

House Research Act Summary

CHAPTER: 124

SESSION: 2016 Regular Session

TOPIC: Disposal of Controlled Substances and Legend Drugs;
Opiate Antagonist Protocols

Analyst: Randall Chun

Date: May 26, 2016

This publication can be made available in alternative formats upon request. Please call 651-296-6753 (voice); or the Minnesota State Relay Service at 1-800-627-3529 (TTY) for assistance. Summaries are also available on our website at: www.house.mn/hrd/.

Overview

This act modifies state procedures for the disposal of controlled substances and other legend drugs, to in part reflect adoption of federal regulations to implement the federal Secure and Responsible Drug Disposal Act of 2010. Significant provisions of this act include:

- allowing pharmacies to collect controlled substances and legend and non-legend drugs from the ultimate user or from a long-term care facility on behalf of an ultimate user and dispose of the drugs as pharmaceutical waste; and
- requiring the collection and disposal of controlled substances to comply with applicable federal regulations.

The act also requires the Board of Pharmacy to develop an opiate antagonist protocol, requires the Commissioner of Health to implement related initiatives, and allow pharmacists to participate in therapy with opiate antagonists, pursuant to a written protocol.

Section

- 1 Practice of pharmacy.** Amends § 151.01, subd. 27. Includes in the “practice of pharmacy” participation in the initiation, management, modification, and discontinuation of therapy with opiate antagonists, pursuant to a written protocol.

Section

- 2** **Ultimate user.** Amends § 151.01, by adding subd. 39. Defines “ultimate user” as a person who possesses a legend drug lawfully obtained for personal use, or the use of a household member, or animal owned by the person or a household member.
- 3** **Prescribing and filling.** Amends § 151.37, subd. 2. Updates cross-references to pharmacies located within the state and outside the state, in a section of law that prohibits pharmacists from dispensing legend drugs based on a prescription that is not valid.
- 4** **Exclusion for course of employment.** Amends § 151.37, subd. 6. Modifies an exemption for various entities from the general prohibition on possessing legend drugs by clarifying that the exemption applies to employees of those entities while acting in the course of their employment, and requiring that controlled substances in schedules II to V be collected and disposed of only as allowed under section 152.105 (a section added by this bill). Also modifies the descriptions and criteria for the entities employing the individuals, and removes counties that operate disposal programs from the list of entities.
- 5** **Collection of legend drugs by pharmacies.** Amends § 151.37, by adding subd. 6a. Allows a licensed pharmacy to collect a legend drug from an ultimate user, or from a long-term care facility acting on behalf of an ultimate user, for purposes of disposing of the legend drug as pharmaceutical waste, provided that: (1) the pharmacy collects and disposes of controlled substances as allowed under section 152.105; and (2) noncontrolled substance legend and nonlegend drugs may be collected and disposed of only by a pharmacy with a controlled substance disposal program in the same manner in which it collects and disposes of controlled substances.
- 6** **Exclusion for prescriptions.** Amends § 151.37, subd. 7. Provides that persons to whom a legend drug has been dispensed are not prohibited from transferring the drug to an entity identified in subd. 6. Requires controlled substances to be collected, stored, transported, and disposed of only as allowed under section 152.105.
- (The entities identified in subd. 6 are: (1) law enforcement agencies; (2) certain hazardous waste transporters; (3) certain facilities permitted to treat, store, or dispose of hazardous waste; (4) certain collection programs; and (5) sanitary districts. Current law only refers to transfer to a county operating a legend drug disposal program; this provision is stricken in the bill.)
- 7** **Opiate antagonists protocol.** Amends § 151.37, by adding subd. 13. (a) Requires the board to develop an opiate antagonist protocol, in consultation with specified entities and groups.
- (b) Requires the commissioner of health to provide educational materials on opiate antagonists, the opiate antagonist protocol, and notice of liability protections to the medical consultants of community health boards.
- (c) Allows the commissioner of health to designate a practitioner authorized to prescribe opiate antagonists to enter into the written protocol with pharmacists practicing within one or more community health service areas, upon the request of the applicable community health board.
- (d) Extends immunity related to the use of opiate antagonists to the commissioner of health and the designated practitioner, when prescribing according to the protocol. Provides that

Section

these individuals are acting within the scope of employment when prescribing according to the protocol.

- 8** **Disposal.** Adds § 152.105. States that controlled substances in schedules II to V may be collected and disposed of only pursuant to the provisions of Code of Federal Regulations, title 21, parts 1300, 1301, 1304, 1305, 1307, and 1317 that are applicable to the disposal of controlled substances. Requires the disposal of controlled substances and legend and nonlegend drugs to comply with the requirements of section 116.07 (power and duties of the Pollution Control Agency) and related rules governing the disposal of hazardous waste.
- 9** **Effective date.** States that sections 1 to 8 are effective the day following final enactment.