ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS) STD. 399 (REV. 12/2013)

ECONOMIC IMPACT STATEMENT

A CONTRACTOR OF THE PROPERTY O	CONTACT PERSON	EMAIL ADDRESS	TELEPHONE NUMBER
CalRecycle	Jason.Smyth@calrecycle.ca.gov	Jason Smyth	(916) 341-6676
DESCRIPTIVE TITLE FROM NOTICE REGISTER OR FORM 400	11.		NOTICE FILE NUMBER
Pharmaceutical and Sharps Recovery St	ewardship Program Regulations		Z
A. ESTIMATED PRIVATE SECTOR COST IMPAC	Include calculations and assumptions	in the rulemaking record.	
. Check the appropriate box(es) below to indicate	whether this regulation:		
x a. Impacts business and/or employees	e. Imposes reporting require	ements	
⋈ b. Impacts small businesses	f. Imposes prescriptive inste	ad of performance	
$\overline{\times}$ c. Impacts jobs or occupations	g. Impacts individuals		
d. Impacts California competitiveness	h. None of the above (Explai	n below):	
	through g is checked, complete this checked, complete the Fiscal Impact		
CalRecycle	enconen, comprete the 1 isem Impuel	Silicment us appropriate	
. The(Agency/Department)	estimates that the economic impa	ct of this regulation (which i	ncludes the fiscal impact) is:
Below \$10 million			
Between \$10 and \$25 million			
Between \$25 and \$50 million			
	over \$50 million, agencies are required to sub	mit a Standardizad Populato	nulmpact Assassment
	nt Code Section 11346.3(c)]	miit a <u>standardizea kegaiatoi</u>	y Impact Assessment
	6.600		
3. Enter the total number of businesses impacted:	6,600		
Describe the types of businesses (Include nonpr	often Primarily pharmacies and ma	anufacturers of drugs	and charge Coo Appondix
	onis). Thirtially pharmacies and me	indiacturers of drugs a	nd sharps, see Appendix.
Enter the number or percentage of total businesses impacted that are small businesses:	90%		
4. Enter the number of businesses that will be crea	ted: 5 to 10 eliminated:	None	
Now non profit stowardship o	vannizations and missellen cours	thoug Coo Ammondia	
Explain: New non-profit stewardship o	rganizations and miscellaneous o	uners. See Appendix.	
5. Indicate the geographic extent of impacts:	Statewide		*
	Local or regional (List areas): Excludes	existing local program	s. See Appendix.
	Local of regional (List areas):		Section 2010
i. Enter the number of jobs created: ~40	and eliminated: 0 to 40		
	40 - 11:1-11:1		es Europa, and a support Europa (Company) and a support of the sup
Describe the types of jobs or occupations impact	ted: ~40 additional jobs added in	the pharmaceutical in	dustry and state governmen
See Appendix.			
. Will the regulation affect the ability of California other states by making it more costly to produce		NO	
		(2)	
If YES, explain briefly:			1/2
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ECONOMIC IMPACT STATEMENT (CONTINUED)

В.	ESTIMATED COSTS Include calculations and assumptions in the rulemaking record.			
1.	What are the total statewide dollar costs that businesses and individuals may incur to comply with this regulation over its lifetime? \$ 21.1 M annually			
	a. Initial costs for a small business: \$ Minimal Annual ongoing costs: \$ Minimal Years: Ongoing			
	b. Initial costs for a typical business: \$ 20k Pharma, 66k Sharps Annual ongoing costs: \$ 18k P., 61k Sharps Years: Ongoing			
	c. Initial costs for an individual: \$ 0.25 P., \$10.75 Sharps Annual ongoing costs: \$ 0.22 P., \$13 Sharps Years: Ongoing			
	d. Describe other economic costs that may occur: See Appendix for an explanation of cost estimates.			
2.	If multiple industries are impacted, enter the share of total costs for each industry: Initial cost for sharps: \$13.2 M; ongoing for sharps: \$12.2 M.			
	Initial cost for pharma: \$9.8 M; ongoing for pharma: \$8.9 M.			
	If the regulation imposes reporting requirements, enter the annual costs a typical business may incur to comply with these requirements. Include the dollar costs to do programming, record keeping, reporting, and other paperwork, whether or not the paperwork must be submitted. \$ See Appendix.			
4.	Will this regulation directly impact housing costs? YES X NO			
	If YES, enter the annual dollar cost per housing unit: \$			
	Number of units:			
5.	Are there comparable Federal regulations? YES X NO			
	Explain the need for State regulation given the existence or absence of Federal regulations: No Federal regulations are comparable to the			
	proposed regulations, which are necessary to clarify procedures for the Department to enforce SB 212.			
Ĥ	Enter any additional costs to businesses and/or individuals that may be due to State - Federal differences: N/A			
c.	ESTIMATED BENEFITS Estimation of the dollar value of benefits is not specifically required by rulemaking law, but encouraged.			
1.	Briefly summarize the benefits of the regulation, which may include among others, the health and welfare of California residents, worker safety and the State's environment: The regulation will reduce the in-home and environ-			
	mental impacts of unused pharmaceuticals and used sharps. This will reduce the public agency costs of managing			
	expired, excess, and waste pharmaceuticals and sharps, and lead to several public health benefits. See Appendix.			
2.	Are the benefits the result of: 🔀 specific statutory requirements, or 🔲 goals developed by the agency based on broad statutory authority?			
	Explain: The Department is developing the regulation as required per SB 212.			
3.	What are the total statewide benefits from this regulation over its lifetime? \$ Qualitative. See Appendix.			
4.	Briefly describe any expansion of businesses currently doing business within the State of California that would result from this regulation: Medical waste			
	haulers, reverse-distributors, and disposal facilities may see increased demand, as will businesses that produce sharps			
	containers and pharmaceutical kiosks, and some ad agencies, legal firms, and other administrative service providers.			
D.	ALTERNATIVES TO THE REGULATION Include calculations and assumptions in the rulemaking record. Estimation of the dollar value of benefits is not specifically required by rulemaking law, but encouraged.			
1.	List alternatives considered and describe them below. If no alternatives were considered, explain why not: Alt. 1: Require all purchasers of sharps			
	to be given a container and mail-back materials for the same quantity bought, resulting in greater cost. Alt. 2: Lessen			
	accessibility standards for education and outreach materials, lowering cost but also consumer participation. See Appendix			
	DAGE 6			

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			Partition and partition			CAN ATTEREST TO SECURITION OF THE SECURITION OF	
2.	Summarize the t	total statewide	costs and benefits	from this regulation	and each alternative considered:		
	Regulation:	Benefit: \$	5.0 M/year	Cost: \$ 21.1 M/	/year		
	Alternative 1:	Benefit: \$	5.0 M/year	Cost: \$ 114 M/	'year		
	Alternative 2:	Benefit: \$	5.0 M/year	Cost: \$ 20.3 M/	/year		
3.				evant to a compariso			
	of estimated co	osts and benef	fits for this regulati	on or alternatives:	See Appendix.		
4.	regulation man	dates the use	of specific technol	ogies or equipment	rds as an alternative, if a t, or prescribes specific lower compliance costs?	⊠ NO	
	Explain: This	regulation o	does not mand	ate the use of sp	pecific equipment.		
	1						
Ε.	MAJOR REGUI	LATIONS Incl	lude calculations a	nd assumptions in t	the rulemaking record.		
		California	Environmental I	Protection Agency	y (Cal/EPA) boards, offices and d	lepartments are re	quired to
					d Safety Code section 57005). Oth	ierwise, skip to E4	
1,	Will the estimat	ed costs of this	s regulation to Calif		prises exceed \$10 million? X	☐ NO	
				11757	S, complete E2. and E3 If NO, skip to E4		
2.	Briefly describe	each alternativ	ve, or combination	of alternatives, for w	hich a cost-effectiveness analysis was p	performed:	
	Alternative 1:	F	Require sharps	retailers to prov	vide a sharps container for eacl	h corresponding	sharps sale.
	Alternative 2:	Require l	ower level of A	DA compliance	for education & outreach mat	erials produced	by Stewardship Org.
	(Attach addition	al pages for otl	her alternatives)				
,	Fautha van dati			والمرابع المرابع		#Southern Transfer	
٥.	Regulation: 1		21.1 M/ye		mated total cost and overall cost-effect effectiveness ratio: \$ 5,000/ton	iveness ratio:	
	Alternative 1: T		114 M/ye		effectiveness ratio: \$ 30,000/ton		
	Alternative 2: T	_	20.3 M/ye		effectiveness ratio: \$ 5,400/ton	*	
,							
4.	exceeding \$50	million in any	12-month period be stimated to be fully	etween the date the	c impact to business enterprises and in- major regulation is estimated to be file	ed with the Secretary	of State through 12 months
	YES [⊠ NO					
					t Assessment (SRIA) as specified in all Statement of Reasons.		
5.	Briefly describe	the following:					
	The increase or	decrease of in	vestment in the Sta	te: There may	be some investment in medical	al waste hauling	services and disposal
	facilities, alt	hough the	state already ha	as sufficient infr	rastructure capacity to manage	e the additional	waste collected.
	The incentive for	or innovation i	n products, materia	ls or processes:	No incentive for inno	ovation has beer	identified.
					s to the health, safety, and welfare of Ca ife, among any other benefits identified		See Part C.1.

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FISCAL IMPACT STATEMENT

	onal expenditures in the current State Fiscal \ ant to Section 6 of Article XIII B of the Californ			*
\$				
a. F	unding provided in			
	Budget Act of	or Chapter	, Statutes of	
b. F	unding will be requested in the Governor's Bu	dget Act of		
		Fiscal Year:		
2. Additi (Pursu	onal expenditures in the current State Fiscal Y ant to Section 6 of Article XIII B of the Californ	ear which are NOT reimbursable ia Constitution and Sections 175	by the State. (Approximate) 00 et seq. of the Government Code)	k
\$				
	ason(s) this regulation is not reimbursable and purplements the Federal mandate contained in	rovide the appropriate informatio	n:	
	*	-		
b. Ir	nplements the court mandate set forth by the	e		Court.
	Case of:		vs	
). <u>—</u>	D. (15)	te expressed in their approval of		
d. Is	D. (15)			
	Date of Election:sued only in response to a specific request fro	m affected local entity(s).		
	Date of Election: sued only in response to a specific request fro Local entity(s) affected:	m affected local entity(s).		Code;
e. W	Date of Election: sued only in response to a specific request fro Local entity(s) affected:	m affected local entity(s). c. from: of the		
e. W	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section:	m affected local entity(s). c. from: of the al government which will, at a mi	inimum, offset any additional costs	
☐ e. W ☐ f. P	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section:	m affected local entity(s). c. from: of the al government which will, at a mi	inimum, offset any additional costs	
☐ e. W ☐ f. P	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section: rovides for savings to each affected unit of locareates, eliminates, or changes the penalty for a	m affected local entity(s). c. from: of the al government which will, at a mi	inimum, offset any additional costs	
☐ e. W ☐ f. Pi ☐ g. C 3. Annua \$	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section: rovides for savings to each affected unit of loc reates, eliminates, or changes the penalty for a	m affected local entity(s). c. from: of the al government which will, at a minute or infraction contain	inimum, offset any additional costs	to each;
☐ e. W ☐ f. P ☐ g. C 3. Annua \$ 4. No add	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section: rovides for savings to each affected unit of loc reates, eliminates, or changes the penalty for a	m affected local entity(s). :. from: of the al government which will, at a mile new crime or infraction contain	inimum, offset any additional costs	to each;
g. C 3. Annua \$ 4. No add	Date of Election: sued only in response to a specific request fro Local entity(s) affected: fill be fully financed from the fees, revenue, et Authorized by Section: rovides for savings to each affected unit of loc reates, eliminates, or changes the penalty for a Il Savings. (approximate)	m affected local entity(s). c. from: of the al government which will, at a min new crime or infraction contain only technical, non-substantive or any local entity or program.	inimum, offset any additional costs ed in	to each; ulations.

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FISCAL IMPACT STATEMENT (CONTINUED)

B. FISCAL EFFECT ON STATE GOVERNMENT Indicate appropriate boxes 1 through 4 and attach calculation year and two subsequent Fiscal Years.	s and assumptions of fiscal impact for the current
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
\$ \$1.5 M. See Appendix.	
It is anticipated that State agencies will:	
a. Absorb these additional costs within their existing budgets and resources.	
b. Increase the currently authorized budget level for theFiscal Year	
2. Savings in the current State Fiscal Year. (Approximate)	
\$	
3. No fiscal impact exists. This regulation does not affect any State agency or program.	
4. Other. Explain	
C. FISCAL EFFECT ON FEDERAL FUNDING OF STATE PROGRAMS Indicate appropriate boxes 1 through 4 impact for the current year and two subsequent Fiscal Years.	and attach calculations and assumptions of fiscal
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
\$	
2. Savings in the current State Fiscal Year. (Approximate)	
\$	
3. No fiscal impact exists. This regulation does not affect any federally funded State agency or program.	
4. Other. Explain	
	1
FISCAL OFFICER SIGNATURE	DATE
a Sgarti	10/15/19
The signature attests that the agency has completed the STD. 399 according to the instructions in SA	
the impacts of the proposed rulemaking. State boards, offices, or departments not under an Agency highest ranking official in the organization.	Secretary must have the form signed by the
AGENCY SECRETARY Lamber 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DATE 11.22.19
Finance approval and signature is required when SAM sections 6601-6616 require completion of Fi	scal Impact Statement in the STD 300
DEPARTMENT OF FINANCE PROGRAM BUDGET MANAGER	DATE