Role of the Pharmacist: Naloxone Training

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Disclosure

- Kathleen Besinque
 - Nothing to disclose.

Objectives:

After attending the presentation participants will be able to:

- 1. Identify appropriate candidates to receive naloxone rescue products
- Describe opioid overdose risk factors, prevention strategies, symptoms of an overdose, and overdose treatment with naloxone
- 3. Compare the different administration methods of naloxone
- 4. Counsel a person receiving naloxone regarding how and when to use the product.
- 5. Apply the California Board of Pharmacy protocol for furnishing naloxone

Pharmacists Roles

- Corresponding responsibility
- Pain Management (CDTM)
- Take Back programs
- Referral resource
- Education
- Naloxone furnishing











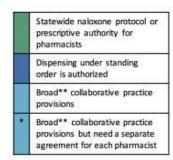
Pharmacists and Naloxone

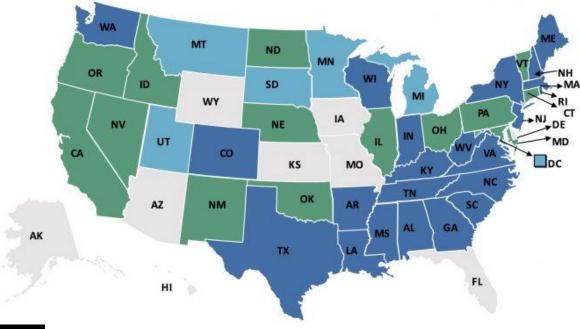


- In 2013 the pharmacy practice act was amended to authorize pharmacists to furnish naloxone under a protocol to be developed by the Board of Pharmacy.
- The protocol requires pharmacists to:
 - Receive training (1 hour CE is required) Note CME is accepted by the CABOP
 - Screen potential recipients
 - Provide education to the "recipient"
 - Provide referral and drug treatment information

Utilizing Pharmacists to Increase Naloxone Access

Based on data collected by NASPA (updated February 2016)







**Broad = Allow initiation of therapy, community pharmacists authorized to participate, no drug restrictions (may need to specify within the agreement), laws/regulations silent regarding the relationship between the prescriber and the patient



- Naloxone is a life-saving medication.
- Naloxone is not a controlled substance and it should not be confiscated by law enforcement
- A.B. 1535: authorizes pharmacists to furnish naloxone
- A.B. 472, 635: Good Samaritan Laws
 - -provide protection from civil and criminal liability for lay persons who respond to an overdose
 - -provide limited protection from drug charges for people who call 911 re: an overdose
 - -provide protection from civil and criminal liability for medical providers who establish standings orders to distribute naloxone







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Welcome to the California State Board of Pharmacy

The Board of Pharmacy protects and promotes the health and safety of Californians by pursuing the highest quality of pharmacist's care and the appropriate use of pharmaceuticals through education, communication, licensing, legislation, regulation, and enforcement.

Nhat's New

- Self-Administered Hormonal Contraception Protocol Information
- DEA National Prescription Drug Take-Back Day
- OCDC Approves Final Opioid Guidelines
- Nicotine Replacement Therapy Protocol Information
- Naloxone Protocol Information
- Recall Notices
- Information for CURES (Updated 7/25/16)



Popular Pages

- Verify a License
- Law Book
- Board & Committee Meetings
- Publications & Reports
- Pharmacy Law Changes for 2016

Quick Hits

- Laws and Regulations
- O Change of Address and/or Name



Who are the appropriate recipients for naloxone?

- Persons who take opioids or associates of persons who take opioids are all potential recipients for naloxone.
- Pharmacists screening for patients and/or recipients
- Self-identification by patients

Patient vs recipient

Who is at risk for overdose?

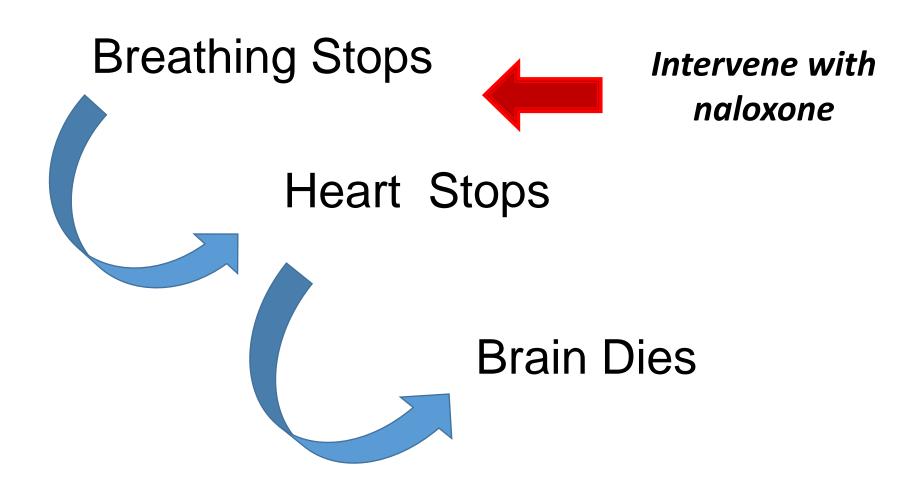
- History of substance use, dependence or addiction
- Potential for accidental exposure
 - Children, other members of household
- Being alone while using opioids
- Dose of opioid
 - Taking MED >20mg/day
- Chronic renal or hepatic insufficiency

- Changes in Tolerance
 - -short periods of reduced use or abstinence followed by resumed use
- Changes in Substance Used
 - -unpredictable with illicit substances
 - -change in prescribed opioid
- Sleep apnea
- Mixing medications
 - -CNS depressants
 - -alcohol

Pharmacological Effects of Opioids

- Depressed central nervous system
 - -Sedation, drowsiness ("nodding")
 - -Slow/slurred speech
 - -Euphoria, pain relief
- Respiratory depression
 - -Shallow and/or infrequent breathing
 - -Constricted breathing; choking sounds, gasping
- Dilated pupils
- Nausea/Vomiting
- Flushed skin; itching

Mechanics of an Opioid Overdose



Assessing for Overdose: ABC

1) Awake Can you wake the person up?

Sternum Rub: rub knuckles on sternum/breastbone- HARD Trapezius Pinch: Pinch muscle that connects shoulder to neck

2) Breathing Is breathing normal?

Are breaths more than 8-10 seconds apart? Do you hear choking or gurgling sounds?

3) Color Is color changing?

Are face, lips, fingernails turning blue or purple?

Naloxone

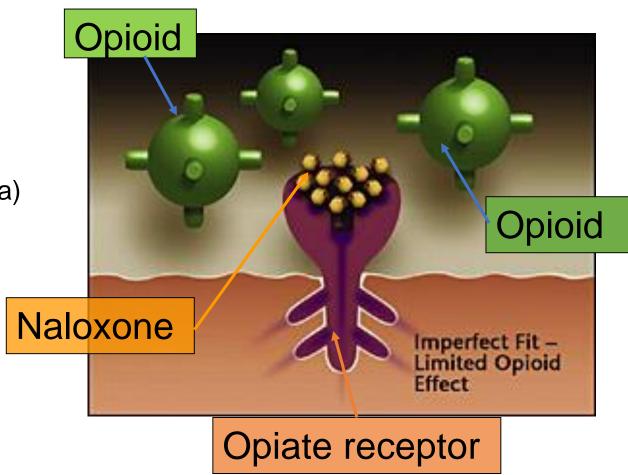
Temporary opioid blocker that causes complete or partial reversal of respiratory and/or CNS depression.

-only impacts opioid receptors (mu, kappa, delta)

-does not eliminate opioids from brain/body

-overdose symptoms can return

-onset 2-5 minutes, peaks in 15-20 minutes, duration of action 20-90 minutes



Effects of Naloxone

- Temporary opioid blocker
 - -takes effect in 2 to 5 minutes; lasts 20 to 90 minutes
 - -cannot be abused
 - -no dosage limit; more naloxone = more receptors blocked
 - -no drug interactions beyond opioids
- Precipitated withdrawal
 - -pain
 - -nausea/vomiting
 - -anxiety

Recipient Training: Overdose Prevention

- Encourage buddy system
 - -Tell friends/family/caregivers where naloxone is kept and how to use it
- Educate on polysubstance use
 - -Mixing sedatives makes overdose more likely
 - -Mixing stimulants with sedatives does not reduce overdose risk
- Educate on tolerance changes

	Recipient Training: Responding to an Overdose
S	Stimulation: assess for responsiveness with sternum rub or trapezius pinch
C	Call 911: follow dispatcher's instructions
A	Airway: Lay person flat and check mouth for food/objects
R	Rescue Breathing: tilt head back, pinch nose and breathe into mouth; give 2 breaths every 5 seconds
E	Evaluate for change
M	Medicine: administer naloxone; wait 2-3 minutes; continue rescue breathing
E	Evaluate for change; administer more naloxone if needed

Recipient Education: After an Overdose

- Overdose symptoms can return;
 - encourage person who overdosed to go to hospital
- Withdrawal symptoms cannot be treated with opioids after an overdose
- Recovery position
- Return for more naloxone if it gets used or lost

Opioid withdrawal symptoms

- Anxiety
- Sweating
- Irritability
- Flu-like symptoms
- "goose-bumps"
- Nausea, vomiting and/or diarrhea
- Rapid heart rate or hypertension



Requirements for furnishing naloxone

- 1. Conduct Screening (3 questions)
- 2. Provide training & consultation (required)
 - a. Risk factors and prevention
 - b. Assessing for overdose
 - c. Responding to overdose emergency
 - d. Naloxone consultation
 - e. Legal protection
- 3. Naloxone is a bystander administered drug; instruct patients to tell a potential caregiver where naloxone is kept and how to use it
- 4. Patients can self-refer and request naloxone





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Naloxone Information

- Naloxone News Release
- Naloxone Protocol



Sample Naloxone Labels

Fact Sheets

- Naloxone Fact Sheet English
- Naloxone Fact Sheet Spanish
- Naloxone Fact Sheet Traditional Chinese
- Naloxone Fact Sheet Korean
- Naloxone Fact Sheet Russian
- Naloxone Fact Sheet Tagalog
- Naloxone Fact Sheet Vietnamese

Screening Questions

- Naloxone Screening Questions English
- Naloxone Screening Questions Spanish
- O Naloxone Screening Questions Traditional Chinese
- Naloxone Screening Questions Korean
- Naloxone Screening Questions Russian

Documentation

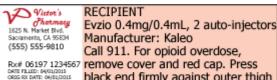
Medication label:

http://pharmacy.ca.gov/licensees/naloxone labels.shtml

Notifications

- If recipient is also the person at risk of overdose, they are considered the patient
- Primary care provider will be notified if the patient gives consent
- If primary care provider cannot be notified, refer the patient to a primary care provider and complete a written record of items furnished
- Document each product in medication record/profile





Manufacturer: Kaleo Call 911. For opioid overdose, remove cover and red cap. Press black end firmly against outer thigh to inject. May repeat in 3 minutes if patient is not breathing.

Provider: Roger Brown RPH Quantity: 2 auto-injectors

Auto-Injector Expires: 04/01/2016

John Doe

RPH: RB Store DEA# BTSSSSSSS

SAMMANUTH & GONDALPS

4200 EUH STREET ELK GROVE, CA 95758

Naloxone, Intranasal 1mg/1mL, 2mL Needleless Syringe Manufacturer: Amphastar Call 911. Attach white cone. Spray ½ of syringe (1mL) into each nostril for opioid overdose. May repeat in 3 minutes if patient not breathing

Provider: Roger Brown RPH

Expires: 04/01/2016

Quantity: 2 Syringes Prefilled Needleless Syringe

Jane Doe

Narcan Nasal Spray 4mg/ 0.1ml sprayer Manufacturer: Adapt Pharma Call 911. Administer a single spray intranasally into one nostril for opiod overdose. May repeat in 3 minutes if patient is not breathing.

Provider: Roger Brown RPH Quantity: 2 Nasal Sprays

Prefilled Nasal Spray Expires: 04/01/2016

Rx# 06197 1234567

DATE PILLED: 04/01/2016 CHIS NX DATE 04/01/2016

Sacramento, CA 95835 (555) 585-6789

(555) 555-9810

Rx# 06198 1234567 DATE FILLED: 04/01/2015 ORDS RX DATE: 04/01/2015

Sacramento, CA 95835 (555) 555-6789

Sacramento, CA 95834 (555) 555-9810

Furnishing Naloxone

- Conduct Screening
- 2. Provide training & consultation (required)
- 3. Provide resources

Naloxone Fact Sheet:

http://www.pharmacy.ca.gov/publications/naloxone_fact_sheet.pdf

Referrals for drug treatment:

SAMHSA's National Helpline: 1-800-662-HELP (4357)1-800-487-4889 (TDD)

Community Assessment Service Centers: (888) 742-7900

Screening questions for naloxone furnishing

- 1. Does the potential recipient currently use or has a history of using illicit or prescription opioids?
 - If the recipient answers yes, the pharmacist may skip question 2
- 2. Is the potential recipient in contact with anyone who uses or has a history of using illicit or prescription opioids?
 - If the recipient answers yes, the pharmacist may continue.
- 3. Does the person to whom the naloxone hydrochloride would be administered has a known hypersensitivity to naloxone.
 - If the recipient answers yes, the pharmacist should not provide naloxone. If the recipient responds no, the pharmacist may continue.

Naloxone Consultation

- Advise on product choice
 - -price
 - -comfort with devices
- Dosing
 - -depending on product
 - -multiple doses may be needed to be effective
- Expiration dates

- Storage
 - -protect from sunlight, extreme temperatures
- Adverse effects
 - -risk of cardiovascular effects
 - -overdose symptoms can return
 - -withdrawal symptoms.
 - Recipient cannot waive consultation





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Opioids can cause bad reactions that make your breathing slow or even stop. This can happen if your body can't handle the opioids that you take that day.

TO AVOID AN ACCIDENTAL OPIGID OVERDOSE:

- Try not to min your opioids with alcohol, berundiscepines (Karax, Ativan, Klonopin, Valium), or medicines that make you sleepy.
- Be extra careful if you miss or change doses, feel iil, or start new medications.

Now that you have naloxone...

Tell someone where it is and how to use it.

Common opioids include:

GENERIC	BRAND NAME		
Hydrocodone	Vicadin, Lorset, Lortab, Norso, Zohydro		
Oxycodone	Percocet, OxyContin, Roxicodone, Percodan		
Morphine	MSCordin, Kadian, Embeda, Avinza		
Codeine	Tylenol with Codeine, TyCo, Tylenol #3		
Fentanyl .	Duragenic		
Hydromorphone	Dilaudid		
Oxymorphone	Opera		
Heperidine	Demerol		
Hethadone	Dolophine, Hethadose		
Buprenorphine	Subceone, Subutex, Zubsolv, Bunavall, Butcare.		

[&]quot; Heesile its after my opioid.

For patient education, videos and additional materials, please visit www.prescribetoprevent.org





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Opioid safety and how to use naloxone



A GUIDE FOR PATIENTS AND CAREGIVERS

DESCRIPTION OF

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How to identify an opioid overdose:

Look for these common signs:

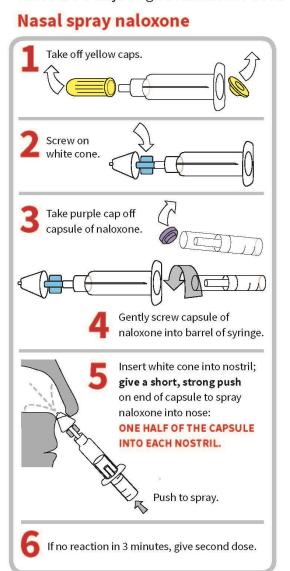
- The person won't wake up even if you shake them or say their name
- Breathing slows or even stops
- Lips and fingernails turn blue or gray
- Skin gets pale, clammy

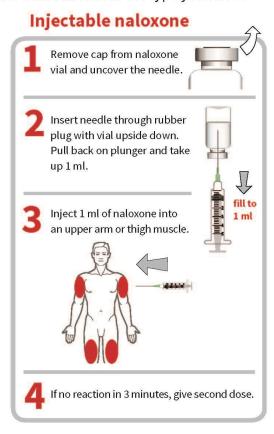
In case of overdose:

- 1 Call 911 and give naloxone
 If no reaction in 3 minutes,
 give second naloxone dose
- 2 Do rescue breathing or chest compressions Follow 911 dispatcher instructions
- 3 After naloxone
 Stay with person for at least
 3 hours or until help arrives

How to give naloxone:

There are 3 ways to give naloxone. Follow the instructions for the type you have.





Auto-injector

The naloxone auto-injector is FDA approved for use by anyone in the community. It contains a speaker that provides instructions to inject naloxone into the outer thigh, through clothing if needed.

Naloxone Formulations

- Naloxone formulations allowed:
 - Any FDA-approved formulation
 - May advise recipient on product selection
 - May recommend other items
 - Alcohol pads
 - Gloves
 - Rescue breathing masks
- May provide in advance (obvious)
- May refill orders







Naloxone Formulations Compared

Route of administration	Advantages	Disadvantages	Other notes
Intramuscular (IM)	Fastest onset May be least expensive	Potential exposure to blood Requires user to have injection training	Lowest cost
Intranasal	Onset fast (similar to IM) Easy to administer No blood exposure	May require assembly May not work as well as IM (especially if nasal passages are clogged) May need repeat doses	Intermediate cost
Auto-injector device	Easy to use (voice directed instructions) Trainers devices are available to train users	Expensive	Highest cost

Naloxone injection (kit)

Injectble Naloxone:

- 1. Remove orange cap from vial
- 2. Draw up all liquid (single dose vial)
- 3. Insert needle into skin at a 90° angle
- 4. Inject in muscle: upper arm or thigh
- 5. Push down on plunger slowly









Secremento, CA 95934 Single Dose Vial

Provider: Roger Brown RPH.

Quantity: 2 Vials

RECIPIENT

Naloxone, Injection 0.4mg/1mL,

Single Dose Vial

Manufacturer: Hospira

Call 911. Inject 1mL into upper arm or thigh muscle for opioid overdose.

May repeat after 3 minutes if patient

not breathing.

Expires: 04/01/2016

Rx# 06197 1234567 DATE FILLED: 04/01/2015 ORIG RX DATE: 64/61/2015 Store DEAR BTSSSSS

5873 EVERGREEN AVE DAVIS, CA 96616

Provider: Roger Brown RPH

ictor & 2025 N. Market Blid Sacramento, CA 95884 Syringe hatmacy (555) 555-9810

Quantity: 2 Syringes

RECIPIENT

3mL syringe with 25G x 1" needle

Manufacturer: BD

Call 911. Use to withdraw naloxone from vial and inject 1mL into upper arm or thigh muscle for opioid overdose. Use a new syringe for each dose.

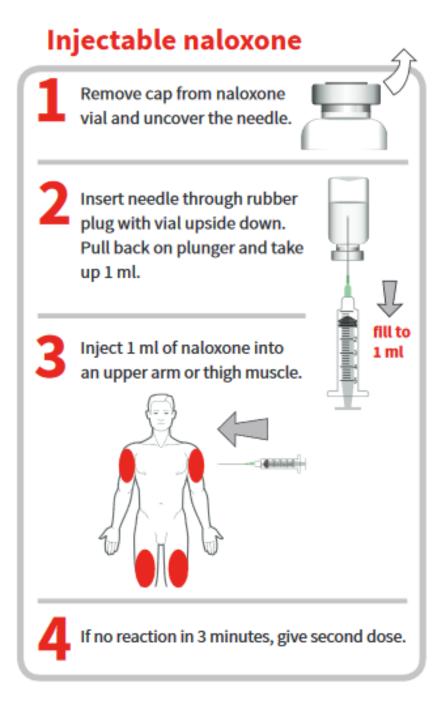
Expires: 04/01/2016

Fx# 06198 1234567 DATE FILLED: 04/01/2015 ORIGIRX DATE: 04/01/2015

Stone DEA# STSSSSSSSS

Judith Johnson 58T3 EVERGREEN AVE DAVIS, CA 95615 (555) 555-T889

Administration: IM injection

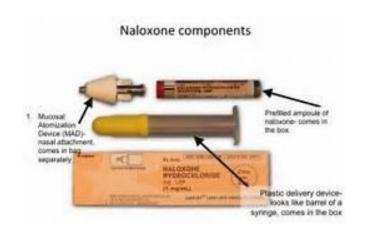


Intranasal Naloxone

Amphastar® Luer Lock Prefilled Syringe: 2 mg per 2 mL single dose syringe or vial

- 1. Remove protective caps from vial and syringe
- 2. Insert vial into syringe
- 3. Affix nasal device
- 4. Spray ½ of solution into each nostril





John Doe

Naloxone, Intranasal 1mg/1mL, 2mL Needleless Syringe Manufacturer: Amphastar Call 911. Attach white cone. Spray ½ of syringe (1mL) into each nostril for opioid overdose. May repeat in 3 minutes if patient not breathing.

Provider: Roger Brown RPH

Quantity: 2 Syringes

Prefilled Needleless Syringe

Expires: 04/01/2016

Rx# 06197 1234567

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Adem Smith 73 Plain St. Secraments, CA 95835 (555) 555-6789

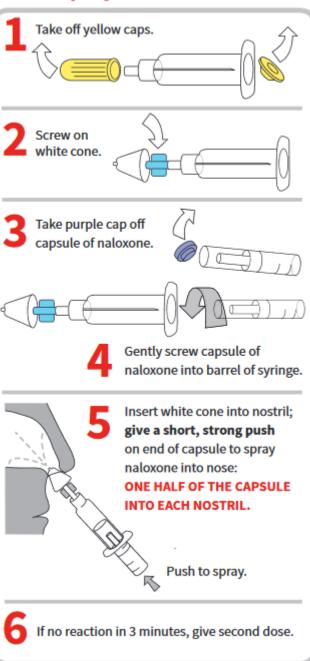
Victor's Jhatmasy 1625 N. Market Bvd. Sacramento. CA 95834 (555) 555-9810



Administration: nasal



Nasal spray naloxone



Intranasal Naloxone

Adapt Pharma Narcan® Device:

- 4 mg per 1 mL single dose device
- 1. Place tip of device in either nostril until your fingers touch the bottom of the patient's nose
- 2. Press plunger to release medication into nose

Jane Doe

Narcan Nasal Spray 4mg/ 0.1ml sprayer

Manufacturer: Adapt Pharma

Call 911. Administer a single spray intranasally into one nostril for opiod overdose. May repeat in 3 minutes if

patient is not breathing.

Provider: Roger Brown RPH Quantity: 2 Nasal Sprays

Prefilled Nasal Spray Expires: 04/01/2016 Rx# 06198 1234567

ORIG REDATE: 84/01/2015 RPH: RB

Den nis Comp 73 Main St. Sacramento, CA 95835

Victor's

1625 N. Market Blvd. Secremento, CA 95834 (555) 555-9810





Administration: nasal

https://fpdl.vimeocdn.com/vimeo-prod-skyfire-stdus/01/238/6/151191919/463598027.mp4?token=579ffd 9c_0x90a46edf2eb198b8d77d7c035b12eb279c891020& download=1&filename=NARCAN%C2%AE+Nasal+Spray+ 4mg+Instructions+for+Use.mp4



QUICK START GUIDE

Opioid Overdose Response Instructions

Use NARCAN Nasal Spray (naloxone hydrochloride) for known or suspected opioid overdose in adults and children.

Important: For use in the nose only.

Do not remove or test the NARCAN Nasal Spray until ready to use.

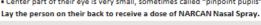
Identify Opioid Overdose and Checkfor Response

Ask person if he or she is okay and shout name.

Shake shoulders and firmly rub the middle of their chest.

Check for signs of opioid overdose:

- · Will not wake up or respond to your voice or touch
- · Breathing is very slow, irregular, or has stopped
- Center part of their eye is very small, sometimes called "pinpoint pupils"





Give NARCAN Nasal Spray

Remove NARCAN Nasal Spray from the box.

Peel back the tab with the circle to open the NARCAN Nasal Spray.













Hold the NARCAN nasal spray with your thumb on the bottom of the

plunger and your first and middle fingers on either side of the nozzle.

· Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into one nostril. until your fingers on either side of the nozzle are against the bottom of the person's nose.

Press the plunger firmly to give the dose of NARCAN Nasal Spray. Remove the NARCAN Nasal Spray from the nostril after giving the dose.



Get emergency medical help right away.

Move the person on their side (recovery position) after giving NARCAN Nasal Spray.

Watch the person closely.

responds or emergency medical help is received.

If the person does not respond by waking up, to voice or touch, or breathing normally another dose may be given. NARCAN Nasal Spray may be dosed every 2 to 3 minutes, if available.

Repeat Step 2 using a new NARCAN Nasal Spray to give another dose in the other nostril. If additional NARCAN Nasal Sprays are available, repeat step 2 every 2 to 3 minutes until the person

For more information about NARCAN Nasal Spray, go to www.narcannasalspray.com, or

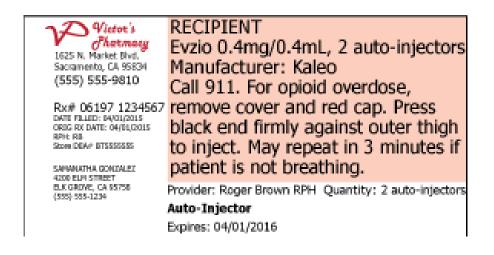
Call for emergency medical help, Evaluate. and Support



Naloxone Auto-injector

EVIZIO® Naloxone Auto-injector:

- 1. Remove from outer case
- 2. Pull out red safety tab
- 3. Press black end firmly into thigh muscle & hold down for 5 seconds
- 4. OK to inject through clothing





Administration: Auto-injector

A Trainer is Included for Practice

Each EVZIO prescription comes with a black-and-white Trainer that can be used for practice. Unlike EVZIO, the Trainer:



Does not have a needle



Does not have an expiration date



Does not contain medicine



Can be reused (more than 1000 times)

To be prepared in an opioid overdose emergency, patients, family members, caregivers, and other individuals who may have to administer EVZIO should practice using the Trainer to become familiar with the injection process. After practicing with the Trainer, the electronic voice system should be reset by:

- Replacing the red safety guard
- Sliding the Trainer all the way back into the outer case

The Trainer should be left in its outer case for at least 5 seconds between each practice interval to allow the electronic voice system to reset properly. For more information on the Trainer, view the Trainer Information.



How to Use EVZIO

Visual and voice instructions help guide the way

EVZIO is designed to be easy to use for patients, their family members, and other caregivers who do not have medical training.¹ It contains the Intelliject® Prompt System (IPS™) with visual and voice instructions that help quide the user through the injection process.

Administration steps



Pull EVZIO from the outer case.

Do not go to Step 2 (do not remove the red safety guard) until you are ready to use EVZIO. If you are not ready to use EVZIO, put it back in the outer case for later use.



Pull off the red safety quard.

To reduce the chance of an accidental injection, do not touch the **black** base of the auto-injector, which is where the needle comes out. If an accidental injection happens, get medical help right away.

Note: The red safety guard is made to fit tightly. Pull firmly to remove.

Do not replace the red safety guard after it is removed.



Place the black end against the middle of the patient's outer thigh, through clothing (pants, jeans, etc) if necessary, then press firmly and hold in place for 5 seconds.

If you give EVZIO to an infant less than 1 year old, pinch the middle of the outer thigh before you give EVZIO and continue to pinch while you give EVZIO.

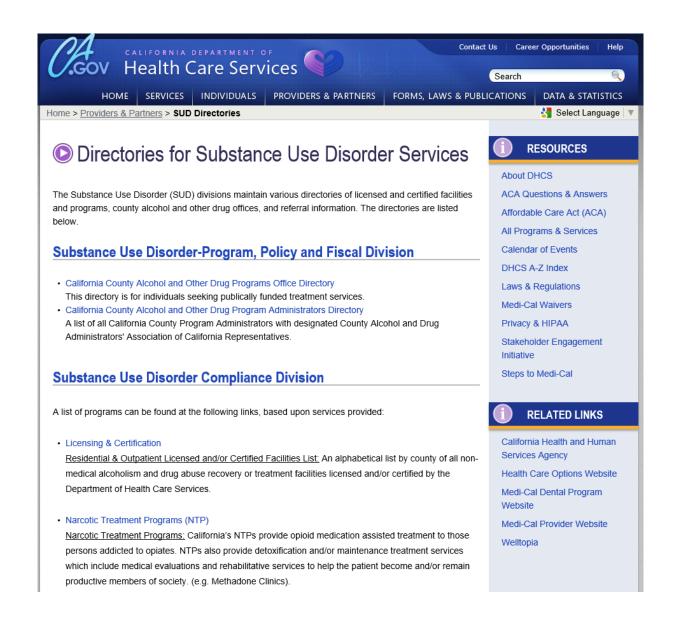
Note: EVZIO makes a distinct sound (click and hiss) when it is pressed against the thigh. This is normal and means that EVZIO is working correctly. Keep EVZIO firmly pressed on the thigh for 5 seconds after you hear the click and hiss sound. The needle will inject and then retract back up into the EVZIO auto-injector and is not visible after use.







Referral information



Additional resources/sources

- California Board of Pharmacy
- College of Psychiatric and Neurologic Pharmacists
- Managing Pain Safely (MPS): Pharmacy Toolkit
- Homeless Health Care Los Angeles Overdose Prevention and Response Training







(i) www.safemedla.org



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SAFE MED LA

Working Together to Reduce Prescription Drug Abuse and Overdose Deaths





Prescription Drug Abuse

is one of the fastest growing public health concerns in the U.S.

The United States is in the midst of an epidemic of prescription drug abuse fueled by unsafe prescribing practices, lack of addiction treatment options, and limited safe drug disposal options, among other important contributing factors.

Given that the causes of prescription drug abuse





① www.safemedla.org/safe-prescribing-pharmacy-practice-action-team.html





Safe Prescribing **Pharmacy Practice Action** Team

Priority Area I: Education and Training

KEY OBJECTIVE 2:

EDUCATE AND TRAIN HEALTH CARE PROFESSIONALS, INCLUDING PHYSICIANS AND PHARMACISTS, ON BEST PRACTICE GUIDELINES FOR SAFE PRESCRIBING AND IDENTIFYING PRESCRIPTION DRUG MISUSE THROUGH SCREENINGS

In addition to educating the community, education and training for health care professionals is also critical given their pivotal role in limiting prescription drug abuse by following safe prescribing practices and better recognizing misuse and addiction.

The Safe Prescribing Pharmacy Practice Action Team and the Safe Prescribing Medical Practice Action Team will:

> Engage key providers and organizations in order to expand the adoption of safe prescribing practices for controlled medications, such as limiting



Formulary Naloxone Products

Health Plan	Line of Business	Covered Products	Limits/Comments*
	(LOB)		
Aetna	Commercial	Naloxone nasal spray	n/a
Aetna	Medicare	Evzig auto-injector,	n/a
		naloxone nasal spray,	
Anthem Blue Cross	Commercial	and naloxone syringes Naloxone vials and	Evelo to non-newformed
Anthem Blue Cross	Commercial		Eyzig is non-preferred, requires step therapy with
		syringes, Evrio, Narcan nasal spray	preferred agents.
		nasar spray	Quantity limit of 6
			syringes/vials per 3
			months, 6 nasal sprays (3
			cartons) per 3 months or
			6 auto-injectors per 3
			months
Anthem	Medicare	Naloxone vials and	n/a
		syringes	
Blue Shield of California	Commercial	Naloxone nasal spray,	Quantity limit of 2 vials or
		vials and syringes	syringes per month; for
			nasal spray quantity limit
			of 2 doses/month
Blue Shield of California	Medicare	Naloxone solution and	Quantity limit of 2 mL per
		syringes	month for the solution
Care1st	Medicare	Naloxone nasal spray	Quantity limit of 2 mL per
ConCal Hoolth	Mad: Cal	Malawana hel	Convert out for Modi Col
ConCal Health	Medi-Cal	Naloxone bcl	Carved out for Medi-Cal members
Contra Costa Health Plan	All LOB	Naloxone 1 mg/ml	Carved out for Medi-Cal
Contra Costa ricardi Fian	All EUG	Injector	members
Health Net	Commercial	Naloxone nasal spray	Quantity limit
Health Net	Medicare	Naloxone nasal spray	Quantity limit on the nasal
		and syringes	spray
Humana	Medicare	Naloxone vial and	n/a
		syringes	
Kaiser	All LOB	Naloxone bcl.	None
L.A. Care Covered	Commercial	Naloxone syringes and	n/a

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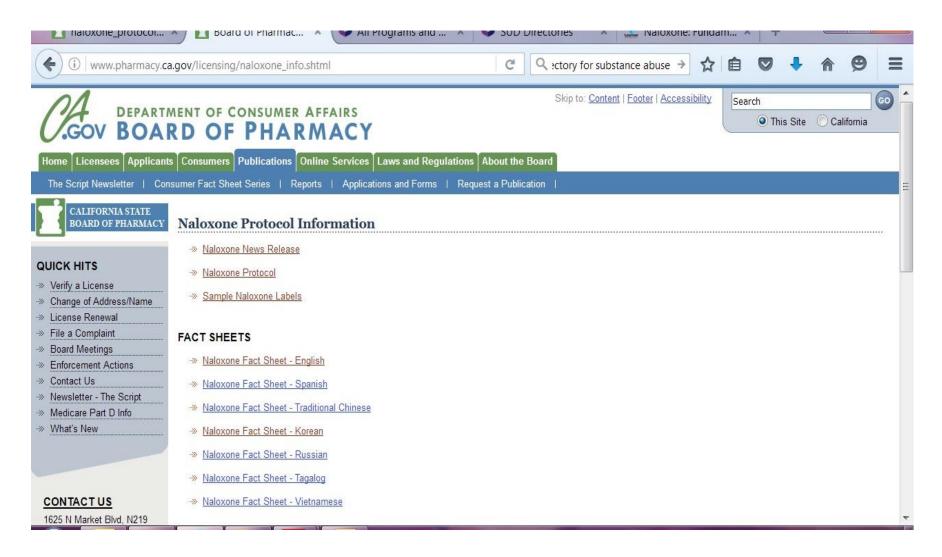
		nasal spray	
L.A. Care	Medicare	Naloxone syringes and nasal spray	n/a
Medij-Cal plans	Fee for Service and Managed Medi-Cal Plan	Naloxone syringes and nasal spray	Carved out to fee for service
Molina Marketplace		Narcan nasal spray, naloxone vials and syringes	Quantity limit of #2 per year
Molina	Medicare	Naloxone injection and syringes	None
Scan (Medicare)	Medicare	Narcan nasal spray and naloxone injection	
Sharp Health Plan	Commercial	Narcan, nasal spray	Quantity limit of #2 per 30 days on nasal spray
Sharp Health Plan	Medicare	Naloxone vials and syringes, Naccar, nasal spray	Quantity limit of #4 per 30 days on the nasal spray
UnitedHealthcare	Medicare	Naloxone syringes	n/a

^{*}Prior authorization may be required, check individual benefit plans.

Disclaimer: verification of individual plans and benefits may be required for formulary status. This information reflects formulary status as of March 2017 based on information available at the health plan websites.

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Resources



Summary

- There are multiple roles for the pharmacist in the arena of pain management and opioid use.
- Collaborative practice enhances patient safety.