Naloxone Dispensing in Pharmacies and the Naloxone Co-payment Assistance Program

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www.harmreduction.org
Objectives

By the end of this webinar, participants will be able to:

1. Instruct people on the use of the new Adapt Narcan formulation

2. Describe naloxone standing orders in pharmacies

3. Explain how the Naloxone Co-payment Assistance Program (N-CAP) works
Current estimates are that in 2016 there were about 52,000 opioid-related overdoses in the United States (graph above is all-cause overdose deaths).
Drugs involved in U.S. overdose deaths, 2000 to 2016

- **Fentanyl and fentanyl analogues**: 20,100
- **Heroin**: 15,400
- **Prescription opioids**: 14,400
- **Cocaine**: 10,600
- **Methamphetamine**: 7,660
- **Methadone**: 3,280

5,000 deaths per year
Fentanyl Facts

• The most powerful opioid used in human medicine
  o 50 – 100 x painkilling power of morphine
  o Often used during surgery and to treat cancer pain

• Has a rapid onset with a short duration

• Began to appear in large quantities as Illegally Manufactured Fentanyl (IMF) about 2013

• Often mixed with heroin and in fake pills

• Some reports of chest wall rigidity during fentanyl-related overdoses

• Naloxone does work for fentanyl
Formulations
How to use the new Adapt (Narcan) device
New Adapt (Narcan) Device

• Requires no assembly

• Device should remain in its blister pack until ready to use
  o DO NOT PRACTICE WITH DEVICE
  o The entire dose is released when the plunger is pushed

• Contains 4 mg/0.1ml of naloxone
  o This dose is 40 times more concentrated than the previously used multi-step nasal spray (Amphastar) with twice as much naloxone in 1/20 the amount of water
OD Prevention Training

- Explain what naloxone does—opioid OD antidote
- Recognize an OD
- Give naloxone/call 911
- Follow-up
  - EMS not called
- Report and Refill
What to do in case of an OD?

• Call 911
  – “My friend is overdosing and not breathing”
    And

• Administer naloxone

• Do first whichever is closer at the time, then do the other one!
How to Administer Narcan

1. Peel
Peel back the package to remove the device. Hold the device with your thumb on the bottom of the plunger and 2 fingers on the nozzle. Do NOT press the plunger.

2. Place
Place and hold the tip of the nozzle in either nostril until your fingers touch the bottom of the person’s nose.

3. Press
Once the tip is in the nostril, press the plunger firmly to release the dose into the person’s nose.

4. Repeat
After 2-3 minutes if there is no or minimal response, repeat with second device into other nostril.
NYS DOH Pharmacy Program and Standing Orders

• **NYS DOH Pharmacy Program:**
  • Authorizes participating pharmacies to provide naloxone to individuals through a ‘standing order’
  • Feels like an over-the-counter transaction to the customer

• **Naloxone Standing Order**
  • Also known as a ‘non-specific patient prescription’ authorized by a medical provider
  • Allows pharmacists to dispense naloxone to individuals without an individual prescription
Pharmacy Dispensing

There are many pathways for naloxone dispensing in pharmacies:

- Many private insurance plans now cover at least one formulation of naloxone.
- Standing Orders ROS (HRC, Sharon Stancliff, MD).
- Standing Orders for NYC- (Commissioner Bassett, NYCDOHMH).
- CVS and Walgreens/ Duane Reade registered as opioid overdose programs.
- Medicaid Managed Care plans are now required to cover at least one formulation of naloxone.

Currently over 2,000 pharmacies with standing orders in NYS.
Pharmacy Dispensing Challenges

• Uptake is still very slow

• Many other states in the US experience similar issues with pharmacy dispensing

• One perceived barrier is the co-payment that individuals need to pay in pharmacies when registered programs distribute at no cost to individuals
Naloxone Co-payment Assistance Program

N-CAP
For individuals with prescription coverage as part of their health insurance plan, N-CAP will cover up to $40 in prescription co-payments so there are no or lower out-of-pocket expenses when getting naloxone at a participating pharmacy.

Available with standing orders

Available with patient specific prescriptions

There is no enrollment: co-payment program, not an enrollment program

No coupons are required: Pharmacists will have the billing information at the register.
Rationale for N-CAP

- Provides more, easily accessible naloxone in community
  - Ideal for refills
  - In closer proximity to one’s home
  - Open longer hours than registered programs (nights/weekends)

- Saves the state funding—Average cost of a naloxone kit is $70 while an average co-pay is $10

- Allocates more funds to registered Opioid Overdose Prevention Programs (OOPPs) to dispense free naloxone to participants (including those not eligible for N-CAP such as the uninsured)

- **N-CAP does not replace free naloxone at OOPPs**
How N-CAP Works

N-CAP is managed by the Office of HIV Uninsured Care Programs using the same Pharmacy Benefit Management System as the AIDS Drug Assistance Program (ADAP). **Pharmacies must be enrolled in ADAP in order to participate in N-CAP.**

Claims will be submitted to N-CAP simultaneous to when the prescription is filled.

Claims will be adjudicated electronically, using industry standard NCPDP D.0 format with HIPAA compliant responses reflecting the amount paid or, if denied, the reason for the denial.

Business rules will follow the rules of the health insurance plan with regard to the number of refills and formulations allowed.
Data Collection

• Real time data will be available
  o By county and zip code of pharmacy

• No patient information will be collected

• County level data will be posted on the opioid website on a quarterly basis
How Can Data be Used?

- Data can be used to drive programming
  - Pharmacy detailing can be done for pharmacies not dispensing to find out why and provide technical assistance
  - When overdoses increase in a county, more outreach can be done to get more standing orders in pharmacies in the county
Help Spread the Word!

Information will be available at locations including pharmacies, registered programs, homeless shelters, emergency departments, & LGBT centers.

Peers, outreach workers, & law enforcement should all carry N-CAP palm cards to pass out.
To find the nearest participating pharmacy, O OPP, & promotional materials for N-CAP please visit:

www.health.ny.gov/overdose

Additional Harm Reduction Resources:

www.harmreduction.org
Key Takeaways

• The Adapt product of naloxone (Narcan) will be dispensed to all registered Opioid Overdose Prevention Programs (OOPPs)
  • Requires no assembly
  • Do not open it until you are ready to use it

• Naloxone can be accessed at OOPPs and pharmacies with a standing order
  • A standing order does not require a participant to receive an individual prescription

• N-CAP covers the co-payment cost of naloxone (up to $40) at pharmacies with standing orders
  • Implementing N-CAP is done by the pharmacists
  • Individuals receiving naloxone do not need to do anything except ask for naloxone and make sure the pharmacist knows about N-CAP
Questions?

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