Current Regulatory Scheme for HWP

- State Rules uses IBR to EPA Rules
- Is it hazardous under RCRA? (40 CFR 261)
 - Is it a listed waste (i.e. nicotine)
 - Does it exhibit a characteristic waste (i.e. ignitable or reactive)
 - Does it contain certain chemicals above TCLP limits (i.e. chromium, selenium, etc.)

• And...

Is it a Rhode Island Haz Waste?

- Slightly Reactive (i.e.unstable with water)
- Slightly flammable (flash <200°F)
- Slightly Toxic Waste (i.e. LD₅₀ <5,000 mg/kg
- Extremely hazardous
 - Known carcinogen (0.1% by weight)
 - Teratogen (0.1% by weight)
 - Suspect carcinogen (1% by weight)
 - Chemicals due to serious cummulative effects above 1% by weight are soluble

Changes RI DEM is Considering

- Universal Waste
- Changes to Definition of State Haz Waste
- Producer Responsibility Laws and Rules
- Held Stakeholder Meeting for Input

RI Comments on Federal Universal Waste Rule

- Comment letter from RIDEM to EPA 3/4/2009 brought up these issues:
 - Security
 - Definition should clarify status of herbal and alt medicines.
 - "infectious" should be defined
 - Should not distinguish HWP returned for credit from others in definition of solid waste
 - Labeling should be more specific

Status of Universal Waste Rule in Rhode Island

 State drafted but withdrew HWP Universal Waste Rule in summer of 2010 as a result of "pending" federal rule

RI-Specific Hazardous Waste Classification

- Current scheme for state-only waste is complex and often ignored
- Alternatives Under Consideration:
 - revise standards for all waste (possible elimination of some)
 - classify certain groups as state hazardous (i.e. chemo-therapy waste) when disposed

Producer Responsibility Legislation in RI

- Producer responsibility laws in place for e-waste including televisions
 - Cannot sell in RI without participation of some kind
- In the last session considered mattresses and sharps
 - died due to lack of support
 - Confusing to group mattresses and sharps
- In the future likely to include used pharmaceuticals (HWP and Non-HWP)
- Will delay implementation if a viable voluntary program is in place

Stakeholder Meeting held on 5/18/2011

Topics Included:

- Intro & Summary of Existing Regulations

 Mark M. Dennen, RIDEM/Office of Waste Management
- Overview and Experience on Varying State Approaches – Charlotte A. Smith, R. Ph., M.S., WM Healthcare Solutions
- Status of Producer Responsibility Legislation – Elizabeth Stone, RIDEM
- Controlling Hazardous Drugs from Pharmacy to Waste Stream
 - Jim Mullowney- Senior Chemist- Pharma-Cycle

Issues, Positions & Feedback

- I: Are generators required to segregate liquid and solid waste?
 - P: is not required, although mixing liquid and solid waste makes the mixture subject to the more stringent management requirements of liquids
 - F: in practice, they are rarely separated as this is more work
- I: Satellite accumulation areas in patient rooms
 - P: is not allowed as per a recent interpretation from Region I RIDEM cannot be less stringent than EPA in this matter
 - F: this is burdensome on the health care providers, esp. nurses.
- I: Are Universal Waste Transporters qualified to manage pharmaceuticals?
 - P: given how different it is from managing things like e-waste and light bulbs, probably not
 - F: suggested consider allowing medical waste transporters to transport pharmaceuticals

Issues, Positions & Feedback (2)

• I: RIDEM Definitions not practical

- F: some of the definitions for state only waste, relying on LD50 and other vague requirements (potential for "serious cumulative effects") are not realistic or appropriate for HWP
- F: the regulated community often does not try to make determinations under these rules as they are so difficult for HWP
- F: RIDEM should be careful not to exempt materials that may truly be hazardous
- F: suggestion of regulating certain groups of waste, such as chemotherapy waste, as hazardous was well received
- I: Contamination of human waste with Pharm components
 - P: given that septage is exempt from the definition of solid waste by statute, it cannot be legally regulated as a solid or hazardous waste
 - F: but may present risks to human health and the environment

Issues, Position & Feedback (3)

- I: Delay Universal Waste Rule until Federal Proposal
 - F: recommended the Department wait on moving forward with universal waste rules as the federal government has waited

I: Incineration requirement for Pharm Waste

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- F: no agreement on the issue of whether non-hazardous pharmaceuticals should be required to be incinerated
- F: most solid waste incinerators in the region do not knowingly allow this waste stream in the solid waste they accept

I: Preference in hospitals for fewer choices with waste

 F: waste determination decisions for them need to be quick and simple - the more choices, the more difficult - easier for them to handle all waste pharmaceuticals in the same way, whatever that is

I: More input needed from Health Care Providers

- F: the forum would benefit from greater representation
- P: Will do something with Hosp for a Healthy Environment