBIRT" AND "alcohol use" AND "primary care"
"State policy" AND "reimbursement" AND "MAT" AND "alcohol use" AND "primary care"
"State policy" AND "reimbursement" AND "MAT" AND "alcohol use" AND "primary care"
"State policy" AND "SBIRT" AND "alcohol use" AND "primary care"
"State policy" AND "MAT" AND "alcohol use" AND "primary care"
"State policy" AND "screening, brief intervention and referral to treatment" AND "alcohol" AND "primary care"
"State policy" AND "medication-assisted therapy" AND "alcohol" AND "primary care"
"State policy" AND "reimbursement" AND "SBIRT" AND "alcohol use" AND "primary care" AND "Medicaid"
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"review" AND "State policy" AND "reimbursement" AND "MAT" AND "alcohol use" AND "primary care" AND "Medicaid"
"review" AND "State policy" AND "reimbursement" AND "unhealthy alcohol use"
"systematic review" AND "State policy" AND "reimbursement" AND "unhealthy alcohol use"
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"systematic review" AND "State policy" AND "reimbursement" AND "MAT"
"systematic review" AND "State policy" AND "Medicaid reimbursement" AND "SBIRT"
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"telehealth" AND "SBIRT"
"telehealth" AND "primary care"
"telehealth" AND "SBIRT" AND "primary care"
"telemedicine" AND "SBIRT"
"telehealth" AND "SBI"
"telehealth" AND "MAT"

Search Input
"telehealth" AND "MAT" AND "alcohol"
"telehealth" AND "SBI" AND "primary care"
"telehealth" AND "MAT" AND "primary care"
"telehealth" AND "primary care" AND ("substance use" OR "substance abuse" OR "drug use" OR "drug abuse" OR "addiction")
"telehealth" AND ("substance use" OR "substance abuse" OR "drug use" OR "drug abuse" OR "addiction")
"telehealth" AND "reimbursement" AND "SBIRT" AND "primary care"
"telehealth" AND "reimbursement" AND "MAT" AND "primary care"
"telehealth" AND "reimbursement" AND SBI", AND "primary care" AND "alcohol use"
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"telehealth" AND "reimbursement" AND "MAT" AND "primary care" AND "alcohol use'
"telehealth" AND "MAT" AND "primary care" AND "alcohol use"
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"telehealth" AND "SBIRT" AND "alcohol use" AND "primary care"
"telehealth" AND "workflow" AND "MAT" AND "alcohol use" AND "primary care"
"telehealth" AND "workflow" AND "SBI" AND "alcohol use" AND "primary care"
"practice facilitator" AND "screening, brief intervention and referral to treatment" AND "alcohol use" AND "primary care"
"practice facilitator" AND "SBIRT," AND "alcohol use" AND "primary care"
"practice facilitation" AND "screening brief intervention" AND "alcohol use" AND "primary care"
"practice facilitation" AND "screening brief intervention" AND "alcohol use" AND "primary care"
"practice facilitation to support MAT and SBIRT implementation" AND "primary care"
"practice facilitation" AND "SBIRT implementation" AND "primary care"
"screening and brief intervention" AND "primary care" AND "alcohol" and "return on investment"
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"SBIRT" AND "alcohol" AND "cost"
"Richard Brown" AND "SBIRT"
"SBIRT" AND "RTI" and "cost"
"Jeremy Bray" AND "SBIRT" and "cost savings"
"practice facilitation" AND "SBIRT implementation" AND "primary care"
"practice facilitation" AND "screening brief intervention" AND "primary care" AND "alcohol use"
"practice facilitation" AND "SBIRT" AND "MAT" AND "primary care" AND "alcohol use"
"practice facilitation" AND "medication-assisted therapy" AND "primary care" AND "alcohol use"

Search Input
"practice coaching" AND "SBIRT" AND "primary care" AND "alcohol use"
"quality improvement professionals" AND "SBIRT" AND "primary care" AND "alcohol use"
"quality improvement professionals" AND "SBIRT" AND "primary care" AND "alcohol use"
"practice facilitator" AND "responsibilities" AND "SBIRT"
"practice facilitator role" AND "SBIRT"
"practice facilitator role" AND "alcohol use"
"virtual practice facilitation"
"virtual quality improvement coaching"
"virtual practice facilitation"
"virtual practice facilitation" AND "techniques"
"virtual quality improvement coaching"
"medication assisted therapy" AND "alcohol"
"medication assisted treatment" AND "alcohol"
"pharmacotherapy" AND "alcohol"
"MAT" AND "alcohol"
"medication assisted therapy" AND "AUD"
"medication assisted treatment" AND "AUD"
"pharmacotherapy" AND "AUD"
"MAT" AND "AUD"
"medication assisted therapy" AND "alcohol" AND "primary care"
"medication assisted treatment" AND "alcohol" AND "primary care"
"pharmacotherapy" AND "alcohol" AND "primary care"
"MAT" AND "alcohol" AND "primary care"
"Disulfiram" AND "alcohol" AND "primary care"
"Naltrexone" AND "alcohol" AND "primary care"
"Acamprosate" AND "alcohol" AND "primary care"
"medication" AND "alcohol" AND "primary care" AND "guide"
"medication" AND "alcohol" AND "guide"
"medication assisted therapy" AND "alcohol" AND "primary care" AND "guide"
"medication assisted treatment" AND "alcohol" AND "primary care" AND "guide"
"pharmacotherapy" AND "alcohol" AND "primary care" AND "guide"
"MAT" AND "alcohol" AND "primary care" AND "guide"

Search Input
"Disulfiram" AND "alcohol" AND "guide"
"Naltrexone" AND "alcohol" AND "guide"
"Acamprosate" AND "alcohol" AND "guide"
"medication" AND "alcohol" AND "primary care" AND "training"
"Primary Care and Behavioral Health Services Integration" AND "SBI" AND "alcohol use"
"Integrating primary care and behavioral health services" AND "SBI" AND "alcohol use"
"Primary Care and Behavioral Health Services Integration" AND "MAT" AND "alcohol use"
"Integrating primary care and behavioral health services" AND "MAT" AND "alcohol use"
"Primary Care and Behavioral Health Services Integration" AND "workflow"
"Integrating primary care and behavioral health services" AND "workflow"

Appendix III: Compendium of Resources and Tools for Managing Unhealthy Alcohol Use

Brief Description: This compendium captures practices, strategies, tools, and resources identified for the environmental scan (e-scan), which is developed and maintained by the Agency for Healthcare Research and Quality's (AHRQ) Resource Center for Managing Unhealthy Alcohol Use in Primary Care. This compendium organizes practices, strategies, tools, and resources according to seven main topic areas briefly described below. Each tool or resource listed is hyperlinked (click on "Title") or includes a URL and includes publisher and resource type information, such as whether the resource is a clinical instrument, video, informative website, journal article, or guide. The tool or resource also includes the publisher and/or author and the publication year. In cases where there is no publication date, the resource lists the acronym of n.d. (i.e., no date). An acronym list is provided in Appendix IV for reference.

I. Screening, Brief Intervention, and Referral to Treatment

II. Medication-Assisted Therapy

III. Primary Care and Behavioral Health Services Integration

IV. Quality Improvement and Implementation Science

V. Electronic Health Record Systems and Related Integration

VI. Unhealthy Alcohol Use General Resources

VII. Telehealth Resources

I. Screening, Brief Intervention, and Referral to Treatment

The **Clinical Practice Guidelines** section includes systematically developed statements and related resources from leading authorities (e.g., professional medical associations or government task forces) to help clinical providers identify, appropriately diagnose, and treat unhealthy alcohol use (UAU).

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Clinical Practice Guidelines			
The American Society of Addiction Medicine Handbook of Addiction Medicine, Second Edition	Provides practical guidance for generalists and non-addiction specialists on caring for patients with addiction, including special populations such as adolescents, women, older adults, and LGBTQ To access, copy and paste the following URL: *https://global.oup.com/academic/product/the-american-society-of-addiction-medicine-handbook-of-addiction-medicine-9780197506172?q=addiction%20medicine%20handbook&lang=en&cc=us*	American Society of Addiction Medicine (ASAM), 2020	Other
The ASAM Clinical Practice Guideline on Alcohol Withdrawal Management	Clinical guideline, webinar series, and various other resources that provide the latest information on the identification and management of alcohol withdrawal in patients with varying degrees of syndrome severity	ASAM, 2020	Website
The ASAM Criteria: Treatment Criteria for Addictive, Substance Related, and Co-Occurring Conditions	Comprehensive set of guidelines on the placement, continued stay, and transfer/discharge of patients with addiction and co-occurring conditions	ASAM, 2013	Guide
At-Risk Drinking and Alcohol Dependence: Obstetric and Gynecologic Implications	Committee opinion and guidelines for providers about at-risk drinking and alcohol dependence in women and the potential impact on health, including reproductive and pregnancy outcomes	American College of Obstetricians and Gynecologists, 2011[58]	Journal Article
The ICD-10 Classification of Mental and Behavioural Disorders: Clinical Descriptions and Diagnostic Guidelines	Provides clinical descriptions, diagnostic guidelines, and codes for all mental and behavioral disorders commonly encountered in clinical psychiatry	World Health Organization (WHO), n.d.*	Guide; Fact Sheet/Brochure
Preventing Excessive Alcohol Consumption: Electronic Screening and Brief Interventions (e-SBI) Task Force Finding and Rationale Statement	Outlines the main finding from the Community Preventive Services Task Force Systematic Review that recommends e-SBI based on strong evidence of effectiveness in reducing self-reported excessive alcohol consumption and alcohol-related problems among intervention participants	Community Preventive Services Task Force, 2013	Report/Paper/Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Clinical Practice Guidelines			
U.S. Preventive Services Task Force Recommendation Statement	Recommendation statement for managing UAU with screening, brief intervention (SBI); includes clinical summary that helps primary care clinicians use recommendations in practice	U.S. Preventive Services Task Force, 2018	Report/Paper/Issue Brief
VA/DoD Clinical Practice Guideline for the Management of Substance Use Disorders	Provides clinical practice guidelines intended for healthcare providers in the VA and DoD about how to manage substance use disorders, including alcohol use disorder	U.S. Department of Veterans Affairs (VA); U.S. Department of Defense (DoD), 2021	Report/Paper/Issue Brief

The **Screening Tools and Related Resources** section presents information to help clinicians screen patients for UAU. Grey subheadings capture specific types of screening tools and related resources to improve clinicians' knowledge and implementation.

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Screening Tools and Related Resources			
Alcohol Use Disorders Identification Test / Alcohol Use Disorder Identification Test – Alcohol Consumption Questions			
Alcohol Use Disorders Identification Test (AUDIT)	Includes 10 items to assess alcohol consumption, drinking behaviors, and alcohol-related behaviors. Item 3 of this screening tool is intended to be adapted to align with the National Institute on Alcohol Abuse and Alcoholism (NIAAA) drinking guidelines for adults in the United States	WHO, 2001	Instrument/Protocol
Alcohol Use Disorders Identification Test, Adapted for Use in the United States: A Guide for Primary Care Practitioners	Shows healthcare providers how to use the USAUDIT (adapted from the WHO AUDIT and AUDIT-C tools) in primary care with U.S. adults	Substance Use and Mental Health Services Administration (SAMHSA), 2017	Guide
Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care, Second Edition	Describes how to use the AUDIT in primary care to identify people with hazardous and harmful patterns of alcohol consumption; includes the international version in both interview and self-report format	WHO, 2001[59]	Guide
AUDIT-C PLUS 2	A patient questionnaire to screen for alcohol and substance use	National Council for Behavioral Health, 2018	Instrument/Protocol / Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Screening Tools and Related Resources			
AUDIT	A 10-item brief alcohol screening tool developed by the WHO to identify people in the United States whose alcohol consumption has become hazardous or harmful to their health, composed of items on consumption, dependence, and problems caused by alcohol	NIAAA, n.d.	Instrument/Protocol
Comparing Alcohol Screening Measures Among HIV Infected and Uninfected Men	Compares the AUDIT-C and AUDIT in HIV infected and uninfected men, finding both tools performed similarly in both populations for identifying risky drinking, alcohol dependence, and UAU	McGinnis KA, et al., 2013[60]	Journal Article
Estimating Risk of Alcohol Dependence Using Alcohol Screening Scores	Studies the use of the AUDIT and AUDIT-C in family medicine clinics to predict alcohol dependence	Rubinsky AD, et al., 2010[61]	Journal Article
A Review of AUDIT, AUDIT-C, and USAUDIT for Screening in the United States: Past Issues and Future Directions	A review of the AUDIT, AUDIT-C, and USAUDIT screening tools	Higgins-Biddle JC, et al., 2018[62]	Journal Article
Use of AUDIT-Based Measures to Identify Unhealthy Alcohol Use and Alcohol Dependence in Primary Care: A Validation Study	Validation study that examined the AUDIT and AUDIT-C score ability to predict UAU in a primary care population	Johnson JA, et al., 2013[63]	Journal Article
Alcohol, Smoking, and Substance Involvement Screening Test			
Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)	Developed for WHO to detect and manage substance use and related problems in primary and general medical care settings; various materials, including version 3.1 of the ASSIST, available on website	WHO, 2010	Guide
NIDA-Modified ASSIST (NM ASSIST) Clinician's Screening Tool for Drug Use in General Medical Settings (electronic)	A guide for providers on screening patients for risky substance use; includes accompanying resources based on patient responses	National Institute on Drug Abuse (NIDA), n.d.	Instrument/Protocol
Tobacco, Alcohol, Prescription Medication, and Other Substance Use			
Design of the NIDA Clinical Trials Network's Validation Study of Tobacco, Alcohol, Prescription Medication, and Other Substance Use (TAPS) Tool	Describes the design of NIDA's Clinical Trials Network's validation study of the TAPS Tool	Wu LT, et al., 2016[64]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Screening Tools and Related Resources			
Electronic Self-Administered Screening for Substance Use in Adult Primary Care Patients: Feasibility and Acceptability of the Tobacco, Alcohol, Prescription Medication, and Other Substance Use (myTAPS) Screening Tool	Describes the feasibility and acceptability of myTAPS among primary care patients	Adam A, et al., 2019[65]	Journal Article
Performance of the Tobacco, Alcohol, Prescription Medication, and Other Substance Use (TAPS) Tool for Screening in Primary Care Patients	Multisite study concluding that TAPS can detect problem substance use, but that refinement is necessary before use for broad substance use disorder screening	McNeely J, et al., 2016[66]	Journal Article
The Tobacco, Alcohol, Prescription Medications, and other Substance (TAPS) Tool	Screening tool to assess adult primary care patients for tobacco, alcohol, prescription drug, and illicit substance use, available for self- and interviewer-administration	NIDA, 2017	Instrument/Protocol
TAPS Tobacco, Alcohol, Prescription Medication, and Other Substance Use Tool (electronic)	Online version of TAPS that allows users to select patient or clinician and complete the assessment online; upon completion, offers risk levels for each substance, suggested actions, and additional resources	NIDA, 2017	Instrument/Protocol
Validation of the TAPS-1: A Four-Item Screening Tool To Identify Unhealthy Substance Use in Primary Care	A validation study for TAPS-1 for identifying UAU in primary care patients	Gryczynski J, et al., 2017[67]	Journal Article
Pregnant Women and Women of Childbearing Age			
Alcohol-Screening Instruments for Pregnant Women (NIAAA Review)	NIAAA review of alcohol screening instruments for pregnant women, including Tolerance, Annoyed, Cut-down, Eye-Opener (T-ACE) and Tolerance, Worried, Eye-opener, Amnesia, Kut-Cut Down (TWEAK)	Chang G, 2001[68]	Journal Article
Behavioral Health Risks Screening Tool 5PS: For Pregnant Women	Screening tool for pregnant women for alcohol, tobacco, substance use and violence	Institute for Health and Recovery, 2007	Instrument/Protocol
Brief Screening Questionnaires To Identify Problem Drinking During Pregnancy: A Systematic Review	Systematic review of UAU screening tools for pregnant women, including T-ACE, TWEAK, CAGE, NET, and the AUDIT-C	Burns E, et al., 2010[69]	Journal Article
CHOICES: Preventing Alcohol Exposed Pregnancies	Evidence-based program that works to prevent alcohol-exposed pregnancies; website hosts training materials and resources to support implementation of CHOICES	Centers for Disease Control and Prevention (CDC), 2019	Website
T-ACE Screening Tool	Screens pregnant women for risky drinking with four questions	VA, DoD, 1988	Instrument/Protocol

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Screening Tools and Related Resources			
Tolerance, Worried, Eye-opener, Amnesia, K-Cut Down (TWEAK) Screening Test	Tool that consists of five questions to screen pregnant women for harmful drinking habits	Michigan Quality Improvement Consortium, 1993	Instrument/Protocol
Use of the TWEAK Test in Screening for Alcoholism/Heavy Drinking in Three Populations	Original validation study of the TWEAK to screen for harmful drinking	Chan AW, et al., 1993[70]	Journal Article
Additional Screening Tools			
Addiction Severity Index (ASI), Fifth Ed.; Baseline (ASI-B), Addiction Severity Index, Fifth Ed.; Follow-Up (ASI-F)	Semi-structured interview addressing seven potential problem areas in substance-abusing patients: medical status, employment and support, drug use, alcohol use, legal status, family/social status, and psychiatric status	McLellan TA, et al., 1980	Instrument/Protocol
Brief Health Screen	Patient self-report screening tool with three items that can be administered by health professionals to assess for substance use; can be followed by full screens such as the AUDIT	SBIRT Oregon, n.d.	Instrument/Protocol
A Brief Patient Self-Administered Substance Use Screening Tool for Primary Care: Two-Site Validation Study of the Substance Use Brief Screen (SUBS)	Validation article for SUBS in a diverse adult primary care population	McNeely J, et al., 2015[71]	Journal Article
Brief Screen for Substance Use	Questions to screen for substance use and guidance around positive screen criteria	SBIRT Colorado, 2017	Instrument/Protocol
DSM-5 11-Item Alcohol Symptom Checklist	Checklist used after a high AUDIT-C score to engage a patient in dialogue on alcohol and other drug-related symptoms; provides guidance on assessing the severity of an alcohol and/or other drug use disorder	American Psychiatric Association (APA), 2013	Instrument/Protocol
HSD-Approved Evidence-Based Screening Resources/Tools (SBIRT)	Includes links to 16 different screening tools for substance use with the number of questions for each and categories based on population and use	State of Oregon, 2022	Website
Practical Assessment of DSM-5 Alcohol Use Disorder Criteria in Routine Care: High Test-Retest Reliability of an Alcohol Symptom Checklist	Evaluates the test-retest reliability of a patient-report Alcohol Symptom Checklist questionnaire when it is used in routine care, including primary care and mental health specialty settings, suggesting that the Alcohol Symptom Checklist may be a valuable tool in supporting treatment and care of patients with alcohol use disorder	Hallgren KA, et al., 2022[72]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Screening Tools and Related Resources			
Practical Assessment of Alcohol Use Disorder in Routine Primary Care: Performance of an Alcohol Symptom Checklist	Examines the impact of implementation of an Alcohol Symptom Checklist in identifying primary care patients with alcohol use disorder, finding that checklists can be helpful with diagnosis and treatment	Hallgren KA, et al., 2021[73]	Journal Article
Primary Care Validation of a Single-Question Alcohol Screening Test	A validation study of the single-item screening test for UAU, recommended by NIAAA	Smith PC, et al., 2009[74]	Journal Article
Readiness Ruler	A two-question tool that helps providers assess patient readiness for behavior change using a 1-10 scale	Case Western Reserve University, 2010	Instrument/Protocol
Recommended Alcohol Questions	Recommended sets of three to six questions for assessing alcohol use	NIAAA, n.d.	Website
Routine Assessment of Symptoms of Substance Use Disorders in Primary Care: Prevalence and Severity of Reported Symptoms	Explores the use of routine screening for symptoms of substance use disorder, including alcohol use disorder, in primary care practices and found that the use of symptom checklists could help primary care providers identify and treat patients with substance use disorder To access, copy and paste the following URL: *https://link.springer.com/content/pdf/10.1007/s11606-020-05650-3.pdf*	Sayre M, et al., 2020[75]	Journal Article
SBIRT + Depression Screening App	App that can be used with a phone, tablet, or desktop computer that incorporates screening tools for substance use (AUDIT/AUDIT-C) and depression (PHQ-2/PHQ-9)	SBIRT Oregon, n.d.	Website
SBIRT Integrated Screening Tool	Integrated behavioral health screening that assesses patients for risky substance use behaviors and tracks actions related to brief intervention and referral	South Carolina Healthy Connections Medicaid, 2015	Instrument/Protocol
Screening and Assessment Tools Chart by National Institutes of Health (NIH)	Chart that lists a variety of screening tools for alcohol and other substance use; for each tool, identifies the substance type, patient age, and whether it is a self- or clinician-administered tool	NIDA, 2018	Website
Validation of Self-Administered Single-Item Screening Questions (SISQs) for Unhealthy Alcohol and Drug Use in Primary Care Patients	A validation study suggesting that self-administered SISQs, though less accurate than interviewer-administered, are easier to implement and retain fidelity	McNeely J, et al., 2015[76]	Journal Article

The **Practice Organization Implementation** section includes organization-level guidance materials (e.g., toolkits, step-by-step guides) to help practice organizations plan, implement, and continuously improve screening, brief intervention and referral to treatment (SBI/RT) services delivery.

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Practice Organization Implementation			
Addressing Alcohol Use Practice Manual: An Alcohol Screening and Brief Intervention Program	Provides a systems-change approach for implementing SBI in a primary care practice setting	American Academy of Family Physicians, n.d.	Guide
Barriers and Facilitators to Substance Use Disorder Treatment: An Overview of Systematic Reviews	Provides overview of systematic reviews on substance use disorder treatment, finding that structural factors are the most common barriers and facilitators to treatment	Farhoudian A, et al., 2022[77]	Journal Article
Getting Candid: Framing the Conversation Around Youth Substance Use Prevention	Guide and toolkit created to support and empower youth-serving providers in the wake of the COVID-19 pandemic to engage youth in substance use prevention conversations, including what not to say, and how to help young people connect with services when needed	National Council for Mental Wellbeing, 2021	Guide
How to Implement SBIRT: Processes, Tips, and Examples from the Field	Resource that covers processes/practices on identifying and addressing barriers to implementation across settings (including primary care); tailoring implementation to the appropriate workflow of a practice; staffing; and monitoring implementation and performance	Institute for Research, Education and Training in Addictions, 2016	Webinar/Video
Implementation Barriers to and Facilitators of Screening, Brief Intervention, Referral, and Treatment (SBIRT) in Federally Qualified Health Centers (FQHCs)	Reviews findings from the literature and interviews with experts on strategies for overcoming barriers to implementing SBI/RT in FQHCs and primary care settings	Office of the Assistant Secretary for Planning and Evaluation, 2015	Report/Paper/Issue Brief
Implementation of the BNI	Offers information on ways to adopt the brief negotiated interview (BNI) in a practice, trainings, considerations for adopting BNI into clinical patient visits, and an example of how BNI was implemented in the Yale SBIRT Residency Training Program	Yale University School of Medicine, n.d.	Website
Implementation Strategies to Enhance Management of Heavy Alcohol Consumption in Primary Health Care: A Meta-Analysis	Identifies implementation strategies that focus on SBI uptake and measure impact on heavy drinking and delivery of SBI in primary care	Keurhorst M, et al., 2015[78]	Journal Article
Implementing Care for Alcohol and Other Drug Use in Medical Settings: An Extension of SBIRT	Change guide for primary care providers on how to offer integrated care for patients with UAU; outlines nine changes, covering both clinical and organizational implementation	National Council for Behavioral Health, 2018	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Practice Organization Implementation			
Implementing Substance Use Screening Toolkit	Provides steps and resources such as webinars, worksheets, and workflow examples for implementing screening for substance use disorders into family planning visits	Reproductive Health National Training Center, 2020	Toolkit
An SBIRT Implementation and Process Change Manual for Practitioners	Guides practitioners and administrators in implementing and sustaining SBI/RT within a practice; includes information on process improvement strategies, planning and tailoring strategies, and worksheets to guide implementation	National Center on Addiction and Substance Abuse at Columbia University, 2012	Guide
Improving Adolescent Health: Facilitating Change for Excellence in SBIRT	Provides guidance for organizations implementing SBI/RT focused on adolescents, including how to develop and sustain a SBI/RT Data Collection System and integrate it into an organization's electronic health record	National Council for Mental Wellbeing, Conrad N. Hilton Foundation, 2021	Toolkit
Improving Screening, Treatment, and Intervention for Unhealthy Alcohol Use in Primary Care Through Clinic, Practice-Based Research Network, and Health Plan Partnerships: Protocol of the ANTECEDENT Study	Describes the protocol of the ANTECEDENT study, an implementation study designed to support primary care clinics in Oregon adopting screening, brief intervention, and referral to treatment and medication-assisted treatment for alcohol use disorder workflows to address unhealthy alcohol use	Singh AN, et al., 2022[79]	Journal Article
Integration and Sustainability of Alcohol Screening, Brief Intervention, and Pharmacotherapy in Primary Care Settings	Discusses a primary care intervention in which patients with hypertension and/or diabetes received alcohol SBI and medications for alcohol use disorders (AUDs)	Ornstein SM, et al., 2013[80]	Journal Article
Integration of Substance Use Screening, Brief Intervention, and Referral to Treatment into Pediatric Primary Care	Summarizes lessons learned over the past six years through the Conrad N. Hilton Foundation's Youth Substance Use Prevention and Early Intervention Strategic Initiative about the integration of SBI/RT in pediatric primary care	Conrad N. Hilton Foundation, 2020	Report/Paper/Issue Brief
National Quality Forum Measure #431 (NQF 2152): Preventive Care and Screening: Unhealthy Alcohol Use: Screening and Brief Intervention	Quality data measure on the number of patients screened for UAU; submitted once per performance period	American Medical Association (AMA), 2017	Report/Paper/Issue Brief
Patients Speak for SBIRT Wisconsin	Testimonial video that describes SBI/RT as a cost-saving, effective program to help people with UAU or drug use	Department of Family Medicine and Community Health, University of Wisconsin School of Medicine and Public Health, 2010	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Practice Organization Implementation			
Planning and Implementing Screening and Brief Intervention for Risky Alcohol Use: A Step-by-Step Guide for Primary Care Practices	Guides primary care practices in adapting alcohol SBI to their practice; involves steps required to plan, implement, and improve this process	CDC, 2014	Guide
Practice Considerations: Use of the SBIRT Model Among Transgender & Nonbinary Populations	Provides guidance for using the SBI/RT model to identify and treat substance use disorders with transgender and nonbinary populations and offers considerations for providers implementing this model	Dentato MP, et al., Center of Excellence LGBTQ+ Behavioral Health Equity	Report/Paper/Issue Brief
Promote Practice Change: Take Manageable Steps Toward Better Care	Outlines how practices can improve care for patients with unhealthy alcohol use, including four basic steps to build a system of care, and includes a chart demonstrating alcohol screening, brief intervention, and referral to treatment as a top evidence-based clinical preventive service in terms of health impact and cost-effectiveness	NIAAA, 2022	Website
Psychometric Properties of the Person-Centered Version of the Alcohol and Alcohol Problems Perceptions Questionnaire (PC-AAPPQ)	Evaluates a new Alcohol and Alcohol Problems Perception Questionnaire (AAPPQ) that uses person-centered language and addresses the spectrum of alcohol use, concluding that the 30-item instrument is a promising tool for assessing providers' attitudes toward UAU without promoting negative biases	Mahmoud KF, et al., 2020[81]	Journal Article
Quick Facts: Screening, Brief Intervention, and Referral to Treatment	Highlights the benefits and goals of SBI/RT, including its cost-effectiveness, in a one-page summary	North Dakota Prevention Resource and Media Center, n.d.	Fact Sheet/Brochure
SBIRT: An Evidence-Based Approach to the Identification, Intervention, and Treatment of Substance Use Problems	Presents a detailed overview of SBI/RT, including tools, procedures, and effectiveness for improving health and reducing healthcare costs	Lyme A, 2016	Curriculum
SBIRT: Now More Than Ever	Describes why SBI/RT for substance use and behavioral health is particularly important in the era of COVID-19, describing its cost-effectiveness and return on investment	Brown R, 2020	Webinar/Video
The SBIRT Program Matrix: A Conceptual Framework for Program Implementation and Evaluation	Successful SBI/RT programs organized into a matrix for identifying similarities, differences, and characteristics	Del Boca FK, et al., 2017[82]	Journal Article
SBIRT: Sharing of Pearls for Clinical Practice Featuring Amanda Choflet	Strategies from a nurse practitioner for integrating SBI/RT services into the clinic at Johns Hopkins Medicine Department of Radiation Oncology To access, copy and paste the following URL: *https://www.youtube.com/watch?v=EZMd_2tzclc*	Johns Hopkins Medicine, 2016	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Practice Organization Implementation			
SBIRT 102: Operational Considerations	Discusses operational change concepts to consider when implementing SBI/RT in practice, including various steps for making changes in leadership and staff buy-in To access, copy and paste the following URL: *https://register.gotowebinar.com/recording/6954440019101417219*	National Council for Behavioral Health – FaCES Project, n.d.	Webinar/Video
Screening, Brief Intervention, and Referral to Treatment (SBIRT) for Pregnant and Postpartum Women: Opportunities for State MCH Programs	Shares information about the importance of SBI/RT for pregnant and postpartum women and the role of State maternal and child health (MCH) programs, including implementation examples from several different States	Association of Maternal & Child Health Programs (AMCHP), National Association of State Alcohol and Drug Abuse Directors (NASADAD), 2020	Report/Paper/Issue Brief
Screening, Brief Intervention, and Referral to Treatment for Substance Use: A Practitioner's Guide	Introduces psychologists to SBI/RT, including overviews of screening tools and approaches to brief intervention for diverse populations	Cimini DM, et al., 2020	Guide
Strategies to Implement Alcohol Screening and Brief Intervention in Primary Care Settings: A Structured Literature Review	Literature review of implementation studies of alcohol SBI using the Consolidated Framework for Implementation Research (CFIR) model to identify domains addressed by programs that achieved high rates of screening and/or brief intervention	Williams EC, et al., 2011[83]	Journal Article
Technical Assistance Publication Series (TAP) 33: Systems-Level Implementation of Screening, Brief Intervention, and Referral to Treatment	TAP that describes the core elements of SBI/RT programs and provides general administrative and managerial information about implementing SBI/RT services	SAMHSA, 2013	Guide
TAP 34: Disaster Planning Handbook for Behavioral Health Service Programs	Guides behavioral health services providers in developing their disaster preparedness plans, including the benefits of using electronic health records (EHR) and providing SBI/RT to key populations during a disaster	SAMHSA, 2021	Guide
Trauma-Informed, Recovery-Oriented System of Care Toolkit	Offers resources and information about implementing trauma-informed and recovery-oriented approaches to treat people with substance use disorders, including developing coordinated systems of care, with examples from a completed pilot project in Indiana	National Council for Mental Wellbeing, 2020	Toolkit
Using Alcohol Screening and Brief Intervention to Address Patients' Risky Drinking	Describes three steps to help family physicians seamlessly implement SBI into their practice	Zoorob RJ, et al., 2017[84]	Journal Article

The **Workforce Development** section includes materials to help the clinical workforce develop/strengthen their SBI/RT capabilities. Types of information included are 1) manuals/guides, 2) training programs/learning modules, and 3) quick reference materials and tools. Several of the training programs/learning modules listed offer continuing education credits for medical providers and other health professionals.

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Manuals, Guides			
Alcohol Screening and Brief Intervention: A Guide for Public Health Practitioners	Manual designed for public health professionals with information, skills, and tools needed to support professionals in conducting SBI to help at-risk drinkers reduce their alcohol use to a safe amount or stop drinking	American Public Health Association, 2008	Guide
Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide	Offers guidance for healthcare professionals to screen and intervene for alcohol use for youth ages 9-18	NIAAA, 2021	Guide
Alcohol Screening & Brief Intervention Inhibit Risky Alcohol Use	Encourages medical assistants to take an active role and serve as champions for SBI for alcohol use in primary care settings, which can increase productivity and result in cost savings within the practice	American Association of Medical Assistants, 2020	Guide
BNI Training Manual	Guides emergency department practitioners through administering BNI with their patients, complete with step-by-step actions and case examples	Yale University School of Medicine, 2005	Guide
Brief Interventions and Brief Therapies for Substance Abuse: Quick Guide for Clinicians Based on TIP 34	Describes brief intervention and therapy techniques for treating alcohol and drug misuse	SAMHSA, 2015	Guide
Brief Intervention for Hazardous and Harmful Drinking: A Manual for Use in Primary Care	Manual for primary care and other providers on how to conduct brief interventions for patients with or at risk of developing AUDs; used in conjunction with WHO's companion manual the Alcohol Use Disorder Identification Test: Guidelines for Use in Primary Care on how to screen for alcohol-related problems using the AUDIT-C and AUDIT	WHO, 2001[85]	Guide
Brief Negotiated Interview (BNI) Adherence and Competency Checklist	Developed for residency programs, measures practitioner competence in delivering BNI by listing the critical steps and providing space for feedback to improve performance	Yale University School of Medicine, n.d.	Instrument/Protocol
Brief Negotiated Interview and Active Referral to Treatment Provider Training Algorithm (BNI ART)	Presents the steps and language of BNI ART for providers to use with patients with alcohol and other substance use issues	Boston University BNI ART Institute, 2012	Instrument/Protocol

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Brief Negotiation Interview (BNI) Steps	Includes four steps of BNI and suggested dialogue for each, which providers can reference during clinical practice	Yale University School of Medicine, n.d.	Instrument/Protocol
Building Motivational Interviewing Skills, Second Edition: A Practitioner Workbook	Workbook that explains core motivational interviewing concepts and helps healthcare providers enhance their skills through examples and worksheets	Rosengren DB, 2017[86]	Other
Comprehensive Case Management System for Substance Use Disorder Treatment	One of SAMHSA's series of advisories based on Treatment Improvement Protocol (TIP) 27, Comprehensive Case Management for Substance Abuse Treatment, which summarizes updated guidance and recommendations for case management for patients with substance use disorder	SAMHSA, 2020	Guide
Conversation Guide for Delivering a Trauma-Informed Brief Intervention	Acknowledges the link between childhood trauma and substance use disorders; offers information to providers on how to use a trauma-informed care approach while delivering brief intervention	National Council for Mental Wellbeing, 2018	Guide
Guidelines for Identification and Management of Substance Use and Substance Use Disorders in Pregnancy	Guide containing recommendations on identifying and managing substance use and substance use disorders for healthcare services that assist women who are pregnant or have recently had a child	WHO, 2014	Guide
Helping Patients Who Drink Too Much: A Clinician's Guide	Guide for primary care physicians that offers an evidence-based approach to screening, assessing, and treating AUDs in general healthcare settings; includes the single alcohol screening question (SASQ) and the AUDIT-C and appendices of clinician and patient support materials	NIAAA, 2005	Guide
Helping Patients Who Drink Too Much: An Evidence-Based Guide for Primary Care Physicians	Overview of the NIAAA *Helping Patients Who Drink Too Much* guide for primary care physicians to address UAU in patients	Willenbring ML, et al., 2009[87]	Journal Article
Improving Cultural Competence: Quick Guide for Clinicians Based on TIP 59	Manual for clinicians that describes the influence of culture on the delivery of substance use and mental health services; discusses racial, ethnic, and cultural considerations, and presents the core elements of cultural competence	SAMHSA, 2016	Guide
Incorporating Alcohol Screening and Brief Intervention into Practice	Provides brief overview of USPSTF recommendation, screening questions, example workflow, and billing and coding information to help family physicians implement screening and brief intervention	American Academy of Family Physicians (AAFP), 2020	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Motivational Interviewing in Health Care: Helping Patients Change Behavior	Helps healthcare providers integrate motivational interviewing with patients and provides tools to enhance providers' ability to assist patients with healthy decision-making To access, copy and paste the following URL: *https://www.tandfonline.com/doi/full/10.1080/15412550802093108*	Rollnick S, et al., 2007[88]	Other
Motivational Interviewing in Health Care, Second Edition: Helping Patients Change Behavior	Helps healthcare practitioners use motivational interviewing with patients and provides tools to enhance providers' ability to assist patients with healthy decision-making To access, copy and paste the following URL: *https://www.guilford.com/books/Motivational-Interviewing-in-Health-Care/Rollnick-Miller-Butler/9781462550371*	Rollnick S, et al., 2022[89]	Other
Motivational Interviewing: Helping People Change, Third Ed.	Discusses the main concepts of motivational interviewing and provides examples to help professionals and students apply it with patients	Miller WR, et al., 2013[90]	Other
Older Americans Behavioral Health Issue Brief 2: Alcohol Misuse and Abuse Prevention	Describes alcohol use among older adults as a health issue, guidelines for alcohol use, the association of alcohol use with depression and anxiety, and SBI/RT as a strategy for addressing UAU among older adults	SAMHSA; Administration on Aging, 2012	Report/Paper/Issue Brief
Older Americans Behavioral Health Issue Brief 3: Screening and Preventive Brief Interventions for Alcohol and Psychoactive Medication Misuse/Abuse	Provides information on risk factors for alcohol and psychoactive medication misuse among older adults, as well as guidance and resources for screening for UAU among this population	SAMHSA; AOA, 2012	Report/Paper/Issue Brief
Prevention Strategies for Unhealthy Alcohol Use (From the Handbook of Evidence-Based Prevention of Behavioral Disorders in Integrated Care)	Describes prevention strategies for the identification of unhealthy alcohol use in primary care, including outlining risk factors, methods of screening, and a model for how to adapt alcohol-related prevention methods to a stepped care approach To access, copy and paste the following URL: *https://link.springer.com/chapter/10.1007/978-3-030-83469-2_13*	Hunley B, et al., 2021	Guide
Rural Prevention and Treatment of Substance Use Disorder Toolkit	Provides evidence-based examples, promising models, program best practices, and resources that organizations can use to implement substance use disorder prevention and treatment programs	NORC Walsh Center for Rural Health Analysis; Rural Health Information Hub, n.d.	Toolkit

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
SBIRT: A Population Health Approach to Perinatal Substance Use	Presentation that describes process for integrating SBI/RT services into maternity care and issues related to screening pregnant and postpartum women	Goodman D, Perinatal Addiction Treatment Program, Dartmouth-Hitchcock Medical Center, n.d.	Curriculum
SBIRT: A Step-by-Step Guide	Provides an overview of SBI/RT and walks clinicians through implementing SBI/RT for unhealthy alcohol and other drug use in their practices	Massachusetts Department of Public Health, 2012	Toolkit
Screening and Treatment of Substance Use Disorders Among Adolescents	One of SAMHSA's series of advisories based on TIP 31, Screening and Assessing Adolescents for Substance Use Disorders (SUDs), Treatment of Adolescents with SUDs, which includes recommendations for engaging adolescents in substance use disorder risk assessment, screening, and treatment	SAMHSA, 2021	Guide
Screening for and Managing At-Risk Drinking and Alcohol Use Disorder (AUD) During COVID-19	Supplements the Center for Effective Practice's (CEP) AUD Tool by supporting primary care physicians in screening and managing AUD during the COVID-19 pandemic To access, copy and paste the following URL: *https://tools.cep.health/tool/managing-at-risk-drinking-and-alcohol-use-disorder-aud-during-covid-19/*	CEP, 2020	Website
Screening for Drug Use in General Medicine Settings Resource Guide	Equips medical providers in general medicine settings with the tools for conducting SBI/RT, including a breakdown of each step in the screening and brief intervention process	NIDA, n.d.	Guide
SHARE Approach Curriculum Tools	Relevant resources (e.g., reference guides, manuals) for providers on shared decision-making	Agency for Healthcare Research and Quality (AHRQ), 2018	Website
TIP 35: Enhancing Motivation for Change in Substance Use Disorder Treatment	Describes motivational interventions, approaches, and strategies that service providers can use with clients to assist in changing substance use behavior	SAMHSA, 2019	Guide
Treatment Considerations for Youth and Young Adults With Serious Emotional Disturbances and Serious Mental Illnesses and Co-Occurring Substance Use	Provides evidence-based resources and special considerations for treating youth with serious mental illness and/or substance use disorders, including AUD	SAMHSA, 2021	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Using Motivational Interviewing in Substance Use Disorder Treatment	One of SAMHSA's series of advisories based on TIP 35, Enhancing Motivation for Change in Substance Use Disorder Treatment, which discusses using motivational interviewing for substance use disorders	SAMHSA, 2020	Guide
Training Programs, Courses, Videos, and Training Registries			
Alcohol Use Disorder During the COVID-19 Pandemic: The Instrumental Role of the Primary Care Provider	Presents the role of the primary care provider in screening, brief intervention, and treatment for alcohol use disorder, including information about the role and importance of using telehealth during the COVID-19 pandemic To access, copy and paste the following URL: *https://umaryland.webex.com/recordingservice/sites/umaryland/recording/9ad445351967103abe790050568f9b64/playback*	University of Maryland (UMD); Salwan J, 2021	Curriculum
Adolescent SBIRT Curriculum	A comprehensive curriculum for educators and trainers, practitioners, and students to learn to conduct SBIRT with adolescents and young adults	McPherson TL, et al., NORC at the University of Chicago, 2023	Guide
American Society of Addiction Medicine (ASAM) Fundamentals of Addiction Medicine 40-Hour CME Program	40-hour Continuing Medical Education (CME) training program for primary care providers and other clinical providers to diagnose and treat patients at risk for or with addiction	SAMHSA, 2019	Web-Based Course
ASAM eLearning Alcohol Use Disorder	Provides a list of courses and resources for healthcare providers treating patients with alcohol use disorder	ASAM, 2023	Website
At-Risk in Primary Care	Simulation training course to prepare primary care providers to screen patients for mental health and substance use, perform brief interventions using motivational interviewing techniques, and refer patients to treatment; approved for 1.50 CMEs	Kognito, n.d.	Web-Based Course
At-Risk Alcohol Brief Intervention Video	Demonstrates provider administering BNI and education about NIAAA's at-risk limits	Southeastern Consortium for Substance Abuse Training, 2012	Webinar/Video
BNI Case Studies	Provides three case studies for providers to practice conducting BNI	Yale University School of Medicine, n.d.	In-Person Training
BNI Medical Residency Training Modules	Collection of training modules for medical residents in medicine, OB/GYN, psychiatry, and emergency medicine about SBI/RT approaches, including BNI	Yale University School of Medicine, n.d.	Curriculum

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
BNI Training Slide Sets	Collection of slide sets covering alcohol SBI/RT with a focus on BNI	Yale University School of Medicine, n.d.	Curriculum
BNI Training Videos: The Emergency Practitioner and the Unhealthy Drinker	Videos that demonstrate conducting BNI in an emergency department setting	Yale University School of Medicine, n.d.	Webinar/Video
The Clinical Assessment of SUDs	Training for primary care providers that includes text and instructional videos addressing the knowledge, skills, and attitudes needed to screen, evaluate, and refer patients with substance use disorders	Schindler BA and Parran T, NIDA, Drexel University College of Medicine, and University of Pennsylvania School of Medicine, 2018	Web-Based Course
The Healthcare Professional's Core Resources on Alcohol	Online resource that consists of 14 interconnected articles covering the basics of what every healthcare professional needs to know about alcohol. Articles address: foundational knowledge for understanding alcohol-related problems, clinical impacts of alcohol; and prevention and treatment strategies; free continuing medical education credits available	NIAAA, 2022	Website
Mental Health First Aid	Provides courses on how to identify, understand, and respond to signs of mental illnesses and substance use disorders	National Council for Mental Wellbeing, n.d.	Website
Module 1: Overview of Substance Use Disorders	Module that includes an overview of substance use disorders; discusses neurobiological responses to substances, theories that explain the disorders, and integrated care for substance use disorder	Providers Clinical Support System (PCSS), 2019	Web-Based Course
Module 2: Alcohol and Drug Use Disorders	Module that describes the basic concepts of alcohol and drug use disorders, including considerations for standard drink sizes, screening for AUDs, and an introduction to alcohol withdrawal management	PCSS, 2018	Web-Based Course
Module 2: Changing Language to Change Care: Stigma and Substance Use Disorder	Discusses the importance of language when discussing substance use and reviews ways to improve language used during clinical encounters to improve patient care	PCSS, 2019	Web-Based Course
Module 9: Principles of Motivational Interviewing: Useful for Primary Care Physicians	Introduces key principles of motivational interviewing that primary care providers can use, including methods and strategies for developing patient-centered communication skills	PCSS, 2019	Web-Based Course
Motivational Interviewing Network of Trainers (MINT) Website	Offers a searchable trainer registry and variety of resources related to motivational interviewing, including online and in-person trainings	Motivational Interviewing Network of Trainers, 2019	Web-Based Course

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
NIDAMED: Medical and Health Professionals	Gives medical professionals tools and resources to screen their patients for tobacco, alcohol, illicit drug, and nonmedical prescription drug use; includes resources such as an online screening tool, a companion quick reference guide, and a comprehensive resource guide for clinicians	NIDA, n.d.	Toolkit
Nurse Prescreen 1 Video	Demonstrates nurse using a single question prescreen for at-risk alcohol use and/or substance use with a motivational interviewing approach during a patient vital signs check	Southeastern Consortium for Substance Abuse Training, 2013	Webinar/Video
One Degree: Shift the Influence	A simulation tool that allows users to practice having conversations with youth and adults about their substance use To access, copy and paste the following URL: *https://simulations.kognito.com/onedegree/?dly=20*	Kognito, n.d.	Web-Based Course
Possibly Dependent Alcohol Brief Intervention Video	Demonstrates a clinician using the brief negotiated interview with a patient who may be at high risk for AUD To access, copy and paste the following URL: *https://www.youtube.com/watch?v=BVsBq3lZUZk*	Southeastern Consortium for Substance Abuse Training, 2012	Webinar/Video
SAMHSA-HRSA Motivational Interviewing Resources Page	Webpage that provides multiple resources for workforce development, including webinars, on motivational interviewing	SAMHSA – Health Resources and Services Administration (HRSA) Center for Integrated Health Solutions (CIHS), 2019	Website
SBI Skills Assessment	Allows providers to assess their skills in conducting SBI through a 30-minute virtual simulation; approved for 0.75 CME, 1.0 NASW, and 0.75 CNE To access, copy and paste the following URL: *https://store.kognito.com/products/sbi-skills-assessment*	Kognito, n.d.	Web-Based Course
SBIRT for Health and Behavioral Health Professionals	Self-paced course for SBI/RT providers that offers 3.5 hours of continuing education credit	Health eKnowledge, n.d.	Web-Based Course
SBIRT in Medical Settings Online Training Curriculum	Trains primary care and emergency medicine providers on SBI/RT in medical settings	SBIRT Oregon, n.d.	Curriculum

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
SBIRT in Primary Care: At-Risk Alcohol Use Video	Video of a healthcare provider administering the BNI To access, copy and paste the following URL: *https://www.youtube.com/watch?v=ONPlsxurlJg*	Southeastern Consortium for Substance Abuse Training, 2015	Webinar/Video
SBIRT Training	Website providing training in SBI/RT skills for healthcare providers To access, copy and paste the following URL: *https://sbirt.clinicalencounters.com/*	Clinical Tools, Inc., 2021	Website
SBIRT Videos	Illustrates how providers use BNI and motivational interviewing techniques with patients	Boston University BNI ART Institute, n.d.	Webinar/Video
SBIRT Video Demonstrations	Online training videos that present clinic workflows for implementing SBI/RT and examples of brief interventions	SBIRT Oregon, n.d.	Webinar/Video
SBIRT: What It Is and How It Works	Presentation for healthcare providers about the basics of implementing SBI/RT To access, copy and paste the following URL: *https://vimeo.com/jhunursing/review/116811945/bf3431b067*	Southeastern Consortium for Substance Abuse Training, 2014	Webinar/Video
SBI with Adults	Simulation training course that prepares healthcare providers to screen patients for substance use and perform brief interventions using motivational interviewing techniques To access, copy and paste the following URL: *https://kognito.com/solution/4003/*	Kognito, 2022	Web-Based Course
Screening and Brief Interventions for Substance Use Issues	Trains healthcare providers on key SBI/RT concepts, screening tools, and motivational interviewing techniques; offers continuing education credits To access, copy and paste the following URL: *https://reliasacademy.com/rls/store/browse/productDetailSingleSku.jsp?productId=c1384286*	Relias Academy, n.d.	Web-Based Course
Screening Brief Intervention (SBI) Demonstration Video	SBIRT Oregon YouTube video that shows providers how to implement SBI To access, copy and paste the following URL: *https://www.youtube.com/watch?v=wln1GhtFq0M*	SBIRT Oregon, 2019	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Southeastern Consortium for Substance Abuse Training YouTube Channel (SBIRTonline)	YouTube channel for clinicians with video examples demonstrating how to conduct SBI/RT, including using the single question screen and AUDIT and delivering BNI with patients at varying level of risk To access, copy and paste the following URL: *https://www.youtube.com/channel/UCuMh1fd6XbyRZx_UuGsctXQ*	Southeastern Consortium for Substance Abuse Training, n.d.	Website
Substance Use Disorders 101 Module 1: Understanding Substance Use Disorders	Provides an overview on identifying and treating substance use disorders so that administrative and clinical staff can better understand these disorders and the patients	PCSS, 2018	Web-Based Course
Substance Use Screening, Brief Intervention, and Referral to Treatment	Describes the SBI/RT model, including validated, structured screening tools and components of implementing brief interventions with patients; also discusses approved treatments for substance use disorder and guidelines for referrals	PCSS, 2019	Web-Based Course
UCLA-Tour of Motivational Interviewing	Online course for providers on the essential components of motivational interviewing; offers 4.0 hours of continuing education credit	Health eKnowledge, n.d.	Web-Based Course
University of Colorado Anschutz Medical Campus E-Learning: Facilitating Alcohol Screening and Treatment (FAST)	Includes a series of training modules about UAU for primary care practices, covering topics such as SBI/RT and medication-assisted treatment, team-based care for UAU, sustainability, implementation strategies, and clinical guidelines	University of Colorado Anschutz Medical Campus, n.d.	Web-Based Course
Virtual Course: AUDIT-SBI in Primary Health Care	Virtual course that trains health professionals in implementing AUDIT and corresponding SBI in primary care	Virtual Campus for Public Health (VCPH), 2022	Web-Based Course
SBIRT Training Preview (eSBIRT)	Produced by Screening and Brief Intervention in Missouri (formally mosbirt.org), this website provides resources to support primary care providers in becoming skilled at identifying and addressing risky alcohol and drug use	MOSBIRT, 2022	Website
Wisconsin SBIRT Training	Includes three training modules and a final exam for licensed SBI/RT providers in Wisconsin to become eligible for Medicaid reimbursement for SBI/RT services	Wisconsin Department of Health Services, 2020	Web-Based Course

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Women and Alcohol: Screening, Brief Intervention, and Referral to Treatment	Discusses how screening, brief intervention, and referral to treatment can be conducted by nurse practitioners in primary care; offers 1 CE credit To access, copy and paste the following URL: *https://www.npwomenshealthcare.com/women-and-alcohol-screening-brief-intervention-and-referral-to-treatment/*	Edwards AE, et al., 2023[91]	Journal Article
Women and Alcohol: Screening and Brief Intervention and Referral to Treatment (SBIRT) in Medical Settings	Presents information on alcohol use in women and using SBIRT and brief motivational interviewing; includes step-by-step examples on using this approach	Velasquez MM, et al., n.d.	Curriculum
Tools			
Addiction Technology Transfer Center Network Trainer Registry	Lists contact information for SBI/RT trainers in each State and searchable trainer registry	Addiction Technology Transfer Center Network, n.d.	Website
Adult Brief Intervention Clinic Pocket Card	Quick reference pocket cards designed for providers delivering brief interventions for patients	SBIRT Oregon, n.d.	Guide
Adult Brief Intervention Reference Sheet	Provider reference sheet with tips and facts for implementing brief interventions for adult patients	SBIRT Oregon, n.d.	Fact Sheet/Brochure
Development and Evaluation of Two Instruments for Assessing Screening, Brief Intervention, and Referral to Treatment (SBIRT) Competency	Discusses the development of the SBIRT Proficiency Checklist and the Clinical SBIRT Proficiency Checklist, which are intended to assess a provider's ability and competency in delivering SBI/RT To access, copy and paste the following URL: *https://www.tandfonline.com/doi/full/10.1080/08897077.2016.1152343*	Pringle JL, et al., 2017[92]	Journal Article
Learning Community Session #1: Fidelity Monitoring Using the SBIRT Proficiency Checklist	SBIRT Colorado video describing the importance of fidelity monitoring in implementing SBI/RT in clinical practice and how to use the SBIRT Proficiency Checklist To access, copy and paste the following URL: *https://www.youtube.com/watch?v=DtfWOQi6Jsg&feature=youtu.be*	SBIRT Oregon, 2019	Webinar/Video
NIAAA Alcohol Treatment Navigator for Healthcare Professionals	Helps providers find alcohol treatment for their practice or patients	NIAAA, n.d.	Website
Pregnancy Brief Intervention Clinic Pocket Card	Provides information about delivering brief interventions with pregnant women; can be carried in a provider's pocket during patient visits	SBIRT Oregon, n.d.	Instrument/Protocol

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Pregnant Women Brief Intervention Reference Sheet	Reference sheet for providers with tips and facts on implementing brief interventions with pregnant patients	SBIRT Oregon, n.d.	Fact Sheet/Brochure
SBIRT App for iPad and iPhone	Contains a variety of SBI/RT tools and resources for educational reference and walks providers through a typical SBI/RT interaction To access, copy and paste the following URL: *https://apps.apple.com/us/app/ohn-sbirt/id1109510478*	Open Cancer Network, 2016	Instrument/Protocol
SBIRT Pocket Card, General Adults	Pocket card that offers providers quick reference information to print and use to implement SBI/RT, including tips for giving feedback, drink limits, key questions, and brief intervention steps To access, copy and paste the following URL: *https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/6398afc79b4858355acd1839/1670950855648/General_pocketcard_online_June2021_12-22.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
SBIRT Pocket Card, Older Adults	Pocket card that offers providers quick reference information for implementing SBI/RT specifically with older adults, including tips for giving feedback, drink limits, key questions, and brief intervention steps To access, copy and paste the following URL: *https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/6398afefe9388305b44769af/1670950895740/OlderAdult_pocketcard_online_June2021_12-22.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
SBIRT Pocket Card, Women	Pocket card that offers providers quick reference information for implementing SBI/RT specifically with women, including tips for giving feedback, drink limits, key questions, and brief intervention steps To access, copy and paste the following URL: *https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/6398afdce9388305b447664e/1670950876567/Women_pocketcard_online_June2021_12-22.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
Training Medical Providers to Conduct Alcohol Screening and Brief Interventions	Evaluates the Cutting Back® SBI Program; finds it is effective in changing providers' knowledge, attitudes, and practice of SBI for at-risk drinking	Babor TF, et al., 2004[93]	Journal Article

The **Patient Engagement** section includes materials to help clinicians engage their patients in delivering SBI/RT services.

Title	Brief Description	Publisher/Author, Year	Format(s)
5. Patient Engagement			
Alcohol Use Facts & Resources	Provides information about UAU, and includes the AUDIT-C screening tool, tips for cutting down on alcohol use, and additional resources	SAMHSA, n.d.	Fact Sheet/Brochure
Bringing Patient-Centered Care to Patients with Alcohol Use Disorders	Article describing how shared decision-making for AUD can be integrated into primary care practice, and the importance of patient-centered care for patients with AUD	Bradley KA, et al., 2014[94]	Journal Article
MyOwnHealthReport	A health behavior and mental health assessment for patients that allows them to answer questions about their health that can be integrated into clinic workflows, including the AUDIT-C	National Cancer Institute; AHRQ; Virginia Commonwealth University; University of Colorado School of Medicine, 2016	Patient Form
Planning for Change	Webpage in which patients can fill in their change plan for their drinking behaviors and print or email it to themselves	NIAAA, n.d.	Patient Form

The **Patient Education** section includes materials for patients to increase their knowledge of UAU and related services and to decrease stigma to enhance delivery of UAU services.

Title	Brief Description	Publisher/Author, Year	Format(s)
6. Patient Education			
Alcohol and Drug Use During Pregnancy Patient Handout	Patient handout to educate about alcohol and drug use during pregnancy as a supplement to a brief intervention To access, copy and paste the following URL: *https://d3vz56oilt3wha.cloudfront.net/resources/clinic_tools_docs/Pregnancy and alcohol and drug use.pdf*	SBIRT Oregon, n.d.	Fact Sheet/Brochure
Alcohol Facts and Statistics	Provides statistics on alcohol use and AUD in the United States	NIAAA, 2021	Fact Sheet/Brochure
Behavioral Health Treatment Services Locator	Provides information on available mental health or substance use treatment services by allowing users to search by Zip Code	SAMHSA, n.d.	Website
Hangovers	Overview of hangover symptoms, causes, and remedies	NIAAA, 2018	Fact Sheet/Brochure; Website

Title	Brief Description	Publisher/Author, Year	Format(s)
6. Patient Education			
Harmful Interactions: Mixing Alcohol with Medicines	Patient pamphlet describing potential side effects and interactions that can occur from mixing alcohol with a list of commonly used prescription and over-the-counter medications	NIAAA, 2014	Fact Sheet/Brochure
Interrupted Memories: Alcohol Induced Blackouts	An overview of alcohol-induced blackouts, including the different types, causes, and associated consequences	NIAAA, 2019	Fact Sheet/Brochure; Website
Lower Risk Drinking Limits	Educational poster for display in medical settings to educate patients about lower risk drinking limits To access, copy and paste the following URL: *https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/61d478ccbb33cb1155a26680/1641314509159/Lower+Risk+Drink+Limits+PosterJune2021.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
Lower Risk Drinking Limits (Spanish)	Educational poster for display in medical settings to educate Spanish-speaking patients about lower risk drink limits To access, copy and paste the following URL: *https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/639380646171596d4a89af66/1670611044984/Lower+Risk+Drink+Limits+Poster_SpanishJune2021.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
NIAAA Alcohol Treatment Navigator (for patients)	Online tool and accompanying toolkit that help patients find alcohol treatment	NIAAA, n.d.	Website
Options for People Who Are Thinking About Their Drinking	Decision aid that offers information to patients about options for caring for their alcohol use and guides them through making a decision that is right for them, ending with a worksheet for discussions with primary care providers	Kaiser Permanente, 2019	Guide
A ReThink of the Way We Drink	Video about reducing stigma and talking to one's healthcare provider about alcohol use To access, copy and paste the following URL: *https://www.youtube.com/watch?v=tbKbq2IytC4*	Michael Evans and Reframe Health Films Inc., 2015	Webinar/Video
SAMHSA's National Helpline	Describes SAMHSA's National Helpline, a confidential, free, 24-hour-a-day, 365-day-a-year, information service in English and Spanish for individuals and family members facing mental and/or substance use disorders	SAMHSA, n.d.	Website; Other
Treatment for Alcohol Problems: Finding and Getting Help	Guide to selecting a treatment option	NIAAA, 2014	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
6. Patient Education			
[Understanding the Dangers of Alcohol Overdose](#)	Provides an overview of alcohol overdose signs and symptoms and when to seek medical help	NIAAA, 2019	Fact Sheet/Brochure; Website
["We Ask Everyone" SBIRT Poster](#)	Poster for primary care settings to help normalize asking about alcohol and substance use during the visit	SBIRT Indiana, n.d.	Fact Sheet/Brochure
"We Ask Everyone" Alcohol Exam Room Patient Poster	Educational poster for display in patient exam room about why providers ask everyone about alcohol use *To access, copy and paste the following URL: https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/61d4760fa194b64e55a049f2/1641313808155/WeAskEveryone_June2021.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
"We Ask Everyone" Alcohol Exam Room Patient Poster (Spanish)	Educational poster for display in patient exam room about why providers ask everyone about alcohol use *To access, copy and paste the following URL: https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/61d478b189c4bf342f61c7ba/1641314483005/WeAskEveryone_Spanish_June2021.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
What Is a Standard Drink?	Patient handout defining a standard drink and giving reasons patients should consider drinking less *To access, copy and paste the following URL: https://static1.squarespace.com/static/5fa42b5ba8363e397f02f9ae/t/61d47a00cb3a0c3882d07648/1641314817093/General_pocketcard_online_June2021.pdf*	SBIRT Colorado, 2018	Fact Sheet/Brochure
[What Is Risky Drinking?](#)	Patient handout for adults about risky drinking as a supplement to a brief intervention	SBIRT Oregon, n.d.	Fact Sheet/Brochure

The **Billing and Reimbursement** section includes websites, guides, and fact sheets to help practices appropriately bill for SBI/RT services and work with stakeholders to inform development of State policies that help sustain SBI/RT services.

Title	Brief Description	Publisher/Author, Year	Format(s)
7. Billing and Reimbursement			
Billing Codes and Documentation Guidance for SBIRT Implementation	Guidance on billing codes and documentation necessary for implementing SBI/RT in medical settings	SBIRT Oregon, n.d.	Website
By Itself, Reimbursement Doesn't Expand SBIRT	Discusses some of the challenges with billing and coding for SBI/RT and lessons learned from Oregon adding SBI/RT as a performance metric	Institute for Research, Education & Training in Addictions, 2017	Website
Coding for Screening and Brief Intervention Reimbursement	Guidance from SAMHSA related to reimbursement for screening and brief intervention through insurance, Medicare, and Medicaid	SAMHSA, 2022	Website
Decision Tree: Do Federal Alcohol & Drug Confidentiality Rules Apply to Your SBIRT Services?	Assists providers in determining whether their SBI/RT services are protected by Federal confidentiality laws, 42 CFR Part 2	Legal Action Center, 2018	Fact Sheet/Brochure
Exploring Value-Based Payment to Encourage Substance Use Disorder Treatment in Primary Care	Examines how States and payers can use value-based payment to promote the integration of substance use disorder treatment in primary care	Melville Charitable Trust, Technical Assistance Collaborative and Center for Health Care Strategies, 2018	Report/Paper/Issue Brief
Fact Sheet: Do Federal Alcohol & Drug Confidentiality Rules Apply to Your SBIRT Services?	Provides an overview of Federal confidentiality laws as they pertain to SBI/RT	Legal Action Center, 2018	Fact Sheet/Brochure
Financing the Future of Integrated Care	Decision support tool and accompanying modules that offer guidance to provider organizations on how to finance integrated care	National Council for Mental Wellbeing, 2022	Toolkit
Fostering Resilience and Recovery: A Toolkit for Trauma-Informed Primary Care Advocates	Guides primary care providers through advocating for policies that can apply to SBI/RT and funding for substance use services	National Council for Behavioral Health, 2019	Toolkit
How to Bill for Brief Substance and Alcohol Abuse Services	Describes how clinicians can bill for SBIRT, including an explanation of what SBIRT services are and billing codes	American Psychological Association (APA) Services, Inc.	Website
Medicaid Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)	Provides information on the EPSDT benefit for children under age 21 enrolled in Medicaid, including guidelines and strategy guides for State programs	CMS, n.d.	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
7. Billing and Reimbursement			
Medicaid Policies for Alcohol SBI Reimbursement	Reviews and examines existing State Medicaid reimbursement for alcohol SBI policies, highlighting similarities and differences between States on reimbursement, approved providers, billing codes, and approved screening tools	University of Alaska, 2017	Report/Paper/Issue Brief
Medicare Coverage of Substance Use Disorder Care: A Landscape Review of Benefit Coverage, Service Gaps and a Path to Reform	Report providing information about Medicare reimbursement for substance use disorder services as well as detailing gaps in Medicare coverage and recommendations to address these gaps	Steinberg D, et al., 2021	Report/Paper/Issue Brief
Paying for Value in Medicaid: How States Are Leveraging Payment to Improve the Delivery of SUD Services	Toolkit that discusses Medicaid payment strategies in Arizona, New York, Oregon, and Pennsylvania that are being used to improve the delivery of SUD treatment for patients insured through Medicaid	National Academy for State Health Policy (NASHP), 2022	Report/Paper/Issue Brief
Payment and Financing for Substance Use Screening and Brief Intervention for Adolescents and Adults in Health, School, and Community Settings	Reviews literature on payment options for screening, brief intervention, and referral to treatment and their barriers and facilitators in various settings	Reif S, et al., 2022[95]	Journal Article
Reimbursement for SBIRT	Fact sheet that provides overview of codes used for reimbursement for SBI/RT services	SAMHSA, n.d.	Fact Sheet/Brochure
SBIRT: Coding, Billing, and Reimbursement Manual	Medicaid and Medicare coding, billing, and reimbursement manual for Wisconsin clinic and administrative staff to support implementation of SBI/RT services	Wisconsin Department of Health Services, 2010	Guide
SBIRT Guidance Document	Provides coordinated care organizations (CCOs); Oregon clinics; and administrative staff with guidance on implementing SBI/RT, including coding and billing information	Oregon Health Authority, 2014	Guide
Screening, Brief Intervention, and Referral to Treatment (SBIRT) Coding & Reimbursement Guide	Provides information on Medicare, Medicaid, and commercial insurance reimbursement for SBI/RT in Wisconsin To access, copy and paste the following URL: *https://sbirt.webs.com/Wisconsin SBIRT_Coding_and_Reimbursement_Guide_January_2019.pdf*	Quality Improvement Organizations, Lake Superior Quality Innovation Network, 2019	Guide
SBIRT Coding and Reimbursement Guide Updates	Describes the updates made in 2019 to the SBIRT Coding & Reimbursement Guide To access, copy and paste the following URL: *https://www.youtube.com/watch?v=SiP7kyzBeRs*	Quality Improvement Organizations, Lake Superior Quality Innovation Network, 2019	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
7. Billing and Reimbursement			
SBIRT Hospital Committee Presentation	Includes steps for getting paid for SBI/RT in hospitals, emergency departments, and outpatient practices; provides information on business and billing practices to maintain successful SBI/RT integration and use of electronic records integration to secure billing efficiency/training To access, copy and paste the following URL: *https://www.youtube.com/watch?v=DWgTNKCfe14&feature=youtu.be*	Oregon Health & Science University Family Medicine, John Hurley, 2012	Webinar/Video
SBIRT Services	Offers guidance on Medicare and Medicaid coverage of SBI/RT services, targeted at Medicaid fee-for-service providers and Medicaid programs, revised and updated in 2021	Centers for Medicare & Medicaid Services (CMS) Learning Network, 2023	Guide
Section 1115 Substance Use Disorder Demonstrations: Substance Use Disorders, Serious Mental Illness, and Serious Emotional Disturbance	Includes resources from States with substance use disorder demonstration programs from November 2017 CMS guidance that improved access to substance use disorder services	CMS, 2017	Website
State Options for Promoting Recovery Among Pregnant and Parenting Women with Opioid or Substance Use Disorder	Explores effective interagency policy and initiative strategies that officials in Colorado, Pennsylvania, and Texas have used to treat and support pregnant and parenting women with substance use disorder	National Academy for State Health Policy, 2018	Report/Paper/Issue Brief
Substance Abuse Confidentiality Regulations FAQs	Webpage with frequently asked questions related to laws and regulations about SBI/RT and substance use services	SAMHSA, 2019	Website

The **SBI/RT Websites and Literature** section includes comprehensive resources such as websites and relevant articles from peer-reviewed and grey literature to support overall primary care practice implementation of SBI/RT services.

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Alcohol – Excessive Consumption: Electronic Screening and Brief Interventions (e-SBI)	Systematic review that recommends e-SBI to reduce self-reported excessive alcohol consumption and alcohol-related problems	Community Preventive Services Task Force, 2012	Website
Alcohol Brief Intervention in Primary Care: Blood Pressure Outcomes in Hypertensive Patients	Studies association between alcohol brief intervention and blood pressure among patients with hypertension in a primary care setting	Chi FW, et al., 2017[96]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Alcohol Screening and Brief Interventions in Primary Care – Evidence and a Pragmatic Practice-Based Approach	Article that explains the current state of evidence for the effectiveness of SBI in primary care and describes how this evidence applies to routine care; offers strategies to improve the acceptability of alcohol assessment	Tam CW, et al., 2016[97]	Journal Article
Alcohol Screening and Brief Counseling in a Primary Care Hypertensive Population: A Quality Improvement Intervention	Discusses an intervention in which implementing SBI for UAU was associated with decreased blood pressure in hypertensive primary care patients	Rose HL, et al., 2008[98]	Journal Article
Alcohol Screening, Brief Intervention, and Referral to Treatment (SBIRT) for Girls and Women	Reviews screening instruments, brief interventions, and implementation of SBI/RT among girls and women to help inform best practices	Hammock K, et al., 2020[99]	Journal Article
Alcohol Screening During US Primary Care Visits, 2014–2016	Explores U.S. primary care providers' use of screening tools and delivery of counseling for UAU, finding that screening for UAU using a validated tool is not commonly performed during primary care visits; interventions may be needed to increase implementation	Chatterton B, et al., 2022[100]	Journal Article
Are We There Yet? A Review of Screening, Brief Intervention, and Referral to Treatment (SBIRT) Implementation Fidelity Tools and Proficiency Checklists	A review of SBI/RT fidelity tools and proficiency checklists, identifying heterogeneity among existing tools	Reho K, et al., 2016[101]	Journal Article
Associations Between Medical Conditions and Alcohol Consumption Levels in an Adult Primary Care Population	Suggests that primary care patients with several specific medical conditions, such as hypertension and chronic obstructive pulmonary disease, may be more likely to report higher levels of alcohol use	Sterling SA, et al., 2020[102]	Journal Article
Brief Alcohol Interventions in U.S. Medical Settings: A Systematic Review of the Implementation Literature	Review article that summarizes the screening, brief intervention, and referral to treatment implementation strategies used in the U.S.	Loughran TA, et al., 2021[103]	Journal Article
Brief Alcohol Interventions With Older Adults: A Systematic Review of Literature	Review article that analyzes empirical studies examining the effectiveness of brief alcohol interventions (BAIs) for at-risk-older adults suggesting that BAIs are effective in reducing alcohol consumption in an older-adult population	Lemieux C & Purser G, et al., 2021[104]	Journal Article
CDC's Alcohol Screening and Brief Intervention Efforts	Outlines SBI basics and provides resources related to SBI implementation, fetal alcohol spectrum disorders, and CDC's efforts on UAU	CDC, updated 2023	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Center on Rural Addiction: Resources	Website with a variety of resources, including recorded webinars, slides, guides, and other tools, for rural practitioners working with patients with substance use disorders	Center on Rural Addiction, University of Vermont (UVM CORA), 2022	Website
The Changing Landscape of Alcohol Use Disorder and Problem Drinking in the USA: Implications for Primary Care	Provides primary care providers with information about the changing landscape of AUD and other alcohol-related problems and how best to address problematic alcohol use	Grucza RA, et al., 2020[105]	Journal Article
A Comparison of the Efficacy of Brief Interventions to Reduce Hazardous and Harmful Alcohol Consumption Between European and Non-European Countries: A Systematic Review and Meta-Analysis of Randomized Controlled Trials	A systematic review that concludes that brief intervention is associated with reducing weekly alcohol consumption	Elzerbi C, et al., 2015[106]	Journal Article
Computerized Relational Agent to Deliver Alcohol Brief Intervention and Referral to Treatment in Primary Care: A Randomized Clinical Trial	Randomized trial of a relational agent-based intervention for AUD, showing that technology can be leveraged to deliver screening and referral to treatment for AUD in primary care medical settings	Rubin A, et al., 2021[107]	Journal Article
The Cost-Effectiveness and Cost-Benefit of Screening and Brief Intervention for Unhealthy Alcohol Use in Medical Settings	Concludes that alcohol screening and brief intervention in medical settings offers an economic benefit to healthcare costs	Kraemer KL, 2007[108]	Journal Article
The Cost of SBIRT Implementation in Mat-Su Primary Care Practices	Report on cost-effectiveness of SBI/RT based on study of three primary care practices, which demonstrates the cost savings calculations using graphs and tables	Tran T, et al., 2018	Report/Paper/Issue Brief
Comparing Satisfaction, Alliance and Intervention Components in Electronically Delivered and In-Person Brief Interventions for Substance Use Among Childbearing-Aged Women	Evaluates patient satisfaction, acceptability, and components of implementation of in-person SBI/RT compared with e-SBIRT in healthcare settings	Loree AM, et al., 2019[109]	Journal Article
Cost Benefits of Investing Early In Substance Abuse Treatment	Discusses the benefits of early SBI/RT, including saving lives and reducing healthcare costs	Office of National Drug Control Policy, 2012	Fact Sheet/ Brochure
Costs and Implementation Effectiveness of Generalist Versus Specialist Models for Adolescent Screening and Brief Intervention in Primary Care	Analyzes the marginal service and program costs of two models of implementation of adolescent screening, brief intervention, and referral to treatment finding the generalist setting to be more cost-effective than specialist care	Barbosa C, et al., 2022[110]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
The Effectiveness of Electronic Screening and Brief Intervention for Reducing Levels of Alcohol Consumption: A Systematic Review and Meta-Analysis	Suggests that e-SBI is an effective intervention in reducing weekly alcohol consumption	Donoghue K, 2014[111]	Journal Article
Effectiveness of Brief Alcohol Interventions in Primary Care Populations	Review that examined brief intervention implementation in general practice or emergency care settings and effects in reducing heavy drinking, finding that brief interventions can reduce alcohol consumption in hazardous and harmful drinkers compared with minimal or no intervention	Kaner EFS, 2018[112]	Journal Article
Effectiveness of Brief Interventions in Primary Health Care Settings to Decrease Alcohol Consumption by Adult Non-Dependent Drinkers: A Systematic Review of Systematic Reviews	Review of systematic reviews that evaluated the effectiveness of brief interventions in primary healthcare settings to decrease alcohol consumption in non-alcoholic adult drinkers; found that brief interventions have a moderate effect on reducing alcohol consumption of people who consume excessive amounts of alcohol	Alvarez-Bueno C, et al., 2015[113]	Journal Article
Effects of Brief Substance Use Interventions Delivered in General Medical Settings: A Systematic Review and Meta-Analysis	Systematic review looking at the effects of brief interventions for substance use delivered in general medical settings, finding that alcohol-targeted brief interventions may produce small reductions in drinking	Tanner-Smith EE, et al., 2021[114]	Journal Article
An Efficacy Trial of Adaptive Interventions for Alcohol Use Disorder	Assesses efficacy of an adaptive brief intervention for individuals with AUD, finding that those who received motivational interviewing and Behavioral Self-Control Therapy (or coping skills therapy) had the greatest reductions in drinking	Morgenstern J, et al., 2021[115]	Journal Article
Evidence for the Effectiveness and Acceptability of e-SBI or e-SBIRT in the Management of Alcohol and Illicit Substance Use in Pregnant and Post-Partum Women	Reviews current evidence for the use of SBI/RT delivered through mHealth technologies and explores implications of using mHealth to address alcohol use among pregnant and post-partum women	Wouldes TA, et al., 2021[116]	Journal Article
Factors Influencing the Implementation of Screening and Brief Interventions for Alcohol Use in Primary Care Practices: A Systematic Review Using the COM-B System and Theoretical Domains Framework	Systematic review of studies identifying barriers and facilitators that influence implementation of screening and brief intervention for alcohol use in primary care settings	Rosário F, et al. 2021[117]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Health Care Use Over 3 Years After Adolescent SBIRT	Demonstrates that adolescents who received SBI/RT by either a primary care pediatrician or behavioral clinician were less likely to have substance use disorder diagnoses at one and three years compared with usual care	Sterling S, et al., 2019[118]	Journal Article
Health Care Utilization after Paraprofessional-Administered Substance Use Screening, Brief Intervention, and Referral to Treatment: A Multi-Level Cost-Offset Analysis	Study of health care utilization after implementation of SBI/RT in primary care, which finds that the costs of implementing SBI/RT would be offset by reduction in health care utilization	Paltzer J, et al., 2019[119]	Journal Article
"I Felt I Was Reaching a Point With My Health": Understanding Reasons for Engagement and Acceptability of Treatment Services for Unhealthy Alcohol Use in Primary Care	A qualitative study that examines primary care patients' reasons for engagement with, experience with, and acceptability of a primary care practice-based program for treating UAU	O'Grady MA, et al., 2021[120]	Journal Article
The Impact of Brief Alcohol Interventions in Primary Healthcare: A Systematic Review of Reviews	Twenty-four systematic reviews supporting the effectiveness of brief interventions for UAU in primary care; concludes that additional research is needed across different cultural settings and among specific population groups	O'Donnell A, et al., 2014[121]	Journal Article
Implementing Adolescent SBIRT: Findings from the FaCES Project	Evaluates the implementation of adolescent SBI/RT in 13 different primary care clinics, which involved training and technical assistance and incorporated use of the EHR To access, copy and paste the following URL: *https://www.tandfonline.com/doi/full/10.1080/08897077.2020.1846662*	Soberay A, et al., 2021[122]	Journal Article
Implementing Alcohol Screening and Brief Intervention in Primary Care: Identifying Barriers, Proposing Solutions	Identifies barriers to widespread implementation of SBI and proposes potential solutions To access, copy and paste the following URL: *https://ascpjournal.biomedcentral.com/articles/10.1186/1940-0640-10-S1-A24*	Johnson AJ, and Seale JP, 2015[123]	Journal Article
The Importance of Alcohol Screening, Brief Intervention, and Referral to Treatment in Closing the Alcohol Use Disorder Treatment Gap	Provides research and support for the use of alcohol SBIRT, by providers across the health care spectrum to prevent or reduce alcohol misuse among their patients	NIAAA Spectrum, 2023	Report/Paper/Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Integrating Alcohol-Related Prevention and Treatment Into Primary Care: A Cluster Randomized Implementation Trial	Describes the intervention from the Sustained Patient-Centered Alcohol-Related Care (SPARC) trial and the increases in screening and brief intervention as a result of the trial. It does not include alcohol use disorder treatment engagement in primary care	Lee AK, et al., 2023[124]	Journal Article
Missouri Screening, Brief Intervention, Referral and Treatment: An Analysis of National Funding Trends for SBI Services	Describes the implications of SBI/RT in primary care for healthcare costs, including the potential savings that may result	Missouri Institute of Mental Health, revised 2014	Report/Paper/Issue Brief
Patient-Level Interventions to Reduce Alcohol-Related Harms in Low- and Middle-Income Countries: A Systematic Review and Meta-Summary	Systematic review examining literature on interventions and their efficacy in reducing alcohol use in low- and middle-income countries, with brief interventions and motivational interviewing techniques having the most consistently positive impact on patient outcomes	Staton CA, et al., 2022125	Journal Article
Potential Cost Savings Associated with Providing Screening, Brief Intervention, and Referral to Treatment for Substance Use Disorder in Emergency Departments	Report concludes that offering SBI/RT in emergency department settings produces overall cost savings	Urban Institute, 2018	Report/Paper/Issue Brief
The Practice Gap: National Estimates of Screening and Counseling for Alcohol, Tobacco, and Obesity	Estimates screening rates for obesity, tobacco, and alcohol misuse, and makes recommendations for primary care practices to increase screening	Shafer PR, et al., 2019[126]	Journal Article
Practice Innovation Program Colorado – Resource Hub	Website with various resources and tools from the University of Colorado Department of Family Medicine to support practice change and innovation	Practice Innovation Program Colorado, 2019	Website
Prevalence and Correlates of Positive Follow-up Screens in Primary Care for Unhealthy Alcohol and Other Drug Use After a Negative Screen	Aims to determine the proportion and characteristics of adults in primary care who screen positive for unhealthy substance use one or more years after screening negative	Alford DP, et al., 2021[127]	Journal Article
Program Evaluation on the Use of the Screening, Brief Intervention and Referral to Treatment (SBIRT) Process in Primary Care Physician Offices	Describes results of a program evaluation conducted with thousands of primary care physician practices in the State of Pennsylvania, recommending that practices identify SBI/RT resources and support, conduct roundtable discussions with physicians, and establish SBI/RT champions within their practice	Sanchez-Navarro L, 2021[128]	Journal Article
A Randomized Clinical Trial of the Health Evaluation and Referral Assistant (HERA): Research Methods	Summarizes a randomized clinical trial of the Health Evaluation and Referral Assistant (HERA) web-based program for facilitating SBI/RT for alcohol and other drug use	Boudreaux ED, et al., 2013[129]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Remote Brief Intervention and Referral to Treatment for Alcohol	A pilot, non-inferiority study designed to see if Remote Brief Intervention and Referral to Treatment (R-BIRT) is just as successful at lowering drinking as SBI/RT, while increasing the number of patients seen, decreasing costs, and maintaining efficacy of the intervention	Courteau B, 2019[130]	Journal Article
The Remote Brief Intervention and Referral to Treatment Model: Development, Functionality, Acceptability, and Feasibility	Exploratory study that examines the feasibility of a new R-BIRT model	Boudreaux ED, et al., 2015[131]	Journal Article
Resources for Screening, Brief Intervention, and Referral to Treatment (SBIRT)	Updated resources, including guides and tools from SAMHSA, for practitioners related to SBIRT	SAMHSA, 2022	Website
SAMHSA-HRSA Center for Integrated Health Solutions SBIRT	Website with a variety of SBI/RT tools and resources covering various topics such as basic overviews, implementation in healthcare settings, and specific populations	SAMHSA-HRSA CIHS, n.d.	Website
SBIRT Colorado Website	Includes training and technical assistance tools and a variety of resources for clinicians on SBI/RT and medication-assisted therapy (MAT) for alcohol use	SBIRT Colorado, n.d.	Website
SBIRT Oregon Website	Website with information and tools to address SBI/RT barriers to implementation; serves as a resource for primary care clinics and emergency departments throughout Oregon and the United States	Department of Family Medicine at Oregon Health and Science University, 2019	Website
SBIRT-Plus: Adding Population Health Innovations to Enhance Alcohol Screening and Brief Intervention Effectiveness	Describes the benefits of SBIRT-Plus, which is focused on increasing the reach of SBI/RT by aiming for systems-level changes and benefits on a broader population scale	Babor T, 2021[132]	Journal Article
Screening, Behavioral Counseling, and Referral in Primary Care to Reduce Alcohol Misuse: Comparative Effectiveness Review Executive Summary	Systematic review on screening and behavioral counseling for alcohol misuse in primary care settings that concludes behavioral counseling improves intermediate outcomes	AHRQ, 2012	Report/Paper/Issue Brief
Screening and Brief Intervention for Substance Use Disorders in Times of COVID-19: Potential Opportunities, Adaptations, and Challenges	Discusses how the COVID-19 pandemic has challenged implementation of screening and brief intervention, and identifies potential opportunities to use SBI to further identify and treat substance use disorders	Ghosh A, et al., 2021[133]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
Screening for Unhealthy Alcohol and Drug Use in General Medicine Settings	Article with recommendations for implementation of screening for unhealthy alcohol use in primary care settings, including the use of patient screening tools and integration with electronic health record systems	McNeely J, et al., 2022[134]	Journal Article
A Sound Investment: Identifying and Treating Alcohol Problems	Describes expense and potential cost savings of screening for and treating UAU	George Washington University Medical Center, 2003	Report/Paper/Issue Brief
Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Healthcare	Discusses the evidence for using SBI/RT for different behavioral health conditions, including UAU, illicit drugs, tobacco, depression, and anxiety disorders	SAMHSA, 2011	Report/Paper/Issue Brief
Strategies to Promote the Implementation of Screening, Brief Intervention, and Referral to Treatment (SBIRT) in Healthcare Settings: A Scoping Review	Reviews the literature on SBI/RT interventions in emergency department and primary care settings, finding that the most used strategies include educating stakeholders and developing relationships. The findings indicate increase in screening but unclear evidence on brief intervention	Thoele K, et al., 2021[135]	Journal Article
The STUN (STop UNhealthy) Alcohol Use Now Trial: Study Protocol for an Adaptive Randomized Trial on Dissemination and Implementation of Screening and Management of Unhealthy Alcohol Use in Primary Care	Describes the study protocol for an AHRQ grantee's UAU intervention and evaluation that includes practice facilitation, quality improvement (QI) coaching, EHR support, training, and expert consultation	Jonas DE, et al., 2021[136]	Journal Article
Substance Use Screening, Brief Intervention, and Referral to Treatment Among Medicaid Patients in Wisconsin: Impacts on Healthcare Utilization and Costs	Examines the association between providing SBI/RT and healthcare costs, demonstrating that SBI/RT was associated with a savings of $391 per Medicaid beneficiary	Paltzer J, et al., 2017[137]	Journal Article
Sustaining SBIRT in the Wild: Simulating Revenues and Costs for Screening, Brief Intervention and Referral to Treatment Programs	Examines the conditions under which SBI/RT programs can be sustained by health insurance payments	Cowell AJ, et al., 2017[138]	Journal Article
A Taxonomy for External Support for Practice Transformation	Describes a taxonomy of key domains that characterize external support interventions that could be used by both external groups or researchers and healthcare leaders	Solberg LI, et al., 2021[139]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
8. SBI/RT Websites and Literature			
University of Missouri – Kansas City SBIRT Website	Offers tools and educational resources for clinicians and patients as well as trainings and videos for various audiences	University of Missouri Kansas City, School of Nursing and Health Studies, n.d.	Website
Use of Non-Face-to-Face Modalities for Emergency Department Screening, Brief Intervention, and Referral to Treatment (ED-SBIRT) for High-Risk Alcohol Use: A Scoping Review	Examines strategies reported in emergency department-based SBI/RT studies that employ non-face-to-face (nFtF) modalities for high-risk alcohol use	Biroscak BJ, et al., 2019[140]	Journal Article
WHO Alcohol, Drugs, and Addictive Behaviours Unit	Contains basic statistics and links to various resources on the WHO's efforts to reduce UAU	WHO, n.d.	Website
Reducing Alcohol and Opioid Use Among Youth in Rural Counties: An Innovative Training Protocol for Primary Health Care Providers and School Personnel	The aim of this study was to train primary care providers and school nurses within a rural 10-county catchment area in Pennsylvania to use SBI/RT and facilitate collaboration with community organizations to better coordinate substance use prevention efforts	Francis E, et al., 2020[141]	Journal Article
Screening and Behavioral Counseling Interventions in Primary Care to Reduce Unhealthy Alcohol Use in Adolescents and Adults: Updated Systematic Review for the U.S. Preventive Services Task Force	Literature review on the effectiveness and harms of screening and counseling for UAU, specifically focusing on test accuracy studies and randomized clinical trials, to inform the USPSTF	O'Connor EA, et al., 2018[142]	Journal Article
Technology-Based Alcohol Interventions in Primary Care: Systematic Review	Reviews studies exploring the use of technology to deliver or support the implementation of interventions targeting alcohol use in primary care	Ramsey AT, et al., 2019[143]	Journal Article

*n.d. = No date indicated on resource

II. Medication-Assisted Therapy

The **Clinical Practice Guidelines** section includes clinical practice guidelines and related resources for clinicians on the pharmacological treatment of AUDs, guidance for treating those with co-occurring conditions and disorders, and information on the risks associated with medications.

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Clinical Practice Guidelines			
The American Psychiatric Association Practice Guideline for the Pharmacological Treatment of Patients with Alcohol Use Disorder	Practice guidelines on the assessment, treatment, and pharmacotherapy for AUD as well as co-occurring opioid use disorder and other co-occurring conditions	APA, 2018	Guide
Prescribing Medications for Alcohol Dependence	Excerpt from the NIAAA's clinician guide on medications used to treat AUD	NIAAA, 2008	Guide

The **Practice Organization Implementation** section includes organization-level guidance for leadership (e.g., administrative and clinical) to consider as they implement and/or expand their Medication-Assisted Therapy (MAT) services.

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Practice Organization Implementation			
Considerations for Crisis Centers and Clinicians in Managing the Treatment of Alcohol or Benzodiazepine Withdrawal during the COVID-19 Epidemic: March 19, 2020	Provides guidance on MAT for UAU, specifically on benzodiazepines, during the COVID-19 pandemic	SAMHSA, 2020	Fact Sheet/Brochure
Expanding the Use of Medications to Treat Individuals with Substance Use Disorders in Safety-Net Settings Creating Change on the Ground: Opportunities and Lessons Learned from the Field	Includes lessons learned from a pilot project to expand MAT in six sites across three States; focuses on improving understanding among providers on how to best implement MAT in primary care, substance use, and community mental health programs	SAMHSA-HRSA CIHS, 2014	Report/Paper/Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Practice Organization Implementation			
How to Integrate Pharmacotherapy for Substance Use Disorders at Your Mental Health Clinic	Provides a step-by-step guide for introducing pharmacotherapy for co-occurring mental health and substance use disorders, including a workflow map and roles and responsibilities for all team members, including primary care	RAND Corporation, 2021	Toolkit
Medication-Assisted Treatment Implementation Checklist	Provides policymakers, State, and local officials, and other community stakeholders with key questions to consider before engaging in efforts to increase access to MAT for addiction in their communities	SAMHSA, n.d.*	Instrument/Protocol
Use of Telemedicine While Providing Medication Assisted Treatment MAT	Discusses policies related to using telemedicine for providing MAT	U.S. Department of Justice, 2018	Fact Sheet/Brochure

The **Billing and Reimbursement** section includes billing and reimbursement policy information to support practices in implementing and sustaining MAT services.

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Billing, Reimbursement Policies			
Documentation & Charge Capture Process: MAT	Provides information on how to best address intake, billing, and coding procedures in community health centers, which are critical aspects in positive patient outcomes	PCSS; National Association of Community Health Centers, 2018	Report/Paper/Issue Brief
Financing Factors for Implementing Medication-Assisted Treatment	Part 3 of a 3-part webinar series focused on the successful implementation of MAT within an organization; focuses on considerations related to financing and reimbursement of MAT	PCSS; National Council for Behavioral Health, 2017	Webinar/Video
Getting Paid for MAT: Sustainable Reimbursement Series	Webinar series with resources and trainings related to administering and reimbursement for medications for addiction treatment, including reimbursement for telehealth for substance use disorders	UCLA Integrated Substance Abuse Programs; Pacific Southwest ATTC, 2020	Webinar/Video
Health Insurance Parity for Alcohol-Related Treatment	Provides State-level information on laws addressing requirements that health plans provide the same levels of benefits for alcohol-related disorders as they do for medical and surgical conditions	NIAAA Alcohol Policy Information System, n.d.	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Billing, Reimbursement Policies			
Medicaid Coverage and Financing of Medications to Treat Alcohol and Opioid Use Disorders	Presents information about Medicaid coverage of MAT for opioid and alcohol dependence; covers treatment and cost-effectiveness and includes examples of innovative approaches in Vermont, Massachusetts, and Maryland	SAMHSA, 2014	Report/Paper/Issue Brief
Reimbursement for Medications for Addiction Treatment Toolkit	Toolkit that outlines how providers can bill for treating patients with substance use disorder with medications, including patients with alcohol use disorder	ASAM; PCSS, 2021	Toolkit
Report to Congress: Utilization Management of Medication-Assisted Treatment in Medicaid	Report to Congress describing different options for MAT for substance use disorders, Federal and State policies outlining Medicaid coverage for MAT across the United States, and summarizing utilization of MAT among Medicaid beneficiaries	Medicaid and CHIP Payment and Access Commission, 2019	Report/Paper/ Issue Brief

The **Workforce Development** section includes manuals, practice guides, and other resources for clinicians to develop and strengthen their MAT capabilities. A few resources offer continuing education credits for medical providers and other health professionals.

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Manuals, Guides, Fact Sheets			
Alcohol Use Disorder: Pharmacologic Management	Reviews literature on medications for alcohol use disorder, including naltrexone, acamprosate, disulfiram, topiramate, and gabapentin To access, copy and paste the following URL: *https://www.uptodate.com/contents/alcohol-use-disorder-pharmacologic-management?topicRef=14832&source=related_link#H1*	UpToDate; Holt SR, et al., 2023	Guide
A Video- and Case-Based Curriculum on the Management of Alcohol Use Disorder for Internal Medicine Residents	Discusses a curriculum developed to teach internal medicine residents about the proper management of AUD, finding that its implementation improved knowledge, attitudes, and confidence in AUD treatment. The curriculum is available for download	Association of American Medical Colleges (AAMC); Spinella SA, et al., 2022[144]	Curriculum

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Alcohol Use Disorder: Expanding Successful Treatment in Primary Care and Beyond	Presents information about AUD, medications used to treat AUD, and how AUD can be identified and treated in primary care	CareOregon, 2020	Other
Alcohol Use Disorders Fact Sheet	Provides an overview for quick reference on medications for AUDs for practice staff, including how it works, how to take it, and potential side effects	Opioid Response Network, n.d.	Fact Sheet/Brochure
Alcohol Use Disorders in Women	Presents information on AUDs in women, including alcohol and pregnancy, management of AUD, and screening and diagnosis	Wakhlu S, 2020	Curriculum
Quick Guide for Physicians Based on TIP 49: Incorporating Alcohol Pharmacotherapies into Medical Practice	Guides physicians in the use of medications to help patients abstain from alcohol use; describes how medications work, whom they benefit, and side effects for three Food and Drug Administration (FDA)-approved medications: acamprosate, disulfiram, and naltrexone	SAMHSA, 2010	Guide
MAT Medications, Counseling, and Related Conditions	Information and resources about medication-assisted treatment for substance use disorders, including most commonly used medicines and behavioral therapies	SAMHSA, 2022	Website
MAT Resources for FQHC Providers	Resources and documents to support providers in FQHCs with implementing medications for substance use treatment, including alcohol use. Includes sample workflows and templates, patient treatment agreements, clinical tools, procedures, and policies	Nevada Primary Care Association (NVPCA), 2021	Website
Medication for the Treatment of Alcohol Use Disorder: A Brief Guide	Summarizes clinical practice guidance on medications for treatment of AUDs, including approved medications, ideal candidates, contraindications, and use in pregnant women	NIAAA; SAMHSA, 2015	Guide
Medication for the Treatment of Alcohol Use Disorder: Pocket Guide	Briefly summarizes clinical practice guidelines on medications for treatment of AUDs; includes a checklist for prescribing medication, lists approved medications for use in treatment of AUD, and describes standard drink amounts and recommended limits	NIAAA; SAMHSA, 2015	Guide
Medications for Substance Use Disorders (SAMHSA)	Overview of resources that provide information about how medications can be used to treat substance use disorders and prevent overdose, including FDA-approved medications for the treatment of alcohol use disorders	SAMHSA, 2023	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Medications for the Treatment of Alcohol Use Disorder	Provides high-level overview of MAT for AUD, including descriptions and potential side effects of acamprosate, disulfiram, naltrexone, and topiramate	VA; DoD, 2016	Fact Sheet/Brochure
Medical Management Treatment Manual: A Clinical Guide for Researchers and Clinicians Providing Pharmacotherapy for Alcohol Dependence (Generic Version; 2010 Ed.)	Adaptation of the original 2004 guide that encourages the use of medical management when treating AUDs in clinical pharmacotherapy research and clinical settings	NIAAA, 2010	Guide
Medical Management Treatment Manual: Clinical and Research Guide for Medically Trained Clinicians Providing Pharmacotherapy as Part of the Treatment for Alcohol Dependence	Clinical research guide for medically trained clinicians to support delivery of pharmacotherapy as part of treatment for alcohol dependence	NIAAA, 2004	Guide
Overview of Medications Used in the Treatment of Alcohol Use Disorder and Frequently Asked Questions	Provides information and answers to common questions primary care clinicians may have about medications prescribed for the treatment of alcohol use disorder	AHRQ, 2023	Fact Sheet/Brochure
Pharmacotherapy for Adults With Alcohol Use Disorder (AUD) in Outpatient Settings: Clinician Summary	Summarizes the evidence regarding the efficacy, comparative effectiveness, and adverse effects of medications in adults with AUD	AHRQ, 2016	Report/Paper/Issue Brief
Pharmacotherapy for Adults With Alcohol-Use Disorders in Outpatient Settings: Systematic Review Update	An update to AHRQ's systematic review protocol on outpatient pharmacotherapy for adults with alcohol use disorder in April 2022	AHRQ, 2022	Report/Paper/Issue Brief
Pharmacotherapy for Alcohol and Opioid Use Disorders	Presents information on the three approved medications for AUD treatment, including their adverse effects, dosing regimens, and mechanisms for action; includes information on MAT for opioid use disorder	Kunz K, 2020	Curriculum
Prescribing Pharmacotherapies for Patients With Alcohol Use Disorder	One of SAMHSA's series of advisories based on TIP 49, Incorporating Alcohol Pharmacotherapies Into Medical Practice, which provides an overview of medications for treatment of AUD	SAMHSA, 2020	Guide
Principles of Drug Addiction Treatment: A Research-Based Guide (Third Ed.)	Lists principles of drug addiction treatment for several types of substances, including alcohol; has sections for frequently asked questions and evidence-based treatment options in the United States	NIDA, 2018	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Quick Guide: MAT Use for Alcohol Use Disorder	Outlines the three FDA-approved medications for AUD, including common brands, how they work, things to consider before prescribing, and questions to ask patients before prescribing it	Harbage Consulting, California Department of Health Care Services (DHCS), 2019	Guide
SUMMIT: Procedures for Medication-Assisted Treatment of Alcohol or Opioid Dependence in Primary Care	Provides an introduction to identifying and treating patients with substance use disorders in primary care settings, including the approach primary care providers (PCPs) should take in discussing alcohol or opiate dependence with their patients; includes a reference guide for PCPs administering buprenorphine/naloxone to patients with opioid dependence	RAND Corporation, 2016	Guide
Treating Concurrent Substance Use Among Adults	A guide intended to educate clinicians and other stakeholders about the harms of using more than one substance and considerations for addressing patients' concurrent substance use and concurrent substance use disorders	SAMHSA, 2021	Guide
Treatment of Alcohol Use Disorder	Includes an infographic guide on the benefits of three medications for AUD and provides a brief summary of treatment planning and medications approved by the FDA To access, copy and paste the following URL: *https://jamanetwork.com/journals/jama/fullarticle/2776202*	Patel AK, et al., 2021[145]	Journal Article
Training Programs, Courses, Videos			
Bringing Alcohol and Other Drug Research to Primary Care	Trains providers on evidence-based treatment options for alcohol, nicotine, and opioid use disorders; offers 2 CME credits	Baylor College of Medicine, 2022	Web-Based Course
Going to the MAT with Doctor Williams: Duration of Medication Assisted Treatment	Presents information about evidence related to the duration and process for MAT and how it can benefit patients with substance use disorders To access, copy and paste the following URL: *https://www.youtube.com/watch?v=yZ7oeFSUB7E*	National Council for Behavioral Health, 2016	Webinar/Video
The Ins and Outs of Medication-Assisted Treatment and Recovery for Alcohol Dependence	Webinar that provides information about how pharmacotherapy can help support evidence-based treatment practices for alcohol dependence; reviews myths, opinions, and biases and the environment of addiction treatment; compares the four FDA-approved pharmacotherapies for alcohol dependence; enables participants to receive 1.5 continuing education credits	NAADAC, the Association for Addiction Professionals, 2013	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
4. Workforce Development			
Medication and Behavioral Treatment of Substance Use Disorders	Introduces evidence-based clinical practices of pharmacotherapy and behavioral treatments for substance use disorders. Off-label medications and psychosocial support programs are also discussed; offers 1 CME credit	PCSS, 2021	Web-Based Course
Medications Development Program	Webpage that includes information about MAT for AUDs and describes the three FDA-approved drugs for treatment of AUD; includes links to other information and resources for MAT	NIAAA, 2017	Website
Medications for Alcohol and Drug Use Disorders 101: The Science of Medication Treatment	Summarizes MAT as an effective tool in treating AUD and reviews specific medications approved for MAT for AUD	PCSS, 2020	Webinar/Video
Medication Assisted Treatment for Alcohol and Opioid Use Disorder	Training by SBIRT Colorado designed for Colorado Medicaid providers that reviews MAT for alcohol and opioid use disorders, including definitions of MAT, substance use disorder, AUD, and Federal laws related to MAT in clinical care To access, copy and paste the following URL: *https://www.youtube.com/watch?v=LOXnrld_elw*	SBIRT Colorado, 2016	Webinar/Video
Module 4: Pharmacotherapy for Alcohol Use Disorder	Describes and compares pharmacological treatment options for individuals with AUD, including FDA-approved medications acamprosate, disulfiram, and naltrexone, as well as two other evidence-based treatments that are not yet FDA approved, topiramate and gabapentin; includes diagnosis of AUD, definitions of binge drinking and at risk drinking, and a case vignette; up to one AMA PRA Category 1 Credit™ for continuing education	PCSS, 2019	Web-Based Course
Module 10: Mutual-Help and Related Clinical Interventions	Describes 12-step programs and how providers can help their patients get to and best use these programs, including patients taking medications for substance use disorder; up to one AMA PRA Category 1 Credit™ for continuing education	PCSS, 2019	Web-Based Course
Webinar: Management of Alcohol Use Disorder	Defines the spectrum of UAU and compares therapeutic approaches, focusing on pharmacological treatment options while also providing strategies for managing withdrawal, an especially important issue during COVID-19	National Clinician Consultation Center, 2020	Webinar/Video

The **Relevant Literature** section includes systematic reviews that explore the efficacy and safety of different FDA-approved medications used for MAT for patients with AUD.

Title	Brief Description	Publisher/Author, Year	Format(s)
5. Relevant Literature			
Advantages and Disadvantages of Disulfiram Co-administered with Popular Addictive Substances	Reviews the current knowledge about disulfiram for the treatment of alcohol and other substances, including its potential interactions with alcohol, cocaine, cannabinoids, and opioids	Kleczkowska P, et al., 2021[146]	Journal Article
Alcohol Use Disorder: The Role of Medication in Recovery	Reviews the FDA-approved and off-label medications for the treatment of AUD, concluding that medication should be used in conjunction with behavioral therapy and that there is a need for continued development of pharmacotherapies for AUD	Mason BJ, et al., 2021[147]	Journal Article
Cost-Effectiveness of Alcohol Use Treatments in Patients with Alcohol-Related Cirrhosis	Suggests that alcohol use treatment for patients with alcohol-related cirrhosis of the liver, such as counseling and medication-assisted therapies, can improve outcomes and are cost-effective	Avancena ALV, et al., 2021[148]	Journal Article
Disulfiram [In: StatPearls]	Provides an overview of disulfiram for alcohol use, including indications, mechanism of action, administration, adverse effects, contraindications, and how to use it within an interprofessional health care team	Stokes M, et al., 2021[149]	Other
Effect of Extended-release Naltrexone on Alcohol Consumption: A Systematic Review and Meta-analysis	Reviews seven trials on naltrexone use for AUD, finding that it reduces drinking days and heavy drinking days per month, with longer duration of treatment associated with larger reductions	Murphy CE 4th, et al., 2021[150]	Journal Article
Efficacy and Safety of Naltrexone and Acamprosate in the Treatment of Alcohol Dependence: A Systematic Review	Reviews the efficacy and safety of naltrexone and acamprosate in the treatment of alcohol dependence	Bouza C, et al., 2004[151]	Journal Article
Efficacy of Extended-Release Injectable Naltrexone on Alcohol Use Disorder Treatment: A Systematic Review	Reviews literature on naltrexone, concluding that it leads to reduced drinking although often not complete abstinence	Kedia SK, et al., 2022[152]	Journal Article
Evaluation of Spin in the Abstracts of Systematic Reviews and Meta-Analyses Focused on Treatments of Alcohol Use Disorder	Evaluates the presence of "spin," a biased way of reporting results, in the abstract of systematic reviews of pharmacotherapy for alcohol use disorder, finding "spin" in more than 40% of the abstracts identified, something physicians should be aware of	Verble C, et al., 2021[153]	Journal Article
Evidence Based Models of Care for the Treatment of Alcohol Use Disorder in Primary Health Care Settings: A Systematic Review	Reviews 11 studies on the use of medication for AUD in primary care, concluding that models of care that treat AUD in primary care can increase the uptake of treatment	Rombouts SA, et al.,2020[154]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
5. Relevant Literature			
First-Line Medications for the Outpatient Treatment of Alcohol Use Disorder: A Systematic Review of Perceived Barriers	Systematic review exploring barriers for using medications for alcohol use disorder in outpatient clinical settings, showing that providers continue to lack knowledge about the use of medications and continue to experience stigma and barriers related to accessing medications	Gregory C, et al., 2021[155]	Journal Article
How Do You Effectively Evaluate the Elderly for Alcohol Use Disorder?	Discusses the prevalence and associated health problems of AUD among older adults, as well as screening and treatment options, including naltrexone, acamprosate, and disulfiram	Fagbemi M, 2021[156]	Journal Article
Implementation of Oral and Extended-Release Naltrexone for the Treatment of Emergency Department Patients With Moderate to Severe Alcohol Use Disorder: Feasibility and Initial Outcomes	Study exploring implementation of a protocol in the emergency department where patients who were discharged with alcohol use disorder received naltrexone and support for substance use	Anderson ES, et al., 2021[157]	Journal Article
Medicines To Treat Alcohol Use Disorder: Consumer Summary	Provides information to consumers on medicines to treat alcohol use disorder	AHRQ, 2016	Report/Paper/Issue Brief
Myths and Misconceptions of Medication-Assisted Treatment	Discusses the myths and misconceptions of medication-assisted treatment for individuals with a substance use disorder	PCSS, 2016	Website
Naltrexone Initiation in the Inpatient Setting for Alcohol Use Disorder: A Systematic Review of Clinical Outcomes	Reviews the literature and data on outcomes for medication-assisted treatment for alcohol use disorder in inpatient settings using naltrexone	Kirchoff RW, et al., 2021[158]	Journal Article
New Approved and Emerging Pharmacological Approaches to Alcohol Use Disorder: A Review of Clinical Studies	A review of the literature on clinical trials on pharmacotherapies for alcohol use disorder, noting that topiramate and gabapentin have been used and that baclofen and nalmefene have been approved in some other countries	Morley KC, et al., 2021[159]	Journal Article
Novel Agents for the Pharmacological Treatment of Alcohol Use Disorder	Qualitative literature review that discusses disulfiram, acamprosate, naltrexone, nalmefene, topiramate, gabapentin, and several other medications for the treatment of alcohol use disorder, which have demonstrated some clinical effectiveness	Burnette EM, et al., 2022[160]	Journal Article
Pharmacotherapies for Adults With Alcohol Use Disorders: A Systematic Review and Network Meta-Analysis	Systematically reviews 156 trials, finding the best evidence of effectiveness for acamprosate, disulfiram, baclofen, and oral naltrexone among patients with alcohol use disorder supporting the expanded use of these medications in the clinical setting	Bahji A, et al., 2022[161]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
5. Relevant Literature			
Pharmacotherapy for Adults With Alcohol Use Disorder in Outpatient Settings: Policymaker Summary	Summarizes research evaluating the efficacy, comparative effectiveness, and adverse effects of medications in adults with AUD	AHRQ, 2016	Report/Paper/Issue Brief
Pharmacotherapy for Adults with Alcohol Use Disorders in Outpatient Settings: A Systematic Review and Meta-analysis	Systematic review and meta-analysis of the efficacy, comparative effectiveness, and harms of medications (both FDA approved and others) for adults with AUDs; evaluates evidence from primary care settings	Jonas DE, et al., Agency for Healthcare Research and Quality, 2014[162]	Report/Paper/Issue Brief
Rates of Discontinuation and Non-Publication of Trials for the Pharmacologic Treatment of Alcohol Use Disorder	Identifies clinical trials on medication-assisted treatment for alcohol use disorder from ClinicalTrials.gov, finding that 12.6% involving pharmaceutical treatment were prematurely terminated and 39.1% had not published results	Hartwell M, et al., 2022[163]	Journal Article
Substance Use (VA)	Provides information for patients about substance use treatment options available through the VA medical centers, including cognitive behavioral therapy, motivational interviewing, motivational enhancement therapy, and medications	VA, n.d.	Website
The Place of Pharmacotherapy in Alcohol Use Disorder Management in Family Practice - A Systematic Review	Reviews the use of disulfiram, acamprosate, and naltrexone for AUD in primary care, and concludes that the knowledge and prescription of pharmacotherapy for AUD is insufficient	Morgane GL, et al., 2021[164]	Journal Article
Treatment Interventions to Maintain Abstinence from Alcohol in Primary Care: Systematic Review and Network Meta-analysis	Reviews 64 trials of alcohol use treatment in primary care, finding that Acamprosate is the only intervention with moderate confidence associated with increased abstinence	Cheng H, et al., 2020[165]	Journal Article
Trends in the Use of Naltrexone for Addiction Treatment Among Alcohol Use Disorder Admissions in U.S. Substance Use Treatment Facilities	Study looking at the use of naltrexone for alcohol use disorder in substance use treatment facilities, showing that naltrexone is more commonly prescribed compared with acamprosate and disulfiram but that it remains underused	Qeadan F, et al., 2021[166]	Journal Article
#VisualAbstract: Acamprosate Found an Effective and Tolerable Interventions for Alcohol Dependence To access, copy and paste the following URL: *https://www.2minutemedicine.com/visualabstract-acamprosate-found-an-effective-and-tolerable-interventions-for-alcohol-dependence/*	Visually demonstrates results of a meta-analysis demonstrating that acamprosate was associated with increased odds of abstinence from alcohol	Wu C, 2020[167]	Other

Title	Brief Description	Publisher/Author, Year	Format(s)
5. Relevant Literature			
[What Can Primary Care Services Do to Help First Nations People with Unhealthy Alcohol Use? A Systematic Review: Australia, New Zealand, USA and Canada](#)	Reviews 28 studies about alcohol treatments delivered in primary care settings, finding that trials of naltrexone and disulfiram had positive results, but that more studies are needed to assess the effectiveness of the full scope of alcohol treatment	Purcell-Khodr GC, et al., 2020[168]	Journal Article

*n.d. = No date indicated on resource

III. Primary Care and Behavioral Health Services Integration

The **Primary Care and Behavioral Health Services Integration** section includes materials focused on primary care and behavioral health services integration. Guidebooks, websites, and journal articles listed below offer strategies and considerations for primary care and behavioral health stakeholders to support successful services integration implementation.

Title	Brief Description	Publisher/Author, Year	Format(s)
Advancing Behavioral Health Integration in Health Centers	Provides policy recommendations to reduce barriers to integrating behavioral health services in health centers	National Council for Mental Wellbeing; National Association of Community Health Centers, 2020	Report/Paper/Issue Brief
Advancing Integration of General Health in Behavioral Health Settings: A Continuum-Based Framework	Presents a framework with specific steps to help behavioral health clinics implement primary care services that aim to improve overall patient health and well-being	Montefiore Care Management; The New York Community Trust; National Council for Mental Wellbeing, 2020	Report/Paper/Issue Brief
AHRQ's Behavioral Health Topic Page	A web page highlighting AHRQ's Unhealthy Alcohol Use and other resources to assist with the prevention and treatment of behavioral health problems in primary care settings, including data to quantify these challenges, tools and resources for screening and treatment, and funding for behavioral health research	AHRQ, 2022	Website
Behavioral Health and Primary Care Integration	Includes information and resources related to behavioral health and primary care integration efforts by the HRSA, including grant funding, technical assistance, and training	HRSA Health Center Program, 2021	Website
Behavioral Health and Primary Care Integration in Rural Health Facilities: Policy Brief and Recommendations to the Secretary	Offers policy recommendations for increasing behavioral health and primary care integration in rural areas. Recommendations include access, workforce recruitment and retention, telehealth and technology, and reimbursement	National Advisory Committee on Rural Health and Human Services (NACRHHS), 2022	Report/Paper/Issue Brief
Behavioral Health in Rural America: Challenges and Opportunities	Presents challenges and opportunities for improving behavioral health (including AUD) in rural communities, with examples of ways to better integrate behavioral health and primary care. Also presents several examples of policies for addressing behavioral health disorders	Rural Policy Research Institute, 2019	Report/Paper/Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
Behavioral Health Integration Compendium	Provides tools and resources for clinicians, staff, and organizations working to implement behavioral health integration in practices to deliver person-centered care	American Medical Association, 2020	Report/Paper/Issue Brief
Behavioral Health Integration into Primary Care: Expand Patient Access to Behavioral and Mental Health Services and Improve Patient Care	Provides steps and actions to integrate behavioral care into primary care, including ways to implement in practices; offers continuing medical education credit	AMA, 2021	Toolkit
Behavioral Health Integration Services	Offers guidance on updated descriptions from the CMS of most commonly used reimbursement codes for behavioral health integration services	CMS, 2023	Fact Sheet/Brochure
Behavioral Health Integration Webinar Series: Quantifying the Impact	Part of a webinar series featuring sustainable strategies for primary care practices working to integrate behavioral health during the COVID-19 pandemic	American Medical Association, 2020	Webinar/Video
Behavioral Health Toolkit for Primary Care Physicians	Compiles links to resources, tools, and information sheets aimed at helping primary care physicians integrate behavioral health services into patient care To access, copy and paste the following URL: *https://hbcbs.highmarkprc.com/Education-Manuals/Behavioral-Health-Toolkit-for-Primary-Care-Physicians*	Blue Cross and Blue Shield Association, 2021	Website
The Building Blocks of Behavioral Health Integration	Introduces framework for integrating behavioral health in primary care, with information to help support payers, providers, and improved outcomes for patients	Gold SB, et al., 2022	Report/Paper/Issue Brief
California Improvement Network Toolkit: Three Strategies to Help Primary Care Teams Treat Substance Use Disorders	Offers best practices and tools for primary care organizations to incorporate substance use disorder into their treatment services	California Improvement Network, 2019	Guide
Caring for People With Mental Health and Substance Use Disorders in Primary Care Settings: Proceedings of a Workshop	Summarizes discussions from a 2020 workshop exploring challenges and opportunities for providing care for people with mental health and substance use disorders in primary care settings	National Academies of Sciences, Engineering, and Medicine (NASEM), 2020	Report/Paper/Issue Brief
Center of Excellence for Integrated Health Solutions Resources	Provides resources for assessing organizational readiness, building the business case, and workforce development for integrating primary care and behavioral health	National Council for Behavioral Health, n.d.*	Website
Coding for Behavioral Health Integration Services	Provides information about coding for payment and reimbursement of behavioral health integration (BHI) services, including general BHI and collaborative care management	AAFP, n.d.	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
Combating a Crisis by Integrating Mental Health Services and Primary Care	Describes the needed paradigm shift towards behavioral health integration with primary care and discusses key policy and financing challenges to behavioral health integration	Harmon GE, et al., Health Affairs, 2022	Report/Paper/Issue Brief
Designing, Implementing and Sustaining Physical Health-Behavioral Health Integration: The Comprehensive Healthcare Integration Framework	Framework that guides the implementation of integration of physical and behavioral health for all child and adult populations. Framework can be used by any provider in a broad range of settings and organizations	National Council for Mental Wellbeing, 2022	Report/Paper/Issue Brief
Ensuring Access to Behavioral Health Care: Making Integrated Care a Reality	Invited testimony to the U.S. Senate Finance Committee during the hearing on "Behavioral Health Care When Americans Need It: Ensuring Parity and Care Integration" about making behavioral health services accessible to Americans, including care for substance use and alcohol use disorders	The Commonwealth Fund; Williams RD, 2022	Report/Paper/Issue Brief
Fact Sheet: President Biden to Announce Strategy to Address Our National Mental Health Crisis, As Part of Unity Agenda in His First State of the Union	Statement from the White House that describes the President's strategy to address the national mental health crisis by strengthening the healthcare system, connecting more people to mental health care, and transforming health and social services infrastructure to address mental health equitably	The White House, 2022	Fact Sheet/Brochure
Family Medicine e-Learning Behavioral Health Services Integration and State Innovation Model: Behavioral Health in Primary Care	Online training modules that offer CME for providers on behavioral health services integration	University of Colorado Anschutz Medical Campus, 2017	Website
A Guidebook of Professional Practices for Behavioral Health and Primary Care Integration Observations from Exemplary Sites	Helps identify professional practices for developing a workforce for integrating primary care and behavioral health	AHRQ, 2015	Guide
A Guide to Substance Abuse Services for Primary Care Clinicians	Treatment Improvement Protocol (TIP) that recommends guidelines for primary care clinicians to follow when caring for patients with alcohol and other substance use disorders	SAMHSA, 1997/2008	Guide
How Practices Can Advance the Implementation of Integrated Care in the COVID-19 Era	Literature review of primary care practices implementing integrated behavioral health care which identified the main barriers to successful integration as financing, health information technology, and workforce challenges	Docherty M, et al.; The Commonwealth Fund, 2020	Report/Paper/Issue Brief
How to Sustain Behavioral Health Care in Primary Care Practice	Clinical experts share experiences implementing and planning for the integration of behavioral and mental health care in primary care settings, and describe successful strategies, sustainability considerations, and financial implications	AMA; Henry TA, 2020	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
Immediate Policy Actions to Address the National Workforce Shortage and Improve Care	Brief with policy recommendations to address healthcare workforce shortages resulting from the COVID-19 pandemic, including options to expand telehealth and other support strategies to improve the provision of mental health services To access, copy and paste the following URL: *https://www.healthmanagement.com/insights/briefs-reports/second-behavioral-health-issue-brief-focuses-on-workforce-crisis-and-call-for-immediate-action/*	Health Management Associates; National Council for Mental Wellbeing, 2022	Report/Paper/Issue Brief
Implementation of Behavioral Health Integration in Small Primary Care Settings: Lessons Learned and Future Directions	Mixed-methods research study that provides insights into the challenges and successes of behavioral health integration into primary care	Goldman ML, et al., 2012[169]	Journal Article
Implementing Patient-Centered Behavioural Health Integration into Primary Care Using Model-Based Systems Engineering	Offers design considerations for a patient-centered system model, including implementing patient-centered behavioral health integration into primary care To access, copy and paste the following URL: *https://onlinelibrary.wiley.com/doi/abs/10.1002/sres.2727*	Khayal IS, et al., 2020[170]	Journal Article
Integrating Behavioral Health Into Primary Care: Best Practices and Learnings	Discusses a patient-centered approach to primary care and behavioral health services integration as well as lessons learned from a project implemented within one healthcare system	bi3, 2020	Report/Paper/Issue Brief
Integrating Behavioral Health and Primary Care: Better Care and Health for the Whole Person	Provides best practices from health insurance providers related to integrating behavioral health and primary care to improve health outcomes, including potential policy solutions and opportunities	America's Health Insurance Plans (AHIP), 2022	Report/Paper/Issue Brief
Integrating Behavioral Health into Primary Care Through Medicaid Managed Care	Part of the Center for Health Care Strategies' Strengthening Primary Care through Medicaid Managed Care learning series on integrating behavioral health into primary care, providing a national perspective on behavioral health integration, provider perspectives, and a look at the integration approach happening in Arizona	Center for Health Care Strategies (CHCS), 2021	Webinar/Video
Integrated Behavioral Health Manual: Everything You Need to Know to Start, Grow, or Enhance Behavioral Health Services in Primary Care	Manual for behavioral health clinicians on how to provide substance use services in integrated primary care settings; gives overview of considerations for effective integrated care To access, copy and paste the following URL: *https://www.emorrisonconsulting.com/wp-content/uploads/2018/10/IBH-Manual-Second-Edition.pdf*	Elizabeth Morrison Consulting, 2018	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
Integrating Mental Health and Addiction Treatment into General Medical Care: The Role of Policy	Explores the role of policy in integrating mental health and substance use treatment in medical care, including suggestions for future strategies to improve integration	McGinty EE, et al., 2020[171]	Journal Article
Integrating Primary Care and Behavioral Health to Address the Behavioral Health Crisis	Describes approaches for integrating behavioral health care into primary care and how integrated practices can provide better services to meet mental health, substance use, and other medical needs	The Commonwealth Fund, 2022	Report/Paper/Issue Brief
Integrating Substance Use Disorder Treatment and Primary Care	Describes the role of primary care in the management of substance use disorders in addition to State policy considerations integrating SBI/RT into primary care settings	National Academy for State Health Policy, 2017	Report/Paper/Issue Brief
Integrating SUD and OB/GYN Care: Policy Challenges and Opportunities Final Report	Describes treatment options for pregnant and postpartum women with substance use disorders and opportunities for integrating care to improve outcomes and accessibility, as well as policy challenges	U.S. Department of Health and Human Services (HHS), Office of the Assistant Secretary for Planning and Evaluation (ASPE), Office of Behavioral Health, Disability, and Aging Policy (BHDAP), 2022	Report/Paper/Issue Brief
An Introduction Into Behavioral Health and Primary Care Integration	Presents information about the benefits of behavioral health and primary care integration for improving the health and well-being of communities, including a discussion about potential federal policy opportunities	Alliance for Health Policy, 2022	Webinar/Video
Making Progress on Integration of Behavioral Health Care and Other Medical Care	Proposes key strategies and policy opportunities for integrating behavioral health care and other medical care as well as an overview of payment reforms that can incentivize integration	USC-Brookings Schaeffer Initiative for Health Policy; Frank RG, et al., 2022	Report/Paper/Issue Brief
Making the Case for High-Functioning, Team-Based Care in Community Behavioral Health Settings	Advises community behavioral health care settings on how to implement team-based care, including providing a team-based care model	National Council for Mental Wellbeing, 2020	Guide
Medicaid Forward: Behavioral Health	Provides a framework for States to help improve access to and quality of behavioral health to promote better outcomes and quality of life for Medicaid beneficiaries	National Association of Medical Directors, Well Being Trust, 2021	Report/Paper/Issue Brief
SBIRT Clinical Research and Integrative Healthcare at an FQHC	Presents findings from clinical research projects that support the implementation of SBI/RT as part of integrated healthcare delivery	Institute for Research, Education & Training in Addictions, 2019	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
Shared Principles of Primary Care: A Multistakeholder Initiative to Find a Common Voice	Outlines primary care principles and offers resources for practices related to each principle, such as coordinated and integrated care	Patient-Centered Primary Care Collaborative, 2019	Website
Strengthening Behavioral Healthcare to Meet the Needs of Our Nation	Describes how CMS is implementing strategies to ensure patients are receiving health care services to meet their behavioral health needs and how CMS is working to meet the goals of President Biden's "Strategy to Address our National Mental Health Crisis"	Hughes DL, et al., Health Affairs, 2022	Report/Paper/Issue Brief
Successful Examples of Integrated Models	Provides many successful examples and case studies of integrated behavioral healthcare models from different States across the country, as well as international examples	Primary Care Collaborative (PCC), 2022	Website
SUMMIT Study Protocol: Step-by-Step Procedures for Providing Screening, Brief Intervention, and Treatment Services to Primary Care Patients with Opioid or Alcohol Use Disorders	A revised version of the integrated collaborative care protocol implemented during the Substance Use, Motivation, Medication, and Integrated Treatment (SUMMIT) research study; contains information on building processes and practices for ongoing intervention and stepped care, including materials and protocols for alcohol MAT and ongoing care	Ober AJ, et al., 2017[172]	Report/Paper/Issue Brief
Tackling America's Mental Health and Addiction Crisis Through Primary Care Integration: Task Force Recommendations	Provides legislative and regulatory recommendations, including payment and workforce models, for implementing behavioral health and primary care integration to address the growing concern of mental health and substance use disorders	Bipartisan Policy Center, 2021	Guide
Toolkit: State Strategies to Support Substance Use Disorder Treatment in the Primary Care Safety Net	Provides strategies and lessons learned from five different States treating substance use disorder in Federally qualified health centers	National Academy for State Health Policy, 2020	Toolkit
Tackling NCDs: 'Best Buys' and Other Recommended Interventions for the Prevention and Control of Noncommunicable Diseases	Recommends interventions and treatment approaches to address noncommunicable diseases and their key risk factors, including unhealthy use of alcohol, in health and social services settings	WHO, 2017	Report/Paper/Issue Brief
Together Achieving More: Primary Care Team Communication and Alcohol-Related Health Care Utilization and Costs	Article that explores the relationship between the structure of primary care teams, communication between patients with excessive-alcohol use, and healthcare use	Mundt MP, et al., 2016[173]	Journal Article
The Value of Integrated Behavioral Health	Customizable slide deck for communicating the value of primary care and behavioral health integration to healthcare providers, organizational leadership, and policymakers to help garner buy-in for implementation	National Council for Behavioral Health, 2018	Curriculum

Title	Brief Description	Publisher/Author, Year	Format(s)
Whole-Person Health Care: Integrating Mental and Behavioral Health Into Primary Care	Discusses successful strategies and approaches for integrating behavioral health into primary care in order to improve patient outcomes To access, copy and paste the following URL: *https://www.ajmc.com/view/whole-person-health-care-integrating-mental-and-behavioral-health-into-primary-care*	The American Journal of Managed Care, 2020	Webinar/Video
Workforce Implications of Behavioral Health Care Models: Final Report	Describes three promising behavioral health models to improve care and access for mental health and substance use disorders, including psychiatric mental health nurses, mobile technology, and using crisis services	Pietras, S, et al., 2021	Report/Paper/Issue Brief
Relevant Literature			
Addressing Unhealthy Substance Use in Primary Care	Provides an overview of implementing SBI/RT and integrating substance use treatment into primary care	Pace CA, et al., 2018[174]	Journal Article
Applying Lessons from Behavioral Health Integration to Social Care Integration in Primary Care	Recommendations for successful primary care and behavioral health integration for improving delivery of care including use of screening tools and team-based care	Hoeft TJ, et al., 2021[175]	Journal Article
The Case for Whole-Person Integrative Care	A narrative review that provides an overview of several models of whole-person care and studies that illustrate the business case and evidence for implementing whole-person models in primary care	Jonas WB, et al., 2021[176]	Journal Article
Clinical Workflows and the Associated Tasks and Behaviors to Support Delivery of Integrated Behavioral Health and Primary Care	Outlines examples of clinical workflows and tasks that can help practices integrate behavioral health into primary care	Davis MM, et al., 2019[177]	Journal Article
Engaging Patients in Integrated Behavioral Health and Primary Care: A Technology-Based System to Facilitate Behavioral Health Screening for Patients in Rural and Underserved Areas	Report that offers a literature review and summary of 21 key informant interviews with harm reduction staff from across the United States	Chang YP, et al., 2020[178]	Journal Article
Further Experience with the Practice Integration Profile: A Measure of Behavioral Health and Primary Care Integration	Describes the experience of continuing the validation of the Practice Integration Profile measure using internal consistency, intra-rater consistency, and inter-rater consistency with a separate and larger sample from a broader array of practices	Hitt JR, et al., 2022[179]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Patient Screening for Integrated Behavioral Health in Adult Primary Care: A Rapid Review of Effective Procedures	Review that explores the evidence base for performing screening for behavioral health conditions in primary care; suggests the need for additional research on the efficacy of behavioral health screening strategies and implementation techniques	Martin MP, et al., 2022[180]	Journal Article
Primary and Behavioral Health Care Integration Program: Impacts on Health Care Utilization, Cost, and Quality	From 2010 to 2013, RAND conducted a program evaluation of the Substance Abuse and Mental Health Services Administration's Primary and Behavioral Health Care Integration (PBHCI) grants program, describing the structure, process, and outcomes for the first three cohorts of grantee programs (awarded in 2009 and 2010). The current study extends previous work by investigating the impact of PBHCI on consumers' healthcare use, total costs of care to Medicaid, and quality of care in three States	Breslau J, et al., 2021[181]	Journal Article
Primary Care and Mental Health: Overview of Integrated Care Models	Summarizes models of care for mental health in primary care settings, including using nurse practitioners to screen, diagnose, and treat common conditions such as alcohol use disorder. Nurse practitioners can take a continuing education test online after reading this article for a small fee	Brown M, et al., 2021[182]	Journal Article
Social Workers in Integrated Care Beyond Primary Care: A Scoping Review	Review that explores the different roles of social workers as members of integrated care teams; suggests that patient mental health outcomes can be positively impacted by social workers serving as members of these care teams	Milano N, et al., 2022[183]	Journal Article
Substance Use Disorder Approaches for Clinical Care, Training Service Delivery	Describes best practices for service delivery and implementation of care and treatment for people with substance use disorders in clinical settings To access, copy and paste the following URL: *https://www.scivisionpub.com/pdfs/substance-use-disorder-approaches-for-clinical-care-training-service-delivery-1345.pdf*	Hilty DM, et al., 2020[184]	Journal Article
A Telemedicine Approach to Increase Treatment of Alcohol Use Disorder in Primary Care: A Pilot Feasibility Study	Describes a telehealth AUD consult service, how it was implemented in primary care, and early outcomes in the Kaiser Permanente system	Leibowitz A, 2021[185]	Journal Article
Transitioning Patients from Outpatient Mental Health Services to Primary Care: A Rapid Literature Review	A literature review describing common practices for transitioning patients from specialty mental health care to primary care, including substance use To access, copy and paste the following URL: *https://journals.sagepub.com/doi/full/10.1177/26334895211041294*	Blasi PR, et al., 2021[186]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Virtual Integrated Primary Care Teams: Recommendations for Team-Based Care	Provides recommendations to support integrated primary care teams, including behavioral health providers, in adapting to and sustaining virtual team-based care	Mitzel LD, et al., 2021[187]	Journal Article

*n.d. = No date indicated on resource

IV. Quality Improvement and Implementation Science

The **Quality Improvement (QI)** section includes improvement models, frameworks, and related tools to help promote QI in primary care settings. These materials are not specific to UAU primary care services delivery.

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Quality Improvement			
The 10 Building Blocks of High-Performing Primary Care	Describes a model of primary care called the 10 building blocks of high-performing primary care, which describe existing high-performing practices and serve as a model for improvement	Bodenheimer T, et al., 2014[188]	Journal Article
Barriers and Facilitators to the Use of Clinical Decision Support Systems in Primary Care: A Mixed-Methods Systematic Review	Identifies the barriers and facilitators to the use of clinical decision support systems in primary care through a systematic review of 48 studies	Meunier P-Y, et al., 2023[189]	Journal Article
Building Quality Improvement Capacity In Primary Care	Paper that discusses the need for external QI infrastructure to help primary care practices acquire the knowledge and develop the skills integral to carrying out ongoing QI work	AHRQ, 2018	Website
A Checklist for Identifying Determinants of Practice: A Systematic Review and Synthesis of Frameworks and Taxonomies of Factors that Prevent or Enable Improvements in Healthcare Professional Practice	Describes development of a comprehensive checklist of determinants of practice, or factors that enable or prevent practice improvements; includes worksheets to facilitate use of the checklist in QI projects	Flottorp SA, et al., 2013[190]	Journal Article
Electronic Clinical Quality Improvement (eCQI) Resource Center	Describes eCQI activities, which provide common standards and shared technologies to monitor and analyze the quality of health care provided to patients and patient outcomes. This resource center offers educational resources, tools, and standards for using eCQI	HHS, CMS, the Office of the National Coordinator for Health Information Technology (ONC), n.d.	Website
Fostering Resilience and Recovery: A Change Package for Advancing Trauma-Informed Primary Care	Guides primary care organizations through adopting principles of primary care, using an adapted Find, Organize, Clarify, Understand, Select (FOCUS) Plan-Do-Study-Act (PDSA) QI framework	National Council for Mental Wellbeing, 2018	Guide
A Human Factors Systems Approach to Understanding Team-Based Primary Care: A Qualitative Analysis	Describes the Systems Engineering Initiative for Patient Safety model for creating and evaluating primary care teams, based on findings from qualitative data	Mundt MP, et al., 2016[191]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Quality Improvement			
Implementation Science: Effective, Engaging Strategies for Virtual Implementation Facilitation	As part of the AcademyHealth's series highlighting takeaways from the 13th Annual Conference on the Science of Dissemination and Implementation in Health, this blog post explores opportunities and challenges of remote implementation facilitation and shares best practices for effective engagement during and after the pandemic	Bresnick J, 2021	Website
Improving Medical Practice: A Conceptual Framework	Article that describes a conceptual framework for guiding and studying practice improvement to help transform care; may also be helpful for testing interventions and recruiting medical practices for QI	Solberg LI, 2007[192]	Journal Article
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (eCQMs for 2021)	Provides the 2021 specifications and information needed to implement the electronic clinical quality measures (eCQMs) for initiation and engagement of alcohol and other drug dependence treatment	eCQM Resource Center, 2021	Website
Obtaining and Using Data in Practice Improvement: A Handbook for Health IT Advisors and Practice Facilitators	Provides in-depth information Health Information Technology (IT) Advisors need to effectively provide Health IT-related assistance for primary care practices to support their quality improvement and practice transformation efforts	AHRQ, 2022	Guide
Patient-Centered Medical Home Assessment (PCMH-A)	Tool to help practices understand where they are in terms of being patient centered and identify opportunities to improve and track progress when making changes	MacColl Center for Health Care Innovation, Group Health Cooperative, 2014	Instrument/Protocol
A Practical, Robust Implementation and Sustainability Model (PRISM) for Integrating Research Findings into Practice	Model for translating research into practice using concepts from the areas of QI, chronic care, diffusion of innovations, and measures of population-based effectiveness of translation	Feldstein AC, et al., 2008[193]	Journal Article
A Practice Change Model for Quality Improvement in Primary Care Practice	Describes a model of practice change using data from a successful QI intervention	Cohen D, et al., 2004[194]	Journal Article
Quality ID #431 (NQF 2152): Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	Describes the Merit-Based Incentive Payment System (MIPS) Clinical Quality Measure (CQMS) for SBI/RT	AMA, 2020	Report/Paper/ Issue Brief
Science of Improvement: How to Improve	Describes a model of primary care called the 10 building blocks of high-performing primary care, which describe existing high-performing practices and serve as a model for improvement	Institute for Healthcare Improvement, n.d.	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
1. Quality Improvement			
Screening and Follow-Up for Unhealthy Alcohol Use: Quality Improvement Change Package for Health Plans	Provides tools, strategies, best practices, and resources, including guidance for reporting the HEDIS alcohol measure using Electronic Clinical Data Systems (ECDS)	National Committee for Quality Assurance, 2020	Toolkit
A Systematic Review of Approaches to Improve Practice, Detection and Treatment of Unhealthy Alcohol Use in Primary Health Care: A Role for Continuous Quality Improvement	Suggests that using continuous QI methods can lead to improvements in screening and intervention for UAU, but that more research is needed	Dzidowska M, et al., 2020[195]	Journal Article
Time to ACT: Launching an Addiction Care Team (ACT) in an Urban Safety-Net Health System	Presents an approach to developing and implementing an interprofessional ACT in a health system, with key factors to consider and lessons learned, such as aligning improvement areas with health system leadership priorities and involving leadership in goal creation	Martin M, et al., 2021[196]	Journal Article

The **Practice Facilitation** section includes resources and materials to build primary care stakeholders' practice facilitation capabilities to promote QI in primary care settings. These materials are not specific to UAU primary care services delivery.

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Practice Facilitation			
AHRQ Practice Facilitation Training Modules	Free, interactive training modules, each 20-30 minutes long, provide practice facilitators opportunities to gain critical skills and include videos of experienced practice facilitators who share insights and helpful hints	AHRQ, 2022	Web-Based Course
Comparison of Methods for Alcohol and Drug Screening in Primary Care Clinics	Finds that self-administered screening and screening at any primary care visit is associated with greater detection of high-risk alcohol use, and that clinics with more practice facilitation have greater implementation of the counseling script for those who screen positive	McNeely J, et al., 2021[197]	Journal Article
Developing and Running a Primary Care Practice Facilitation Program: A How-to Guide	Describes how to develop a practice facilitation program within primary care settings	AHRQ, 2011	Guide
Evaluation of a Pilot Implementation to Integrate Alcohol-Related Care within Primary Care	Describes findings from an evaluation of a pilot implementation of a program to address UAU in primary care, demonstrating the importance of active practice facilitation	Bobb JF, et al., 2017[198]	Journal Article
EvidenceNOW Tools for Change for Practice Facilitators	Includes tools for practice facilitators on topics such as ways to engage practices, QI work, and administrative tools	AHRQ, updated 2019	Toolkit
Facilitating Improvement in Primary Care: The Promise of Practice Coaching	Describes the benefits of practice coaching; provides guidance for health system leaders, insurers, and Federal and State policymakers on how best to tailor these programs for primary care settings	The Commonwealth Fund, 2012	Report/Paper/ Issue Brief
A Framework to Guide Practice Facilitators in Building Capacity	A journal article (referenced by Institute for Healthcare Improvement's website) that describes a framework to guide practice facilitators in building improvement capacity	Baker N, et al., 2017[199]	Journal Article
Implementing Evidence-Based Practice in Healthcare: A Facilitation Guide	Describes how to implement evidence into practice through facilitation, supporting the PARIHS framework To access, copy and paste the following URL: *https://www.taylorfrancis.com/books/e/9780203557334*	Harvey G, et al., 2015	Guide

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Practice Facilitation			
Making a Rapid Transition to Virtual Practice Facilitation: Tales of Facilitation During COVID-19	During COVID, practice facilitators had to make the transition to virtual practice facilitation techniques to support primary care practices. This article covers the barriers and facilitators to delivering virtual practice facilitation for the unhealthy alcohol use change package	Jortberg B, et al., 2022[200]	Journal Article
Patient-Centered Medical Home Resource Center, Tools for Implementing PCMH	Includes various tools and resources to support primary care practice implementation of PCMH; includes foundational practice facilitation resources	AHRQ, n.d.	Website
The Practice Facilitation Handbook	Assists in training new practice facilitators, intended to equip them with the knowledge needed to support meaningful improvement in primary care	AHRQ, 2013	Guide
Practice Facilitation in Integrated Behavioral Health and Primary Care Settings: A Scoping Review	Reviews literature on the role of practice facilitators in settings aiming to deliver integrated behavioral health and primary care, finding that practice facilitators hold a variety of roles and backgrounds	Siantz E, et al., 2020[201]	Journal Article
Practice Facilitation to Implement Alcohol-related Care in Veterans Health Administration Liver Clinics: A Study Protocol	Describes the methodology of a study that aims to test a 6-month practice facilitation for managing unhealthy alcohol use in Veterans Health Administration liver clinics	Frost MC, et al., 2020[202]	Journal Article
Practice Facilitation to Promote Evidence-Based Screening and Management of Unhealthy Alcohol Use in Primary Care: A Practice-Level Randomized Controlled Trial	Describes randomized controlled trial that uses practice facilitation for implementing screening, counseling, and treatment for UAU, proposing that practice facilitation can make changes related to managing UAU within a practice	Huffstetler AN, et al., 2020[203]	Journal Article
Practice Facilitator Resources for Unhealthy Alcohol Use	Offers interactive modules for practice facilitators with comprehensive and practical information about UAU that can be applied to primary care practices	University of Colorado Anschutz Medical Campus, 2020	Web-Based Course
Quality Payment Program: An Innovative Approach to Virtual Practice Facilitation	Presents types of virtual practice facilitation, techniques for implementing practice facilitation activities virtually, and examples of virtual practice facilitation sessions	TMF Health Quality Institute, 2018	Curriculum
Recruiting Practices for Change Initiatives Is Hard: Findings from EvidenceNOW	Acknowledges challenges in engaging primary care practices in initiatives designed to enhance quality and promote safety, and identifies successful practice recruitment strategies in the EvidenceNOW initiative	Sweeney SM, et al., 2018[204]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
2. Practice Facilitation			
Recruitment and Retention of Primary Care Practices in Quality Improvement Initiatives: A Toolkit	Toolkit that provides guidance, tips, and examples to help support future efforts to engage practices in QI initiatives	AHRQ, 2021	Toolkit
Technology and Strategies for Overcoming Challenges in Virtual Practice Facilitation	Presents strategies for using virtual methods for practice facilitation and addressing common challenges, including hybrid participation, collaboration platforms, and assisting with technology	Accelerating Care Transformation (ACT Center), 2022	Curriculum
The Use of External Change Agents to Promote Quality Improvement and Organizational Change in Healthcare Organizations: A Systematic Review	Demonstrates that academic detailing can be helpful, but that practice facilitation with tailored follow-up is more effective for successful organizational change compared with academic detailing alone	Alagoz E, 2018[205]	Journal Article
Virtual Adaptation of Traditional Healthcare Quality Improvement Training in Response to COVID-19: A Rapid Narrative Review	Reviews QI training programs in response to COVID-19 with virtual components and concludes that strategies include balancing virtual and non-virtual methods, using appropriate technology, and tailoring coaching to the practice	Khurshid Z, et al., 2020[206]	Journal Article
Virtual Implementation Facilitation: Strategies for Successful Application	Sponsored by AcademyHealth, this workshop on virtual implementation facilitation reviews strategies for successful application To access, copy and paste the following URL: *https://www.youtube.com/watch?v=bWVw45goCjA*	Hartmann CW, et al., 2021	Webinar/Video
Virtual Learning Guide	Offers facilitators tips and strategies for leading online group learning events, with sections focusing on technology, virtual facilitating strategies, and resources for future learning	Pacific Southwest Mental Health Technology Transfer Center, 2020	Guide

The **Implementation Science** section includes an array of foundational implementation science frameworks and related peer-reviewed literature. These materials are not specific to UAU primary care services delivery.

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Implementation Science			
Barriers to Recruiting Primary Care Practices for Implementation Research During COVID-19: A Qualitative Study of Practice Coaches from the Stop Unhealthy (STUN) Alcohol Use Now Trial	Presents barriers and facilitators to conducting implementation research, especially during the COVID-19 pandemic, within the context of recruiting practices for North Carolina's STop UNhealthy (STUN) Alcohol Use Now trial To access, copy and paste the following URL: *https://journals.sagepub.com/doi/full/10.1177/26334895221094297*	Balio CP, et al., 2022[207]	Journal Article
Bridging Research and Practice: Models for Dissemination and Implementation Research	Organizes and describes dissemination and implementation (D and I) research models that help to effectively spread evidence-based interventions; also describes an inventory of models used in D and I research and provides guidance on how to best select a model	Tabak RG, et al., 2012[208]	Journal Article
Consolidated Framework for Implementation Research (CFIR)	Describes and offers resources on how to use CFIR to evaluate or design an implementation study	CFIR Research Team-Center for Clinical Management Research, n.d.	Website
Diffusion of Innovations in Service Organizations: Systematic Review and Recommendations	Systematic review that outlines the Diffusion of Innovations model, which can be used for dissemination and implementation	Greenhalgh T, et al., 2004[209]	Journal Article
The FRAME: An Expanded Framework for Reporting Adaptations and Modifications to Evidence-Based Interventions	Describes the updated FRAME, a framework that can be used for research on modifications to evidence-based interventions To access, copy and paste the following URL: *https://implementationscience.biomedcentral.com/articles/10.1186/s13012-019-0898-y*	Stirman SW, et al., 2019[210]	Journal Article
i-PARIHS Framework	Describes integrated-Promoting Action on Research Implementation in Health Services (i-PARIHS) framework that can be used to implement interventions in healthcare settings	Harvey G, et al., 2016[211]	Journal Article
RE-AIM Framework	Presents a question-and-answer format that discusses how to use the Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM) Framework to translate research to practice	RE-AIM, n.d.	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
3. Implementation Science			
Using Implementation Science to Guide the Integration of Evidence-based Family Interventions into Primary Care	Introduces implementation science methods and describes how they can be used to evaluate implementation of integrated primary care services	Smith JD, et al., 2017[212]	Journal Article

*n.d. = No date indicated on resource

V. Electronic Health Record Systems and Related Integration

The **Electronic Health Record (EHR) Systems and Related Integration** section includes a variety of websites, guides, and peer-reviewed literature that can help primary care stakeholders modify and optimize EHR systems to support implementation of SBI/RT services.

Title	Brief Description	Publisher/Author, Year	Format(s)
Alcohol Screening Using the USAUDIT (Alcohol Use Disorders Identification Test, Adapted for Use in the United States): Implementation Guide	Provides information about the development and potential uses of the USAUDIT alcohol screening clinical decision support (CDS) that can be integrated into EHR systems and other health information technology to help providers identify adults who should be screened for alcohol use	The MITRE Corporation, 2020	Guide
Best Practices for EMR Configuration: Meeting New Quality Requirements	Details best practices for using electronic medical record systems to document and capture data in California primary care settings that meet quality reporting requirements, including information about screening for unhealthy alcohol use and substance use disorders	Partnership HealthPlan of California, 2020	Guide
Clinical Workflow and Substance Use Screening, Brief Intervention, and Referral to Treatment Data in the Electronic Health Records: A National Drug Abuse Treatment Clinical Trials Network Study	Explores the availability of substance use disorder treatment data in the EHR to inform research	Wu LT, et al., 2019[213]	Journal Article
The Critical Role of Health Information Technology in the Safe Integration of Behavioral Health and Primary Care to Improve Patient Care	Explores the use of technology to facilitate behavioral health and primary care integration with a focus on: 1) screening for behavioral health issues, 2) clinician documentation, and 3) sharing data among clinicians, patients, and authorized parties. Details action-oriented recommendations and strategies for safe use of health IT for stakeholders and policymakers seeking to advance efforts to integrate behavioral health with primary care	Segal M, et al., 2022[214]	Journal Article
Development and Use of a Clinical Decision Support Tool for Behavioral Health Screening in Primary Care Clinics	Study that focuses on design, implementation, and evaluation of CDS tools using an EHR system to address depression, alcohol use, and prescription misuse; results highlight that CDS tools allow primary care providers to focus more on patient treatment plans and promote use of other clinical staff	Burdick TE, et al., 2017[215]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Development of a Primary Care Guide for Implementing Evidence-based Screening and Counseling for Unhealthy Alcohol Use with Epic-Based Electronic Health Record Tools: A Pilot Dissemination Project	Describes findings from evaluation of a pilot project for screening and counseling for UAU that used Epic EHR tools in a general internal medicine clinic, as part of AHRQ's series on Health Systems Partnership Pilot Project Reports	Barclay C, et al., 2018[216]	Report/Paper/ Issue Brief
EHR Modification	Provides information about how to modify an organization's EHR system to support SBI/RT implementation	SBIRT Indiana, n.d.*	Website
Health IT Playbook Section 11: Specialists	Provides health IT guidance for specialists, including guidance on health information exchange and electronic health record workflow tools, case studies, and best practices	The Office of the National Coordinator for Health Information Technology, 2021	Report/Paper/ Issue Brief
Identify a Behavioral Health Patient Tracking System	One step of the AIMS Center Collaborative Care Implementation Guide that discusses using registries for patient tracking, potentially within their EHR; includes links to tracking systems and resources that require licenses, special requests, or fees	University of Washington AIMS Center, 2014	Website
Implementation of SBIRT onto Electronic Health Records: From Documentation to Data	Provides an overview of integrating SBI/RT onto the EHR; includes models commonly used to implement SBI/RT in health practices, examples of implementation, and other key information	Institute for Research, Education and Training in Addiction, 2015	Webinar/Video
Integrating Screening, Brief Intervention and Referral to Treatment (SBIRT) for Substance Use into Prenatal Care	Describes the integration of SBI/RT into the EHR to 1) inform clinical intervention and 2) measure the prevalence of substance use throughout pregnancy	Hostage JC, et al., 2020[217]	Journal Article
The Kaiser Permanente Northern California Adult Alcohol Registry, an Electronic Health Records-Based Registry of Patients With Alcohol Problems: Development and Implementation	Describes the process of implementing an EHR-based registry of adult patients with unhealthy alcohol use in a health system in California	Palzes VA, et al., 2020[218]	Journal Article
Managing Patients with Risky Alcohol Use Workflow	Available to existing Epic outpatient software users; uses the AUDIT-C and assesses other risk factors (e.g., social determinants of health), allowing users to customize if needed To access, copy and paste the following URL: *https://www.epic.com/*	Epic Health Services, 2018	Other
The Need for Electronic Health Records to Support Delivery of Behavioral Health Preventive Services	Describes the AHRQ initiative to improve primary care management of UAU, and highlights needed changes in electronic health record systems to improve screening and counseling for UAU as well as meet the National Academies' digital health recommendation for information technology that best serves patients and care teams	Huffstetler AN, et al., 2022[219]	Journal Article
Optimizing the EHR to Support SBIRT	Case study on how Oregon optimized its EHR system for SBI/RT	SBIRT Oregon, n.d.	Curriculum

Title	Brief Description	Publisher/Author, Year	Format(s)
SBIRT and Electronic Health Records Toolkit	Toolkit of webinars and other resources that help practices use EHR for implementing SBI/RT	Institute for Research, Education and Training in Addiction, 2018	Webinar/Video; Toolkit
Screen and Intervene: NH S BI RT Playbook. Version 2.1	Compendium of strategies identified through the New Hampshire Youth S·BI·RT Initiative to help organizations implement SBI/RT; based on review of other SBI/RT guides and recommendations and experiences of implementers across different sites	New Hampshire S·BI·RT Initiative of the New Hampshire Charitable Foundation; Conrad N. Hilton Foundation, 2016	Guide
Screen Shots 2012	Document with screen shots from Gunderson Lutheran that show how it integrated SBI/RT into the hospital's EPIC HER To access, copy and paste the following URL: *https://hospitalsbirt.webs.com/Screen Shots 2012.docx*	Gunderson Lutheran Medical Center, 2012	Guide
Success Factors for and Barriers to Integration of Electronic Mental Health Screening in Primary Care	Supports integration of screening tools into the EHR by reporting that inclusion of the Drug Abuse Screening Test into the EHR increased screenings and brief interventions with adult patients at an urban primary care clinic	Mei C, et al., 2020[220]	Journal Article
Technology Use for Alcohol Screening and Referral to Treatment: An Integrative Review Using Davis' Technology Acceptance Model	Review that provides guidance on how to integrate screening, brief intervention, and referral to treatment into clinical care through the use of technology, such as electronic health record systems or patient portals	Lachance S, 2021[221]	Journal Article
The Use of Psychiatric eConsults in Primary Care	Assesses the adoption of psychiatric eConsults within 22 primary care clinics in a large integrated delivery system serving the Twin Cities region of Minnesota (Allina Health)	Golberstein E, et al., 2019[222]	Journal Article
Using a Health Information Technology Survey to Explore the Availability of Addiction Treatment Data in the Electronic Health Records: A National Drug Abuse Treatment Clinical Trials Network Study	Discusses a health IT survey conducted to analyze information as it related to research based on EHR for substance use disorders, finding heterogeneity within existing EHRs and common use of paper records	Wu T, et al., 2020[223]	Journal Article
Using Health IT to Facilitate SBIRT Service Delivery in Health Centers	Presents health technology features that can support SBI/RT service delivery in primary care, including billing considerations and workflow	Health Resources and Services Administration; Health Information Technology, Evaluation, and Quality Center, 2019	Curriculum
What's Your Take on EHRs and SBIRT? Featuring Jim Winkle	Webinar that helps organizations identify limitations of EHR software in facilitating SBI/RT clinic processes, describe an ideal EHR-supported SBI/RT workflow, and understand how EHR tools can help facilitate SBI/RT clinic processes	Institute for Research, Education and Training in Addiction, 2016	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
What's Your Take on EHRs and SBIRT? Featuring Les Sperling	Webinar that highlights the role of EHRs in implementing SBI/RT services in primary and acute care settings in Kansas; includes implementation challenges and solutions involved with integrating SBI/RT	Institute for Research, Education and Training in Addiction, 2015	Webinar/Video

*n.d. = No date indicated on resource

VI. Unhealthy Alcohol Use General Resources

The **Unhealthy Alcohol Use (UAU) General Resources** section includes content that is not focused exclusively on SBI/RT and/or MAT. Stakeholders can use these materials to develop a deeper understanding of UAU, its potential health implications, and different strategies for managing and preventing it. UAU implementation resources for rural communities are also included in this section.

Title	Brief Description	Publisher/Author, Year	Format(s)
Addressing Excessive Alcohol Use: State Fact Sheets	Summarizes statistics on alcohol use, such as number of deaths from excessive alcohol use each year, and policy solutions, such as raising taxes in each state	CDC, 2023	Fact Sheet/Brochure
Alcohol and COVID-19: What You Need to Know	Describes facts about alcohol use related to COVID-19, with the aim to dispel common myths about alcohol use during the pandemic	WHO, 2020	Fact Sheet/Brochure
Alcohol Consumption in Response to the COVID-19 Pandemic in the United States	A cross-sectional online study that assesses the differences in alcohol drinking patterns before and after the enactment of stay-at-home orders due to the COVID-19 pandemic	Barbosa C, et al., 2020[224]	Journal Article
Alcohol Policy Information System (APIS)	Provides detailed information on a wide variety of alcohol-related policies in the United States at both State and Federal levels	NIAAA, n.d.*	Website
Alcohol Use Disorder (Elsevier)	Describes the terminology; information about diagnosis, treatment, and complications; and screening and prevention for alcohol use disorder *To access, copy and paste the following URL: https://elsevier.health/en-US/preview/alcohol-use-disorder*	Elsevier Healthcare Hub, 2022	Website
Alcohol Use Disorder in Community Management of Chronic Liver Diseases	Describes efforts to integrate care for alcohol use disorder with care for liver diseases and discusses methods that can be used to help patients reduce alcohol use	Leggio L, et al., 2022[225]	Journal Article
Alcohol, Tobacco, and Other Drugs	Provides data and additional resources about the misuse of alcohol, tobacco, and other drugs in the United States, including data from the 2021 National Survey on Drug Use and Health (NSDUH)	SAMHSA, 2023	Website

Title	Brief Description	Publisher/Author, Year	Format(s)
Can Individuals with Alcohol Use Disorder Sustain Non-abstinent Recovery? Non-abstinent Outcomes 10 Years after Alcohol Use Disorder Treatment	Provides evidence that non-abstinent recovery is possible for some patients with AUD	Witkiewitz K, 2020[226]	Journal Article
CMS Behavioral Health Strategy	Summarizes the goals, objectives, and supporting activities of the CMS Behavioral Health Strategy, which aims to support a person's whole emotional and mental well-being through covering multiple elements, including access to prevention and treatment services for substance use disorders, mental health services, crisis intervention, and pain care	CMS, 2022	Website
Cognitive-Behavioral Interventions Targeting Alcohol or Other Drug Use and Co-Occurring Mental Health Disorders: A Meta-Analysis	Meta-analysis reviewed 15 clinical trials examining the efficacy of an integrated cognitive-behavioral intervention (CBI) delivered to individuals with an alcohol or other drug use disorder and a co-occurring mental health disorder, suggesting that integrated CBI showed promise for interventions targeting alcohol use	Mehta K, et al., 2021[227]	Journal Article
A Concept Analysis of Substance Misuse to Inform Contemporary Terminology	Presents a concept analysis of the term "substance misuse" and recommends an alternate term that is less stigmatizing: "at-risk substance use"	Mahmoud KF, et al., 2017[228]	Journal Article
COVID-19 Pandemic Impact on Harm Reduction Services: An Environmental Scan	Offers a literature review and summary of 21 key informant interviews with harm reduction staff from across the United States	National Council for Mental Wellbeing, 2021	Report/Paper/ Issue Brief
Evidence-Based Practices Resource Center	Provides communities, clinicians, policymakers, and others with information and tools to incorporate evidence-based practices into their communities or clinical settings	SAMHSA, n.d.	Website
Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health	Describes substance use in the United States and includes recommendations on how to address substance misuse and related health consequences	HHS Office of the Surgeon General, 2016	Report/Paper/ Issue Brief
FastStats Alcohol Use	Includes basic statistics on U.S. alcohol use, including prevalence and mortality as well as links to additional data resources	CDC, updated 2021	Website
Federal Resources for Rural Communities to Help Address Substance Use Disorder and Opioid Misuse	Includes Federal resources for rural communities organized in 26 overarching categories to help address substance use disorder and opioid misuse	Office of National Drug Control Policy and U.S. Department of Agriculture, 2018	Guide
Global Status Report on Alcohol and Health	Outlines alcohol use worldwide and its harmful consequences on population health	WHO, 2018	Report/Paper/ Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
How Has Drinking Behavior Changed During the COVID-19 Pandemic?	Presents how alcohol consumption has changed during the COVID-19 pandemic, using results from a web-based survey collected in May 2020	Barbosa C, et al., 2020	Curriculum
Improving Substance Use Services for Youth: Policy Opportunities for State Medicaid/CHIP Programs	Describes policy priorities for Medicaid/Children's Health Insurance Program (CHIP) that States could implement to improve services and care for adolescents and young adults with substance use disorders, with a focus on prevention and early intervention	Urban Institute; Ramos C, et al., 2022	Report/Paper/ Issue Brief
Interventions for Substance Use Disorders in Adolescents: A Systematic Review	Synthesizes the literature on behavioral, pharmacologic, and combined interventions for adolescents ages 12 to 20 years with problematic substance use or substance use disorder	AHRQ, 2020	Report/Paper/ Issue Brief
IRETA Website: Addiction and Recovery Basics	Institute for Research, Education and Training in Addiction (IRETA) webpage discussing the basics of addiction, including alcohol	IRETA, n.d.	Website
Key Policy Challenges and Opportunities to Improve Care for People With Mental Health and Substance Use Disorders: Proceedings of a Workshop	Summarizes discussions from a 2019 workshop of the Forum on Mental Health and Substance Use Disorders that examined key policy challenges for caring for people with mental health and substance use disorders	NASEM, 2020	Report/Paper/ Issue Brief
National Drug Control Strategy	National strategy that introduces key principles aimed to reduce overdose deaths and deaths related to substance use disorders and improve the substance use disorder treatment infrastructure in the United States	The White House Executive Office of the President, Office of National Drug Control Policy (ONDCP), 2022	Report/Paper/ Issue Brief
National Institute on Alcohol Abuse and Alcoholism (NIAAA) Short Takes Video Series	A video series called "Short Takes with NIAAA" featuring commentary by NIAAA exper4 ptts; this series consists of social media-friendly, 60-second videos explaining commonly used—but often misunderstood—alcohol terms	NIAAA, 2022	Webinar/Video
Pain in the Nation Update: Alcohol, Drug, and Suicide Deaths in 2018	Examines trends in deaths related to substance use, including alcohol use across the United States. Also discusses research looking at causes of deaths and potential policy and program solutions aimed at addressing these issues, including the Well Being Trust's Healing the Nation Policy Framework	Well Being Trust, Trust for America's Health, 2020	Report/Paper/ Issue Brief
Peers Speak Out: Priority Outcomes for Substance Use Treatment and Services	The first national examination of treatment and recovery services outcomes prioritized by people with substance use disorder, including recommendations for reshaping services, policies, and research to address the national epidemic of addiction	Community Catalyst; Faces & Voices of Recovery; ASAM, 2021	Report/Paper/ Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
Realizing Parity, Reducing Stigma, and Raising Awareness: Increasing Access to Mental Health and Substance Use Disorder Coverage	Provides information on the implementation of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), highlighting the DOL, HHS, and Treasury's emphasis on greater MHPAEA enforcement	U.S. Department of Labor (DOL), HHS, and U.S. Department of Treasury, 2022	Report/Paper/ Issue Brief
Screening and Interventions for Social Risk Factors: A Technical Brief to Support the U.S. Preventive Services Task Force	Technical brief highlights research on screening and interventions for social risk factors, including screening for substance use and alcohol use, and presents gaps in the research as well as challenges of implementing these interventions	Eder M, et al., 2021	Report/Paper/ Issue Brief
Substance Abuse Warmline / National Clinician Consultation Center	Describes the HRSA-funded Substance Use Warmline (855-300-3595, nccc.ucsf.edu) that offers confidential, free teleconsultation to clinicians on substance use evaluation and management	National Clinician Consultation Center, 2021	Website
Treatment Interventions for Women With Alcohol Use Disorder	Identifies barriers to women receiving treatment for AUD, including many health and social needs and discusses ways in which treatment interventions could better target the unique needs of women with AUD	McCrady BS, 2020[229]	Journal Article
Understanding Alcohol Use Disorder	Webpage that provides general information on AUD and its diagnostic criteria based on the Diagnostic and Statistical Manual of Mental Disorders (DSM-5)	NIAAA, 2020	Website

*n.d. = No date indicated on resource

VII. Telehealth Resources

The **Telehealth Resources** section includes general telehealth resources and telehealth-related resources relevant to UAU, SBI/RT, and MAT. Practices, providers, and other primary care staff can use these materials to inform the implementation of telehealth within their practices, including using it for SBI/RT and MAT for UAU.

Title	Brief Description	Publisher/Author, Year	Format(s)
7 Ways to Legally and Ethically Expand Your Services with Evidence-Based Telehealth	Highlights key findings about implementing evidence-based telehealth services, including legal and regulatory codes and professional ethical requirements	NAADAC, the Association for Addiction Professionals, 2017	Webinar/Video
Addiction Treatment and Telehealth: Review of Efficacy and Provider Insights During the COVID-19 Pandemic	Literature review exploring the efficacy of telehealth for substance use disorder treatment (including alcohol use disorder) during the COVID-19 pandemic, with a focus on treatment in California	Mark TL, et al., 2021[230]	Journal Article
Alcohol Use Disorder in the Age of Technology: A Review of Wearable Biosensors in Alcohol Use Disorder Treatment	Reviews the literature on wearable devices that help track alcohol consumption	Davis-Martin RE, et al., 2021[231]	Journal Article
American Telemedicine Association (ATA) Resources	Includes resources on telehealth basics, research, practice guidelines, and telehealth specific to COVID-19	American Telemedicine Association, 2020	Website
Approaches for Implementing Digital Interventions for Alcohol Use Disorders in Primary Care: A Qualitative, User-Centered Design Study	Qualitative study that explores key approaches for implementation of digital interventions in primary care to treat alcohol use disorders	Glass JE, et al., 2022[232]	Journal Article
Artificial Intelligence-Enhanced Screening, Brief Intervention & Referral to Treatment (SBIRT): Using the Brief Negotiation Interview (BNI) Across Diverse Populations	Conference proceedings from the Technology, Mind, and Society 2021 symposium addressed various technology-enabled SBIRT to treatment approaches, focusing specifically on efforts at incorporating artificial intelligence (e.g., machine learning, natural language processing) in this work	Pantalon MV, et al., 2021	Report/Paper/Issue Brief
A Scoping Review of Computer-Based and Telecommunication Technology Interventions to Address Drug and Alcohol Misuse and Smoking in Women	Review of articles looking at the use of technology for addressing drug and alcohol use and smoking in women, highlighting studies showing that these telecommunication technology interventions were successful at reducing alcohol and substance misuse	Washio Y, et al., 2022[233]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Best Practices for Telehealth During COVID-19 Public Health Emergency	Provides background information and resources for practices expanding use of telehealth during COVID-19, including resources specific to behavioral health and telehealth	National Council for Mental Wellbeing, 2020	Fact Sheet/ Brochure
Best Practice Guide: Telehealth for Direct-to-Consumer Care	Guides providers on direct-to-consumer telehealth, including ways to integrate telehealth into their workflow to meet the needs of their patients and practice, developing a direct-to-consumer strategy, and billing for telehealth	HRSA, 2021	Website
Capacity of Primary Care to Deliver Telehealth in the United States	Study of the capacity of primary care practices around the country to provide health services, including mental health and substance use treatment, via telehealth, with suggestions for future implementation of telehealth expansion in primary care	Jetty A, et al., 2021[234]	Journal Article
Changes in Medicaid Telehealth Policies Due to COVID-19	Characterizes Medicaid telehealth policies in each State both before the start of the COVID-19 pandemic and afterward, including details about eligible providers who can deliver services and payment policies	The Medicaid and CHIP Payment and Access Commission, 2020	Other
A Comparison Between Telehealth and Face-to-Face Delivery of a Brief Alcohol Intervention for College Students	Tests the effectiveness of well-validated Brief Alcohol Screening and Intervention for College Students when conducted face-to-face or through a videoconferencing system	King SC, et al., 2020[235]	Journal Article
Considerations for the Care and Treatment of Mental and Substance Use Disorders in the COVID-19 Epidemic	Summarizes guidance on treating substance use disorders during COVID-19, including using outpatient treatment services and telehealth as much as possible	SAMHSA, 2020	Report/Paper/ Issue Brief
COVID-19 State Telehealth and Licensure Expansion Dashboard	Compiles information on State-by-State expansion of telehealth and licensing waivers during the COVID-19 pandemic	Alliance for Connected Care, 2022	Fact Sheet/ Brochure
COVID-19 Telehealth Toolkit	Provides guidance to practices that participate in accountable care organizations (ACOs) on implementing telehealth during COVID-19, including an overview of telehealth, requirements, technology platforms, and coding and billing for services *To access, copy and paste the following URL: https://www.aledade.com/telehealth-toolkit*	Aledade, Inc., 2020	Toolkit
Digital Health Interventions to Enhance Prevention in Primary Care: Scoping Review	Review that identifies and describes the scope and use of current digital health interventions in primary care settings, including apps that can be used for substance use disorders	Willis VC, et al., 2022[236]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Effectiveness of Digital Interventions for Preventing Alcohol Consumption in Pregnancy: Systematic Review and Meta-Analysis	Systematic review that aims to evaluate the effectiveness of digital interventions (i.e., computers, mobile apps, and text messaging services) during pregnancy suggesting computer/internet-based interventions are an effective platform for preventing alcohol consumption among pregnant women and women planning to become pregnant	Oh SS, et al., 2022[237]	Journal Article
Examples of Telehealth-Enabled Team-Based Care Implementation: SUD Care	A clinical pharmacist from Rush University Medical Center presents an example of implementation of team-based care using telehealth for SUD care, including assessing for alcohol use	Tran TH, 2022	Other
Five Ways—Beyond Current Policy—To Truly Integrate Telehealth Into Primary Care Practices	Blog post that provides recommendations for policymakers and insurers to support telehealth use by primary care providers	Gupta A, et al., 2020	Website
A Guide to Using Text Messages to Improve Substance Use Treatment Outcomes	Describes benefits and best practices of using text messages as an adjunct to treatment and follow-up for substance use disorders	Walters ST, 2019	Guide
HHS Telehealth – For Patients	Provides general information about telehealth for patients; how to talk with a doctor about telehealth options; finding telehealth options through insurance, Federally qualified health centers, and other sources; COVID-19 self-assessment tools; a digital telehealth directory and emergency hotlines	HRSA, n.d.*	Website
HHS Telehealth – For Providers	Provides general information about telehealth for providers; how to talk with a patient about telehealth options; finding telehealth options through insurance, Federally qualified health centers, and other sources; COVID-19 self-assessment tools; a digital telehealth directory and emergency hotlines.	HRSA, n.d.	Website
Leveraging Digital Tools to Support Recovery From Substance Use Disorder During the COVID-19 Pandemic Response	Discusses the advantages and challenges for using new technology and digital tools to support individuals with substance use disorder, including alcohol use disorder, noting that telehealth can provide certain benefits for patients who need care delivered remotely	McDonnell A, et al., 2021[238]	Journal Article
Leveraging Existing Health and Disease Management Programs to Provide Mental Health and Substance Use Disorder Resources During the COVID-19 Public Health Emergency	Discusses options for providing substance use disorder services during the COVID-19 pandemic, including expanding telehealth, using mobile apps, and connecting enrollees to community resources	SAMHSA, CMS, 2020	Report/Paper/Issue Brief

Title	Brief Description	Publisher/Author, Year	Format(s)
Measures of Effectiveness, Efficiency, and Quality of Telemedicine in the Management of Alcohol Abuse, Addiction, and Rehabilitation: Systematic Review	Systematic review to evaluate the measures of effectiveness, efficiency, and quality that result from the utilization of telemedicine in the management of alcohol abuse, addiction, and rehabilitation	Kruse CS, et al., 2020[239]	Journal Article
Medicare Learning Network Booklet: Telehealth Services	Explains topics related to billing Medicare and Medicaid for telehealth services, such as billing codes, policies, and application during COVID-19	CMS, 2020	Guide
Mobile Health Interventions for Self-Control of Unhealthy Alcohol Use: Systematic Review	This study aimed to systematically review and synthesize the research evidence about the efficacy of mHealth interventions on various health outcomes for consumer self-control of UAU and to identify the core components to achieve these outcomes	Song T, et al., 2019[240]	Journal Article
National Clinician Consultation Center: Substance Use Resources	Provides general information about telehealth, changes to policies during COVID-19, planning telehealth workflows, preparing patients for telehealth visits, billing and reimbursement, legal considerations, privacy and security, telehealth vendors and platforms, and best practices	National Clinician Consultation Center, n.d.	Website
National Consortium of Telehealth Resource Centers	Provides assistance, education, and information to organizations and individuals who are actively providing or interested in providing healthcare at a distance through events, resources, webinars, technical assistance, and an interactive map used to find the affiliated regional telehealth resource center	The National Consortium of Telehealth Resource Centers, 2020	Website
Office for the Advancement of Telehealth: Telehealth Programs	Telehealth resources and programs available through the Office for the Advancement of Telehealth in the HRSA, including grant programs and services available in rural areas	HRSA, n.d.	Website
Pahola	Pahola is PAHO's first artificial intelligence (AI) health specialist and the only AI digital health worker in the world that specializes in alcohol-related topics. Pahola can communicate interactively—in three languages (English, Portuguese, and Spanish)—with people about their alcohol consumption, assess their risk, help them reduce or stop alcohol use, or direct them to resources for treatment and recovery	Pan American Health Organization (PAHO), 2021	Other
Policies to Improve Substance Use Disorder Treatment With Telehealth During the COVID-19 Pandemic and Beyond	Identifies four steps intended to facilitate a transition to telehealth that improves health outcomes of patients with substance use disorders	Drake C, et al., 2020[241]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Rural Behavioral Health: Telehealth Challenges and Opportunities	Looks at various barriers to accessing mental health and substance use disorder treatment and services in rural communities; describes how telehealth interventions may provide ways to overcome specific barriers	SAMHSA, 2016	Fact Sheet/Brochure
SBIRT in Telemedicine With Adolescent Patients	On-demand free webinar training that explores how clinicians can screen adolescent patients for substance use, receive reimbursement, and perform brief interventions via video conferencing	Oregon Academy of Family Physicians, 2020	Webinar/Video
Scaling Telehealth Programs: Lessons from Early Adopters	Describes findings from case studies of remote patient monitoring and lessons learned, including the importance of promoting a culture of openness, using a team-based approach, gaining leadership buy-in, and minimizing barriers for implementation	The Commonwealth Fund, 2013	Report/Paper/ Issue Brief
Smartphone Apps for Managing Alcohol Consumption: A Literature Review	Provides an overview of the literature on alcohol reduction apps and the availability of evidenced-based apps on top commercial app stores	Colbert S, et al., 2020[242]	Journal Article
Smartphone Apps Targeting Alcohol and Illicit Substance Use: Systematic Search in in Commercial App Stores and Critical Content Analysis	Evaluates the functionality, aesthetics, and quality of information of free or low-cost apps claiming to target alcohol, benzodiazepine, cocaine, crack/cocaine, crystal methamphetamine, and heroin use using the validated Mobile App Rating Scale (MARS) and critical content analysis	Tofighi B, et al., 2019[243]	Journal Article
State-Based Commercial Insurers' COVID-19 Telehealth Policies	State-based policies and coding guidance for telehealth services and coverage during the COVID-19 pandemic	American Psychological Association (APA) Services, Inc., 2022	Website
Substance Use Disorder Services in the Days of a Pandemic: You Need a Bigger Boat (Part 1)	Describes key considerations for implementing substance use disorder services during COVID-19, including safety precautions, ways to move all services to telehealth, reimbursement contingencies, and leadership actions To access, copy and paste the following URL: *https://www.youtube.com/watch?v=bRGZO7LaAqo&feature=youtu.be*	Weix S, 2020	Webinar/Video
Substance Use Disorder Services in the Days of a Pandemic: You Need a Bigger Boat (Part 2)	Provides an update on providing telehealth services for substance use during COVID-19 and best practices for safely managing treatment during COVID-19 To access, copy and paste the following URL: *https://www.youtube.com/watch?v=qSxwNzITTDg*	Weix S, 2020	Webinar/Video

Title	Brief Description	Publisher/Author, Year	Format(s)
Substance Use Disorders and Telehealth in the COVID-19 Pandemic Era: A New Outlook	Reviews literature about the use of telehealth interventions to treat substance use disorders, including AUD, during the COVID-19 pandemic	Oesterle TS, et al., 2020[244]	Report/Paper/ Issue Brief
Supporting Access to Telehealth for Addiction Services	Provides guidance to clinicians and practices on using telehealth for substance use services during COVID-19, including benefits of using telehealth, Federal and State policy changes, private payers, and general considerations	ASAM, 2020	Guide
Telehealth and Substance Use Disorder Services in the Era of COVID-19: Review and Recommendations	Discusses the current state of telehealth in the United States based on Federal and State policies, the benefits and challenges related to implementation of telehealth, and policy opportunities to improve these services in the future	Legislative Analysis and Public Policy Association (LAPPA), 2022	Report/Paper/ Issue Brief
Telehealth Capacity Assessment Tool (TCAT)	Guides behavioral health organizations through assessing readiness to adopt telehealth	National Frontier and Rural Addiction Technology Transfer Center, 2013	Toolkit
Telehealth Clinical and Technical Considerations for Mental Health Providers	Guides behavioral health providers through using telehealth with their patients, particularly during the COVID-19 pandemic	Pacific Southwest Mental Health Technology Transfer Center, 2020	Guide
The Telehealth Explainer Series: A Toolkit for State Legislators	Provides an overview of State telehealth roles, key legislative actions, and a series of briefs exploring opportunities and challenges related to telehealth policy	National Conference of State Legislatures, 2021	Toolkit
Telehealth Has Played an Outsized Role Meeting Mental Health Needs During the COVID-19 Pandemic	Analyzes telehealth use during the COVID-19 pandemic and discusses how telehealth has improved access to mental health and substance use services	Lo J., et al., Kaiser Family Foundation (KFF), 2022	Report/Paper/ Issue Brief
Telehealth for Primary Care: From Policy Updates to Best Practices Webinar Recording	Reviews policy updates to telehealth services in light of COVID-19 to help primary care practices better serve their patient population via telehealth To access, copy and paste the following URL: *https://www.aledade.com/telehealth-primary-care-policy-updates-best-practices-webinar-recording*	Aledade, Inc., 2020	Webinar/Video
Telehealth for Substance Use Disorders: A Rapid Review for the 2021 U.S. Department of Veterans Affairs and U.S. Department of Defense Guidelines for Management of Substance Use Disorders	Review of findings on efficacy of using telehealth for treatment of SUDs including alcohol use disorder, suggesting limited evidence to date about telehealth compared to in-person care for SUDs	Uhl S, et al., 2022[245]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Telehealth for the Treatment of Serious Mental Illness and Substance Use Disorders	Reviews ways that telehealth modalities can be used to provide treatment for serious mental illness and substance use disorders among adults; distills the research into recommendations for practice; and provides examples of how these recommendations can be implemented	SAMHSA, 2021	Guide
Telehealth Guidance by State During COVID-19	Provides an overview of telehealth-related mandates and policies during COVID-19 for each State	American Psychological Association Service, Inc., 2020	Website
Telehealth Implementation Playbook	Outlines steps and best practices when implementing telehealth strategies to promote adoption of new technology by healthcare organizations	AMA, 2020	Guide
Telehealth in Primary Health Care: A Scoping Review of the Literature	Review of the literature related to the use of telehealth services in primary care and challenges experienced with implementation	Beheshti L, et al., 2022[246]	Journal Article
Telehealth Learning Series for SUD Tx and Recovery Support Providers	Discusses and provides resources for transitional substance use disorder treatment services to telehealth in response to COVID-19	Addiction Technology Transfer Center, Center for Excellence on Protected Health Information, National Consortium for Telehealth Resource Centers, Center for the Application of Substance Abuse Technologies, 2020	Website
Telehealth Quick Start Guide: Primary Care & FQHC/RHC Focus	Provides an introduction to implementing telehealth services in primary care during COVID-19, including the prerequisites, policies, procedures, and practice	Great Plains Telehealth Resource and Assistance Center, 2020	Guide
Telehealth Resources for Behavioral Health Clinicians During COVID-19	Compiles resources and considerations for behavioral health providers treating substance use disorders, including unhealthy alcohol use, through use of telehealth during the COVID-19 pandemic	Assistant Secretary for Preparedness and Response Technical Resources, Assistance Center, and Information Exchange, 2020	Fact Sheet/ Brochure
Telehealth's Rapid Adoption in 2020 and Building Sustainable Telehealth Programs For The Future	Reviews telehealth changes that occurred in 2020 and their implications for behavioral health providers	National Council for Mental Wellbeing, 2020	Webinar/Video
Telehealth Treatment for Alcohol Misuse: Reviewing Telehealth Approaches to Increase Engagement and Reduce Risk of Alcohol-Related Hypertension	Explores different telehealth interventions that can be implemented for populations experiencing alcohol misuse and categorizes the interventions according to phases of alcohol misuse treatment	Blalock DV, et al., 2019[247]	Journal Article

Title	Brief Description	Publisher/Author, Year	Format(s)
Tele-treatment for Substance Use Disorders	Best practice guide about using telehealth for the treatment of substance use disorders such as unhealthy alcohol use, including information about SBI/RT	HRSA, 2021	Guide
The Effectiveness of Teleconsultations in Primary Care: Systematic Review	Systematic review of the literature looking at the efficacy of using remote technology to deliver primary care and exploring the impact of using technology versus receiving in-person care	Carrillo de Albornoz S, et al., 2021[248]	Journal Article
The Telehealth Era Is Just Beginning	Describes the telehealth adoption process for patient care inside Kaiser Permanente and Intermountain Healthcare and its benefits, including a reduction in hospital visits and safer, more efficient, and equitable care	Harvard Business Review; Pearl B, et al., 2022	Report/Paper/ Issue Brief
TIP 60: Using Technology-Based Therapeutic Tools in Behavioral Health Services	Assists clinicians and administrators in implementing behavioral healthcare using telehealth by offering key considerations and examples	SAMHSA, 2015	Guide
Using Continuous Quality Improvement to Design and Implement a Telepsychiatry Program in Rural Illinois	Examines a multisite, multimodal telepsychiatry program that provides direct care, synchronous consultation, and asynchronous consultation services in rural Illinois since 2016	Mahmoud H, et al., 2020[249]	Journal Article
Using Telehealth to Expand Access to Essential Health Services during the COVID-19 Pandemic	Describes the landscape of telehealth services and provides considerations for healthcare systems, practices, and providers using telehealth services on offering virtual care during and beyond the COVID-19 pandemic	CDC, 2020	Website
Where to Begin… Essential Tips for Using Video Conferencing to Deliver SUD Treatment and Recovery Services Webinar	Offers guidance on video conferencing with patients when providing substance use services, including a clinical support session checklist; a review of legal, ethical, and patient/peer safety concerns; and privacy/security and confidentiality issues	Mountain Plains Addiction Technology Transfer Center Network, 2020	Webinar/Video
Workshop on Implementation Science and Digital Therapeutics for Behavioral Health	Summary of a workshop through the Center for Technology and Behavioral Health at Dartmouth College that focuses on implementation strategies and digital approaches to address substance use and other behavioral health topics	Lord SE, et al., 2021[250]	Journal Article

*n.d. = No date indicated on resource

Appendix IV: Acronyms List

ACOG: American College of Gynecologists and Obstetricians

AHRQ: Agency for Healthcare Research and Quality

AMA: American Medical Association

APA: American Psychiatric Association

ASAM: American Society of Addiction Medicine

ASI-B: Addiction Severity Index – Baseline

ASI-F: Addiction Severity Index – Follow-Up

ASSIST: Alcohol, Smoking, and Substance Involvement Screening Test

AUD: alcohol use disorder

AUDIT: Alcohol Use Disorders Identification Test

BNI: Brief Negotiation Interview

CDC: Centers for Disease Control and Prevention

CDS: clinical decision support

CFIR: Consolidated Framework for Implementation Research

CHC: community health center

CMS: Centers for Medicare & Medicaid Services

DoD: Department of Defense

EHR: electronic health record

e-SBI: electronic screening and brief intervention

FDA: Food and Drug Administration

i-PARIHS: integrated-Promoting Action on Research Implementation in Health Services

MAT: medication-assisted therapy

NIAAA: National Institute on Alcohol Abuse and Alcoholism

NIDA: National Institute on Drug Abuse

PCMH: patient-centered medical home

PCOR: Patient-Centered Outcomes Research

PCSS: Providers Clinical Support System

PRA: Physician's Recognition Award

PRISM: Practical, Robust, Implementation, and Sustainability Model

QI: quality improvement

RE-AIM: Reach, Effectiveness, Adoption, Implementation, and Maintenance

SAMHSA: Substance Use and Mental Health Services Administration

SAMHSA-HRSA CIHS: Substance Use and Mental Health Services Administration – Health Resources and Services Administration Center for Integrated Health Solutions

SASQ: single alcohol screening question

SBI: screening, brief intervention

SBI/RT: screening, brief intervention, and referral to treatment

SME: subject matter expert

SUBS: Substance Use Brief Screen

SUMMIT: Substance Use, Motivation, Medication, and Integrated Treatment

T-ACE: Tolerance, Annoyed, Cut-down, Eye-Opener

TAP: technical assistance publication

TAPS: Tobacco, Alcohol, Prescription medications, and other Substance

TEP: technical expert panel

TIC: trauma-informed care

TWEAK: Tolerance, Worried, Eye-opener, Amnesia, K/Cut Down

UAU: unhealthy alcohol use

USPSTF: U.S. Preventive Services Task Force

VA: Department of Veterans Affairs

WHO: World Health Organization

5Ps: Prenatal Substance Abuse Screen for Alcohol and Drugs

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