

Esteemed Chair and Members of the Committee,

My name is Felicity Ratway. I hold certifications through the Oregon Health Authority and National Board of Certification for Medical Interpreters and a Master's degree in Interpreting and Translation Studies. I have been working as a health care interpreter in Oregon since 2015. I also teach training and continuing education courses for health care interpreters, serve as Advocacy and Legislative Chair on the Oregon Council on Health Care Interpreters, and have been researching language access as a doctoral student of public health. If you haven't guessed, I am passionate about interpreting.

I am writing in support of SB 584 because this bill will give interpreters a means of getting paid directly by the state, supporting better pay for interpreters and cutting administrative costs associated with contracting interpreters through third parties. The ability to be booked directly is something that our court interpreter friends already enjoy and we are hoping to follow in their footsteps.

Language minority patients experience disparities in quality of care and access to care, contributing to disparate health outcomes. Access to trained interpreters with demonstrated proficiency and skills is shown to mitigate or even eliminate these disparities. Accordingly, Oregon has passed legislation requiring access to interpreters for language minority patients whenever possible, and has made achieving health equity by 2030 a priority. However, CCO performance on the language access incentive metric in place these last couple years has shown that access to interpreters who have met state standards is still sporadic. Interpreters are still struggling to make ends meet in this profession, exacerbating the problem. Fewer than 10% of interpreters on the OHA registry currently renew their credentials, and a survey of health care interpreters conducted by the Oregon Council on Health Care Interpreters found that compensation and cost of continuing education were the most-often-cited reasons for not renewing. It is clear that improvements are needed to make staying in the profession possible for interpreters. To give an example, one of the language companies I work with pays \$28/hr from the time I sign in, but does not pay for travel time or provide a mileage reimbursement. This means driving 45 minutes from my home in Dallas to McMinnville, interpreting for an hour, and driving 45 minutes back—a common experience for rural interpreters—nets me \$11.20 per hour, minus whatever I paid for gas, which adds up when you drive to 4 or 5 worksites in a day. I will be honest—I keep up my medical credentials in hopes things will get better, but of late I have been taking more and more work at conferences or with nonprofits who pay me directly,

because it's roughly twice the pay per hour, I don't have to travel to different sites on unpaid time so I can get my 8 hours in without working a 16 hour day, and I don't have to pay for gas.

Getting paid directly by the state, rather than booked by language companies who currently serve as intermediaries, would save the state money that is currently lost on administrative costs as well as allow us to earn more and hopefully continue doing work in the medical setting. This legislature supported interpreters in 2021 with HB 2359, which had provisions ranging from access to PPE to clarification of requirements to work with interpreters who have met state standards established by the Oregon Health Authority. One of the tasks assigned to the Oregon Health Authority in HB 2359 was researching how to develop a scheduling mechanism like the one we are asking for in SB 584. Now that OHA has concluded the research, we are asking for your support again so we can get this scheduling mechanism across the finish line.

In addition to the creation of a scheduling mechanism to allow the Oregon Health Authority to pay interpreters directly, Section 7 of this bill would also allow damages to be sought for noncompliance with laws regarding interpreting services. No government agency is currently tasked with enforcing statutory requirements for language service companies, and though HB 2359 tasked OHA and DHS with enforcing language access requirements for health care providers, these agencies have not created a complaint process or specified penalties for noncompliance. I can tell you that even though I've been picking up more work outside of health care, I would hesitate to take a language company to court because that would mean lost income for me. A clear complaint process and proactive monitoring approach with clearly specified penalties for noncompliance would be more appropriate, especially given low levels of access to interpreters among Medicaid patients reported by Oregon's CCOs. I have included as written testimony a letter submitted to OHA during rulemaking, with more information on what is missing in terms of enforcement of current legislation.

That said, I recognize that it is difficult to ask government agencies to take on enforcement, and that is likely why this bill doesn't direct agencies to take on a more active role. If an enforcement mechanism that doesn't require going to court is not feasible, this section of the bill would at least allow some remedy when clinics fail to offer interpreting services.

In order to support interpreters' efforts to remain in the profession, and in support of the goal of achieving health equity by 2030, I urge your support for SB 584.