

From: Mike Hastry [Mike.Hastry@dep.state.nj.us]
Sent: Friday, May 13, 2011 1:13 PM
To: Bunnell, Ross
Subject: RE: Question - Confidential reply

if you would - thanks

>>> "Bunnell, Ross" <Ross.Bunnell@ct.gov> 5/13/2011 10:49 AM >>>
Thanks, Mike!

When I compile the responses for the at-large NEWMOA recipients, should I remove your response to item #7?

--Ross.

From: Mike Hastry [<mailto:Mike.Hastry@dep.state.nj.us>]
Sent: Thursday, May 12, 2011 5:16 PM
To: Bunnell, Ross
Subject: Re: Question - Confidential reply

Ross,

Big questions/issues here. I'll try to answer as succinctly as possible. We can discuss further by phone if need be.

- 1.) What are your state's policies (if any) regarding the management of non-residential unwanted or unusable pharmaceuticals? **If not going back to a reverse distribution facility as a CCP for some form of credit, the generator must classify as SW or HW and handle as per requirements.**
- 2.) If non-residential pharmaceuticals conform to a hazardous waste characteristic or listing, do you require that they be managed as hazardous waste? **Yes , but if CESQG , HW management and disposal requirements are basically non-existent as the CESQG can handle as SW.**
- 3.) What do you consider to be the point of generation? At the pharmacy or health care facility at which it is determined that the pharmaceutical is no longer usable or needed, or somewhere further down the line? **The point of generation will vary depending on the reverse distribution setup, if there is one. Otherwise the point of generation will be where the waste was actually generated. So if the health care facility sees the dates have expired and they will not use the product and they do not have any credit agreements - that's the point of generation.**
- 4.) Do you have any specific policies relating to the use of pharmaceutical return centers? **Just the federal requirements/policies (limited at best!!!). We thought of including reverse distribution facilities with some additional requirements in our State rules, however the hierarchy does not want us to be any more stringent than the FED.**
- 5.) Do you have any specific policies relating to the management of unusable/unwanted pharmaceuticals at retail pharmacies (e.g., CVS, Walgreens, Rite Aid, etc.)? **No - Same requirements apply.**
- 6.) Do your policies differentiate in any way between different types of health care facilities (i.e., hospitals vs. long-term health care facilities vs. retail pharmacies)? **No - however we have had requests to define whether or not Assisted Living Facilities and even Senior Housing facilities would be considered generators. In most instances we determine the RCRA rules would apply. Often on a case by case basis.**
- 7.) Have any of you had enforcement of any kind with any retail chain pharmacies in your state? (If so, please briefly summarize the nature of the violations and the resolution of the case.) **Confidential: I have two corporate ACO's that we are working on regarding CVS and Target Stores. CVS regarding photo developing waste which was supposedly going for precious metal exemption to PA but was actually being disposed. Kodak was brokering the deal. For Target it is for their policy of accepting returns of P-listed wastes (mostly nicotine gums and patches). They become LQG's. Apparently Target may have been aware of this issue as it seems they were making efforts to correct this nationwide, somewhat under the radar screen.**
- 8.) Do you have any written guidance that you can forward me relating to this topic?
No - just whatever EPA has put on the issue.

If you need additional info just let me know. By the way, I like the consultant language you folks are using.

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