Testimony in Supporting House Bill 4115 and Suggesting Some Amendments to the Draft

February 6, 2019

House Committee on Health Care

Lois M Feuerle, PhD, JD

Good afternoon Chair Salinas, Vice Chairs Nosse and Hayden, and members of the House Committee on Health Care,

My name is Lois Feuerle and I live in Southeast Portland.

I am a certified translator and have been involved in the field of translation and interpreting for more than 20 years, as an interpreter and a translator, as the former coordinator of two state court interpreter programs, as an educator, as an advocate, as a language access consultant, as a member of several advisory boards, and as a member of the boards of directors of both state and national translation and interpreting organizations.

I am submitting these comments as a person who works in the field of translation and interpreting and not as a representative of any of the organizations of which I am a member.

I applaud the work of the House Committee on Health Care and I wholly support the intent and purpose HB 4115, which is to require health care providers and language services companies to use only the services of and only to contract with health care interpreters who are qualified or certified by Oregon Health Authority.

I would, however, like to suggest several perhaps seemingly small but very important amendments to this legislation in its current form, amendments that will make it stronger.

Page, Line, Section	Text	Recommendation	Rationale
p. 2, line 10 ff., Section 4 (3)(a)	Section 4 (3)(a)	Delete:	This students-in- training-programs
	An interpretation	HCIs who are	carve-out undermines
	Services company	enrolled in a HCI	the rigorous quality
	(ISC) may not employ	interpreter	goals that HB4115
	or contract w/ health care interpreters	training program approved by the	strives to achieve.
	(HCls) who are not	Oregon Council	Moreover, it will
	qualified HCIs,	on Health Care	require administrative
	certified HCIs or HCIs	Interpreters	resources to track who
	who are enrolled in a	(OCHCI)	is currently in a training
	HCI interpreter		program, who

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training program	finished/dropped out,
approved by the	& when they are no
Oregon Council on	longer qualified to be
Health Care	hired under HB4115
Interpreters (OCHCI)	all just to be able to
	hire a trainee for the
	duration of a 60-hour
	program lasting at
	most only a few
	months or even only a
	few weeks.

Without accurate, rigorous and up-to-the-minute updates, this carve-out for interpreters enrolled in a training program will enable the hiring of trainee interpreters of unknown quality who have not completed the OHA qualification and certification processes that have been instituted to ensure a level of quality of interpreting services.

It should be noted that these trainee-interpreters will likely be hired at a rate that is lower than OHA qualified and certified interpreters, which will undermine the goal of ensuring that duly qualified and certified interpreters can earn a living wage.

Finally, it should also be noted that the interpreter trainees hired legally under HB4115 would not be subject to any oversight, requirements or restrictions whatsoever, such as a specified termination date for their special status, adherence to a code of ethics, or the criminal history check required for OHA qualified and certified health care interpreters.

This carve-out will not ensure the quality standards that HB4115 otherwise endorses; it will undermine these standards with only a small number of short-term temporary interpreter trainees to show for it since their enrolled status in a 60-hour program will be of short duration.

Page, Line, Section	Text	Recommendation	Rationale
p. 2, line 42-43 ff.,	Section 4 (1)	Overly broad.	A company that specializes in providing
Section 4(1)	A person may not operate an interpretation service company in this state unless the company is registered with the Oregon Health Authority.	Redraft and narrow the language appropriately	interpreters for patent litigation, arts events or international conferences should not be required to register with OHA because they do not provide HCI services.

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If you would like to discuss these proposed amendments or any other aspects of HB4115 that time constraints prevent me bringing up here, I would be happy to provide any insights that I might have.

Respectfully,

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