

**SB 698 A -A4 STAFF MEASURE SUMMARY**

**House Committee On Health Care**

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**Prepared By:** Oliver Droppers, LPRO Analyst

**Meeting Dates:** 5/9, 5/16

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**WHAT THE MEASURE DOES:**

Requires State Board of Pharmacy (Board) to adopt rules regarding provision of prescription drug labels or inserts in both English and a language the patient can understand. Specifies that rules must determine to which pharmacies the requirements apply. Specifies minimum languages in which labels and informational inserts must be available. Specifies that rules must establish a list of statements for prescription drug labels that must be available in languages other than English. Limits liability for actions of third parties. Requires the Board to consult with the Oregon Health Authority on rules regarding availability of translation services. Makes labeling requirements effective on January 1, 2021. Takes effect on 91st day following adjournment sine die.

**ISSUES DISCUSSED:**

- Ability for individuals with a prescription to comprehend medication, dosage, and pharmacist' instructions
- Availability of technology and software to translate prescription labels in languages other than English
- Prescription labels in dual languages, English and requested language
- Costs to pharmacies to comply with provisions in the bill; particularly for independent pharmacies
- Adverse health outcomes attributed to incorrect usage of prescription medications due to language barriers

**EFFECT OF AMENDMENT:**

-A4 Requires a pharmacy to dispense a prescription with a label in English and other language as requested, and with an informational insert, if authorized by the Board. Removes listing of languages. Directs the Board to determine: (1) which pharmacies the label or informational insert requirements apply to, (2) which prescription drugs it is appropriate to include an information insert, and (3) at least 14 languages other than English for labels and informational inserts to be available based on specified data sources, and (4) reassess and update the set of languages at least once every 10 years. Exempts institutional drug outlets from label and insert requirements.

*REVENUE: May have revenue impact, but no statement yet issued.*

*FISCAL: May have fiscal impact, but no statement yet issued.*

**BACKGROUND:**

Under Title VI of the Civil Rights Act of 1964, all health care providers and recipients of federal financial assistance, including Medicare and Medicaid, are required to take reasonable steps to ensure meaningful access to their programs by individuals with limited English proficiency (LEP). According to the United State Census Bureau's American Community Survey (ACS) 2009-2013, 6.21 percent of Oregonians over five years of age are LEP. LEP individuals are more likely than fluent English speakers to experience medication errors due to an inability to read or understand labels that provide instruction on how and when to take prescription medications. Currently, four states have specific laws that require pharmacies to provide services in languages other than English: California, New York, North Carolina, and Texas.

Senate Bill 698-A requires the State Board of Pharmacy to adopt rules regarding provision of prescription drug labels and inserts in both English and a language the patient can understand.

*1st Chamber vote (Senate): Ayes, 23; Nays, 7.*