



KAY IVEY
GOVERNOR

STATE OF ALABAMA
DEPARTMENT OF MENTAL HEALTH

RSA UNION BUILDING
100 N. UNION STREET
POST OFFICE BOX 301410
MONTGOMERY, ALABAMA 36130-1410
www.mh.alabama.gov



LYNN T. BESHEAR
COMMISSIONER

October 1, 2017

Dear Vendor:

The AL Department of Mental Health (DMH) is requesting proposals from individuals and/or agencies to provide **Interpreter and/or Computer Assisted Real Time Captioning** services. **This notice is opened until further notice.**

Employees of DMH may not respond to this Request for Proposal (RFP).

The submission of a proposal does not guarantee the award of a contract. Any contract resulting from the proposal is not effective until it has received all required governmental approvals and signatures. In addition, the selected vendor shall not begin performing work under this contract until notified to do so by the departmental contracting agent.

When submitting a proposal, please read the entire request for proposal document and return your proposal in the requested format. All proposals should be submitted in ink or typed and contain an original signature. Submissions should be delivered to:

AL Department of Mental Health
Office of Contracts & Purchasing
100 North Union Street, Suite 570
Montgomery, AL 36104

MAILING NOTE: Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered. Emailed or faxed responses are **not** accepted. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, thus delaying its arrival to the department.

Sincerely,

Joey Kreauter

Joey Kreauter, Director
Office of Contracts & Purchasing

Request for Proposal (RFP)

Organization: Alabama Department of Mental Health

Apply by: **This notice is opened until further notice.**
Emailed or faxed responses are not accepted.

Contact Information: Leola Rogers
Office of Contracts & Purchasing
Alabama DMH
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104
Telephone Number (334) 353-7440
Fax Number (334) 353-7090
Email: leola.rogers@mh.alabama.gov
Submit all RFP questions to the email above.

MAILING NOTE:

Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered. Emailed or faxed responses are **not** accepted. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, thus delaying its arrival to the department.

ADDITIONAL INFORMATION

1. Who **may** respond to this RFP? Interpreting Agencies and Individuals.
2. Who **may not** respond to this RFP? Employees of ADMH and current state employees.
3. In order to do business in the State of Alabama all businesses domestic and foreign must be registered with the Alabama Secretary of State Office.
*Domestic means within the State of Alabama. **Foreign means out-of-state.
4. If contracted with the State of Alabama, all vendors must:
 - Enroll in E-Verify System thru Homeland Security.
 - Register with STAARS Vendor Self Service at <https://procurement.staars.alabama.gov/webapp/PRDVSS1X1/AltSelfService>
5. The Department of Mental Health reserves the right to reject any and all proposals if RFP instructions are not adhered to, such as: received after deadline (see mailing note), requested # of submissions not received.

The Alabama Department of Mental Health (DMH) is seeking agencies and/or individuals to provide **Interpreter and/or Computer Assisted Real Time Captioning (CART)** services in the State of Alabama.

Required qualifications:

1. Individuals may meet any of the required qualifications listed in Exhibit DS-I (See attached). The level of certification must be identified in the proposal.

The contractor will provide the following services:

1. Interpreters/CART providers will convey messages between Deaf and/or Hard of Hearing , staff, consumers or other individuals/agencies and hearing staff, consumers, or other individual/agencies through interpreting, transliteration, cued speech, CART, or other language modalities as contracted by the AL Department of Mental Health .
2. Interpreters/CART providers will submit invoices based on certification and instructions as outlined in Exhibit DS-II (See attached).

=====

PROPOSAL CONTENT

Each proposal is to contain **specific responses** to each of the following requests and respondents are encouraged to respond fully to each inquiry, but to be as concise as possible. **Submit with one (1) original and one (1) copy.** Submit the response to each item on a separate page with the item reproduced at the top of the first page of the response.

Instructions must be followed or responses will not be graded.

1. Submit a cover letter summarizing your proposal. Limit the cover letter to no more than one page.
2. Attach general information regarding the respondent including correct address, telephone and fax number (if applicable). Include respondent’s previous experience, knowledge of Interpreter/CART services, special training, or any other information pertaining to the respondent’s capabilities to carry out this service.
3. Based on fee schedule enclosed, a copy of each pertinent certification must be attached to the proposal.

=====

Mail **one (1) signed original and one (1) copy** of your proposal to the address below. **This notice is opened until further notice.**

Joey Kreauter, Director
Office of Contracts & Purchasing
AL DMH
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104

Proposals must be clearly marked **Interpreter/CART Services for DMH.** All proposals will be received until further notice.

The DMH assumes no responsibility for expenses incurred in the preparation of the proposal. The DMH reserves the right to reject any and all proposals. Additionally, the DMH reserves the right to waive irregularities in any proposals and request clarification of any information, and negotiate with the firm and/or individual submitting the best proposal to secure conditions that are more favorable.

Evaluation Process

The DMH may elect to conduct interviews with finalists.

Selection Criteria

Selection shall be based on factors to be developed by the procuring state entity, which may include among others, the following:

1. Specialized expertise, capabilities, and technical competence, as demonstrated by the proposed approach and methodology to meet project requirements.
2. Resources available to perform the work, including any specialized services within the specified time limits for the project.
3. Record of past performance, quality of work, ability to meet schedules, cost control and contract administration.
4. Availability to a familiarity with the project locale.
5. Proposed project management techniques.
6. Ability and proven history in handling special project contracts.

Evaluation Criteria

Proposals will be evaluated based on their responsiveness to the items contained in the content section of this Request for Proposal. It is expected that the review committee will rate responses according to the following ways:

1. Experience, stability and reputation –35%
2. Understanding of and responsiveness to the Request for Proposal – 25%
3. Expertise and knowledge of interpreter services – 40%

EXHIBIT DS-I
Fee Schedule for Interpreting Services (Hourly)
 Effective October 1, 2016

Nationally Certified Interpreter holding QMHI <i>(RID certified holding generalist certification, including RID and/or NAD 4/5) (1)</i>	\$60
Nationally Certified Interpreter completed MHIT Practicum <i>(RID certified, holding generalist certification, including RID and/or NAD 4/5) (1)</i>	\$50
Nationally Certified Interpreter with MHIT Training <i>(RID certified, holding generalist certification, including RID and/or NAD 4/5) (1)</i>	\$45
Nationally Certified Interpreter <i>(RID certified, holding generalist certification including RID and/or NAD 4/5) (1)</i>	\$40
<i>(1)Acceptable RID generalist certifications include CI, CT, OTC, IC, TC, CSC, RSC, NIC, NIC-Advanced, NIC-Master, CDI or certifications deemed equivalent by the Office of Deaf Services.</i>	
Licensed/Permitted Interpreter with MHIT Training <i>(NAD 3, EIPA 3.0 or above or other certifications deemed appropriate by the Office of Deaf Services)</i>	\$35
Licensed/Permitted Interpreter <i>(NAD 3, EIPA 3.0 or above or other certifications deemed appropriate by the Office of Deaf Services)</i>	\$25
Permitted Interpreter \$20(2) <i>(Below NAD 3, EIPA below 3.0 or other certifications deemed appropriate by the Office of Deaf Services)</i>	
<i>(2)Permitted Interpreter with less than an NAD 3 or equivalent certification may only be utilized with pre-approval by the Office of Deaf Services in situations where the service provision would be appropriate, a more qualified individual is not available, the appointment cannot be rescheduled, and all parties are willing to accept the interpreting product.</i>	
Visual Gestural Communication Specialist/Deaf Relay Interpreter With MHIT Training	\$35
Visual Gestural Communication Specialist/Deaf Relay Interpreter	\$25
Support Service Provider (SSP) with MHIT Training	\$25
Support Service Provider (SSP)	\$20
SLPI Evaluator (per interview)	\$25
SLPI Evaluator (per evaluation)	\$35
Video Remote Interpreting <i>(Per Minute, no portal or mileage charges, annual \$100 setup fee)</i>	\$3.50 per minute
Certified C-Print (or equivalent) Captionist with MHIT Training	\$30
Certified C-Print (or equivalent) Captionist	\$25

Certified C-Print (or equivalent) Captionist/Interpreter (3)
 (3) *Nationally Certified Interpreters will be paid at the appropriate Interpreter Rate*

Real-time Captionist, CART \$130

Sign Fluent Therapist \$25.00(4)
 (4) *Sign Fluent Therapist providing direct therapy, not utilizing additional interpreting support services (Sign Fluent is defined as maintaining an Advanced or higher Sign Language Proficiency Interview (SLPI) score, nationally certified interpreter or equivalent as defined by the Office of Deaf Services.)*

Sign Fluent Therapist (Psychologist/Psychiatrist) \$175.00(5) (6)
 (5) *Sign Fluent Therapist providing direct therapy, not utilizing additional interpreting support services (Sign Fluent is defined as maintaining an Advanced or higher Sign Language Proficiency Interview (SLPI) score, nationally certified interpreter or equivalent as defined by the Office of Deaf Services.)*
 (6) *Other payer options should be explored as a primary payer prior to invoice submission. Requires pre-approval from the State Director, Office of Deaf Services or State Coordinator, Interpreting, Office of Deaf Services.*

Portal ½ Hourly Rate (7)
 (7) *½ of the Appropriate Hourly Rate Based on qualifying certification and training up to \$30 per hour.*

Interpreter Referral Agency \$5 hour
May add an additional \$5 per hour above the interpreter's rate, when agency is an interpreter referral agency and sub-contracting work.

MHIT Attendance \$5 Hour
All categories, not already mentioned who have completed 40 hours of training at MHIT are permitted to charge an additional \$5 an hour.

Per Diem \$75 for each overnight stay (8)
 (8) *Requires pre-approval from the State Director, Office of Deaf Services or State Coordinator, Interpreting, Office of Deaf Services*

Mileage Current State Rate

**DEFINITIONS
 Acronyms Used**

CART	Computer Assisted Real Time Captioning
CDI	Certified Deaf Interpreter
CI	Certificate of Interpretation
CSC	Comprehensive Skills Certificate
CT	Certificate of Transliteration
IC	Interpretation Certificate
II	Interpreter Institute
MHIT	Mental Health Interpreter Training
NAD	National Association of the Deaf
NIC	National Interpreter Certification
OTC	Oral Transliteration Certification
QMHI	Qualified Mental Health Interpreter
RID	Registry of Interpreters for the Deaf
RSC	Reverse Skills Certificate
SLPI	Sign Language Proficiency Interview
SSP	Support Service Provider
TC	Transliteration Certificate
VGCS	Visual Gestural Communication Specialist

EXHIBIT DS-II
Alabama Department of Mental Health
Office of Deaf Services

Interpreter Services Invoicing Procedures

To assure that ADMH is using fiscal resources in the most effective manner when providing interpretive services to Deaf or Hard of Hearing clients and/or staff.

General Guidelines

Invoices must be submitted in a timely matter from the date of service delivery to the State of Alabama Department of Mental Health through submission of the appropriate payment voucher to the Regional Interpreter in the appropriate area of service provision. End of the fiscal year invoices must be received before the cut-off date of the 13th accounting month. ADMH fiscal year runs October 1 – September 30.

Payment will only be provided for services that have been pre-approved for payment by the Regional Interpreter Coordinators or by the Office of Deaf Services.

Invoices from the service provider should include the following information:

- Date of service provision
- Number of hours
- Interpreting Rate (according to DMH fee schedule)
- Portal Rate (if applicable, and must be itemized separately from the interpreter rate.)
- Name of Interpreter
- Name of Client or Client Number
- Mileage and Mileage Rate
- Total

Incomplete invoices will result in a delay or denial of payment.

All interpreting services will be provided by qualified individuals eligible to work as interpreters according to Alabama Licensure Law.

Time should be charged in 15 minute increments.

Interpreters are reimbursed one-hour minimum for assignments.

In addition to the hourly rate, interpreters should be reimbursed mileage according to the current state rate.

Portal reimbursement will not be paid except in cases where mileage is beyond a 30 mile radius from the provider's base (defined as their home, unless otherwise noted). In cases where travel extends beyond a 30 mile radius, the interpreter will be paid one-half of their normal hourly rate, as defined in Exhibit DS-I. Time should be charged in 15 minute increments.

In the case of "No-shows" assignments or assignments cancelled with less than 24 hour notice, Interpreters may invoice per agreement, actual mileage traveled, actual portal traveled, and the time allotted the assignment as provided up to the amounts listed in the Fee Schedule.