# HB 3273 A STAFF MEASURE SUMMARY

# House Committee On Health Care

Action Date:	04/09/19
Action:	Do pass with amendments and be referred to Ways and Means by prior reference.
	(Printed A-Eng.)
Vote:	10-0-1-0
Yeas:	10 - Alonso Leon, Boles, Drazan, Greenlick, Hayden, Keny-Guyer, Mitchell, Nosse, Prusak,
	Salinas
Exc:	1 - Noble
Fiscal:	Fiscal impact issued
Revenue:	No revenue impact
Prepared By:	Oliver Droppers, LPRO Analyst
Meeting Dates:	3/21, 4/4, 4/9

## WHAT THE MEASURE DOES:

Defines authorized collector, biologics, covered drug (both prescription and nonprescription drugs, brand, and generic), covered entity, covered manufacturer, drop-off site, and drug take-back organization, among other key terms. Specifies covered drugs do not include vitamins, supplements, or homeopathic drugs or products, drugs administered in a clinical setting, exposed sharps, certain medical devices, or biologics. Requires manufacturers of certain drugs to participate in the drug take-back program unless they manufacture drugs for fewer than 50 patients in the state. Authorizes the State Board of Pharmacy to assess fines of up to \$10,000 each day a covered manufacturer does not participate in the drug take-back program. Specifies that take-back program operator must be organized as a 501(c)(3) entity. Requires each take-back program operator to submit a plan to the Department of Environmental Quality (DEQ) for approval for collection and disposal of drugs. Directs DEQ to review, approve, or deny plans submitted; updated plans need to be submitted to DEQ every four years. Requires program operators to seek preapproval to substantively change a drug take-back program no later than 30 days before the change is to occur; defines substantively. Establishes criteria for authorized collectors, drop-off sites, covered drug collection events, and disposal of covered drugs. Requires program operators to promote and provide public outreach and education about safe disposal of drugs. Requires program operators to submit annual report to DEQ on the development, implementation, and operation of drug take-back program; specifies reporting requirements. Requires covered manufacturers to pay all program costs. Allows DEQ to enter into an agreement with the Board of Pharmacy to inspect the drop-off sites, provides DEQ with enforcement authority, and establishes fees to pay for program administration. Establishes the Secure Drug Take-Back Account. Prohibits specified organizations from criminal or civil liability for complying with program requirements, and exempts program operators from state antitrust laws. Establishes confidentiality of information or data DEQ receives from covered manufacturers, exempts applicability of Uniform Controlled Substances Act, and creates a moratorium on cities and counties (with the exception of law enforcement groups) from forming their own drug take-back program. Allows DEQ to enter into interagency agreement with other state agencies, authorizes DEQ to adopt rules to administer the program, and requires DEQ to submit a report to the Legislative Assembly no later than July 1, 2023. Specifies report contents. Sunsets the program September 15, 2031.

#### **ISSUES DISCUSSED:**

- Responsible disposal of prescription drugs, statewide
- Drug abuse and accidental poisonings from unused drugs
- Limited availability of current drug take-back programs; costs associated with managing drug take-back programs

### HB 3273 A STAFF MEASURE SUMMARY

- Drug take-back programs in Washington and California, environmental protections, safety with easy and accessible community drug disposals (drop-off sites)
- Program reporting requirements; negotiated fine amounts
- Product stewardship and lifecycle for drugs produced by manufacturers
- Manufacturer-funded drug take-back programs compared to in-home disposal
- Revenue sources from brand and generic manufacturers to fund drug take-back programs
- Proposed amendments, program financing, and allocation for funding between brand and generic manufacturers

## **EFFECT OF AMENDMENT:**

Replaces the measure.

# BACKGROUND:

Approximately a third of pharmaceutical drugs purchased in the United States go unused, are considered hazardous waste, and end up in water systems or landfills. Current disposal options are limited and inconsistent. In 2014, U.S. Drug Enforcement Administration (DEA) regulations expanded the types of locations allowed to accept unwanted medications on a routine basis. As of 2015, there are 615 authorized collectors nationwide that include drug manufacturers and distributors, narcotic treatment programs, retail pharmacies, and hospitals. Prior to this expansion, pharmacies and hospitals were banned from accepting unwanted prescription drugs, and the public's only legal option to discard unwanted medications safely was giving them to a law enforcement agency. Instead, many people flushed them down the toilet, resulting in contamination of the water supply, or kept them at home, leading to the theft and abuse of prescription drugs.

House Bill 2645 (2017) would have required manufacturers of certain drugs to participate in a drug take-back program and submit program plans to the Department of Environmental Quality for approval. The measure did not pass.

House Bill 3273-A creates a drug take-back program to allow for the safe disposal of prescription drugs.