

**Nevada State Board of Pharmacy  
Annual Returned  
Drug Report  
2010**

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## Introduction

### Annual Return Drugs Report for the calendar year 2009.

Once a prescription medication leaves a pharmacy, the medication cannot be returned by the patient to the pharmacy for resale. NRS 639.282 makes it unlawful for a pharmacy or practitioner to accept for return, for the purpose of resale, a prescription once the medication has left the control of the pharmacy or practitioner. This statute ensures the safety of the public by preventing the introduction of potentially contaminated or otherwise compensated medication back into the market.

#### **NRS 639.282 Unlawful possession or sale of certain pharmaceutical preparations, drugs or chemicals; destruction.**

- 1) Except as otherwise provided in NRS 433.801, 449.2485, 639.267, 639.2675 and 639.2676, it is unlawful for any person to have in his or her possession, or under his or her control, for the purpose of resale, or to sell or offer to sell or dispense or give away, any pharmaceutical preparation, drug or chemical which:
  - a) Has been dispensed pursuant to a prescription or chart order and has left the control of a registered pharmacist or practitioner;
  - b) Has been damaged or subjected to damage by heat, smoke, fire or water, or other cause which might reasonably render it unfit for human or animal use;
  - c) Has been obtained through bankruptcy or foreclosure proceedings, or other court action, auction or other legal or administrative proceedings, except when the pharmaceutical preparation, drug or chemical is in the original sealed container;
  - d) Is no longer safe or effective for use, as indicated by the expiration date appearing on its label;  
or
  - e) Has not been properly stored or refrigerated as required by its label.
- 2) The provisions of subsection 1 do not apply if the person in whose possession the pharmaceutical preparation, drug or chemical is found also has in his or her possession a valid and acceptable certification of analysis attesting to the purity and strength of the pharmaceutical preparation, drug or chemical and attesting to the fact that it can be safely and effectively used by humans or animals. The preparation, drug or chemical must not be sold or otherwise disposed of until the certification required by this subsection has been presented to and approved by the Board.
- 3) In the absence of conclusive proof that the preparation, drug or chemical can be used safely and effectively by humans or animals, it must be destroyed under the direct supervision of a member or an inspector of the Board, or two persons designated as agents by the Board who include an inspector of a health care board, a licensed practitioner of a health care board or a peace officer of an agency that enforces the provisions of chapters 453 and 454 of NRS.
- 4) As used in this section, "health care board" includes the State Board of Pharmacy, the State Board of Nursing, the Board of Medical Examiners and the Nevada State Board of Veterinary Medical Examiners.

There are exceptions to NRS 639.282. A public or private mental health facility, a facility for skilled nursing, a facility for intermediate care, and a correctional institution may all return unopened and unused medications in the original manufacturer's container to the pharmacy. NRS 433.801, NRS 449.2485, NRS 639.267, NRS 639.2675 and NRS 639.2676 address these exceptions.

NRS 433.801 Sets the requirements that must be met for the return of a patient's unused prescription drugs to the dispensing pharmacy from a public or private mental health facility for reissue or the transfer of prescription medications to a non-profit pharmacy as designated by the Board pursuant to NRS 639.2676.

NRS 449.2485 Sets the requirements that must be met for the return of a patient's unused prescription drugs to the dispensing pharmacy from a skilled nursing facility or facility for intermediate care to the dispensing pharmacy for reissue or the transfer of prescription medications to a non-profit pharmacy as designated by the Board pursuant to NRS 639.2676.

NRS 639.267 Addresses the return or transfer of unused drugs packaged in unit doses, generally.

NRS 639.2675 Sets the requirements that must be met for the return of a patient's unused prescription drugs to the dispensing pharmacy from a correctional institution for reissue or the transfer of prescription medications to a non-profit pharmacy as designated by the Board pursuant to NRS 639.2676.

NRS 639.2676 Sets the requirements for reissue of unused drugs transferred to a nonprofit pharmacy.

## **2009 Legislative Update**

The Nevada Legislature passed legislation (SB 197 - NRS 639.2676) that allows for and addresses the requirements for reissue of medications by a non-profit pharmacy.

The Nevada Legislature passed legislation (AB213- NRS 457.400 through NRS 457.490) creating a Cancer Drug Donation Program. The Program will distribute and dispense cancer drugs donated to the Program to cancer patients. It also authorizes persons to donate cancer drugs at any pharmacy, medical facility, health clinic or provider of health care that participates in the Program. The donated drugs must be in the original, unopened and sealed packages and must not be adulterated or misbranded. Part of the bill provides immunity from civil liability for damages caused by any act or omission of a person who donates a cancer drug to the Program, or who accepts, distributes or dispenses a cancer drug donated to the Program.

The Board of Pharmacy's regulations to address SB197 and AB213 have not been codified by the Legislative Counsel Bureau as of the date of this report.

**Nevada Revised Statute 639.063 Requires the Board of Pharmacy to produce an annual report on the return or transfer of medications from various facilities to the dispensing pharmacy.**

**NRS 639.063 Annual report concerning drugs returned or transferred to pharmacies from certain facilities and institutions and reissued to fill other prescriptions.**

- 1) The Board shall prepare an annual report concerning drugs that are returned or transferred to pharmacies pursuant to NRS 433.801 , 449.2485 , 639.2675 and 639.2676 and are reissued to fill other prescriptions. The report must include, without limitation:
  - a) The number of drugs that are returned to dispensing pharmacies.
  - b) The number of drugs that are transferred to nonprofit pharmacies designated by the Board pursuant to NRS 639.2676 .
  - c) The number of drugs that are reissued to fill other prescriptions.
  - d) An estimate of the amount of money saved by reissuing such drugs to fill other prescriptions.
  - e) Any other information that the Board deems necessary.
- 2) The report must be:
  - a) Available for public inspection during regular business hours at the office of the Board; and
  - b) Posted on a website or other Internet site that is operated or administered by or on behalf of the Board.

**Regulation of Exempt Facilities by the Board of Pharmacy**

The Nevada State Board of Pharmacy licenses and regulates pharmacies within the state correctional facilities, pharmacies within public mental health facilities and pharmacies that dispense to exempt facilities. The Board does not license or regulate skilled nursing and facilities for intermediate care.

**Cost Savings**

The exceptions to NRS 639.282, providing for the return of unused medications for reissue, have the potential to result in substantial cost savings both for public correctional and mental health facilities and for private sector skilled nursing and intermediate care facilities and their patients. These facilities administer large quantities of medications and the medications are stored and administered under a controlled environment so the safe return for reissue of medication to another patient may make economic sense.

**Safety of Returned Medications**

Mental health facilities, facilities for skilled nursing, facilities for intermediate care, and directors of correctional institutions have policies and procedures that include, but are not limited to, storage, security, dispensing, administering, and documentation of medication usage. The facilities also have pharmacy consultants that review and are responsible to make sure that all policy and procedures related to medications are followed.

Mental health facilities, facilities for skilled nursing, facilities for intermediate care, and directors of correctional institutions are required by statute to adopt written procedures for the return of medications to a dispensing pharmacy as outlined in NRS 433.801 (public or private mental health facility), NRS 449.2485 (skilled nursing facility or facility for intermediate care) and NRS 639.2675 (correctional institution). The written procedures have to be approved by the Board of Pharmacy. These facilities are required to document and retain all records relating to the return of drugs.

The following data is the most accurate information available on the return of medications from and the reissuance of medications to exempted facilities.

<b>Facility Type</b>	<b>Returned Units</b>	<b>Units available for reissue*</b>	<b>Estimated Dollar Value of Reissued medications</b>
Public Mental Health	139,067	117,479	\$684,885
Correctional	34,424	29,723	\$234,882
Skilled Nursing & Intermediate Care	28,524	27,530	\$480,665

\*Actual units that were reissued will vary based on expiration date of the medication, whether the medication had been reissued previously, and other factors, such as identified storage issues, that might prevent the reissue of a medication.

\*Facilities, both public and private, may also return products under wholesaler or manufacturer guaranteed sale programs and thus may not be reissued.

### **Conclusion**

Ensuring that medications are safe for use by the ultimate consumer is the most important responsibility of the Board of Pharmacy, the pharmacies that service exempt facilities and the exempt facilities themselves.

Although medications prescribed for patients in the exempt facilities are dispensed by the pharmacy under controlled conditions and are in a controlled environment within the facility, each time a medication is handled or changes facilities there is an increased chance of deterioration of medication due to improper storage, excess temperature range and other factors both environmental and the possibility of deliberate contamination.

If there is significant cost savings and no risk to the patient then the return of drugs makes economic sense. If there is any risk to the patient due to contamination or other deterioration of drugs, then the question is, is cost savings potential worth any increased patient risk?