

HB 4115 A STAFF MEASURE SUMMARY

House Committee On Health Care

Action Date: 02/13/20

Action: Do pass with amendments and be referred to Ways and Means. (Printed A-Eng.)

Vote: 8-3-0-0

Yeas: 8 - Alonso Leon, Greenlick, Keny-Guyer, Noble, Nosse, Prusak, Salinas, Schouten

Nays: 3 - Drazan, Hayden, Moore-Green

Fiscal: Fiscal impact issued

Revenue: No revenue impact

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Meeting Dates: 2/6, 2/13

WHAT THE MEASURE DOES:

Defines terms. Requires Oregon Health Authority (OHA) to report to the interim House Committee on Health Care on the costs to implement a health care interpreter training program that is free or provided at an affordable cost and to establish and maintain a central registry for OHA-qualified or certified interpreters. Specifies registry shall allow a health care provider or patient to access registry and schedule appointments with qualified or certified interpreters. Authorizes OHA to establish in rule verification process, four-year subscription mechanism, and fees; and to track Medicaid expenditures for health care interpretation services, including portion spent on administrative costs. Directs OHA to adopt procedures to evaluate the quality of health care interpretation services for interpreters listed on registry. Prohibits interpretation service company from employing or contracting with a health care interpreter not listed on the central registry unless certain conditions are met. Authorizes Bureau of Labor and Industries (BOLI) to establish in rule standards, policies, and processes to hold interpretation service companies accountable. Specifies standards, policies, and processes. Sections 2-3 become operative July 1, 2022. Authorizes OHA and BOLI to take steps before July 1, 2022 to implement section 2; take action on sections 3, 5-9 on or after July 1, 2022. Declares emergency, effective upon passage.

ISSUES DISCUSSED:

- Health care providers' discretion to use untrained health care interpreters (HCIs)
- Professionalization of HCI; HCIs as part of the clinical team
- Lack of enforcement with existing law
- Low reimbursement rates among HCIs
- History of the Oregon Council of Health Care Interpreters
- Different languages, dialects, and interpretive services
- Washington State's HCI program

EFFECT OF AMENDMENT:

Modifies and restructures measure. Removes "health care providers" and "coordinated care organizations" from "whereas statements."

BACKGROUND:

Health care interpreters facilitate communication between patients with limited English proficiency (LEP) and health care providers in-person or over the phone. In 2001, a 25-member Health Care Interpreter Council was established to ensure the development of competent and accessible language access services. House Bill 2419 (2015) modified the membership of the Oregon Council of Health Care Interpreters, clarified qualifications and certification requirements for health care interpreters, and specified that the policy of the Legislative Assembly is to require the use of certified or qualified health care interpreters (HCI) whenever possible, including American

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Sign Language interpreters. According to the American Community Survey (2017), approximately 578,000 Oregonians speak a language other than English, with more than 200,000 individuals having LEP.

The Oregon Health Authority (OHA) oversees and currently offers two levels of credentials for HCIs: qualification and certification, which both require 80 hours of formal training for certification (qualification requires 40 additional hours). The two credentials are valid for three years and require 24 hours of OHA-approved continuing education for renewal. OHA has two approved language proficiency testing centers in Oregon. Trained and certified interpreters provide timely and accurate communications between patients and providers, compared with the use of ad hoc interpreters, such as a patient with family members who act as interpreters. OHA also staffs the 15-member Oregon Council on Health Care Interpreters, which advised the agency on administrative rules and policies for the Health Care Interpreter Program.

House Bill 4115-A directs OHA to design a statewide registry of qualified and certified health care interpreters (HCIs) and requires health care providers to use qualified and certified HCIs.