Pharmacy Programs Administrator

PROGRAM RULES

Take Home Naloxone

July 2026

Australian Government
Department of Health, Disability and Ageing

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1 INTRODUCTION

This document outlines the Program Rules governing the Take Home Naloxone (THN) Program for Approved Providers. This document must be read in conjunction with the Pharmacy Programs Administrator (PPA) General Terms and Conditions (General Terms).

2 DEFINITIONS

General Terms means the PPA General Terms and Conditions, available at www.ppaonline.com.au.

Take Home Naloxone (THN) Program means the national program funded by the Australian Government to make naloxone freely available without prescription.

Section 90 (s90) Community Pharmacy means a community pharmacy approved to dispense pharmaceutical benefits as defined in Section 90 of the National Health Act 1953.

Section 94 (s94) Public Hospital Pharmacy means a specialised pharmacy located in a public hospital that is approved to dispense pharmaceutical benefits as defined in Section 94 of the National Health Act 1953.

Section 94 (s94) Public Hospital Pharmacy means a specialised pharmacy located in a private hospital approved to dispense pharmaceutical benefits as defined in Section 94 of the National Health Act 1953.

Authorised Alternative Supplier (AAS) means an organisation approved by the relevant State/Territory authority to supply naloxone under the THN Program. Example, a registered health or community service, needle and syringe program, alcohol and other drug (AOD) treatment centre, outreach service, etc.

Wholesaler means a wholesaler or distributor of medicines that is approved by the relevant State/Territory Health Authority and/or the Therapeutic Goods Administration (TGA).

Pharmacutical Benefits Scheme (PBS) Schedule means the official list of medications subsidised by the Australian Government for Medicare cardholders.

Service Provider means an entity providing services (e.g. a s90 Community Pharmacy) nominated in the Pharmacy Programs Administrator Portal, which at all times meets the Eligibility Criteria set out in the Take Home Naloxone Program Rules.

Approved Ex-Manufacturer Price (AEMP) means the price approved for a medicine at the manufacturer level, as listed on the PBS Schedule.

Administration, Handling and Infrastructure (AHI) fee means the fee payable to s90 community pharmacies and s92 approved medical practitioners for dispensing PBS medicines.

Dispensed Price for Maximum Quantity (DPMQ) means the fee payable for dispensing a maximum quantity of a PBS medicine, comprising AEMP, wholesale mark-up, AHI fee, and dispensing fee.

Price to Pharmacist (PtP) means the wholesale price a pharmacy pays for a medication, calculated by adding he AEMP plus wholesale mark-up.

Services means Individual Supplies or Bulk Supplies of naloxone as described in the THN Program Rules.

3 BACKGROUND

Naloxone is a medicine that rapidly reverses the effects of an opioid overdose. It can be administered by injection or through a nasal spray. Under the THN Program, naloxone is available free, in all Australian States and Territories, to people who are at risk of or who may witness an opioid overdose or adverse reaction. A prescription is not required for supply.

Following the evaluation of the Take Home Naloxone Pilot Program, which ran from 1 December 2019 to 30 June 2022, the 2022-23 Federal Budget included funding for an ongoing National, THN Program commencing from 1 July 2022.

More information about the Take Home Naloxone Program can be found here.

4 PARTICIPATION REQUIREMENTS

Under the THN Program, each State or Territory will identify where naloxone will be made available.

Participating sites providing naloxone to individuals are defined as either an Approved Provider or an Authorised Alternative Supplier.

Approved Providers include community pharmacies, hospital-based pharmacies and approved medical practitioners. Approved providers will supply naloxone and be reimbursed by the Pharmacy Programs Administrator (PPA).

Organisations such as alcohol and other drug treatment services, injecting centres, and homelessness/outreach services in certain states can also supply naloxone by first becoming an Authorised Alternative Supplier (AAS). Information about registering to become an AAS can be found by contacting relevant State or Territory health departments. An AAS can supply naloxone to an individual but does not receive reimbursement from the PPA.

4.1 Approved Providers: Community (s90) pharmacies, hospital (s94) pharmacies and approved (s92) medical practitioners

To be eligible to participate in the THN Program, and supply naloxone, Approved Providers must:

- Be approved under sections 90, 92 or 94 of the *National Health Act 1953*
- Register for the THN Program via the PPA Portal
- Confirm that they are registered for GST
- Agree that the pharmacy/practice trading name and location may be listed on the Department of Health, Disability and Ageing's website and/or provided to participating State/Territory health departments for communications relating to the Program
- Agree to provide services in accordance with these THN Program Rules, including the collection of required **supply claim** data.

Pharmacies and approved medical practitioners are required to source naloxone through their usual supply channel (e.g. pharmaceutical wholesaler). Once naloxone has been supplied free of charge to an individual under the THN Program, a claim for payment can be made via the PPA Portal.

Claiming processes for naloxone dispensed with a Pharmaceutical Benefits Scheme (PBS) or private prescription do not change and cannot be claimed for under the THN Program.

4.2 Authorised Alternative Suppliers

To be eligible to participate in the THN Program, and supply naloxone, an Authorised Alternative Supplier (AAS) must:

- Be approved by the relevant State/Territory authority in the relevant jurisdiction (most commonly the health department) to provide naloxone under the THN Program
- Agree to provide services in accordance with these THN Program Rules, including the collection of required **supply claim** data.

AASs in all States/Territories (except Western Australia) are required to register for the THN Program via the PPA Portal and provide supply claims data directly to the PPA. Please contact your State/Territory health department for more information about requirements to use the PPA Portal.

AASs are required to source naloxone through a variety of mechanisms, depending on their location and should discuss these arrangements with their relevant health authority. Information on who to contact can be found on the Department of Health, Disability and Ageing website.

As of 1 November 2022, AASs in all States and Territories can participate in the THN Program, if their State or Territory health department has provided approval to do so.

Further information about registering to become an AAS can be found by contacting relevant State or Territory health departments.

4.3 Wholesalers

A wholesaler may provide naloxone to an AAS for the AAS to distribute to individuals.

To be eligible to participate in the THN Program, and receive payments for naloxone supplied, the wholesaler must:

- Have an arrangement in place with the Commonwealth Government and/or the relevant State/Territory Government to supply naloxone to AASs under the THN Program.
- Register for the THN Program via the PPA Portal.
- Confirm that it is registered for GST.
- Agree to provide services in accordance with these THN Program Rules, including the collection of required bulk supply data.
    - Note: where costs incurred are associated with distribution from a wholesaler the arrangement and payment of these costs are the responsibility of the relevant State or Territory entering into the arrangement.

4.4 Western Australia Mental Health Commission (WA MHC)

The WA MHC has an agreement with the Commonwealth Government to supply naloxone to Western Australia AASs under the THN Program and has agreed to provide services in accordance with these THN Program Rules, including the collection of required bulk supply data.

4.5 Individuals receiving naloxone

Any person across Australia is able to access free naloxone, without prescription, under the THN Program.

Specifically, the THN Program aims to make naloxone free and easily available for:

- People who are at risk of an opioid overdose, or adverse reaction, which includes illicit drug users and people who use prescription opioid medications
- Carers, friends and family.

Pharmacists and other Service Providers are required to have a conversation with individuals before supplying naloxone and use clinical judgement to assess the risk of opioid overdose in individuals. Pharmacists and other Service Providers should consider the strength, dosage, and duration of opioid use and other clinical factors in their assessment.

Individuals need to agree to be provided with naloxone and understand its purpose and use.

Pharmacists and other Service Providers also must discuss with individuals whether they consent to provide additional data and collect this, wherever possible. This consent relates only to the collection of de-identified program outcomes data and does not affect an individual's right to receive naloxone. If consent is not provided, the supply may still proceed and be recorded without collecting the optional de-identified data fields.

5 DATA SUBMISSION

All sites participating in the THN Program are required to submit data, in most instances to the PPA. The data collected is used to:

- Enable the PPA to make payment (where applicable)
- Allow the Commonwealth Government and the relevant State or Territory health department to monitor the supply of naloxone under the THN Program.

Data collected relates to supplies of both naloxone to individuals (known as individual supply claims), as well as the supply of bulk quantities of naloxone to AASs (known as bulk supply claims).

The data your organisation must collect depends on the type of supply (individual or bulk). The requirements for the submission of eligible claims are shown at:

- **Appendix A – Individual supply claims**, relevant for:
  - Community (s90) pharmacies
  - Public and Private Hospital (s94) pharmacies
  - Approved medical practitioners (s92)
  - AASs.

- **Appendix B - Bulk supply claims**, relevant for:
  - Wholesalers and WA MHC
  - Some (s94) hospital pharmacies.

6 PORTAL REGISTRATION

To become an Approved Provider under the THN Program, pharmacies and approved medical practitioners must first register via the PPA Portal.

Registration will not be complete until the Provider receives email notification from the PPA confirming that registration has been successful.

After approval by the relevant States or Territories, some AASs may also be required to register via the PPA Portal to submit data.

7 FUNDING AVAILABILITY

The 2022-23 Federal Budget included funding for an ongoing National THN Program, commencing from 1 July 2022.

8 FEES

Payments for the supply of naloxone under the THN Program are made in accordance with the Approved Provider type (e.g. community pharmacy), the supply type (individual or bulk), and the date the naloxone was supplied. Fees are aligned with the applicable Pharmaceutical Benefits Scheme (PBS) entitlements and rates in effect on the date of supply. Additional information about PBS fees can be found on the PBS website.

The applicable payment rate is determined by the date the naloxone was supplied, not the date the claim was submitted in the PPA Portal.

The following tables contain the fees payable by the PPA for eligible claims made under the THN Program from 1 July 2026.

The amounts shown in the tables are GST exclusive. GST is added to all THN Program payments.

Alternative Approved Suppliers (AAS) are not entitled to claim fees for the supply of naloxone to an individual.

Service Providers who submit bulk supply claims are entitled only to the Approved Ex-Manufacturer Price (AEMP).

Fees payable for supplies made prior to 1 July 2026 are outlined in the THN Historical Fees document.

Payment rates for naloxone supplied during the Take Home Naloxone Pilot can be found on the THN Pilot webpage.

Table 8-1: Naloxone individual supply fee structure by Service Provider Type

Service Provider Type	Fee Structure
Community (s90) Pharmacies	DPMQ[1] (AEMP[2] + wholesale mark-up + Tier 1 AHI fee[3] + dispensing fee)
Public Hospital (s94) Pharmacies	PtP[4] (AEMP + wholesale mark-up)
Private Hospital (s94) Pharmacies	PtP + 1.4% of PtP + dispensing fee
Approved Medical Practitioners (s92)	DPMQ
THN Wholesalers & WA MHC	AEMP
Authorised Alternative Suppliers	Nil

[1]DPMQ: Dispensed Price for Maximum Quantity
[2]AEMP: Approved ex-manufacturer price
[3]AHI fee: Administration, handling, and infrastructure fee
[4]PtP: Price to Pharmacist (AEMP + wholesale mark-up)

Where an individual supply consists of two packs of the same naloxone product, a single dispensing fee applies. Where an individual supply consists of two different naloxone products, a separate dispensing fee applies to each product.

Example 1: Supply of single product (1 pack)
Where a Community (s90) Pharmacy supplies 1 pack of **Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation) to an individual:
$49.30 (AEMP) + $2.12 (wholesale mark-up) + $5.12(AHI fee) + $9.24 (dispensing fee) = $65.78 + GST

Example 2a: Supply of a single product (2 packs)
Where a Community (s90) Pharmacy supplies 2 packs of **Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation) to an individual:
$98.60 (AEMP) + $4.24 (wholesale mark-up) + $10.24 (AHI fees) + $9.24 (dispensing fee) = $122.32 + GST

Example 2b: Supply of a single product (2 packs)
Where a Private Hospital (s94) Pharmacy supplies 2 packs of **Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules) to an individual:
$32.44 (AEMP) + $1.40 (wholesale mark-up) + $0.48 (1.4% of PtP) + $9.24 (dispensing fee) = $43.56 + GST

Example 3: Supply of two different products (1 pack each)
Where a Community (s90) Pharmacy supplies 1 pack of **Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation) and 1 pack of **Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules) to an individual:
Nyxoid: $49.30 (AEMP) + $2.12 (wholesale mark-up) + $5.12 (AHI fee) + $9.24 (dispensing fee) = $65.78
Naloxone Juno: $16.22 (AEMP) + $0.70 (wholesale mark-up) + $5.12 (AHI fee) + $9.24 (dispensing fee) = $31.28
Total: $65.78 + $31.28 = $97.06 + GST

Please note although listed in the tables below, Service Providers can only claim for *NALOXONE SXP* supplied on or after 1 August 2023.

Table 8-2: Naloxone supply fees: Section 90 (s90) Community Pharmacies

Individual Supply - 1 pack (ex GST)	Individual Supply – 2 packs (ex GST)	Product
$65.78	**$122.32**	**Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation)
$68.67	**$128.10**	**Prenoxad** (naloxone hydrochloride 1 mg/mL injection, 2 mL syringe)
$31.28	**$53.32**	**Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules)
$31.28	**$53.32**	**Naloxone Hydrochloride (DBL)** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)
$31.28	**$53.32**	**NALOXONE SXP** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)

Table 8-3: Naloxone supply fees: Public Hospital (s94) Pharmacies

Individual Supply – 1 pack (ex GST)	Individual Supply – 2 packs (ex GST)	Bulk Supply – 1 pack (ex GST)	Product
$51.42	**$102.84**	**$49.30**	**Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation)
$54.31	**$108.62**	**$52.07**	**Prenoxad** (naloxone hydrochloride 1 mg/mL injection, 2 mL syringe)
$16.92	**$33.84**	**$16.22**	**Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules)
$16.92	**$33.84**	**$16.22**	**Naloxone Hydrochloride (DBL)** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)
$16.92	**$33.84**	**$16.22**	**NALOXONE SXP** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)

Table 8-4: Naloxone supply fees: Private Hospital (s94) Pharmacies

Individual Supply – 1 pack (ex GST)	Individual Supply – 2 packs (ex GST)	Bulk Supply – 1 pack (ex GST)	Product
$61.38	**$113.52**	**$49.30**	**Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation)
$64.31	**$119.38**	**$52.07**	**Prenoxad** (naloxone hydrochloride 1 mg/mL injection, 2 mL syringe)
$26.40	**$43.56**	**$16.22**	**Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules)
$26.40	**$43.56**	**$16.22**	**Naloxone Hydrochloride (DBL)** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)
$26.40	**$43.56**	**$16.22**	**NALOXONE SXP** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)

Table 8-5: Naloxone supply fees: Approved Medical Practitioners (s92)

Individual Supply – 1 pack (ex GST)	Individual Supply – 2 packs (ex GST)	Product
$65.78	**$122.32**	**Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation)
$68.67	**$128.10**	**Prenoxad** (naloxone hydrochloride 1 mg/mL injection, 2 mL syringe)
$31.28	**$53.32**	**Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules)
$31.28	**$53.32**	**Naloxone Hydrochloride (DBL)** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)
$31.28	**$53.32**	**NALOXONE SXP** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)

Table 8-6: Naloxone supply fees: WA MHC and Wholesalers

Bulk Supply – 1 pack (ex GST)	Product
$49.30	**Nyxoid** (naloxone 1.8 mg/actuation nasal spray, 2x1 actuation)
$52.07	**Prenoxad** (naloxone hydrochloride 1 mg/mL injection, 2 mL syringe)
$16.22	**Naloxone Juno** (naloxone hydrochloride 400 microgram/mL injection, 5x1 mL ampoules)
$16.22	**Naloxone Hydrochloride (DBL)** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)
$16.22	**NALOXONE SXP** (naloxone hydrochloride 400 microgram/mL injection, 5 x 1 mL ampoules)

9 HISTORICAL FEES

Fees are payable based on the date the naloxone was supplied, not the date the naloxone was claimed in the PPA Portal.

Please see the THN Historical Fees document to view fees payable for supplies made prior to 1 July 2026.

10 AUDIT AND COMPLIANCE REQUIREMENTS

By participating in the THN Program, organisations recognise that providing false or misleading information is a serious offence and auditing of claims made under the THN Program may occur. Your organisation should therefore appropriately maintain all records (such as wholesale purchase invoices, delivery slips, and/or other supporting documents) related to the THN Program for seven years.

Such records must be kept in a manner that permits them to be conveniently and properly audited, and enables the amounts claimed as well as the services provided under the Program Rules to be determined. Service Providers may be subject to audits by the Australian Government Department of Health, Disability and Ageing (or its representative) to ensure that the Program Rules have been complied with and must provide all and any records requested as part of such audit(s).

Service Providers that wrongfully or incorrectly receive support and/or do not meet the requirements set out in the General Terms and these Program Rules may be subject to compliance action (as determined by the Department or the Pharmacy Programs Administrator) and repayment may be required. Under section 137.1 of the Criminal Code, giving false and misleading information is a serious offence. If an audit/compliance action is to be conducted, Service Providers will be required to produce documentation within a specified time frame.

11 REVIEW OF DECISIONS

If you have any questions or do not agree with a decision made by the PPA in administering your claim for payment, please contact us at support@ppaonline.com.au or on 1800 951 285. We'll check the decision, explain why we made the decision and ensure there aren't any errors. We aim to resolve matters quickly in line with the Program Rules set out in this document. A discussion explaining a decision is not a formal review.

Formal review

If you still disagree with the outcome, you can ask for a review of the decision. The review will be undertaken by the Department of Health, Disability and Ageing, not the PPA, in accordance with the requirements set out in the *National Health (Take Home Naloxone) Special Arrangement 2019.* An application for review must be in writing to the Secretary of the Department of Health, Disability and Ageing and importantly, in most circumstances the request for review must be made within 28 days after the decision came to your notice unless a longer period is allowed for by the Department of Health, Disability and Ageing.

You can submit your formal request for a review by mail (GPO Box 9848, Canberra ACT 2601, Australia) or by email to pharmacy.programs.admin@health.gov.au.

12 RESOURCES

THN Program resources are available for download from the PPA website.

APPENDIX A - DATA COLLECTION FOR THE SUPPLY OF NALOXONE TO INDIVIDUALS

The following table indicates which organisations should collect the individual supply data outlined in Appendix A and confirms the method by which this data should be captured and reported.

Organisation	Data capture method	Submit data to:
Community (s90) pharmacies	PPA Portal	PPA
Public and Private Hospital (s94) pharmacies	PPA Portal	PPA
Approved (s92) Medical Practitioners	PPA Portal	PPA
AASs in WA	Information about required data capture will be provided to AASs by WA MHC	WA MHC
AASs in all other States and Territories	PPA Portal	PPA Portal

The required data set for each supply is:

- Date of naloxone supply
- Formulations and quantities of naloxone supplied (maximum of two)
- Staff designation of who handed out the supply (e.g. Pharmacist, Social Worker)
- Whether the individual consents to the collection of de-identified information for program monitoring purposes
- If yes, whether the naloxone supplied was an initial supply or refill
- If refill, was the reason for refill:
  - My THN was used on me
  - My THN was used on someone else
  - My THN was given to someone else to keep
  - My THN is lost, damaged or expired.

This data is used to determine the appropriate payment rates for s90, s94 pharmacies, and s92 approved medical practitioners.

It is also used to allow the Commonwealth Government and State and Territory health departments to monitor the supply of naloxone under the Program.

APPENDIX B - DATA COLLECTION FOR THE BULK SUPPLY OF NALOXONE TO AASs

Wholesalers, WA MHC and hospital (s94) pharmacies providing bulk supply of naloxone to AASs must supply to the PPA via the PPA Portal the following information for payment:

- Name of AAS naloxone supplied to
- Address of AAS naloxone supplied to
- Date of naloxone supply
- Staff designation of who handed out the supply (e.g. Pharmacist, Social Worker)
- Formulations, brands and quantities of naloxone supplied
- Supporting evidence, such as delivery slips.

Please note the evidence uploaded must show all of the above information (other than the Staff Designation).

Rates of payment vary by organisation type and are summarised at *Section 8, Fees*.