## Information on ScriptAbility accessible prescription labels

Dear Representative Teresa Alonso Leon,

Thank you for your questions regarding ScriptAbility accessible prescription labels. Here are answers to common questions and comments I've shared with other legislators. I've also included a few resources that might be helpful. Please feel free to contact me if you have further questions.

- En-Vision America worked very closely with the Veterans Administration to get a product that would help blinded veterans. Expanding to the public has been a source of great excitement for us. So many people are in need. It is not uncommon for our customer service team to point people to resources beyond our own products because so many newly blinded people are at a loss on what services are available. This is one of the reasons why passing a law that would require pharmacists to ask about visual or print impairment and the need for an accessible label is so vital.
- There are a few other accessible labeling solutions available from other companies. You might want to look at Walgreen's "Talking Pill Reminder" and the Optaphonic system by AccessaMed. I think there are several other RFID labeling systems that pharmacies could make work, but they don't have built in security and software integration features that ScriptAbility has. As far as I know we are the only ones that are fully compliant with the US Access Board's "Best Practices for Making Prescription Drug Container Label Information Accessible to Persons Who are Blind or Visually-Impaired or Who are Elderly"
- Nevada used the language of "prescription readers" but other states that are proposing legislation this year are talking about "audible prescription label" or other language since it is label not the reader that needs to be mandated. (We send ScripTalk readers to patients at no cost and we have smartphone options as well). Hopefully adding an additional label will seem less daunting than providing auxiliary equipment.
- In regard to cost for our products/service we have tiered pricing which is designed to give the greatest discounts to those pharmacies that are willing to provide the service at any location upon request, right where the patient needs it most, close to home. So that would mean mail orders and pharmacies using a central fill model would pay more. We have both purchase and lease options available. We also have a Braille printer available. Though every pharmacy's needs are different, here are some general cost estimates:
  - Lease Option: (\$200/year + cost of labels)

- \$200/year for ScriptAbility software & support, ScripTalk programmer and ScriptView printer.
- \$500 for a roll of 250 ScripTalk RFID labels
- \$110 for ScriptView starter kit with labels, clips and bands (enough for approx. 300 labels). Obviously how long those supplies last will be based on the number of consumers needing the service and the number of prescriptions they have. It is not uncommon for us to see a blind individual with 5-20 prescriptions. (Imagine managing 20 prescriptions and being blind?!)
  - Pharmacies can opt out of having one of the printer/programmers and that will save them the cost of the consumables, but the lease rate will stay the same. That ends up being \$16.60 per month just slightly more than I pay for a subscription to Amazon Prime. The real cost lies in the labels.
  - The most common comment we get is that they would like to purchase in smaller quantities. But we've crunched the numbers and the average pharmacy has 5 users with 3-5 prescriptions so a roll of 250 ScripTalk labels should last a year. Offering and maintaining inventory of multiple quantities just increases work and overhead, driving up the price of labels more.
- Purchase Option (1 work station/location): (\$200/year + cost of labels + cost of programmer/printers) \$200/year ScriptAbility software/support agreement
  - \$500-\$1500 purchase equipment three options: ScripTalk programmer, ScriptView printer, and/or Braille Printer
  - \$500 for a roll of 250 ScripTalk RFID labels
  - \$110 for ScriptView starter kit with labels, clips and bands (enough for approx. 300 labels).
  - Purchase Option (multiple work stations/locations): I don't have any numbers for large mail orders or corporate agreements. The costs tend to be greater than above because we offer the biggest savings to those pharmacies that choose to implement on the local level, based upon request, where the consumers need it most.
  - Accessible/accessory labels can solve other issues as well: ScriptView labels can be used for controlled substance safety labeling. In addition to large print warnings they have a QR code link to a video explanation of the warnings and precautions for that controlled drug. I could see putting these two pieces of prescription labeling legislation together because, while everyone needs these warnings, those who can't read the warnings are much more at risk for addiction and overdose. ScriptAbility labels allow for more information to be provided, for instance, why the medication was prescribed. This would answer the issue being brought forward in HB 2781. ScriptAbility also has a translation feature which can address the language issues presented in SB 698.

- Federal Legislation/Agency Resources:
  - ADA and Effective Communication: According to the American's with Disabilities Act, pharmacies are required to provide aids to effective communication between the pharmacist and patient so long as it does not present a financial burden to the pharmacy. ADA regulations prohibit pharmacies from charging the patient for accommodations <u>https://www.ada.gov/effective-comm.htm</u>
  - United States Access Board Best Practices: The United States Access Board published a list of the Best Practices to help pharmacists to accommodate patients with visual impairments. They include large print, Braille, digital voice or text to speech recorders, RFID devices, smart devices and computers as delivery methods. <u>https://www.access-board.gov/guidelines-and-standards/health-</u> care/about-prescription-drug-container-labels/working-group-recommendations
  - Patient Protection and Affordable Care Act: Section 1557 of the Patient Protection and Affordable Care Act further clarified the prohibition of discrimination on the basis of disability in health programs and activities for pharmacies that accept Medicare. <u>https://www.hhs.gov/civil-rights/forindividuals/section-1557</u>
  - Government Accountability Office Report: A 2016 Government Accountability Office report found that unawareness was one of the most cited reasons pharmacies were non-compliant with the Best Practices. http://www.gao.gov/products/GAO-17-115

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