



Frequently Asked Questions for Naloxone Prescribing, Dispensing, and Administration in Idaho

Purpose

To provide information on naloxone dispensing, prescribing, and administration in Idaho. Information in this document is for healthcare organizations and other community-based organizations receiving naloxone from the Idaho Department of Health and Welfare (DHW).

Background

Idaho Statute 54-1733B of the Pharmacy Act was updated in July 2021. This law outlines the prescribing and dispensing of naloxone. The update allows for any health professional licensed or registered in Idaho to prescribe and dispense naloxone to any person or organization. The change also allows organizations and non-medical staff to provide naloxone for people to take home.

[Idaho Statute 54-1733B](#)

54-1733B. OPIOID ANTAGONISTS. (1) Notwithstanding any other provision of law, any health professional licensed or registered under this title, acting in good faith and exercising reasonable care, may prescribe and dispense an opioid antagonist to any person or entity.

(2) Notwithstanding any other provision of law, any person acting in good faith and exercising reasonable care may administer an opioid antagonist to another person who appears to be experiencing an opiate-related overdose. As soon as possible, the administering person shall contact emergency medical services.

(3) Any person who prescribes, dispenses, or administers an opioid antagonist pursuant to subsection (1) or (2) of this section shall not be liable in a civil or administrative action or subject to criminal prosecution for such acts.

(4) As used in this section, "opioid antagonist" means naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal food and drug administration for the treatment of drug overdose.

What is the difference between naloxone dispensing and distribution?

Idaho law allows any licensed or registered health professional to prescribe and dispense naloxone to any individual or organization.

Naloxone dispensing is the preparation and delivery of the drug naloxone in accordance with a lawful prescription order of a practitioner. Naloxone can be prescribed and dispensed to an individual to have and keep for someone to use on them. Or naloxone can be prescribed and dispensed for the individual to use on a family member or friend. Healthcare professionals may also dispense naloxone to any community-based organizations.

If an organization is receiving naloxone directly from a manufacturer of naloxone, it is not considered dispensing.

Are entities allowed to further distribute naloxone to the public and their employees?

Yes. Naloxone can be distributed by community-based organizations to people who may need it, including to their employees and the public.

What is naloxone administration?

Naloxone administration is the act of getting a medication (in this case naloxone) into a person's blood stream. Naloxone can be administered in one of three ways:

- 1) **Nasal spray** – by a mist sprayed into a person's nose.
- 2) **Auto injectable** – by an auto-injection directly into a person's muscle, usually in the upper thigh or in the upper arm or shoulder.
- 3) **Injectable** – by a needle placed into a person's vein, usually on the inside of the arm.

Nasal spray and auto-injectable naloxone are the most common for out-of-hospital settings. Nasal spray and auto-injectable administration trainings are available in video or in-person. Injectable naloxone requires the user be trained on its use.

Who can administer naloxone?

Any person, including a family member, friend, or bystander, may administer naloxone to a person experiencing an overdose. Often, family or friends are the first people to notice an overdose.

Frequently Asked Questions for Community-Based Organizations

Why should my organization carry naloxone?

Naloxone can quickly bring back normal breathing and save the life of a person overdosing on opioids. Friends, family, and other bystanders can save lives with naloxone. Everyone who overdoses with opioids, whether it is with a prescribed medicine or an illicit drug, needs naloxone. Examples of opioids include heroin, fentanyl, oxycodone, hydrocodone, codeine, and morphine.

Fentanyl is increasingly being mixed into counterfeit pills. This mixing can lead to a higher risk of overdose. People may believe they are not taking an opioid when they are. Because overdoses can happen anywhere, naloxone is designed to be used by anyone, even a bystander. Naloxone should be available to everyone who might be taking opioids or who are around people taking opioids.

How can my organization receive naloxone?

Organizations in Idaho can request free naloxone through the DHW website at:

<https://healthandwelfare.idaho.gov/services-programs/behavioral-health/naloxone-information>

Is your organization a school, university, library, or YMCA? You can request free naloxone directly from the manufacturer at: <https://www.narcan.com/community/education-awareness-and-training-resources/>

Is naloxone covered by insurance?

Coverage of prescription naloxone varies by insurance and usually requires a co-pay.

Naloxone is free at the pharmacy for individuals with Medicaid. No co-pay is required. Family, friends, or the individual may request naloxone with a Medicaid number and patient name.

To assist with billing, health professionals prescribing naloxone should consider registering for a National Provider Identification (NPI) at: <https://nppes.cms.hhs.gov/#/>

Does my organization need to establish a policy on naloxone storage and administration?

DHW encourages organizations to establish policies and procedures on naloxone storage and administration if they do not already exist. An example template for naloxone policy and procedures is available at: <https://publicdocuments.dhw.idaho.gov/>

Does my organization need a standing order to provide naloxone to individuals?

A standing order is not needed for organizations distributing naloxone. An organization may continue to use a collaborative practice agreement or standing order from a healthcare provider with prescriptive authority.

Is there any liability if my organization provides naloxone to individuals?

There is no liability for organizations providing naloxone to an individual at risk of an opioid overdose.

Is there any liability if someone at my organization administers naloxone to an individual?

Any person, acting in good faith and reasonable care, who administers naloxone will not be liable.

Frequently Asked Questions for Healthcare Organizations

Why should I provide naloxone?

Not all pharmacies carry naloxone in stock and patients may have to wait days to receive ordered naloxone. By having naloxone on hand, healthcare organizations can help remove access barriers for patients in receiving this medication, including high co-pays, stigma, and getting to another location to fill a prescription. Additionally, having naloxone readily available and co-prescribing when necessary can help build a patient's relationship with their doctor.

Does there need to be a patient-provider relationship to prescribe and dispense naloxone?

No. Under [Idaho Statute 54-1733](#), a patient-provider relationship is not needed to prescribe and dispense naloxone to an individual.

When does naloxone need to be reported to the Idaho Prescription Drug Monitoring Program (PDMP)?

Naloxone needs to be reported to the Idaho PDMP if naloxone is being dispensed to an individual or entity.

Naloxone does not need to be reported to the Idaho PDMP if:

- Naloxone was requested through the manufacturer.
- Naloxone was requested through the Idaho Department of Health and Welfare.

For more information on the reporting requirements of the Idaho PDMP, please contact the [Idaho Board of Pharmacy](#).