

# House Bill 2087

Introduced and printed pursuant to House Rule 12.00. Pre-session filed (at the request of Governor Kate Brown for Oregon Health Authority)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority to adopt rules to ensure that health care providers use health care interpreters, reimbursed by state, when interacting with medical assistance recipients who have limited English proficiency or who communicate in sign language.

## A BILL FOR AN ACT

1  
2 Relating to health care interpreters; creating new provisions; and amending ORS 413.550 and  
3 413.552.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. Section 2 of this 2021 Act is added to and made a part of ORS chapter 414.**

6 **SECTION 2. (1) As used in this section:**

7 (a) **“Certified health care interpreter” has the meaning given that term in ORS 413.550.**

8 (b) **“Qualified health care interpreter” has the meaning given that term in ORS 413.550.**

9 (2) **The Oregon Health Authority shall adopt rules to ensure that a coordinated care or-**  
10 **ganization, and any other health care provider that is reimbursed for the cost of health care**  
11 **by the state medical assistance program:**

12 (a) **Uses a certified health care interpreter or a qualified health care interpreter when**  
13 **interacting with a recipient of medical assistance, or a caregiver of a recipient of medical**  
14 **assistance, who has limited English proficiency or who communicates in sign language; and**

15 (b) **Is reimbursed for the cost of the certified health care interpreter or qualified health**  
16 **care interpreter.**

17 **SECTION 3. ORS 413.550 is amended to read:**

18 413.550. As used in ORS 413.550 to 413.558:

19 (1) **“Certified health care interpreter” means an individual who has been approved and certified**  
20 **by the Oregon Health Authority under ORS 413.558.**

21 (2) **“Health care” means medical, surgical or hospital care or any other remedial care recognized**  
22 **by state law, including physical and behavioral health care.**

23 (3) **“Health care interpreter” means an individual who is readily able to:**

24 (a) **Communicate with a person with limited English proficiency;**

25 (b) **Accurately interpret the oral statements of a person with limited English proficiency, or the**  
26 **statements of a person who communicates in sign language, into English;**

27 (c) **Sight translate documents from a person with limited English proficiency;**

28 (d) **Interpret the oral statements of other persons into the language of the person with limited**  
29 **English proficiency or into sign language; and**

30 (e) **Sight translate documents in English into the language of the person with limited English**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 proficiency.

2 (4) "Person with limited English proficiency" means a person who, by reason of place of birth  
3 or culture, speaks a language other than English and does not speak English with adequate ability  
4 to communicate effectively with a health care provider.

5 (5) "Qualified health care interpreter" means an individual who has received a valid letter of  
6 qualification from the authority **under ORS 413.558**.

7 (6) "Sight translate" means to translate a written document into spoken or sign language.

8 **SECTION 4.** ORS 413.552 is amended to read:

9 413.552. (1) The Legislative Assembly finds that persons with limited English proficiency, or who  
10 communicate in sign language, are often unable to interact effectively with health care providers.  
11 Because of language differences, persons with limited English proficiency, or who communicate in  
12 sign language, are often excluded from health care services, experience delays or denials of health  
13 care services or receive health care services based on inaccurate or incomplete information.

14 (2) The Legislative Assembly further finds that the lack of competent health care interpreters  
15 among health care providers impedes the free flow of communication between the health care pro-  
16 vider and patient, preventing clear and accurate communication and the development of empathy,  
17 confidence and mutual trust that is essential for an effective relationship between health care pro-  
18 vider and patient.

19 (3) It is the policy of the Legislative Assembly to require the use of certified health care inter-  
20 preters or qualified health care interpreters [*whenever possible*] to ensure the accurate and adequate  
21 provision of health care to persons with limited English proficiency and to persons who communi-  
22 cate in sign language.

23 (4) It is the policy of the Legislative Assembly that health care for persons with limited English  
24 proficiency be provided according to the guidelines established under the policy statement issued  
25 August 30, 2000, by the U.S. Department of Health and Human Services, Office for Civil Rights,  
26 entitled, "Title VI of the Civil Rights Act of 1964; Policy Guidance on the Prohibition Against Na-  
27 tional Origin Discrimination As It Affects Persons With Limited English Proficiency," and the 1978  
28 Patient's Bill of Rights.

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