





## **Naloxone Dispensing Program Memorandum**

To: All community pharmacies in Iowa

**From:** Iowa Department of Health and Human Services

Iowa Department of Inspections, Appeals, and Licensing MedOne

As of July 1, 2020, community pharmacies in Iowa can submit electronic claims for reimbursement for Narcan®1 or Kloxxado®2 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® Nasal Spray 4 mg (NDC 69547-0353-02), Kloxxado Nasal Spray 8 mg (NDC 59467-0679-01) or generic naloxone nasal spray 4 mg (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. Pharmacies will be reimbursed \$45 per kit, for both OTC and RX. The dispensing fee for naloxone products (OTC and RX) will be \$20. The dispensing fee includes 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 lowa Department of Health and Human Services at sor@hhs.iowa.gov to discuss other available opportunities.

If you have any questions regarding the Naloxone Dispensing Program that are not related to billing, please contact the Iowa Department of Inspections, Appeals, and Licensing at 515-380-7392.

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

Rx BIN: 019538 | Rx PCN: MD1 | Rx GRP: SIA0001 | ID#

- 1. Submit this claim to MedOne for reimbursement. Electronic claim should be processed for Narcan® Nasal Spray 4 mg (NDC 69547-0353-02), Kloxxado® Nasal Spray 8 mg (NDC 59467-0679-01) or a valid NDC for a generic naloxone 4 mg nasal spray.
- 2. Each recipient is limited to receiving two Narcan® or Kloxxado® 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 member's copay/co-insurance and any amount paid by the primary payor less than program allowed amount. For OCC of 8, pharmacies will be reimbursed for the member's 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 1053752352 for Dr. Robert Kruse 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.

Updated: 07/25

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

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

<sup>&</sup>lt;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. The SAMHSA State Opioid Response (SOR) grant provides 100% of program funding.