

SECTION .0300 – UTILIZATION RULES FOR OPIOID ANTAGONISTS

11 NCAC 23M .0301 CO-PRESCRIPTION OF OPIOID ANTAGONIST

(a) A health care provider prescribing a targeted controlled substance shall consider co-prescribing an opioid antagonist to the following:

- (1) employees taking benzodiazepines and a targeted controlled substance;
- (2) employees whose dosage exceeds a 50 mg morphine equivalent dose per day;
- (3) employees with a history of drug overdose;
- (4) employees with a history of substance use disorder;
- (5) employees with a history of an underlying mental health condition that places them at an increased risk for overdose;
- (6) employees with a medical condition such as respiratory disease, sleep apnea, or other comorbidities that places them at an increased risk for opioid toxicity, respiratory distress, or opioid overdose.

(b) If a health care provider prescribes an opioid antagonist pursuant to one or more of the conditions listed in Paragraph (a) of this Rule, the health care provider shall write the prescription to allow for product selection by the employer or carrier, including an intranasal formulation approved by the United States Food and Drug Administration.

History Note: Authority 97-25; 97-25.4; 97-80(a); S.L. 2017-203, s. 4; Eff. May 1, 2018; Recodified from 04 NCAC 10M .0301 Eff. June 1, 2018.