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Details: Informational hearing, 4/15/2009, on disposal of unused medicine

(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ...
PUBLIC HEARING - COMMITTEE RECORDS

2009-10

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Public Health, Senior Issues, Long-Term Care, and Job Creation (SC-PHSILTCJC)

COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)
  (**ab** = Assembly Bill) (**ar** = Assembly Resolution) (**ajr** = Assembly Joint Resolution)
  (**sb** = Senate Bill) (**sr** = Senate Resolution) (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

* Contents organized for archiving by: Gigi Godwin (LRB) (November/2011)

Senate

Record of Committee Proceedings

Committee on Public Health, Senior Issues, Long-Term Care, and Job Creation

Disposal of Unused Medicine

The Committee will hear testimony on how the safe disposal of unused medicine will protect our Great Lakes, drinking water and children.

April 15, 2009 **PUBLIC HEARING HELD**

Present: (5) Senators Carpenter, Coggs, Vinehout, Schultz and Kapanke.
Absent: (0) None.

Appearances For
- None.

Appearances Against
- None.

Appearances for Information Only
- Val Klump — Director of the Great Lakes Institute
- Lyman Welch — Alliance for the Great Lakes
- Rabecca Klaper — Shaw Assistant Scientist - Great Lakes Water Institute
- Tom Engel — Pharmacy Society of Wisconsin
- Lori Bowman — Wi. Department of Agriculture, Trade and Consumer Protection
- John Chisholm — Milwaukee County District Attorney
- William Graffin — Milwaukee Metropolitan Sewerage District
- Joe Baumann — Veolia Environmental Services
- Steve Brachman — Waste Reduction Specialist- UW-Milwaukee

Registrations For

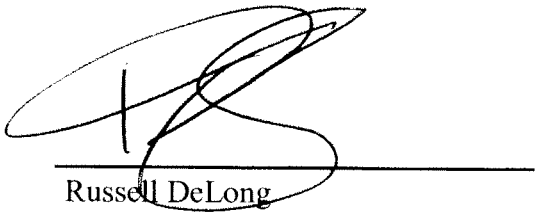
- None.

Registrations Against

- None.

Registrations for Information Only

- None.



Russell DeLong
Committee Clerk

Senate Committee on Public Health, Senior Issues, Long-Term Care & Job Creation
Informal Hearing
April 15, 2009

Chairman Carpenter and Committee members, thank you for the opportunity to provide information today about to our 2008 pilot Prescription Drug Grant Program. I am Lori Bowman, Director of the Agri-Chemical Management Bureau, representing Secretary Nilsestuen and the Department of Agriculture, Trade and Consumer Protection.

- Operated the Agricultural Clean Sweep grant program for counties since 1990
- Received the DNR's HHW Clean Sweep Grant program for local governments in 2003. First grants issued in 2004
- Received authority to include unwanted prescription drug to the HHW grant authority in 2007/2009 Biennial Budget
- Due to the late passage of the biennial budget in 2007 and the time needed to prepare for the unwanted prescription drug program, 2008 was the first (pilot) year we issued grants to local governments for this type of collections
- Review handout summary:
  - 12 grants totaling about $72,000 for collection events.
  - Approximately 5,100 participants to program,
  - Approximately 7,400 pounds of drugs collected; 737 pounds of controlled substances
  - Jefferson County Sheriff's Department coordinated to transport all grant sponsored event controlled substances in state to witnessed destruction at incinerator in Missouri
- Types of collections:
  - "Traditional" – collection event with law enforcement witnessed transfer of controlled substances to evidence vaults until witnessed destruction
  - City of Brookfield mail back program for non-controlled drugs only for Waukesha County
  - Wood County and now City of Cudahy sponsor continuous collections at law enforcement department
  - LaCrosse Model
- We ran a grant program for HHW drug collections for one year. We do not regulate these products, but issue grants with consideration to minimize state liability. This was a new regulatory arena for us.
- Lessons we learned:
  - Regulatory requirements for controlled substances are much more prohibitive for very good reasons, compared to non-controlled substances.
  - Most consumers cannot distinguish between the controlled substances and non-controlled substances. They both are prescriptions.
  - Department of Justice, Drug Enforcement Administration is primary federal authority; Environmental Protection Agency is primary environmental agency
  - State authority: law enforcement primary enforcement authority, DNR (waste, groundwater, air), DATCP (currently grant authority), DHS (health and institutions), Reg & Lic (license pharmacists), Controlled Substance Board, Pharmacy Board
  - No easy solutions to disposal issues.
  - Our program only deals with household waste, not institutional waste.


FORWARD

Testimony Submitted From Aurora Pharmacy Inc.

Please see the following information on behalf of Aurora Pharmacy Inc. Medication Collection Day - to be shared at the APril 15th Public Health Committee.

If you require further details, please let me know if you should need to speak with John Gates or Sally Fongaro.

Sincerely,
Susan Ulatowski
Administrative Assistant Aurora Ventures
Sally Fongaro Regional Manager
Tom Bull Regional Manager
John Gates Director of Pharmacy Operations
12500 West Bluemound Road Suite 201
Elm Grove, WI 53122
Phone: 262-787-2123
Fax: 262-787-2140

Our success is determined by the pounds of medications that are turned in versus being disposed of improperly, potentially landing in the hands of children and animals or in our water system. Furthermore, Aurora Pharmacists volunteer their time for this important annual event. The Milwaukee County totals represent the Miller Parkway collection. We are optimistic that the collection taking place on Saturday, April 18 will surpass last year's totals. The following article is a summary of our 2008 collections:

3.5 Tons Turned in at Medicine Collection Day
(Milwaukee, WI) – In just four hours, more than 2,000 people delivered 3.5 tons of unused medication to collection sites in Milwaukee, Ozaukee, Racine, and Washington Counties for the third annual Medicine Collection Day.

The event is held to help protect our rivers and Lake Michigan, prevent childhood poisonings, and reduce substance abuse.

Never flush or pour old medicine down the drain. Wastewater treatment plants are not designed to remove them from wastewater.

	Participants	Non-Controlled Substances	Controlled Substances
Milwaukee County	**1,080**	**4,487 lbs**	**36,831** (Pills, Patches & Bottles)
Ozaukee County	**365**	**1,022 lbs**	**3** (30 gallon drums)
Racine County	**523**	**761 lbs**	**50 lbs**
Washington County	**380**	**743 lbs**	**83 lbs**
TOTAL:	**2,348**	**7,013 lbs**	

Law enforcement destroys controlled substances, which include: narcotic pain killers, cough syrup with codeine, and tranquilizers.

Veolia Environmental Services incinerates non-controlled substances at a federally licensed incinerator. Examples of non-controlled substances include: blood pressure medicine, aspirin, and cholesterol medication.


FORWARD

2008 Pilot Prescription Drug Grant Program Summary

Municipality	Collection Date (s)	Number of Participants	Drug Amt. Breakdown: Non-controlled/Controlled#	Drug Amt. Total	Municipal Cost	DATCP Cost
Brookfield City aka Waukesha Mailback *	July - Dec	1,378	210/0	210	$9,100	$10,000
Dane County/Madison City	Oct. 18	761	1,335/160	1,525	$1,991	$5,804
Dunn County	Sept. 10	227	280/74	354	$2,171	$4,025
Jefferson County	Sept. 11, Oct. 11	512	920/12	949	$8,224	$5,000
Kewaunee/Door Counties	Sept. 13 & 27, Oct. 8 & 10	254	461/21	482	$6,143	$7,983
Manitowoc/Sheboygan Counties	Aug. 7 – Dec. 5	721	1,199/76	1,297	$3,955	$10,000
Oconto County	Sept. 13	70	265/34	306	$1,641	$3,815
Oneida/Vilas Counties	Oct. – Nov.	122	196/45	122	$1,499	$4,980
Rock County	Oct. 25,28, & 31; Nov. 7 &8	205	338/30	384	$10,225	$5,448
Walworth County	Oct. 3 & 4	119	281/24	316	$1,154	$2,507
Waupaca/Calumet/ Outagamie/Winnebago Counties	Sept. 13 – Sept. 27	771	1,095/233	1,366	$7,485	$10,188
Wood County **	July 1 – Dec. 5	---	32/28	60	$1,363	$2,277
Totals		5,140	6612/737	7,371	$54,951	$72,027

*The City of Brookfield sponsored a prescription drug mail-back program for Waukesha County. This program allowed residents to mail non-controlled drugs to Capital Returns, a reverse distributor. Controlled substance drugs cannot be mailed.

** Wood County held collections that were not funded by DATCP. Wood County sponsored continuous collections at two law enforcement offices in 2008, but no participation record was kept. A total of 142 pounds of drugs were collected.

Controlled substances are often narcotics and pain relievers of particular interest for theft and street crimes. DATCP sponsored a shared witness burn for controlled substances in December 2008 for ALL counties/cities along with grantees to reduce costs and improve efficiency. Nearly 900 pounds of controlled substances were taken to an incinerator near St. Louis, MO.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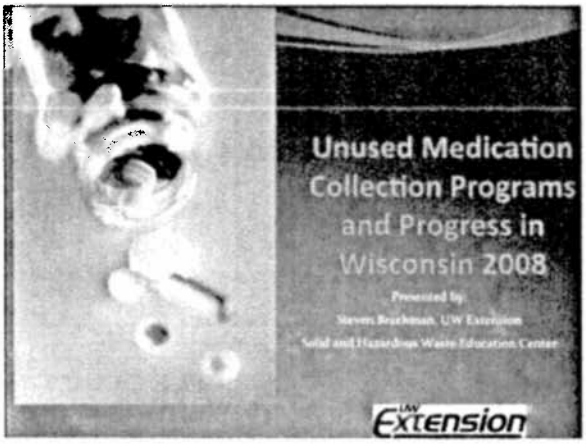


WI Pharmaceutical Waste Working Group

- Formed in 2006 as one day collection events were beginning
- Cross section of stakeholders
- Focused on 3 areas
  - Supporting information and educational outreach
  - Improving data collection
  - Developing pilot program models

Unused Medication Collection Programs in Wisconsin

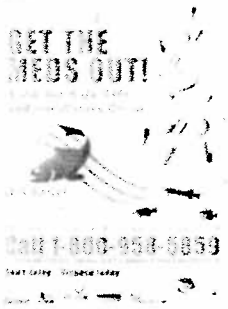
- One-day collection program activity is growing significantly in Wisconsin
  - Over 60 events in '08, including several ongoing programs
  - La Crosse county has developed a permanent collection site with deputized staff
  - Marshfield, Fond du Lac, and Columbia County have permanent police station drop boxes.
- Mail-back pilot program in Waukesha and Winnebago counties launched in May

2008 Mail Back Pilot Program

First to use a reverse distributor
Pharmacies (100+) used as key information distribution points
Data collection and participant evaluation essential
Nearly 10% of Wisconsin's population eligible

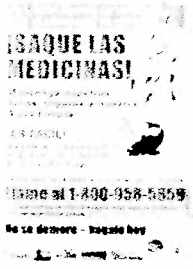
Program Overview

- Consumers called 800 number for instructions
  - No controlled meds allowed
- Households received mail back packaging for shipping via UPS
- Capital Returns bar scanned individual meds
- All returns shipped to hazardous waste incinerator



Mail Back Publicity Tools important

- 30-40% of callers get information from pharmacy
- Other sources of info critical including:
  - Libraries
  - Word of mouth
  - Press/media

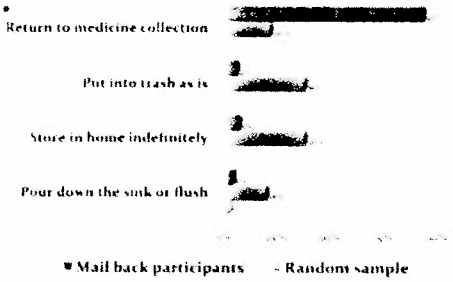


Mail Back Results

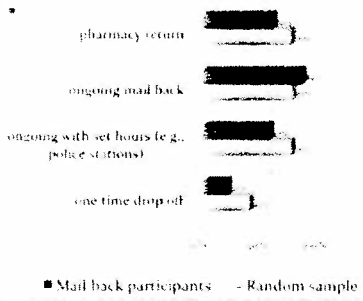
- 1730 participants
- 80% Waukesha Co. residents
- Potpourri of products
  - #1 maintenance meds for diabetes, hypertension, etc.
  - Over the counter meds also returned
- 70% of costs = packaging, shipping, processing; 20% call center operation

30 – 50% of all patients fail to follow prescribing practices

Key survey findings changed disposal practices



Preferred management option



Strengths and Weaknesses

- Great PR launch
- Poster well received
- Counties provided outreach assistance
- Call in center responsive
- Captured industry attention as model

- Lack of DEA approval for controlled substances
- Follow up PR limited
  - National PR firm usurped local committee
  - County support effort varied
- Contractor challenges
  - Not all pharmacies collaborate equally
  - Small quantities make monthly reporting difficult

Data Collection

- Extension provides data collection tools
- Identifying new collection programs and aggregate results
- Developing database of results

Next steps

- Expand pilot statewide?
- Do not want to impede product stewardship initiatives
  - Drug Free Water Act of 2009 Drug Free Water Act of 2009
    - requires EPA to convene a task force regarding proper disposal of unused pharmaceuticals of unused pharmaceuticals
  - 2009 Safe Drug Disposal Act of 2009
    - amends the Controlled Substances Act to provide for the disposal of controlled substances by ultimate users
  - 2009 Secure & Responsible Drug Disposal Act
    - enables consumer take take -back programs
- State stewardship initiatives, e.g. WA
- Working Group ready to tackle health care sector issues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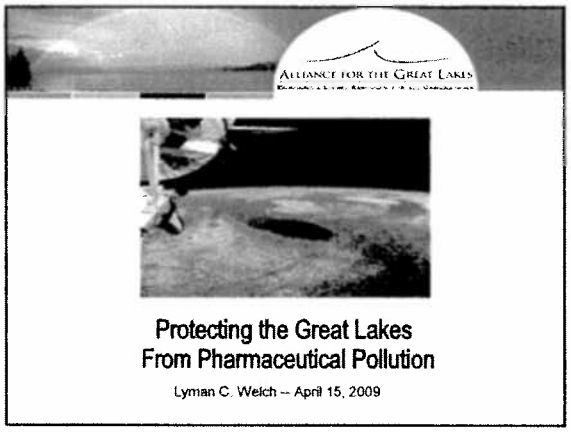


Protecting the Great Lakes From Pharmaceutical Pollution

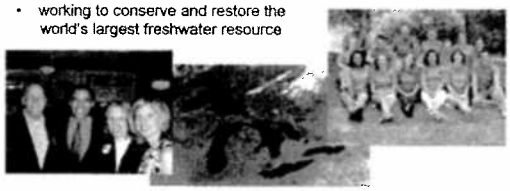
Lyman C. Welch -- April 15, 2009

What's ahead?

- Who are we?
- Why are the Great Lakes important?
- How is pharmaceutical pollution affecting the Great Lakes?
- Where do we go from here to protect public health?

Who Is the Alliance for the Great Lakes?

- An organization of professionals and volunteers
- working to conserve and restore the world's largest freshwater resource



Who is the Alliance for the Great Lakes?

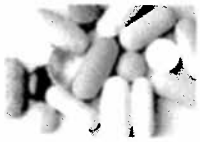
Working through policy, education and local efforts

The Great Lakes: Why they're important

- Drinking water for 40 million people
- 90% of the U.S. fresh surface water
- Support diverse species of plants and wildlife
- Provide economic support
- Recreational boating, fishing and swimming

Why are pharmaceuticals affecting the Great Lakes?

- Human ingestion - sales of OTC medicines have increased 60% since 1990s
- In 2006, over 3.6 billion prescriptions were written

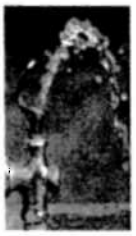


Wastewater monitoring procedures and treatment

- Analytical techniques have recently become increasingly sensitive
- 2002 USGS survey detects human and veterinary drugs in waters
- 2007 procedure for determining efficacy of wastewater treatment for drinking water and tap water in regard to new contaminants
- Wastewater treatment facilities and septic systems not designed to remove these pollutants

Effects on Humans

- Interactive effects of mixtures of pollutants not yet understood
- EPA and Nat'l Academy of Sciences researching effects of long-term, low-level exposure in drinking water

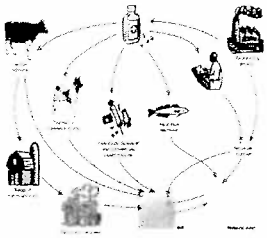


Effects on Wildlife

- 2002 USGS report notes altered hormonal levels in aquatic species exposed to low levels of certain drugs, resulting in changes to reproductive organs
- Human-made chemicals known to cause physical abnormalities and decreasing population in Great Lakes wildlife

Source of Pharmaceuticals

- Metabolic byproducts
- Residential disposal
- Commercial disposal



End of pipe studies of the Great Lakes

- USEPA and USGS Regional Applied Study of MWRD in Calumet (Chicago)
  - Detect and quantify the presence of endocrine disrupting pharmaceuticals in the effluent from sewage treatment plants
  - Ongoing study since 2005 to detect mercury, PCBs, personal care products, pharmaceuticals and hormones
- North Shore Channel Study
  - Testing large mouth bass and carp for personal care product residue in tissue

End of pipe studies of the Great Lakes

Milwaukee Metropolitan Sewerage District

Milwaukee's sewer authority has not done any testing of its effluent for pharmaceuticals due to the expense and uncertainty of which parameters to test.

Drinking water intake studies of the Great Lakes

- Illinois
  - Detected 4 pharmaceutical chemicals in Chicago--- cotinine (nicotine byproduct), monensin (antibacterial), nicotine, and gemfibrozil (cholesterol drug)
  - River sources show higher numbers of chemicals, perhaps due to agricultural sources into the rivers
  - More research and data needed
- Erie, PA
  - June & July 2008 tests detected the following in drinking water: ibuprofin, gemfibrozil, carbamazepine (mood stabilizer), caffeine and continine

Drinking water intake studies of the Great Lakes

- **Wisconsin**
  - Milwaukee has found trace amounts of cotinine and the antibiotic lincomycin in its drinking water supply.
  - 2007 test results http://www.water.mpw.net/files/FinishedWaterQuality.pdf

Drinking water intake studies of the Great Lakes

USGS study in 2001 in 25 states and Puerto Rico found that the most frequently detected chemicals in surface water were cotinine (nicotine metabolite), and 1,7-dimethylxanthine (caffeine metabolite).

Mixtures of chemicals are commonly detected. Antibiotics and prescription and non-prescription drugs, detected less in sources of drinking water than in streams.

Existing Policy

Regulations governing intakes and outputs of contaminated water

- **Safe Water Drinking Act** – no standards set for pharmaceuticals because of lack of information, only nitroglycerine
- **Federal Clean Water Act** - sewage and wastewater plants not regulated by NPDES (National Pollutant Discharge Elimination System) for monitoring for pharmaceutical pollutants, nor are they designed to remove pharmaceutical pollutants

Legal issues that hamper disposal efforts

Federally Controlled Substance Laws

- Not created with take-back programs in mind.
- Currently, DEA regulations do not allow for consumers to return controlled substances, except for delivery to law enforcement.
- December 2008 Product Stewardship Initiative national dialogue on pharmaceutical disposal, changes were proposed and **these regulatory changes are endorsed by the Alliance for the Great Lakes**

Legal issues that hamper disposal efforts

Resource Conservation and Recovery Act (RCRA)

Classifies certain chemicals found in pharmaceuticals as hazardous waste, requiring special handling and transportation.

December 2008, the Environmental Protection Agency (EPA) proposes to reclassify waste pharmaceuticals as "universal waste." **This provides another opportunity for action.**

Legal issues that hamper disposal efforts

- **State requirements**
  - Federal Prescription Drug Marketing Act of 1987 (PDMA) controls state licensing for distribution
  - Pedigree laws

Source reduction measures

- **Manufacturers and Physicians**
  - "Sustainable Pharmacy" – bio-degradable drugs
  - JanusInfo – database and classification of enviro risks
  - MistraPharma – uncovering impacts and removal methods
  - European Medicines Agency – requires EU pharmaceutical companies to divulge environmental impacts

Source reduction measures

- **Health Care Workers – practicegreenhealth.org**
  - Maximize vial contents
  - Monitor inventory of sample drugs
  - Write prescriptions so unfinished drugs can go home with patient
  - Buy meds in bulk, not in pre-package unit doses

Source reduction measures

- **Pharmacists and OTC consumers**
  - Marketing and drug nomenclature
  - Nutritional measures
  - Natural ingredients in personal care products

Areas for additional research

- Can Medicare/Medicaid and other 3rd party services reduce reimbursement practices?
- Reducing samples & trial prescriptions
- Effects on human health of combinations of pharmaceuticals in very low doses
- Compare excretion vs. other source methods
- Manufacturers reducing toxicity and waste
- Need more data on unused medications and disposal methods

Areas for additional legislative changes

- Federal controlled substance regulation should facilitate take-back programs
- Manufacturers to provide toxicity info similar to Swedish requirements
- FDA can require information on toxicity of pharmaceutical waste products and potential issues from combinations with other waste pharmaceuticals
- Life-cycle analysis required during FDA approval process

Conclusion

Due to the low levels of these compounds such as gemfibrozil (cholesterol medication) and cotinine (a nicotine byproduct), **the drinking water is considered by most experts to be safe to drink.**

The **expanding use of pharmaceuticals** and growing knowledge of health effects from these chemicals makes pharmaceutical pollution an **emerging concern** for the Alliance.

Future Alliance efforts will focus on **source reduction** at the **design and prescription stages**.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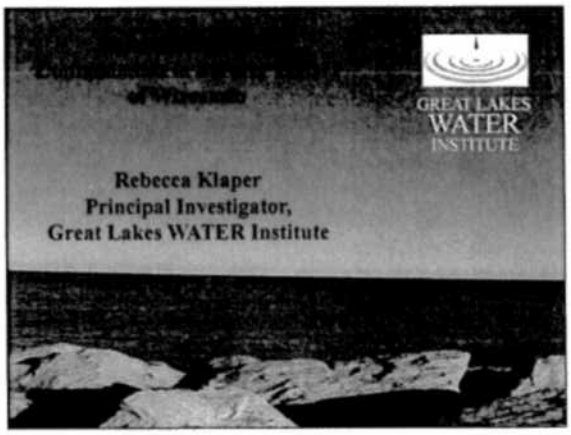
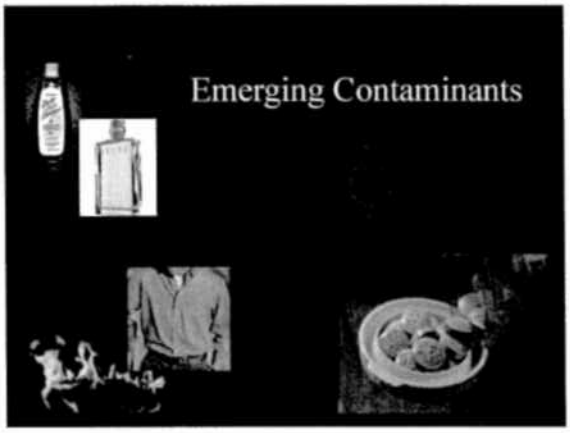
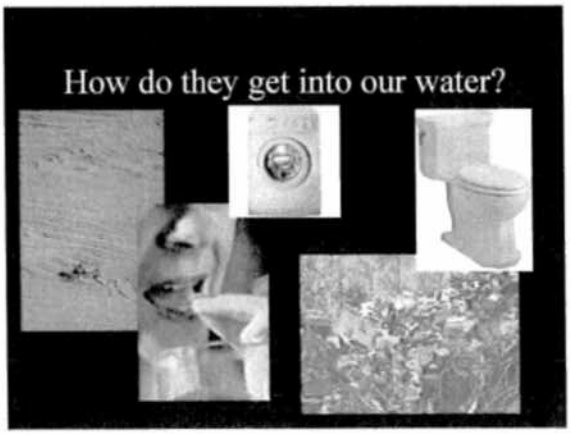
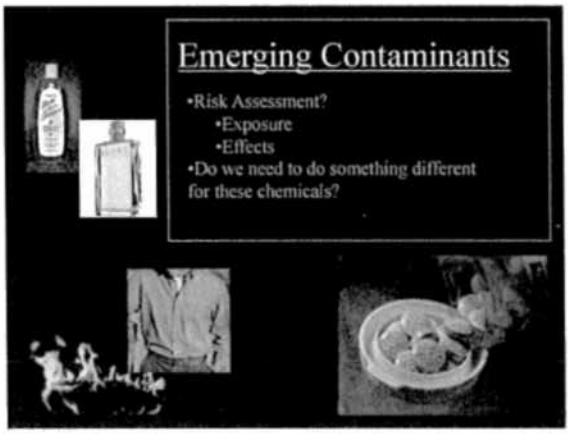
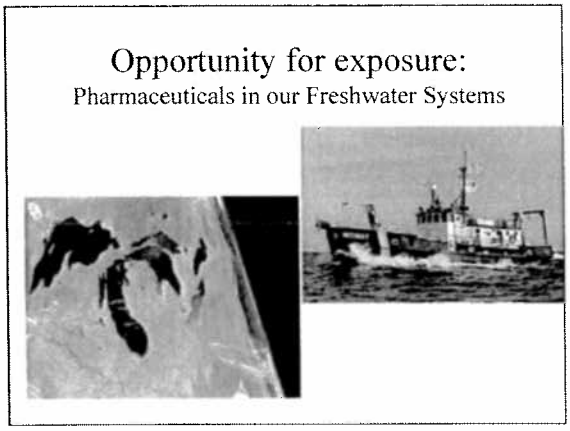
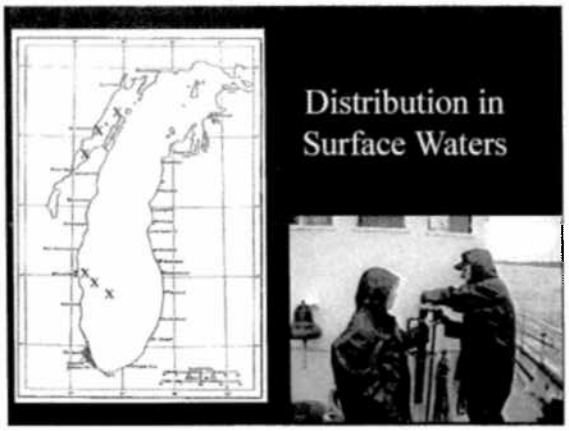

GREAT LAKES
WATER
INSTITUTE
Rebecca Klaper
Principal Investigator,
Great Lakes WATER Institute


Emerging Contaminants


How do they get into our water?

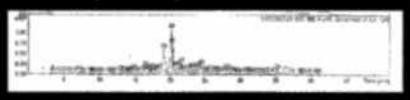

Emerging Contaminants
•Risk Assessment?
•Exposure
•Effects
•Do we need to do something different for these chemicals?


Opportunity for exposure:
Pharmaceuticals in our Freshwater Systems

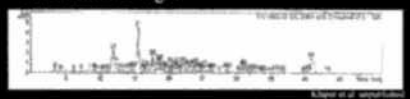

Distribution in
Surface Waters

What is in Lake Michigan?

Acetaminophen 40 ng/L



Amoxicillin 83 ng/L



Hydrocodone 20 ng/L

Studies continue with funding from MMSD and Veolia

Opportunity for Exposure: Drinking water?

Milwaukee
Atrazine, caffeine

Other cities
Philadelphia 56 pharmaceuticals or by products in treated drinking water, medicines for pain, infection, high cholesterol, asthma, epilepsy, mental illness and heart problems. Sixty-three pharmaceuticals or by products were found in the city's watersheds.

Anti-epileptic and anti-anxiety medications were detected in a portion of the treated drinking water for 18.5 million people in **Southern California**.

Researchers at the U.S. Geological Survey analyzed a Passaic Valley Water Commission drinking water treatment plant, which serves 850,000 people in **Northern New Jersey**, and found a metabolized angina medicine and the mood-stabilizing carbamazepine in drinking water.

Opportunity for exposure?

Dangerous at levels of Exposure?

Toxic at levels higher than environmental concentrations

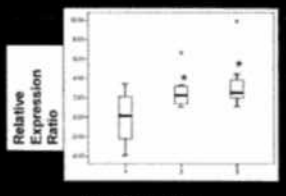
Drug	Acute (mg/L)	Chronic mg/L
• Salicylic acid	1293.1	13.3
• Clofibrate	28.2	.01
• Naproxen	66.4	.33

What do they do? Ecological Effects

- Endpoints not necessarily toxicity
- Chronic low-level exposures

What do they do? Ecological Effects

- Designed for specific action
- Trigger same reaction in ecological species?



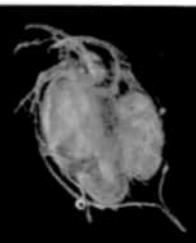
PPAR receptor

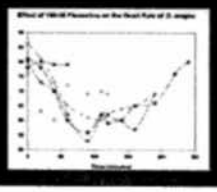
What do they do? Ecological Effects

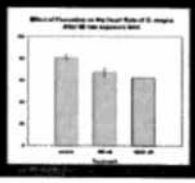
- Designed for specific action
- Trigger same reaction in ecological species?
- Affect other pathways?

Daphnia Exposure to Fluoxetine

D. Carolina Penalva-Arana, Nandan Nath, R. Klaper

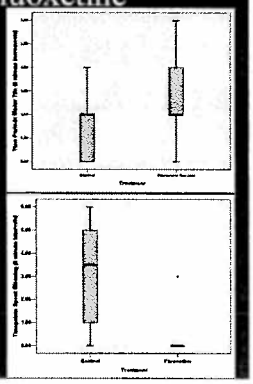






What do they do? Fluoxetine

•Changes in reproductive behavior



What can we do?

- Does something need to be done?
  - It may only be certain compounds that need control
- Removal from waste stream?
  - Waste treatment?
  - Collection of unused pharmaceuticals

Removal from Waste Water

- Varies with drug
  - 20% (carbamazepine) to 99% (acetaminophen) (Gomez et al. 2007)
- Varies with treatment process
  - Biological treatment (water soluble)
  - Solids treatment over time (antibiotics)
  - Ozone- no effect
- Some are not removed with any treatment

Collection Days 2006-2007

-MMSD, WATER Institute, Aurora Healthcare

-13, 30 gallon drums of non-controlled medicine. -oldest 1963

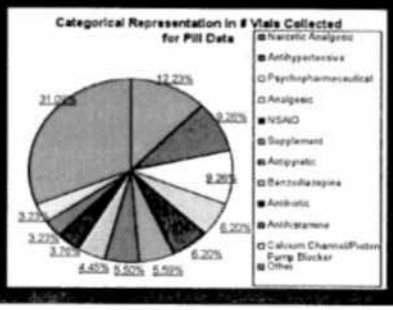
-Will this help the problem?

Does the collection match top prescriptions and what we find in the water?

Drug Name	Total Prescriptions
#1 Hydrocodone/Acetaminophen	101,639
#2 Lipitor	63,219
#3 Amoxicillin	52,104
#4 Lisinopril	47,829
#5 Hydrochlorothiazide	42,757
#7 Zithromax	38,110
#16 Zoloft	26,976
#18 Ibuprofen	24,327
#20 Ambien	23,145
#22 Nexium	22,883
#27 Prevacid	22,152
#29 Fluoxetine	21,403
#32 Oxycodone w/Acetaminophen	18,373
#33 Amoxicillin	18,326
#36 Effexor XR	17,179

Source: RX Internet Drug List

Collections representative of what is being taken?



Take Home Messsages

- We do not know what these compounds are doing
  - Need more data on pharmaceutical effects
  - Need to know impacts and determine which ones are truly in need of controls
- Can we remove them from the system?
  - Pharmaceutical cleanup days only solve part of the problem
  - Wastewater treatment technologies
  - At the source technologies
- Funding


FORWARD

DEP-07

DRAFT 1/06/09

An Act to Support Collection and Proper Disposal of Unused Drugs

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 38 MRSA §1611, is enacted to read:

§1611. Disposal of unused drugs

1. Findings; purpose. he

2. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. Agency. "Agency" means the Drug Enforcement Agency as established in Title 25, section 2955.

B. Covered product. "Covered product" means all prescription and non-prescription over-the-counter drugs and veterinarian drugs in pill, tablet, capsule, suppository, liquid, cream, ointment, lotion, transdermal patch, powder or aerosol form. Covered product includes both name brand and generic drugs but does not include vitamins or herbal based remedies.

C. Department. "Department" means the Department of Environmental Protection.

D. Drug wholesalers. "Drug wholesalers" means businesses that sell or distribute for resale drugs to any entity other than the consumer.

E. Drugs. "Drugs" means:

(1) Articles recognized in the official United States pharmacopoeia, the official national formulary, the official homeopathic pharmacopoeia of the United States, or any supplement of the formulary or those pharmacopoeias;

(2) Substances intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in humans or other animals;

(3) Substances, other than food, intended to affect the structure or any function of the body of humans or other animals; or

(4) Substances intended for use as a component of any substances specified in subparagraph 1, 2 or 3 of this paragraph, but not including medical devices or their component parts or accessories.

F. Entity. "Entity" means a person other than a natural person.

G. Manufacturer. "Manufacturer" means a person who:

(1) Manufactures a covered product or has legal ownership of the brand, brand name or co-brand under which a covered product is sold;

(2) Imports a covered product manufactured by a person who has no physical presence in the United States; or

(3) Sells at wholesale or retail a covered product and does not have legal ownership of the brand, but who elects to fulfill the manufacturer responsibilities for that product.

H. Person. "Person" means a firm, sole proprietorship, corporation, limited liability company, general partnership, limited partnership, limited liability partnership, association, cooperative or other entity of any kind or nature.

I. Residential sources. "Residential sources" include single and multiple family residences and locations where household drugs are unused, unwanted, disposed or abandoned, such as hospice services, nursing homes, boarding homes, schools, foster care, day care and other locations where either people or their pet animals, or both, reside on a temporary or permanent basis. The term does not include pharmacy waste, business waste or any other source identified by the department as a nonresidential or business source.

J. Unwanted product. "Unwanted product" means any covered product from a residential source that its owner no longer wants or that has been abandoned, discarded or is intended to be discarded by the owner.

K. Wholesaler. "Wholesaler" means a person who buys covered products for resale and distribution to persons other than consumers.

3. Manufacturer responsibility. Every manufacturer of covered products sold in or into the State shall do the following:

A. Participate in a program with other manufacturers of covered products unless approved by the department to operate an independent program;

B. By January 1, 2010, submit to the department a program plan to operate and finance the collection, transportation and recycling or disposal of unwanted products either independently or in conjunction with other manufacturers;

C. Pay all the administrative and operational costs associated with implementation of the program, including the cost of the collection, transportation, management and disposal of the unwanted products that are collected from residential sources and the recycling or disposal of the related packaging;

D. Implement the program without charging any fee at the time of sale of the covered product or at the time the unwanted covered products from residential sources are delivered or collected for disposal; and

E. Operate the program as approved by the department and in accordance with this section and other applicable state and federal laws.

The department may approve an independent program only if it meets all requirements of this statute and accepts covered products from any manufacturer.

After January 1, 2010, each manufacturer new to the State shall submit a plan to the department or join an approved plan prior to initiating sales in or into the State.

4. Manufacturer plan. The program plan required under subsection 3, paragraph B, must include at a minimum the following:

A. A list of all manufacturers participating in the collection, handling and disposal program proposed in the plan and their contact information;

B. Performance goals, including recovery goals for the first, second and third years of the program, expressed as pounds per capita and an explanation of how the recovery goals have been set to recover a significant percentage of unwanted product from residential sources relative to the quantity of product that may be available for disposal; and

C. A description of a proposed collection system which, at a minimum must include a single, universal mail-back system using pre-paid mailers to the agency until and unless other collection methods are approved by the U.S. Drug Enforcement Agency and the agency. The collection program must be convenient and adequate to serve the needs of residents in both urban and rural areas;

D. A handling and disposal system, including:

(1) Identification of and contact information for the hazardous waste disposal facilities and other entities to be used by the program in order to achieve collection and destruction of the unwanted covered product;

(2) The policies and procedures to be followed by persons managing unwanted products collected pursuant to the program;

(3) A description of how the collected unwanted products will be tracked through to final disposal and how safety and security will be maintained; and

(4) A description of the public education effort and communications strategy as required in subsection 6.

5. Plan review and program approval. Plans submitted pursuant to subsection 3, paragraph B, must be approved by the department, with concurrence of the agency, before a manufacturer may engage in the collection of unwanted drugs from residential sources within the state. Manufacturers shall implement the plan within 3 months of plan approval but no later than September 1, 2010, unless the department approves an extension of the implementation date.

A. The department shall review each plan in consultation with the agency.

B. The department shall determine whether the plan complies with this chapter. If the department is satisfied that a plan complies, the department shall issue an approval. If a plan

is rejected, the department shall provide the applicant with the reasons in writing for rejecting the plan. The department may also approve the plan with modifications.

C. A person operating a program based on an approved plan may not make any substantive changes to the program without amending the plan and obtaining the department's prior written approval of the proposed changes, except as follows:

(1) Additions and changes to the list of hazardous waste facilities and other entities under contract for drug management or destruction may be made without the department's or agency's prior written approval. The manufacturer or manufacturer agent responsible for implementing the program must inform the department and agency of such an addition or change fifteen days prior to the effective date of the addition or change. If there is no objection by the department or agency, the change may occur as planned.

(2) Additional manufacturers may participate in an approved program without the department and agency prior written approval. The manufacturer or manufacturer agent responsible for implementing the program must provide the department with an updated manufacturer participant list within fifteen days after the addition.

D. If the department or agency determine that a program is not being operated in accordance with the requirements of this section and rules adopted to implement this section, or if the department or agency determine that there is an imminent danger to the public, the department and agency may:

(1) Amend the approval of the plan by clarifying terms or conditions to ensure full implementation of the plan; or

(2) Suspend or cancel the approval of the plan.

At least fifteen days prior to amending, suspending or canceling an approval, the department shall inform the person operating the program of the action and provide them an opportunity to respond.

E. Notwithstanding paragraph D, if the department or agency determines that it is necessary in order to protect the public from imminent danger, the department or agency may immediately amend, suspend or cancel an approval without giving the person operating the program an opportunity to be heard, but shall give that person an opportunity to be heard through proceedings consistent with Title 5, chapter 375, subchapter 4, within fifteen days after the date on which the department or agency takes any of those actions.

6. Education and outreach. A manufacturer program must:

A. Promote the use of the program and the proper disposal of drugs so that collection options are widely understood by customers, pharmacists, retailers of covered products, and health care practitioners including doctors and other prescribers;

B. Establish a toll-free telephone number and web site where collection options will be publicized;

C. Provide educational and outreach materials describing where and how to return unwanted drugs. These materials must be provided to pharmacies, health care facilities and other interested parties at no cost.

Pharmacies must make available to their customers the educational information and prepaid mailers supplied by the manufacturer or manufacturer agent for drug return.

7. Progress reports. For the purposes of this section, "reporting period" means the period commencing January 1st and ending December 31st of the same calendar year. On or before February 1, 2011, and in each subsequent year, every manufacturer or manufacturer agent who operates a program approved under this section must submit to the department and agency a written annual report, in a format prescribed by the department, covering the previous reporting period. The report must include:

A. A list of manufacturers participating in the program;

B. The amount, by weight, of unwanted products collected from residential sources including documentation verifying collection and disposal of that material;

C. The hazardous waste disposal facilities used, the location of those facilities and the weight of unwanted products collected from residential sources and disposed at each facility;

D. Whether policies and procedures for transporting and disposing unwanted products, as established in the plan, were followed during the reporting period and a description of noncompliance with those policies and procedures, if any;

E. Whether any safety or security problems occurred during collection, transportation or disposal of unwanted products during the reporting period and, if so, what changes will be made to policies, procedures or tracking mechanisms to improve safety and security in the future;

F. A description of the public education effort and communication strategy implemented during the reporting period;

G. A description of research, if any, regarding disposal techniques that provide superior protection to human health and the environment beyond that provided by current hazardous waste disposal techniques;

H. How the program attained the performance standards and recovery rates established in the program plan or set by the department and agency, and if the program did not attain those performance standards and recovery rates, what actions the manufacturer will take to do so; and

I. Any other information that the department and agency may reasonably require.

8. Drug disposal. Except as provided in paragraph A of this subsection, each manufacturer program must dispose of all unwanted covered products from residential sources at a licensed hazardous waste incineration facility. Manufacturers are encouraged to invest in research to find disposal technologies that provide superior protection to human health and the environment beyond that provided by current hazardous waste disposal technologies.

A. Manufacturers may petition the department for approval to use final disposal technologies that provide superior environmental and human health protection than provided by current hazardous waste disposal technologies for drugs, if and when those technologies are proven and available. The proposed technology must provide equivalent protection in each, and superior protection in one or more, of the following areas:

(1) Monitoring of any emissions or waste;

(2) Worker health and safety;

(3) Air, water, or land emissions contributing to persistent, bioaccumulative, and toxic pollution; and

(4) Overall impact to the environment and human health.

B. The department must inform the agency of its determination and may grant the petition only if the agency concurs.

9. Performance standards. By June 2013, the department shall establish mandated performance standards and recovery rates for the fourth and subsequent program years. The department may require those manufacturers that do not attain the mandated standards and rates to modify their program plan in order to achieve performance standards and improve recovery rates. Plan modifications require the department's approval before they may be implemented. The department must convene a diverse stakeholder group that includes manufacturers, law enforcement, health organizations and environmental groups to review and advise regarding the development of the performance standards and recovery rates.

10. Fines and penalties. Effective January 1, 2010, a manufacturer of a covered product who is not in compliance with this section is subject to civil penalties under section 349. By June 1, 2010 the department shall list on its web site manufacturers who are participating in an approved program and manufacturers who have been identified as noncompliant with this section.

All fines and penalties collected for violations of this section must be deposited into the Unused Pharmaceutical Disposal Program Fund, herein "fund", established under Title 22, section 2700. Expenditures from the fund may be used only for the administration of this section. Only the agency may authorize expenditures from the fund.

11. Report to the Legislature. By March 15, 2011 and annually thereafter, the department, in consultation with the agency, shall report to the appropriate committees of the legislature

concerning the status of the program established by this section and shall recommend such modifications to the program as the department and agency may deem necessary or appropriate.

SUMMARY

The bill establishes a system to collect and safely dispose of unwanted drugs from households and residential sources.


FORWARD

H-1331.1

SUBSTITUTE HOUSE BILL 1165

State of Washington 61st Legislature 2009 Regular Session

By House Environmental Health (originally sponsored by Representatives Morrell, Campbell, Priest, Dickerson, Hudgins, Rodne, Cody, Nelson, Chase, O'Brien, Dunshee, Kenney, Wood, Hunt, McCoy, Upthegrove, Hasegawa, Anderson, Appleton, Pedersen, Hunter, Darneille, Roberts, Rolfes, White, Kagi, Ormsby, Conway, Orwall, Simpson, Goodman, Van De Wege, and Santos)

READ FIRST TIME 01/30/09.

AN ACT Relating to providing safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program; reenacting and amending RCW 69.41.030; adding a new chapter to Title 70 RCW; creating a new section; and prescribing penalties.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec. 1.** The citizens of Washington state have long benefited from prescription and nonprescription medicines. These medicines allow us to live longer, healthier, and more productive lives. After they have served their intended use, expired or left-over drugs need to be handled safely and disposed of properly to prevent harm to people and our environment. The legislature finds that a convenient, safe, secure, and environmentally sound product stewardship program for the collection, transportation, and disposal of unwanted drugs from residential sources may help to avoid accidental poisonings, decrease illegitimate access to drugs that can lead to abuse, and protect our surface and groundwater. The legislature further finds that producers of those drugs are the best entity to provide and finance the product stewardship program.

(12) "Producer" means the person who:

(a) Has legal ownership of the brand, brand name, or cobrand of the covered product or manufactures a generic covered product sold in or into Washington state. "Producer" does not include a retailer who puts its store label on a covered product;

(b) Imports a covered product branded or manufactured by a producer that meets the definition under (a) of this subsection and where that producer has no physical presence in the United States; or

(c) Sells at wholesale a covered product, does not have legal ownership of the brand, and elects to fulfill the responsibilities of the producer for that product.

(13) "Product stewardship program" means a program for the collection, transportation, and either recycling or disposal, or both, of unwanted products that is financed as well as managed or provided by the producers of those products.

(14) "Residential sources" includes single and multiple family residences, and locations where household drugs are unused, unwanted, disposed, or abandoned, such as hospice services, nursing homes, boarding homes, schools, foster care, day care, and other locations where either people or their pet animals, or both, reside on a temporary or permanent basis. This does not include airport security, drug seizures by law enforcement, pharmacy waste, business waste, or any other source identified by the department as a nonresidential or business source.

(15) "Stewardship organization" means a person designated by a group of producers to act as an agent on behalf of each producer to operate a product stewardship program.

(16) "Unwanted product" means any covered product no longer wanted by its owner or that has been abandoned, discarded, or is intended to be discarded by its owner.

NEW SECTION. **Sec. 3.** (1) Beginning January 1, 2012, every producer of covered products sold in or into Washington state must participate in a product stewardship program for unwanted products from residential sources.

(2) Every producer must:

(a) Operate, either individually or jointly with other producers, a product stewardship program approved by the department; or

violations, or regulatory orders received in the previous five years by each transporter and each hazardous waste disposal facility proposed to be used by the product stewardship program;

(4) Secure tracking and handling provision that includes how the unwanted products will be safely and securely tracked and handled from collection through final disposal, and the policies and procedures to be followed to ensure security;

(5) How the proposed product stewardship program will maximize the recycling of packaging that is collected with and separated from the unwanted product prior to disposal of the unwanted product, and how patient information on that packaging will be kept secure prior to and during recycling; and

(6) A description of the public education effort and outreach activities required under section 8 of this act and a methodology for evaluating the effectiveness of its outreach and program.

NEW SECTION. **Sec. 5.** (1) Product stewardship plans must be submitted to the department for approval. The initial plans must be submitted by January 1, 2011. The department may consult with other state agencies, including the board, on any element of the plan.

(2) Within ninety days after receipt of a plan, the department shall determine whether the plan complies with this chapter. If it approves a plan, the department shall notify the applicant of its approval. If it rejects a plan, the department shall notify the applicant of its decision and its reasons for rejecting the plan. An applicant whose plan has been rejected by the department may submit a revised plan to the department within sixty days after receiving notice of the rejection.

(3) At least every four years, a producer, group of producers, or stewardship organization operating a product stewardship program must update its product stewardship plan and submit the updated plan to the department for review.

(4) After January 1, 2011, each new producer and each producer new to Washington state shall obtain a letter of approval from the department for a new plan or join an approved plan upon initiating sales in or into this state.

and disposing of unwanted products, as established in the plan, were followed during the reporting period, and a description of any noncompliance;

(h) Whether any safety or security problems occurred during collection, transportation, or disposal of unwanted products during the reporting period, and, if so, what changes have or will be made to policies, procedures, or tracking mechanisms to alleviate the problem and to improve safety and security in the future;

(i) A description of the public education and outreach activities implemented during the reporting period, including the methodology used and the results of evaluating the outreach and program activities;

(j) How the product stewardship program complied with any other elements in the plan approved by the department; and

(k) Any other information that the department may reasonably require.

(2) For the purposes of this section, "reporting period" means the period commencing January 1st and ending December 31st of the same calendar year.

NEW SECTION. **Sec. 8.** (1) A product stewardship program must promote the use of the program and the proper disposal of drugs so that collection options are widely understood by customers, pharmacists, retailers of covered products, and health care practitioners including doctors and other prescribers.

(2) A product stewardship program must establish a toll-free telephone number and web site where collection options will be publicized and prepare educational and outreach materials describing where and how to return unwanted drugs to the product stewardship program. These materials must be provided to pharmacies, health care facilities, and other interested parties for dissemination to residential sources.

(3) A product stewardship program must annually evaluate the effectiveness of its outreach and program activities. This evaluation must include the percentage of residents that are aware of the program and to what extent residents find the program convenient.

NEW SECTION. **Sec. 9.** (1) Each product stewardship program must dispose of all unwanted products from residential sources at a

this chapter to a producer who is not participating in a product stewardship program approved by the department and whose covered product is being sold in or into the state.

(2) A producer not participating in a product stewardship program approved by the department whose covered product continues to be sold in or into the state sixty days after receiving a written warning from the department must be assessed a penalty of ten thousand dollars for each calendar day that the violation continues.

(3) If an approved plan is not fully implemented within thirty days of the planned start date, the department shall assess a penalty of five thousand dollars along with notification to each producer associated with the product stewardship program. If, after an additional thirty days, an approved plan is not fully implemented, the department shall assess a penalty of ten thousand dollars to each producer associated with the product stewardship program. Subsequent violations occur each thirty days that the approved plan is not fully implemented.

(4) When a product stewardship program is found to be out of compliance with: (a) The requirement to update its plan under section 5 of this act; (b) reporting requirements under section 7 of this act; or (c) notification requirements under section 6 of this act, each producer in the product stewardship program must first receive a written warning including a copy of the requirements under this chapter and must be give thirty days to correct the noncompliance. After thirty days, each producer in the product stewardship program must be assessed a penalty of five thousand dollars for the first violation and ten thousand dollars for the second and each subsequent violation. A subsequent violation occurs each thirty days of noncompliance with the requirements under (a) through (c) of this subsection.

(5) All penalties levied under this section must be deposited into the pharmaceutical product stewardship program account established under section 15 of this act.

NEW SECTION. **Sec. 12.** (1) The department shall provide on its web site a list of all producers participating in product stewardship programs it has approved and a list of all producers it has identified as noncompliant with this chapter and any rules adopted to implement this chapter.

(5) The department shall consult with the board on proposed provisions of a product stewardship plan involving the secure collection, tracking, and handling of drugs collected under a product stewardship program required in section 4(4) of this act.

NEW SECTION. **Sec. 14.** The department may establish fees for administering this chapter. The fees may be charged to producers or to persons operating a product stewardship program. All fees charged must be based on factors relating to administering this chapter. Fees may be established in amounts to fully recover and not to exceed expenses incurred by the department in administering this chapter. The department may use these fee revenues to reimburse the department for its costs.

NEW SECTION. **Sec. 15.** The pharmaceutical product stewardship program account is created in the custody of the state treasurer. All receipts from fees and penalties collected under this chapter must be deposited into the account. Expenditures from the account may be used only for administering this chapter. Only the director of the department or the director's designee may authorize expenditures from the account. The account is subject to allotment procedures under chapter 43.88 RCW, but an appropriation is not required for expenditures.

NEW SECTION. **Sec. 16.** If necessary to ensure that money is available in the pharmaceutical product stewardship program account created in section 15 of this act for the initial administration of the product stewardship program for unwanted drugs from residential sources, the director of the department may lend moneys from the state toxics control account created in RCW 70.105D.070 to the pharmaceutical product stewardship program account. These loaned moneys may be expended solely for the initial administration of the program by the department under this chapter. The department shall repay the state toxics control account the amount of moneys loaned plus interest as determined by the state treasurer within two years of the date of the loan.

operating a pharmaceutical product stewardship program created under chapter 70.-- RCW (the new chapter created in section 19 of this act) for the collection, transportation, and disposal of unwanted legend and nonlegend drugs from consumers or residential sources and not business entities, for the purpose of disposing of the collected drugs in compliance with the laws and rules of this state and the United States.

(2)(a) A violation of this section involving the sale, delivery, or possession with intent to sell or deliver is a class B felony punishable according to chapter 9A.20 RCW.

(b) A violation of this section involving possession is a misdemeanor.

NEW SECTION. **Sec. 18.** Nothing in this chapter changes or limits the authority of the Washington utilities and transportation commission to regulate collection of solid waste, including curbside collection of residential recyclable materials, nor does this chapter change or limit the authority of a city or town to provide such service itself or by contract under RCW 81.77.020.

NEW SECTION. **Sec. 19.** Sections 1 through 16 and 18 of this act constitute a new chapter in Title 70 RCW.

NEW SECTION. **Sec. 20.** If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected.

NEW SECTION. **Sec. 21.** This act must be liberally construed to carry out its purposes and objectives.

--- END ---


FORWARD

.....

(Original Signature of Member)

111TH CONGRESS
1ST SESSION

H. R. _____

To amend the Controlled Substances Act to provide for disposal of controlled substances by ultimate users and care takers through State take-back disposal programs, to amend the Federal Food, Drug, and Cosmetic Act to prohibit recommendations on drug labels for disposal by flushing, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. INSLEE (for himself and Mr. MORAN of Virginia) introduced the following bill; which was referred to the Committee on

---

A BILL

To amend the Controlled Substances Act to provide for disposal of controlled substances by ultimate users and care takers through State take-back disposal programs, to amend the Federal Food, Drug, and Cosmetic Act to prohibit recommendations on drug labels for disposal by flushing, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

"(ii) as determined by the Attorney General, is consistent with this section.

"(2) REQUIREMENTS.—Each program under paragraph (1) shall—

"(A) require a State to enact legislation as a prerequisite to adopting and implementing such program;

"(B) protect the public safety;

"(C) allow ultimate users and care takers to dispose of controlled substances through persons other than law enforcement personnel;

"(D) incorporate environmentally sound practices for disposing of controlled substances (by means other than flushing down a public or private wastewater treatment system or disposing in a municipal solid waste landfill);

"(E) be cost effective for the State;

"(F) include convenient take-back options for urban and rural locations; and

"(G) not restrict the funding which a State may use to implement the program.

"(c) DEFINITION.—In this section, the term 'care taker'—

SEC. 3. NO LABELING RECOMMENDATIONS TO DISPOSE OF DRUGS AND BIOLOGICAL PRODUCTS BY FLUSHING.

(a) DRUGS.—Section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) is amended by adding at the end the following:

"(w) NO LABELING RECOMMENDATIONS TO DISPOSE BY FLUSHING.—In approving an application for a drug under this section, the Secretary shall ensure that the labeling for such drug does not include any recommendation or direction to dispose of the drug by means of a public or private wastewater treatment system, such as by flushing down the toilet.".

(b) BIOLOGICAL PRODUCTS.—Section 351 of the Public Health Service Act (42 U.S.C. 262) is amended by adding at the end the following:

"(k) NO LABELING RECOMMENDATIONS TO DISPOSE BY FLUSHING.—In licensing any biological product under this section, the Secretary shall ensure that the labeling for such product does not include any recommendation or direction to dispose of the product by means of a public or private wastewater treatment system, such as by flushing down the toilet.".

(c) DRUGS AND BIOLOGICAL PRODUCTS ALREADY MARKETED.—

(4) DEFINITIONS.—In this subsection:

(A) The term "biological product" has the meaning given such term in section 351 of the Public Health Service Act (42 U.S.C. 262).

(B) The terms "drug" and "labeling" have the meanings given such terms in section 201 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321).


FORWARD

PRODUCT STEWARDSHIP INSTITUTE

Sustainable Solutions to Protect Our Environment

Scott Cassel, *Executive Director/CEO*

PSI Board of Directors

Dave Galvin, President
Local Hazardous Waste Management Program in King County, WA

Frank Coolick, Vice President
Ex-Officio Member

Jack Price, Treasurer
FL Department of Environmental Protection

Jennifer Holliday, Clerk
Chittenden County Solid Waste District, VT

Scott Klag
Metro Regional Government, OR

Mollie Mangerich
Sonoma County Waste Management Agency, CA

Tom Metzner
CT Department of Environmental Protection

Scott Mouw
NC Department of Environment and Natural Resources

Theresa Stiner
IA Department of Natural Resources

Jan Whitworth
OR Department of Environmental Quality

Shirley Willd-Wagner
CA Integrated Waste Management Board

March 9, 2009

Senator Bill Morrisette, Chair
Senate Committee on Health Services and Rural Health Policy
900 Court Street NE
Salem, Oregon 97301

RE: Support for SB 598

Dear Chairman Morrisette:

The Product Stewardship Institute (PSI) is writing to express its support of SB 598 that will create a take-back program for the safe disposal of unwanted drugs from residential sources through a product stewardship system. PSI appreciates the Committee's efforts to understand this complex issue.

PSI is a national non-profit organization with membership from 45 state governments, 70 local agencies, and over 45 businesses, environmental groups, and other organizations that have pledged to work together to reduce the health and environmental impacts from consumer products. These stakeholders work cooperatively, through PSI, to develop and implement product stewardship solutions that share responsibility for safely managing consumer products across their entire life cycle, from design to reuse, recycling, or disposal.

Pharmaceuticals have been detected in waterways and drinking water across the country, impacting aquatic species and raising concerns about the potential for impacts on human health from ingesting combinations of even small quantities of drugs over time. Meanwhile, prescription drug abuse is also increasing, now surpassing abuse of illegal drugs among American teenagers.

Reducing the quantity of *unwanted* pharmaceuticals in our nation's medicine cabinets and ensuring their safe disposal will reduce the chances for illegal diversion and accidental poisoning, and lower risks to aquatic species and human health. As the use of pharmaceutical drugs in America is growing quickly due to our aging population and an ever-expanding range of available drugs, it is important to put solutions in place as soon as possible.

While it is imperative that we continue to research the complex questions regarding the environmental and health impacts of waste pharmaceuticals, PSI supports our state and local government members in their efforts to devise and implement sustainable solutions to problems within their jurisdictions. Several states are introducing legislation this year to establish product stewardship systems for waste pharmaceuticals, as mandated by SB 598, and such systems are already in place in parts of Canada and Europe.

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Telephone: (617) 236-4855 • Fax: (617) 859-9889 • www.productstewardship.us

SB 598 is fully aligned with the mission of our organization, and the basic approach we take to finance the end-of-life management of difficult waste streams. Requiring manufacturers to internalize the cost of disposing of their products provides a direct financial incentive for them to reduce the amount of their products that becomes waste. These systems also save money for local governments by relieving them of the financial responsibility to pay for, and manage, the collection and safe disposal of unwanted pharmaceuticals.

In 2008, PSI convened two national stakeholder meetings, called the "National Dialogue on Waste Pharmaceuticals," that included representatives of local, state, and federal government; drug manufacturers; retail and consultant pharmacy associations; reverse distributors and the waste industry; drug diversion investigators; and environmental groups. PSI's meeting documents, including agendas and participant lists, are available online at:

- http://www.productstewardship.us/PharmaceuticalMeetingSacramentoCA
- http://www.productstewardship.us/PharmaceuticalMeetingWashingtonDC

PSI continues to convene the national dialogue, and is in the process of addressing key policy questions related to source reduction and disposal.

Let me again express PSI's appreciation for the Committee's time and attention to this complex environmental and public safety issue.

Sincerely,

Scott Cassel

Scott Cassel
Executive Director/Founder

cc: Senator Jeff Kruse, Vice-Chair
Senator Laurie Monnes Anderson
Senator Chris Telfer
Senator Joanne Verger


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PRODUCT STEWARDSHIP INSTITUTE

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Pharmaceuticals Home

Pharmaceutical products are ubiquitous in our lives; millions of pharmaceuticals become wastes each year as products pass their expiration date, become unwanted, or patients die. Ongoing studies reveal that pharmaceuticals are escaping into the environment and that some classes can act as endocrine disruptors, which have been linked to abnormalities and impaired reproductive performance in some species. Pharmaceutical wastes present both wastewater and solid waste management issues. Currently, there is a lack of understanding as to whether there are convenient, consistent, legal, and safe ways to dispose of unwanted pharmaceuticals. This has led to environmental damage, as well as to unsafe storage practices that have resulted in accidental poisonings. Currently, residents are often instructed to flush unwanted pharmaceuticals down toilets, leading to potential contamination of surface waters, ground waters, and biosolids, and resulting in exposure to aquatic organisms. When residents dispose of pharmaceutical products in the garbage, these products present potential safety risks to the general public and to solid waste collection workers.

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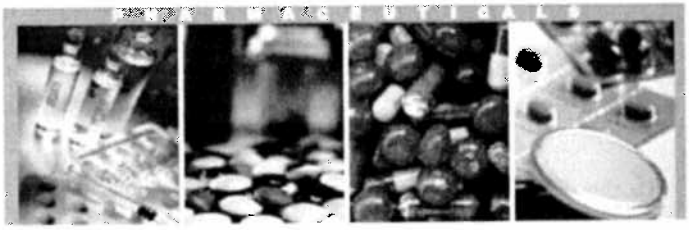

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PSI Pharmaceuticals Project

Over the past two years, PSI has received funding from multiple state and local agencies to develop product stewardship approaches for the end of life management of unwanted/waste pharmaceuticals. The primary goals of this project include evaluating the need for a nationally coordinated system for the management of unwanted/waste pharmaceuticals that allows for multiple solutions to reflect local/regional differences, and increasing the safe, legal, and environmentally protective collection and/or disposal of unwanted/waste pharmaceuticals through the development of best management practices. PSI drafted a Project Summary as a tool to develop consensus among diverse stakeholders and used this document as the foundation for a Pharmaceuticals Product Stewardship Action Plan which incorporates multiple key stakeholder interviews and other research. The main goals of the PSI multi-stakeholder dialogue are to increase awareness and to create a national, sustainable system for the end of life management of waste/unwanted pharmaceuticals.

PSI Legislative Testimony

- Maine
- Oregon

Dialogue Meetings

- Sacramento, CA Meeting - June 19-20, 2008
- Washington, DC Meeting - December 2-3, 2008

Workgroups

Note: Workgroup pages are password protected, as they contain draft documents not to be interpreted as the final opinion of the National Dialogue. If you are interested in more information or in joining a workgroup, please contact Sierra Fletcher at sierra@productstewardship.us.

- Source Reduction Workgroup
- Joint Research Workgroup
- Regulations Workgroup
- Collection and Disposal Workgroup

Go to Drug Take-back Network Website

Key Documents

- Press Release Announcing Launch of New Website for Drug Take-back Network by PSI and King Pharmaceuticals
- PSI Pharmaceutical Prospectus
- ONDCP Federal Guidelines for Proper Disposal of Prescription Drugs
- DRAFT Project Summary
- PSI National Dialogue List of Supporters
- PSI Networking Conference Call - Introduction
- PSI Networking Conference Call - Northwest Pilot Program/PH:ARM

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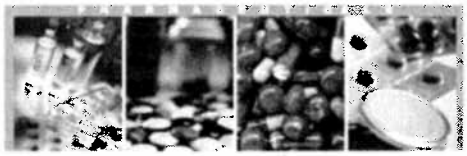

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Related Pharmaceuticals Stewardship Initiatives

International

- Post Consumer Pharmaceutical Stewardship Association (PCPSA) - Canada
- Product Stewardship, Ministry of Environment - British Columbia
- Medicine Clean Up Campaign - Ottawa-Carlton Pharmacists' Association, Canada
- "Recycling" and Disposal of Dispensed Drugs, NAPRA (National Association of Pharmacy Regulatory Authorities) - Canada
- Return Unwanted Medicines (RUM) Project - Australia
- The Athens Declaration, August 3, 2007
- Annex 5: International Programs

National

- DEA Letter on take-back disposal programs
- National Association of Clean Water Agencies
- Environmental Health Collaborative

Regional

- North East Recycling Council (NERC) - A ten-state non-profit organization dedicated to recycling and product stewardship.
- Health Care Without Harm - The Campaign for Environmentally Responsible Health Care

State

- PH:ARM (Pharmaceuticals from Households: A Return Mechanism) - Washington
  - PH:ARM - A Northwest Fact Sheet
  - "Overview of Drug Return Programs" (from PSI Networking Conference Call - Northwest Pilot Program/PH:ARM) by Sego Jackson (May 18, 2006)
- An Act to Encourage the Proper Disposal of Unused Pharmaceuticals - Maine
- Oregon Association of Clean Water Agencies
- Letter from National Association of Chain Drug Stores to OR Association of Clean Water Agencies regarding take-back programs (April 2008)
- Proper Pharmaceutical Drugs and Medication Disposal - Utah
- Minnesota Technical Assistance Program - Industry Solutions for Pollution Prevention and Source Reduction

Local

- Take It Back Network - King County, WA
- Report on San Francisco Bay Area's Safe Medicine Disposal Days
- Solid Waste Management District - Monroe County, Indiana
- P2D2 - Pontiac Township, Illinois

Organization and Business

- Teleosis Institute
- Leiter's Pharmacy Medicine Take-Back Data

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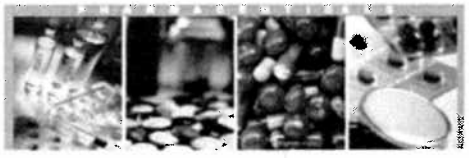

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Other Pharmaceuticals Resources/Publications

Press

Background Information

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Pharmaceuticals and Personal Care Products (PPCPs), U.S. Environmental Protection Agency

DEA Controlled Substance Schedule, DEA Office of Diversion Control

DEA Diversion Control Program – General Questions and Answers

NASCSA Member State Agencies, National Association for State Controlled Substances Authorities

NASCSA Resolution 2007-03. October 2007. Katherine Keough.

Get the Most from Your Medicines. PhRMA. Larry Lucas.

IMS Global Pharmaceutical Sales by Region. 2006.

Current Regulations and Modest Proposals Regarding Disposal of Unused Opioids and Other Controlled Substances. Herring *et al*. Journal of the American Osteopathic Association. July 2008.

Australia Pharmaceutical Advisory Council Guiding Principles for Medication Management in the community. June 2006.

Abuse and Poisoning

National Drug Control Strategy: 2008 Annual Report.

Drugs Identified in Deceased Persons by Florida Medical Examiners. 2007 Report.

Teens and Prescription Drugs: An Analysis of Recent Trends on the Emerging Drug Threat. February 2007. Office of National Drug Control Policy. Executive Office of the President.

Results from the 2005 National Survey on Drug Use and Health: National Findings. Department of Health and Human Services. SAMHSA. Office of Applied Studies.

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Teen Drug Use Continues Down in 2006, Particularly among Older Teens; But Use of Prescription-Type Drugs Remains High. Johnston, L.D., O'Malley, P.M., Bachman, J.G. & Schulenberg, J.E. December 21, 2006. University of Michigan News and Information Services: Ann Arbor, MI.

Under the Counter: The Diversion and Abuse of Controlled Prescription Drugs in the U.S. The National Center on Addiction and Substance Abuse at Columbia University 633 Third Avenue, NY, NY. July 2005.

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NSF Discusses Recent AP Report On Pharmaceuticals in Water and Next Steps

Emerging Pollutants: Questions, Challenges and the Future. Christian G. Daughton, PhD. The NORMAN Network Newsletter: Network of Reference Laboratories for Monitoring of Emerging Environmental Pollutants.

Groundwater Recharge and Chemical Contaminants: Challenges in Communicating the Connections and Collisions of Two Disparate Worlds. Daughton CG. *Ground Water Monitoring & Remediation*, Spring 2004, *24*(2):127-138.

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Cancer Drugs Found in Tapwater. Richard Gray. The Telegraph. January 13, 2008.

Male Bass Across Region Found to Be Bearing Eggs. David A. Fahrenthold. The Washington Post. September 6, 2006.

Ingredient in Prozac Increases risk of extinction for freshwater mussels. Science Daily. September 15, 2006.

PPCP's Double Life. Shirleen H. Mahoney. Water and Wastewater News. September 1, 2006.

Questions and Answers about the Discovery of Intersex Smallmouth Bass in the Shenandoah and Cowpasture

Rivers. Virginia Department of Environmental Quality.

Technical Brief: Endocrine Disrupting Compounds and Implications for Wastewater Treatment. Paul D. Anderson, Ph.D. Water Environment Research Foundation (WERF), 2005.

Hormone Chemicals Maybe Be Imperiling Fish. Warren Cornwall and Keith Ervin. The Seattle Times. April 1, 2007.

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Household Disposal of Pharmaceuticals as a Pathway for Aquatic Contamination in the United Kingdom. Jonathan P. Bound & Nikolaos Voulvoulis. Environmental Health Perspectives, December 2005.

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Pharmaceutical Take-Back Programs: Moving from Local to National (*Utility Executive*, March/April 2009, pp. 6-9)

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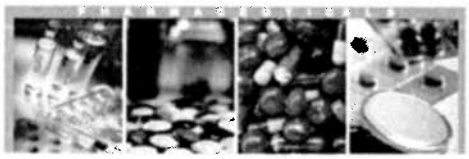
National Association of State Controlled Substances Authorities (NASCSA): Resolution in Support of Take-Back Programs (October 2007)

Upcoming Events

Biosolids Calendar - Annual Symposium



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Pharmaceuticals Press

Clay helps clean up pharmaceutical pollution
Source: EnvironmentalExpert.com
Date: March 24, 2009

Associated Press Series: Pharmaceuticals in Drinking Water
Source: Associated Press
Date: March 10-12, 2008

Drugs in Our Drinking Water
Source: AARP Bulletin
Date: February 27, 2009

Inslee introduces Safe Drug Disposal Act of 2009
Source: Press Release from Rep. Inslee (D-Wash.)
Date: February 26, 2009

Be rid of unused meds, just not down the drain
Source: The Oregonian (OregonLive.com)
Date: February 18, 2009

Dumping drugs puts traces of meds in taps
Source: ACP Internist
Date: February 5, 2009

Europe leads effort to push for design of "green" drugs
Source: Environmental Health News
Date: February 4, 2009

Don't flush pharmaceuticals down the drain
Source: Seattle Times
Date: January 20, 2009

NDP: Ontario Should Stop Using Sewage Sludge as Fertilizer until Health Impact Clear
Source: Canadian Press
Date: October 31, 2008

Opening the "Green Pharmacy"
Source: ACS Publications
Date: October 29, 2008

House leaves major EPA Pharmaceutical study for next Congress
Source: Inside EPA
Date: October 6, 2008

Relatively little advice offered on disposal of medications
Source: USA Today
Date: September 15, 2008

Peronsal dilemma may inspire U.S. water fix: Drug Dropboxes
Source: USA Today
Date: September 15, 2008

Not a Member Yet?

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- Tons of drugs dumped into wastewater
  Source: Associated Press
  Date: September 14, 2008

- Drugs found in drinking water
  Source: USA Today
  Date: September 12, 2008

- Drugs affect more drinking water
  Source: Associated Press
  Date: September 12, 2008

- What's Coming From Your Tap?
  Source: The Wall Street Journal (WSJ.com)
  Date: August 19, 2008

- DEC Tells New Yorkers - Don't Flush Medications (Press Release)
  Source: NY Department of Environmental Conservation Press Release
  Date: August 8, 2008

- Accidental prescription overdoses soaring
  Source: ChicagoTribune.com
  Date: July 29, 2008

- Getting rid of what the doctor ordered
  Source: The Boston Globe (Boston.com)
  Date: June 15, 2008

- Program seeks to quell flushing of medications
  Source: Waste News
  Date: June 9, 2008

- Little Done to Test, Limit Contaminated Water
  Source: USA Today
  Date: March 11, 2008

- Takeback tested in US for Unwanted Drugs
  Source: Crossroads Bulletin
  Date: June 27, 2006

- Time for Dialogue on Waste Meds
  Source: Waste News
  Date: January 30, 2006

- Unused Drug Product Launch
  Source: Sharps Press Release
  Date: September 22, 2008

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Oregon Drug Take Back Program – SB 598
Product Stewardship Model for Unwanted and Unused Drugs

WHAT IS THE PROBLEM?

- Avoidable Poisonings
    - For the Oregon Poison Center, pharmaceuticals represent the most common category of exposure, resulting in 48% of calls, and represent the most serious poisoning incidents.
    - Between 2000 and 2006, the hospitalization rate for Oregon children from unintended poisonings by drugs, medicines and plants increased 60%; much can be attributed to prescription medications .
- Prescription drug abuse, especially in teens
    - The number of teens abusing prescription drugs exceeds the number of teens using all other drugs combined, except marijuana and alcohol.
    - Compared to the rest of the nation, Oregon ranks among the top ten states for:
        - Annual abuse of prescription drugs for all ages (228,000 persons per year);
        - Past year abuse of prescription drugs by youth 12 to 17 (34,000 persons per year); and,
        - Past year abuse of prescription stimulants (55,000 persons per year).
    - Teens get their drugs from friends and family – not the street corner and not the Internet.
- Water quality issues
    - US Geological Survey and Oregon DEQ water quality sampling indicates that trace amounts of various pharmaceuticals are found in Oregon's surface water; focused studies have found pharmaceuticals in groundwater.
    - The majority of drugs reach water through excretion. However, a 2007 study by the Teleosis Institute in California reported that consumers did not use nearly 45 percent of what they were prescribed.
    - Standard wastewater treatment methods are not designed to remove pharmaceuticals or other emerging compounds.
    - About one-third of the unwanted drugs are from hospice and long term care; these facilities generally flush unwanted medicines since no effective alternatives exist.

WHAT IS BEING PROPOSED?

- Drug manufacturers and distributors that serve Oregon would be required to plan, implement, and pay for a convenient way for Oregonians to dispose of unwanted and unused medicines in an environmentally safe manner.

WHO DEVELOPED THE PROPOSAL?

- A broad stakeholder group: started meeting in the fall of 2006 to examine the problem, including: State agencies (DEQ, Health Division, Oregon State Police, Board of Pharmacy), pharmacy owners, hospital pharmacists, local health officials, environmental public interest groups, local governments, pharmaceutical manufacturers, chain drug store owners, drinking water and wastewater utilities
- Convening meeting: held in June, 2008 – over 125 attendees; product stewardship concept endorsed.
- Recommendations:
    - No additional cost to consumers.
    - Use a product stewardship model: manufacturers and distributors that supply drugs in Oregon craft system to recover and properly dispose of unwanted and unused drugs - consistent with past actions by Oregon Legislature.
        - Continues product stewardship type model similar to electronic waste recycling requirements of SB 737.
        - Drug take back programs are specifically mentioned as one toxic reduction tool that local governments should evaluate
    - Need a convenient system for both rural and urban Oregon.


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Wisconsin Briefs

from the Legislative Reference Bureau

Brief 08–11

Corrected September 29, 2008

ELECTRONICS RECYCLING

States are struggling to deal effectively with the burgeoning volume of discarded consumer electronics, which can threaten both human health and the environment. With state budgets tight, recycling programs instituted by state or local governments have generally been funded by either consumers or electronics manufacturers.

Sixteen states currently have laws establishing statewide electronics recycling, or e-recycling, programs. Legislation in Wisconsin was introduced in the 2007-2008 session, but failed to pass.

This brief will examine the issue of electronic waste, discuss the Wisconsin legislation that was introduced, summarize current e-recycling laws in other states, and highlight national action on the issue.

THE ISSUE

Electronic waste – unwanted or obsolete computers, televisions, cellular phones, and other consumer electronics – poses a threat to the environment and to human health if disposed of in landfills or incinerated.

Though there is no standard definition, electronic waste, or e-waste, generally includes computers and accessories, televisions, cellular phones, fax machines, stereos, and video game systems. These components frequently contain heavy metals such as lead, mercury, and cadmium, and brominated flame retardants (BFRs) that can be harmful to humans and the environment.

The seemingly exponential proliferation of consumer electronics has made the issue of particular concern in the last decade. According to a 2006 survey by the Wisconsin Department of Natural Resources (DNR), state households own about 3.8 million computers, 7.5 million televisions, and 3.5 million cellular phones. The DNR estimates the average shelf life of a computer at three years and found that only 20% of survey respondents planned to recycle broken or unused computers.

According to the U.S. Environmental Protection Agency (EPA), consumer electronics make up almost 2% of the municipal solid waste stream. The EPA estimates that the quantity of electronic waste generated continues to increase. In 1998, a National Safety Council study estimated that 20 million computers were becoming obsolete each year. In 2007, EPA estimates put that number at more than 40 million.

The vast majority (82%) of unwanted electronics are disposed of, primarily in landfills, according to the EPA, with only 18% being recycled.

In February 2009, television broadcasts will convert from analog to digital signals. Those using rooftop or "rabbit-ear" antennas will need to purchase a converter box or a television with a digital tuner in order to receive the digital signal. While older televisions can still be used after February 2009, it is estimated that the switch to digital will cause a larger-than-usual turnover in televisions.

STATES PASS ELECTRONICS RECYCLING LEGISLATION

States have taken the lead in passing e-recycling legislation due to a lack of federal regulation on the issue. Though the EPA regulates hazardous waste on the federal level, households and small businesses generally do not

Prepared by Sam-Omar Hall, Legislative Analyst

Reference Desk: (608) 266-0341
Web Site: www.legis.state.wi.us/lrb

generate enough waste to fall under its regulations.

WISCONSIN LEGISLATION

In January 2008*, Senator Mark Miller along with seven coauthors and 17 cosponsors introduced Senate Bill 397 which would have established a statewide electronics recycling program funded by electronics manufacturers. The bill passed the senate but failed to pass the assembly.

Major Provisions. Under the provisions of SB-397, manufacturers of video display devices marketed for home use would be responsible for collecting and recycling consumer electronics or arranging for collection and recycling to be done. The more electronics by weight that a manufacturer collected, the less "variable fees" it would be required to pay.

The bill established the following requirements for manufacturers of video display devices (defined as televisions or computer monitors with a tube or screen at least nine inches long diagonally): manufacturers must permanently label their products, they must inform the DNR if their products contain hazardous substances, and they must register annually with the DNR and pay annual fees.

Anyone collecting or recycling electronics would also be required to register with the DNR.

Manufacturers who failed to comply with the bill's requirements could face penalties or be prohibited from selling their products in the state.

The bill set targets for the amount of electronics that manufacturers were to collect for recycling. For the first year, manufacturers could avoid paying any variable fees if they collected and recycled electronics equal to 60% of the weight of the electronics they produced. In subsequent years, the target rate would rise to 80%.

Manufacturers who exceeded their recycling targets would receive credits which they could use to meet targets in the next three years or sell to other manufacturers to be used to meet targets.

Manufacturers would not be limited to collecting their own products. They would receive credit for recycling various types of electronics regardless of whether they originally produced them.

Under SB-397 manufacturers could receive 1.5 times credit for electronics collected in rural areas and reported as such to the DNR.

Finally, manufacturers would be prohibited from charging consumers a fee when collecting electronics to be recycled.

A landfill ban was the second major component of SB-397. The bill prohibited disposal in landfills of televisions, computer monitors, computers and accessories, fax machines, DVD players, VCRs, and telephones with video displays. The bill also allowed the DNR to add additional devices to the list if it determined their disposal would be harmful to human health or the environment.

Legislative Action. On January 24, 2008, a public hearing was held on SB-397 and on March 5 the Senate Committee on Environment and Natural Resources voted 5 to 0 to adopt Senate Substitute Amendment 1 and Senate Amendment 1.

Senate Substitute Amendment 1. Senate Substitute Amendment 1 made a number of changes to SB-397. It expanded the landfill ban to include a ban on burning electronic devices in an incinerator. It also banned placing electronic devices in a container that would be taken to a landfill or incinerated. Penalties of $50 for a first violation, $200 for a second violation, and up to $2,000 for a third or subsequent violation were set in Senate Substitute Amendment 1. The substitute amendment also required the operator of a landfill or solid waste treatment facility to make a "reasonable effort" to separate electronic waste and have it recycled.

*Corrected date.

The substitute amendment included annual and quarterly recycling targets for manufacturers and imposed annual and quarterly "shortfall fees"calculated by multiplying the amount of the shortfall by the estimated cost of recycling.

Senate Amendment 1 to Senate Substitute Amendment 1 added an exception to the definition of a "video display device" for any monitor that was a part of a larger piece of equipment used in an industrial, governmental, commercial, research and development, or medical setting. It also added an exception for devices used for security, sensing, monitoring, or antiterrorism purposes.

The senate adopted Senate Substitute Amendment 1 and Senate Amendment 1 and passed SB-397 as amended by a vote of 30 to 3 on March 12, 2008. The bill was referred to the Assembly Committee on Natural Resources on March 13, and subsequently failed to pass.

LEGISLATION IN OTHER JURISDICTIONS

As of September 2008, 16 states and one city have passed laws establishing an electronics recycling program. Fifteen states' programs are funded by electronics manufacturers under an extended producer responsibility (EPR) model. Only one state, California, has an advanced recycling fee (ARF) program where consumers pay a fee when they purchase an eligible product.

Each state with an e-recycling program has its own set of rules regarding who can provide electronics for recycling, what types of products are covered, and the exact method of financing the program.

Some state laws limit the use of e-recycling programs only to "consumers" or "households." Other states limit the number of electronics devices that a person can drop off at one time, but open the program to small businesses and nonprofits.

The scope of products covered differs from state to state. The most common electronics accepted for recycling under state programs include computer monitors, personal computers and peripheral devices, and televisions. Some states, however, accept only computer-related components and not televisions.

Programs in all states but one are financed by manufacturers, but there are differing ways of calculating how much manufacturers must pay. In some states, manufacturers pay a flat fee that is used to fund the recycling program. "Market share" models in other states charge manufacturers based on the amount of products they produce and sell. "Return share" models charge manufacturers based on the amount of their products that are turned in for recycling. Some states use a blend of market share and return share models.

At least three states ban some electronic waste from landfills but lack a statewide recycling program. Conversely, seven states with a statewide recycling program do not have landfill bans.

The rate of states adopting statewide electronics recycling bills appears to be increasing. Between 2003 and 2006, four states passed e-recycling laws. In 2007 and 2008, 12 states and New York City passed laws.

New York City passed a two-part electronics recycling law in April and May 2008. Citing electronic waste as "one of the fastest growing and most hazardous components of the City of New York's waste stream," the City Council established a citywide recycling program funded by electronics manufacturers and a landfill disposal ban in April 2008. The second part of the law, passed over the mayor's veto in May, establishes fines for electronics companies if they fail to recycle a stated amount of electronics.

At least 10 states, including Wisconsin, considered electronics recycling bills during the most recent session.

Federal Activity. During the 2007-2008 session, the U.S. Congress considered but failed to enact HR 223, which would have established a national advanced recycling fee of $10 for consumers purchasing electronics, such as monitors and computers. Under the bill, the EPA would use the collected fees to fund recycling programs.

In March 2008 the bipartisan E-Waste Working Group, comprised of eight members of congress, released a "Concepts Paper" setting out the goal of establishing a national e-recycling program and seeking comment from interested parties.

In April 2008, the House Committee on Science and Technology held a hearing on electronic waste and heard testimony from industry, recyclers, academics, and nongovernmental organizations.

National Electronics Product Stewardship Initiative. Between 2001 and 2004, representatives from electronics manufacturers, government agencies, environmental groups, recyclers, and other interested parties formed the National Electronics Product Stewardship Initiative (NEPSI) in order to develop a plan for a national electronics recycling program. The group sought to find common ground on financing a program, maximizing recycling of e-waste, encouraging more efficient product design, and reducing the toxicity of electronic products.

NEPSI failed to come to a consensus because of a disagreement over whether a national recycling program would be funded by consumers (ARF) or by manufacturers (EPR).

With a national program seemingly stalled, states began to legislate e-recycling programs.

The following table presents the states with e-recycling programs and includes basic details of each program.

STATE LAWS ON ELECTRONIC WASTE COLLECTION AND RECYCLING – AUGUST 2008

State	Law Adopted	Effective Date	Landfill Ban	Program Funding Mechanism*	Code/Statutes
California	2003	January 1, 2005	Yes	Advanced Recycling Fee	Public Resources Code 42460-42486
Connecticut	2007	January 1, 2009	Yes	Extended Producer Fee	Public Act No. 07-189
Hawaii	2008	January 1, 2010	No	Extended Producer Fee	Special Session 2008 Act 13
Maine	2004	January 1, 2006	Yes	Extended Producer Fee	Title 38, Chapter 16, Maine Statutes
Maryland	2005	July 1, 2005	No	Extended Producer Fee	Sections 9-1727 to 9-1730, Maryland Code
Minnesota	2007	August 1, 2007	Yes	Extended Producer Fee	Chapter 115A, Minnesota Statutes
Missouri	2008	July 1, 2009	No	Extended Producer Fee	Sections 260.1050 to 260.1101, Missouri Statutes
New Jersey	2008	January 1, 2009	Yes	Extended Producer Fee	Chapter 347, Public Laws 2007
North Carolina	2007	January 1, 2009	Yes	Extended Producer Fee	Solid Waste Management Act of 2007 (SL 2007-550)
Oklahoma	2008	January 1, 2009	No	Extended Producer Fee	Sections 2-11-603, Title 27A, Oklahoma Statutes
Oregon	2007	January 1, 2009	Yes	Extended Producer Fee	Sections 459.247 and 459.995, Oregon Revised Statutes
Rhode Island	2008	January 1, 2009	Yes	Extended Producer Fee	Title 23, Chapter 24.10, General Laws of Rhode Island
Texas	2007	September 1, 2008	No	Extended Producer Fee	Chapter 361, Subchapter Y, Health and Safety Code, Texas Statutes
Virginia	2008	July 1, 2009	Yes	Extended Producer Fee	Title 10.1, Chapter 14, Article 3.6, Sections 10.1-1425.27
Washington	2006	January 1, 2009	No	Extended Producer Fee	Chapter 173-900, Washington Administrative Code
West Virginia	2008	July 1, 2009	No	Extended Producer Fee	Sections 22-15A-24 to 22.15A-29, West Virginia Code
Arkansas	2005	January 1, 2010	Yes	----	Sections 25-34-101 to 25-34-111, Arkansas Code
Massachusetts	2000	April 1, 2000	Yes	----	310 CMR 19.017
New Hampshire	2006	July 1, 2007	Yes	----	Sections 149M:4 and 149-M:27,

*Advanced recycling fee is a fee paid up-front by the consumer. Extended producer fee is a fee paid by the manufacturer of the product.

Sources: Congressional Research Service, *Managing Electronic Waste: An Analysis of State E-Waste Legislation*, September 10, 2007; National Conference of State Legislatures, "Reduce, Re-Use and Recycle: Managing E-Waste," *LegisBrief*, Vol. 16, No. 23, April/May 2008; "Comparisons of State E-waste laws," at: e-takeback.org, July 2008.