Senate Bill 584

Sponsored by Senator JAMA (Preession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Directs Oregon Health Authority to implement website with functionality to provide online scheduling portal for health care providers that participate in medical assistance to use to contact health care interpreters directly and to process billing. Specifies individuals responsible for designing website. Requires authority to work with members of Oregon Council on Health Care Interpreters and organized labor to assess feasibility of opening up access to website by all health care providers. Directs authority to submit request to Governor for legislative measure to effectuate expansion, if authority determines that expansion of access to website is feasible.

Establishes two-year pilot program to provide financial assistance to health care interpreters. Requires authority to develop and implement system for tracking state and federal expenditures in this state on interpretation services.

Establishes cause of action for patient or health care interpreter who suffers damages due to failure of interpretation service company or health care provider to comply with requirements for working with health care interpreters.

A BILL FOR AN ACT

Relating to health care interpreters; creating new provisions; and amending ORS 413.559, 413.563 and 414.726.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 414.726 is amended to read:

1. As used in this section:

(a) “Certified health care interpreter” has the meaning given that term in ORS 413.550.

(b) “Qualified health care interpreter” has the meaning given that term in ORS 413.550.

(2) The Oregon Health Authority shall adopt rules to ensure that a coordinated care organization, in accordance with ORS 414.572 (2)(e), and any other health care provider that is reimbursed for the cost of health care by the state medical assistance program:

(a) Works with a certified health care interpreter or a qualified health care interpreter when interacting with a recipient of medical assistance, or a caregiver of a recipient of medical assistance, who has limited English proficiency or who communicates in signed language; and

(b) Is reimbursed for the cost of the certified health care interpreter or qualified health care interpreter, unless the interpreter is reimbursed directly by the authority.

(3) The authority shall establish and maintain a website with the functionality to:

(a) Provide an online scheduling portal for health care providers that participate in the medical assistance program to enable providers to contact certified health care interpreters or qualified health care interpreters directly; and

(b) Process billing and payments for health care interpreter services scheduled through the portal.

SECTION 2. The Oregon Health Authority shall assemble a design team for the purpose of developing and establishing the website described in ORS 414.726 (3), consisting of:

(1) The following project sponsors:
(a) An executive manager from the division of the authority responsible for equity and inclusion; and
(b) An executive manager from the Health Policy and Analytics Division of the authority, created under ORS 442.011.

(2) The following project core team members:
(a) One staff person from the health care interpreter program within the authority;
(b) One staff person from the information services department of the authority;
(c) One staff person from the authority with expertise in coordinated care organizations;
(d) One staff person from the authority with expertise in the fee-for-service system;
(e) One staff person from the Health Policy and Analytics Division of the authority with expertise in the medical assistance information system and eligibility processing; and
(f) One staff person from the government relations department of the authority.

(3) The following external partner project team members:
(a) Two members from the Oregon Council on Health Care Interpreters;
(b) Two qualified or certified speech-language health care interpreters;
(c) One health care interpreter of an indigenous language;
(d) Two health care providers;
(e) Two staff persons from coordinated care organizations;
(f) Two individuals with limited English proficiency or who can represent the interests and perspectives of individuals with limited English proficiency;
(g) One staff person from an interpretation service company, as defined in ORS 413.550;
(h) One representative of organized labor;
(i) One American Sign Language interpreter; and
(j) One individual who is deaf or hard of hearing and whose preferred language is American Sign Language.

SECTION 3. (1) No later than January 15, 2028, the Oregon Health Authority shall, in consultation with the Oregon Council on Health Care Interpreters and representatives of organized labor, review the operation of the website described in ORS 414.726 (3) and determine by what date it will be feasible to allow access to the portal by all health care providers.

(2) If the authority determines that expanded access to the website is feasible, the authority shall submit to the Governor a request for a legislative measure to make statutory changes necessary to expand access to the website effective on the date determined feasible under subsection (1) of this section.

SECTION 4. The Oregon Health Authority shall apply to the Centers for Medicare and Medicaid Services for approval of a demonstration project under 42 U.S.C. 1315 to secure federal financial participation in the costs of directly reimbursing health care interpreters for health care interpretation services provided to medical assistance recipients.

SECTION 5. (1) The Oregon Health Authority shall administer a two-year program to provide to health care interpreters who are qualified or certified under ORS 413.558, or health care interpreters for indigenous languages, financial assistance to improve the compensation paid for health care interpretation services. To qualify for the financial assistance, a health care interpreter must verify that the health care interpreter has provided health care interpretation services for at least 10 hours per month in the previous six-month period.

(2) The authority shall appoint an advisory committee, consisting of two representatives from the Oregon Worker Relief Fund and two representatives of organized labor, to provide
recommendations on the application for financial assistance and the application process for financial assistance described in subsection (1) of this section.

(3) The authority shall contract with the Oregon Worker Relief Fund to act as a fiscal intermediary and dispense funds through the program to health care interpreters. The program shall, through two annual disbursements, provide financial assistance to up to 400 health care interpreters, for providing 10 appointments per month for 12 months at $30 per appointment.

SECTION 6. No later than January 1, 2026, the Oregon Health Authority shall develop and implement a system to track all expenditures from state and federal funds that are spent in this state on providing interpretation services.

SECTION 7. (1) As used in this section, “health care interpreter,” “health care provider” and “interpretation service company” have the meanings given those terms in ORS 413.550.

(2) A patient or a health care interpreter may bring a civil action in the circuit court of the county where the patient or health care interpreter resides for actual damages incurred by the patient or health care interpreter due to the failure of a health care provider to comply with ORS 413.559 or by the failure of an interpretation service company to comply with ORS 413.563.

(3) In an action brought under this section the court may award reasonable attorney fees and costs to the plaintiff.

SECTION 8. ORS 413.559 is amended to read:

413.559. (1) Except as provided in subsection (2) of this section, a health care provider shall work with a health care interpreter from the health care interpreter registry administered by the Oregon Health Authority under ORS 413.558 when communicating with a patient who prefers to communicate in a language other than English, unless the health care provider is a doctor or clinician who is proficient in the patient’s preferred language.

(2) A health care provider who is otherwise required to work with a health care interpreter from the health care interpreter registry may work with a health care interpreter who is not listed on the health care interpreter registry only if the provider:

(a) Verifies, in the manner prescribed by rule by a board or agency described in ORS 413.561, that the provider has taken appropriate steps needed to obtain a health care interpreter from the health care interpreter registry in accordance with rules adopted by the authority under ORS 413.558; or

(b) Has offered the patient the services of a health care interpreter from the health care interpreter registry and the patient declined the offer and chose a different interpreter.

(3) A health care provider shall give personal protective equipment, consistent with established national standards, to health care interpreters providing services on-site at no cost to the health care interpreter and may not suggest to the health care interpreter that the health care interpreter should procure the health care interpreter's own personal protective equipment as a condition of working with the health care provider.

(4) A health care provider shall maintain records of each patient encounter in which the provider worked with a health care interpreter from the health care interpreter registry. The records must include:

(a) The name of the health care interpreter;

(b) The health care interpreter's registry number; and
(c) The language interpreted.

(5) The boards and agencies described in ORS 413.561 shall adopt rules to carry out the provisions of this section[, which may include additional exemptions under subsection (2) of this section].

SECTION 9. ORS 413.563 is amended to read:

413.563. (1) An interpretation service company operating in this state:

(a) Except as provided in paragraph (b) of this subsection, may not arrange for a health care interpreter to provide interpretation services in health care settings if the health care interpreter is not listed on the health care interpreter registry described in ORS 413.558.

(b) May arrange for a health care interpreter who is not listed on the health care interpreter registry to provide interpretation services in health care settings only if:

(A) A health care provider represents to the interpretation service company that the health care provider:

(i) Has taken appropriate steps necessary to arrange for a health care interpreter from the health care interpreter registry in the manner prescribed by rule under ORS 413.559; and

(ii) Was unable to arrange for a health care interpreter from the health care interpreter registry; and

(B) The interpretation service company does not employ a health care interpreter listed on the health care interpreter registry who is available to provide interpretation services to the health care provider.

(c) May not represent to a health care provider that a contracted or employed health care interpreter referred by the company is a certified health care interpreter unless the interpreter has met the requirements for certification under ORS 413.558 and has been issued a valid certification by the authority.

(d) May not require or suggest to a health care interpreter that the health care interpreter procure the health care interpreter’s own personal protective equipment as a condition of receiving a referral.

(2) An interpretation service company shall maintain records of each encounter in which the company refers to a health care provider a health care interpreter from the health care interpreter registry or a health care interpreter who is not on the registry. The records must include:

(a) The name of the health care interpreter; and

(b) The health care interpreter’s registry number, if applicable.

SECTION 10. In addition to and not in lieu of any other appropriation, there is appropriated to the Oregon Health Authority, for the biennium beginning July 1, 2023, out of the General Fund, the amounts of:

(1) $3,398,400, which may be expended for carrying out the provisions of section 5 of this 2023 Act; and

(2) $1,500,000, which may be expended for carrying out section 6 of this 2023 Act.

SECTION 11. The Oregon Health Authority shall take all steps necessary to ensure that the website described in ORS 414.726 (3) is in operation no later than January 1, 2025.

SECTION 12. (1) Section 2 of this 2023 Act is repealed on January 2, 2025.

(2) Sections 3 and 4 of this 2023 Act are repealed on January 2, 2029.

(3) Sections 5 and 6 of this 2023 Act are repealed on January 2, 2027.