

# NALOXONE PROVIDER FACTS

- » As a universal precaution Naloxone, should ALWAYS be co-prescribed for ALL patients taking opioids.
- » Avoid concurrent benzodiazepine and opioid prescribing. This combination of medications and increase overdose risk.
- » Naloxone reverses overdose by restoring breathing.
- » Fast Acting-Takes effect in about 2-5 minutes with a lasting effect of about 20 to 90 minutes.
- » Patient's may need more than one dose during overdose. Make sure that your patient has two doses on hand.
- » Safe to administer with few side effects. Most side effects are related to opioid withdrawal such as pain, lacrimation, nausea, diarrhea, and agitation. If given to a person who is not opioid-intoxicated it will not produce a clinical effect even at high doses.
- » The prescription is Written-Naloxone 1mg/ml. Inject one half of vial into each nostril via nasal atomizer. Repeat in 2 minutes with second vial if no response. Dispense #2 vials with atomizer kit.
- » Can be use with pregnant women in life threatening emergencies.
- » Can be purchased without a prescription in participating pharmacies across Colorado. Visit [Stoptheclockcolorado.org](http://Stoptheclockcolorado.org) for a list of participating pharmacies in your area.



## Patients at Risk for Overdose

- » Any patient on opioids.
- » Patients taking daily doses > 50 morphine milliequivalents.
- » Changes in dose or formulations. This includes heroin as much of the heroin is adulterated with fentanyl and the purity is unknown.
- » Polypharmacy-especially benzos, stimulants, clonidine, gabapentin. Think any CNS depressant. Ask about alcohol use.
- » Patients who have had a non-fatal prior overdose and/or previous substance use history.
- » Patients on medication assisted treatment such as methadone and buprenorphine.
- » Patients with chronic medical conditions such as COPD, kidney & liver disease.
- » Socially isolated patients.
- » ANY period of abstinence because tolerance is much lower and what they used in the past to feel normal could now kill them.
- » Patients recently released from incarceration.



## Billing



- » You can bill for the time spent educating patients how to administer Naloxone and how to recognize opioid overdose.
  - » Use the SBIRT billing codes H0050 for Medicaid and G0396 for Medicare. For commercial insurance use CPT code 99408.
- » Colorado Medicaid covers the intranasal version and atomizer up to 15 units per covered year.

## Starting Conversations



- » "Naloxone is a lifesaver just like a seatbelt or fire extinguisher and that's why I am prescribing it for you today!"
- » "Opioid medications increase the risk of a breathing emergency and Naloxone is needed in case of emergency."
- » "Young children can get a hold of this medication and have a breathing emergency, let's keep your family safe by having Naloxone just in case."