



## Work Draft : LL0658

### Short Title: Naloxone Standing Order



#### What it does

- It **saves lives** and **money** for the state by addressing the opioid crisis for the state.
  - Removes the sunset clause (June 30, 2021) to allow for perpetual authorization of a standing medical order for the distribution and administration of naloxone, an opioid overdose reversal drug, by any Alaskan (AS 17.20.085(d)).

#### How it works

- The standing medical order allows naloxone to be dispensed to an individual who is not a prescriber, a practice that is generally prohibited. Naloxone is not a controlled substance, has no potential for abuse, and is safe to use.
- By removing the sunset date, local and regional overdose response programs, first responders, the Departments of Public Safety and Corrections, and the general public will continue to have the ability to directly distribute and access the lifesaving drug naloxone.

#### Why it's important

- **Too many Alaskans have lost their lives to overdose**, even though it is preventable with timely administration of naloxone. In Alaska, overdoses were one of the top ten leading causes of death in 2017, having killed more people than diabetes, chronic liver disease and cirrhosis, and homicide. In 2019, 133 people lost their lives to overdose.
- The Naloxone **standing order enables take-home naloxone (THN) programs** to occur. Alaska's THN program, Project Hope, is a **federally funded** program, which has distributed 41,000 Narcan kits across 127 Overdose Response Programs since 2017. Between 2019/2020, approximately 9000 kits were distributed.
- Take home **naloxone saves lives**.
- It is a norm for states, and a **recommendation** from the US Surgeon General.

#### Who Benefits

- **State of Alaska:** Saving lives by getting naloxone out to all those who need it saves the state money in fewer death investigations and increased quality-adjusted life-years for survivors.
- **Emergency responders:** Law enforcement, fire/EMS, and emergency department providers constantly respond to people overdosing resulting in increased costs and negative impacts to morale. Naloxone in the hands of friends and family may reduce this impact.
- **People who may overdose:** Use of naloxone gives people at risk of overdose a greater chance of living and not suffering long-term impacts from overdose and gives them the opportunity to get into treatment and stay in the workforce.
- **Family and friends of those who die from an overdose:** There is profound emotional and physical pain to family and friends who lose a person to overdose. Naloxone can prevent the burden of the loss and the increased health care costs associated with coping with this loss.

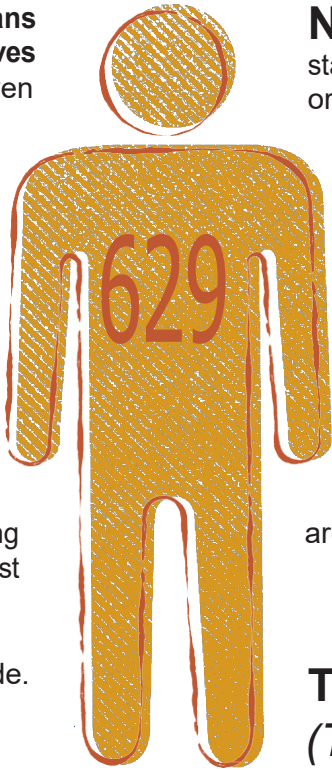


# TAKE-HOME NALOXONE

Too many Alaskans have lost their lives to overdose, even though it is preventable with timely administration of naloxone.

In Alaska, between 2014 and 2019, **629 people lost their lives** to overdose; with 2019 experiencing the second highest rate of overdose

death in a decade.



# 41,000

Naloxone **standing orders enable take-home naloxone programs** to occur. Alaska's THN program is federally funded Project HOPE, and has fostered the distribution of 41,000 Narcan kits across 127 Overdose Response Programs.

**Naloxone standing orders** It is a norm by states, and a standard recommendation by a variety of reputable international and national organizations.

42 states and District of Columbia have enacted naloxone standing orders.

World Health Organization, the US Surgeon General, and the American Society of Addiction Medicine (ASAM) officially recommend naloxone be accessible to those who are closest to the person using opioids.

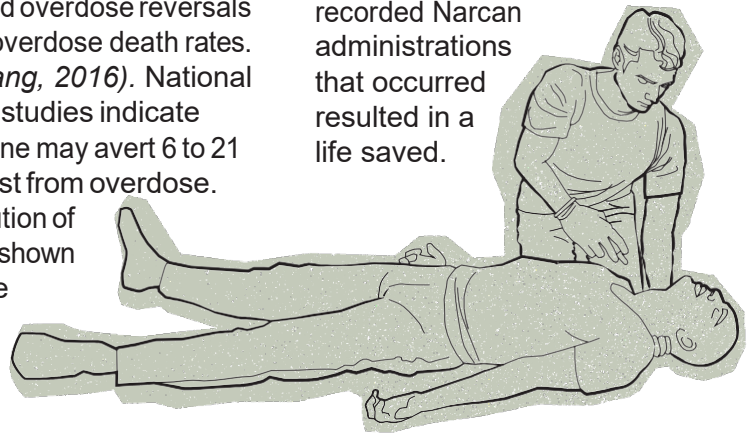


## Take-home naloxone (THN) saves lives.

At least 21 studies, among at least 15 different cities, states, and countries have demonstrated overdose reversals and lower rate of overdose death rates. (McDonald & Strang, 2016). National and international studies indicate take-home naloxone may avert 6 to 21 percent of lives lost from overdose. Maximum distribution of naloxone kits has shown to save lives. One study indicates an average of one death

prevented per 227 naloxone kits distributed.

In Alaska, because of Project HOPE and the standing order, 93% (n=309) of the recorded Narcan administrations that occurred resulted in a life saved.



**Saving lives saves costs:** According to the Society of Actuaries, 40% of the economic burden of the opioid crisis is driven by lost lifetime earnings for those who died prematurely, nearly 33% is for excess health care spending, another 15% are from lost productivity in the workforce, and 6% are from costs associated with criminal justice. An estimated 29% of the economic burden is borne by federal, state and local governments. (Davenport et al., 2019). Studies demonstrate take-home naloxone is cost-effective.



For more information on Project HOPE:  
[dhss.alaska.gov/dph/Director/Pages/opioids/narcan.aspx](https://dhss.alaska.gov/dph/Director/Pages/opioids/narcan.aspx)