



# **BUPRENORPHINE UPDATES FOR BESMART PROVIDERS**

MARCH 27, 2025



WELCOME

# Agenda

- BESMART background
- Review of evidence
- Process changes
- Provider attestations
  - MCO-specific processes
- Q&A

# The BESMART Program

**B**uprenorphine **E**nhanced **S**upportive **M**edication **A**ssisted **R**ecovery and **T**reatment program:

- A specialized provider network focused on contracting with high-quality medication assisted treatment (MAT) providers to provide comprehensive care to TennCare members with opioid use disorder (OUD).
- The BESMART program is only for members served by buprenorphine-containing products.

## Context for the creation of BESMART for Buprenorphine:

### Problems Identified prior to BESMART

- Inconsistency in the member experience
- Inconsistency in the provider experience
- Cash pay and diversion of buprenorphine
- Lack of partnership between TennCare, the MCOs, providers, and members



### Outcomes of BESMART

- Members have better access to high-quality MAT providers
- Stronger partnership between the MCOs, TennCare, and Providers
- Ability to evaluate and share quality outcomes through data
- Aligned provider expectations around MAT
- Ability to increase flexibilities for BESMART providers as a result of a transparent partnership



### Provider Oversight

- BESMART providers agree to transparency and accountability
- BESMART providers undergo annual audits performed by TennCare's Managed Care Organizations
- Quarterly metrics monitor performance of BESMART providers

# BESMART Provider Benefits

## Benefits of Contracting as a BESMART Provider

Clinical and  
care  
coordination  
support from  
MCOs

Broadened  
TennCare  
MOUD  
pharmacy  
benefits

Increased data  
on quality and  
health  
outcomes

Reimbursement  
from the MCOs  
for defined  
MOUD services

# Overview of Pharmacy Benefits for BESMART Providers: Current State

TennCare's pharmacy benefits manager works with contracted MOUD providers in each MCO network to allow:

- No PA for contracted MOUD providers for preferred products  $\leq 16$  mg
- Access to doses greater than 16 mg with PA for approved clinical scenarios
- Dedicated support from OptumRx call center for prior authorizations (PAs)
- Broader preferred drug formulary to include buprenorphine/naloxone sublingual tablets and film.
- Future evidence-based changes for MOUD medications and process exclusively for contracted BESMART providers

# Summary of BESMART Buprenorphine Dosing

TennCare members who receive OUD treatment by a BESMART Provider are eligible to receive buprenorphine product coverage with the following daily dosage limits:

1. **Up to 16 mg** of buprenorphine products per day throughout induction, stabilization, and maintenance phases as medically necessary
2. If specific clinical criteria is met, may receive a **maximum daily dosage of 24 mg** of buprenorphine products for the defined length of time established in the clinical criteria

# Daily Buprenorphine Doses of 17-24 mg

- BESMART providers can prescribe maximum daily dosage of 24mg of buprenorphine for **specific populations** shown below
- PA required

## BESMART Eligible Member Populations

Pregnant participants confirmed by provider attestation

Postpartum participants for a period of 12 months from delivery date as shown by medical records or insurance claim

Recent intravenous (IV) drug users confirmed by prescriber attestation and a positive urine drug screen

Current users receiving greater than 50mg of methadone for OUD treatment transitioning to buprenorphine agonist therapy

Current users of 16mg - 24mg per day of buprenorphine demonstrated by paid claims data from the participant's previous health insurer

*For 1 year from the effective date of this rule, members who do not qualify under the criteria of this part but receives greater than 16mg per day of buprenorphine can be eligible for maximum daily dose of 24mg*



# Prior Authorization for BESMART Providers

- Feedback: TennCare has heard from providers that prior authorization for 17 mg to 24 mg doses is burdensome and presents an unnecessary barrier to accessing higher doses for specific populations
- Process: TennCare reviewed evidence-based literature and white papers to inform potential policy change
- Overarching goal: Improve access to evidence-based doses of buprenorphine for BESMART providers and patients by removing prior authorization as a barrier

# Review of Evidence: PA

- Physicians cite PA requirements as a substantial barrier to prescribing buprenorphine (Andraka-Christou & Capone, 2018)
- Medicare Part D experience demonstrates improved access and lower ED visits and hospitalizations when buprenorphine PA is removed (Mark et al., 2020)
- In Medicare Advantage populations, removal of MOUD PA was associated with an increase in MOUD initiation, decrease in opioid prescriptions, and a 19% decrease in the likelihood of relapse for patients who were started on MOUD after removal (Ferries et al., 2021)

# Review of Evidence: PA (Cont'd)

- Medicaid populations
  - Imposing new buprenorphine PAs was associated with an 11% reduction in the likelihood of retention on medication for 180 days (Landis et al., 2022)
  - Removal of buprenorphine PA was associated with an increase in the number of buprenorphine prescription fills among Medicaid populations in 1 of 2 states studied (Illinois, California) (Keshwani et al., 2022)
  - Removal of buprenorphine PA was not associated with substantial overall changes in buprenorphine prescriptions (Christine et al., 2023)
    - PA removal was associated with increased buprenorphine prescribing in states with low baseline buprenorphine prescribing but not in states with higher baseline prescribing

# Review of Evidence: 16-24 mg Doses

- Clinical evidence demonstrates improved outcomes for many individuals at higher doses of buprenorphine (Axeen 2024; Chambers 2020; Fareed 2012; Pizzicato 2020)
  - Higher retention in care and adherence to treatment
  - Decreased opioid use and utilization of acute care
- Individuals prescribed 16 mg buprenorphine were at significantly greater risk of treatment discontinuation within 180 days than those prescribed 24 mg (Chambers et al., 2023)



## BESMART PHARMACY UPDATES

# Buprenorphine PA Process Changes

## For BESMART providers

- 1) PA removal on preferred buprenorphine/naloxone products for daily dosages of 17-24 mg
- 2) Maintained PA for buprenorphine monoproduct
  - System edit will bypass PA with select ICD-10 codes

No changes to current authorization process for non-BESMART providers

# Preferred Buprenorphine/naloxone PA Removal: 17 mg – 24 mg/day

- Effective March 1, 2025
- Preferred buprenorphine/naloxone products up to 24 mg
  - PA is **not** required
    - For **MD and DO BESMART providers**
- Quantity limits updated
  - 8/2 mg(tab/film) & 12/3 mg(film) strengths to allow up to MDD 24 mg

## MAXIMUM DAILY DOSE UPDATES

For MD and DO **BESMART** providers only: Effective March 1, 2025, the Maximum Daily Dose (MDD) will increase to 24 mg/day for generic buprenorphine/naloxone tablets and films. Preferred generic buprenorphine/naloxone tablets and films will NOT require a PA for doses up to 24 mg/day and claims will pay at the Pharmacy Point of Sale (POS). Please see the updated quantity limits for the products below. The quantity limits for generic buprenorphine/naloxone 2/0.5 mg and buprenorphine/naloxone 4/1 mg will remain unchanged to ensure appropriate dose selection by prescribers.

Drug Name	Max Daily Dose (MDD)
buprenorphine/naloxone sublingual tab 8/2 mg	3 tablets
buprenorphine/naloxone sublingual film 8/2 mg	3 films
buprenorphine/naloxone sublingual film 12/3 mg	2 films

# Buprenorphine SL Monoprodukt ICD-10 Codes

## BESMART Providers

- Certain ICD-10 codes will allow pregnant or breastfeeding patients with OUD to receive up to 24 mg/day of buprenorphine monoprodukt without a PA
- ICD-10 code must be written or submitted with prescription

Diagnosis/ Description	ICD-10 Code
Supervision of other high risk pregnancies, first trimester	O09.891
Supervision of other high risk pregnancies, second trimester	O09.892
Supervision of other high risk pregnancies, third trimester	O09.893
Supervision of other high risk pregnancies, unsp trimester	O09.899
Supervision of high risk pregnancy, unsp, unsp trimester	O09.90
Supervision of high risk pregnancy, unsp, first trimester	O09.91
Supervision of high risk pregnancy, unsp, second trimester	O09.92
Supervision of high risk pregnancy, unsp, third trimester	O09.93
Encounter for care and examination of lactating mother	Z39.1
Other disorders of lactation	O92.79





# MCO PROVIDER ATTESTATIONS

# Provider Attestations

- TennCare Rules
- TN Nonresidential Buprenorphine Treatment Guidelines
- All state and federal laws related to MOUD prescribing

# MCO-Specific Attestation Processes

## Credentialing/Rostering v. Program Participation

- Credentialing or Rostering processes are prerequisite for Network Participation and lean on NCQA standards/elements.
- BESMART Program participation isn't considered and cannot be granted until after Network participation is established and is not guaranteed for all prescribers who complete an attestation.

# MCO-specific Attestation Processes- BlueCare

- Prescribers are credentialed under their primary specialty
- Once credentialed, prescriber is added to existing provider agreement with BMAT amendment (or to new agreement/amendment, if applicable)
- Attestation demographics must match CAQH data we receive and store in FACETS
- BESMART Prescriber Attestation is processed for consideration and, if approved, BESMART coding is added to the prescriber's record at the service address level and an effective date email is sent.

# MCO-specific Attestation Processes- UnitedHealthcare

Prescribers/Providers are credentialed under their primary specialty. BESMART participation does not change the network credentialing process.

- All providers are credentialed using the same TennCare and NCQA Standards
- Provider is either a Rostered, or Non-Rostered provider.
- This is the only differential in the process for ALL providers
- If a provider wishes to participate in the BESMART program, they must request/notify using the online form to indicate necessary information and attest to compliance with the TennCare BESMART program requirements.
- Provider candidates will be reviewed internally to see if they meet program criteria. If they do, then they will be given a BESMART contract to join the UHCCP BESMART network.

***If you have questions or need to add a provider of any specialty, please contact your Provider Relations Advocate who can walk you through the process for a new provider add; or an existing contracted provider wishes to add BESMART services to the existing agreement and/or is adding a new BESMART provider to their panel.***

# MCO-specific Attestation Processes- UnitedHealthcare (cont'd)

- [Buprenorphine Enhanced and Supportive Medication-Assisted Recovery and Treatment \(BESMART\) | UHCprovider.com](https://UHCprovider.com/BuprenorphineEnhancedandSupportiveMedication-AssistedRecoveryandTreatment(BESMART))
- The link above connects you to the online information about the BESMART program and links to the BESMART Attestation Form, Program Description, and Frequently Asked Questions (FAQ)
- Links are also provided for other information related to pharmacy benefit management and contact email for the UnitedHealthcare BESMART Program

The screenshot shows the UnitedHealthcare website. At the top, there is a navigation bar with "UnitedHealthcare" on the left and "Coverage" on the right. Below the navigation bar, there is a breadcrumb trail: "Health Plans by State > Tennessee Health Plans > UnitedHealthcare C". The main heading is "Buprenorphine Enhanced and Supportive Medication-Assisted Recovery and Treatment (BESMART)". Below this heading, there is a paragraph: "The Division of TennCare along with the contract United Healthcare, has determined the need for services for members with opioid use disorder. We have selected a network of qualified practitioners, but all must attest to provide services within this network." Below the paragraph, there is a section titled "BESMART Program Documents" with a list of links: "BESMART Attestation Form", "BESMART Program Description", and "BESMART Frequently Asked Questions". The "BESMART Attestation Form" link is circled in red. At the bottom, there is a note: "OptumRx is the pharmacy benefit manager".

UnitedHealthcare Coverage

> Health Plans by State > Tennessee Health Plans > UnitedHealthcare C

Buprenorphine Enhanced and Supportive Medication-Assisted Recovery and Treatment

UnitedHealthcare Community Plan of Tennessee Homepage

Behavioral Health | UnitedHealthcare Community Plan Tennessee

Alerts and Newsletters | UnitedHealthcare Community Plan Tennessee

Provider Manuals

Claims and Payments | UnitedHealthcare Community Plan Tennessee

Payment Policy Notifications | UnitedHealthcare Community Plan Tennessee

Pharmacy Resources and Physician Administered Drugs | UnitedHealthcare Community Plan Tennessee

## Buprenorphine Enhanced and Supportive Medication-Assisted Recovery and Treatment (BESMART)

The Division of TennCare along with the contract United Healthcare, has determined the need for services for members with opioid use disorder. We have selected a network of qualified practitioners, but all must attest to provide services within this network.

BESMART Program Documents

- [BESMART Attestation Form](#)
- [BESMART Program Description](#)
- [BESMART Frequently Asked Questions](#)

OptumRx is the pharmacy benefit manager

# MCO-specific Attestation Processes- UnitedHealthcare (cont'd)

- Make sure to have necessary information available to complete the online form.
- Tax Identification Number (for the BESMART billing entity) is required.
- National Provider Identifier (NPI) of the individual provider is required.
- The DEA number of the participating provider for prescribing in Tennessee is required.
- For mid-level (nurse practitioner or physician assistant) providers, the name and NPI and DEA of the supervising physician is required.

The screenshot shows the UnitedHealthcare logo at the top left. The main title is "UnitedHealthcare BESMART Provider Network Participation Checklist & Attestation". Below this is a subtitle: "Buprenorphine Enhanced & Supportive Medication-Assisted Recovery and Treatment Program (BESMART)". A paragraph of text states: "By completing this form, the provider is submitting a request to participate in the TennCare BESMART Program and abide by the requirements of same. This form must be completed and submitted by the prescriber. Once completed, we recommend that you save your response when prompted. For questions related to participation, you may email [SE\\_government\\_programs@uhc.com](mailto:SE_government_programs@uhc.com)." Below this is a section titled "Provider Information" with a list of required fields. The first field is "1. Prescriber Last name \*" with a text input box containing "Enter your answer". The second field is "2. Prescriber First Name \*" with a text input box containing "Enter your answer".

UnitedHealthcare

## UnitedHealthcare BESMART Provider Network Participation Checklist & Attestation

*Buprenorphine Enhanced & Supportive Medication-Assisted Recovery and Treatment Program (BESMART)*

By completing this form, the provider is submitting a request to participate in the TennCare BESMART Program and abide by the requirements of same. This form must be completed and submitted by the prescriber. Once completed, we recommend that you save your response when prompted. For questions related to participation, you may email [SE\\_government\\_programs@uhc.com](mailto:SE_government_programs@uhc.com).

\* Required

### Provider Information

1. Prescriber Last name \*

Enter your answer

2. Prescriber First Name \*

Enter your answer

# MCO-specific Attestation Processes- Wellpoint

Prescribers/Providers are credentialed under their primary specialty

If choosing to become part of BESMART network, must follow the following process:

## **New prescriber/Provider to Wellpoint network**

- Follow DPE (Digital Processing Enrollment) Process
- Must answer question(s) related to being part of BESMART program
- Upon being credentialed, if received all requirements for BESMART program, will be added to BESMART program
- Provider would request to join Wellpoint network via reaching out to Provider contractor or BH leadership
- Provider will be guided to submit documentation to become credentialed and contracted with Wellpoint network
- Upon being credentialed, if received all requirements for BESMART program, will be added to BESMART program



# MCO-specific attestation processes- Wellpoint (Cont'd)

## **Prescriber/Provider already part of Wellpoint network**

- If prescriber/provider is joining an existing rostered group: (e.g., CMHC, FQHC, RHC)
- Follow current roster process to add new providers to group
- Submit signed Wellpoint BESMART attestation and copy of valid TN DEA to Provider Relations Account Manager (PRAM)
- Upon receipt of above documents, Wellpoint PRAM will follow internal BESMART enrollment process
- If prescriber/provider is not part of a rostered group:
- Submit signed Wellpoint BESMART attestation and copy of valid TN DEA to Provider Relations Account Manager (PRAM)
- Upon receipt of above documents, Wellpoint PRAM will follow internal BESMART enrollment process
- All information must match CAQH data and be kept up to date once part of BESMART network.

# MCO-specific Attestation Processes

Attestation Form Elements/Data  
Needed

# Attestation Form Elements Per MCO

WellPoint	UHC	BlueCare
Prescriber Name	Prescriber Name	Prescriber Name
Prescriber Email Address	Prescriber Email Address	Prescriber Email Address
Alternate Email Address [typically practice manager/primary contact]	Alternate Email Address [typically practice manager/primary contact]	Alternate Email Address [typically practice manager/primary contact]
Practice Website, if applicable	Practice Website, if applicable	Practice Website, if applicable
Prescriber NPI	Prescriber NPI	Prescriber NPI
TIN	TIN	TIN
TIN Owner	TIN Owner	TIN Owner
Primary Specialty	Primary Specialty	Primary Specialty
Other Specialty (if not in dropdown)	Other Specialty (if not in dropdown)	Other Specialty (if not in dropdown)
Training Completed	Training Completed	Training Completed
DEA	DEA	DEA
TN Medicaid ID	TN Medicaid ID	TN Medicaid ID
License Type (MD, DO, NP, PA)	License Type (MD, DO, NP, PA)	License Type (MD, DO, NP, PA)
Supervising Name, if applicable	Supervising Name, if applicable	Supervising Name, if applicable
Supervising NPI, if applicable	Supervising NPI, if applicable	Supervising NPI, if applicable
Supervising DEA, if applicable	Supervising DEA, if applicable	Supervising DEA, if applicable
Do you offer Naltrexone?	Do you offer Naltrexone?	Do you offer Naltrexone?
Do you offer LAI Bup?	Do you offer LAI Bup?	Do you offer LAI Bup?
Accepting New Patients?	Accepting New Patients?	Accepting New Patients?
Appointments via Telehealth?	Appointments via Telehealth?	Appointments via Telehealth?
Accept/Treat Adolescents with OUD?	Accept/Treat Adolescents with OUD?	Accept/Treat Adolescents with OUD?
Accepting Pregnant/Post-partum?	Accepting Pregnant/Post-partum?	Accepting Pregnant/Post-partum?
Accepting Pregnant/Post-partum only? (for OB/GYNs)	Accepting Pregnant/Post-partum only? (for OB/GYNs)	Accepting Pregnant/Post-partum only? (for OB/GYNs)
MAT Service Addresses [multiple]	MAT Service Addresses [multiple]	MAT Service Addresses [multiple]
Collaborative Agreement?	Collaborative Agreement?	Collaborative Agreement?
MAT Checklist Items	MAT Checklist Items	MAT Checklist Items

# MCO-specific Attestation Processes (Cont'd)

## Submittal Process

- Wellpoint –
  - Current – paper attestation form;
  - Under development: Electronic form via Smartsheet
- UHC – Electronic form via Microsoft Forms
- BlueCare – Electronic form via Smartsheet

# MCO-specific Attestation Processes (Cont'd)

## Potential Pitfalls

- Service address on attestation doesn't match network participation service address
- Supervising physician is not participating in the program or not participating under the same practice
- Mid-level service location is not one of the four settings allowed by State law
- Providing incomplete or incorrect information in the attestation form
- Roster is not maintained

# MCO-specific Attestation Processes (Cont'd)

Why is BESMART participation determined at the prescriber level rather than the provider level?

Answer:

- Prescribers are ultimately and uniquely responsible for compliance/adherence to buprenorphine prescribing laws, rules, and program standards
- Per TennCare, participation is coded at the prescriber level and PAs for the drug product are at the prescriber level
- Quality management and other activities are performed at the prescriber level per the CRA

# MCO-specific Attestation Processes: BlueCare

## PROVIDER NETWORK CONTACTS

### BlueCare Tennessee



- Resources for Attestation Process:
  - [Regional Network Contact](#)
  - Email for BESMART Contracting:
    - [MAT\\_Referral\\_CM\\_UM@bcbst.com](mailto:MAT_Referral_CM_UM@bcbst.com)
  - For technical help with Availity®
    - Phone: [423-535-5717](tel:423-535-5717), Option 2

# MCO-specific Attestation Processes: UnitedHealthcare

PROVIDER NETWORK CONTACTS

United Healthcare

UnitedHealthcare  
Community Plan

Regional BESMART Contacts:

Region	Name	Phone/ Fax	Email
West	Ritchie Bowden	P: 901-493-0819 F: 855-481-6725	<a href="mailto:ritchie_bowden@uhc.com">ritchie_bowden@uhc.com</a>
Middle	Katrina Blackwood	P: 615-372-0120 F: 866-844-5429	<a href="mailto:katrina_blackwood@uhc.com">katrina_blackwood@uhc.com</a>
East	Lishunda “Lisa” Park	T: 612-642-7351 F: 877-751-9247	<a href="mailto:lishunda_park@uhc.com">lishunda_park@uhc.com</a>
Statewide	Zarius Merritt	T: 612-383-4409 F: 855-481-6725	<a href="mailto:zarius_merritt@uhc.com">zarius_merritt@uhc.com</a>
General			<a href="mailto:SE_Government_Programs@uhc.com">SE_Government_Programs@uhc.com</a>



# MCO-specific Attestation Processes: Wellpoint

PROVIDER NETWORK CONTACTS

Wellpoint



## Regional BESMART Contacts:

Region	Name	Phone	Email
East	Laura Lovely	865-318-5418	Laura.Lovely@wellpoint.com
Middle	Kimberly Golden	615-319-3977	<u>Kimberly.Golden@wellpoint.com</u>
West	Tonnette Henderson	901-623-5991	<u>Tonnette.Henderson@wellpoint.com</u>
Statewide Contracting	LaWanda Mayes	615-481-3682	<u>Lawanda.Mayes2@wellpoint.com</u>
Statewide	BESMART General Inquires	Email Box	WLPBESMART@wellpoint.com



QUESTIONS?

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# APPENDIX

# TCA for Mid-levels

## TCA for Mid-levels in a CMHC or FQHC Setting

- (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 community mental health center, as defined in § 33-1-101, or a federally qualified health center, as defined in § 63-10-601(a), that employs one (1) or more physicians and has adopted clinical protocols for medication-assisted treatment;
- (D)** Is employed at a facility that is a contracted buprenorphine enhanced medication assisted recovery and treatment (BESMART) program, or a successor program, provider 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;

# TCA for Mid-levels (cont'd)

## TCA for Mid-levels in an OBOT Setting

- (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 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;
- (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 enrollees 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 (h)(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;

# TCA for Mid-levels (cont'd)

## TCA for Mid-levels in Teaching/Training Hospitals

- (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;**