



HB 2011 (-1): Culturally and Linguistically Appropriate Care

Background

One in five Oregonians are people of a color, yet Oregon’s health care workforce has failed to adequately reflect the communities served. While some progress has been made to recruit and retain a diverse workforce, much work remains to ensure all Oregonians are receiving culturally and linguistically appropriate care. It is unacceptable for a health care system to not meet the needs of Oregon’s increasingly diverse population.

Studies show that black, indigenous and people of color, members of the LGBTQIA2+ community, people of lower economic status, and people with disabilities, are less likely to receive adequate health care due to cultural and communication barriers. These barriers increase overall health care costs due to prolonged care and inappropriate care.

HB 2011 strives to reduce health provider bias¹, improve health literacy, and support provider-patient relationships. It does this by establishing an expectation that all licensed health practitioners complete evidence-based education to support patient satisfaction and outcomes^{2 3}.

What It Does (base bill)

- Requires all health licensing boards to adopt standards for continued education credits specific to cultural competency⁴ (CCCE) as a condition of licensure or renewal;
- Supports existing efforts by requiring that CCCE meet the Oregon Health Authority’s standards (HB 2611, 2013);
- Builds on existing investments in Traditional Health Workers by further bridging the gap between patient and provider experiences.

What It Doesn’t Do

- Prohibit professional associations, provider groups, health systems, or community groups from creating and submitting CCCE for OHA approval and program acceptance;
- Prohibit licensing boards from including providers in the process to establish CCCE requirements;
- Prescribe the total number of CCCE credits to be taken.

¹ Maina et al. A decade of studying implicit racial/ethnic bias in health care providers using the implicit association test. *Soc Sci Med.* 2018 Feb;199:219-229. doi: 10.1016/j.socscimed.2017.05.009. Epub 2017 May 4.

² Beach MC, Price EG, Gary TL, et al. Cultural competence: a systematic review of health care provider educational interventions. *Med Care.* 2005;43(4):356–373. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3137284/>

³ A systematic review of the extent and measurement of healthcare provider racism <https://www.ncbi.nlm.nih.gov/pubmed/24002624>

⁴ Cultural competency, culturally responsive, cultural humility, culturally appropriate