

Training and Mentoring Primary Care Providers

A medications for opioid use disorder (MOUD) bridge program encourages local PCPs to obtain [waivers to prescribe buprenorphine](#) and facilitates convenient training opportunities.

In addition to federally required training, specialists in addiction treatment train PCPs and primary care staff about opioid use disorder (OUD).

Experienced MOUD providers also offer advice on practical topics like reviewing charts and provide wrap-around support by phone/email.

Strategies

- Encourage providers to start where they are comfortable—e.g., providing MOUD to existing patients with OUD who are in a stable phase of recovery vs. providing initial access to MOUD (induction).
- Add wrap-around education to formal X-waiver training: a “myth-busting” presentation that may be given by a CASAC who meets with office staff.
- Provide colleague support over the phone, preferably with a colleague familiar with the new provider’s electronic medical record and system infrastructure.
- Provide a direct phone line to providers at the local substance use disorder treatment organization.
- Rather than a training subsidy, which requires a tax form from the provider, arrange a convenient training location with meals, preferably through a provider network or rural health network event that PCPs are accustomed to attending.
- Help PCPs learn about area resources for psychosocial support such as mutual support groups. Evidence is less robust in this area, however, and medication should not be withheld if behavioral treatment is not easily available.¹

Training FAQs

- How do you manage pre- and post-operative pain for patients with OUD?
- How do you interpret urinalysis results?
- How do you manage treatment when patients may be mixing controlled substances and/or benzodiazepines with MOUD?
- What tapering protocols are recommended?

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¹ On research relating to psychosocial support, see Office of the Assistant Secretary for Planning and Evaluation (ASPE). (2019). [Psychosocial supports in medication-assisted treatment: Recent evidence and current practice](#); and National Academies of Sciences, Engineering & Medicine. (2019). [Medications for opioid use disorder save lives](#), pp. 47-52.