

# Senate Health and Human Services Committee

*Cameron Lapine 271-2104*

**SB 50**, relative to pharmaceutical drug take-back programs.

**Hearing Date:** January 25, 2023

**Time Opened:** 9:01 a.m.

**Time Closed:** 9:22 a.m.

**Members of the Committee Present:** Senators Avar, Bradley, Whitley and Prentiss

**Members of the Committee Absent:** Senator Birdsell

**Bill Analysis:** This bill allows drug take-back programs to occur in long-term care facilities, nursing homes, and assisted living facilities.

---

**Sponsors:**

Sen. Lang  
Rep. Bogert

Sen. Avar  
Rep. Coker

Sen. Pearl

---

**Who supports the bill:** Daley Frenette (for Sen. Lang, Senate District 2), Senator Howard Pearl (Senate District 17), Robert Dunn (NH Catholic Charities), Laurence Sweeny, Wendy Bonner (NH Dept. of Environmental Services), Rosemary Simino (Golden View Health Care Center), and Christina Dunlop (Golden View Health Care Center).

**Who opposes the bill:** None.

**Who is neutral on the bill:** None.

**Summary of testimony presented in support:**

**Daley Frenette**

**Senate Majority Caucus Director**

- Mr. Frenette introduced SB 50 on behalf of Senator Tim Lang. He said that SB 50 extends the drug take-back program to long-term care facilities, nursing homes, and assisted living facilities.
- Mr. Frenette said that SB 50 was submitted at the request of one of Sen. Lang's constituents.
- Mr. Frenette said that SB 50 streamlines the process of unused drug disposal at long-term care facilities, saving time and money.

## **Rosemary Simino**

### **Nursing Home Administrator, Golden View Nursing Home**

- Ms. Simino said that one of her duties is to find ways to make daily operations more efficient.
- Ms. Simino said that she has been looking to make unused prescription drug disposal more efficient. She explained that when controlled substances go unused – such as when a patient passes away, gets better, or their physician changes their medication – the drugs must be manually destroyed.
- To demonstrate the current system, she produced a plastic tub, a bottle of the chemical solution used to destroy drugs, and a piece of “bingo” pill packing. She said that a licensed physician must punch each individual pill out of the packaging with their thumb, submerge them in the chemical solution, and then dispose of them.
- Ms. Simino said that while the process is not difficult, the volume of pills to be destroyed requires significant resources. She noted that in August over a thousand pills had to be destroyed, taking over four hours of staff time to complete.
- Ms. Simino said that the nursing home already has drug quantity limits in place. For example, if a doctor prescribes a drug for a month, the nursing home asks the pharmacy to only send a week’s supply at a time to avoid waste, so if a patient dies or changes their medication there is less waste.
- Ms. Simino said that she then found out about drug collection bins, which are used at Walmart, hospitals, police stations, and other buildings. She said she wanted to implement that program at the Golden View Nursing Home, but current law prohibits it.
- Ms. Simino said that she then went to Sen. Lang and asked him to submit a bill changing the law to allow for nursing homes to set up drug collection bins.
- Senator Whitley asked whether other states allow nursing homes to set up drug collection bins.
  - Ms. Simino said that it is allowed in a number of states, including Maine.
- Senator Prentiss said that she spoke with Senator Lang and appreciated that SB 50 was modeled after bills in other states. She said SB 50 was smart and made sense to her.

## **Laurence Sweeny**

### **Consultant Pharmacist**

- Mr. Sweeny is a consultant pharmacist who has destroyed the unused prescription drugs in nursing homes.
- Mr. Sweeny said that, pursuant to RSA 318-B:17-a, when he destroys drugs in nursing homes he is acting as an agent of the Board of Pharmacy.
- Mr. Sweeny said that another statute – RSA 318-B:17 – deals with the destruction of controlled substances when they come into the possession of law enforcement. He said that that statute had to be amended to allow for the drug take-back programs in police stations. He pointed out that RSA 318-B:17-a would have to be amended to allow nursing homes to set up drug take-back programs.

- Mr. Sweeny described the strict DEA processes regulating the drug take-back boxes' size, location, and construction. He said that these regulations came from the DEA allowing these boxes in nursing homes.
- Mr. Sweeny said that RSA 318-E:1, a statute with an exception allowing police officers to use the boxes, would also have to be amended to create an exception for nursing homes.
- Mr. Sweeny noted that, if SB 50 passes, there will be times when the nursing home will still have to manually destroy drugs. He gave the example of liquids in bottles with a volume greater than 4 ounces, which will have to be destroyed manually, or if the drop box was too full.
- Senator Avard asked if the section after RSA 318-E:1 would have to be amended as well.
  - Mr. Sweeny clarified that there are no sections after RSA 318-E:1, it is a standalone section.

## **Wendy Bonner**

### **Regulatory Manager for the Hazardous Waste Bureau, Department of Environmental Services (DES)**

- Ms. Bonner said that while DES supports SB 50's intent, it has a concern with the clarity of the proposed amendments to RSA 318-E:1 on Page 1, Lines 4 and 5 of SB 50, which indicate that a nursing home facility would be able to utilize the drug take-back program to dispose of drugs in the possession of the facility, not just those in the possession of the nursing home patients.
- Ms. Bonner said that the drugs prescribed to patients were not the concern. She explained that DES' concern is with drugs in an on-site pharmacy which were not prescribed but must be destroyed, as those drugs are regulated under existing federal and state waste management laws.
- Ms. Bonner said the DES suggested amending the proposed text by replacing the words "may utilize a drug take-back program" with "may establish a drug take-back program for residents or their authorized agents".

## **Laurence Sweeny**

### **Speaking for a Second Time**

- Mr. Sweeny said that nursing home facilities generally do not have possession of controlled substances except for when they are prescribed to a patient.
- Mr. Sweeny said that these controlled substances are kept in a locked medical cart and are not touched by the patients. He said that the nurse is acting as the authorized representative of the patient when they put controlled substances in a drug take-back box.
- Mr. Sweeny says that he would use the word "utilize" rather than "establish", referencing Ms. Bonner's testimony, as under federal Drug Enforcement Agency (DEA) regulations it is actually a pharmacy that establishes, maintains, and controls the drug take-back program.

- Mr. Sweeny clarified that if SB 50 were passed the pharmacy would set up the program inside the nursing home, where the DEA regulations would allow the facility staff to use it.
- Sen. Bradley suggested that since Mr. Sweeny and DES seem to want the same thing, they should work together write language for an amendment to SB 50.
  - Mr. Sweeny agreed.

**Christina Dunlop**

**Director of Nursing, Golden View Nursing Home**

- Ms. Dunlop said that she had been disposing of drugs for over six years and thought that the process was inefficient. She said that she supports SB 50.

**Summary of testimony presented in opposition:** None.

**Neutral Information Presented:** None.

cml

Date Hearing Report completed: January 27, 2023