

March 4, 2019

The Honorable Representative Salinas Chair, Oregon House Committee on Health Honorable Members of the Oregon House Committee on Health Oregon State Capitol Salem, OR

RE: House Bill 2935 - Mandatory Availability of Prescription Readers

Representative Salinas and Members of the House Committee on Health:

On behalf of the members of the National Association of Chain Drug Stores (NACDS) operating in the State of Oregon, I am writing in opposition to the mandate placed on brick and mortar pharmacies only, to provide prescription readers to those patients who may be visually challenged. The members of NACDS operate 491 store fronts, employ over 51,000 full and part-time employees, and pay over \$39.6 million in state taxes.

<u>Pharmacy dispensing of drugs with labels accessible to the blind and visually</u> <u>impaired</u>

- Pharmacists are committed to ensuring that patients are appropriately counseled on proper medication use and are provided the information necessary to take their prescriptions as directed. Depending on individual patient needs, the way in which pharmacists accomplish this can vary. Some chain pharmacies serve visually impaired patients by providing written directions for proper medication use on separate paper in large, bold font if this is appropriate for a particular patient. Others spend extra time with patients and/or patient caregivers to come up with individualized ways of providing patients with the information necessary to take their medications safely and appropriately. We would caution the members of the Oregon legislature enacting any mandates as to how medication information is conveyed to visually impaired patients, as doing so would be ill-advised and could unintentionally hamper pharmacists' efforts in this regard.
- While well-intentioned, legislation stipulating the use of audible readers for prescriptions dispensed to visually impaired patients would be problematic considering the current technologies available.
- Although audio prescription instructions devices that attach to prescription vials and provide a verbal recording of the directions patients should following when taking their medications are currently available on the market, these technologies have proven to be unreliable.
- Additionally, the cost of providing these devices involves an initial investment of over \$1,400 per pharmacy, in addition to the additional labeling costs. Mandating this technology and requiring each and every pharmacy to absorb the cost would be hard-felt, especially considering that Medicaid reimburses pharmacies for dispensed

medications based on a cost-based reimbursement methodology that only covers the costs of acquiring and dispensing drugs to beneficiaries.

In working with our members, I have been made aware that our pharmacies provide special services to those seeing impaired individuals, but based on need in a particular pharmacy, not chain wide.

As stated above, not only does Medicaid not reimburse pharmacies for these additional services, neither do other third-party payers. The cost of setting up these systems in each pharmacy (chain and independent) state-wide would be financially taxing.

We respectfully ask that in lieu of making this a mandate for **all** pharmacies, you allow pharmacies to assess the needs of their patients and provide the services they deem necessary.

Sincerely, vicken

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