THINGS to KNOW

About Prescribing Naloxone

1: What are the benefits of naloxone?
- Naloxone is an opioid antagonist indicated for the emergency treatment of a known or suspected opioid overdose manifested by respiratory and/or central nervous system depression.
- Naloxone may be administered IV, IM, or intranasally.

2: Why prescribe naloxone?
- Patients are often unaware that even at medically appropriate doses, opioids have significant risks.
- Patients are often unaware that naloxone is a potentially life-saving agent that reverses respiratory and central nervous system depression.
- Data suggests that despite widespread expanded access initiatives, naloxone is underutilized.
- Even if your state doesn’t require a formal prescription to access naloxone, patients may be more likely to obtain it if a prescription is provided.

3: Who should receive a prescription for naloxone?
- Patients prescribed greater than or equal to 50 MME (morphine milligram equivalents) per day.
- Patients taking opioids at any dose who have one or more of these risk factors:
  - History of prior overdose, misuse of opioids, or IV drug use
  - Opioids and benzodiazepines
  - Acute respiratory conditions such as chronic obstructive pulmonary disease (COPD) or obstructive sleep apnea
  - Alcohol use
  - History of a mental health disorder
  - Has limited emergency medical care access

References:
2. CMS analysis of FFS beneficiaries with Part D considered to be “HRM” high risk – 3 or more chronic meds plus chronic opioid for CY 2017. Conrad Quality Insights for more info.
3. MME calculator - [https://www.1stperc.
gov/apps/dh/parkway/providers/health-topics/mmelmecalculatorpage](https://www.1stperc.gov/apps/dh/parkway/providers/health-topics/mmelmecalculatorpage)

This material was prepared by Quality Insights, the Medicare Quality Innovation Network-Quality Improvement Organization for New Jersey, Pennsylvania, Delaware, New York and Louisiana under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented are the responsibility of the authors and do not necessarily reflect CMS policy. Publication number QI-113-012579