

Subject: Opposition to House Bill SB 1578 Relating to Health Care Interpreters

Dear Senate Health Care Committee,,

I am writing to express my strong opposition to House Bill SB 1578, which relates to healthcare interpreters. I come to you today as an RID Certified ASL interpreter with more than 26 years of experience in onsite and remote interpretation. I have personally provided interpreting services for hundreds, if not thousands, of healthcare-related appointments. Additionally, I have spent the past ten years engaged in the administration, contracting, and compliance of language access for Limited English and Deaf and hard-of-hearing communities in Oregon and nationwide. But most importantly, I come to you today as a family member of people who utilize these services daily. While the intention of the bill to improve access to certified and qualified healthcare interpreters is commendable, I believe that the current provisions fail to address crucial issues regarding patient care, remote services, interpreter working conditions, and lack of engagement of the very population impacted by this provision, the patients.

First and foremost, the bill lacks substantial measures to address patient care and does not involve patients in the development of a bill that impacts their ability to access healthcare. In the spirit of “nothing for us without us,” this should be a critical part of the discovery and development of any patient-impacting provision, especially for marginalized communities. Proponents of this bill have failed to do so. The portal attempts to address the quality of interpretation provided during medical appointments adequately but fails to mention that this is trumped and redundant, as it is addressed in HB2359. HB 2359 mandates the prioritization, use, and reporting on assigning OHA Certified/Qualified interpreters, which is paramount for ensuring accurate communication between healthcare providers and patients with limited English proficiency and who are Deaf or hard of hearing. The proposed portal does not address the business and compliance requirements that language access companies must provide in order to serve patients and providers safely. Without proper oversight and standards for interpreters and compliance, there is a risk of compromising patient safety and healthcare outcomes.

Furthermore, the bill overlooks the importance of remote interpreter services, especially in light of recent advancements in telehealth technology. Remote interpretation can significantly improve access to healthcare for underserved populations, including immigrant, refugee, low-income, and rural communities.

Remote interpretation is a vital service that operates 24/7, 365 days a year, serving as a lifeline in emergent situations across the state. Despite its critical importance, the current provisions fail to adequately promote or integrate remote interpretation into the healthcare system. Limited resources in the State of Oregon present a significant barrier to effectively covering both onsite and remote services. This oversight not only hampers efforts to broaden access to healthcare but also raises concerns about potential violations of Title VI of the Civil Rights Act of 1964. The failure to address how remote language access is provided could undermine the mandate for meaningful participation outlined in *Lau v. Nichols* and subsequent federal guidance. It is imperative that any legislation concerning healthcare interpreters addresses the urgent need for robust remote interpretation services to ensure equitable access for all individuals, regardless of location or circumstance.

While many have voiced support for this bill with the aim of enhancing interpreter working conditions, it regrettably falls short of addressing the core concerns expressed by interpreters themselves. As independent contractors, interpreters have the autonomy to provide their services and determine their own reimbursement rates. However, it is language access companies that bear the brunt of administrative costs, compliance requirements, and liabilities to ensure the delivery of comprehensive, compliant, and safe interpretation services.

The proposed interpreter management system primarily focuses on administrative functions like online scheduling and billing, raising questions about the true intent and beneficiaries of this legislation. While the bill stipulates requirements for the administration and management of the interpreter management system by a nonprofit entity, it fails to acknowledge that no single nonprofit agency possesses the requisite experience or capacity to handle the comprehensive administration and high volume of provisions statewide. The language access industry is inherently complex, and fostering competition in a free-market environment can actually enhance patient care and improve interpreter working conditions.

Moreover, the bill lacks assurances for patient populations, including fill rates, response times, federal compliance, insurance coverage, and oversight. Removing the competitive marketplace environment risks further marginalizing and compromising patient safety. Additionally, Section 3 of SB1578 fails to propose solutions to existing issues as these provisions are already addressed by other legislation or existing measures provided. It is imperative that any legislation concerning interpreter services thoroughly considers the needs of interpreters, language access companies, and, most importantly, the patients they serve.

In conclusion, SB 1578, in its current form, does not adequately address the pressing issues of patient care, remote services, or interpreter working conditions. Instead, it threatens to exacerbate existing disparities in healthcare access and compromise patient safety. I implore you, as an interpreter and family member of someone using these services, to reconsider the bill's provisions and engage stakeholders more comprehensively to ensure that any legislation truly serves the best interests of patients, interpreters, and the broader healthcare community.

Thank you for your attention to this matter.

Krystill Brown

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