



PURCHASED SERVICE CONTRACT

Sign Language Interpreter Services

DSHS Contract Number:

0948-67827

Resulting From Competition

Number: RFQQ 0945-004

Competition Exempt

This Contract is between the State of Washington Department of Social and Health Services (DSHS) and the Contractor identified below, and is governed by chapter 43.19 and 43.105 RCW.

Contractor Contract Number:

[Redacted]

CONTRACTOR NAME Eastern Washington Center for the Deaf and Hard of Hearing	CONTRACTOR doing business as (DBA)
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CONTRACTOR ADDRESS 1206 N Howard St Spokane, WA 99201-2410	WASHINGTON UNIFORM BUSINESS IDENTIFIER (UBI) 601-140-526	DSHS INDEX NUMBER 1709
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CONTRACTOR CONTACT Char Parsley	CONTRACTOR TELEPHONE (509) 328-9220 Ext:	CONTRACTOR FAX (509) 327-4622	CONTRACTOR E-MAIL ADDRESS char@ewcdhh.org
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DSHS ADMINISTRATION Executive Public Affairs	DSHS DIVISION Office of the Deaf and Hard of Hearing	DSHS CONTRACT CODE 9402OP-48
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DSHS CONTACT NAME AND TITLE Emily Hill Program Manager	DSHS CONTACT ADDRESS 14th & Jefferson Olympia, WA 98504-5301
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DSHS CONTACT TELEPHONE (360) 902-0271 Ext:	DSHS CONTACT FAX (360) 902-0855	DSHS CONTACT E-MAIL ADDRESS hilleml@dsht.wa.gov
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IS THE CONTRACTOR A SUBRECIPIENT FOR PURPOSES OF THIS CONTRACT? No	CFDA NUMBERS
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CONTRACT START DATE 7/1/2009	CONTRACT END DATE 6/30/2011	CONTRACT MAXIMUM AMOUNT Fee For Service
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EXHIBITS. The following Exhibits are attached and are incorporated into this Contract by reference:

Exhibit A – Data Security Requirements (Intentionally Omitted)

Exhibit B – Statement of Work

The terms and conditions of this Contract are an integration of and constitute the final, entire and exclusive understanding of the agreement between the parties, superseding and merging all previous agreements, writings, and communications between the parties made prior to or at the signing of this Contract. The parties signing below warrant they have read and understand this Contract, and have authority to enter into this Contract.

CONTRACTOR SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
[Redacted]	[Redacted]	

DSHS SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
	Emily Hill, SLIM Program Manager	

General Terms and Conditions

1. **Definitions.** The words and phrases listed below, as used in this Contract, shall each have the following definitions:
- a. “Central Contract Services” means the DSHS central headquarters contracting office, or successor section or office.
 - b. “Confidential Information” means information that is exempt from disclosure to the public or other unauthorized persons under RCW 42.56 or other federal or state laws. Confidential Information includes, but is not limited to, Personal Information.
 - c. “Contract” or “Agreement” means the entire written agreement between DSHS and the Contractor, including any Exhibits, documents, or materials incorporated by reference.
 - d. “Contracts Administrator” means the manager, or successor, of Central Contract Services or successor section or office.
 - e. “Contractor” means the individual or entity performing services pursuant to this Contract and includes the Contractor’s owners, members, officers, directors, partners, employees, and/or agents, unless otherwise stated in this Contract. For purposes of any permitted Subcontract, “Contractor” includes any Subcontractor and its owners, members, officers, directors, partners, employees, and/or agents.
 - f. “Debarment” means an action taken by a Federal agency or official to exclude a person or business entity from participating in transactions involving certain federal funds.
 - g. “DSHS” or the “Department” means the state of Washington Department of Social and Health Services and its employees and authorized agents.
 - h. “Encrypt” means to encode Confidential Information into a format that can only be read by those possessing a “key”; a password, digital certificate or other mechanism available only to authorized users. Encryption must use a key length of at least 128 bits.
 - i. “Hardened Password” means a string of at least eight characters containing at least one alphabetic character, at least one number and at least one special character such as an asterisk, ampersand or exclamation point.
 - j. “Personal Information” means information identifiable to any person, including, but not limited to, information that relates to a person’s name, health, finances, education, business, use or receipt of governmental services or other activities, addresses, telephone numbers, Social Security Numbers, driver license numbers, other identifying numbers, and any financial identifiers.
 - k. “Physically Secure” means that access is restricted through physical means to authorized individuals only.
 - l. “Program Agreement” means an agreement between the Contractor and DSHS containing special terms and conditions, including a statement of work to be performed by the Contractor and payment to be made by DSHS.
 - m. “RCW” means the Revised Code of Washington. All references in this Contract to RCW chapters or sections shall include any successor, amended, or replacement statute. Pertinent RCW chapters can be accessed at <http://apps.leg.wa.gov/rcw/>.
 - n. “Regulation” means any federal, state, or local regulation, rule, or ordinance.

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- o. "Secured Area" means an area to which only authorized representatives of the entity possessing the Confidential Information have access. Secured Areas may include buildings, rooms or locked storage containers (such as a filing cabinet) within a room, as long as access to the Confidential Information is not available to unauthorized personnel.
 - p. "Subcontract" means any separate agreement or contract between the Contractor and an individual or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.
 - q. "Tracking" means a record keeping system that identifies when the sender begins delivery of Confidential Information to the authorized and intended recipient, and when the sender receives confirmation of delivery from the authorized and intended recipient of Confidential Information.
 - r. "Trusted Systems" include only the following methods of physical delivery: (1) hand-delivery by a person authorized to have access to the Confidential Information with written acknowledgement of receipt; (2) United States Postal Service ("USPS") first class mail, or USPS delivery services that include Tracking, such as Certified Mail, Express Mail or Registered Mail; (3) commercial delivery services (e.g. FedEx, UPS, DHL) which offer tracking and receipt confirmation; and (4) the Washington State Campus mail system. For electronic transmission, the Washington State Governmental Network (SGN) is a Trusted System for communications within that Network.
 - s. "Unique User ID" means a string of characters that identifies a specific user and which, in conjunction with a password, passphrase or other mechanism, authenticates a user to an information system.
 - t. "WAC" means the Washington Administrative Code. All references in this Contract to WAC chapters or sections shall include any successor, amended, or replacement regulation. Pertinent WAC chapters or sections can be accessed at <http://apps.leg.wa.gov/wac/>.
2. **Amendment.** This Contract may only be modified by a written amendment signed by both parties. Only personnel authorized to bind each of the parties may sign an amendment.
3. **Assignment.** The Contractor shall not assign this Contract or any Program Agreement to a third party without the prior written consent of DSHS.
4. **Billing Limitations.**
- a. DSHS shall pay the Contractor only for authorized services provided in accordance with this Contract.
 - b. DSHS shall not pay any claims for payment for services submitted more than twelve (12) months after the calendar month in which the services were performed.
 - c. The Contractor shall not bill and DSHS shall not pay for services performed under this Contract, if the Contractor has charged or will charge another agency of the state of Washington or any other party for the same services.
5. **Compliance with Applicable Law.** At all times during the term of this Contract, the Contractor shall comply with all applicable federal, state, and local laws and regulations, including but not limited to, nondiscrimination laws and regulations.
6. **Confidentiality.**

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- a. The Contractor shall not use, publish, transfer, sell or otherwise disclose any Confidential Information gained by reason of this Contract for any purpose that is not directly connected with Contractor's performance of the services contemplated hereunder, except:
 - (1) as provided by law; or,
 - (2) in the case of Personal Information, with the prior written consent of the person or personal representative of the person who is the subject of the Personal Information.
 - b. The Contractor shall protect and maintain all Confidential Information gained by reason of this Contract against unauthorized use, access, disclosure, modification or loss. This duty requires the Contractor to employ reasonable security measures, which include restricting access to the Confidential Information by:
 - (1) Allowing access only to staff that have an authorized business requirement to view the Confidential Information.
 - (2) Physically Securing any computers, documents, or other media containing the Confidential Information.
 - (3) Ensure the security of Confidential Information transmitted via fax (facsimile) by:
 - i. Verifying the recipient phone number to prevent accidental transmittal of Confidential Information to unauthorized persons.
 - ii. Communicating with the intended recipient before transmission to ensure that the fax will be received only by an authorized person.
 - iii. Verifying after transmittal that the fax was received by the intended recipient.
 - (4) When transporting six (6) or more records containing Confidential Information, outside a Secure Area, do one or more of the following as appropriate:
 - (a) Use a Trusted System.
 - (b) Encrypt the Confidential Information, including:
 - i. Encrypting email and/or email attachments which contain the Confidential Information.
 - ii. Encrypting Confidential Information when it is stored on portable devices or media, including but not limited to laptop computers and flash memory devices.
- Note: If the DSHS Data Security Requirements Exhibit is attached to this contract, this item, 6.b.(4), is superseded by the language contained in the Exhibit.**
- (5) Send paper documents containing Confidential Information via a Trusted System.
 - (6) Following the requirements of the DSHS Data Security Requirements Exhibit, if attached to this contract.
- c. Upon request by DSHS, at the end of the Contract term, or when no longer needed, data shall be returned to DSHS or Contractor shall certify in writing that they employed a DSHS approved method to destroy the information. Contractor may obtain information regarding approved

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destruction methods from the DSHS contact identified on the cover page of this Contract.

- d. Paper documents with Confidential Information may be recycled through a contracted firm, provided the contract with the recycler specifies that the confidentiality of information will be protected, and the information destroyed through the recycling process. Paper documents containing Confidential Information requiring special handling (e.g. protected health information) must be destroyed on-site through shredding, pulping, or incineration.
 - e. Notification of Compromise or Potential Compromise. The compromise or potential compromise of Confidential Information must be reported to the DSHS Contact designated on the contract within one (1) business day of discovery. Contractor must also take actions to mitigate the risk of loss and comply with any notification or other requirements imposed by law or DSHS.
7. **Debarment Certification.** The Contractor, by signature to this Contract, certifies that the Contractor is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency from participating in transactions (Debarred). The Contractor also agrees to include the above requirement in any and all Subcontracts into which it enters. The Contractor shall immediately notify DSHS if, during the term of this Contract, Contractor becomes Debarred. DSHS may immediately terminate this Contract by providing Contractor written notice if Contractor becomes Debarred during the term hereof.
8. **Governing Law and Venue.** This Contract shall be construed and interpreted in accordance with the laws of the state of Washington and the venue of any action brought hereunder shall be in Superior Court for Thurston County.
9. **Independent Contractor.** The parties intend that an independent contractor relationship will be created by this Contract. The Contractor and his or her employees or agents performing under this Contract are not employees or agents of the Department. The Contractor, his or her employees, or agents performing under this Contract will not hold himself/herself out as, nor claim to be, an officer or employee of the Department by reason hereof, nor will the Contractor, his or her employees, or agent make any claim of right, privilege or benefit that would accrue to such officer or employee.
10. **Inspection.** The Contractor shall, at no cost, provide DSHS and the Office of the State Auditor with reasonable access to Contractor's place of business, Contractor's records, and DSHS client records, wherever located. These inspection rights are intended to allow DSHS and the Office of the State Auditor to monitor, audit, and evaluate the Contractor's performance and compliance with applicable laws, regulations, and these Contract terms. These inspection rights shall survive for six (6) years following this Contract's termination or expiration.
11. **Maintenance of Records.** The Contractor shall maintain records relating to this Contract and the performance of the services described herein. The records include, but are not limited to, accounting procedures and practices, which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this Contract. All records and other material relevant to this Contract shall be retained for six (6) years after expiration or termination of this Contract.
- Without agreeing that litigation or claims are legally authorized, if any litigation, claim, or audit is started before the expiration of the six (6) year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved.
12. **Order of Precedence.** In the event of any inconsistency or conflict between the General Terms and Conditions and the Special Terms and Conditions of this Contract or any Program Agreement, the inconsistency or conflict shall be resolved by giving precedence to these General Terms and Conditions. Terms or conditions that are more restrictive, specific, or particular than those contained in

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the General Terms and Conditions shall not be construed as being inconsistent or in conflict.

13. **Severability.** If any term or condition of this Contract is held invalid by any court, the remainder of the Contract remains valid and in full force and effect.
14. **Survivability.** The terms and conditions contained in this Contract or any Program Agreement which, by their sense and context, are intended to survive the expiration or termination of the particular agreement shall survive. Surviving terms include, but are not limited to: Billing Limitations; Confidentiality, Disputes; Indemnification and Hold Harmless, Inspection, Maintenance of Records, Notice of Overpayment, Ownership of Material, Termination for Default, Termination Procedure, and Treatment of Property.
15. **Termination Due to Change in Funding.** If the funds DSHS relied upon to establish this Contract or Program Agreement are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, DSHS may immediately terminate this Contract by providing written notice to the Contractor. The termination shall be effective on the date specified in the termination notice.
16. **Waiver.** Waiver of any breach or default on any occasion shall not be deemed to be a waiver of any subsequent breach or default. Any waiver shall not be construed to be a modification of the terms and conditions of this Contract. Only the DSHS Chief Administrative Officer or designee has the authority to waive any term or condition of this Contract on behalf of DSHS.

Additional General Terms and Conditions – Purchased Service Contracts:

17. **Advance Payment.** DSHS shall not make any payments in advance or anticipation of the delivery of services to be provided pursuant to this Contract.
18. **Contractor Certification Regarding Ethics.** The Contractor certifies that the Contractor is now, and shall remain, in compliance with Chapter 42.52 RCW, Ethics in Public Service, throughout the term of this Contract.
19. **Health and Safety.** Contractor shall perform any and all of its obligations under this Contract in a manner that does not compromise the health and safety of any DSHS client with whom the Contractor has contact.
20. **Indemnification and Hold Harmless.**
 - a. The Contractor shall be responsible for and shall indemnify, defend, and hold DSHS harmless from all claims, loss, liability, damages, or fines arising out of or relating to a) the Contractor's or any Subcontractor's performance or failure to perform this Contract, or b) the acts or omissions of the Contractor or any Subcontractor.
 - b. The Contractor waives its immunity under Title 51 RCW to the extent it is required to indemnify, defend, and hold harmless the State and its agencies, officials, agents, or employees.
21. **Industrial Insurance Coverage.** The Contractor shall comply with the provisions of Title 51 RCW, Industrial Insurance. If the Contractor fails to provide industrial insurance coverage or fails to pay premiums or penalties on behalf of its employees, as may be required by law, Agency may collect from the Contractor the full amount payable to the Industrial Insurance accident fund. The Agency may deduct the amount owed by the Contractor to the accident fund from the amount payable to the Contractor by the Agency under this contract, and transmit the deducted amount to the Department of Labor and Industries, (L&I) Division of Insurance Services. This provision does not waive any of L&I's

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rights to collect from the Contractor.

- 22. Publicity** The Contractor shall not name DSHS as a customer, nor use any information related to this Contract, in any format or media, in any Contractor's advertising or publicity without prior written consent from the DSHS.
- 23. Notice of Overpayment.** If the Contractor receives a vendor overpayment notice or a letter communicating the existence of an overpayment from DSHS, the Contractor may protest the overpayment determination by requesting an adjudicative proceeding. The Contractor's request for an adjudicative proceeding must:
- a. Be *received* by the Office of Financial Recovery (OFR) at Post Office Box 9501, Olympia, Washington 98507-9501, within twenty-eight (28) calendar days of service of the notice;
 - b. Be sent by certified mail (return receipt) or other manner that proves OFR received the request;
 - c. Include a statement as to why the Contractor thinks the notice is incorrect; and
 - d. Include a copy of the overpayment notice.

Timely and complete requests will be scheduled for a formal hearing by the Office of Administrative Hearings. The Contractor may be offered a pre-hearing or alternative dispute resolution conference in an attempt to resolve the overpayment dispute prior to the hearing.

Failure to provide OFR with a written request for a hearing within twenty-eight (28) days of service of a vendor overpayment notice or other overpayment letter will result in an overpayment debt against the Contractor. DSHS may charge the Contractor interest and any costs associated with the collection of this overpayment. DSHS may collect an overpayment debt through lien, foreclosure, seizure and sale of the Contractor's real or personal property; order to withhold and deliver; or any other collection action available to DSHS to satisfy the overpayment debt.

- 24. Site Security.** While providing services at a DSHS location, the Contractor, its agents, employees, or Subcontractors shall conform in all respects with physical, fire, or other security regulations specific to the DSHS location.
- 25. Subcontracting.** Except as otherwise provided in this Contract, the Contractor shall not Subcontract any of the contracted services without the prior written approval of DSHS. Contractor is responsible to ensure that all terms, conditions, assurances and certifications set forth in this Contract are included in any and all Subcontracts. Any failure of Contractor or its Subcontractors to perform the obligations of this Contract shall not discharge the Contractor from its obligations hereunder or diminish DSHS' rights or remedies available under this Contract.
- 26. Termination for Convenience.** DSHS may terminate this Contract in whole or in part when it is in the best interest of DSHS by giving the Contractor at least thirty (30) calendar days' written notice.
- 27. Termination for Default.** The Contracts Administrator may immediately terminate this Contract for default, in whole or in part, by written notice to the Contractor if DSHS has a reasonable basis to believe that the Contractor has:
- a. Failed to meet or maintain any requirement for contracting with DSHS;
 - b. Failed to protect the health or safety of any DSHS client;

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- c. Failed to perform under, or otherwise breached, any term or condition of this Contract; and/or
- d. Violated any applicable law or regulation.
- e. If it is later determined that the Contractor was not in default, the termination shall be considered a termination for convenience.

28. Termination or Expiration Procedure. The following terms and conditions apply upon Contract termination or expiration:

- a. The Contractor shall cease to perform any services required by this Contract as of the effective date of termination or expiration.
- b. If the Contract is terminated, the Contractor shall comply with all instructions contained in the termination notice.
- c. The Contractor shall immediately deliver to the DSHS contact named on page one of this Contract, or to his or her successor, all DSHS property in the Contractor's possession. The Contractor grants DSHS the right to enter upon the Contractor's premises for the sole purpose of recovering any DSHS property that the Contractor fails to return within ten (10) calendar days of the effective date of termination or expiration of this Contract. Upon failure to return DSHS property within ten (10) calendar days, the Contractor shall be charged with all reasonable costs of recovery, including transportation.
- d. DSHS shall be liable only for payment required under the terms of this Contract for service rendered up to the effective date of termination or expiration.
- e. DSHS may withhold a sum from the final payment to the Contractor that DSHS determines necessary to protect DSHS against loss or additional liability.
- f. The rights and remedies provided to DSHS in this Section are in addition to any other rights and remedies provided at law, in equity, and/or under this Contract, including consequential and incidental damages.

29. Treatment of Property. All property purchased or furnished by DSHS for use by the Contractor during this Contract term shall remain with DSHS. Title to all property purchased or furnished by the Contractor for which the Contractor is entitled to reimbursement by DSHS under this Contract shall pass to and vest in DSHS. The Contractor shall protect, maintain, and insure all DSHS property in its possession against loss or damage and shall return DSHS property to DSHS upon Contract termination or expiration.

Special Terms and Conditions

1. **Definitions Specific to Special Terms.** The words and phrases listed below, as used in this Contract, shall each have the following definitions:
- a. "Appointment" means a predetermined period of time scheduled by an Authorized Requester for an Interpreter(s) and Customer(s) to appear at a predetermined location to provide and receive Sign Language Interpreter services provided under this contract. One Appointment may span multiple consecutive Business Days during a week or consecutive weeks, regardless of whether service is provided over weekend days (Saturday and Sunday).
 - (1) "Filled Appointment" means a Contractor has assigned the Interpreter(s) to the Appointment and has confirmed this with the Requester.
 - (2) "Unfilled Appointment" means a Contractor is unable to assign the Interpreter(s) to the Appointment and has notified the Requester.
 - (3) "Emergency Appointment" refers to a legal, medical (non-Medicaid), Child Protective Services (CPS), or Adult Protective Service (APS) Appointment that may be scheduled with four hours or less notice to the Contractor. Emergency Appointments may happen at any time during the day, night, or weekend.
 - (4) "Recurring Appointment" means a regularly scheduled Appointment for the same Customer and provider (for example, dialysis, physical therapy, etc.).
 - b. "Authorized Requester (Requester)" means any Employee of a DSHS entity, State of Washington governmental entity, Washington State Purchasing Cooperative member, or contracted service/medical provider requesting the services of a Sign Language Interpreter who is responsible for paying for such service. For Medicaid billing, only DSHS contracted medical providers are Authorized Requesters.
 - c. "Business Day" means Monday through Friday, 8:00 a.m. to 5:00 p.m., Pacific Time, except for holidays observed by the State of Washington. One Business Day equals 9 business hours per day.
 - d. "Cancellation" means an Appointment cancelled by a Requester, DSHS/state Employee, Client, contracted service/medical provider, or Interpreter.
 - e. "Certified Interpreter" means a Sign Language Interpreter who has demonstrated, through performance and knowledge tests established by the Registry of Interpreters for the Deaf (RID) or the National Association of the Deaf (NAD), his/her ability to meet the minimum standards to both expressively and receptively Interpret effectively, accurately, and impartially. A Certified Interpreter has been awarded certification by RID and/or NAD, is an active member of the organization(s) holding his/her certification, and has complied with his/her Certification Maintenance Program (CMP) requirements.
 - f. "Client" means any person applying, been determined eligible for, and/or receiving services from DSHS, a State of Washington governmental entity, and/or the Washington State Purchasing Cooperative (WSPC).
 - g. "Contractor" means an individual, company, corporation, firm, or combination thereof, whose proposal has been selected by the Agency's evaluation process and has been awarded a formal written contract to provide and receive payment for Sign Language Interpreter services.
 - h. "Contractor Service Fee" means a fee paid directly to the Contractor for services provided. This fee

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will be paid for each billable Appointment, per requested Interpreter in accordance with the requirements established in this contract. The Contractor Service Fee covers administrative requirements of this contract (scheduling, billing, reporting, etc.).

- i. "Customer" means a deaf, hard of hearing, or deaf-blind Client, citizen of the State of Washington, or DSHS/State of Washington Employee receiving functionally equivalent communication access through a Sign Language Interpreter.
- j. "Deaf" is a broad term that generally describes people who have a severe to profound Hearing Loss. Deaf individuals may communicate by American Sign Language (ASL), another form of signed language, lipreading, English (written or spoken), or any other method of communication. They may use a combination of Sign Language Interpreters, hearing aids, assistive listening devices, and other specialized technology.
- k. "Deaf-Blind" is a broad term that generally describes people who have varying degrees/types of combined vision and Hearing Loss. The person can be either deaf or hard of hearing. Also, the person can have a visual range of limited sight (e.g. tunnel vision) to complete blindness. Many persons who are deaf-blind communicate by using tactile signing or close-up signing, depending on their vision loss.
- l. "Employee" means a person hired to perform specific and as needed tasks based on DSHS, state employer, or contracted service/medical provider pre-established criteria, in return for financial or other compensation. DSHS or state Employees may need Interpreters for meetings, trainings, or conferences.
- m. "Family Member" means any person who is related to the Customer including but not limited to: a spouse, child, grandmother, grandfather, grandchild, mother, father, sister, brother, cousin, niece, nephew, aunt, uncle, step relations and/or in-laws.
- n. "Hard of Hearing" is a broad term that generally describes people who have functional Hearing Loss with some residual hearing, whether permanent or fluctuating, which adversely affects communication. These are people who may or may not have sufficient residual hearing to process linguistic information auditorially. They may or may not use a combination of: Sign Language Interpreters, hearing aids, assistive listening devices, and other specialized technology.
- o. "Hearing Loss" is a term that generally describes people with Hearing Loss, ranging from slight to profound, measured in decibels. It includes persons who are deaf, deaf-blind, or hard of hearing. A person with a Hearing Loss may or may not readily understand or communicate in spoken language with or without the use of auxiliary aids.
- p. "Hourly Rate" is the rate that DSHS will reimburse Contractors for sign language Interpreting services rendered. This rate is to be paid directly to the Sign Language Interpreter(s). The Contractor will be compensated through the Contractor Service Fee.
- q. "Interpretation/Interpret(ing)" is the process of facilitating communication between hearing individuals who communicate in spoken language and individuals who communicate in sign language. Interpreters must be able to listen to an individual's words, inflections, and intent and simultaneously render them into sign language using the mode of communication preferred by the Customer. The Interpreter must also be able to comprehend the signs, inflections, and intent of the Customer and speak them in articulate, appropriate English.
- r. "Interpreter Referral Agency" refers to a nonprofit or for-profit organization that provides Sign Language Interpreter services including billing, scheduling, assignment, and referral of staff and/or

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sub-contracted Interpreters to Appointments.

- s. "Mileage" means the distance traveled on a Portal to Portal basis in a Privately Owned Vehicle (POV). Mileage rates are determined by the Washington State Office of Financial Management (OFM).
- t. "National Association of the Deaf (NAD)" is a national membership association that previously administered testing for certification of Sign Language Interpreters. NAD testing was replaced by the joint NAD-RID development of the National Interpreting Certification (NIC) testing system. NAD Certified Interpreters have been incorporated into RID's Certification Maintenance Program and their credentials are maintained by RID.
- u. "National Interpreting Certification (NIC)" is a new interpreting certification with three levels (NIC, NIC Advanced, and NIC Master) developed by the joint NAD-RID Task Force. Testing is administered by RID.
- v. "No Show" means a Client, DSHS/state Employee, contracted service/medical provider, or Interpreter not keeping an Appointment during the time scheduled.
- w. "Non-Certified Interpreter" means a person registered with the Department of Social and Health Services to provide Sign Language Interpreter services, who has not obtained official Sign Language Interpreter certification and is required to do so within five years of initial registration.
- x. "Office of the Deaf and Hard of Hearing (ODHH)" is a DSHS agency administering various programs and services. ODHH has the authority to procure and administer this contract.
- y. "Performing Provider Number" is a unique seven-digit number issued to each individual Interpreter who provides Sign Language Interpreter services at Medicaid Appointments. All Performing Provider Numbers for Sign Language Interpreters begin with an 8.
- z. "Portal to Portal" is the distance traveled by the Interpreter from the "Address of Origin" to the "Address of the Appointment." It may include the distance traveled from the "Address of the Appointment" to the "Address of Destination." Addresses are further defined as follows:
 - (1) "Address of Origin" means home, place of business, or previous Appointment.
 - (2) "Address of the Appointment" means the place of business/facility where the Appointment is held.
 - (3) "Address of Destination" means home or place of business.
- aa. "Provider Number" is a unique seven-digit number issued to all contracted service providers for the purpose of billing Health and Recovery Systems Administration (HRSA) through an automated claims processing system for Medicaid Appointments. All Provider Numbers for Sign Language Interpreter Contractors begin with a 7.
- bb. "Qualified Deaf Interpreter" refers to Interpreters who are deaf and/or hard of hearing who are capable of signing or relaying information signed in sign language by a hearing Interpreter in a way that is best understood by a deaf, hard of hearing, or deaf-blind Customer.
- cc. "Qualified Sign Language Interpreter" means an Interpreter, Certified or Non-Certified, who is able to Interpret effectively, accurately, and impartially both receptively and expressively, using any necessary specialized vocabulary. Family members of the customer are not qualified interpreters.

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- dd. "Registry of Interpreters for the Deaf (RID)" refers to a national membership organization representing the professionals who provide sign language Interpreting services for the Deaf and hard of hearing. RID administers certification testing for Sign Language Interpreters. RID testing for RID certification was replaced by the joint NAD-RID development of the National Interpreting Certification (NIC) testing. RID Certified Interpreters are incorporated into RID's Certification Maintenance Program and their credentials are maintained by RID.
- ee. "Sub-Contractor" means an individual, company, partnership, corporation, firm, or combination thereof with whom the Contractor develops sub-contracts for Sign Language Interpreter services.
- ff. "Transliteration" is the process of facilitating communication between individuals using spoken English and those who use English-based sign language. Facilitating communication entails a demonstrated ability to expressively and receptively Transliterate between English-based sign language and spoken English in both sign-to-voice and voice-to-sign.

2. Purpose:

- a. The purpose of this Contract is to provide sign language interpreter/transliterater services for persons who are deaf, deaf-blind, and hard of hearing.
- b. DSHS enters into this Contract as the result of DSHS RFQQ #0945-004.
 - (1) DSHS incorporates by reference DSHS RFQQ #0945-004, including all Amendments and Exhibits.
 - (2) DSHS incorporates by reference, the Contractor's written response to DSHS RFQQ #0945-004, dated May 26, 2009.

3. **Statement of Work.** The Contractor shall provide the services and staff, and otherwise do all things necessary for or incidental to the performance of work, as set forth in Exhibit B, Statement of Work.

4. **Consideration.** Total consideration payable to Contractor for satisfactory performance of the work under this Contract, including any and all expenses, shall be based on Exhibit A, Statement of Work, Section 13 – Rates.

5. **Billing and Payment.** The Contractor shall submit invoices and shall receive payment from DSHS in accordance with Exhibit A, Statement of Work, Section 11- Invoicing/Billing Requirements and Section 12 – Payment Processing.

6. Disputes

Notwithstanding the provision for overpayment dispute resolution pursuant to section 16 of the General Terms and Conditions both parties agree to make their best efforts to resolve other disputes arising from this Contract and agree that the dispute resolution process described herein is the sole remedy available under this Contract. When a dispute arises over an issue concerning the terms of this Contract, the parties agree to the following process to address the dispute:

- a. The Contractor and ODHH shall attempt to resolve the dispute through informal means between the Contractor and the ODHH Contract Administrator assigned to this Contract;
- b. If the Contractor is not satisfied with the outcome of the resolution with the Contract Administrator, the Contractor may submit the disputed issue, in writing, for review within ten (10) business days to:

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Eric Raff, Director
Office of the Deaf and Hard of Hearing
PO Box 45300
Olympia, WA 98504-5300

The ODHH Director may request additional information from the ODHH Contract administrator and/or the Contractor. The ODHH Director shall issue a written decision to the Contractor within thirty (30) calendar days of receipt of all information relevant to the issue.

- c. When the Contractor disagrees with the written decision of the ODHH Director, the Contractor may request the Deputy Secretary and/or his/her designee to review the dispute. The request for review must be submitted to the ODHH Director, in writing within thirty (30) business days of the Contractor's receipt of the decision by the ODHH Director. The Deputy Secretary may request additional information from ODHH and/or the Contractor. The Deputy Secretary may request a meeting to discuss the dispute, if so the Contractor, ODHH Director and the Deputy Secretary shall mutually agree on the date of the meeting. The Deputy Secretary shall issue a written decision to the Contractor within thirty (30) calendar days, after receipt of the Contractor request or the date of the meeting, whichever is later. Such decision is shall be final and be abided by the Contractor and ODHH.

7. Insurance

The Contractor shall at all times comply with the following insurance requirements.

a. General Liability Insurance

The Contractor shall maintain Commercial General Liability Insurance, or Business Liability Insurance, including coverage for bodily injury, property damage, and contractual liability, with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$2,000,000. The policy shall include liability arising out of premises, operations, independent contractors, products-completed operations, personal injury, advertising injury, and liability assumed under an insured contract. The State of Washington, Department of Social & Health Services (DSHS), its elected and appointed officials, agents, and employees of the state, shall be named as additional insured's.

In lieu of general liability insurance mentioned above, if the contractor is a sole proprietor with less than three contracts, the contractor may choose one of the following three general liability policies but only if attached to a professional liability policy, and if selected the policy shall be maintained for the life of the contract:

Supplemental Liability Insurance, including coverage for bodily injury and property damage that will cover the contractor wherever the service is performed with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$2,000,000. The State of Washington, Department of Social & Health Services (DSHS), its elected and appointed officials, agents, and employees shall be named as additional insured's.

or

Workplace Liability Insurance, including coverage for bodily injury and property damage that provides coverage wherever the service is performed with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$2,000,000. The State of Washington, Department of Social & Health Services (DSHS), its elected and appointed officials, agents, and employees of the state, shall be named as additional insured's.

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or

Premises Liability Insurance and provide services only at their recognized place of business, including coverage for bodily injury, property damage with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$2,000,000. The State of Washington, Department of Social & Health Services (DSHS), its elected and appointed officials, agents, and employees of the state, shall be named as Additional Insured.

b. Professional Liability Insurance (PL)

The Contractor shall maintain Professional Liability Insurance or Errors & Omissions insurance, including coverage for losses caused by errors and omissions, with the following minimum limits: Each Occurrence - \$1,000,000; Aggregate - \$2,000,000.

c. Worker's Compensation

The Contractor shall comply with all applicable Worker's Compensation, occupational disease, and occupational health and safety laws and regulations. The State of Washington and DSHS shall not be held responsible for claims filed for Worker's Compensation under RCW 51 by the Contractor or its employees under such laws and regulations.

d. Employees and Volunteers

Insurance required of the Contractor under the Contract shall include coverage for the acts and omissions of the Contractor's employees and volunteers. In addition, the Contractor shall ensure that all employees and volunteers who use vehicles to transport clients or deliver services have personal automobile insurance and current driver's licenses.

e. Subcontractors

The Contractor shall ensure that all subcontractors have and maintain insurance with the same types and limits of coverage as required of the Contractor under the Contract. For subcontractors, the request to name DSHS as an Addition Insured has been waived.

f. Separation of Insureds

All insurance policies shall include coverage for cross liability and contain a "Separation of Insureds" provision.

g. Insurers

The Contractor shall obtain insurance from insurance companies identified as an admitted insurer/carrier in the State of Washington, with a Best's Reports' rating of B++, Class VII, or better. Surplus Lines insurance companies will have a rating of A-, Class VII, or better.

h. Evidence of Coverage

The Contractor shall submit Certificates of Insurance to the DSHS point of contact located on page one of the contract for each coverage required of the Contractor under the Contract. The Certificate shall identify the DSHS Enterprise Risk Management Office, P O Box 45882, Olympia, Washington 98504-5882 as Certificate Holder. A duly authorized representative of each insurer, showing compliance with the insurance requirements specified in this Contract, shall execute each Certificate of Insurance. The Contractor is not required to submit to DSHS copies of Certificates of

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Insurance for personal automobile insurance required of the Contractor's employees and volunteers under the contract.

The Contractor shall maintain copies of Certificates of Insurance for each subcontractor as evidence that each subcontractor maintains insurance as required by the Contract.

i. Material Changes

The insurer shall give DSHS Enterprise Risk Management Office; 45 days advance written notice of cancellation or non-renewal. If cancellation is due to non-payment of premium, the insurer shall give DSHS 10 days advance written notice of cancellation.

j. General

By requiring insurance, the State of Washington and DSHS do not represent that the coverage and limits specified will be adequate to protect the Contractor. Such coverage and limits shall not be construed to relieve the Contractor from liability in excess of the required coverage and limits and shall not limit the Contractor's liability under the indemnities and reimbursements granted to the State and DSHS in this Contract. All insurance provided in compliance with this Contract shall be primary as to any other insurance or self-insurance programs afforded to or maintained by the State.

Statement of Work

1. Authorized Requesters

- a. The Contractor shall provide Sign Language Interpreter services as described herein under the terms and conditions, requirements and specifications of the contract, including prices, for any Authorized Requester except as explained in Additional Medicaid Billing Requirements, Section 11.b. This contract shall also apply to DSHS inter-agency/inter-local agreements and the Department of General Administration Washington State Purchasing Cooperative (WSPC). These Authorized Requesters include other governmental entities, political subdivisions, nonprofits, and organizations. Current WSPC members can be found at <http://www.ga.wa.gov/PCA/SPC.htm>.
- b. The Contractor shall further understand and agree that use of this contract by local or county governmental entities or WSPC members is discretionary on the part of that governmental entity and the State of Washington bears no financial responsibility for any payments due the Contractor from such governmental entities.
- c. Services described herein will be requested by Authorized Requesters as needed, based on program/policy requirements and Customer communication needs and preferences.
- d. Nursing facilities are responsible for requesting and paying for their own Interpreting services.

2. Service Area

The Contractor shall provide Interpreter services in the county(ies) indicated by the Contractor on the Contractor Bidder Form submitted in response to RFQQ #0945-004 (shown below). The Contractor shall provide Interpreter services at the site(s) indicated by the Requester. If requested by an Authorized Requester, the Contractor may provide Interpreter services outside of an indicated county.

Region 1 <input checked="" type="checkbox"/> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Adams <input checked="" type="checkbox"/> Chelan <input checked="" type="checkbox"/> Douglas <input checked="" type="checkbox"/> Ferry <input checked="" type="checkbox"/> Grant 	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Lincoln <input checked="" type="checkbox"/> Okanogan <input checked="" type="checkbox"/> Pend Oreille <input checked="" type="checkbox"/> Spokane <input checked="" type="checkbox"/> Stevens <input checked="" type="checkbox"/> Whitman 	Region 2 <input checked="" type="checkbox"/> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Asotin <input checked="" type="checkbox"/> Benton <input checked="" type="checkbox"/> Columbia <input checked="" type="checkbox"/> Franklin 	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Garfield <input checked="" type="checkbox"/> Kittitas <input checked="" type="checkbox"/> Walla Walla <input checked="" type="checkbox"/> Yakima
Region 3 <input type="checkbox"/> <ul style="list-style-type: none"> <input type="checkbox"/> Island <input type="checkbox"/> San Juan <input type="checkbox"/> Skagit 	<ul style="list-style-type: none"> <input type="checkbox"/> Snohomish <input type="checkbox"/> Whatcom 	Region 4 <input type="checkbox"/> <input type="checkbox"/> King	
Region 5 <input type="checkbox"/> <ul style="list-style-type: none"> <input type="checkbox"/> Kitsap 	<ul style="list-style-type: none"> <input type="checkbox"/> Pierce 	Region 6 <input type="checkbox"/> <ul style="list-style-type: none"> <input type="checkbox"/> Clallam <input type="checkbox"/> Clark <input type="checkbox"/> Cowlitz <input type="checkbox"/> Grays Harbor <input type="checkbox"/> Jefferson <input type="checkbox"/> Klickitat 	<ul style="list-style-type: none"> <input type="checkbox"/> Lewis <input type="checkbox"/> Mason <input type="checkbox"/> Pacific <input type="checkbox"/> Skamania <input type="checkbox"/> Thurston <input type="checkbox"/> Wahkiakum

3. DSHS Rights Reserved

- a. If the Requester cannot obtain the services of Qualified Sign Language Interpreters through this contract, DSHS or the State of Washington reserves the right to purchase services from a Qualified Sign Language Interpreter not under contract with DSHS.

- b. The Contractor shall understand that a web-based database system may be implemented during the life of this contract which will require the transition of a paper-based system to an electronic system of scheduling and arranging Appointments with Interpreter services. The Contractor will participate fully with the transition, implementation and operational phases of the web-based database system at a later date.

4. Orientation

a. Contractors

The Contractor shall attend a mandatory orientation session prior to providing services under this contract provided by DSHS of no more than five hours on a date to be determined. The Contractor shall not bill DSHS for attending orientation.

b. Subcontractors

- (1) All subcontracted Interpreters planning on providing services for this contract must receive an orientation by the agency(ies) they represent prior to providing contracted Interpreting services. The orientation must contain, but is not limited to, the following:

- (a) NAD-RID Code of Professional Conduct;

- (b) Accurate completion of DSHS form 17-123a Request for Sign Language Interpreter, DSHS form 17-155 Sign Language Interpreter Registration, DSHS form 09-653 Background Authorization, and DSHS form 02-573 Identification Verification;

- (c) This Statement of Work, including registration and conduct for Interpreters;

- (d) Other specific requirements covered under this contract.

- (2) When the contract is awarded, DSHS will distribute an orientation outline to each Contractor. A confirmation of orientation to the above items must be signed and dated (in ink) by each Interpreter after completion of the orientation. This must be included in each Interpreter's file and sent to ODHH with all registration paperwork.

5. Interpreter Registration

a. Registration

- (1) All Interpreters are required to be registered and approved by ODHH before providing sign language Interpreting services under this contract.

- (2) Contractors must submit the following completed documents and forms to ODHH on behalf of Interpreters on their roster in order for those Interpreters to be approved.

- (a) Certified Interpreters

- i. DSHS form 17-155 Sign Language Interpreter Registration

- ii. Copy of RID membership card

- iii. DSHS form 09-653 Background Authorization

- iv. DSHS form 02-573 Identification Verification Form

- v. Interpreter Orientation Checklist
- (b) Non-Certified Interpreters
- i. DSHS form 17-155 Sign Language Interpreter Registration
 - ii. Copy of 3 reference letters (one from a deaf Customer, one from a Certified Interpreter with no business or contractual relationship with the Non-Certified Interpreter, and one from an agency/business with no business or contractual relationship with DSHS)
 - iii. DSHS form 09-653 Background Authorization
 - iv. DSHS form 02-573 Identification Verification Form
 - v. Interpreter Orientation Checklist
- (3) Any changes to the information provided on the registration form must be submitted within ten days to ODHH on a new registration form (either DSHS form 17-155 Sign Language Interpreter Registration or DSHS form 17-155a Sign Language Interpreter Registration Renewal) with the exception of the following:
- (a) Certification changes (Section 5.e.).
 - (b) Addition or removal of Interpreter Referral Agencies (Section 5.f.).
- (4) Interpreters must also renew their registration with ODHH annually on July 1 regardless of the term of this or future DSHS Sign Language Interpreter Services contracts. Registration renewals must include:
- (a) DSHS form 17-155a Sign Language Interpreter Registration Renewal
 - (b) Copy of RID membership card (if Certified)
 - (c) DSHS form 09-653 Background Authorization
- (5) Contractors/Interpreters must allow approximately fifteen Business Days for ODHH to process registration and renewal documents and forms.
- b. Non-Certified, Qualified Interpreters
- (1) Interpreters who are NOT currently NAD and/or RID Certified can work under this contract only through contracted Interpreter referral agencies. Interpreters having RID status listed as “Certified: Inactive” are viewed as not currently providing Interpreter services but are still a member of RID and pay dues. These Interpreters are not required to maintain their Certification Maintenance Program requirements, yet they retain their RID certification status. For the purpose of this contract, those Interpreters identified as “Certified: Inactive” are designated as **Non-Certified**.
 - (2) Starting July 1, 2005, Non-Certified Interpreters, with the exception of Qualified Deaf Interpreters, must successfully become NIC Certified and obtain active RID membership within the first five years from the date of their initial registration with ODHH to provide services to Authorized Requesters of DSHS Sign Language Interpreter Services Contracts regardless of the term or cycle of this contract and future DSHS Sign Language Interpreter Services contracts. Pending an ODHH review including stakeholder input, Non-Certified Interpreters who fail to achieve certification within five years of initial registration with ODHH can be

removed from the contract until certification with active membership has been obtained.

c. Background Check

- (1) All interpreters must undergo a DSHS criminal background check conducted by the DSHS Background Check Central Unit using DSHS form 09-653 Background Authorization.
- (2) The Contractor must ensure that no Interpreter provides services to DSHS Customers if the Interpreter has a record of crimes, convictions or actions that are disqualifying under the DSHS Secretary's List of Disqualifying Crimes and Actions (located at: <http://www1.dshs.wa.gov/msa/bccu/BCCU-crimesList.htm>).
- (3) If the Interpreter's DSHS background check results indicate that he/she has a record of the following, the Contractor must maintain and make available to DSHS upon request, any records and personnel files that include written justification to the applicant's character, competence, and suitability for providing services to DSHS Customers.
 - (a) Convictions or actions that are NOT on the DSHS Secretary's list;
 - (b) Convictions or actions on the Secretary's list that require five or more years to pass from the date of conviction to application; or
 - (c) DSHS, Department of Health, or local authority findings of abuse, neglect, exploitation or abandonment of a dependent person,
- (4) Any changes in criminal history after registration approval shall be reported within two Business Days to ODHH, or the Interpreter may be removed from the contract.

d. Identification Verification

- (1) To verify the identity of the Interpreter, each Interpreter must present, in person, a valid driver's license or ID card issued by a state or outlying possession of the United States, or by federal, state or local government agencies or entities (provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address), or a U.S. Passport to either:
 - (a) A DSHS-contracted Interpreter Referral Agency,
 - (b) A Notary Public, or
 - (c) A representative from the Office of the Deaf and Hard of Hearing.
- (2) Contractor must submit DSHS form 02-573 Identification Verification containing a copy of the driver's license, ID card, or passport, with the signature and agency name of the approving party. DSHS form 02-573 Identification Verification must be sent with a copy of DSHS form 09-653 Background Authorization and DSHS form 17-155 Sign Language Interpreter Registration to ODHH. Once the Identification Verification document is on file with ODHH, it does not need to be submitted to ODHH again unless the Interpreter's name has changed.

e. Post-Approval

Upon ODHH approval of registration, the Interpreter's name will be added to the ODHH website (<http://odhh.dshs.wa.gov>). ODHH will post a list of available contracted Interpreters on the Internet. This list will include relevant information from the DSHS form 17-155 Sign Language Interpreter Registration, using some or all data except Social Security Numbers. This list will be updated and

maintained by ODHH, based upon the registration form completed by the Interpreter.

Health and Recovery Systems Administration (HRSA) will assign a Performing Provider Number (PPN) to all ODHH approved Interpreters.

f. **New Certification During Term of Contract**

If an Interpreter achieves a new or higher RID or NIC certification after initial registration, the Contractor must submit either a copy of the new certificate or the letter of certification from RID declaring any changed certification level(s) to ODHH. ODHH must change the certification status of the Interpreter before the Interpreter can be compensated according to their new certification status.

g. **Adding/Removing Contracted Interpreter Referral Agencies**

If an Interpreter wants to add or remove contracted Interpreter referral agencies to his/her file, the Contractor must submit a request from the Interpreter to ODHH in writing (by submission of an updated DSHS form 17-155 Sign Language Interpreter Registration, DSHS form 17-155a Sign Language Interpreter Registration Renewal, a letter, or an email to the contract administrator).

6. Disqualification

a. As program administrator, ODHH reserves the right to disqualify Interpreters from providing Sign Language Interpreter services under this contract based on the following information:

(1) Background Check

(2) Certification Status

(3) RID Code of Professional Conduct violations

(4) RID Certification Maintenance Program

(5) DSHS form 17-155 Sign Language Interpreter Registration or DSHS form 17-155a Sign Language Interpreter Registration Renewal

7. Contractor/Subcontractor Conduct Expectations

a. Adhering to the NAD-RID Code of Professional Conduct

All Interpreters and Contractors must adhere to the NAD-RID Code of Professional Conduct. Any Interpreter or Contractor violating this code may be prohibited from providing services under this contract. The Interpreter may be removed from the list of registered Interpreters. Violation may be cause for termination of this contract. The NAD-RID Code of Professional Conduct can be found at: <http://www.rid.org/UserFiles/File/pdfs/codeofethics.pdf>.

b. Unsupervised Access to Clients

No Interpreter shall have unsupervised access to Clients who are deaf, deaf-blind, or hard of hearing when providing Interpreter services. Unsupervised access means that a DSHS/state/WSPC Employee or a contracted service/medical provider Employee must be present in the room or nearby throughout the Appointment. Unsupervised access includes the arrival time prior to and departure time after the Appointment.

c. Contractor Behavior in State Facilities and on State Grounds

(1) All Contractors and Interpreters shall agree to and observe the following:

- (a) No smoking in state buildings (RCW 70.160.030);
- (b) No smoking within 25 feet of an entrance or exit to a state building (RCW 70.160.075);
- (c) No use of alcohol or illegal drugs in the performance of this contract or on state grounds or facilities (RCW 69.50, RCW 72.23.300);
- (d) No firearms or explosives in state buildings or on state grounds (RCW 9.41.300).

d. Photo Identification

All Interpreters, when providing services under this contract, will be required to present picture identification (i.e. Drivers License, Interpreter Agency Picture I.D., etc.) upon request of the Customer, DSHS/State/WSPC Employee, or contracted service/medical provider employee.

e. Prohibiting Undue Influence

(1) Contractors and Interpreters are prohibited from applying undue influence on Customers, Authorized Requesters, or other DSHS/state/WSPC employees, and contracted service/medical providers by:

- (a) Determining the need for Interpreter services or engaging in the solicitation of Interpreter assignments during Appointments;
- (b) Arranging services for Customers in order to create business;
- (c) Contacting the Customer other than at the request of the Authorized Requester;
- (d) Providing transportation for the Client to or from medical, social services, and any other Appointments;
- (e) Requiring a Customer or DSHS/State/WSPC employee to obtain Interpreter services exclusive of other Interpreters or Contractors holding valid contracts with the department;
- (f) Billing for Interpreter services provided to the Interpreter's own Family Members; and
- (g) Accepting any compensation from Customers, Employees, or others in addition to payment received from this contract.

8. Contractor Availability

a. Contractor Location

Sign Language Interpreter Referral Agencies must maintain an office and a representative in the State of Washington.

b. Business Hours

The Contractor must be available (via email, phone, cellular phone, fax, or pager, for example) at all times during normal business hours (8:00 a.m. to 5:00 p.m., Monday through Friday, Pacific Standard Time or Pacific Daylight Time, whichever is in effect) throughout the term of the contract.

c. Contractor Availability

The Contractor shall provide Interpreter services during the hours indicated by the Contractor on the Contractor Bidder Form submitted in response to RFQQ #0945-004 and as shown below.

Days; Monday – Friday; 8 am – 5 pm

Nights; Monday – Thursday; 5 pm – 8 am

Weekends; Friday 5 pm – Monday 8 am

24/7; 24 hours / 7 days a week

Contractors who indicate twenty-four hours a day/seven days a week (24/7) availability are required to process requests for Sign Language Interpreter services 24 hours a day as indicated. Contractors must provide contact information for after business hours.

Emergencies – 4 hour notice/confirmation

Contractors who indicate emergency availability are required to process requests for Sign Language Interpreter services during the days, nights, and weekend hours on an emergency basis. Contractors are required to confirm Interpreter availability/non-availability immediately and be prepared to provide such emergency Interpreter services as requested including reasonable time to allow Portal to Portal travel. Contractors must provide contact information for emergencies.

Holidays

Observed by the State of Washington.

9. Interpreter Appointments and Scheduling

a. Appointments

(1) The Contractor shall coordinate all Appointments with the Authorized Requester requesting Interpreter service. The Contractor shall understand and agree that the Contractor shall be under the direction of specific personnel representing the Authorized Requester regarding the provision of Interpreting services.

(2) The Contractor must make diligent efforts to assign appropriate Interpreter(s). If the Contractor is scheduling Interpreter(s) who must travel more than one hundred miles to the assignment, the Contractor is required to obtain prior approval from the Requester (or Division of Healthcare Services (DHS) – Interpreter Services Section Program Manager for Medicaid Appointments) and must document the justification (see Payment Requirements: Portal to Portal Reimbursement).

b. Requesting Appropriate Interpreters

(1) The Requester must consult with the Customer on his/her communication needs and come to an agreement on his/her Interpreter preferences. The expressed needs and preferences shall be indicated on DSHS form 17-123a Request for Sign Language Interpreter.

(2) Authorized Requesters requesting Interpreter services through this contract reserve the right to determine if the Interpreter(s) meet the needs of any Appointment. This determination will be based on review of many factors, including, but not limited to:

(a) Number of the deaf, hard of hearing, deaf-blind Customer(s);

- (b) Expressed communication needs & preferences of the Customer(s);
- (c) Length of the Appointment;
- (d) Type/setting of Appointment;
- (e) Certification level of Interpreters.

- (3) The Requester and Contractor must make diligent effort to appropriately match the Interpreter's certification, experience, and preferences with the Customer's preferred communication needs, Appointment setting, and other information as indicated on DSHS form 17-123a Request for Sign Language Interpreter. The Requester/Contractor must not use Family Members or Interpreters not approved by ODHH to provide Interpreter services under this contract.
- (4) To assign appropriate Interpreters for Appointments, the Authorized Requester and Contractor shall use ODHH "Guidelines – Matching Qualified Interpreter with Appointment Setting" to match the Interpreter's certification with the Customer's preferred communication needs and Appointment setting.
- (5) The Contractor must check the requested Interpreter(s) availability, as indicated on DSHS form 17-123a Request for Sign Language Interpreter. If the specific Interpreter(s) requested is unavailable, the Contractor must inform the Requester of the Interpreter(s)'s unavailability.
- (6) The Requester reserves the right to reject any or all of the Interpreters selected by the Contractor as unacceptable.

c. Scheduling Interpreters

- (1) Under normal circumstances and based on availability of Qualified Sign Language Interpreters, two Interpreters will be assigned to Appointments scheduled to last longer than 1 ½ hours.
- (2) Circumstances requiring multiple (two or more) Interpreters regardless the length of the Appointment may include, but are not limited to:
 - (a) The needs of a deaf-blind Customer using tactile or close-up sign language;
 - (b) Two or more Customers joining different breakout sessions at meetings, trainings or conferences.
- (3) To make communication easier and more understandable, Contractors may recommend the use of a Certified or Qualified Deaf Interpreter (CDI or QDI) working with other Qualified Sign Language Interpreter(s) to meet the needs of some deaf Customers.

d. Confirmation of Interpreter Availability

Contractors will confirm Interpreter availability for an Appointment within forty-eight hours after receiving the request for Interpreter services from an Authorized Requester. Contractors will confirm Interpreter availability for an emergency Appointment within four hours.

10. No Shows and Cancellations

a. No Shows

- (1) The Interpreter must stay on the premises for Client, DSHS/state/WSPC Employee, or contracted service/medical provider No Shows for twenty minutes after the Appointment start

time before declaring a No Show, unless:

- (a) The Interpreter has been requested to stay longer, or
 - (b) State Employees or medical providers dismiss the Interpreter.
- (2) For Client, DSHS/Employee, or contracted service/medical provider No Shows, the completed DSHS form 17-123a Request for Sign Language Interpreter must be signed by the Interpreter and the DSHS/state/WSPC Employee or contracted service/medical provider to receive reimbursement.

b. Cancellations

- (1) Authorized Requesters reserve the right to cancel Interpreter Appointments with more than 2 Business Days/18 business hours notice of the scheduled Appointment time without penalty or charge. (For example, Cancellation by Thursday 3 p.m. for Appointment on Monday 3 p.m. If the scheduled Interpreter is not able to make it to a confirmed Appointment, it is the responsibility of the Contractor and/or Interpreter to make arrangements for another Interpreter to attend the Appointment.
- (3) If the Authorized Requester, Client, or DSHS/state Employee is canceling the Appointment, the Contractor must include the appropriate Cancellation information on the DSHS form 17-123a Request for Sign Language Interpreter. The form must then be signed by the Contractor to verify the Cancellation.
- (4) The Interpreter is not required to sign the completed DSHS form 17-123a Request for Sign Language Interpreter for Appointment Cancellations.

11. Invoicing/Billing Requirements

a. General Billing Requirements

- (1) The Contractor shall submit an original invoice and an original completed and signed DSHS form 17-123a Request for Sign Language Interpreter for each Appointment to the Requester's billing address. DSHS will not accept invoices for services requested by Unauthorized Requesters. Each invoice shall be submitted for payment no later than ninety days from date of service provided. All billing documents shall be maintained in an accurate, legible, and complete manner.
- (2) Each invoice shall be in accordance to the stipulations outlined in the Payment Processing section of this document and will:
 - (a) Reference the contract number
 - (b) Possess a unique invoice number
 - (c) List the organizational acronym (as shown in the Reporting Requirements, Monthly Data Reports section) for each Appointment billed
 - (d) Indicate the time required for the Appointment from the scheduled start time of the Appointment or when Interpreter shows up after scheduled start time, whichever is later, up to the scheduled or actual end time, whichever is later, at the bid Hourly Rate at the Interpreter's certification level. This includes the following, which should be listed separately on the invoice:

- i. The base rate for providing Sign Language Interpreter services for the first hour
 - ii. The Hourly Rate in thirty minute increments, rounding up, for providing Sign Language Interpreter services lasting longer than one hour
- (e) Indicate the amount and cost of all Mileage billed and any other billable expenses.
- (3) For all Appointments being billed on an invoice, all reimbursable services and expenditures (i.e. Interpreter services and Portal to Portal) for the invoiced Appointments must be submitted with the required documentation at the same time.
- b. Additional Medicaid Billing Requirements
 - (1) When the DSHS Client is an eligible Medicaid Client receiving Sign Language Interpreting services at a covered medical Appointment through an enrolled medical provider, the Contractor shall bill the Health and Recovery Systems Administration (HRSA) directly. The Contractor shall bill electronically using required applications available such as WAMedWeb. Any adjustments to submitted invoices/electronic claims must be completed within 90 days of the date of the original invoice/claim submittal.
 - (2) The Contractor is required to provide backup documentation with its billing (Section 11.a.) for the following situations:
 - (a) Mileage Reimbursement: Must include a MapQuest printout (or equivalent documentation) documenting Mileage traveled;
 - (b) Other Fees: Must include original receipt;
 - (c) Appointments lasting longer than two hours: Must supply a written explanation outlining a breakdown of how the Interpreter's time was spent during the Appointment.
 - (3) Backup documentation must be postmarked within 30 days of the day the claim was submitted electronically. Claims with backup documentation submitted after this 30 day period will be denied. When two Interpreters are scheduled for the same Appointment, both Interpreters' backup documentation must be submitted at the same time.
 - (4) Mail backup documentation to:

Attention: Huong Mai
 DSHS/HRSA
 Office of Transportation & Interpreter Services
 P.O. Box 45532
 Olympia, Washington 98504-5532
 - (5) Requests for training for Medicaid billing should go to the Office of Transportation and Interpreter Services at (360) 725-1318 or the address above.
 - (6) HRSA does not pay for Interpreter services for Medicaid Clients for the following medical facilities/services. It is the responsibility of the medical facility to pay for the medical services listed below:
 - (a) Inpatient hospital services (e.g. labor and delivery)
 - (b) Nursing facility services (covered by Aging and Adult Services)

- (c) Services provided by any other facility, agency, or provider that is required by federal or state law, regulation, or rules to provide those services (e.g. public health agencies, public hospitals and local health jurisdictions)
- (d) Community mental health centers, mental health clinics or mental health institution services (covered by Regional Support Network)
- (e) Alcohol or other drug-related treatment centers/programs
- (f) Emergency medical Appointments for Medicaid Clients

12. Payment Processing

a. Payment Time Frame (Net Thirty Days)

DSHS or an Authorized Requester will make payment for authorized services provided under this contract within thirty days of receipt of a complete and accurate invoice.

b. Adjustments

Incomplete and/or inaccurate invoices will be returned to the Contractor for correction. The payment within thirty days requirement will not be in effect until DSHS or the Authorized Requester receives a corrected invoice. All adjustments to billed Interpreter service amounts must be completed within ninety calendar days of the original date of billing by the Contractor; or as extended by the Requester.

c. Payment Dispute Resolution

- (1) Disputes related to payments made by DSHS or an Authorized Requester for services provided under this contract shall be resolved at the local level (i.e. between the Authorized Requester and the Contractor) with the exception of medical providers.
- (2) Disputes regarding services provided to medical providers must be resolved with the Health and Recovery Services Administration (HRSA), Division of Healthcare Services (DHS) – Interpreter Services Section.
- (3) If a resolution cannot be achieved at the local level, the dispute shall be forwarded by the Requester and/or Contractor to the Requester’s designated DSHS representative, pursuant to procedures established by DSHS.
- (4) Contractor and DSHS shall be responsible for exercising due diligence in identifying procedures related to the local level handling and forwarded appeals of payment disputes. Action pursuant to this clause by either party shall not be construed as a waiver of any legal avenue of recourse available through this contract.

d. Disallowed Payments

- (1) No payment will be allowed under the following circumstances:
 - (a) The Interpreter is an Employee of the Requester
 - (b) The Interpreter is a Family Member of the Customer
 - (c) The Interpreter is compensated for Interpreting services by any other means

- (d) The place of business has paid staff providing Interpreter services for the requested Appointment. (This does not apply to Contractors providing Sign Language Interpreter services.)
- (e) Any Cancelled Appointment or No Show that is not a result of the Interpreter shall not be compensated if the Interpreter is able to fill the timeslot with another Appointment. If only part of the timeslot is filled, the interpreter shall be compensated for any unfilled portion of the Cancelled timeslot. Payment of the Contractor Service Fee for these Appointments is still allowed.

13. Rates

a. Hourly Rate

- (1) Contractors shall be paid the Hourly Rate bid in the Contractor’s response to RFQQ #0945-004, if accepted and approved by DSHS.
- (2) Contractors shall pay all Interpreters the entire Hourly Rate bid and approved by DSHS. Contractors shall not deduct any portion of the Contractor Service Fee from the Interpreters’ Hourly Rate.

b. Base Rate

- (1) Contractors shall be paid a Base Rate for the first hour of all Appointments, including those lasting less than one hour. The Base Rate is calculated at 1.5 times the Interpreter’s Hourly Rate bid. The DSHS approved Base Rates are provided in the chart in Section 13.d.
- (2) Contractors shall be paid the regularly hourly rate for additional hours of Interpreting service. For example, if a Contractor bids \$50 per hour, payment for the first hour will be \$75 and payment for any additional hours will be at \$50 per hour.
- (3) Contractors shall pay all Interpreters the entire Base Rate. Contractors shall not deduct any portion of the Contractor Service Fee from the Interpreters’ Base Rate.

c. Medicaid Billing Units

- (1) For Medicaid Appointments, Contractors shall be paid for services in 15-minute units. (E.g. 1 unit = 15 minutes).
 - (a) Appointments lasting less than one hour will be billed as six 15-minute units.
 - (b) Appointments lasting longer than one hour will be billed in 30-minute increments, rounding up, using 15-minute units.
- (2) The following table provides examples of how Contractors shall be paid for Medicaid Appointments in comparison to non-Medicaid Appointments.

For Appointments lasting:	DSHS (Non-Medicaid) would be billed for:	Medicaid Appointments would be billed for:
25 minutes	Base Rate (1.5 times the Hourly Rate)	6 Units of Service
1 hour and 5 minutes	Base Rate for the first hour (1.5 times the Hourly Rate) plus 30 minutes	8 Units of Service
2 hours and 35 minutes	Base Rate for the first hour (1.5 times the Hourly Rate) plus 2 hours	14 Units of Service

d. Rates by Certification Level

Contractors shall be paid the rates listed in the chart below according to certification level.

National Association of the Deaf (NAD)	Registry of Interpreter f/t Deaf (RID)	National Interpreter Certification (NIC)	Non-Certified	Interpreter Hourly Rates	Base Rate (first hour only)
Level V	SC:L, MCSC	NIC Master Interpreter; NIC Advanced Interpreter	N/A	\$55.00/hr	\$82.50
DeafBlind Rate	DeafBlind Rate	DeafBlind Rate		\$58.00/hr	\$87.00
Level IV	CSC, CI and CT, RSC, CDI, CLIP-R	NIC Certified Interpreter	QDI	\$50.00/hr	\$75.00
DeafBlind Rate	DeafBlind Rate	DeafBlind Rate		\$53.00/hr	\$79.50
Level III	IC, TC, IC/TC, CI, CT, OIC:C, OTC	N/A	N/A	\$40.00/hr	\$60.00
DeafBlind Rate	DeafBlind Rate	DeafBlind Rate		\$43.00/hr	\$64.50
N/A	N/A	N/A	Non-Certified	\$25.00/hr	\$37.50
			DeafBlind Rate	\$28.00/hr	\$42.00

e. Other Fees and Rates

Contractors shall be paid the fees and rates listed in the chart below if applicable for the Contractor's delivery of service.

Service Component	Explanation	Fee or Rate
Contractor Service Fee	Fee for the Contractor's administrative time and billable per requested interpreter per appointment.	\$30
Emergency Appointments	Fee added to the Interpreter's Hourly Rate for Emergency Appointments.	\$5
Interpreter No Shows	No fee is due when an Interpreter is a No Show.	N/A
All Other No Shows	Fee when someone other than the Interpreter is a No Show for the scheduled Appointment.	Full payment
Cancellations with MORE THAN 2 Business Days/18 business hours notice	No fee is due when an appointment is cancelled with 2 Business Days/18 business hours, or more, notice.	N/A
Cancellations with LESS THAN 2 Business Days/18 business hours notice	Fee when appointment is cancelled with less than 2 Business Days/18 business hours notice. If Cancellation of an Appointment lasting 2 days or less in duration occurs with less than 2 Business Days/18 business hours notice, the Contractor will be paid in full for the time scheduled. If Cancellation of an Appointment lasting 3 days or longer in duration occurs with less than 2 Business Days/18 business hours notice, the Contractor and the	Full payment

	Requester may negotiate the reimbursement amount on a case-by-case basis. Contractor shall document the appropriate Cancellation information on DSHS form 17-123a Request for Sign Language Interpreter for all Cancellations.	
Cancellations of Recurring Medical Appointments	Fee when a Recurring Medicaid Appointment is cancelled.	Fee (and scheduling of future appointments) Requires HRSA Pre-Approval
Cancellations by Interpreter with No Replacement	No fee is due for an Interpreter's service (including all interpreting costs and the Contractor Service Fee) if an Interpreter cancels and a replacement Interpreter has not been provided.	N/A
Travel Time	Travel time shall not be paid through this contract.	N/A
Lodging	All lodging costs require pre-approval from the authorized Requester.	Variable

f. Mileage and Transportation Expenses and Rates

- (1) Contractors shall be paid for mileage and other transportation expenses (parking, ferry travel, tolls), if the expense was a result of travel to or from a requested Appointment, and stated in the chart below, and in accordance with the prevailing Office of Financial Management (OFM) Policy & Guidelines rate stated on <http://www.ofm.wa.gov/resources/travel/colormap.pdf>
- (2) DSHS will notify Contractors of any change in the OFM rate before it becomes effective.
- (3) Receipts for all transportation expenses sought for reimbursement must be submitted with the invoice.

Mileage & Transportation Expenses	Allowed
From "address of origin" (address where the Interpreter came from) to "address of Appointment."	Yes
From "address of Appointment" to "address of destination" (address where the Interpreter will go after the Appointment) if the Interpreter is traveling from the Appointment to the Interpreter's home or place of business.	Yes
From "address of Appointment" to "address of destination" (address where the Interpreter will go after the Appointment) if the Interpreter is traveling from the Appointment to a subsequent Appointment. Mileage to subsequent appointments and the return trip to the Interpreter's home or place of business may be paid by the subsequent Requesters.	No
Allowed mileage, as stated above, which results in a Client, DSHS/State/WSPC Employee, or Requester No Show.	Yes
Mileage when an Interpreter is a No Show or cancels the Appointment.	No
Mileage for a cancelled Appointment that the Interpreter has not begun traveling to.	No
Mileage for a cancelled Appointment that the Interpreter has already arrived to (in which case an employee of the Authorized Requester must sign the DSHS form 17-123a Request for Sign Language Interpreter) or is traveling to (which must be documented on the DSHS form 17-123a Request for Sign Language Interpreter).	Yes

14. Reporting Requirements

a. List of Interpreters

Contracted Interpreter referral agencies are required to submit a complete roster of their Interpreters, including certification level, to ODHH on a quarterly basis.

b. Interpreter Services Usage

(1) Data for each purchaser listed below, per the DSHS inter-agency/inter-local agreements, and the Department of General Administration Washington State Purchasing Cooperative (WSPC), will be distinguished between the following types of Requesters:

- (a) State of Washington departments or state agencies
- (b) Other Governmental Entities
- (c) Contracted Service Providers

c. Monthly Data Reports

(1) The Contractor shall submit monthly data reports to ODHH by the last day of the month following the month of service being reported (for example, July's report is due August 31). The Contractor will be required to utilize a standardized report template in Microsoft Excel format when reporting monthly data to ODHH. Data for each State of Washington department or state agency that requested and/or received services during the period being reported shall be separated. An electronic version of the report template and a list of each State of Washington state agency will be provided to Contractors at the time of award.

(2) Within the DSHS report, data for each DSHS administration and division listed below that requested and/or received services during the period being reported shall be separated as follows:

(a) Aging and Disability Services Administration (ADSA)

- Division of Developmental Disabilities (DDD)
- Home & Community Services (HCS)
- Residential Care Services (RCS)

(b) Children's Administration (CA)

- Division of Children and Family Services (DCFS)
- Division of Licensed Resources (DLR)

(c) Economic Services Administration (ESA)

- Community Services Division (CSD)
- Division of Child Support (DCS)

(d) Division of Child Care and Early Learning (DCCEL)

(e) Deputy Secretary

- Division of Vocational Rehabilitation (DVR)
- Special Commitment Center (SCC)
- Office of Deaf and Hard of Hearing (ODHH)

(f) Juvenile Rehabilitation Administration (JRA)

(g) Health and Recovery Services Administration (HRSA)

Division of Healthcare Services (DHS) - Interpreter Services Section
Division of Disability Determination Services (DDDS)
Division of Alcohol and Substance Abuse (DASA)
Mental Health Division (MHD)

d. Data Elements

(1) The monthly report will include a minimum of the following data elements (ODHH reserves the right to change the reporting requirements of the data elements):

(a) General Information

- i. Name of the Contractor
- ii. Report period (month and year)
- iii. DSHS Administration/Division/Agency requesting Interpreter services

(b) Appointment Information

- i. Total number of Appointments with completed service
- ii. Total number of requests unable to fill with an Interpreter
- iii. Total number of No Shows for:
 - (A) Clients
 - (B) Service/Medical Provider or DSHS/State/WSPC Employee
 - (C) Interpreter
- iv. Total number of Cancellations for:
 - (A) Clients
 - (B) Service/Medical Provider or DSHS/State/WSPC Employee
 - (C) Interpreter
- v. Total hours and cost billed for Interpreter services (including No Shows/Cancellations)
- vi. Total hours and cost billed for Interpreter services at deaf-blind rates
- vii. Total number and cost of miles billed
- viii. Total amount of other fees billed