

Amendment No. \_\_\_\_\_

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Time _____
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Comm. Amdt. _____

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Signature of Sponsor

**AMEND Senate Bill No. 2170**

**House Bill No. 2239\***

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 53-10-302(9), is amended by adding the following subdivision:

(D) The chief medical examiner, a county medical examiner, a deputy or assistant state medical examiner or forensic pathologist under the control or direction of the chief medical examiner, or a deputy or assistant county medical examiner or forensic pathologist under the control or direction of a county medical examiner.

SECTION 2. Tennessee Code Annotated, Section 53-10-302(10), is amended by deleting the first sentence of the subdivision and substituting instead the following:

"Healthcare practitioner delegate" means any person designated by a healthcare practitioner to act as an agent of the healthcare practitioner, upon registering the person as a delegate and providing any information required by the department.

SECTION 3. Tennessee Code Annotated, Section 53-10-303(c), is amended by deleting the language "seven (7)" and substituting instead the language "six (6)".

SECTION 4. Tennessee Code Annotated, Section 53-10-306(a)(6), is amended by deleting the subdivision and substituting instead the following:

(6) The state chief medical examiner, a deputy or assistant state medical examiner appointed pursuant to § 38-7-103, a county medical examiner or deputy county medical examiner appointed pursuant to § 38-7-104, or a forensic pathologist under the control or direction of the chief medical examiner or a county medical examiner when acting in an official capacity as established in § 38-7-109; provided, any access to information from the database remains subject to the confidentiality provisions



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of this part except where information obtained from the database is appropriately included in any official report as set forth under § 38-7-110(c);

SECTION 5. Tennessee Code Annotated, Section 53-10-306(a)(8), is amended by deleting the language "aggregate" and substituting instead the word "de-identified".

SECTION 6. Tennessee Code Annotated, Section 53-10-306(l)(2), is amended by deleting the language "Aggregate controlled substances prescribing information from the database which does not contain personally identifiable data" and substituting instead the language "De-identified controlled substances prescribing information from the database".

SECTION 7. Tennessee Code Annotated, Section 53-10-306(n), is amended by deleting the language "aggregate unidentifiable" and substituting instead the word "de-identified".

SECTION 8. Tennessee Code Annotated, Section 53-10-306, is amended by adding the following subsection:

( ) De-identified information from the database must not include the identifying information of any patient, healthcare practitioner, healthcare practitioner delegate, or healthcare facility.

SECTION 9. Tennessee Code Annotated, Section 53-10-308(b), is amended by deleting the word "aggregate" and substituting instead the word "de-identified".

SECTION 10. Tennessee Code Annotated, Section 53-10-311(e)(2)(B), is amended by deleting the subdivision and substituting instead the following:

(B) Data sharing consistent with the requirements of § 53-10-306.

SECTION 11. This act shall take effect upon becoming a law, the public welfare requiring it, and applies to actions taken on or after the effective date of this act.

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**AMEND Senate Bill No. 1938**

**House Bill No. 1980\***

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 53-11-311(c), is amended by deleting the subsection and substituting the following:

(1) Notwithstanding any other provision of this title, a physician licensed under title 63, chapter 6 or 9, may prescribe a buprenorphine product for any federal food and drug administration-approved use in recovery or medication-assisted treatment.

(2) A healthcare provider licensed under title 63, chapter 7 or 19, may prescribe a buprenorphine product, as approved by the federal food and drug administration for use in recovery or medication-assisted treatment if:

(A) The provider works in a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that is licensed by the department of mental health and substance abuse services and that does not have authority to dispense buprenorphine products;

(B) The provider practices under the direct supervision of a physician who is licensed under title 63, chapter 6 or chapter 9; holds an active Drug Addiction Treatment Act of 2000 (DATA 2000) waiver from the United States drug enforcement administration; and is actively treating patients with buprenorphine products for recovery or medication-assisted treatment at the same nonresidential office-based opiate treatment facility, as defined in § 33-2-402, as the provider;



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(C) The facility and its 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;

(D) The facility or its healthcare providers are directly billing TennCare and TennCare's managed care organizations for the services provided within the facility;

(E) The facility or its healthcare providers are accepting new TennCare members or patients for treatment of opiate addiction;

(F) The provider does not write any prescription for a buprenorphine product that exceeds a sixteen-milligram daily equivalent;

(G) Except as provided in subdivision (c)(2)(H), the provider does not prescribe or dispense a mono product or buprenorphine without naloxone;

(H) The provider uses injectable or implantable buprenorphine formulations in accordance with subdivision (b)(1)(D);

(I) The provider has practiced as a family, adult, or psychiatric nurse practitioner or physician assistant in this state;

(J) The provider obtains a waiver registration from the United States drug enforcement administration that authorizes the provider to prescribe buprenorphine products under federal law and regulations;

(K) The provider prescribes buprenorphine products only to patients who are treated through a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that employs or contracts with the provider;

(L) The provider writes prescriptions of buprenorphine products that can only be dispensed by a licensed pharmacy to ensure entry into the controlled substance monitoring database; and

(M) The provider writes prescriptions of buprenorphine products to one hundred (100) or fewer patients at any given time.

SECTION 2. Tennessee Code Annotated, Title 53, Chapter 11, Part 3, is amended by adding the following as a new section:

(a) Except as provided in subsection (b), a healthcare prescriber of a buprenorphine product for use in recovery or medication-assisted treatment, or a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, shall only accept a check, money order, or debit card or credit card that is linked to a bank or credit card account from a financial institution, in payment for services provided by the healthcare prescriber or facility. Use of prepaid debit cards, prepaid credit cards, gift cards, or any other card not linked with a bank or credit card account from a financial institution is prohibited. As used in this subsection (a), "financial institution" means a state or national bank, a savings and loan association, savings bank, industrial loan and thrift company, or mortgage lender.

(b) A healthcare prescriber or facility described in subsection (a) may accept payment for services provided to a patient by the prescriber or facility in cash for a co-pay, coinsurance, or deductible if the prescriber or facility submits the remainder of the bill for the services provided to the patient's insurance plan for reimbursement. If the patient does not have an insurance plan, then the healthcare prescriber or facility shall not accept cash as payment for services provided.

(c) No healthcare provider, licensed by title 63, chapters 6, 7, 9, or 19, shall be compensated or receive payment for services related to buprenorphine treatment:

(1) By which the provider receives an amount per patient that is treated within the office or other setting; or

(2) By any means by which the provider receives a percentage of a payment that is directly received by a patient to the office, nonresidential office-based opiate treatment facility, as defined in § 33-2-402, or other provider.

(d) A healthcare provider licensed under title 63, or a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, shall not knowingly treat any beneficiary of TennCare with buprenorphine products for use in recovery or medication-assisted treatment unless that provider directly bills or seeks reimbursement from TennCare or TennCare's managed care organizations for services provided to the TennCare beneficiary. A person is required to disclose to the healthcare provider or nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that the person is a TennCare beneficiary seeking treatment with buprenorphine products for use in recovery or medication-assisted treatment.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring

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by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 53-11-311(c), is amended by deleting the subsection and substituting the following:

(1) Notwithstanding any other provision of this title, a physician licensed under title 63, chapter 6 or 9, may prescribe a buprenorphine product for any federal food and drug administration-approved use in recovery or medication-assisted treatment.

(2) A healthcare provider licensed under title 63, chapter 7 or 19, may prescribe a buprenorphine product, as approved by the federal food and drug administration for use in recovery or medication-assisted treatment if:

(A) The provider works in a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that is licensed by the department of mental health and substance abuse services and that does not have authority to dispense buprenorphine products;

(B) The provider practices under the direct supervision of a physician who is licensed under title 63, chapter 6 or chapter 9; holds an active Drug Addiction Treatment Act of 2000 (DATA 2000) waiver from the United States drug enforcement administration; and is actively treating patients with buprenorphine products for recovery or medication-assisted treatment at the same nonresidential office-based opiate treatment facility, as defined in § 33-2-402, as the provider;



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(C) The facility and its 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;

(D) The facility or its healthcare providers are directly billing TennCare and TennCare's managed care organizations for the services provided within the facility;

(E) The facility or its healthcare providers are accepting new TennCare members or patients for treatment of opiate addiction;

(F) The provider does not write any prescription for a buprenorphine product that exceeds a sixteen-milligram daily equivalent;

(G) Except as provided in subdivision (c)(2)(H), the provider does not prescribe or dispense a mono product or buprenorphine without naloxone;

(H) The provider uses injectable or implantable buprenorphine formulations in accordance with subdivision (b)(1)(D);

(I) The provider has practiced as a family, adult, or psychiatric nurse practitioner or physician assistant in this state;

(J) The provider obtains a waiver registration from the United States drug enforcement administration that authorizes the provider to prescribe buprenorphine products under federal law and regulations;

(K) The provider prescribes buprenorphine products only to patients who are treated through a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that employs or contracts with the provider;

(L) The provider writes prescriptions of buprenorphine products that can only be dispensed by a licensed pharmacy to ensure entry into the controlled substance monitoring database;

(M) The provider writes prescriptions of buprenorphine products to one hundred (100) or fewer patients at any given time;

(N) When providing direct supervision, the physician does not oversee more than two (2) providers licensed under title 63, chapter 7 or 19 at one (1) time during clinical operations; and

(O) The supervising physician ensures all rules of operation for a nonresidential office-based opiate treatment facility, as defined in § 33-2-402; the Tennessee Nonresidential Buprenorphine Treatment Guidelines as established by the department of mental health and substance abuse services and the department of health; and all other state laws, rules, and guidelines regarding use of buprenorphine products for medication assisted treatment are followed.

SECTION 2. Tennessee Code Annotated, Title 53, Chapter 11, Part 3, is amended by adding the following as a new section:

(a) Except as provided in subsection (b), a healthcare prescriber of a buprenorphine product for use in recovery or medication-assisted treatment, or a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, shall only accept a check, money order, or debit card or credit card that is linked to a bank or credit card account from a financial institution, in payment for services provided by the healthcare prescriber or facility. Use of prepaid debit cards, prepaid credit cards, gift cards, or any other card not linked with a bank or credit card account from a financial institution is prohibited. As used in this subsection (a), "financial institution" means a state or national bank, a state or federally chartered credit union, or a savings bank.

(b) A healthcare prescriber or facility described in subsection (a) may accept payment for services provided to a patient by the prescriber or facility in cash for a co-pay, coinsurance, or deductible if the prescriber or facility submits the remainder of the bill for the services provided to the patient's insurance plan for reimbursement. If the

patient does not have an insurance plan, then the healthcare prescriber or facility shall not accept cash as payment for services provided.

(c) No healthcare provider, licensed by title 63, chapter 6, 7, 9, or 19, shall be compensated or receive payment for services related to buprenorphine treatment:

(1) By which the provider receives an amount per patient that is treated within the office or other setting; or

(2) By any means by which the provider receives a percentage of a payment that is directly received by a patient to the office, nonresidential office-based opiate treatment facility, as defined in § 33-2-402, or other provider.

(d) A healthcare provider licensed under title 63, or a nonresidential office-based opiate treatment facility, as defined in § 33-2-402, shall not knowingly treat any beneficiary of TennCare with buprenorphine products for use in recovery or medication-assisted treatment unless that provider directly bills or seeks reimbursement from TennCare or TennCare's managed care organizations for services provided to the TennCare beneficiary. A person is required to disclose to the healthcare provider or nonresidential office-based opiate treatment facility, as defined in § 33-2-402, that the person is a TennCare beneficiary seeking treatment with buprenorphine products for use in recovery or medication-assisted treatment.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring

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**AMEND Senate Bill No. 2542**

**House Bill No. 2681\***

by deleting all language after the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Section 53-11-308(e), is amended by designating the existing language as subdivision (1) and adding the following as new subdivisions:

(2) A patient who suffers from long-term chronic pain, as defined by the department of health by rule, may be issued multiple prescriptions for opioids in quantities up to a ninety-day supply if deemed appropriate by the patient's prescriber.

(3) A prescriber may issue multiple prescriptions authorizing the patient to receive a total of up to a ninety-day supply of an opioid in accordance with the prescription requirements listed in 21 CFR § 1306.12.

SECTION 2. For the purpose of promulgating rules, this act shall take effect upon becoming a law, the public welfare requiring it. For all other purposes, this act shall take effect July 1, 2020, the public welfare requiring it.



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**AMEND Senate Bill No. 2267\***

**House Bill No. 2498**

by deleting all language after the enacting clause and substituting the following:

SECTION 1.

(a) The department of mental health and substance abuse services, department of human services, department of children's services, department of health, and bureau of TennCare shall actively seek and apply for federal, private, or other available funds, and actively direct available state funds, for the development of recovery programs for residents of this state who are pregnant or are women with newborns to assist those residents by providing substance use disorder treatment in outpatient treatment facilities, in residential treatment facilities, or through home visitation programs.

(b) The entities described in subsection (a) shall:

(1) Coordinate any wrap-around services that would assist the residents described in subsection (a); and

(2) Annually report by February 15 each year to the speaker of the house of representatives and the speaker of the senate on any funds an entity applied for pursuant to subsection (a), any recommendations for changes to statutes or rules to develop recovery programs as described in subsection (a), and benefits realized from any recovery programs as described in subsection (a). The report required by this subdivision (b)(2) may be made in conjunction with any other report required by law.



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SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring  
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**AMEND Senate Bill No. 2552**

**House Bill No. 2625\***

by deleting all language following the enacting clause and substituting instead the following:

SECTION 1. Tennessee Code Annotated, Title 53, Chapter 11, Part 3, is amended by adding the following new section:

(a) No later than January 1, 2021, the departments of health and mental health and substance abuse services, and the bureau of TennCare shall collaborate to develop educational materials for providers and facilities where medication assisted treatment including treatment involving controlled substances is prescribed or provided. The educational materials shall include the following:

- (1) Access to and availability of family planning services and contraception;
- (2) Risks and effects of neonatal abstinence syndrome; and
- (3) Approaches to client-centered counseling.

(b) The departments of health and mental health and substance abuse services and the bureau of TennCare shall make the educational materials available to prescribers of medication assisted treatment and facilities that use medication assisted treatment for the treatment of substance use disorder.

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



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