

HB 2935 Testimony

Chair Salinas, Vice-Chair Hayden, Vice-Chair Nosse, 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, Gervais, and the North part of Salem. As someone who cares deeply about ensuring every Oregonians have access to affordable healthcare, I'm here before you in support of HB 2935.

American with Disabilities Act of 1990 states how public entities (pharmacies are outlined as public entities) must provide public accommodations. "Public accommodations must be provided to individuals with vision or hearing impairments or other individuals with disabilities so that they can have an equal opportunity to participate or benefit."² The part that confuses some folks is that the ADA also states, "unless an undue burden would result."⁴ In 2012 The Food and Drug Administration Safety and Innovation Act also known as the (FDASIA) was passed.¹ A provision of the Act, Section 904, directed for a work group comprised of consumers and industry advocates to detail best practices in making information on prescription drug container labels more accessible.¹ Similarly, to the ADA regulations this law has language that basically state the best practices established by the working group "are not mandatory." However, these two pieces of legislation together are supposed to help ensure accessibility. "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, due to this language some pharmacies are not complying, and this is why we need HB 2935.

This bill would put into Oregon statute that pharmacies must notify a person who is print disabled that accommodations are available to them and ensure that a pharmacy has those accommodations in the form of a prescription reader and compatible labeling. In addition, we have amended the language to remove exemptions for drugs dispensed by mail order, non-profit organizations, and government agencies.

Nevada acknowledge this issue in their state and passed SB 131 in 2017 which is now law (NRS 639.28015). Let us also make sure there's no confusion here in Oregon on how we should best serve our vision impaired community.

This is an access issue, and I urge you to support passing HB 2935.

Q&A

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. Nevada's SB 131 passed, and in their fiscal notes it is stated that: There is no effect on Local Government and the State. -The bill text has been uploaded for you all to reference.

How much does a prescription reader cost:

This information varies, but we will have folks testifying regards this information. However, there's a submitted PDF on information provided by Envisions that breakdown various options and costs.

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.

More information:

There are various supporting documents that have been submitted for you all to reference at your convenience.

Sources:

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.