

HB 1357

2009

1 A bill to be entitled
2 An act relating to the pharmaceutical take-back program
3 pilot project; creating s. 499.0295, F.S.; providing that
4 a manufacturer of a drug may not sell the drug or allow
5 the drug to be sold in the pilot project area unless the
6 manufacturer operates a pharmaceutical take-back program
7 approved by the Department of Health; providing
8 requirements for such programs; providing requirements for
9 submission of such a plan and its review by the
10 department; requiring retail pharmacies to post a sign to
11 inform consumers of the availability of pharmaceutical
12 take-back programs; requiring the department to adopt a
13 sample sign and post it on the Internet; providing civil
14 penalties for violations; providing for an application
15 fee; authorizing rulemaking; creating the Advisory
16 Committee on Pharmaceutical Take-Back Programs; providing
17 for membership; providing for duties; providing for
18 reimbursement of member travel and other expenses;
19 requiring reports; providing for termination of the pilot
20 project and repeal of provisions; providing for the terms
21 of initial committee members; providing that the
22 requirement to have a plan registered with the department
23 applies to manufacturers whose drugs are sold in the pilot
24 project area on or after a specified date; providing an
25 effective date.

26
27 Be It Enacted by the Legislature of the State of Florida:
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29 Section 1. Section 499.0295, Florida Statutes, is created
30 to read:

31 499.0295 Pharmaceutical take-back program pilot project.--

32 (1) PROGRAM REQUIREMENTS.--

33 (a) The department shall develop a pilot project in Pasco
34 and Hernando counties under which a manufacturer of a drug may
35 not sell the drug or allow the drug to be sold in those counties
36 unless the manufacturer operates in each county a pharmaceutical
37 take-back program approved by the department. The pharmaceutical
38 take-back program must do the following:

39 1. Accept all drugs presented to the program by consumers,
40 including residents of long-term care facilities and persons
41 enrolled in hospice, palliative care, and home health programs.

42 2. Accept all drugs sold regardless of the manufacturer.

43 3. Offer pharmaceutical take-back services at no cost to
44 the consumer, either at the time of sale of the drug or at the
45 time of collection of the drug.

46 4. Be convenient and adequate to serve consumers in urban
47 and rural areas.

48 5. Dispose of collected drugs by incineration or hazardous
49 waste disposal.

50 6. Include an education and outreach program to inform
51 consumers, retail pharmacies, health practitioners, county
52 health departments, hospitals, hospice care providers, and long-
53 term care facilities of the availability of the program.

54 7. Include a method for evaluation and improvement of the
55 program.

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56 (b) A manufacturer may operate its pharmaceutical take-
57 back program individually or collectively with other
58 manufacturers.

59 (2) PLAN APPROVAL.--

60 (a) A manufacturer that sells drugs in the pilot project
61 area shall submit a plan describing the manufacturer's proposed
62 pharmaceutical take-back program to the department for approval.
63 The proposed plan must:

64 1. Describe how the program meets the requirements of
65 subsection (1).

66 2. Include recovery goals for the first, second, and third
67 years of the program, expressed as pounds of drugs recovered per
68 capita, and a plan for action if the recovery goals are not met.

69 3. Describe the proposed method for disposal of the
70 collected drugs.

71 4. Describe how the manufacturer will coordinate with
72 other manufacturers to minimize consumer confusion about
73 different pharmaceutical take-back programs.

74 5. Meet other requirements established by rule by the
75 department.

76 6. Be accompanied by a fee determined by the department
77 under subsection (5).

78 (b) The department shall review the disposal proposal in
79 the plan in consultation with the Department of Environmental
80 Protection.

81 (c) Within 60 days after a manufacturer submits a plan
82 under paragraph (a), the department must approve or reject the
83 plan. If the plan is rejected, the department shall provide the

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84 manufacturer with a written statement of the reasons for the
85 rejection and the manufacturer may submit a revised plan within
86 60 days after the date of the written statement of rejection.
87 The department must approve or reject the revised plan within 60
88 days after its submission.

89 (d) A manufacturer shall submit an updated plan to the
90 department annually, on or before the anniversary of the
91 approval of the original plan. The department shall review the
92 disposal proposal in the updated plan, in consultation with the
93 Department of Environmental Protection, and shall approve or
94 reject the updated plan as provided in paragraph (c).

95 (e) If at the time the plan is due for submission to the
96 department there is no legal method for a manufacturer to accept
97 all prescription and nonprescription drugs through the
98 pharmaceutical take-back program, a manufacturer may apply to
99 the department for an extension of the time to submit the plan.
100 The department may grant an extension not to exceed 1 year.

101 (f) The department may withdraw approval of a plan if a
102 manufacturer does not operate the pharmaceutical take-back
103 program in accordance with the approved plan. The department
104 shall comply with chapter 120 in withdrawing approval of a plan.

105 (3) SIGNS.--The department shall require retail pharmacies
106 to post a sign to inform consumers of the availability of
107 pharmaceutical take-back programs. The department shall adopt an
108 example of such a sign and post the example on the Internet.

109 (4) PENALTIES.--In addition to any other liability or
110 penalty provided by law, the department may impose a civil
111 penalty on a person for violation of this section or of the

112 rules adopted to implement this section of up to \$250 for each
113 violation. Civil penalties under this section shall be imposed
114 as provided in s. 499.066.

115 (5) FEES.--The department shall set an application fee for
116 submission of a pharmaceutical take-back program plan under
117 subsection (2) not to exceed \$100. The application fee must be
118 designed to recover the cost to the department of regulating
119 pharmaceutical take-back programs.

120 (6) RULEMAKING.--The department may adopt rules pursuant
121 to ss. 120.536(1) and 120.54 to implement this section.

122 (7) ADVISORY COMMITTEE.--

123 (a) There is created the Advisory Committee on
124 Pharmaceutical Take-Back Programs, consisting of 11 members
125 appointed by the State Surgeon General. The term of office of
126 each member is 3 years, but a member serves at the pleasure of
127 the State Surgeon General. Before the expiration of the term of
128 a member, the State Surgeon General shall appoint a successor
129 whose term begins immediately upon the expiration of the term of
130 the current member. A member is eligible for reappointment for
131 one additional term. If there is a vacancy for any cause, the
132 director shall make an appointment to become effective
133 immediately.

134 (b) The advisory committee shall advise the department on
135 issues relating to pharmaceutical take-back programs.

136 (c) A majority of the members of the advisory committee
137 constitutes a quorum for the transaction of business. Official
138 action by the advisory committee requires the approval of a
139 majority of the members of the advisory committee. The advisory

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140 committee shall elect one of its members to serve as
141 chairperson.

142 (d) The advisory committee shall meet at least four times
143 per year at times and places specified by the call of the
144 chairperson or of a majority of the members of the advisory
145 committee.

146 (e) The advisory committee may adopt rules necessary for
147 its operation.

148 (f) A member of the advisory committee is not entitled to
149 compensation, but in the discretion of the department may be
150 reimbursed from funds available to the department for actual and
151 necessary travel and other expenses incurred by the member in
152 the performance of the member's official duties as provided in
153 s. 112.061.

154 (8) REPORTS.--The department shall submit a preliminary
155 report to President of the Senate and the Speaker of the House
156 of Representatives by January 31, 2011, and a final report by
157 January 31, 2012, concerning the effectiveness of the pilot
158 project in meeting its recovery goals. In addition, the final
159 report shall make recommendations on expanding the project to
160 other parts of the state.

161 (9) TERMINATION AND REPEAL.--Unless renewed by the
162 Legislature, the pilot project shall terminate December 31,
163 2012, and this section is repealed on that date.

164 Section 2. Notwithstanding the term of office specified by
165 s. 499.0295, Florida Statutes, as created by this act, for the
166 members first appointed to the Advisory Committee on
167 Pharmaceutical Take-Back Programs:

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168 (1) Three members shall serve for a term ending June 30,
 169 2010.

170 (2) Four members shall serve for a term ending June 30,
 171 2011.

172 (3) Four members shall serve for a term ending June 30,
 173 2012.

174 Section 3. The registration requirements contained in s.
 175 499.0295, Florida Statutes, as created by this act, apply to
 176 manufacturers whose drugs are sold in the pilot project area on
 177 or after January 1, 2010.

178 Section 4. This act shall take effect July 1, 2009.