

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: HB 2231 - 2

80th Oregon Legislative Assembly – 2019 Regular Session
Legislative Fiscal Office

*Only Impacts on Original or Engrossed
Versions are Considered Official*

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Measure Description:

Provides right to collectively bargain with State of Oregon to interpreters who receive compensation paid by state for providing interpretation services.

Government Unit(s) Affected:

Oregon Health Authority (OHA), Department of Administrative Services (DAS)

Summary of Fiscal Impact:

Costs related to the measure are indeterminate at this time - See explanatory analysis.

Analysis:

The measure would provide health care interpreters who receive compensation from the State for providing interpretation services the right to collectively bargain with the State of Oregon. The measure would create a bargaining unit of non-state employees for health care interpreters, who would be treated as public employees only for purposes of collective bargaining on labor relations. The Labor Relations Unit of the Department of Administrative Services (DAS) would represent the State of Oregon in collective bargaining negotiations with the certified or recognized exclusive representative of an appropriate bargaining unit of health care interpreters. The measure would authorize DAS to agree to terms and conditions of collective bargaining on behalf of the State of Oregon.

Department of Administrative Services (DAS):

The DAS Labor Relations Unit anticipates that the measure would slightly increase its normal workload, and thus, could be absorbed within its current staffing levels. However, the size of the bargaining unit is unknown. If the bargaining unit were larger than expected, the additional workload associated with the creation and administration of such a bargaining unit could require providing additional staffing to the Labor Relations Unit. For that reason, the fiscal impact of the measure is indeterminate to DAS.

Oregon Health Authority (OHA):

The measure would impact the OHA Express Payment and Reporting System. The system would need to be modified to include additional tracking and screen changes for providers, including changes to funding codes and processing logic. The OHA Office of Information Services estimates that it would require 120 hours to modify the system, which it believes could be done by reprioritizing efforts to complete the system modifications. For that reason, the measure would have a minimal fiscal impact on OHA.