



HAWAII HEALTH SYSTEMS
C O R P O R A T I O N

"Quality Healthcare For All"

SENATE COMMITTEE ON HUMAN SERVICES

March 23, 2021
3:10 p.m.
Hawaii State Capitol
Via Videoconference

**Testimony Providing Comments on
S.C.R. 229/S.R.189
REQUESTING THE HAWAII HEALTH SYSTEMS CORPORATION TO CONVENE A
TASK FORCE TO DEVELOP BETTER MISSION-DRIVEN HIRING AND TRAINING
OF INTERPRETERS EMPLOYED AT ITS FACILITIES.**

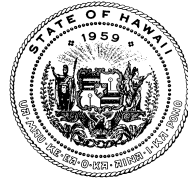
Linda Rosen, M.D., M.P.H.
Chief Executive Officer
Hawaii Health Systems Corporation

On behalf of the Hawaii Health Systems Corporation (HHSC) Corporate Board of Directors, thank you for the opportunity to present testimony **providing comments on S.C.R. 229/S.R. 189.**

HHSC supports competent and meaningful language access as an essential component in all health services. HHSC strives to provide individuals with Limited English Proficiency (LEP) with meaningful access and an equal opportunity to participate in health services, activities, and programs. However, *HHSC provides language access through specialized contracted services and does not employ or train interpreters.* As the purpose of this measure is to develop better hiring and training of interpreters, HHSC submits that another agency, specifically the State Office of Language Access (OLA), is the more appropriate agency to lead this effort.

HHSC facilities are in compliance with Section 1557 of the Affordable Care Act and 45 C.F.R., Part 92 (2016), and Chapter 321C, Hawaii Revised Statutes, providing required interpretation services from contracted providers. These are generally provided by telephonic services or through MARTII services. MARTII stands for My Accessible Real-Time Trusted Interpreter that is a HIPAA-approved, video, and audio wireless connection to a skilled, certified medical interpreter. HHSC facilities use a video monitor for this face-to-face communication. These services are timely and effective, especially in an emergency health situation. Off-site interpretation services are used by all hospitals as the maintenance of employed on-site certified medical interpreters in all languages is cost prohibitive.

HHSC understands that while our services for individuals are compliant there are still barriers to equal healthcare for individuals with LEP. While we would like to see improvements, HHSC is an unlikely agency to lead these efforts which appear to be within the scope of OLA's mission.



STATE OF HAWAII
DEPARTMENT OF HEALTH
OFFICE OF LANGUAGE ACCESS
1177 Alakea Street, Room B-100
Honolulu, HI 96801-3378
doh.ola@doh.hawaii.gov

APHIRAK BAMRUNGRUAN
EXECUTIVE DIRECTOR

Testimony COMMENTING on SCR 229/ SR189

REQUESTING THE HAWAII HEALTH SYSTEMS CORPORATION TO CONVENE A TASK FORCE TO DEVELOP BETTER MISSION-DRIVEN HIRING AND TRAINING OF INTERPRETERS EMPLOYED AT ITS FACILITIES.

SENATOR JOY A. SAN BUENAVENTURA, CHAIR
SENATE COMMITTEE ON HUMAN SERVICES

Hearing Date: 3/23/2021

Room Number: Via Videoconference

1 **Agency's Position:** The Office of Language Access (OLA) appreciates the intent of the Senate
2 Concurrent Resolution 229/ Senate Resolution 189, as it requests the Hawaii Health Systems
3 Corporation (HHSC) to convene a task force to develop better mission-driven hiring and training
4 of interpreters employed at its facilities, and offers the following comments.

5 **Purpose and Justification:** The agency notes that the aspirational and exploratory goal of both
6 resolutions are in line with the mission of OLA which is to address the language access needs of
7 Limited English Proficient (LEP) persons. OLA's task is to provide technical assistance and to
8 coordinate resources to reduce the burden of meeting language access obligations. OLA is
9 charged with providing oversight, central coordination, and technical assistance to all state and
10 state-funded agencies in their implementation of language access compliance.

11 OLA would like to note that covered entities have flexibility to determine the mix of
12 language assistance services that they provide, whether that be bilingual staff, staff interpreters,
13 contractors, telephone or video conferencing, or community volunteers, but must ensure the
14 quality and accuracy of such services. Thus, OLA would defer to HHSC to determine which
15 language assistance services would be most appropriate.

16 Furthermore, OLA does not have health care workforce and/or facility expertise to chair
17 this taskforce that would make the task force meaningful. Nevertheless, OLA is willing to

- 1 participate and is committed to collaborating with HHSC and other covered entities to ensure
- 2 that language access trainings are available and align with their operation.
- 3 Thank you for the opportunity to submit testimony on these resolutions.