



The Take Away



Elm Plaza Pharmacy's drug disposal program helps the environment and attracts new business

By Chris Linville

A few years ago, when Steve Hiemenz decided to start a medication take back program at his pharmacy, his primary motivation was to help protect the environment.

"It was the right thing to do," says Hiemenz, co-owner and manager of Elm Plaza Pharmacy in Hinsdale, Ill. "It was kind of a hot button topic for people when there was a lot of talk about how to dispose your medications in an environmentally safe way, instead of just dumping them in the water."

However, when he noticed that a significant amount of the items being returned were unused mail order medications, it quickly opened his eyes.



Elm Plaza Pharmacy owner Steve Hiemenz (right, with Purdue Pharma's Steve Seid) was the recipient of the 2011 NCPA Foundation Catalyst Grant Award for Innovative Practice, presented at the NCPA Annual Convention and Trade Exposition in Nashville.

"I've always wondered who was it that decided 90 days is an efficient way to give people their medications," Hiemenz says with more than a hint of sarcasm. "I mean, did someone actually go out and do a study and determine that 90 days is the way to do it? Why don't we just give people five years worth of medication every time they fill it? Wouldn't that be more efficient?"

To explain his point, Hiemenz recounts a story about one of his patients whose medications were sent to his home by the Veteran's Administration.

"The VA just delivers a huge volume of medications, and he just had boxes and boxes, with duplicate therapies," he says. "Finally, his wife brought them in and said, 'I have no idea what to do with this stuff.' He wasn't using any of it. They were just sending it to them and he was just stacking it up."

Ideally, Hiemenz can provide customers with peace of mind by taking excess medications out of their hands and disposing them properly. He says there are added benefits as well.

"It seemed like it would be a way for us, without spending a lot of marketing dollars, to get people to know where our pharmacy was, and to remember what was in the pharmacy when they came to drop off

their medications," Hiemenz says. "Hopefully they'll say, 'That's right, I remember they had compression stockings,' and come back. The program has been a good fit for marketing and being a good community member."

REVIVING A PHARMACY

Born in Aurora, Ill., and raised in suburban Chicago, Hiemenz's path to pharmacy is familiar. He wanted to be in the medical profession, and a friend of his family owned an independent pharmacy, so he gravitated in that direction.

After graduating from the University of Iowa College of Pharmacy in 1986 (he received an MBA from Keller Graduate School in 1992), Hiemenz spent some 15 years in the chain environment. In 2001, an opportunity to change course presented itself. His wife is also a pharmacist, and she was working for a hospital health system that owned an outpatient clinic pharmacy that was slated to be closed.

"The place was just kind of sitting there, and in my opinion the hospital had not really given it much of a chance to succeed," he says. "But it's in a good location and I knew the physicians who practiced in the building, and I had some knowledge about what had been tried thus far, and hadn't worked."

The hospital owned the pharmacy for about six months, and then essentially decided to shut it down and dismantle it. The office park management company that owned the property was more than happy to see someone who was willing to pump new life into the pharmacy.

"When I first walked in and saw the place, it had about 15 or 20 total OTC items," Hiemenz says. "And they were behind lock and key with glass shelves covering them. So anybody who wanted an OTC item had to ask the pharmacist to come out and unlock the cabinet and grab it out of there for them. So it wasn't conducive to any OTC purchases whatsoever."

"So one of the first things that we did was fully stock the available shelving and then added more shelving to expand the OTC offerings. Then we started looking at ways to differentiate our pharmacy from other places. One of the first things we did was concentrate on adherence packaging. We brought in Medicine-on-Time® and started to market that to individual patients living at home. We also went around to some of the local

PHOTOGRAPHY: MICHAEL DEFILIPPO

assisted living centers and ended up signing a couple of those.”

When asked about his daily responsibilities, Hiemenz say, “They are typical of an independent owner: everything.” The pharmacy, located in a suburb about 20 miles west of Chicago, has a 400-square-foot OTC area, 800 square feet for prescription dispensing, and a private consultation room. The staff consists of three part-time technicians, two part-time pharmacists, and Hiemenz. Along with its adherence program, Elm Plaza also offers compounding services, immunizations, and a variety of drug therapy management services ranging from diabetes coaching to lipid management comprehensive medication management programs.

“We try to do the most we can in the space that we have,” he says.

Hiemenz, the recipient of the 2011 NCPA Foundation Catalyst Grant Award for Innovative Practice, says that after more than a decade of ownership, the independent life suits him just fine.

“It just kind of took me awhile to realize there’s a better way to do this [compared to working for a chain], and a different way to do this, and to get up the guts to do it,” he says. “Now, I look back and say I wish I would have made that jump 15 years earlier, but at the time it never seemed right. But now I’m elated that I did make the change.”

DRUG DISPOSAL

Elm Plaza Pharmacy’s take back program started not long after NCPA rolled out its nationwide campaign in 2009. To assist members with their efforts, in 2010 NCPA entered a partnership with Sharps Compliance Corp., based in Houston. Association members are eligible for discounted services for the Sharps TakeAway Environmental Return System. They can receive a discount of almost 20 percent plus free shipping on the Sharps system. Information is available at the “Dispose My Meds” section of the NCPA website at www.ncpanet.org.

Hiemenz says he hasn’t spent any money promoting the program, but a few articles in area newspapers provided some publicity and helped create awareness, at least enough to get some queries from local residents looking for ways to dispose of their medications.

“One woman found out by looking us up on the

DISPOSE MY MEDS GOING STRONG SINCE 2009

Entering its fourth year, NCPA continues its successful Dispose My Meds Program, to help patients safely get rid of drugs. To date, more than 1,400 pharmacies are participating nationwide and have collected more than 70,000 pounds of unwanted, non-controlled medications. If regulations are changed and pharmacies can voluntarily receive returned controlled substances, many of our members have indicated they will volunteer.

Participating pharmacy owners such as Steve Hiemenz have frequently sent to pictures to NCPA when large or especially expensive amounts of drugs from mail order were brought in by customers. In September 2011, NCPA began to organize those pictures into a presentation, “Waste Not, Want Not” to highlight how this waste contributes to the rising costs of health care. The presentation, available at www.ncpanet.org has been presented to the U.S. Congress. To submit photos with the most effective message, please include as much detail and description as possible about the product name and quantity, including approximate cost if possible. Make sure any patient identifiable information is blacked out and send to disposemymeds@ncpanet.org.

NCPA members are eligible for discounted services for the Sharps TakeAway Environmental Return System. Members can receive a discount of almost 20 percent plus free shipping on the Sharps system. Participating pharmacies can either offer their patients’ postage paid envelopes or collect unused medicines in 10- or 20-gallon collection boxes in a secure location within the pharmacy. Under the system guidelines, once the envelope is used or the box is full, it should be returned immediately via the U.S. Postal Service or UPS for disposal.

Along with the discount, participating pharmacies get free access to customizable flyers, counter cards, bag stuffers, and posters to promote their take-back programs. More information about NCPA’s disposal program is available on the “Dispose My Meds” section of the NCPA website at www.ncpanet.org. More information on Sharps is available at www.sharpsinc.com.



Here is a sampling of some of the medications collected by Elm Plaza Pharmacy through its takeback program.

Internet,” he says. “She thanked us for offering this service. We went through her bag and we made sure the contents were appropriate to send back. She was very appreciative of somebody going out of their way to do something good for the environment. We hope she’ll think of us the next time she needs something.”

Hiemenz says that the pharmacy may have 40-50 people coming through daily, and maybe one person will return medications, which he considers a good ratio for a program that he doesn’t really publicize. Typically he’ll fill up one large bin in a month. The staff will review everything that customers are bringing to the pharmacy to make sure it is appropriate to dispose in the bin, which is kept in the back of the pharmacy.

“We have kept it very simple,” Hiemenz says. “Patients bring in their medications, and we look through them to make sure there are no controlled substances or high volume liquids [more than 4 ounces] and drop the rest in the disposal box. It’s just so easy. You buy yourself a box and just keep it over in the corner of the pharmacy. Once you fill it up, you slap the label on it and hand it to the UPS guy. Most pharmacies have a UPS delivery at least once or twice a day. I just wonder why more places don’t do it.”

In terms of content, Hiemenz says “We get all kinds of different mixes of things people bring us. Most of the time they are bringing four or five or six bottles, but

then occasionally you’ll have the person come in with multiple boxes of medication.”

When that happens, Hiemenz says they often take photos to document the amount of unused medications being returned to the pharmacy. He estimates that about 75–80 percent of the medications that he sees are from a large quantity that was filled at either a mail order or a 90-day supply location, and then the medication was changed.

NEEDLESS WASTE

Hiemenz says that the dollar value of unused medications dropped off at Elm Plaza Pharmacy is “astounding.” PBMs often shrug off stories about large volumes of medications being returned as “anecdotal,” Hiemenz says. His opinion is a bit different.

“The more patients I talk to about their unused medications, the more I realize that the ‘satisfied mail order customer’ is what is truly anecdotal,” Hiemenz says. “I had one prescription for 136 vials of Migranal dropped off. The mom said her daughter had used only two vials before finding it was ineffective. When the mother called the mail order pharmacy to find out why they sent so many vials she was told, ‘The doctor didn’t write the prescription clearly.’ I am confident that the employer who paid the \$14,845 AWP did not consider it to be ‘anecdotal.’”



Hiemenz said only two of these bottles of mail order Migranal (136 vials total) were used because they were ineffective. The AWP was \$14,845.

Hiemenz was puzzled why the physician was not called to clarify the confusing prescription order.

“That’s certainly what we would do here,” he says. “At some point you have to step back when filling a prescription like that and say, ‘Hold on a second here, is this even reasonable?’ In my opinion it’s not reasonable to send somebody 136 vials of Migranal. But they did it, and I’m sure the employer just paid it, because they had no way of going back and looking and auditing that sort of prescription.”

Hiemenz says that priorities in health care have added to the waste problem.

“We seem to be really set on looking at drugs only on the supply side,” he says. “How can we lower the cost of what we spend? We’ve not really maximized the use of those medications, and that type of a system [mail order] doesn’t allow you the option of getting to know the patient and knowing what it is they need and what they don’t need, and intervening in those situations. It’s just an order filling process, and that’s not really going to get us anywhere.”

When patients have questions about mail order, ironically they will usually ask a community pharmacist, Hiemenz says.

“That’s really what ends up happening,” he says. “You got into this business to help people and you want

to be there for them, but on the other hand, you can’t continue to be the answer for a mail order company that refuses to deal with their own patients. A bigger concern is when the patient doesn’t know there’s a problem and the mail order just keeps sending them another 90 days.” We often find ourselves recommending a comprehensive medication review so we can help them understand the boxes of medications that they have.

MOVING FORWARD

Although Hiemenz has adopted a low-key approach to the program to this point, he’s thinking about ways to market the service and give it a larger profile. Advertising is clearly an option, but he also thinks a more comprehensive effort to accurately reflect what is brought to the pharmacy will drive home an important message.

“If we can possibly quantify about how much medication we have sent back, I think we can track how many of these boxes we have purchased, and get an idea about how much these things weigh every time they go out,” he says. “Then we can estimate how much medication we’ve kept out of the water and out of the landfills, and just kind of play up our part in the community.”

For now, Hiemenz is just happy that Elm Plaza Pharmacy can be of service to its customers.

“People are extremely grateful to have an option to responsibly dispose of old medications, and we have picked up some new customers who didn’t know we were here before,” he says. “People are generally excited to know there are still some independent pharmacies in suburban Chicago. Many thought that their only options were large chain pharmacies.” **ap**

Chris Linville is managing editor of *America’s Pharmacist*.

