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No. 1584

S.P. 508

In Senate, April 27, 2021

An Act To Make Donated Medicines Available to Maine Patients at an Affordable Cost

Reference to the Committee on Health and Human Services suggested and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator CLAXTON of Androscoggin.

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

- **Sec. 1. 22 MRSA §2700, sub-§3,** as amended by PL 2013, c. 121, §1, is further amended to read:
- **3. Return of pharmaceuticals.** The agency may create systems for the safe, effective and proper disposal of unused pharmaceuticals. The systems may include the use of prepaid mailing envelopes into which the unused pharmaceuticals are placed and returned to a single collection location. The prepaid mailing envelopes must be made available to the public at various locations, including, but not limited to, pharmacies, physicians' offices and post offices. The agency may randomly assess the toxicity of materials received under the program as long as the assessment results do not identify the patient, person who mailed the material, prescriber or pharmacy. The agency shall consult with the department to determine the suitability of unused pharmaceuticals for donation to the medicine donation and redispensing program under section 2700-B and transfer suitable pharmaceuticals to the medicine donation and redispensing program.
- **Sec. 2. 22 MRSA §2700, sub-§4,** as amended by PL 2013, c. 121, §1, is further amended to read:
- **4. Disposal of pharmaceuticals.** All Except for pharmaceuticals donated to the medicine donation and redispensing program under subsection 3, all unused pharmaceuticals received under the program must be disposed of in a manner that is designed to be effective, secure and in compliance with local, state and federal environmental requirements, including the federal Resource Conservation and Recovery Act of 1976, as amended.
 - Sec. 3. 22 MRSA c. 606 is enacted to read:

24 <u>CHAPTER 606</u>

MEDICINE DONATION AND REDISPENSING PROGRAM

§2700-B. Medicine Donation and Redispensing Program

- 1. **Definitions.** As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.
 - A. "Deliver" or "delivery" has the same meaning as in Title 32, section 13702-A, subsection 6.
- B. "Dispense" or "dispensing" has the same meaning as in Title 32, section 13702-A, subsection 9.
 - C. "Donor" means a person who meets the requirements of subsection 5 to donate medicines to a recipient.
- D. "Eligible patient" means an individual who may receive redispensed medicines from a recipient and meets the requirements of subsection 4.
- E. "Interchangeable biological product" has the same meaning as in Title 32, section 13702-A, subsection 14.

F. "Licensed health care professional" means any individual licensed to authorize, 1 2 prescribe, dispense or administer medicines under Title 32, chapter 31, 34-A, 36, 48, 3 51, 117 or 143. 4 G. "Manufacturer" has the same meaning as in Title 32, section 13702-A, subsection 5 19. H. "Medicine" means a nonprescription drug as defined in Title 32, section 13702-A, 6 subsection 20, a prescription drug or legend drug as defined in Title 32, section 7 8 13702-A, subsection 30, a device as defined in Title 32, section 13702-A, subsection 8 9 or a drug approved by the United States Food and Drug Administration in accordance 10 with 21 Code of Federal Regulations, Part 312. 11 I. "Orally administered cancer medicine" means an orally administered medicine that 12 is used to treat cancer or its side effects or the side effects of a medicine used to treat 13 cancer. 14 J. "Pharmacy" has the same meaning as in Title 32, section 13702-A, subsection 24. 15 K. "Prescription drug order" has the same meaning as in Title 32, section 13702-A, subsection 31. 16 17 L. "Program" means the Medicine Donation and Redispensing Program established in 18 subsection 2. 19 M. "Public assistance program" means aid, assistance or benefits available through: 20 (1) A program of temporary assistance for needy families administered in this 21 State pursuant to chapter 1053-B or the Parents as Scholars program pursuant to 22 chapter 1054-B; 23 (2) A program of medical assistance administered in this State pursuant to chapter 24 855; or 25 (3) Any other program that is based on need and is conducted or administered by 26 this State. 27 N. "Recipient" means a nonprofit entity that has contracted with the department to 28 operate the program in accordance with subsection 3. 29 O. "Returns processor" has the same meaning as in 21 United States Code, Section 30 360eee(18). 31 P. "Wholesaler" has the same meaning as in Title 32, section 13702-A, subsection 34. 32 2. Establishment. The Medicine Donation and Redispensing Program is established 33 to accept donated, unused medicines and redispense those medicines to eligible patients 34 who cannot afford to purchase them. 35 3. Contract for operation. The department shall contract with nonprofit entities that 36 are in good standing and legally authorized to possess medicine in the State to operate the 37 program. The entities may accept and redispense medicine in accordance with this chapter

4. Eligible patients. A patient is eligible to receive medicine donated and redispensed

in accordance with this chapter as long as the patient does not have health insurance, is

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to the extent authorized by federal law.

enrolled in a public assistance program or otherwise meets the criteria established by the 1 2 department in accordance with subsection 15. 3 5. Donors. Any person, including, but not limited to, any individual, manufacturer, 4 licensed health care professional, pharmacy, health care facility licensed under this Title or 5 the Unused Pharmaceutical Disposal Program under section 2700, may donate a medicine 6 to a recipient. A donor must remove or redact any patient names and prescription numbers 7 on donated medicines or otherwise maintain patient confidentiality by executing a 8 confidentiality agreement with the recipient. 9 **6. Medicines and disposal.** Medicine donated to a recipient and redispensed by the 10 recipient must meet the following requirements. The medicine: 11 A. Must be in the medicine's original, unopened, sealed packaging or, if the outside packaging is opened or disturbed, the contents are one or more single-unit doses that 12 13 are individually contained in unopened, tamper-evident packaging, except that orally 14 administered cancer medicine may be in opened packaging; 15 B. May not be adulterated or misbranded; 16 C. May not be a controlled substance as defined in 21 Code of Federal Regulations, 17 Sections 1308.11 to 1308.15 (2020); 18 D. Must be maintained in accordance with 21 United States Code, Section 355-1 19 (2020) relating to risk and evaluation strategies, if applicable; E. Must have a method to detect improper temperature variations of the medicine, if 20 21 applicable; and 22 F. Must be maintained in accordance with 21 United States Code, Sections 360eee-1 23 to 360eee-4 (2020) relating to supply chain security, if applicable. 24 A recipient shall ensure that a licensed health care professional verifies that the donated 25 medicine meets the requirements of this subsection before it is redispensed to an eligible 26 patient. Medicine that does not meet the requirements of this subsection must be disposed 27 of by returning it to the donor, destroying it by an incinerator, medical waste hauler or other 28 lawful method or transferring it to a returns processor. The recipient shall maintain a record 29 of any medicine that is disposed of that includes the disposal method, the date of disposal 30 and the name, strength and quantity of each medicine disposed of. 31 7. Record-keeping requirements. A recipient shall maintain records in accordance 32 with this subsection. A recipient: 33 A. Shall verify and record donor information, including the following: 34 (1) That the donor is qualified in accordance with subsection 5: and 35 (2) The donor's name, address, phone number and license number, if applicable;

B. Shall maintain a written or electronic record of the donated medicine, including the

name, strength and quantity of each accepted medicine and the name, address and

phone number of the donor of that medicine, except that this requirement does not

C. Shall maintain separate written or electronic records of the donated medicines from

apply if the donor and recipient are under common ownership or common control;

the recipient's other inventory;

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1 D. Shall maintain records consistent with requirements for returns of an unsalable 2 product by a returns processor in accordance with federal law: 3 E. Shall retain all records in a physical or electronic format, on or off the recipient's 4 premises for 6 years; 5 F. May contract with a 3rd party to create or maintain records on the recipient's behalf; 6 G. Shall maintain records showing the history of the medicine, beginning with the donor of the medicine, prior donations by the donor, whether the medicine was 7 previously dispensed and the information required to be on the patient label in 8 9 accordance with applicable rules adopted by the Maine Board of Pharmacy pursuant to 10 Title 32, section 13720; 11 H. Shall use an identifier, such as a serial number or barcode, in place of information 12 in a record or on a label as long as the information is readily retrievable and as long as, 13 upon request of the department in accordance with paragraph I, the identifier used for the requested records is replaced with the original information, except that an identifier 14 15 may not be used on eligible patient labels when dispensing or administering a medicine; 16 and 17 I. Shall make all records available for audit by the department within 5 business days 18 of the department's request. 19 8. Medicine storage requirements. A recipient shall maintain donated medicine in accordance with this subsection. A recipient shall: 20 21 A. Store and maintain donated medicine separate from the recipient's other inventory; 22 and 23 B. Store and maintain donated medicine in a temperature-controlled environment 24 appropriate for the medicine, as applicable. 25 9. Delivery of donated medicine. A recipient may deliver donated medicine to 26 another recipient or to an entity participating in a medicine donation program operated by 27 another state. 28 10. Repackaging of donated medicine. A recipient may repackage donated medicine 29 in accordance with this subsection as necessary for storing, dispensing, administering or 30 delivering the medicine. Repackaged medicine must be: 31 A. Labeled with the medicine name, strength and expiration date; 32 B. Kept in a separate, designated area until it is inspected and verified by a licensed 33 health care professional; and 34 C. Labeled with the nearest expiration date, if donated medicines with different

expiration dates are repackaged together.

otherwise permitted by law.

of this chapter, the provisions of this subsection are met.

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11. Redispensing of donated medicines to eligible patients. A medicine may only

A. A recipient may dispense or administer a medicine to an eligible patient only if

be redispensed to an eligible patient by a recipient if, in addition to all other requirements

- B. A medicine that is a prescription drug, as defined in Title 32, section 13702-A, subsection 30, may be dispensed or administered only to an eligible patient pursuant to a valid prescription drug order.
- C. A recipient must maintain eligible patient-specific written or electronic records
 maintained in accordance with rules adopted by the Maine Board of Pharmacy pursuant
 to Title 32, section 13720.
- D. A medicine must be repackaged into a new container or have all previous patient information on the donated container redacted or removed.
- E. A medicine must be properly labeled in accordance with applicable rules adopted by the Maine Board of Pharmacy pursuant to Title 32, section 13720.

- F. The expiration date of a medicine may not occur before the eligible patient will use the medicine based on the directions for use of the licensed health care professional who prescribed the prescription for the eligible patient or on the package's label.
 - G. A recipient may substitute an oral tablet, capsule or liquid form of the medicine as long as that form has the same dose schedule and is an interchangeable biological product.
 - H. A recipient may replenish medicine of the same medicine name and strength previously dispensed or administered to an eligible patient in accordance with federal law.
 - I. A recipient may charge a person, including but not limited to an eligible patient, health plan, pharmacy benefits manager or government agency, its usual and customary charges for handling or dispensing the medicine as long as those charges do not exceed the authorized recipient's actual costs of providing the medicine, including, but not limited to, the current and anticipated costs of educating donors, providing technical support to donors, shipping and handling, labor, storage, licensing, utilities, advertising, technology, supplies or equipment.
 - 12. Medicine donation programs in other states. A recipient may deliver donated medicine to an entity participating in a medicine donation program operated by another state. An entity participating in a medicine donation program operated by another state may dispense donated medicine to residents of this State. An entity participating in a medicine donation program operated by another state must comply with all laws and rules in this State unless the laws and rules conflict with the laws or rules of the state in which the entity is located.
 - 13. Construction. This chapter may not be construed to:
 - A. Require a donor or recipient to be licensed as a wholesaler solely on the basis of the donor's or recipient's participation in the program;
 - B. Permit the resale of medicine donated as part of the program; or
 - C. Change ownership of the donated medicine from the donor to the recipient, unless the ownership change is specified by the recipient.
- 40 <u>14. Immunity from liability.</u> A person may not be subject to any civil or criminal
 41 liability, or to any discipline by a professional licensing board, for any action taken in good
 42 faith in accordance with this chapter.

15. Department duties. The department shall:

- A. Establish by rule eligibility criteria for eligible patients, including, but not limited to, eligibility for indigent or underinsured patients or patients who do not meet the criteria established in subsection 4, but may be eligible for the program if there is an excess of donated medicines in a recipient's inventory;
 - B. Establish by rule a process by which a donor, recipient or patient in the program may request a waiver from the department from the requirements of this chapter or any rules adopted in accordance with this chapter, except that the department may not adopt a rule that establishes a waiver from the immunity from liability under subsection 14. The department shall grant or deny a waiver submitted in accordance with this paragraph and rules adopted in accordance with this paragraph within 30 days of its submission to the department based on its potential effects on medicine access and safety of eligible patients; and
 - C. Establish by rule a method by which the department may revoke the authority of a recipient to participate in the program by issuing a written notice to the recipient. The rule must require the department to identify the specific requirements the recipient violated and the required corrective actions for the recipient to resume its participation in the program.
- 16. Rules. The department may adopt rules to carry out the purposes of the program. Rules adopted pursuant to this subsection are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A.
 - Sec. 4. 36 MRSA §5218-B is enacted to read:

§5218-B. Credit for donated medicine

- 1. **Definitions.** As used in this section, unless the context otherwise indicates, the following terms have the following meanings.
 - A. "Donor" has the same meaning as in Title 22, section 2700-B, subsection 1, paragraph C.
 - B. "Medicine" has the same meaning as in Title 22, section 2700-B, subsection 1, paragraph H.
 - C. "Program" means the Medicine Donation and Redispensing Program established under Title 22, section 2700-B, subsection 2.
- D. "Recipient" has the same meaning as in Title 22, section 2700-B, subsection 1, paragraph N.
- 2. Credit allowed. For tax years beginning January 1, 2022, a donor participating in the program is allowed a credit against the tax imposed by this Part in an amount equal to the sum of:
 - A. The cost to the donor of the medicine donated pursuant to the program during the taxable year as determined pursuant to the Code, Section 170(e)(3)(A); and
 - B. The verifiable cost to the donor to make the donation of the medicine to a recipient during the taxable year.
- **3. Limitation.** The amount of the credit that may be used by a donor under this section 42 for a taxable year may not exceed the amount of tax otherwise due under this Part. Any

1 2	unused credit may be carried over to the following year or years for a period not to exceed 15 years.
3 4 5 6 7	Sec. 5. Department of Health and Human Services to adopt rules regarding medicine donation program. The Department of Health and Human Services shall, within 6 months of the effective date of this Act, adopt rules to create a waiver process and a revocation process in accordance with the Maine Revised Statutes, Title 22, section 2700-B, subsection 15, paragraphs B and C.
8	SUMMARY
9 10 11 12	This bill establishes the Medicine Donation and Redispensing Program operated by nonprofit entities contracted by the Department of Health and Human Services. The program collects donations of unused medicines from health care providers, health care facilities and other sources and redispenses the medicines to qualified low-income persons.