



MEMORANDUM

To: Rep. Ben Bowman, Chair, House Committee on Rules
Rep. Lucetta Elmer, Vice Chair, House Committee on Rules
Rep. Hai Pham, Vice Chair, House Committee on Rules
Members of the House Committee on Rules

From: Courtni Dresser, Vice President of Government Relations

Date: February 27, 2026

Re: Support for SB 1570A

The Oregon Medical Association (OMA) represents and advocates for more than 7,000 physicians, physician associates, and medical and PA students across Oregon. Our mission is to support our members in their efforts to practice medicine effectively, improve the health of Oregonians, and provide the highest quality patient care.

We write in support of SB 1570A.

Hospitals are places of healing. They are where patients arrive at their most vulnerable—during medical emergencies, serious diagnoses, childbirth, end-of-life care, and moments of profound uncertainty. In recent months, federal immigration enforcement activity at or near hospital settings has increased. These encounters can be traumatic and deeply stressful for patients, families, and hospital staff. They also create disruption within clinical environments that must remain focused on patient care.

Clinicians across Oregon are increasingly concerned that fear of immigration enforcement is causing some individuals to delay or avoid seeking care altogether. When patients avoid hospitals due to fear, minor conditions become emergencies, communicable diseases go untreated, chronic illnesses worsen, and overall health outcomes decline. That is not good for patients, families, communities, or the health care system.

SB 1570 appropriately reinforces that hospitals may not disclose individually identifiable health information or information concerning a person's citizenship or immigration status for purposes of law enforcement unless required by state or federal law or a court order, including a judicial

warrant, or to ensure continuity of care. This is a critical safeguard. Patients must trust that their personal medical information will not be shared absent a proper legal process.

The bill also requires hospitals to designate which areas are not open to the public, including controlled-access areas and patient rooms. Clear policies about access help reduce confusion and ensure that patient care spaces remain secure and clinically appropriate.

Additionally, SB 1570 requires hospitals to adopt written policies for responding when law enforcement arrives and to designate a responsible administrator. This structure provides clarity for frontline staff, who should not be placed in the position of navigating complex legal questions in the middle of delivering care.

Importantly, the bill ensures that information concerning a person's citizenship or immigration status or country of birth must be treated in the same manner as protected health information under state law. This aligns immigration-related information with existing patient privacy protections and reinforces that medical records are not tools for enforcement activity absent proper judicial authorization.

SB 1570 does not prevent lawful law enforcement activity. It ensures that such activity occurs through appropriate legal channels and without undermining patient safety, privacy, or trust.

OMA would also like to also highlight that the entire system needs far more assistance with building safer policies and procedures within health care settings to address federal law enforcement activity that may or may not be following traditional legal principles. This must be a shared form of assistance and not a responsibility placed on one person or organization. We call on our Legislature and state agencies to help hospitals and clinics set up resources that are vetted, trusted and can be consistent across all health care settings.

Hospitals must remain safe and predictable environments where patients feel secure seeking care. When fear replaces trust, the entire health system is weakened.

Commented [MB1]: Did you want to mention a call for more state resources so that effective policies and good training are able to be consistent across the entire health care system and not unnecessarily cause hospitals large and small to redirect resources to standing up administrative protocols, that while needed under the bill, will be redirected away from desperately needed patient care resources.