

## Help Stop Discrimination in Health Care Please Support SB 567A

The Covid-19 pandemic has amplified bias against people with disabilities, ageism, and racism that has long existed in the healthcare system in Oregon. According to the Oregon Health Authority, cases of Covid-19 among Hispanic and Latino/a/x, Black and African American, American Indian and Alaska Native, and Native Hawaiian and Pacific Islander far exceed state population proportions ([COVID-19 REALD Report](#)). Moreover, multiple cases of unlawful disability discrimination in health care have been investigated and substantiated by Oregon's Protection and Advocacy System, Disability Rights Oregon (see [Testimony](#) from Disability Rights Oregon on March 3, 2021). SB 567A is trying to help address this injustice by clarifying unlawful discrimination in health care consistent with current law in Oregon.

SB 567A clarifies existing state and federal protections for Oregonians seeking medical care and ensures that in future pandemics, crisis care standards are developed in ways that do not put BIPOC communities, older adults, disabled people and others at risk of denial of care based on their personal characteristics.

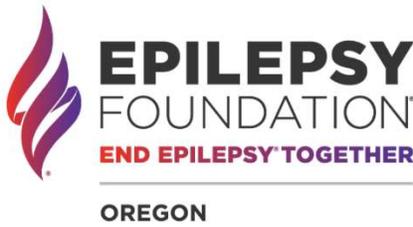
Since 2010, the Affordable Care Act has prohibited discrimination on the basis of race, color, national origin, sex, sexual orientation, gender identity, age, and disability in health programs and activities. Likewise, Chapter 659A of the Oregon Revised Statutes includes broad prohibitions against discrimination in places of public accommodations—including health care settings—and includes the same protected classes. Yet the pandemic has shined a light on how bias in health care too frequently occurs. For example, Oregon's own crisis care guidelines developed by the health care industry in Oregon in 2018 was unlawfully discriminatory by relying on long term survivability and other factors known to be discriminatory on the basis of disability and age. The Office for Civil Rights at the U.S. Department of Health and Human Services has explicitly stated "Resource allocation decisions should be based on individualized assessment of each patient using best available objective medical evidence concerning *likelihood of death prior to or imminently after* hospital discharge" ([Provider Guide](#), emphasis added). Oregon was not alone in codifying bias into health care guidelines—which has prompted the U.S. Health and Human Services Office for Civil Rights to order Utah, Arizona, Indiana, and Tennessee to change their crisis care guidelines to comply with Federal civil rights laws. The Office for Civil Rights has been in contact with Disability Rights Oregon regarding Oregon's guidelines and continues to monitor Oregon.

The language in SB 567A is consistent with language being adopted in documents across the country. When drafting this bill, the sponsors relied on language from the U.S. Health and Human Services Office for Civil Rights directives that support state compliance with Federal civil rights laws. Civil rights guidance from the Federal agency has remained consistent between the Trump administration and the Biden administration. People with disabilities, older adults, and people of color need SB 567A because Federal relief is difficult to obtain. SB 567A improving access to relief in State Courts in the case of unlawful healthcare discrimination. When care is unlawfully being denied we need statutory language in Oregon that will make it easier for the courts to provide urgent injunctive relief to save lives.

A broad coalition of organizations listed below have come together to ask for this change and are supporting SB 567A. Everyone deserves access to the care they need, and no one should be denied care based on race, religion, gender, sexual orientation, gender identity, national origin, age or disability.

We have heard clearly from those who experienced discrimination in health care, and from those who lived in more fear than they needed to because of discriminatory crisis care guidelines, unlawful bias in medical decision-making, and through the stories of how people of color, people with disabilities, and older adults have been treated different because of their ability, skin color, or age. This legislation will respond to those concerns and provide confidence that in the future, all Oregonians will know their right to access care is protected.





**PDX Disability Justice Collective**

**United Seniors of Oregon**