



NATIONAL FEDERATION
OF THE BLIND
MARYLAND

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Subject

Support for HB456 / SB 940 Accessible Prescription Labels

From

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To:

House Government Operations Committee

Senate Finance Committee

Problem

Blind and print disabled individuals are not able to read the dosage instructions and information that is attached to the bottle or box on prescription medications. Blind people have traditionally tried to solve this problem by using a rubber band, writing their own label, or creating some other system to keep track of the information. These techniques fail especially when the medications increase and the information on the prescription also increases.

Proposed Action

The House Health and Government Operations and the Senate Finance Committee should enact legislation that requires pharmacies to issue an accessible prescription label to any blind,

print disabled, or elderly person who asks for such a label in a timely manner. The label must contain all the requirements by state statute and federal law, including cautions and warnings, and any information available to sighted individuals reading the printed label. The pharmacist must honor the customer's preference for audio, Braille, or large print, and must provide the label with no additional charge to the customer.

Background

Print prescription drug labels are traditionally affixed to medication bottles and boxes that contain medication names, dosage instructions, cautions, and other important information about the medication. Blind and print disabled people cannot read the traditional prescription label that is attached to the bottle or box. For decades, blind people have had to depend on another person to tell them the dosage and instructions for each medication that they take. This method of acquiring such information causes a loss of confidentiality and independence and can place the individual in danger because their memory fails, or they may become confused. The blind person may care for a spouse, a parent, or a child and may put the other person's life in danger.

Technology now exists in the market that can provide prescription information to the print disabled individual since 1996. Blind people began to ask pharmacies to provide the technology. In 2013, the U.S. Access Board published its best practices for pharmacies to deliver the service. Many pharmacies, both small and large, have adopted these practices. Unfortunately, legislation is necessary because too many pharmacies do not provide the labels. In addition, it is unreasonable for an individual to have to find a pharmacy that does provide accessible labels that may not be convenient or to which transportation is costly.

Federal law clearly mandates that pharmacies should provide accessible labels to their customers. The Americans with Disabilities Act (1990) states that pharmacies are required to provide aids of communication between the pharmacist and customer. In 2010, the Patient Protection and Affordable Care Act (final rule 2016) clarifies the prohibition of discrimination on the basis of disability in health programs and activities for pharmacies that accept Medicare. In 2012, the FDA Safety and Innovation Act required the US Access Board to devise a set of best practices for pharmacies to refer to. These federal laws are not enough.

Advantages of the Legislation

Blind and print disabled individuals have a right to the information given in the prescription.

In today's world, the information can be easily provided to the print disabled individual in an alternative format. The formats of information are easily known and available.

Providing accessible labels to blind and print disabled individuals will not be a hardship on the pharmacy. Pharmacies are important resources to the community, providing such information will increase their value to the particular community as well as to society. Some pharmacies have already demonstrated the ease of providing accessible labels.

State laws provide more specific directions to pharmacies on how to make their labels accessible. Federal laws were a good beginning, but state laws offer coverage for more patients. States with such legislation include Nevada, Oregon, Tennessee as well as the Commonwealth of Puerto Rico.

Passage of this law will end the inequity of healthcare that pharmacies provide to blind and elderly persons in Maryland. Some people are told that they must get their accessible labels from mail order services. They are told that the local pharmacies cannot provide that service whereas other people are told that the mail service cannot provide it and they must get it from the local pharmacy. Passage of this bill will end this confusion, pharmacists will know exactly what to do, and blind and print disabled people will no longer be frustrated by trying to educate the pharmacist.

Conclusion

Blind and print disabled individuals need the same information as their sighted peers. In the 21st century, the technology exists for them to receive it. Some pharmacies have already adopted the business model and provide accessible labels to their customers who need it. The House Health and Government Operations Committee and Senate Finance Committee should enact legislation so that all pharmacies provide accessible information to any blind, print disabled or elderly person who needs it and end the inequity of care that some pharmacists offer this population. We urge you to give HB456 a favorable report.