In Tennessee, physician assistants (PAs) and advanced practice registered nurses (APRNs) are allowed to prescribe buprenorphine for pain management under specific regulatory frameworks. Below is a comprehensive list of the restrictions, regulations, and guidelines that govern this prescribing authority.

General Legal Authority

Permitted Uses

- **Buprenorphine for pain management** (non-addiction use) is allowed under Tennessee law for both PAs and APRNs when:
 - The medication is **FDA-approved** for pain (e.g., Butrans, Belbuca, buprenorphine injections not labeled for addiction).
 - o The indication is **documented as pain**, not opioid use disorder (OUD).

Advanced Practice Registered Nurses (APRNs)

1. Collaborative Agreement

- APRNs must have a **written collaborative agreement** with a supervising physician.
- The agreement must cover prescribing authority, including controlled substances.

2. DEA Registration

 APRNs must obtain their own **DEA registration** and list their own DEA number on buprenorphine prescriptions.

3. Controlled Substance Schedules

 APRNs may prescribe Schedule II-V medications, including buprenorphine products labeled for pain (e.g., Butrans, Belbuca).

Buprenorphine for OUD treatment requires separate DATA 2000 (X-waiver)
 although this waiver was eliminated federally in 2023, Tennessee maintains documentation and scope-of-practice oversight for APRNs treating OUD.

4. Limitations

- **No prescribing for addiction treatment** unless explicitly covered under a separate credentialing and collaborative plan.
- Must follow **Tennessee Chronic Pain Guidelines** if prescribing buprenorphine chronically.

Physician Assistants (PAs)

1. Supervising Physician Agreement

- PAs must work under a supervising physician agreement approved by the Tennessee Committee on Physician Assistants.
- The supervising physician must delegate the authority to prescribe buprenorphine and monitor this activity.

2. DEA Registration

• PAs must obtain their own **DEA license** to prescribe buprenorphine products.

3. Scope of Practice

- PA's prescribing authority must align with the physician's scope and clinical practice.
- Must document that the buprenorphine is being used for pain management
 only, not addiction unless formally credentialed for that purpose.

Key Pain Management Guidelines (Apply to Both APRNs and PAs)

- 1. **Thorough Evaluation**: Document pain diagnosis with objective findings.
- 2. **Informed Consent**: Include discussion of risks, alternatives, and purpose of buprenorphine.

3. **Treatment Agreement**: Often referred to as a "pain contract" outlining expected behavior and medication use.

4. Prescription Drug Monitoring Program (PDMP) Check:

- o Required before prescribing and at least every 6 months thereafter.
- Must review the TN Controlled Substance Monitoring Database (CSMD).

5. **Urine Drug Screening**:

- o Required at baseline and periodically (at least annually).
- Helps confirm compliance and absence of contraindicated substances.

6. No Combination with Benzodiazepines:

o High caution or contraindicated due to risk of respiratory depression.

7. Dosage Justification:

Providers must document rationale for high-dose buprenorphine (>20 mcg/hr Butrans or >900 mcg/day Belbuca).

8. Pain Reassessment:

- o Required every 3-4 months to justify continued use.
- Functional improvement must be documented.

9. Referral to Specialist:

 Consider if no improvement after a trial period or if complex comorbidities exist (e.g., mental health, prior addiction).

Prohibited Practices

 APRNs and PAs may not prescribe buprenorphine products labeled for opioid use disorder (e.g., Suboxone, Subutex) unless authorized by law and included in their collaborative/supervisory agreements.

• Prescribing **off-label** buprenorphine for addiction without proper documentation or authority is subject to disciplinary action.

Summary Table

Role	May Prescribe Buprenorphine for Pain?	Requires Collaborative/Supervisory Agreement	DEA Registration Needed	Must Follow TN Pain Guidelines
APRN	Yes (pain only, not addiction)	✓Yes	✓Yes	▼ Yes
PA	Yes (pain only, not addiction)	✓Yes	✓Yes	▼ Yes