

## **Atlantis Community, Inc. (ACI)**

Center for Independent Living

Denver, Colorado

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### **Written Testimony in Support of HB26-1109**

Senate Health & Human Services Committee

April 23, 2026

**Submitted by:** Brian Grewe, Executive Director

**Organization:** Atlantis Community, Inc. (ACI)

**Address:** 201 S. Cherokee St. Denver, CO 80223

**Phone:** 303-733-9324

**Email:** briangrewe@atlantiscommunity.org

**Position:** SUPPORT

#### **Introduction**

Atlantis Community, Inc. (ACI) is a Center for Independent Living (CIL) serving the Denver metro area and seven surrounding counties. We are a cross-disability, consumer-controlled organization that provides independent living services to people with disabilities, including a significant number of Deaf, hard of hearing, and DeafBlind consumers. ACI submits this testimony in strong support of HB26-1109.

American Sign Language is a recognized, complete language with its own grammar, syntax, and structure. For Deaf and hard of hearing individuals who use ASL, access to a qualified interpreter is not a courtesy- it is the foundation of their ability to participate fully in healthcare, legal proceedings, public benefits, housing, and everyday life. Language access rights are only meaningful when the people facilitating that access are qualified to do so accurately and ethically. When they are not, the consequences fall entirely on the consumer.

#### **Why ACI Supports HB26-1109**

HB26-1109 would commission an independent study to assess whether Colorado's Deaf, hard of hearing, and DeafBlind consumers are adequately protected when accessing sign language interpreting services. ACI strongly supports this bill because our consumers regularly face situations where interpreter quality, accountability, and consumer choice are insufficient- and there is currently no clear or consistent pathway to file a complaint or seek recourse, regardless of whether the interpreter is certified or not.

#### **The Certification and Accountability Gap in Colorado**

Colorado does not require a state license or any mandatory credential for sign language interpreters in community settings. Approximately 30 states have licensure requirements- Colorado is not one of them. Anyone can work as a community interpreter in Colorado with no license, no state credential, and no state oversight whatsoever. For a community whose primary language is ASL and who depends on interpreters to access critical systems, this gap is not a technicality- it is a direct barrier to equitable participation in society.

RID certification is the most widely recognized professional credential in the field, but it is entirely voluntary. Even for interpreters who do hold RID certification, the only formal complaint avenue is RID's Ethical Practices System (EPS)- a national process that can take six to eight months to reach resolution, requires complainants to be named, and can only be initiated against interpreters who are RID members. If an interpreter is not RID-certified, the EPS complaint cannot be processed at all.

This creates two tiers of accountability failure. For certified interpreters, the only recourse is a slow, national process with limited local reach. For non-certified interpreters- who face no state licensing requirement and hold no voluntary credential- there is no accountability pathway at all. No state body. No complaint process. No enforcement. Colorado consumers have no neutral, state-level avenue to report concerns about either group.

Colorado has narrow exceptions for legal settings, which require a credential through the Colorado Division for the Deaf, Hard of Hearing, and DeafBlind (CCDHHDB), and K-12 educational interpreters have their own requirements through the Colorado Department of Education. But for the vast majority of interpreter interactions- medical appointments, benefits navigation, community services, housing- there is no state floor, no minimum standard, and no accountability structure.

## **What We See in Our Work**

ACI has worked directly with Deaf consumers who have experienced real harm as a result of this accountability gap. The following situations reflect patterns we see in our work.

First, we have supported a consumer for over a year through a complex legal process. During this time, there were appointments where the assigned interpreter was not qualified for the setting, which led to miscommunication and delays with real consequences. When the consumer tried to address the issue, the burden fell entirely on them- they had to educate the requesting entity about interpreter standards, attempt to report to the interpreting agency, and file with RID. Nothing came of any of it. A consumer already navigating a difficult legal situation was left to carry the weight of a broken accountability system on top of everything else.

Second, a consumer reported that an interpreter assigned to a medical appointment overstepped their role by speaking on the consumer's behalf rather than facilitating communication- a clear violation of the NAD-RID Code of Professional Conduct. The consumer attempted to file a complaint through RID's EPS. Nothing came of it. As

described above, this process is slow, requires the complainant to be named, and only applies to RID members. Consumers navigating a complaint like this have no state-level support, no neutral body to turn to, and no guarantee of any outcome.

Third, ACI is aware of multiple situations where Deaf community members reported concerns about specific interpreters directly to interpreting agencies. In each case, no meaningful action was taken. When agencies are the sole point of accountability for interpreters they assign and profit from, and when there is no state-level oversight to escalate to, consumers are left with nowhere to go.

Across all of these situations, the pattern is the same: the burden of accountability falls on the consumer who was harmed, and the system offers no meaningful follow-through. This is not sustainable. Colorado needs a standardized, state-level process that establishes a minimum floor for interpreter accountability- certified or not- and gives Deaf consumers a clear, accessible, and neutral pathway to report concerns and expect results.

### **Our Ask**

Atlantis Community, Inc, urges the Senate Health & Human Services Committee to advance HB26-1109. Deaf, hard of hearing, and DeafBlind Coloradans deserve to know what protections exist, where the gaps are, and what improvements are needed. Colorado is one of roughly 20 states with no interpreter licensure requirement. Recognizing ASL as a full language means nothing in practice if the people facilitating that access are not held to a standard. This study is a critical first step toward establishing real accountability- for certified and non-certified interpreters alike- and ensuring that consumers who rely on communication access can trust the system meant to serve them.

Respectfully submitted,

**Brian Grewe**

Executive Director

Atlantis Community, Inc. (ACI)

[briangrewe@atlantiscommunity.org](mailto:briangrewe@atlantiscommunity.org) | 303-733-9324

# Written Testimony in Support of HB26-1109

Senate Health & Human Services Committee

April 23, 2026

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**Submitted by:** Amelia Smith

**Phone:** 303-907-8884

**Email:** amelizabethsmith@gmail.com

**Position:** SUPPORT

I am Deaf. I have been Deaf since birth. American Sign Language is my native language- it is how I think, how I connect, and how I move through the world. I am writing this testimony as a Colorado resident and as a Deaf person who has lived the exact gaps this bill seeks to address. This is not a policy position for me. It is my daily reality.

I navigate the world using interpreters, phone notes, live transcription apps, and whatever tools are available to me in a given moment. I am someone who holds a professional position that requires clear communication, leadership, and trust. I supervise people. I make decisions. I am responsible for outcomes. In every professional setting I enter, I depend on an interpreter to represent me fully and accurately- my words, my tone, my intent. That is not a small thing. Transparency and authentic representation are not just preferences for me- they are the foundation of every professional relationship I have.

And yet I have sat in meetings- with colleagues, with people I lead, with people I serve- where an unqualified or inattentive interpreter missed information, overstepped their role, or failed to convey what I was saying accurately. In those moments, my credibility and reliability were brought into question. Not because of anything I said or did, but because the person responsible for carrying my voice did not do their job. That is not a reflection of who I am- but it becomes one anyway, because the people in the room only know what the interpreter conveys.

I have pulled out my phone and typed what I wanted to say mid-conversation just to make sure my words landed as I intended. I have used live transcription to fill in gaps when I could tell something was being missed. These are workarounds I have built out of necessity- not because I lack knowledge or confidence, but because I cannot always trust that the interpreter in the room will represent me wholly. For someone in a position where credibility and relationships matter, that is a serious and ongoing harm.

I have also experienced interpreters who overstepped their boundaries- speaking on my behalf, inserting their own words, or making decisions about what to convey and what to leave out. That is a violation. An interpreter's role is to facilitate communication, not to shape it. When that line is crossed, it does not just affect the moment- it affects how

people perceive me, the trust I am trying to build, and my ability to show up as myself in my own life.

Every Deaf person deserves to be represented fully and authentically- regardless of their profession, their setting, or the stakes of the moment. When an interpreter does not meet the standard the moment requires, it is not a minor inconvenience. It is a violation of that person's right to be heard on their own terms. It is a human rights issue. And right now, in Colorado, there is no state-level accountability structure, no licensing requirement for community interpreters, and no neutral complaint process when something goes wrong. People like me are left with no recourse and no voice.

HB26-1109 is a necessary first step. I urge the committee to advance this bill so that Colorado can begin to understand the full scope of this gap and build a system that actually protects the people who depend on communication access to live, work, and participate fully in this state.

Respectfully submitted,

**Amelia Smith**

[amelizabethsmith@gmail.com](mailto:amelizabethsmith@gmail.com) | 303-907-8884 (text)

To Stewart, Joseph, and Danielson,

My name is Pamela Macias. I am representing myself, as a Deaf community member. I am writing to express my support for the proposed bill, HB26-1109 addressing interpreter access, quality, and accountability in Colorado.

I fully support that we need data to best improve the system for regulating sign language interpreters as to meet the needs of the Deaf, Hard of Hearing, and DeafBlind community. While certification is often treated as the primary standard, it does not consistently guarantee quality or accountability in practice. I personally had certified interpreters that provide inadequate services. I have to work as twice to make sure I have the specific interpreter that matches what I need for my work or the topic I am covering. There are several areas such as legal, education, and so on that some interpreters may be best suited and some may not—there is no oversight over this.

We need comprehensive data of this to identify what needs to improve. There is limited information available on interpreter quality and access across key settings, including education, healthcare, legal systems, and public services. As a professor and researcher, such data is critical to best support the Deaf, Hard of Hearing, and DeafBlind community-- evaluating the current system and exploring more accessible and equitable processes. The bill, Sign Language Consumer Protection Study, creates an opportunity to center lived experiences of Deaf, Hard of Hearing, and DeafBlind individuals.

Thank you for your time and consideration. I welcome any questions you may have.

Sincerely,

Pamela Macias

Community Member

(970) 235-0838

Senate Health & Human Services

04/23/2026

HB26-1109 Sign Language Consumer Protection Study

Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Kali Janda  For  themselves	<p>As an NIC Certified American Sign Language interpreter in Colorado, I would like to show my tremendous support for HB26-1109. Our profession needs appropriate structures in place to ensure appropriately skilled interpreters are doing the critical work of interpreting Deaf, Deaf Blind, Deaf Disabled and Hard of Hearing people's appointments, ER visits, job interviews, court appearances, and so on. This study is a terrific first-step to discovering and highlighting the severe need for increased protections for the Deaf community. As Colorado is currently operating, without guardrails, licensure, or proper reporting channels for harm or malpractice, the Deaf community suffers. ASL interpreters hold substantial privilege, often the only person in the room with access to both languages, and an unqualified/underqualified "signer" can quietly abuse this power when unchecked. The interpreting profession needs regulation, and I would be thrilled to be practicing under a proper license and would pursue that as soon as it became available. The Deaf community deserves access to communication from properly vetted professionals. Thank you for your time and thoughtfulness toward improving the lives of Deaf Coloradans and the ASL interpreting profession.</p>
River Frank  For  themselves	<p>I am writing in strong support of HB26-1109 - Sign Language Consumer Protection Study. Access to qualified, certified sign language interpreters is essential to ensuring safety, fairness and equal access in healthcare, legal and public service settings for Deaf, Hard of Hearing, and DeafBlind individuals.</p> <p>In my own experience, I have seen how miscommunication in healthcare settings can lead to serious consequences, including situations where I was nearly prescribed medication based on inaccurate interpretation. While individuals may have good intentions when interpreting, lack of formal training in interpreting ethics, medical terminology and accuracy can result in misunderstandings that directly impact diagnosis and care decisions.</p>

	<p>This issue extends beyond healthcare. In court settings, access to qualified interpreters is a matter of due process and fundamental fairness. Deaf individuals must be able to fully understand legal proceedings, communicate effectively with counsel and make informed decisions about their own cases. Without certified interpreters, even small errors in interpretation can alter legal meaning and compromise an individual’s rights and outcomes.</p> <p>Unfortunately, many Deaf individuals continue to rely on unqualified interpreters, including family members, bilingual staff or individuals who claim to know sign language without professional training. In both medical and legal environments, this creates significant risk and undermines equal access to critical services.</p> <p>Certified ASL interpreters are trained not only in language fluency, but also in interpreting ethics, confidentiality, cultural competency, and accurate rendering of complex medical and legal information. Their role is essential in providing Deaf individuals with equitable access to communication across all systems.</p> <p>HB26-1109 is an important step toward addressing these gaps by studying consumer protection and improving accountability in sign language interpreting services. This work is necessary to protect Deaf consumers from harm and to treat access to qualified interpreters as a matter of safety, fairness and civil rights - not convenience.</p> <p>I strongly urge support for this bill.</p>
<p>Sheryl Emery  For themselves</p>	<p>Dear Members of Health &amp; Human Services:</p> <p>I write in strong support of HB26-1109 to ensure meaningful access, consumer protection, and civil rights for deaf and hard of hearing Coloradans.</p> <p>Colorado requires certification for interpreters, but certification alone does not ensure competency, safety, or ethical practice. Without clear standards and accountability, both deaf consumers and professionals remain at risk.</p> <p>Under the current system, an interpreter with only basic-level certification—such as a BEI Basic credential—may be assigned to complex, high-stakes situations like major heart surgery. A novice</p>

	<p>interpreter may lack the specialized vocabulary and experience required in medical settings, putting both patient and provider at risk.</p> <p>Certification systems themselves vary widely. The Registry of Interpreters for the Deaf has approximately 14-17 certification categories, the National Association of the Deaf has 4, and BEI has 3 (Basic, Intermediate, Advanced). Yet in Colorado, there is little clarity on what each level qualifies an interpreter to do.</p> <p>Ethical concerns are also unaddressed. Should someone with a financial crimes conviction interpret for vulnerable seniors managing estates? Should someone with a child exploitation conviction interpret during a child's emergency medical exam? Current law offers little guidance or protection.</p> <p>I have seen these issues firsthand. While helping draft interpreter regulations in Michigan, these exact concerns arose. Michigan implemented standards that improved accountability, clarified roles, and strengthened consumer protection.</p> <p>HB26-1109 provides Colorado the opportunity to establish clear standards, reduce risk, and lead nationally in protecting civil rights through quality interpreting services.</p> <p>I urge your support.</p>
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**SENATE HEALTH & HUMAN SERVICES**

**COLORADO ASSOCIATION OF THE DEAF**

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April 23, 2026

**Senate Committee on Health & Human Services**

Colorado General Assembly

200 E Colfax Avenue, Denver, CO 80203

**RE: HB26-1109 — Sign Language Consumer Protection Study — SUPPORT WITH AMENDMENT**

Chair Mullica and Members of the Committee,

Thank you for the opportunity to present to you today. My name is Jake Pfau-Martinez. I am representing the Colorado Association of the Deaf, and I am here to support HB26-1109 with one amendment, the language of which is attached at the end of this testimony.

I am Deaf. I am a Coloradan. I serve as President of the Colorado Association of the Deaf (CAD). Founded in 1904 and incorporated in 1948, CAD is the oldest statewide advocacy organization representing Deaf Coloradans who use American Sign Language.

**Language access is a language justice, not a courtesy.**

Every day in Colorado, Deaf people walk into hospitals, courtrooms, schools, and workplaces and are handed an interpreter whose competence no one has verified. There is no state license, no enforceable standard of practice, and no interpreter-specific grievance or disciplinary process. When the interpretation fails, Deaf Coloradans bear the cost. Our community has long reported harms ranging from medical misdiagnoses to lost custody hearings, from missed educational opportunities to wrongful terminations, each traceable to an inadequate, unqualified, or unaccountable system. Hearing institutions face little consequence. This is a civil rights failure hiding inside a workforce gap.

Colorado is one of a shrinking minority of states that does not regulate the sign language interpretation profession. That is not neutrality. That is a policy choice, and it is a choice that places the burden of quality control on the very people least able to

enforce it: Deaf consumers who, by definition, cannot independently verify the accuracy of the interpretation they depend on to access their own lives.

**Colorado is behind. Our neighbors are ahead.**

A state-by-state review of American Sign Language interpreter regulation, compiled by the Registry of Interpreters for the Deaf and the Nationwide Interpreter Resource, reveals that Colorado is among a diminishing minority of states with no state-level interpreter licensure. Roughly 20 states require full licensure to practice community sign language interpretation; several more require registration or state certification; and additional states require credentials specifically for educational, legal, or medical settings. Maryland launched its licensure program in January 2025. Oregon refined its framework in the 2025 legislative session. Maine is currently advancing further amendments in its 132nd Legislature.

Most relevant to this Committee: Colorado is surrounded by states that have already acted. New Mexico, Nebraska, and Arizona all require interpreter licensure. Utah and Texas require state-recognized certification. Only Kansas, Oklahoma, and Wyoming match Colorado’s current unregulated posture, and Wyoming requires permitting for K-12 educational interpreters. A Deaf Coloradan who crosses a state line in almost any direction enters a jurisdiction with stronger accountability mechanisms than their home state provides.

**Regional Comparison: ASL Interpreter Regulation**

State	Regulatory Status	Mechanism
Arizona	Licensure required	Commission for the Deaf & Hard of Hearing licensure
Nebraska	Licensure required	Commission for the Deaf & Hard of Hearing licensure
New Mexico	Licensure required	Commission for Deaf & Hard of Hearing licensure
Texas	State certification	Board for Evaluation of Interpreters (BEI)
Utah	State certification	Utah Interpreter Program (RID required)
Wyoming	Partial (K-12 only)	Permit required for educational interpreters
<b>COLORADO</b>	<b>No regulation</b>	<b>None at the state level</b>
Kansas	No regulation	Registration only
Oklahoma	No regulation	None at the state level

*Sources: Registry of Interpreters for the Deaf (RID) State-by-State Regulations; Nationwide Interpreter Resource, 2024.*

This is not a question of whether interpreter regulation is feasible, affordable, or politically viable. It is. It has been done. The evidence from other states is substantial and can be drawn upon directly. The question HB26-1109 asks is what form regulation should take in Colorado, grounded in Colorado-specific data about Colorado's Deaf, hard-of-hearing, and DeafBlind community. That is the correct question, and this bill is the correct vehicle to answer it.

The comparative research provision in HB26-1109 reflects this reality. The bill requires the third-party researcher to review the regulation in states with long-standing, recently enacted, and recently modified interpreter regulations. That provision is sound. It is precisely the evidence Colorado needs to design a regulatory framework that learns from what has worked elsewhere and avoids what has not.

**This is lived experience, not abstract policy.**

In my role as President of CAD, I regularly receive accounts from Deaf Coloradans across the state. The patterns are consistent. A Deaf patient in an emergency room receives interpretation from someone who describes themselves as qualified but whose skill does not match the clinical stakes. A Deaf parent sits through an IEP meeting where the interpretation flattens the nuance they need to advocate for their child. A Deaf employee navigates a termination or a disciplinary conversation through an interpretation they cannot independently verify. A Deaf Coloradan in a rural county has limited access to interpreters at all, and limited recourse when what they receive is inadequate.

I am Deaf. These patterns are not abstractions to me. They are the texture of daily life for members of the community CAD represents, and they are the reason I am before this Committee today. Deaf Coloradans do not have the option of walking out of a courtroom or an emergency room because the interpreter is inadequate. In those moments, we are dependent on a workforce that Colorado has chosen not to credential. When the interpretation fails, the failure becomes ours: the wrong diagnosis, the missed court date, the meeting conducted in approximations, the opportunity lost to a misrendered answer. The harm is real. Accountability is absent.

HB26-1109 begins to change that. It commits Colorado to asking the right questions with the right people. But the answers will only be as credible as the researchers who produce them.

## **HB26-1109 is the necessary first step.**

CAD supports HB26-1109 because Colorado cannot responsibly move to licensure without the evidence base that this bill will produce. The Department of Regulatory Agencies' sunrise review process requires documented proof of public harm. This bill gathers that proof through a structured, community-centered study, without drawing from the General Fund.

We commend the sponsors for including language that many study bills omit. HB26-1109 requires interviews conducted accessibly with certified ASL interpreters, interviewers with Deaf cultural competence, and intentional representation across rural and urban communities, racial and ethnic backgrounds, DeafBlind and late-deafened experiences, and consumers of both in-person and remote video interpretation. These are not ornamental provisions. They are the difference between a study that reflects our community and a study that merely studies us.

## **One amendment is essential: the research firm must be Deaf-led or in formal partnership with Deaf-led organizations.**

Every safeguard this bill contains can be technically satisfied by a hearing-led research firm with no meaningful connection to the Deaf community. Interviews can be scheduled. Interpreters can be hired. Demographic boxes can be checked. And the resulting report can still center hearing administrators, treat Deaf consumers as data subjects rather than experts, and recommend regulation so weak it protects no one.

This pattern is well documented in disability policy research. Studies designed without disabled leadership routinely produce recommendations that are administratively convenient but substantively hollow. Nothing about us, without us, is a slogan. It is the minimum threshold for research that leads to real accountability.

CAD respectfully requests that the Committee adopt the amendment set forth at the end of this testimony, which would require the contracted third-party researcher to be either:

- A Deaf-led research organization or firm; or
- A research firm operating under a formal, documented partnership with at least one Deaf-led organization with substantive decision-making authority over research design, interview protocols, and interpretation of findings.

Such organizations exist. The National Deaf Center on Postsecondary Outcomes, Gallaudet University research programs, and multiple Deaf-owned consultancies have the Deaf leadership and research infrastructure to conduct rigorous work in this domain.

Requiring their involvement does not narrow the field to the point of infeasibility. It narrows it to the point of credibility.

### **What is at stake?**

The report this bill produces will shape Colorado interpreter regulation for the next decade. If the research team understands Deaf culture, ASL linguistics, and the structural dynamics that produced our current unregulated marketplace, the report will move licensure forward. If it does not, Colorado will spend \$350,000 in Telephone Disability Access Surcharge revenue to produce a document that delays reform rather than enabling it.

The Deaf community of Colorado has waited long enough. We are asking this Committee not to settle for a study that is merely compliant. We are asking for a credible study.

### **Conclusion and the ask.**

CAD supports HB26-1109. The bill is a necessary first step toward the consumer protections Deaf, hard-of-hearing, and DeafBlind Coloradans have needed for decades, and it does so without drawing from the General Fund. The sponsors have drafted it with genuine engagement of community access considerations, and we commend them for that.

On behalf of the Colorado Association of the Deaf, I respectfully ask this Committee to take three actions:

- Vote YES on HB26-1109.
- Adopt the amendment attached to this testimony, requiring the contracted third-party researcher to be Deaf-led or operating in formal partnership with a Deaf-led organization.
- Commit to engaging CAD as a consulted stakeholder throughout the contract solicitation and research design process in 2026 and 2027.

We thank the sponsors, Representatives Joseph and Stewart, and Senator Danielson, for advancing a bill that takes our community's concerns seriously. And we thank this Committee for your time, your attention, and your service to all Coloradans, including those of us who communicate in American Sign Language.

Thank you for your time and consideration.

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## PROPOSED AMENDMENT TO HB26-1109

*Submitted by the Colorado Association of the Deaf*

### Summary of Amendment

*This amendment adds a qualification requirement for the third-party researcher contracted to conduct the study. It ensures the contracted researcher is either a Deaf-led organization or operates in formal partnership with a Deaf-led organization that holds substantive decision-making authority over research design, interview protocols, and interpretation of findings. This amendment does not change the scope, timeline, fiscal impact, or required parameters of the study. It strengthens the study's credibility by requiring that Deaf community expertise be embedded in its leadership, not merely consulted at its margins.*

### Amendment Text

*Amend HB26-1109 (Reengrossed), page 3, line 15, by inserting a new subparagraph before the text reading "WHICH REQUIRED PARAMETERS MUST INCLUDE" as follows. New material is shown in CAPITAL LETTERS, consistent with Colorado legislative drafting conventions.*

In Colorado Revised Statutes, 26-21-106 (10) (a), as added by this act, insert:

**(I.5)** THE THIRD-PARTY RESEARCHER CONTRACTED PURSUANT TO THIS SUBSECTION (10) SHALL BE EITHER:

**(A)** A RESEARCH ORGANIZATION OR FIRM THAT IS DEAF-LED, MEANING AN ORGANIZATION IN WHICH A MAJORITY OF THE EXECUTIVE LEADERSHIP, BOARD, OR CONTROLLING GOVERNANCE BODY CONSISTS OF INDIVIDUALS WHO ARE DEAF, HARD OF HEARING, OR DEAFBLIND; OR

**(B)** A RESEARCH ORGANIZATION OR FIRM OPERATING UNDER A FORMAL, DOCUMENTED PARTNERSHIP WITH AT LEAST ONE DEAF-LED ORGANIZATION, AS DEFINED IN SUBPARAGRAPH (A) OF THIS SUBSECTION, WHEREIN THE DEAF-LED PARTNER ORGANIZATION HOLDS SUBSTANTIVE DECISION-MAKING AUTHORITY OVER RESEARCH DESIGN, INTERVIEW PROTOCOLS, AND INTERPRETATION OF FINDINGS.

**(I.6)** THE EXECUTIVE DIRECTOR, IN CONSULTATION WITH THE DIVISION, SHALL DOCUMENT COMPLIANCE WITH SUBPARAGRAPH (I.5) OF THIS SUBSECTION IN THE CONTRACT EXECUTED PURSUANT TO THIS SUBSECTION (10).

### Rationale

*The bill, as currently drafted, includes strong accessibility and representation requirements for study participants and interviewers but no requirements for the researchers themselves. A hearing-led research firm with no Deaf leadership can satisfy every existing provision while producing a report that reflects hearing administrative perspectives rather than Deaf community*

*expertise. This amendment closes that gap. It does not dictate which specific organization receives the contract. It establishes a qualification floor that ensures the final report, which will inform any future Department of Regulatory Agencies sunrise review of interpreter licensure, carries the credibility required to produce meaningful reform.*

*The amendment imposes no additional fiscal cost. It does not alter the July 1, 2027, contract deadline or the July 1, 2028, reporting deadline. It does not expand the scope of required study parameters. It ensures that the researcher selected to conduct a study about the Deaf community has meaningful Deaf leadership or partnership governing that work.*

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'JPMZ', written in a cursive style.

**Jake Pfau-Martinez**  
President  
Colorado Association of the Deaf (CAD)