

HOUSE No. 2449

The Commonwealth of Massachusetts

PRESENTED BY:

Diana DiZoglio, (BY REQUEST)

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to accessible prescription labeling.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Brian J. Coppola</i>	<i>400 Merrimack Street, Methuen, MA 01844</i>	<i>1/6/2017</i>
<i>Tackey Chan</i>	<i>2nd Norfolk</i>	

HOUSE No. 2449

By Ms. DiZoglio of Methuen (by request), a petition (accompanied by bill, House, No. 2449) of Brian J. Coppola and Tackey Chan relative to printing information on prescription medication labels in a format accessible to print challenged persons. Public Health.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 1927 OF 2015-2016.]

The Commonwealth of Massachusetts

In the One Hundred and Ninetieth General Court
(2017-2018)

An Act relative to accessible prescription labeling.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 Section 1. For the purposes of this act, agencies that serve cross disability populations
2 receiving state funding for their programs under the Massachusetts State Funding under the
3 state's fiscal budget, cross disability agencies shall include, but, not be limited to: The
4 Massachusetts Commission for the Blind, otherwise known as MCB, the Massachusetts
5 Commission on Rehabilitation otherwise known as MCR, the Massachusetts Commission On the
6 Developmentally Disabled otherwise known as MCD, The Massachusetts Commission on The
7 Deaf and Hard of Hearing, otherwise known as MCDH, Independent Living Centers, otherwise
8 known as LIC's and any agency or organization that receives state funding, whether directly
9 through the state budget or indirectly in conjunction with payment by the Commonwealth of
10 Massachusetts to train or rehabilitate people with disabilities.

Section 2. Print Reading Challenges shall include, but, not be limited to blindness, legal blindness, low vision, dyslexia, language barrier, (a person who has no English Proficient skills or those who are English illiterate, Diabetic Neurothrophy, or Elders losing their vision due to age, or the developmentally disabled who cannot read standard printed material.

Section 3. A Pharmacist shall be defined as a person who has a pharmacology degree and is licensed within or without the Commonwealth of Massachusetts to dispense prescription medication. A pharmacy technician shall be defined as a technician who works with a pharmacist and has the appropriate educational requirements to be a pharmacy technician. A pharmacy shall be defined as a drug store or any other store that contains pharmacy counters and that the entity has a pharmacist on hand to dispense prescription or over the counter medication.

Section 4. In any store or entity that hosts or has a pharmacy counter that employs a pharmacist who has the essential job responsibility of dispensing prescription medication or any other form of medication and whom the essential job responsibility of giving counseling on the uses of medication, it shall be deemed that:

A. A Pharmacy Counter is a place of public accommodation, whether privately owned or publicly owned and;

B. The dispensing of Medication at a pharmacy counter in a store or in a drugstore, or both, is a fundamental operation of business, as defined by applicable state and federal law.

Section 5. It shall be the responsibility of the aforementioned state funded cross-disability agencies or organizations, who receive the aforementioned state funding for their programs and services under the state fiscal budget to work in collaboration with pharmacists across the Commonwealth of Massachusetts to establish best practices of putting into effect accessible

33 prescription labeling into alternative formats to accommodate those who are print reading
34 disabled, under the aforementioned definition of print reading disabilities. Such collaboration
35 efforts shall commence within 90 days after passage of this act and when the aforementioned act
36 passes the aforementioned pharmacies within the Commonwealth of Massachusetts shall start
37 with pilot programs, which shall for the purposes of this act be construed to mean a start-up
38 program of placing prescription labeling into accessible format, which shall include, but, but not
39 be limited to large type print, Braille, and audible format through the use of presently available
40 technology, in three pharmacies each, within the Commonwealth of Massachusetts with the
41 expansion of including all pharmacies within one (1) year of the date of the start-up pilot
42 program. Said pilot program shall be said to commence in 120 days after this act takes effect.
43 The same aforementioned collaboration responsibilities shall also fall onto any public, or state
44 community college, or any state senior college, or university who offer English as a Second
45 Language, (ESL) and receives in part or in whole funding from the Commonwealth of
46 Massachusetts under the fiscal budget for their programs and services.

47 Section 6. Small business pharmacies who have less than 15 employees, employed at
48 drugstores, or vending stores that have a pharmacy counter with a pharmacist working behind the
49 counter shall be exempted from this act until they had reached the point where it is economically
50 feasible to place prescriptions into accessible format, using all three formats, such as Braille,
51 Large Print, and Audible. Economically feasible shall be defined as pharmacies that make
52 \$1,000,000.00 or more per year in gross profits shall fall under the requirement of placing
53 prescription labeling into the aforementioned accessible formats. The aforementioned accessible
54 prescription labeling shall be achieved by technology that is available at the time of passage of
55 this act, and that all pharmacies within the Commonwealth of Massachusetts shall work in

collaboration with the aforesaid cross disability organizations receiving state funding through the fiscal budget for their programs to work with engineers, a group of blind people, a group of print reading challenged people, a group of deaf/blind people and nurses and doctors from rehabilitation agencies or special needs schools who receive state funding through the fiscal budget for their programs, whether in part or in whole.

Section 7 Any cross disability agency, or training facility, or rehabilitation agency, receiving state budgetary funding for their programs, whether directly or indirectly who fail to work in collaboration with pharmacists across the Commonwealth of Massachusetts to establish best practices for putting prescription labels into accessible formats for print reading disabled individuals, or who fails to aid pharmacies across the Commonwealth of Massachusetts to create the aforementioned pilot programs, shall lose five percent (5%) of funding from their budget the next fiscal year upon which their failure to participate and has been found by factual findings of the Joint Committee of Ways and Means by evidence or numerous complaints brought by consumers to participate in establishing said pilot programs. Round table discussions between pharmacists and people who are specially trained in the needs of print related disabilities shall constitute prima facie evidence as to compliance or non compliance. The board that has the authority to license pharmacies within the Commonwealth of Massachusetts shall keep a record of when and where start up pilot programs for accessible prescription labeling has commenced and said board shall keep on record of any pharmacies within the Commonwealth of Massachusetts, when expansion of the program has been done and completed to cover all major chain pharmacies who do business within the Commonwealth of Massachusetts. Specialists working in the profession of the disability field shall include, but, not be limited to rehabilitation counselors, nurses working at training or rehabilitation facilities who train the disabled or special

needs teachers of the visually impaired, or doctors who work at either special needs schools receiving state funding for their programs or who are working in affiliation with any special needs school or rehabilitation training centers for persons with disabilities, who receive state funding in whole or in part from the fiscal budget for their programs or services offered to disabled people.

Section 8 All rehabilitation centers training the disabled and all special needs schools training disabled children or adolescents who receive in part or in whole funding from the Commonwealth of Massachusetts state fiscal budget shall take steps to acquire readily available technology that is there to demonstrate to their clients or students or both the manners in which accessible prescription labeling can be achieved and shall use empty prescription vials with labeling of real medication labeling and instructions during the demonstrating of what is available to place prescription and or over the counter medication into accessible format. Said training centers and special needs facilities receiving the aforementioned funding must look into loaner programs of the technology that is readily available to demonstrate to clients or students or both, how prescription labeling can be put into accessible formats, before they can use the defense of undue hardship, in an action for noncompliance with this act.

Section 9 All of the aforementioned cross disability agencies mentioned herein who receive funding under the state fiscal budget, whether in part or in whole, within 2 years after this act takes effect hire on their staff, engineers, nurses, doctors, and blind programmers to help develop even more cost effective technology to place labeling contained on medication into audible, large print and Braille format, via use of an application that can work on a tablet or a smart phone and also shall work with a pharmacist who shall innovate designs of prescription medication vials into rectangular shapes to fit labels on them so that they can be read by Optical

102 Character Recognition (OCR), via use of a camera from an application otherwise known as
103 mobile software or through reading devices, such as a CCTV, a text to speech device or can be
104 designed in some way that would have a bar code on the prescription or medication label that can
105 be read by said new and innovative cost effective technology, with microchips or Radio
106 Frequency Identification technology, (RFID).