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

1	SB389
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4	ENGROSSED
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7	A BILL
8	TO BE ENTITLED
9	AN ACT
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11	To authorize the Alabama Department of Corrections
12	to accept and redispense unused prescription medications.
13	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
14	Section 1. As used in this act, the following terms
15	shall have the following meanings:
16	(1) CORRECTIONS FACILITY. Any facility or program
17	controlled or operated by the state Department of Corrections
18	or any of its agencies or departments and supported wholly or
19	in part by state funds for the correctional care of persons.
20	(2) CUSTOMIZED PATIENT MEDICATION PACKAGE. A package
21	that is prepared by a pharmacist for a specific patient and
22	that contains two or more prescribed solid oral dosage forms.
23	(3) REPACKAGING. The process by which the pharmacy
24	prepares a prescription it accepts pursuant to this act in a
25	unit-dose package, unit-of-issue package or customized patient
26	medication package for immediate dispensing in accordance with
27	a current prescription.

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

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

Section 2. (a) A pharmacy operated by the Alabama 8 Department of Corrections (ADOC) or operated by a company 9 10 under contract with the ADOC, shall accept for the purpose of redispensing a prescription drug that has been dispensed and 11 12 has left the control of the pharmacy or pharmacist if the 13 prescription drug is being returned by a corrections facility 14 that has met the requirements of routine on-site inspections 15 by the pharmacy or pharmacist and has a registered professional nurse or a licensed practical nurse who is 16 17 responsible for the security, handling, and administration of prescription drugs within that corrections facility and if all 18 of the following conditions are met: 19

(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
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.

1 (2) The pharmacist is satisfied that the 2 prescription drug did not leave the control of the registered 3 professional nurse or licensed practical nurse responsible for 4 the security, handling, and administration of that 5 prescription drug and that the prescription drug did not come 6 into the physical possession of the individual for whom it was 7 prescribed.

8 (3) The pharmacist is satisfied that the labeling 9 and packaging of the prescription drug are accurate, have not 10 been altered, defaced, or tampered with and include the 11 identity, strength, expiration date, and lot number of the 12 prescription drug.

13 (4) The prescription drug was dispensed in a14 unit-dose package or unit-of-issue package.

(b) A pharmacy operated by the ADOC or operated by a 15 company under contract with the ADOC shall not accept for 16 17 return prescription drugs as provided pursuant to this section until the pharmacist in charge develops a written set of 18 protocols for accepting, returning to stock, repackaging, 19 labeling, and redispensing prescription drugs. The written 20 21 protocols shall be maintained on the premises of any pharmacy 22 dispensing prescriptions for the ADOC and shall be readily 23 accessible to each pharmacist on duty. The written protocols shall include, at a minimum, each of the following: 24

(1) Methods for ensuring that damage, deterioration,
or contamination has not occurred during the delivery,
handling, storage, or return of the prescription drugs such

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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.

5 (2) Methods for accepting, returning to stock,
6 repackaging, labeling, and redispensing the prescription drugs
7 returned pursuant to this section.

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

(c) If the condition of a prescription drug and its package meets the standards set forth in subsection (b) of this section, a prescription drug shall be returned to stock 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 20 21 unit-dose package or a unit-of-issue package by the pharmacy, 22 dispensed and returned to that pharmacy in that unit-dose 23 package or unit-of-issue package may be returned to stock, but it shall not be repackaged. A unit-dose package or 24 25 unit-of-issue package prepared by the pharmacist and returned 26 to stock shall only be redispensed in that same unit-dose 27 package or unit-of-issue package and shall only be redispensed

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once. A pharmacist shall not add unit-dose package drugs to a 1 2 partially used unit-of-issue package. (d) This section does not apply to any of the 3 4 following: (1) A controlled substance. 5 (2) A prescription drug that is dispensed as part of 6 7 a customized patient medication package. (3) A prescription drug that is not dispensed as a 8 unit-dose package or a unit-of-issue package. 9 10 (4) A prescription drug that is not properly labeled with the identity, strength, lot number, and expiration date. 11 Section 3. This act shall become effective 12 13 immediately following its passage and approval by the Governor, or its otherwise becoming law. 14

1 2 3 Senate 4 Read for the first time and referred to the Senate 5 committee on Health 09-FEB-10 6 7 Read for the second time and placed on the calen-25-FEB-10 8 dar 1 amendment 9 Read for the third time and passed as amended ... 09-MAR-10 10

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