

Submitter: Dr. Victoria Travis  
On Behalf Of: MED-Project USA  
Committee: House Behavioral Health and Care Committee  
Measure: SB411

To Chair Nosse, Vice Chair Goodwin, Vice Chair Nelson, and members of the House Committee on Behavioral Health and Health Care.

My name is Dr. Victoria Travis, and I am the National Program Director at MED-Project. It is my privilege to represent MED-Project at this hearing of the House Behavioral Health and Care Committee today. I am testifying today based on MED-Project's extensive practical experience operating mandated drug take-back programs. Allowing the use of state and federal permitted medical waste incineration facilities for the destruction of drugs will meet US Environmental Protection Agency and US Drug Enforcement Administration destruction standards, increase the safety and security of the Oregon drug take-back program, and allow implementation of the Oregon drug take back law to comply with a 2018 federal 9th Circuit Court of Appeals decision.

MED-Project is an organization that operates safe, effective, and compliant unwanted medication return programs for residents. We operate 22 approved programs in 6 states serving over 80 million residents nationwide.

MED-Project has provided collection services to Oregonians since July 2021, following the approval of our product stewardship plan in May of that year. We have successfully removed over 100,000 pounds of unused or expired medicine from Oregon households through a network of 250 kiosk drop-off sites and over 100 mail-back distribution locations spread across all 36 counties in Oregon.

In addition to our collection services, MED-Project provides outreach and education across the state through our call center, website, and promotion programs. Our call center and website provide information to Oregonians 24 hours a day in over 200 languages.

MED-Project operates under many rules and regulations, including the Oregon Drug Take-Back Law. The Drug Take-Back Law contains a unique provision that prohibits the use of medical waste incineration for the disposal of household-generated unwanted medicine. This prohibition prevents operators of drug take-back programs like MED-Project from utilizing permitted and compliant destruction facilities when disposing of medicines that Oregonians have chosen to remove from their homes. MED-Project has worked with internationally known environmental consultants to assess the effectiveness of medical waste incinerators as compared to hazardous waste incinerators and municipal waste combustion and has generally found that the evaluated hospital, medical, and infectious waste incinerators had more stringent regulatory emissions limits than hazardous waste incinerators or municipal waste combustors.

MED-Project is pro-competition, and we competitively bid for services on the free market. Disposal services for unwanted medicine are crucial to operating a drug take-back program. The Drug Take-Back Law prevents MED-Project from using the potentially lowest cost option for compliant destruction that meets or exceeds all the local, state, and federal requirements for that destruction facility. This limits our ability to operate a key element of our business in the most competitive way and creates logistical complexities that threaten the safe and secure destruction of drugs.

Additionally, Oregon's Drug Take-Back Law conflicts with a 2018 appellate case that was decided in the federal 9<sup>th</sup> Circuit Court of Appeals, *Daniels Sharpsmart v. Smith*. The 9<sup>th</sup> Circuit made clear in *Daniels Sharpsmart* that states cannot directly restrict commerce – including the disposal of waste removed from a state – occurring wholly outside of the state by disallowing the use of federally permitted destruction facilities located in other states. Senate Bill 411 would align Oregon's Drug Take-Back Law with the binding precedent of the *Daniels Sharpsmart* case by allowing the Oregon Department of Environmental Quality to approve drug take-back program plans providing for the use of medical waste incineration facilities.

Adopting Senate Bill 411 would align Oregon with other states with drug take-back programs that allow a program operator to use all available compliant incineration destruction facilities. These states include California, Illinois, Massachusetts, Maine, New York, and Washington.

Thank you again for the opportunity to represent MED-Project today and to express our support for Senate Bill 411.

Sincerely yours,



Dr. Victoria Travis, PharmD, MS, MBA  
National Program Director  
MED-Project USA