



Voluntary Non-opioid Directive

Additional Guidance

Under AS 13.55.010 the Department of Health and Social Services (or “the Department”) is responsible for creating a Voluntary Non-opioid Directive form (“Directive”) and publishing it on the Department’s website for public use. Individuals who wish to decline future treatment with opioids may complete the form and give it to their health care provider, who will record it in the patient’s medical record.

An individual who is 18 years of age or older or an emancipated minor, a parent or legal guardian of a minor, or an individual’s guardian or other person appointed by the individual or a court to manage the individual’s health care may execute a voluntary non-opioid directive stating that an opioid may not be administered or prescribed to the individual or the minor.

An individual may revoke a voluntary non-opioid directive at any time, in writing or orally. An individual’s parent or legal guardian of a minor, or an individual’s guardian or other person appointed by the individual or a court to manage the individual’s health care may revoke a voluntary non-opioid directive on behalf of the individual.

Non-opioid Directive Form

The Directive is available on the Department’s website.

If a person does not want opioids to be administered to them or offered as a treatment option, they may fill out and present the signed Directive (signed by both the physician and the patient) to a health care provider or responding EMS personnel at any time.

The Department encourages patients to complete the Directive in consultation with their primary care provider or behavioral health treatment provider. However, consultation is not necessary to the validity of the Directive.

Provider Responsibilities

If a health care provider receives a signed Directive, it must be recorded in the patient’s medical record.

Prior to prescribing, administering, or offering an opioid drug product to a patient, a provider should check the individual’s medical record to determine whether a Directive has been recorded. In the case of an EMS response, EMS personnel should ask the patient or patient’s on-scene representative(s) if the patient has such a Directive. Unless revoked by the patient verbally or in writing, a provider should consider a signed Directive as the patient’s non-consent to opioid treatment.

The existence of a signed Directive:

- Does not alter an advance health care directive.
- Does not limit the prescribing, dispensing, or administering of an opioid overdose drug.
- Does not prohibit offering, prescribing or administering opioid medications for the purpose of medication assisted treatment, as approved for such use by the FDA.

If the patient has filed a Directive, or otherwise expresses his or her wish not to be treated with opioids, the provider is encouraged to consult the CDC prescribing guidelines for alternative pharmacological treatment options, available on the CDC’s website at https://www.cdc.gov/drugoverdose/pdf/nonopioid_treatments-a.pdf



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In the case of an EMS response, EMS personnel may consult with their service's medical director. Any board of professional licensure may limit, condition, or suspend the license of, or assess fines against a licensee who recklessly or negligently fails to comply with a person's Directive.

Exemptions

Pharmacists

A prescription presented to a pharmacy is to be presumed valid, and a pharmacist will not be subject to discipline by the pharmacist's professional licensing board or held liable for dispensing a controlled substance in contradiction to a voluntary non-opioid directive.

Health Care Professionals

No health care provider or employee of a health care provider acting in good faith, using appropriate clinical judgement, shall be subject to criminal or civil liability or be considered to have engaged in unprofessional conduct if they do not offer or administer a prescription or medication order for an opioid pursuant to a person's Directive.

Emergencies

If an individual is unconscious or otherwise incapacitated, and consultation with a guardian, health care agent, or the medical record would impede the provision of timely emergency care or provides no evidence that a voluntary non-opioid directive form has been filed, emergency administration of an opioid drug product will not be considered a violation of the law.

Contact Information

Questions or concerns regarding this information should be directed to the Office of Substance Misuse and Addiction Prevention: email osmap@alaska.gov or call 907-334-2602.