

HOUSE AMENDMENTS TO HOUSE BILL 2645

By COMMITTEE ON HEALTH CARE

April 13

1 On page 1 of the printed bill, delete lines 4 through 28 and delete pages 2 through 10 and insert:

2 **“SECTION 1. Definitions. As used in sections 1 to 20 of this 2017 Act:**

3 **“(1) ‘Authorized collector’ means a person that enters into an agreement with a program**
4 **operator for the purpose of collecting covered drugs under a drug take-back program.**

5 **“(2)(a) ‘Covered drug’ means a drug that a covered entity has discarded or abandoned or**
6 **that a covered entity intends to discard or abandon.**

7 **“(b) ‘Covered drug’ includes:**

8 **“(A) Prescription drugs, as defined in ORS 689.005;**

9 **“(B) Nonprescription drugs, as defined in ORS 689.005;**

10 **“(C) Drugs marketed under a brand name, as defined in ORS 689.515;**

11 **“(D) Drugs marketed under a generic name, as defined in ORS 689.515;**

12 **“(E) Biological products, as described in ORS 689.522;**

13 **“(F) Drugs intended to be used by a licensed veterinarian; and**

14 **“(G) Combination products.**

15 **“(c) ‘Covered drug’ does not include:**

16 **“(A) Vitamins or supplements;**

17 **“(B) Herbal-based remedies or homeopathic drugs, products or remedies;**

18 **“(C) Products that are regulated as both cosmetics and nonprescription drugs by the**
19 **federal Food and Drug Administration;**

20 **“(D) Drugs and biological products for which a covered manufacturer administers a drug**
21 **take-back program as part of a risk evaluation and mitigation strategy under the oversight**
22 **of the federal Food and Drug Administration; or**

23 **“(E) Pet pesticide products.**

24 **“(3)(a) ‘Covered entity’ means a resident of this state or a nonbusiness entity located in**
25 **this state.**

26 **“(b) ‘Covered entity’ does not include a law enforcement agency or an entity that gen-**
27 **erates pharmaceutical waste, such as a hospital, health care clinic, office of a health care**
28 **provider, veterinary clinic or pharmacy.**

29 **“(4)(a) ‘Covered manufacturer’ means a person that manufactures prescription drugs, as**
30 **defined in ORS 689.005, that are sold within this state.**

31 **“(b) ‘Covered manufacturer’ does not include:**

32 **“(A) A person that:**

33 **“(i) Packages or repackages prescription drugs that are sold within this state or who la-**
34 **bel or relabels the containers of prescription drugs that are sold within this state; and**

35 **“(ii) Does not produce, prepare, propagate, compound, convert or process prescription**

1 **drugs that are sold within this state; or**

2 **“(B) A prepaid group practice described in ORS 441.229.**

3 **“(5) ‘Drop-off site’ means the location where an authorized collector operates a secure**
4 **repository for collecting covered drugs.**

5 **“(6) ‘Drug’ has the meaning given that term in ORS 689.005.**

6 **“(7) ‘Drug take-back organization’ means an organization designated by a covered man-**
7 **ufacturer or a group of covered manufacturers to act as an agent of the covered manufac-**
8 **turer or group of covered manufacturers for the purpose of participating in a drug take-back**
9 **program.**

10 **“(8) ‘Drug take-back program’ means a program developed and implemented by a pro-**
11 **gram operator for the collection, transportation and disposal of covered drugs for which a**
12 **plan has been approved under section 4 of this 2017 Act.**

13 **“(9) ‘Mail back service’ means a method of collecting covered drugs from a covered entity**
14 **by using prepaid, preaddressed mailing envelopes.**

15 **“(10) ‘Manufacture’ has the meaning given that term in ORS 689.005.**

16 **“(11) ‘Pharmacy’ has the meaning given that term in ORS 689.005.**

17 **“(12) ‘Potential authorized collector’ means:**

18 **“(a) A person that:**

19 **“(A) Is registered with the Drug Enforcement Administration of the United States De-**
20 **partment of Justice; and**

21 **“(B) Qualifies under federal law to collect and dispose of controlled substances, or quali-**
22 **fies under federal law to have the person’s registration modified in such a way that author-**
23 **izes the person to collect and dispose of controlled substances.**

24 **“(b) A law enforcement agency or other entity not described in paragraph (a) of this**
25 **subsection, as approved by the Department of Environmental Quality by rule.**

26 **“(13) ‘Program operator’ means a covered manufacturer, group of covered manufacturers**
27 **or drug take-back organization that develops and implements, or plans to develop and im-**
28 **plement, a drug take-back program approved by the department.**

29 **“(14) ‘Retail drug outlet’ means a retail drug outlet, as defined in ORS 689.005, that is**
30 **open to and accessible by the public.**

31 **“(15) ‘Wholesale drug outlet’ has the meaning given that term in ORS 689.005.**

32 **“SECTION 2. Requirement to Participate in Drug Take-Back Program. (1) Except as**
33 **provided in subsection (2) of this section, each covered manufacturer shall participate in a**
34 **drug take-back program that complies with the requirements of sections 1 to 20 of this 2017**
35 **Act. A covered manufacturer may participate in a drug take-back program independently,**
36 **as part of a group of covered manufacturers or by delegating the covered manufacturer’s**
37 **duties under sections 1 to 20 of this 2017 Act to a drug take-back organization.**

38 **“(2) A covered manufacturer is not required to participate in a drug take-back program**
39 **as described in subsection (1) of this section if the covered manufacturer manufactures**
40 **prescription drugs for fewer than 50 patients in this state. A covered manufacturer that**
41 **manufactures prescription drugs for fewer than 50 patients in this state must provide mail**
42 **back services to those patients instead.**

43 **“(3) If a covered manufacturer does not participate in a drug take-back program as de-**
44 **scribed in subsection (1) of this section, and does not qualify for exemption under subsection**
45 **(2) of this section, the State Board of Pharmacy may assess a fine against the covered**

1 manufacturer in an amount not to exceed \$1,000 for each day that prescription drugs man-
2 ufactured by the covered manufacturer are sold in this state.

3 **“SECTION 3. Organization of Program Operator.** The program operator of a drug take-
4 back program must be organized as an entity that is exempt from income taxes under sec-
5 tion 501(c)(3) of the Internal Revenue Code, as amended and in effect on the effective date
6 of this 2017 Act.

7 **“SECTION 4. Plans and Updated Plans for Drug Take-Back Programs.** (1) In a form and
8 manner prescribed by the Department of Environmental Quality, a program operator must
9 submit to the department a plan for participating in a drug take-back program. The de-
10 partment shall approve a proposed drug take-back program plan if the program operator
11 submits a completed application, the proposed drug take-back program meets the require-
12 ments of subsection (2) of this section and the program operator pays the fee established by
13 the department under section 15 of this 2017 Act.

14 **“(2) To be approved by the department, a proposed drug take-back program plan must:**

15 **“(a) Identify and provide contact information for the program operator and each covered**
16 **manufacturer participating in the proposed drug take-back program;**

17 **“(b) Provide for a collection system that complies with sections 6, 7 and 8 of this 2017**
18 **Act;**

19 **“(c) Provide for a disposal system that complies with section 9 of this 2017 Act;**

20 **“(d) Include policies and procedures to ensure the safe and secure handling and disposal**
21 **of covered drugs;**

22 **“(e) Include policies and procedures to ensure the security of patient information that**
23 **may be printed on the packaging of a covered drug;**

24 **“(f) Set forth a plan to cover all costs associated with the proposed drug take-back pro-**
25 **gram, with the costs of the proposed drug take-back program apportioned among each cov-**
26 **ered manufacturer participating in the proposed drug take-back program according to the**
27 **share of revenue that each covered manufacturer participating in the proposed drug take-**
28 **back program earns from making sales of prescription drugs within this state;**

29 **“(g) Set forth short-term and long-term goals with respect to the amount of covered**
30 **drugs collected under the proposed drug take-back program and with respect to fostering**
31 **public awareness of the proposed drug take-back program; and**

32 **“(h) Describe how the drug take-back program will provide convenient service in every**
33 **county in this state, including how under the drug take-back program the program operator**
34 **will:**

35 **“(A) Establish at least one drop-off site in each county in this state;**

36 **“(B) Establish at least one drop-off site in each city in this state that has 20,000 or more**
37 **residents; and**

38 **“(C) Establish additional drop-off sites in each city in this state at a rate of one drop-off**
39 **site per 20,000 residents.**

40 **“(3)(a) The drop-off site required under subsection (2)(h)(A) of this section may be the**
41 **same drop-off site as the drop-off site required under subsection (2)(h)(B) of this section.**

42 **“(b) The department may waive the requirement of subsection (2)(h)(A) of this section**
43 **with respect to an individual county if the drug take-back program plan describes how the**
44 **drug take-back program will provide mail back service in the county.**

45 **“(4)(a) Not later than 90 days after receiving a plan under subsection (1) of this section,**

1 the department shall issue an order either approving or rejecting the plan. If the department
2 rejects the plan, the department shall include in the order the reason or reasons for the re-
3 jection.

4 “(b) Not later than 60 days after issuing an order rejecting a plan under paragraph (a)
5 of this subsection, a program operator must submit to the department a revised plan for
6 participating in a drug take-back program. Not later than 90 days after receiving a revised
7 plan under this paragraph, the department shall issue an order either approving or rejecting
8 the revised plan. If the department rejects the revised plan, the department shall include in
9 the order the reason or reasons for the rejection.

10 “(c) If the department issues an order rejecting a revised plan under paragraph (b) of this
11 subsection, the department may:

12 “(A) Require the program operator to further revise the plan in accordance with the
13 processes set forth in paragraph (b) of this subsection; or

14 “(B) Impose a penalty on each covered manufacturer participating in the proposed drug
15 take-back program as described in section 14 of this 2017 Act.

16 “(d) Not later than four years after issuing an order approving a plan under paragraph
17 (a) of this subsection, a program operator must submit to the department an updated plan
18 for the continued operation of a drug take-back program, in which the program operator
19 describes any substantive changes to the drug take-back program that involve an element
20 required under subsection (2) of this section. An updated plan is subject to the approval
21 processes set forth in this subsection.

22 “(5) The department shall make each plan submitted under subsection (1) of this section
23 and each revised or updated plan submitted under subsection (4) of this section available to
24 the public.

25 “SECTION 5. Changes to Drug Take-Back Programs. (1) In a form and manner prescribed
26 by the Department of Environmental Quality, a program operator must request preapproval
27 from the department for any change to a drug take-back program that substantively alters
28 the drug take-back program. A program operator must make a request under this subsection
29 not later than 60 days before the change is to occur. For purposes of this subsection, the
30 following types of changes substantively alter a drug take-back program:

31 “(a) Changes to which covered manufacturers are participating in the drug take-back
32 program;

33 “(b) Changes involving methods used to collect covered drugs;

34 “(c) Changes involving methods used to dispose of covered drugs;

35 “(d) Changes to the policies and procedures for handling and disposing of covered drugs;

36 “(e) Changes to the policies and procedures for securing patient information that may
37 be printed on the packaging of a covered drug; and

38 “(f) Changes involving methods used to foster public awareness of the proposed drug
39 take-back program.

40 “(2) In a form and manner prescribed by the department, a program operator must notify
41 the department of any change to a drug take-back program that does not substantively alter
42 the drug take-back program. A program operator must provide notice under this subsection
43 not later than 30 days before the change is to occur. For purposes of this subsection, the
44 following types of changes do not substantively alter a drug take-back program:

45 “(a) Changes to the location of a drop-off site; and

1 “(b) Changes to the schedule or location of collection events held pursuant to section 8
2 of this 2017 Act.

3 “(3) In a form and manner prescribed by the department, a program operator must notify
4 the department, not later than 30 days after the change occurs, of any change involving:

5 “(a) The contact information for the program operator;

6 “(b) The contact information for a covered manufacturer participating in the drug take-
7 back program; or

8 “(c) The ownership of a covered manufacturer participating in the drug take-back pro-
9 gram.

10 “SECTION 6. Authorized Collectors. (1) Before submitting to the Department of Envi-
11 ronmental Quality a plan under section 4 (1) of this 2017 Act, a program operator must:

12 “(a) Solicit potential authorized collectors for the purpose of collecting covered drugs
13 under the drug take-back program; and

14 “(b) Enter into agreements with all willing authorized collectors for the purpose of col-
15 lecting covered drugs under the drug take-back program.

16 “(2) In entering into agreements under this section, a program operator must enter into
17 an agreement, insofar as the agreement is practicable and cost-effective, with each retail
18 drug outlet, hospital with an on-site pharmacy, health care clinic with an on-site pharmacy
19 and law enforcement agency that demonstrates to the program operator the capability of
20 being an authorized collector.

21 “(3) An agreement entered into under this section must require an authorized collector
22 to comply with all state laws and rules and federal laws and regulations governing the
23 keeping of covered drugs, as identified by the State Board of Pharmacy by rule.

24 “(4) In approving plans and updated plans under section 4 of this 2017 Act, and in preap-
25 proving changes under section 5 of this 2017 Act, the department shall, insofar as is practi-
26 cable, ensure that each resident of this state has adequate access to a drop-off site.

27 “SECTION 7. Drop-off Sites. (1) The system by which a program operator collects covered
28 drugs under a drug take-back program must be safe and secure to use on an ongoing basis.

29 “(2) For purposes of a drug take-back program:

30 “(a) A drop-off site must be available for use during the normal business hours of the
31 authorized collector;

32 “(b) A drop-off site must use a secure repository in compliance with all state laws and
33 rules and federal laws and regulations governing the keeping of covered drugs in repositories,
34 as identified by the State Board of Pharmacy by rule;

35 “(c) The secure repository used at a drop-off site must be serviced and emptied as often
36 as necessary to avoid reaching capacity;

37 “(d) A sign must be affixed to the secure repository used at a drop-off site that promi-
38 nently displays a toll-free telephone number and a website address that a covered entity may
39 use to provide feedback to the program operator about the drug take-back program; and

40 “(e) If a drop-off site is located at a long-term care facility, as defined in ORS 442.015,
41 only individuals who reside at the long-term care facility may use the drop-off site.

42 “SECTION 8. Covered Drug Collection Events. If a drug take-back program provides for
43 the periodic collection of covered drugs through collection events, the collection events must
44 be conducted:

45 “(1) In accordance with the applicable regulations and protocols of the Drug Enforcement

1 Administration of the United States Department of Justice; and

2 “(2) In coordination with the local solid waste management officials who have jurisdiction
3 over the impacted area.

4 “SECTION 9. Disposal of Covered Drugs. Covered drugs collected at a drop-off site must
5 be disposed of:

6 “(1) At a hazardous waste disposal facility that meets the requirements of 40 C.F.R. parts
7 264 and 265, as in effect on the effective date of this 2017 Act; or

8 “(2) At a municipal solid waste incinerator that is permitted to accept pharmaceutical
9 waste.

10 “SECTION 10. Public Awareness. (1) A program operator must promote, and provide
11 public outreach and education about, the safe and secure collection of covered drugs under
12 the drug take-back program through the use of a website and written materials provided at
13 the time a covered drug is delivered to a covered entity, and through the use of any signage,
14 advertising or other means that the program operator determines is an effective means of
15 fostering public awareness. At a minimum, a program operator must:

16 “(a) Promote the safe and secure storage of covered drugs by covered entities;

17 “(b) Disseminate information on the inherent risks of improperly storing or disposing of
18 opioids or opiates;

19 “(c) Discourage the disposal of covered drugs in the garbage or sewer system;

20 “(d) Promote the disposal of covered drugs through the use of the drug take-back pro-
21 gram;

22 “(e) Establish a toll-free telephone number and a website address that a covered entity
23 may use to contact the program operator about the drug take-back program;

24 “(f) Publicize information on the location of drop-off sites and collection processes;

25 “(g) Work with authorized collectors to develop a readily recognizable and consistent
26 design for repositories to be used at drop-off sites and to develop clear, standardized in-
27 structions to covered entities on how to use those repositories; and

28 “(h) Conduct a survey once every two years of covered entities and pharmacists, health
29 care providers and veterinarians who interact with covered entities.

30 “(2) For purposes of conducting a survey under subsection (1)(h) of this section:

31 “(a) In a form and manner prescribed by the Department of Environmental Quality, a
32 program operator must submit proposed survey questions to the department for preapproval.

33 “(b) Surveys must:

34 “(A) Measure public awareness of the drug take-back program;

35 “(B) Assess the extent to which drop-off sites, collection events and mail back services
36 are convenient and easy to use; and

37 “(C) Assess knowledge of and attitudes toward the risks posed by improperly storing
38 covered drugs and improperly discarding or abandoning covered drugs.

39 “(3) A program operator shall coordinate with other program operators under this sec-
40 tion to ensure that covered entities can easily identify, understand and access the services
41 provided by all drug take-back programs that are operational in this state. At a minimum,
42 all of the drug take-back programs that are operational in this state must provide a single
43 toll-free telephone number and a single website address that a covered entity may use to
44 contact program operators about the drug take-back programs and to acquire information
45 about the location of the drop-off sites and the collection processes of the drug take-back

1 programs.

2 “(4) Upon request, a retail drug outlet, hospital with an on-site pharmacy or health care
3 clinic with an on-site pharmacy must provide a covered entity with written materials pro-
4 vided by a program operator for the purpose of promoting the safe and secure collection of
5 covered drugs at the time that a covered drug is delivered to a covered entity.

6 “SECTION 11. Annual Report to the Department of Environmental Quality. (1) In a form
7 and manner prescribed by the Department of Environmental Quality, a program operator
8 must submit to the department an annual report on the development, implementation and
9 operation of the drug take-back program that includes:

10 “(a) A list of covered manufacturers participating in the drug take-back program;

11 “(b) The total amount, by weight, of covered drugs collected under the drug take-back
12 program;

13 “(c) The amount, by weight, of covered drugs collected under each method of collecting
14 drugs under the drug take-back program;

15 “(d) The address of each drop-off site used under the drug take-back program;

16 “(e) The date and location of collection events held pursuant to section 8 of this 2017 Act;

17 “(f) The method or methods used to transport covered drugs collected under the drug
18 take-back program;

19 “(g) The disposal technologies or processes used pursuant to section 9 of this 2017 Act;

20 “(h) Whether any safety or security problems occurred during the collection, transpor-
21 tation or disposal of covered drugs and, if a problem occurred, a summary of possible resolu-
22 tions;

23 “(i) A summary of the drug take-back program’s compliance with section 10 of this 2017
24 Act; and

25 “(j) A summary of the annual expenditures of the drug take-back program.

26 “(2) The department shall review reports submitted under this section and approve those
27 that comport with the requirements of this section. If the department does not approve a
28 report under this subsection, the department shall provide the program operator with writ-
29 ten notice of revisions necessary for approval.

30 “(3) The department shall publish approved reports submitted under this section on a
31 website of the department.

32 “SECTION 12. Funding Drug Take-Back Programs. Each covered manufacturer or group
33 of covered manufacturers must pay all costs associated with participating in a drug take-
34 back program. A program operator or authorized collector may not impose a charge, in-
35 cluding any charge imposed at the time that a covered drug is sold to or collected from a
36 covered entity, against covered entities for the purpose of recouping the costs of a drug
37 take-back program.

38 “SECTION 13. Inspection and Audit. The Department of Environmental Quality shall
39 ensure compliance with sections 1 to 20 of this 2017 Act by:

40 “(1) Entering into an agreement with the State Board of Pharmacy whereby the board,
41 during routine inspections of retail drug outlets:

42 “(a) Inspects drop-off sites located at retail drug outlets; and

43 “(b) Informs the department of drop-off sites that are not in compliance with sections 1
44 to 20 of this 2017 Act;

45 “(2) Inspecting drop-off sites not located retail drug outlets; and

1 “(3) Auditing the records of program operators.

2 “**SECTION 14. Enforcement and Discipline.** (1)(a) The Department of Environmental
3 **Quality shall send notice to a covered manufacturer if the covered manufacturer fails to**
4 **participate in a drug take-back program as required by sections 1 to 20 of this 2017 Act.**
5 **Notice sent under this subsection must explain the possible penalties that may be incurred**
6 **by the covered manufacturer for committing the violation.**

7 “(b) If, 120 days after the date on which the department sent notice under paragraph (a)
8 of this subsection, the covered manufacturer continues to sell drugs within this state with-
9 out participating in a drug take-back program, the department may impose a civil penalty
10 against the covered manufacturer for an amount that does not exceed \$10,000 for each day,
11 beginning on the 121st day, that the covered manufacturer commits the violation.

12 “(2)(a) The department shall send notice to a program operator if the department deter-
13 mines that the program operator’s drug take-back program is not in compliance with
14 sections 1 to 20 of this 2017 Act. Notice sent under this subsection must explain the possible
15 penalties that may be incurred by the program operator for committing the violation.

16 “(b) If a drug take-back program continues not to be in compliance with sections 1 to 20
17 of this 2017 Act 30 days after the date on which the department sent notice under paragraph
18 (a) of this subsection, the department may:

19 “(A) Impose a civil penalty against the program operator for an amount that does not
20 exceed \$10,000 for each day, beginning on the 31st day, that the program operator commits
21 the violation; and

22 “(B) If the department determines that the violation presents a risk to public health and
23 safety, suspend, in whole or in part, operation of the drug take-back program.

24 “(3) The department shall deposit moneys collected through the imposition of civil pen-
25 alties under this section into the Secure Drug Take-Back Account established under section
26 16 of this 2017 Act.

27 “**SECTION 15. Fees.** (1) The Department of Environmental Quality shall establish the
28 following fees for the purpose of paying the costs of administering sections 1 to 20 of this
29 2017 Act:

30 “(a) A one-time fee for reviewing a drug take-back program plan submitted under section
31 4 of this 2017 Act.

32 “(b) An annual fee for expenses associated with the ongoing costs of administering
33 sections 1 to 20 of this 2017 Act.

34 “(c) An hourly fee for any other work that the department must do on behalf of a drug
35 take-back program.

36 “(2) Fees established under subsection (1) of this section must be reasonably calculated
37 to pay the expenses associated with the purpose for which the fee is collected.

38 “(3) The department shall deposit fee moneys collected pursuant to this section into the
39 Secure Drug Take-Back Account established under section 16 of this 2017 Act.

40 “**SECTION 16. Secure Drug Take-Back Account.** (1) The Secure Drug Take-Back Account
41 is established in the State Treasury, separate and distinct from the General Fund. Interest
42 earned by the account shall be credited to the account. All moneys in the account are con-
43 tinuously appropriated to the Department of Environmental Quality purposes of administer-
44 ing sections 1 to 20 of this 2017 Act.

45 “(2) The Secure Drug Take-Back Account shall consist of all moneys deposited into or

1 credited to the account, including:

2 “(a) Moneys collected under and deposited into the account pursuant to sections 14 and
3 15 of this 2017 Act; and

4 “(b) Moneys appropriated or transferred to the account by the Legislative Assembly.

5 “SECTION 16a. Liability. An authorized collector, covered manufacturer, drug take-back
6 organization, drug take-back program, potential authorized collector and program operator
7 may not be held criminally or civilly liable for any function, duty or power performed for the
8 purpose of complying with sections 1 to 20 of this 2017 Act, unless the function, duty or
9 power was performed with gross negligence or willful and wanton misconduct.

10 “SECTION 17. Antitrust Immunity. The Legislative Assembly declares that program op-
11 erators providing covered entities with drug take-back program services, including the safe
12 and secure collection, transportation and disposal of covered drugs, is in the best interests
13 of the public. Therefore, the Legislative Assembly declares its intent that participating in
14 drug take-back programs as required by sections 1 to 20 of this 2017 Act shall be exempt
15 from state antitrust laws. The Legislative Assembly further declares its intent to provide
16 immunity for participating in drug take-back programs as required by sections 1 to 20 of this
17 2017 Act from federal antitrust laws. This section does not authorize any person to engage
18 in activities or to conspire to engage in activities that constitute per se violations of state
19 or federal antitrust laws that are not authorized under sections 1 to 20 of this 2017 Act.

20 “SECTION 18. Confidentiality. Any proprietary information or any financial, manufac-
21 turing or sales information or data that the Department of Environmental Quality receives
22 from a covered manufacturer or drug take-back organization under sections 1 to 20 of this
23 2017 Act is confidential and not subject to public disclosure under ORS 192.410 to 192.505,
24 except that the department may disclose summarized information or aggregated data if the
25 information or data does not directly or indirectly identify the proprietary information or the
26 financial, manufacturing or sales information or data of a specific covered manufacturer or
27 drug take-back organization.

28 “SECTION 19. Nonapplicability of the Uniform Controlled Substances Act. The provisions
29 of ORS chapter 475 do not apply to a program operator, insofar as the program operator is
30 collecting, transporting and disposing of covered drugs pursuant to sections 1 to 20 of this
31 2017 Act.

32 “SECTION 19a. Moratorium. Except as expressly authorized by state law, the governing
33 body of a city or a county may not enact an ordinance requiring, or otherwise establishing
34 a program for, the collection of covered drugs by nongovernmental entities through the use
35 of drop-off sites or mail back services.

36 “SECTION 20. Rulemaking. The Department of Environmental Quality shall adopt any
37 rules necessary for the effective administration of sections 1 to 20 of this 2017 Act. Upon
38 request, the State Board of Pharmacy shall assist the department in adopting rules under
39 this section.

40 “SECTION 21. Report to the Legislative Assembly. Not later than September 15, 2019, the
41 Department of Environmental Quality shall submit a report to the Legislative Assembly, in
42 the manner provided by ORS 192.245, describing the department’s administration of sections
43 1 to 20 of this 2017 Act. The report must include:

44 “(1) An evaluation of whether the collection of covered drugs by drug take-back programs
45 that are operational in this state is safe and secure;

1 “(2) A summary of available data on whether the drug take-back programs are effective
2 at reducing the risks posed by improperly stored covered drugs and improperly discarded or
3 abandoned covered drugs; and

4 “(3) A comprehensive review of the strategies employed by drug take-back programs to
5 achieve the requirements of sections 1 to 20 of this 2017 Act.

6 “SECTION 21a. Repeals. (1) Sections 1 to 20 of this 2017 Act are repealed on September
7 15, 2029.

8 “(2) Section 21 of this 2017 Act is repealed on December 31, 2019.

9 “SECTION 22. Required Date for Initial Participation. (1) Each program operator, as de-
10 fined in section 1 of this 2017 Act, shall submit to the Department of Environmental Quality
11 a plan for participating in a drug take-back program as required by section 4 (1) of this 2017
12 Act on or before July 1, 2018.

13 “(2) Each drug take-back program must be operational by February 1, 2019.

14 “SECTION 23. Operative Date. (1) Sections 1 to 20 of this 2017 Act become operative on
15 January 1, 2018.

16 “(2) The Department of Environmental Quality and the State Board of Pharmacy may
17 take any action before the operative date specified in subsection (1) of this section that is
18 necessary to enable the department or board to exercise, on and after the operative date
19 specified in subsection (1) of this section, all the duties, powers and functions conferred on
20 the department or board by sections 1 to 20 of this 2017 Act.

21 “SECTION 24. Captions. The section captions used in this 2017 Act are provided only for
22 the convenience of the reader and do not become part of the statutory law of this state or
23 express any legislative intent in the enactment of this 2017 Act.

24 “SECTION 25. Effective Date. This 2017 Act takes effect on the 91st day after the date
25 on which the 2017 regular session of the Seventy-ninth Legislative Assembly adjourns sine
26 die.”.