



DIRECTOR'S OFFICE  
Office of Equity and Inclusion

John A. Kitzhaber, MD, Governor



January 29, 2014

421 SW Oak Street, Suite 750  
Portland, OR 97204

971-673-1240

971-673-1128

<http://www.oregon.gov/OHA/oei/>

Dear Interested Oregon Council on Health Care Interpreters Applicant,

The Oregon Health Care Interpreter Program (OHCI) works to assure that Limited English Proficient (LEP) persons that need medical attention are not excluded from health care services. To implement this policy at the highest level, the Oregon Council of Health Care Interpreters (OCHCI) was established to assure the provision and sustainability of the Health Care Interpreter law and to guide the work of the OHA Health Care Interpreter Program in the implementation of the law. Oregon Revised Statute 409.615 to 409.62 requires:

- The establishment of policy related to “persons with limited English proficiency”
- Guidelines from Title VI of the Civil Rights Act of 1964 and the 1978 Patient’s Bill of Rights;
- Creation of the Oregon Council on Health Care Interpreters

The 27-member Council consists of consumers, educators, policy makers, and providers of health care and health system/health insurance administrators. Depending on the seat you are applying for, Council members are appointed by the Governor or directors of the Oregon Health Authority and the Department Human Services. Terms are for three years and individuals may be reappointed. Additionally, there are advisory and technical committees you may wish to serve on. There is no compensation, though travel to meetings may be reimbursed and the Council does not accept any contributions.

Included with this letter you will find the OCHCI application, the current roster with vacant seats highlighted, the OCHCI Fact Sheet, and the statute requiring the existence of the Council. If you are interested in applying, please contact April Johnson at

[april.r.johnson@state.or.us](mailto:april.r.johnson@state.or.us) or by phone at 971-673-3389, or Omar Carrillo at [omar.carrillo-tinajero@state.or.us](mailto:omar.carrillo-tinajero@state.or.us) or by phone at 971-673-3359. We look forward to hearing from you!

All the Best,

*April R. Johnson*

April R. Johnson, Health Equity Workforce Manager

Enclosures

## Oregon Council on Health Care Interpreters

The Oregon Council on Health Care Interpreters (OCHCI) is a 25-member Council created by ORS 413.550 to 413.558. The Council advises the Oregon Health Authority on administrative rules and policy standards related to the Health Care Interpreter Program, and implementation of ORS 413.550 and OAR 333-002. The 25 council members are appointed by the Governor, the Director of Oregon Health Authority and the Director of Human Services. The Council meets quarterly and meetings are open to the public.

### Member Composition

Council Seats include:

- Two members from each of the following groups: Consumers; Educators; Policymakers and Administrators; Health Care Providers; Safety Net Clinic Providers; Representatives of hospitals, health systems and health plans
- One representative from each of the following agencies and organizations: The Commission on Asian and Pacific Islander Affairs; The Commission on Black Affairs; The Commission on Hispanic Affairs; The Commission on Indian Services; The International Refugee Center of Oregon; The Oregon Judicial Departments Certified Court Interpreter program; The Commission for Women; and The Institute for Health Professionals of Portland Community College
- Three members from the Oregon Health Authority
- Two members from the Department of Human Services

### Structure

- The term of a member is three years. A member may be reappointed.
- An appointment may be made to replace any member of the council who misses more than two consecutive meetings.
- The council selects one member as chairperson and one member as vice chairperson, for such terms and with duties and powers as the council determines necessary for the performance of the functions of such offices.
- The council may establish advisory and technical committees as it considers necessary to aid and advise the council in the performance of its functions. The council determines the representation, membership, terms and organization of the committees and appoints committee members.
- A majority of the members of the council constitute a quorum for the transaction of business.
- Members of the council are not entitled to compensation, but at the discretion of the Director of the Oregon Health Authority may be reimbursed for actual and necessary travel and other expenses incurred by them in the performance of their official duties.

DEFINED POSITION	FIRST NAME	LAST NAME	ORGANIZATION	EMAIL
OR Judicial Dpt. Court Interpreter Program	Melanie	DeLeon-Benham	OR Judicial Dept., Certified Court Interpreter Program	Melanie.DeLeon-Benham@ojd.state.or.us
The Commission for Women	Megan	Harris-Jacquot	Law Office of Megan Jacquot	meganjacquot@hotmail.com
IRCO	Vanloeun	Lao Ping	Immigrant and Refugee Community Organization	Vanloeunl@mail.irco.org
Interpreter Policy/Administration Experience	Morad	Noury	Center for Intercultural Organizing (CIO)	nuryagdiev@gmail.com
Health Systems Representative	Erin	Neff	Legacy Health	eneff@lhs.org
	Mitchell	Yoder	Providence Medical Group	mitch.yoder@providence.org
Safety Net Clinic				
	Roxana	Ocaranza-Ermisch	Cascades East AHEC	roermisch@cascadehealthcare.org
Educator	Fausto	Pino		Samuel.Pino@salemhealth.org
Health Care Provider (Nurse)	Miriam	Volpin	Nursing	mvolpin@linfield.edu
Health Care Provider (Doctor)				
Educator	Patricia	Wetzel	Portland State University	wetzelp@pdx.edu
Consumer				
The Commission on Asian Affairs				
The Commission on Black Affairs				
The Commission on Hispanic Affairs				
The Commission on Indian Services				
The Institute for Health Professionals of Portland Community College (CLIMB)				
<b>OHA Appointed</b>				
One member with responsibility for administering mental health programs				
One member with responsibility for administering medical assistance programs				
One member with responsibility for				

administering public health programs				
<b>DHS APPOINTED</b>				
One member with responsibility for administering developmental disabilities programs				
One member with responsibility for administering programs for seniors and persons with disabilities				

OHA-OEI Staff

<b>FIRST NAME</b>	<b>LAST NAME</b>	<b>POSITION</b>	<b>EMAIL</b>
<b>April</b>	<b>Johnson</b>	<b>Health Equity Workforce Manager</b>	<b>april.r.johnson@state.or.us</b>
<b>Omar</b>	<b>Carrillo</b>	<b>Health Equity Workforce and Language Access Assistant</b>	<b>omar.carrillo-tinajero@state.or.us</b>
<b>Carol</b>	<b>Cheney</b>	<b>Equity Manager</b>	<b>carol.i.cheney@state.or.us</b>
<b>Tricia</b>	<b>Tillman</b>	<b>Director</b>	<b>tricia.tillman@state.or.us</b>

ORS 409.615-625

OR Statute on Health Care Interpreters

## HEALTH CARE INTERPRETERS

**409.615 Definitions for ORS 409.615 to 409.623.** As used in ORS 409.615 to 409.623:

(1) “Health care interpreter” means a person who is readily able to communicate with a person with limited English proficiency and to accurately translate the written or oral statements of the person with limited English proficiency into English, and who is readily able to translate the written or oral statements of other persons into the language of the person with limited English proficiency.

(2) “Health care” means medical, surgical or hospital care or any other remedial care recognized by state law, including mental health care.

(3) “Person with limited English proficiency” means a person who, by reason of place of birth or culture, speaks a language other than English and does not speak English with adequate ability to communicate effectively with a health care provider. [2001 c.903 §1]

**409.617 Legislative findings and policy on health care interpreters.** (1) The Legislative Assembly finds that persons with limited English proficiency are often unable to interact effectively with health care providers. Because of language differences, persons with limited English proficiency are often excluded from health care services, experience delays or denials of health care services or receive health care services based on inaccurate or incomplete information.

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

(3) It is the policy of the Legislative Assembly that health care for persons with limited English proficiency be provided according to the guidelines established under the policy statement issued August 30, 2000, by the U.S. Department of Health and Human Services, Office for Civil Rights, entitled, “Title VI of the Civil Rights Act of 1964; Policy Guidance on the Prohibition Against National Origin Discrimination As It Affects Persons With Limited English Proficiency,” and the 1978 Patient’s Bill of Rights. [2001 c.903 §2]

**409.619 Oregon Council on Health Care Interpreters.** (1) The Oregon Council on Health Care Interpreters is created in the Oregon Health Authority. The council shall consist of 25 members appointed as follows:

(a) The Governor shall appoint two members from each of the following groups:

(A) Consumers of medical services who are persons with limited English proficiency and who use health care interpreters;

(B) Educators who either teach interpreters or persons in related educational fields, or who train recent immigrants and persons with limited English proficiency;

(C) Persons with expertise and experience in administration or policymaking related to the development and operation of policies, programs or services related to interpreters, and who have familiarity with the rulings of the federal Office for Civil Rights concerning interpreter services for various institutions;

(D) Health care providers, consisting of one physician and one registered nurse, who utilize interpreter services regularly in their practice;

(E) Representatives of safety net clinics that predominantly serve persons with limited English proficiency; and

(F) Representatives of hospitals, health systems and health plans predominantly serving persons with limited English proficiency.

(b) The Governor shall appoint one representative from each of the following agencies and organizations after consideration of nominations by the executive authority of each:

(A) The Commission on Asian Affairs;

(B) The Commission on Black Affairs;

(C) The Commission on Hispanic Affairs;

(D) The Commission on Indian Services;

(E) The International Refugee Center of Oregon;

(F) The Oregon Judicial Department's Certified Court Interpreter program;

(G) The Commission for Women; and

(H) The Institute for Health Professionals of Portland Community College.

(c) The Director of the Oregon Health Authority shall appoint three members including:

(A) One member with responsibility for administering mental health programs;

(B) One member with responsibility for administering medical assistance programs; and

(C) One member with responsibility for administering public health programs.

(d) The Director of Human Services shall appoint:

(A) One member with responsibility for administering developmental disabilities programs; and

(B) One member with responsibility for administering programs for seniors and persons with disabilities.

(e) The membership of the council shall be appointed so as to be representative of the racial, ethnic, cultural, social and economic diversity of the people of this state.

(2) The term of a member shall be three years. A member may be reappointed.

(3) If there is a vacancy for any cause, the appointing authority shall make an appointment to become immediately effective for the unexpired term. The appointing authority may appoint a replacement for any member of the council who misses more than two consecutive meetings of the council. The newly appointed member shall represent the same group as the vacating member.

(4) The council shall select one member as chairperson and one member as vice chairperson, for such terms and with duties and powers as the council determines necessary for the performance of the functions of such offices.

(5) The council may establish such advisory and technical committees as it considers necessary to aid and advise the council in the performance of its functions. The committees may be continuing or temporary committees. The council shall determine the representation, membership, terms and organization of the committees and shall appoint committee members.

(6) A majority of the members of the council shall constitute a quorum for the transaction of business.

(7) Members of the council are not entitled to compensation, but at the discretion of the Director of the Oregon Health Authority may be reimbursed for actual and necessary travel and other expenses incurred by them in the performance of their official duties, subject to ORS 292.495.

(8) The council may accept contributions of funds and assistance from the United States Government or its agencies or from any other source, public or private, for purposes consistent with the purposes of the council.

(9) The Oregon Health Authority shall provide the council with such services and employees as the council requires to carry out its duties. [2001 c.903 §3; 2009 c.595 §253]

**409.620** [1991 c.697 §4; repealed by 1993 c.676 §53]

**409.621 Testing, qualification and certification standards for health care interpreters.** The Oregon Council on Health Care Interpreters shall work in cooperation with the Oregon Health Authority to:

(1) Develop testing, qualification and certification standards for health care interpreters for persons with limited English proficiency.

(2) Coordinate with other states to develop and implement educational and testing programs for health care interpreters.

(3) Examine operational and funding issues, including but not limited to the feasibility of developing a central registry and annual subscription mechanism for health care interpreters.

(4) Do all other acts as shall be necessary or appropriate under the provisions of ORS 409.615 to 409.623. [2001 c.903 §4; 2009 c.595 §254]

**409.623 Rules on procedures for testing, qualification and certification of health care interpreters; fees.** (1) In consultation with the Oregon Council on Health Care Interpreters, the Oregon Health Authority shall by rule establish procedures for testing, qualification and certification of health care interpreters for persons with limited English proficiency, including but not limited to:

(a) Minimum standards for qualification and certification as a health care interpreter, including:

(A) Oral and written language skills in English and in the language for which health care interpreter qualification or certification is granted; and

(B) Formal education or training in medical terminology, anatomy and physiology, and medical ethics;

(b) Categories of expertise of health care interpreters based on the English and non-English skills and the medical terminology skills of the person seeking qualification or certification;

(c) Procedures for receiving applications and for examining applicants for qualification or certification;

(d) The content and administration of required examinations;

(e) The requirements and procedures for reciprocity of qualification and certification for health care interpreters qualified or certified in another state or territory of the United States; and

(f) Fees for application, examination, initial issuance, renewal and reciprocal acceptance of qualification or certification as a health care interpreter and for other fees deemed necessary by the authority.

(2) Any person seeking qualification or certification as a health care interpreter must submit an application to the authority. If the applicant meets the requirements for qualification or certification established by the authority under this section, the authority shall issue an annual certificate of qualification or a certification to the health care interpreter. The authority shall collect a fee for the issuance of the certificate of qualification or the certification and for any required examinations in the amount established pursuant to subsection (1) of this section.

(3) The authority shall work with other states to develop educational and testing programs and procedures for the qualification and certification of health care interpreters.

(4) In addition to the requirements for qualification established under subsection (1) of this section, a person may be qualified as a health care interpreter only if the person:

(a) Is able to fluently interpret or translate the dialect, slang or specialized vocabulary of the non-English language for which qualification is sought;

(b) Has had at least 60 hours of health care interpreter training that includes anatomy and physiology and concepts of medical interpretation; and

(c) Has had practical experience as an intern with a practicing health care interpreter.

(5) A person may not use the title of “qualified health care interpreter” unless the person has met the requirements for qualification established under subsections (1) and (4) of this section and has been issued a valid certificate of qualification by the authority.

(6) In addition to the requirements for certification established under subsection (1) of this section, a person may be certified as a health care interpreter only if:

(a) The person has met all the requirements established under subsection (4) of this section; and

(b) The person has passed written and oral examinations required by the authority in English, in the non-English language the person wishes to translate and in medical terminology.

(7) A person may not use the title of “certified health care interpreter” unless the person has met the requirements for certification established under subsections (1) and (6) of this section and has been issued a valid certification by the authority. [2001 c.903 §5; 2009 c.595 §255]

**409.625 Moneys received credited to account in Oregon Health Authority Fund.** All moneys received by the Oregon Council on Health Care Interpreters under ORS 409.615 to 409.625 shall be paid into the Oregon Health Authority Fund and credited to an account designated by the authority. Such moneys shall be used only for the administration and enforcement of the provisions of ORS 409.615 to 409.625. [2001 c.903 §7; 2009 c.595 §256]