

SB2339

Measure Title: RELATING TO PRESCRIPTION DRUGS.

Report Title: Pharmacies; Prescription Drugs; Return for Disposal

Description: Requires every pharmacy to accept for disposal the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed.

Companion: [HB2125](#)

Package: Women's Legislative Caucus

Current Referral: CPH

Introducer(s): SHIMABUKURO, BAKER, ENGLISH, GREEN, INOUYE, KIDANI, KIM, L. THIELEN, TOKUDA, S. Chang, Dela Cruz, K. Kahele

**PRESENTATION OF THE
BOARD OF PHARMACY**

TO THE SENATE COMMITTEE ON
COMMERCE, CONSUMER PROTECTION AND HEALTH

TWENTY-NINTH LEGISLATURE
Regular Session of 2018

Thursday, February 15, 2018
9:00 a.m.

TESTIMONY ON SENATE BILL NO. 2339, RELATING TO PRESCRIPTION DRUGS.

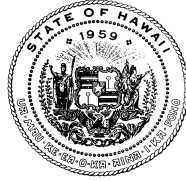
TO THE HONORABLE ROSALYN H. BAKER, CHAIR, AND MEMBERS OF THE
COMMITTEE:

My name is Lee Ann Teshima, and I am the Executive Officer for the Board of Pharmacy ("Board"). Thank you for the opportunity to testify on S.B. 2339, which is a companion to H.B. 2125. The Board appreciates the intent of this measure but has some concerns.

This measure requires pharmacies to accept for disposal the return of any unused, remaining, or expired prescription drugs that the pharmacy previously dispensed. The Board supports the safe disposal of unwanted or unused prescription drugs, including controlled substances, as that prevents individuals from obtaining drugs that were not prescribed to them. However, the Board has the following concerns with S.B. 2339, as this bill does not:

- Allow a patient to return drugs for disposal to another pharmacy that did not dispense the drug;
- Address prescription drugs that are mailed to a patient;
- Address controlled substances;
- Include sufficient guidelines or procedures by which pharmacies will accept drugs for disposal; and
- Include safeguards to protect pharmacies from robbery, theft, or diversion issues.

Thank you for the opportunity to provide testimony on S.B. 2339.



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on S.B. 2339
RELATING TO PRESCRIPTION DRUGS**

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Hearing Date: February 15, 2018

Room Number: 229

1 **Fiscal Implications:** None.

2 **Department Testimony:** The Department of Health (DOH) respectfully submits the following
3 comments on S.B. 2339. The DOH defers to the Board of Pharmacy of the Department of
4 Commerce and Consumer Affairs on implementation of HRS Chapter 461 and any amendments
5 to current law or regulations that may apply. We also defer to the Department of Public Safety,
6 Narcotics Enforcement Division regarding implications for enforcement.

7 The DOH offers the following comments for consideration:

- 8 1) The DOH has worked in close collaboration with the Narcotics Enforcement Division
9 of the Department of Public Safety, Department of the Attorney General and county
10 law enforcement to implement takeback programs in each county that comply with
11 federal regulations; and
12 2) We request that the Legislature consider whether current law allows pharmacists and
13 pharmacies to conduct takebacks voluntarily, provided that the relevant licensure,
14 registrations and approvals are obtained.

15 Thank you for the opportunity to testify on this measure.

DAVID Y. IGE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
919 Ala Moana Boulevard, 4th Floor
Honolulu, Hawaii 96814

NOLAN P. ESPINDA
DIRECTOR

Cathy Ross
Deputy Director
Administration

Jodie F. Maesaka-Hirata
Deputy Director
Corrections

Renee R. Sonobe Hong
Deputy Director
Law Enforcement

No. _____

**TESTIMONY ON SENATE BILL 2339
RELATING TO PRESCRIPTION DRUGS**

by
Nolan P. Espinda, Director
Department of Public Safety

Senate Committee on Commerce, Consumer Protection, and Health
Senaterr Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair

Thursday, February 15, 2018; 9:00 a.m.
State Capitol, Conference Room 229

Chair Baker, Vice Chair Tokuda, and Members of the Committee:

The Department of Public Safety (PSD) appreciates the intent of Senate Bill (SB) 2339, which would require every pharmacy to accept for disposal the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed. PSD, however, offers the following comments.

First, on September 9, 2014, the United States Drug Enforcement Administration (DEA) published in the Federal Register, a lengthy set of regulations regarding the "take back" of drugs from the community by pharmacies, other controlled substances registrants, and law enforcement. In these regulations, the DEA declared that federal controlled substances laws apply to drug take back operations because the collection of drugs taken back from the community includes both controlled and non-controlled substances. If this bill is enacted into law, every pharmacy must comply with these federal regulations.

Second, in their regulations pertaining to pharmacies, DEA has stated that only "retail" pharmacies and "hospitals with an on-site pharmacy," may register to take back drugs from the community. This appears to conflict with SB 2339, which mandates that

“every pharmacy shall accept for disposal” any unused, remaining, or expired prescription drug that they dispensed.

Third, the DEA requires that entities such as a retail pharmacy or a hospital with an on-site pharmacy obtain a controlled substances registration to become a “collector” of drugs taken back from the community. SB 2339 does not require that a pharmacy comply with this federal registration requirement.

Fourth, the DEA regulations require that retail pharmacies and hospitals with an on-site pharmacy maintain appropriate controls over the drugs which are taken back to prevent diversion. This federal requirement is not included in SB 2339. Also, SB 2339 does not contain a prohibition to prevent pharmacies from recycling drugs that have been taken back from the community.

Fifth, the DEA regulations require that because pharmacies are controlled substances registrants, in most cases, they must “reverse distribute” or ship the drugs that are taken back from the community to a registered reverse distribution company for disposal. PSD would note that, to our knowledge, there are presently no reverse distribution companies in the State of Hawaii. For Hawaii pharmacies, all drugs taken back would have to be shipped to the mainland at possibly significant costs to local pharmacies. Some of our local pharmacies are small businesses.

Finally, PSD would refer the Committee to the 2017 Hawaii Opioid Action Plan. As outlined in Focus Area 4 of the Plan, the recommended method of increasing the amount of drugs taken back from the community is to place take back containers in the various county police stations across the State. Efforts in this regard are currently ongoing.

Thank you for the opportunity to present this testimony.



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Commerce, Consumer Protection, and Health
February 15, 2018 at 9:00 a.m.

By
Carolyn Ma, PharmD, BCOP
DEAN
UH Hilo - Daniel K. Inouye College of Pharmacy

SB 2339 – RELATING TO PRESCRIPTION DRUGS

Chair Baker, Vice Chair Tokuda, and members of the committee:

My name is Carolyn Ma, and I am the Dean for the UH Hilo Daniel K. Inouye College of Pharmacy (DKICP). I submit this testimony as designee on behalf of UH Hilo Interim Chancellor Marcia Sakai. University of Hawai'i at Hilo fully supports this bill that will amend HRS 461 and require a pharmacy to accept for disposal the return of unused, remaining, or expired prescription drugs that the pharmacy previously dispensed.

Unused medications in households and at various patient care facilities expose residents to potential harm due to mistaken ingestion and increase the potential for theft and assault. In children ≤ 5 years old, medication overdoses are the most common.¹ Annually, more than 71,000 children under the age of 19 present to emergency rooms for unintentional overdoses of prescription and over the counter drugs annually.² The problem can add to drug abuse in young adults aged 18-25 (5.9%) while 3% of teens (12-17yrs) have the second highest rate.³ So called "pharm parties", social gatherings where prescription drugs are consumed with alcohol have gained popularity in recent years in both age groups.^{3,4}

In partnership with the Narcotics Enforcement Department, the DKICP has participated in annual Drug Take Back events since 2012. In 2014, our efforts to quantify and describe the types of returned medications were published in the Hawaii Journal of Medicine and Public Health.⁵ In 2 large Drug Take Back events at the annual Good Life Senior Expo (3 days) and at 9 one-day events on O'ahu, Maui, Kaua'i and Hawai'i Island, a total of over 8000 pounds of medications were recovered. Seven of the top 10 types of medications were classified as cardiovascular agents. The most common non-prescription medications included aspirin, naproxen and ibuprofen. Controlled substances comprised 10% of the returned medications; the most common was the combination hydrocodone/acetaminophen medications (CII). The DEA also continues to hold drug take back events.

Other states such as California have passed laws that mandate pharmacies, police or fire departments to accept unused medications. Amendments to this bill should detail

logistics, safety and security issues for pharmacies to be able to carry out this function without compromising their facilities, operations, personnel and general safety.

As an education institution, the DKICP would be more than willing to help support public education efforts on proper drug disposal.

References

1. Schillie SF, Sheab N, Thomas KE, Budnitz DS, Medication overdoses leading to emergency department visits among children, *A. J. Pre. Med.* 2009;37(3):181-7.
2. Epidemic Responding to America's Prescription Drug Crisis. Executive Office of the President of the United States (2011)
3. Prescription Drug: abuse and Addiction Adolescents and young adults. National Institute on Drug Abuse
4. Leinwand D. Prescription place in teen culture. *USA Today.* June 13, 2006
5. Ma, CS, Batz, F, Taira Juarez, D, Ladao, L, Drug Take Back in Hawai'i: Partnership Between the University of Hawai'i Hilo College of Pharmacy and The Narcotics Enforcement Division. *HJMPH* 2014;73:1(26-31)

Testimony of
Jonathan Ching
Government Relations Specialist

Before:
Senate Committee on Commerce, Consumer Protection, and Health
The Honorable Rosalyn H. Baker, Chair
The Honorable Jill N. Tokuda, Vice Chair

February 15, 2018
9:00 a.m.
Conference Room 229

Re: SB2339, Relating to Prescription Drugs

Chair Baker, Vice-Chair Tokuda, and committee members, thank you for this opportunity to provide testimony on SB2339, which requires every pharmacy to accept for disposal the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed.

Kaiser Permanente Hawai‘i supports the intent of SB2339 but requests an AMENDMENT

Kaiser Permanente Hawai‘i is keenly aware that abuse and diversion of prescribed medication continues to rise around our state and country. Drug poisoning is the leading cause of death by injury in the United States, according to the U.S. Drug Enforcement Administration Opioid painkillers accounted for 42,249 drug overdoses — 115 a day — in 2016, the most recent year for which statistics are available from the U.S. Centers for Disease Control and Prevention. According to the National Institute on Drug Abuse, most of prescription drug abusers get their drugs from friends and family, often taking them from home medicine cabinets without asking.

We are committed to providing opportunities for anyone to dispose of unwanted prescription medication in a safe, environmentally appropriate, and accountable manner. In furtherance of this commitment, we believe there are other viable safe drug disposal options. Currently, all of Kaiser Permanente Hawai‘i’s outpatient pharmacies offer “mail back” postage-paid envelopes that can be used to send unwanted medications to a registered pharmaceutical waste handler, which is an “authorized collector” under federal rules, for disposal in an environmentally safe manner in accordance with federal and state regulations. These envelopes are available to all members of the public during regular pharmacy hours.

While we support the intent of SB2339, we offer an **amendment** to make it consistent with a 2014 federal rule regarding the disposal of pharmaceutical controlled substances in accordance with the

Controlled Substance Act, as amended by the Secure and Responsible Drug Disposal Act of 2010.¹ Under 21 C.F.R. § 1317, authorized collectors² may collect pharmaceutical controlled substances from ultimate users using one of the following methods: collection receptacles, or mail-back programs. Therefore, we respectfully ask the committee to consider adopting the following amendment:

"§461- Return for disposal of unused, remaining, or expired drugs required. Every pharmacy may [~~shall~~] accept for disposal from any person the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed using one of the following methods: (1) collection receptacles; or (2) mail-back programs."

Currently, under 21 C.F.R. § 1317.40, manufacturers, distributors, reverse distributors, narcotic treatment programs, hospitals/clinics with an on-site pharmacy, and retail pharmacies that desire to be authorized collectors may do so by modifying their registration to obtain authorization to be a collector. Given that there are no authorized collectors that are a registered reverse distribution company in Hawai‘i, all pharmacies must ship unwanted prescriptions back to the mainland for proper disposal in accordance with federal and state law. We have concerns that mandating all pharmacies statewide to accept unwanted prescription, as sought under SB2339, could have a significant financial and administrative burden, especially on smaller, community pharmacies.

As an alternative, the committee may wish to consider authorizing and not mandating pharmacies to accept unwanted prescriptions for disposal. We believe this would still help to provide clarity over existing Hawai‘i Administrative Rules, which currently prohibit the return of any prescription medications to retail pharmacies after dispensing, preventing these pharmacies from serving as return points for unwanted/unused medications.³

We respectfully request consideration of our amendment. Thank you for the opportunity to testify on this measure.

¹ Disposal of Controlled Substances, 79 Fed. Reg. 53520 (Sept. 9, 2014) (to be codified at 21 C.F.R. pts. 1300, 1301, 1304, 1305, 1307 and 1317). Available at: <https://www.gpo.gov/fdsys/pkg/CFR-2017-title21-vol9/pdf/CFR-2017-title21-vol9-sec1317-05.pdf>.

² Manufacturers, distributors, reverse distributors, narcotic treatment programs, hospitals/clinics with an on-site pharmacy, and retail pharmacies that desire to be authorized collectors may do so by modifying their registration with the DEA to obtain authorization to be a collector.

³ Hawaii Administrative Rules Title 16 Chapter 95 Pharmacists and Pharmacies Return or exchange of drugs prohibited (§16-95-87). Available at: https://cca.hawaii.gov/pvl/files/2013/08/HAR-16-95-C_0816.pdf. See also H.A.R. § 23-200-20, Procedures for disposal of controlled substances.

SB-2339

Submitted on: 2/12/2018 1:15:28 PM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Patrick Uyemoto	Testifying on behalf of The Hawaii Pharmacists Association	Comments	No

Comments:

The Hawaii Pharmacists Association would like to offer comments on SB2339

Aloha Senator Baker, Senator Tokuda, and Members of the Committee,

The Hawaii Pharmacists Association strongly supports the intent of the bill to allow for safe disposal of prescription drugs so that unwanted or unused drugs, including controlled substances are removed from our communities.

We do have reservations about how this medication take back service will actually work. Here are some of our concerns:

- Since a pharmacy can only accept returns for a prescription they previously filled, labor would increase because someone at the pharmacy would need to check each and every prescription returned to make sure it was dispensed by them. An additional complication arises if the patient does not return the medications in the original bottles from the pharmacy and instead has a number of loose tablets for example in a ziplock bag. Would it be the pharmacies responsibility to identify each tablet and check if it was dispensed by them?
- Are there going to be regulations about what medications can and cannot be returned? Needles and syringes could be a potential safety issue for pharmacy staff.
- After accepting the returned medications, will it be the pharmacy's responsibility to dispose of them? If so this will increase labor and costs for the pharmacy. Also, where can we dispose of them in Hawaii?

- Pharmacies keep inventory of every medication prior to being dispensed and sold. Once it leaves the pharmacy it is subtracted from the inventory and no longer accounted for. If pharmacies are going to accept returned medications, a system would need to be created to hold people accountable for what is being returned and the quantity.
- Diversion is also another issue that needs to be taken into consideration. This does not only include pharmacy employees but also drug seeking individuals who are aware that patients may be returning narcotics and controlled medications to the pharmacy which can potentially become a safety issue.

Once again I would like to reiterate that we strongly support the intent of this bill but the bill in its current state does not address logistical, financial, and safety factors that accompany implementing this medication return service.

Thank you for the opportunity to provide comments on SB2339



SanHi

GOVERNMENT STRATEGIES
A LIMITED LIABILITY LAW PARTNERSHIP

DATE: February 14, 2018

TO: Senator Rosalyn Baker
Chair, Committee on Commerce and Consumer Protection and Health
Submitted Via Capitol Website

RE: **S.B. 2339 Relating to Prescription Drugs**
Hearing Date: Thursday, February 15th, 2018 at 9:00 a.m.
Conference Room: 229

Dear Chair Baker and Members of the Committee on Commerce, Consumer Protection and Health:

We submit this testimony on behalf of Walgreen Co. ("Walgreens"). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia, and Puerto Rico. In Hawaii, Walgreens now has 19 stores on the islands of Oahu, Maui, and Hawaii.

Walgreens **opposes** S.B. 2339, which requires every pharmacy to accept for disposal the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed.

Walgreens has been a leader in finding solutions to combat prescription drug misuse. On the mainland, Walgreens piloted the installation of over 500 drug takeback kiosks in states across the country, and has plans to significantly expand this program.

Walgreens opposes the proposal in this bill which requires pharmacies to take back unused, remaining or expired prescriptions in their stores. This requirement is very problematic because the federal Drug Enforcement Agency (DEA) has very strict guidelines for handling disposed medications. In 2014, the DEA did issue rules that allow pharmacies to voluntarily implement in-store collection kiosks or provide mail-back envelopes in their stores. However, in order to implement these systems, pharmacies have to pay for collection companies to maintain and dispose of pharmaceutical waste, and abide by strict procedures for the handling of the waste. We oppose the current language in this bill because it does not consider that pharmacies cannot simply take drugs back over their counters, nor does it consider the complexity and cost of implementing in-store drug collection systems.

We would note that in other jurisdictions that are addressing this issue (including several counties in California and Washington, and now a bill pending in Washington

state), drug manufacturers are being given responsibility for implementing drug take back collection, handling and disposal systems. In these systems, manufacturers are required to pay for a drug take back system, and may partner with pharmacies, hospitals or clinics to accomplish this goal.

Walgreens believes that any discussion regarding drug take back programs should involve all of the entities potentially involved in pharmaceutical waste collection including law enforcement, chain and community pharmacies, hospitals/clinics and drug manufacturers. We cannot support this bill because it simply requires pharmacies to collect and dispose of prescription drugs without more comprehensive discussion or recognition of pharmacy restrictions in handling pharmaceutical waste.

Walgreens has also long been in support of the drug takeback events held in Hawaii, and would be open to more collaboration with the Department of Public Safety to help with these events. However, we believe that much more discussion is needed before legislatively creating a system for handling pharmaceutical waste. We would be happy to participate in additional discussions about how a drug take back program could be developed in Hawaii.

For these reasons, we respectfully oppose this measure and request that it be held in Committee. Thank you for the opportunity to testify on this bill.



SB2339 Safe Disposal of Medications

HOUSE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH:

- Senator Rosalyn Baker, Chair; Senator Jill Tokuda, Vice Chair
- Thursday, February 15th, 2018: 9:00 a.m.
- Conference Room 229

HAWAII SUBSTANCE ABUSE COALITION Comments SB2339:

GOOD MORNING CHAIR, VICE CHAIR AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide hui of almost 40 non-profit alcohol and drug treatment and prevention agencies.

While HSAC agrees with the intent of the bill, there are state and city plans already to develop designated takeback sites to help us understand the numerous legal and federal requirements that must be met before having a designated site.

The Hawaii Opioid Initiative Plan (HOIP): A Statewide Response for Opioids has plans for takeback programs at local police stations to have legal drop off sites for old medications.

- There are numerous federal and state laws and regulations that must be met.
- These projects will help us understand all the government regulations, from which we can expand sites.
- <https://health.hawaii.gov/substance-abuse/files/2013/05/The-Hawaii-Opioid-Initiative.pdf>

Pharmacies, who were part of the HOIP planning groups and approved the takeback plans, may not be aware of all the regulations or prepared; however, they may, if interested, be part of future plans.

We appreciate the opportunity to provide testimony.

SB-2339

Submitted on: 2/9/2018 3:40:47 PM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Catalina Cross	Testifying on behalf of Times Pharmacy	Comments	No

Comments:

Testimony presented before the
Senate Committee on Commerce Consumer Protection & Health
2/15/2018

by
Catalina Cross, Director of Pharmacy
Times Pharmacy

SB 2339 – RELATED TO Prescription Drugs, Return for Disposal

I support the intent of the bill to properly and safely dispose of unused and unwanted drugs, however this bill does not appear to provide sufficient guidelines or safeguards for pharmacies to take drugs back for disposal.

Before supporting the bill, I would like to better understand the reverse logistics and potential risks in disposing of drugs once they are received from the patient. For example, tracking the disposal of returned controlled substances.

Thank you for the opportunity to submit my comments.

MOLOKAI DRUGS, INC.
P.O. Box 558
Kaunakakai, HI 96748-0558
Phone 808-553-5790

February 13, 2018

RE: TESTIMONY IN OPPOSITION

SB2339 RELATING TO PRESCRIPTION DRUGS.

Requires every pharmacy to accept for disposal the return of any unused, remaining, or expired prescription drug that the pharmacy previously dispensed.

Dear Chair Baker, Vice Chair Tokuda, and Members of the Senate Commerce, Consumer Protection, and Health Committee:

I submit this testimony as the president of Molokai Drugs, a community pharmacy providing pharmaceutical services since 1935.

Although we are in favor of the intent of disposing medication safely, we are opposed to SB2339.

We do not have the resources on Molokai to properly abide by the proposed changes. We do not have a public incinerator on Molokai to burn the medications.

We do provide a community service every two years with the Department of Public Safety Narcotics Enforcement Division (NED) and the Hawaii National Guard Counterdrug Support Program. Molokai Drugs coordinates a free "Medication Take Back Program." Customers bring in their medicines, NED inventories and weighs the drugs, then takes the medication back to Oahu on the same day.

The collected medication is then taken to a public incinerator on Oahu for disposal.

In conclusion, we will continue to work with NED and the Hawaii National Guard to collect unused and/or expired medicine once every two years. We are currently working with them to coordinate a collection later this year. I am attaching our 2016 "Medication Take Back Program" flyer to confirm what we do on a biannual basis.

Mahalo for allowing me to submit testimony on SB2339.

Sincerely,



Kimberly Mikami Svetin
President
Molokai Drugs, Inc.

Enclosure – 2016 "Medication Take Back Program" Flyer



MOLOKA'I DRUGS, INC.

EST. 1935



Department of Public Safety
Narcotics Enforcement Division



Hawaii National Guard
Counterdrug Support Program

MEDICATION TAKE BACK PROGRAM

Turn in your unused or expired medication for a safe, anonymous disposal.

Thursday, May 26, 2016
9:00 a.m. - 12:00 p.m.
@ Molokai Drugs, Inc.
28 Kamoi St #100, Kaunakakai, HI 96748

New or used needles and syringes will not be accepted.



Scott Cassel
Chief Executive Officer/Founder

February 15, 2018

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Chittenden Solid Waste District, VT

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CalRecycle

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Solid Waste Agency of Lake County, IL

Rosalyn H. Baker
Senate Committee on Commerce, Consumer Protection, and Health
Hawaii State Legislature
Hawaii State Capitol
415 South Beretania St.
Honolulu, HI 96813

RE: Testimony regarding prescription drug disposal bill SB.2339 (companion HB.2125)

Honorable Chairwoman Baker and Committee Members:

The Product Stewardship Institute (PSI) commends Hawaii's efforts to support safe drug disposal, however **we do not recommend requiring pharmacies to create or pay for this program**. Instead, we urge you to establish a manufacturer financed and managed drug take-back program in line with best practices for safe drug disposal legislation across country.

We strongly support pharmacy-based drug take-back programs that accept both controlled and non-controlled substances, providing residents with a convenient way to safely remove expired and unwanted medications from their homes. Mounting evidence demonstrates the need for secure medication disposal options that match the convenience of purchasing them. Pharmaceuticals improperly stored in the home or disposed in the trash may end up in the hands of children, teenagers, and potential abusers. A lack of safe disposal options contributes to the national drug abuse epidemic that is now the leading cause of injury death in the U.S., ahead of car accidents. Moreover, when flushed or thrown away, pharmaceuticals end up in waterways, harming the ecosystem and potentially affecting sources of drinking water.

However, we do not believe that government or retailers should have to pay for drug take-back programs. Our experience nationally indicates that pharmacies are generally willing to volunteer to host take-back programs as long as they are not being asked to cover the cost. They recognize the benefits: in addition to providing a community service, pharmacy-based take-back programs increase foot traffic in their stores and engender customer loyalty.

Product Stewardship Institute, Inc. | 29 Stanhope Street, 3rd Floor, Boston, MA 02116
tel. 617.236.4855 | www.productstewardship.us | @productsteward
PSI is an equal opportunity provider and employer.

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We also caution you against any bill that would have pharmacy staff handling medication being disposed of by residents, as the U.S. Drug Enforcement Agency rules forbid this. The person in legal possession of the medications must be the one to dispose of it directly into a collection receptacle. A pharmacist should only provide oversight and guidance. This is also a more efficient arrangement.

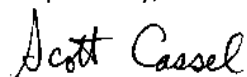
Instead, we support funding from pharmaceutical manufacturers, which profit from drug sales and have contributed to the over-prescription of medications in the U.S. **Producer-funded drug take-back programs save government and taxpayers money, fairly incorporate the small cost of managing drug disposal in the product's purchase price, and provide a direct financial incentive for pharmaceutical companies to reduce unnecessary prescriptions.** This funding mechanism is a key element to the sustainability and success of these programs.

We strongly urge you to pursue producer-funded drug take-back legislation, for which model language already exists. In the U.S., 21 local governments and two states (Massachusetts and Vermont) have already passed similar drug stewardship laws around the country. Washington State which is poised to pass its bill, and many other state and local governments are considering similar legislation. Hawaii has the chance to stand among these leaders by taking this important step to address the opioid epidemic, accidental overdoses, and aquatic contamination.

We would be happy to work with you on a state bill for Hawaii. PSI is a national nonprofit organization dedicated to reducing the health and environmental impacts of consumer products. We have 47 state government agency members and hundreds of local government agency members nationwide. PSI also has formal partnerships with 110 businesses, organizations, academic institutions, and non-U.S. governments. Our organization has been working on the issue of safe drug disposal for over a decade, including helping to change the federal Secure and Responsible Drug Disposal Act of 2010 and subsequent Drug Enforcement Administration regulations in 2014, which has allowed retail pharmacies to become authorized collectors of controlled substances. These changes made dropping off leftover drugs significantly more convenient, which is a key factor in increasing collection through drug take-back programs.

Thank you for your strong leadership on this important issue. Please contact us with any questions.

Respectfully,



Scott Cassel

Chief Executive Officer/Founder

About PSI: PSI is a national nonprofit dedicated to reducing the health and environmental impacts of consumer products. We have 47 state government agency members and hundreds of local government agency members nationwide. PSI also has 110 formal partnerships with businesses, organizations, academic institutions, and non-U.S. governments. Our organization has been working on the issue of safe drug disposal for over a decade, including helping to improve the federal Secure and Responsible Drug Disposal Act of 2010 and subsequent Drug Enforcement Administration regulations in 2014, which allow retail pharmacies to become authorized collectors of controlled substances. These changes opened the door to significantly more convenient take back, which is a key factor in increasing the amount of medications collected. PSI works closely with NYPSC, which has made pharmaceuticals stewardship a priority issue.

SB-2339

Submitted on: 2/15/2018 9:41:46 AM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Ed Gottlieb	Testifying on behalf of Coalition for Safe Medication Disposal	Oppose	No

Comments:

Dear CPH Committee,

Thank you for the opportunity to submit testimony regarding SB2339.

U.S. Drug Enforcement Administration (DEA) rules forbid pharmacy staff from touching previously dispensed medications when assisting a person who has come to drop-off unwanted medications. Staff can look at what a person has, and let them know what can and can't be deposited in a take-back kiosk. In existing pharmacy take-back programs, a pharmacist rarely interacts with a person doing drop-off. It typically happens only if that person has a question regarding if particular item can be deposited.

With SB2339:

1. Every person doing drop-off would need to wait for pharmacy staff to be free to review their items. They would have to dump what they have on a counter, or otherwise display, their unwanted medications for staff to identify, without touching any of it, which came from that pharmacy. Sometimes shopping bags full of unwanted medications are brought in. **It would take an inordinate amount of time, for both the customer and staff, to review the medications that arrive.**
2. To insure that review happens, the kiosk would have to be put behind the counter, where space is at a premium.
3. There is no way to know if what is in a bottle is actually the unwanted portion of what was dispensed in that bottle.
4. What should done when a person says a zip-lock bag full of pills came from that pharmacy?

Please consider introducing take-back legislation that provides free, convenient take-back opportunities for both prescription and over-the-counter medications (both human and veterinary) for all residents and, which is paid for by the manufacturers of these drugs. For a take-back program to be a success, a robust outreach program is necessary. For a model, refer to the most recent pharmaceutical take-back, extended producer responsibility laws past or pending in this country. The Washington State bill, that recently passed their Assembly, is a particularly good model for your consideration.

As a first step, HI needs to change its rules to allow the DEA rule, permitting authorized collection, to proceed. Almost every other state now permits pharmacies to register with the DEA and do take-back.

Regards,

Ed Gottlieb
Chair, Coalition for Safe Medication Disposal
Industrial Pretreatment Coordinator
Ithaca Area Wastewater Treatment Facility
525 3rd Street
Ithaca, NY 14850

SB-2339

Submitted on: 2/13/2018 10:08:12 PM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Individual	Support	No

Comments:

SB-2339

Submitted on: 2/13/2018 12:07:54 PM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Elizabeth Sumang		Oppose	No

Comments:

Hi & To Whom It May Concern,

I stand in opposition to SB2339 regarding pharmacy drug disposal. First off, Pharmacies across the State of Hawaii have yet to be properly reimbursed for the cost of dispensing pharmacy prescriptions. I single handedly manage underpaid claims for three retail pharmacies in which January 2018 alone I've submitted more than a hundred MAC appeals for each location. So there is the elephant in the room here, pharmacies are expected to provide medications to patients at a negative profit, be accredited for dispensing Durable Medical equipment, compunds, and Specialty Prescriptions wkich vosts thousands, and now bear the costs to return patient unused and expired medications. Where are pharmacies expected to come up with the monies to make a decent profit and pay their employees? Let alone be responsible for deug returns? Shouldn't this be handled by the DEA?

At one of the locations I oversee, we order a large box trough the takeaway program and return drugs for patients. The box costs at least a \$125 each time we order and the cost obviously depends on the size of the box. If the state wants pharmacies to be responsible, then the State should be responsible for the costs to participate in such programs, not retail pharmacies.

Retail pharmacies are struggling as it is against big chain pharmacies and PBM monopolization. And now they need to bear an additional expense? This is preposterous.

SB-2339

Submitted on: 2/15/2018 6:58:11 AM

Testimony for CPH on 2/15/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Stephen Orikasa	Individual	Support	No

Comments: