

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

My name is Christy Ma, and I have been working as a health care interpreter in the Eugene area for 2 years. Many of our State's most vulnerable patients are those whose primary language is not English. For those people and their providers, the success of our healthcare system rests squarely in the hands of interpreters. We work elbow-to-elbow with medical providers in the exam rooms, the ER, the operating room, home hospice, Cardiology, Chemotherapy, births, and deaths. However, in my interpreting career, I've experienced No travel bonus, which makes it difficult to stay in the industry. I write this testimony in hopes you will vote YES on SB 584.

Oregon has established health equity goals, and a major problem in achieving those goals is that the vast majority of Medicaid/OHP appointments are served by unqualified interpreters and/or bilingual individuals with inadequate training. The largest interpreting service companies do not negotiate reasonable rates with interpreters nor ensure OHA-credentialed interpreters are sent to Medicaid/OHP appointments. This means:

- Interpreters cannot afford the cost of ongoing training and certification
- High industry turnover
- Patients and providers are often served by well-meaning but inadequately trained individuals
- The state pays more than necessary due to errors in communication, misdiagnoses, repeat appointments, no-shows, etc.

Supporting SB 584 will move the State toward greater health equity and save money by creating:

- A scheduling and payment system that allows for direct contracts with interpreters will reduce State spending on third-party scheduling companies while allowing interpreters to earn industry-standard rates.
- Interpreters will be able to invest in ongoing training and certification, professionalizing the industry while providing greater access to quality health care to the State's most vulnerable populations
- Pair Providers with qualified interpreters for Medicaid/OHP appointments means less guesswork, fewer unnecessary tests being ordered "just in case," greater patient compliance, and fewer no-shows (all of which cost the State money)

Title VI and the HHS CLAS Standards stipulate that facilities receiving federal funds must provide interpreting services for providers that don't speak the same language as their patients. I interpret not because the law demands it but because I believe healthcare is a human right. The success of reaching Oregon's health equity goals

relies on Oregon's interpreters. SB 584 will be a meaningful step in improving working conditions for interpreters and, thus, the quality of language access services and health outcomes for Medicaid/OHP patients

The Healthcare interpreter workforce issues directly contribute to a lack of language access in healthcare settings. The working conditions that healthcare interpreters face drive interpreters out of the profession, further straining language access in the state.

**I appreciate your thoughtful consideration and urge you to vote "YES" on SB 584**

Sincerely,  
Christy Ma