

Feb. 4, 2026

Oregon State Legislature
Senate Committee on Health Care
900 Court Street NE
Salem, OR 97301
Submitted electronically via OLIS

RE: SB 1570-1, relating to protections in health care facilities

Chair Patterson, Vice Chair Hayden and Members of the Committee:

The Hospital Association of Oregon is a mission-driven nonprofit association representing Oregon's 60 community hospitals. The hospital association agrees with what we believe is the core objective of SB 1570—to preserve hospitals and FQHCs as safe places to seek health care. However, SB 1570's method is flawed. The -1 amendment takes a punitive approach against hospitals and FQHCs and places their employees at risk. We oppose the -1 amendment to SB 1570. Substantial amendments to SB 1570 are necessary to align this bill with its intended purpose. We welcome additional conversation to find a better path forward.

Oregon's hospitals are committed to their essential mission of providing care for all. People should feel safe seeking care. And caregivers should feel safe when providing that care.

Rather than focus on actions by federal immigration authorities, the -1 amendment places responsibility and risk on hospitals, FQHCs, and their employees. Amendments should focus on supporting hospitals and FQHCs in their essential mission to provide care to the community.

Through broad, vague, and ambiguous terms, the -1 amendment creates unreasonable or unworkable standards. An illusion in the bill seems to be that a "hospital" or "FQHC" could somehow take specified actions. But the reality is that employees of a hospital or FQHC will have to do the requirements in this bill. Every person's safety at a hospital—without exception—is important to us.

Workers at hospitals and FQHCs should be able to focus on providing high quality patient care. Instead, this bill is setting up hospitals and FQHCs for failure. Words matter here, as a worker who



does too little could trigger penalties under this bill, and a worker who does too much could face federal criminal charges or other serious consequences. We share concerns with advocates who would like to preserve hospitals as safe places to seek care. But the -1 amendment is not the way to do it.

Unfortunately, the -1 amendment does not stop with just new requirements—it ties them to new liability and penalties. The federal immigration authority should be liable for any loss or injury that is caused by or arising from a federal immigration authority. Hospitals and FQHCs should not be liable for any loss or injury caused by or arising from a federal immigration authority. Yet the -1 amendment creates liability for the hospital and FQHC. We should be protecting Oregon's hospitals and FQHCs, not doing the opposite. This must be fixed.

We are also concerned with the role that the Oregon Health Authority (OHA) will play in enforcing this law. The -1 amendment gives OHA the authority to deny, suspend, or revoke the license of a hospital or FQHC if OHA finds there has been a substantial failure to comply with specified sections of the bill. If this enforcement is taken, it will harm patients, communities, and frontline workers.

Advocates, labor and hospitals should be aligned in a shared mission to keep hospitals safe available to all who need care. We should focus on mobilizing state and local resources to support hospitals, FQHCs, and all those who need health care.

Sincerely,



Sean Kolmer
Executive Vice President, External Affairs
Hospital Association of Oregon

About the Hospital Association of Oregon

Founded in 1934, the Hospital Association of Oregon (HAO) is a mission-driven, nonprofit trade association representing Oregon's 60 hospitals. Together, hospitals are the sixth largest private employer statewide, employing more than 70,000 employees. Committed to fostering a stronger, safer, more equitable Oregon where all people have access to the high-quality care they need, the hospital association supports Oregon's hospitals so they can support their communities; educates government officials and the public on the state's health landscape, and works collaboratively with policymakers, community based organizations and the health care community to build consensus on and advance health care policy benefiting the state's four million residents.



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