

1 SB113  
2 125792-1  
3 By Senator Orr  
4 RFD: Finance and Taxation General Fund  
5 First Read: 01-MAR-11

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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.

1           (3) REPACKAGING. The process by which the pharmacy  
2 prepares a prescription it accepts pursuant to this act in a  
3 unit-dose package, unit-of-issue package or customized patient  
4 medication package for immediate dispensing in accordance with  
5 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.

13           Section 2. (a) A pharmacy operated by the Alabama  
14 Department of Corrections (ADOC) or operated by a company  
15 under contract with the ADOC, shall accept for the purpose of  
16 redispensing a prescription drug that has been dispensed and  
17 has left the control of the pharmacy or pharmacist if the  
18 prescription drug is being returned by a corrections facility  
19 that has met the requirements of routine on-site inspections  
20 by the pharmacy or pharmacist and has a registered  
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:

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

1 were such as to prevent damage, deterioration, or  
2 contamination that would adversely affect the identity,  
3 strength, quality, purity, stability, integrity, or  
4 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.

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

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

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

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

13 (3) A uniform system of recording and tracking  
14 prescription drugs that are returned to stock, repackaged,  
15 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), a  
18 prescription drug shall be returned to stock and redistributed  
19 as follows:

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

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

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

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

10 (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.

15 (4) A prescription drug that is not properly labeled  
16 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.