Amendment No. 1 to SB2297

Crowe
Signature of Sponsor

AMEND Senate Bill No. 2297 House Bill No. 2308*

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 53-11-311, is amended by adding the following as a new subsection:

(i)

(1) Notwithstanding this title, and except as otherwise provided in subdivision (c)(2), a physician licensed under title 63, chapter 6 or 9, is the only healthcare provider authorized to prescribe a buprenorphine product for a federal food and drug administration approved use in recovery or medication-assisted treatment.

(2) Healthcare providers not licensed pursuant to title 63, chapter 6 or 9, and who are otherwise permitted to prescribe Schedule II or III drugs under this title, are prohibited from prescribing a buprenorphine product for the treatment of opioid use disorder unless the provider:

(A) Is licensed and has practiced as a family, adult, or psychiatric nurse practitioner or physician assistant in this state;

(B) Has had no limitations or conditions imposed on the provider's license by the provider's licensing authority within the previous three (3) years;

(C) Is employed by a hospital, as defined in § 68-11-201, that operates with an agreement to train providers from a public or private medical school within this state, or an affiliated clinic operated under the

hospital's license, that employs one (1) or more physicians and has adopted clinical protocols for medication-assisted treatment;

(D) Is employed at a facility at which healthcare providers are contracted and credentialed with TennCare and TennCare's managed care organizations to treat opioid use disorder with buprenorphine products for use in recovery or medication-assisted treatment;

(E) Is employed at a facility at which healthcare providers are accepting new TennCare enrollees or patients for treatment of opiate addiction;

(F) Is employed by a facility that requires patients to verify identification;

(G) Does not write a prescription for a buprenorphine product that exceeds a sixteen-milligram daily equivalent;

(H) Does not prescribe or dispense a mono product or buprenorphine without naloxone;

(I) Works under the supervision of a physician who is actively treating patients with buprenorphine products for recovery or medication-assisted treatment;

(J) Prescribes buprenorphine products only to patients who are treated through the organization that employs the provider;

(K) Is supervised by or collaborates with a physician who is limited to the supervision of, or collaboration with, a maximum of four (4) licensed nurse practitioners or physician assistants;

(L) Is supervised by or collaborates with a physician who reviews one hundred percent (100%) of the charts of the patients being prescribed a buprenorphine product;

(M) Weighs the risk of relapse with the benefit of tapering down or off of buprenorphine when, similar to other disease states, tapering from the treatment medication is clinically appropriate and in agreement with the patient and tapering schedules and durations are patient specific;

(N) Initiates and leads a discussion regarding patient readiness to taper down or taper off treatment medications employed in the patient's treatment with each patient at any time upon the patient's request but no later than one (1) year after initiating treatment and then every six (6) months thereafter;

(O) Writes prescriptions that can only be dispensed by a licensed pharmacy; and

(P) Writes prescriptions of buprenorphine products to fifty (50) or fewer patients at any given time.

(3) The health facilities commission may inspect facilities for compliance with this subsection (i) pursuant to § 68-11-210 and shall report any violations of this subsection (i) to the appropriate licensing authority of the provider licensed under title 63.

SECTION 2. This act takes effect upon becoming a law, the public welfare requiring it.