

PRIOR AUTHORIZATION CRITERIA

DRUG CLASS	OPIOID REVERSAL AGENTS (RX AND OTC)
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BRAND NAME (generic)	
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	KLOXXADO NASAL SPRAY (naloxone hydrochloride nasal spray)
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	(naloxone hydrochloride nasal spray)
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	NARCAN NASAL SPRAY (naloxone hydrochloride nasal spray)
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	OPVEE (nalmefene nasal spray)
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	REXTOVY (naloxone hydrochloride nasal spray)
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	REZENOPY (naloxone hydrochloride nasal spray)
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	RIVIVE (naloxone hydrochloride nasal spray)
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	ZIMHI (naloxone hydrochloride injection)
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	ZURNAI (nalmefene injection)
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Status: CVS Caremark® Criteria Type: Post Limit Prior Authorization
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POLICY

FDA-APPROVED INDICATIONS

Kloxxado Nasal Spray

Kloxxado is indicated for the emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression, for adult and pediatric patients.

Kloxxado is intended for immediate administration as emergency therapy in settings where opioids may be present.

Kloxxado is not a substitute for emergency medical care.

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Naloxone Nasal Spray (OTC)

Uses

- to “revive” someone during an overdose from many prescription pain medications or street drugs such as heroin
- this medicine can save a life

Narcan Nasal Spray (naloxone nasal spray)

Narcan Nasal Spray is indicated for the emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression.

Narcan Nasal Spray is intended for immediate administration as emergency therapy in settings where opioids may be present.

Narcan Nasal Spray is not a substitute for emergency medical care.

Narcan Nasal Spray (OTC)

Uses

- to “revive” someone during an overdose from many prescription pain medications or street drugs such as heroin
- this medicine can save a life

Opvee Nasal Spray

Opvee Nasal Spray is indicated for the emergency treatment of known or suspected overdose induced by natural or synthetic opioids in adults and pediatric patients aged 12 years and older, as manifested by respiratory and/or central nervous system depression.

Opvee Nasal Spray is intended for immediate administration as emergency therapy in settings where opioids may be present.

Opvee Nasal Spray is not a substitute for emergency medical care.

Rextovy Nasal Spray

Rextovy Nasal Spray is indicated for emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression, for adult and pediatric patients.

Rextovy Nasal Spray is intended for immediate administration as emergency therapy in settings where opioids may be present.

Rextovy Nasal Spray is not a substitute for emergency medical care.

Rezenopy Nasal Spray

Rezenopy nasal spray is indicated for the emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression in adult and pediatric patients.

Rezenopy nasal spray is intended for immediate administration as emergency therapy in settings where opioids may be present.

Rezenopy nasal spray is not a substitute for emergency medical care.

RiVive Nasal Spray

Uses

- to “revive” someone during an overdose from many prescription pain medications or street drugs such as heroin
- this medicine can save a life

Zimhi

Zimhi is indicated in adults and pediatric patients for the emergency treatment of known or suspected opioid overdose, as manifested by respiratory and/or central nervous system depression.

Zimhi is intended for immediate administration as emergency therapy in settings where opioids may be present.

Zimhi is not a substitute for emergency medical care.

Zurnai

Zurnai is indicated for the emergency treatment of known or suspected opioid overdose induced by natural or synthetic opioids in adults and pediatric patients aged 12 years and older, as manifested by respiratory and/or central nervous system depression.

Zurnai is intended for immediate administration as emergency therapy in settings where opioids may be present.

Zurnai is not a substitute for emergency medical care.

COVERAGE CRITERIA

Emergency Treatment of Opioid Overdose

Authorization may be granted when the requested drug is being prescribed in the event that emergency treatment of opioid overdose may be needed when the following criteria is met:

- The patient requires MORE than 2 nasal spray cartons (4 nasal sprays) OR 2 pre-filled syringe cartons (4 pre-filled syringes) OR 4 auto-injector cartons (4 auto-injectors) of the requested drug per month due to ANY of the following: the type of opioid that the patient is taking (e.g., buprenorphine, pentazocine, long-acting/extended-release opioids), the patient is living in an area that has a longer wait time for emergency medical assistance, the patient had an overdose episode that required the use of the requested drug

[NOTE: An initial quantity of 2 nasal spray cartons (4 nasal sprays) OR 2 pre-filled syringe cartons (4 pre-filled syringes) OR 4 auto-injector cartons (4 auto-injectors) per month of the requested drug will be covered without prior authorization.]

QUANTITY LIMITS APPLY

<u>POST LIMIT QUANTITY</u>		
Drug (RX and OTC)**	1 Month Limit*	3 Month Limit*
Kloxxado Nasal Spray (naloxone hydrochloride nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
naloxone hydrochloride nasal spray	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
Narcan Nasal Spray (naloxone hydrochloride nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
Opvee (nalmeferene nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
Rextovy (naloxone hydrochloride nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
Rezenopy (naloxone hydrochloride nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
RiVive (naloxone hydrochloride nasal spray)	4 cartons (8 nasal sprays) / 25 days	12 cartons (24 nasal sprays) / 75 days
Zimhi (naloxone hydrochloride injection)	4 cartons (8 pre-filled syringes) / 25 days	12 cartons (24 pre-filled syringes) / 75 days
Zurnai (nalmeferene injection)	8 cartons (8 auto-injectors) / 25 days	24 cartons (24 auto-injectors) / 75 days

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**The duration of 25 days is used for a 30-day fill period and 75 days is used for a 90-day fill period to allow time for refill processing.
**Some products may only be available only by prescription, some may only be available over-the-counter (OTC), and others may be available both by prescription and over-the-counter (OTC). The limits apply to all listed products, both prescription and over-the-counter (OTC), as available.*

DURATION OF APPROVAL (DOA)

- 1138-J: DOA: 6 months

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