

Feb 5, 2023

Dear Chair Patterson, Vice Chair Hayden and Committee Members:

My name is Mark Hedinger, and I am an Oregon Certified Health Care Interpreter. I serve the Spanish speaking community in the Portland area, helping to provide them with equal access to good quality medical care, just as their English speaking neighbors enjoy. I have worked part-time as a HCI (Health Care Interpreter) for nearly 8 years.

I work in this profession because of having been a stranger struggling in a Spanish speaking country myself years ago. I had learned the vocabulary that I needed to buy groceries and other daily activities but walking into the often-technical language of a medical situation was very difficult. Not only is the language of medicine different from everyday conversation, but there is also the emotional weight of facing medical unknowns at the same time. As I recalled the vulnerable feeling that I had experienced, and as my own Spanish language ability progressed, I was very glad to be helpful to the Spanish speaking community that now is in that same situation in my homeland (the USA).

Many of the patients I serve are young and fairly new to our nation. They have young families, and are simply trying to establish life in a new country. Being able to remove from them the burden of understanding technical medical language in their most overwhelmingly difficult moments is why I value my work as an interpreter.

But there is a serious problem with the system that I work in. I am a self-employed contractor, meaning that I choose which interpreting offers I wish to take. I contract with three different language companies. On any given day, I will take from 1 – 4 appointments in 1 – 4 different medical situations. I have to drive from one appointment to the next, and of course as a self-employed worker no one is paying for those hours of driving. Because of those driving hours, working full time in the current system can rarely lead to more than 20 – 30 hours of paid work. Since I work for different language companies, there is also a disparity in pay rates – and if it is the lower-paying company that I am driving to serve, I often am essentially making as little as \$15/hour (when counting in the driving time).

I honestly do not know how anyone could make a living as an independent contractor in this kind of system, and yet our most vulnerable neighbors need exactly the kind of service that we provide.

The need is urgent for a system that makes care more accessible for LEP patients and that makes it possible for healthcare interpreters to earn a living wage while serving these patients and providers. It seems to me that SB 584 offers the kind of feasible, centralized access that will go a long way in solving the problems that plague our current untenable system.

SB 584 is good for all of us – Providers can track the actual work of specific CHIs. Patients can be assured that a Certified interpreter will be available, and the interpreters will have the possibility of earning a living wage. I would like to urge you to vote in favor of the measure.

Thank you for your careful consideration.