

QUESTIONS SUBMITTED IN RESPONSE TO RFP 2018-014 – MEDICAL TRANSLATION SERVICES

1. *We would like to place a proposal to provide language services to NuHealth Systems but would only like to bid to provide written translation and over the phone interpreting. Is it possible to bid strictly for these services?

*Are bidders required to provide all of the required services described in section I of the RFP?

*Are bidders allowed to bid on only select services listed under section I of the required services?

*How many vendors are anticipated to be awarded as a result of this solicitation? How will work be divided if there are to be multiple awardees?

*Is there potential for multiple vendors to be selected for this contract?

*Will your selection committee consider companies that specialize in certain aspects of the request?

*May we bid on only the document translation portion of the offering?

*Do we have to respond to all services, or can we respond to those which we feel best suited to provide?

*Is Nassau Healthcare Corporation (NHCC) planning to award contracts to a single vendor or multiple vendors?

*If a contract is awarded to multiple vendors, how will work be distributed?

*Is this a multiple source award contract?

- A. Our preference is to have one vendor. Bids may be submitted for one or all services.

2. *Is this RFP open to out of state vendors?

*Whether companies from Outside USA can apply for this? (like, from India or Canada)

*This tender is only for USA based Companies or Entities? Our Company is based in India, so are we eligible to fill the tender?

- A. There is no restriction on where a company is incorporated so long as all other conditions of the RFP are met.

3. Whether we need to come over there for meetings?
 - A. Meetings may be conducted via Internet video services such as Skype should they be needed.

4. Can we perform the tasks (related to RFP) outside USA?
 - A. Over the Phone Interpretation, Video Remote Interpretation, and translation of documents may be performed outside of the US. In-person interpretation must be performed in person.

5. Can we submit the proposals via email? - even Outsource
 - A. No. See page 11 of the RFP, under Proposal/Process To Be Followed.

6. How will cost be evaluated for rating offerors? Is this a low-bid award?
 - A. The response will be based on the lowest qualified bidder.

7. Are vendors allowed to provide their own pricing structure for telephonic interpretation, VRI, and document translation?
 - A. Yes.

8. Would NHCC accept alternative pricing, e.g. pricing broken down by language?
 - A. Yes.

9. Is the small business participation goal stated in section IV a requirement?
 - A. Every effort should be made by the vendor to meet those goals.

10. Regarding section II, C.3. on page 12, will a NY Secretary of State's certificate of good standing be sufficient to satisfy this requirement?
 - A. Yes.

11. Our company generates over \$600M per year in annual revenue. It would be nearly impossible for our team to list every project that we have completed in the last 18 months. Would Nassau Health instead consider a list of similar health care projects, hospital contracts, healthcare clients, etc. that our team services?

A. The question requires a reasonable representations of current projects.

12. Minimum Requirements: Provide documentation of previous success in medical/health/social service industry. What kind of documentation would you like us to provide? Could you provide examples?

A. See RFP.

13. Minimum Requirements: Provide documented experience with the culture of the intended audience, and relevant health background. What kind of documentation would you like us to provide? Could you provide examples?

A. See RFP.

14. *Is there an incumbent for these services? If so, would you be able to provide the rates that Nassau Health Care Corporation currently pays?

*Are there incumbent rates for this project?

*Who is the incumbent on this contract?

*What are your current rates for services?

*Is there an incumbent vendor for this bid? If an award was made, please name the incumbent(s).

*If there is an incumbent, at what rates are services being offered?

*Please provide the names of any incumbent vendors.

*Please provide the current incumbent rates.

*Is there an incumbent vendor(s) for these services? If so, what rates do they provide?

A. Please respond to the RFP.

15. *If there is an incumbent for these services, what are some obstacles or issues you have

encountered thus far?

*If this is a current contract, are you having any specific issues with your current provider?

Are there areas you would like to see improvement?

*What has been the biggest challenge for fulfilling services under this contract, or if this is a new contract, are there any challenges that you anticipate?

A. Please respond to the RFP.

16. *When will an award be determined and when are services expected to start?

*What is the anticipated Contract Award Date?

A. The contract is estimated to commence on or about May 2019, subject to the hospital's requirements.

17. What is the anticipated number of written translation projects annually or monthly?

A. On average, 2-3 monthly.

18. What is the anticipated or expected number of words each year requiring translation?

A. 2018 YTD is approximately 31,000.

19. What is the anticipated or expected language mix of translation projects? (I.E. 90% Spanish, 5% Mandarin, 2% Russian, etc.)

A. The majority of documents are translated into both Spanish and Haitian Creole. Expected yearly mix of 55% Spanish, 40% Haitian Creole, 5% other.

20. NHCC has provided information on past visits and admissions broken down by language used; however, can NHCC also provide us with volume estimates for translation services that will be required as part of any contract resulting from this RFP? Approximately how many words of translation will be required (broken down by language)? How many hours of interpreting (broken down by language)?

A. Answered above.

21. Terra Translations is a global language services company specializing in written Spanish and Portuguese translation, however we do not offer interpretation services. Would this disqualify us from participating in the RFP?

A. Written translation must be available in numerous languages.

22. What is the average length of a call for telephonic interpretation?

A. 17 minutes.

23. Can NuHealth Systems confirm that you all use over 69K minutes of telephonic interpretation on a monthly basis?

A. That is the correct average for Jan-Oct 2018. Monthly minutes vary between 60,000 and 80,000 per month over the past rolling 12 months with the past six months (Mar 18 to Oct 18) averaging 74,000.

24. What is the estimated telephonic interpretation volume percentage per language? (i.e. Spanish) 80% of calls, Mandarin 10%; Other 10%, etc.

A. Spanish 93%, Haitian Creole 3.5%, Mandarin 0.5%, 20 others each under 0.3%.

25. Could we obtain a New York business license upon the award?

A. No.

26. Do you have any volume statistics regarding ASL vs. spoken language interpreting for both onsite and VRI?

A. VRI use began in July 2016. VRI has been used solely for American Sign Language (ASL) to this point. That may change in the future.

ASL onsite is provided through a separate, existing contract. Volume statistics are not available for onsite ASL.

ASL VRI for Jan-Oct 2018 has been an average of 177 minutes and five sessions per month. 2017 volume was 224 minutes. 2016, June to December, was 545 minutes. VRI use began in

July 2016. The significantly higher volume that year was due to one patient with extensive need for services at our facilities.

On-site Spanish interpreting is provided by in-house Medical Interpreters. No other on-site for Spanish or other languages has been used in the past three years.

27. Was there a previous RFP for these services? If so, can we see that previous RFP document?

A. Previous RFP was 2015-034. RFPs are kept on our website for three years, after which a FOIL request must be made. However, the verbiage of the two RFPs are identical except for the yearly usage and demographic numbers.

28. *Can NHCC provide us with historical usage data for the translation and interpreting services requested as part of this RFP?

*What is the expected volume of this contract (broken down by service)?

*Is there any historical data for Medical Translation and Interpretation Services?

A. Over-the-Phone Interpretation

2015 – 54,700 minutes / 3,800 calls

2016 – 63,089 / 4,000

2017 – 60,919 / 3,800

2018 (Jan-Oct) – 69,238 / 4,100

Language breakdown has remained steady over the years at approximately Spanish 93%, Haitian Creole 3.5%, Mandarin 0.5%, 20 others each under 0.3%.

Video Remote Interpreting

VRI use began in July 2016. VRI has been used solely for American Sign Language (ASL) to this point. That may change in the future.

ASL VRI for Jan-Oct 2018 has been an average of 177 minutes and five sessions per month. 2017 volume was 224 minutes. 2016, June to December, was 545 minutes. The significantly higher volume that year was due to one patient with extensive need for services at our facilities.

Document Translation

Year to date 2018, approximately 31,000 words have been translated. An average of 2-3 translations are needed per month. Many translations are done in both Spanish and Haitian Creole. Language breakdown is approximately 60% Spanish, 40% Haitian Creole. One 3,000 word translation from Russian to English was conducted.

29. Interpret for the physician/clinical staff/patient/family during history and physical exams, medical procedures, or other instructions such as use of medications or their side effects, etc.; be available during the patient encounter as needed. Does NHCC handle this currently with telephonic, video, or on-site translation? Please define “as needed” relative to on-site interpretation.
 - A. On-site interpretation is provided in Spanish by in-house interpreters. Request for on-site for other languages is extremely rare – averaging once per year the past three years.