

Frequently Asked Questions

Who is considered an existing service provider for narcotic transition services (NTS)?

An existing service provider is a physician or other primary care provider who provided services to a patient using a high-potency opioid narcotic (e.g., hydromorphone, diacetylmorphine, or fentanyl) for the patient's OUD or opioid addiction from July 1, 2021 to Oct. 4, 2022.

A 150-day transition period, as outlined in [Alberta Health's fact sheet on narcotic transition services \(NTS\)](#) may apply to existing service providers. Existing service providers are not permitted to initiate new patients on high-potency opioid narcotics for the treatment of OUD as of Nov. 4, 2022.

What if I'm not considered an existing service provider?

Physicians or other primary care providers who have not provided services to a patient using a high-potency opioid narcotic for OUD or opioid addiction from July 1, 2021 to Oct. 4, 2022 must abide by the full set of [regulations](#) that came into effect on Oct. 4, 2022.

This means any patient that you indicate will require a high-potency opioid narcotic for OUD must be referred to an [AHS Opioid Dependency Program \(ODP\)](#) for treatment.

What if I have a patient on a combination of opioids for OUD?

As of Mar. 5, 2023, your patient will only have access to high-potency opioid narcotics through a licensed NTS provider. You should begin your patient's transition to either commonly-used OAT medications or the NTS as soon as possible.

You can continue to prescribe commonly-used medications for the treatment of OUD, including methadone, buprenorphine and slow-release oral morphine (SROM). Physicians still require a CPSA OAT approval to prescribe OAT medications such as methadone, SROM or Injectable Opioid Agonist Therapy (iOAT). OAT approval is not required for buprenorphine.

What if my patient is on high-potency opioid narcotics for both OUD and another medical condition such as chronic pain?

If the purpose or indication of the prescription is for OUD, your patient must be referred to a NTS provider by Mar. 5, 2023. If the purpose or indication of the prescription is for a medical condition other than OUD, you can continue offering high-potency opioid narcotics for the treatment of the medical condition. Please refer to [Alberta Health's fact sheet on narcotic transition services \(NTS\)](#) for more information.

Legislative changes impacting Opioid Use Disorder treatment FAQs

What do I need to include on my Tracked Prescription Program (TPP) pad?

Physicians and other primary care providers must ensure that the indication for a high-potency opioid narcotic is clearly listed on the TPP prescription to assist pharmacists in timely and appropriate dispensing. If an indication is not listed, it will not be dispensed. Prescriptions with an indication of OUD can only be prescribed by existing service providers within the timelines and parameters outlined by the [NTS](#).

If my patient is enrolled in narcotic transition services (NTS) through a licensed AHS Opioid Dependency Program, can I still prescribe high-potency opioid narcotics for purposes other than OUD?

Yes. With taking the necessary precautions and risk mitigation and if the purpose or indication of the prescription is for a medical condition other than OUD, offering high-potency opioid narcotics for the treatment of the medical condition may still be appropriate, despite your patient being enrolled in an NTS. Please refer to [Alberta Health's fact sheet on narcotic transition services \(NTS\)](#) for more information.

How do I transition or refer a patient to a licensed AHS Opioid Dependency Program?

For information on narcotic transition services, contact the Addiction Help Line at 1-866-332-2322 available 24 hours a day 7 days a week.

Albertans struggling with opioid addiction can call the [Virtual Opioid Dependency Program](#) at 1-844-383-7688, seven days a week, from 8 a.m. to 8 p.m. daily, for same-day access to addiction medicine specialists. There is no waitlist.

Prescribers seeking advice on prescribing OAT and/or decision-making for complex patients can contact the Opioid Use Disorder Consultation Service.

- o North of Red Deer: call RAAPID North at 1-800-282-9911 or 1-780-735-0811
- o South of Red Deer: call RAAPID South at 1-800-661-1700 or 403-944-4488

For additional support, information and referral to services, call [211 Alberta](#).