

# SENATE BILL REPORT

## SB 6684

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As Reported By Senate Committee On:  
Health & Long-Term Care, February 07, 2008

**Title:** An act relating to language access services in health care.

**Brief Description:** Requiring language access services for persons with limited English proficiency in health care and insurance matters.

**Sponsors:** Senators Shin, Berkey, Regala, Kohl-Welles and McAuliffe.

**Brief History:**

**Committee Activity:** Health & Long-Term Care: 2/06/08, 2/07/08 [DPS-WM, w/oRec].  
Ways & Means: 2/11/08.

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### SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

**Majority Report:** That Substitute Senate Bill No. 6684 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Fairley, Kastama and Kohl-Welles.

**Minority Report:** That it be referred without recommendation.

Signed by Senators Carrell and Marr.

**Staff:** Mich'l Needham (786-7442)

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### SENATE COMMITTEE ON WAYS & MEANS

**Staff:** Steve Jones (786-7440)

**Background:** Estimates from the 2006 Washington State Population Survey show over 300,000 Washington state residents indicated English is not the primary language for their household. Estimates from the U.S. Census Bureau's 2006 American Community Survey indicate approximately 16.6 percent of Washington residents speak a language other than English as the primary language in the home.

Title VI of the Civil Rights Act of 1964, and subsequent Executive Order 13166, require federally conducted and federally funded programs ensure persons with limited English proficiency have meaningful access to services. The Washington state medical assistance programs and the State Children's Health Insurance Program (SCHIP) provided through the

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Department of Social and Health Services (DSHS) reimburse health care providers for interpreter services for their enrollees.

**Summary of Bill (Recommended Substitute):** The Office of Insurance Commissioner (OIC) must conduct a study of language access problems encountered by consumers who purchase health insurance. The study must include an analysis of the health care problems encountered by consumers with limited English proficiency; barriers to understanding insurance, costs and dispute resolution; the feasibility of requiring health care insurers to provide translation and communication assistance; and the feasibility of OIC offering interpretation and translation services for consumer advice and dispute resolution assistance. The recommendations are due January 1, 2009.

**EFFECT OF CHANGES MADE BY HEALTH & LONG-TERM CARE COMMITTEE (Recommended Substitute):** The requirement for insurance carriers, the Public Employees Benefits Board plans, and the Basic Health program to provide translation and language access services is removed. The study of language access services remains.

**Appropriation:** None.

**Fiscal Note:** Available.

**Committee/Commission/Task Force Created:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony on Original Bill:** PRO: This is an important area for our non-English speaking population. Quality medical care is compromised if there can be no communication with the provider and the patient. Qualified translators are very important to ensure complicated medical terminology and critical health information and instruction can be accurately relayed. In a recent emergency room experience, the patient had to rely on her seven year old daughter to translate the medical information, to the degree she could do that, and important instructions were not relayed, compromising her health. The variety of patients and language issued encountered at Harborview raises a technical challenge. It is not always possible to find resources to translate for all languages, but it is important to have a systemic approach to accommodating these needs. The Institute of Medicine has identified clear communication as one of the important steps for eliminating medical errors. These translation services are critical life and death issues for many. The physicians are bearing the burden of trying to provide translation services now and we support the concept of having insurance pay providers for this service. DSHS has provided adequate reimbursement for this service and provides a model to look to.

CON: This is the wrong approach to an important issue. The bill is too simple and does not address the complexity of providing for over 200 languages recognized by the Census Bureau. It is unclear how much needs to be translated, especially in regard to all the printed materials. This could be very difficult and very expensive to implement.

**Persons Testifying:** PRO: Senator Shin, prime sponsor; Diana Rashid, Washington Community Action Network; Irma Ledozina, Washington Community Action Network; Jackie Der, Harborview Medical Center; Lori Buchsbaum, Northwest Health Law Advocates;

Len McComb, Washington State Hospital Association; Susie Tracy, Washington State Medical Association.

CON: Mel Sorenson, Americas Health Insurance Plans and Washington Association of Health Underwriters; Leanne Gassaway, Americas Health Insurance Plans.