

Rules Advisory Committee Meeting

Agenda & Minutes

Date: 1/7/2025

Time: 9:30am

Place: Webinar

Present: (See attached List)

BACKGROUND

1. Welcome and Introductions - 10 min (Bailey Weissenfels)
2. Bailey Weissenfels to read the following:

The overarching purpose of the Rules Advisory Committee (RAC) is to seek public input to the maximum extent possible before giving notice of intent to adopt a rule. The RAC must represent the interests of persons and communities likely to be affected by the rule. RAC's allow the public and community stakeholders to provide input and suggestions during the development of new rules, amendment or repeal of existing rules, and the fiscal impact of the proposed rulemaking.

- Webinar etiquette (to minimize background sounds, please MUTE your computer (or phone) when not speaking, **DO NOT PUT YOUR PHONE ON HOLD IF BACKGROUND MUSIC WILL OCCUR**). Please identify yourself when you speak.

Rule	Topic	Discussion/To Do
333-056 Definitions relating to Infectious Waste Bailey Weissenfels	<p>Erin: Given Stephen feedback on how to complete this. May need more than the definition. Fine, since covering substance of what the change is in the law, where we place the changes in the rules.</p> <p>Creating a separate rule, now adding definition in the definition section.</p> <p>Def rule, purpose of applying the new statute, this is the definition you apply. Adopting rule that when you are applying the law this is the definition.</p> <p>All in rule these are the definition, adopt another rule and repeats statute and says the same thing. We are going to apply the rule. What are the definitions for?</p> <p>Opinion on adopting a rule pointing at the def. Entities prefer the def in the rule.</p>	

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	<p>Marissa Meyers: Support the difference of color and handling the waste on what color would be the safest from distinguishing the color from other waste.</p> <p>Chad: We need to define an actual color so it doesn't get confused with other waste strains and doesn't allow hospitals to designate their own colors. Blue has been used universally on disposable pharmaceutical containers, blue with white lids. Incorporating the blue would be beneficial</p> <p>Cara: agrees that blue is common color for non-hazardous waste collection. We don't need to be specific, just doesn't need to be red. A lot of containers in the market and sharps will accept them commingled. White with a blue lid and blue with white lid, don't restrict the color.</p> <p>Sardar: resonate with others saying. Defined color and the fact that biohazard symbol on container, discussion with compliance with ADA, and that's the reason, resonates closely with biohazards colors. Other shades of red or browns might work. Sardar is at compliance at ground level, biohazard on the label. Keeping it close to an existing color would be great.</p> <p>Kristin: commingaled bluerecycling, can be confusing. Material is not in the standard waste stream, color on the brighter side and does end up in the waste stream can see the clearly that it isn't in the mix. No suggestion on the color but has concerns for her employees.</p> <p>Sarah: to not define a color is very risky. The right direction to move forward and have it well defined.</p> <p>Cara: The current rule doesn't talk about the regulation doesn't talk about color. Weird to discuss the waste stream that everyone or hospital is collecting things in that manner. Rule is about, if they want to put waste pharmaceuticals in sharp waste, it doesn't have to be red or some warning expressing what is in there.</p>	
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	<p>Katie: in agreement with Cara and hesitate to put a color in rule and want to adhere to clear labeling. If we define a color in Oregon, did other states have other colors? The term distinctive and would not feel comfortable with using another color other than red.</p> <p>Kristin: Helpful to understand is distinctive being brown being an option and black. Also like garbage bags. How to clearly understand which color could be 'distinctive' if colors could be used if we didn't decide on a color.</p> <p>Chad: Thousand of containers already and going to multiple states. Cream clear color containers and same color type lids. Concern is, changing containers will be a massive fiscal burden on themselves. Don't define the color of the container itself or distinctive marking other than red would work.</p> <p>Definition: distinct color that are exclusionary.</p> <p>Jason and Wendy: OHSU overregulate for purpose of making it easier for 20+ and 10+ nurses in the waste streams in OR and clinics. Trying to make things as easy as possible. This rule won't affect what hospitals do. We are over regulating pharmaceuticals and placing them in black bin and easier and less headaches to regards what is going in the right bins or not. Understanding from the rule, agree what Chad was saying and Kristin. Avoid headaches and even if it passes as a can, Wendy and Pharmacy, wouldn't be for creating another colored bin in the industry.</p> <p>Jason in chat: agrees that we should define what color we shouldn't use.</p> <p>Gary: pharmaceuticals won't have the funds to follow this rule. Inherent safety: puncture resistant and doesn't matter on the color. Would like to hear input from the collector's side.</p>	
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	<p>Sardar: Why do we have to choose a color now? Stephen and Bailey specify what distinct color in addition with other colors. Wouldn't want to be these colors.</p> <p>Equity Portion: Christian Assist more critically about equity and who isn't at this discussion. Consider verbiage and what to consider.</p> <p>Chad: Consider how it affects vendors that supply sharp containers to hospitals for single use disposables. Impact them fiscally and generators would burden them. Labeling would be easiest than choosing a distinct color.</p> <p>Kristin: By combining sharps and pharmaceuticals and processed separately and much more expensive. Customers will still have the choice on if they want to combine the materials.</p> <p>Cara: Choice to put those two waste streams together. Sharps go into red, pharma go to black or red. Stericycle has been successful and one less container in the patient room. Sharp waste and treated in autoclave and not expensive as incineration typically what happens</p> <p>Fiscal and Economic Impact: Courtini: Cost of impact and cost of compliance. Actual containers that exist, not creating anything, would just have to buy and retrain staff. Takes time money and energy, cost for providers world (especially smaller practices). Financially difficult. More a mandate and opportunity. Place where service costs more, things are changing can't work or make that change.</p> <p>Chad: touch base on thousand of containers out. Impact will be significant and would be a higher impact of cost and would be limited to services. New containers and excess surplus would greatly reduce services until we get containers and the generators. Point out that in section- must be incinerated if commingled.</p>	
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	<p>Erin Wiliams: clarify what is the fiscal impact, talking about the fiscal impact of the rule. The rule specifies that it must be purple, what is the impact going to be versus the cost to compile with SB 139 or sticker. Cost of sticker, impact what the rule. Helpful to understand how much the bill will fiscally impact. Clairyfy by the rule.</p> <p>Chad: replacing existing containers, quite costly. 10s of thousands and change of color. If there is a sticker or decal change, \$0.50 a label but replace the containers and go to a different color, significant change and replace. Could work out a better number. (if we were to choose a specific color the fiscal impact would be higher).</p> <p>Cara: Agrees with Chad and the fiscal cost. Specific color, color option being open, doesn't change anything or impact anyone.</p> <p>Cara and Chad: small business who moves forward with commingling sharps and pharma will have to pay the incineration fee. It is still an option, can keep them separate how they always have been. Small business will continue to keep sharps and pharma split. Nursing homes would be impacted by the cost of labeling if we don't choose a distinct color.</p> <p>Abigail: cost of waste is set by jurisdiction, waste going to be incinerated vs waste that will be autoclave. This new incineration stream, how will the cost of waste go up for business? Can petition the cost is going to increase and can pass that along with rule change (tariffs).</p> <p>Cara: no specificity of color and business as usual for everyone.</p> <p>Yoojin Kim: Concern in sharps in containers, highest risk, would agree with Jason and tight process at OHSU with black bins.</p>	
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	<p>Chad: If we identify the decals, as far as risk goes, will need to have biohazard symbols and have a color on the flourscent decal and distinct markings with sign 'commingled sharps' less restrictive is better. Each hospital system to choose their own colors. Be specific on the labels and not the containers.</p> <p>Adjourned: 10:31am 1/7/2026</p>	
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Participants:

First	Last	Title	Organization Name
Erin	Williams	Counsel for OHA ACDP section	DOJ
Sarah	Wickenhagen		OSBN
Abigail	Herrera		Oregon Metero
Amy	Down-Maul		Hospital Association of Oregon
Bailey	Weissenfels		OHA-ACDP
Chad	Plata		Trilogy MedWste
Howard	Chiou	Medical Director	OHA- ACDP
Courtni	Dresser		Oregon Medical Association
Harjinder	Sardar	Biosafety Officer	OHSU
Jason	Righter		OHSU
Katie	Harris		Hospital Association of Oregon
Kristin	Leichner		Pride Disposal Company
Marissa	Meyer		DEQ
Gary	Runyon		BOP
Cara	Simaga		Stericycle
Christian	Torres		OHA
Wendy	Campbell Parco		OSBN
Kim	Yoojin		

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