

TeleMAT FAQs

Q: What is TeleMAT or virtual MAT?

A: TeleMAT or virtual medications for addiction treatment/medication assisted treatment (MAT) is a form of telemedicine that provides easy to access, low-threshold, evidence-based medication therapy and behavioral health treatment to patients with opioid use disorder (OUD). The care is provided either virtually or over the phone with patients connecting directly with licensed addiction medicine providers.

Q: What is BrightHeart Health?

A: BrightHeart Health (BHH) is a TeleMAT provider with licensed addiction medicine providers that cares for patients with OUD and other behavioral health needs. BHH has been selected by CommonSpirit Health (CSH) as a preferred TeleMAT clinical provider for our patients when access to MAT is limited or as a complement to our own CSH MAT services.

Q: What type of patient would I consider for TeleMAT?

A: Any patient with an OUD that is interested in MAT should be considered for TeleMAT. While referral to CSH MAT services, when available, is preferred, access to MAT may be limited in many clinical settings and some patients may prefer to receive this care virtually, making TeleMAT the right choice. Consider discussing various MAT options, including TeleMAT, with your patient. And please remember that nearly all insurers will cover these services.

Q: Who can refer patients to BrightHeart Health for TeleMAT?

A: Any CSH provider can refer a patient to BHH, including substance use navigators and peer recovery coaches, once their clinical site has entered into a referral agreement with BHH. Please contact the CSH Addiction Network (addictionnetwork@dignityhealth.org) to initiate a new referral agreement.

Q: Does it cost anything?

A: A referral to BHH is at no cost to the provider or CSH. Almost all insurers cover TeleMAT, with some payers requiring minimal cost sharing with the patient (a copay). These out-of-pocket costs, if any, will be reviewed by BHH with the patient before care is initiated.

Q: How do I/does my clinic or hospital get started?

A: If you/your clinical site would like to refer patients to BHH, please contact the CSH Addiction Network (addictionnetwork@dignityhealth.org) to initiate a new referral agreement. Getting you/your clinical site started is relatively easy and can be completed in less than a month.

Q: Are there any compliance, privacy, or IT issues I need to consider?

A: No, there should not be any surprises here! Compliance, privacy or IT issues are minimal given that a referral to BHH is a referral “outside of our system”, meaning you do not need to be concerned about complicated partnerships or clinical integration. Only CSH clinical sites that have a substance use navigator will be required to obtain written consent from the patient before referral, otherwise this is not necessary in most clinical sites. And treatment consent will be obtained by BHH.

Q: Should I still refer patients to CommonSpirit Health or other community MAT treatment providers?

A: Yes, you should still refer patients interested in MAT to CSH MAT service, when available. TeleMAT with BHH is an appropriate alternative when MAT access is limited or nonexistent, a patient prefers virtual MAT, or as a complement or bridge to community MAT treatment.

Q: What communication or follow-up will I/my clinic or hospital receive after referring a patient to BrightHeart Health?

A: BHH will provide follow-up communication to the referring provider that confirms referral receipt and patient engagement. Additionally, with patient consent, BHH can also provide a patient’s attributable provider or primary care provider with regular clinical updates in order to help coordinate care across providers.

Q: Does BrightHeart Health treat other substance use disorders?

A: Yes, BHH treats other substance use disorders, including alcohol use disorder and stimulant use disorder. You may consider a referral to BHH for these conditions, especially in the setting of polysubstance use.

Q: What is meant by low-threshold or bridge MAT care?

A: Low-threshold MAT care allows for relatively easy and nearly on-demand access to MAT care for patients with OUD who are interested in or ready for treatment. It means that patients can access the care they need when they are ready for it, removing as many barriers to care as possible. Bridge MAT care is low-threshold care, such as TeleMAT, that will provide immediate care to patients and bridges or connects them to more longitudinal and integrated therapy, such as an MAT provider in their primary medical home or PCP office.

Q: What is a harm reduction approach?

A: Harm reduction is a set of practical strategies, clinical principles, and ideas aimed at reducing negative consequences associated with drug use. This approach prioritizes keeping patients engaged in care and providing care and resources that reduce the risks of drug use, such as overdose prevention, low-threshold care, and continued care engagement for patients even through periods of return to use. Harm reduction is evidence-based and promoted as the standard of care by professional societies, including the American Society of Addiction Medicine.