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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2014

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A N A C T

RELATING TO INSURANCE - ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives McNamara, Valencia, Bennett, and Shekarchi

Date Introduced: February 27, 2014

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness
2 Insurance Policies" is hereby amended by adding thereto the following section:

3 **27-18-82. Cancer patient safety and environmental protection.** -- (a) Purpose. It is the
4 policy of the state of Rhode Island not to permit the introduction of pollutants into the
5 groundwaters and water systems of the state, or otherwise to be discharged in concentrations
6 which are known to be toxic, carcinogenic, mutagenic, or teratogenic as the same are defined in
7 the Rhode Island department of environmental managements groundwater quality rules and the
8 rules and regulations for hazardous waste management.

9 (b) Findings. (1) It is acknowledged by medical experts that bodily wastes of patients
10 undergoing chemotherapy treatment may contain levels of chemicals that are toxic,
11 carcinogenic, mutagenic or teratogenic for a certain period of time, to such an extent that the
12 World Health Organization defines genotoxic waste as chemotherapy drug waste including urine,
13 feces and vomit from patients, which may contain potentially hazardous amounts of the
14 administered cytostatic drugs or of their metabolites, and which should be considered genotoxic
15 for at least forty-eight (48) hours and sometimes up to one week after drug administration.

16 (2) The World Health Organization further states that any discharge of genotoxic waste
17 into the environment could have disastrous ecological consequences. The World Health
18 Organization core principles require that all personnel associated with financing and supporting
19 healthcare activities should provide for the costs of managing healthcare waste. This is the duty of

1 care. The World Health Organization places the responsibility for genotoxic waste on the chief
2 pharmacist and further states that the chief pharmacist also has the special responsibility of
3 ensuring that genotoxic products are used safely, and that genotoxic waste is managed safely.

4 (3) The federal Occupational Safety and Health Administration ("OSHA") is the main
5 federal agency charged with the enforcement of safety and health legislation. OSHA, in concert
6 with the National Institute for Occupational Safety and Health ("NIOSH") and the joint
7 commission on healthcare, an independent, not-for-profit organization that accredits and certifies
8 more than twenty thousand (20,000) healthcare organizations and programs in the United States,
9 stated in a 2011 letter to every hospital in the country that "[s]ome of these drugs have been
10 known to cause cancer, reproductive and developmental problems, allergic reactions, and other
11 adverse effects that can be irreversible even after low-level exposures"; and

12 (4) The American Cancer Society has published a comprehensive list of safety
13 precautions regarding the in-home personal hygiene for individuals undergoing chemotherapy
14 and their families. Therefore, for the protection of both the public health and the environment, the
15 general assembly shall require that standards as set forth pursuant to this section be observed to
16 address this serious safety issue.

17 (c) Chemotherapy precautions following treatment. All physicians, pharmacists, or other
18 health care professionals licensed in the state of Rhode Island authorized to prescribe and/or
19 administer chemotherapy treatment shall:

20 (1) Provide written notice from the prescribing pharmacist to each patient undergoing
21 such treatment as to the hazards posed to patients and their families of extremely hazardous
22 excretions, including, but not limited to, urine, vomit, and feces for a period following treatment
23 as generally determined by the food and drug administration label accompanying said
24 chemotherapy drug or drugs;

25 (2) Provide a sufficient collection method so that providers and patients can safely collect
26 and contain extremely hazardous excretions for a period of time as determined by the United
27 States Food and Drug Administration ("FDA") and referenced on the relevant FDA prescription
28 insert(s); and

29 (3) Provide for safe and proper disposal of said collected extremely hazardous excretions.

30 (d) All expenses incurred as a result of this section shall be paid by Medicare, Medicaid
31 or any private insurance company providing health care insurance and licensed pursuant to this
32 chapter.

33 (e) Receipt of notice from the party administering chemotherapy drugs or their agent is
34 responsible for proper disposal of the hazardous wastes by the prescribing pharmacist or chief

1 pharmacist shall satisfy the responsibility of the prescribing pharmacist hereunder.

2 (f) For the purposes of this section, "extremely hazardous excretions" shall mean any
3 excretion from a patient on a regimen of chemotherapy agents that are antineoplastic or cytotoxic,
4 during the period of administration and the time period referenced in subsection (c) of this
5 section, including, but not limited to, drugs listed in the NIOSH list of antineoplastic and other
6 hazardous drugs, as the same may be updated or amended from time to time.

7 SECTION 2. Chapter 27-18.5 of the General Laws entitled "Individual Health Insurance
8 Coverage" is hereby amended by adding thereto the following section:

9 **27-18.5-11. Cancer patient safety and environmental protection. --**

10 (a) Purpose. It is the policy of the state of Rhode Island not to permit the introduction of
11 pollutants into the groundwaters and water systems of the state, or otherwise to be discharged in
12 concentrations which are known to be toxic, carcinogenic, mutagenic, or teratogenic as the same
13 are defined in the Rhode Island department of environmental management groundwater quality
14 rules and the rules and regulations for hazardous waste management.

15 (b) Findings. (1) It is acknowledged by medical experts that bodily wastes of patients
16 undergoing chemotherapy treatment may contain levels of chemicals that are toxic, carcinogenic,
17 mutagenic or teratogenic for a certain period of time, to such an extent that the World Health
18 Organization defines genotoxic waste as chemotherapy drug waste including urine, feces and
19 vomit from patients, which may contain potentially hazardous amounts of the administered
20 cytostatic drugs or of their metabolites, and which should be considered genotoxic for at least
21 forty-eight (48) hours and sometimes up to one week after drug administration.

22 (2) The World Health Organization further states that any discharge of genotoxic waste
23 into the environment could have disastrous ecological consequences. The World Health
24 Organization core principles require that all personnel associated with financing and supporting
25 healthcare activities should provide for the costs of managing healthcare waste. This is the duty of
26 care. The World Health Organization places the responsibility for genotoxic waste on the chief
27 pharmacist and further states that the chief pharmacist also has the special responsibility of
28 ensuring that genotoxic products are used safely, and that genotoxic waste is managed safely.

29 (3) The federal Occupational Safety and Health Administration ("OSHA") is the main
30 federal agency charged with the enforcement of safety and health legislation. OSHA, in concert
31 with the National Institute for Occupational Safety and Health ("NIOSH") and the joint
32 commission on healthcare, an independent, not-for-profit organization that accredits and certifies
33 more than twenty thousand (20,000) healthcare organizations and programs in the United States,
34 stated in a 2011 letter to every hospital in the country that "[s]ome of these drugs have been

1 known to cause cancer, reproductive and developmental problems, allergic reactions, and other
2 adverse effects that can be irreversible even after low-level exposures"; and

3 (4) The American Cancer Society has published a comprehensive list of safety
4 precautions regarding the in-home personal hygiene for individuals undergoing chemotherapy
5 and their families. Therefore, for the protection of both the public health and the environment, the
6 general assembly shall require that standards are set forth pursuant to this section to address this
7 serious safety issue.

8 (c) Chemotherapy precautions following treatment. All physicians, pharmacists, or other
9 healthcare professionals licensed in the state of Rhode Island authorized to prescribe and/or
10 administer chemotherapy treatment shall:

11 (1) Provide written notice from the prescribing pharmacist to each patient undergoing
12 such treatment as to the hazards posed to patients and their families of extremely hazardous
13 excretions, including, but not limited to, urine, vomit, and feces, for a period following treatment
14 as generally determined by the food and drug administration label accompanying said
15 chemotherapy drug or drugs;

16 (2) Provide a sufficient collection method so that providers and patients can safely collect
17 and contain extremely hazardous excretions for a period of time as determined by the United
18 States Food and Drug Administration ("FDA") and referenced on the relevant FDA prescription
19 insert(s); and

20 (3) Provide for safe and proper disposal of said collected extremely hazardous excretions.

21 (d) All expenses incurred as a result of this section shall be paid by Medicare, Medicaid
22 or any private insurance company providing healthcare insurance and licensed pursuant to this
23 chapter.

24 (e) Receipt of notice from the party administering chemotherapy drugs or their agent
25 responsible for proper disposal of the hazardous wastes by the prescribing pharmacist or chief
26 pharmacist shall satisfy the responsibility of the prescribing pharmacist hereunder.

27 (f) For the purposes of this section, "extremely hazardous excretions" shall mean any
28 excretion from a patient on a regimen of chemotherapy agents that are antineoplastic or cytotoxic,
29 during the period of administration and the time period referenced in subsection (c) of this
30 section, including, but not limited to, drugs listed in the NIOSH list of antineoplastic and other
31 hazardous drugs, as the same may be updated or amended from time to time.

32 SECTION 3. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
33 Corporations" is hereby amended by adding thereto the following section:

34 **27-19-73. Cancer patient safety and environmental protection. --**

1 (a) Purpose. It is the policy of the state of Rhode Island not to permit the introduction of
2 pollutants into the groundwaters and water systems of the state, or otherwise to be discharged in
3 concentrations which are known to be toxic, carcinogenic, mutagenic, or teratogenic as the same
4 are defined in the Rhode Island department of environmental management groundwater quality
5 rules and the rules and regulations for hazardous waste management.

6 (b) Findings. (1) It is acknowledged by medical experts that bodily wastes of patients
7 undergoing chemotherapy treatment may contain levels of chemicals that are toxic, carcinogenic,
8 mutagenic or teratogenic for a certain period of time, to such an extent that the World Health
9 Organization defines genotoxic waste as chemotherapy drug waste including urine, feces and
10 vomit from patients, which may contain potentially hazardous amounts of the administered
11 cytostatic drugs or of their metabolites, and which should be considered genotoxic for at least
12 forty-eight (48) hours and sometimes up to one week after drug administration.

13 (2) The World Health Organization further states that any discharge of genotoxic waste
14 into the environment could have disastrous ecological consequences. The World Health
15 Organization core principles require that all personnel associated with financing and supporting
16 healthcare activities should provide for the costs of managing healthcare waste. This is the duty of
17 care. The world health organization places the responsibility for genotoxic waste on the chief
18 pharmacist and further states that the chief pharmacist also has the special responsibility of
19 ensuring that genotoxic products are used safely, and that genotoxic waste is managed safely.

20 (3) The federal Occupational Safety and Health Administration ("OSHA") is the main
21 federal agency charged with the enforcement of safety and health legislation. OSHA, in concert
22 with the National Institute for Occupational Safety and Health ("NIOSH") and the joint
23 commission on healthcare, an independent, not-for-profit organization that accredits and certifies
24 more than twenty thousand (20,000) healthcare organizations and programs in the United States,
25 stated in a 2011 letter to every hospital in the country that "[s]ome of these drugs have been
26 known to cause cancer, reproductive and developmental problems, allergic reactions, and other
27 adverse effects that can be irreversible even after low-level exposures"; and

28 (4) The American Cancer Society has published a comprehensive list of safety
29 precautions regarding the in-home personal hygiene for individuals undergoing chemotherapy
30 and their families. Therefore, for the protection of both the public health and the environment, the
31 general assembly shall require that standards as set forth pursuant to this section be observed to
32 address this serious safety issue.

33 (c) Chemotherapy precautions following treatment. All physicians, pharmacists, or other
34 healthcare professionals licensed in the state of Rhode Island authorized to prescribe and/or

1 administer chemotherapy treatment shall:

2 (1) Provide written notice from the prescribing pharmacist to each patient undergoing
3 such treatment as to the hazards posed to patients and their families of extremely hazardous
4 excretions, including, but not limited to, urine, vomit, and feces, for a period following treatment
5 as generally determined by the food and drug administration label accompanying said
6 chemotherapy drug or drugs;

7 (2) Provide a sufficient collection method so that providers and patients can safely collect
8 and contain extremely hazardous excretions for a period of time as determined by the United
9 States Food and Drug Administration ("FDA") and referenced on the relevant FDA prescription
10 insert(s); and

11 (3) Provide for safe and proper disposal of said collected extremely hazardous excretions.

12 (d) All expenses incurred as a result of this section shall be paid by Medicare, Medicaid
13 or any private insurance company providing healthcare insurance and licensed pursuant to this
14 chapter.

15 (e) Receipt of notice from the party administering chemotherapy drugs or their agent
16 responsible for proper disposal of the hazardous wastes by the prescribing pharmacist or chief
17 pharmacist shall satisfy the responsibility of the prescribing pharmacist hereunder.

18 (f) For the purposes of this section, "extremely hazardous excretions" shall mean any
19 excretion from a patient on a regimen of chemotherapy agents that are antineoplastic or cytotoxic,
20 during the period of administration and the time period referenced in subsection (c) of this
21 section, including, but not limited to, drugs listed in the NIOSH list of antineoplastic and other
22 hazardous drugs, as the same may be updated or amended from time to time.

23 SECTION 4. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
24 Corporations" is hereby amended by adding thereto the following section:

25 **27-20-69. Cancer patient safety and environmental protection.--**

26 (a) Purpose. It is the policy of the state of Rhode Island not to permit the introduction of
27 pollutants into the groundwaters and water systems of the state, or otherwise to be discharged in
28 concentrations which are known to be toxic, carcinogenic, mutagenic, or teratogenic as the same
29 are defined in the Rhode Island department of environmental management groundwater quality
30 rules and the rules and regulations for hazardous waste management.

31 (b) Findings. (1) It is acknowledged by medical experts that bodily wastes of patients
32 undergoing chemotherapy treatment may contain levels of chemicals that are toxic, carcinogenic,
33 mutagenic or teratogenic for a certain period of time, to such an extent that the World Health
34 Organization defines genotoxic waste as chemotherapy drug waste including urine, feces and

1 vomit from patients, which may contain potentially hazardous amounts of the administered
2 cytostatic drugs or of their metabolites, and which should be considered genotoxic for at least
3 forty-eight (48) hours and sometimes up to one week after drug administration.

4 (2) The World Health Organization further states that any discharge of genotoxic waste
5 into the environment could have disastrous ecological consequences. The World Health
6 Organization core principles require that all personnel associated with financing and supporting
7 healthcare activities should provide for the costs of managing healthcare waste. This is the duty of
8 care. The world health organization places the responsibility for genotoxic waste on the chief
9 pharmacist and further states that the chief pharmacist also has the special responsibility of
10 ensuring that genotoxic products are used safely, and that genotoxic waste is managed safely.

11 (3) The federal Occupational Safety and Health Administration ("OSHA") is the main
12 federal agency charged with the enforcement of safety and health legislation. OSHA, in concert
13 with the National Institute for Occupational Safety and Health ("NIOSH") and the joint
14 commission on healthcare, an independent, not-for-profit organization that accredits and certifies
15 more than twenty thousand (20,000) healthcare organizations and programs in the United States,
16 stated in a 2011 letter to every hospital in the country that "[s]ome of these drugs have been
17 known to cause cancer, reproductive and developmental problems, allergic reactions, and other
18 adverse effects that can be irreversible even after low-level exposures"; and

19 (4) The American Cancer Society has published a comprehensive list of safety
20 precautions regarding the in-home personal hygiene for individuals undergoing chemotherapy
21 and their families. Therefore, for the protection of both the public health and the environment, the
22 general assembly shall require that standards as set forth pursuant to this section be observed to
23 address this serious safety issue.

24 (c) Chemotherapy precautions following treatment. All physicians, pharmacists, or other
25 healthcare professionals licensed in the state of Rhode Island authorized to prescribe and/or
26 administer chemotherapy treatment shall:

27 (1) Provide written notice from the prescribing pharmacist to each patient undergoing
28 such treatment as to the hazards posed to patients and their families of extremely hazardous
29 excretions, including, but not limited to, urine, vomit, and feces, for a period following treatment
30 as generally determined by the food and drug administration label accompanying said
31 chemotherapy drug or drugs;

32 (2) Provide a sufficient collection method so that providers and patients can safely collect
33 and contain extremely hazardous excretions for a period of time as determined by the United
34 States Food and Drug Administration ("FDA") and referenced on the relevant FDA prescription

1 insert(s); and

2 (3) Provide for safe and proper disposal of said collected extremely hazardous excretions.

3 (d) All expenses incurred as a result of this section shall be paid by Medicare, Medicaid
4 or any private insurance company providing healthcare insurance and licensed pursuant to this
5 chapter.

6 (e) Receipt of notice from the party administering chemotherapy drugs or their agent
7 responsible for proper disposal of the hazardous wastes by the prescribing pharmacist or chief
8 pharmacist shall satisfy the responsibility of the prescribing pharmacist hereunder.

9 (f) For the purposes of this section, "extremely hazardous excretions" shall mean any
10 excretion from a patient on a regimen of chemotherapy agents that are antineoplastic or cytotoxic,
11 during the period of administration and the time period referenced in subsection (c) of this
12 section, including, but not limited to, drugs listed in the NIOSH list of antineoplastic and other
13 hazardous drugs, as the same may be updated or amended from time to time.

14 SECTION 5. Chapter 27-41 of the General Laws entitled "Health Maintenance
15 Organizations" is hereby amended by adding thereto the following section:

16 **27-41-86. Cancer patient safety and environmental protection.--**

17 (a) Purpose. It is the policy of the state of Rhode Island not to permit the introduction of
18 pollutants into the groundwaters and water systems of the state, or otherwise to be discharged in
19 concentrations which are known to be toxic, carcinogenic, mutagenic, or teratogenic as the same
20 are defined in the Rhode Island department of environmental management groundwater quality
21 rules and the rules and regulations for hazardous waste management.

22 (b) Findings. (1) It is acknowledged by medical experts that bodily wastes of patients
23 undergoing chemotherapy treatment may contain levels of chemicals that are toxic, carcinogenic,
24 mutagenic or teratogenic for a certain period of time, to such an extent that the World Health
25 Organization defines genotoxic waste as chemotherapy drug waste including urine, feces and
26 vomit from patients, which may contain potentially hazardous amounts of the administered
27 cytostatic drugs or of their metabolites, and which should be considered genotoxic for at least
28 forty-eight (48) hours and sometimes up to one week after drug administration.

29 (2) The World Health Organization further states that any discharge of genotoxic waste
30 into the environment could have disastrous ecological consequences. The World Health
31 Organization core principles require that all personnel associated with financing and supporting
32 healthcare activities should provide for the costs of managing healthcare waste. This is the duty of
33 care. The world health organization places the responsibility for genotoxic waste on the chief
34 pharmacist and further states that the chief pharmacist also has the special responsibility of

1 ensuring that genotoxic products are used safely, and that genotoxic waste is managed safely.

2 (3) The federal Occupational Safety and Health Administration ("OSHA") is the main
3 federal agency charged with the enforcement of safety and health legislation. OSHA, in concert
4 with the National Institute for Occupational Safety and Health ("NIOSH") and the joint
5 commission on healthcare, an independent, not-for-profit organization that accredits and certifies
6 more than twenty thousand (20,000) healthcare organizations and programs in the United States,
7 stated in a 2011 letter to every hospital in the country that "[s]ome of these drugs have been
8 known to cause cancer, reproductive and developmental problems, allergic reactions, and other
9 adverse effects that can be irreversible even after low-level exposures"; and

10 (4) The American Cancer Society has published a comprehensive list of safety
11 precautions regarding the in-home personal hygiene for individuals undergoing chemotherapy
12 and their families. Therefore, for the protection of both the public health and the environment, the
13 general assembly shall require that standards as set forth pursuant to this section be observed to
14 address this serious safety issue.

15 (c) Chemotherapy precautions following treatment. All physicians, pharmacists, or other
16 healthcare professionals licensed in the state of Rhode Island authorized to prescribe and/or
17 administer chemotherapy treatment shall:

18 (1) Provide written notice from the prescribing pharmacist to each patient undergoing
19 such treatment as to the hazards posed to patients and their families of extremely hazardous
20 excretions, including, but not limited to, urine, vomit, and feces, for a period following treatment
21 as generally determined by the food and drug administration label accompanying said
22 chemotherapy drug or drugs;

23 (2) Provide a sufficient collection method so that providers and patients can safely collect
24 and contain extremely hazardous excretions for a period of time as determined by the United
25 States Food and Drug Administration ("FDA") and referenced on the relevant FDA prescription
26 insert(s); and

27 (3) Provide for safe and proper disposal of said collected extremely hazardous excretions.

28 (d) All expenses incurred as a result of this section shall be paid by Medicare, Medicaid
29 or any private insurance company providing healthcare insurance and licensed pursuant to this
30 chapter.

31 (e) Receipt of notice from the party administering chemotherapy drugs or their agent
32 responsible for proper disposal of the hazardous wastes by the prescribing pharmacist or chief
33 pharmacist shall satisfy the responsibility of the prescribing pharmacist hereunder.

34 (f) For the purposes of this section, "extremely hazardous excretions" shall mean any

1 [excretion from a patient on a regimen of chemotherapy agents that are antineoplastic or cytotoxic,](#)
2 [during the period of administration and the time period referenced in subsection \(c\) of this](#)
3 [section, including, but not limited to, drugs listed in the NIOSH list of Antineoplastic and other](#)
4 [hazardous drugs, as the same may be updated or amended from time to time.](#)

5 SECTION 6. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

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RELATING TO INSURANCE - ACCIDENT AND SICKNESS INSURANCE POLICIES

1 This act would require that protections related to the disposal of extremely hazardous
2 wastes generated by the use of toxic, carcinogenic, mutagenic, or teratogenic chemotherapy drugs
3 be implemented by pharmacists, physicians, healthcare providers, and insurers in the state of
4 Rhode Island.

5 This act would take effect upon passage.

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