Submitter: Matthew Cornett

On Behalf Of:

Committee: Senate Committee On Health Care

Measure: SB1578

I have worked in the language services industry for 15 years and I currently oversee all Interpreter Services (Language Assessment, Quality Assurance, Recruitment, etc.) for Certified Languages International, LLC (a language services company founded and based in Portland, OR).

I laud the effort on the part of the state of Oregon in trying to help ensure that as many healthcare interpreters as possible are competent at a minimum level. I feel that much of my work for CLI aligns with this goal. As I understand it, the proposed bill mandates that all healthcare interpreters will be sourced by healthcare providers via an online scheduling platform that is managed by a non-profit organization selected by the OHA, entirely eliminating the private sector from the business of providing language services in healthcare in the state of Oregon.

Hospitals and medical centers in Oregon rely heavily on 24/7, 365 on-demand access to remote interpreter services. The registry has zero Haitian Creole interpreters listed. CLI is able to consistently connect at least 98.5% of on-demand requests from Oregon-based customers for Haitian Creole in 30 seconds, on average. Most interpreters in Haitian Creole reside in Florida and none are going to invest time or money in training and certification only needed for medical encounters occurring in the state of Oregon--constituting but a small fraction of their income. This being understood, how does the State of Oregon intend to train and recruit qualified interpreters into the registry to serve the recent massive influx of people into the U.S. from Haiti? How does the state of Oregon intend to recruit into any other sudden increase in refugee populations from under-represented minorities in far flung parts of the world? What if a bus-load of tourists from Japan are in an automobile accident? Or, more likely, what if a bus-load of people are simply shipped to us from another state unwilling to provide the needed social services? How disaster-proof is this scheduling and registry solution at a basic level of ratio of Interpreter Resources to worst case scenario potential NELP patients in need of language access? It's not at all, clearly.

The most obvious flaw in the proposed bill, though, is in the amount of risk involved in providing only one option to hospitals and medical centers for provisioning interpreter services. If hospitals and medical centers may only request interpreter services through a state-run online scheduling platform, then what recourse do they have when the inevitable happens and there is an outage? When this software platform breaks due to an unanticipated incompatibility with an OS update? What if a server goes down? A ransomware attack or some other security flaw? The private

market allows all of these hospitals and medical centers to have multiple options for language access from different companies in different parts of the country. If there is an outage or a natural disaster or some other force majeure event with their primary language services provider, they have a list of back-up options at the ready. Redundancy is eliminated when you remove the private market, and this is a huge risk.

The private language services market keeps prices for interpreter services low due to the market pressures of competition. These same market pressures do a number of other things, as well: they ensure a high degree of success in connecting requests on demand (crucial for ER and urgent care); they ensure that robust systems are in place to evaluate interpreter performance and to assess interpreter language ability; they guarantee healthcare providers fast connection times; they ensure that their language services provider has a long list of languages which they support; they afford the hospital an option to choose between multiple agencies, not only 1-3 OHA registry interpreters. As I see it, NELP communities and all Oregonians lose these benefits if SB 1578 is enacted.

Matthew Cornett