

Clinical Pharmacy Program Guidelines for Evzio

Program	Prior Authorization
Medication	Evzio (naloxone hydrochloride)
Issue Date	9/2014
Pharmacy and Therapeutics Approval Date	12/2017
Effective Date	2/2018

1. Background:

Evzio (naloxone hydrochloride injection) is an opioid antagonist indicated for the emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression. Evzio will be approved based on the following criteria:

NOTE: This policy does not apply to Washington, please refer to global criteria.

2. Coverage Criteria:

<p>A. Evzio will be approved based on all of the following criteria:</p> <ol style="list-style-type: none"> 1. Patient is currently using an opioid <p style="text-align: center;">-AND-</p> <ol style="list-style-type: none"> 2. One of the following risk factors for overdose: <ol style="list-style-type: none"> a. History of emergency medical care involving opioid overdose b. History of substance abuse c. Receiving higher dose (> 50mg morphine equivalent/day) opioid prescription d. Concomitant use with benzodiazepines, antidepressants, alcohol, or muscle relaxants e. Chronic pulmonary disease (e.g. emphysema, chronic bronchitis, asthma) f. Sleep apnea g. Renal impairment h. Chronic cirrhosis or hepatitis i. Mental illness (e.g. bipolar disorder, schizophrenia) j. Cognitive impairment <p style="text-align: center;">-AND-</p>
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3. Both of the following:

(1) Documentation that the member is unable to obtain generic naloxone injection, used with or without the nasal atomizer

-AND-

(2) Reason or special circumstance that the patient cannot be treated with Narcan nasal spray

Authorization will be issued for 12 months.

3. References:

1. Substance Abuse and Mental Health Services Administration (SAMHSA) Opioid Overdose Toolkit. Accessed 9 Sept 2015. <<http://prescribetoprevent.org>>.
2. Evzio Prescribing Information. Kaleo Inc. Richmond, VA. October 2016.
3. Paulozzi L, et al; Centers for Disease Control and Prevention. MMWR Morb Mortal Wkly Rep. 2011;60:1487-1492.
4. Dunn KM, Saunders KW, Rutter CM. Opioid Prescriptions for Chronic Pain and Overdose. *Ann Intern Med.* 2010;152:85-92.
5. Bohnert AS, Valenstein M, Bair MJ, et al. Associate Between Opioid Prescribing Patterns and Opioid Overdose-related Deaths. *JAMA.* 2011;305:1315-1321.
6. Madadi P, Hildebrandt D, Lauwers AE, Koren G (2013) Characteristics of Opioid-Users Whose Death Was Related to Opioid-Toxicity: A Population-Based Study in Ontario, Canada. *PLoS ONE* 8(4): e60600.
7. Paulozzi LJ, Logan JE, Hall AJ, McKinstry E, Kaplan JA. A comparison of drug overdose deaths involving methadone and other opioid analgesics in West Virginia. *Addiction* 2009; 104:1541-1548.
8. Paulozzi LJ, Budnitz DS, Xi Y. Increasing deaths from opioid analgesics in the United States. *Pharmacoepidemiology and Drug Safety* 2006; 15:618-627.
9. Paulozzi L, Zhang K, Jones C, Mack K. Risk of adverse health outcomes with increasing duration and regularity of opioid therapy. *J Am Board Fam Med* 2014;27:329-338.
10. Baily AM, Wrmeling DP. Naloxone for opioid overdose prevention: pharmacists' role in community-based practice settings. *Ann Pharmacother.* 2014 May;48(5):601-6
11. Howe CQ, Sullivan MD, Saunders KW. Depression and Ambivalence toward Chronic Opioid Therapy for Chronic Non-cancer Pain. *Clin J Pain.* Sept 2012; 28(7):551-566.
12. Zedler B, Xie L, Wang L, et al. Risk factors for serious prescription opioid-related toxicity or overdose among veterans health administration patients. *Pain Med* 2014. Published online: 14 Jun 2014.

Program	Prior Authorization –Evzio (naloxone hydrochloride)
Change Control	
Date	Change
9/18/2014	New policy
12/17/2015	Annual review, no change
11/2016	Updated policy to align with E&I, added reason patient cannot take Narcan nasal spray to criteria
3/2017	Clarified that naloxone injection can be used with or without a nasal atomizer
12/2017	Updated references.