



# Naloxone Dispensing Program Memorandum

To: All Community Pharmacies in Iowa

From: Iowa Department of Public Health, Iowa Board of Pharmacy, & MedOne

Effective July 1, 2020, community pharmacies in Iowa will be able to submit electronic claims for reimbursement for Narcan<sup>®1</sup> or Kloxxado<sup>®2</sup> or generic naloxone nasal spray prescriptions for Iowa residents 18 years of age or older who may be at risk of an opioid-related overdose or to individuals who may be in a position to assist with an opioid-related overdose.

Electronic claims for Narcan<sup>®</sup> Nasal Spray 4 mg (NDC 69547-0353-02), Kloxxado Nasal Spray 8mg (NDC 59467-0679-01) or generic naloxone nasal spray 4mg (e.g., NDC 000781-7176-12 or 00093-2165-68) may be submitted directly to this BIN and PCN to dispense naloxone at no charge to the recipient. Funding for the program is limited and coordination of benefits (COB) is encouraged, but not required.<sup>3</sup>

Pharmacies will be reimbursed according to the Iowa Department of Human Services' AAC list<sup>4</sup> plus a dispensing fee.<sup>5</sup> The dispensing fee takes into account the clinical services of the pharmacist in evaluating the recipient for the appropriateness of naloxone dispensing.

For entities that want to receive Naloxone Nasal Spray on behalf of an agency, please contact the Iowa Department of Public Health at 515-281-5444 to discuss other available opportunities.

If you have any questions regarding the Naloxone Dispensing Program, or are in need of quantity limit overrides, please contact the Board of Pharmacy at 515-725-3492.

Pharmacies will need to submit electronic claims using the following processing information:

Rx BIN: 019538                      Rx PCN: MD1                      Rx GRP: SIA0001                      ID# (Not Required)

1. Submit this claim to MedOne for reimbursement. Electronic claim should be processed for Narcan<sup>®</sup> Nasal Spray 4 mg (NDC 69547-0353-02), Kloxxado<sup>®</sup> Nasal Spray 8mg (NDC 59467-0679-01) or a valid NDC for a generic naloxone 4mg nasal spray.
2. Each recipient is limited to receiving two Narcan<sup>®</sup> or Kloxxado<sup>®</sup> or generic naloxone kits (each kit containing two doses of naloxone) per month (which may be dispensed at one time) and no more than six naloxone kits per 6-month period.
3. For CASH paying customers, pharmacy may process as the primary claim with an Other Coverage Code (OCC) of 0. For patients with primary insurance, pharmacy should process as a secondary claim with OCC of 2, 3, or 8. For OCC of 2 or 3, pharmacies must submit the primary payor amount and the program will reimburse for the members copay/co-insurance and any amount paid by the primary payor less then program allowed amount. For OCC of 8, pharmacies will be reimbursed for the members copay/co-insurance only.
4. Prescriber NPI is not required for claim submission for naloxone prescriptions issued outside of the traditional prescriber-patient relationship. Pharmacies that require Prescriber NPI for claim submission may use NPI number 1801868526 for Dr. David Stilley for prescriptions issued pursuant to the statewide standing order, or the Pharmacist NPI for prescriptions issued pursuant to the statewide protocol.
5. For any processing questions, please contact MedOne at 888-884-6331

<sup>1</sup>Narcan<sup>®</sup> is a registered trademark of Emergent BioSolutions.

<sup>2</sup>Kloxxado<sup>®</sup> is a registered trademark of Hikma Specialty.

<sup>3</sup>Primary insurance coverage is not required. Claims may be submitted directly to MedOne. Funding for program is limited and therefore COB claims are encouraged. 100% of program funding is provided through the SAMHSA State Opioid Response (SOR) grant.

<sup>4</sup>Current product reimbursement rates can be found at: <https://www.mslc.com/iowa/AACList.aspx>.

<sup>5</sup>Pharmacies will be paid a \$20.00 dispensing fee.