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**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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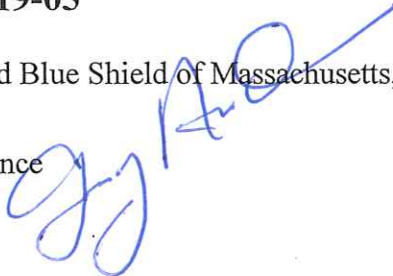
**BULLETIN 2019-05**

To: Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc.,  
and Health Maintenance Organizations

From: Gary D. Anderson, Commissioner of Insurance

Date: August 29, 2019

Re: Standing Orders for Naloxone



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As part of the Commonwealth's commitment to address the opioid epidemic, the Department of Public Health issued a statewide standing order pursuant to Section 32 of Chapter 208 of the Acts of 2018 for the broad distribution of naloxone to any resident of the Commonwealth.

The Division of Insurance ("Division") issues this Bulletin to Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc., and Health Maintenance Organizations offering insured health benefit plans in Massachusetts (collectively, hereinafter referred to as "Carriers"). This Bulletin provides guidance to Carriers about the provisions of Section 32 of Chapter 208 of the Acts of 2018, which rewrote M.G.L. c. 94C, §19B.

M.G.L. c. 94C, §19B(a) states that an "opioid antagonist" shall mean "naloxone or any other drug approved by the federal Food and Drug Administration as a competitive narcotic antagonist used in the reversal of overdoses caused by opioids." Under M.G.L. c. 94C, §19B(b), the Department of Public Health "shall ensure that a statewide standing order is issued to authorize the dispensing of an opioid antagonist in the [C]ommonwealth by any licensed pharmacist" in order to address the problem of opioid drug overdoses.

The following is further noted in M.G.L. c. 94C, §19B(e):

A pharmacist or designee who dispenses an opioid antagonist pursuant to this section shall, for the purposes of health insurance billing and cost-sharing, treat the transaction as the dispensing of a prescription to the person purchasing the opioid antagonist regardless of the ultimate user of the opioid antagonist. Unless the person purchasing the opioid antagonist requests to pay for the prescription out-of-

pocket, the pharmacist or designee shall make a reasonable effort to identify the purchaser's insurance coverage and to submit a claim for the opioid antagonist to the insurance carrier prior to dispensing the opioid antagonist.

In order to enable the availability of naloxone for those covered under insured health benefit plans, the Division issues this Bulletin to notify Carriers that it expects that Carriers will take whatever steps are necessary to modify their systems so that covered persons may obtain naloxone without the need to present a prescription written to the covered person.

The Division would consider it appropriate if Carriers establish criteria that only require covered persons to go through prior authorization if they seek to obtain more than two (2) naloxone kits – with each kit including 2 doses of naloxone – per member within a 30-day period. Carriers may utilize prior authorization for members seeking more than two (2) kits within a 30-day period. If a Carrier intends to establish any prior authorization requirements for naloxone, the Carrier must first forward such criteria to the Bureau of Managed Care as a material change to what is on file for that Carrier as part of the managed care accreditation materials submitted according to the provisions of M.G.L. c. 176O and 211 CMR 52.00.

If you have any questions about this Bulletin, please contact Kevin Beagan, Division of Insurance at (617) 521-7323 or [kevin.beagan@mass.gov](mailto:kevin.beagan@mass.gov).