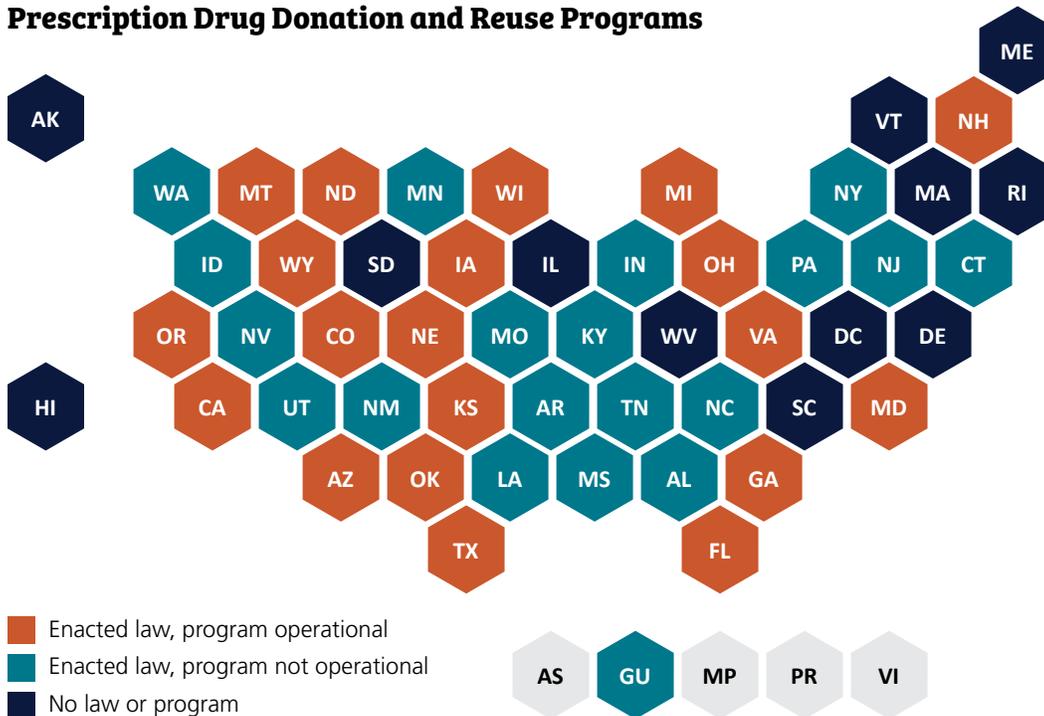


## Prescription Drug Donation and Reuse Programs



Source: NCSL, 2018

## States Look to Drug Donations to Improve Access to Medication

BY KRISTINA BERG AND RICHARD CAUCHI

It is not surprising that the rising cost of some prescription drugs creates concerns for patients across the nation. For people living with a chronic condition such as heart disease, cancer or asthma, accessing necessary, often life-sustaining, medications can become costly and may compete with other basic needs such as food and housing.

In a [study](#) published by the Annals of Internal Medicine, prescriptions that have an out-of-pocket cost over \$40 were three to almost five times more likely to be abandoned by the patient be-

cause of cost. [The Journal of the American Medical Society](#) concludes that, for varied reasons, “approximately 30 percent to 50 percent of U.S. adults are not adherent to long-term medications leading to an estimated \$100 billion in preventable costs annually.”

Pharmaceutical donation and reuse programs provide for unused prescription drugs to be donated and redispensed to patients. These contributions are one of the ways individuals can obtain essential medications for no cost. Although drug donation programs usually do not receive the public spotlight, interest in donation programs remains

### Did You Know?

- Drug donation and reuse programs are designed to get medication to people in need, while disposal programs typically aim to reduce water pollution and control medication misuse.
- Nearly 40 states have enacted legislation addressing drug donation and reuse; however, only about half have operational programs.
- Wyoming has successfully redistributed 88,000 pounds of medication and supplies since 2008, with more than \$2.4 million worth of free medication distributed in 2016.

high. NCSL's [report on state-based pharmaceutical reuse](#) logged more than 70,000 online visits in 2017 alone.

Participating nursing homes and hospitals already identify tens of thousands of dollars' worth of no-longer-needed drugs that could be securely returned for donation. Because these drugs were previously purchased, there is no financial loss to the participating facility. A state agency, board or major charity can provide the necessary structure to keep life-saving drugs flowing, but programs require financial backing—whether from government or other sources—to provide storage, record keeping and marketing. Although they have enacted legislation, approximately 19 state programs are still not operational due to a lack of funding or structure.

## State Action

Thirty-nine states and Guam have enacted legislation regarding prescription drug donation, return and reuse. State legislation usually determines the type of medication accepted, the entities eligible to donate, the pharmacy protocols to ensure safety and the individuals eligible for redistribution. Most programs focus on providing expensive medications to those with limited resources. Programs also vary in their efficacy and operational status, as states range in their ability to fund them and provide access points to redistribute medication.

Return, reuse and donation protocols must follow states' board of pharmacy guidelines for the safe return and redistribution of all drugs to ensure that future recipients are issued safe and untampered medication. [The National Association of Boards of Pharmacy](#), which oversees the state-level boards, supports drug reuse programs when they can demonstrate that the medication's integrity remains intact and is safe for patients.

Although there is renewed interest in these programs, they are not a new idea.

One of the more robust initiatives is the Iowa Drug Donation Repository, which operates the SafeNetRx program. Operational since 2007, it serves individuals with household incomes below 200 percent of the federal poverty level who are eligible to receive donated unused medications and medical supplies. The program partners with more than 250 clinics and pharmacies across Iowa and has reused more than 9 million units of medication since it began. The program reports that, for every dollar used to administer the repository program, more than \$7 of free medication and supplies is generated.

Wyoming in 2005 enacted the [Drug Repository Act](#), which evolved into the [Drug Donation Program Act](#). The state's program accepts prescriptions from any individual or entity seeking to donate unexpired medication in good faith to a donation site or health care facility. According to the [program](#), it has successfully redistributed 88,000 pounds of medication and supplies since 2009. In 2016 alone, the program redistributed over \$2.4 million worth of medication to individuals free of charge.

Georgia most recently initiated a drug donation program. Launched in January 2017, the [Donated Drug Repository Program](#) contracts with three organizations to help facilitate the program, one of which is [Good Pill](#), the first pharmacy to operate the program. Currently, it serves approximately 1,000 clients in Georgia with the [hope](#) of growing those numbers in the years to come.

## Federal Action

There are no federally sponsored programs that promote prescription drug donation and reuse. However, in 2018 Congress and the Trump administration have worked from a White House Blueprint to make prescriptions more affordable. Two new federal laws, the Patient Right to Know Drug Prices Act, [S.2554](#) and Know the Lowest Price Act of 2018, [S.2553](#), were signed Oct. 10, 2018. They end practices that prohibited pharmacists from telling customers they could save money by paying cash out of pocket rather than using their insurance.

**Disposal and Safe Destruction.** On a separate track, the federal [Drug Enforcement Agency \(DEA\)](#) and the [Food and Drug Administration \(FDA\)](#) coordinate and regulate safe drug disposal. Their efforts include the [National Prescription Drug Take-Back program](#), drug collection sites and directions for safe at-home disposal. Many states also sponsor or participate in these initiatives, which are aimed at preventing the misuse of leftover medication and reducing pharmaceutical-caused environmental pollution.

Unlike the state-facilitated drug reuse and redistribution programs, drugs for return and disposal include far larger quantities of drugs. These programs collect and destroy prescription drugs that have expired, are no longer sterile, or are considered controlled substances. Because there is no need to assure the drugs' quality or safety for human consumption, these programs are usually easier and less expensive to run.

## Additional Resources

- [NCSL webpage, State Prescription Drug Return and Reuse Laws](#)
- [Drug Enforcement Agency webpage, Drug Disposal Information](#)

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