

**SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION**

S.F. No. 4063

(SENATE AUTHORS: MANN and Abeler)

DATE	D-PG	OFFICIAL STATUS
03/02/2026	6459	Introduction and first reading Referred to Health and Human Services
03/09/2026	6580	Author added Abeler HF substituted in committee SF4063

1.1 A bill for an act

1.2 relating to health; modifying medication repository program procedures; amending

1.3 Minnesota Statutes 2024, section 151.555, subdivision 7.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2024, section 151.555, subdivision 7, is amended to read:

1.6 Subd. 7. **Standards and procedures for inspecting and storing donated drugs and**

1.7 **supplies.** (a) A pharmacist or authorized practitioner who is employed by or under contract

1.8 with the central repository or a local repository shall inspect all donated drugs and supplies

1.9 before the drug or supply is dispensed to determine, to the extent reasonably possible in the

1.10 professional judgment of the pharmacist or practitioner, that the drug or supply is not

1.11 adulterated or misbranded, has not been tampered with, is safe and suitable for dispensing,

1.12 has not been subject to a recall, and meets the requirements for donation. If a local repository

1.13 receives drugs and supplies from the central repository, the local repository does not need

1.14 to reinspect the drugs and supplies.

1.15 (b) The central repository and local repositories shall store donated drugs and supplies

1.16 in a secure storage area under environmental conditions appropriate for the drug or supply

1.17 being stored. Donated drugs and supplies may not be stored with nondonated inventory.

1.18 (c) The central repository and local repositories shall dispose of all drugs and medical

1.19 supplies that are not suitable for donation in compliance with applicable federal and state

1.20 statutes, regulations, and rules concerning hazardous waste.

1.21 (d) In the event that controlled substances or drugs that can only be dispensed to a patient

1.22 registered with the drug's manufacturer are shipped or delivered to a central or local repository

2.1 for donation, the shipment delivery must be documented by the repository and returned
2.2 immediately to the donor or the donor's representative that provided the drugs.

2.3 (e) Each repository must develop drug and medical supply recall policies and procedures.
2.4 If a repository receives a recall notification, the repository shall destroy all of the drug or
2.5 medical supply in its inventory that is the subject of the recall and complete a record of
2.6 destruction form in accordance with paragraph (f). If a drug or medical supply that is the
2.7 subject of a Class I or Class II recall has been dispensed, the repository shall immediately
2.8 notify the recipient of the recalled drug or medical supply. A drug that potentially is subject
2.9 to a recall need not be destroyed if its packaging bears a lot number and that lot of the drug
2.10 is not subject to the recall. If no lot number is on the drug's packaging, it must be destroyed.

2.11 (f) A record of destruction of accepted donated drugs and supplies that are not dispensed
2.12 under subdivision 8, ~~are subject to a recall under paragraph (e), or are not suitable for~~
2.13 ~~donation~~ or are subject to a recall under paragraph (e) shall be maintained by the repository
2.14 for at least two years. ~~For each drug or supply destroyed,~~ The record shall include the
2.15 following information:

2.16 (1) the date of destruction;

2.17 (2) the name, strength, and quantity of the drug destroyed; and

2.18 (3) the name of the person or firm that destroyed the drug.

2.19 No other record of destruction is required.