

### MASTER AGREEMENT CONTRACT AMENDMENT

Date: 6/18/2024

Advantage Master Agreement Contract #: MA 18P 2009010000000000024

Contracted Service: ASL Interpreting Services

This Contract Amendment is between the following State of Maine Department and Provider:

STATE OF MAINE			
Department of Administrative and Financial Services, Division of Procurement Services			
Address: 111 Sewall Street, 9 State House Station, 4th Floor Burton Cross Office Building			
City: Augusta	State: ME	Zip Code: 04333-0009	

	VENDOR	
Vendor Name: Bangor Chinese School		
Address: 53 Cumberland St.		
City: Bangor State: ME Zip Code: 04401		
Vendor Customer #: VC0000186138		

Each signatory below represents that the person has the requisite authority to enter into this Contract. The parties sign and cause this Contract Amendment to be executed.

# **Department Representative:**

**Vendor Representative:** 

DocuSigned by:

Docusigned by:

David Morris

David Morris, Acting Chief Procurement Officer

Jing Zhang, President Date 6/18/2024

Date 6/18/2024

Upon final approval by the Division of Procurement Services, a case details page will be made part of this contract.

Contract Amendment Template - REV April 2023

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# AMENDMENT

		Original Start Date: 10/1/2020	Amendment Start Date: 7/1/2024	
	Amended Period	Current End Date: 6/30/2024	New End Date: 12/31/2025	
		Reason: Utilize an available extension	offered through RFP 201905086	
	Extension Contract Pricing	Extend with rate increases. New contract rates and contract information on Pages 3 – 9. New contract rates take effect on July 1, 2024.		
	Amended Scope of Work	The Scope of Work in Rider A is amended as follows:		
$\boxtimes$	Spend	Dollar value the vendor has recorded that State of Maine has spent on commodities and/or services covered by this contract over the last twelve months: \$		

All other terms and conditions of the original contract and subsequent contract amendments remain in full force and effect.

PROVIDER CONTACT: The following person is designated as the <u>Contact Person</u> on behalf of the Provider for the Contract. All contractual correspondence from the Department shall be submitted to:

Name: Jing Zhang

Email: jingzhang@bangorchinese.com

Address: 53 Cumberland Street

City: Bangor State: ME Zip Code: 04401

Telephone: 207-990-0710; Cell: 207-992-8880

#### **SCOPE OF WORK**

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# I. <u>ACRONYMS/DEFINITIONS:</u>

The following terms and acronyms shall have the meaning indicated below as referenced in this Contract:

COMMONLY KNOWN ACRONYMS			
AND DEPARTMENT ABBREVIATIONS			
Contract Formal and legal binding agreement			
MA	Master Agreement – A contractual agreement which will govern the relationship between the State of Maine and the Provider		
Department	Department of Administrative and Financial Services, Division of Procurement Services		
State	State of Maine		
Provider	Provider Provider that is a party to a State of Maine Master Agreement		
ASL	American Sign Language - A language in which the hands, arms, head, facial expressions and body language are used to speak without sound		
VRI	Video Remote Interpreting - Off site interpreting services provided through videoconferencing technology, equipment and a high-speed internet connection with sufficient bandwidth, includes American Sign Language interpreting services		
HIPPA Health Insurance Portability and Accountability Act			
DO	Delivery Order - An order created to procure specific assignments from an established Master Agreement		
PQVL	Pre-Qualified Vendor List		

BAA	Business Associate Agreement		
RID	Registry of Interpreters of the Deaf		
QAP	Quality Assurance Plan		
Quarterly	Every three (3) months		

### II. INTRODUCTION/OVERVIEW:

The purpose of this Contract is for the provision of American Sign Language (ASL) services to all branches and agencies of State of Maine government. Services provided will be on an "as needed" basis, 24/7/365 days a year and could take place anywhere that the State conducts its business.

The contract is entered into by the Department and the Provider pursuant to RFP #201905086. The RFP and the Providers proposal are incorporated into this contract by reference. The following sections are adapted from the RFP and the Provider's proposal and are provided below for clarification and ease of reference.

The State of Maine is committed to providing purchasing opportunities for political subdivisions, municipalities, and school districts. We encourage our contractors to make their services available to these entities through separate contracts but under the same terms offered to the State. Provider may be asked to provide services to these entities.

### III. DELIVERABLES:

**Interpreting Guidelines and Confidentiality:** Provider shall comply with all Federal and State statutes, regulations and rules governing the protection of identifiable consumer's information including, but not limited to, the Health Insurance Portability and Accountability Act of 1966 (HIPAA), its updates, rules and regulations promulgated thereunder.

Provider's translators shall execute and comply with a confidentiality agreement and adhere to industry best practices.

To the extent the Provider is considered a Business Associate under HIPAA, the Provider shall execute and comply with the terms of the State branches and/or agencies Business Associate Agreement, which shall be incorporated into this contract. Failure to comply with the terms of the Business Associate Agreement shall constitute a basis for a breach of contract.

To the extent that the services carried out under this contract involve the use, disclosure, access to, acquisition or maintenance of information that actually or reasonably could identify an individual or consumer receiving benefits or services from or through State branch and/or agencies ("Protected Information"), the Provider must:

i. maintain the confidentiality and security of such Protected Information as required by

- applicable state and federal laws, rules, regulations and State branches and/or agencies policy,
- ii. contact the State branch and/or agency within 24 hours of a privacy or security incident that actually or potentially could be a breach of Protected Information
- iii. cooperate with the State branch and/or agency in its investigation and any required reporting and notification of individuals regarding such incident involving Protected Information.
- iv. To the extent that a breach of Protected Information is caused by the Provider or one of its subcontractors or agents, the Provider agrees to pay the cost of notification as well as any financial costs and/or penalties incurred by the State branches and/or agencies as a result of such breach.

### **ASL Interpreting Services Requirements**

The Provider shall perform all services and maintain all standards and requirements for services provided under this Contract in accordance with requirements below:

- 1. Licensure and Certification: All interpreting services provided under this contract must be provided by interpreters who are Licensed with the Maine Department of Professional and Financial Regulation in the Office of Licensing and Registration.
  - a. Qualified interpreters will be assigned by the provider. Qualified interpreters are identified as those knowledgeable with topical information, familiar with the needs of the clients as well as if state "preferred by the client".
  - b. Keep records for all interpreters to verify upon request the current status of any interpreter provided for State assignments.
- Customer Service/Quality Assurance Plan: Ensure customer service issues are addressed in a consistent and expeditious manner, including problem escalation and resolution of service issues.

Highlights of Providers Quality Assurance Systems:

The Provider will follow up frequently via email/phone communication with the requestor and the consumers, both hearing and Deaf. If concerns or complaints arise the Provider will seek to resolve each situation immediately. If the situation warrants filing a complaint, information and resources on how to proceed will be given to the parties concerned.

The Provider will conduct annual surveys as a vehicle for client feedback and implementing improvements to services.

- 3. Billing and Invoicing: Provider maintains an accurate and secure database on each interpreting assignments.
  - a. Have precise electronic billing methods and capabilities, including internal controls to ensure accurate billing of both travel and interpreting time, along with the type of assignment (legal, standard, emergency, etc.).
  - b. Have adequate billing reporting capabilities to comply with any requests by the State

- for data regarding services provided, in a timely manner. This type of reporting could be by a specific using agency or by all user types.
- c. Submit monthly invoices for services by providing separate invoicing to Departments or other Maine public entities using it. Invoice shall show; Date of appointment, requesting agency, Name of interpreter(s), location of appointment, duration of each appointment, and total time to be billed.

# 4. ASL Services Usage Types:

- a. Interpretation of a legal nature, for example, in an administrative hearing, attorney-client meeting, court room, or trial setting;
- b. Interpretation of private, therapeutic/medical sessions, (i.e., to assess health status, provide health information, assure medication compliance, coordinate health care);
- c. Interpretation involving vocational rehabilitation;
- d. Interpretation during protective services investigations;
- e. Interpretation at public meetings with large audiences;
- f. Interpretation of a business nature;
- g. Interpretation of Human Resources & Employee meetings;
- h. Interpretation of Education & Training;
- i. Interpretation for meetings involving State employees who use ASL

# 5. ASL Staffing Requirements:

- a. Possess the professional skills and knowledge required for the specific interpreting situation.
- b. Conduct themselves in a manner appropriate to the specific interpreting situation.
- c. Adhere to standards of confidential communication.
- d. Maintain ethical business practices.
- e. Remain neutral in the conversation unless prompted by the customer with additional instructions.
- f. For <u>court setting</u>, all interpreters (staff or contract) working in court setting will adhere to the Standards of Professional Conduct for Interpreters Providing Services in Judicial Proceedings, listed at <a href="https://www.courts.maine.gov/maine\_courts/admin/interpreters/interpreters\_policy.html">https://www.courts.maine.gov/maine\_courts/admin/interpreters/interpreters\_policy.html</a>

For all interpreters hired or contract, the Provider shall:

- Keep records for all interpreters to verify upon request the current status of any interpreter provided for State assignments.
- Have adequate means for Interpreter Request & Confirmation of Assignments.
- Location and Performance: Provider is able to provide services throughout the State of
  Maine and ensures all interpreter assignments are the most cost-effective taking into
  consideration mileage and travel reimbursement.
- 7. Travel Reimbursement: Travel Reimbursement will be allowed at the same hourly rate as the "type of interpreting" category being requested. For example, an interpreter providing "Legal" interpreter services during core hours on a weekday would bill the

"Legal" rate for both the services performed and actual travel time. Provider shall assign qualified interpreters within the closest proximity to the location. In the event that a local interpreter cannot be scheduled, the Provider shall work with the requestors to identify strategies to meet the need in the most cost-effective manner. All requestors shall receive prior notification when extensive travel will be required.

- 8. Minimum Guarantee: ASL interpreters will be eligible to receive a minimum payment of two (2) hours for services, even if the assignment's duration is less than two hours.
- 9. Cancellation Policy: Cancellation Policy/No Show: The State recognizes that there is a cost to Providers for arranging to provide a service that is then cancelled by the State with little advanced notice. Although Providers may have different policies regarding cancellations, the State intends to specify the cancellation policy that will be in effect under this contract. When a cancellation is necessary, the State will provide the Provider(s) with varying degrees of notice, depending on the number of service hours scheduled. Table 1 below shows the variation between assignment length and notice given.

**Table 1 - Cancellation Notice and Corresponding Penalties** 

	Cancellation Notice Given				
Assignment Length	Less than 2 business days	2 to 3 business days	4 to 5 business days	6 to 10 business days	More than 10 business days
Less than 3 hours	100% of scheduled service hours	Not billable	Not billable	Not billable	Not billable
3 or more hours in a single day	100% of scheduled service hours	100% of scheduled service hours	Not billable	Not billable	Not billable
2 to 3 days	100% of scheduled service hours	100% of scheduled service hours	100% of scheduled service hours	50% of scheduled service hours	Not billable
4 or more days	100% of scheduled service hours	100% of scheduled service hours	100% of scheduled service hours	100% of scheduled service hours	Not billable

The following considerations are taken into account for cancellations:

- a. Billing for cancelled assignments shall be at the same hourly rate as the service category for the scheduled time period.
- b. Billing shall apply for any *actual* travel time that the interpreter(s) incurred.
- c. Full or partial cancellation of assignments greater than 10 business days will not be reimbursed for more than 10 cancelled business days. (For example, if an interpreter has a six-month assignment, and it is cancelled with less than 10 days' notice, per the chart above, then the State will only be liable to pay for up to 10 days of the six-month assignment, not the full six-months.)

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- d. Special conditions for cancellations may be negotiated, if necessary, at the time of each request by a State agency or any participating entity; otherwise the chart shown above shall apply. Such special conditions must be captured in writing and agreed upon by the State and the Provider. (For example, the Administrative Office of the Courts may negotiate with a Provider at the time of a service request to deviate from the cancellation policy above. Both the Provider and the State must agree in writing, and the State is not bound to procure services through the Provider if a satisfactory arrangement cannot be made.)
- 10. Work Orders: State branches and/or agencies will place individual orders for interpreting services through the issuance of a Delivery Order (DO).
  - a. Provide a work order document to be used for assignment request.
  - b. Establish an individual account for State branches and/or agencies that elect to utilized ASL interpreting services.
  - c. Maintain an e-mail address with a form of acknowledgement of receipt for assignments, inquiries and customer service within one (1) business day of receipt of order.

#### **ASL - PRICING**

		CORE HOURS	NON-CORE HOURS
	Type of Interpreting	Cost for Weekdays,	Cost before 8:00 am and after 5:00 pm EST, weekends, and holidays
		8AM - 5PM	
1	Standard ASL Interpreter Services (Pre-arranged date and time with requesting State agency)	\$70.00/hour	\$95:00/hour
2	Legal ASL Interpreter Services	\$90.00/hour	130:00/hour
3	Limited Language/Deaf Tandem Interpreter Services	\$90:00/hour	\$135:00/hour
4	Short Notice ASL, Interpreter Services (Less than two business days' notice, but no "emergency" or not immediate")	\$90:00/hour	\$\$135:00/hour
5	Emergency ASL Interpreter Services (immediate assistance need)	\$110:00/hour	\$135:00/hour

IV. <u>PERFORMANCE MEASURES:</u> Contract Administrator will reach out periodically to State departments and agencies for feedback as to how this Provider is performing services as outlined in this contract.

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### V. <u>REPORTS</u>

- 1. <u>Required Reports:</u> Provide to the contract administrator a quarterly usage report no later than thirty (30) days after the end of each quarter which includes:
  - a. The State department and/or agency
  - b. Day of week
  - c. Date and Start Time
  - d. Bill Rate
  - e. Site Time
  - f. Travel Time
  - g. Total Time
  - h. Site Amount
  - i. Travel Amount
  - i. Total Amount Billed

Must also have adequate reporting capabilities to comply with any requests by the State for data regarding services provided, in a timely manner.

The Provider shall track and record all data/information necessary to complete the reports listed in the table below:

	Name of Report
1.	ASL Quarterly Report

# 2. Reporting Schedule for Above Listed Required Reports

The Provider shall submit all reports listed in the table below to the Department in accordance with the deadlines established within the table:

	Name of	Period Captured by	Due Date and/or Frequency:
	Report:	Report:	
1.	ASL Quarterly	Each Quarter	No later than thirty (30) days
	Report		after the end of each quarter