

# HAZARDOUS WASTE PHARMACEUTICALS & AMENDMENT TO THE NICOTINE LISTING (P075) FINAL RULE

PUBLIC WEBINARS PRESENTED BY EPA

FEBRUARY & MARCH 2019

Introduction to  
Part 266 Subpart P

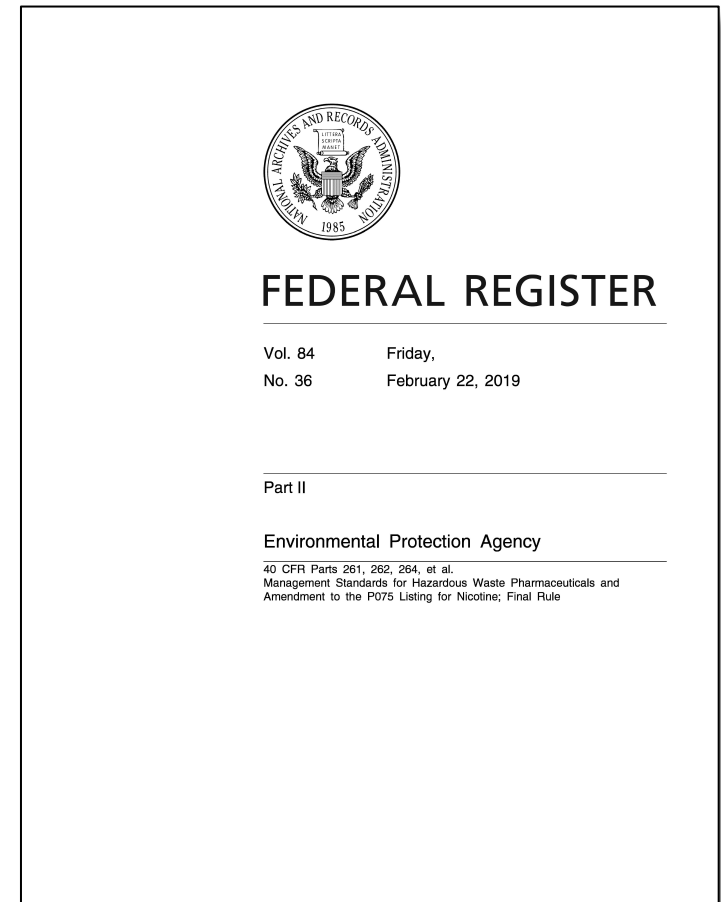


# OUTLINE

1. Goals of the Pharmaceuticals Rule
2. Effective Dates & State Adoption
3. Amendment of the Nicotine Listing
4. Reverse Distribution and Reverse Logistics
5. Part 266 Subpart P Overview
  - Definitions
  - Applicability
  - Healthcare Facility Standards
  - VSQG Healthcare Facilities
  - Sewer Ban
  - DEA Controlled Substances
  - Empty Containers
  - Shipping
  - Reverse Distributor Standards

# FEDERAL REGISTER PUBLICATION

- The final rule was published in the Federal Register on February 22, 2019
- 84 FR 5816
- FR publication date drives
  - Effective dates
  - State adoption deadlines





# GOALS OF THE PHARMACEUTICALS RULE

## SECTION I



# GOALS OF THE PHARMACEUTICALS RULE

- Create regulations that are a better fit for the healthcare sector for the management of hazardous waste pharmaceuticals
- Eliminate the intentional sewerage of hazardous waste pharmaceuticals
- Reduce overlapping regulations (e.g., DEA, FDA)
- Provide regulatory clarity and national consistency on how RCRA applies to reverse distribution and reverse logistics
- Provide regulatory relief to healthcare facilities that are strictly regulated as large quantity generators even when generating small amounts of nicotine replacement therapies



# EFFECTIVE DATES & STATE ADOPTION

## SECTION II



## EFFECTIVE DATE - AMENDMENT TO NICOTINE LISTING

- The effective date will be August 21, 2019
- The amendment to the nicotine listing is effective 6 months after publication in the Federal Register in:
  - Non-authorized states: Iowa, Alaska,
  - Indian Country
  - US Territories (except Guam)
- Once effective, the amendment to the nicotine listing applies to any generator of waste OTC NRTs; it is not limited to healthcare facilities and reverse distributors

EFFECTIVE DATE



# STATE ADOPTION - NICOTINE AMENDMENT

- In authorized states, the amendment to the nicotine listing is effective only after the state adopts the amendment
- The amendment to the nicotine listing is considered LESS stringent, therefore:
  - Authorized states are NOT required to adopt the amendment to the nicotine listing
  - Authorized states do NOT have a deadline to adopt the amendment to the nicotine listing



# EFFECTIVE DATE - PART 266 SUBPART P

- The effective date will be August 21, 2019
- Subpart P is effective 6 months after publication in the Federal Register in:
  - Non-authorized states: Iowa, Alaska,
  - Indian Country
  - US Territories (except Guam)

EFFECTIVE DATE



# STATE ADOPTION - PART 266 SUBPART P

- In authorized states, Subpart P is effective only after the state adopts Subpart P
- Subpart P is considered **MORE** stringent; therefore authorized states are required to adopt it
  - Promotes stakeholders' request for national consistency
- State adoption deadlines:
  - Authorized states have until July 1, 2021 to adopt Subpart P
  - Authorized states that require a statutory amendment, have until July 1, 2022 to adopt Subpart P

## STATE ADOPTION DEADLINES

2021

July 1

2022

July 1

# EFFECTIVE DATE – SEWER PROHIBITION

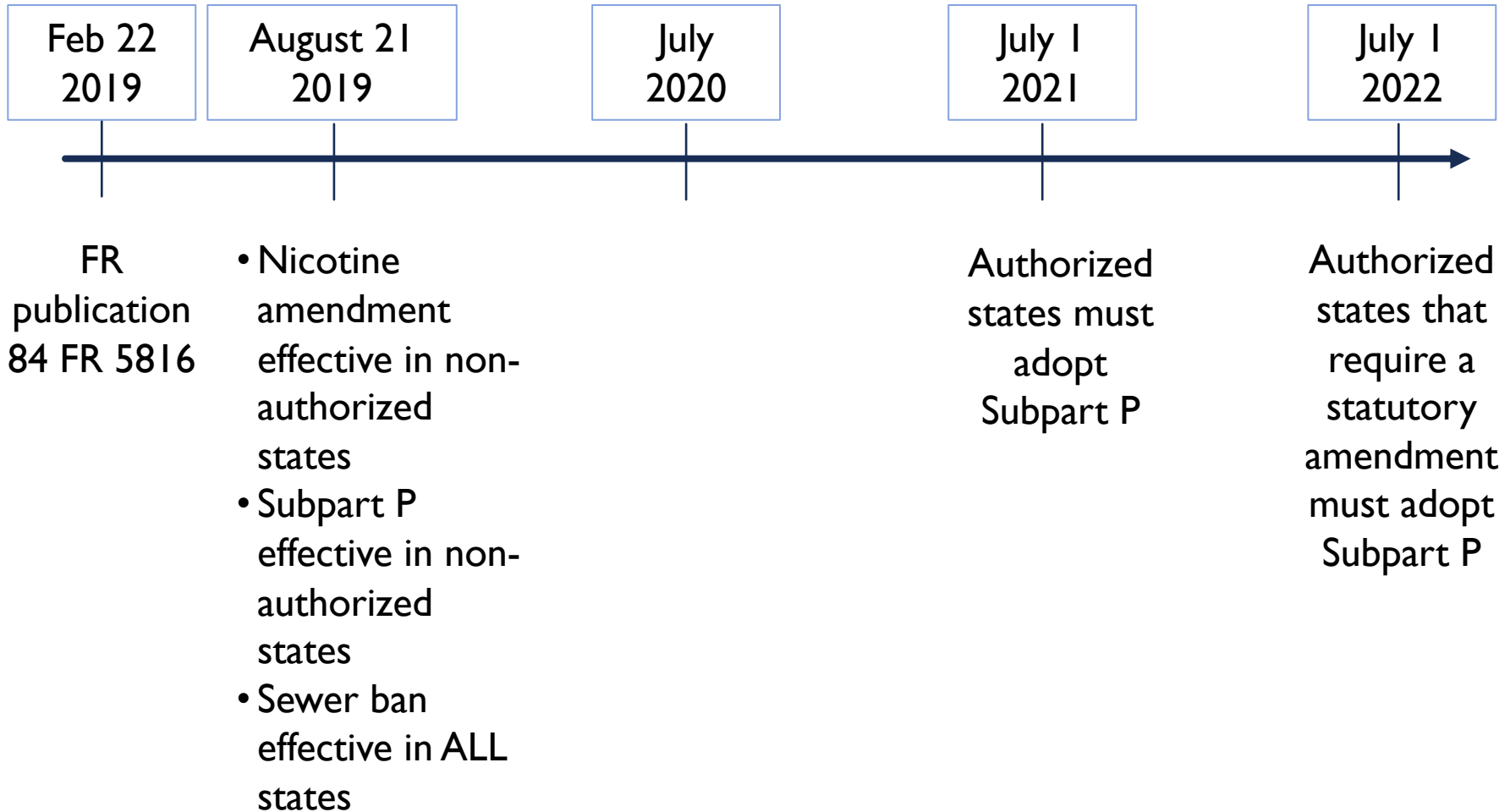
- The prohibition on sewerage hazardous waste pharmaceuticals is promulgated under the authority of Hazardous and Solid Waste Amendments (HSWA)
- The sewer prohibition is effective in ALL states 6 months after publication in the Federal Register, regardless of whether the state
  - Is authorized, or
  - Has adopted Subpart P
- The effective date of the sewer prohibition will be August 21, 2019 for ALL states

EFFECTIVE DATE



FOR ALL STATES

# EFFECTIVE DATES & STATE ADOPTION TIMELINE





# AMENDMENT OF NICOTINE LISTING

## SECTION III



# AMENDMENT OF THE NICOTINE LISTING

- The P075 listing for nicotine is being amended such that FDA-approved over-the-counter nicotine replacement therapies will no longer be included under the P075 listing for hazardous waste
  - EPA has concluded that nicotine patches, gums and lozenges do not meet the regulatory criteria for acute hazardous waste
  - Nicotine patches, gums and lozenges can be discarded as non-hazardous waste



≠ P075

# NICOTINE IS STILL LISTED AS P075

- Nicotine continues to be a listed, acute hazardous waste with the hazardous waste code P075
- Other unused formulations of nicotine will still be considered P075 when discarded, including
  - E-liquids/e-juices in e-cigarettes, cartridges, or vials
  - Prescription nicotine (e.g., nasal spray, inhaler)
  - Legacy pesticides containing nicotine
  - Nicotine used in research and manufacturing



= P075



# REVERSE DISTRIBUTION & LOGISTICS

## SECTION IV





# REVERSE DISTRIBUTION vs REVERSE LOGISTICS

We have adopted the terminology suggested by a significant number of commenters that distinguishes between:

- **REVERSE DISTRIBUTION** of
  - Prescription (Rx) pharmaceuticals and
- **REVERSE LOGISTICS** of
  - Nonprescription pharmaceuticals (e.g., OTCs, supplements, etc.)
  - All other unsold retail items

# REVERSE LOGISTICS

## NON-RX HW PHARMACEUTICALS & OTHER UNSOLD RETAIL ITEMS

- Commenters noted that reverse logistics centers are designed to
  - evaluate unsold retail items including nonprescription pharmaceuticals
  - analyze secondary markets, and
  - assess the suitability of the unsold retail items for reuse in those secondary markets
- The final rule reaffirms & codifies EPA's long standing policy that nonprescription pharmaceuticals (e.g., OTCs) that are sent through reverse logistics are not wastes at the healthcare or retail facility IF they have a reasonable expectation of being lawfully used/reused for their intended purpose or reclaimed
- The preamble to the final rule reaffirms the same policy for all unsold retail items (other than prescription pharmaceuticals)

# Reverse Logistics of Unsold Retail Items & Non-Rx Pharms

Reasonable Expectation of Use/Reuse or Reclamation



Healthcare Facility

No Reasonable Expectation of Use/Reuse or Reclamation



Reverse Logistics Center



Donate



Sell



Recycle



Repair



HW  
TSDF



Non-Compliant  
Disposal



Sewer

# REVERSE LOGISTICS POLICY: THEN AND NOW

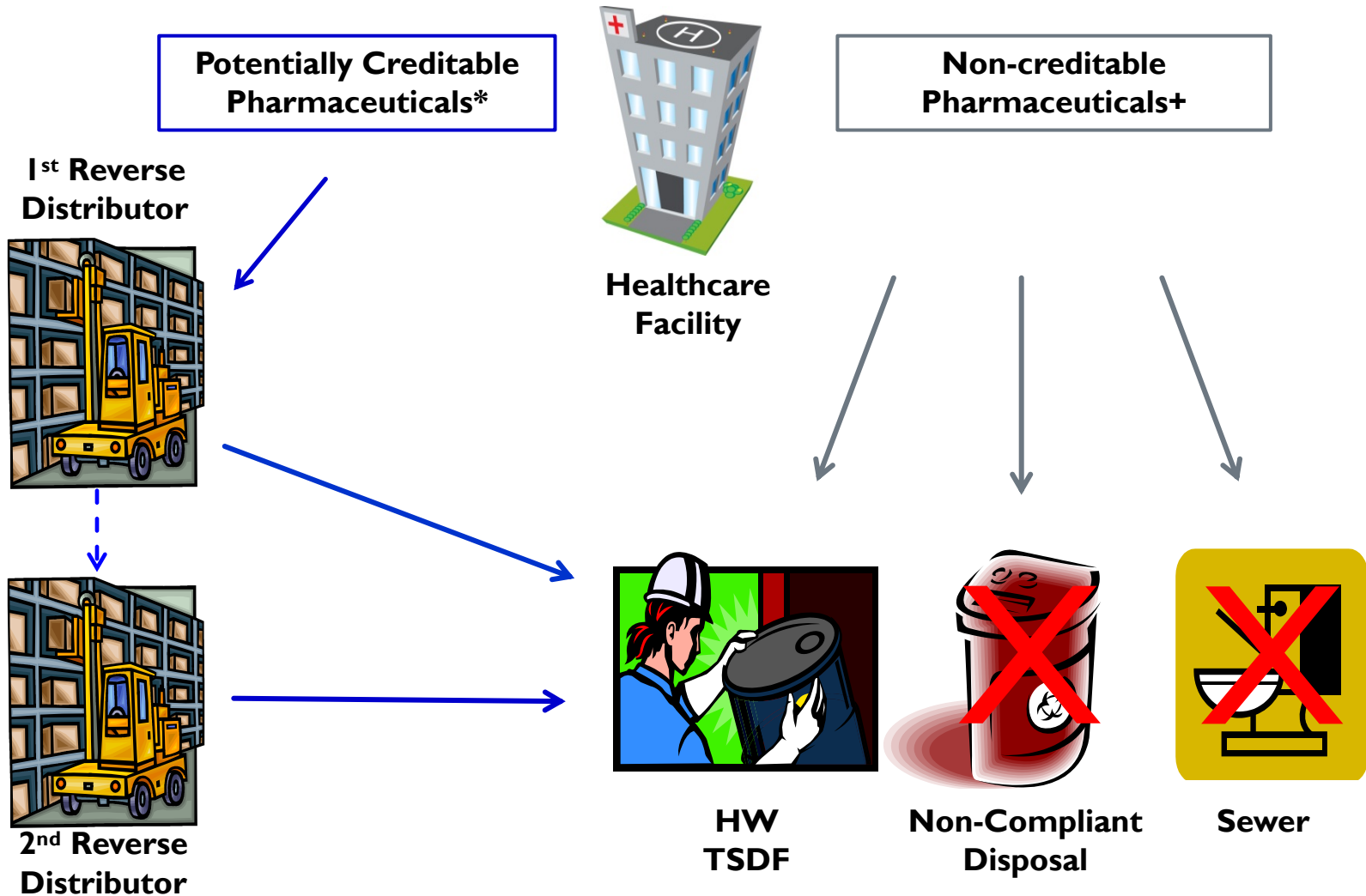
| <b>THEN</b><br><b>May 16, 1991 memo</b>   | <b>NOW</b><br><b>Pharmaceuticals Final Rule</b>   |
|---|---|
| <p>...to the extent that the materials involved are unused commercial chemical products with a <u>reasonable expectation</u> of being recycled in some way when returned, the materials are not considered as wastes...</p> <p>RCRA Online #11606</p> | <p>Nonprescription pharmaceuticals and other retail items that are sent through reverse logistics are not solid wastes at the retail store if they have a <u>reasonable expectation</u> of being legitimately use/reused (e.g., lawfully redistributed for their intended purpose) of reclaimed</p> <p>also see § 266.501(g)(2)</p> |

# REVERSE DISTRIBUTION

## RX HW PHARMACEUTICALS

- Commenters confirmed that
  - reverse distributors receive shipments of unused/expired prescription pharmaceuticals from healthcare facilities and, on behalf of manufacturers, facilitate the process of crediting healthcare facilities for these unused pharmaceuticals
  - prescription pharmaceuticals at RDs are not reused, nor resold, and are discarded
- The final rule maintains the position from the proposed rule that prescription pharmaceuticals moving through reverse distribution are wastes at the healthcare facility
- The fact that the hazardous waste pharmaceuticals have value in the form of manufacturer credit has allowed us to take a tailored and more flexible regulatory approach
- EPA developed a regulatory system that is designed with existing business practices in mind for unused/expired prescription pharmaceuticals that are sent through reverse distribution

# Reverse Distribution of Rx HW Pharmaceuticals



\* Unsold/unused pharmaceuticals that have a reasonable expectation of receiving credit from the manufacturer  
+ Pharmaceuticals with no reasonable expectation of receiving credit from the manufacturer

# REVERSE DISTRIBUTION v REVERSE LOGISTICS

| Reverse Distribution   | Reverse Logistics |
|--|-------------------|
| Rx pharmaceuticals   |                   |
| No redistribution occurs   |                   |
| Rx pharmaceuticals sent to reverse distributors <u>are solid waste</u> at the healthcare facility  |                   |
| <p>In Part 266 Subpart P, which is</p> <ul style="list-style-type: none"> <li>• Effective in non-authorized states 6 months after publication</li> <li>• Effective in authorized states when state adopts Subpart P</li> </ul> |                   |

# REVERSE DISTRIBUTION v REVERSE LOGISTICS

| Reverse Distribution  | Reverse Logistics   |
|---|---|
| Rx pharmaceuticals  | Non-Rx pharmaceuticals <ul style="list-style-type: none"> <li>e.g., OTCs &amp; dietary supplements</li> </ul> All other unsold retail items   |
| No redistribution occurs  | Redistribution sometimes occurs via: <ul style="list-style-type: none"> <li>Donation</li> <li>Liquidation (secondary market)</li> </ul>   |
| Rx pharmaceuticals sent to reverse distributors <u>are solid waste</u> at the healthcare facility   | Non-Rx pharmaceuticals and other unsold retail items sent to reverse logistics <u>are not solid waste</u> IF there is a reasonable expectation of legitimate use/reuse or reclamation |
| In Part 266 Subpart P, which is <ul style="list-style-type: none"> <li>Effective in non-authorized states 6 months after publication</li> <li>Effective in authorized states when state adopts Subpart P</li> </ul> | Newly codified in Part 266 Subpart P. But affirms existing policy <ul style="list-style-type: none"> <li>Effective immediately federally</li> <li>Check with your state</li> </ul>    |





# PART 266 SUBPART P

## SECTION V



## PART 266 SUBPART P – NEW TERMS DEFINED

- Pharmaceutical
- Hazardous waste pharmaceutical
  - Non-creditable hazardous waste pharmaceutical
  - Potentially creditable hazardous waste pharmaceutical
  - Evaluated hazardous waste pharmaceutical
- Healthcare facility
  - Long-term care facility
- Reverse distributor

# DEFINITION OF PHARMACEUTICAL

*Pharmaceutical* means

- any drug or dietary supplement for use by humans or other animals
- any electronic nicotine delivery system (ENDS)
  - e.g., electronic cigarette or vaping pen
- any liquid nicotine/e-liquid packaged for retail sale for use in electronic nicotine delivery systems
  - e.g., pre-filled cartridges or vials

## DEFINITION OF PHARMACEUTICAL (CONTINUED)

*Pharmaceutical* includes, but is not limited to:

- Dietary supplements
- Prescription drugs
- Over-the-counter drugs
- Homeopathic drugs
- Compounded drugs
- Investigational new drugs
- Pharmaceuticals remaining in non-empty containers
- PPE contaminated with pharmaceuticals
- Clean-up material from spills of pharmaceuticals

*Pharmaceutical* does not include:

- Dental amalgam
- Sharps
- Medical waste

# DEFINITION OF HAZ WASTE PHARMACEUTICAL

*Hazardous Waste Pharmaceutical* means

- A pharmaceutical that is a solid waste, as defined in § 261.2, and
  - Exhibits one or more characteristics or
  - Is listed
- A pharmaceutical is not a solid waste, as defined in § 261.2, and therefore not a hazardous waste pharmaceutical, if it is legitimately used/reused (e.g., lawfully donated for its intended purpose) or reclaimed
- An over-the-counter pharmaceutical, dietary supplement, or homeopathic drugs is not a solid waste, as defined in § 261.2, and therefore not a hazardous waste pharmaceutical, if it has a reasonable expectation of being legitimately used/reused (e.g., lawfully redistributed for its intended purpose) or reclaimed

## TYPES OF HAZ WASTE PHARMACEUTICALS

There are 3 types of *Hazardous Waste Pharmaceuticals*:

1. Non-creditable hazardous waste pharmaceutical
2. Potentially creditable hazardous waste pharmaceutical
3. Evaluated hazardous waste pharmaceutical

# 3 Types of HW Pharmaceuticals

Healthcare Facility



HW  
TSDf

- I. Non-Creditable**
- Broken or leaking
  - Repackaged
  - Dispensed
  - Expired > 1 yr
  - Investigational new drugs
  - Contaminated PPE
  - Floor sweepings
  - Clean-up material

# 3 Types of HW Pharmaceuticals

**1<sup>st</sup> Reverse Distributor**



## 2. Potentially Creditable



- Original manufacturer packaging (except recalls)
- Undispensed
- Unexpired or less than 1-yr past expiration

**Healthcare Facility**



I. Non-Creditable



**HW TSDF**

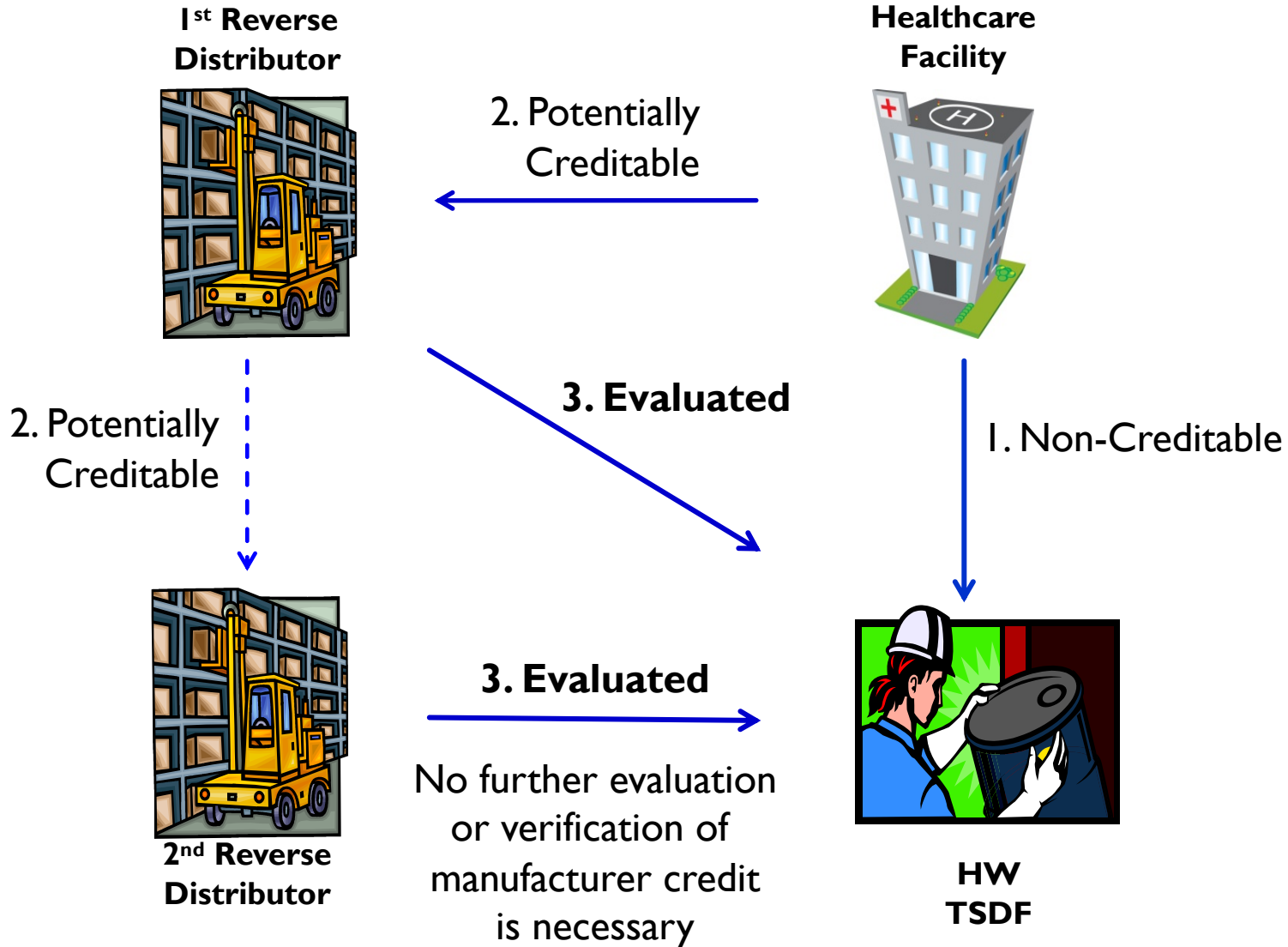
## 2. Potentially Creditable



**2<sup>nd</sup> Reverse Distributor**



# 3 Types of HW Pharmaceuticals



## DEFINITION OF HEALTHCARE FACILITY

*Healthcare Facility* means any person that is lawfully authorized to

- (1) Provide preventative, diagnostic, therapeutic, rehabilitative, maintenance or palliative care, and counseling, service, assessment or procedure with respect to the physical or mental condition, or functional status, of a human or animal or that affects the structure or function of the human or animal body; or
- (2) Distribute, sell, or dispense pharmaceuticals, including over-the-counter pharmaceuticals, dietary supplements, homeopathic drugs, or prescription pharmaceuticals

## DEFINITION OF HEALTHCARE FACILITY (CONTINUED)

*Healthcare Facility* includes, but is not limited to:

- Wholesale distributors
- Third-party logistics providers (3PLs) that serve as forward distributors
- Military medical logistics facilities
- Hospitals
- Psychiatric hospitals
- Ambulatory surgical centers
- Health clinics
- Physicians' offices
- Optical and dental providers
- Chiropractors
- Long-term care facilities
- Ambulance services
- Pharmacies
- Long-term care pharmacies
- Mail-order pharmacies
- Retailers of pharmaceuticals
- Veterinary clinics & hospitals

---

*Healthcare Facility* does NOT include:

- Pharmaceutical manufacturers
- Reverse distributors
- Reverse logistics centers

## DEFINITION OF LONG-TERM CARE FACILITY

*Long-term Care Facility* means

- A licensed entity that provides assistance with activities of daily living, including managing and administering pharmaceuticals to one or more individuals at the facility

# DEFINITION OF LONG-TERM CARE FACILITY

*Long-term Care Facility* includes, but is not limited to:

- Hospice facilities
- Nursing facilities
- Skilled nursing facilities
- Nursing and skilled nursing care portions of continuing care retirement communities

*Long-term Care Facility* does NOT include:

- Group homes
- Independent living communities
- Assisted living facilities
- Independent and assisted living portions of continuing care retirement communities

## DEFINITION OF REVERSE DISTRIBUTOR

*Reverse Distributor* means

- Any person that receives and accumulates prescription pharmaceuticals that are potentially creditable hazardous waste pharmaceuticals for the purpose of facilitating or verifying manufacturer credit
- Any person, including forward distributors, third-party logistics providers, and pharmaceutical manufacturers, that processes prescription pharmaceuticals for the facilitation or verification of manufacturer credit is considered a reverse distributor

# SUMMARY MATRIX OF PART 266 SUBPART P

|                                   | <b>Standards for<br/>Healthcare Facilities</b> | <b>Standards for<br/>Reverse Distributors</b> |
|-----------------------------------|--|---|
|                                   | <b>Potentially Creditable</b>                  | <b>Potentially Creditable</b>                 |
| On-site accumulation              |  |   |
| Shipping to a reverse distributor |  |   |
|                                   | <b>Non-Creditable</b>                          | <b>Evaluated</b>                              |
| On-site accumulation              |  |   |
| Shipping to a TSDF                |  |   |

## PART 266 SUBPART P APPLICABILITY

- Part 266 Subpart P is considered more stringent, and therefore is NOT optional
- Hazardous waste pharmaceuticals must be managed under Part 266 Subpart P by:
  - Healthcare facilities that generate above VSQG amounts of hazardous waste
  - All reverse distributors
- Part 266 Subpart P is both waste-specific and sector-specific; it does NOT apply to the management of
  - Non-pharmaceutical hazardous waste
  - Hazardous waste pharmaceuticals by facilities other than healthcare facilities and reverse distributors
- Healthcare facilities and reverse distributors are still subject to
  - Part 262 for the management of non-pharmaceutical hazardous wastes
  - Part 273 for the management of universal wastes,
  - Other Parts, as applicable



## PART 266 SUBPART P APPLICABILITY

- Once subject to Part 266 Subpart P
  - There are NO generator categories under Part 266 Subpart P
  - All healthcare facilities are regulated the same for their hazardous waste pharmaceuticals
  - All reverse distributors are regulated the same for their hazardous waste pharmaceuticals
  - Healthcare facilities & RDs operating under Subpart P do not have to
    - Keep track of how much hazardous waste pharmaceuticals they generate per month
    - Segregate the acute and non-acute hazardous waste pharmaceuticals
- Provides an incentive to over-manage non-hazardous pharmaceuticals as hazardous, without having to worry about bumping up generator category & incurring additional regulations

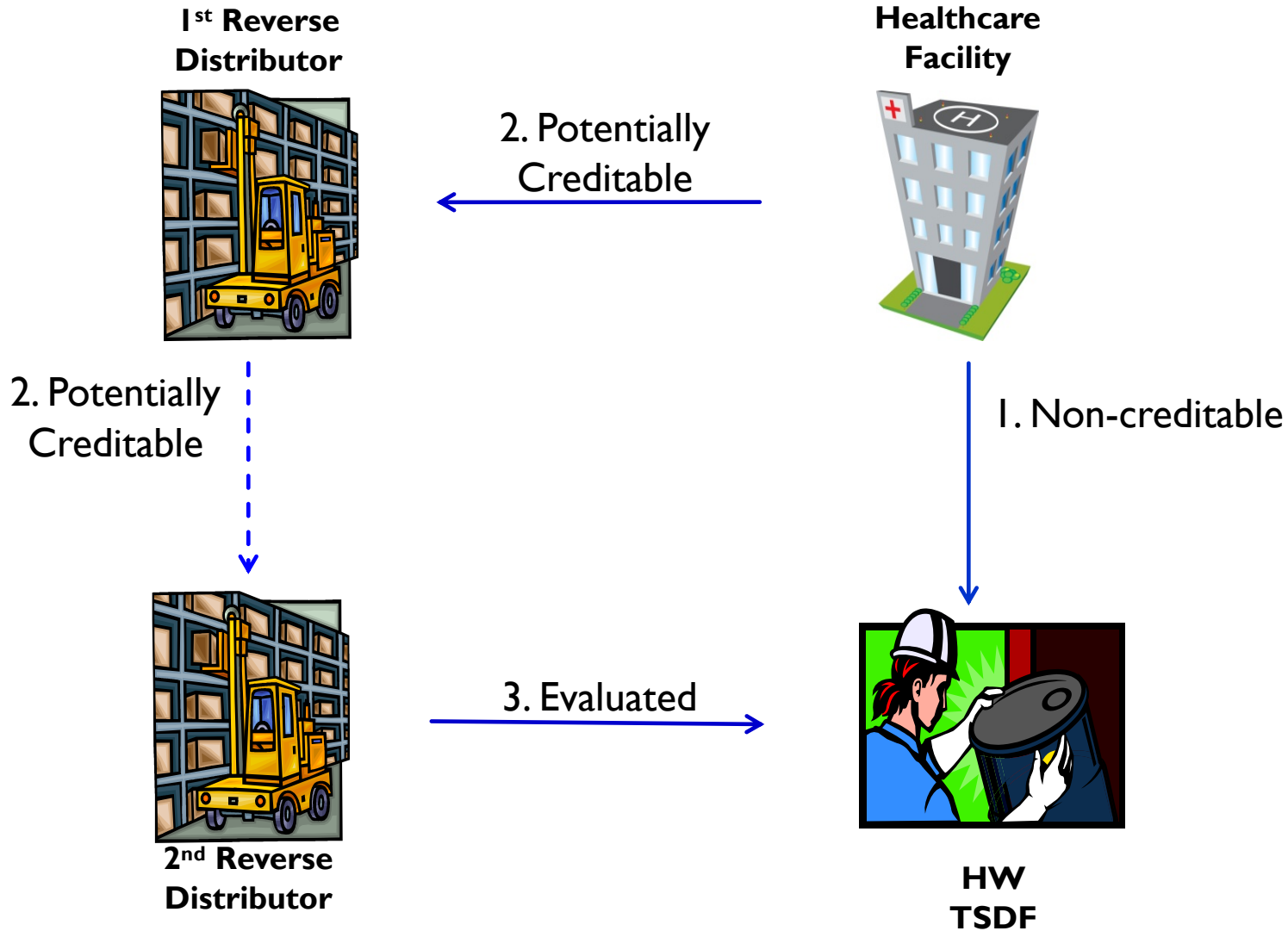
## PART 266 SUBPART P APPLICABILITY

The following are NOT subject to RCRA regulation:

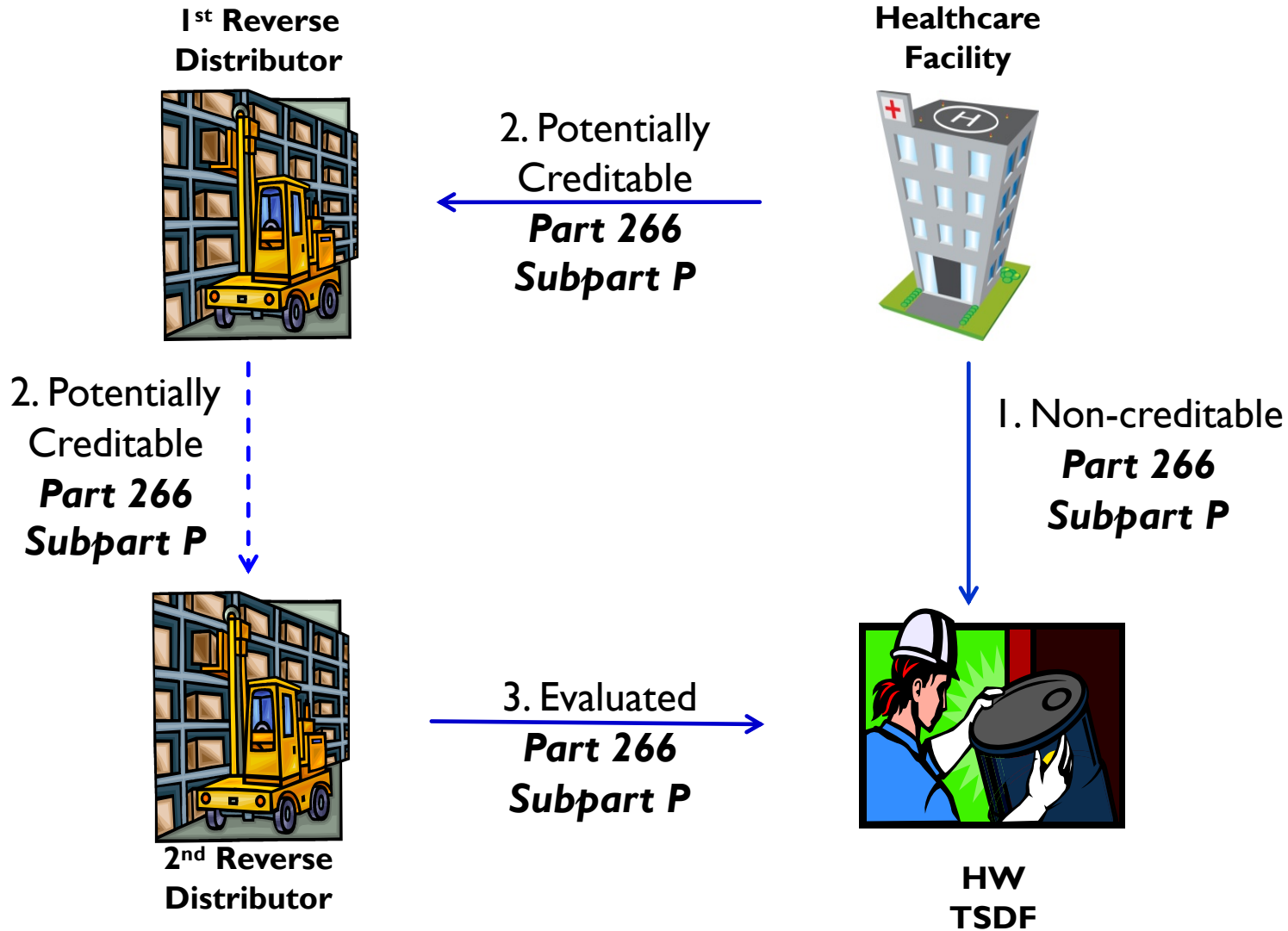
1. Pharmaceuticals that are not solid waste because they are legitimately used/reused or reclaimed
2. OTC pharmaceuticals, dietary supplements or homeopathic drugs that are not solid waste because they have a reasonable expectation of being legitimately used/reused or reclaimed
3. Recalled pharmaceuticals\*
4. Pharmaceuticals under preservation order, or during an investigation or judicial proceeding\*
5. Investigational new drugs\*
6. Household waste pharmaceuticals
  - Healthcare facilities that are DEA registrants & collectors of household pharmaceuticals (i.e., takebacks) must comply with conditions in § 266.506

\* Become subject to Subpart P when decision is made to discard

# Applicability for Rx HW Pharmaceuticals



# Applicability for Rx HW Pharmaceuticals



# Applicability for Non-Rx HW Pharmaceuticals (e.g., OTCs)

Healthcare  
Facility



Non-creditable  
**Part 266**  
**Subpart P**  
**(new)**



HW  
TSDF

# Applicability for Non-Rx HW Pharmaceuticals (e.g., OTCs)

**1<sup>st</sup> Reverse  
Logistics Center**



Not Solid Waste  
←  
IF there is a  
reasonable expectation of  
use/reuse or reclamation  
(*status quo*)

**Healthcare  
Facility**



Non-creditable  
**Part 266  
Subpart P  
(new)**

**2<sup>nd</sup> Reverse  
Logistics Center**



**HW  
TSDF**

# Applicability for Non-Rx HW Pharmaceuticals (e.g., OTCs)

**1<sup>st</sup> Reverse  
Logistics Center**



**Healthcare  
Facility**



Not Solid Waste



IF there is a  
reasonable expectation of  
use/reuse or reclamation  
**(status quo)**

Non-creditable  
**Part 266  
Subpart P  
(new)**



Part 262



**(status quo)**



**2<sup>nd</sup> Reverse  
Logistics Center**

**HW  
TSDF**

# HEALTHCARE FACILITY STANDARDS

- Notification: all healthcare facilities must submit a one-time notification that they are operating under Subpart P (using Site ID Form: 8700-12)
  - Facilities that are not required to submit a biennial report for their other hazardous waste must notify within 60 days of the rule going into effect
    - Non-authorized states: notifications will be due in October, 20 2019
  - Facilities that are required to submit a biennial report may notify on their normal biennial reporting cycle
    - Non-authorized states: notifications will be due with March 1, 2020 BR
- Training: all personnel managing non-creditable hazardous waste pharmaceuticals must be thoroughly familiar with proper waste handling and emergency procedures relevant to their responsibilities during normal facility operations and emergencies



# HEALTHCARE FACILITY STANDARDS

- Hazardous Waste Determinations: healthcare facilities must determine whether a waste pharmaceutical is a hazardous waste pharmaceutical
  - Applies to both potentially creditable and non-creditable waste pharmaceuticals
  - Exception: If a healthcare facility manages all of its waste pharmaceuticals as hazardous, individual hazardous waste determinations are not necessary
- Commingling: healthcare facilities may accumulate both their hazardous and non-hazardous waste pharmaceuticals in the same container
  - Potentially creditable: hazardous + non-hazardous
  - Non-creditable: hazardous + non-hazardous

# HEALTHCARE FACILITY MANAGEMENT STANDARDS

## Non-creditable hazardous waste pharmaceuticals:

- Labeling:
  - Accumulation containers must be labeled with the words “Hazardous Waste Pharmaceuticals”
  - No hazardous waste codes or other labeling requirements
- Container Standards:
  - Structurally sound, will not react with contents (i.e., compatible)
  - Remain closed and secured in a manner that prevents unauthorized access to its contents
- Accumulation time: 1 year

## Potentially creditable hazardous waste pharmaceuticals:

- No labeling, containers standards or accumulation time

# HEALTHCARE FACILITY STANDARDS

|  | <b>Non-creditable<br/>HW Pharms</b> | <b>Potentially Creditable<br/>HW Pharms</b> |
|--|-------------------------------------|---|
| Labeling   | ✓                                   | None  |
| Container Standards  | ✓                                   | None  |
| Maximum Accumulation Time  | ✓                                   | None  |
| Hazardous waste determinations*  | ✓                                   | ✓   |
| Over-managing non-hazardous pharmaceuticals & commingling with hazardous waste pharmaceuticals | Allowed                             | Allowed                                     |
| Include hazardous waste pharmaceuticals on BR  | No                                  | No  |

\*Not required for either type if managing all pharmaceutical waste as hazardous

# SUMMARY MATRIX OF PART 266 SUBPART P

|                                   | Standards for Healthcare Facilities   | Standards for Reverse Distributors |
|-----------------------------------|---|------------------------------------|
|                                   | <b>Potentially Creditable</b>   |                                    |
| On-site accumulation              | <ul style="list-style-type: none"> <li>• No standards</li> <li>• No time limit</li> </ul>       |                                    |
| Shipping to a reverse distributor |   |                                    |
|                                   | <b>Non-Creditable</b>   |                                    |
| On-site accumulation              | <ul style="list-style-type: none"> <li>• UW-like standards</li> <li>• 1 year maximum</li> </ul> |                                    |
| Shipping to a TSDF                |   |                                    |

# OPTIONS FOR VSQG HEALTHCARE FACILITIES

Healthcare facilities that are VSQGs are not subject to Part 266 Subpart P (except the sewer prohibition) but can

- Opt into Subpart P and comply with all its provisions OR
- Use the optional provisions of Part 266 Subpart P:
  1. A VSQG healthcare facility can continue to send potentially creditable hazardous waste pharmaceuticals to a reverse distributor
  2. A VSQG healthcare facility can send its hazardous waste pharmaceuticals off-site to another healthcare facility, provided the receiving healthcare facility is
    - Operating under Part 266 Subpart P and meets certain conditions, or
    - An LQG operating under Part 262 and meets the conditions for off-site consolidation

# OPTIONS FOR VSQG HEALTHCARE FACILITIES

- Optional provisions only for VSQG long-term care facilities
  3. A long-term care facility that is a VSQG can dispose of its hazardous waste pharmaceuticals in an on-site collection receptacle that complies with DEA regulations
    - Note that DEA collection receptacles can only be used for controlled substances that are from the ultimate user
  4. A long-term care facility with 20 beds or fewer will be presumed to be a VSQG and not subject to Part 266 Subpart P, except the sewer prohibition
    - Note that long-term care facilities with >20 beds may also be VSQGs

# SEWER PROHIBITION

- Hazardous waste pharmaceuticals may not be sewerred (e.g., no disposal down the drain and no flushing)
- The sewer prohibition applies to
  - All healthcare facilities, including healthcare facilities that are VSQGs
  - All reverse distributors
- Hazardous wastes that are DEA controlled substances are also subject to the sewer prohibition
- We strongly discourage sewerred of any pharmaceuticals by any entity
- REMEMBER: The sewer prohibition will be effective in ALL states 6 months after publication

## DEA CONTROLLED SUBSTANCES

- There are a handful of RCRA hazardous wastes that are also DEA controlled substances
- Two new conditional exemptions for healthcare facilities and reverse distributors for:
  1. RCRA hazardous wastes that are also DEA controlled substances
  2. Household waste pharmaceuticals collected in DEA authorized collection receptacles (kiosks)



## HW THAT ARE ALSO DEA CONTROLLED SUBSTANCES

| <b>Name of Drug</b>            | <b>Other Name(s)</b>   | <b>Medical Uses</b> | <b>RCRA HW Code</b> | <b>DEA CS Schedule</b> |
|--------------------------------|--|---------------------|---------------------|------------------------|
| Chloral/<br>Chloral hydrate    | Acetaldehyde,<br>trichloro; Aquachloral<br>Noctec, Somnote,<br>Suppettes | Sedative            | U034<br>Toxic       | IV                     |
| Fentanyl<br>sublingual spray   | Subsys   | Analgesic           | D00I<br>ignitable   | II                     |
| Phenobarbital                  | Bellergal-S<br>Donnatal<br>Luminal                                       | Anticonvulsant      | D00I<br>ignitable   | IV                     |
| Testosterone<br>gels/solutions | Androgel<br>Axiron<br>Fortesta, Testim                                   | Hormone             | D00I<br>ignitable   | III                    |
| Valium<br>injectable/gel       | Diazepam<br>Diastat  | Anti-anxiety        | D00I<br>ignitable   | IV                     |

## DEA CONTROLLED SUBSTANCES

In both cases, the hazardous waste pharmaceuticals are exempt from RCRA, provided they are:

- Not sewerred, and
- Managed in compliance with DEA regulations, and
- Destroyed by a method that the DEA has publicly deemed in writing to meet their non-retrievable standard, or
- Combusted at one of the following types of permitted facilities
  - Large or small municipal waste combustor (MWC)
  - Hospital, medical and infectious waste incinerator (HMIWI)
  - Commercial and industrial solid waste incinerator (CISWI) or
  - Hazardous waste combustor

# EMPTY CONTAINERS

- New empty container standards apply to
  - Containers with hazardous waste pharmaceuticals – acute & non-acute
  - Healthcare facilities and reverse distributors subject to Part 266 Subpart P and
  - Anyone else with containers of hazardous waste pharmaceuticals
- Residues remaining in “RCRA empty” containers are not regulated as hazardous waste
- Can be used to determine whether a healthcare facility is subject to Part 266 Subpart P
- Four different standards for different types of containers found in a healthcare setting
- Triple rinsing of containers with acute hazardous waste pharmaceuticals is not required/allowed anymore

# EMPTY CONTAINER STANDARDS

|   | "RCRA EMPTY"           |                     |
|---|------------------------|---------------------|
|   | Non-acute<br>HW Pharms | Acute<br>HW Pharms* |
| Stock/Dispensing Bottles<br>(1 liter or 10,000 pills)<br>& Unit-dose containers | Remove contents        | Remove contents     |
| Syringes  |                        |                     |
| IV Bags   |                        |                     |
| Other Containers  |                        |                     |

\*No triple rinsing of containers with acute hazardous waste pharmaceuticals

# EMPTY CONTAINER STANDARDS

|   | “RCRA EMPTY”           |                       |
|---|------------------------|-----------------------|
|   | Non-acute<br>HW Pharms | Acute<br>HW Pharms*   |
| Stock/Dispensing Bottles<br>(1 liter or 10,000 pills)<br>& Unit-dose containers | Remove contents        | Remove contents       |
| Syringes  | Fully depress plunger  | Fully depress plunger |
| IV Bags   |                        |                       |
| Other Containers  |                        |                       |

\*No triple rinsing of containers with acute hazardous waste pharmaceuticals

# EMPTY CONTAINER STANDARDS

|   | “RCRA EMPTY”                                     |                           |
|---|--|---------------------------|
|   | Non-acute<br>HW Pharms                           | Acute<br>HW Pharms*       |
| Stock/Dispensing Bottles<br>(1 liter or 10,000 pills)<br>& Unit-dose containers | Remove contents                                  | Remove contents           |
| Syringes  | Fully depress plunger                            | Fully depress plunger     |
| IV Bags   | Fully administer contents<br>or<br>§ 261.7(b)(1) | Fully administer contents |
| Other Containers  |  |                           |

\*No triple rinsing of containers with acute hazardous waste pharmaceuticals

# EMPTY CONTAINER STANDARDS

|   | “RCRA EMPTY”                                     |                           |
|---|--|---------------------------|
|   | Non-acute<br>HW Pharms                           | Acute<br>HW Pharms*       |
| Stock/Dispensing Bottles<br>(1 liter or 10,000 pills)<br>& Unit-dose containers | Remove contents                                  | Remove contents           |
| Syringes  | Fully depress plunger                            | Fully depress plunger     |
| IV Bags   | Fully administer contents<br>or<br>§ 261.7(b)(1) | Fully administer contents |
| Other Containers  | § 261.7(b)(1) or (2)                             | Can not be RCRA empty     |

\*No triple rinsing of containers with acute hazardous waste pharmaceuticals

# SHIPMENTS OF HW PHARMACEUTICALS

- Potentially creditable hazardous waste pharmaceuticals
  - Manifest and hazardous waste transporter are **NOT** required
  - Common carrier (e.g., UPS, USPS, FedEx) is acceptable
  - Shipper must receive delivery confirmation from reverse distributor
    - Electronic tracking systems will typically be sufficient
- Non-creditable & evaluated hazardous waste pharmaceuticals
  - Manifest and hazardous waste transporter are required
  - When shipped by a healthcare facility, use “PHARMS” on manifest instead of hazardous waste codes
  - When shipped by a reverse distributor, use hazardous waste codes on manifest
  - Must be sent to a TSDF



# SUMMARY MATRIX OF PART 266 SUBPART P

|                                   | <b>Standards for<br/>Healthcare Facilities</b>   | <b>Standards for<br/>Reverse Distributors</b>  |
|-----------------------------------|--|--|
|                                   | <b>Potentially Creditable</b>  | <b>Potentially Creditable</b>  |
| On-site accumulation              |  |  |
| Shipping to a reverse distributor | <ul style="list-style-type: none"> <li>• Confirmation of delivery</li> <li>• Common carrier</li> </ul> | <ul style="list-style-type: none"> <li>• Confirmation of delivery</li> <li>• Common carrier</li> </ul> |
|                                   | <b>Non-Creditable</b>  | <b>Evaluated</b>   |
| On-site accumulation              |  |  |
| Shipping to a TSDF                | <ul style="list-style-type: none"> <li>• Manifest (PHARMS)</li> <li>• HW transporter</li> </ul>        | <ul style="list-style-type: none"> <li>• Manifest (waste codes)</li> <li>• HW transporter</li> </ul>   |

## REVERSE DISTRIBUTOR STANDARDS

- A reverse distributor is a new type of hazardous waste management facility that can only accept hazardous waste that is “potentially creditable hazardous waste pharmaceuticals”
  - No RCRA storage permit required
  - No generator categories for reverse distributors (e.g., VSQG, SQG, LQG)
  - All reverse distributors are regulated the same for hazardous waste pharmaceuticals
- Standards are similar to LQGs, with some additions:
  - One-time notification as a reverse distributor
  - Inventory of hazardous waste pharmaceuticals
  - Security requirements

# FLOW OF HW PHARMACEUTICALS



**HCF/Pharmacy**

- Maximum transfers allowed between RDs
- 180 days after evaluation allowed at each RD



**1<sup>st</sup> RD  
can be a  
manufacturer**



**2<sup>nd</sup> RD  
can be a  
manufacturer**



**3<sup>rd</sup> RD  
must be a  
manufacturer**



**HW  
TSDF**

# FLOW OF HW PHARMACEUTICALS



As long as manufacturer's credit is being determined/verified, and pharmaceuticals are destined for an RD, they are still considered **“Potentially Creditable HW Pharmaceuticals”**

HCF/Pharmacy



**1<sup>st</sup> RD  
can be a  
manufacturer**



**2<sup>nd</sup> RD  
can be a  
manufacturer**



**3<sup>rd</sup> RD  
must be a  
manufacturer**



**HW  
TSDF**

# FLOW OF HW PHARMACEUTICALS



HCF/Pharmacy

Once manufacturer's credit has been determined/verified, and pharmaceuticals are destined for a TSDF, they are considered **“Evaluated HW Pharmaceuticals”**



**1<sup>st</sup> RD**  
can be a  
manufacturer



**2<sup>nd</sup> RD**  
can be a  
manufacturer



**3<sup>rd</sup> RD**  
must be a  
manufacturer



**HW**  
**TSDF**

## REVERSE DISTRIBUTOR STANDARDS

- A reverse distributor must inventory and evaluate each potentially creditable hazardous waste pharmaceutical within 30 days of arrival to determine if it is destined for:
  - Another reverse distributor (still considered “potentially creditable HW pharmaceutical”) or
  - A permitted/interim status TSDF (considered “evaluated hazardous waste pharmaceutical”)
- Accumulation on-site at reverse distributor:
  - 180 days maximum accumulation time after evaluation

$$\begin{array}{rcccl} 30 \text{ days} & & 180 \text{ days} & & 210 \text{ days} \\ \text{evaluation} & + & \text{accumulation} & = & \text{total per RD} \end{array}$$

# REVERSE DISTRIBUTOR STANDARDS

- Potentially creditable hazardous waste pharmaceuticals:
  - No specific labeling or container standards
  - Not included on Biennial Report
- Evaluated hazardous waste pharmaceuticals:
  - Must designate an on-site accumulation area and conduct weekly inspections
  - LQG training for personnel handling evaluated hazardous waste pharmaceuticals
  - Label as “hazardous waste pharmaceuticals” during accumulation
  - Containers must be in good condition and managed to prevent leaks
  - Hazardous waste codes prior to transport off-site
  - Included on Biennial Report

# REVERSE DISTRIBUTOR STANDARDS

|   | Potentially Creditable HW Pharms | Evaluated HW Pharms |
|---|----------------------------------|---------------------|
| Labeling                                      | None                             | ✓                   |
| Container Standards                           | None                             | ✓                   |
| Accumulation Area                             | None                             | ✓                   |
| Maximum Evaluation or Accumulation Time       | ✓                                | ✓                   |
| Include hazardous waste pharmaceuticals on BR | No                               | ✓                   |



# SUMMARY MATRIX OF PART 266 SUBPART P

|                                   | <b>Standards for<br/>Healthcare Facilities</b> | <b>Standards for<br/>Reverse Distributors</b>   |
|-----------------------------------|--|---|
|                                   |  | <b>Potentially Creditable</b>   |
| On-site accumulation              |  | Evaluate w/in 30 days   |
| Shipping to a reverse distributor |  |   |
|                                   |  | <b>Evaluated</b>  |
| On-site accumulation              |  | <ul style="list-style-type: none"> <li>• LQG-like standards</li> <li>• 180 days after evaluation</li> </ul> |
| Shipping to a TSDF                |  |   |

# SUMMARY MATRIX OF PART 266 SUBPART P

|                                   | <b>Standards for<br/>Healthcare Facilities</b>   | <b>Standards for<br/>Reverse Distributors</b>   |
|-----------------------------------|--|---|
|                                   | <b>Potentially Creditable</b>  | <b>Potentially Creditable</b>   |
| On-site accumulation              | <ul style="list-style-type: none"> <li>• No standards</li> <li>• No time limit</li> </ul>              | Evaluate w/in 30 days   |
| Shipping to a reverse distributor | <ul style="list-style-type: none"> <li>• Confirmation of delivery</li> <li>• Common carrier</li> </ul> | <ul style="list-style-type: none"> <li>• Confirmation of delivery</li> <li>• Common carrier</li> </ul>      |
|                                   | <b>Non-Creditable</b>  | <b>Evaluated</b>  |
| On-site accumulation              | <ul style="list-style-type: none"> <li>• UW-like standards</li> <li>• 1 year maximum</li> </ul>        | <ul style="list-style-type: none"> <li>• LQG-like standards</li> <li>• 180 days after evaluation</li> </ul> |
| Shipping to a TSDF                | <ul style="list-style-type: none"> <li>• Manifest (PHARMS)</li> <li>• HW transporter</li> </ul>        | <ul style="list-style-type: none"> <li>• Manifest (waste codes)</li> <li>• HW transporter</li> </ul>        |



# REMINDERS & WRAP-UP

## SECTION VI



# EFFECTIVE DATES & STATE ADOPTION TABLE

|   | Less Stringent   | More Stringent   |  |
|---|--|------------------|--|
|   | Nicotine Exemption   | Sewer Ban        | Subpart P  |
| Non-authorized states (IA,AK) territories & Indian Country      | August 21, 2019*   | August 21, 2019* | August 21, 2019*   |
| Authorized States & territories no legislative session required | <ul style="list-style-type: none"> <li>• Effective when state adopts</li> <li>• State adoption not required</li> </ul> | August 21, 2019* | <ul style="list-style-type: none"> <li>• Effective when state adopts</li> <li>• July 1, 2021+</li> </ul> |
| Authorized States & territories legislative session required    | <ul style="list-style-type: none"> <li>• Effective when state adopts</li> <li>• State adoption not required</li> </ul> | August 21, 2019* | <ul style="list-style-type: none"> <li>• Effective when state adopts</li> <li>• July 1, 2022+</li> </ul> |

\*effective date

+state adoption deadline

# CONTACT INFORMATION

- Kristin Fitzgerald [Fitzgerald.Kristin@epa.gov](mailto:Fitzgerald.Kristin@epa.gov)
- Brian Knieser [Knieser.Brian@epa.gov](mailto:Knieser.Brian@epa.gov)
- Laura Stanley [Stanley.Laura@epa.gov](mailto:Stanley.Laura@epa.gov)
- Narendra Chaudhari [Chaudhari.Narendra@epa.gov](mailto:Chaudhari.Narendra@epa.gov)
- Jessica Young [Young.Jessica@epa.gov](mailto:Young.Jessica@epa.gov)

Final rule webpage: <https://www.epa.gov/hwgenerators/final-rule-management-standards-hazardous-waste-pharmaceuticals-and-amendment-p075>