

Expanded Criteria for Co-Prescribing Naloxone

New recommendations released from HHS

On December 19, 2018, the U.S. Department of Health and Human Services (HHS) released recommendations about prescribing naloxone to patients at risk for opioid overdose. These recommendations are separate from the requirements Health Net,* on behalf of CalViva Health, communicated in provider update 18-845, *Reversing Opioid Depression with Naloxone Hydrochloride*, distributed on November 16, 2018.

RECOMMENDATIONS

Naloxone is highly effective and has saved lives from opioid overdoses, but can only do so if it is in the right hands, at the right time. Health care providers have a critical role in assuring this occurs across all populations at risk.

In order to reduce the risk of overdose deaths, clinicians should strongly consider prescribing or co-prescribing naloxone, and providing education about its use for the following patients who are at risk of opioid overdose:

- Patients prescribed opioids who:
 - Are receiving opioids at a dosage of 50 morphine milligram equivalents (MME) per day or greater (the Centers for Disease Control and Prevention (CDC) MME calculator can be accessed online at www.cdc.gov/drugoverdose/prescribing/app.html).
 - Have respiratory conditions, such as chronic obstructive pulmonary disease (COPD) or obstructive sleep apnea (regardless of opioid dose).
 - Have been prescribed benzodiazepines (regardless of opioid dose).
 - Have a non-opioid substance use disorder, report excessive alcohol use or have a mental health disorder (regardless of opioid dose).
- Patients at high risk for experiencing or responding to an opioid overdose, including individuals:
 - Using heroin, illicit synthetic opioids or misusing prescription opioids.
 - Using other illicit drugs, such as stimulants, including methamphetamine and cocaine, which could potentially be contaminated with illicit synthetic opioids like fentanyl.
 - Receiving treatment for opioid use disorder, including medication-assisted treatment with methadone, buprenorphine or naltrexone.
 - With a history of opioid misuse who were recently released from incarceration or other controlled settings where tolerance to opioids has been lost.

THIS UPDATE APPLIES TO
MEDI-CAL PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

PROVIDER SERVICES

1-888-893-1569
www.healthnet.com

Providers are encouraged to refer to the formularies and drug lists on the provider portal online at provider.healthnet.com for naloxone, as coverage varies by formulation.

ADDITIONAL INFORMATION

If you have questions regarding the information contained in this update, contact CalViva Health at 1-888-893-1569.