

Submitter: Dr. Victoria Travis
On Behalf Of: MED-Project USA
Committee: Senate Committee on Health Care
Measure: SB411

Chair Patterson, Vice-Chair Hayden, and members of the Senate Committee on Health Care:

My name is Dr. Victoria Travis, and I am the National Program Director at MED-Project. It is my privilege to represent MED-Project at this hearing of the Senate Committee on Health Care today. I am testifying today based on MED-Project's extensive practical experience operating mandated drug take-back programs. Allowing the use of state and federal permitted medical waste incineration facilities for the destruction of drugs will meet US Environmental Protection Agency and US Drug Enforcement Administration destruction standards, increase the safety and security of the Oregon drug take back program, and allow implementation of the Oregon drug take back law to comply with the 2018 federal 9th Circuit Court of Appeals decision in Daniels Sharpsmart v. Smith, reported at 889 F.3d 608.

MED-Project is an organization that operates **safe, effective, and compliant unwanted medication return programs** for residents. We operate 22 approved programs in 6 states serving over 80 million residents across the country.

MED-Project has provided collection services to Oregonians since July 2021, following the approval of our product stewardship plan in May of that year. We **successfully removed over 50,000 pounds** of unused or expired medicine from Oregon households in our first year of operation through a network of 250 kiosk drop-off sites and over 100 mail-back distribution locations spread across all 36 counties in Oregon.

In addition to our collection services, MED-Project provides outreach and education across the state through our call center, website, and promotion programs. Our call center and website provide information to Oregonians 24 hours a day in over 200 languages.

MED-Project operates under many rules and regulations, including the Oregon Drug Take-Back Law. The Drug Take-Back Law contains a unique provision that prohibits the use of medical waste incineration for the disposal of household generated unwanted medicines. This prohibition prevents operators of drug take-back programs like MED-Project from utilizing permitted and compliant destruction facilities when disposing of medicines that Oregonians have chosen to remove from their homes. MED-Project has worked with internationally known environmental consultants to assess the effectiveness of medical waste incinerators as compared to hazardous waste incinerators and municipal waste combustion and has generally found that the evaluated hospital, medical, and infectious waste incinerators had more stringent regulatory emissions limits than hazardous waste incinerators or municipal waste combustors.

MED-Project is a pro-competitive organization that bids for services on the free market, and disposal services for unwanted medicines is crucial to the operation of a drug take-back program. The Drug Take-Back Law prevents MED-Project from using the potentially lowest cost option for compliant destruction that meets or exceeds all the local, state, and federal requirements for that destruction facility. This limits our ability to operate a key element of our business in the most competitive way and creates logistical complexities that threaten the safe and secure destruction of drugs.

Additionally, Oregon's Drug Take-Back Law conflicts with a 2018 appellate case that was decided in the federal 9th Circuit Court of Appeals, *Daniels Sharpsmart v. Smith* (889 F.3d 608 (9th Cir. 2018)). The 9th Circuit made clear in *Daniels Sharpsmart* that states cannot directly restrict commerce – including the disposal of waste removed from a state – occurring wholly out of state, by disallowing the use of federally permitted destruction facilities located in other states. Senate Bill 0411 would align Oregon's Drug Take-Back Law with the binding precedent of the *Daniels Sharpsmart* case by allowing the Oregon Department of Environmental Quality to approve drug take-back program plans providing for the use of medical waste incineration facilities.

Adopting Senate Bill 411 would put Oregon in alignment with other states with drug-take back programs that allow a program operator to use all available compliant destruction facilities. These states include California, Illinois, Massachusetts, Maine, New York, and Washington.

By prohibiting the use of a compliant method of destruction, the Oregon Drug Take-Back Law creates needless complexity in the collection, transport, and destruction of unwanted household medicine because it forces MED-Project to steer the business away from compliant facilities used by its vendors and create unique processes and supply chains for the State of Oregon. These unique systems drive increased costs for MED-Project, and with increased complexity, comes increased potential diversion risks for unwanted medicine collected from Oregonians.

MED-Project supports Senate Bill 0411 and requests that the Senate Committee on Health Care consider an amendment to add an emergency clause making the bill effective upon passage.

Thank you again for the opportunity to represent MED-Project today and to express our support for Senate Bill 411.

Sincerely yours,



Dr. Victoria Travis, PharmD, MS, MBA
National Program Director
MED-Project USA