

SB 584 - Building the Healthcare Interpreter Workforce

Problem

The majority of spoken language healthcare interpreters in Oregon work as independent contractors to for-profit language service companies. These interpreters receive no healthcare and, oftentimes, no mileage reimbursement. In addition, the average healthcare interpreter is compensated between \$18-\$25/Hr, compared to interpreters in Washington State, where interpreters receive \$35-\$40/Hr. Coordinated Care Organizations have also reported that in 2021, the vast majority of appointments that required an interpreter were not filled with an interpreter credentialed by the Oregon Health Authority, noting that the top performing CCOs were able to fill about 30% of their appointments with credentialed Healthcare interpreters, while some regions reported close to filling 0% of appointments with credentialed interpreters or not reporting at all.

In a survey of 78 healthcare interpreters in Oregon, the advocacy group Oregon Interpreters in Action found that 95% of respondents reported a decrease in income and 85% of those who had filed for unemployment during the height of the pandemic. OIA also found that:

- 51% Of interpreters reported struggling to pay bills
- 71% had difficulty applying for unemployment, and 50% reaching the Employment Department
- 29% of interpreters switched to remote interpreting but got paid less
- 43% of interpreters had difficulty accessing PPE
- 32% of Certified and Qualified interpreters said they were not prioritized for appointments
- 22% of interpreters had difficulty accessing healthcare

Background

HB 2359 (2021) directed The Oregon Health Authority to conduct a study of the best model for an online platform for patients and healthcare providers to contract with healthcare interpreters and on how to use state and federal funds to finance the platform to be complete no later than July 1, 2022. SB 584 is the result of that study's findings.

Oregon's health care interpreter laws are based on Title VI of the Civil Rights Act of 1964. Title VI infers that no one may be left out of any program or activity that receives federal funding because of their national origin. This civil rights law prohibits discrimination. The federal Department of Health and Human Services (HHS) and the courts have applied this statute to protect national origin minorities who do not speak English well. Thus, recipients of federal funding must take reasonable steps to ensure that people with limited English proficiency (LEP) have meaningful access to their programs and services.

Oregon is also subject to the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities.

Solution

SB 584 aims to bolster the healthcare interpreter workforce by hosting a state-based platform so that healthcare interpreters can set their own wages while ensuring providers are contracting with OHA-credentialed interpreters.

SB 584 will:

Establish an online portal to stabilize wages and create uniformity

- Direct OHA to construct an online scheduling portal for providers to contract Healthcare Interpreters directly and function as a billing mechanism to pay interpreters.
 - Mandate use of the portal for providers, with exceptions. (Rulemaking under OHA)
 - The portal will be used for Medicaid and Oregon Health Plan appointments only through 2028.
 - Direct OHA to apply for a Medicaid waiver so that Healthcare interpreters could be recognized as Medicaid providers, making them eligible for a federal match.

Establish a Healthcare Interpreter Retention Fund to keep interpreters in the profession

- Direct OHA to administer a Healthcare Interpreter Retention fund

Increase Transparency to ensure that state and federal dollars are being spent appropriately.

- Direct OHA to develop and implement a method to track how state and federal dollars are spent on interpretation services by January 2026.

