- 1 SB389
- 2 117968-1
- 3 By Senators Orr and Butler
- 4 RFD: Health
- 5 First Read: 09-FEB-10

1	117968-1:g:02/09/2010:JRC/mfp LRS2010-924
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8	SYNOPSIS: This bill would authorize the Alabama
9	Department of Corrections to redispense unused
10	prescription medicines.
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12	A BILL
13	TO BE ENTITLED
14	AN ACT
15	
16	To authorize the Alabama Department of Corrections
17	to accept and redispense unused prescription medications.
18	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
19	Section 1. As used in this act, the following terms
20	shall have the following meanings:
21	(1) CORRECTIONS FACILITY. Any facility or program
22	controlled or operated by the state Department of Corrections
23	or any of its agencies or departments and supported wholly or
24	in part by state funds for the correctional care of persons.
25	(2) CUSTOMIZED PATIENT MEDICATION PACKAGE. A package
26	that is prepared by a pharmacist for a specific patient and
27	that contains two or more prescribed solid oral dosage forms.

(3) REPACKAGING. The process by which the pharmacy
 prepares a prescription it accepts pursuant to this act in a
 unit-dose package, unit-of-issue package or customized patient
 medication package for immediate dispensing in accordance with
 a current prescription.

6 (4) UNIT-DOSE PACKAGE. A package that contains a 7 single-dose drug with the name, strength, control number, and 8 expiration date of that drug on the label.

9 (5) UNIT-OF-ISSUE PACKAGE. A package that provides 10 multiple doses of the same drug, but each drug is individually 11 separated and includes the name, lot number, and expiration 12 date of the drug.

Section 2. (a) A pharmacy operated by the Alabama 13 14 Department of Corrections (ADOC) or operated by a company 15 under contract with the ADOC, shall accept for the purpose of redispensing a prescription drug that has been dispensed and 16 17 has left the control of the pharmacy or pharmacist if the prescription drug is being returned by a corrections facility 18 that has met the requirements of routine on-site inspections 19 by the pharmacy or pharmacist and has a registered 20 21 professional nurse or a licensed practical nurse who is 22 responsible for the security, handling, and administration of 23 prescription drugs within that corrections facility and if all 24 of the following conditions are met:

(1) The pharmacy or pharmacist is satisfied that the
conditions under which the prescription drug has been
delivered, stored, and handled before and during its return

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were such as to prevent damage, deterioration, or
 contamination that would adversely affect the identity,
 strength, quality, purity, stability, integrity, or
 effectiveness of the prescription drug.

5 (2) The pharmacist is satisfied that the 6 prescription drug did not leave the control of the registered 7 professional nurse or licensed practical nurse responsible for 8 the security, handling, and administration of that 9 prescription drug and that the prescription drug did not come 10 into the physical possession of the individual for whom it was 11 prescribed.

12 (3) The pharmacist is satisfied that the labeling 13 and packaging of the prescription drug are accurate, have not 14 been altered, defaced, or tampered with and include the 15 identity, strength, expiration date, and lot number of the 16 prescription drug.

17 (4) The prescription drug was dispensed in a
18 unit-dose package or unit-of-issue package.

(b) A pharmacy operated by the ADOC or operated by a 19 company under contract with the ADOC shall not accept for 20 21 return prescription drugs as provided pursuant to this section until the pharmacist in charge develops a written set of 22 protocols for accepting, returning to stock, repackaging, 23 labeling, and redispensing prescription drugs. The written 24 25 protocols shall be maintained on the premises of any pharmacy dispensing prescriptions for the ADOC and shall be readily 26

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accessible to each pharmacist on duty. The written protocols
 shall include, at a minimum, each of the following:

(1) Methods for ensuring that damage, deterioration,
or contamination has not occurred during the delivery,
handling, storage, or return of the prescription drugs such
that it would adversely affect the identity, strength,
quality, purity, stability, integrity, or effectiveness of the
prescription drugs or otherwise render the drugs unfit for
distribution.

10 (2) Methods for accepting, returning to stock,
11 repackaging, labeling, and redispensing the prescription drugs
12 returned pursuant to this section.

(3) A uniform system of recording and tracking
prescription drugs that are returned to stock, repackaged,
labeled, and redistributed pursuant to this section.

16 (c) If the condition of a prescription drug and its 17 package meets the standards set forth in subsection (b) of 18 this section, a prescription drug shall be returned to stock 19 and redistributed as follows:

(1) A prescription drug that was originally
dispensed in the manufacturer's unit-dose package or
unit-of-issue package that is returned in that same package
may be returned to stock, repackaged, and redispensed as
needed.

(2) A prescription drug that is repackaged into a
unit-dose package or a unit-of-issue package by the pharmacy,
dispensed and returned to that pharmacy in that unit-dose

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package or unit-of-issue package may be returned to stock, but is shall not be repackaged. A unit-dose package or unit-of-issue package prepared by the pharmacist and returned to stock shall only be redispensed in that same unit-dose package or unit-of-issue package and shall only be redispensed once. A pharmacist shall not add unit-dose package drugs to a partially used unit-of-issue package.

8 (d) This section does not apply to any of the9 following:

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(1) A controlled substance.

11 (2) A prescription drug that is dispensed as part of
12 a customized patient medication package.

13 (3) A prescription drug that is not dispensed as a
14 unit-dose package or a unit-of-issue package.

(4) A prescription drug that is not properly labeled
with the identity, strength, lot number, and expiration date.

17 Section 3. This act shall become effective 18 immediately following its passage and approval by the 19 Governor, or its otherwise becoming law.