



March 1, 2013

Senator Laurie Monnes- Anderson, Chair
Senator Jeff Kruse, Vice-Chair
Senate Committee on Health and Human Services
Oregon Legislative Assembly

Re: HB 2134

Dear Chair Monnes-Anderson, Vice-Chair Kruse, and Members of the Committee:

PATH (Policy Advisory Toward Health) *for women* is dedicated to providing accurate, high-quality, community driven research, data, and analysis to inform women's health policy and to serve as an independent source of data, analysis, and capacity building for the public, advocates, and policymakers. Depending on evidence-based research data to understand the areas of health disparity among women, we are acutely aware of negative impact unsystematic and incomplete data collection has on our research and outreach in the community. Incomplete and inaccurate collection and classification of race/ethnicity and disability data make it difficult to address existing and emerging disparity in both health research and provision of health services.

Achieving health equity across race, ethnicity, and socioeconomic status is most critical in achieving the Triple Aim of lower costs, better healthcare, and better outcomes in Oregon. Creating uniform standards around the collection and classification of race, ethnicity, language and disability data will allow health services researchers to better utilize federal health data in conjunction with locally collected data. This will provide larger medical institutions, teaching facilities and direct services providers to interpret and apply data collected into targeted interventions for the most vulnerable populations in Oregon.


Uniform data on racial, ethnic, linguistic and ability differences in health care are generally unavailable. Currently supported federal, private, and state data collection efforts are inconsistent and do not align across health indicators. This reduces the effectiveness of available data in addressing health disparity in access to and delivery of care, lowering the quality of care delivered.

Without a way to align locally collected race, ethnicity, and language data with federally collected datasets, those communities with the highest barriers to quality health will not be included in conversations regarding health care transformation, thus maintaining overall health disparity. Understanding the changing demographics in Oregon through accurate, consistent, and meaningful collection of data is the first step to achieving transparency in the health care system and addressing the gaps in health care delivery.

It is evident that when and how data is collected will have broad implications for the analysis and application of collected data into appropriate standards of care for all populations. Given the Affordable Care Act, our state's healthcare transformation, and new data systems, HB 2134 gives our state the opportunity to put the systems in place that will make the gathering and use of this crucial data efficient and economical.

Please vote YES on HB 2134 with the -1 amendment and support our work to have meaningful, consistent, and accurate data collection in health and human services.


Thank you for your consideration,



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