

HB 2935 Senate Testimony

Thank you Chair Monnes Anderson and members of the committee.

For the record, my name is Teresa Alonso Leon, and I am the Representative for House District 22, which incorporates Woodburn, through the North part of Salem. I'm here before you in support of HB 2935.

HB 2935 is simple bill to help clarify and standardize in Oregon statute how we will observe federal laws that protect, and support are vulnerable populations.

There are two federal laws which have provisions to secure accommodations for the nations print disabled population. The American with Disabilities Act (ADA) of 1990 and the 2012 Food and Drug Administration Safety and Innovation Act (FDASIA).

ADA outlines what pharmacies are required to provide for their patients, and the Safety and Innovation Act outlines how they can do it."⁴ Unfortunately, because of the complexity of these laws some pharmacies are not complying.

This bill was requested by the community to put into statute that pharmacies must notify a person who is print disabled about accommodations available to them and ensure that a pharmacy has those accommodations available. This means that all pharmacies must comply except for correctional institutions.

We have been in touch with providers of this service and the cost of implementing a comprehensive system. Through continuous conversation we learned \$200 a year would pay for a specialized printer and the software to encode the prescription label chips with the patients' necessary information. This lease breaks down to

\$16.66/month, slightly more than a subscription for amazon prime. The readers themselves are given to the patients for free, and this \$200/ year pays for technical support as well as security for the software.

The most expensive aspect of this bill is the labels, which costs \$2/label, and they only sell rolls of 250 to ensure a pharmacy is fully equipped with enough labels for the year.

Of course, there are various routes that pharmacies are welcomed to pursue instead. WE are not mandating where they must obtain these devices or which devices they must use, they can shop around for what makes sense for their pharmacy and there is various technology currently out in the market to choose from.

Colleagues, what we are mandating is that pharmacies make these accommodations available to our print disabled communities who urgently need these tools.

This is an access issue, and I urge your aye vote and a do pass recommendation for HB 2935.

What is a prescription reader:

We have someone that will be sharing their prescription reader during their testimony. However, we have also submitted a document that goes over available prescription readers on the market, and delivery methods for pharmacies to provide accessible prescription drug container labels

How much would this cost:

This would not be funded by the legislature; the costs are being absorbed by the pharmacies.

Does this have to be a law:

Yes, there has been ample time for pharmacies to adopt the recommendations that came out of the workgroup of The Food and Drug Administration Safety and Innovation Act which was passed in 2012, the recommendations have been accessible since 2013.¹ We have an issue with compliance in our State, and Nevada recognized/addressed the issue in theirs.

How many folks would be affected by this:

According to information gathered by the National Federation for the Blind there are **7,675,600** non-institutionalized, male or female, ages sixteen through seventy-five +, all races, regardless of ethnicity, with all education levels in the United States reported to have a visual disability in 2016, the State distribution **reported Oregon to have 104,500** individuals with a visual disability in 2016.⁶

What is print disabled:

Print disabilities include visual impairments, learning disabilities, or physical disabilities that prevent the ability to access printed materials.

What about mom and pop pharmacies:

There are 1338 retail pharmacies in OR (per the Board of Pharmacy). Approximately 100 of these pharmacies are independently owned per Joe S. at the Board

We have kept our pop and mom pharmacies in mind, as we do understand it takes time for folks to implement new systems, we are willing to extend the operative date if folks feel it is necessary. However, I do want to mention that the Board of Pharmacy has shared with us that they do have enforcement discretion, in order to help pharmacies with compliance. Our intention is not to set unrealistic standards, and we have agencies whose function is to ensure the success of the laws we pass, and I have full confidence in pharmacies and the Board of Pharmacies that this is within their means.

1. Yanchulis, Dave. "Working Group Recommendations ." *ADAAG*, 10 July 2013, www.access-board.gov/guidelines-and-standards/health-care/about-prescription-drug-container-labels/working-group-recommendations. Information of the workgroup created under the Food and Drug Administration Safety and Innovation Act (Pub. L. 112-144, 126 Stat. 993).
2. U.S. Department of Justice Civil Rights Division Coordination and Review Section. "Americans with Disabilities Act (ADA)." *Home*, US Department of Education (ED), 25 Sept. 2018, www2.ed.gov/about/offices/list/ocr/docs/hq9805.html. Details of the ADA regulations
3. "The Americans with Disabilities Act Questions and Answers." *ADA National Network*, 28 Feb. 2019, adata.org/publication/ADA-faq-booklet. ADA Regulations FAQ
4. "Our Rights and Their Responsibilities Access to Prescription Label Information." *National Federation of the Blind*, nfb.org/images/nfb/publications/bm/bm14/bm1401/bm140110.htm. An article talking about the intended interaction between ADA laws and the Food and Drug Administration Safety and Innovation Act.
5. "ScriptAbility Pharmacy Resources." *ScriptAbility*, www.scriptability.com/pharmacy/. Information on services available for pharmacies to implement accessible prescriptions, and contact info to learn more.

6. *Blindness Statistics*. National Federation of the Blind, nfb.org/resources/blindness-statistics. National and state distribution of our vision impaired population from 2016 data. Website page last updated on January 2019.