

PILOT PROGRAM TO DISTRIBUTE
OPIOID ANTIDOTES ANONYMOUSLY
TO INDIVIDUAL PATIENTS

In recognition of the ongoing opioid crisis and State-wide efforts to reduce overdose deaths, the New Jersey Board of Pharmacy (“Board”), having worked with the New Jersey Department of Human Services (“DHS”), the Office of the New Jersey Coordinator for Addiction Responses and Enforcement Strategies (“NJ CARES”), and the Division of Consumer Affairs, hereby approves a pilot program, pursuant to N.J.S.A. 45:14-48(b)(10), to allow for the dispensing of opioid antidotes, at no cost, to anonymous recipients at pharmacies that have obtained standing orders from the Commissioner of Health or a New Jersey licensed physician. In contrast to the previously approved pilot programs which authorized dispensing of opioid antidotes for only a few days, this program will permit consumers to obtain free naloxone at any time.

After dispensing to an individual patient, pharmacies would be reimbursed through the New Jersey FamilyCare (NJFC)/Medicaid system, regardless of the Medicaid eligibility of the patient. This program is limited to individual patients; entities such as agencies and first responders have access to a different program. Any pharmacy seeking to participate in this Pilot Program will be required to agree to comply with the terms and conditions set forth below. The agreement must be signed by an authorized representative of the permit holder and the registered pharmacist in charge of the pharmacy, and then submitted to the Board as indicated below.

The Pilot will operate as follows:

- Pharmacies will order naloxone from their regular wholesaler/distributors.
- Reimbursement rates will be set for all pharmacies based on acquisition costs, similar to the Medicaid reimbursement process.
- Billing is to be done through the NJFC/Medicaid system, as follows:
 - Pharmacies must bill naloxone claims for anyone seeking naloxone anonymously to BIN 610515. Other NJFC/Medicaid billing requirements shall not apply for naloxone provided anonymously.
 - When anonymously dispensed, pharmacies must report a first name of “Jane” in the NCPDP Patient First Name field (310-CA) and a last name of “Doe” in the NCPDP Patient Last Name field (311-CB).
 - When anonymously dispensed, pharmacies must report a date of birth of “010199” in the NCPDP Date of Birth field (304-C4).

- Pharmacies must report the twelve (12) byte recipient ID 580200000020 broken out across two (2) fields, the ten (10) byte Cardholder ID field and the two (2) byte Person Code field.
- Pharmacies must also populate the NCPDP Prescriber ID field (411-DVB) with the National Provider Identifier (NPI) issued by the New Jersey Department of Health. Please refer to the DOH website for current standing order requirements. <https://nj.gov/governor/news/news/562021/docs/DOHSO202101.pdf>
- All available FDA-approved naloxone 4 mg nasal spray products are covered.
- Only one (1) package containing two (2) doses of naloxone product shall be covered per dispensing. Each package dispensed requires a new prescription number (i.e. a prescription previously filled under this program cannot be “refilled” under the original prescription number).
- The number of naloxone products dispensed per week is not limited.
- Naloxone products should only be dispensed to those over the age of 14. ID will not be required; oral confirmation of age is sufficient.
- At the time of dispensing, pharmacists shall:
 - Provide the recipient with the required opioid overdose response and prevention information, which may be found at: <https://www.njoag.gov/wp-content/uploads/2022/04/Opioid-Overdose-Response-Fact-Sheet.pdf>.
 - Make inquiry as to whether the recipient is over the age of 14.
 - Advise that the opioid antidote should not be administered to persons with known allergies to any of the ingredients.
- Pharmacists should record all anonymously dispensed naloxone in the pharmacy’s patient profile system required by [N.J.S.A. 45:14-68](#), using the patient name “Jane Doe” with the date of birth as noted above. No drug utilization review is required for patients receiving naloxone anonymously.
- Records regarding naloxone purchased from manufacturers, wholesalers, or distributors, as well as dispensing information in the patient profile system, should be maintained consistent with the Board’s recordkeeping rule at [N.J.A.C. 13:39-7.6](#). These records are subject to inspection by the Board, and may be audited by DHS for compliance with this Pilot Program’s requirements.

- If a patient presents with a prescription for naloxone, pharmacists may process and bill as with all other prescriptions. If the patient elects to obtain free naloxone under the pilot program (instead of having it billed to their insurance), the pharmacist should note in the patient’s profile that naloxone was dispensed pursuant to the program and billed through the pilot program process set forth above.
- This pilot agreement shall be signed by the registered pharmacist in charge of the pharmacy and an authorized representative of the permit holder, indicating their agreement to comply with all terms of this Pilot Program. The signed agreement shall be uploaded to the pharmacy’s New Jersey **MyLicense** account (this is same account utilized to complete the pharmacy’s annual renewals).
 - Save this signed Naloxone Pilot Program Agreement as a PDF file named **“Naloxone Pilot Program Agreement”**.
 - Click on this link, [MyLicense](#), and login to the pharmacy’s account.
 - On the **Upload Documents** page, choose **“Naloxone Pilot Program”** as the **“Document Type”** from the dropdown list.
 - Follow the instructions to submit your signed agreement.

Pharmacy Name: _____

Pharmacy Permit Number: *28RS* _____

Permit Holder/Authorized Representative:

Name (*print*): _____

Title: _____

License number (*if applicable*): _____

Signature: _____ Date: _____

Pharmacist-in-Charge:

Name (*print*): _____

License number: *28RI* _____

Signature: _____ Date: _____

Additional Information:

- Patient Information to be distributed by Pharmacists: <https://www.njoag.gov/wp-content/uploads/2022/04/Opioid-Overdose-Response-Fact-Sheet.pdf>.
- DHS Newsletter addressing reimbursement can be found at: [Welcome to New Jersey Medicaid: Document Download 3 \(njmmis.com\)](#) (see Vol. 33, no. 1).
- DHS Contact Information for pilot program inquiries:
 - Email: Naloxone@dhs.nj.gov
 - Phone: 1.609.438.4352
- Naloxone promotional posters for pharmacy use:
 - English: https://nj.gov/humanservices/assets/slices/Naloxone365_v1.pdf
 - Spanish: https://nj.gov/humanservices/assets/slices/Naloxone365_v1-SP.pdf