



the campaign for
environmentally responsible
health care

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Testimony of Bill Ravanesi September 26, 2007

**Joint Public Health Committee
of the Massachusetts Legislature on the Reprocessing of Medical Devices**

(SB 1338/HB 2233)

Mr. Chairman, members of the Committee:

My name is Bill Ravanesi, I'm the Boston Regional Director for Health Care Without Harm (HCWH).

HCWH is an international not for profit coalition that has grown to include more than 445 organizations in 55 countries. This coalition includes hospitals & healthcare systems, healthcare professionals, public health groups, environmental health professionals and physician groups who are concerned with the environmental impact of the healthcare sector. Together we are working to change health care purchasing and waste disposal practices that pollute the environment, contribute to disease, and fill-up our limited landfill capacity.

Over the last 10 years my work has focused on pollution prevention, waste minimization, and the elimination of mercury from this sector. I come to you today as an environmental health professional, and on behalf of Health Care Without Harm and its members both in Boston and across the country, to urge this committee not to support H2233/S1338. In an effort of full disclosure we have no financial interest in the reprocessing or OEM market.

We oppose this proposed legislation on two grounds:

First, from an environmental perspective:

Back on June 24, 1998 HCWH assisted in brokering a landmark Memorandum of Understanding (MOU) between the US EPA and the American Hospital Association (AHA) that put forth a number of action steps for hospitals in America. Two of the top 10 priorities of the MOU are medical waste reduction. The MOU goals that were set out in 1998 were to reduce medical waste by achieving a 33% reduction in total waste volume in all hospitals by 2005 and an overall goal of achieving a 50% reduction by 2010. I'm happy to report that the 2005 goal has been met. The healthcare sector in Massachusetts and across the country has stepped up to the plate and has comprehensive plans for medical waste reduction. Having the choice of purchasing reprocessed devices has been one important strategy for waste minimization and cost containment for hospitals. I might add the AHA is on record of supporting the reprocessing of medical devices. H2233/S1338 bill, if enacted, would fly in the face of the US EPA /AHA MOU by increasing medical waste volume going to landfills. And, if this bill passes in Massachusetts it surely will be replicated in many other states with the potential of increasing the medical waste volume by over 900 tons nationally per year.

Now, for the 63 hospitals in the Commonwealth that take advantage of reprocessing of medical devices including the largest healthcare system in the Commonwealth, Partners Healthcare System, their decision to use reprocessed devices has diverted 26 tons of medical waste from landfills, including landfills located in Massachusetts.

Secondly, for a financial perspective:

As you are aware, the major academic medical teaching hospitals in the state are just beginning to climb out of the red and into the black. Enactment of this bill will terminate the average 50% savings vs cost of buying new devices that Massachusetts' hospitals now rely upon when purchasing medical devices. Finally, the amount that waste reprocessing pulls out of "disposal" is bagged as regulated medical waste and cost the hospitals 5x more per pound than municipal solid waste disposal, and is potentially hazardous to people and the environment. Passage of this bill will only add to the already high cost of healthcare and add additional stress to Massachusetts landfills.

Thank you for this opportunity to present our comments and I would be happy to answer any questions.

Bill Ravanese