Dear Chair Patterson, Vice Chair Hayden and members of the committee,

My name is Awaz Muhamad; I live in the Portland Metro area in the State of Oregon. I am a certified/qualified health care interpreter for two languages (Arabic- Kurdish). I have been an interpreter for over 20 years. I decided to be a medical interpreter first to serve the Limited English Proficiency (LEP) community which has some of the most vulnerable patients in the healthcare system. My second reason was due to the lack of qualified/certified interpreters in the languages I speak, and more specifically the Kurdish language as it's considered a language of lesser diffusion. Per the Oregon Health Authority interpreter registry, I'm currently one of the only two qualified Kurdish interpreters and one of the only six certified Arabic interpreters in the State of Oregon entirely.

Language access is very essential for the LEP patients to navigate the health system successfully with less impact resulted from health disparities. Providing interpretation services to the LEP patient is also important to reduce the communication barrier during the medical encounter, to resolve potential cultural misunderstanding, to enhance the trust the provider-patient relationship, and to increase the patient health outcome and satisfaction. Therefore, professional interpreters play a vital role during the provider-patient communication and contribute in the overall health care of the LEP patients by helping them navigate the healthcare system equally and bridging the communication barrier gap. Thus, I am testifying in support of SB 584.

Although language access is very important for the LEP individuals, there is a lack of professional interpreters in healthcare settings. The healthcare interpreter workforce has many challenges and the related issues directly impact language access in healthcare setting. The working circumstances that healthcare interpreters encounter push them away from the profession which further suppresses language access in the state.

Currently, a healthcare interpreter must have a contract with one or multiple language service agencies to be able to get interpretation assignments. The language service companies do not offer any types of employment benefits to the interpreter. The pay rate is low and not sufficient to support the interpreter financially. Also, there is a minimum or no mileage reimbursement. Occasional rate increase or travel bonus is not up to the standards of the profession and do not cover the actual time spent and related expenses. For every single hour interpretation assignment, the interpreter could spend an additional 2-3 hours on average to cover the time needed to arrive on time for that appointment. This includes the time the interpreter needs to dress professionally, travel to the appointment through rush-hour traffic, struggle to find a parking spot, and go through the Covid-19 check process. Then they must wait in line to have the assignment form signed in, wait in the lobby to be called in by the provider, complete the interpretation appointment, wait in line again to get the form signed out, and finally travel back home. If the pay rate is calculated with all the time spent by the interpreter, the hourly rate does not meet minimum wage and fails to account for the interpreter's efforts as a whole. Therefore, these challenges and work circumstances are not motivating interpreters to continue working in that profession and force them to pursue other jobs.

To resolve this issue, healthcare interpreters should get the support needed to build an online portal that will help interpreters set their rates collectively. This will help motivate professional interpreters continue in providing quality language services to OHP/Medicaid LEP patients who are some of our most vulnerable Oregonians. Building this online portal will help save money for the state and providers by allowing providers to contract directly with the interpreters instead of going through a third party. Finally, this online portal will help build health equity goals by providing quality language access to the LEP community and it ensures that state and federal funds are being spent wisely. I am a professional certified health care interpreter; I want to stay in the profession to help the LEP patients have access to language services. Therefore, I urge the members of the committee to vote YES on SB 584.