

The Hon. Laurie Monnes Anderson, Chairwoman before the Senate Committee on Health Care

Oregon State Legislature 900 Court Street NE Salem, OR 97301

April 23, 2015

Dear Honorable Senator Monnes Anderson,

My name is Steven M. Brown, and I am Chair of the Oregon Association of the Deaf (OAD) legislative subcommittee. I am pleased to report that the House passed this legislation with a recommendation to become a new law.

I would like to take a moment to share what HB 2419A is, and impress upon you both its importance of this particular legislation.

Please find enclosed support letter from Oregon Health Authority (OHA). OAD and I endorse (OHA) letter and its testimony. A need for certified healthcare interpreters are urgent; so, it is imperative to note that HB 2419A needs to incorporate American Sign Language (ASL) and Video Remote Interpreting (VRI) healthcare interpreters as well. Please consider our support associated with OHA, as well as HB 2419A.

Thank you for your strong leadership and for your commitment to make it achievable for all.

Sincerely,

Steven M Brown, MPA, MA Chair, OAD Legislation Committee

Chad A. Luchwig

Chad A. Ludwig, MSW President



Testimony Concerning HB 2419A

Senate Committee on Health Care Steven M Brown, MPA, MA 04/23/2015

Chair Senator Monnes Anderson and the Members of the Committee:

My name is Steven M. Brown, and I live in Southeast Portland. I have been profoundly deaf since I was five months old as a long-term complication resulting from spinal meningitis. As Chair of the Legislation Committee of the Oregon Association of the Deaf (OAD,) I am here to represent our organization as a whole by testifying in the strongest possible terms in support of HB 2419A.

Because of Senator Monnes Anderson's extraordinary efforts, I wish to express my deepest and sincerest thanks to Senator Monnes Anderson for her generous support of our deaf, deafblind, and hard of hearing social services, as well as needs, in recognition of making equal access to having effective communication among of others and us. We are very proud to support this particular legislation.

Even today, more senior citizens are experiencing hearing loss due to general aging or specific health problems. People who are deaf, deaf-blind, hard of hearing, or have lost their hearing abilities for various reasons, need access to communication. This will avoid any barrier to understanding the information being disseminated over said certified interpreters. Being qualified is essential in which this legislation would certify by OHA the interpreters to accurately translate and disseminate healthcare (i.e., medical terms, etc.) information to targeted populations that need accommodations.

I would like to include Oregon Health Authority (OHA) support letter in my testimony. Please find enclosed OHA support letter and consider OHA explanations for this legislation to be passed. Please support HB 2419A with the recommendation to pass.

I trust that this committee, as well as the Oregon State Legislature as a whole, understands the importance of this work in removing barriers to participation for Oregonians with disabilities.

In its furtherance, we will also enrich and promote equality for all Oregonians to enjoy and participate in public facilities, programs, services, and activities. We look forward to continuing this work with the Oregon State Legislature and others as our work moves ahead.

Respectfully submitted,

AMB

Steven M Brown, MPA, MA Chair, Oregon Association of the Deaf Legislation Committee 1819 SW 5th Avenue #143 Portland, Oregon 97201

DIRECTOR'S OFFICE Office of Equity and Inclusion

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[date]

TO: Chair The Honorable Mitch Greenlick,

The Honorable Alissa Keny-Guyer, Vice-Chair The Honorable Jim Thompson The Honorable Brian Clem The Honorable Jason Conger The Honorable Chris Harker The Honorable Bill Kennemer The Honorable John Lively The Honorable Jim Weidner

House Committee on Health Care

FROM: Leann Johnson Interim Administrator, Office of Equity and Inclusion Oregon Health Authority (971) 673-1285

SUBJECT: House Bill 2419

Chair Greenlick, Vice-Chair Thompson, Vice-Chair Keny-Guyer, members of the House Committee on Health Care, my name is Leann Johnson. I am the Interim Director of the Office of Equity and Inclusion in the Oregon Health Authority. I want to acknowledge and thank you for your leadership in the process of transforming health care in the State of Oregon to achieve the triple aim of overall health of all Oregonians, assuring improved access to quality patient-centered health care, and controlling health care costs.

I am here today to testify on House Bill 2419, and specifically on Sections 1 through 5. These sections of the bill related to the Health Care Interpreter Program, managed by the Office of Equity and Inclusion.

The Oregon Health Care Interpreter Program was established in 2001 to create standards for the practice of health care interpreting, and to develop and provide training to help interpreters meet those standards. At that time, few training programs existed and no single entity was in place to test and ensure interpreters could meet practice standards. In the last decade, numerous training organizations and national-level boards have been established, eliminating the need for the State to act as the training and testing entity. The ongoing role of the state is to ensure that those practicing health care interpreting have met the qualification and certification standards set for Oregon, provide a registry of those interpreters who have met qualification and certification

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standards, and to increase the utilization of health care interpreters in medical settings to ensure that patients have access to medical care in the language they prefer, a provision of Title VI of the Civil Rights Act of 1964.

Between 2000 and 2010, Oregon's non-White population increased from 16% to 22%, growing at a faster rate than the nation. Within Oregon's low-income population, the changing demographics are even more apparent with up to 40% of Oregon Health Plan clients identifying as non-White. In 2010, Oregon residents spoke at least 137 languages, making Oregon one of the 15 most language-diverse states in the U.S.

These data point to a growing need for people with other language skills to support health system transformation. Linguistically-appropriate care is essential for ensuring timely access to care, adherence to treatment prescribed by a health care provider, and increased patient engagement and satisfaction, all key factors in achieving the Triple Aim. Conversely, utilizing English speaking family members (some who are children) or bilingual staff not trained to interpret complex medical information is dangerous to the patients and risky for the provider.

House Bill 2419 Sections 1-5 amend existing statute by modifying the broad definition of "health care interpreter" to delineate between those who have met "qualification" and "certification" standards of practice. The new definitions would bring the statute in alignment with more recent administrative rule changes (OARs 410-141-0000 through 410-141-0860), requiring the use of qualified or certified HCIs when providing health care services to Medicaid clients. A recent amendment request to the bill includes American Sign Language interpreters to practice within the same scope in order that people who are deaf or hard of hearing receive accurate health and treatment information during the course of the medical appointment.

In addition, the bill modifies the membership of the Oregon Council on Health Care Interpreters, reducing the number of state agency staff and including more relevant and current stakeholders, including HCI training programs, employers, and health care interpreters themselves. The bill also assigns sole authority of appointments to the Council with the OHA Director. The Office of Equity and Inclusion believes that these amendments make the statute and subsequent implementation work more relevant to the needs of the state and clarify the practice of health care interpreting for interpreters, providers, and patients.

Thank you for the opportunity to testify before you today. I am happy to answer any questions you may have. Additional Agency Contact:

Leann Johnson, Interim Director, Office of Equity and Inclusion, Oregon Health Authority, (971) 673-1285, leann.r.johnson@state.or.us, <u>http://www.oregon.gov/oha/oei/Pages/index.aspx</u>

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