



**Service Employees International Union – Oregon State Council**  
6401 SE Foster ▪ Portland, OR 97206

March 3, 2021

Dear Chair Patterson and Members of the Committee,

My name is Katie Shriver, and I represent the SEIU Oregon State Council. On behalf of our members and the clients and patients for whom they care, this testimony is in strong support of SB 567.

SEIU is a very diverse union representing 85,000 workers in Oregon and Southwest Washington. Our members include a wide variety of caregivers in health care and long term care, including more than 7,000 personal support workers. SEIU members communicate in more than 5 different languages and sixty percent of our members earn less than \$40,000/year.

SEIU has been working on access to quality and affordable health care for our members and their families for over 50 years. Our work includes organizing health care workers and other care providers to have a voice in patient care, supporting funding for critical health care services, supporting long term care policies and funding that allow independence and choice for people who have disabilities, and advocating for efforts to eliminate inequities and discrimination.

The COVID-19 pandemic has publicized stories about discrimination in health care, and COVID has heightened fears about not receiving needed care due to discrimination. However, discrimination has always existed. As a union we hear from our members about discrimination in health care that they and their family members and clients experience. This includes discrimination based on the protected classes of race, color, national origin, sex, sexual orientation, gender identity, age, and disability. Discrimination can have life or death consequences, as it did in the tragic death of Sarah McSweeney last May.

SB 567 would establish a clear and specific prohibition on discrimination in healthcare, making it unlawful for a health care provider to discriminate on the basis of a protected class by denying medical treatment to the patient that is likely to benefit the person, or by limiting or restricting the allocation of medical resources to the patient.

We urge a yes vote for SB 567.