A Product Stewardship Plan
For Unwanted Medicine from Households

Pierce County, Washington
May 26, 2020; Revised September 17, 2020
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I. **Introduction**

MED-Project LLC ("MED-Project"), on behalf of the participating companies as described in Appendix A, submits this Product Stewardship Plan ("Plan") for Unwanted Medicine in compliance with the Tacoma-Pierce County Board of Health Secure Medicine Return Regulations, Environmental Health Code Chapter 7 ("Regulations"). The Regulations require pharmaceutical Producers\(^1\) to develop a Product Stewardship Program to finance and manage the collection, transportation, and disposal of Unwanted Medicine from Pierce County households. MED-Project is requesting Standard Stewardship Plan status.

II. **Contact Information**

The primary contact person for MED-Project is:

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III. **Plan Definitions**

**Call Center** is the MED-Project call center for Residents, which can be reached by callers at the toll-free number of 1-844-MED-PROJECT or 1-844-633-7765.

**Carrier** is United Parcel Service, Inc. ("UPS").

**County** means the unincorporated and incorporated areas of Pierce County.

**DEA** is the U.S. Drug Enforcement Administration.


**DOT** is the U.S. Department of Transportation.

**FDA** is the U.S. Food and Drug Administration.

**Help Desk** is the MED-Project call center and email-in database for Kiosk Drop-Off Sites and Mail-Back Distribution Locations that can be reached by callers at the toll-free number of 1-833-633-7765 or 1-833-MED-PROJECT and/or by email at piercecounty@med-project.org.

**Inhaler Mail-Back Services** is the provision of pre-paid, pre-addressed packages for the collection and disposal of inhalers ("Inhaler Mail-Back Packages") by Vendor(s).

**Injector Mail-Back Services** is the provision of pre-paid, pre-addressed, FDA-cleared sharps containers for the collection and disposal of Pre-filled Injector Products ("Injector Mail-Back Packages") by Vendor(s).

**Kiosk Drop-Off Site** is a location hosting a MED-Project kiosk for the collection of Unwanted Medicine.

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\(^1\) All capitalized terms used but not otherwise defined herein shall have their respective meanings set forth in the Regulations.
**Kiosk Drop-Off Site Host** is the designated contact person or persons at the Kiosk Drop-Off Site.

**Law Enforcement Agency** or **LEA** is a federal, state, tribal, or local law enforcement office or agency.

**Mail-Back Distribution Location** is a facility that is accessible to the public, such as a fire station or library, which provides MED-Project Standard Mail-Back Packages to Residents.

**Mail-Back Services** is the provision of pre-paid, pre-addressed containers, envelopes, or packages (“Mail-Back Packages”) for the collection and disposal of Unwanted Medicine.

**MED-Project Website** is the Internet website located at [www.med-project.org](http://www.med-project.org) or [www.medproject.org](http://www.medproject.org).

**On-Demand Collection Service** is a service model where Kiosk Drop-Off Site staff manage removal and packaging of full Unwanted Medicine inner liners prior to transfer to a common carrier for transport to a reverse distributor.

**Plan** or **Product Stewardship Plan** is the product stewardship plan presented in this submittal by MED-Project.

**Pre-filled Injector Products** are pre-filled injector products with a retractable or otherwise securely covered needle where medicine cannot be removed from them or where they contain more than trace amounts of Covered drugs.

**Program** or **Product Stewardship Program** is the product stewardship program set forth in this Product Stewardship Plan.

**Rapid Response** is a response to an incident or other urgent event at a Kiosk Drop-Off Site requiring an urgent response. This does not include emergencies that pose an immediate threat to the environment or health. Kiosk Drop-Off Site Hosts will be directed to call 911 during emergencies that pose an immediate threat to the environment or health.

**Rapid Responders** are personnel trained to respond within a few hours to an event requiring a Rapid Response. Rapid Responders may be Service Technicians or special response vendors retained by Vendor.

**Required Languages** are English, Khmer, Korean, Russian, Spanish, and Vietnamese.

**Residents** means human beings residing in the County. “Residents” does not include business generators of pharmaceutical waste, such as hospitals, clinics, doctor’s offices, veterinary clinics, pharmacies, or airport security and law enforcement drug seizures.

**Service Convenience Goal** means the requirements established in Regulations § 7.D.2.

**Service Technicians** are personnel trained to service Program kiosks.

**Scheduled Collection Service** is a service model where MED-Project provides for a vendor service technician to help prepare Unwanted Medicine inner liners at Kiosk Drop-Off Sites prior to transfer to a common carrier for transport to a reverse distributor.

**Shipper** is United States Postal Service (“USPS”).

**Standard Mail-Back Services** is the provision of pre-paid, pre-addressed envelopes for the collection and disposal of Unwanted Medicine (“Standard Mail-Back Packages”) by Vendor(s), except for inhalers and Pre-filled Injector Products.

**Take-Back Event** is a one-day event at a location accessible to the public, conducted by MED-Project, for the collection of Unwanted Medicine from Residents.
Unwanted Medicine is defined in Section IV of this Plan.

Vendor is any vendor retained by MED-Project to carry out its obligations under the Program.

IV. Unwanted Medicine

For the purposes of the Plan, “Unwanted Medicine” includes all materials identified as “Covered drug[s]” under Regulations § 4.B that qualify as “Unwanted covered drug[s]” under Regulations § 4.W. Per the Regulations, Covered Drug means “a drug sold in any form and used by covered entities, including prescription and nonprescription drugs, brand name and generic drugs, drugs for veterinary use, and drugs in medical devices and combination products, including pre-filled injector products with a retractable or otherwise securely covered needle.” § 4.B. Unwanted Medicine does not include the following:

i. Expired undispensed samples direct from physicians’ offices;
ii. Unused or expired drugs from hospitals and institutions;
iii. Bulk animal pharmaceuticals from farms (business use);
iv. Vitamins or supplements;
v. Herbal-based remedies and homeopathic drugs, products, or remedies;
vi. Compressed cylinders and mercury-containing thermometers;
vii. Cosmetics, shampoos, sunscreens, toothpaste, lip balm, antiperspirants, or other personal care products that are regulated as both cosmetics and nonprescription drugs under the federal Food, Drug, and Cosmetic Act (Title 21 U.S.C. Chapter 9);
viii. Hard surface and toilet disinfectant cleaners;
ix. Drugs administered in a healthcare setting;
x. Drugs for which Producers provide a pharmaceutical product stewardship or take-back program as part of a federal Food and Drug Administration managed risk evaluation and mitigation strategy (Title 21 U.S.C. § 355-1);
xii. Drugs that are biological products as defined by 21 CFR 600.3(h) as it exists on the effective date of the Regulations if the Producer already provides a pharmaceutical product stewardship or take-back program;
xiii. Injector products and medical devices or their component parts or accessories from which Unwanted Medicine can be removed or that contain no Unwanted Medicine or no more than trace residual amounts of Unwanted Medicine;
xiv. Schedule I or other illicit drugs;
xv. Pet pesticide products contained in pet collars, powders, shampoos, topical applications, or other forms; and
xvi. Any other items excluded pursuant to the Regulations.

See Section XIV.A for collection limitations imposed by the DEA Rule.

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2 Unwanted Medicine collected at Kiosk Drop-Off Sites, Mail-Back Distribution Locations, Take-Back Events, and/or in Standard Mail-Back Packages does not include Pre-filled Injector Products. MED-Project will continue to offer Inhaler Mail-Back Services for differentially-abled and homebound Residents through the Call Center and or MED-Project Website.
V. Collection of Unwanted Medicine

The Plan provides services to collect Unwanted Medicine, including controlled substances. The collection methods and any applicable legal requirements are described below.

A. Unwanted Medicine Collection Program Implementation

B. Outreach

Per Regulations § 5.D.2, MED-Project initially notified 153 pharmacies and 17 LEA locations in the County of the opportunity to participate as a Kiosk Drop-Off Site Host. MED-Project performs outreach to these locations through calls and emails with the goal of establishing Kiosk Drop-Off Sites distributed as uniformly as possible throughout the County. As part of this outreach, MED-Project asked if the sites were interested in participating in the Program, whether the sites currently host a kiosk or other services for the disposal of Unwanted Medicine, whether pharmacies are DEA registrants, and if the sites would like more information regarding the Program.

LEAs and pharmacies that currently host kiosks in the County may transition into the Program upon entering into an agreement with MED-Project.

1. Implementation

MED-Project is working with LEAs and pharmacies identified during outreach (see Section V.A.1.) to obtain Kiosk Drop-Off Site Host signed agreements. MED-Project is working to satisfy the Service Convenience Goal through signed agreements with Kiosk Drop-Off Site Hosts. MED-Project is working to satisfy the Service Convenience Goal in any city or town with a Potential Authorized Collector and in the unincorporated areas of the County through Take-Back Events and/or Mail-Back Distribution Locations if signed agreements have not been obtained from the minimum number of Kiosk Drop-Off Sites in those locations. See Sections V.C and V.E for details of how the Program will satisfy the Service Convenience Goal.

Collection of Unwanted Medicine (excluding Pre-filled Injector Products) will begin at collection locations once agreements have been executed with each location, kiosks have been installed, sites have been trained, and, in the case of pharmacies, all requirements of the DEA and the Washington State Pharmacy Quality Assurance Commission (“WSPQAC”) have been met.

Mail-Back Services for Pre-filled Injector Products will be available to all Residents through the Call Center and MED-Project Website. Standard Mail-Back Packages and Inhaler Mail-Back Services will be available for differentially-abled and homebound Residents through the Call Center and/or MED-Project Website.

2. Convenience

Per Regulations § 7.D.2, MED-Project will strive to establish a Kiosk Drop-Off Site in each city and town with a Potential Authorized Collector and in the unincorporated county, as well as an additional Kiosk Drop-Off Site for every 30,000 Residents at pharmacies, hospitals/clinics with an on-site pharmacy, or LEAs. If the minimum number of Kiosk Drop-Off Sites cannot be established, Mail-Back Distribution Locations shall be provided to supplement the disposal of Unwanted Medicine by Residents in those areas.

Standard Mail-Back Services and Inhaler Mail-Back Services shall be available upon request to differentially-abled and homebound Residents, thereby offering more opportunities to dispose of Unwanted Medicine.
3. Services
MED-Project will assess performance, gauge feedback, and revise its approach as appropriate. As implementation proceeds, MED-Project shall continue to approach organizations that may be available as future Kiosk Drop-Off Site Hosts on an annual basis. These organizations are listed in Appendix B.

The Plan will be implemented in a flexible manner, offering coverage to Residents through a combination of Kiosk Drop-Off Sites and Mail-Back Services. Mail-Back Distribution Locations and/or Take-Back Events will be offered if the Service Convenience Goal is not met. Over the course of implementation, additional Kiosk Drop-Off Sites will be established to the extent that (1) additional eligible LEAs and/or DEA-registered pharmacies agree to participate, and (2) contracts can be executed with such entities. MED-Project will implement supplemental Take-Back Events and/or Mail-Back Distribution Locations for underserved areas.

Mail-Back Distribution Locations and/or Take-Back Events shall supplement Kiosk Drop-Off Sites if the Service Convenience Goal is not met through signed agreements with Kiosk Drop-Off Site Hosts. As MED-Project obtains additional agreements with Kiosk Drop-Off Site Hosts, these supplemental services will decrease.

Standard Mail-Back Services and Inhaler Mail-Back Services will be available upon request to differentially-abled and home-bound Residents upon request and will be reviewed for availability and effectiveness. See Section V.E for more information about the availability of Mail-Back Services.

Although Kiosk Drop-Off Sites will not provide kiosk collection for Pre-Filled Injector Products, Mail-Back Services for Pre-filled Injector Products will be available through the Call Center and MED-Project Website for all Residents. MED-Project will continue to offer separate Mail-Back Services for inhalers for differentially-abled and homebound residents.

C. Kiosk Drop-Off Sites

Kiosk Drop-Off Sites will be strategically placed across the County to best meet the Service Convenience Goal. This network will provide Residents several different outlets to participate in the Plan. All Kiosk Drop-Off Site Hosts shall provide Residents with access to Program kiosks during all regular business hours.

1. Kiosk Drop-Off Site Locations

MED-Project contacted 153 pharmacies and 17 LEAs located in the County about the opportunity to serve as a Kiosk Drop-Off Site Host. Of the locations contacted, 56 pharmacies and 11 LEAs expressed interest in participating in the Program. These interested Kiosk Drop-Off Site Hosts are identified in Appendix C.
A map of the existing and potential Kiosk Drop-Off Site locations is below.
MED-Project will continue outreach to potential Kiosk Drop-Off Site Hosts that have not expressed interest in Program participation until the Service Convenience Goal has been met and annually thereafter. These sites are listed in Appendix D.

In areas where a potential Kiosk Drop-Off Site is not available, MED-Project will seek to establish additional Kiosk Drop-Off Sites in nearby cities or towns or establish Mail-Back Distribution Locations.

As required under Regulations § 7.D.1, within ninety days of their offer to participate (unless the site requests a longer time-frame), the Program will include as a Kiosk Drop-Off Site any retail pharmacy, hospital/clinic with an on-site pharmacy, or LEA willing to serve voluntarily as a Kiosk Drop-Off Site for Unwanted Medicine and able to meet all applicable laws, regulations, and other legal requirements. Locations currently serving as a drop-off site may participate in the Program by signing agreements with MED-Project and modifying their DEA registrations if required. The process for modifying DEA registrations is outlined in Section XIV.A.1. MED-Project will work with the Kiosk Drop-Off Site Host to transition to the Program and Vendor.

See Section V.E et seq. for Mail-Back Services.

2. Drop-Off Site Kiosk Placement and Maintenance Program

Kiosk installation shall be the responsibility of MED-Project at LEAs and pharmacy Kiosk Drop-Off Sites if the Kiosk Drop-Off Site Host has identified an appropriate placement location. All kiosks in the Program must be securely placed and maintained inside a collector’s registered location or LEA’s physical location in accordance with DEA Rule §§ 1317.75(d)(1) and 1317.35(a). At pharmacies, kiosks will be placed in the immediate proximity of a designated area where controlled substances are stored and at which an employee is present (i.e., can be seen from the counter), pursuant to § 1317.75(d)(2). At a hospital or clinic with an on-site pharmacy, kiosks will be placed in an area regularly monitored by employees but not near areas of the facility where emergency or urgent care is provided. § 1317.75(d)(2)(i). Costs associated with installation and maintenance will be paid by MED-Project per the agreements with the Kiosk Drop-Off Sites.

The maintenance program will address items such as:

− Periodic inspection will occur at least quarterly of kiosks to monitor general wear and tear.
− Service Technician access to the kiosks during the regularly Scheduled Collection Service pick-ups.
− Reporting by the Kiosk Drop-Off Site Host of damage to a kiosk or requested maintenance service.

3. Kiosk Specifications

A kiosk will be offered to all host locations. Pursuant to § 1317.75(e), MED-Project kiosks at pharmacies will:

− Be securely fastened to a permanent structure.
− Be securely locked, substantially constructed containers with a permanent outer container and removable inner liner.
− Include a small opening in the outer container that allows contents to be added to the inner liner, but does not allow removal of the inner liner’s contents.
− Prominently display a sign indicating that only Schedule II-V controlled and non-controlled substances are acceptable to be placed in the kiosk; and
− Have the small opening in the outer container locked or made inaccessible to the public when a Kiosk Drop-Off Site employee is not present.
The proposed design of the pharmacy kiosk and proposed signage (Appendix E) satisfies these requirements through the use of heavy gauge steel, multiple locking mechanisms, including a locking mechanism on the drop-slot; a tamper-resistant slot; and commercial hinges. The design will increase the likelihood of consumer participation by providing easy access to wheelchair users. The locking mechanism on the drop-slot will prevent kiosk overflow once the container has reached its maximum level and is locked by the Kiosk Drop-Off Site Host. MED-Project pharmacy kiosks will come with appropriate regulatory signage and instructions, including an instruction to remove or strike out personal information from any Unwanted Medicine and packaging before depositing them and language required under the DEA Rule. Kiosk signage will provide information about what is and is not accepted in the kiosk.

Additionally, under § 1317.60(a), MED-Project kiosk inner liners will:
- Be waterproof, tamper-evident, and tear-resistant;
- Be removable and sealable immediately upon removal without emptying or touching kiosk contents;
- When sealed, make the contents of the inner liner not viewable from the outside;
- Clearly indicate the size of the inner liner; and
- Bear a permanent, unique identifier for tracking purposes.

While the DEA Rule does not require LEA kiosks to meet these same requirements, MED-Project will offer these kiosks and inner liners to LEAs. See DEA Rule at 53531.

4. Kiosk Collection

Under § 1317.05(c)(2)(iv), pharmacy Kiosk Drop-Off Sites must dispose of sealed inner liners and their contents either on-site, through common or contract carrier delivery to or pick-up by a distributor or reverse distributor, or with DEA assistance.

Section 1317.75(c) prohibits the counting, sorting, inventorying, or individual handling of any substances deposited into a pharmacy kiosk. Additionally, § 1317.60 limits inner liner access to employees of the collector and requires two employees to immediately seal the inner liner upon its removal from the pharmacy kiosk’s permanent outer container. See § 1317.60(b), (c). Section 1317.75(g) provides that pharmacy kiosk inner liner installation or removal shall be performed “by or under the supervision of at least two employees of the authorized collector.” The pharmacy kiosk sealed inner liner must not be opened, x-rayed, analyzed, or otherwise penetrated. See § 1317.60(c).

At LEA Kiosk Drop-Off Sites, Vendor and the LEA will maintain any records of removal, storage, or destruction of the collected Unwanted Medicine in a manner consistent with the LEAs’ recordkeeping requirements for illicit controlled substances evidence pursuant to § 1317.35. Law enforcement will record the unique identifier and size of the sealed inner liner transferred to Vendor. See § 1317.35. Additionally, any Unwanted Medicine will be stored in a manner to prevent the diversion of controlled substances and consistent with the LEA’s standard procedures for storing illicit controlled substances. See § 1317.35. Collected Unwanted Medicine will be transferred to the disposal facility in a manner to prevent the diversion of Unwanted Medicine and consistent with the LEA’s standard procedures for transferring illicit controlled substances. See § 1317.35.

MED-Project will coordinate with other Product Stewardship Plans to develop clear standardized instructions for Residents to use kiosks and a consistent design. Appendix E provides the kiosk design and signage MED-Project expects to propose when coordinating with other Product Stewardship Plans.

Specifically, as required under § 1317.75(e)(4), all kiosks will prominently display a sign stating that: “Only Schedule II-V controlled and non-controlled substances that are lawfully possessed by the ultimate user are acceptable to be placed in the kiosk. Schedule I controlled substances, illicit or dangerous substances, and any controlled substances not lawfully possessed by the ultimate user may not be placed in the kiosk.”
MED-Project’s Kiosk Drop-Off Site collection system complies with these DEA requirements for pharmacy and LEA Kiosk Drop-Off Sites. Vendor, pharmacies, and LEAs participating in the Plan will keep all records required under the DEA Rule, including those required under §§ 1304 and 1317.35. Pharmacy Kiosk Drop-Off Site Hosts and Vendor will be instructed never to count, sort, inventory, or individually handle kiosk contents.

A Kiosk Drop-Off Site may elect to participate in the program via either the Scheduled Collection Service method or On-Demand Collection Service method. For both methods, MED-Project provides for the collection, transport, and disposal of Unwanted Medicine at no cost to the Kiosk Drop-Off Site.

If a Kiosk Drop-Off Site Host elects to participate via the On-Demand Collection Service method, the Kiosk Drop-Off Site employees shall prepare the inner liner for shipment. The On-Demand Collection Service method enables a Kiosk Drop-Off Site Host to directly control the timing for servicing the kiosk and Kiosk Drop-Off Site employees are able to seal the liner for packaging and transport at a time of their choosing. The Kiosk Drop-Off Site employees can schedule Carrier to pick up the packaged inner liner or can offer the packaged inner liner for transport during a regular Carrier pick-up. This method enables the Kiosk Drop-Off Site to avoid disruptions to operations that may result from Vendor-scheduled visits or storage limitations.

If a Kiosk Drop-Off Site Host elects to participate via the Scheduled Collection Service method, a Service Technician will regularly come to the Kiosk Drop-Off Site to help prepare the inner liner for shipment and disposal. Kiosk Drop-Off Sites that take part in the Scheduled Collection Service method will have regular year-round scheduled times for pick-up by Carrier based on the specific location’s business hours and volume of collected medications.

When servicing a kiosk at a Kiosk Drop-Off Site, two On-Demand Collection Service Kiosk Drop-Off Site employees or a Service Technician under the supervision of two Scheduled Collection Service Kiosk Drop-Off Site employees following instructions provided by Vendor will:

- Check the kiosk for any damage;
- Remove the inner liner and box from the kiosk and seal the inner liner at once following procedures meeting all DEA requirements;
- Match the unique identifier of the inner liner to the tracking number on the shipping label;
- Prepare the materials for shipment and perform applicable pre-transportation functions to following the DOT HMR;
- Replace the removed inner liner and box with a replenishment inner liner and box provided by Vendor; and
- Schedule a pick-up by Carrier to be completed within a few business days or offer the packaged and sealed inner liner for transport by Carrier at the Kiosk Drop-Off Site.

If the packaged and sealed inner liner is prepared prior to pick-up by Carrier, the Kiosk Drop-Off Site Host will store the sealed inner liner in compliance with all applicable laws, regulations, and other legal requirements until Carrier pick-up.

Any collection and storage of controlled substances by LEAs will be consistent with the LEA’s standard procedures for transferring illicit controlled substances. See DEA Rule § 1317.35.

A review of the 2017 calendar year data from MED-Project kiosk drop-off sites indicated the average time for Carrier pick-ups was approximately 2 to 3 days after the Service Technician packaged the sealed inner liner for transport, with no pick-ups exceeding 14-days. MED-Project will meet with Vendor on a regular basis to monitor service metrics, including pick-up timing.
The Carrier will transport the package to a reverse distributor facility listed in Section X.D before ultimate incineration at a disposal facility listed in Section X.E in accordance with Section V.D.

Kiosk Drop-Off Site Hosts may change their choice of collection method by providing written notice to MED-Project. A change to either the On-Demand Collection Services method or the Scheduled Collection Services method will initiate within 30 days of such notification unless a longer timeframe is requested by the Kiosk Drop-Off Site Host. Messages received from Kiosk Drop-Off Sites will be returned within one business day.

5. Procedures if a Kiosk is Full Prior to Scheduled Pick-Up

The Scheduled Collection Service Kiosk Drop-Off Site Host shall be instructed to lock the drop-slot to the kiosk when the kiosk is full and notify MED-Project of the need for service if prior to the scheduled service date.

Vendor shall provide a network of trained Service Technicians. Vendor will communicate service requests to field managers responsible for Service Technicians. Vendor will direct service to a trained Service Technician who is in closest proximity to the Kiosk Drop-Off Site requesting the service. This process provides for a timely response to Kiosk Drop-Off Sites requiring service prior to the scheduled date.

Service timelines will be assessed based on the specific characteristics of the Kiosk Drop-Off Site’s need. If necessary, Vendor will be able to respond within hours of the request. If the request does not require an urgent response, Vendor will plan the response within two to three business days of the request. Vendor will not exceed one business week from the initial request. In the interim, pharmacy Kiosk Drop-Off Site Hosts shall be instructed to secure the kiosk and its contents in accordance with DEA requirements.

6. Unplanned Event Preparedness

From time to time, an unplanned event may cause a Kiosk Drop-Off Site to require service outside of the normal service schedule. In these situations, the Kiosk Drop-Off Site Host will place a service request through the Help Desk.

A major event, such as a flood, earthquake, or fire, may jeopardize the security characteristics of the kiosk as well as the structural integrity of the Kiosk Drop-Off Site. Such events may require the involvement of law enforcement, fire, or other emergency service personnel. Once it is determined the area is safe for access, Vendor will dispatch Rapid Responders to secure the kiosk and remove its contents.

Vendor maintains a network of Rapid Responders that can be contacted in the case of an incident or other event requiring a Rapid Response. Vendor is able to respond within two to three hours in most cases when notified of a need for a Rapid Response. Rapid Responders will bring all necessary equipment to manage the specific needs of the Kiosk Drop-Off Site requiring a Rapid Response. Kiosk Drop-Off Site Hosts will be directed to call 911 in situations posing an immediate threat to the environment or health.

Along with major event preparedness, Vendor provides timely responses to events that may cause an inconvenience to the Kiosk Drop-Off Site. If the request does not require a Rapid Response, Vendor will typically respond within two to three business days of the event.

In addition, items that a Resident deposits into a kiosk will not be retrieved.

VI. Take-Back Events

MED-Project will provide Take-Back Events or Mail-Back Services if the Service Convenience Goal is not met through signed Kiosk Drop-Off Site agreements.
Federal, state, tribal, or local law enforcement shall oversee all Take-Back Events. If possible, MED-Project will work to conduct the Take-Back Events in coordination with other scheduled events (i.e., Earth Day celebrations, Health and Wellness Fairs) to maximize convenience to Residents. In situations where a location in the community cannot be scheduled, MED-Project will work with the participating LEA to host the event at other locations available to the public. Potential targeted events can be viewed in Appendix H.

Due to the changing schedule of Take-Back Events, the list of take-back dates and locations will be maintained on the MED-Project Website as events are scheduled.

A. Method

Hosting of Take-Back Events is contingent upon participation and oversight by contracted LEAs. MED-Project will work with participating LEAs to ensure Take-Back Events are compliant and successful. Events will be promoted and communicated to the public through local communication channels, as outlined in Appendix F.

The process of conducting Take-Back Events will meet all applicable laws, regulations, and other legal requirements. MED-Project will contract with LEAs to oversee Take-Back Events. These contracts will provide for the collection, transportation, and disposal of Unwanted Medicine from Take-Back Events and ensure that all requirements of participating LEAs are met. MED-Project will work with LEAs to accommodate any reasonable requirements.

B. Procedure

MED-Project will partner with LEAs to ensure that at least one law enforcement officer oversees collection at all Take-Back Events pursuant to DEA Rule § 1317.65(a), (b). The law enforcement officers will maintain control and custody of all Unwanted Medicine collected at Take-Back Events from collection until the Unwanted Medicine is securely transferred, stored, or destroyed, as required by § 1317.65(b). Only ultimate users and persons authorized to dispose of an ultimate user decedent’s property in lawful possession of controlled substances in Schedules II-V may transfer these substances to the LEA during the event. § 1317.65(e). No other person will handle controlled substances at Take-Back Events under § 1317.65(e); however, Vendor may assist LEAs in the collection of Unwanted Medicine at Take-Back Events. See DEA Rule at 53539.

Take-Back Events will typically be staffed by at least two Vendor employees. Vendor will work in coordination with MED-Project and LEAs to monitor and ensure collection of all material at Take-Back Events is compliant with all applicable laws, regulations, and other legal requirements and meets the expectations of the planned event. Vendor will work in conjunction with local law enforcement to ensure all material is placed in a compliant collection receptacle and securely shipped to meet all applicable laws, regulations, and other legal requirements. Any material that is not Unwanted Medicine or does not meet legal requirements will be rejected.

Vendor and the LEA will maintain all records of removal, storage, or destruction of the collected Unwanted Medicine in a manner consistent with the LEA’s recordkeeping requirements for illicit controlled substances evidence pursuant to § 1317.35. Any collected Unwanted Medicine will be stored to prevent the diversion of controlled substances and consistent with the LEA’s standard procedures for storing illicit controlled substances. Any storage of Unwanted Medicine by Vendor will also comply with the applicable security requirements of §§ 1301 and 1317, including the requirement that Unwanted Medicine be securely stored in a manner consistent with the security requirements for Schedule II controlled substances.

Vendor will package Unwanted Medicine in inner liners, match the unique inner liner identifier to shipping labels, and prepare the inner liners for shipment in compliance with all applicable laws, regulations, and
other legal requirements. Collected material will be weighed following the completion of each event. With the sealed inner liners remaining under the control and custody of the LEA, Vendor will assist the LEA with the transportation of the sealed inner liners to the LEA’s facility. Vendor will schedule a pick-up from the LEA facility to take place within a few business days of the event.

C. Fees and Cost

MED-Project shall pay all administrative and operational costs and fees associated with the Take-Back Events.

VII. Disposal of Unwanted Medicine from Kiosk Drop-Off Sites and Take-Back Events

Unwanted Medicine is destroyed in compliance with all applicable laws, regulations, and other legal requirements at one of the disposal facilities listed in Section X.E. Section X.E includes municipal waste combustors, medical waste incinerators, and hazardous waste incinerators.

The Health Department has already approved several permitted municipal waste combustors for the destruction of Unwanted Medicine collected via Host Assisted Collection Kiosk Drop-Off Sites, Inhaler Mail-Back Packages, and Injector Mail-Back Packages. See Appendix I. The Health Department has also already approved the use of certain medical waste incinerators for the disposal of Standard Mail-Back Packages and Inhaler Mail-Back Packages. See Appendix I. For similar reasons as set forth in the above-cited requests, MED-Project requests that the Health Department approve the use of any permitted municipal waste combustors and medical waste incinerators for all Unwanted Medicine collected by the Program from Kiosk Drop-Off Sites.

The municipal waste combustors and medical waste incinerators listed in Section X.E are permitted to receive Unwanted Medicine collected by the Program, and, due to cost, logistics, and other considerations, disposal exclusively at a hazardous waste facility is not feasible at this time. The municipal waste combustors and medical waste incinerators listed in Section X.E would provide equivalent protection and promotion of the health, safety, and welfare of the general public as the municipal waste combustors and medical waste incinerators already approved by the Health Department. In addition, allowing the program to rely on these facilities would help control costs, maintain flexibility, and provide multiple disposal options to ensure redundancy in the event that other disposal facilities become unavailable at any time or there is some other disruption outside MED-Project’s control.

VIII. Unwanted Medicine Mail-Back Services

MED-Project will provide three types of Mail-Back Services:

- Standard Mail-Back Services for differentially-abled and homebound Residents and to supplement kiosks until the Service Convenience Goal is met, as described in Section V.E.1;
- Injector Mail-Back Services for the collection of Pre-filled Injector Products for all Residents as described in Section V.E.2; and
- Inhaler Mail-Back Services for the collection of inhalers for differentially-abled and homebound Residents as described in Section V.E.3.

Mail-Back Packages will be pre-paid and pre-addressed, and Mail-Back Services shall comply with all applicable laws, regulations, and other legal requirements.
A. Standard Mail-Back Services for Unwanted Medicine, Excluding Inhalers and Pre-filled Injector Products

MED-Project will provide Standard Mail-Back Services at no cost to differentially-abled and homebound Residents. Standard Mail-Back Packages will also be available at Mail-Back Distribution Locations for all Residents until the Service Convenience Goal is met via Kiosk Drop-Off Sites. The pre-paid shipping label will direct the Standard Mail-Back Package to a facility identified in Section X. Standard Mail-Back Packages for Unwanted Medicine shall comply with all applicable laws, regulations, and other legal requirements.

Pursuant to DEA Rule § 1317.70(c), the Standard Mail-Back Packages will be:

- Nondescript and without any markings or information potentially indicating that they contain Unwanted Medicine, including controlled substances;
- Water and spill-proof, tamper-evident, tear-resistant, and sealable;
- Pre-addressed with and delivered to Vendor’s registered address;
- Pre-paid;
- Provided with a unique identifier enabling tracking; and
- Provided with instructions indicating the process for mailing back the packages, accepted substances, a notice about mailing restrictions, and a notice that only packages provided by Vendor will be accepted for destruction.

Ultimate users and persons lawfully entitled to dispose of an ultimate user decedent’s property will not be required to provide any personally identifiable information when using Standard Mail-Back Services to dispose of Unwanted Medicine. See § 1317.70(d). As required under § 1317.70(e), Vendor will only accept Standard Mail-Back Packages it made available (or packages lawfully forwarded under DEA requirements). Within three business days of receipt, Vendor will notify the DEA if it receives Standard Mail-Back Packages likely containing controlled substances that Vendor did not make available or did not agree to receive pursuant to DEA requirements. In accordance with § 1317.70(f), when Standard Mail-Back Packages are received, only Vendor employees will handle the Standard Mail-Back Packages. Standard Mail-Back Packages will not be opened, x-rayed, analyzed, or otherwise penetrated upon receipt by Vendor. See § 1317.70(f). Vendor and MED-Project will keep all records required under the DEA Rule, including those identified in § 1304.22(f).

See Appendix G for a sample package and package specifications.

B. Injector Mail-Back Services

For Pre-filled Injector Products, MED-Project will offer all Residents Injector Mail-Back Services, via the Call Center and MED-Project Website. The pre-paid shipping label will direct the Injector Mail-Back Package to an approved facility identified in Section X. Injector Mail-Back Packages will include an instruction sheet describing how to properly dispose of Pre-filled Injector Products that explains what materials may be placed in a sharps container, how to use the sharps container, and how to return the Injector Mail-Back Package.

See Appendix G for a sample package and package specifications.

C. Inhaler Mail-Back Services

For inhalers, MED-Project will offer differentially-abled and homebound Residents Inhaler Mail-Back Services, via the Call Center and MED-Project Website. The pre-paid shipping label will direct the Inhaler Mail-Back Packages to an approved facility identified in Section X. An instruction sheet will be included with the Inhaler Mail-Back Package that describes how to properly dispose of inhalers, explains what
materials may be placed in the Inhaler Mail-Back Package, and how to return the Inhaler Mail-Back Package.

See Appendix G for a sample package and package specifications.

**D. Mail-Back Package Availability**

Differentially-abled and homebound Residents may request Standard Mail-Back Packages for Unwanted Medicine and Inhaler Mail-Back Packages for inhalers by calling the Call Center or via the MED-Project Website. Upon such request, Residents will be provided Standard Mail-Back Packages or Inhaler Mail-Back Packages complying with all applicable federal, state, and local laws, regulations, and other legal requirements.

Injector Mail-Back Services for Pre-filled Injector Products will be available to all Residents through the Call Center and MED-Project Website.

All Mail-Back Packages will contain an insert with instructions for use and information about other options for disposing of Unwanted Medicine in the Required Languages.

**E. Mail-Back Package Collection and Disposal**

Requests to receive Mail-Back Packages will be taken through the Call Center or the MED-Project Website. Residents can continue to request additional packages, if necessary, by contacting MED-Project via the Call Center and through the MED-Project Website. As described above, Residents may also obtain Standard Mail-Back Packages through Mail-Back Distribution Locations if MED-Project provides Mail-Back Distribution Locations as a means to satisfy the Service Convenience Goal.

Residents will be directed to follow the instructions provided in the Mail-Back Package and to place their Unwanted Medicine in the pre-addressed/pre-paid package. The United States Postal Service (“USPS”) estimates up to three business days for delivery of First-Class Mail. The Mail-Back Package shall be sent to an approved facility and handled in compliance with all Applicable Laws. Each Mail-Back Package will have a unique identifier for tracking.

For Standard Mail-Back Packages, upon arriving at the disposal facility, the Mail-Back Packages shall be scanned for receipt verification and then shall be incinerated. MED-Project proposes to use municipal waste combustors, medical waste incinerators, and possibly hazardous waste incinerators to dispose of Standard Mail-Back Packages. The Health Department has already approved the use of a medical waste incinerator for the disposal of Standard Mail-Back Packages. See Appendix I. For the same reasons as set forth in Section V.D, MED-Project requests that the Health Department approve the use of permitted municipal waste combustors and medical waste incinerators listed in Section X.E for any Unwanted Medicine collected by the Program via Standard Mail-Back Packages.

Any storage of filled Standard Mail-Back Packages by Vendor will comply with the applicable security requirements of DEA Rule Section 1317, including the requirement that Unwanted Medicine is securely stored in a manner consistent with the security requirements for Schedule II controlled substances. All Unwanted Medicine in Standard Mail-Back Packages will be destroyed promptly.

The Health Department previously approved the use of municipal waste combustors and medical waste incinerators for Injector Mail-Back Packages and Inhaler Mail-back Packages. The Health Department has already approved the use of certain medical waste incinerators and municipal waste combustors for Inhaler Mail-Back Packages. See Appendix I. The Health Department has also already approved the use of certain municipal waste combustors for the disposal of Injector Mail-Back Packages. See Appendix I. For the same reasons as set forth in Section V.D, MED-Project requests that the Health Department approve the use permitted municipal waste combustors and medical waste incinerators listed in Section
X.E for all Unwanted Medicine collected by the Program via Inhaler Mail-Back Packages and Injector Mail-Back Packages.

**IX. Plan and Collection Goals**

The short- and long-term goals of the Plan are described generally as follows. Additional detail on implementation is provided in Section V.A.2.

Once all drop-off locations are fully operational, the program expects to collect approximately 360 pounds per Kiosk Drop-Off Site during each calendar year, based on collection totals in other jurisdictions. Assuming approximately 37 Kiosk Drop-Off Sites are operational for a full year, MED-Project anticipates collecting approximately 13,320 pounds of Unwanted Medicine from Kiosk Drop-Off Sites in 2019. See section V.B. for more information about Kiosk Drop-Off Site collection.

Until the Service Convenience Goal is met, MED-Project anticipates supplementing Kiosk Drop-Off Sites through Mail-Back Distribution Locations.

MED-Project Standard Mail-Back Packages have a capacity of 8 oz. per package. Due to the lack of information available from current MED-Project Programs, MED-Project's estimated collection totals in 2018 could vary based on actual usage. Collection in 2018 will be used to adjust subsequent years' collection goals.

Data from 2018 will be utilized to establish baseline collection and estimate collection goals for future years.

**Anticipated Collection Amounts (Lbs.):**

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<thead>
<tr>
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<th>2018</th>
<th>2019</th>
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<tr>
<td>Kiosk Drop-Off Sites</td>
<td>6,500</td>
<td>13,320</td>
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<td>Standard Mail-Back Services</td>
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<tr>
<td>Pounds Collected</td>
<td>8,000</td>
<td>13,320</td>
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**Goal Area** | **Short-Term** | **Long-Term** |
<table>
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<th></th>
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<tr>
<td>Collection</td>
<td>Approximately 8,000 pounds of Unwanted Medicine collected through Kiosk Drop-Off Sites and Standard Mail-Back Services.</td>
<td>Approximately 13,320 pounds of Unwanted Medicine collected through Kiosk Drop-Off Sites and Standard Mail-Back Services. Increased reliance on established Kiosk Drop-Off Sites and limited or no collection through Mail-Back Distribution Locations and/or Take-Back Events.</td>
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### Goal Area

<table>
<thead>
<tr>
<th>Education &amp; Public Outreach</th>
<th>Short-Term</th>
<th>Long-Term</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Develop a baseline number of MED-Project Website page views or unique visitors. Establish a baseline of LEAs, retail pharmacies, other pharmacies (healthcare, etc.), community groups, and other third parties contacted and report appropriate statistics as outlined in the Survey and Annual Report sections of this Plan. Establish a baseline number of media outlets receiving press advisory, with a minimum of five outlets. Establish a baseline percentage of community centers reached. Establish a baseline number of messages to MED-Project returned within predetermined timeframe.</td>
<td>On an ongoing basis, MED-Project may revise and/or add communications materials based on changes to the Plan. MED-Project will evaluate media and public outreach as well as collect feedback by survey in order to make adjustments and improvements to the Program. The review will measure percent awareness of the Stewardship Plan, assess to what extent Kiosk Drop-Off Sites and other collection methods are convenient and easy to use, and assess knowledge and attitudes about risks of abuse, poisonings, and overdoses from prescription and nonprescription medicines used in the home. Results of the review will be published on the MED-Project Website established under Section XI.D.2.</td>
</tr>
</tbody>
</table>

| Collector Outreach | Contact LEAs and retail pharmacies and invite them to participate in the Plan. Set targets for LEAs and retail pharmacies. | Ongoing communication with pharmacies and LEAs. Evaluation of Kiosk Drop-Off Sites against the Service Convenience Goal. |

### X. Patient Privacy

Instructions at each Kiosk Drop-Off Site Host location will inform people who deposit Unwanted Medicine that they should completely cross out, remove, or otherwise make unreadable all personally identifiable information on the drug containers and packaging before depositing them in the kiosk. In cases where people follow the instructions, there will be no personally identifiable information.

In addition to kiosk signage, all MED-Project promotional and educational materials encourage residents to protect their information by ensuring that identifiable information is not present before depositing containers into kiosks. Examples of MED-Project brochures, signage, and MED-Project Website materials are available in Appendix L, Appendix E, and Appendix K. Vendor has additional protections available for keeping residents’ personal identifiable information safe and secure. Service Technicians are well trained in managing items containing sensitive patient information. Privacy training is part of a Service Technician’s prerequisite for field services. As an added protection, the liners for the kiosk will be opaque rather than clear, in compliance with the DEA Rule. This will prevent anyone, including the Service Technician, from seeing any information on the containers placed in the kiosks.
XI. **Call Center**

MED-Project will manage a Call Center for Residents to obtain information about Kiosk Drop-Off Sites, Take-Back Events, Mail-Back Services, educational materials, and other aspects of the Program. The Call Center will provide:

1. Items that can be disposed;
2. Disposal options;
3. Direction to the Program MED-Project Website and Call Center operators for additional information; and
4. Information about Mail-Back Services.

Because the list of Kiosk Drop-Off Sites is subject to change, Residents will be directed to the MED-Project Website or to an operator for detailed information about kiosk locations and service hours.

Per Regulations § 8.B, MED-Project will operate a call center jointly with all other Stewardship Programs should other Stewardship Plans be approved by the Health Department.

Messages received from Kiosk Drop-Off Sites will be returned within one business day.

XII. **Training**

Operational procedures, including training, are the responsibility of the Kiosk Drop-Off Site. MED-Project will support training if agreed to with the Kiosk Drop-Off Site. Additionally, MED-Project will manage a Help Desk to answer questions and monitor comments from participating Kiosk Drop-Off Sites.

Vendor certifies training of Service Technicians on the following:

- RCRA/EPA Hazardous Waste training.
- DOT Hazardous Materials training.
- Occupational Safety and Health Administration ("OSHA") hazardous waste requirements and emergency response initial training and annual refresher courses.
- DEA controlled substances handling protocols.
- Health Insurance Portability and Accountability Act requirements.
- OSHA’s Blood Borne Pathogens Standards.
XIII. Vendor, Transporter, and Disposal Facility Information

A. Vendors

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<thead>
<tr>
<th>Name</th>
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<tr>
<td>Covanta Environmental Solutions, LLC</td>
<td>190 Shellyland Road, Manheim, PA 17545</td>
<td>(717) 653-8882</td>
<td><a href="http://www.covantaes.com">www.covantaes.com</a></td>
<td>Vendor</td>
</tr>
<tr>
<td>PureWay Compliance, Inc.</td>
<td>20501 Katy Freeway, Suite 206, Katy, TX 77450</td>
<td>(877) 765-3030</td>
<td><a href="http://pureway.com/">http://pureway.com/</a></td>
<td>Vendor</td>
</tr>
<tr>
<td>Stericycle Specialty Waste Solutions, Inc.</td>
<td>2850 100th Court NE, Blaine, MN 55449</td>
<td>(612) 285-9865</td>
<td><a href="http://www.stericycleenvironmental.com">www.stericycleenvironmental.com</a></td>
<td>Vendor</td>
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B. Carriers and Transporters

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<tr>
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<tr>
<td>Covanta Environmental Solutions Carriers II, LLC</td>
<td>5300 N 33rd St., Milwaukee, WI 53209</td>
<td>(336) 683-0809</td>
<td><a href="http://www.covantaes.com">www.covantaes.com</a></td>
<td>Hazardous Waste Transporter</td>
</tr>
<tr>
<td>EMS Dispatch, Inc.</td>
<td>316 W Mt Vernon St, Lansdale, PA 19446</td>
<td>(717) 689-5129</td>
<td><a href="https://www.facebook.com/pages/Ems-Dispatch/137953629908858">https://www.facebook.com/pages/Ems-Dispatch/137953629908858</a></td>
<td>Contract Carrier</td>
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<tr>
<td>Omada Worldwide Expedite, Inc.</td>
<td>853 S. Columbia Road, Suite 175, Plainfield, IN 46168</td>
<td>(317) 293-5777</td>
<td><a href="http://www.omadaworldwide.com/">www.omadaworldwide.com</a></td>
<td>Contract Carrier</td>
</tr>
<tr>
<td>Online Transport Inc.</td>
<td>6311 W Stoner Dr, Greenfield, IN 46140</td>
<td>(317) 894-2159</td>
<td><a href="http://www.onlinetransport.com/">http://www.onlinetransport.com/</a></td>
<td>Contract Carrier</td>
</tr>
<tr>
<td>Ross Transportation Services, Inc.</td>
<td>36790 Giles Road, Grafton, OH 44044</td>
<td>(440) 366-2000</td>
<td><a href="http://www.rossenvironmental.com/services/transportation/">http://www.rossenvironmental.com/services/transportation/</a></td>
<td>Private Carrier</td>
</tr>
<tr>
<td>Sodrel Logistics, LLC</td>
<td>1 Sodrel Dr., Clarksville, IN 47129</td>
<td>(812) 282-7941</td>
<td><a href="http://www.sodreltrucklines.com">http://www.sodreltrucklines.com</a></td>
<td>Contract Carrier</td>
</tr>
<tr>
<td>Stericycle Specialty Waste Solutions, Inc.</td>
<td>2850 100th Court NE, Blaine, MN 55449</td>
<td>(612) 285-9865</td>
<td><a href="http://www.stericycleenvironmental.com">www.stericycleenvironmental.com</a></td>
<td>Hazardous Waste Transporter</td>
</tr>
<tr>
<td>Tri-State Motor Transit Co.</td>
<td>8141 E. 7th St., Joplin, MO, 64801</td>
<td>(877) 860-1600</td>
<td><a href="https://tristatesecured.com/">https://tristatesecured.com/</a></td>
<td>Hazardous Waste Transporter</td>
</tr>
<tr>
<td>United Parcel Service, Inc.</td>
<td>55 Glenlake Parkway NE, Atlanta, GA 30328</td>
<td>(800) PICK-UPS</td>
<td><a href="http://www.UPS.com/">www.UPS.com</a></td>
<td>Common Carrier</td>
</tr>
<tr>
<td>Waste Recovery Solutions, LLC</td>
<td>343 King St., Myerstown, PA 17067</td>
<td>(336) 683-0809</td>
<td><a href="http://www.covantaes.com">www.covantaes.com</a></td>
<td>Hazardous Waste Transporter</td>
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### C. Reverse Distributor Facilities

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<tr>
<td>Covanta Environmental Solutions, LLC</td>
<td>2515 S Holt Rd, Indianapolis, IN 46241</td>
<td>(317) 719-6397</td>
<td><a href="https://www.covanta.com/Our-Facilities/CES-Indy">https://www.covanta.com/Our-Facilities/CES-Indy</a></td>
<td>DEA Registered Collector and Reverse Distributor</td>
</tr>
<tr>
<td>Covanta Manheim, Pennsylvania Facility</td>
<td>190 Shellyland Road, Manheim, PA 17545</td>
<td>(717) 653-8882</td>
<td><a href="http://www.covantaes.com">www.covantaes.com</a></td>
<td>DEA Registered Collector and Reverse Distributor</td>
</tr>
<tr>
<td>Stericycle, Inc., Indianapolis, Indiana Facility</td>
<td>2670 Executive Drive, Suite A, Indianapolis, IN 46241</td>
<td>(317) 275-7530</td>
<td><a href="http://www.stericycleenvironmental.com">www.stericycleenvironmental.com</a></td>
<td>DEA Registered Reverse Distributor</td>
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### D. Disposal Facilities

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<tr>
<td>Covanta Marion, Inc.</td>
<td>4850 Brook Lake Rd. NE, Brooks, OR 97305</td>
<td>(503) 393-0890</td>
<td><a href="https://www.covanta.com/Our-Facilities/Covanta-marion">https://www.covanta.com/Our-Facilities/Covanta-marion</a></td>
<td>Municipal Waste Combustor</td>
</tr>
<tr>
<td>Curtis Bay Energy, LP</td>
<td>3200 Hawkins Point Road, Baltimore, MD 21226</td>
<td>(855) 228-1715</td>
<td><a href="http://www.curtisbayenergy.com">www.curtisbayenergy.com</a></td>
<td>Medical Waste Incinerator</td>
</tr>
<tr>
<td>Heritage Thermal Services – Ohio</td>
<td>1250 Saint George Street, East Liverpool, OH 43920</td>
<td>(800) 545-7655</td>
<td><a href="http://www.heritage-thermal.com/">http://www.heritage-thermal.com/</a></td>
<td>Hazardous Waste Incinerator</td>
</tr>
<tr>
<td>Huntsville Solid Waste Disposal Authority</td>
<td>5251 Triana Blvd SW, Huntsville, AL 35805</td>
<td>(256) 882-1019</td>
<td><a href="https://www.covanta.com/Our-Facilities/Covanta-Huntsville">https://www.covanta.com/Our-Facilities/Covanta-Huntsville</a></td>
<td>Municipal Waste Combustor</td>
</tr>
<tr>
<td>Indianapolis Resource Recovery Facility in Indiana, operating as Covanta Indianapolis, Inc.</td>
<td>2320 S Harding St., Indianapolis, IN 46221</td>
<td>(317) 634-7367</td>
<td><a href="http://www.covanta.com/facilities/facility-by-location/indianapolis.aspx">http://www.covanta.com/facilities/facility-by-location/indianapolis.aspx</a></td>
<td>Municipal Waste Combustor</td>
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<tr>
<td>Lancaster County Waste to Energy Facility</td>
<td>1911 River Road, Bainbridge, PA 17502</td>
<td>(717) 397-9968</td>
<td><a href="http://www.covanta.com">www.covanta.com</a></td>
<td>Municipal Waste Combustor</td>
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<tr>
<td>Ross Incineration Services, Inc.</td>
<td>36790 Giles Road, Grafton, OH 44044</td>
<td>(440)-748-5800</td>
<td><a href="http://www.rossenvironmental.com/">http://www.rossenvironmental.com/</a></td>
<td>Hazardous Waste Incinerator</td>
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</tr>
<tr>
<td>York County Resource Recovery Facility</td>
<td>2651 Blackbridge Road, York, PA 17406</td>
<td>(717) 843-2902</td>
<td><a href="http://www.covanta.com">www.covanta.com</a></td>
<td>Municipal Waste Combustor</td>
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XIV. Unwanted Medicine Educational and Outreach Programming

A. Overview

The following communications plan includes a description of the public education and outreach efforts that MED-Project will undertake to educate Residents about the collection and disposal of Unwanted Medicine from households.

While MED-Project operates an education and outreach program specific to each individual Plan, the MED-Project Website, signage, and printed material will provide consistent branding across all counties to the extent possible.

As required by Regulations § 8.B, MED-Project will seek to coordinate its promotional activities with other approved Stewardship Programs.

B. Audiences

To effectively educate the public about the Plan, MED-Project has developed a comprehensive communications campaign featuring both broad communications tactics (e.g., media advisories, etc.) as well as targeted outreach to audiences directly involved in the distribution to and use of medicines by Residents. These audiences include:

- General public
- Pharmacies and Retailers of Covered Drugs
- Health care providers
- Veterinary providers
- Public health facilities
- Law enforcement agencies

This Plan details Program efforts to reach the varied cultural, linguistic, geographic, and age demographics, including through outreach to ethnic, community, and alternate-language media (Appendix M); outreach to community organizations serving a broad range of audiences (Appendix B); availability of alternate language phone lines (Section XI.D.1.); and availability of educational information through a broad range of channels, including a toll-free Call Center, broadcast media, and/or the internet.

C. Messages

MED-Project messaging will focus on the following goals:

- Educating Residents about the appropriate use, storage, and disposal of Unwanted Medicine,
- Educating Residents about appropriate storage and disposal of Pre-filled Injector Products,
- Educating Residents about Mail-Back Services available, and;
- Providing Residents with clear steps to properly manage the disposal of their Unwanted Medicine, inhalers, and Pre-filled Injector Products including following instructions found on the medicine label, use of Kiosk Drop-Off Sites, available Mail-Back Services, and/or Take-Back Events.

Key points of emphasis will include:

- The importance of taking medicines as prescribed by your health care provider;
- The importance of adhering to and completing your provider-prescribed therapy;
- The importance of properly and securely storing medicines;
- The importance of promptly and properly disposing of Unwanted Medicine;
- How to find and use Kiosk Drop-Off Sites;
- How to properly use the Mail-Back Services provided;
- How to properly dispose of Unwanted Medicine; and
Privacy issues (removing personally identifiable information from labeled prescription containers).

MED-Project will also collaborate with home health care providers to promote the use of Standard Mail-Back Services by Residents who are differentially-abled or homebound.

**D. Tools/Communications Channels**

The Program will include several components designed to reach consumers and provide consistent access to timely and relevant information. Distribution of materials will include audiences such as LEAs, pharmacies, health care providers and systems, health associations, local government agencies, and other community organizations and will be evaluated regularly for effectiveness. Tools and communication channels will include:

1. **Phone**

MED-Project will manage a Call Center for Residents to obtain information about Kiosk Drop-Off Sites, educational materials, and other aspects of the Program. The toll-free number will provide:

- The MED-Project Call Center will initially support English and Spanish. The Call Center will also provide an option for callers to be transferred to a staffed Call Center.
- A recorded-line script will provide basic information about how the Program works, where to obtain more information (e.g., the website), and will also include an option to talk with an operator to find a Kiosk Drop-Off Site, request Mail-Back Services, or find a Mail-Back Distribution Location and/or Take-Back Event in the caller’s ZIP code or local area.
- The recorded call script will include language directing callers with medical emergencies to call 911. Patients with medication-related questions will be directed to contact their health care provider(s).

Please see Appendix J for a sample template call script.

2. **MED-Project Website**

MED-Project is developing a mobile-friendly website translated into the Required Languages. Information available to users will include locations of Kiosk Drop-Off Sites, Take-Back Events, educational materials, frequently asked questions and responses, Mail-Back Services information, and Mail-Back Distribution Locations. The MED-Project Website and all materials will discourage disposal of unused, expired, or contaminated pharmaceutical wastes in the solid waste system in Pierce County per the Regulations.

- The Plan includes a sample mockup of the MED-Project Website and its supporting pages. Appendix K provides a proof of concept for each page.
- The MED-Project Website will also include access to a public relations toolkit in a downloadable format (see Section XI.D.3) and contact information for Residents. A toolkit available on the MED-Project Website includes a brochure and a frequently asked questions (FAQ) document (Appendix L), which will be reviewed and updated periodically, as well as a public service announcement available in broadcast or audio versions. Translations of the brochure and FAQ will be available in the Required Languages.
- Community and government organizations and other public interest groups seeking materials to promote the Program will be encouraged to access these resources.

3. **Materials**

Educational materials about the Program and describing how to properly dispose of Unwanted Medicine, inhalers, and Pre-filled Injector Products will be available through the MED-Project Website, through potential third-party partners, community organizations, and at Kiosk Drop-Off Sites. These partners will include pharmacies, health care facilities, and veterinary facilities. MED-Project will also provide local
governments and other interested parties with materials covering the proper disposal of Unwanted Medicine. To the extent possible, materials will be translated into the Required Languages.

The Plan includes a sample of the educational brochure (Appendix L). Educational materials use plain language and explanatory images to promote consumer education and collection options to Residents with limited English proficiency.

4. Media Outreach

The Program will conduct public outreach through mediums such as traditional and social media, posting of educational signage, and at community events. Outreach efforts will encourage media outlets and third-party groups to download and use the toolkit. MED-Project will coordinate outreach for scheduled Take-Back Events to promote participation. The following materials support the Unwanted Medicine educational and outreach programming:

- Please see Appendix J for a sample education and outreach call script with the toolkit, including brochures in Appendix L and MED-Project Website information included in Appendix K.
- Please see Appendix F for a sample list of key media outlets.
- Please see Appendix M for a sample list of social media outlets.
- Please see Appendix N for a sample template media advisory announcing Take-Back Events.

5. Broadcast Outreach

MED-Project will utilize local television outlets to conduct outreach to Residents. Outreach will be conducted through local print, online, television, and/or radio outlets, as well as through outlets specifically targeting the diverse demographic communities within the County. Please see Appendix F for a sample media list of key outlets.

XV. Collaboration with County Officials and Community Organizations

MED-Project will work in collaboration with the County as appropriate to build on existing community outreach resources, such as local organizations, media lists, available public media outlets, etc. MED-Project will conduct the following outreach efforts:

- Briefing Materials Provided to Support Coordination with County Officials:
  - MED-Project will provide access to Educational and Outreach Programming materials, including the sample brochure (see Appendix L), to relevant departments and officials.

- Outreach through Community Organizations:
  - MED-Project will further promote the Program by engaging relevant stakeholders and community organizations, for example, by providing community organizations identified in Appendix B with the toolkit included in Appendix L.

- Briefing Materials Provided to Support Collaboration with Home Health Care Providers.
  - MED-Project will collaborate with home health care providers to promote the use of Mail-Back Services by differentially-abled and homebound residents. MED-Project will be providing home health care providers with the toolkit included in Appendix L.

XVI. Disclaimer

The written and verbal educational materials and public outreach tools that are required by the Regulations and disseminated under this Product Stewardship Plan will include a disclaimer similar to the following: "This material has been provided for the purposes of compliance with legislation and does not
necessarily reflect the views of MED-Project or the Producers participating in the MED-Project Product Stewardship Plan.”

**XVII. Survey**

Per Regulations § 8.A.6, MED-Project will conduct a biennial survey of Residents, pharmacists, veterinarians, and/or health care professionals who interact with members of the community after the first full year of Program operation and biennially thereafter. The survey will be made available in the Required Languages.

Survey questions will be designed to measure, at a minimum, (1) percent awareness of the Program, (2) whether drop-off sites and other collection methods are convenient and easy to use, and (3) knowledge and attitudes about risks of abuse, poisonings, and overdoses from prescription and nonprescription drugs used in the home. As required by Regulations § 8.A.6, draft survey questions will be submitted to the Health Department for review and comment thirty days prior to distribution. Results of the survey will be reported to the Health Department and made public within 90 days of the end of the survey period on the MED-Project Website described under Section XI.D.2. The privacy of all survey respondents will be maintained.

MED-Project is unaware currently of any other Stewardship Organizations that intend to submit a Stewardship Plan to the Health Department. Per Regulations § 8.B, MED-Project will seek to coordinate with other Stewardship Programs to conduct the survey if other Stewardship Plans are approved by the Health Department.

**XVIII. Packaging**

The Regulations require that a Plan consider “[s]eparating covered drugs from packaging to the extent possible to reduce transportation and disposal costs, and [r]ecycling of drug packaging to the extent feasible.” Regulations §§ 6.G.b and 6.G.c.

MED-Project has considered and evaluated options for the separation and recycling of drug packaging. Separating and recycling drug packaging collected under the Plan would require the management of separate waste streams at Kiosk Drop-Off Sites: a waste stream for drug packaging and a waste stream for the drugs themselves.

While drug packaging is expected to constitute a significant amount of the waste incinerated under the Plan, MED-Project has concluded that separation of inner and/or outer packaging from Unwanted Medicine or recycling packaging would raise three significant concerns:

1. Separating and recycling drug packaging could result in the disclosure of confidential patient information appearing on prescription drug packaging;
2. Separating and recycling drug packaging could increase the potential of releases and leakage of Unwanted Medicine; and
3. Separating and recycling drug packaging could increase diversion risks by adding additional steps to the collection process and because drug packaging is used in drug counterfeiting and would be a diversion target itself.

For these reasons, the Plan does not provide for the separation and recycling of packaging from Unwanted Medicine.
XIX. Compliance with Applicable Laws, Regulations, and Other Legal Requirements

The Regulations require that a Product Stewardship Plan describe how all entities participating in the Program will “operate under” all applicable laws, regulations, and other legal requirements. Regulations § 6.C. As described in more detail below, the Plan is designed such that all entities participating in the Program shall comply with all applicable laws, regulations, and other legal requirements.

A. DEA Controlled Substances Act and Implementing Regulations

On October 12, 2010, the United States Congress enacted the Secure and Responsible Drug Disposal Act of 2010 (“Disposal Act”) as amendments to the Controlled Substances Act (“CSA”). The Disposal Act amended the CSA to allow for the expansion of entities to which users can deliver pharmaceutical controlled substances for disposal, subject to regulations to be promulgated. On September 9, 2014, the DEA adopted a rule entitled “Disposal of Controlled Substances” to implement the Disposal Act.

Under the DEA Rule, the collection of controlled substances is limited to Schedule II, III, IV, or V controlled substances that are lawfully possessed by an ultimate user or person entitled to dispose of an ultimate user decedent’s property. See DEA Rule §§ 1317.75(b) (Kiosk Drop-Off Sites); 1317.70(b) (Standard Mail-Back Services). Schedule I controlled substances, controlled substances that are not lawfully possessed as described above, and other illicit or dangerous substances will not be collected. Additionally, as these provisions of the DEA Rule limit collection of controlled substances to those lawfully possessed by an ultimate user or certain other persons, pharmacies are prohibited from disposing of their own inventory or stock through the Program. See id.; see also § 1317.05.

The DEA Rule provides that LEAs can continue to accept controlled substances for disposal. However, the DEA Rule also provides that pharmacies, reverse distributors, hospitals/clinics with on-site pharmacies, and certain other entities, can register with the DEA as “collectors” and become authorized at their discretion on a voluntary basis to accept controlled substances. The DEA Rule:

− Provides for the collection of controlled substances at Kiosk Drop-Off Sites at LEAs, pharmacies, and hospitals or clinics with on-site pharmacies;
− Provides for the collection of controlled substances at Take-Back Events;
− Allows for the commingling of controlled and non-controlled substances;
− Establishes detailed collection, recordkeeping, security, and other measures for all approved collection methods; and
− Provides that all collected pharmaceutical products be destroyed so that the products are rendered non-retrievable.

The Plan is designed such that all entities that are part of the Plan, including Vendor, are individually responsible to comply with their respective compliance obligations under the DEA Rule.

Controlled substances collected pursuant to the Program may be commingled with non-controlled substances at Kiosk Drop-Off Sites and through Standard Mail-Back Services per the DEA Rule. See §§ 1317.75(b) (Kiosk Drop-Off Sites); 1317.70(b) (Standard Mail-Back Services).

5 For Kiosk Drop-Off Site collection, only certain substances “that are lawfully possessed by an ultimate user or other authorized non-registrant person may be collected.” § 1317.75(b). This language is similar to, but slightly different than, provisions limiting collection through Standard Mail-Back Services to ultimate users or other persons (lawfully) entitled to dispose of an ultimate user decedent’s property. See §§ 1317.70(b).
1. **DEA Registration Modification**

Pursuant to 21 C.F.R. § 1301.51(b), pharmacies may modify their registrations to become authorized collectors by submitting a request to the DEA or online at [www.DEAdversion.usdoj.gov](http://www.DEAdversion.usdoj.gov). This request must contain:

- The registrant’s name, address, and registration number (as printed on the registration certificate);
- The collection methods the registrant intends to conduct; and
- A signature in accordance with § 1301.13(j).

See § 1301.51(b). MED-Project will consult with participating pharmacies, as requested, regarding how to modify DEA registrations to become authorized collectors.

**B. United States Department of Transportation (USDOT)**

When preparing Unwanted Medicine for transport and transporting Unwanted Medicine, Vendor or the On-Demand Collection Kiosk Drop Off-Site will ensure compliance with the DOT HMR.

**C. Washington State Pharmacy Quality Assurance Commission (WSPQAC)**


**D. State of Washington Waste Management Program**

MED-Project, Vendor, and other entities participating in the Program shall comply with any applicable provisions of the State of Washington’s waste management program, including applicable “moderate-risk” waste and product take-back center requirements.

**XX. Annual Report**

An annual report will be provided to the Health Department within 180 days after the end of the first one-year period of operation and annually thereafter. Regulations § 11.A.

For the reporting period, the report will include:

- A list of producers participating in the Plan;
- The amount, by weight, of Unwanted Medicine collected from Kiosk Drop-Off Sites. For Mail-Back Services, MED-Project will identify the number of Mail-Back Packages provided to Residents by type of Mail-Back Service and the number of Mail-Back Packages that were returned and destroyed;
- A list of Kiosk Drop-Off Sites;
- The number of mailers provided and the zip codes where mailers were provided;
- The dates and locations of any Take-Back Events held;
- Transports and disposal facilities used;
- Whether any safety or security problems occurred during collection, transportation, or disposal of Unwanted Medicine and, if so, what changes have or will be made to policies, procedures or tracking mechanisms to alleviate the problem and improve safety and security;
- A description of public education, outreach, and evaluation activities implemented;
- A description of how collected packaging was recycled to the extent feasible, including the recycling facility or facilities used;
- A summary of the Product Stewardship Plan’s goals, the degree of success meeting these goals in the past year, and how these goals will be achieved in the next year if they were not met;
- An evaluation of the effectiveness of the Program’s promotion, outreach, and public education activities; and
- The Plan’s total expenditures.
Appendix A

MED-Project Participants

The list of participating Producers in MED-Project’s Program in Pierce County is provided to the Health Department on a periodic basis.
Appendix B

Sample Contact List for Outreach and Education to the Community

The following are associations, agencies, and organizations that will be contacted for assistance with outreach and education to the community.

**Health Systems & Clinics:**
- St. Clare Hospital
- St. Anthony Hospital
- St. Joseph Medical Center
- MultiCare Good Samaritan Hospital
- MultiCare Puyallup Urgent Care
- MultiCare Indigo Urgent Care
- MultiCare Spanaway Clinic
- MultiCare Health System
- MultiCare Eatonville
- Franciscan Health System
- Group Health Tacoma Medical Center
- Sunrise Clinic & Urgent Care
- Pacific General Medical Clinic
- Spectrum Health Systems
- VA Puget Sound Healthcare System
- HealthSource of Puyallup
- Arcadia Health Care
- Maxim Healthcare Services

**Health Associations and Societies:**
- American Heart Association
- Pierce County Nurses Association
- Muscular Dystrophy Association
- Korean Women’s Association
- Institute for Fitness and Health
- Brookdale Puyallup
- Catholic Health

**Organizations, Districts, and Agencies:**
- Department of Social & Health Services
- Tacoma-Pierce County Health Department

**Veterinary Services**
- Sumner Veterinary Hospital
- Firgrove Veterinary Hospital
- South Hill Veterinary Hospital
- Canyon Road Veterinary Hospital
- Farris Veterinary Clinic
- Buckley Veterinary Hospital
- Lake Tapps Veterinary Hospital
- Spanaway Veterinary Clinic
- Edgewood Veterinary Clinic
- Columbia Veterinary Hospital
- Metropolitan Veterinary Hospital
- Button Veterinary Hospital
- Browns Point Veterinary Clinic
- Sound View Veterinary Hospital
- North End Pet Hospital
- Portland Ave Small Animal Hospital
- Jones Animal Hospital
- Animal Hospital of Parkland
# Appendix C

**Kiosk Drop-Off Sites with Expressions of Interest**

Below is a list of locations that have expressed interest in participating as a Kiosk Drop-Off Site. Chain pharmacy participation could be contingent upon agreement with regional and national offices. MED-Project will continue to outreach and work within the corporate structure where applicable.

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## Appendix D
### Potential Additional Kiosk Drop-Off Sites

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<td>RX</td>
<td>Franciscan Pharmacy Tacoma</td>
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<td>RX</td>
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<td>RX</td>
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<td>Puget Sound Pharmacy</td>
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<td>Rainier School Pharmacy</td>
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<tr>
<td>LE</td>
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<td>216 McNaught Street South/PO Box 700</td>
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<td>Rumed</td>
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<td>RX</td>
<td>Western State Hospital Pharmacy</td>
<td>9601 Steilacoom Boulevard Southwest</td>
<td>Tacoma</td>
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Appendix E

Sample Kiosk Mock-Up

The design of the kiosk recognizes the paramount importance of security using heavy gauge steel, multiple locking mechanisms, tamper-resistant slot, and commercial hinges, meeting the stringent requirements under the law. At the same time, the design provides accessibility and ease of use.
SAFELY DISPOSE OF EXPIRED OR UNWANTED MEDICINES

1. Cross out or remove personal identifying information from the medicine packaging.
2. Leave the product in its original container or place solid medicines in a sealed plastic bag.
   * If transferring medications to a sealed bag, please be sure to recycle all remaining packaging.
3. Put medicine in the kiosk.

Only schedule II-V controlled and non-controlled substances that are lawfully possessed by the ultimate user are acceptable to be placed in the kiosk. Schedule I controlled substances, illicit or dangerous substances, and any controlled substances not lawfully possessed by the ultimate user may not be placed in the kiosk.

For more information about the MED-Project program, please go to www.med-project.org or call 1-844-MED-PROJECT / (TTY: 711)
SAFELY DISPOSE OF EXPIRED OR UNWANTED MEDICINES

MED-Project Call Center: 1 (844) MED-PROJECT
1 (844) 633-7765 / (TTY: 711)
www.med-project.org
Sample Kiosk Signage

Drop-Slot Panel Signage

ACCEPTED: Medications in any dosage form, except for those identified as NOT ACCEPTED below, in their original container or sealed bag.

NOT ACCEPTED: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, pet pesticide products, medical devices, batteries, mercury-containing thermometers, sharps, and illicit drugs.
Appendix F
Sample Media List

The following is a representative list of key media outlets to help educate residents about the proper disposal of Unwanted Medicine. The list includes local print, online, television, and radio outlets.

<table>
<thead>
<tr>
<th>Print Outlets</th>
<th>City/Coverage Area</th>
<th>Website</th>
</tr>
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<tbody>
<tr>
<td>Tacoma News Tribune</td>
<td>Tacoma Regional Area</td>
<td><a href="http://www.thenewstribune.com/">http://www.thenewstribune.com/</a></td>
</tr>
<tr>
<td>Tacoma Weekly</td>
<td>Tacoma Regional</td>
<td><a href="http://www.tacomaweekly.com/">http://www.tacomaweekly.com/</a></td>
</tr>
<tr>
<td>Eatonville Dispatch</td>
<td>Eatonville and South Pierce County</td>
<td><a href="http://dispatchnews.com/">http://dispatchnews.com/</a></td>
</tr>
<tr>
<td>Courier Herald</td>
<td>Rural King and Pierce County</td>
<td><a href="http://www.courierherald.com/">http://www.courierherald.com/</a></td>
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<tr>
<td>KOMO Television (Ch. 4)</td>
<td>ABC affiliate Seattle</td>
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<tr>
<td>KING Television (Ch. 5)</td>
<td>NBC</td>
</tr>
<tr>
<td>KIRO Television (Ch. 7)</td>
<td>CBS</td>
</tr>
<tr>
<td>KBTC Television</td>
<td>PBS</td>
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<tr>
<td>KCTS Public Television (Ch. 9)</td>
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<td>KCPQ Television (Ch. 13)</td>
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<table>
<thead>
<tr>
<th>Radio Outlets</th>
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47
<table>
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<th>Radio Station</th>
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<tr>
<td>KIRO Radio News 97.3 FM</td>
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<td>KOMO Radio 1000 AM</td>
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<td>KUOW 94.9 FM</td>
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<td>KUPS 90.1</td>
<td>FM Regional</td>
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<tr>
<td>KLAY AM 1180</td>
<td>AM Regional</td>
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<td>KNKX (nee KPLU) 88.5 FM</td>
<td>NPR Affiliate</td>
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</table>
Appendix G
Sample Standard Mail-Back Package

Description:
Plastic envelope with the return label and an instructional flyer.

Package Size:
Outer dimensions: 8.25” x 12”
Inner dimensions: 7.375” x 10.375”

MED-Project may choose to change its Vendor for Mail-Back Services at any time, subject to requirements in the Regulations.
Description:
Injector Mail-Back Package including FDA-cleared sharps container with mail-back packaging, return label, instructional flyer, and unique identifier enabling tracking from collection through final disposal.

Package Size:
1.4-quart mail-back system

Injector Mail-Back Services are an example of complete, turnkey systems to provide for the safe return of Pre-filled Injector Products.

MED-Project may choose to change its Vendor for Mail-Back Services at any time, subject to requirements in the Regulations.
Sample Inhaler Mail-Back Package

Description:
Inhaler Mail-Back Package, including a container with a mail-back package, return label, and an instructional flyer.

Package Size:
Outer dimensions: 9” x 11.5” x 4.5”

Inhaler Mail-Back Services are an example of complete, turnkey systems to provide for the safe return of inhaler waste.

MED-Project may choose to change its Vendor for Mail-Back Services at any time, subject to requirements in the Regulations.


Appendix H

Community Events That May Serve as Future Take-Back Events

The following are examples of events that may be targeted for future Take-Back Events based on timing and geographic needs:

**Festivals and Community Events**

- The Schooner Zodiac Tacoma Port Call at Foss Waterway Seaport
- Puyallup Spring Fair
- Taste of Tacoma at Point Defiance Park
- Washington State Fair (aka The Fair or The Puyallup)
- Victorian Country Christmas Festival
- Tacoma Jazz & Blues Festival
- Pierce County Fair
- Rainier Mountain Festival
- Oktoberfest Puyallup
Appendix I

Requests for Approval of Disposal Methods

MED-PROJECT REQUEST FOR APPROVAL OF MUNICIPAL WASTE COMBUSTORS FOR DISPOSAL OF UNWANTED MEDICINES

Pursuant to § 13.F and § 9.B of the Tacoma-Pierce County Board of Health Secure Medicine Return Regulations, Environmental Health Code Chapter 7 (the "Regulations"), MED-Project LLC ("MED-Project") requests the Tacoma-Pierce County Health Department’s ("Health Department’s") approval to use any permitted municipal waste combustors for the disposal of Unwanted Medicines (as defined in MED-Project Product Stewardship Plan ("Plan") Section III). As described below, exercising discretion to allow for the disposal of Unwanted Medicines at any permitted municipal waste combustor would achieve the objectives of the Regulations in accordance with § 13.F. Further, cost, logistics, and other considerations make disposal exclusively at a permitted hazardous waste facility not feasible at this time per Regulations § 9.B.

I. HEALTH AND ENVIRONMENTAL PROTECTIONS AT MUNICIPAL WASTE COMBUSTORS

MED-Project is proposing that Unwanted Medicine may be delivered to a municipal waste combustor for disposal. Below, we describe some of the environmental, health, and safety protections in place at the municipal waste combustors MED-Project currently proposes to use. These summaries are intended to demonstrate the controls typically in place at municipal waste combustors for the purpose of supporting MED-Project’s request for approval of the use of municipal waste combustors as a disposal method for Unwanted Medicine.

a. Covanta Marion Facility

The Covanta Marion Facility is also a permitted large municipal waste combustor. The Covanta Marion Facility is a "waste-to-energy" facility that incinerates waste and generates 13.1 megawatts per day from a condensing steam turbine generator that provides energy to the local utility. Like the Covanta Huntsville Facility, the Covanta Marion Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. The Covanta Marion Facility is a member of the Safety and Health Achievement Recognition Program (SHARP), Oregon's safety and health recognition program. OSHA has also designated the Covanta Marion Facility as a VPP Star facility.

b. Huntsville Solid Waste Disposal Authority Facility

The Solid Waste Disposal Authority Facility in Huntsville, Alabama ("Huntsville Facility") is a permitted large municipal waste combustor. The furnaces at the Huntsville Facility are operated at temperatures exceeding 1800 degrees Fahrenheit. As a "waste-to-energy" facility, the Huntsville Facility uses solid waste, like Unwanted Medicine, to generate steam used for the U.S. Army’s nearby Redstone Arsenal’s heating and cooling needs. To control air pollution, the Huntsville Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system.

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7 Id.
8 Id.
11 Id.
system. Additionally, the Huntsville Facility operates under a Title V Clean Air Act permit. Additionally, the Huntsville Facility has been designated as a Voluntary Protection Program ("VPP") Star facility by the U.S. Occupational Safety and Health Administration ("OSHA"), recognizing the facility's employer's and employees' exemplary achievement in the prevention and control of occupational safety and health hazards.

c. **Indianapolis Resource Recovery Facility**

The Indianapolis Resource Recovery Facility in Indiana, operating as Covanta Indianapolis, Inc. ("Indianapolis Facility"), is a permitted municipal waste combustor. As an energy-from-waste facility, the Indianapolis Facility can process up to 2,175 tons of waste per day, which generates steam for the downtown heating loop. To control air pollution, the Indianapolis Facility uses semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and continuous emissions monitoring system. The Indianapolis Facility operates under a Title V Clean Air Act permit and has been designated a VPP Star facility by OSHA.

d. **Lancaster County Resource Recovery Facility**

The Lancaster County Resource Recovery Facility in Pennsylvania ("Lancaster Facility") is a permitted large municipal waste combustor. The Lancaster Facility is an “energy-from-waste” facility that incinerates waste and generates 35.7 megawatts per day from a condensing steam turbine that provides energy to GPU Energy. The Lancaster Facility employs a semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a furnace dry-lime inject system, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. Covanta Lancaster also operates under a Title V Clean Air Act permit and a solid waste permit. Covanta Lancaster is a “zero discharge” facility, meaning that the wastewater generated on-site is treated and reused in the waste management process, according to the facility's website. Covanta Lancaster has also been designated as a VPP Star facility by OSHA.

e. **York County Resource Recovery Facility**

The York County Resource Recovery Facility in Pennsylvania ("York Facility") is a permitted large municipal waste combustor. As an energy-from-waste facility, the York Facility uses solid waste, like Unwanted Medicine, to generate electricity. The facility processes over 1,300 tons of solid waste per day, generating up to 40

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13 See Title V Operating Permit # AL0000000108900104. [Id.](https://www.osha.gov/dcsp/vpp/all_about_vpp.html) (last visited Jan. 8, 2020).
16 Id.
17 See Title V Operating Permit # 097-32931-00123,[https://files.dep.state.pa.us/Air/AirQuality/AQPortalFiles/Permits/PermitDocuments/1130890[36-05013]_Issued_v1.pdf](http://files.dep.state.pa.us/Air/AirQuality/AQPortalFiles/Permits/PermitDocuments/1130890[36-05013]_Issued_v1.pdf) (last visited Jan. 8, 2020).
19 Id.
20 See Title V Operating Permit # 36-05013,[https://files.dep.state.pa.us/Air/AirQuality/AQPortalFiles/Permits/PermitDocuments/1130890[36-05013]_Issued_v1.pdf](http://files.dep.state.pa.us/Air/AirQuality/AQPortalFiles/Permits/PermitDocuments/1130890[36-05013]_Issued_v1.pdf) (last visited Jan. 8, 2020).
21 Id.
24 Id.
megawatts of electricity, enough to power over 20,000 homes, according to its website. To control air pollution, the York Facility employs a niro spray drying atomizer, a Western Pacific filter baghouse, and Norit Americas carbon injection. The York Facility also operates under a Title V Clean Air Act permit and a solid waste permit. Additionally, the York Facility has been designated as a VPP Star facility by OSHA and has also been awarded ISO-14001 certification for the facility’s environmental management system.

II. THE REGULATIONS SUPPORTS THE USE OF A MUNICIPAL WASTE COMBUSTOR FOR THE DISPOSAL OF UNWANTED MEDICINE

The Regulations require that Covered drugs, be disposed of “at a permitted hazardous waste disposal facility as defined by the United States Environmental Protection Agency under 40 CFR parts 264 and 265.” Regulations § 9.A. The Tacoma-Pierce County Board of Health Secure Medicine Return Regulations § 1 – 19 (“Regulations”), requires that “[A] producer or group of producers participating in the standard stewardship plan or an independent stewardship plan may petition the Health Department for approval to use final disposal technologies that provide superior environmental and human health protection than provided by the disposal technologies in subsections A. and B. of this section, or equivalent protection at lesser cost. The proposed technology must provide equivalent or superior protection in each of the following areas: 1. Monitoring of any emissions or waste; 2. Worker health and safety; 3. Air, water, or land emissions contributing to persistent, bioaccumulative, and toxic pollution; and 4. Overall impact to the environment and human health.” See Regulations § 9.C

“[I]n approving a plan, the Health Department has discretion to waive strict compliance with the requirements of this Chapter that apply to producers in order to achieve the objectives of this Chapter.” Regulations § 13.F. Regulations § 13.F grants the Health Department discretion to waive strict compliance with the disposal provisions at Regulations § 9 in particular, including its provision for disposal at a hazardous waste facility. The Health Department has already approved the use of municipal waste combustors (as of June 22, 2018) to dispose of Injector Mail Back Packages. For similar underlying reasons, MED-Project requests that the Health Department more generally approve the use of municipal waste combustors for the disposal of all Unwanted Medicine. The Health Department should carry out this duty in furtherance of the purpose of the Regulations, to provide for and promote the health, safety, and welfare of the general public . . .”. Regulations § 2.B.

With these requirements and the purpose of the Regulations in mind, MED-Project requests that the Health Department approve the use of any municipal waste combustors to dispose of Unwanted Medicine.

III. THE USE OF MUNICIPAL WASTE COMBUSTORS TO DISPOSE OF UNWANTED MEDICINE SHOULD BE APPROVED

MED-Project proposes to use municipal waste combustors to dispose of Unwanted Medicine under Regulations § 9.B because exclusive disposal at a hazardous waste facility is not feasible based on logistics, cost, human health, environmental, and other considerations. Use of these municipal waste combustors would protect and preserve public health, safety, and welfare, consistent with the objectives of the Regulations.

26 Id.
27 Id.
28 See Title V Operating Permit # 67-05006, [link]
29 See Solid Waste Permit # 400561 PaDEP, [link]
First, MED-Project has engaged multiple vendors to provide a comprehensive and reliable suite of services to the residents of Pierce County, as ensuring the reliability and consistency of service requires using a variety of disposal facilities and vendors. For the disposal of Unwanted Medicine, MED-Project plans to rely on Stericycle Specialty Waste Solutions, Inc. (“Stericycle”) and Covanta Environmental Solutions, LLC (“Covanta”) in order to ensure redundancy of services in case either vendor’s services are unavailable at any time, to control costs, to maintain flexibility, and to provide multiple options for the provision of these services. Stericycle and Covanta currently offer disposal of Unwanted Medicine at hazardous waste, medical waste, and municipal waste facilities, but exclusive use of hazardous waste facilities would limit the number of facilities available to MED-Project for the purposes described above and would increase costs as discussed further below. Additionally, hazardous waste disposal may not be available for all Unwanted Medicine collection methods (e.g., collection via Inhaler Mail-Back Packages).

Second, the cost to dispose of Unwanted Medicine at a hazardous waste disposal facility would be much greater than the cost to dispose of such packages at the proposed municipal waste combustors. In MED-Project’s experience, hazardous waste incinicators typically charge significantly more than other facilities to dispose of the same quantity of waste. Compliance, logistical feasibility, cost, and other considerations typically drive how MED-Project and its vendors select disposal facilities, and MED-Project appreciates the flexibility to respond to those factors and others as it operates its program with a variety of disposal options.

Third, municipal waste combustors protect and preserve public health, safety, and welfare. Municipal waste combustors are subject to a number of environmental permitting requirements, consistent with the Regulations’ underlying objective of protecting and preserving public health, safety, and welfare. For example, the municipal waste combustors described above have Title V air permits and have installed extensive pollution control technologies, including semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, nitrogen oxide control systems, mercury control systems, and continuous emissions monitoring systems. The facilities identified above are waste-to-energy facilities, which avoid the production of the greenhouse gas methane while producing electricity. Many of these facilities have also been recognized for their workplace safety achievements, as evidenced by their designation as VPP Star facilities. The use of these facilities and other municipal waste combustors would protect and preserve public health, safety, and welfare in furtherance of the objectives of the Regulations.

Fourth, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Unwanted Medicine at a hazardous waste incinicator or preclude MED-Project from disposing of these materials at a municipal waste combustor. In fact, the U.S. Environmental Protection Agency has issued a memorandum stating clearly that collected household pharmaceuticals are not subject to federal hazardous waste regulations, and can be sent to large and small municipal waste combustors. Any Unwanted Medicine collected by MED-Project under this Plan is not regulated under the state waste regulations or federal hazardous waste regulations, and therefore are not required to be treated as hazardous or dangerous waste.

Finally, other jurisdictions with legislation similar to the Regulations clearly allow for disposal of Unwanted Medicine at municipal waste combustors. MED-Project plans to dispose of Unwanted Medicine from those jurisdictions at municipal waste combustors, and any variation in Pierce County would disrupt the existing waste management network across MED-Project’s programs.

VI. CONCLUSION

31 See Memorandum on Management of Household Pharmaceuticals Collected by law Enforcement During Take-Back Events and Programs, from Barnes Johnson, Office or Resource Conservation and Recovery, to RCRA Division Directors, EPA Regions 1-10 (Sep. 11, 2018).
For the above reasons, the Health Department should approve the disposal of Unwanted Medicine at municipal waste combustors.
MED-PROJECT REQUEST FOR APPROVAL OF MEDICAL WASTE INCINERATION FOR DISPOSAL OF UNWANTED MEDICINES

Pursuant to § 13.F and § 9.B of the Tacoma-Pierce County Board of Health Secure Medicine Return Regulations, Environmental Health Code Chapter 7 (the “Regulations”), MED-Project LLC (“MED-Project”) requests the Tacoma-Pierce County Health Department’s (“Health Department’s”) approval to use any permitted medical waste incinerator for the disposal of Unwanted Medicines (as defined in MED-Project Product Stewardship Plan (“Plan”) Section III). As described below, exercising discretion to allow for the disposal of Unwanted Medicines at any permitted medical waste incinerator would achieve the objectives of the Regulations in accordance with § 13.F. Further, cost, logistics, and other considerations make disposal exclusively at a permitted hazardous waste facility not feasible at this time per Regulations § 9.B.

I. HEALTH AND ENVIRONMENTAL PROTECTIONS AT MEDICAL WASTE INCINERATORS

MED-Project is proposing that Unwanted Medicines may be delivered to a medical waste incinerator for disposal. Below, we describe some of the environmental, health, and safety protections in place at the medical waste incinerators MED-Project currently proposes to use. These summaries are intended to demonstrate the controls typically in place at medical waste incinerators for the purpose of supporting MED-Project’s request for approval of the use of medical waste incineration as a disposal method for Unwanted Medicine.

a. Curtis Bay Energy, LP

The Curtis Bay Facility is a permitted hospital, medical, and infectious waste incinerator. The Curtis Bay Facility operates two incineration units that are permitted to incinerate a maximum of 150 tons of waste per day for the facility. The Curtis Bay Facility operates under a Clean Air Act Title V permit and is subject to emissions limits for a number of air pollutants in accordance with this permit. To control air pollution, the facility employs a tertiary combustion chamber, a dry injection acid gas scrubber, a powder activated carbon system, and a fabric filter with passive dioxins/furans emissions control. The facility relies on a continuous opacity monitoring system and a continuous emission monitoring system for monitoring carbon monoxide, oxygen, and hydrogen chloride content levels of the stack exhaust gases. The Curtis Bay Facility also operates under an Industrial Wastewater Discharge Permit and Solid Waste Permit.

b. Stericycle, Inc., Warren, Ohio Facility

The Stericycle incinerator in Warren, Ohio (the “Warren Incinerator”) is a permitted hospital, medical, and infectious waste incinerator. The incinerator’s primary chamber has a minimum exit gas temperature of 1400 °F, and the incinerator’s secondary chamber is operated at over 1,830.5 °F. The Warren Incinerator has a Clean Air Act Title V permit, which establishes air emissions limits for particulate matter, carbon monoxide, dioxins/furans, hydrogen chloride, sulfur dioxide, nitrogen oxides, lead, cadmium, and mercury, among other chemicals. To control air pollution, the Warren Incinerator employs a carbon bed system, continuous emissions monitoring systems, a selective non-catalytic reduction system, and a

1 This information is drawn from the Curtis Bay Facility’s Title V permit, http://www.mde.state.md.us/programs/Permits/AirManagementPermits/Test/Curtis%20Bay%20Energy.pdf.
scrubber system, among other controls. The incinerator stack must be designed to minimize the impact of emissions on employees, residents, visitors, and nearby residences.

II. STANDARDS FOR THE HEALTH DEPARTMENT TO MEDICAL APPROVE THE USE OF MEDICAL WASTE INCINERATION

The Regulations require that Covered drugs, be disposed of “at a permitted hazardous waste disposal facility as defined by the United States Environmental Protection Agency under 40 CFR parts 264 and 265.” Regulations § 9.A. The Tacoma-Pierce County Board of Health Secure Medicine Return Regulations § 1 – 19 (“Regulations”), requires that “[A] producer or group of producers participating in the standard stewardship plan or an independent stewardship plan may petition the Health Department for approval to use final disposal technologies that provide superior environmental and human health protection than provided by the disposal technologies in subsections A. and B. of this section, or equivalent protection at lesser cost. The proposed technology must provide equivalent or superior protection in each of the following areas: 1. Monitoring of any emissions or waste; 2. Worker health and safety; 3. Air, water, or land emissions contributing to persistent, bioaccumulative, and toxic pollution; and 4. Overall impact to the environment and human health. See Regulations § 9.C.

 “[I]n approving a plan, the Health Department has discretion to waive strict compliance with the requirements of this Chapter that apply to producers in order to achieve the objectives of this Chapter.” § 13.F. Regulations § 13.F grants the Health Department discretion to waive strict compliance with the disposal provisions at Regulations § 9 in particular, including its provision for disposal at a hazardous waste facility.

The Health Department has already approved the use of medical waste incineration (as of June 7, 2018) to dispose of Standard Mail Back Packages. For similar underlying reasons, MED-Project requests that the Health Department more generally approve the use of medical waste incineration for the disposal of all Unwanted Medicine. The Health Department should carry out this duty in furtherance of the purpose fo the Regulations, “...to provide for and promote the health, safety, and welfare of the general public ...”. Regulations § 2.B.

With these requirements and the purpose of the Regulations in mind, MED-Project requests that the Health Department approve the use of any medical waste incinerators to dispose of Unwanted Medicine.

III. THE HEALTH DEPARTMENT SHOULD EXERCISE ITS DISCRETION TO APPROVE THE USE OF MEDICAL WASTE INCINERATION

Use of medical waste incineration is protective of the health, safety, and welfare of the public and of the environment, consistent with the objectives of the Regulations. MED-Project proposes to use medical waste incineration to dispose of Unwanted Medicine based on logistics, cost, human health, environmental, and other considerations.

First, medical waste incineration is protective of the health, safety, and welfare of the public and of the environment. Medical waste incinerators are subject to a number of environmental and worker health and safety requirements, consistent with the Regulations’ underlying objective of [protecting the health, safety, and welfare of the public and of the environment. For example, the medical waste incinerators described above have Title V air permits and have installed extensive pollution control technologies, including activated carbon systems, continuous emissions monitoring systems, and scrubber systems. Additionally, facilities that handle medical waste are subject to a suite of worker health and safety standards. These requirements typically range from the use of personal protective equipment to specific
handling and containment procedures. The use of medical waste incinerators would protect the public and the environment in furtherance of the objectives of the Regulations.

Second, MED-Project has engaged multiple vendors to provide a comprehensive and reliable suite of services to the residents of Pierce County and ensuring the reliability and consistency of service requires using a variety of disposal facilities and vendors. For the disposal of Unwanted Medicine, MED-Project plans to rely on Stericycle Specialty Waste Solutions, Inc. (“Stericycle”) and Covanta Environmental Solutions, LLC (“Covanta”) in order to ensure redundancy of services in case either vendor’s services are unavailable at any time, to control costs, to maintain flexibility, and to provide multiple options for the provision of these services. Stericycle and Covanta currently offer disposal of Unwanted Medicine at hazardous waste, medical waste, and municipal waste facilities, but exclusive use of hazardous and municipal waste facilities would limit the number of facilities available to MED-Project for the purposes described above and would increase costs as discussed further below. Additionally, hazardous waste disposal may not be available for all Unwanted Medicine collection methods (e.g., collection via Mail-Back Packages).

Third, the cost to dispose of Unwanted Medicine at a hazardous waste disposal facility would be much greater than the cost to dispose of such packages at a medical waste incinerator. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than other facilities to dispose of the same quantity of waste. Compliance, logistical feasibility, cost, and other considerations typically drive how MED-Project and its vendors select disposal facilities, and MED-Project appreciates the flexibility to respond to those factors and others as it operates its program with a variety of disposal options.

Fourth, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Unwanted Medicine at hazardous or municipal waste facility or preclude MED-Project from disposing of these materials at a medical waste incinerator. In fact, the U.S. Environmental Protection Agency has issued a memorandum stating clearly that collected household pharmaceuticals are not subject to federal hazardous waste regulations, and can be hospital, medical, and infectious waste incinerators. Any Unwanted Medicine collected by MED-Project under this Plan is not regulated under the state or federal hazardous waste regulations, and therefore are not required to be treated as such.

Finally, other jurisdictions with legislation similar to the Regulations clearly allow for disposal of Unwanted Medicine at medical waste incinerators. MED-Project plans to dispose of Unwanted Medicine from those jurisdictions at medical waste incinerators, and any variation in Pierce County would disrupt the existing waste management network across MED-Project’s programs.

IV. CONCLUSION

For the above reasons, the Health Department should approve the disposal of Unwanted Medicine at medical waste incinerators.

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See Memorandum on Management of Household Pharmaceuticals Collected by law Enforcement During Take-Back Events and Programs, from Barnes Johnson, Office or Resource Conservation and Recovery, to RCRA Division Directors, EPA Regions 1-10 (Sep. 11, 2018).
Change Notice Request for Approval to Dispose of Injector Products at Curtis Bay Energy Medical Waste Incinerator

(Approved January 23, 2020)
Request for Approval for Disposal Process for Host-assisted Collection Kiosk Drop-off Sites

(approved May 1, 2019)

Pursuant to §§ 9.B and 13.F of the Secure Medicine Return Regulations, codified at Chapter 7 of the Environmental Health Code for the Tacoma-Pierce County Health Department (“Regulations”), MED-Project LLC (“MED-Project”) requests approval from the Tacoma-Pierce County Health Department (the “Health Department”) to use a municipal waste combustor for the disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites (as defined in the MED-Project Product Stewardship Plan (“Plan”) § III). As described below, cost, logistics, and other considerations make disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites not feasible at this time, so the Health Department should approve disposal of such materials at a municipal waste combustor in accordance with Regulations § 9.B. Additionally, exercising discretion to allow for the disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites at a municipal waste combustor would achieve the objectives of the Regulations in accordance with § 13.F of the Regulations.

I. THE PROCESS FOR THE DISPOSAL OF MATERIALS FROM HOST-ASSISTED COLLECTION KIOSK DROP-OFF SITES AT COVANTA LONG BEACH

MED-Project is proposing that materials collected at Host-Assisted Collection Kiosk Drop-Off Sites be delivered by the United Parcel Service, Inc. to the Covanta Environmental, LLC, facility in Scottsdale, Arizona. From there, the materials will be transported to the Covanta Long Beach Renewable Energy facility in Long Beach, California (“Covanta Long Beach”) for destruction via incineration. Two DEA witnesses from Covanta will monitor delivery from the reverse distribution vault to Covanta Long Beach. A DEA witness will then confirm the destruction of the collected materials in the tracking system and upload DEA certificate of destruction.

Covanta Long Beach is a municipal waste combustor. Covanta Long Beach is a waste-to-energy facility that processes up to 1,380 tons of municipal solid waste per day, generating up to 36 megawatts of electricity. Covanta Long Beach also has a Clean Air Act Title V permit, which establishes air emissions limits for particulate matter, carbon monoxide, sulfur dioxide, nitrogen oxides, lead, mercury, and fluorides, among other chemicals. To control air pollution, Covanta Long Beach employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, activated carbon filter units, and a continuous emissions monitoring system.

Covanta Long Beach is a United States Drug Enforcement Administration (“DEA”) registered collector facility and destroys controlled substances and other materials in compliance with DEA requirements.

II. STANDARDS FOR THE HEALTH DEPARTMENT TO APPROVE THE USE OF COVANTA LONG BEACH FOR THE DISPOSAL OF MATERIALS FROM HOST-ASSISTED COLLECTION KIOSK DROP-OFF SITES

Under Regulations § 9.B, the Health Department may grant approval for a producer or group of producers to dispose of some or all collected covered drugs, including those collected at Host-Assisted Collection Kiosk Drop-Off Sites, at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 C.F.R. parts 60 and 62, if use of a hazardous waste disposal facility is not feasible based on cost, logistics or other considerations.

4 Covanta Long Beach’s mailing address is 118 pier S Avenue, Long Beach, CA 90802.
Additionally, in approving a plan, the Health Department may exercise reasonable discretion to waive strict compliance with the requirements of the Regulations under § 13.F in order to achieve the objectives of the Regulations, which include providing for and promoting the health, safety, and welfare of the general public. See Regulations § 2.B.


The Health Department should approve incineration of materials from Host-Assisted Collection Kiosk Drop-Off Sites at Covanta Long Beach since disposal at a hazardous waste facility is not feasible based on logistics, cost, and other considerations, consistent with the intent of Regulations § 9.B.

Additionally, the Health Department should exercise its discretion and approve the use of Covanta Long Beach for disposal of materials from Host-Assisted Collection Kiosk Drop-Off Sites under Regulations § 13.F because disposal at Covanta Long Beach would provide for and promote the health, safety, and welfare of the general public, in furtherance of the objectives of the Regulations.

Approving the request would be consistent with the Health Department’s prior approval to use municipal waste combustors for unwanted medicine collected in injector and inhaler mail-back packages.

a. It is Not Feasible to Dispose of Materials Collected at Host-Assisted Collection Kiosk Drop-Off Sites at a Permitted Hazardous Waste Facility.

MED-Project requests approval under Regulations § 9.B to use Covanta Long Beach because disposal of materials from Host-Assisted Collection Kiosk Drop-Off Sites at permitted hazardous waste disposal facilities is not feasible at this time due to cost, logistics, and other considerations.

First, the cost to dispose of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites at a hazardous waste disposal facility would be much greater than the cost to dispose of such packages at Covanta Long Beach. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than municipal waste combustors to dispose of the same quantity of waste.

Second, MED-Project has developed a system with its vendor for the management and disposal of materials collected at host-assisted kiosks in other jurisdictions. Under its current system, MED-Project, through its vendor, may dispose of materials collected at host-assisted kiosks at municipal waste combustors and medical waste incinerators.5 Requiring a different disposal facility for materials collected from Host-Assisted Kiosk Drop-Off Sites in Pierce County would disrupt the current system and be logistically burdensome.

Third, other considerations, including environmental considerations, favor the use of Covanta Long Beach. Because Covanta Long Beach and the transfer facility are located on the West Coast and relatively near to each other, materials collected in Pierce County would not be transported as far as they may otherwise be if they were transported to a hazardous waste facility. This would limit the transportation-related greenhouse gas emissions associated with the disposal of materials collected from Host-Assisted Kiosk Drop-Off Sites. Further, the disposal of materials at Covanta Long Beach is protective of the environment and public health, as discussed further in section II.B below.

For the above reasons, the use of Covanta Long Beach to dispose of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites meets the standard at Regulations § 9.B, under which the Health Department can approve disposal at a municipal waste combustor. Accordingly, MED-Project requests that the Health Department approve disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites at Covanta Long Beach.

5 MED-Project has proposed to use a municipal waste combustor alone to dispose of materials collected at Host-Assisted Kiosks in Pierce County because there is explicit authority for authorizing such a facility under Regulations § 9.B.
b. **Disposal at Covanta Long Beach Would Provide for and Promote the Health, Safety, and Welfare of the General Public.**

Disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites at Covanta Long Beach would provide for and promote the health, safety, and welfare of the general public. Municipal waste combustors, like Covanta Long Beach, are subject to stringent environmental requirements, as well as worker health and safety standards like other incinerators. Covanta Long Beach is subject to a Clean Air Act Title V permit for air emissions, and the facility has extensive air pollution controls in place, including semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, activated carbon filter units, and a continuous emissions monitoring system.

The permits and other requirements that apply to Covanta Long Beach provide for and promote the health, safety, and welfare of the general public. Accordingly, the Health Department should exercise its discretion under Regulations § 13.F to approve Covanta Long Beach as a disposal site for materials collected at Host-Assisted Collection Kiosk Drop-Off Sites.

**IV. CONCLUSION**

Accordingly, the Health Department should approve the disposal of materials collected at Host-Assisted Collection Kiosk Drop-Off Sites via incineration at Covanta Long Beach as proposed by MED-Project under Regulations § 9.B and § 13.F.
Request for Approval of Inhaler Mail-Back Package Disposal Process  
(Approved May 1, 2019)

Pursuant to § 13.F of the Secure Medicine Return Regulations, codified at Chapter 7 of the Environmental Health Code for the Tacoma-Pierce County Health Department (“Regulations”), MED-Project LLC (“MED-Project”) requests approval from the Tacoma-Pierce County Health Department (the “Health Department”) to use a different permitted medical waste incinerator for the disposal of Inhaler Mail-Back Packages. As described below, exercising discretion to allow for the disposal of Inhaler Mail-Back Packages at a permitted medical waste incinerator would achieve the objectives of the Regulations in accordance with § 13.F of the Regulations. Further, because cost, logistics, and other considerations make disposal of Inhaler Mail-Back Packages at permitted hazardous waste facilities not feasible at this time, approving the disposal of Inhaler Mail-Back Packages at a permitted medical waste incinerator would be consistent with the intent of Regulations § 9.B.

The Health Department has already approved the use of a permitted medical waste incinerator for the destruction of Inhaler Mail-Back Packages, and MED-Project requests that the Health Department approve the use of a different medical waste incinerator for Inhaler Mail-Back Packages.

I. THE PROCESS FOR THE DISPOSAL OF INHALER MAIL-BACK PACKAGES AT THE WARREN INCINERATOR

MED-Project is proposing to use Stericycle, Inc. (“Stericycle”) to provide Inhaler Mail-Back Services, which would involve destroying Inhaler Mail-Back Packages at a permitted medical waste incinerator: Stericycle’s facility in Warren, Ohio (the “Warren Incinerator”).1 This facility has already been approved by the Health Department for the destruction of Standard Mail-Back Packages containing unwanted medicine.

The Warren Incinerator is a permitted hospital, medical, and infectious waste incinerator. The incinerator’s primary chamber has a minimum exit gas temperature of 1400 °F, and the incinerator’s secondary chamber is operated at over 1,830.5 °F. The Warren Incinerator also has a Clean Air Act Title V permit, which establishes air emissions limits for particulate matter, carbon monoxide, dioxins/furans, hydrogen chloride, sulfur dioxide, nitrogen oxides, lead, cadmium, and mercury, among other chemicals. To control air pollution, the Warren Incinerator employs a carbon bed system, continuous emissions monitoring systems, a selective non-catalytic reduction system, and a scrubber system, among other controls. The incinerator stack(s) must be designed to minimize the impact of emissions on employees, residents, visitors, and nearby residences.

Stericycle’s Inhaler Mail-Back Packages would be pre-addressed and pre-paid for delivery to the Warren Incinerator for destruction via incineration. The Warren Incinerator would scan the unique identifier on each Inhaler Mail-Back Package to record receipt of the package before incinerating it and would confirm the materials have been properly incinerated.

MED-Project proposes to use Stericycle to provide Inhaler Mail-Back Services in addition to PureWay Compliance, Inc. (“PureWay”). MED-Project plans to rely on Stericycle and/or PureWay for Inhaler Mail-Back Services in order to ensure redundancy of services in case either vendor’s services are unavailable at any time, control costs, maintain flexibility and provide multiple options for the provision of these services. PureWay and Stericycle currently offer inhaler mail-back containers of different sizes, so the option of using either vendor will allow MED-Project to best serve the needs of Pierce County residents.

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1 The Warren Facility’s mailing address is 1901 Pine Ave SE, Warren, OH 44483.
II. STANDARDS FOR THE HEALTH DEPARTMENT TO APPROVE THE USE OF THE WARREN INCINERATOR FOR THE DISPOSAL OF INHALER MAIL-BACK PACKAGES

In approving a plan, the Health Department may exercise reasonable discretion to waive strict compliance with the requirements of the Regulations under § 13.F in order to achieve the objectives of the Regulations, which include providing for and promoting the health, safety, and welfare of the general public. See Regulations § 2.B.

Additionally, under Regulations § 9.B, the Health Department may grant approval for a producer or group of producers to dispose of some or all collected covered drugs, including those collected in Inhaler Mail-Back Packages, at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 C.F.R. parts 60 and 62, if use of a hazardous waste disposal facility is not feasible based on cost, logistics or other considerations.


The Health Department should exercise its discretion and approve the use of the Warren Incinerator for disposal of Inhaler Mail-Back Packages under Regulations § 13.F because disposal at the Warren Incinerator would provide for and promote the health, safety, and welfare of the general public, as discussed further below, in furtherance of the objectives of the Regulations. Furthermore, the Health Department should also exercise its discretion to approve incineration of Inhaler Mail-Back Packages at the Warren Incinerator since disposal at a hazardous waste facility is not feasible based on logistics, cost, and other considerations, consistent with the intent of Regulations § 9.B.

Approving the request would be consistent with: (a) the Health Department’s prior approval to use medical waste incineration for Inhaler Mail-Back Packages at Healthcare Environmental Services, LLC’s Fargo Facility, a medical waste incinerator, and (b) the Health Department’s prior approval to use the Warren Incinerator to dispose of Standard Mail-Back Packages containing unwanted medicine.

A. Disposal at the Warren Incinerator would provide for and promote the health, safety, and welfare of the general public.

Disposal of Inhaler Mail-Back Packages at the Warren Incinerator would provide for and promote the health, safety, and welfare of the general public. Medical waste incinerators, like the Warren Incinerator, are subject to stringent environmental requirements, as well as worker health and safety standards like other incinerators. The Warren Incinerator is subject to environmental permits, including a Clean Air Act Title V permit for air emissions and a state solid waste management permit, and the facility has extensive air pollution controls in place, including a carbon bed system, continuous emissions monitoring systems, a selective non-catalytic reduction system, and a scrubber system. The Warren Incinerator’s Clean Air Act Title V air permit cites to federal standards and emissions limits that are specific to incinerators for hospital, medical, and infectious waste. Additionally, facilities that handle medical waste, like the Warren Incinerator, are subject to a suite of worker health and safety standards. These requirements typically range from the use of personal protective equipment to specific handling and containment procedures.

As these applicable requirements provide for and promote the health, safety, and welfare of the general public, the Health Department should exercise its discretion under Regulations § 13.F to approve the Warren Incinerator as a disposal site for Inhaler Mail-Back Packages. Such approval would also be consistent with the intent of Regulations § 9.B to allow other disposal options where the use of hazardous waste disposal facilities is not feasible.
a. **Disposal of Inhaler Mail-Back Packages at a permitted hazardous waste facility is not feasible.**

MED-Project requests approval to use the Warren Incinerator because disposal of Inhaler Mail-Back Packages at permitted hazardous waste disposal facilities is not feasible at this time due to logistics, costs, and other considerations.

First, MED-Project engaged multiple potential vendors to evaluate whether they could distribute, receive, and dispose of Inhaler Mail-Back Packages, but most vendors do not offer such services. MED-Project initially identified PureWay as the only vendor willing and able to offer these services for Inhaler Mail-Back Packages. PureWay relies on municipal waste combustors to dispose of Inhaler Mail-Back Packages. Since establishing a system where PureWay provides Inhaler Mail-Back Packages, MED-Project has identified Stericycle as another vendor for Inhaler Mail-Back Services. Stericycle is proposing to destroy Inhaler Mail-Back Packages via medical waste incineration. Disposal of Inhaler Mail-Back Packages at a permitted hazardous waste facility is not a feasible option based on MED-Project’s vendors’ offerings.

Second, the cost to dispose of Inhaler Mail-Back Packages at a hazardous waste disposal facility is much greater than the cost to dispose of such packages at the Warren Incinerator. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than medical waste incinerators to dispose of the same quantity of waste. Additionally, identifying a hazardous waste disposal facility willing to accept Inhaler Mail-Back Packages and ensuring that one of MED-Project’s vendors is capable of delivering Inhaler Mail-Back Packages to that facility would cause delay in service to the public and increase MED-Project’s costs. It is infeasible from both a cost and logistics standpoint for MED-Project to dispose of Inhaler Mail-Back Packages at a hazardous waste incinerator.

Third, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Inhaler Mail-Back Packages at a hazardous waste incinerator or preclude MED-Project from disposing of these materials at a permitted medical waste incinerator like the Warren Incinerator. In fact, the U.S. Environmental Protection Agency has issued a memorandum stating clearly that collected household pharmaceuticals are not subject to federal hazardous waste regulations and can be sent to medical waste incinerators for destruction. See Memorandum on Management of Household Pharmaceuticals Collected by law Enforcement During Take-Back Events and Programs, from Barnes Johnson, Office or Resource Conservation and Recovery, to RCRA Division Directors, EPA Regions 1-10 (Sep. 11, 2018). Inhalers collected via Inhaler Mail-Back Packages under this Plan are not regulated under Washington’s dangerous waste regulations, and therefore are not required to be treated as dangerous waste.

For the above reasons, the use of the Warren Incinerator to dispose of Inhaler Mail-Back Packages would meet the standard at Regulations § 9.B, under which the Health Department can approve disposal at a municipal waste combustor. Disposal at the Warren Incinerator is at least as protective of human health and the environment as compared to a municipal waste combustor. MED-Project sees no reason that the Regulations would allow disposal at a municipal waste combustor under Regulations § 9.B, but not at a medical waste incinerator (i.e., the Warren Incinerator) that is permitted to receive this waste and would protect and provide for the environment and the health, safety, and welfare of the public. Accordingly, MED-Project requests that the Health Department approve disposal of Inhaler Mail-Back Packages at the Warren Incinerator.

**IV. CONCLUSION**

Accordingly, the Health Department should approve the disposal of Inhaler Mail-Back Packages via incineration at a permitted medical waste incinerator as proposed by MED-Project under Regulations § 13.F and consistent with the intent of Regulations § 9.B.
Pursuant to § 13.F of the Secure Medicine Return Regulations, Tacoma-Pierce Board of Health Resolution No. 2016-4511 (“Regulations”), MED-Project LLC (“MED-Project”) requests approval from the Tacoma-Pierce County Health Department (the “Health Department”) to use a permitted medical waste incinerator for the disposal of Standard Mail-Back Packages for unwanted medicine. As described below, exercising discretion to allow for the disposal of Standard Mail-Back Packages at a permitted medical waste incinerator would achieve the objectives of the Regulations in accordance with § 13.F of the Regulations. Further, because cost, logistics, and other considerations make disposal of Standard Mail-Back Packages at permitted hazardous waste facilities not feasible at this time, approving the disposal of Standard Mail-Back Packages at a permitted medical waste incinerator would be consistent with the intent of Regulations § 9.B.

I. THE PROCESS FOR THE DISPOSAL OF STANDARD MAIL-BACK PACKAGES AT THE WARREN INCINERATOR

MED-Project is proposing to continue to provide Standard Mail-Back Packages that are pre-addressed and pre-paid for delivery to the Stericycle, Inc. (“Stericycle”) incinerator in Warren, Ohio (the “Warren Incinerator”) for destruction via incineration. The Warren Incinerator will scan the unique identifier on each Standard Mail-Back Package to record receipt of the package before incinerating it, and will confirm the materials have been properly incinerated.

The Warren Incinerator is a permitted hospital, medical, and infectious waste incinerator. The incinerator’s primary chamber has a minimum exit gas temperature of 1400 °F, and the incinerator’s secondary chamber is operated at over 1,830.5 °F. The Warren Incinerator also has a Clean Air Act Title V permit, which establishes air emissions limits for particulate matter, carbon monoxide, dioxins/furans, hydrogen chloride, sulfur dioxide, nitrogen oxides, lead, cadmium, and mercury, among other chemicals. To control air pollution, the Warren Incinerator employs a carbon bed system, continuous emissions monitoring systems, a selective non-catalytic reduction system, and a scrubber system, among other controls. The incinerator stack(s) must be designed to minimize the impact of emissions on employees, residents, visitors, and nearby residences.

The Warren Incinerator is a United States Drug Enforcement Administration (“DEA”) registered collector facility and destroys Standard Mail-Back Packages from MED-Project and other Stericycle clients in compliance with DEA requirements.

The Warren Incinerator facility registration and permit numbers, along with 5-year penalty records, are available upon request.

II. STANDARDS FOR THE HEALTH DEPARTMENT TO APPROVE THE USE OF THE WARREN INCINERATOR FOR THE DISPOSAL OF STANDARD MAIL-BACK PACKAGES

In approving a plan, the Health Department has discretion to waive strict compliance with the requirements of the Regulations under § 13.F in order to achieve the objectives of the Regulations, which include providing for and promoting the health, safety, and welfare of the general public. See Regulations § 2.B.

Additionally, under the Regulations § 9.B, the Health Department may grant approval for a producer or group of producers to dispose of some, or all, of the collected covered drugs, including those collected in Standard Mail-Back Packages, at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 C.F.R. parts 60 and 62, if use of a hazardous waste disposal facility is not feasible based on cost, logistics or other considerations.

1 The Warren Facility’s mailing address is 1901 Pine Ave SE, Warren, OH 44483.

The Health Department should exercise its discretion and approve the use of the Warren Incinerator for disposal of Standard Mail-Back Packages under Regulations § 13.F because disposal at the Warren Incinerator would provide for and promote the public health, safety and welfare of the general public, as discussed further below, in furtherance of the objectives of the Regulations.

Furthermore, the Health Department should also exercise its discretion to approve incineration of Standard Mail-Back Packages at the Warren Incinerator since disposal at a hazardous waste facility is not feasible based on logistics, cost, and other considerations, consistent with the intent of Regulations § 9.B.

a. Disposal at the Warren Incinerator would provide for and promote the health, safety, and welfare of the general public.

Disposal of Standard Mail-Back Packages at the Warren Incinerator would provide for and promote the health, safety, and welfare of the general public. Medical waste incinerators, like the Warren Incinerator, are subject to stringent environmental requirements, as well as worker health and safety standards like other incinerators. The Warren Incinerator is subject to environmental permits, including a Clean Air Act Title V permit for air emissions and a state solid waste management permit, and the facility has extensive air pollution controls in place, including a carbon bed system, continuous emissions monitoring systems, a selective non-catalytic reduction system, and a scrubber system. The Warren Incinerator’s Clean Air Act Title V air permit cites to federal standards and emissions limits that are specific to incinerators for hospital, medical, and infectious waste. Additionally, facilities that handle medical waste, like the Warren Incinerator, are subject to a suite of worker health and safety standards. These requirements typically range from the use of personal protective equipment to specific handling and containment procedures.

As these applicable requirements provide for and promote the health, safety, and welfare of the general public, the Health Department should exercise its discretion under Regulations § 13.F to approve the Warren Incinerator as a disposal site for Standard Mail-Back Packages. Such approval would be consistent with the intent of Regulations § 9.B to allow other disposal options should hazardous waste disposal facilities prove not feasible.

b. Disposal of Standard Mail-Back Packages at a Permitted Hazardous Waste Facility is Not Feasible.

MED-Project requests approval to use the Warren Incinerator because disposal of Standard Mail-Back Packages at the previously approved Stericycle, Inc., Indianapolis, Indiana facility, or permitted hazardous waste disposal facilities is not feasible at this time due to logistics, cost, and other considerations.

First, MED-Project’s vendor for Standard Mail-Back Packages, Stericycle, has changed its offerings and discontinued operation of the mail-back envelope destruction process at the Stericycle, Inc., Indianapolis, Indiana facility that MED-Project previously relied on to provide these services. Stericycle now only offers disposal at the Warren Incinerator for the Standard Mail-Back Packages distributed by MED-Project. The process offered for disposal at the Warren Incinerator is efficient and simple, as Standard Mail-Back Packages are shipped to the ultimate disposal facility and incinerated onsite. MED-Project will be considering alternative disposal options, but the use of a hazardous waste disposal facility for Standard Mail-Back Packages is not logistically feasible at present given the information MED-Project has received from its vendor about the vendor’s access to disposal facilities.

Second, the cost to dispose of Standard Mail-Back Packages at a hazardous waste disposal facility, if any DEA registered collector hazardous waste disposal facilities exist, would be much greater than the cost to dispose of such packages at the Warren Incinerator. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than medical waste incinerators to dispose of the same quantity of waste. Additionally, identifying a hazardous waste disposal facility willing and able to accept Standard Mail-Back Packages, if any such facilities exist, would cause delay in service to the public and increase MED-Project’s costs, further supporting the
conclusion that it is infeasible from both a cost and logistics standpoint for MED-Project to dispose of Standard Mail-Back Packages at a hazardous waste incinerator.

Third, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Standard Mail-Back Packages at a hazardous waste incinerator or preclude MED-Project from disposing of these materials at a permitted medical waste incinerator like the Warren Incinerator. Any unwanted medicines collected via Standard Mail-Back Packages under this Plan are not regulated under Washington’s dangerous waste regulations, and therefore are not required to be treated as dangerous waste.

For the above reasons, the use of the Warren Incinerator to dispose of Standard Mail-Back Packages would meet the standard at Regulations § 9.B, under which the Health Department can approve disposal at a municipal waste combustor. Disposal at the Warren Incinerator is at least as protective of the environment and human health as compared to a municipal waste combustor. MED-Project sees no reason that the Regulations would allow disposal at a municipal waste combustor under Regulations § 9.B, but not at a medical waste incinerator (i.e., the Warren Incinerator) that is permitted to receive this waste and would provide for and promote the public health, safety and welfare of residents of the general public. Accordingly, MED-Project requests that the Health Department approve disposal of Standard Mail-Back Packages at the Warren Incinerator.

IV. CONCLUSION

Accordingly, the Health Department should approve the disposal of Standard Mail-Back Packages via incineration at the Warren Incinerator as proposed by MED-Project under Regulations § 13.F and consistent with the intent of Regulations § 9.B.
Request for Approval to Dispose of Pre-filled Injector Products
(Approved June 22, 2018)

Pursuant to § 13.F and § 9.B of the Tacoma-Pierce County Board of Health Secure Medicine Return Regulations, Environmental Health Code Chapter 7 (the “Regulations”), MED-Project LLC (“MED-Project”) requests the Tacoma-Pierce County Health Department’s (“Health Department’s”) approval to use permitted municipal waste combustors and a permitted medical waste incinerator for the disposal of Injector Mail-Back Packages (as defined in MED-Project Product Stewardship Plan (“Plan”) § III). As described below, exercising discretion to allow for the disposal of Injector Mail-Back Packages at a permitted municipal waste combustor or permitted medical waste incinerator would achieve the objectives of the Regulations in accordance with § 13.F of the Regulations. Further, cost, logistics, and other considerations make disposal of Injector Mail-Back Packages at permitted hazardous waste facilities not feasible at this time per Regulations § 9.B.

I. The Process for the Disposal of Injector Mail-Back Packages at the Proposed Incinerators

MED-Project is proposing to ship Injector Mail-Back Packages to the Daniels Sharpsmart facility in Fresno, California (the “Daniels Facility”) for transport to one of two incinerators for disposal: the Covanta Huntsville, Inc. facility (the “Covanta Huntsville Facility”)
1; and the Covanta Marion, Inc. facility (the “Covanta Marion Facility”)
2. The Daniels Facility will scan the unique identifier on each Injector Mail-Back Package to record receipt of the package before sending it for incineration to one of these three facilities. These facilities will receive and dispose of the Injector Mail-Back Packages, and provide confirmation that the materials have been properly incinerated and disposed of.

Two of the facilities – the Covanta Huntsville Facility and the Covanta Marion Facility – are permitted municipal waste combustors.

a. Covanta Huntsville Facility

The Covanta Huntsville Facility is a permitted large municipal waste combustor. The furnaces at the Covanta Huntsville Facility are operated at temperatures exceeding 1800 degrees Fahrenheit. As a “waste-to-energy” facility, the Covanta Huntsville Facility uses solid waste, like Injector Mail-Back Packages, to generate steam used for the U.S. Army’s nearby Redstone Arsenal’s heating and air conditioning needs. To control air pollution, the Covanta Huntsville Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. Additionally, the Covanta Huntsville Facility has been designated as a Voluntary Protection Program (VPP) Star facility by the U.S. Occupational Safety and Health Administration (OSHA), recognizing the facility’s employer’s and employees’ exemplary achievement in the prevention and control of occupational safety and health hazards.

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1 The Covanta Huntsville Facility’s mailing address is 5251 Triana Blvd SW, Huntsville, AL 35805.
2 The Covanta Marion Facility’s mailing address is 4850 Brooklake Road, NE, Brooks, OR 97305.
b. **Covanta Marion Facility**

The Covanta Marion Facility is also a permitted large municipal waste combustor. The Covanta Marion Facility is a “waste-to-energy” facility that incinerates waste and generates 13.1 megawatts per day from a condensing steam turbine generator that provides energy to the local utility.\(^6\) Like the Covanta Huntsville Facility, the Covanta Marion Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system.\(^7\) The Covanta Marion Facility is a member of the Safety and Health Achievement Recognition Program (SHARP), Oregon's safety and health recognition program.\(^8\) OSHA has also designated the Covanta Marion Facility as a VPP Star facility.\(^9\)

## II. STANDARDS FOR THE HEALTH DEPARTMENT TO APPROVE THE USE OF THE PROPOSED INCINERATORS FOR THE DISPOSAL OF INJECTOR MAIL-BACK PACKAGES

In approving a plan, the Health Department has discretion to waive strict compliance with the requirements of the Regulations in order to achieve the objectives of the Regulations, which include providing for and promoting the health, safety, and welfare of the general public. Regulations §§ 2.B, and 13.F. Therefore, Regulations § 13.F grants the Health Department discretion to waive strict compliance with the disposal provisions at Regulations § 9 in particular, including its provision for disposal at a hazardous waste facility.

Additionally, under Regulations § 9.B, the Health Department may grant approval for a producer or group of producers participating in a stewardship plan to dispose of some or all collected covered drugs, including Pre-filled Injector Products (as defined in Plan § III), at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 C.F.R. parts 60 and 62, if use of a hazardous waste disposal facility is not feasible based on cost, logistics or other considerations.

## III. THE USE OF THE PROPOSED INCINERATORS TO DISPOSE OF INJECTOR MAIL-BACK PACKAGES SHOULD BE APPROVED UNDER REGULATIONS § 13.F TO ACHIEVE THE OBJECTIVES OF THE REGULATIONS

The Health Department should exercise its discretion and approve all three proposed incinerators for disposal of Injector Mail-Back Packages under Regulations § 13.F because the proposed incinerators provide for the health, safety, and welfare of the public, as discussed further below, in furtherance of the objectives of the Regulations. Furthermore, as explained in section IV below, the Health Department should also exercise its discretion to approve these alternative incineration methods since disposal at a hazardous waste facility is not feasible based on logistics, cost, and other considerations.

a. **Covanta Huntsville Facility and Covanta Marion Facility**

The Covanta Huntsville Facility and Covanta Marion Facility provide for the health, safety, and welfare of the general public. In particular, these facilities have extensive pollution control technologies in place, including semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. They have also been recognized for their workplace safety achievements, as evidenced by their status as VPP Star facilities.

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\(^7\) *Id.*

\(^8\) *Id.*

\(^9\) *Id.*; U.S. Occupational Health and Safety Administration, All About VPP, [https://www.osha.gov/dcp/vpp/all_about_vpp.html](https://www.osha.gov/dcp/vpp/all_about_vpp.html).
IV. THE USE OF THE PROPOSED INCINERATORS TO DISPOSE OF INJECTOR MAIL-BACK PACKAGES SHOULD BE APPROVED UNDER REGULATIONS § 9.B BECAUSE DISPOSAL AT A PERMITTED HAZARDOUS WASTE FACILITY IS NOT FEASIBLE

MED-Project proposes to use the Covanta Huntsville Facility and Covanta Marion Facility because disposal of Injector Mail-Back Packages at permitted hazardous waste disposal facilities is not feasible at this time due to logistics, cost, and other considerations.

First, MED-Project has worked with its Vendor for Injector Mail-Back Packages to evaluate whether disposal at a hazardous waste disposal facility would be logistically feasible for Injector Mail-Back Packages collected under the Plan. The Vendor has an established network of logistics and disposal companies, and at present, the use of a hazardous waste disposal facility is not logistically feasible, given the information MED-Project has received from its Vendor about the Vendor’s access to treatment and disposal facilities.

Second, the cost to dispose of Injector Mail-Back Packages at a hazardous waste disposal facility would be much greater than the cost to dispose of such packages at the proposed permitted municipal waste combustors or permitted medical waste incinerator. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than other facilities to dispose of the same quantity of waste. Additionally, identifying a hazardous waste disposal facility willing to accept Injector Mail-Back Packages and ensuring that MED-Project’s Vendor is capable of delivering Injector Mail-Back Packages to that facility would cause delay and increase MED-Project’s costs, further supporting the conclusion that it is infeasible from both a cost and logistics standpoint for MED-Project to dispose of Injector Mail-Back Packages at a hazardous waste incinerator.

Third, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Injector Mail-Back Packages at a hazardous waste incinerator or preclude MED-Project from disposing of these materials at a municipal waste combustor or medical waste incinerator. Any Pre-filled Injector Products collected by MED-Project under this Plan will fall into the household hazardous waste exception to the state’s dangerous waste regulations, and therefore are not required to be treated as dangerous waste.

For the above reasons, the Health Department should approve MED-Project’s request to use the Covanta Huntsville Facility and Covanta Marion Facility to dispose of Injector Mail-Back Packages under Regulations § 9.B.

V. CONCLUSION

Accordingly, the Health Department should approve the disposal of Injector Mail-Back Packages via the Covanta Huntsville Facility, and Covanta Marion Facility as proposed by MED-Project under Regulations § 9.B and § 13.F.
Request for Approval to Dispose of Inhaler Products (Approved June 22, 2018)

Pursuant to §§ 13.F and 9.B of the Tacoma-Pierce County Board of Health Secure Medicine Return Regulations, Environmental Health Code Chapter 7 (the “Regulations”), MED-Project LLC (“MED-Project”) requests the Tacoma-Pierce County Health Department’s (“Health Department’s”) approval to use permitted municipal waste combustors and a permitted medical waste incinerator for the disposal of Inhaler Mail-Back Packages (as defined in MED-Project Product Stewardship Plan (“Plan”) § III). As described below, exercising discretion to allow for the disposal of Inhaler Mail-Back Packages at a permitted municipal waste combustor or permitted medical waste incinerator would achieve the objectives of the Regulations in accordance with § 13.F of the Regulations. Further, cost, logistics, and other considerations make disposal of Inhaler Mail-Back Packages at permitted hazardous waste facilities not feasible at this time per Regulations § 9.B.

I. THE PROCESS FOR THE DISPOSAL OF INHALER MAIL-BACK PACKAGES AT THE PROPOSED INCINERATORS

MED-Project is proposing to ship Inhaler Mail-Back Packages to the Daniels Sharpsmart facility in Fresno, California (the “Daniels Facility”) for transport to one of three incinerators for disposal: the Covanta Huntsville, Inc. facility (the “Covanta Huntsville Facility”); the Covanta Marion, Inc. facility (the “Covanta Marion Facility”); or the Healthcare Environmental Services, LLC’s Fargo Facility (the “HESI Facility”). The Daniels Facility will scan the unique identifier on each Inhaler Mail-Back Package to record receipt of the package before sending it for incineration to one of these three facilities. These facilities will receive and dispose of the Inhaler Mail-Back Packages and provide confirmation that the materials have been properly incinerated and disposed of.

Two of the facilities – the Covanta Huntsville Facility and the Covanta Marion Facility – are permitted municipal waste combustors. The HESI Facility is a permitted medical waste incinerator.

a. Covanta Huntsville Facility

The Covanta Huntsville Facility is a permitted large municipal waste combustor. The furnaces at the Covanta Huntsville Facility are operated at temperatures exceeding 1800 degrees Fahrenheit. As a “waste-to-energy” facility, the Covanta Huntsville Facility uses solid waste, like Inhaler Mail-Back Packages, to generate steam used for the U.S. Army’s nearby Redstone Arsenal’s heating and air conditioning needs. To control air pollution, the Covanta Huntsville Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. Additionally, the Covanta Huntsville Facility has been designated as a Voluntary Protection Program (VPP) Star facility by the U.S. Occupational Safety and Health Administration (OSHA), recognizing the facility’s employer’s and employees’ exemplary achievement in the prevention and control of occupational safety and health hazards.

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1 The Covanta Huntsville Facility’s mailing address is 5251 Triana Blvd SW, Huntsville, AL 35805.
2 The Covanta Marion Facility’s mailing address is 4850 Brooklake Road, NE, Brooks, OR 97305.
3 The HESI Facility’s mailing address is 1420 40th Street North, Fargo, ND 58102.
b. **Covanta Marion Facility**

The Covanta Marion Facility is also a permitted large municipal waste combustor. The Covanta Marion Facility is a “waste-to-energy” facility that incinerates waste and generates 13.1 megawatts per day from a condensing steam turbine generator that provides energy to the local utility.\(^7\) Like the Covanta Huntsville Facility, the Covanta Marion Facility employs semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system.\(^8\) The Covanta Marion Facility is a member of the Safety and Health Achievement Recognition Program (SHARP), Oregon's safety and health recognition program.\(^9\) OSHA has also designated the Covanta Marion Facility as a VPP Star facility.\(^10\)

c. **HESI Facility**

MED-Project is also requesting approval to dispose of Inhaler Mail-Back Packages at the HESI Facility, which is a permitted hospital, medical, and infectious waste incinerator. The HESI Facility operates a multiple chamber incinerator approximately 50 weeks per year on a 24-hour basis with the capacity to incinerate 1,200 pounds per hour.\(^11\) To control air pollution, the HESI Facility relies on a multiple chamber incinerator utilizing a sodium bicarbonate-injection dry scrubber/baghouse system.\(^12\) The HESI facility is permitted to treat medical wastes and certain other wastes, including expired and unused pharmaceuticals.\(^13\)

II. **STANDARDS FOR THE HEALTH DEPARTMENT TO APPROVE THE USE OF THE PROPOSED INCINERATORS FOR THE DISPOSAL OF INHALER MAIL-BACK PACKAGES**

In approving a plan, the Health Department has discretion to waive strict compliance with the requirements of the Regulations in order to achieve the objectives of the Regulations, which include providing for and promoting the health, safety, and welfare of the general public. §§ 2.B, 13.F. Therefore, Regulations § 13.F grants the Health Department discretion to waive strict compliance with the disposal provisions at Regulations § 9 in particular, including its provision for disposal at a hazardous waste facility.

Additionally, under Regulations § 9.B, the Health Department may grant approval for a producer or group of producers participating in a stewardship plan to dispose of some or all collected covered drugs, including inhalers, at a permitted large municipal waste combustor, as defined by the United States Environmental Protection Agency under 40 C.F.R. parts 60 and 62, if use of a hazardous waste disposal facility is not feasible based on cost, logistics or other considerations.

III. **THE USE OF THE PROPOSED INCINERATORS TO DISPOSE OF INHALER MAIL-BACK PACKAGES SHOULD BE APPROVED UNDER REGULATIONS § 13.F TO ACHIEVE THE OBJECTIVES OF THE REGULATIONS**

The Health Department should exercise its discretion and approve all three proposed incinerators for disposal of Inhaler Mail-Back Packages under Regulations § 13.F because the proposed incinerators provide for the health, safety, and welfare of the public, as discussed further below, in furtherance of the objectives of the Regulations. Furthermore, as explained in section IV below, the Health Department should also exercise its discretion to approve these alternative incineration methods since disposal at a hazardous waste facility is not feasible based on logistics, cost, and other considerations.

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\(^8\) Id.

\(^9\) Id.

\(^10\) Id.; U.S. Occupational Health and Safety Administration, All About VPP, [https://www.osha.gov/dcsp/vpp/all_about_vpp.html](https://www.osha.gov/dcsp/vpp/all_about_vpp.html).


\(^12\) See HESI Facility’s Title V Permit to Operate No. T5-178001 § 1.

\(^13\) See HESI Facility’s Solid Waste Management Facility Permit No. ITF-0203 § II.C.
a. **Covanta Huntsville Facility and Covanta Marion Facility**

The Covanta Huntsville Facility and Covanta Marion Facility provide for the health, safety, and welfare of the general public. In particular, these facilities have extensive pollution control technologies in place, including semi-dry flue gas scrubbers injecting lime, fabric filter baghouses, a nitrogen oxide control system, a mercury control system, and a continuous emissions monitoring system. They have also been recognized for their workplace safety achievements, as evidenced by their status as VPP Star facilities.

b. **HESI Facility**

The HESI Facility also provides for the protection and promotion of the health, safety, and welfare of the general public, like the municipal waste combustors. Medical waste incinerators, like the HESI Facility, are typically subject to stringent environmental requirements, as well as worker health and safety standards like other incinerators. The HESI Facility is subject to environmental permits, including a Title V permit for air emissions and a state solid waste management permit, and the facility employs air pollution controls, including a sodium bicarbonate-injection dry scrubber/baghouse system. The facility’s Title V air permit cites to federal standards and emissions limits that are specific to incinerators for hospital, medical, and infectious waste. Additionally, facilities that handle medical waste, like the HESI Facility, are subject to a suite of worker health and safety standards that would not otherwise be in place. These requirements typically range from the use of personal protective equipment to specific handling and containment procedures.

Finally, the Health Department should also exercise its discretion under Regulations § 13.F to approve the HESI Facility since disposal at a hazardous waste facility is not feasible at this time due to logistics, cost, and other considerations, as described in the following section IV.

**IV. THE USE OF THE PROPOSED INCINERATORS TO DISPOSE OF INHALER MAIL-BACK PACKAGES SHOULD BE APPROVED UNDER REGULATIONS § 9.B BECAUSE DISPOSAL AT A PERMITTED HAZARDOUS WASTE FACILITY IS NOT FEASIBLE**

MED-Project proposes to use the Covanta Huntsville Facility and Covanta Marion Facility because disposal of Inhaler Mail-Back Packages at permitted hazardous waste disposal facilities is not feasible at this time due to logistics, cost, and other considerations.

First, MED-Project engaged multiple potential vendors to evaluate whether they could distribute, receive, and dispose of Inhaler Mail-Back Packages, but most vendors do not offer such services. Furthermore, the only Vendor willing and able to offer these services for Inhaler Mail-Back Packages, PureWay Compliance Inc., offers disposal at municipal waste combustors (the Covanta Huntsville Facility and the Covanta Marion Facility) and a medical waste incinerator (the HESI Facility). Accordingly, the use of a hazardous waste disposal facility for Inhaler Mail-Back Packages is not logistically feasible at present, given the information MED-Project has received from its Vendor about the Vendor’s access to disposal facilities.

Second, the cost to dispose of Inhaler Mail-Back Packages at a hazardous waste disposal facility would be much greater than the cost to dispose of such packages at the proposed permitted municipal waste combustors or permitted medical waste incinerator. In MED-Project’s experience, hazardous waste incinerators typically charge significantly more than other facilities to dispose of the same quantity of waste. Additionally, identifying a hazardous waste disposal facility willing to accept Inhaler Mail-Back Packages and ensuring that MED-Project’s Vendor is capable of delivering Inhaler Mail-Back Packages to that facility would cause delay and increase MED-Project’s costs, further supporting the conclusion that it is infeasible from both a cost and logistics standpoint for MED-Project to dispose of Inhaler Mail-Back Packages at a hazardous waste incinerator.

Third, there are no other laws or requirements, outside of the Regulations, that would require MED-Project to dispose of Inhaler Mail-Back Packages at a hazardous waste incinerator or preclude MED-Project from disposing of these materials at a municipal waste combustor or medical waste incinerator. Any inhalers collected by MED-
Project under this Plan are not regulated under the state’s dangerous waste regulations, and therefore are not required to be treated as dangerous waste.

For the above reasons, the Health Department should approve MED-Project’s request to use the Covanta Huntsville Facility and Covanta Marion Facility to dispose of Inhaler Mail-Back Packages under Regulations § 9.B.

Additionally, the use of the HESI Facility to dispose of Inhaler Mail-Back Packages would meet the same standard. Disposal at the HESI Facility is at least as protective of the environment and human health, as compared to a municipal waste combustor. See sections II and III above. MED-Project sees no reason that the Regulations would allow disposal at a municipal waste combustor under Regulations § 9.B, but not at a medical waste facility (i.e., the HESI Facility) that is permitted to receive this waste and provides for the health, safety, and welfare of the public. Accordingly, MED-Project requests that the Health Department approve disposal of Inhaler Mail-Back Packages at the HESI Facility.

V. CONCLUSION

Accordingly, the Health Department should approve the disposal of Inhaler Mail-Back Packages via the Covanta Huntsville Facility, Covanta Marion Facility, and HESI Facility as proposed by MED-Project under Regulations §§ 9.B and 13.F
Appendix J

Sample Template: Education and Outreach Call Script [1-844-MED-PROJECT]

MED-Project will expand the call script to be available in the Required Languages

M*ED-Project™
Medication Education & Disposal

Thank you for calling the information line for the Medication Education and Disposal Project, or MED-Project.

- If you are experiencing a medical emergency, please hang up and dial 9-1-1.
- If you are experiencing a non-emergency but suspect that you or a family member has ingested something poisonous, please call Poison Control at 800-222-1222.
- Unwanted Medicine Kiosks and Mail-Back Distribution Sites are located throughout your local area and provide convenient options for disposing of expired or Unwanted Medicines. Press 3 for more information about convenient kiosks or mail-back distribution sites.
- Mail-back services are available to Residents. Press 4 for more information.
- Take-Back Events may be scheduled throughout the year and offer residents a free and convenient way to dispose of expired or unwanted medicines. Press 5 for more information.
- You may press 0 at any time to speak with an operator about disposal options.
- MED-Project is a consumer education campaign dedicated to proper medication use and consumer disposal.
- MED-Project reminds you that taking your medicine as directed by your health care provider is important to your health.
- If you have questions about your medication, please hang up and call your health care provider.
- For additional questions about the proper disposal of expired or unwanted medications from households, please go to www.med-project.org or press 0 to talk to an operator.
- To hear this menu again, please press 1.
- Thank you for calling MED-Project.

**Unwanted Medicine Kiosk or Mail-Back Distribution Site Script for when Option 3 is selected:**

- Kiosks drop-off sites or mail-back distribution sites for Unwanted Medicine are located conveniently throughout your local area. To locate the site nearest you, or for precise information about hours of operation, press 0 to speak with an operator or visit www.med-project.org to search by your zip code.
- Kiosks accept medications in any dosage form in their original container or sealed bag. Items that are not accepted include herbal remedies, vitamins, supplements, cosmetics or other personal care products; medical devices; batteries; mercury-containing thermometers; pest pesticide products; sharps; and illicit drugs.
- If you do transfer your medications to a sealed bag before placing it into a kiosk, please be sure to recycle all remaining packaging.
- To protect your privacy, remove or blackout all personally identifiable information before disposing of your medications or recycling your drug packaging.
- To repeat this information, press 3.
- To return to the main menu, please press 1.
- Thank you for calling MED-Project.

**Unwanted Medicine Mail-Back Services Script for when Option 4 is selected:**

- Mail-back services for unwanted medicine and inhalers are available to residents who are differentially-abled or homebound or to home healthcare professionals providing services to differentially-abled or homebound residents.
- Mail-back services are also available to all residents for Pre-filled Injector Products
- Unwanted medicine Mail-Back Packages accept medications in any dosage form in their original container or sealed bag. Items that are not accepted include herbal remedies, vitamins, supplements, cosmetics or other personal care products; medical devices; batteries; mercury-containing thermometers; pest pesticide products; sharps; and illicit drugs.
- To request a Mail-Back Package, please press 0 to talk to the operator or visit www.med-project.org.
- Mail-Back Distribution Locations may also be available in your area.
- If you transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.
- To protect your privacy, remove or blackout all personally identifiable information before disposing of your medications or recycling your drug packaging.
- To repeat this information, press 4.
- To return to the main menu, please press 1.
- Thank you for calling MED-Project.
Unwanted Medicine Take-Back Event Script for when Option 5 is selected:

- MED-Project may be working with local law enforcement and other community organizations to offer regular expired and unwanted medicine Take-Back Events in your area. For a complete list of Take-Back Events, please press 0 to speak to the operator or visit www.med-project.org.
- Take-Back Events accept medications in any dosage form in their original container or sealed bag. Items that are not accepted include herbal remedies, vitamins, supplements, cosmetics or other personal care products; medical devices; batteries; mercury-containing thermometers; pet pesticide products; sharps; and illicit drugs.
- If you transfer your medications to a sealed bag, please be sure to recycle all remaining packaging.
- To protect your privacy, remove or blackout all personally identifiable information before disposing of your medications or recycling your drug packaging.
- To repeat this information, press 5.
- To return to the main menu, please press 1.
- Thank you for calling MED-Project.
Appendix K

Sample MED-Project Website

Translations of the MED-Project Website pages will be available in the Required Languages.

PIERCE COUNTY, WA

Medicines help treat diseases, manage chronic conditions, and improve health and well-being for millions of Americans. It is important that patients take their medicines as prescribed by their health care provider. However, if you have expired or unwanted medicines, proper disposal is important and easy.

CHECK THE PACKAGE
CONVENIENT LOCATIONS
MAIL BACK
TAKE-BACK EVENTS

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of MED-Project or the companies participating in the MED-Project Product Stewardship Program.

Privacy Policy
If there are any specific instructions for disposal on the label, package, or package insert, please follow those instructions. Do not flush any medication down the sink or toilet unless the information on the packaging specifically instructs you to do so.

Pierce County discourages the disposal of unused, expired, or contaminated pharmaceutical wastes in solid waste streams per County Regulations.

To protect your privacy, patients are reminded to remove all personally identifiable information on medication labels or packaging before disposing of unwanted medicines.
CONVENIENT LOCATIONS

Community kiosk drop-off sites allow patients to bring expired or unwanted medicines to convenient locations for proper disposal. Residents may also go to selected locations to request a Mail-Back Package for expired or unwanted medicines.

MEDICINE:

ACCEPTED: Medications in any dosage form, except for those identified as Not Accepted below, in their original container or sealed bag.

NOT ACCEPTED: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, medical devices, batteries, mercury-containing thermometers, sharps, illicit drugs, and pet pesticide products.

If transferring medications to a sealed bag, please be sure to recycle remaining packaging.

Enter your zip code below, to find convenient locations.

This list identifies information on some of the mail-back and kiosk programs, as well as take-back events, that may be available to Pierce County residents for disposing of expired or unwanted medicines. Some of the programs may be limited to a subset of Pierce County residents, (e.g., residents actively using a specific medication). Please contact the programs before attempting to use them to confirm they are available to you and able to accept your medications.

MED-Project LLC has compiled this list based on publicly available information for your convenience, but does not guarantee the accuracy of any of the information on it. MED-Project LLC does not endorse and denies any responsibility or liability for the programs listed or the processes they employ for collection, transportation, treatment, or disposal of the medications they collect.
MAIL BACK

MEDICINE MAIL-BACK SERVICES

Mail-Back Services for expired or unwanted medicines are available, free of charge, to differentially-abled and/or homebound residents upon request. Mail-Back Distribution Locations may also be available in your area. Medications in any dosage form, except for those identified as Not Accepted below, in their original container or sealed bag are accepted.

NOTE: The following items are not accepted in Medicine Mail-Back Envelopes: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, medical devices, batteries, mercury-containing thermometers, sharps, illicit drugs, pet pesticide products and inhalers.

If transferring medications to a sealed bag, please be sure to recycle remaining packaging.

INHALER MAIL-BACK SERVICES

Mail-Back Services for inhalers are available, free of charge, to differentially-abled and/or homebound residents upon request.

NOTE: Only place undamaged inhalers in their original containers in the Inhaler Mail-Back Package. Inhaler Mail-Back Packages can only be used for inhalers and cannot accept other types of items.

INJECTOR MAIL-BACK SERVICES

Mail-Back Services for pre-filled injector products are available to all residents upon request.

NOTE: Injector Mail-Back Packages can only be used for pre-filled injector products and cannot be used for inhalers or other types of unwanted medicines or items.

Please complete the below form to request a pre-paid, pre-addressed mail-back package. Instructions for disposal will be provided with all mail-back services. Please submit separate forms for each type of mail-back package.

Choose your package type*

How many packages do you need

Contact Information

First Name*

Last Name*

Email

Address*

Address 2

City*  NA  Zip Code*

*Required field

SUBMIT REQUEST

CHECK THE PACKAGE  CONVENIENT LOCATIONS  MAIL BACK  TAKE-BACK EVENTS

*This material has been provided for the purpose of compliance with regulations and does not necessarily reflect the views of MED Project or the companies participating in the MED Project Product Stewardship Program.
TAKE-BACK EVENTS

Local take-back events offer residents a free and convenient way to dispose of expired or unwanted medicines. The local authorities and MED-Project may also sponsor local drug take-back events in your area.

MEDICINE

ACCEPTED: Medications in any dosage form, except for those identified as Not Accepted below, in their original container or sealed bag.

NOT ACCEPTED: Herbal remedies, vitamins, supplements, cosmetics, other personal care products, medical devices, batteries, mercury-containing thermometers, sharps, illicit drugs and pet pesticide products.

If transferring medications to a sealed bag, please be sure to recycle remaining packaging.

CALENDAR OF LOCAL TAKE-BACK EVENTS

Take-Back Events will be added as locations become available.
MED Info

Medicines help treat diseases, manage chronic conditions, and improve health and well-being for millions of Americans. It is important that patients take their medicines as prescribed by their health care provider and as indicated on the label or packaging. It is also important to be sure to store medicines securely to prevent accidental ingestion or misuse by others, especially children.

There are a number of ways to dispose of expired or unwanted medicines. To protect your privacy, patients are reminded to remove all personally identifiable information on medication labels or packaging before disposing of unwanted medicines.

For additional information on the program, MED-Project has developed an educational toolkit which includes the materials below.

Brochure – Medicine Program
- English
- Español
- Khmer
- Korean
- Русский
- Tiếng Việt

Frequently Asked Questions
- English
- Español
- Khmer
- Korean
- Русский
- Tiếng Việt

Radio Public Service Announcement (PSA) – Medicine Program
- English
- Español
- Khmer
- Korean
- Русский
- Tiếng Việt

Video Public Service Announcement (PSA) – Medicine Program
- English
- Español
- Khmer
- Korean
- Русский
- Tiếng Việt

If you would like any of the unwanted medicines program materials emailed to you, contact piercecountyemed-project.org.

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of MED-Project or the companies participating in the MED-Project Product Stewardship Program.

Privacy Policy
FAQ

What is MED-Project?
What should I do if I am having a medical emergency?
What should I do if I think I have ingested something poisonous?
What should I do if my pet has ingested medication?
Whom should I call with a question about my medication?
Where can I find information about the safe storage of medication?
Should I remove my personal information before disposing of my medication?
How do I dispose of my unwanted medicines?
Where are the MED-Project disposal locations nearest me?
Will it cost me anything to dispose of my expired or unwanted medications?
Can I flush my medication down the toilet?
I am unable to go to a kiosk or attend a take-back event. How can I dispose of my expired or unwanted medicines?
Will there be a take-back event in my area?
I have a question not answered by the MED-Project website. Is there someone I can contact with a question about MED-Project?
Where else can I find information about the safe disposal of expired or unwanted medicines?
What is recommended for safe disposal of expired or unwanted medicines in Pierce County?
CONTACT

If you are experiencing a medical emergency, please call 911.
If you are experiencing a non-emergency but suspect that you or another individual has ingested something poisonous, please call Poison Control at 1 (800) 222-1222.

If you have questions about your medication, please call your health care provider.

For answers to some frequently asked questions about MED-Project, click here.

Residents
If you are a resident of Pierce County and have questions about MED-Project, please contact:
1 (844) MED PROJECT or 1 (844) 633-7765 or (TTY: 711)

Convenient Locations
If you are a current kiosk drop-box site, or a retail pharmacy, hospital/clinic pharmacy or law enforcement agency interested in hosting a drop-box, contact:
Dr. Victoria Travis, PharmD, MS, MBA
National Program Director
MED-Project LLC
Phone: 1 (833) MED-PROJECT or 1 (833) 633-7765
Fax: 1 (866) 633-8912
Email inquiries for medicine disposal: piercecounty@med-project.org

Drug Producers
If you are drug producer interested in participating in the MED-Project stewardship plan contact:
Phone: 1 (202) 495-3131
Email: compliance@med-project.org

This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of MED-Project or the companies participating in the MED-Project Product Stewardship Program.

Privacy Policy
Appendix L

Sample Brochure Mockup

Translations of the brochure will be available in the Required Languages.

Front of brochure

WHAT SHOULD YOU DO WITH YOUR EXPIRED OR UNWANTED MEDICINES?

MED-Project™
Medication Education & Disposal

SAFELY DISPOSE OF EXPIRED OR UNWANTED MEDICINES

There are a number of ways to dispose of expired or unwanted medicines.

For more information about the MED-Project program, visit www.med-project.org or call 1-844-MED-PROJECT (TTY: 711).

What should you do with your expired or unwanted medicines?

MED-Project™
Medication Education & Disposal
www.med-project.org

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This material has been provided for the purpose of compliance with legislation and does not necessarily reflect the views of MED-Project or this company participating in the MED-Project Product Stewardship Plan.
DISPOSAL OF HOUSEHOLD MEDICINES

1 CHECK THE PACKAGE

If there are specific instructions for disposal on the label, package or package insert, please follow those instructions.

2 CONVENIENT LOCATIONS

To find kiosk sites in your area, visit the Convenient Locations section of www.med-project.org. Mail-Back Distribution Locations may also be available in your area.

What items can I dispose of at a kiosk?

ACCEPTED:
Medications in any dosage form, except for those listed below, in their original container or sealed bag.

If transferring medicines to a sealed bag, please be sure to remove remaining packaging.

NOT ACCEPTED:
Herbal remedies, vitamins, supplements, cosmetics, other personal care products, medical devices, batteries, mercury-containing thermometers, sharps, illicit drugs, and pet pesticide products.

DISPOSAL OF HOUSEHOLD MEDICINES

3 MAIL-BACK

Mail-Back Services are available in your area. To order a Mail-Back package, visit the Mail-Back section of www.med-project.org.

4 TAKE-BACK-EVENTS

Local take-back events offer residents a free and convenient way to dispose of expired or unwanted medicines. For information on events in your area, visit the Take-Back Events section of www.med-project.org.

To protect your privacy, patients are reminded to remove all personally identifiable information on medication labels or packaging before disposing of unwanted medicines.
Appendix M

Sample Digital and Local Social Networks

The following is a representative list of local organizations and their social media networks in Tacoma-Pierce County. MED-Project will reach out to relevant groups to help promote the Program.

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<th>Outlet</th>
<th>Facebook</th>
<th>Twitter</th>
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</thead>
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<td></td>
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<tr>
<td>Pierce County Sheriff’s Office</td>
<td><a href="https://www.facebook.com/pages/Pierce-County-Washington/136891229664598">https://www.facebook.com/pages/Pierce-County-Washington/136891229664598</a></td>
<td>@piercecounty.sheriff</td>
</tr>
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<td>@cityoftacoma</td>
</tr>
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<td>Gig Harbor</td>
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<td>@gigharborwashington</td>
</tr>
<tr>
<td>Gig Harbor Police Department</td>
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</tr>
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<td>Lakewood Police Department</td>
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</tr>
<tr>
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</tr>
<tr>
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<td>@pointruston</td>
</tr>
</tbody>
</table>
Appendix N

Sample Template: Take-Back Event Media Advisory

MED-Project™
Medication Education & Disposal

ADVISORY * * * ADVISORY * * * ADVISORY * * * ADVISORY

MED-Project to Support Take-Back Event on [Date, 2019]

Residents are invited to bring expired or unwanted medications to [Location] from [x time] to [y time] for disposal.

Tacoma-Pierce County, Washington, [Date] – The Medication Education & Disposal Project (MED-Project), an entity implementing a Product Stewardship Plan for Unwanted Medicine, including the education and outreach programming, announced today that it will be conducting a medication Take-Back Event supervised by a local law enforcement agency for consumers in [town] on [date]. All County residents are invited to bring their expired or unwanted medications for disposal. The service is free. [Insert information for residents about what can be collected]. To protect privacy, consumers are reminded to remove all personally identifiable information on prescription labels or materials that are brought to this Take-Back Event.

What: MED-Project Medication Take-Back Event – bring your expired or Unwanted Medicines for disposal

When: [Date], [Time]

Where: [Location]

For more information about disposal options for expired or Unwanted Medicine, visit www.med-project.org.

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Contact:

MED-Project Call Center at 1-844-MED-PROJECT or 1-844-633-7765