INVITATION TO BID NO: 10-X-2207486

STATE OF ALABAMA

DEPTARTMENT OF FINANCE
DIVISION OF PURCHASING

INVITATION TO BID

REQ. AGENCY	: 062000 ALABAMA MEDICAID AGENCY
AGENCY REQ. NO.	: 068100
T-NUMBER	: TA965
DATE ISSUED	: 07/23/09
VENDOR NO.	:
VENDOR PHONE NO.	:
SNAP REQ. NO.	: 1418077
BUYER NAME	: RAY BRESSLER
BUYER PHONE NO.	: (334) 242-4670-
PURCHASING PHONE NO	: (334) 242-7250

FOR: LANGUAGE LINE/ITB

BID MUST BE RECEIVED BEFORE:
DATE: 08/20/09 TIME: 5:00 PM

BIDS WILL BE PUBLICLY OPENED:
DATE: 08/21/09 TIME: 10:00 AM

TO BE COMPLETED BY VENDOR

INFORMATION IN THIS SECTION SHOULD BE PROVIDED, AS APPROPRIATE. BID RESPONSE MUST BE IN INK OR TYPED WITH ORIGINAL SIGNATURE AND NOTARIZATION.

1. DELIVERY: CAN BE MADE _____ DAYS OR _____ WEEKS AFTER RECEIPT OF ORDER

2. TERMS: _____(DISCOUNTS ARE TAKEN WITHOUT REGARD TO DATE OF PAYMENT.)

3. PRICE VALID FOR ACCEPTANCE WITHIN _____ DAYS.

4. VENDOR QUOTATION REFERENCE NUMBER, IF ANY: _____
(THIS NUMBER WILL APPEAR ON THE PURCHASE ORDER.)

5. E-MAIL ADDRESS: _____

INTERNET WEBSITE: _____

6. GENERAL CONTRACTOR'S LICENSE NO: _____

TYPE OF G.C. LICENSE: _____

RETURN INVITATION TO BID:

US MAIL	COURIER
STATE OF ALABAMA DEPARTMENT OF FINANCE DIVISION OF PURCHASING P O BOX 302620 MONTGOMERY, AL 36130-2620	STATE OF ALABAMA DIVISION OF PURCHASING RSA UNION BUILDING 100 N. UNION ST., SUITE 192 MONTGOMERY, AL 36104

***** IMPORTANT NOTE: *****
BIDDERS MUST COMPLY WITH ALL "BID RESPONSE INSTRUCTIONS" ON PAGE 2, TO INCLUDE ITEM 7 - COPY REQUIREMENT.

SIGNATURE AND NOTARIZATION REQUIRED

I HAVE READ THE ENTIRE BID AND AGREE TO FURNISH EACH ITEM OFFERED AT THE PRICE QUOTED. I HERBY AFFIRM I HAVE NOT BEEN IN ANY AGREEMENT OR COLLUSION AMONG BIDDERS IN RESTRAINT OF FREEDOM OF COMPETITION BY AGREEMENT TO BID AT A FIXED PRICE OR TO REFRAIN FROM BIDDING.

SWORN TO AND

SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____

_____
NOTARY PUBLIC

TERM EXP: _____

_____ FEIN OR SSN	_____ AUTHORIZED SIGNATURE (INK)
_____ COMPANY NAME	_____ TYPE/PRINT AUTHORIZED NAME
_____ MAIL ADDRESS	_____ TITLE
_____ CITY, STATE, ZIP	_____ TOLL FREE NUMBER
_____ PHONE INCLUDING AREA CODE	_____ FAX NUMBER

AUTHORITY:
THE DEPARTMENT OF FINANCE CODE OF ADMINISTRATIVE PROCEDURE, CHAPTER 355-4-1 EFFECTIVE DECEMBER 20, 2001 IS INCORPORATED BY REFERENCE AND MADE A PART OF T HIS DOCUMENT. TO RECEIVE A COPY CALL (334)242-7250, OR OUR WEBSITE WWW.PURCHASING.ALABAMA.GOV .

INFORMATION AND ASSISTANCE TO MINORITY BUSINESSES IN THE TECHNICAL COMPLETION OF REQUIRED FORMS MAY BE OBTAINED FROM THE OFFICE OF MINORITY BUSINESS ENTERPRISE, 1-800-447-4191.

BID (ITB) RESPONSE INSTRUCTIONS REV: 04/07/09

1. TO SUBMIT A RESPONSIVE BID, READ THESE INSTRUCTIONS, ALL TERMS, CONDITIONS AND SPECIFICATIONS.

2. BID ENVELOPES/PACKAGES/BOXES MUST BE IDENTIFIED ON FRONT, PREFERABLY LOWER LEFT CORNER AND BE VISIBLE WITH THE BID NUMBER AND OPENING DATE. EACH INDIVIDUAL BID (IDENTIFIED BY A UNIQUE BID NUMBER) MUST BE SUBMITTED IN A SEPERATE ENVELOPE. RESPONSES TO MULTIPLE BID NUMBERS SUBMITTED IN THE SAME ENVELOPE/COURIER PACKAGE, THAT ARE NOT IN SEPARATE ENVELOPES PROPERLY IDENTIFIED, WILL BE REJECTED. THE DIVISION OF PURCHASING DOES NOT ASSUME RESPONSIBILITY FOR LATE BIDS FOR ANY REASON INCLUDING THOSE DUE TO POSTAL, OR COURIER SERVICE. BID RESPONSES MUST BE IN THE DIVISION OF PURCHASING OFFICE PRIOR TO THE "RECEIVE DATE AND TIME" INDICATED ON THE BID.

3. BID RESPONSES (PAGE 1, PRICE SHEET AND ADDENDUMS (WHEN SIGNATURE IS REQUIRED)) MUST BE IN INK OR TYPED ON THIS DOCUMENT. OR EXACT FORMAT WITH SIGNATURES BEING HANDWRITTEN ORIGINALS IN INK (PERSON SIGNING BID, NOTARY, AND NOTARY EXPIRATION), OR THE BID WILL BE REJECTED. UNLESS INDICATED IN THE BID, ALL PRICE PAGES MUST BE COMPLETED AND RETURNED. IF AN ITEM IS NOT BEING BID, IDENTIFY IT AS NB (NO-BID). PAGES SHOULD BE SECURED. THE DIVISION OF PURCHASING DOES NOT ASSUME RESPONSIBILITY FOR MISSING PAGES. FAXED BID RESPONSES WILL NOT BE ACCEPTED.

4. THE UNIT PRICE ALWAYS GOVERNS REGARDLESS OF THE EXTENDED AMOUNT. A UNIT PRICE CHANGE ON A LINE MUST BE INITIALED BY THE PERSON SIGNING THE BID, OR THAT LINE WILL BE REJECTED. THIS INCLUDES A CROSS-OUT, STRIKE-OVER, INK-OVER, WHITE-OUT, ERASURE, OR ANY OTHER METHOD CHANGING THE PRICE.

5. A "NO BID" MUST BE RETURNED TO REMAIN ON A CLASS/SUBCLASS. RETURN PAGE 1 MARKED "NO-BID". IDENTIFY IT ON THE ENVELOPE AS A "NO-BID". FAILING TO RESPOND TO 3 ITB'S WITHIN THE SAME CLASS/ SUBCLASS WILL AUTOMATICALLY PURGE THE VENDOR FROM THAT CLASS/SUBCLASS. RESPONDING WITH 6 "NO-BIDS" WITHIN THE SAME CLASS/SUBCLASS WILL AUTOMATICALLY PURGE THE VENDOR FROM THAT CLASS/ SUBCLASS. A "NO-BID" RECEIVED LATE IS CONSIDERED A NO RESPONSE.

6. THE DIVISION OF PURCHASING IS NOT RESPONSIBLE FOR MISINTERPRETATION OF DATA FAXED FROM THIS OFFICE.

7. THE DIVISION OF PURCHASING REQUIRES AN ORIGINAL AND A MINIMUM OF ONE COMPLETE EXACT COPY (TO INCLUDE SIGNATURE AND NOTARY) OF THE INVITATION-TO-BID RESPONSE. THE ORIGINAL AND THE COPY SHOULD BE SUBMITTED TOGETHER AS A BID PACKAGE.

8. AN IMPROPERLY SUBMITTED BID, LATE BID, OR BID THAT IS CANCELLED ON OR BEFORE THE OPENING DATE WILL BE HELD FOR 90 DAYS AND THEN DESTROYED. THE BID MUST BE RETRIEVED DURUIG REGULAR WORK HOURS, MONDAY - FRIDAY, EXCEPT STATE HOLIDAYS. AFTER THE BID IS DESTROYED, THE DIVISION OF PURCHASING ASSUMES NO RESPONSIBILITY FOR THE DOCUMENT.

DISQUALIFIED/CANCELLED BID

BIDS THAT ARE IMPROPERLY SUBMITTED OR RECEIVED LATE WILL BE A RESPONSE FOR RECORD, BUT WILL NOT BE RETURNED OR A NOTIFICATION MAILED.

THE FOLLOWING IS A PARTIAL LIST WHEREBY A BID RESPONSE WILL BE DISQUALIFIED:

BID NUMBER NOT ON FACE OF ENVELOPE/COURIER PACKAGE/BOX
RESPONSES TO MULTIPLE BID NUMBERS IN SAME ENVELOPE NOT PROPERLY IDENTIFIED
BID RECEIVED LATE
BID NOT SIGNED/NOT ORIGINAL SIGNATURE
BID NOT NOTARIZED/NOT ORIGINAL SIGNATURE OF NOTARY AND/OR NO NOTARY EXPIRATION
NOTARIZED OWN SIGNATURE
REQUIRED INFORMATION NOT SUBMITTED WITH BID
FAILURE TO SUBMIT THE ORIGINAL BID AND A COMPLETE EXACT COPY WILL RESULT IN REJECTION OF THE BID RESPONSE
FAILURE TO MARK RESPONSES AS "ORIGINAL" AND/OR "COPY" COULD RESULT IN THE ENTIRE BID RESPONSE BEING REJECTED

CERTIFICATION PURSUANT TO ACT NO. 2006-557

ALABAMA LAW (SECTION 41-4-116,CODE OF ALABAMA 1975) PROVIDES THAT EVERY BID SUBMITTED AND CONTRACT EXECUTED SHALL CONTAIN A CERTIFICATION THAT THE VENDOR, CONTRACTOR, AND ALL OF ITS AFFILIATES THAT MAKE SALES FOR DELIVERY INTO ALABAMA OR LEASES FOR USE IN ALABAMA ARE REGISTERED, COLLECTING, AND REMITTING ALABAMA STATE AND LOCAL SALES, USE, AND/OR LEASE TAX ON ALL TAXABLE SALES AND LEASES INTO ALABAMA. BY SUBMITTING THIS BID, THE BIDDER IS HEARBY CERTIFYING THAT THEY ARE IN FULL COMPLIANCE WITH ACT NO. 2006-557, THEY ARE NOT BARRED FROM BIDDING OR ENTERING INTO A CONTRACT PURSUANT TO 41-4-116, AND ACKNOWLEDGES THAT THE AWARDING AUTHORITY MAY DECLARE THE CONTRACT VOID IF THE CERTIFICATION IS FALSE.

INTENT TO AWARD

EFFECTIVE MAY 1, 2008, THE STATE OF ALABAMA - DIVISION OF PURCHASING WILL ISSUE AN 'INTENT TO AWARD' BEFORE A FINAL AWARD IS MADE. THE 'INTENT TO AWARD' WILL CONTINUE FOR A PERIOD OF FIVE (5) CALENDAR DAYS, AFTER WHICH A PURCHASE ORDER WILL BE PRODUCED. UPON FINAL AWARD, ALL RIGHTS TO PROTEST ARE FORFEITED. A DETAILED EXPLANATION OF THIS PROCESS MAY BE REVIEWED IN THE ALABAMA ADMINISTRATIVE CODE - CHAPTER 355-4-1(14).

ALTERNATE BID RESPONSE

UNLESS STATED ELSEWHERE IN THIS INVITATION-TO-BID (ITB) THE STATE OF ALABAMA WILL ACCEPT AND EVALUATE ALTERNATE BID SUBMITTALS ON ANY ITB'S. ALTERNATE BID RESPONSES WILL BE EVALUATED ACCORDING TO THE REQUIREMENTS AS ALL OTHER RESPONSES TO THIS ITB.

INTERNET WEBSITE LINK'S

INTERNET AND/OR WEBSITE LINKS WILL NOT BE ACCEPTED IN BID RESPONSES AS A MEANS TO SUPPLY ANY REQUIREMENTS STATED IN THIS ITB (INVITATION-TO-BID).

PRODUCT DELIVERY, RECEIVING AND ACCEPTANCE

IN ACCORDANCE WITH THE UNIVERSAL COMMERCE CODE (CODE OF ALABAMA, TITLE 7), AFTER DELIVERY, THE STATE OF ALABAMA HAS THE RIGHT TO INSPECT ALL PRODUCTS BEFORE ACCEPTING. THE STATE WILL INSPECT PRODUCTS IN A REASONABLE TIMEFRAME. SIGNATURE ON A DELIVERY DOCUMENT DOES NOT CONSTITUTE ACEPTANCE BY THE STATE. THE STATE WILL ACCEPT PRODUCTS ONLY AFTER SATISFACTORY INSPECTION.

SALES TAX EXEMPTION

PURSUANT TO THE CODE OF ALABAMA, 1975, TITLE 40-23-4 (A) (11), THE STATE OF ALABAMA IS EXEMPT FROM PAYING SALES TAX. AN EXEMPTION LETTER WILL BE FURNISHED UPON REQUEST.

INVOICES

INQUIRIES CONCERNING PAYMENT AFTER INVOICES HAVE BEEN SUBMITTED ARE TO BE DIRECTED TO THE RECEIVING AGENCY, NOT THE DIVISION OF PURCHASING

BID RESPONSES AND BID RESULTS

UNEVALUATED BID RESPONSES (NOT BID RESULTS) ARE AVAILABLE ON OUR WEB SITE AT WWW.PURCHASING.ALABAMA.GOV. BID RESULTS WILL BE MADE AVAILABLE FOR REVIEW IN THE DIVISION OF PURCHASING OFFICE, BUT ONLY AFTER THE BID HAS BEEN AWARDED. WE DO NOT FAX OR MAIL COPIES OF BID RESULTS. IF A VENDOR WISHES TO REVIEW BID RESULTS IN OUR OFFICE, THEY SHOULD FAX THEIR REQUEST TO REVIEW THE BID TWO DAYS IN ADVANCE TO THE "BID REVIEW CLERK" AT (334) 242-4419. BE SURE TO REFERENCE THE BID NUMBER.

FOREIGN CORPORATION - CERTIFICATE OF AUTHORITY

ALABAMA LAW PROVIDES THAT A FOREIGN CORPORATION (AN OUT-OF-STATE COMPANY/FIRM) MAY NOT TRANSACT BUSINESS IN THE STATE OF ALABAMA UNTIL IT OBTAINS A CERTIFICATE OF AUTHORITY FROM THE SECRETARY OF STATE. SECTION 10-2B-15.01, CODE OF ALABAMA 1975. TO OBTAIN FORMS FOR A CERTIFICATE OF AUTHORITY, CONTACT THE SECRETARY OF STATE, CORPORATIONS DIVISION, (334) 242-5324. THE CERTIFICATE OF AUTHORITY DOES NOT KEEP THE VENDOR FROM SUBMITTING A BID.

BID IDENTIFICATION

REFERENCE PAGE 2, ITEM 2. DUE TO THE POSTAL SERVICE PUTTING BAR CODE LABELS ON ENVELOPES, IT CONCEALS THE BID NUMBER AND DATE IF THE VENDOR HAS WRITTEN THEM OTHER THAN THE LOWER LEFT CORNER, THEREFORE THE BID WOULD BE REJECTED FOR NOT BEING PROPERLY IDENTIFIED.

****

AWARD:
THE AWARD SHALL BE MADE TO THE LOWEST RESPONSIBLE BIDDER MEETING ALL SPECIFICATIONS. LOWEST BIDDER WILL BE DETERMINED BY THE LOWEST SUM OF PRICE/MINUTE (SPANISH) AND PRICE/MINUTE (ALL OTHER LANGUAGES).
ASSIGNMENT OF CONTRACT:
TO ASSIGN, SUBLET OR TRANSFER ANY CONTRACT RESULTING FROM THIS SOLICITATION, THE VENDOR'S WRITTEN REQUEST MUST BE APPROVED BY THE STATE PURCHASING DIRECTOR.

NON-APPROPRIATION OF FUNDS:
CONTINUATION OF ANY AGREEMENT BETWEEN THE STATE AND A BIDDER BEYOND A FISCAL YEAR IS CONTINGENT UPON CONTINUED LEGISLATIVE APPROPRIATION OF FUNDS FOR THE PURPOSE OF THIS BID AND ANY RESULTING AGREEMENT. NON-AVAILABILITY OF FUNDS AT ANY TIME SHALL CAUSE ANY AGREEMENT TO BECOME VOID AND UNENFORCEABLE AND NO LIQUIDATED DAMAGES SHALL ACCRUE TO THE STATE AS A RESULT. THE STATE WILL NOT INCUR LIABILITY BEYOND THE PAYMENT OF ACCRUED AGREEMENT PAYMENT.

PRORATION:
ANY PROVISION OF A CONTRACT RESULTING FROM THIS BID TO THE CONTRARY NOTWITHSTANDING, IN THE EVENT OF FAILURE OF THE STATE TO MAKE PAYMENT HEREUNDER AS A RESULT OF PARTIAL UNAVAILABILITY, AT THE TIME SUCH PAYMENT IS DUE, OF SUCH SUFFICIENT REVENUES OF THE STATE TO MAKE SUCH PAYMENT (PRORATION OF APPROPRIATED FUNDS FOR THE STATE HAVING BEEN DECLARED BY THE GOVERNOR PURSUANT TO SECTION 41-4-90 OF THE CODE OF ALABAMA 1975), THE CONTRACTOR SHALL HAVE THE OPTION, IN ADDITION TO THE OTHER REMEDIES OF THE CONTRACT, OF RENEGOTIATING THE CONTRACT (EXTENDING OR CHANGING PAYMENT TERMS OR AMOUNTS) OR TERMINATING THE CONTRACT.

BLANK LINES:
TO EVALUATE THE BID IN AN EFFICIENT MANNER, THE VENDOR SHOULD FILL-IN ALL BLANK LINES APPLICABLE TO A SPECIFIC COMMODITY DESCRIPTION.

REQUESTED INFORMATION:
ANY ADDITIONAL INFORMATION REQUESTED FROM A VENDOR MUST BE FURNISHED WITHIN TEN (10) DAYS FROM RECEIPT OF REQUEST.

PRICE SHEET

VENDOR NAME :

VENDOR NUMBER: -

INVITATION TO BID

ITB NO. : 10-X-2207486

OPEN DATE : 08/21/09 TIME: 10:00 AM

T-NUMBER : TA965

RETURN DATE: 08/20/09 TIME: 5:00 PM

LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT
	UNLESS SPECIFIED OTHERWISE BELOW: SHIP TO: 062000 / 062M01 ALABAMA MEDICAID AGENCY MEDICAID AGENCY ROOM 1012 501 DEXTER AVE MONTGOMERY AL 36104				
00001	COMMODITY CODE: 961-75-078481 TRANSLATION SERVICES AS FOLLOWS: QUICK INTERPRETER CONNECT TIME. AVERAGE TIME TO CONNECT TO AN INTERPRETER MAY NOT EXCEED 30 SECONDS. INTERPRETER SERVICES AVAILABLE 7AM UNTIL 6PM MONDAY THROUGH FRIDAY CENTRAL STANDARD TIME YEAR ROUND. BILLING SHALL NOT BEGIN UNTIL THE INTERPRETER BEGINS SPEAKING ON THE LINE. CONTRACTOR SHALL BILL CALLS ON A PER MINUTE BASIS. EVERY EMPLOYEE AND INTERPRETER MUST SIGN AND ABIDE BY A CONTRACTOR CONFIDENTIALITY AGREEMENT IN COMPLIANCE WITH FEDERAL REGULATIONS INCLUDING HIPAA LAW. MANAGEMENT REPORTS SHALL BE PROVIDED IN ORDER TO TRACK AND ACCOUNT FOR EACH CALL. CONTRACTOR SHALL INSURE THAT EACH INTERPRETER IS QUALIFIED THROUGH A STANDARD OF SCREENING, EVALUATION, INITIAL AND ONGOING TRAINING AND CONTINUING EDUCATION. TRAINING SHALL INCLUDE AT A MINIMUM: CONFIDENTIALITY, COMPANY PROCEDURES, CLIENT IDENTIFICATION, CONSECUTIVE INTERPRETING, FIRST PERSON INTERPRETING, ACCURACY AND COMPLETENESS, SPEED AND TIMELINES OF INTERPRETATION, FAMILIARITY OF MEDICAID TERMS, INCLUDING ELIGIBILITY, APPROPRIATE USE OF ALTERNATIVE WORDING, ACCENT, CULTURAL FAMILIARITY, PHONE ETIQUETTE AND VOICE PRESENTATION. ACCESS TO TOLL FREE CONTRACTOR CUSTOMER SERVICE LINE 8AM TO 5PM CENTRAL STANDARD TIME MONDAY THROUGH FRIDAY TO REPORT PROBLEMS OR ASK FOR SERVICE. INTERPRETERS MUST BE CERTIFIED AND MEET THE REQUIREMENTS OF A RECOGNIZED SOURCE SUCH AS LANGUAGE ORGANIZATIONS OR INTERPRETING ASSOCIATIONS AND HAVE PRIOR EXPERIENCE INTERPRETING. CONTRACTOR MUST HAVE ADEQUATE DISASTER	1	LT	_____	_____

PAGE TOTAL _____

LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT
	RECOVERY PROCEDURES IN PLACE IN CASE OF POWER OUTAGE, ETC.				
	CONTRACTOR SHALL ENGAGE IN MONITORING OF INTERPRETER CALLS FOR ACCURACY OF INTERPRETATION, TIMELINESS OF INTERPRETATION, CULTURAL FAMILIARITY, PHONE ETIQUETTE, AND OTHER QUALITY CONTROL PURPOSES.				
	INTERPRETERS MUST HAVE SOME KNOWLEDGE OF MEDICAID ELIGIBILITY TERMS, INCOME TERMINOLOGY, DISABILITY TERMS AND HEALTH CARE AND INSURANCE TERMS.				
	BILLING INVOICES SHOULD INCLUDE THE FOLLOWING INFORMATION AT A MINIMUM: USER REFERENCE, CUSTOMER ID AND PIN, DATE OF THE CALL, TIME OF THE CALL, LANGUAGE USED, USAGE (MIN/SEC), AND RATE FOR EACH CALL AND TOTAL OF EACH CALL AS WELL AS A COVER BILLING WITH THE BILLING PERIOD TO BE INCLUSIVE OF THE TOTAL CHARGES FOR THE PERIOD.				
	CONTRACTOR SHALL PROVIDE TRAINING TO SELECT MEDICAID STAFF AT OUR CENTRAL OFFICE LOCATION AT 501 DEXTER AVENUE, MONTGOMERY, ALABAMA OR VIA VIDEO CONFERENCING REGARDING THE PROCESS OF USING OVER THE PHONE VOICE LANGUAGE INTERPRETATION. ADDITIONALLY, WRITTEN STEP BY STEP INSTRUCTIONS SHALL BE PROVIDED TO ALABAMA MEDICAID AGENCY.				
	CONTRACTOR MAY NOT BILL INCIDENTAL FEES, SURCHARGES OR ANY OTHER CHARGES OTHER THAN WHAT IS SPECIFICALLY IDENTIFIED IN THE ITB.				
	CONTRACTOR MUST HAVE CAPACITY TO MAKE RESERVATIONS FOR INTERPRETER SERVICES WHEN NECESSARY FOR CLIENT PURPOSES.				
	CONTRACTOR WILL PROVIDE SERVICES TO ALL PERSONS REGARDLESS OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, OR MENTAL AND/OR PHYSICAL DISABILITY.				
	CONTRACTOR WILL PROVIDE PIN NUMBERS TO A MINIMUM OF 50 MEDICAID STAFFING UNITS UP TO A MAXIMUM OF 65.				
	INTERPRETER SHALL HAVE INTERPRETERS TO INTERPRET AT A MINIMUM BUT NOT LIMITED TO THE 30 MOST COMMONLY REQUESTED LANGUAGES IN THIS REGION AND BE FAMILIAR WITH VARIOUS DIALECTS OF SPANISH. MOST COMMONLY REQUESTED LANGUAGES: ALBANIAN AMHARIC ARABIC				

PAGE TOTAL _____

LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT

ARMENIAN
CAMBODIAN
CANTONESE
FRENCH
GERMAN
GREEK
GUATEMALAN
HAITIAN CREOLE
HEBREW
HINDI
HMONG
IRANIAN FARSI
ITALIAN
JAPANESE
KOREAN
LAO
MANDARIN
POLISH
PORTUGUESE
PUNJABI
ROMANIAN
RUSSIAN
SERBO-CROATION
SOMALI
SPANISH
TAIWAINESE
THAI
VIETNAMESE

ALABAMA MEDICAID AGENCY (AMA) RESPONSIBILITIES INCLUDE:

AMA WILL PROVIDED ORIENTATION INFORMATION FOR PURPOSES OF CONTRACTOR COPYING AND DISTRIBUTING TO INTERPRETERS. ORIENTATION INFORMATION WILL INCLUDE GLOSSARY OF TERMS, COVERED SERVICES INFORMATION, BASIC ELIGIBILITY INFORMATION AND INFORMATION ON OUR PATIENT FIRST PROGRAM.

AMA WILL SET UP AN ACCOUNT WITH CONTRACTORS FOR BILLING PURPOSES.

AVERAGE CALL VOLUME IS EXPECTED TO BE BETWEEN 650-700 CALLS PER MONTH.

ON AVERAGE, SPANISH CONSTITUTES THE MAJORITY OF OUR TRANSLATION NEEDS.

AMA WILL NOTIFY CONTRACTOR OF OTHER EMERGING AND SIGNIFICANT LANGUAGES.

CONTACT PERSON:
SHARON PARKER
DIRECTOR
FAMILY CERTIFICATION DIVISION
334-242-1714

LOIS BREWER
TELECOMMUNICATIONS COORDINATOR

PAGE TOTAL _____

PRICE SHEET

VENDOR NAME :

VENDOR NUMBER: -
ITB NO. : 10-X-2207486
OPEN DATE : 08/21/09 TIME: 10:00 AM
T-NUMBER : TA965
RETURN DATE: 08/20/09 TIME: 5:00 PM

INVITATION TO BID

LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT

INFORMATION SYSTEMS DIVISION
334-242-5903

PERIOD COVERED: 10/01/2009 - 09/30/2010

TO BE BILLED MONTHLY IN ARREARS

EACH BIDDER MUST PROVIDE PRICING BELOW:

$ _____ /MINUTE - SPANISH SERVICE

$ _____ /MINUTE - ALL OTHER LANGUAGES

AWARD WILL BE MADE TO LOWEST SUM OF PRICE/MINUTE(SPANISH) AND PRICE/MINUTE (ALL OTHER LANGUAGES). BIDDER DOES NOT HAVE TO PROVIDE UNIT PRICE FOR THIS BID.

INTERPRETATION SERVICE WILL BE ROUNDED UP TO THE NEXT MINUTE FOR INVOICING AMA. (FOR EXAMPLE, 2 MINUTE 12 SECOND CALL WOULD BE BILLED AS 3 MINUTE CALL AND ANY CALL WITH 0 SECONDS WOULD NOT BE ROUNDED UP.)

PRICE PER MINUTE MUST BE PROVIDED ABOVE TO BE CONSIDERED FOR AWARD.

..... R E M E M B E R .....
READ ENTIRE BID CAREFULLY. FOLLOW BID INSTRUCTIONS ON PAGE 2 AND BE SURE THAT YOU RETURN ORIGINAL BID AND ONE COMPLETE EXACT COPY OF ORIGINAL BID.

NOTE: BIDDER MUST HAVE SUCCESSFULLY PROVIDED TRANSLATION SERVICE UNDER CONTRACTS WITH SIMILAR SIZE, SCOPE AND SPECIFICATIONS. AMA MAY REQUIRE THREE REFERENCES FROM CONTRACTOR BEFORE AWARD IS MADE.

PAGE TOTAL _____

BID TOTAL _____