Secretariat for State Affairs

The Topical Medical Waste Reduction Act

Resource materials to support state legislative campaigns

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Model Legislation

AN ACT concerning health.

Be it enacted by the People of the State of ______,
represented in the _____________________:

Section 1. This Section shall be known as The Topical Medical Waste Reduction Act of 2022:

(a) The Legislature finds that this Act is necessary for the immediate preservation of the public peace, health, and safety.

(b) In this Act, “facility-provided medication” means any topical antibiotic, anti-inflammatory, dilation, or glaucoma drop ointment that a hospital operating room (OR), or Emergency Room (ER), or Ambulatory Surgical Treatment Center (ASTC) staff has on stand-by or is retrieved from a dispensing system for a specified patient for use during a procedure or visit.

(c) When a facility-provided medication is ordered at least 24 hours in advance for surgical procedures and is administered to a patient at the facility, any unused portion of the facility-provided medication must be offered to the patient upon discharge when it is required for continuing treatment.

(d) A facility-provided medication shall be labeled consistent with labeling requirements under the Pharmacy Practice Act.

(e) If the facility-provided medication is used in an
operating room or emergency department setting, the prescriber is responsible for counseling the patient on its proper use and administration and the requirement of pharmacist counseling is waived.

Section 2. Effective date. This Act takes effect July 1, 2022.
Frequently Asked Questions

What is the purpose of this bill?

When performing eye surgery, such as cataract surgery, ophthalmologists may use only one or two eye drops from a medicine container. There are often a number of drops still left in that container. Because regulations governing the ability to dispense the remaining portion of stock-item medications for post-discharge use can be unclear or appear overly burdensome, many facilities do not allow the ophthalmologist to give that container to the patient to take home with them. The ophthalmologist, instead, must write a prescription for the patient and the rest of the medication is tossed. This piece of legislation would resolve this issue. It tells the surgeon that they can give the patient that unused portion of medication - ointments, eye drops, and creams - and the patient can take that home with them.

What type of medications does this bill apply to?

This bill would apply to topical stock-item medications. Topical stock-item medications are unlabeled ointments or drops that a hospital operating room (OR), or Emergency Room (ER), or Ambulatory Surgical Treatment Center (ASTC) staff has on stand-by or is retrieved from a dispensing system for a specified patient for use during a procedure or visit.

How does this bill address public concerns about the cost of medication?

Members of the public often voice concerns about the price of medication. However, right now, even if a patient has not used an entire container of medication while in a medical facility, the patient cannot leave with the unused portion after discharge, even if the patient was charged the full amount for the medication and still needs the medication. Patients may they need to purchase duplicate agents for post-discharge use, increasing patient cost and creating medical waste. This bill would resolve this issue. There are up to 3.8 million cataract surgeries performed in the United States every year and unlabeled topical ointment costs about $25 a tube and topical drops cost about $56 a bottle. These medications are often used in cataract surgeries. So, the estimates are Americans could be saving $95 million dollars on topical ointments and $212.8 million on topical antibiotic drops.

How would this bill improve patient outcomes?

Patients would not have to shoulder the extra burden of going to the pharmacy after surgery to fill a prescription. This bill will better ensure medication compliance and relieve patients of the financial burden of having to choose between medication and other essential items.
(Name of State) PATIENTS SHOULD BE ALLOWED TO SAVE ON MEDICATION COSTS

(STATE SOCIETY) and the American Academy of Ophthalmology announced their support of (Bill #) in the (STATE LEGISLATURE). Introduced by (sponsor), the bill would lower medication costs charged to patients and decrease medical waste.

CITY, STATE—In an effort to help lower medical costs and reduce medical waste for (Name of STATE) patients, (STATE SOCIETY) and the American Academy of Ophthalmology announced their support of (Bill #) in the (STATE LEGISLATURE). Introduced by (sponsor), the bill would help ensure that patients could take home unused topical medications after a procedure is performed in a hospital operating room (OR), Emergency Room (ER), or Ambulatory Surgical Treatment Center (ASTC).

Also known as “Topical Medication Waste Reduction Act,” (Bill #) would allow any unused medication to be offered to the patient upon discharge when required for continuing treatment when a facility-provided topical antibiotic, anti-inflammatory, dilation or glaucoma drop or ointment is ordered at least 24 hours in advance for surgical procedures and the medication is administered to a patient at a hospital, emergency room or ambulatory surgical center. The prescriber would be responsible for counseling the patient on the proper use and administration of the medication. The packaging must also contain all standard labeling, including directions for use.

“Typically, these facility-provided medications are charged to the patient. However, the unused medication often gets discarded when a patient is discharged,” said OPHTHALMOLOGY SOCIETY SPOKESPERSON. “This happens even if the medication is recommended for post-discharge care to aid in the patient’s healing. Patients are then essentially made to purchase duplicate medications for their post-discharge use. This bill is a commonsense step to lower the cost of care, reduce medical waste, and ensure better patient outcomes.”

For example, there are up to 3.8 million cataract surgeries performed in the United States every year. Estimates are Americans could be saving $95 million dollars on topical ointments and $212.8 million on topical antibiotic drops from cataract surgery alone.

This bill is an important step in promoting medical waste reduction and reducing health care costs. It further relieves patients ofshouldering the extra burden of going to the pharmacy after surgery to fill a prescription. This bill will ensure better medication compliance and relieve patients of the financial burden of having to choose between medication and other essential items.

“We encourage all health care professionals and institutions to actively work to reduce medical waste,” said SPOKESPERSON. “Providing patients with topical medications that they have already paid for is an important step in accomplishing this goal.”

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